

## Agenda item 2ai

| Report to:                                 | Board of Directors   | 5 July 2018 |
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| Report from:                               | Chair of the Performance Committee   |             |
| Principal Objective/<br>Strategy and Title | GOVERNANCE: To update the Board on discussions at the Performance Committee meeting dated 28 June 2018 |             |
| Board Assurance Framework Entries          | Committee meeting dated 26   | June 2016   |
| Regulatory Requirement                     |  |             |
| Equality Considerations                    | None believed to apply   |             |
| Key Risks                                  | Non-compliance resulting in financial penalties  |             |
| For:                                       | Information OR Approval  |             |

- 1. PIPR remained Amber this month with only 2 red areas which is an improvement from last month.
- 2. Safe is rated at amber. The committee discussed the fall in the safer staffing metric for registered nurses overnight. Maura Screaton (MS), Assistant Director of Nursing, explained that this figure did not take into account the contribution of the pre-registered nurses and other staff such as the Alert team who also support the wards overnight. Operationally they are able to modulate the numbers of open beds and the mix of acuity of patients to keep within safe parameters. In this period performance was also affected by 'no shows' from agency staff. This was being taken up with the relevant agencies.
- 3. Stephen Posey (SP) CEO, briefed us on an issue flagged via CQC. An organisation had expressed a concern about the safety of our ward staffing in cardiology. The ADoN had provided a comprehensive summary of staffing and patient care hours to provide assurance to the CQC and the complainant of the safety of our staffing levels.
- 4. Ron Zimmern (RZ) NED, noted the long term and steadily improving trend in incidence and severity of falls and pressure ulcers which, given the pressure on our teams, was testament to the professionalism and the embedded nature of good practice and safety culture.
- 5. MS (ADoN) highlighted on aspect of the inpatient survey; that of the emotional support our nurses provide to patients who suffer cancellations. This takes a toll on the nurses

- as well as the disappointed and anxious patients. The committee suggested that we seek a patient story from these teams either at the Board or at this committee.
- 6. The RTT recovery plans are just ahead of trajectory, and the breaches of the 28 day re booking for cancelled procedures very low. In-house Urgents continue to be a concern. The committee asked for a focus on this next time prompted by the rapid increase in the volume of such referrals.
- 7. Theatre cancellations remain high despite the flow measures we have put in place. This is part because of infrastructure problems in theatres and Cath lab 6 which had required rapid responses in the month. The committee thanked the estates team for their diligence and rapid response; this had significantly limited the patient impact of these outages.
- 8. Nurse vacancies and turnover continue to improve, and we have achieved 10 consecutive months as a net recruiter. The news of the potential delay will have positive and negative impacts on these key issues going forward. Following briefings and listening to our people, Oonagh Monkhouse (OM) will bring forward a set of measures to assist staff deal with the change of plans.
- 9. On Finance the Trust is ahead of plan, summarised as being in the right place but for the wrong reasons. Given recent performance this is a big step forward. Another big step forward has been made in CIP with measures to close the gap by £542k being signed off to implementation. The whole organisation is now considering the financial impacts of the potential delay in moving the hospital. Once thought through these will inform a revised financial plan for the year and should appear for Board review in August.

Dave Hughes Chairman Performance Committee 28<sup>th</sup> June 2018