

**Trust Board of Directors Meeting
Report Summary**

Date of Meeting: Thursday 6 July 2023	
Title of Document: Performance Report Month 2 (May) 2023/24	
To be presented by: Director of Finance	Author: Deputy Finance Manager with relevant Executive Directors
1. Status: Discussion	
2. Purpose:	
Relates to:	
Strategic Objective	✓
Operational performance	✓
Quality	✓
Legal/Regulatory/Audit	✓
Finance	✓
Governance	✓
NHS policy/public consultation	
Accreditation/inspection	
Anchor institutions	
ICS/ICB/Alliance	
Board Assurance Framework (BAF) Risk	
Other	
3. Summary:	
<p>The report for month 2 (May) 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). The Trust's post COVID-19 recovery progress is now included as part of the operational commentary and analysis. Divisional Accountability Meetings to discuss April's performance took place on the 6th, 7th and 9th of June. Meetings for Corporate services took place on 12th June.</p> <p>The key performance headlines, for divisions and corporate CDGs as reflected in the Trust's Accountability Framework, are detailed in the report. Key points to note this month include:</p>	

Quality & Patient Safety:

- The February 2023 in-month HSMR was reported at 122.8. Data excludes COVID-19 on admission. Colchester reported a position of 137.7 and Ipswich 100.4.
- The SHMI for the 12 months to December 2022 was 1.0780 for ESNEFT (as expected); 1.0310 for Ipswich (as expected); and 1.1127 for Colchester (as expected).
- Serious harm falls – There were 10 falls resulting in serious harm in May. There were 7 cases at Colchester Hospital and 3 cases at Ipswich Hospital. No cases were reported at Suffolk or NEE Community Hospitals. An E-learning package is ready to launch and there are two new QI projects planned – the use of a fall prevention pack for admission areas and one on the use of activity trolleys to reduce patient agitation.
- There were 38 reportable pressure related injuries in May in relation to ESNEFT hospital beds. Ipswich reported 4 cases including 1 grade 2 ulcers and 3 grade 3. Suffolk Community hospitals recorded 1 grade 2 ulcer. Colchester recorded 28 cases, 19 grade 2 and 9 unstageable. NEECS reported 5 cases, 3 grade 2, and 2 unstageable.
- Postpartum haemorrhages: improvements have been seen from both sites at the beginning of 2023 from the weekly data, coinciding with new guideline implementation. The Trust reported a rate of 2.11% for PPH (NMPA vaginal) in April against a target of equal to, or less than 3.3%, and 3.9% for PPH (NMPA C-section) rate relative to a target of equal to, or less than 4.5%
- Preterm births: Pre term births were 8.54% against a target of less than or equal to 6%. Quality improvement projects are underway linked with the national ambition to reduce the rate of preterm births from 8% to $\leq 6\%$ (in conjunction with SBL element 5).
- There were 0 still births reported to MBRRACE in April.
- Smoking at the time of delivery in April was 7.97% against a target of less than or equal to 6%
- Complaints – there were 121 (89) complaints in May. Colchester reported 64 (44) and Ipswich reported 57 (45). There was 1 high level complaint reported in Neurology Colchester.
- Infection control – There were no Trust apportioned MRSA Bacteraemias identified in May. There were 9 new MRSA isolates identified, 6 in Colchester/NEE and 3 on the Ipswich/East Suffolk sites.
- There were 4 cases of C. diff reported at Colchester Hospital (4 HOHA, 0 COHA) and 5 at Ipswich Hospital & Community (5 HOHA, 0 COHA). The C. diff case threshold for 2023/24 is 101. There have been a total of 14 C. diff cases April 2023-end of May 2023 (the total number of HOHA and COHA cases).
- There were 2 cases of MSSA at Colchester Hospital (2 HOHA, 0 COHA) and 4 cases at Ipswich Hospital (1 HOHA, 3 COHA).
- There were 9 cases of E. coli across ESNEFT sites in May. There were 5 at Ipswich Hospital (3 HOHA, 2 COHA) and 4 at Colchester Hospital (2 HOHA, 2 COHA).

Operational:

- A&E 4-hour standard performance for the economy in May was 74.2%, below the standard of 76%. The Colchester site delivered 78% whilst Ipswich achieved 67.5%.
- May's current RTT position is 58.9%. This is below the National Standard of 92%.
- 62-day cancer waits for first treatment remain below the national target of 85% at 73.7% (not validated) for May.
- Diagnostic performance for patients waiting over 6 weeks was 7.2% in April; this remains above the national target of 1%. The Trust will be working to a 5% target for 23/24.
- In terms of recovery, activity increased across the board in month. Elective and daycase inpatients increased by 11.5% and 11.6% respectively. Outpatient firsts and follow ups also increased by 22.1% and 9.3% respectively. Higher levels were reported against 2022-23 activity levels for the month for all activity types except for follow-ups which were 'only' 92.4% of the previous year's value.

