

<b>TRUST BOARD IN PUBLIC</b>	<b>Date: 28 March 2013</b> <b>Agenda Item: 6.2.2</b>
REPORT TITLE:	<b>Investment &amp; Workforce Committee Chair Update</b>
NON EXECUTIVE SPONSOR:	<b>Richard Durban (Non Executive Director and IWC Chair)</b>
REPORT AUTHOR:	<b>Paul Simpson (Chief Financial Officer)</b>
REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date)	No – Board update
<b>Purpose of the Report and Action Required:</b>	
<b>Approval</b> <b>Discussion</b> <b>Information/Assurance</b> <input checked="" type="checkbox"/>	
<b>Summary: (Key Issues)</b>	
<p>The Investment and Workforce Committee has met on two occasions since the last Board meeting. The minute of the 6th February meeting forms part of the Board papers. This report also covers significant points from the 6th March meeting.</p> <p><b>IT</b></p> <ul style="list-style-type: none"> <li>Received and approved the full business case for the implementation of an Electronic Prescribing and Medicines Administration (EPMA) system and the outline business case for the future of the Electronic Patient Record (EPR) system.</li> <li>Received and commented on the 12/13 Capital Programme.</li> </ul> <p><b>Capital and Estates</b></p> <ul style="list-style-type: none"> <li>The Committee reviewed two post implementation reviews (PIRs) - the Endoscopy Refurbishment/Extension project 2011 and the 2012 Main Entrance Project.</li> </ul> <p><b>Workforce</b></p> <ul style="list-style-type: none"> <li>The Committee is now receiving Divisional as well as Trust level workforce KPIs which provide greater visibility and understanding.</li> </ul>	
<b>Relationship to Trust Corporate Objectives &amp; Assurance Framework:</b>	
<p>This Board sub-committee supports the achievement of all Trust objectives but of specific relevance is: Priority 3: Develop an effective organisation.</p>	

<b>Corporate Impact Assessment:</b>	
<b>Legal and regulatory implications</b>	<p>The IWC reviews assurance in respect of workforce, capital and investment projects, business planning (which includes financial planning) and cash aspects.</p> <p><u>Employment law</u>: laws governing the rights of individuals and terms and conditions terms include: National Minimum Wage Act 1998; the Working Time Regulations 1998; Employment Rights Act 1996; Equality Act 2010; Employment Rights Act 1996, and; the Transfer of Undertakings (Protection of Employment) Regulations 2006.</p> <p>Other key laws affecting employees include the Pensions Act 2004 and the Trade Union and Labour Relations (Consolidation) Act 1992.</p> <p><u>Financial performance</u> is subject to Schedule 5 of the NHS Act 2006 which provides the “breakeven duty”.</p> <p>Legal aspects related to capital works will depend on the nature of the works.</p> <p>The main regulators, are as follows:</p> <ul style="list-style-type: none"> <li>• External audit (the Audit Commission for this Trust) give an opinion on the Trust’s compliance with International Financial Reporting Standards and with NHS accounting conventions – this is not purely financial and deals with procurement, fraud, transparency and legal duties. It also gives a Value for Money Conclusion on the Trust’s ability to put in place arrangements to deliver economy, efficiency and effectiveness in its use of resources.</li> <li>• The Care Quality Commission registers the Trust according to its compliance with regulations concerning the safety and quality of services</li> </ul>
<b>Financial implications</b>	The report provides assurance about savings, capital spend and the structure of the business planning process.
<b>Patient Experience/ Engagement</b>	Indirect impact through Trust planning and workforce.
<b>Risk &amp; Performance Management</b>	The committee, and this report, provides assurance about workforce and capital management.
<b>NHS Constitution/ Equality &amp; Diversity/ Communication</b>	No relevant aspects
<b>Attachments: paper</b>	

## Investment & Workforce Committee Chair Update

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<b>Date</b>	28 March 2013 (I&WC was on 6 Feb & 6 Mar 2013)
<b>Author</b>	Paul Simpson (CFO)
<b>Audience</b>	Trust Board Members

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The **key points from the last 2 I&WC meetings** are as follows:

The Investment and Workforce Committee has met on two occasions since the last Board meeting. The minute of the 6th February meeting forms part of the Board papers. This report also covers significant points from the 6th March meeting.

### IT

The Committee received the full business case for the implementation of an Electronic Prescribing and Medicines Administration (EPMA) system. Assurance over resilience in the system and adequacy of clinical engagement were sought and obtained. The robustness of the revenue and savings benefits were challenged, in particular the degree to which savings in time could be translated into cash savings. It was recognised that in general these new efficiencies would provide clinicians with additional time which would enhance care. The business case was approved subject to a review of benefits at an appropriate point during implementation.

The Committee was presented with an outline business case regarding the future of the Electronic Patient Record (EPR) system. The current contract ends in October 2015 and the paper described various procurement options.

The Committee approved the development of a full business case.

The Committee welcomed the current development of an IT strategy which would be presented to a forthcoming meeting. This would allow full discussion of such topics as realising efficiency benefits and fit with the Trust's Clinical strategy.

### Capital and Estates

The Committee reviewed two post implementation reviews (PIRs). The Endoscopy Refurbishment/Extension project took place between September 2009 and December 2011 and revealed serious weaknesses in project management, budgeting and accountability. The lessons have to a large degree been learned, in part via an Internal Audit report presented in 2010 to AAC (which went through this in some detail), and embedded in capital project management.

The Main Entrance development took place between March and November 2012. The objectives of the build have been achieved - a new main entrance which helps direct patient flows, a properly staffed reception desk, and two new retail spaces - WH Smith including a Costa and Boots which includes a pharmacy. Feedback from patients and staff has been very positive. However unforeseen enabling work resulted in a 27% overspend (final total £2.33m) and a 29% overrun (31 v 24 weeks).

The major lesson learned was to allow sufficient time in the early planning with full involvement of all operational areas within the Trust. The Committee asked for further information on the actual v estimated revenue from the retail concessions and whether patient satisfaction and Pharmacy efficiency could be quantified.

The 13/14 Capital Programme was presented to the Committee. The paper described the process by which projects were selected, the rationale for them and further projects to be undertaken if funding allowed. The major theme was maintenance, refurbishment and replacement with significant spend on Theatres, CT Scanner, Picture Archiving System (PACS) and Radiology Information System (RIS), Medical Record Storage and Site Power requirements. A number of projects addressed risks on the Serious Risk Register (SSR). The Committee recognised the logic of the projects selected but challenged whether issues raised by patient feedback, notably the fabric of older wards and the quality of food, were sufficiently represented. The practical difficulties involved in a ward refurbishment programme were noted but it was agreed that further consideration would be given to these points. The Committee welcomed the current work on both the Estates Strategy and a 3 - 5 year Capital Programme which would help position when these issues will be addressed.

## **Workforce**

The Committee is now receiving Divisional as well as Trust level workforce KPIs which provide greater visibility and understanding. The continued efforts to improve upon Nurse recruitment and retention were recognised although it is not expected to reduce the use of agency staff to the targeted level until August.

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