



Finance & Investment Committee (F&IC) Meeting Minutes

Venue: Boardroom, Springhill 2, WF2 0XQ

Date: Thursday 6 February 2014

Time: 1400-1700

Attendees:

Name	(Initials)	Title
Elaine Bond	(EB)	Non-Executive Director (Chairman)
Pat Drake	(PD)	Non-Executive Director
Rod Barnes	(RB)	Executive Director of Finance & Performance
Dave Whiting	(DW)	Chief Executive
Anna Rispin	(AR)	Associate Director of Finance
Russell Hobbs	(RH)	Executive Director of Operations
Mary Wareing	(MW)	Non-Executive Director
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In attendance:

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Barrie Senior	(BS)	Non-Executive Director (Observer)
John Nutton	(JN)	Non-Executive Director (Designate) (Observer)
Ian Brandwood	(IB)	Executive Director of People & Engagement
Steve Page	(SP)	Executive Director of Standards & Compliance (Item 10)
Mark Phillips	(MP)	Financial Performance Manager (Item 10.2)

Mark Phillips (MP) Financial Performance Manager (Ite Joanne Halliwell (JH) Associate Director, PTS (Item 10.2)

Apologies:

Catherine Balazs (CB) Head of Business Development

Minutes produced by:

Mel Gatecliff (MG) Board Support Officer

The meeting commenced at 1400 hours.

		Action
1.0	Introduction & Apologies EB welcomed everyone to the meeting and apologies were noted as above.	
	It was assumed that papers had been read as this would allow more time to be spent debating the issues around those papers.	
	EB stated that she had concerns about the standard of some of the meeting's papers. There were several missing appendices and also issues about the lack of detail on front covers relating to previous discussions. This issue had also been discussed at that morning's Quality Committee meeting.	

		Action
	RB stated that all of the agenda items were discussed in a variety of forums around the organisation prior to coming to F&IC. However, the information would not necessarily have been in the format of the	
	reports which came to F&IC for assurance, as the information contained therein would come from a number of different sources.	
	He asked what improvements to the process would assist the NEDs.	
	BS stated his belief that a short summary on the front of each report which contained details of every time a topic had been reviewed, whether in a formal meeting or during an informal discussion would be useful as it would give the NEDs a feel of the level of challenge or scrutiny each topic had received prior to coming to F&IC.	
	AR agreed that a short narrative, containing information about which items had been considered and where would make sense.	
	It was agreed that RB should liaise with AA to discuss the re-design of the report template front sheet to allow the inclusion of more detailed information about previous scrutiny. This would help to provide a level of assurance prior to reports being discussed at Committee level.	
	Action: RB to liaise with AA re revision of front cover of report template to allow further information about previous scrutiny of items.	RB
	EB confirmed that SP would be joining the meeting for the NHS 111 update and MP and JH would be joining for the PTS update.	
	EB reported that PD and she were due to attend a national conference for the Chairs of Quality and F&I committees for other ambulance services and she would feedback after the event.	
2.0	Declarations of Members Interests	
	There were no interests to be declared in relation to the agenda items.	
	Minutes of the Last Meetings The minutes of: the Finance & Investment Committee meeting held on 12 November 2013; the joint meeting with the Quality Committee held on 12 November 2013; and the Extraordinary Finance & Investment Committee meeting held on 22 January 2014 were approved as a true and accurate record of the meetings subject to the following amendments.	
3.0	F&IC Meeting, 12 November 2013 Page 9, paragraph 5 – full stop to be added after 'management tier'.	
	Page 11 – 'Powell' to be replaced with 'Power'.	
3.1	Joint Meeting with Quality Committee, 12 November 2013 There were no matters arising.	

3.2 Extraordinary F&IC Meeting, 22 January 2014 Page 6, 3.3, paragraph 5 – reworded to state: 'MW stated that, given that the approach had changed from that originally proposed, did YAS still anticipate second hand vehicles.' Page 6, 3.3, last paragraph – amended to 'JN stated that the discounted analysis should have been applied to both options.'

