

REPORT TO:	BOARD OF DIRECTORS (BoD)
DATE:	29 JULY 2021
REPORT TITLE:	INTEGRATED PERFORMANCE REVIEW (IPR)
BOARD SPONSOR:	DIRECTOR OF FINANCE AND PERFORMANCE
PAPER AUTHOR:	DIRECTOR OF FINANCE AND PERFORMANCE
PURPOSE:	DISCUSSION
APPENDICES:	APPENDIX 1: JUNE 2021 IPR

BACKGROUND AND EXECUTIVE SUMMARY

The Trust has been engaged with a new quality improvement programme called “We Care”.

The premise is that the Trust will focus on fewer metrics but in return will expect to see a greater improvement (inch wide, mile deep).

The attached IPR is now ordered into the following:

True Norths - These are the Trust wide key strategic objectives which it aims to have significant improvements on over the next 5 years. The areas are:

- our **quality and safety**. The patient harm figures for June are 293 which is the third month that the maximum threshold has not been breached. The latest mortality figures are not available yet.
- our **patients**. For June, the Cancer 62-day target is at 81.6% which is slightly down on last month and just below the 85% target. The Accident & Emergency (A&E) 4-hour performance target is at 77.1% which is slightly down on the previous two months. The Referral to Treatment (RTT) 18-week actual is at 64.3% which whilst below the target is positively trending for the past four months. The Friends and Family recommended 90.5% continues to beat our target of 90%.
- our **people**. For June, staff turnover has increased to 10.6%, slightly over the threshold of 10%, this is the second month above threshold. The staff engagement scores have not been updated this month.
- our **sustainability**. For the year to date to June the Trust has broken even which is on plan. The forecast is still to breakeven. The Carbon emissions figure has not been released for June.
- our **future**. Medically fit for discharge % stands at 43.5% and virtual outpatients at 49.9%, these are both a slight deterioration on the previous month.

Breakthrough objectives - These are objectives that we are driving over the next year and are looking for rapid improvement. The key areas are:

- **Reducing falls**. The threshold is to have no more than 100 falls per month, this month there was 128 which up on last month by 24 after a positive steady decline.
- **Reducing deaths from sepsis**. The latest reportable figure of February 2021 shows a slight improvement in the sepsis/ respiratory Hospital Standardised Mortality Ratio (HSMR) figures of 138.2 however this is still over our threshold of 117.
- **Reducing healthcare acquired infections**. Total healthcare acquired infections are at 19 for the month which is slightly above our threshold of no more than 18.

- **Reducing patient time in Emergency Department (ED) once there has been a decision to admit.** Total aggregated delays of 475 hours in our ED remains a significant focus and is higher than our 95-hour threshold.
- **Improving theatre capacity.** The lost theatre opportunities in month was 42 which is better than the 45 target and reflects the third consecutive month of meeting this target.

Watch Metrics - these are metrics we are keeping an eye on to ensure they don't deteriorate.

This is a refreshed IPR to reflect this new way of quality improvement and performance management.

IDENTIFIED RISKS AND MANAGEMENT ACTIONS:	<p>Risk 1. The scorecard does not capture an accurate view of Performance for the Board. Mitigation 1. We've spent a long time agreeing with the subcommittees the level of detail contained within the scorecard, undertaken the catchball session with the Board and this discussion constitutes the next level of engagement to ensure when we go live the scorecard does accurately reflect performance.</p> <p>Risk 2. Perception/reputational risk with any of the information contained within the scorecard. e.g. publishing hospital acquired inf that have not been previously published. Mitigation 2. As the scorecard goes live a series of contextual reports will come to the Board to explain these areas.</p>
LINKS TO STRATEGIC OBJECTIVES:	<p>We care about...</p> <ul style="list-style-type: none"> • Our patients; • Our people; • Our future; • Our sustainability; • Our quality and safety.
LINKS TO STRATEGIC OR CORPORATE RISK REGISTER	<p>CRR47: Infection Prevention Control (IPC). CRR68: Constitutional Standards. CRR77: Maternity Services. CRR84: Deteriorating Patient. CRR87: Hospital. BAF30: Benefits of We Care. BAF29: Positive Culture.</p>
RESOURCE IMPLICATIONS:	None
COMMITTEES WHO HAVE CONSIDERED THIS REPORT	None
SUBSIDIARY IMPLICATIONS:	Working through with the subsidiaries their involvement and impact on We Care.
PRIVACY IMPACT ASSESSMENT: NO	EQUALITY IMPACT ASSESSMENT: NO

RECOMMENDATIONS AND ACTION REQUIRED:

The Board of Directors is asked to **CONSIDER** and **DISCUSS** the True North and Breakthrough Objectives of the Trust.