

Report to:	Public Board of Directors	Agenda item:	21
Date of Meeting:	6 September 2023		
Title of Report:	Alert, Advise and Assure Report – Finance and Performance Committee		
Status:	For discussion		
Author:	Nigel Stevens		

<b>Key Discussion Points and Matters to be escalated from the meeting</b>	
<b>ALERT: Alert to matters that require the board's attention or action, e.g. non-compliance, safety or a threat to the Trust's strategy</b>	
<ul style="list-style-type: none"> <li>Meeting discussed at length the 3 year break even improvement plan. A representative from BSW joined this element. The meeting concluded: <ul style="list-style-type: none"> <li>The structured approach was welcome</li> <li>Board and FPC need to focus on forecasts not historical – this should drive the work</li> <li>Critical to embed culture change</li> <li>Committee recognised the huge challenge and the significant ramp up in second part of the plan, with options yet to be defined</li> </ul> </li> <li>Winter Plan a significant concern and needs urgent Board review. Lack of central winter funding is a major concern</li> </ul>	
<b>ADVISE: Advise of areas of ongoing monitoring or development or where there is negative assurance</b>	
<ul style="list-style-type: none"> <li>Monthly operational performance report demonstrated much hard work and growing improvement but steep mountain to climb</li> <li>Managing and improving productivity will be a key to success</li> <li>Finance challenges in year remain a concern with a number of additional cost pressures in view</li> </ul>	
<b>ASSURE: Inform the board where positive assurance has been achieved</b>	
<ul style="list-style-type: none"> <li>Assurance on operational improvements and the plans for continuing the current positive trend</li> </ul>	
<b>RISK: Advise the board which risks were discussed and if any new risks were identified.</b>	
<ul style="list-style-type: none"> <li>FPC covered most of the risks in one form or another</li> </ul>	
<b>CELEBRATING OUTSTANDING: Share any practice, innovation or action that the committee considers to be outstanding</b>	
<ul style="list-style-type: none"> <li>Nil</li> </ul>	
<b>APPROVALS: Decisions and Approvals made by the Committee</b>	
<ul style="list-style-type: none"> <li>Approved new laundry contract</li> </ul>	

The Board is asked to NOTE the content of the report.

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<b>Date of Meeting:</b>	<b>6 September 2023</b>		

<b>Title of Report:</b>	<b>RUH 3 Year Plan and Improvement Programme: Deep Dive on Programme Approach</b>
<b>Status:</b>	<b>For discussion</b>
<b>Board Sponsor(s):</b>	<b>Andrew Hollowood, Chief Medical Officer Libby Walters, Director of Finance and Deputy CEO</b>
<b>Author(s):</b>	<b>Rhiannon Hills, Director of Transformation / Rachel Hambly, Programme Director, Financial Improvement Programme Libby Walters, Director of Finance and Deputy CEO</b>
<b>Appendices</b>	<b>None</b>

#### **1. Executive Summary of the Report**

Each organisation is required to achieve a financial break-even position on an annual basis and return to a recurrent breakeven position in the next 3 years which is by 2025/26. The RUH has a breakeven plan in 2023/24 which requires the delivery of a £23.5 million savings programme and on achievement of the 2023/24 plan will enter 2024/25 with an underlying deficit of £32 million.

As per the Finance Strategy previously agreed the RUH are planning to return to financial breakeven by 2026/27 and this is to be delivered predominantly through the Improvement Programme. In order to accelerate the return to financial balance the revised proposed plan is to achieve this in 3.5 years so that the RUH is in a breakeven position by half way through 2026/27. The paper highlights these plans.

The delivery vehicle for financial recovery is the Improvement Programme. Initially, the programme is focussing on delivery of the 2023/24 £23.5m target and £28m stretch target but is now shifting focus to the development of a 3-year rolling programme. The programme objective is to ensure that the Trust is maximising resources to provide top decile performance for patient care, attracting and retaining great staff and delivering within financial resources in alignment with the Trust Strategy.

This paper provides a deep dive into the governance, processes and structure of the Improvement Programme, delivery to date and plans for future years.

#### **2. Recommendations (Note, Approve, Discuss)**

It is recommended that the Board of Directors:

- Note and discuss the 3 year recovery plan and the progress being delivered through the Improvement Programme

#### **3. Legal / Regulatory Implications**

Not achieving financial duties will impact on the ability for the Trust to secure the economy, efficiency and effectiveness in its use of resources.

#### **4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc.)**

In line with the Risk Assessment Framework :

Author : Rhiannon Hills, Director of Transformation / Rachel Hambly, Programme Director, Financial Improvement Programme	Date: August 2023 Version: 2.0
Document Approved by: Andrew Hollowood, Chief Medical Officer / Libby Walters, Director of Finance / Agenda Item: 21.1	Page 1 of 14

The Trust fails to deliver its financial plan which leads to the Trust having a Single Oversight Framework rating of three or higher, representing a material level of financial risk. This results in a lack of confidence from the Trust's commissioners and the regulator and increases the level of scrutiny which utilises significant resources and can damage the reputation of the Trust. A significant number of financial risks are being managed and these are set out in the paper.

**5. Resources Implications (Financial / staffing)**

A significant amount of time is being taken by the Improvement Team to support the recovery programme.

**6. Equality and Diversity**

Recovery actions are being overseen by the Improvement Programme Steering Group to ensure the impact on clinical services is considered. The impact on health inequalities will be considered as part of this process.

**7. References to previous reports**

Monthly Integrated Performance Report  
Financial Strategy, FPC, 26<sup>th</sup> June 2023  
This report was discussed at the Finance and Performance Committee on the 30 August 2023.

