

Agenda item: 2b

Report to:	Trust Board	Date: 5 July 2018
Report from:	Executive Directors	
Principal Objective/ Strategy and Title	<b>GOVERNANCE</b> <b>Papworth Integrated Performance Report (PIPR)</b>	
Board Assurance Framework Entries	<b>FSRA BAF</b> (Unable to maintain financial, operational and clinical sustainability) [BAF references: 678, 833, 835, 838, 846, 852, 877, 882, 1427]	
Regulatory Requirement	<b>Regulator licensing and Regulator requirements</b>	
Equality Considerations	<b>Equality has been considered but none believed to apply</b>	
Key Risks	<b>Non-compliance resulting in financial penalties</b>	
For:	<b>Information</b>	

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.

**May 2018/19 Performance highlights:**

This report represents the May 2018 data: Overall the Trust performance has remained as **Amber** rating for the month. There are 2 domains rated as Red performance (Responsive and Finance) and five domains rated as Amber (Safe, Caring, Effective, People Management & Culture and Transformation). This reflects an improvement in People Management & Culture from Red to Amber in the month.

**Favourable performance**

- **Safe** – 1) There were no SI's or incidents with moderate harm reported in May. 2) Registered nurse vacancies continue to improve with the Trust continuing to be a net recruiter. It must be noted that the nurses recruited require specialist training and many require to complete language courses prior to applying for NMC registration. This has an impact on the ward skills mix and level of support required from the existing trained staff.
- **Effective** - In spite of two bank holidays in May, admitted activity was the highest delivered in the past six months. Overall flow of patients through the hospital improved following the introduction of ring fenced CRU beds in Critical Care and restrictions on the number of transplants undertaken.
- **People, Management & Culture** – 1) Total turnover reduced to 12.9%. Nursing turnover was 9.7% a significant reduction from 32% in April. There were 5.1 wte nurse leavers in May compared to 16.3 wte in April. Healthcare Support Worker turnover was 19.1% a decrease from April at 23.7%. 2) We were a net gainer in the non-medical workforce by 7 WTE. We continued as a net recruiter to the nursing workforce for the tenth month in a row; 9.3 WTE (this includes pre-registration nurses). We were a net gainer of the HSCW workforce by 2.7 wte.
- **Transformation** – SIP: Of the £1.2m outstanding CIP £542k has been identified (Procurement plan £500k, Pensions £42k) leaving £658K still to be identified. CIP planning meetings commenced in June with a number of schemes across directorates being worked up. The programme remains amber at present.
- **Finance** - In month the Trust has reported a surplus of £674k, which is £93k ahead of the planned surplus of £581k. This results in the Trust's year to date financial position being favourable to plan by £8k, with an actual deficit of £509k against a planned deficit of £517k.

**Adverse performance**

- **Safe** – 1) There was 1 sanctioned C Diff case in May. Learning has been identified and shared at ward level and across the Trust. 2) Safer staffing was red for May. Safer staffing is calculated on Registered Nurse numbers and doesn't take into account the contribution of the pre registered nurses undergoing training and language tests.
- **Effective** - a series of infrastructure failures in theatres, cath labs and Pathology, resulted in high numbers of cancellations. This resulted in the in-month activity target not being met, a reduction in bed occupancy and Cath Lab 6 utilisation falling below target for the first time in the nine months.
- **Responsive** – 1) RTT recovery remains the key operational focus and although the Trust remains below the 92% standard, Cardiology recovery exceeded the revised trajectory approved at last month's Trust Board. 2) IHU performance continues to be a concern. The actions taken have improved patient flow but have not had the intended impact due to the reduction in theatre capacity.
- **Finance** - Actual year to date CIP achievement of £1,032k is £478k adverse to plan of £1,510k, due to £94k planning gap and an operational delivery gap of £384k from overspends in Pay compared to the Gateway 2 rosters, partially offset by non-recurrent underspends.

**Recommendation**

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