Agenda item: 21f

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Committee Chair's Assurance Report

Report to:	Board of Directors (in Public)
Date of meeting:	1 February 2022
Title of Report:	Assurance Report from the Senior Leadership Team
Recommendation:	For information
Chair:	Caroline Shaw, CEO
Purpose:	The report summarises the assurances received, approvals, recommendations and decisions made by the Senior Leadership Team at its meeting on **21 December 2021.**
Background:	The Senior Leadership Team meets monthly and provides assurance on the day-to-day operational management of an effective system of integrated governance, risk management and internal control across the whole organisation's activities, both clinical and non-clinical, which support the achievement of the organisation's vision, mission and objectives.
Item for assurance	The SLT noted and **approved** the minutes from the SLT meeting held on 16 November 2021 subject to a minor amendment.
Item for assurance	**CEO update** • Thank you given to all members of the organisation for on-going support and the progress which has been made over the last 12 months. • SLT noted the positive feedback received from CQC which is a credit to all teams working within the Trust. • SLT noted the significant capital investment which has been allocated to the Trust and which will be of huge benefit for our patients and local community. • All team members are encouraged to have a break over the Christmas and New Year period, but were asked to please recognise that as a Trust, Region and Nationally we will be under pressure over the Christmas and New Year period reflecting the current level 4 national incident. It was noted that the Senior Leadership Team will need to work flexibly to ensure that we maintain safety and quality and that we continue to support our staff in this challenging time.
Item for assurance	**Strategic System Update** • SLT noted the detail as included within the report.

	• SLT noted the update form the Norfolk and Waveney Hospitals Group Committee, specifically the agreement as made by the Board of Directors, to pause the process for recruitment to the Group Chair whilst clarity is gained from the Regional team in relation to the checkpoint process which will need to be completed. • SLT noted that work continues in the background on updating the case for change and defining further detail in relation to the group leadership model. • SLT noted the update in relation to the Hospital Services Strategy Programme. Detailed discussions took place in relation to the Urology transformation plan which it is proposed will be brought through the organisation's governance processes in January 2022. SLT requested that clarity in relation to the resolution of the current day to day issues and on-call arrangements is sought following the cancellation of the planned cross-organisational workshop. • SLT noted that work continues with regard to the Norfolk and Waveney Acute Clinical Strategy and that the QEH Clinical Strategy will form the basis of the Trusts' input into this. SLT noted that the QEH Clinical Strategy will be brought through the Trust governance processes in January 2022.
Item for assurance	**Business Planning 2022/23** • SLT noted the detail as included within the paper and thanked all staff for their engagement with the business planning process. • SLT noted that all Corporate Service Development Plans had been completed and that all Divisional Service Development Plans are due to be completed by 31 December 2021. SLT noted that confirm and challenge sessions are in the diary for January 2022. • SLT noted that detailed demand and capacity planning is underway, led by Information Services, and that this would be completed by 24 December 2021. • SLT noted that national planning guidance is anticipated by 23 December 2021. **Year 3 Corporate Strategy priorities** • SLT noted the detail as included within the paper. • Feedback was given in relation to the draft Year 3 Corporate Strategy priorities. This will be incorporated and a final version will be brought through SLT and Committees in January 2022. **2022/23 Commissioning Intentions** • SLT noted the draft commissioning intentions and asked that they are updated to reflect deliverables which are aligned to the current national priorities (Vaccination / elective recovery / Staff Wellbeing / UEC.)

	• SLT noted that once finalised, the commissioning intentions would be shared with all three of the Trusts Commissioners to ensure visibility and consistency in approach.
Item for assurance	**Staff Engagement Initiatives** • SLT noted the positive work which has been delivered in relation to Staff Engagement this financial year and recognised the clear drive to continue with the work. • SLT noted the proposals for the Staff Engagement programme for 2022/23 and further to detailed discussions requested that an updated proposal is brought back to the January SLT meeting to encompass the continuation of free parking for staff and supporting out of hours hubs for staff to enable them to access hot food - aligned to the work which is underway in relation to Room for Improvement amongst other priorities.
Item for assurance	**Chairs Assurance Report (CAR) from Operational Management Executive Group (OMEG)** • No CAR received – SLT noted that OMEG was cancelled due to operational pressures.
	Elective Restoration and Improvement Plan – performance update • SLT noted the detail as included within the report. • SLT noted that cancer performance remains challenged and there are specific issues in relation to performance in relation to the 62-day target. It was noted that histology delays have impacted upon performance and that these are being escalated. • SLT noted that 104-week waits are being managed effectively with close oversight and scrutiny. • SLT noted that robust internal work continues in relation to the management of outpatients / theatres and diagnostics. • SLT noted that additional funding has been approved for Diagnostic services (~ £400k) • SLT reiterated the current context in relation to COVID and the potential impact upon planned care pathways. Work will be completed with the comms team to ensure that all staff are aware of how we will manage over the Christmas and New Year period. • SLT recognised the positive work which has been delivered but that we must retain flexibility in order to manage the changing national picture in relation to Covid.
Item for assurance	**UEC Improvement Plan – performance update** • SLT noted the verbal update and the context within which the Trust is currently operating

