

**Trust Board of Directors Meeting
Report Summary**

Date of Meeting: Thursday 7 th March 2024	
Title of Document: Performance Report Month 10 (January) 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 10 (January) 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.</p> <p>In response to recommendations from Deloitte's 'Well-Led' review of the Trust, the format of the report has been adjusted to include summary slides for each of the reports' key domains. This includes trends and hotspots, along with commentary on</p>	

areas that have shown improvement in the reported month and those that require further focus and attention.

Divisional Accountability Meetings to discuss December's performance were cancelled to allow for Business Planning sessions to go ahead.

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:

Quality & Patient Safety:

- The September 2023 in-month HSMR was reported at 105.5. Data excludes COVID-19 on admission. Colchester reported a position of 113.0 and Ipswich 99.8.
- Serious harm falls – There were 11 serious harm falls overall across all ESNEFT sites in January; 5 on the Colchester site, 1 on NEE Community Hospitals, 4 on the Ipswich site & 1 on Suffolk Community sites.
- There were 97 reportable pressure related injuries in January in relation to ESNEFT hospital beds. The Colchester site reported 45 cases overall including 36 category 2, 5 category 3 cases and 4 unstageable. NEECS sites reported 6 category 2 cases and 6 category 3 cases. For the Ipswich site there were 39 cases, made up of 30 category 2 cases, 3 category 3, 1 category 4 and 5 unstageable. There was 1 category 2 ulcer reported on Ipswich Community sites.
- Complaints – there were 132 (84) complaints in January. Colchester reported 80 (43) and Ipswich reported 52 (41).
- Maternity – Preterm births (<37 weeks) were 8.06% for December (data reported one month in arrears).
- Term admissions to NNU as a percentage of babies born was 4.8% which was compliant against the target of <6% in December.
- There was 1 still birth reported in December on the Ipswich site.
- Infection control – There were 2 community onset healthcare associated MRSA bacteraemia case reported in January.
- There were 3 new healthcare associated MRSA isolates (2 at Colchester/NEE and 1 at Ipswich/East Suffolk)
- There were 4 cases of C. diff reported at Ipswich Hospital & Community (2 HOHA, 2 COHA) and 4 at Colchester Hospital & Community (3 HOHA, 1 COHA). The C.difficile case threshold for 2023/24 is 101. There have been a total of 96 C.difficile cases April 2023-end of January 2024 (the total number of HOHA and COHA cases).
- There were 7 cases of MSSA at Colchester Hospital (5 HOHA, 2 COHA) and 4 cases at Ipswich Hospital (4 HOHA, 0 COHA).

- There were 16 cases of E. coli across ESNEFT sites in January. There were 8 at Ipswich Hospital (2 HOHA, 6 COHA) and 8 at Colchester Hospital (4 HOHA, 4 COHA).

Operational:

- A&E 4-hour standard performance for the economy in January was 72.2%, this is below the national standard of 76%. NEE delivered a compliant position at 77.6% whilst IES achieved 62%.
- January's current RTT position is 56.8%. This is below the National Standard of 92%.
- 62-day cancer waits for first treatment remain below the national target of 85% at 63.1% (not validated) for January.
- Diagnostic performance for patients waiting over 6 weeks was 12.5% in January; this remains above the national target of 1%. NHS England's planning guidance for 2023/24 requests that a threshold of at least 5% should be met by March 2025.
- In terms of recovery, activity increased across the board in month for ESNEFT; elective inpatients and daycases by 16.7% and 18.1% respectively, and outpatient firsts and follow ups by 25.1% and 25.7% respectively. Higher levels were reported against 2022-23 activity levels across the board; elective inpatients, daycases, outpatient firsts and follow ups by 142.1%, 114.4%, 110.7% and 107.8% respectively.
- The ESNEFT RTT waiting list in month has seen an increase of 1.0% in month - this is above the trajectory set for the month by 1,889 patients. The patients waiting 65 weeks or more decreased for ESNEFT by 139 patients in month and is now 63 patients over trajectory. Colchester holds 56.0% of the total of 65+ week patients. Patients waiting 78 weeks or more increased by a further 10 patients in month.