4.0 Action Log & Matters Arising

The Action Log was reviewed and updated.

2013/88 - CIP Review

PIDs had been considered during the joint meeting of F&I and Quality Committees that day. Action closed.

2013/92 - Five Year CIP Review

AR confirmed that further progress was being made. It was agreed that the five-year plan should be brought back to the April meeting when the Trust had agreed its budgets, re-ordering of CIPs, etc. Action remains open.

2013/98 – Review of Changes to LTFM/Downside Risk

Estimated closure date extended to April 2014.

2013/104 - Commercial Strategy

RB confirmed that work remained on-going. For example TEG was trying to align the Commercial Strategy to some of the Urgent Care developments. YAS' new Commercial Director, who would further develop the Commercial Strategy, was due to commence at the beginning of March. Estimated closure date extended to April 2014.

2013/107 - Major Business Case Update - ECS

RB confirmed that the business case was still with the Commissioners who had given the first, real positive sign that they might be prepared to fund it. Final confirmation should be received shortly. Estimated closure date extended to April 2014.

2013/111 - Workplan

Item on meeting agenda. Action closed.

2013/112 – Service Transformation Update – Patient Transport Service (including restructure)

Item on meeting agenda. Action closed.

2013/113 - Contracts Update

Item included on agenda. Action closed.

2013/114 - Contracts Update

Item included on agenda. Action closed.

2013/117 – Procurement Forward Plan Update of Contracts for Review by F&IC – A&E Defibrillators

JN confirmed that his queries had been dealt with. Action closed.

2013/118 - Procurement Forward Plan Update of Contracts for Review by F&IC - A&E Defibrillators

Forward plan amended and circulated to Board. Action closed.

2013/119 - Procurement Forward Plan Update of Contracts for Review by F&IC - Supply of Liquid Fuel

Information provided. Action closed.

2013/120 - Procurement Forward Plan Update of Contracts for Review by F&IC - A&E Sub Contractor Extension

DS had undertaken negotiations as requested. Three suppliers had agreed and three had refused. Action closed.

2013/125 – Procurement Forward Plan Update of Contracts for Review by F&IC – Microgeneration Technologies

Suggestions had been incorporated. Action closed.

2013/128 - Mid-Year Financial Review

RB had carried out the work and identified some expenditure which could be deferred. Action closed.

2013/129 - Mid-Year Financial Review

Information had been shared. Action closed.

2013/130 - Mid-Year Financial Review

As the NEDs were no longer involved in the sickness turnaround group, JN had been supplied with information outside the meeting. Action closed.

2013/132 – Financial Risks (including Budget Variances Action Plans)

RB confirmed there had been a debate around what constituted a financial risk and what would be an operational risk with a financial consequence. It had been agreed that the latter type of risk would sit on the operational risk register. Action closed.

2013/133 – Financial Risks (including Budget Variances Action Plans)

Item included on agenda. Action closed.

2013/135 – Mid-Year Review – New Commissioning Arrangements RB confirmed the issue had been raised at TEG and work was under way with Hester Rowell in relation to potential overlaps. Action closed.

2013/136 – Mid-Year Review – New Commissioning Arrangements Paper and appendices had been shared. Action closed.

