Agenda item: 21e

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:	5 April 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 22 March 2022.
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 15 February 2021.
Item for assurance	**CEO update** - SLT thanked Sam Bass (Divisional Director) for his support and focus and wished him well in his next role - SLT recognised the progress which had been made and the forthcoming emphasis on the mandatory development programme which will be implemented in quarter one 22/23. The feedback within the 2021 staff survey reinforces the need to ensure that this is a priority - It was noted that there is a national focus on Urgent and Emergency Care and Elective Recovery alongside the internal improvement plans - SLT noted and endorsed the planned changes to the governance structures which will result in the Senior Leadership Team meeting twice a month with a clear and focused agenda and revised membership. The meeting will be renamed Hospital Management Board. There was clear recognition of the need for robust and consistent engagement to enable meaningful debate and action
Item for assurance	**Strategic System Update** - SLT noted the update including the latest position of the Norfolk and Waveney Hospitals Group Committees and the

	refocused work (Urgent and Emergency Care / Elective Recovery / Finance) underpinned by delivery of key enabling strategies including the development of an acute clinical strategy - SLT noted the agreed West Norfolk Place priorities of workforce, systems integration and health inequalities - SLT noted the Cambridgeshire and Peterborough Place priorities which align with the Trust's key areas of focus - SLT reconfirmed the Trust's commitment to developing a proposal with NNUH to explore the delivery of cellular pathology work by NNUH **C&P MCP Children's and Maternity collaborative** - SLT noted the detail as included within the paper and **approved** the commitment of the organisation to fully engage with the development of the MCP within Cambridgeshire and Peterborough for onward consideration by the Finance and Activity Committee and Board of Directors
Item for assurance	**Year 3 Corporate Strategy priorities** - SLT **approved** the Year 3 Corporate Strategy priorities for onward consideration by Committees and the Board of Directors
Item for assurance	**Business Planning 2022/23** - SLT noted the detail as included within the report, including the detailed work which has been completed around demand and capacity / activity planning and investment prioritisation - SLT noted the regional and national expectations in relation to delivery of a financial breakeven position - SLT noted that work continues to ensure that the Trust can deliver a breakeven plan for final submission on 28 April - SLT noted that final decisions in relation to any additional investment over and above investment required to deliver the activity plan will need to be held until the final plan is completed for the 28 April submission - SLT noted the initial Capital allocation which has been received and that work is now underway to confirm the plan
Item for assurance	**Draft annual workplans 22/23** - CSS – principles agreed - Medicine – principles agreed - Surgery – principles agreed subject to alignment of measurable specifics relating to delivery of elective recovery

	- W&C – focus on elective and cancer recovery aligned to national mandates in relation to maternity schemes including Ockenden, CNST etc. Principles agreed - SLT requested that the workplans all reflect divisional targets for QI training and leadership training which is mandatory across all four workplans and that there is consistency in the figures which are included
Item for assurance	**Evolution of Trust brand and values** - SLT **approved** the evolution of the Trust brand (corporate identity) and values recognising the consistency in messaging and incorporation of staff feedback.
Item for assurance	**Chairs Assurance Report (CAR) from Operational Management Executive Group** - SLT noted that the March meeting did not take place as a result of the operational pressures and the planned changes to the governance structures from April 2022. - Thanks were given to the clinical and operational teams who worked exceptionally hard to enable the Day Surgery Unit to revert back to a surgical elective unit to support delivery of the elective plan.
	Elective Restoration and Improvement Plan – performance update - SLT noted the detail as included within the report and the clear focus on delivery of the key national priorities with robust plans in place. - SLT noted the planned governance structure which will support delivery of elective recovery whilst maintaining the clear focus on Cancer delivery - SLT reiterated the importance of ensuring delivery of 104 weeks and recognised the need to ensure that patients are booked well before their breach date to mitigate any risks to achievement
Item for assurance	**UEC Improvement Plan – performance update** - SLT noted that Urgent and Emergency Care performance delivery is a key area of focus for the organisation. - SLT recognised that significant work is required in this area to transform the care which the Trust offers to its patients. - SLT recognised the importance of collaborative working in this area and that it must be clinically led. - SLT recognised that a detailed improvement plan is in development and will be presented in April 2022. - SLT confirmed that the Improvement Plan will report to the Quality Improvement Board and Quality Committee

	Ambulance Handovers - SLT noted the detail as included within the letter - SLT noted the update as received at the national / regional briefing held on 22 March 2022 with clear actions required including daily monitoring of performance **QEH at home** - SLT noted the work which has been completed and requested assurance that the Trust is working in collaboration with ICS partners which was received - SLT noted the work which is underway in relation to Virtual Ward which is consistently being delivered as a model across the three Trusts within Norfolk and Waveney, subject to staff recruitment and availability - SLT requested that the final proposal is shared with SLT members for approval via e-mail recognising the timescales for implementation
Item for assurance	**Urology Transformation Plan** - SLT noted the detail as included within the Urology transformation plan and **approved** the ambition and direction of travel and principles as outlined in the paper. - SLT requested that further detail is included within the transformation plan in relation to; • An update on the plans for management of emergency pathways of care • Clarity in relation to the management of diagnostics, including reporting • Clarity in relation to patient involvement in development of the plan
Item for assurance	**Emergency Preparation Resilience and Response (EPRR)** - SLT noted the detail as included within the paper and the outputs of the self-assessment process - SLT noted the supporting work which is underway within the organisation including an Internal Audit process in relation to Business Continuity - SLT requested that the report includes reference to the additional work which is underway within this area to provide further assurance - SLT requested that all of the core policies relating to business continuity are up to date and available
Item for assurance	**Integrated Performance Report** - SLT noted the detail as included within the report and requested that further work is done on the IPR to ensure that the over-arching narrative is accurate.

