

Cover Sheet

Trust Board Meeting in Public: Wednesday 8 November 2023

TB2023.114

Title: Integrated Assurance Committee Report

Status: For Information
History: Regular Reporting

Board Lead: Trust Chair
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Confidential: No
Key Purpose: Assurance

Integrated Assurance Committee Report

1. Purpose

- 1.1. As a Committee of the Trust Board, the Integrated Assurance Committee provides a regular report to the Board on the main issues raised and discussed at its meetings.
- 1.2. Since the last report to the Board held in public, the Integrated Assurance Committee had met on 11 October 2023.
- 1.3. Under its terms of reference, the Integrated Assurance Committee is responsible for reporting to the Board items discussed, actions agreed and issues to be referred to the Board, indicating the extent to which the Committee was able to take assurance from the evidence provided and where additional information was required.

2. Key Areas of Discussion

Reinforced Autoclaved Aerated Concrete (RAAC)

- 2.1. The Committee was briefed on actions taken to date to identify, manage and provide assurance on RAAC across the Trust Estate.
- 2.2. A structural report and business continuity plans for the affected area of the Churchill Hospital were reviewed.

Financial Recovery

- 2.3. As part of the Committee's review of financial performance and forecast year-end position, discussion focused on capital expenditure and the Trust's cash position.
- 2.4. It was noted that the Trust's run-rate had improved and that Trust management remained optimistic about the level of efficiency savings that could be delivered by March 2024.

Workforce

- 2.5. A draft dashboard of workforce "hot spots" was presented. The Committee reviewed a proposed methodology for identifying areas of the Trust where intervention may be needed to prevent workforce issues having a negative impact on patient care.
- 2.6. It was noted that the dashboard and methodology would continue to be developed based on input from the clinical divisions and that some refinement of the data might be required.
- 2.7. The Committee received an update on progress to recruit anaesthetists, the initiatives being undertaken to bridge the current gap between capacity and

demand, and plans to increase anaesthetic capacity to further support surgical work.

- 2.8. The Committee had previously had a briefing on violence and aggression; an update would be provided to the Committee or to the Trust Board, as appropriate.

Patient Care

Cancer Performance

- 2.9. The Committee was briefed on a range of quality improvement initiatives to enhance performance of the Trust's cancer services, in particular in relation to time to first treatment and in reducing the backlog of patients waiting longer than 62 days. The positive impact of these initiatives was beginning to be felt.
- 2.10. The impacts of industrial action to the pace of recovery were noted.
- 2.11. Improvement work was linked to the Trust's commitment to reducing health inequalities and this would continue to be a lens through which recovery was tracked.

Care of Older People with Frailty

- 2.12. The Committee was briefed on national cognitive screening standards and the creation of a Frailty Steering Group to oversee changes in Trust screening practice.

Newborn Care Development Programme

- 2.13. The Committee was updated on the progress of the programme, which had resulted in improvements in the service.
- 2.14. Further assurance on the detail that sat behind the higher-level objectives and timelines was requested. It was agreed this would be provided to the Committee's next meeting.

Clinical Strategy Implementation

- 2.15. The Committee reviewed the high-level implementation plan and noted the arrangements for developing the remaining detailed plans and for oversight.

Integrated Performance Report

- 2.16. The Committee received this regular report on performance across operational, quality, workforce, digital and financial metrics.

Other Regular Reporting

- 2.17. The Committee received the Claims, Inquests and PFD and Clinical Effectiveness Annual Report for 2022/23.

- 2.18. 6-monthly update reports were received from the CQUIN Programme and Quality Improvement Programme.
- 2.19. The Committee reviewed the Maternity Dashboard, Board Assurance Framework and Corporate Risk Register.
- 2.20. Regular update reports from Divisional and Corporate Performance Reviews were received. The Committee also received regular reporting on infection prevention and control matters and on SIRIs and Never Events.

3. Recommendations

- 3.1. The Trust Board is asked to **note** the Integrated Assurance Committee's report to the Board from its meeting held on 11 October 2023.