

**Agenda item 2.b**

<b>Report to:</b>	<b>Board of Directors</b>	<b>Date: 1 July 2021</b>
<b>Report from:</b>	<b>Executive Directors</b>	
<b>Principal Objective/ Strategy and Title</b>	<b>GOVERNANCE Papworth Integrated Performance Report (PIPR)</b>	
<b>Board Assurance Framework Entries</b>	<b>BAF – multiple as included in the report</b>	
<b>Regulatory Requirement</b>	<b>Regulator licensing and Regulator requirements</b>	
<b>Equality Considerations</b>	<b>Equality has been considered but none believed to apply</b>	
<b>Key Risks</b>	<b>Non-compliance resulting in financial penalties</b>	
<b>For:</b>	<b>Information</b>	

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.

**2021/22 Performance highlights:**

This report represents the May 2021 data. Overall the Trust performance rating was Amber for the month. There was 1 domain rated as Green (Caring), 2 domains as Amber (Safe and Effective) and 3 other domains were rated as Red (Responsive, PM&C and Finance). The new domain representing Cambridgeshire and Peterborough ICS metrics is not currently RAG rated.

**FAVOURABLE PERFORMANCE**

- **SAFE:** Safe Staffing - Care Hours Per Patient Day (CHPPD) for all areas during May remained green. CHPPD and nursing staff to patient ratios are monitored daily and via a monthly Effectiveness Report to CPAC. Staffing establishments are also being reviewed across the Trust, with clinical, operational, workforce and finance involved. Further detail on safe staffing is given on page 9.
- **CARING:** All of the dashboard KPI metrics in Caring remain green in May 2021. 1) Friends and Family Test – Inpatients and Outpatients Positive Experience rate remained over 99% during May 2021. Inpatients positive experience rate has increased from 99.1% (Apr) to 99.3% (May). The outpatients positive experience rate decreased from 99.6% (Apr) to 99.1% (May). 2) Number of written complaints per 1000 staff WTE – This is a benchmark figure based on the NHS Model Hospital to enable national benchmarking. We remain in green. The latest data from Model Hospital demonstrates we are in the lowest quartile for national comparison: Royal Papworth = 9.02, peer group = 11.23, national = 21.11. The Trust continues to respond to 100% of complaints within the agreed timescales.
- **EFFECTIVE:** Activity and Productivity - both the admitted and outpatient activity plan has been exceeded again this month although the numbers of admitted patients is lower than April. This is due to fewer working days in the month and staff being encouraged to take leave over the half term holiday period. We are seeing good utilisation of available capacity across all areas with theatres exceeding the standard set both in month at 95.17%. Similarly Cath lab utilisation has stabilised at the 85% standard with a year to date cumulative utilisation of 87%.
- **RESPONSIVE:** Theatre cancellations - Further improvement has been seen in the levels of cancellations in May. This is a result of the introduction of an emergency theatre in March as part of the re-shaping of standards.
- **PEOPLE, MANAGEMENT & CULTURE:** Mandatory Training - compliance is slowly improving following a further suspension during the second surge. The majority of mandatory training is now delivered through e-learning platforms. Divisions have been encouraging and supporting staff to resume training and development as part of recovery.

**ADVERSE PERFORMANCE**

- **SAFE:** Never Event - there was x1 Never Event during May 2021 regarding an NG tube. More information is shared on page 8.
- **RESPONSIVE:** 1) Waiting List Management (RTT) - In keeping with the recovery of consultant to consultant referrals the size of the waiting list has increased for two consecutive months. All patients continue to be managed in order of clinical priority, however, as an additional measure the Trust now reviews weekly all patients waiting over 45 weeks and escalates their priority status if appropriate. The proportion of patients treated within the defined timescale of their priority category has improved but further data will be required before this can be properly interpreted. Performance against the RTT standards has steadily improved across all three specialities and Respiratory Medicine now exceeds the standard at 93.8%. 2) 52 week breaches - There were 11 patients waiting over 52 weeks in May, all of whom are waiting for cardiac surgery. Three of these patients have now been treated and the remaining 8 have planned admission dates over June and early July.
- **PEOPLE, MANAGEMENT & CULTURE:** Voluntary Turnover – Total turnover in May was above KPI at 15.3%. There were 10.8wte registered nurse leavers.

**Recommendation**

The Board of Directors is requested to **note** the contents of the report.