

## CHAIR'S KEY ISSUES

### ISSUES FOR REFERRING / ESCALATING TO BOARD / COMMITTEE / TASK & FINISH GROUP

<b>ORIGINATING BOARD / COMMITTEE / TASK &amp; FINISH GROUP:</b>		Finance and Performance Assurance Committee	<b>DATE OF MEETING ISSUE RAISED:</b>	23rd January 2020
<b>CHAIR:</b>		Julie Parker	<b>LEAD EXECUTIVE DIRECTOR:</b>	Director of Finance
Agenda Item No.	DETAILS OF ISSUE:	FOR APPROVAL / ESCALATION / ALERT / ASSURANCE / INFORMATION?		Board of Directors Update
5	<p><b>Junior Doctor Overspend</b> Report presented that has been considered at the Operational Delivery Group. Rotas being re-costed to be reflected in 2020/21 budgets.</p>	Assurance		
6	<p><b>Performance</b> Emergency Department performance for December 2019 was 88.14% (89.66% Nov) for Colchester and 78.31% (82.36% Nov) for Ipswich. The ESNEFT performance was 84.77% in December, which was a deterioration on November's performance of 87.09%; below both the trajectory, and the National Standard of 95%.</p> <p>Cancer performance - 62 Day Cancer Waits for 1st Treatment remains below Target. Performance for December 2019 is a deterioration at 68.1% (Nov 76.8%) which is 11.5% below the trajectory of 79.6% and below the 85% National standard. 168 patients had been waiting over 104 days in December an increase from 152 in November.</p> <p>RTT – December 2019 current RTT position was 79.7% (Nov 81.2%). This is below the trajectory set of 88.8% for the month. 1 patient waited over 52 weeks in December. Pressures from winter have had a significant impact on performance and this will continue into January. The performance levels here were of particular concern</p> <p>Community metrics performance is at or better national benchmarks in all areas but there was a deterioration in performance in December in Therapies, which is being investigated. Work is ongoing to provide assurance that the data being considered is robust.</p>	Escalation re RTT performance		
7	<p><b>Finance Report (including CIP 19/20)</b> As at the end of December, the Trust is £7.5m off the control total year to date. Drivers of this continue to be shortfall on CIP delivery, under performance on specialist income and overspends on junior doctors.</p> <p>Capital is underspent against plan year to date by £3.4m which is a significant reduction on the underspend reported last month. Forecast is still to deliver the plan by year-end. New schemes have been identified following the reprioritisation exercise earlier in the financial year and to use potential slippage before year-end. Capital delivery continues to be monitored through the Investment Committee, which includes the Divisions.</p>	Assurance		

	<p>Revenue risks and opportunities – the overall Trust forecast remains at an adverse variance against control total of £9.4m with plans to mitigate this through discussions with Commissioners. Some divisions are forecasting a deterioration in their financial performance, which is being offset by additional central income. Some of the deterioration will be recurring, which will add additional pressure to the 2020/21 budget setting.</p> <p>£17.2m CIP schemes are forecast to be delivered in this financial year but that is £14.7m less than the £31.9m target.</p>		
<b>8</b>	<p><b>CIP 2020/21</b> The CIP target for 2020/21 is £18.8m (2.5%). Significant work underway to develop plans but further work needed.</p>	Assurance	
<b>9</b>	<p><b>NHS Plan</b> Detailed guidance has been delayed. Expected w/c 27/1/20. First submission of the plan that is consistent with long term plan is to be submitted 5/3/20 and final plan by 29/4/20.</p>	Information	
<b>10</b>	<p><b>Building for Better Care Phase 1</b> Projected capital costs have increased by £1.3m to £33.7m plus £2.03m for the MRI and the programme has been delayed by 6 months. Affordability and funding sources need to be made more explicit.</p> <p>Estates rationalisation options that are mentioned in the paper need to be considered previously by the Board or considered in the context of a non-clinical services strategy.</p>	Escalation	
<b>11</b>	<p><b>Financial Governance Report</b> New financial governance arrangements proposed which devolves greater freedom for decision making on revenue to divisions and divisional control totals that have recognised underlying overspends. Accountability arrangements remain the same. The Committee provided comments on the proposals</p>	Information	
<b>12</b>	<p><b>Alliance Development- NEE</b> Publication of the System Strategic Plan for the Suffolk and North East Essex ICS, which will set out how the NHS long-term plan and ICS higher ambitions will be delivered over the next 5-years expected soon. Work is continuing on the Alliance Local Delivery Plan, which will support the ICS strategic plan. £2.8m projects have been supported by the Alliance Investment Fund. The governance will work through the CCGs.</p>		
<b>13</b>	<p><b>Investment Group</b> CKI from 9/12/19 noted.</p>		