

TRUST BOARD IN PUBLIC		Date: 25 May 17
		Agenda Item: 5.1
REPORT TITLE:	IPR Revisions	
EXECUTIVE SPONSOR:	Angela Stevenson	
REPORT AUTHOR (s):	Ben Emly	
REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date)	Board Seminar / Executive Committee	
Action Required:		
Approval (√)		
Purpose of Report:		
To confirm proposed changes to the format / content of the Trust Integrated Performance Report		
Summary of key issues		
<p>Two changes are being proposed for the IPR</p> <ul style="list-style-type: none"> • the format/ layout of the report • the measures / KPIs used within the report <p>The proposed changes will help align the report with the “How are we doing?” / “How are we improving?” questions that now form a key element of the performance system in the Trust. Alignment / reporting with the annual priorities will also be supported.</p>		
Recommendation:		
The Board is asked to approve the amendments to the report.		
Relationship to Trust Strategic Objectives & Assurance Framework:		
<p>SO1: Safe – Deliver safe, high quality care <i>and improving</i> services which pursue perfection and be in the top 25% of our peers</p> <p>SO2: Effective – As a teaching hospital, deliver effective and improving sustainable clinical services within the local health economy</p> <p>SO3: Caring – Work <i>with compassion</i> in partnership with patients, staff, families, carers <i>and community partners</i></p> <p>SO4: Responsive – To <i>continue to be</i> the secondary care provider of choice for the <i>people of our community</i></p> <p>SO5: Well led - To be a <i>high quality</i> employer of choice and deliver financial and clinical sustainability around a patient centred, clinically led leadership model</p>		
Corporate Impact Assessment:		
Legal and regulatory impact	All aspects of care provision is covered by the Health and Social care Act, the IPR provides assurance on safe high quality care (Including mortality).	

Financial impact	The IPR includes reporting on financial performance
Patient Experience/Engagement	The IPR includes reporting on patient experience measures
Risk & Performance Management	The IPR forms part of the Trust Performance management framework, providing Trust level performance reporting to the Board
NHS Constitution/Equality & Diversity/Communication	The IPR includes report against NHS Constitution operating standards.
Attachment:	
IPR Revisions Report	

TRUST BOARD REPORT – May 2017 IPR Revisions

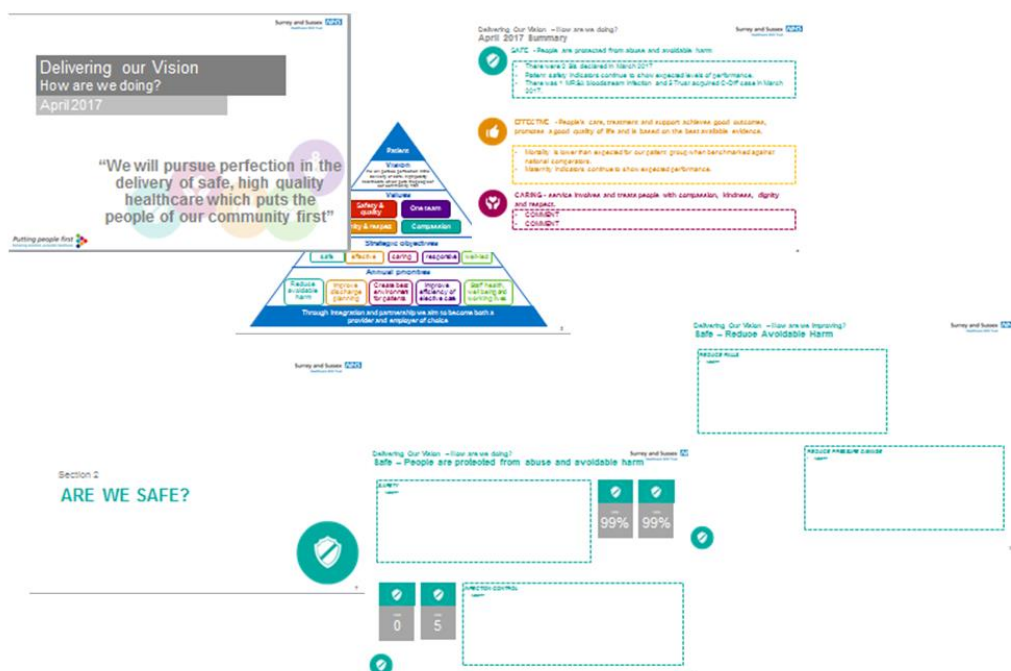
1. Introduction

- As part of an on-going review of Trust reporting, the Integrated Performance Report has been reviewed with a number of proposed changes including re-naming the report to be “Delivering our Vision – How are we doing?”
- Two changes are being proposed for the IPR
 - the format/ layout of the report
 - the measures / KPIs used within the report

