

Board of Directors - Public

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| Subject: | SOF – Integrated Performance Report – Month 7 2022/2023 | | Date: 1 st December 2022 | |
| Prepared By: | Shirley A Higginbotham – Director of Corporate Affairs | | | |
| Approved By: | Shirley A Higginbotham – Director of Corporate Affairs | | | |
| Presented By: | Shirley A Higginbotham – Director of Corporate Affairs | | | |
| 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 23 rd November 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 month 7 2022/23, 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>There are a total of 43 standards reported on the monthly SOF report, of those 15 are rated as red, 13 are rated as amber, 14 are rated as green and one is currently only in shadow monitoring form, so no RAG rating is provided.</p> <p><u>Quality Care</u></p> <p>Three monthly standards are rated as red for month 7 compared to four for month 6, Cardiac arrest rate per 1,000 admissions has moved from a red to a green rating in the month with monthly actuals falling to 0.85 below the 0.89 standard a reduction from 1.28 in month 6. A brief overview of the actions in relation to the three standards rated as red is given below</p> | | | | |

COVID 19 Hospital Onset

During October there were 14 definite hospital acquired COVID-19 cases and 6 probable causes this is decrease from 16 probable causes in September.

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

There has been one case in Quarter 2, in July 2022. There have been no further cases in October, the standard is zero cases for the year.

Recommended Rate – Friends and Family, Accident and Emergency

There has been an improvement of the year-to-date average in the month to 89.1% compliance against a target of <90%. The monthly actuals are 87.4% the threshold for an amber rating is 88.0%.

People and Culture

Two monthly standards are rated as red for month 7 compared to one for month 6. Sickness absence is rated as red in month 7 due to an increase from 4.5% in September to 5.1% in October, this has also impacted the Total workforce loss standard moving it from a green rating in September to an Amber rating for October. Employee relations management has also moved in the month from green to amber due to an increase in cases. A brief overview of the actions in relation to the two standards rated as red is given below

Sickness Absence

An increase in the long-term sickness absence rate from 1.4% in September to 2.0% in October has increased the overall sickness absence rate above the standard of 4.0%

Appraisals

Performance against this standard has improved in the month from 84% in September to 86% in October.

Timely Care

Ten monthly standards are rated as red for month 7 compared to six for month 6.

Two standards have moved from green in September to red in October,

- Number of patients waiting 78+ weeks for treatment, increasing from 33 to 35 patients which is higher than a 10% variation to trajectory,
- Elective inpatient activity against Yr2019/20 decreasing from 105.2% in September to 86.4% in October.

One standard has moved from amber in September to red in October,

- Elective day case activity against Yr2019/20 decreasing from 97.2% in September to 89% in October

One standard has moved from amber in September to green in October

- Mean waiting time in ED (in minutes) which has reduced from 224 in September to 207 in October

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

Performance of 76.7% in October 75.4% in September) ranked the Trust 11th nationally and 3rd regionally, performance is mainly driven by the high number of medically safe for transfer patients in the Trust.

Mean number of patients who are medically safe for transfer

There has been a slight improvement from the September figure of 111 patients to 103 patients in October. The system D2A programme and collaborative work with Nottinghamshire Healthcare NHS Trust to increase home care packages have had some impact during the month.

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

Performance has improved in the month from 96.6% in September to 94.7% in October, however this is still significantly higher than the planned standard of 92%. The high number of MSFT patients in the hospital is the key driver for this performance.

Remote Attendances as a percentage of Total Outpatient Attendances

Performance against this standard remains fairly static at 15.3% and some way short of the national target of 25%

Follow up Outpatient Attendances reduce against 2019/20

Performance against this standard improved significantly in month from 0.5% in September to 13.1% in October 2022. The Trust submitted a non-compliant plan against this standard due to the volume of overdue reviews, which means the Trust will be unable to meet the 25% reduction national target

Elective Day Case activity against Yr 2019/20

This standard was RAG rated as Amber in September 2022 with performance of 97.2% this is deteriorated to 89% in October. Several actions have been identified to address this deterioration and these are noted in the attached slides.

Elective Inpatient activity against Yr 2019/20

Performance against this standard was 105.2% in September this has significantly reduced in October to 86.4%, staffing capacity across a number of different services is one of the causes for the deterioration.

Number of patients waiting 78+ weeks for treatment.

The trajectory of 31 patients was not achieved this month, meaning performance against this standard reduced from a RAG rating of green to red. The main causes were insufficient capacity in services and mutual aid in some services.

Number of local 2ww patients waiting over 62 days for Cancer treatment

Performance of 107 patients against a trajectory of 75, shows a deterioration in performance when compared to September, 102 patients against a trajectory of 87. The Trusts national ranking is 54 (of 127). 97 patients in total were seen within targets the average wait for definitive treatment was 64 days.

Best Value Care

There have been no changes in the RAG ratings of the five standards.