

## CHAIR'S KEY ISSUES

### ISSUES FOR REFERRING / ESCALATING TO BOARD / COMMITTEE / TASK & FINISH GROUP

<b>ORIGINATING BOARD / COMMITTEE / TASK &amp; FINISH GROUP:</b>		Performance Committee 22 June 2022
<b>CHAIR:</b>		Eddie Bloomfield - Non-Executive Director
<b>AGENDA ITEM</b>	<b>DETAILS OF ISSUE:</b>	<b>FOR APPROVAL / ESCALATION / ALERT/ ASSURANCE / INFORMATION?</b>
<b>Operational Performance Report (Acute)</b>	<p>Urgent Care – ED Performance: ED performance improved slightly overall, but there is deterioration against the trajectory, especially at Colchester Hospital. A detailed and focussed piece of work will happen in the next few weeks to help improve the performance, with executive support.</p> <p>Urgent Care – UTC: The national team visited the UTC, and commended the service. It will be the subject of a positive case study which will be uploaded to FutureNHS.</p> <p>Urgent Care – Mental Health: The Committee noted the closure of the 136 suite at Colchester and the increase of mental health attendances at ESNEFT by 32.3% in month. The Chief Nurse assured that all actions within the Trusts remit to support mental health patients are being taken, and conversations continue with EPUT on the reopening of the suite.</p> <p>Cancer Performance: there are currently significant risks with the cancer trajectory, particularly focussed in Upper and Lower GI. The number of referrals coming in has increased significantly. Work both internally and externally with the CCG and Primary Care is ongoing to help with pathway allocation, and improve against the trajectory.</p> <p>Trajectory for PTL and 52 week waits: The committee received a report highlighting the challenges in determining the trajectory for 52 week waits and the number of patients on the Patient Tracking List. This will be determined by an unpredictable level of demand for both urgent and routine pathways. The committee heard that there was evidence of an increased level of demand for urgent and routine services since January, following the Covid-19 outbreak, and was predicted to stay at this level for some time.</p>	Assurance
<b>Operational Performance Report (IES Community)</b>	<p>The Committee noted that the IES Community services are still maintaining high levels of performance against national benchmarks.</p> <p>Waiting times have decreased consistently for the last 3 months, and are now at the lowest level for a year.</p> <p>There is a continuation in the downward trend in ratio of service users per WTE due to success in recruitment.</p> <p>Urgent Community response rates are close to 85% of all referrals being responded to within 2 hours which met the criteria, above the national target of 70%. The internal ambition is to reach 90%.</p>	Assurance

	<p>The decline rates for the REACT service continue to be at a high level, which correlates with the high waiting times for home care.</p> <p>The Committee noted the positive increase of people discharged through pathway 0, which is now above 80%.</p>	
<b>Operational Performance Report (NEE Community)</b>	<p>The Committee were informed that the NEE Community services now have access to the same reporting tools now, so the alignment of the NEE and IES Community reports will improve over the coming months.</p> <p>The Committee were informed of challenges with pressure ulcers in the service, with presentations increasing, and being referred later. The service is working with all local partners to offer the support, and training.</p> <p>The Committee noted the high wait times for paediatric therapies, podiatry, and respiratory services, which are driven by workforce levels and increases in referrals; work with recruitment, and other partners is ongoing to address the issue.</p>	Assurance
<b>Workforce Report</b>	<p>The Committee were informed that sickness had decreased in month from 6.22% to 4.07%, and remains above the 3.5% target.</p> <p>The vacancy rate is 5.4% in month, with 67.1 consultant vacancies, of which 46.5 are being actively recruited to.</p> <p>Time to hire (AfC posts) increased to 17.6 days on the previous month; however this is due to a 25% increase in offers made in month. The Performance remains highly favourable compared to Regional and Acute comparators.</p> <p>The number of joiners v leavers was 97 v 102 in month. The annual position remains that there are a higher number of joiners than leavers. M2 saw 127 (HC) movers internally within the organisation.</p> <p>Mandatory training saw a slight increase in compliance in month.</p>	Information
<b>Integrated Patient Safety &amp; Experience Report</b>	<p>The Committee were informed that the Infection Prevention and Control position at the Trust has changed since the writing of the report. Colchester Hospital has opened a red ward for COVID-19 patients, and there are plans to do so at Ipswich Hospital. The new variant is significantly more transmissible, with an expectation of a 'mini-surge' nationally. The situation is being monitored closely, but it will have an impact of flow through the hospitals.</p>	Assurance
<b>Finance Report Month 2 2022/23</b>	<p>The Trust reported a £0.5m deficit in M2, bringing year to date cumulative position to £1.2m deficit.</p> <p>Capital plan is underspent by £5.8m at M2, primarily due to the elective reconfiguration programme.</p> <p>The Cash balance was £75.5m at the end of May, which is less than planned but there are no material cash risks to be highlighted.</p> <p>CIP is £3.1m under delivery against the plan for the year; £1.4m has been delivered against a target of £4.4m. The CIP target is profiled in equal twelfths.</p> <p>The Clinical Divisions are overspent on a cumulative basis by £3.7m at M2. £2.4m of this variance is within the surgical division.</p> <p>Key focus will be to improve CIP delivery across all divisions, particularly around QIA approvals. Deep dive into Surgery with the Director of Finance and Managing Director will be undertaken.</p> <p>The Committee received and noted the CKIs from the Finance subcommittee and the assurance therein.</p>	Assurance
<b>Procurement Target Operating Model</b>	<p>The Committee noted the PTOM update, of particular note was the governance arrangements with the ICB for this (and other) initiatives.</p> <p>The Committee endorsed the direction of travel for this initiative, in order to maximise financial benefits.</p>	Information

<b>Deep Dive – Diagnostics</b>	The Committee received a presentation on the performance of diagnostics in the Trust against national operational standards. The presentation set out the significant challenges faced in the area, its trajectories to improve, but also the significant progress to address backlogs, and work towards a compliant position.	
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