

**Committee Report**

Report from:	Resources Committee
Date of meeting:	20 October 2026
Chair:	Helen Grantham

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

ALERT
• 2026/27 WRAP delivery ○ As at M6 WRAP delivery was £24.7m YTD - £7.0m behind target. Full-year savings delivered are £34.5m against a £65.8m target. While there was continued strong performance against prior years, the trend of monthly underperformance against plan was continuing. See also ADVISE below • 2026/27 plan/cash ○ The Trust is reporting a year-to-date deficit of £18.4m against a planned deficit of £9.2m (£9.2m adverse variance, before any DSF adjustments). ○ Delivery of the £18.5m deficit plan and receipt of full support funding remain at risk and a discussion took place on the mid-range forecast of £30.5m (£12m worse than plan) and a worst-case forecast of £45.5m. The Committee requested information to show how actions build back to plan delivery, mid-range and worst-case performance. ○ Key drivers for underperformance remained as WRAP under delivery, medical bank spend and drug costs. ○ Cash closed at £3.9m against a £2.3m plan - the performance against better payment practice code was noted ○ Whilst agency spend was below plan, bank spend was £18.7m YTD against a plan of £12.9m (£5.8m adverse). The recent reduction in levels of bank cover was noted and this activity is being monitored closely. Additional information was requested to enable comparison with prior years. • Sickness absence ○ Remained high, although in line with challenges experienced by other NE/Yorkshire region providers. An update was provided on planned changes to the sickness policy and work with line managers. • RTT focused review ○ RTT total waiting list increased in Q2 from 56,421 in June to a provisional 58,696 at the end of September, a rise of 2,275 patients (4%). Patients waiting over 52 weeks increased from 1,137 to 1,303. Five patients waiting over 65 weeks. The proportion waiting less than 18 weeks reduced from 58.4% to a provisional 57.5%. ○ First outpatient access remains the principal pathway constraint. ○ Delivery remains affected by GP referrals (4.8% v 2025/26 - planned growth of 2%); delayed capital schemes; activity below plan in key areas; and reduction in the activity-related investment identified within the original plan. Pain remains a significant contributor. ○ It is anticipated that the year-end TWL trajectory will be delivered, with a forecast of 49,369 against a trajectory of 49,360. However, a number of patients are forecast to remain over 52 weeks and performance for patients



waiting less than 18 weeks is forecast to be at 64.7%, against a trajectory of 67.5%.

- **YTHFM Business Assurance Report Q2**
 - The Q2 Business Assurance Report presents a broadly stable but mixed position for YTHFM. With some encouraging progress (see **ASSURE** below). Areas for continued executive oversight relate to the underlying financial deficit, workforce performance and sickness absence, cleaning standards and a small number of high-risk capital schemes.
- **Sustainability Quarterly Report Q2**
 - While there had been many positive actions in the sustainability area (see **ASSURE** below), the Trust is not achieving the annual emissions reduction required for its 2032 trajectory. Current 2025/26 data indicates that emissions will reduce, but not by the amount required for the year. The 2032 target remains technically achievable, but delivery will require stronger and more consistent action across estates, clinical services, procurement, travel and medical gases.
- **Assurance ratings – strategic risks within Committee’s remit**
 - The committee reviewed the assurance ratings relating to the strategic risks within the Committee’s remit for oversight. While risks were broadly understood, plans to move to target risk remained challenged.
- **Urgent and Emergency Care performance:**
 - ED emergency care standard continued to be an area of focus. Further information was requested to validate the reported reduction in the number of attendances and ambulance arrivals and understand demand over the period.
- **Cancer – progress report**
 - A report on cancer performance was received and while there was some positive areas (see **ASSURE** below) September performance shows a deterioration against planned trajectories for the Faster Diagnosis Standard, the 62-day referral-to-treatment standard and the 31-day decision-to-treat standard.
 - Performance has been affected by sustained demand, patient-related delays, pathway-specific capacity constraints and treatment cancellations.
 - Recovery actions are expected to support improvement however delivery of all national cancer standards by year-end cannot currently be assured.
 - The Committee would continue to receive progress reports.

ASSURE

- **2026/27 WRAP and plan delivery** – the Committee undertook its regular focussed review in these areas and there was good visibility on performance, the reasons for under performance and areas of under delivery for the WRAP scheme which gave assurance that underperformance and risks were well understood. For the first time in the financial year the Committee received confirmation that plans were in place to deliver the full year WRAP plan within year, albeit high-risk plans remained. See also **ALERT**
- **RTT - focussed review:**
 - The Committee received detailed information on the RTT recovery programme across six priorities: reducing long waits; increasing first outpatient access; transforming outpatient pathways; improving productivity



and planned activity delivery; managing demand; and strengthening governance, validation and infrastructure and the seven-week Focus on Firsts project (responding to the NHS England requirement that patients waiting more than 18 weeks for a first outpatient attendance are offered an appointment by 30 November 2026).

