

Agenda item 2b

Report to:	Trust Board	Date: 5 September 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.

**July 2019/20 Performance highlights:**

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

**Favourable performance**

- **CARING:** FFT (Friends and Family Test): remains green for inpatients (97.8%). There has been a marked improvement in the Outpatient score for July (95.0%) following some targeted work and actions being taken by the teams in response to the feedback from our service users. Complaints have reduced in month and the number of compliments has increased in month.
- **EFFECTIVE:** Theatre utilisation shows a continued improvement resulting from improved efficiencies. The productive theatre work is ongoing with good engagement from the relevant clinical teams.
- **PEOPLE, MANAGEMENT & CULTURE:** The Trust vacancy rate decreased to 13.57%. Total nurse vacancy rate (inc Pre-registered) decreased to 9.31%. Excluding PRP staff the registered nurse vacancy rate decreased to 11.39%. Sickness absence remained well below the KPI at 2.8%.
- **FINANCE:** The Trust's year to date (YTD) position is a deficit of £2.4m on both a Control Total basis excl. land sale and a net basis. This is favourable to plan by £0.7m. The domain has moved to a Green rated position in month due to the increase in clinical income seen in July.

**Adverse performance**

- **SAFE:** The safe staffing fill rate for registered nurses remains red (83.8%) for days and green (92%) for nights. This is an improved position for both days and nights. In some wards, days and nights fall short of the desired 90% fill rate that we aim for. 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.
- **EFFECTIVE:** 1) Surgical Euro Score: whilst surgery remains within the threshold of 3% we have seen a slight increase in mortality over the last 3 months. This is being reviewed in our M&M meetings and no core themes have been attributed to this, other than the increase in the number of patients operated with greater co-morbidities and higher risk of complications. 2) Admitted patient care: whilst July saw an increase in admitted patient care, activity remains below planned levels and a recovery plan has been developed by operational teams to recovery performance. 3) Same day admissions: rates increased throughout July but remain below target. Pre-assessment continues to be the limiting factor especially for Thoracic surgery where patients are being turned around very quickly to deliver 31 and 62 day targets.
- **RESPONSIVE:** The Trust's aggregate RTT position remains below 92% despite the sustained improvement in Cardiology and Surgical performance. This is because Respiratory RTT performance has deteriorated further and has failed to meet the standard for the first time due to 1) the Respiratory figures containing the GP Community Sleep Study patients that the Trust is managing on behalf of the CCG following the CCG's decision to decommission the service; and 2) capacity constraints driven by nursing shortages and access plan issues have resulted in reduced productivity and patient throughput. In addition, despite sustained improvement, Surgery has delivered performance just below the recovery trajectory where in previous moves performance was ahead of trajectory.
- **PEOPLE, MANAGEMENT & CULTURE:** Total turnover increased to 15.05%; there was an increase in Nursing turnover from July with 6.17 WTE leavers. Mandatory training compliance decreased to 75.54% and remains below target. In addition, overall IPR compliance decreased to 88.3%, below the 90% KPI.
- **TRANSFORMATION:** Service Improvement/Cost Improvement delivery is Red with £2.57m of the overall CIP target for 2019/20 of £5.11m still to be identified. To date there is a pipeline of £0.74m that is in the process of validation and sign off. There are further schemes just being validated that will be progressed as soon as possible.

**Recommendation**

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