		Action
	2013/137 – Mid-Year Review – New Commissioning Arrangements Item included on agenda. Action closed.	
	2013/138 – Clinical Leadership	
	Item included on agenda. Action remains open for update at April meeting.	
	2013/139 – Sickness Management Item included on agenda. Action closed.	
5.0	Feedback from Board Meetings PD presented the feedback, as EB had not attended the last Board meeting.	
	PD confirmed that there had been no issues in relation to the contracts, which had all gone through as expected. There had been useful presentations about the budget setting process and the TDA planning guidance and a progress update on the expenditure of Winter monies.	
	DW confirmed that a Winter funding expenditure plan was in place and the money was being spent. Although it had not yet been received, the Trust had been assured that it would definitely receive the funding. DW would provide a further update in his weekly email to the NEDs.	
6.0	Review of Workplan EB stated that nothing of note had changed in the Workplan since the last meeting although consideration of the Vodaphone contract had been moved to the April meeting.	
	EB would be meeting with RB ahead of the April meeting to look at requirements for the 2014/15 year. She would then bring the draft 2014/15 Workplan to the April F&IC meeting for agreement.	
	Action: EB to draft 2014/15 Workplan with RB to bring to April F&IC meeting for agreement.	ЕВ
	PD stated her belief that the F&I and Quality Committees needed to build two six-monthly joint meetings into their respective workplans.	
	Action: EB and PD to build two, six-monthly joint Committee meetings into the F&IC and Quality Committee workplans.	EB/PD
	It was agreed that a paper about claims was required at a future meeting. The document would contain information about actions being taken to mitigate claims going forward including YAS' work with its new Occupational Health providers; the 'moving and handling' staff support; and proposals to introduce fitness tests for new staff.	
	EB would discuss with RB the most appropriate time for this paper to be presented at F&IC.	

Action Action: EB/RB to agree most appropriate time for 'Claims' paper to be EB/PD presented to F&IC 7.0 Sickness Management Update IB updated the Committee on the levels of sickness absence across the organisation and the actions being taken to secure improvement. He stated that in all but one month in 2013/14 sickness levels had been lower than in the previous financial year. However, change overall was negligible when considered over a number of years. The meeting considered performance in each of the Directorates. Standards & Compliance had struggled due to the impact of the 111 service with the hoped for improvement not yet having been delivered. DW suggested that it might be useful to split out workforce information by Directorate into separate headings including workbook compliance, PDRs, sickness absence, take up of 'flu' jabs, etc. IB replied that he was working to improve how workforce information was currently presented. He had shared some ideas with the Chairman and the report presented at the April F&IC meeting should be in a different format. JN stated his belief that sickness seemed to be high across all Directorates. PD stated that long term sickness had the highest impact on the Trust, adding that YAS was currently at the top end of all ambulance trusts. IB stressed it was worth recognising that not all ambulance services were running a 111 service and sickness levels in YAS' 111 service were running at 11% in the last IPR. A more robust absence management policy had been agreed with Unison and deployed. The new policy differentiated between administration and operational staff, as attendance was expected to be better for the former group of people. IB was optimistic that the new policy would bring about improvements, although it would need to be accompanied by a change in culture. EB noted that the 2013/14 CIP would not be realised and asked whether the Trust could track the reasons for the use of overtime and agency staff across the organisation. AR replied that the Trust could not currently split out the sickness and overtime CIP due to reporting system limitations. However, work was on-going to improve this area. RB stated his belief that the Trust needed to engage closely with

managers in each individual area in relation to backfilling.

IB stated that changes were required to the Trust's reporting systems, as it did not currently possess the necessary sophistication of data reporting to differentiate between the reasons for the use of overtime.

PD agreed, adding it was essential for the Trust to be able to differentiate between the overtime that was covering for vacancies and that which was covering for sickness.

EB suggested that a session on the CIP process would be helpful at a future meeting.

RB confirmed that the national unsocial hours' payments negotiations were not due to conclude until the end of February so it would be early March at the soonest before clarity of their real impact would be seen.

MW stated her belief that the unsocial hours' payments issue was a bit of a red herring. Sickness absence was way too high and had to be reduced in order to save money.

JN stated that YAS was a 'people' business with sickness one of its biggest costs, adding that he would find it useful to go through the current CIPs with IB prior to the new CIPs being agreed.

EB stated that she was not currently assured and believed that the Trust needed to dig deeper into the current CIPs.

AR reiterated her earlier statement about the limitations of the data that could be pulled out of the current GRS and ESR systems.