	- SLT recognised the operational pressures which the organisation is under and the areas of positive performance in month.
Item for assurance	**Assurance and Risk Executive Group Chair's Assurance Report (CAR)** - SLT noted the detail as included within the assurance report **Significant Risk Register** - SLT noted the detail as included within the significant risk register - SLT noted that there are 10 significant risks on the risk register including the recent addition of risk 392 (roof integrity)
Item for assurance	**Clinical Governance Executive Group CAR** - SLT noted the detail as included within the assurance report
Item for assurance	**Investment and Capital Planning Executive Group CAR** - SLT noted that the meeting did not take place in March due to a lack of quoracy. SLT noted that the meeting will take place on 22 March 2022
Item for assurance	**Monthly Finance / CIP / Capital Update** - SLT noted the update as included within the report and the positive financial performance as at month 11.
Item for assurance	**Financial Improvement Programme** - SLT noted the detail as included within the report and the work which has been completed to date to develop the CIP for 2022/23. - SLT reiterated the importance of robust divisional and clinical engagement.
Item for assurance	**ERF+ funding update** - SLT noted the detail as included within the report and the progress made to date. - SLT recognised that there is robust grip and oversight of this process which has enabled delivery of key strategic priorities associated with the ERF+ fund
Item for assurance	**New Hospital programme – SOC update** - SLT noted the update as included within the paper

Item for assurance	**Modernising the Estate Programme** - SLT noted the update as included within the paper - SLT noted that the Endoscopy and West Dereham works remain on track for delivery - SLT noted that the completion date for the Brancaster works is now at the end of June 2022
Item for assurance	**Estates backlog and compliance** - SLT noted the detail as included within the report - SLT noted the implications of the roof integrity within the overall backlog maintenance requirements and the need to ensure that risks are appropriately reflected and managed - SLT reiterated the importance of ensuring overall visibility of the backlog maintenance requirements within the Trust's governance cycle - SLT agreed that an update paper in May 2022 with a clear view of delivery for 2022/23 is required
Item for approval	**Business case for approval** <u>RAAC business case years 2 – 4</u> - SLT **approved** the business case for onward consideration by the Finance and Activity Committee and thanked the wider team for the work which has gone into development of the comprehensive business case.
Item for assurance	**CAR People Executive Group** - SLT noted the detail as included within the assurance report
Item for assurance	**National Staff Survey** - SLT noted the detail as included within the report and that further detail would be shared from Picker once received - SLT confirmed its commitment to development of clear action plans in response to the feedback
Item for assurance	**Vaccination as a condition of employment** - SLT noted the current position as presented verbally to the meeting
Item for assurance	**Sickness Absence management Target proposal** - SLT noted the current organisational position in relation to sickness absence levels and the detailed plans as included within the report. - SLT noted that further detailed discussions will take place at the divisional and corporate performance review

	meetings in March and that further work will be done to refine the detailed trajectories.
Item for assurance	**AoB – Revised governance structure and terms of reference** - SLT noted the detail as included within the report and the revised approach with confirmation that the Senior Leadership Team will be renamed Hospital Management Board from April 2022
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; - Confirmation that the Trust is making progress in relation to management of elective care including 104 week waits noting that delivery of key elective performance metrics is reliant upon delivery of the UEC pathway - UEC performance and delivery is a risk. The UEC improvement plan is a clear priority for delivery in 22/23 aligned to improvements required in ambulance handover performance - EPRR – SLT have requested further assurance which must be received via Internal Audit and detailed engagement from the organisation. This will be an area of focus for 22/23 - Sickness absence remains an organisational priority and detailed trajectories are in development to enable a step change and improvement in performance - Backlog maintenance update noted including the next steps around prioritisation and delivery for 2022 - National staff survey – recognition that the Trust's results have plateaued and that detailed action plans are required to enable delivery of required improvements
Items of Assurance to the Board of Directors	SLT confirmed assurance in relation to the following items; - Fortnightly Hospital Management Board meetings will be implemented in line with the revised governance arrangements reflecting the breadth of the agenda and priorities for the Trust - Approval of the C&P MCP proposal in relation to Children's and Maternity services. The Trust will be represented by the GM W&C and the Head of Midwifery - Year 3 Corporate Strategy approved for onward consideration by Committees and Board - Draft divisional workplans received and principles agreed subject to triangulation and final presentation for approval in April 2022 - Updated Trust values approved

	- The business planning process is nearing completion with the final financial assumptions currently being triangulated - The Urology transformation plan and direction of travel were approved in principle subject to the inclusion of additional detail relating to Emergency pathways and Diagnostics - Positive finance position up to month 11 including Capital spend and ERF+ plans - Positive work in relation to RAAC including the approval of the business case for onward consideration by Committees / Board

Attendance record

Attendees:

C Shaw
L Skaife-Knight
D Smith
F Swords
A Webster
L Notley
C Benham
J Humphries
C West-Burnham
S Jones
N Hunter
K Broome
L Lippmann
K McGuire
S Bass
N Berns
M Catling
N Hall
M Smith
A Prime

Apologies:

G Raghuraman
D Oakes

In attendance:

E Mann – Minutes