	• SLT noted that dedicated specialist resource is in place to support Urgent and Emergency Care with a simplified approach to ensure robust focus on the key areas. • SLT noted the national comms in relation to management of COVID including a requirement to free up space to accommodate additional inpatient beds. The Trust has responded with two options which would need to be further considered, however, recognising that we are at a level 4 national command and control incident, we will need to look at other alternatives over and above bringing the elective programme down. • SLT noted that the divisional teams are working on robust plans for Christmas and New Year to ensure that services can be managed appropriately as required. • SLT noted that the frequency of ICT and the under-pinning work groups has been increased in order to manage the demands. • SLT noted that the plans will need to include an assumption in relation to staff absence rates of ~ 30-40% and that some staff will be required to work differently. • SLT reiterated the importance of working flexibly and ensuring that the organisation is fully briefed on the current situation.
Item for assurance	**Integrated Performance Report** • SLT noted the detail as included within the IPR and the work which has been done to ensure that the key information is visible and easily digestible including the plans for triangulation of key data sets. • SLT agreed that moving forward, the previous month's workforce data would be included to ensure that a robust discussion can take place.
Item for assurance	**Assurance and Risk Executive Group Chair's Assurance Report (CAR)** • SLT noted the detail as included in the CAR. **Significant Risk Register** • SLT noted the detail as included within the significant Risk Register and that the Trust currently has 9 significant risks.
Item for assurance	**Clinical Governance Executive Group CAR** • SLT noted the detail as included within the CAR and that NNUH / JPUH and QEH have approved one aligned clinical harm review policy.
Item for assurance	**Investment and Capital Planning Executive Group CAR** • SLT noted the detail as included within the CAR.

Item for assurance	**Monthly Finance / CIP / Capital Update** • SLT noted the update as included within the report and the delivery to month 8 with a clear forward focus required on delivery of the required Capital expenditure to the end of the financial year.
Item for assurance	**Trust Green Plan** • SLT noted that the Green Plan has been developed at pace and will be formally ratified at the Finance and Activity Committee in January 2022 prior to sharing with the ICS. • SLT agreed with the clear focus on virtual appointments and the one stop shop approach. • SLT recognised that in future years we will be more aspirational and that this plan will give us a good baseline to move forward from. • SLT noted that the work is aligned with NNUH and JPUH and that further discussions are planned to ensure absolute alignment. • SLT **approved** the Green Plan with minor amendments for onward consideration by the Finance and Activity Committee recognising that the significant capital investment in the site will need to be considered and reflected.
Item for assurance	**Restoration Delivery Funding** • SLT noted the detailed work which has been undertaken to ensure that we are able to manage the £12 million expenditure which has been allocated to the Trust. • SLT noted the governance processes which are in place.
Item for assurance	**New Hospital Programme Update** • SLT noted the update as included within the paper and the approval of the preferred option by the Board of Directors in early December 2021. • SLT noted that formal SOC submission is anticipated to take place in April 2022 but we anticipate a delay due to the current position within the wider NHS. **Modernising the Estate Programme** • SLT noted that planning permission for the Endoscopy Unit has been granted and that work continues on the Emmerson Unit with a completion date of 24 December 2021 anticipated. • SLT noted that a deep dive on the year 2 and 3 proposed RAAC investment has been completed. Formal feedback by the Trust to NHSEI will take place by 12 January 2022 following approval by internal governance routes.

Item for assurance	**Business Case for approval - DAC** • SLT **approved** the amended DAC OBC recognising that the amendments which have been made are not material. • SLT **approved** the proposed change to the DAC site recognising that significant work has been undertaken to ensure absolute alignment of the DAC programme with the New Hospital Programme.
Item for assurance	**CAR People Executive Group** • SLT noted the detail as included within the report. • SLT noted that an updated Freedom to Speak flow chart has been produced and that it will be shared with SLT members for information. • SLT noted the current staff absence levels and that work is underway to ensure that we are able to fully support staff in the current challenging period.
Risks to refer to risk register	**None**
Other items of business	**None**
Items of Escalation to the Board of Directors	SLT confirmed escalation of the following items; • Clear organisational recognition that there are significant pressures on Urgent and Emergency Care pathways which will have an impact on the Trust's planned elective programme if they continue at the current predicted rates. • Recognition that there are specific areas of concern in relation to staff sickness which are being managed, however, if the Trust sees the forecast impact on staff sickness levels which is anticipated over the Christmas and New Year period, there is a risk that quality of care may be impacted.
Items of Assurance to the Board of Directors	SLT confirmed assurance in relation to the following items; • Robust discussion in relation to 22/23 staff engagement plans and agreement to the principles with an updated plan to be brought back to SLT in January 2022. • Assurance that the elective programme is currently on plan • Assurance that delivery of the financial plan is in line with the agreed trajectories and that a plan for spending the agreed capital allocation is in place with appropriate mitigations as needed. • Robust development of an organisational Green Plan. • Continued progress on the development of the New Hospital programme and wider modernisation of the site.

Attendance record
Attendees:
C Shaw
D Smith
C Benham
J Humphries
C West-Burnham
F Swords
S Jones
A Prime
N Hunter
S Harvey
N Berns
N Hall
N Redwood
D McPartlin
S Bass
K Broome
L Notley
M Burney
M Alexander
L Lippmann

Apologies:
L Skaife-Knight & G Raghuraman

In attendance:
E Mann – Minutes
AJ Weir – Item 7