DW stated that developments currently underway in relation to GRS meant that there would be a lot more opportunities around data and functionality going forward.

He further stated that management of sickness remained a key focus of TEG and YAS' managers and the new policy was a major step forward. However, how this would translate financially was what the Trust was currently struggling to identify. Many items had been identified for the CIP programme and they now needed to be finalised.

RB stated that HR was in a period of transition with IB having inherited a CIP written by someone else. IB would now pick up the lead on the replacement CIP and would have the support to do this.

PD was extremely concerned that a CIP did not currently exist which was measurable in terms of overtime, vacancy control, agency costs, etc to which managers could be held to account.

EB stated that she looked forward to going through the CIPs in more detail when the Programme was finalised for the new year and thanked IB for his contribution.

		Action
	Approval: The Finance & Investment Committee noted the Sickness Management update report.	
8.0	Review of Committee Effectiveness and Terms of Reference RB informed the Committee that Mersey Internal Audit Agency (MIAA) had offered their services to provide a facilitated session to review the Committee's self-evaluation process and to review the Terms of Reference. It was timely to take stock of the current operation of F&IC, its challenges in the future, and how those challenges might be addressed. The session would be provided free of charge by MIAA and they had offered to carry out the FI&C and Quality Committee self- evaluations on the same day.	
	BS stated that the recent Audit Committee session, which Mersey had also run, had been very useful and a good report had been produced.	
	JN stated that he had enjoyed the excellent meeting which had formed a useful part of his induction into the NED role.	
	It was agreed that the self-evaluation process should be scheduled as soon as possible.	
	Action: RB to schedule the MIAA-facilitated F&IC self-evaluation process as soon as possible.	RB
	Approval: The Finance & Investment Committee discussed the facilitated session and agreed that a date for this should be agreed as soon as possible.	
9.0	Cost Improvement Plan Review (including business cases of top programmes) RB provided an update on the Cost Improvement Plan, including	
	reserve schemes, at month 9 of 2013/14 and the new 2014/15 plan. AR confirmed that the attached business cases should not have come to FI&C, as their value was under £100k.	
	RB stated that the year-end CIP position, submitted to the NHS Trust Development Authority, forecast a 97.6% achievement of the Plan by 31 March 2014. The achievement was largely on the back of several A&E schemes overachieving and the instigation of several reserve schemes.	
	As part of the budget setting process for 2014/15 the CIP schemes were being scrutinised and validated. Where schemes were unlikely to deliver a saving, Executive Directors were being tasked with ensuring that mitigations were identified by their teams and Project Initiation Documents completed for any new schemes.	

		Actio
	AR confirmed that a detailed review was underway around the A&E CIPs relating to unsocial hours and meal breaks.	
	RB stated that the Trust was trying to put the onus back on the Directorates to own their CIP targets, challenge shortfalls, etc.	
	The meeting considered progress to date in relation to the 2012/13-2018/19 CIP, including the various reserve schemes.	
	EB stated her belief that the Trust seemed to be in a much healthier position than previously and asked by which date the 2014/15 CIP programme would have been finalised.	
	DW replied that it should be within the next couple of weeks.	
	EB asked whether it would be possible to arrange an 'off-line' budget review to review the CIPs in more depth.	
	RB replied that he would try to arrange this session.	
	Action: RB to arrange a meeting with EB to look at the CIPs for 2014/15 in more depth.	RB
	JN noted the slippage in the current year's PTS CIP and asked whether RB believed it could be fully delivered in 2014/15.	
	RB replied that although he was more confident of the CIP's delivery than he had been the previous year but he could not commit to its 100% delivery.	
	MW asked how slippage in any particular CIP would be taken into account.	
	RB replied that the slippage would generally be slipped into the following year.	
	MW expressed concern as this would be a large amount of money for a CIP and suggested that further actions would be needed to provide assurance that the CIP would meet its targets.	
	Approval: The Finance & Investment Committee noted the CIP position at the end of December and the actions being taken to attain 95% achievement at year end and would seek further assurance of the CIP plan for 2014/15 at its next meeting.	
0	Service Transformation Update – 111	
	RB provided the Committee with an update on the current financial	

corrective action being taken.

position of the 111 service, the underlying financial issues and

The meeting considered in detail the table in section 3.2, which contained details of the underlying Income and Expenditure position for the service in 2014/15 based on current contract assumptions regarding income and the costs of delivering the service based on 2013/14 forecast staff numbers and additional support.

