

## BOARD SUBCOMMITTEE ASSURANCE REPORT

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|-----------------------------------|---|
| <b>Presented for:</b>             | Information   |
| <b>Committee Name:</b>            | Performance & Estates Committee                         |
| <b>Presented by:</b>              | Gareth Tipton, Non-Executive Director (Committee Chair) |
| <b>Date of Committee Meeting:</b> | 28 February 2022  |

### Items received by the committee for assurance:

| Agenda Item                     | Level of Assurance   | Board Action Required?<br><small>(double click to select)</small> |
|---------------------------------|----------------------|---|
| Operational Performance Report  | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| Urgent Care Improvement Plan    | Partial Assurance    | <input checked="" type="checkbox"/>                               |
| Recovery Update                 | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| Cancer Performance              | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| Operational Risk Register & BAF | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| Estates Escalation Report       | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| RAAC Update                     | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| PFI Contract Management         | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| Deep Dive Compliance Report     | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| Backlog Maintenance             | Reasonable Assurance | <input checked="" type="checkbox"/>                               |
| Estates Risk Register & BAF     | Reasonable Assurance | <input checked="" type="checkbox"/>                               |

### POINTS OF ESCALATION

- Site capacity remains a significant challenge with the number of patients presenting to urgent care services remaining high. This is anticipated to remain an issue over the next few months, continuing to impact flow through the hospital and resulting in long waits for patients admitted from ED. The Trust remains in the bottom 10 hospitals nationally for 4 hour performance.
- Cancer performance remains challenged, particularly across 2 week wait and 62 day performance standards. The number of patients waiting over 104 weeks from referral to first definitive treatment continue to increase.
- 12 hour trolley waits increased to 381 in January from 129 the previous month.

### KEY ISSUES

- The Operational Performance report was discussed. Capacity within the Trust remains a significant challenge with additional pressure from patients with Covid-19 through January.
- A significant number of patients remained in the ED department for over 12 hours. High bed occupancy and exit block is key factor. Work is in train to strengthen leadership in ED.
- The Urgent Care Improvement 10 point action plan was reviewed and gaps discussed. The Committee will review the plan in full at the next Committee to gain the assurance it requires regarding solid and fully resourced actions. The Chief Medical Officer continues to prioritise and streamline the governance/ meeting framework underpinning the plan.
- A paper on Cancer performance and recovery was presented to the Committee. Performance remains challenged and the Cancer Improvement Plan and working party was discussed. Additional capacity is being mobilised which will support skin, breast and colorectal. Cancer

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|--|---|
| <b>BOARD ASSURANCE FRAMEWORK &amp; RISKS</b><br><br><b>CELEBRATING OUTSTANDING PRACTICE &amp; INNOVATION</b> | <p>recovery trajectories will be updated based on revised assumptions and reviewed at the next Committee.</p> <ul style="list-style-type: none"> <li>• The Committee discussed highlights from the Estates escalation report; progress against PAM actions will continue to be regularly reviewed.</li> <li>• RAAC mitigation work was discussed, including the onboarding of more project management resource which is in progress.</li> <li>• The Committee received an update on PFI Contract Management, the Deep Dive Compliance report and Backlog Maintenance</li> </ul> |
|  | <ul style="list-style-type: none"> <li>• The Operational and Estates risk registers and BAF were reviewed on an exceptional basis focusing updated risks and those with inadequate controls.</li> </ul>   |
|  | <ul style="list-style-type: none"> <li>• N/A</li> </ul>   |

**LEVELS OF ASSURANCE**

| <b>Level</b>          | <b>Description of Level of Assurance</b>  |
|-----------------------|---|
| Substantial Assurance | The report highlighted a sound system of control, designed to address the relevant risks with controls being consistently applied. Highly unlikely to impair the achievement of both system and strategic objectives. |
| Reasonable Assurance  | The report did not highlight any material weaknesses in the system of internal control that would present material risks to the achievement of both system and strategic objectives.                                  |
| Partial Assurance     | The report highlighted some material weaknesses in the system of internal control that would present material risks to the achievement of system objectives. May also impair achievement of strategic objectives.     |
| Limited Assurance     | The report highlighted significant material weaknesses in the system of internal control that would present material risks to the achievement of both system and strategic objectives.                                |