

Agenda item 2.b

Report to:	Board of Directors	Date: 6 October 2022
Report from:	Executive Directors	
Principal Objective/ Strategy and Title	GOVERNANCE Papworth Integrated Performance Report (PIPR)	
Board Assurance Framework Entries	BAF – multiple as included in the report	
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.

2022/23 Performance highlights:

This report represents the August 2022 data. Overall the Trust performance rating was Red for the month. There were 2 domains rated as Amber (Safe and Caring) and 4 domains were rated as Red (Effective, Responsive, PM&C and Finance). The domain representing Cambridgeshire and Peterborough ICS metrics is not currently RAG rated.

FAVOURABLE PERFORMANCE

- **CARING:** FFT (Friends and Family Test): The inpatients positive experience of 99% remains high and above our 95% target. The Participation Rate had a slight decrease from 45.6% in July 2022 to 44.4% in August 2022. Outpatients: Positive Experience rate was 96.6% (August 2022) and above our 95% target. Participation rate has increased from 13.3% in July 2022 to 13.7% in August 2022. For comparison the latest NHS England data published for May 2022 indicates a Positive Experience rate of 94% for inpatients and 93% for outpatients. The national participation rate is 18.97% (inpatients); and 7.56% (outpatients);
- **RESPONSIVE:** Diagnostic Waiting Times - Performance against the 6 week wait diagnostic target remains strong and consistent. The Imaging team continue to offer in month mutual aid support for cardiac CT to CUH, however, the size of the backlog that they are managing is significant and continuing to grow. We are leading a piece of work, through the regional Imaging network, to address the backlog by drawing on support from other providers of cardiac CT within the East 1 Imaging network;
- **FINANCE:** The Trust YTD financial position as at August is favourable to the final plan by £1.5m with a reported surplus of £1.6m against a planned surplus of £0.1m. The Trust continues to deliver well against the financial recovery plan and has released a £1.3m provision against non achievement of the Q1 Elective Recovery Support Funding.

ADVERSE PERFORMANCE

- **SAFE:** Pressure Ulcers - July saw an increase in the number of pressure ulcers acquired at RPH at category 2 and above. There was 1 further reported in August. See page 8 of the report for more information;
- **CARING:** % of complaints responded to within agreed timescales is 70% for August 2022. For context we closed ten formal complaints in August 2022 however a further 3 were responded to outside the agreed timeframe due to the complexities of the individual complaints;

- **EFFECTIVE:** 1) Bed Occupancy and Capacity Utilisation - The utilisation of the bed base, theatres and cath labs remained broadly consistent across July and August, as our ability to use capacity fully was constrained by staff sickness, vacancies and annual leave. Significant constraints on operating capacity remain due to scrub staff withdrawal from over time mid June. Efforts are being made to recruit to vacancies but this is a difficult workforce market and with the added need to train staff in the specialist skills that they require to work independently, resolution of this issue is unlikely to be quick. The number of admitted cases improved in August but length of stay, particularly in Thoracic Medicine, remains elevated by approximately one to two days per patient, on average, as a result of higher acuity on presentation. 2) Outpatient Utilisation - The number of Outpatients seen in month dropped as a consequence of withdrawn clinics due to consultant leave. Booking into available capacity remains strong and this is monitored through the weekly 6-4-2 meetings set up as part of the Meridian Productivity project in 2019. The management of consultant leave during the most popular holiday periods is under review at divisional level.
- **RESPONSIVE:** 1) RTT Performance and Waiting List Management - The aggregated RTT performance continues to deteriorate as the number of patients on the waiting list grow however, this masks an underlying trend of improvement in performance with Cardiology over the last quarter. 2) Cancer Waiting Times - performance continues to be impacted by late referral and complexity of cases. There were 21 patients who exceeded 104 days on their pathway with 10 of them being carried over from July on prolonged pathways as well as 3 late referrals, 1 on day 99, 1 on day 89 and another on day 80. Route cause analyses and harm reviews have been completed for them. 3) IHU performance - IHU performance continues to be challenged due to on-going constraints on theatre capacity. The deterioration directly correlates with the period where theatre staff have withdrawn from overtime;
- **PEOPLE, MANAGEMENT & CULTURE:** 1) Vacancy Rates – the total Trust vacancy rate continued on an upward trend. The Spotlight slide on page 21 looks in more detail at vacancy rates and describes some of the work ongoing to fill posts. 2) IPR rates - We continue to struggle to improve IPR rates with areas still experiencing constraints on releasing staff for appraisals in sufficient numbers to recover the backlog of overdue appraisals. The importance of annual appraisals for staff engagement and wellbeing continues to be emphasised and compliance is discussed at monthly divisional performance meetings.

Recommendation

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