**8. Freedom of Information**

Public

**9. Sustainability**

Further opportunities to improve sustainability should be pursued to contribute towards the Finance Improvement Programme

**10. Digital**

Not applicable

# RUH Improvement Programme

## Deep dive on the programmes approach: Defining Clinical Benefits August 2023

### 1.0 Improvement Programme Background

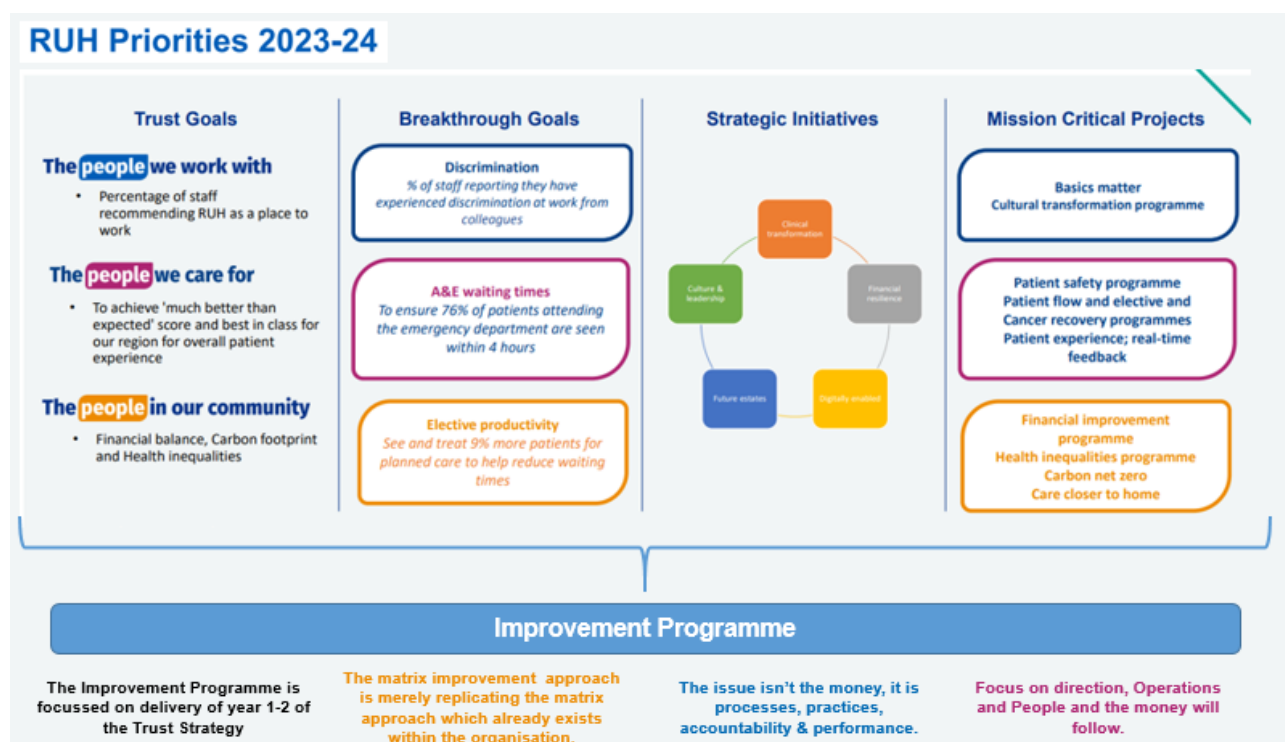
Each organisation is required to achieve a financial break-even position on an annual basis and return to a recurrent breakeven position in the next 3 years, which is by 2025/26. The RUH has a breakeven plan in 2023/24 which requires the delivery of a £23.5 million savings programme and on achievement of the 2023/24 plan will enter 2024/25 with an underlying deficit of £32 million.

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The delivery of financial stability forms part of the wider Trust Strategy and the Improvement Programme is focussed on delivery of Years 1 and 2 of the strategy and development of plans for following years.

The programme runs in tandem with other key Trust activities and initiatives to achieve the wider Trust goals. These include the five core strategies: Clinical Transformation, Digitally Enabled, Culture and Leadership, Future Estates and Financial Resilience.

Figure 1: Delivering the Trust Strategy



It is recognised that in order to change the way we work, improve the experience for our staff and patients and delivery operational and financial benefits, this will require a holistic approach focusing on changing culture, innovation, focus on deliver, getting the basics right and ensuring the right team are in place to support transformational change.

The Trust has identified a number of opportunities to improve our processes, practices, accountability & performance to support the delivery of our financial position. These include;

- Seeing more elective patient within our current capacity
- Ensuring patients are seen in the correct setting which reduces patients in hospital beds
- Attract and retain staff to reduce reliance on high cost temporary workforce
- Investing in digital to improve the efficiency of services
- Pursing commercial opportunities
- Moving our 2 intensive care units onto one footprint
- Better use of our estate
- Reducing overheads
- Getting better value from the products we buy
- Reducing harm
- Redesigning our clinical services
- Improving the value of our current operational models

The Improvement Programme has been designed to cover projects across all of these areas supported by a dedicated team to ensure delivery and benefits realisation.

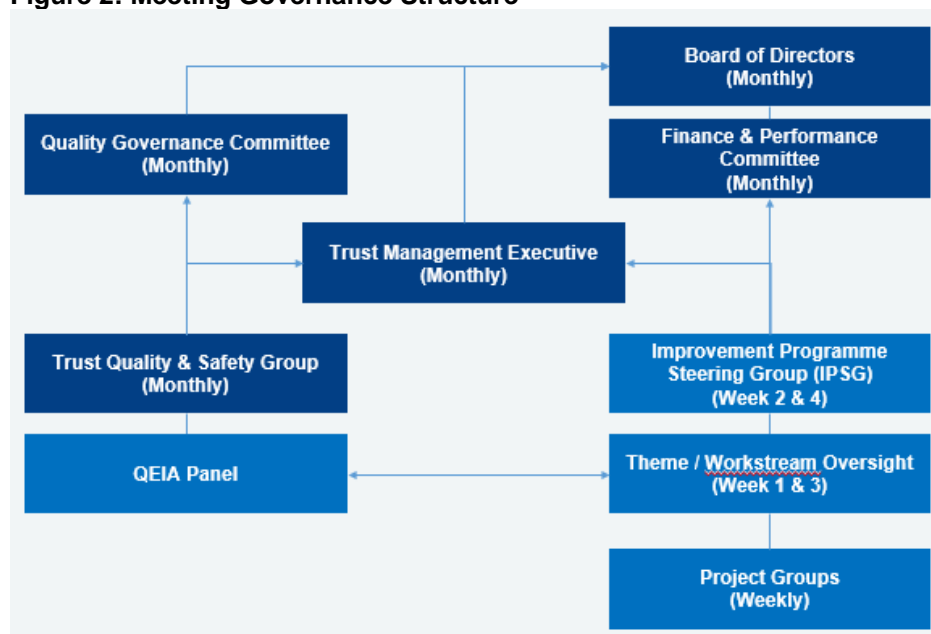
Author : Rhiannon Hills, Director of Transformation / Rachel Hambly, Programme Director, Financial Improvement Programme	Date: August 2023 Version: 2.0
Document Approved by: Andrew Hollowood, Chief Medical Officer / Libby Walters, Director of Finance	
Agenda Item: 21.1	Page 4 of 14

