

Board of Directors Meeting in Public

Subject:	SOF – Integrated Performance Report – Quarter 2 2022/2023		Date: 3 rd November 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 26 th October 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 Quarter 2 2022/23</p> <p>All standards, identified on the report 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 these are illustrated in the individual slides.</p> <p>For Quarter 2 2022/23 there are 14 Standards rated as Red, these are noted below.</p> <p><u>Quality Care</u></p> <p>COVID 19 Hospital Onset</p> <p>Regionally nosocomial cases of Covid-19 have increased by over 84% in the last few weeks. This is reflected in the number of increases in the Trust with 36 definite cases and 10 probable cases identified in September.</p>				

Rolling 12-month MRSA bacteraemia infection rate per 100,000 OBD's

There has been one case in Quarter 2, in July 2022.

Recommended Rate – Friends and Family, Accident and Emergency

The pressures in the Emergency Department have not allowed sufficient staff time to hand out the FFT. Volunteers are supporting to help increase the feedback received.

Rolling 12 months HSMR (basket of 56 diagnosis groups)

The trust has seen a continuing upward trajectory of the HSMR, and the remaining position is that of “significantly higher than expected”. Coding Activity and Data quality is being reviewed focussing on Charlson Co-morbidity indices. Triangulation of information regarding learning from deaths to identify outlier areas is also being undertaken.

Cardiac Arrest rate per 1000 admissions

Work is ongoing to reduce the number of patients with DNACPR who receive CPR. Exploratory discussions are underway around resourcing robust ‘insitu’ simulation programme.

People and Culture

Appraisals

The position is 84%, which below trajectory and is mainly a result of workforce loss during Q2 due to COVID absences, along with Annual Leave impact during School summer holidays.

QI Training – Silver

No training has taken place over the summer and this has impacted on the performance, training sessions have been reinstated from September

Number of QI projects

The number of Improvement projects registered on AMAT in the period is below trajectory. As part of the review of Improvement (QI, Transformation Team, Patient Safety) the use and utilisation of this platform to capture knowledge and information on improvement activities will be reviewed.

Timely Care

Number of patients waiting >4 hours for admission or discharge from ED

Performance against this standard was 75.4% for September 2022. The Trust ranked 19th nationally and 4th regionally with comparison Trusts.
The continuing high numbers of MSFT patients negatively impacts on performance.

Mean number of patients who are medically safe for transfer

Whilst there has been a slight improvement in September from the August position, there remains over 5 wards worth of patients in delay. The Trust continues to work with adult social care and partners to significantly improve the interim bed offer process. The Transfer of Care Hub which will support the ongoing work has opened.

Adult G & A Bed Occupancy (8.00am position as per U & EC Sitrep)

The trust continues to operate at occupancy levels significantly higher than the planned 92%. Bed modelling shows that the occupancy of the trust is almost entirely driven by increasing MSFT numbers and associated increasing length of stay.

Remote Attendances as a percentage of Total Outpatient Attendances

The Trust is currently delivering 15.5% of outpatient consultations virtually against the national target of 25%. A project team has been established define problems and identify actions to address.

Follow up Outpatient Attendances reduce against 2019/20

The Trust delivered 5.5% more follow-up appointments in August 2022 versus 19/20. Year to date, the Trust have reduced follow-up appointments by 4.3% compared to 19/20, against the 25% target. The Trust has been clear that due to the size of the overdue review list, we will not achieve the 25% reduction this year. A non-compliant position was reported in the 2022/23 planning submission. The Trust has discharged 6% of patients to a Patient Initiated Follow-Up (PIFU) pathway, against a national target of 5% by March 2023.

Number of patients waiting over 62 days for Cancer treatment

In September the backlog was 102 against a trajectory of 87. Lower GI contributes to over 50% of the 62-day cancer backlog. Targeted improvement support has been identified to support lower GI