- Delivery is being managed through five improvement sprints, daily stand-ups, patient-level validation, capacity review and specialty-level reporting. The Committee received an update on delivery of actions and governance arrangements.
- Further plans are being developed to work on closing the RTT gap for the end of year

- **YTHFM Business Assurance Report Q2**

- The Q2 Business Assurance Report presents a broadly stable but mixed position for YTHFM. There has been encouraging progress in reducing the rate of financial deterioration, delivering the year-to-date WRAP target and progressing much of the capital programme. However, areas for continued executive oversight remain (see also **ALERT**)
- Appropriate governance and recovery arrangements are in place, but assurance remains qualified while areas remain off track.

- **Sustainability Quarterly Report Q2**

- The Committee received the quarterly sustainability report. Positive progress was being made across all areas and successful bids for funding for electric vehicle charge points and a solar photovoltaic (PV) scheme and a joint bid with City of York Council for Mayoral Combined Authority active-travel funding - further external funding bids were in the pipeline. The Travel Plan has been used as a national exemplar by NHSE.
- The revised Green Plan is nearing completion and will be presented to key internal stakeholders shortly.
- Overall assurance is considered to be moderate. Delivery is progressing across travel, medical gases, clinical engagement and externally funded schemes, but the Trust is not achieving the annual emissions reduction required for its 2032 trajectory.

- **Cancer – progress report**

- The Trust has continued to make progress against national cancer standards during 2026/27 and remains one of the stronger-performing organisations within the Humber and North Yorkshire Cancer Alliance across several key measures. This progress has been supported by strengthened performance management, pathway redesign, additional diagnostic and workforce capacity, and enhanced oversight of cancer pathways. The Trust has also achieved its highest recorded Cancer Patient Experience Survey results.
- The Committee takes reasonable assurance that the key causes of underperformance have been identified, recovery actions are in place and appropriate governance arrangements have been established with continued executive oversight and prompt escalation of any slippage.
- The Committee requested continued reporting by exception, including progress against key recovery milestones, evidence of benefit realisation, any deterioration in forecast delivery, and any emerging workforce, capacity or financial constraints requiring Committee attention.
- See also **ALERT**.



- **Risk management and BAF assurance development:** The Committee received the risk management report and discussed and agreed an assurance level for areas within its remit.
- **Annual Operating Plan – Q2 Update on Priority Work programmes**
 - The Committee received a Q2 Annual Operating Plan assurance update for three priorities overseen by the Resources Committee: Coming Off Corridors; Leadership, Values and Behaviours; and Outpatient Transformation, covering planned care and cancer.
 - The overall position is mixed. Coming Off Corridors and Leadership, Values and Behaviours are both rated Amber, while Outpatient Transformation is rated Red. Across the three priorities, there is evidence that the planned programmes, governance arrangements and improvement activity are being established or delivered. However, several key operational and workforce outcomes remain off trajectory.
 - The Committee will continue to monitor action delivery, capacity constraints and expected outcome delivery.
- **Premises Assurance Model**
 - An update on the 2025/26 assessment covering 48 NHS Premises Assurance Model Self-Assessment Questions was provided to the Committee which provided a baseline across the different areas.
 - The Committee noted the position, associated action plans; and the proposed 2026/27 governance arrangements.
- **Medical and Dental Workforce Report Q2 (including Guardian of Safe Working Hours Quarterly report)**
 - The Committee received the quarterly report relating to the Medical and Dental workforce. Additional information requested on turnover.
 - The Committee also received the report from the Guardian of Safe Working Hours Report, which is authored independently by the Guardian of Safe Working Hours.

ASSURANCE GAINED

- **WRAP 26/27 and plan 2026/27**
 - The Committee gained assurance that there were, for the first time during the year, plans in place to deliver the full-year target of £65.4m, although around £8m of this related to high-risk plans.
- **RTT update**
 - The Committee gained assurance that the causes of RTT deterioration are understood and quantified; the principal constraint has been identified as first outpatient access and an established recovery programme, operational governance and structured performance oversight are in place. The immediate response to the first outpatient constraint is clearly defined through the Focus on Firsts programme, with patient-level reporting and monitoring of the potential effects on diagnostic, cancer and urgent pathways.

ADVISE

- **2026/27 plan** – NHSE had agreed that Q1 deficit support funding would be paid and this was awaited at the time of the meeting. Further support needed to be earned



through delivery of the agreed plan and its recovery, productivity and control requirements.

- **Digital transformation** - Nervecentre Tranche 2 went live successfully across York, Scarborough, Bridlington, Selby, Easingwold and Malton, and was followed by the Surgery Day Units going live with Nervecentre in Scarborough, York and Bridlington.

RISKS DISCUSSED AND NEW RISKS IDENTIFIED

- **2026/27 WRAP/plan/cash:** 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.
- **UEC:** the risk that UEC performance would not improve to meet trajectory
- **RTT:** the risk that RTT performance would not improve to meet trajectory or deteriorate further.
- **Capital delivery:** risks associated with the capital programme and the potential implications for operational performance.
- **Workforce:** the risks associated with increased level of colleague sickness absence and level of bank usage.
- **Subject Access Requests:** The trust has exchanged correspondence with the ICO in relation to SARs.