

CHAIR'S KEY ISSUES

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

ORIGINATING BOARD / COMMITTEE / TASK & FINISH GROUP:		Integrated Assurance Committee	DATE OF MEETING ISSUE RAISED: 27.10.20	
CHAIR:		Carole Taylor-Brown, Non-Executive Director	LEAD EXECUTIVE DIRECTOR: Nick H	ulme, Chief Executive
Agenda Item No.	DETAILS OF ISSUE:			FOR APPROVAL / ESCALATION / ALERT/ ASSURANCE / INFORMATION
2.1	 The governance processes The situation is not causin positive patients at Colche Work is underway to support The Trust Chair drew attace requested a paper to Board 	einstated no action on reinstating the Ethics Group. This will s to ensure appropriate arrangements during any escalation g adverse pressure as yet on elective activity/recovery ho ster are increasing ahead of Ipswich. Noted tier 2 Covid is a port managing elective work flexibly across sites if needed. ention to an email from the Regional NHSEI Director cor d next week. ood, an increase in demand is anticipated re asymptomatic	Assurance ALERT	
3.1- 3.4	 The committee was update No significant issues to ese The nursing acuity report business planning process The maternity collaboration and the related matters ab report was duly referred ba 	was received which had minimal budgetary impact and du es. n report was received, and a number of quality issues deba out the continuity of care had not been through the normal b	e to be considered through normal ted; it was noted that birth rate plus	Assurance
4.1- 4.2	Operational Performance The Committee reviewed t	he acute and community performance reports and reform ar	d recovery dashboard.	Assurance

	 No significant issues to escalate. Work is still underway to develop outcome measures for community services the first iteration of which is expected at the next IAC. The Trust is showing good progress overall in recovery thanks particularly to significant work by clinical teams. The Committee expressed interest in wider benchmarking data for assurance. Risks around months 7-12 and the potential impact of COVID surge were discussed alongside the need to align this to the business planning process for next year. 	
5.1- 5.3	 Financial Performance The forecast month 6 report is a break-even position. The Committee debated the implications of the financial envelope for SNEE months 7-12 and the directive around system forecast deficits – which was £1.5m for ESNEFT to cover 'other' lost income e.eg. carpark income. The position for other partners in SNEE showed an overall system deficit of £10m. Risks around phase 3 – months 7-12 were discussed alongside including the risks of EIS re system performance a 2nd Covid surge and the wider implications of EIS penalties. A detailed report on CIP progress was received which shows good progress although Corporates Services remains challenged. The Medical Optimisation Programme was presented in detail to show CIP progress and assurance. The Business planning principles 21/22 were received and reviewed. A presentation on the utilisation of local weighted activity unit data was received; it was noted this is now available to service teams and updated monthly. 	Assurance ALERT
6.1 - 6.3	 Workforce Performance The workforce report was discussed – some suggestions including incorporating a key highlights summary page were requested. There were no issues to escalate; the Committee noted the progress with flu vaccinations and staff survey responses. The EDI overview report was noted. An update on the faculty of education was received highlighting the HEE proposed New Education Contact. 	Assurance
7.1	 Governance Risk and Regulatory The Health and Safety quarterly report was received; no issues to escalate. 	Assurance