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| REPORT TO: | BOARD OF DIRECTORS (BoD) |
| DATE: | 28 OCTOBER 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: SEPTEMBER 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, as these are challenging targets over a number of years it may be that the targets are not met immediately and it is important to look at longer term trajectories. The areas are:

- our **quality and safety**. The two metrics the Trust has chosen to measure against is total harm and mortality rate.
- our **patients**. The four metrics being measured are the Cancer 62-day target, the Accident & Emergency (A&E) 4-hour performance target, the Referral to Treatment (RTT) 18-week target and the Friends and Family recommended percentage.
- our **people**. The two metrics chosen are staff turnover and staff engagement.
- our **sustainability**. The two metrics chosen to improve are the Trust’s financial position and carbon footprint.
- our **future**. The two metrics chosen are the medically fit for discharge percentage and virtual outpatients usage.

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 target is to have no more than 100 falls per month, this month there was 143.
- **Reducing deaths from sepsis**. The latest reportable figure of June 2021 shows an improvement in the sepsis/respiratory Hospital Standardised Mortality Ratio (HSMR) figures of 112.6 this is below our target of 117.
- **Reducing healthcare acquired infections**. Total healthcare acquired infections are at 20 for the month which is 12 less than last month.
- **Reducing patient time in Emergency Department (ED) once there has been a decision to admit**. Total aggregated delays of 647 hours in our ED remains a significant focus and is higher than our 95-hour target.
- **Improving theatre capacity**. The lost theatre opportunities in month was 67 which is worse than the 45 target.

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

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| 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, DISCUSS** and **NOTE** the True North and Breakthrough Objectives of the Trust.