

Agenda item 2b

Report to:	Trust Board	Date: 7 November 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.

September 2019/20 Performance highlights:

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

Favourable performance

- **CARING:** FFT (Friends and Family Test) remains green for inpatients (97.6%).
- **EFFECTIVE:** Theatre utilisation continues to be above target levels and same day admissions for cardiac patients was over target for the second month.
- **PEOPLE, MANAGEMENT & CULTURE:** Total turnover decreased to 13.59%. There was a decrease in Nursing turnover from August with 6.84 WTE leavers (inclusive of PRPs). We were a net gainer of non-medical staff by 73.06 WTE in September which is the highest net gain in the last 24 months.
- **FINANCE:** Year to date surplus/deficit: the Trust's year to date (YTD) position is a deficit of £2.5m on a Control Total basis excl. land sale, which is favourable to plan by £0.8m.

Adverse performance

- **SAFE:** Safe Staffing: the safe staffing fill rate for registered nurses remains red (80%) for days and green (90%) 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% (the next upgrade of HealthRoster allows for this and may be available later this year). The Trust also uses 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.
- **CARING:** 1) FFT (Friends and Family Test): there has been a small dip in the Outpatient score for September (93%). The Outpatients Sister and team responded immediately to the results and they are working with the clinics where the response rate is lower and continuing with their really positive work with intentional rounding in Outpatients.
- **EFFECTIVE:** 1) Bed Occupancy - bed occupancy across the wards remains below planned levels. This is a consequence of ad-hoc bed closures to mitigate safer staffing. 2) Same Day Admissions - Cardiac surgery saw a further improvement against the 50% standard in Month 6. Thoracic continues to be a challenge due to the lack of pre-assessment for our short notice cancer patients. Trust wide optimisation work remains ongoing to improve access to pre-assessment.
- **RESPONSIVE:** 1) The aggregate RTT position has improved slightly in month but remains below trajectory. Cardiology continue to decrease breaches to below the expected level despite an increase in primary PCI, Rapid NSTEMI, ACS activity since the hospital move. 2) There is one 52 week breach this month. This was identified as part of work to switch to the new RTT database. An initial harm review has been undertaken and an urgent appointment given to the patient.

- **PEOPLE, MANAGEMENT & CULTURE:** 1) Vacancy rates decreased in month but remain above target. 2) Total IPR compliance remained broadly static. This is despite further communications and advice to managers on how to improve compliance and ensure that all complete appraisals were appropriately recorded. 3) Sickness absence increased to 3.6%, driven by colds/coughs/flu and musculo-skeletal conditions. 4) Mandatory training compliance has improved to 80.2% but remains below target.
- **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. There are a number of directorates that have started to develop recovery plans it is likely that will help fulfil some of their outstanding CIP requirements, these will be added to the plan as soon as details are available.
- **FINANCE:** 1) Clinical income is £1.6m adverse to plan after Guaranteed Income Contract (GIC) protection, due to lower activity of 8.2% in Outpatients, 9.3% in Inpatient and day case activity and lower levels of Private Patient income. This has resulted in overall GIC protection of £1.6m 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 £0.5m adverse to plan due to the start of the CIP gap phasing.

Recommendation

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