## 2.0 Programme Governance Structure

The RUH Improvement Programme was established in April 2023, formally commencing in May 2023. The programme is now in its 20<sup>th</sup> week of reporting for the FY 2023/24.

The programme is being overseen by the Improvement Programme Steering Group (IPSG), chaired by the Chief Medical Office. The Group reports into the Trust Management Executive (TME) and Financial & Performance Committee (FPC).

**Figure 2: Meeting Governance Structure**



The Programme has been set up against six overarching Themes. Under each of these themes sit a number of Workstreams. Beneath these are individual Projects.

**Figure 3: Themes and Workstreams Matrix**

Theme	Productivity & Efficiencies	Workforce	Cost Control & Management	Estate Management	Income	Divisional Schemes
Workstreams	1.1 Theatres	2.1 Nursing & Therapies Staffing	3.1 Pharmacy & Medicines Management	4.1 Estates & Facilities	5.1 Commercial Opportunities	6.1 Medicine
	1.2 Outpatients	2.2 Medical Staffing	3.2 Procurement, Inventory Management & Contracts	4.2 Portering	5.2 Private & Overseas Patients	6.2 Surgery
	1.3 Patient Flow	2.3 Admin & Clerical / Non-clinical			5.3 Elective Income (ERF)	6.3 FASS
	1.4 Radiology	2.4 Central HR			5.4 Clinical Coding & Best Practice Tariffs	6.4 E&F
	1.5 Pathology	2.5 Direct Engagement			5.5 Commissioner Income	6.5 Corporate
	1.6 Sulis Elective				5.6 Contract Income	

## 2.1 Programme Roles & Responsibilities

Each Workstream has an Executive Lead, a SRO, Clinical / Operational Lead, Operational / Improvement Manager, Project Manager, Finance Lead, BI Lead and other specialist support (as required).

Under each Workstream exists a number of Improvement Projects. Each project will subsequently also have a Project Lead, Clinical / Operational Lead, Operational / Improvement Manager, Project Manager, Finance Lead, BI Lead and other specialist support, dependent on the specific project.

There are some further Divisional Projects which are identified as also requiring support from the Improvement Team as well as a number of projects being led within the operational divisional teams.

**Figure 4: Programme Roles & Responsibilities**

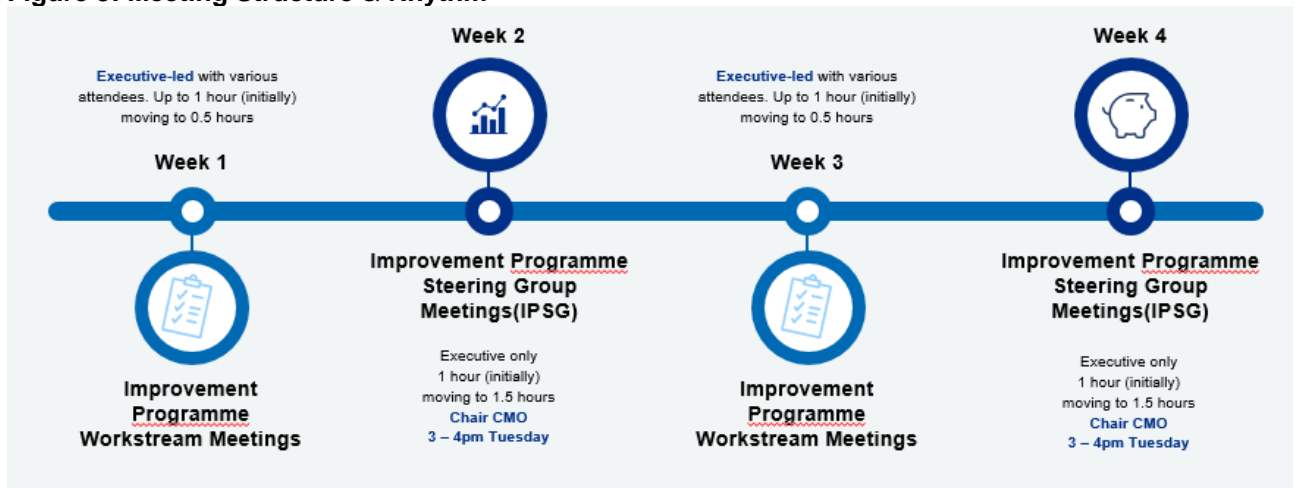
Role	Description
Executive Lead / SRO (Accountable)	Strategic programme oversight, assurance, and problem resolution.
Divisional / Department Lead (Responsible)	Operational leadership of the programme and weekly oversight.
Workstream Lead (Responsible)	Day-to-day programme leadership and management - The person selected by the division / department to lead the workstream.
Finance Lead (Consulted)	Financial input comprising financial analysis, budget categorisation, verification of financial benefit and reporting of actual and forecast information (Usually the relevant finance manager)
People Team Lead (Consulted)	HR / Workforce input comprising assessment of any HR impact from the proposed workstream projects and verification of WTE benefit, reporting of actual and forecast workforce information (Usually the relevant HR Business Partner)
Improvement Team Lead (Responsible)	Project identification and delivery support, oversight, assurance, wider-alignment and programme documentation management and completion.
Clinical Lead (Consulted)	Provision of clinical input, insight and alignment into project and its objectives.
Estates & Facilities Lead (Consulted)	Provision of Estates & Facilities input, insight and alignment into project and its objectives.
IT Lead (Consulted)	Provision of ICT input, insight and alignment into project and its objectives.

