Royal Papworth Hospital NHS Foundation Trust

Agenda item 2b		NH5 Foundation
Report to:	Trust Board	Date: 6 September 2018
Report from:	Executive Directors	
Principal Objective/	GOVERNANCE	
Strategy and Title	Papworth Integrated Performance Report (PIPR)	
Board Assurance	FSRA BAF (Unable to maintain financial, operational and clinical sustainability)	
Framework Entries	[BAF references: 678, 833, 835, 838, 846, 852, 877, 882, 1427]	
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 2018/19 Performance highlights:

This report represents the July 2018 data: Overall the Trust performance has changed to a **Red** rating for the month. There are four domains rated as Red performance (Safe, Responsive, People Management & Culture and Finance), two domains rated as Amber (Effective, and Transformation) and one as Green (Caring).

Favourable performance

- Safe Safety thermometer and incident reporting demonstrates that we have provided safe care for July.
- **Caring** Complaints have remained low for July, which has now positively impacted on the 12 month moving average. Staff continue to work with patients and carers to resolve issues at the time of occurrence.
- Responsive 1) Theatre cancellations: A reduction of theatre cancellations was noted in month to 38, the lowest since November 2017. An additional late theatre slot has commenced on a Monday and Tuesday for cardiac surgery and thoracic surgery respectively. Low transplant activity was completed in month. 2) Acute Coronary Syndrome (ACS: The ACS transfer target was maintained at 100% achieved within 3 days of referral. The 5 day target was recovered to 100%. This sustained good performance underpins the launch of the rapid NSTEMI pathway in September 2018.
- **Finance** The Trust's year to date position is a deficit of £2,157k, which is favourable to the refreshed plan by £33k.

Adverse performance

- **Safe** During the period 3 serious incidents were reported to the CCG, 1 wrong site surgery, 1 missed lung cancer diagnosis and 1 patient fall, who has since passed away.
- Effective 1) Bed occupancy %: For the 3rd month in succession safer staffing for day and night shifts has been below the 90-100% target and is red. As part of the mitigation to ensure patient safety, ward beds have been temporarily paused and this has adversely impacted on the % bed occupancy within the Trust. 2) Critical Care bed occupancy % further increased to 92% in month. This is largely due to increased cardiac surgical activity and respiratory ECMO activity. 3) Same Day Admissions: There was a further decrease in the % of same day admissions in cardiac surgery in month 4. In order to improve the turnaround target for in-house surgery, in-house urgent theatre slots were increased and hence there was a decrease in the opportunity for same day admissions.
- **Responsive** RTT: From the beginning of July RTT has been managed by thrice weekly recovery meetings as the Trust has once again failed to meet its recovery plan. The in-month intervention has resulted in a marginal improvement in the aggregate performance and a small % improvement in Cardiology from month 3. However, Cardiac Surgery deteriorated further.
- **People Management & Culture** Total turnover increased to 24.3% in July. Nursing turnover increased to 16.3% from 8% in June. There were 8.4 wte nurse leavers (including 1 PRP) leavers in June. The largest number of leavers was in the Admin and Clerical Staff group with 13.4 wte leavers. Relocation and work/life balance were the most common reasons given by admin and clerical leavers.
- Finance Total clinical income is below plan by £1,330k with the Trust continuing to experience lower than
 planned NHS activity of 697 (8.2%) inpatient /day cases equating to an adverse £1,006k position. This position is
 offset by the increased complexity in case mix of £760k.

Recommendation

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