

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

MINUTES OF THE OPERATIONS AND PERFORMANCE COMMITTEE (OPC)
MEETING HELD ON WEDNESDAY 22 FEBRUARY 2023 AT 10.00AM, VIRTUAL MEETING VIA
MICROSOFT TEAMS

Present:

Mr M Williams - OPC Chair, Non-Executive Director
Mr B Patel - Non-Executive Director
Mr J Macdonald – Chairman

In Attendance:

Dr R Abeyratne – Director of Health, Equality, and Inclusion
Mr M Archer - Interim Associate Director of Operations – Cancer
Ms G Collins-Punter- Associate Non- Executive Director (non-voting)
Ms S Favier - Deputy Chief Operating Officer
Mr A Furlong – Medical Director
Dr A Haynes, Non- Executive Director
Ms H Hendley - LLR Director of Planned Care (ex officio)
Ms L Hooper – Chief Finance Officer (observing)
Mr R Manton - Head of Risk Assurance
Mr J Melbourne - Chief Operating Officer (non-voting)
Ms N Patel – Corporate and Committee Services Officer
Ms S Taylor - Deputy Chief Operating Officer
Mr J Worrall - Associate Non-Executive Director (non-voting)

RESOLVED ITEMS

12/23 WELCOME AND APOLOGIES

Apologies for absence were received from Mr. R Mitchell, Chief Executive Officer and Ms M Smith, Director of Communication and Engagement. The OPC Non-Executive Director Chair noted that the Chief Financial Officer will attend OPC in an observant capacity.

13/23 DECLARATIONS OF INTERESTS

Resolved – that Operations and Performance Committee formally noted Mr J Worrall, Associate Non-Executive Director, had been appointed as Chair of TrustMed Pharmacy (TGH) Ltd.

14/23 MINUTES

Resolved – that the Minutes of the meeting of Operations and Performance Committee held on 25 January 2023 (paper A refers) be confirmed as a correct record.

15/23 MATTERS ARISING

Resolved – that the Operations and Performance Committee matters arising log (paper B refers) be received and noted.

16/23 KEY ISSUES FOR ASSURANCE

16/23/ Briefing for Urgent and Emergency Care

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OPC received a summary on UHL performance which provided update on assurance and actions taken in relation to Urgent and Emergency Care which related to the BAF risk 2. Ms S Taylor, Deputy Chief Operating Officer particularly highlighted the opening of the pre-transfer unit on front of the balmoral building and the transfer the dermatology from Leicester Royal Infirmary to St Peters which will provide more space for urgent and emergency care. There were also works being done on ventilation at the Glenfield Hospital to improve the placement and adequate ventilation for respiratory within the area. OPC was assured that there is a significant amount of work taking place, with a focus on improving the discharge process, increasing capacity, and scaling intermediate care and social care as part of the national objectives. Ms Sarah Taylor, Deputy Chief Operating Officer, detailed planned actions for additional capacity and partnerships, noting the significant capacity gap which still exists on the UEC pathway along with ongoing financial challenges. The OPC Non-Executive Director Chair requested further information on about the current UTC position in particularly to expanding the services within the community to which Ms S. Taylor, Deputy Chief Operating Officer answered the short-term plans is currently extending hours was Loughborough X-ray Unit and collaborated with the acute care team to provide extended appointments and in addition ensured adequate direction and support for teams from the front door. Long Term was to create a city-based UTC and sourcing additional location to support UEC. The Chief Operating Officer noted that the current system plan is for a new UTC to be open in winter 2024. He believed, along with colleagues at UHL, that there is a more urgent need for additional capacity for winter 2023. Discussions led to the importance of the location for UTC to which Mr J Worrall, Associate Non-Executive Director, discussed the planned location added it may affect patient attendance if not in the city. The Trust Chairman agreed on the importance of the location and commented on the good work on the ambulance handovers and the need to ensure continuing good progress. The conversation moved onto the UHL's position within overall system performance the Chief Operating Officer highlighted the scope to improve performance by focusing on flow in Emergency Department and looking at both urgent care centres. Mr B. Patel, Non-Executive Director, suggested comparing the data to the baseline assessment and using the data to plan forward – it was agreed to present this data to next OPC.

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In terms of the ED 12 hour wait, the Chief Operating Officer noted the focus on reducing the waiting time to four hours or less and increasing community capacity. He also highlighted the importance and challenge of achieving the 92% bed occupancy target to be able to deliver upon the 4 hours wait standard. Recent interventions had given UHL the opportunity to deal with variation in ambulance demand than previously, however the underlying capacity deficit remained

The OPC discussed SDEC and the Medical Director provided assurance that the team were aligned with the approach to increase capacity at the Leicester Royal Infirmary.

The OPC Non-Executive Director Chair welcomed the work on recent improvements.

Resolved – That to present comprehensive understanding of SDEC performance against the baseline assessment and present the findings next month.

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Cancer Quality and Performance Report

OPC received a summary overview on the Cancer Quality and Performance for January 2023. Associate Director of Operations for Cancer noted the 62 – day backlog had seen a significant reduction since November 2022. NHSE/I highlighted that the Trust was the third most improved Trust within the tier 1 and tier 2 cohort. It was added that the 104-day backlog and had managed to reduce the number of patients waiting since Christmas by a third. They had been successful in maintaining the fast diagnostic standards set, and most measures had improved since November 2022.

