

Public Trust Board Paper J

Meeting title:	Public Trust Board				
Date of the meeting:	13 July 2023				
Title:	Escalation Report: Operations and Performance Committee - Public				
Report presented by:	Mike Williams, Operations and Performance Committee, Non-Executive Director, Chair				
Report written by:	Alison Moss, Corporate and Committee Services Officer				
	Decision/Approval		Assurance	x	Update
Where this report has been discussed previously	Not applicable				

To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which

Yes, The BAF Risk 2 around Urgent and Emergency Care, Cause: Demand overwhelms capacity and delays access to services; Event: Failure to meet national standards for timely urgent and elective care.

Impact assessment

- N/A

Acronyms used:

EMCA – East Midlands Cancer Alliance
RIBA – Royal Institute of British Architects
KPMG – KPMG International
LLR – Leicester, Leicestershire and Rutland
BAF – Board Assessment Framework

1. Purpose of the Report

- 1.1 To provide assurance to the Trust Board on the work of the Operations and Performance Committee and escalate any issues as required.

2. Recommendation

That the report be noted. (There are no items for approval).

3. Summary

The Operations and Performance Committee met on 28 June 2023. The meeting was quorate and considered the reports below.

4. Discussion Items

4.1 Elective Care (RTT and DM01) (mitigating BAF Risk 2)

The Committee reviewed the Trust's performance for elective care and diagnostic services.

There had been good progress in reducing waiting times despite challenges such as the recent industrial action. There would only be 1 patient having waited 104 weeks or over by the end of June 2023. The position, in relation to patients waiting over 78 weeks had

deteriorated and it was expected that there would be two patients at the end of July 2023 - before taking into account the impact of any industrial action. There had been a significant reduction in the number of patients waiting more than 65 and 52 weeks respectively.

The Committee noted the actions taken and planned to improve theatre utilisation.

4.2 Elective Care 23/24 Priorities Letter (mitigating BAF Risk 2)

The Committee noted the priorities for elective care as set out in the letter from NHSE received of 23 May 2023. The Trust had assessed its progress against the checklist provided and RAG rated the actions.

4.3 Cancer Quality and Performance Report (mitigating BAF Risk 2)

The Committee reviewed the performance for cancer care, noting that April 2023 saw improvements in three of the nationally reported standards. There had been a deterioration with respect to the 62-day backlog due to the impact of industrial action and Easter/bank holidays. A deep dive with respect to skin cancer highlighted that there was a lack of capacity to ensure timely follow up. A bid for funding, had been submitted to East Midlands Cancer Alliance (EMCA) to clear the backlog.

EMCA had awarded £4.5m funding which would be used for 80 schemes set out in the report.

4.4 West Midlands Senate Review of Cardio/Respiratory and Medicine Acute Services (mitigating BAF Risk 2)

The Committee noted the progress in building three additional wards at Glenfield Hospital. The clinical model for the modular ward had been agreed; it would be used for respiratory care. The other two wards were at the RIBA design Stage 2. There would be an assessment of what service would be located where and the impact of the clinical model for wards at Leicester General Hospital (LGH).

The Committee noted the action plan associated with the West Midlands Senate Review and that the cultural aspects of the plan would be a longer piece of work.

4.5 Briefing for Urgent and Emergency Care (mitigating BAF Risk 2)

The Committee received a briefing on developments in urgent and emergency care. Attendance at Emergency Department had increased by 4,069 on the previous month; performance for the four-hour wait had remained stable but deteriorated slightly for ambulance handovers and the 12-hour wait. There would be a focus on reducing the number of patients waiting over 12 hours. The actions taken to increase capacity were noted.

A plan was being developed for children and young people's emergency care, to improve flow and support an expected surge in demand in Winter 2023/24.

There had been a review of urgent and emergency care by KPMG which noted some particular challenges for LLR including regarding mental health support in certain areas. Its findings would be reviewed in a number of Trust and System meetings to ensure actions were captured and action plans aligned. The Committee asked for more information regarding mental health attendances.

Actions taken to improve hospital discharge and improved performance was noted. The Committee asked about the utilisation of community beds and noted the work further improve partnership working across the system with the UEC collaborative.

It was noted that significant performance improvement had taken place, and yet significant challenges remains including the increased attendance at Emergency Department.

5 Consideration of the BAF risks in the remit of Operations and Performance Committee

5.1 BAF Report

The Committee reviewed strategic risk 2 on the BAF around failure to meet national standards for timely urgent and elective care which was aligned to the Committee and its work plan. The Committee noted the changes to next steps. There were no changes to the risk assurance ratings or controls. The rating was 20 (likelihood of almost certain x impact of major); target rating 9; and tolerable rating is 15.

6. Any Other Business

None.

7. Reports for noting – the following items were received and noted, with no substantive discussion:

- Integrated Performance Report M2 2023/24