

Agenda item: 2b

Report to:	Trust Board	Date: 1 August 2019
Report from:	Executive Directors	
Principal Objective/ Strategy and Title	GOVERNANCE Papworth Integrated Performance Report (PIPR)	
Board Assurance Framework Entries	FSRA BAF (Unable to maintain financial, operational and clinical sustainability) [BAF references: 843, 858, 873, 2145, 2146, 2147, 2148, 2149, 2163, 2164, 2165, 2166, 2213]	
Regulatory Requirement	Regulator licensing and Regulator requirements	
Equality Considerations	Equality has been considered but none believed to apply	
Key Risks	Non-compliance resulting in financial penalties	
For:	Information	

The Trust has committed to the development of an Integrated Performance Report (IPR) to support the Board in the measurement, analysis and challenge of the organisation, in line with national guidance and sector best practice.

June 2019/20 Performance highlights:

This report represents the June 2019 data: Overall the Trust performance rating was **Red** for the month. There are four domains rated as Red performance (Safe, Effective, Responsive and People, Management & Culture) and three domains rated as Amber (Caring, Transformation and Finance).

Favourable performance

- **EFFECTIVE:** Same Day Admission: Cardiac surgery performance against M2 has improved in month as scheduling has been adjusted to place IHU cases at the start of operating lists where possible. The SDA optimisation group are working to improve the information provided to the booking team to support SDA booking. A new ICP is being launched to support this process and we expect to see an improvement in performance from August 19.
- **RESPONSIVE:** Cardiology RTT: Cardiology reached the RTT standard in February 2019 and has sustained performance for five consecutive months. Commissioners have confirmed verbally through the monthly contract meeting that they consider this service recovered. And that the service has returned to business as usual.
- **PEOPLE, MANAGEMENT & CULTURE:** Turnover - decreased to 11.1%. Nursing turnover reduced to 4.9wte leavers and we were a net gainer of registered nurses, admittedly by a small amount, and a net gainer of HSCW staff.
- **FINANCE:** The Trust's year to date (YTD) position is a deficit of £1.7m on both a Control Total basis excl. land sale and a net basis. This is favourable to plan by £0.9m.

Adverse performance

- **SAFE:** 1) Never Event / Serious Incident: The Trust has reported 1 Serious Incident in June. This was a retained guide wire in the operating theatre and classified as a Never Event – see key performance challenges for more detail. 2) Safe Staffing: The safe staffing fill rate for registered nurses is red (83.6%) for days and green (90.8%) for nights. Not all the beds are being used (while we wait for increased staffing), however the staffing templates on eRoster are appropriately set up for all the beds (therefore the fill rate is short of what is required for a full template). We therefore also use Care Hours Per Patient Day (CHPPD) as another measure to monitor safe staffing. This takes into account patient numbers against staff numbers; and CHPPD levels in these areas remain healthy.
- **CARING:** FFT (Friends and Family Test): remains green for inpatients (97.8%), however has dropped to 85.5% in June for Outpatients. It is thought that this continues to be linked to settling in post move and continues to be closely monitored. The Outpatients team are working hard to return the results to their norm and are being very responsive to patient feedback.
- **EFFECTIVE:** 1) Bed occupancy recovered slightly in June but is well below the expected level post move. This reflects that a number of beds on floor 4 and 5 are on hold or “closed” following adjustments to staffing rosters as a response to staff safety concerns. Critical Care Bed occupancy increased to 90% in June, but this is based on a reduced bed base of 30 beds following interim adjustments to the staffing model. 2) Admitted Patient care activity has been adversely impacted by bed constraints, with activity levels in excess of 200 hundred cases less than plan. Plans to re-open beds are being monitored through the Hospital Optimisation Group. 3) Theatre utilisation reduced to 82.29% in month 3, as cancellations increased to 60 as a consequence of the constrained bed base.
- **RESPONSIVE:** Theatre cancellations - Theatre cancellations increased to 60 in month 3, and the top 3 reasons for cancellations were no ward bed being available (13), transplant activity (9) and lack of critical care capacity (7). The full breakdown of cancellations can be found in the Effective section.
- **TRANSFORMATION:** CIP - The service improvement programme is Red with £1.4m currently identified and an overall CIP target for 2019/20 is £5.1m. To date we have a pipeline of £1.1m which has improved from last month. £336k of additional schemes should receive sign off in July and further schemes just being validated will be progressed as soon as possible.

Recommendation

The Trust Board are requested to **note** the contents of the report.