RB stated that drops in income and/or activity levels were very hard to predict. TUPE payments might decrease as YAS was starting to lose some of the staff from NHS Direct who had been on long term sick.

The analysis had been used as the basis of discussions with the Commissioners who had been made aware that the underlying financial position was neither sustainable nor acceptable.

BS stated his belief that, as the service had performed well in comparison with some other providers during its first year, there would never be a better time for YAS to negotiate additional funding.

DW stated it was important that the Trust pitched for the right amount, or there was a danger that it could end up with nothing.

SP stated that conversations to date with the Lead Commissioners had been around what they thought they could broker with the other CCGs. It was his belief that they were not keen to get into a new tender exercise so would try to reach a compromise with YAS. It was therefore just a case of pitching for the right amount.

With sickness currently running at around 11% in 111, BS asked whether it was feasible or realistic to expect levels to drop to 5-6%.

SP replied that there were additional efficiencies to gain both in relation to sickness levels and the general operations centre.

EB asked what more the Trust could do to ensure its 111 service got to a break even position as the current risk of the service to the Trust was a major concern to her.

SP stated that discussions had taken place with NHS England who had asked the Trust to consider providing the regional contingency model. This was a positive move with the potential of providing additional income if a suitable rate could be agreed.

He further stated that the Trust was also looking into the possibility of using the 111 office space and technology for other services when the service's demand was not at its peak.

EB thanked RB for an excellent paper and requested that it be updated and presented at a future Private Board meeting to aid discussions about the 111 service.

Action:

RB to update 111 paper and present it at a Private Board meeting.

RB

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	Approval: The Finance & Investment Committee noted the current underlying Income and Expenditure position for the 111 service and the on-going negotiations with Commissioners regarding additional income to deliver a sustainable service.	
	MW left the meeting at 1545 hours.	
10.1	Lessons Learned form 111 Tender Exercise RB drew the Committee's attention to Deloitte's report on the Trust's assessment and evaluation process behind the decision to tender for and implement the NHS 111 service.	
	The Committee agreed that the recommendations relating to the lack of an audit trail in the 2012 Board meeting minutes had been addressed with a much more detailed record now kept of all Board meetings.	
	It was noted that: a watching brief needed to kept on due diligence; risks had been escalated to TPMG; the impact on the Trust's future financial risk and governance risk ratings had been factored into the LTFM; and further consideration would be given to the possibility of joint ventures with partner organisations, for example opportunities around telehealth.	
	RB stated that he would pick up on the recommendation that the Board should formally minute its consideration of the results of the review work / due diligence against the investment criteria that it should have defined at the beginning of the process.	
	Action: RB to pick up on the recommendation that the Board should formally minute its consideration of the results of the review work/due diligence against the investment criteria that it should have defined at the beginning of the process and report back at a future meeting.	RB
	Approval: The Finance & Investment Committee noted the recommendations contained within the report and the associated management actions for consideration in future tender and business development opportunities.	
	SP left the meeting and JH and MP entered the meeting at 1550 hours.	
0.2	Patient Transport Service (PTS) Financials RB provided an overview of progress being made to develop Service Line Reporting / contract profitability analysis in PTS and Cost Improvement Plans and efficiency actions being taken for 2014/15.	
	He outlined details of the core PTS contracts both their value and percentage income split and provided information about the budgetary financial position and service line reporting by PTS locality.	

