

Agenda item 2b

Report to:	Trust Board	Date: 5 December 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.

October 2019/20 Performance highlights:

This report represents the October 2019 data. Overall the Trust performance rating was RED for the month. The Caring domain was rated as Green for October. There were two domains rated as Amber (Safe and Transformation) and four domains rated as Red performance (Effective, Responsive and People, Management & Culture and Finance).

Favourable performance

- **CARING:** 1) CQC Model Hospital rating for 'Caring' is Outstanding dated Sep 2019 . 2) FFT (Friends and Family Test): remains green for Inpatients (96.1%) and it has returned to green for Outpatients (95%), further to the work of the Outpatients Sister and team following the slight dip in the September result. This work continues, particularly as the activity review of outpatient clinic use remains in progress as part of the optimisation work (i.e. increasing numbers of patients through outpatients, impacts on the number of FFT surveys required).
- **TRANSFORMATION:** HLRI - Project confidence rating is green with the project commencing as expected. Enabling works has commenced. Full start on site February 2020.
- **PEOPLE, MANAGEMENT & CULTURE:** Total turnover decreased to 11.2% in October. Total Trust turnover is 15.5% YTD which is a significant improvement on 19.4% in 18/19.
- **FINANCE:** The Trust's year to date (YTD) position is a deficit of £2.1m on a Control Total basis excl. land sale, which is favourable to plan by £0.7m.

Adverse performance

- **SAFE:** 1) The safer staffing fill rate for registered nurses remains red; (83.4%) for days and (89.6%) for nights. In some wards, days and nights fall short of the desired 90% fill rate that we aim for. Not all the beds are currently being used while we wait for increased staffing, however the staffing roster templates assume all beds are in use resulting in a fill rate below 90%. We 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. Overall, the CHPPD indicator remains in green at 11.3 for wards and 33.6 for Critical Care. 2) The Trust has reported three Serious Incidents in October. Full details are on the included in the Key Performance Challenge page of Safe.
- **EFFECTIVE:** 1) Admitted Patient Care - Although below planned levels, admitted patient care Increased again this month. 2) Same Day Admissions (SDA) - Cardiac Surgery saw a decline in SDA performance for the first time in 3 months. A deep dive is being carried out to understand if this is the impact of SDA cancellations who are excluded from the data. 3) Theatre utilisation decreased to 83.7% in month 7 as the sixth theatre was opened increasing the available capacity in an incremental way. High emergency activity, and an increase in cancellations were noted in month.
- **RESPONSIVE:** 1) The aggregate RTT position has improved for the third month in a row but remains behind trajectory. Cardiac Surgery RTT performance in October is behind trajectory by approximately 4%. An increase in cancellations of patients waiting longer than 17 weeks (32 of the overall cancellations) has impacted on performance. Ongoing focus work across waiting list management, scheduling, CCU and the wards is being carried out to minimise the cancellations and support the recovery of performance. 2) There was a significant 52 week cardiology breach due to a clinical administrative processing error. The patient was identified and treated within 2 weeks of re-presentation. No harm was found during the harm review process resulting from the delay and the patient is scheduled for treatment in month. 3) Cancer Performance - Timely access to PET CT continues to compromise delivery of the 62 day standard. Weekly meetings with the Alliance Medical and CUH teams continue to address this issue.

- **TRANSFORMATION:** Service Improvement/Cost Improvement delivery is Red with £2.32m of the overall CIP target for 2019/20 of £5.11m still to be identified. To date there is a pipeline of £0.91m that is in the process of validation and sign off. CIP planning for 2021 /22 has commenced in November with full CIP plans to be available for all departments by the close of November.
- **FINANCE:** 1) Clinical Income is £1.8m adverse to plan YTD after Guaranteed Income Contract (GIC) protection, due to lower activity of 7.3% in outpatients, 6.4% in inpatient and day case activity and lower levels of Private Patient income. Activity performance has resulted in YTD GIC protection of £1.1m, £0.4m more than planned for this stage of the year. Of this protection £0.03m has unwound from prior months benefit in month. Without the GIC protection, the Trust's income position would be £2.9m adverse to plan YTD. 2) Use of Resources metric is 4 for the month below the planned score of 3 driven by the delayed land sale. 3) CIP is £1.1m adverse to plan due to the start of the CIP gap phasing. The shortfall in identified schemes remains at £3.2m (63% of the £5.1m target). Of the £1.9m identified, £0.4m has been delivered YTD.

Recommendation

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