## 2.2 Meeting Rhythm

The programme is Executive-led, overseen by the Chief Medical Officer. An Improvement Programme Steering Group (IPSG) is held on the second and fourth Tuesday of every month in which progress against the workstream's respective forecast plan is overseen, risks are raised and discussed and new opportunities are approved to commence.

In weeks one and three, Executive-led Workstream meetings take place to drive project activities, remove blocks and support teams to deliver change. The workstream meetings also support and facilitate the continuous generation of new ideas and opportunities.

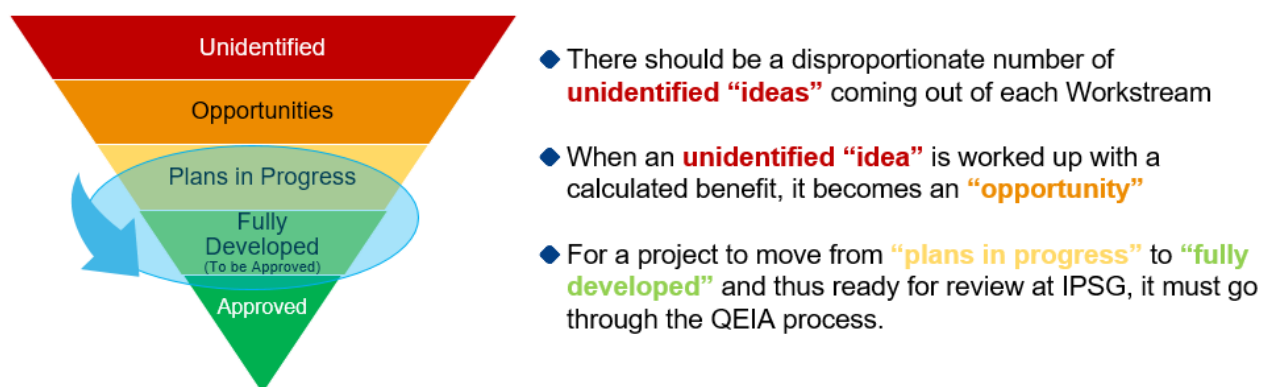
**Figure 5: Meeting Structure & Rhythm**



## 2.3 Project Approval Process

The workstream meetings also support and facilitate the continuous generation of new ideas and opportunities.

**Figure 6: Process for generating projects**



As new ideas for projects are developed, Project Outline Documents (PODs) are completed which set out a brief summary of the proposed project, scope and project deliverables (quality, performance and financial) as well as any resources required to support the project.

## 2.4 Quality Equality Impact Assessment (QEIA)

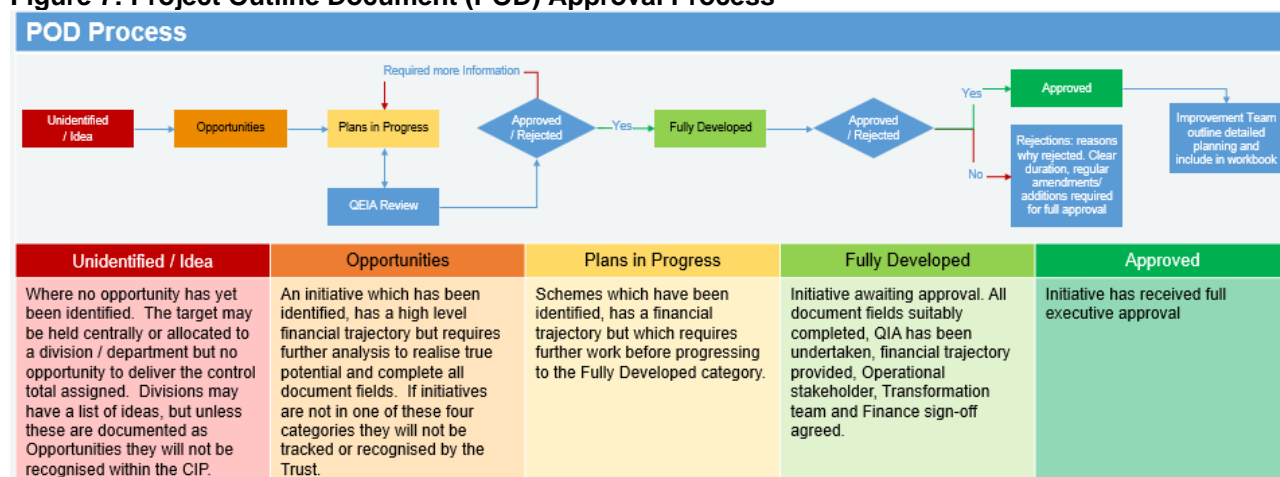
As part of the initial scoping exercise, a Quality Equality Impact Assessment (QEIA) Form is also completed which assesses the impact of any proposed change on Quality, Patient Experience, Patient Safety, Clinical Effectiveness, Patient Flow, Productivity, Innovation and Performance and Workforce Effectiveness. It also assesses any impact to protected characteristics – Disability, Age, Race, Religion or Belief, Sexual Orientation, Pregnancy or Maternity, Gender, Carers and Gender Reassignment.

Quality Equality Impact Assessments (QEIAs) are completed by the Workstream team and Improvement Team Lead collaboratively. When complete, these are then reviewed by the Chief Nurse, Chief Medical Officer and Director for People and Culture. QEIAs need to be approved prior to a POD being submitted to IPSG for approval to proceed to a live project.

