NHS
East Suffolk and North Essex
NHS Foundation Trust

Key Issues Report

Issues for referral

Originating Committee/Group and meeting date:	Performance and Finance Committee, 23 September 2026
Chair:	John Humpston, Non-Executive Director
Lead Executive (as appropriate):	James Rowe, Chief Financial Officer (Interim)

Subject	Details of Issue	**Action***
Board Assurance Framework (BAF)	The Committee reviewed the Board Assurance Framework and current strategic risk profile, noting updates to the principal finance and performance risks and receiving assurance that actions and controls had been reviewed by Executive leads. Members discussed the assessment of elective care risks, particularly in the context of waiting list growth, recovery trajectories and the interdependencies between elective performance, urgent and emergency care pressures, seasonal planning and financial performance. The Committee agreed that these matters would be considered further through forthcoming Board discussions to ensure risk ratings and assurances remain appropriate.	Assurance
Operational Performance and Seasonal Variation Plan	The Committee reviewed operational performance, winter preparedness and recovery trajectories across urgent and emergency care, elective care, diagnostics and cancer services. Key areas of discussion included: • Continued pressure on urgent and emergency care pathways, particularly at Colchester, driven by patient flow, infection prevention and control requirements (particularly in relation to CPE management) and mental health discharge challenges. • Progress in implementing the Seasonal Variation Plan, including additional capacity, discharge improvements and strengthened system-wide partnership working to support winter resilience. • The ongoing need to reduce corridor care and improve patient flow, with particular focus on reducing unnecessary lengths of stay and embedding consistent discharge processes. • Improvements in diagnostic performance and continued work to reduce long waits, although challenges remain in achieving elective recovery and national RTT ambitions.	

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	• Progress against cancer recovery plans, supported by the Cancer Alliance and GIRFT programmes, with further focus on colorectal, breast and skin cancer pathways. The Committee requested further analysis of corridor care and extended lengths of stay, together with refreshed elective and cancer recovery trajectories, to support future oversight of delivery and performance	
Patient Safety and Quality Report	The report provided an update on patient safety and quality performance, including ongoing work to strengthen infection prevention and control arrangements through a comprehensive improvement programme supported by external expertise. Members also noted work underway to assess the safety and quality implications of caring for patients in corridor environments, with audits and reviews being undertaken to provide additional assurance and inform future reporting. The Committee also received updates on preparations for the seasonal flu programme and activity to support National Organ Donation Week	
Workforce performance	The committee noted continued progress against workforce establishment, recruitment and temporary staffing controls. Members discussed ongoing work to reduce sickness absence, strengthen staff wellbeing support and improve attendance management processes. The Committee also noted positive progress in reducing agency usage and filling clinical support worker vacancies, while recognising that some administrative recruitment activity remains subject to the completion of the Smarter Support Services Programme. The Committee received assurance regarding the effectiveness of workforce controls and the actions being taken to support workforce sustainability and financial recovery.	
Finance month 5	The Committee reviewed the Month 5 financial position and noted that, whilst an in-month surplus was achieved, the year-to-date position remained behind plan and continued to require focused recovery action. Members discussed the delivery of the Cost Improvement Programme, temporary staffing expenditure and the relationship between workforce costs, productivity and activity delivery, particularly within Surgical Services division. The Committee noted the development of a comprehensive Surgical Financial Recovery Plan and welcomed a planned independent review to support recovery and provide further assurance regarding financial controls and productivity improvement.	Alert

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Productivity and efficiency	The Committee noted that delivery remains below plan and that recovery activity is being progressed through divisional recovery plans, the Cost Improvement Programme and strengthened improvement governance arrangements. Members also noted progress with the Epic Teamwork programme, which is expected to improve the alignment of workforce, activity and productivity data, and received an update on the ophthalmology biosimilars programme, which has already delivered significant savings and is expected to generate further benefits as implementation continues.	
Approach to Business Planning 2027/28	The Committee considered the proposed approach to business planning for 2027/28 and supported the early commencement of the planning process ahead of the publication of national guidance. Members noted plans to strengthen the links between activity, workforce, productivity and financial planning, including the reintroduction of Service Line Reporting, preparation for potential Payment by Results arrangements and the development of multi-year savings plans. The Committee also discussed emerging commissioning developments and received assurance that planning would continue to align with quality, performance, workforce and financial priorities.	
NHS Oversight Framework (NOF) Quarter 1	The Committee reviewed the Trust's Quarter 1 NHS Oversight Framework performance, noting that ESNEFT was rated **Segment 3**. Members recognised that the framework has changed significantly for 2026/27, making direct comparison with previous quarters difficult. The Committee discussed the actions and performance improvements required to achieve a higher rating, including benchmarking against peer organisations and the use of predictive analysis to identify opportunities for targeted improvement. Members also noted the influence of the financial performance rating within the overall assessment.	Alert
Key points for escalation / action	Members highlighted: • Ongoing concerns regarding delivery of elective performance targets and longer-term recovery trajectories. • The significant operational and capacity impacts arising from infection prevention and control requirements, particularly in relation to CPE management. • The importance of maintaining oversight of workforce morale, staff engagement and the potential impact of workforce dissatisfaction on productivity. • The need to ensure lessons identified through the Smarter Support Services Programme were considered through the People Oversight and Development Committee.	Alert

Subject	Details of Issue	Action*

*Key:			
Escalation	Support/decision required by reporting committee to resolve an issue within its remit	**Approval**	Positive action required regarding an item of business or support for a decision
Assurance	Evidence or information to demonstrate that appropriate action is being taken within a reporting committee's remit	**Alert**	Proactive notification of subject matter/risk that reporting committee is currently dealing with or mitigating which may require future action/decision
		Information	No action required. Reporting to update on discussion within a reporting committee's remit