Agenda Item: 21c

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 October 2021
Title of Report:	Assurance Report from the Finance and Activity Committee
Recommendation:	For assurance
Chair:	Graham Ward, Non-Executive Director
Purpose:	The report summarises the assurances received, approvals, recommendations and decisions made at the Trust's Finance and Activity Committee meeting on **22 September 2021.**
Background:	The Committee meets monthly and provides assurance on scheduled reports from all Trust operational committees with a finance and activity (including commissioning) brief.
Item for Escalation	**Urgent and Emergency Care Improvement Plan** The Committee received the monthly update for the Urgent and Emergency Care Improvement Plan. The Committee noted the improvements to date particularly with reference to the relocation of the Coronary Care Unit, the larger medical assessment unit and the piloting of a new streaming service for minor attendances. The Committee was also briefed on the discussions with an ED co-located primary care service. Whilst the operational model was agreed the funding for the service was yet to be confirmed with a system wide finance discussion required.
Item for Escalation	**MRI Business Case** The Committee received a business case from the Clinical Support Services Division for the replacement of the existing MRI scanners. The Division recognised the financial restrictions within the capital programme for 2021/22 and although the preferred option was to replace both MRI scanners the case was seeking approval for the replacement of one scanner. The Committee sponsored the approval for the replacement of one scanner but was informed of two potential sources of additional funding (national funding and ICS funding) that could fund the replacement of the second scanner within the year. These sources were not yet confirmed but the Committee agreed to sponsor the replacement of the second machine should either of the two options be available. The Committee also requested details of the mitigation and temporary scanner solution(s) whilst the replacement programme was being undertaken and that the procurement goes forward with responses required for the provision of both one and two MRI scanners to minimise any procurement delay while seeking the additional funding for the second scanner.

	In summary, the Committee sponsored the approval of one scanner to the Board of Directors and also the replacement of the second scanner to the Board of Directors should the additional funding source be confirmed.
Item for Escalation	**SFIs & Scheme of Delegation Review** The Committee received the updated Scheme of Delegation. This update followed the previous month agreement to the revised business case templates and financial framework. The Scheme of Delegation was sponsored for onward approval at the Board of Directors.
Item for Assurance	**Divisional Presentation – Digital** The Committee received a divisional presentation from the Digital team. The team described the workplan for the year and described some of the key challenges facing the team and the digital transformation agenda, including additional requests being made to the team. The Committee welcomed the presentation, thanked the team for their work and looked forward to the development of the longer term digital strategy.
Item for Assurance	**External Review – Sit Rep Reporting** The Committee received the final KPMG report that was commissioned to give assurance over the Sit Rep reporting processes. The Committee was informed that the report had been considered by the Audit Committee in September and progress was being made against the recommendations as detailed within the action plan. The Committee suggested that a follow-up by the Internal Auditors should be included as part of the Internal Audit programme of 2022/23.
Item for Assurance	**Digital – Cyber Audit Update** The Committee received an update on the action plan to address the internal audit recommendations. The Committee was informed that the report had been considered by the Audit Committee in September. The Committee welcomed the report, the consistent approach in the reporting of the action plan and recognised the good progress made to date.
Item for Assurance	**Corporate Strategy Underpinning Workplan – Estates & Facilities** The Committee received the divisional workplan for the Estates and Facilities division. The workplan gave an overview of the services supplied by the division with specific workstreams and objectives aligned to the organisational strategy as defined within the Corporate Strategy, The Committee welcomed the workplan and agreed that the workplan needed to remain dynamic and responsive to the organisational needs.
Item for Assurance	**Responsive Section of the IPR** The Committee received the responsive section of the Integrated Performance Report. The Committee was informed of the significant increases in emergency demand and the sustained increases in ED attendances. The Committee acknowledged that