RB stated that section five of the report contained an analysis in terms of where the Trust was in terms of the current year plus an initial analysis of whether the PTS market could make a strategic contribution to the organisation going forward, whether the Trust could afford to keep running its PTS service, etc.

He summarised the savings opportunity priorities for implementation during 2014/15, together with values where they were known, adding his belief that savings should be around the £3m mark.

RB stated that, in the planning and scheduling automation CIP area, there should be significant opportunities to rationalise the service. For example, he would expect the West to be more efficient than some other areas because it was very urban.

As part of fleet reduction, there were significant opportunities in terms of the use of saloon cars and the withdrawal / redeployment of below mileage vehicles.

JN suggested that the introduction of mileage-related insurance should be considered. RB agreed that this was a good idea.

JH stated that the work was by no means complete and although South was being used as a model, there would be different patterns of variability in other patches.

EB asked where the Trust expected PTS to be from a profit and loss perspective at the end of 2014/15.

RB replied that there would still be a deficit but although this was still a problem, significant inroads were being made.

He further stated that savings could be made through internal CIP delivery in 2014/15 and 2015/16 but the remaining three years recovery would have to come through contract negotiations.

JH talked the Committee through the new PTS dashboard. Historically a lot of management information had been shared with the PTS operational managers but it had been a retrospective snapshot and not self-service. It was essential therefore that any information supplied was as real time as possible

JH stated that the dashboard had been developed as one page on screen. It provided a variety of information including: a summary of all KPIs; information about operational efficiency; analysis of staff absence; activity by mobility type; and a budget report.

JH stressed that although the information was not the answer to the Trust's problems, it did give managers up-to-date information to drill into in greater depth.

		Action
	She stated that the dashboard was out live and operational in all four operating areas, adding that the project group went through all of the data in the dashboard in its fortnightly meetings.	
	EB asked whether the dashboard included targets.	
	RB replied that targets could be added at a later stage.	
	RB stated that the budget report brought home the relationship between operational expenditure and operational delivery.	
	DW stated his belief that it also brought home the value of the volunteer car service.	
	EB stated that she would like a PTS paper, which included a forecast for 2014/15, to go to Private Board for discussion.	
	Action: RB to present a PTS Update report, including a forecast for 2014/15 at Private Board.	RB
	PD requested an update on the current position in relation to YAS' Volunteer Policy.	
	JH replied that a draft Volunteer Policy had been developed and was being amended following consideration in a number of groups.	
	DW stated that the draft Policy was a good start and now needed further development to ensure that it was relevant going forward.	
	EB thanked RB and his team for the report and useful update, which had been an excellent piece of work.	
	Approval: The Finance & Investment Committee noted the current financial performance of each PTS contract; the projected year-end financial position and associated CIP deliver for 2013-14; and the progress made to develop CIP plans for implementation in 2014/15 and future years.	
1.0	Service Line Management Update and Implementation Plan RB provided an update on the progress of implementation of Service Line Management (SLM).	
	He acknowledged that, although the on-going delay to implementation in some areas due to competing priorities was not good news, it was an honest reflection of the Trust's current position.	
	RB stated that the Private & Events Service Line continued to see the benefits of SLM.	

The progression of a "YAS staff bank" had implications across all directorates and needed to link directly with HR to ensure a standard policy was applied trust-wide and not just within the SLM project. Good discussions had taken place with IB who acknowledged the importance of the establishment of a staff bank.

RB stated that PTS continued to see the benefits of SLM. The service had identified the need to establish a mechanism for reviewing and arbitrating commercial issues that impacted on more than one Service Line. These were currently being managed on a case by case basis.

RB further stated that the main risks to the project were: delays due to limited availability of key members of staff as a result of competing priorities; data inconsistencies; and a review of cost allocation which could result in higher charges being apportioned to some Service Lines which could affect profitability.

EB asked what could be done to speed up the implementation of SLM, which was behind schedule.

DW replied that SLM now had senior management buy in across the organisation. However, it still needed to be resourced appropriately as there were capability issues in certain parts of the organisation, which needed to be addressed.