Finance:

- In January the Trust reported an actual surplus of £84k which was an adverse variance of £112k against the external plan (surplus of £196k).
- The adjusted performance was a surplus of £113k, a negative variance of £111k compared to the control total.
- As part of the achievement of a system balanced revenue position and following the receipt of Industrial Action funding, to support the mitigation of the deficit position projected by West Suffolk Hospital NHS Foundation Trust, the Trust is now aiming to achieve a forecast outturn surplus of £1.3m.
- Income continued to report a favourable variance. In January, plan was exceeded by £6.567m, £41.434m YTD.

- An overspend was once again reported in pay: £1.629 in January, with a YTD adverse variance of £9.412m. Medical workforce continues to be the area of concern.
- Non-pay reported an adverse variance of £5.207m in January, increasing the year to date overspend to £34.134m. Whilst CIP non-delivery accounted for some of this unfavourable position, other pressures continued to be reported across a number of clinical divisions. Key areas of concern include clinical supplies, secondary commissioning, and premises.
- Agency costs in January increased in all staff groups, returning to historical levels. Agency spend accounted for 2.2% of all pay costs (compared to 3.3% cumulatively to January 2023).
- January's bank spend was higher than previous months, reporting the highest spend this financial year. Nursing, midwifery and support to nursing continues to report the highest spend particularly in Medicine Colchester and Medicine Ipswich (industrial action cover).
- The Trust held cash of £67.563m at the end of January.
- Capital: The overall cumulative underspend has increased to £21.3m from the £18m reported last month. The key drivers for this are: ESEOC which is £5m under plan, Ipswich ED & UTC including Green Surgical Hub that is £4.8m under plan, the Colchester Endoscopy Unit which is £4.5m under plan and the Clacton CDC which is £1.1m under plan.
- The forecast outturn is for the Trust to breakeven against CDEL, however this is dependent on Electronic Patient Record spend to be accelerated. The Trust has received notification from external auditors that the proposed accounting treatment, based on initial review, has been considered appropriate.
- The Trust faces a significant pressure as it enters 24/25, even if CDEL is maximised in 23/24. Approval of any additional schemes will add to this pressure.

People & Organisational Development:

- The vacancy rate across the Trust decreased from 3.0% to 2.7% in January.
- Our third cohort of HCSW apprentices are commencing in February. A total of 49 are now in post since the launch of academy.
- Two cohorts of international nurses arrived in November, 35 in total (17 allocated for Colchester and 18 for Ipswich). An additional cohort of 19 arrived early January.
- Voluntary turnover (rolling 12 months) decreased in month to 7.7% (December 7.8%). Following the expansion of the retention team, support is now in place for divisions including improvements in respect of exit interview processes and capturing documentation and feedback. New starter group welcome meetings commenced on 27th February to encourage sharing of early experiences at the

Trust. The team continues preparing for the NHSE Flexible Working Leadership Development Programme 2023/24.

- Mandatory training compliance is 93.4% in January, which remains above the 90% target for the ninth consecutive month.
- Appraisal compliance is 90.5% in January. Supportive 360-degree Leadership appraisals will be launched in early 2024 with facilitator training commenced in January for c. 20-30, which will enhance the appraisal process further.
- Sickness absence decreased slightly in January to 5.1% from 5.4% in December and was not compliant against the Trust target of 4%. There has been a slight decrease in long term sickness absence which is likely due to the decrease in the number of staff absent due to anxiety, stress and depression. The continued work being undertaken by colleagues in employee relations and well-being teams in supporting staff back to work and addressing early interventions with managers is recognised.
- 17 Employee Relations cases were closed in January. We continue to manage all cases in line with just and learning methodology
- Bullying Harassment (Civility and Respect) Policy, Disciplinary Policy, Leave policies including Sickness Absence have all been updated.

4. Recommendations / Actions

The Board is asked to note the Trust's performance