#### EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST

REPORT TO: COUNCIL OF GOVERNORS

DATE: 7 NOVEMBER 2014

SUBJECT: **EKHUFT PERFORMANCE UPDATE** 

REPORT FROM: CHIEF EXECUTIVE

PURPOSE: Information / Discussion

## CONTEXT / REVIEW HISTORY / STAKEHOLDER ENGAGEMENT

Performance metrics relevant to the Trust's licence and Monitor's Risk Assessment Framework (principally governance and finance) are distributed monthly to the Council of Governors at the same time as they are received by the Board of Directors. (Reports are also published on the Trust's website.)

#### SUMMARY:

Governors will therefore already have received the latest performance reports which were issued in October 2014. These were circulated to Governors on 23 October 2014.

The attached summaries are taken from the: Clinical Quality and Patient Safety Report; Key National Targets Report; and Corporate Performance Reports.

If Governors would like to view the full reports, a reminder of the website link is below:

http://www.ekhuft.nhs.uk/patients-and-visitors/about-us/boards-and-committees/the-board-of-directors/2014-board-of-directors-meetings/

#### **RECOMMENDATIONS:**

The Council of Governors are invited to note and discuss the report.

## **NEXT STEPS:**

None. The metrics within this report will be continually monitored.

## **IMPACT ON TRUST'S STRATEGIC OBJECTIVES:**

Clinical quality, the patient safety programme and patient experience underpin many of the Trust's strategic and annual objectives. Continuous improvements in quality and patient safety will strengthen the confidence of commissioners, patients and the public.

Governance AO10: Maintain strong governance structures and respond to external regulatory reports and guidance.

## LINKS TO BOARD ASSURANCE FRAMEWORK:

This report links to AO1 of the BAF: Implement the third year of the Trust's Quality Strategy demonstrating improvements in Patient Safety, Clinical Outcomes and Patient Experience / Person Centred Care.

Governance AO10: Maintain strong governance structures and respond to external regulatory reports and guidance - Maintain a Governance Rating with Monitor of Green

## **IDENTIFIED RISKS AND RISK MANAGEMENT ACTIONS:**

Identified clinical quality and patient safety risks are summarised in the attached report.

Standards are being closely monitored and mitigating actions are being taken where appropriate (in collaboration with the whole health economy).

#### FINANCIAL AND RESOURCE IMPLICATIONS:

Continuous improvement in quality and patient safety will make a contribution to the effective and efficient use of resources.

There is a financial penalty for not achieving targets.

## LEGAL IMPLICATIONS / IMPACT ON THE PUBLIC SECTOR EQUALITY DUTY:

Reduction in clinical quality and patient safety will impact on NHSLA activity and litigation costs.

Most of the patient outcomes are assessed against the nine protected characteristics in the Equality & Diversity report that is prepared for the Board of Directors annually. The CQC embed Equality & Diversity as part of their standards when compiling the Quality Risk Profile.

## PROFESSIONAL ADVICE TAKEN ON ANY NOVEL OR CONTENTIOUS ISSUES

None

#### **ACTION REQUIRED:**

- (a) Discuss and agree recommendations.
- (b) To note

# **CONSEQUENCES OF NOT TAKING ACTION:**

Pace of change and improvement around the patient safety programme and patient experience will be slower. Inability to deliver a safe, high quality service has the potential to affect detrimentally the Trust's reputation with its patients and within the wider health economy.

Potential risk of failing the required standards which has an impact on our Monitor rating and Trust reputation.