To:	Trust Board					
From:	CHIEF EXECUTIVE					
Date:	26 APRIL 2012					
CQC regulation:	ALL					

Title:	: MONTHLY UPDATE REPORT – APRIL 2012							
Author/Responsible Director: Chief Executive								
Purpose of the Report: To update the Trust Board on topical issues.								
The Report is provided to the Board for:								
	Decision			Discussion				
	Assurance			Endorsement				
Summary / Key Points:								
 the results of the work to finalise the Trust's annual plan 2012/13; 								
Update to Monitor's Financial Assumptions;								
 Safe and Sustainable : Review of Children's Congenital Cardiac Services 								
Recom	menda	tions:						
The Trust Board is invited to receive and note this report.								
Strategic Risk Register N/A		Performance KPIs year to date N/A						
Previou	ısly co	nsidered at anoth	er UHL	. corporate Committ	ee ? N/A			
Resource Implications (eg Financial, HR)								
Assurance Implications								
The report aims to assure the Trust Board on a number of topical issues.								
Patient and Public Involvement (PPI) Implications N/A								
Equality Impact N/A								
Information exempt from Disclosure								
N/A								
Requirement for further review? Monthly report to each Trust Board meeting.								

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

DATE: 26 APRIL 2012

REPORT BY: CHIEF EXECUTIVE

SUBJECT: MONTHLY UPDATE REPORT – APRIL 2012

1. KEY ISSUE

1.1 The key issue to be discussed by the Trust Board at this meeting includes:-

• the results of the work to finalise the Trust's annual plan 2012/13.

2. UPDATE TO MONITOR'S FINANCIAL ASSUMPTIONS

- 2.1 Monitor has published its financial assumptions for 2012/13 which are used in the assessment of applicant Trusts and provide guidance for Foundation Trusts when producing their annual plans.
- 2.2 Monitor's assumptions are revised each year to reflect a number of updates on both cost and income pressures and risks that will affect all healthcare providers. Cost pressures are composed of pay costs and non-pay costs, whereas income pressures arise from reductions to income uplifts.
- 2.3 The table below details the sector-wide recurrent efficiency requirement facing providers, as judged by Monitor:-

		2012/13	2013/14	2014/15	2015/16	2016/17
Acuto	Assessor	4.5%	5.0%	5.0%	4.2%	4.2%
Acute	Downside	5.25%	5.5%	5.5%	5.0%	5.0%
Non-acute	Assessor	4.5%	5.0%	5.0%	4.2%	4.2%
	Downside	5.0%	5.5%	5.5%	4.7%	4.7%

2.4 In addition to sector-wide efficiency requirements, for Acute Trusts Monitor will consider the impact of tariff income levers as outlined in the NHS Operating Framework 2012/13, and the policies adopted by a Trust's commissioners. Monitor will assess and apply any additional

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pressures from these tariff levers non-recurrently on a case by case basis to reflect the circumstances of individual Trusts.

2.5 In publishing its revised financial assumptions, Monitor states that it recognises the scale of the productivity challenge, which it says must be delivered whilst maintaining or improving the quality of care to patients. Monitor adds that, to ensure quality is not compromised, it will be important for Trusts to look at new ways of working and new ways of delivering services as they seek to address the productivity challenge.

3. SAFE AND SUSTAINABLE: REVIEW OF CHILDREN'S CONGENITAL CARDIAC SERVICES

- 3.1 On 19th April 2012, the Court of Appeal published its judgement in respect of the appeal brought by the Joint Committee of Primary Care Trusts against the High Court decision of November 2011 quashing the major consultation which had been conducted into the reconfiguration of National Paediatric Cardiac Surgical Services, issued in March 2011.
- 3.2 In summary, the Court of Appeal allowed the appeal.
- 3.3 The Chair of the Joint Committee of Primary Care Trusts, Sir Neil Mackay, has commented that, given the Court's judgement, the Joint Committee is able to take account of the respondents who called on the Joint Committee to give further consideration to options with three surgical units in London and that the Joint Committee will, in addition, consider a number of other new options that were proposed that include the surgical centres in Leeds, Leicester and Southampton amongst others.
- 3.4 The Chief Executive will report further orally on this matter at the Board meeting.

4. **RECOMMENDATION**

4.1 The Trust Board is recommended to receive and note this report.

Malcolm Lowe-Lauri Chief Executive

20th April 2012