



## Committee Report

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| <b>Report from:</b>     | Resources Committee |
| <b>Date of meeting:</b> | 21 July 2026        |
| <b>Chair:</b>           | Helen Grantham      |

## Key discussion points and matters to be escalated from the discussion at the meeting:

| <b>ALERT</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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| -            | <p><b>2026/27 WRAP delivery</b></p> <ul style="list-style-type: none"> <li>As at M3 WRAP delivery was £3.5m YTD (£2.75m for M2) behind target - £10.9m delivered with £23.9m (M2 £20.6m) full year impact - £17.2m (£15.8m for M2) recurrent). While this was a strong performance against prior years it was continuing the trend of monthly underperformance against plan. 61% (M2 53%) of plans are fully developed</li> <li>A report was considered covering SLT engagement on potential new opportunities to fill the delivery gap - significant work remained to obtain clarity on the achievability and likely level of savings.</li> <li>see <i>ASSURANCE GAINED</i> and <i>RISK</i> section below for additional information</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| -            | <p><b>2026/27 plan</b></p> <ul style="list-style-type: none"> <li>2026/27 plan has not yet been agreed by NHSE – the trust continues to work to the plan approved by the Board.</li> <li>The Trust is reporting a year-to-date deficit of £9m against a planned deficit of £6m, therefore has a £3m adverse variance to plan. The planned investments of £11.7m have been reduced to £3.4m to reflect the plan adjustment, shortfall of the WRAP and committed investment to date. Information would continue to be provided in reports to enable good transparency on reporting and adjustments being made.</li> <li>The need for a clear action and mitigation plan was noted and this matter would be referred to the Board for further discussion including mitigation plans and the interaction between short-term delivery of plan and actions which would improve trust performance in the medium to longer-term.</li> <li>An update was provided on the NHS challenged provider scheme – the joint appointment of some temporary turnaround and financial improvement resource was noted together with their NHS experience and areas of focus.</li> <li>The Trust's cash position was noted as was the NHS process to apply for additional cash. A discussion took place on the actions NHSE expected the Trust to take to manage cash effectively. It was noted that a paper would be presented to the Board.</li> <li>see <i>ASSURANCE GAINED</i> and <i>RISK</i> section below for additional information</li> </ul> |
| -            | <p><b>Cancer specialties – focussed review</b></p> <ul style="list-style-type: none"> <li>While overall Trust performance has improved it remains below trajectory level for FDS and 62-day constitutional standards and there are significant challenges in some tumour sites and diagnostics which need targeted action to recover and then sustain performance</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |



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| <ul style="list-style-type: none"> <li>○ Lung and skin cancer services remained areas of significant risk due to increasing demand and capacity challenges requiring redesign of approach and ongoing recruitment, with colorectal, gynaecology, CT, endoscopy and histopathology experiencing capacity and diagnostic constraints</li> <li>○ <i>see ASSURANCE GAINED and RISK below</i></li> <li>- <b>Workforce – focussed review:</b> <ul style="list-style-type: none"> <li>○ Absence rate saw a slight uptick in May and continued to be higher than planned.</li> <li>○ Medical workforce and temporary staffing - reliance on temporary medical and dental workforce, including high-cost bank and agency use, continues - a discussion took place on what action could be taken to improve management of this area and provide key leadership messages</li> <li>○ <i>see ASSURANCE GAINED and RISK section below for additional information</i></li> </ul> </li> <li>- <b>Guardian of Safe Working Hours:</b> The Medical Workforce/Guardian of Safe Working Hours discussion highlighted significantly more exception reports in the quarter than for prior periods - further information was requested in future reports on the themes, drivers, grade-specific pressures and action to address.</li> <li>- <b>Diagnostics – progress report</b> <ul style="list-style-type: none"> <li>○ A diagnostic update report was provided: <ul style="list-style-type: none"> <li>▪ overall performance has increased to above trajectory level</li> <li>▪ significant challenges in some modalities remained</li> <li>▪ multiple modalities were relying on WLIs, insourcing and mobiles to fill gaps in substantive establishment and equipment</li> <li>▪ imaging modalities account for more than 75% of the trust waiting list with associate risk if there is significant deterioration in performance</li> </ul> </li> <li>○ <i>see ADVISE, ASSURANCE GAINED and RISK below</i></li> </ul> </li> <li>- <b>Urgent and emergency care</b> <ul style="list-style-type: none"> <li>○ the significantly improved performance following introduction of new pathways earlier in the year, had not sustained, however had not deteriorated to previous levels. Drivers were around embedding Nervecentre ways of working and change in roles within the team. Workshops were being held to identify actions to improve performance.</li> </ul> </li> </ul> |
| <b>ASSURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <ul style="list-style-type: none"> <li>- <b>Cancer – a focussed review</b> was presented covering: <ul style="list-style-type: none"> <li>○ performance against constitutional standards overall and by cancer speciality</li> <li>○ demand/capacity</li> <li>○ governance framework and</li> <li>○ risks/action areas</li> <li>○ <i>see ASSURANCE GAINED below</i></li> </ul> </li> <li>- <b>2026/27 WRAP and plan delivery</b> – the Committee undertook its regular focussed review in these areas with: <ul style="list-style-type: none"> <li>○ reporting and discussion including the process to identify potential additional opportunities for the 2026/27 WRAP programme</li> <li>○ an update provided on additional resource which was being put in place to give greater support for delivery</li> <li>○ the need to look at strategic and transformational change was, again, noted.</li> <li>○ <i>see ASSURANCE GAINED below</i></li> </ul> </li> <li>- <b>Workforce – focussed review</b> was presented covering:</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |



