

Key Matters and Escalation Report to the Group Trust Board

Name of Committee: Finance and Infrastructure Committee

Chair: Mani Sharma

Meeting Date: Monday, 05 January 2026

Key matters

The Committee received the following reports:

Finance [Reasonable Assurance]

- The cash balance position at the end of M8 was:
 - NCHC had £42.0m of cash at 30 November. This is £1.2m above plan and represents 3.1 months of operating cash outflows
 - CCS had £3.1m of cash at 30 November. This is £4.0m below plan and represents one week of operating cash outflows. (**Partial assurance – see escalation below**)
- Agency expenditure was below plan for both Trusts; NCHC by £0.5m (67%) and CCS by £0.4m (35%). However, staff bank expenditure is above plan; NCHC by £0.9m (32%) and CCS by £0.04m (4%). Both Trusts will continue to prioritise minimising agency usage.
- Capital expenditure to date:
 - NCHC: £2.4m scored to CDEL, which is £2.8m behind plan due to delay in the Rackheath lease (Community nursing relocation), this is expected to be signed before year end
 - CCS: £2.6m scored to CDEL, which is £1.6m behind plan. The two leases originally planned for signing (both Norfolk sites) are now unlikely to proceed as intended, with a shorter term preferred while estate opportunities with NCHC sites is underway.
- Efficiency plans:
 - NCHC - the full year efficiency plan has been identified, although £1.6m of planned recurrent efficiencies are now expected to be delivered non-recurrently.
 - CCS - Efficiency savings are currently £0.4m ahead of plan, which is expected to be a temporary favourable variance, with delivery expected to move back into line with plan by the end of the year.
- The majority of Commissioned service contracts with both Trusts have been agreed and signed, with only 7 contracts remaining unsigned with East London Foundation Trust.
- East of England system update - in total the region is off plan by £39.5m at October 2025 (information is not yet available for November). This is a significant deterioration from the last report to Committee.

Estates [Reasonable Assurance]

- NCHC Estates and facilities helpdesk handles on average 700 calls per month. MR to monitor and analyse if the current volume is acceptable and report back to the Committee

- Fire Actions: an increase of 171 actions at CCS from new FRAs since last reporting period and an increase of 4 actions at NCHC since the last reporting period.
- Health and safety – at CCS over 3,700 incidents have been recorded in the first eight months of the year, projecting more than 5,000 by year-end. This is a significant increase year on year. NCHC incidents are tracking in line with previous years with a 7% projected increase for 2025/2026 based on current run rates.
- Audits – CCS – 68 cleaning audits were conducted and 68 passed. At NCHC 132 cleaning audits were conducted and 128 passed. 3 (Willow Garden Walk, Watton Leg Ulcer Clinic and Priscilla Bacon Lodge) passed after a re-clean.
- NCHC Kitchen Audits: The number of kitchen audit actions raised November 2024 – November 2025 was 239. 188 actions were completed. 83 actions are open – 49 are open actions in date and 34 are open actions overdue. A weekly kitchen audit tracker reviews now set up to expedite the closure of issues.
- Food hygiene ratings – Colman Hospital was due a revisit.

Estates Framework (formerly Estates strategy) [Reasonable Assurance]

- The strategy has 6 elements and these will be reported on at future meetings:
 - Deliver Care Closer to Home
 - Digitally Enabled Estate
 - Efficient Asset Use
 - Workforce and Inclusion
 - Data-Driven Decision making
 - Sustainable and Net Zero

The Committee are still seeking clarity of vision, prioritisation criteria and progress measures which will lead to a more detailed operational plan and allow the progress tracking against strategic objectives.

Standing Financial Instructions (SFIs) [Endorsed]

The Committee are seeking an explicit reference to the Committee's oversight role within the SFIs as this would ensure clear lines of accountability and assurance. This sentence would also strengthen to the Committee's Terms of Reference.

The Committee endorsed the SFIs as the Board will APPROVE the SFIs at the Board meeting in March 2026.

The CFOs 90-day reflections paper [Reasonable Assurance]

- The Finance teams are merging into one single unified team and aligning their ways of working.
- The Contract Management and Procurement function across both trusts is extremely strong
- The Estates function is likely to required the most significant change but this also represents the greatest opportunities for the function to develop as a regional leader.

Digital Report [Reasonable Assurance]

- *Risks* – the Shared Care Record (ShCR) project – the legal teams have signed off the Fair Use Policy so this risk can be closed.
- *IG training compliance* – the trusts have decided to stick with the 95% compliance target even though this is no longer a DSPT requirement
- *Data Protection Impact Assessments (DPIAs)* – these were different in the two organisations. They are being aligned into one DPIA across the group. A newly qualified clinical safety officer has been asked to design the DPIA process across the merged organisation.
- *Strategic progress* – 5 new projects have been added to the list since the last meeting. Two of these are associated with the merger (1) ODS codes and (2) national tenant. The ambient voice technology (AVT) project has started and the first pilot is nearing the end of the three week trial. Four different suppliers are being tested. The results will be fed into regional and national research projects. The CIO is aiming for the trust to take the lead on AVT at regional level.
- *Innovation and Federated Data Platform (FDP) Adoption:* The Trust has been invited to become a Champion Trust for the Federated Data Platform, enabling advanced analytics to tackle health inequalities and improve population health planning.
- *Apprenticeships* – the delivery of digital training and the content of the digital training will be aligned across the organisation. Training can be incorporated in leadership and professional courses as well as support clinical pathways and clinical professional training.

Key escalation

The following require escalation to the Group Trust Board from the Governance Manual:

Material variances against significant programme / plan

- The CCS cash balance at the end of November was £3.1m which was adverse to plan. At the beginning of December £6.0m was received from local authorities and that brought the cash position back into line with the plan.
- **Action:** A change in the invoicing of local authorities is helping to bring forward local authority payments.

Key risks and issues

- Operational risks –
 - none rated above 12.
- Strategic risks
 - Risk 3709 - Cyber Security (rated 16).

Good practice or Innovation

- The conclusion of the Digital team consultation.

- The Group Neurodiversity Services Programme presentation was clear and articulate. The presentation showed the thought process in relation to the benefits or non-benefits of certain projects.

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