

Public Trust Board Paper K

Meeting title:	Public Trust Board				
Date of the meeting:	14 September 2023				
Title:	Escalation Report: Operations and Performance Committee 30 August 2023 - 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:

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 30 August 2023. The meeting was quorate and considered the reports below.

4. Discussion Items

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

The Committee reviewed cancer performance for June 2023, an overview of July 2023 and prospectively for August 2023. It was reported that the Trust had made good progress at the beginning of the year to recover performance for cancer, however, the industrial action had impeded the Trust's progress.

Performance had improved in June 2023 for nine of the ten national standards, the target for one of these, 31-Day subsequent Drugs, had been met.

The Trust was meeting fortnightly with NHSE and the focus was on reducing the number of patients waiting over 62 days and delivery of the target of 75% of patients being diagnosed within 28 days. The report set out the Trust's regional and national position noting that it had improved. As a result, it was anticipated that it would move from tier 1 to tier 2 which would reduce the oversight from NHSE.

Progress had been made with respect to the Faster Diagnosis Standard. Performance was at 72.4% in June (against the standard of 75%). The Committee discussed the variation in performance across tumour sites and the challenges for urology, skin and colorectal cancers.

The Committee took assurance noting the continued improvement in cancer performance. It agreed that there should be a focus on the variation in performance across tumours sites with the ambition to reach the 75% for each site.

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

The Committee noted developments in urgent and emergency care. It was reported that attendances had reduced. Performance against the 4-hour standard had improved as had ambulance handovers. Actions taken in July 2023 to improve flow through the hospital were noted. There was more work to do on paediatric bed reconfiguration, cancellation of elective care and resetting the use of community beds.

Work on improving simple discharges was noted. There would be a workshop to explore variations in practice, particularly at weekends. With respect to complex discharges, progress was being made. Work with system partners was needed to ensure there was the right kind of capacity and packages of care available.

The Urgent and Emergency Care Plan for Children and Young People, agreed by the System, was appended to the report.

With respect to mental health attendances at Emergency Department, KPMG had found that the Trust was seeing a high number of patients who were waiting too long. The actions being considered by Leicestershire Partnership Trust's Mental Health Team were set out in the report.

It was noted that NHSE had set out the national approach to winter planning and the Trust was required to respond by 11 September 2023. The Trust would assess the plans against the 10 high impact interventions and a further update provided at the next meeting. The Trust was required to submit trajectories for performance against the 4- hour and 12-hour wait standards and bed occupancy.

The Committee discussed the prevalence of respiratory conditions in the winter, triage at the Emergency Department front door, non-admitted breaches and access to and improving alternative services. With respect to system working, it was noted that a revised governance structure for Urgent and Emergency Care had ensured some progress. However, there was a need to focus on availability of community beds, Urgent Treatment Centres, and transacting cost improvement schemes.

The Committee took assurance from the actions taken and the next steps planned. The Chief Operating Officer would be reporting on the System's plan for urgent and emergency care to the next meeting (prior to Trust Board in October 2023).

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

The Committee considered the latest position with respect to waiting times and actions to improve performance.

It was reported that the challenge remained significant, particularly given the impact of industrial action, which was slowing the recovery trajectory for both 78-week waiters and 65-week waiters.

There were no patients waiting over 104-weeks for treatment. The 78-week position had deteriorated and the trajectory for achieving zero was October 2023.

The letter from NHSE setting out three key actions relating to outpatient transformation and validation of waiting list was noted. The Trust would need to self-certify the arrangements in place to be signed by the Chief Executive and Trust Chairman by 30 September.

The Committee noted that work was progressing on the Hinckley Diagnostics Centre with a Business Case presented in the next two months. There was a pre-Consultation Business Case for a hub in Lutterworth which would add capacity.

The Committee took assurance with respect to performance and awaited a further report on the winter planning.

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. 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 M4 2023/24