Author : Rhiannon Hills, Director of Transformation / Rachel Hambly, Programme Director, Financial Improvement Programme	Date: August 2023 Version: 2.0
Document Approved by: Andrew Hollowood, Chief Medical Officer / Libby Walters, Director of Finance	
Agenda Item: 21.1	Page 7 of 14



**Figure 7: Project Outline Document (POD) Approval Process**



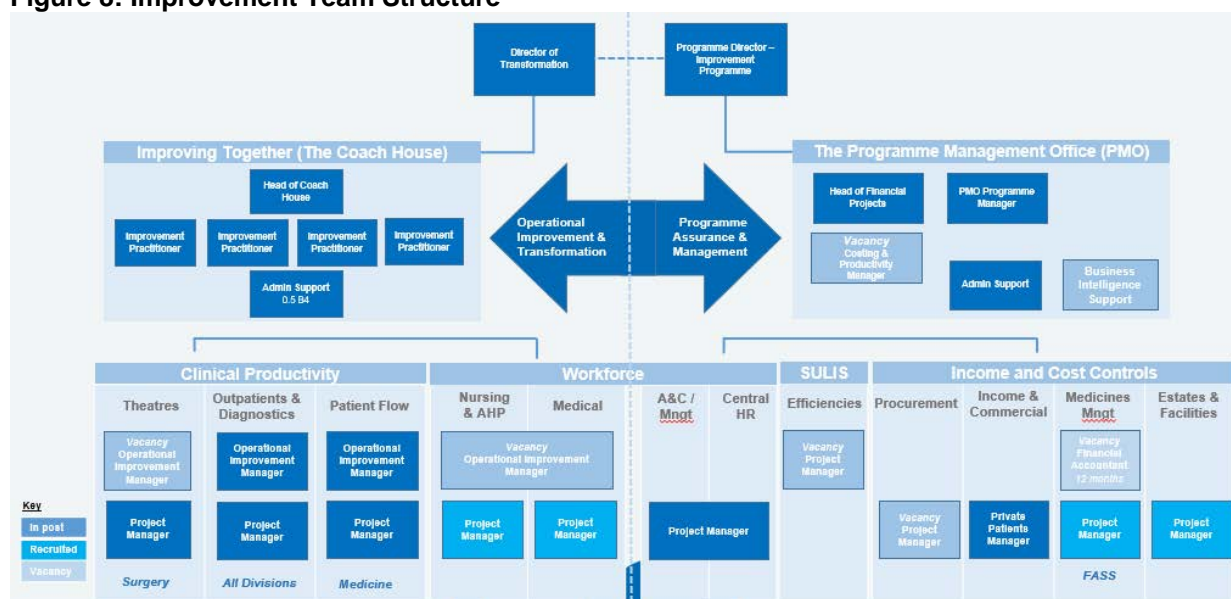
## 2.5 Improvement Team Resource

The 'Improvement Team' was established in May 2023 and is led by the Director of Transformation and Programme Director, Financial Improvement Programme. External resource was initially recruited into the programme to support the scoping of background / current states and to identify initial opportunities within each of the respective thematic areas of the programme.

The team has developed over the last three and a half months to comprise of 5.0 WTE Project Managers and 2.0 WTE Operational Improvement Managers, 1.0 WTE Programme Management Officer and 0.8 WTE Programme Administrator.

A further 4.0 WTE Project Managers were appointed in the latest round of interviews at the beginning of August and interviews are set to take place for further appointment of Operational Improvement Managers in September 2023. There are 5.0 WTE Vacancies remaining to be filled at which point the team will be up to full establishment.

**Figure 8: Improvement Team Structure**



## 2.5 Programme Management Office (PMO)

The programme is being supported by a Programme Management Office (PMO). The Programme PMO Team are responsible for ensuring that there is sufficient grip in each of the workstreams, feeding into the Programme Level and IPSG. They oversee the 3 Year rolling programme plan and keep track of the delivery against targets for the Programme and workstreams. The Head of Financial Projects insures that there is a tight grip on financial delivery, ensuring that savings are evidenced and removed from budgets.

Weekly Highlight Reports are submitted by the Workstream Project Leads to update on process, actions and next steps. They also provide details on project benefits against each of our people groups.

## 2.6 Improving Together Coach House

The Coach House team also form part of the Improvement Team. As well as having responsibility for training, coaching and facilitating staff trust wide in implementing the behaviours, tools and routines of Improving Together. As subject matter experts on the Improving Together methodology, they also provide guidance on the practical application of the tools and routines and coaching on the behaviours that enable a culture of continuous improvement within the programme and support particular projects as and when appropriate.

## 2.6 Workstream Benefits

Each workstream is reporting against a number of KPIs. A dashboard is currently in development to automate the process by which these KPIs will be routinely measured at programme-level against their respective baselines/against their target forecasts.

The key benefits for each workstream are currently categorised against the Trust's people groups to ensure alignment with the Trust goals/wider strategy: the people we care for, the people we work with and the people in our community.

## 2.7 Risk and Issues

Risks and issues are tracked at Project and Workstream level and review at fortnightly Workstream meetings. High risks and risks to delivery are reported into the Improvement Programme Steering Group (IPSG) via the Executive Lead for each workstream and the PMO office maintains an overarching Programme Risk and Issues log.