- For diagnostics, activity increased for both CT and ultrasounds in month for ESNEFT by 0.9% and 14.3% respectively. Lower levels were seen in MRI which decreased by 0.8% and endoscopies by 13.4%. Both CT and Ultrasounds exceeded 2022-23 activity levels, but with MRI failing to achieve the prior year level at 88.2%, and endoscopies were also down at 87.6%.
- The waiting list increased in month by 0.6% for ESNEFT and is 2,259 patients over trajectory. However, long waiting patients metrics all improved in month with 65+ week waiters decreasing by 89 patients. This was reflected at both sites with Colchester reducing by 34 patients and Ipswich reducing by 55 patients. Reductions were also seen in 78+ week waiters, 98+ week waiters and 104+ week waiters.

Finance:

- In May, the Trust reported an actual deficit of £0.842m, and an adverse variance of £0.212m against the external plan which was a deficit of £0.63m.
- The planned deficit is primarily related to the EPR scheme where costs are being incurred from April, but national revenue funding is not expected until September.
- Income reported a favourable variance to plan in May predominately related to contract variations agreed after the plan was set. The Trust also benefitted in month in relation to ERF and the associated risk that had been reflected in April.
- In May, the Trust reported an overspend of £0.250m within pay, which has contributed to a small favourable variance £0.230 YTD. There are no significant variances to report.
- Within non-pay, an adverse variance of £2.615m was reported in May, £2.960m YTD. The adverse variance was made up of under-delivery of CIP, clinical supplies and services and purchase of healthcare.
- May reported an increase in agency spend, and this accounted for 2.4% of all pay costs (compared to 3.8% YTD May 2022). Whilst the nursing and midwifery staff group reported a reduction in spend (mainly with ED departments on both sites with a move to cover care via bank), medical costs increased within C&D and SGA with vacancies in hard to recruit areas.
- May reported an increase in bank expenditure, predominately within the nursing, midwifery and HCA workforce in Medicine Colchester with a planned move from reliance on agency to bank support. A cumulative adjustment was also reflected in May in respect of backdated pay award costs for bank shifts in both April and May.
- The Trust held cash of £64.8m at the end of May.
- The 2023/24 capital plan was submitted with a value that was in excess of CDEL by £1.2m, essentially over-committing against CDEL but within an agreed threshold (5% 'over-programming' was allowable, but the expectation is that CDEL will still not be exceeded).
- Following a review, the impact of the slippage from 2022/23 meant that the position moved adversely to become £3.5m over CDEL. Whilst allowed for the purpose of plan submission, the trust is expected to mitigate this in year and not exceed CDEL.
- The YTD capital expenditure position is under plan by £8.8m. The main drivers are the EOC, the Green Surgical Hub and the Clacton CDC.
- Regarding the CIP programme, £1.4m of cost improvement plans were delivered in May against a target of £2.1m. The biggest shortfalls were reported in Surgery, Gastro & Anaesthetics (£0.6m) and Women's & Children's (£0.4m).

People & Organisational Development:

- The vacancy rate across the Trust increased slightly from 4.4% to 4.6% in May. 90 students attended the Newly Qualified Recruitment events held at both acute sites and were offered posts. There are 13 students currently still to be placed.
- The data from months 1 and 2 shows that the number of leavers is lower than our predicted workforce plan and the number of overall joiners is higher than the workforce plan. Particular

areas of success include; nursing, support to nursing, porters, admin and clerical colleagues. There remains a focus of work on biomedical scientists and operating department practitioners as well as progressing plans to support Consultant recruitment.

- Voluntary turnover (rolling 12 months) decreased marginally in month to 8.4%. A new Head of Retention is in post and work is underway to produce a robust retention plan. Recruitment is in progress to recruit 3 Retention Partners to support the delivery of the Retention strategy. Last in the series of Education & Wellbeing conferences is due to take place 28th June with c. 80 attendees booked. Planning commenced for future 2023/24 appreciative conferences with confirmed A&C staff group.
- Mandatory training compliance rate increased to 91.4%, from 89.8% in April. This is mainly due to the restart of reminder emails from Workforce Team regarding training expiration dates, email text updated to reflect access method to training in ESR and links to updated intranet pages. Targeted work continues with HRBPs to improve Information Governance training compliance to reach 95% national target.
- Appraisal compliance to 89.3%, from 88.4% in April. Appraisal bite-size training plan rolled out with support from HRBPs across DMTs as part of the new Feedback Led Appraisal form for Band 7+ Leadership roles. ESR PDR alert emails reinstated in April continues to show a further rise in compliance.
- Sickness was static in May at 4.1% and remains just above the target of 4%. Long term sickness absence has reduced, with fewer staff remaining on sickness absence over 3 months. We recognise the work being undertaken by colleagues in our employee relations and well-being teams in supporting staff back to work.

4. Recommendations / Actions

The Board/Committee is asked to note the Trust's performance