

# **Board of Directors Meeting in Public**

Subject:	Report of the Recovery Committee			Date: 6 <sup>th</sup> August 2020		
Prepared By:	Shirley A Higginbotham, Director of Corporate Affairs					
Approved By:	John MacDonald Chair of Recovery Committee					
Presented By:	Richard Mitchell, CEO					
Purpose						
The Recovery Cor	mmittee met on 22 <sup>nd</sup>	Approval				
informs members of the significant matters agreed by the				Assurance	х	
Committee for reporting to the Board of Directors.				Update		
				Consider		
Strategic Objectives						
To provide	To promote and	To maximise the	To continuously		To achieve better	
outstanding care	support health and	potential of our	learn and improve		value	
	wellbeing	workforce				
Х	х	X	Х		х	
Overall Level of Assurance						
	Significant	Sufficient	Limited		None	
		х				
Risks/Issues						
Financial						
Patient Impact	Ensure recovery of services is provided in a safe, sustainable and cost effective					
Staff Impact	manner, taking consideration of all risks and issues as they arise and developing					
Services	mitigation plans.					
Reputational						
Committees/groups where this item has been presented before						

#### Committees/groups where this item has been presented before

N/A

# **Executive Summary**

The Board of Directors is asked to accept the content of the Report and note the items highlighted below:

- Terms of Reference approved
- National expectation
- Risk areas cancer and diagnostics
- Activity levels increase
- Communication to patients.

The first meeting of the Recovery Committee took place on 22nd July 2020. The meeting was quorate and there were no declarations of interest in items pertaining to the agenda.

## Terms of Reference

The Terms of Reference were considered and it was agreed to add to the ToR, all quality issues with regard to recovery e.g. potential harms would be considered by the Quality Committee. The Terms of Reference are approved once this item is added.

### **National expectation**

An update on the national expectation, including when the phase 3 letter may be expected was provided to



the committee.

#### Risk areas – cancer and diagnostics

The key risk areas for recovery were discussed including the risks to cancer patients in particular the risk within diagnostics. Additional capacity is being utilised in the Independent Sector to ensure patients are seen as quickly as possible. We have been asked to ensure any patients over 104 days are seen before 21<sup>st</sup> August and the number of patients waiting 62 days should be reduced by 20% by 21<sup>st</sup> August.

We are making positive progress on delivering this and performance against these trajectories will be reported to Board in September through the SOF, integrated performance report.

### Activity levels increase

Outpatient follow up activity is 800 per week compared to 900 per week pre-COVID. Theatres are making progress but remain less productive. The strategy to utilise Newark Hospital for orthopaedics from late August will enable the reduction of waiting times. Some elective activity is being supplemented with the independent sector.

#### Communication to Patients

The Committee agreed an action to review how we communicate with patients who are under the joint care of NUH and SFHFT.