

## Board of Directors

Thursday, 03 September 2020

<b>Report Title:</b>	Performance Report Month 4 (July) 2020/21
<b>Executive/NED Lead:</b>	Director of Finance
<b>Report author(s):</b>	Financial Planning Officer with relevant Executive Directors
<b>Previously considered by:</b>	Monthly Report to Board of Directors

Approval

Discussion

Information

Assurance

### Executive summary

The report for month 4 (July) outlines the performance of the Trust. It includes the Trust's key performance indicators, and it provides analysis at primarily an overall organisational level, though for some areas there is discussion of performance by site (notably mortality and A&E access).

Please note that because of the exceptional circumstances of the Covid-19 pandemic, many aspects of the Trust's 'normal' working have been dramatically impacted. In a number of areas, both national and internal reporting has been suspended or amended (for example, Divisional Accountability Meetings are not being held between March and August). Where reporting does continue, performance may vary appreciably from previous months. Coupled with the need to minimise the administrative burden on operational staff that contribute to this report, there are consequently sections where the usual content is abridged or no longer included.

The report includes sections measuring performance against NHS Improvement's Single Oversight Framework (SOF), as well as outlining work that is now progressing in relation to the accountability framework.

Progress in a number of areas is detailed in the attached report. Key points to note include:

#### Quality & Patient Safety:

- HSMR – Latest final data available for discharges during March 2020 showed an in-month HSMR of 94.6 for the Trust (109.3 when last reported as an incomplete update for March). The 12-month rolling HSMR figure for ESNEFT was 102.3 at the end of March 2020 (previously reported March figure was 103.6). ESNEFT is 1 one of 8 Trusts in the region of 15 non-specialist Trusts with a 'higher than expected' HSMR. There is one patient safety indicator alerting currently in Dr Foster for deaths in low risk groups; this is as a result of Covid-19 deaths being counted in the 'viral illness' group.
- By site, Colchester reported an in-month HSMR of 105.6, with a 12 month rolling figure of 105.3. Ipswich data showed an in-month HSMR of 89.2, with a 12 month rolling figure of 103.4.
- The SHMI for the 12 months to February 2020 was 1.0779, compared to 1.0830 for the 12 months to January 2020 (last update). This metric is only available at Trust level.
- Serious harm falls – There was 1 fall with serious harm in July at the Colchester site.
- There were 21 developed grade 2 pressure ulcers reported in July in relation to ESNEFT hospital beds (4 Colchester, 1 Community & 16 Ipswich). There was 1 developed grade 3 pressure ulcer reported on the Ipswich site. 16 grade 2&3 ulcers were recorded in the previous month.
- There were 5 incidents considered to meet the criteria of being a serious incident and reported

to commissioners in July.

- Complaints – there were 84 complaints in July, an increase from the 63 recorded for June.
- Infection control – There were no MRSA Bacteraemia's identified during the month of July. Isolates (patients colonised) were 2 on the Colchester site and 0 on the Ipswich site.
- There were 2 cases of C.diff reported at Colchester Hospital (1 HOHA, 1 COHA) and 4 at Ipswich Hospital (2 HOHA, 2 COHA). There are no C.diff national objectives set for 2020/21 to date. There are 2 outstanding 2019/20 cases relating to Ipswich Hospital. These are being finalised.
- Caesarean section rates – these were 32.12% for Colchester and 33.45% for Ipswich (June data). These scores mean that the ESNEFT rate of 32.43% is above the national NMPA rate target of 25.5%.

**Operational:**

- A&E 4 hour standard performance for the economy in July was 97.17%, above the national standard of 95%. The Colchester site delivered 96.83% whilst Ipswich achieved 97.69%.
- July's current RTT position is 43.44%. This is below the National Standard of 92%.
- 62-day cancer waits for first treatment remain below the national target of 85%. Performance was 84.04% for July, which is below the national standard of 85%.

**Finance:**

- In July and before Covid-19 costs, the Trust's income exceeded costs by £0.3m (YTD this value is £3.7m). Covid-19 related costs of £3.5m (£12.8m cumulatively) were incurred in the month, which took the Trust into deficit. However, as required by national guidance, the Trust has assumed the receipt of £3.2m 'retrospective top-up' to bring the in-month position to break-even against control total.
- The Trust had significant cash holdings at the end of July. The value is particularly high and is driven by national cash management plans which saw Trusts receive 2 months of income in April to ensure liquidity during the Covid-19 response, together with the receipt of 19/20 FRF monies (notably additional incentive monies).
- It is important to note that during the Covid-19 response there are interim financial arrangements which mean that any external reporting of financial performance is limited by the implementation of a plan which doesn't reflect an internal plan or budgeted costs. Rather it is an indicator of how the Trust's costs compare with those incurred on average between November 2019 and January 2020.
- The Trust's Use of Resources rating is assessed as 3 ('requires improvement').
- At the end of July the Trust reported capital spend of £1.6m. Of this £0.3m related to Covid-19. It is expected that capital requirements agreed as part of Covid-19 costs will be funded on top of the Trust's capital allocation. From 19th July there was a new national process whereby, to receive national funding, any Covid-19 capital costs need to have been agreed prospectively by NHSE/I.

**People & Organisational Development:**

- Voluntary turnover (rolling 12 months) increased to 7.1% (from 7.0%) in July for ESNEFT.
- Mandatory training compliance increased to 87.6% in July (June 86.1%).
- Appraisal compliance increased to 76.8% in July (June 72.1%).
- Overall nursing fill rates were 88.4% in July, an increase compared to the previous month (88.2%).

**Action Required of the Board/Committee**

- To note the Trust's performance

**Link to Strategic Objectives (SO)**

**Please tick**

SO1	Keep people in control of their health	✓
SO2	Lead the integration of care	✓
SO3	Develop our centres of excellence	✓
SO4	Support and develop our staff	✓
SO4	Drive technology enabled care	✓
<b>Risk Implications for the Trust</b> (including any clinical and financial consequences)		Noted within the separate escalation reports
<b>Trust Risk Appetite</b>		Quality: The board is cautious when it comes to quality and places the principle of "no harm" at the heart of the decision. It is prepared to accept some risk if the benefits are justifiable and the potential for mitigation is strong
<b>Legal and regulatory implications</b> (including links to CQC outcomes, Monitor, inspections, audits, etc)		The report includes dashboards of performance against key national targets.
<b>Financial Implications</b>		20/21 planning suspended due to Covid-19. National expectation is that providers achieve a breakeven position in M1-4, as per guidance from NHSI/E - and the Trust intends to deliver this. Prior to the suspension of planning, the notified Financial Improvement Trajectory (FIT) for ESNEFT in 2020/21 was to achieve a deficit of £34,049. It had also been confirmed that upon delivery of this target, the Trust would receive equivalent FRF funding to support a balanced position.
<b>Equality and Diversity</b>		None apparent