Dr A Haynes, Non- Executive Director requested the percentage of individuals who were fit screened for asymptomatic colonoscopies, and it was agreed that the figures will be presented next month. Ms G Collins-Punter- Associate Non- Executive Director, queried the priorities for the new head of service in Nuclear Medicine. the leadership. In response the Associate Director of Operations for Cancer noted the leadership would improve productivity and efficiency and to focus on bone scans and prostate pathways

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and measure through access and wait times. Mr J. Worrall, Associate Non- Executive Director, noted the good progress in Urology and Colorectal but noted the skin backlog was behind the trajectory submitted in October 2022, with 35 patients expected to be over 62 days at the end of the year. Associate Director of Operations for Cancer noted the reasons for backlog in skin including and additional need for workforce in plastics. He also highlighted the increased focus on the recovery plan to improve the numbers. The Chief Operating Officer highlighted the importance of focusing on 62-day backlog target and the better management of pathways to achieve the target.

The OPC Non- Executive Director Chair was assured on the good progress but acknowledged there's lots to do to achieve expected trajectories within cancer quality and performance.

Resolved – that to provide information to the next meeting on the percentage of individuals who were fit screened for asymptomatic colonoscopies.

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Elective Care (RTT and DM01)

Ms S. Favier, Deputy Chief Operating Officer, provided an update regarding the elective care recovery process and highlighted areas of risk and summarised actions taken. Despite the significant challenge on the position of RTT (Referral to Treatment), there was continued good progress on the reduction of those patients waiting longest for definitive treatment. Significant risk remained within the position, particularly with industrial action planned over the next few months. The 78-week wait target was challenged to achieve zero 78-week waits by the end of March 2023. A recovery plan was in place with targeted interventions for those specialties most at risk. The Trust Chairman emphasised the importance of understanding the impact of the Junior Doctors industrial action against the numbers to which Ms. S. Favier, Deputy Chief Operating Officer, assured the OPC Committee that it is recognised nationally. It was noted that current trajectories did not consider the impact of the Junior Doctors industrial action.

The LLR Director of Planned Care provided an update on elective diagnostic performance and currently the Trust had the second largest diagnostic waiting list. The volume of patients waiting over 6 weeks and 13 weeks had reduced to 9% and 7% respectively. The OPC Non-Executive Director Chair noted the goal of reduced the waiting list by end of March 2024 and LLR Director of Planned Care, noted the ideal level to get to year 2019/2020 levels but the current number was based on existing interventions and was expected to improve. LLR Director of Planned Care, alongside with the Chief Finance Officer, highlighted the Elective Recovery Fund (ERF) and the changes to the way it would be funded from next month onwards.

OPC Non-Executive Director Chair noted the good improvements presented.

Resolved: that the contents of the report be received and noted.

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Waiting List Management Report

OPC considered the Internal Audit review of UHL waiting list management processes. The audit was presented by The Chief Operating Officer and Ms S. Favier, Deputy Chief Operating Officer and provided an objective opinion on the effectiveness of the controls in place.

Ms S Favier, Deputy Chief Operating Officer highlighted to the OPC the next steps in which the audit report would be re-issued by 360 Assurance and discussed at Audit Committee and OPC. OPC was assured there were agreed actions to address any risks raised by the audit and requested sight of the action.

Resolved: that to bring an action plan back on waiting list management in May 2023

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17/23 ITEMS FOR NOTING

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1 **Integrated Performance Report 9 2022/23**

Resolved – that the contents of the Integrated Performance Report M9 2022/23 (paper H refers) be received and noted.

18/23 CONSIDERATION OF BAF RISKS IN THE REMIT OF OPERATIONS AND PERFORMANCE COMMITTEE

The OPC reviewed strategic risk 2 on the BAF around failure to meet national standards for timely urgent and elective care which was aligned to the remit of OPC and its work plan. There were no matters of concern from the strategic risk or significant changes proposed to the content this month. The OPC noted the updates made in the month in red text and the progress with internal control around the UHL Discharge Programme of Work reporting to Strategic Patient Discharge Group and OPC.

There were no changes proposed to the score of this risk: Current rating 20 (likelihood of almost certain x impact of major), Target rating 9 and Tolerable rating 15.

Resolved – that the contents of the report be received and noted.

19/23 ANY OTHER BUSINESS

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19/23/1 Overall Performance Update

The Chief Operating Officer noted that although the challenges remained in all areas, clear progress had been made. The overall trend was improving but still challenged. A recent national elective care visit had participated in various meetings with the wider leadership team at UHL and had acknowledged the skill, commitment, and drive of the senior team leading the elective program. The OPC Non- Executive Director Chair welcomed the good improvement but recognised that it was still a very challenged situation and that there was work to be done to achieve numbers from 2019.

20/23 IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF OTHER COMMITTEES

Resolved – that there were no items to be highlighted for the attention of other Committees from this meeting of the OPC.

21/23 IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD

Resolved – that no items be highlighted to the 9 March 2023 public Trust Board via the summary of this Committee meeting, for information.

22/23 DATE OF THE NEXT MEETING

Resolved – that the next meeting of the OPC be held on Wednesday 29 March 2023 at 10.00am (virtual meeting via MS Teams).

The meeting closed at 11.45 am

Ninakshi Patel - Corporate and Committee Services Officer

**Cumulative Record of Members' Attendance (01.04.22- 31.03.23):
Voting Members**

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% Attendance</i>	<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% Attendance</i>
M Williams (Chair)	10	10	100	J Melbourne	10	9	90
A Furlong	10	7	70	E Meldrum (until May 2022)	1	0	0
A Haynes	10	8	80	R Mitchell	10	7	70
J Hogg (from May 2022)	9	4	44	B Patel	10	10	100
J McDonald	10	7	70				

Non-voting members

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% Attendance</i>	<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% Attendance</i>
G Collins-Punter	10	6	60	J Worrall	10	10	100
H Hendley	10	9	90				