Agenda item: 24e

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:	2 February 2021
Title of Report:	Chairs 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 **19 January 2021**
Background:	The Committee 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.
CEO update	Thanks were given to all members of TeamQEH for their on-going support and commitment at this difficult time operationally. Feedback was given from the Oversight and Assurance meeting which took place 19 January 2021. The papers will be shared with SLT. It was recognised that positive progress had been made in a number of key areas. Areas of focus continue to be communication with patients and their families / CQC actions / COVID-19 vaccination / COVID restoration and recovery, in the context of ensuring that we are supporting our staff.
COVID-19 update	EU exit – it was noted that there have been no operational implications of us leaving the EU. The supply chain has been maintained. The current position was noted, including the significant pressure which is currently present in the local and national system. SLT were updated on the COVID-19 vaccination position. Plans are in place to increase vaccination capacity and all staff are encouraged to book in for their vaccination. With regard to recovery, the independent sector is being used as appropriate. P1 and P2 surgery continues on site.

Business Cases	• E-Obs – SLT are very supportive of this business case and the transformational impact which it will have upon the organisation. Approved to take forward to Finance and Activity Committee • Birth rate plus – Noted that it is linked to the Ockenden report response. Phased approach noted. Approved to take forward to Finance and Activity Committee • Switchboard lone worker and ADT support – Approved • Family Liaison Officers – the business case was supported. It was recognised that this needs to be an area of focus for the Trust. Amendments to be made to the workforce requirements. Approved to take forward to Finance and Activity Committee with the amendments agreed. • Sterile Services Air Handling Plant / Sterile Services Boiler Upgrade / Sterile Services Washer Disinfectors – confirmed that the costs are within the Trust's capital programme. Approved to take forward to Finance and Activity Committee • CCU Chiller replacement – costs are covered within the agreed capital programme. Approved to take forward to Finance and Activity Committee • Replacement meal trolleys – costs are covered within the agreed capital plan. Approved to take forward to Finance and Activity Committee
Chairs Assurance reports	Chairs Assurance reports were received and noted; • Clinical Governance Executive Group – assurance received from HIIC re learning from outbreaks. No items for escalation • Surgical Divisional Board – Discussions noted in relation to management of elective activity and use of the Sandringham. No formal items for escalation. • Women and Children Divisional Board – December meeting not quorate however discussion took place outside of the formal meeting structure and assurance was given. No items for escalation • Medicine Divisional Board – December meeting cancelled due to operational pressures however discussion took place outside of the formal meeting structure and assurance was given. Progress in relation to specialty governance noted. No items for escalation.
December 2020 performance Update (IPR) – exception updates	SLT noted the exception updates for all domain areas. Noted that maternity KPIs will be reviewed in collaboration with the Divisional Leadership Team with proposed changes coming into effect from April 2021. SLT were not assured by the current mortality ratios and weekend mortality position, but noted the actions which were being taken in relation to Palliative Care services.

	SLT noted the special cause improvement for Dementia Case Finding, however this remains under the Trust target. SLT were not assured by the current position for 18-weeks / 52 week waits / 62-day cancer RTT / 104 day waits / Diagnostics but noted the proactive work which is on-going within the Operational Divisions aligned with the use of the Independent Sector. SLT noted the position in relation to the key People metrics and the impact of COVID-19 in this area. It was noted that a review of mandatory training metrics is appropriate and will be picked up.
Emergency & Urgent Care Improvement Plan	Special Measures funding has been secured to enable employment of 3 Improvement managers to support this work. This programme will be developed with the Divisional Leadership Teams.
Diagnostic Assessment Centre – Update	SLT noted the update. It was noted that the clear steer from NHSE/I is for the overall DAC budget to now be in line with the original SOC - £70 million. The agreed way forward was noted as well as the positive benefits that this development will have for our local population.
Internal Strategic Update – HIP Programme	SLT noted the update with work on-going to develop the Strategic Outline Case. We continue to lobby and work with local media in relation to the 'Back our Bid' campaign. It was noted that this work is being done in parallel with regional colleagues to manage the wider estate and RAAC plank issues. It was agreed that additional narrative in relation to the immediate issues with the roof need to be played in.
Strategic Digital Update	SLT noted the update and progress being made.
Strategic Projects Update	SLT noted the update and progress being made.
Staff Survey	SLT noted the update. The response rate for 2020 national staff survey was noted which was an improvement on the previous year. The key areas of improvement were noted. There are three key areas where significant deterioration has been noted, but these need to be looked at in detail when the full results are shared (March 2021.)

Corporate Strategy KPI monitoring – Quarter 3	SLT noted the update and progress being made with the detail of specific performance against KPIs for each Strategic Objective recognised.
Women and Children's Strategy	SLT noted the strategy which was developed collaboratively within the Division. It was recognised that this had been developed following specific CQC feedback. All Divisional teams will develop a Strategy and will finalise prior to the new financial year. It was noted that some further additions are required for the Women and Children's Strategy in relation to Paediatrics and Gynae.
December 2020 Finance / CIP update	SLT noted the month 9 position. SLT noted that a focus is needed to ensure CIPs and efficiencies are delivered.
STP Update	SLT noted the report detailing the Norfolk and Waveney Hospital Group Committees work, the Hospital Services Strategy work and the on-going discussions in relation to development of an Integrated Care System and Place Based care.
Business Planning 21/22	The delay in publication of the national guidance was noted along with the plans for a dedicated confirm and challenge session for all Corporate and Operational teams in February 2021.
Significant Risk Register	SLT noted the report of the 14 significant risks. SLT were assured in relation to the processes which are in place for the review of moderate and high risks. SLT received confirmation that all risks on the register are correct for the organisation.
Risks to refer to risk register:	None
Issues to escalate:	None

Attendance record

C Shaw	(CS)	CEO, (Chair)
L Skaife-Knight	(LSK)	Deputy CEO
D Smith	(DS)	COO
C Benham	(CB)	Director of Finance
C O'Brien	(COB)	Director of Patient Safety
C West-Burnham	(CWB)	Director of Strategy
C Castleton	(CC)	HRD
F Swords	(FS)	Medical Director
A Brown	(ApB)	Chief Nurse
K Jackman	(KJ)	Divisional General Manager - Women & Children
S Harvey	(SH)	Divisional General Manager – Medicine
M Burney	(MB)	Divisional General Manager - CSS
J Donovan	(JD)	Divisional General Manager – Surgery
F Rose-Smith	(FRS)	Interim Divisional General Manager - CSS
N Hunter	(NcH)	Associate Director of Estates & Facilities
N Hall	(NgH)	Head of Digital Services