Currently, the biggest risk is of non-delivery of target leading to the Trust not making financial balance – this risk is being mitigated by:

- The introduction of the £28m stretch target above the £23.5m required for financial balance
- Strong project management and programme management
- Weekly oversight of delivery for all workstreams
- Focus on delivering the projects underway in the first instance to ensure money is released before moving on to more ideas so as not to spread the team too thinly
- Consultant staff still in post whilst team recruitment is complete

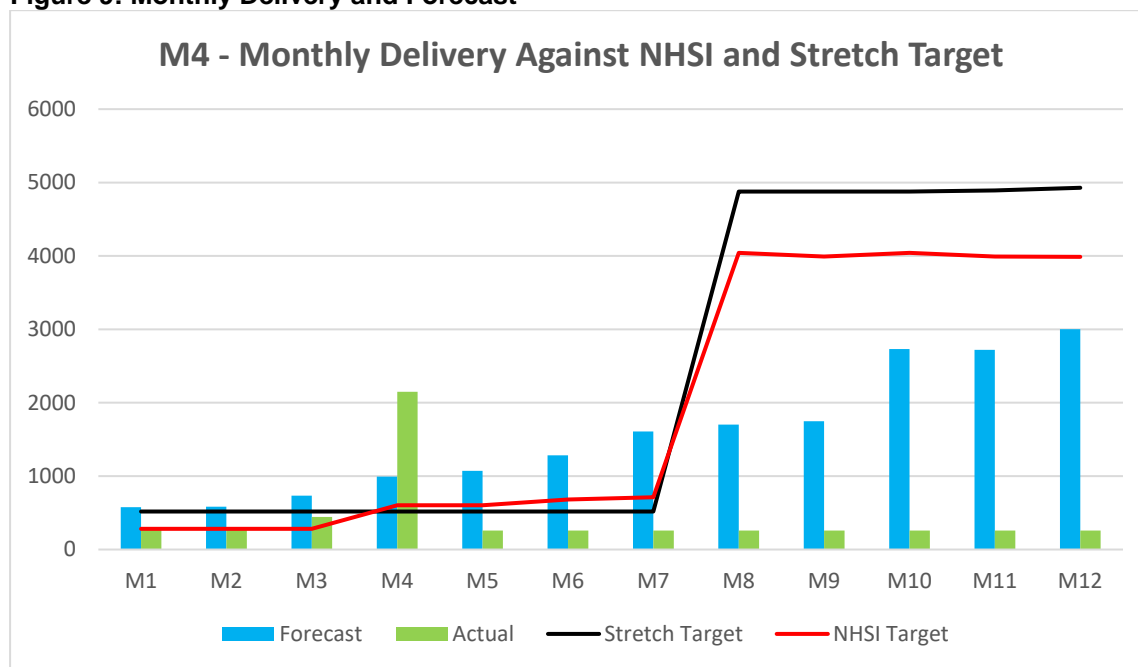
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Document Approved by: Andrew Hollowood, Chief Medical Officer / Libby Walters, Director of Finance	
Agenda Item: 21.1	Page 9 of 14

### 3.0 Programme Delivery to date

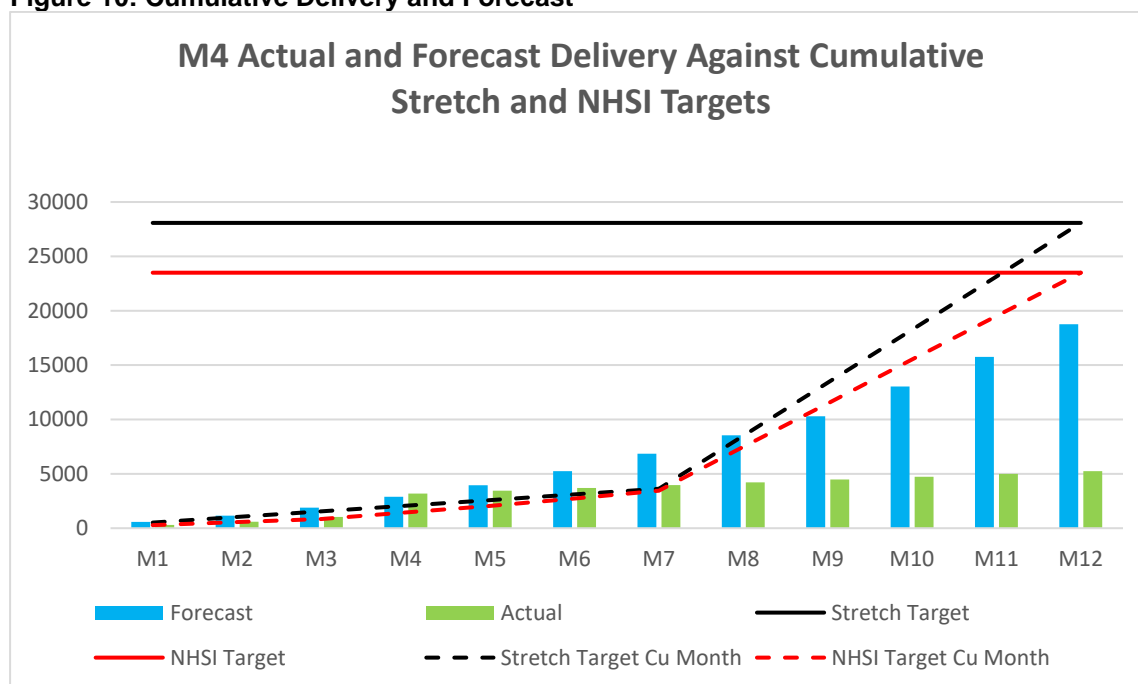
The programme is on track and delivering above trajectory for M4. We have delivered £3.98m year to date against a stretch target of £2.1m. A total of £16.28m of schemes have been confirmed to deliver this financial year against the stretch target of £28.1m. Work is continuing to develop further PODs against the remaining target.

Workstreams are beginning to release savings although there is still further work to do ahead of a significant rise in trajectory in Month 8 where our stretch trajectory requires delivery of £4.8m to be released each month going forward to Month 12.

**Figure 9: Monthly Delivery and Forecast**



**Figure 10: Cumulative Delivery and Forecast**



Each Programme of work is developing run rates to provide assurance on where and when the financial savings will be delivered. The table below highlights this for the £16.3m of schemes identified to deliver so far this financial year. Work continues to developed run rates for each of the schemes.