- Key performance statistics for workforce
  - An update on plans to support colleagues back to work following sickness and to enhance wellbeing – sickness absence did however see a slight uptick in May
  - An update on the “Big Conversation” (which would focus on embedding Trust values, standards and behaviours)
  - The whole-time equivalent workforce, which was slightly under the planned trajectory, with healthcare support worker vacancy rates positively reducing following a good recruitment month.
- **Diagnostics improvement** – a progress report was provided covering:
  - Overall performance and performance by modality
  - The factors impacting performance
  - Action plans and expected impact
- **Risk management and BAF assurance development:** The Committee received the risk management report and noted the development of a revised Board Assurance Framework approach, including a formal quarterly assurance opinion using substantial, moderate, limited or no assurance criteria to support more consistent upward reporting to the Board.

#### ASSURANCE GAINED

- **WRAP 26/27 and plan 2026/27**
  - The Committee gained assurance that the financial position is understood and partial assurance that recovery actions are in place to meet the WRAP targets and plan – governance was being strengthened with the development of PIDs, Gant charts, value profiles and delivery reporting and any additional WRAP plans being developed being added to the overall WRAP tracker – information on the tracker was being shared with the committee on a regular basis
- **Cancer specialties – focussed review**
  - The Committee gained assurance that governance structures, tumour-site action plans and performance oversight arrangements are in place and had recently been strengthened
  - Performance has sustained for FDS at over 70% for 5 months – the longest trend at this position
  - Delivery assurance remains partial, as delivery is underway but not yet consistently embedded across all services and is dependent on workforce recruitment, diagnostic turnaround, capital delivery, digital enablement and sustained operational grip
  - Delivery of trajectory, remained achievable but high risk
- **Diagnostics:** The Committee gained assurance from the improved DM01 position and reduction in long waits, while recognising that sustainability remains a key risk due to imaging capacity, workforce and cost pressures.
- **Workforce:**
  - The Committee gained assurance that workforce trajectory, healthcare support worker recruitment, and actions to reduce agency reliance are being actively monitored
  - Challenges remained in medical recruitment, exception reporting and temporary staffing costs, particularly in medical/dental.



- Clear plans were in place relating to actions to support colleagues during sickness and provide appropriate wellbeing support, although these remained to be implemented in full.
- External support was now in place to support the Big Conversation and mobilisation activity had commenced – sustained leadership commitment and coordination was needed to maximise participation and translate insights into action.
- **Capital:** The Committee gained some assurance around the current status of key capital projects, recognising that key schemes are actively managed, but that the format of reporting requires improvement to provide a more focussed status report including project cost, forecast cost, any potential overspend, current status and RAG risk rating, with a particular focus on the major projects and any off track
- **Risk management:** The Committee gained assurance that the BAF reporting process is being strengthened through formal assurance opinions and closer alignment between committee oversight and Board-level strategic risk reporting.

#### ADVISE

- **Cancer specialties focussed review**
  - Strong delivery supported by effective models was noted in breast and NSS tumour sites
- **Diagnostics**
  - the recent significant improvement in performance was noted and the team commended for their work to achieve this
- **Financial planning**
  - The Committee requested more developed multi-year financial planning beyond the current summary
- **Digital transformation:** Nerve Centre tranche 3 would be a key driver of transformation within the Trust, although the benefits will not be realised until after implementation in 2027.

#### RISKS DISCUSSED AND NEW RISKS IDENTIFIED

- **2026/27 WRAP/plan:** the risk that the Trust may not deliver the full efficiency requirement and overspend elsewhere may continue, necessitating further action planning and escalation and potentially not meeting the Trust plan.
- **Cash:** The expected cash shortfall and distressed cash application process and expectations were discussed as matters requiring Board-level visibility and approval.
- **Cancer performance risk:** Ongoing underperformance against cancer trajectories and risks linked to referral growth, diagnostic constraints, administrative delays, pathway variation and workforce challenges.
- **RTT and cancer prioritisation risk:** Some cancer mitigations could adversely affect RTT and other patient cohorts, requiring explicit governance, equality impact assessment and potentially Board-level choices.
- **Diagnostic sustainability:** Despite positive DM01 performance, sustainability concerns were noted, particularly imaging, where CT, non-obstetric ultrasound and echocardiography were identified as areas of concern.
- **Capital delivery:** risks associated within the capital programme, including hybrid theatres, MRI capacity, the Scarborough roof programme
- **AI:** the additional risks posed due to AI and mitigations were discussed including in cyber and the impact on recruitment processes of their use in the application process .



- **Cultural and behavioural risk:** the need for the Big Conversation, values, expectations and accountability framework to translate into sustained behavioural change across all staff groups, including consistent expectations around leadership, standards and conduct