

## Council of Governors (In Public)

### Item 8.1

**Subject:** SOF, Regulatory and Operational Performance Overview Month 12  
**Date of Meeting:** Tuesday 1<sup>st</sup> June 2021  
**Prepared by:** Hayley Kendall, Chief Operating Officer  
**Presented by:** Jonathan Mathews, Divisional Head of Operations and Deputy COO  
**Purpose of Report:** To Note

#### 1. Executive Summary

The purpose of this paper is to present an update on the Trust performance for the period ending 31<sup>st</sup> March 2021 and should be read in conjunction with the performance dashboard that is attached at Appendix 1. The Trust is operating in an environment that is focused on safely restoring high levels of elective activity to treat the backlog of patients as an output of the COVID-19 pandemic. In terms of the Trust's statutory performance the following exceptions should be noted:

- Six week diagnostic performance has narrowly underperformed in month with a position of 98.64% against a target of 99%. This demonstrates the tremendous work undertaken by the imaging teams to reduce the backlog of patients waiting.
- Referral to treatment waiting times remain below target as expected due to the significant backlog accumulated during the surge. Performance in month stands at 76.53% for English commissioned activity and 76.04% for Welsh commissioners, a slightly improved position compared to the previous month.
- There were 125 patients waiting longer than 52 weeks at the end of March, a static position compared to the previous month. All 52 week waiting patients undergo a harm review by the consultant responsible for the patients care. This figure will unfortunately continue to rise through quarter one as the Trust focusses elective capacity on the backlog of P2 patients, in line with the recovery trajectories previously shared with the Board and submitted to the regional recovery programme.
- Sickness increased to 4.44% in month with a couple of challenging areas across the Trust.

Safely restoring maximum levels of elective activity remains the number one focus for the operational teams, delivering against the ambitious recovery trajectories which the Board will be updated on monthly.

Other performance exceptions to note are summarised as follows:

- Infections – in month there was 1 C Diff, 1 MSSA and 1 gram negative bacteraemia. There were 12 MSSA's in the year and work is ongoing to improve this. A task and finish group is established to improve cannula and line care which is associated with bloodstream infections.

The surgical site infection group has been re-established and has a clear robust work plan to monitor and reduce surgical site infections. Local targets are being considered in line with national benchmarking.

- VTE risk assessment – The weekly performance figures are reviewed by the Executive and two of the three VTE KPIs are above target. The 24-hour assessment is below target and the divisions continue to work on improving performance against this indicator.

## **2. Financial Position**

The Trust achieved a surplus of £421k for year ending 31<sup>st</sup> March 2021.

This is an improved position against the forecast submitted to NHSI as a result of additional national distribution of funds and lower than anticipated clinical supplies costs resulting from lower activity (winter Covid surge).

The Trust has achieved 96% of its revised Cost Improvement Plan including 22% of non-recurrent efficiencies.

Capital expenditure for the year totalled £14.4m enabling significant investment in estates infrastructure improvements including the ongoing Catheter Lab and Electrical works as well a digital and clinical equipment replacement.

The Trust retains a strong cash position improved by the surplus position achieved.

## **3. Conclusion**

The Trust is well underway with a focus on recovering elective activity to address backlogs and improve performance against the statutory indicators. The clinical and operational teams have robust plans and trajectories in relation to a activity and waiting times that are reviewed on a weekly basis.

## **4. Recommendation**

The Council of Governors is asked to note the content of the paper and associated actions detailed within it.