RB stated that, by embedding SLM in the TPMG agenda, a lot of progress had been made but he agreed that the project still needed to be resourced appropriately. For example, another dedicated project manager was required in the team to ensure the success of the project.

The Committee agreed that this was an essential requirement as the success of SLM was very important to the Trust.

Action:

TEG to continue to closely monitor the progress of SLM implementation and look into the possibility of the placement of another dedicated project manager in the SLM team.

PD expressed concern that the action relating to the HR workshop on the project risk register was still outstanding after 9 months.

RB replied that people had been trying to arrange the workshop but there had been attendance problems.

DW stated that TEG would ensure that the workshop took place.

Action:

TEG to ensure that HR SLM workshop took place as soon as possible.

EB requested a more concise, easy to read report at the next meeting, as the appendices in particular had been very difficult to read.

DW

DW

		Action
	Approval: The Finance & Investment Committee noted the current status of Service Line Management, in particular, the on-going delays to implementation due to competing priorities.	
12.0	Board Assurance Framework (BAF) and Corporate Risk Register SP presented an update on the Board Assurance Framework (BAF) and Corporate Risk Register to provide assurance to the Finance & Investment Committee on the effective management of corporate risks.	
	RB stated that the financial risks in the BAF would be covered in the paper to be considered at agenda item 13.1.	
	The Committee members had no major concerns and it was noted that a more comprehensive report would be received at the April meeting.	
	Approval: The Finance & Investment Committee noted the developments outlined in the report and was assured with regard to the effective management of risks.	
13.0	Review of Changes to LTFM/Downside Risks (Verbal) RB stated that an update would be presented to the April meeting, as both the IBP and LTFM were being refreshed as part of the planning process. The revised documents would be submitted to the Trust Development Authority in June 2014.	
	Approval: The Finance & Investment Committee noted the update.	
13.1	Financial Risks (including Budget Variances Action Plans) AR provided the Committee with an update on the Trust's financial risks and exceptional budgetary and treasury items.	
	She stated that the Trust was currently managing some significant risks with a depleted contingency reserve.	
	In relation to principal risk reference 4a, RB confirmed that the South Yorkshire PTS Commissioners had confirmed that the quality improvement fund, which was worth c£250k, would be coming back to YAS, which was encouraging and positive news.	
	EB asked whether the best payments practice code target was achievable.	
	AR replied that 95% was achieved in December so the indications were that YAS would achieve its target.	
	AR stated that the forecast year-end total risk of £5.6m would be managed through reserves held and controlling discretionary spend.	

She further stated that, at the end of month 9, the amount of funding held in reserves was £6.4m. This was largely assigned to specific schemes such as the cost of the A&E workforce remodelling training, transformation projects and MERIT.

After taking account of the risks the Trust had £210k of contingency reserves to mitigate any further risks. Risks materialising above this level would impact upon the Trust's planned surplus and could lead to a financial deficit.

RB provided a breakdown summary of the 2013/14 reserves for the Committee's information.

AR presented an update on debtors as at 31 December 2014.

The Committee considered those debtors more than 60 days overdue and recognised that there remained more work to do in relation to ongoing debt collection.

AR confirmed that a debt collection agency had been notified in relation to some debts.

Approval:

The Finance & Investment Committee noted the financial risks highlighted and was assured that the risks were being managed and mitigation plans were in place.

13.2 Year To Date Financial Performance – IPR – Finance Section including CQUINS and Treasury KPIs

RB presented an update on the Trust's year to date financial performance and the Finance section of the IPR.

He stated that the Trust's Earnings before Interest Tax Depreciation and Amortisation (EBITDA) for the nine months to 31 December 2013 was £10.888m (6.3%). This was below the year to date plan of £11.140m (6.5%) due to increased overtime payments and private provider payments made in the A&E operations area to achieve the Red 1 target.