**Figure 11: The table below highlights the forecast run rate of each scheme**

Accumulative	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	Period 9	Period 10	Period 11	Period 12	Total
<b>QIPP Delivered</b>													
1_Divisional QIPP	£125	£226	£368	£1,129	£1,242	£1,355	£1,469	£1,582	£1,695	£1,808	£1,922	£2,035	£2,035
2_Productivity and Efficiency	£0	£0	£91	£167	£281	£394	£508	£621	£735	£848	£1,067	£1,380	£1,380
3_Workforce	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0
4_Cost and Control Management	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0
5_Estates & Facilities	£0	£0	£0	£1,136	£1,136	£1,136	£1,136	£1,136	£1,136	£1,136	£1,136	£1,136	£1,136
6_Income Commercial	£21	£27	£36	£53	£53	£53	£53	£53	£53	£53	£53	£53	£53
7_Income Clinical	£47	£95	£183	£272	£361	£449	£538	£627	£715	£804	£893	£981	£981
<b>Total Delivered</b>	<b>£193</b>	<b>£347</b>	<b>£678</b>	<b>£2,758</b>	<b>£3,073</b>	<b>£3,388</b>	<b>£3,704</b>	<b>£4,019</b>	<b>£4,334</b>	<b>£4,650</b>	<b>£5,070</b>	<b>£5,585</b>	<b>£5,585</b>
<b>NHSE Plan</b>	<b>£282</b>	<b>£564</b>	<b>£846</b>	<b>£1,448</b>	<b>£2,050</b>	<b>£2,732</b>	<b>£3,445</b>	<b>£7,487</b>	<b>£11,479</b>	<b>£15,521</b>	<b>£19,513</b>	<b>£23,500</b>	<b>£23,500</b>
<b>Still to Deliver</b>	<b>£89</b>	<b>£217</b>	<b>£168</b>	<b>-£1,310</b>	<b>-£1,023</b>	<b>-£656</b>	<b>-£259</b>	<b>£3,468</b>	<b>£7,145</b>	<b>£10,871</b>	<b>£14,443</b>	<b>£17,915</b>	<b>£17,915</b>
<b>Forecast Plans to Deliver</b>													
1_Divisional QIPP	£0	£0	£0	£0	£0	£86	£228	£413	£597	£782	£966	£1,178	£1,178
2_Productivity and Efficiency	£0	£0	£0	£0	£188	£376	£564	£877	£1,638	£2,558	£3,499	£4,309	£4,309
3_Workforce	£0	£0	£0	£0	£0	£100	£200	£430	£660	£890	£1,120	£1,350	£1,350
4_Cost and Control Management	£0	£0	£0	£0	£0	£0	£57	£113	£170	£226	£283	£339	£339
5_Estates & Facilities	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£153	£153
6_Income Commercial	£0	£0	£0	£0	£18	£37	£55	£73	£128	£206	£284	£362	£362
7_Income Clinical	£0	£0	£0	£0	£46	£152	£329	£506	£683	£1,533	£2,384	£3,234	£3,234
<b>Total Forecast to deliver</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>	<b>£253</b>	<b>£750</b>	<b>£1,432</b>	<b>£2,411</b>	<b>£3,875</b>	<b>£6,194</b>	<b>£8,536</b>	<b>£10,925</b>	<b>£10,925</b>
<b>Delivered and Forecast to deliver</b>	<b>£193</b>	<b>£347</b>	<b>£678</b>	<b>£2,758</b>	<b>£3,326</b>	<b>£4,138</b>	<b>£5,136</b>	<b>£6,430</b>	<b>£8,209</b>	<b>£10,844</b>	<b>£13,605</b>	<b>£16,511</b>	<b>£16,511</b>
<b>NHSE Plan</b>	<b>£282</b>	<b>£564</b>	<b>£846</b>	<b>£1,448</b>	<b>£2,050</b>	<b>£2,732</b>	<b>£3,445</b>	<b>£7,487</b>	<b>£11,479</b>	<b>£15,521</b>	<b>£19,513</b>	<b>£23,500</b>	<b>£23,500</b>
<b>Still to identify</b>	<b>£89</b>	<b>£217</b>	<b>£168</b>	<b>-£1,310</b>	<b>-£1,276</b>	<b>-£1,406</b>	<b>-£1,691</b>	<b>£1,057</b>	<b>£3,270</b>	<b>£4,677</b>	<b>£5,908</b>	<b>£6,989</b>	<b>£6,989</b>

## 4.0 Return to Financial Sustainability

The Improvement Programme is the approach and methodology for the Trust to return to a balanced finance position. The Trust has an underlying deficit of £32 million and the Finance Strategy outlines the plan to return to financial balance by 2026/27. The table below highlights the trajectory for returning to financial balance as agreed in the Finance Strategy.

**Figure 12: Original RUH Potential Recovery solution set 2023-27:**

	<u>23/24</u>	<u>24/25</u>	<u>25/26</u>	<u>26/27</u>
	<u>£m</u>	<u>£m</u>	<u>£m</u>	<u>£m</u>
<u>Delivery programme:</u>				
Transactional efficiency	10.0	10.0	10.0	10.0
Constrain use of system growth		3.0	3.0	4.0
Recovery Programme: UEC de-escalation => costs saved		0.5	0.5	1.2
Recovery Programme: elective productivity => margin	2.4	4.7	1.6	2.1
Retrench 20-23 pay-bill cost growth		0	4.1	5.2
Recovery Programme: Other recurrent savings	11.1			
<b>Total Recovery Plan</b>	<b>23.5</b>	<b>18.2</b>	<b>19.2</b>	<b>22.5</b>
<b>Recurrent remaining delivery gap:</b>	<b>-32.0</b>	<b>-22.0</b>	<b>-12.2</b>	<b>0</b>

There is now a requirement to return to a recurrent balanced finance position by 2025/26 and a balanced position including the use of non-recurrent sources by 2024/25; which is earlier than the plan in the Finance Strategy. The Finance Strategy set out a high level summary of opportunities based on benchmarking data and prioritises which identified up to £90 million of opportunities. This high level summary of areas will be the focus for the Improvement Programme over the next 3 years. The plans will be accelerated in order to return to finance balance sooner. The table below highlights the revised recovery plan over a 3.5 year period. Savings will need to be accelerated further if a return in 3 years is required, but at the present time this does not feel to be achievable.

