

Board of Directors Meeting in Public

Subject:	SOF – Integrated Performance Report – Month 5 2022/2023		Date: 6 th October 2022		
Prepared By:	Shirley A Higginbotham – Director of Corporate Affairs				
Approved By:	Executive Team				
Presented By:	Paul Robinson - CEO				
Purpose					
To provide assurance to the Board regarding the Performance of the Trust as measured in the SOF Integrated Performance Report				Approval	
				Assurance	x
				Update	
				Consider	
Strategic Objectives					
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value	
x	x	x	x	x	
Identify which principal risk this report relates to:					
PR1	Significant deterioration in standards of safety and care				x
PR2	Demand that overwhelms capacity				x
PR3	Critical shortage of workforce capacity and capability				x
PR4	Failure to achieve the Trust's financial strategy				x
PR5	Inability to initiate and implement evidence-based Improvement and innovation				
PR6	Working more closely with local health and care partners does not fully deliver the required benefits				
PR7	Major disruptive incident				
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change				
Committees/groups where this item has been presented before					
Executive Team 29 th September 2022					
Executive Summary					
<p>The SOF – Integrated Performance report provides the Board with assurance regarding the performance of the Trust in respect of the standards identified on the dashboard.</p> <p>This report is for the month of August 2022/23</p> <p>There are 41 indicators on the monthly dashboard covering four sections. All standards are RAG rated and the threshold for each standard is noted on the dashboard. An SPC chart which identifies trends is provided for each standard and forms part of the dashboard report.</p> <p>The table below shows the number of standards in each section the current RAG rating of those standards</p>					
Section	Number of standards	Red	Amber	Green	No rating
Quality Care	11	3	3	5	
People and Culture	7	1	2	4	
Timely Care	19	7	2	9	1
Best Value Care	5	0	4	1	

A report is produced for each individual standard rated as red; this includes:

The performance against the standard, both monthly and year to date, the trend graph, the Executive owner, a comparison against the national position, the root causes, with actions to address, the expected outcome and timeline for completion.

For Month 5 2022/23 there are 11 Standards rated as Red:

Quality Care

Rolling 12-month Clostridium Difficile infection rate per 100,000 OBD's – August has seen a reduction in infections with four cases during the month, RCAs are in the process of completion for all cases.

Covid-19 Hospital onset – There were three outbreaks and clusters in the month of August including some community positives together with positive visitors.

Rolling 12-month MRSA bacteraemia infection rate per 100,000 OBD's – There were no cases reported in August.

People and Culture

Appraisals – Performance against this standard has remained consistent at 85% over the last 3 months. This is above the ICB level for month 5 of 81.8%.

Timely Care

Number of patients waiting >4 hours for admission or discharge from ED – Performance against this standard for August 2022 was 77.4%, giving a national ranking of 15th with all comparison Trusts. Newark UTC averaged 99% against the standard. Performance is mainly driven by exit block and the high numbers of patients who are medically safe for transfer.

Mean number of patients who are medically safe for transfer – the number of patients who are medically safe for transfer continues to increase and is directly linked to capacity issues within adult social care and care agencies. A number of actions are in progress with partners across the system to address the issues.

Adult G & A Bed Occupancy (8.00am position as per U & EC Sitrep) – Occupancy levels remain higher than the standard of 92% mainly due to the number of patients who are medically safe for transfer.

Remote Attendances as a percentage of Total Outpatient Attendances - The national target is to deliver 25% of all outpatient attendance virtually the Trust is currently delivering 16% against this standard. A project team has been established to identify the issues and respond.

Follow up Outpatient Attendances reduce against 2019/20 – Year to date the Trust has reduced follow up appointments by 4.3% compared to 2019/20 against the target of 25%. The Trust will be unable to achieve the target this year and this was reported in the 2022/23 planning submission.

Elective Inpatient Activity against Plan – Elective Inpatient activity throughout August was adversely affected due to increased emergency pathway pressures and capacity issues.

Number of patients waiting over 62 days for Cancer treatment - Although The number of patients waiting in excess of 62 for Cancer treatment reduced to 102 in August this was still greater than the trajectory target of 86. 27 patients were waiting over 104 days in July, of those 13 received treatment in month.

Best Value Care – A deficit of £0.6m was reported for August 2022 with year-to-date performance reporting a deficit of £5.8m with is £1.4m adverse to plan. This reflects the continuing requirement for additional bed capacity and a shortfall in Financial Improvement Programme savings.