The Trust had reported a surplus as at 31 December 2013 of £1.922m against a budgeted surplus of £2.255m. The actual surplus included a small profit on the sale of several A&E vehicles (£92k).

The Trust had cash and cash equivalents of £17.588m at the end of December against a plan of £11.437m. The Monitor Risk Rating for liquidity is 44.2 days against a plan of 32.4 days, giving a rating of 4.

Overall the Trust had achieved a Monitor Risk rating of 3. The I&E surplus margin net of dividend and impairment was 1.1%, against a plan of 1.3% achieving a rating of 3, achieving a rating of 4 for Monitor Continuity of Service.

		Action
	The Trust had a savings target of £10.909m for 2013/14. Business cases for CIPs to the value of £10.909m were prepared and Quality Assessed. December saw an increase of £206k in CIP schemes against a plan of £7,726k.	
	RB stated that capital plans had been flagged red from a cash flow perspective but they would catch up.	
	Approval: The Finance & Investment Committee noted the updated position of the Trust's year to date financial performance.	
14.0	2014/2015 Annual Budget Setting Update – Revenue & Capital RB provided an update on the draft 2014/15 Revenue and Capital budgets.	
	He stated that the first draft of the revenue budgets had been compiled. The budgets were due to be submitted to the TDA on 5 March 2014. Details of the capital plan, totalling £14.7m, were also set out in the paper.	
	It was agreed that, as there were currently too many unknowns to have an informed discussion about the budgets, the Chairman and NEDs would need to meet before the Trust Board Meeting in Public took place on 25 March 2014 for a more informed discussion.	
	Action: Budget meeting to be arranged for Chairman and NEDs before Trust Board Meeting in Public at the end of March.	RB
	Approval: The Finance & Investment Committee noted the progress being made in relation to the content of the draft Revenue and Capital budgets and acknowledged that this was work in progress which would need more in depth discussion prior to approval by the Trust Board.	
15.0	Significant Capital Schemes over last 12 months and Payback Analysis RB provided a Framework to the Committee for the review of significant Capital Schemes that had been undertaken in the last 12 months including a review of the A&E Van conversion vehicles, purchased during 2012/13.	
	EB stated that the Framework would need to be revised at some stage to include ICT and would therefore need to be incorporated into the Workplan for consideration at a future meeting.	
	Approval: The Finance & Investment Committee noted the report and approved the proposed Framework of reporting the review of significant Capital schemes.	

16.0 Contracts Update

RB provided the Committee with an update on the A&E and PTS contracts along with general Business Development and IPR updates.

He confirmed that a workshop to discuss unplanned transport service specification was due to take place on Monday 10 February. The Trust wanted to be proactive and a phased transition was part of contract negotiations at the current time.

EB asked whether the Trust had budgeted in an amount for hospital turnaround penalties.

RH replied that work was currently on-going with Operational colleagues to agree an implementation plan which should ensure that any problems were minimised.

RB stated that a Single Point of Access six month pilot had been agreed earlier that week with York Teaching Hospitals and confirmed that this included local authority health and social care services.

EB thanked RB for a very good, comprehensive paper, an updated version of which would be welcome at every F&IC meeting.

Approval:

The Finance & Investment Committee noted the content of the report.

17.0 Summary of Issues to Trust Board

EB stated that issues to take forward to the Board included:

- To highlight the potentially good news of the likely achievement of 97% CIP target at year end;
- The development of controls around the CIP process was work in progress in the current year.

For inclusion on a forthcoming Private Board agenda, subject to the agreement of the Chairman:

- Visibility of item 10.0, 111 Financials paper;
- Visibility of item 10.2, PTS Financials paper.

EB stated that the two papers had been very well-presented and very useful, as they had clearly outlined the current position in both services, which continued to struggle financially.

EB thanked everyone for attending and participating in the meeting.

The meeting closed at 1700 hours.

Date and Time of Next Meeting – Thursday 3 April 2014, Boardroom, 1400-1700