	additional bed capacity remained open and was needed to remain open for the rest of the financial year. In terms of elective and cancer services the Committee recognised the potential risk around patients waiting in excess of 52 weeks for elective surgery and also ensuring the Trust complied with cancer access standards. The Committee recognised that the Trust was under significant operational pressures and the levels of activity taking place to manage these pressures.
Item for Assurance	**Elective Care Restoration and Improvement Plan** The Committee received an update to the Elective Care Restoration and Improvement Plan. The Committee recognised the work that had been completed to date and reviewed the various workstreams within the programme. The Committee also reviewed and focused on those areas that needed to continue their improved performance against the planned trajectories.
Item for Assurance	**Monthly Finance and Activity Report Month 5** The Committee received the monthly Finance Report for month 5, with handouts to replace the slides with errors (for which apologies were received from Finance). The Committee recognised the Trust was on plan and remained in a positive position with regards to financial performance. The Committee was informed that the Trust remained on track to deliver the first half year breakeven position as planned. The Committee also noted that additional resource had been aligned to the CIP programme to ensure delivery of the programme for the remaining months of the year. The Committee was informed that the Trust had achieved the 95% compliance level for the Better Payment Practice Code for August. The Committee recognised that the capital programme was underspending against the plan. A more detailed capital update will be presented to the October meeting of the Committee. The Committee was informed that a longer term financial forecast/strategy was in the process of being developed and would be shared with the Committee at the November meeting.
Item for Assurance	**RAAC Business Case Programme Update** The Committee received an update on the implementation of the RAAC business case. The paper described the three main schemes, the progress to date and the key dates for each of the schemes. The paper also gave an update to the Committee on the operational position of the number of propped planks and the completion of the 'tap and test' survey.
Item for Assurance	**Sandringham 6-month Benefits Realisation Review** The Committee received a 6 month benefits realisation of the Sandringham hospital acquisition. The Committee recognised the operational challenges since the acquisition had occurred and requested a further review be completed in 6-12 months.
Item for Assurance	**Winter Plan** The Committee received a verbal update on the work in progress with regards the winter planning process. The Committee understood the work being undertaken and recognised that a

	coherent system-wide winter plan was also required in order to fully support the actions within the Trust.
Item for Assurance	**Sterile Services Steam Boiler Upgrade** The Committee received a verbal update on the status of the sterile services steam boiler. The Committee was informed that a mobile steam boiler was in place to mitigate the risk of failure and that further consideration of the sterile services maintenance programme was needed due to the works required in year 2 of the planned RAAC response works.
Item for Assurance	**National Cost Collection Exercise** The Committee received the initial high level 2019/20 reference cost output with the Trust reference cost of 101 compared to the average cost of 100. The Committee also received the proposals for the submission process of the 2020/21 data gathering exercise. The Committee supported the approach of a review with the Chair of the Finance and Activity Committee and the Director of Finance.
Item for Assurance	**Significant Risk and BAF Report** The Committee received the significant risk register and the Board Assurance Framework Report for strategic objectives SO2 and SO4. The Committee agreed with the updates and the risks aligned to SO2 and SO4.
Risks to refer to risk register:	None
Other items of business:	**Other items the Committee reviewed** The Committee received the forward plan for the Committee's forthcoming activities.

Attendees:
G Ward – Non-Executive Director and Committee Chair
S Roberts – Non-Executive Director
I Mack – Non-Executive Director
C Shaw – Chief Executive Officer
C Benham – Director of Finance
D Smith – Chief Operating Officer
C West-Burnham – Director of Strategy
L Lippmann – Deputy Director of Finance
S Jones – Deputy Chief Operating Officer
S Balmford – Head of Digital (item 6, 18 &19)
L Skaife-Knight – Deputy CEO (item 6, 18 & 19)
N Hunter – Associate Director Estates & Facilities (item 7)
M Alexander – Divisional General Manager (item 15)
N Hall – Chief Digital & Information Officer (item 18)
L Preston – Board / Committee Administrator (minutes)

Apologies: K Broom – Associate Director Planned Care

Observers: Governors – A Walder and Esmé Corner
P Cutler – NHSEI Intensive Support Improvement Director