**Figure 13: RUH Proposed Recovery solution set 2023-27:**

	<u>23/24</u>	<u>24/25</u>	<u>25/26</u>	<u>26/27</u>
	<u>£m</u>	<u>£m</u>	<u>£m</u>	<u>£m</u>
<u>Delivery programme:</u>				
Transactional efficiency	10.0	10.0	10.0	10.0
Constrain use of system growth		3.0	3.0	4.0
Recovery Programme: UEC de-escalation => costs saved		0.5	0.5	0.0
Recovery Programme: elective productivity => margin	2.4	4.7	1.6	0.0
Retrench 20-23 pay-bill cost growth		1.8	5.1	0.0
Recovery Programme: Other recurrent savings	11.1	2.4	2.0	1.0
Total Recovery Plan	23.5	22.4	22.2	15.0
Recurrent remaining delivery gap:	-32.0	-17.8	-4.8	0

The opportunities that are the focus of the Improvement Programme are highlighted in the table below.

**Figure 14: Efficiency opportunities**

Theme	Workstream	2024/25	2025/26	2026/27	2027/28	Cumulative total
Productivity & Efficiencies	Elective Recovery & Productivity	£2.60	£0.00	£0.00	£0.00	£2.60
	Sulis Recovery	£2.10	£1.60	£1.60	£0.00	£5.30
	Non Criteria to Reside	£0.50	£0.50	£0.70	£0.70	£2.40
	ICU model	£3.10	£0.00	£0.00	£0.00	£3.10
	Diagnostics	£0.00	£0.00	£0.50	£0.00	£0.50
	Urgent care	£0.00	£0.00	£0.50	£0.60	£1.10
Workforce	Temporary workforce	£1.10	£0.60	£0.60	£0.00	£2.30
	Workforce efficiencies	£0.60	£0.30	£0.30	£0.00	£1.30
	Corporate services	£0.00	£0.50	£0.30	£0.00	£0.80
Cost Control & Management	Procurement	£1.60	£0.00	£0.00	£0.00	£1.60
Estate Management	Estates	£0.00	£0.50	£0.30	£0.00	£0.80
System Integration /	Clinical Services Review	£0.00	£4.20	£4.30	£2.20	£10.70
	Digital	£0.30	£0.30	£0.20	£0.20	£1.10
Income	Commercial opportunities	£0.50	£0.30	£0.30	£0.60	£1.60
	Growth contribution	£3.00	£3.00	£4.00	£4.00	£14.00
Other	Reducing harm	£0.00	£0.40	£0.40	£0.40	£1.10
	<b>Sub-total transformation projects</b>	<b>£15.40</b>	<b>£12.20</b>	<b>£14</b>	<b>£8.70</b>	<b>£50.30</b>
Divisional Schemes	Operational QIPP	£10.00	£10.00	£10.00	£10.00	£40.00
	<b>Total</b>	<b>£25.00</b>	<b>£22.00</b>	<b>£24.00</b>	<b>£18.70</b>	<b>£90.00</b>

Cumulative efficiencies	£25.40	£47.40	£71.40	£90.00
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## 5.0 Finance Strategy

The delivery of the Improvement Programme is one area of focus in terms of returning to financial balance. It also runs alongside the other priorities of the finance strategy which are focussed on:

- Developing a culture to enable the organisation to manage its money well;
- Developing a culture of innovation;
- Ensuring we deliver the basics well and efficiently; and
- A flourishing finance team.

The diagram below summaries the overall finance strategy approach.

**Figure 15: Outline finance strategy**

# Our Approach

## Delivery

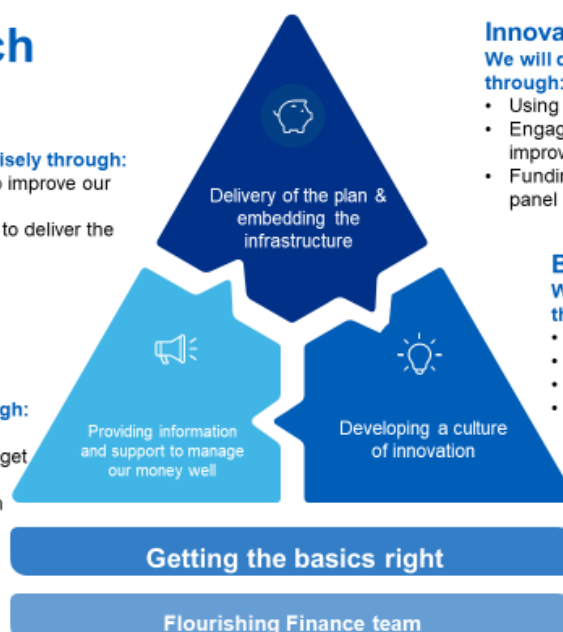
We will spend our money wisely through:

- Identify the opportunities to improve our financial position
- Ensure skills and resource to deliver the improvement programme

## Culture

We will develop a culture to enable the organisation to manage its money well through:

- Robust reporting
- Training and supporting budget holders
- Being a collaborative system partner



## Innovation

We will develop a culture of innovation through:

- Using our Improving Together methodologies
- Engaging our service leads to make improvements
- Funding innovation through our innovation panel

## Basics

We will deliver the basics well and efficiently through:

- Automated reporting
- Strong financial grip and control
- Efficient processes
- Focusing on the needs of our customers

## Team

We will have a flourishing finance team through:

- Working across BSW to provide networking opportunities
- Achieving the BSW Finance Staff Development Targets
- Investing in team events
- Ensure our staff have an effective annual appraisal

## 6.0 Clinical Strategy

The Improvement Programme will be aligned to the clinical strategy. This will include productivity and efficiency across clinical services (top decile performance), reduction in clinical variation and improved care as well the consideration about disinvesting in services. This will be led by the Acute Hospital Alliance Clinical Strategy workstream to delivery our ambition of a left shifting appropriate services away from the acute hospital setting.

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Agenda Item: 21.1	Page 14 of 14