2. Layout / Format

- The changes to the format of the report is proposed to:
 - Make the document more explicitly aligned to the CQC domains
 - Include monthly commentary / measures on the annual priorities
 - Build on the “How are we doing / improving” questions that form part of the Deep dive process in 2017.
 - Provide a format that is suitable for a number of audiences including Board and staff members
- Each section will include a page showing the traditional scorecard to ensure on-going visibility of trends etc.

The layout can be seen in the pictures below:



3. Measures / Indicators

- The measures to be included in the scorecard element of the report have been reviewed and a number of proposed changes are detailed below. Further meetings are being put in place to discuss some measures for introduction over the course of the year.

Indicator	Proposal
Safety	
No of Never Events in month	Retain
<i>No of medication errors causing Severe Harm or Death</i>	<i>Remove</i>
<i>Safety Thermometer - % of patients with harm free care (all harm)</i>	<i>Remove</i>
Safety Thermometer - % of patients with harm free care (new harm)	Retain
Percentage of patients who have a VTE risk assessment	Retain
WHO Checklist Usage - % Compliance	<i>Remove</i>
Number of Sis	Retain
Serious Incidents - No per 1000 Bed Days	Retain
Number of Patient Safety Incidents causing Severe harm or Death	Add
Percentage of Patient Safety Incidents causing Severe harm or Death	Retain
Number of overdue CAS and NPSA alerts	<i>Remove</i>
Average fill rate – registered nurses/midwives (%) - Day	Retain - Move to Safe
Average fill rate – care staff (%) - Day	Retain - Move to Safe
Average fill rate – registered nurses/midwives (%) - Night	Retain - Move to Safe
Average fill rate – care staff (%) - Night	Retain - Move to Safe
MRSA BSI (incidences in month)	Retain
CDiff Incidences (in month)	Retain
MSSA	Retain
E-Coli	Retain - Revise to Trust Acquired
Safety - Annual Plan - Reduce Avoidable Harm	
Falls per '000 Bed Days	Add
Pressure Damage per '000 Bed Days	Add
Effectiveness	
HSMR (56 Monitored diagnoses - 12 Months)	Retain
SHMI	Add
Emergency readmissions within 30 days (PBR Rules)	Retain
C Section Rate - Emergency	Retain
C Section Rate - Elective	Remove
Admissions of full term babies to neo-natal care	Remove
TBC - Audit	Add

TBC - Research	Add
Effectiveness - Annual Plan - Improve Discharge Planning	
TBC - SAFER Metrics	Add
TBC - Your Care Matters Question	Add
Access and Responsiveness	
ED 95% in 4 hours	Retain
Patients Waiting in ED for over 12 hours following DTA	Retain
Ambulance Turnaround - Number Over 30 mins	Retain
Ambulance Turnaround - Number Over 60 mins	Retain
Cancer - TWR	Retain
Cancer - TWR Breast Symptomatic	Retain
Cancer - 31 Day Second or Subsequent Treatment (SURGERY)	Retain
Cancer - 31 Day Second or Subsequent Treatment (DRUG)	Retain
Cancer - 31 Day Diagnosis to Treatment	Retain
Cancer - 62 Day Referral to Treatment Standard	Retain
Cancer - 62 Day Referral to Treatment Screening	Retain
RTT Incomplete Pathways - % waiting less than 18 weeks	Retain
RTT Patients over 52 weeks on incomplete pathways	Retain
RTT Admitted	Remove
RTT Non Admitted	Remove
Percentage of patients waiting 6 weeks or more for diagnostic	Retain
No of operations cancelled on the day not treated within 28 days	Retain
Maternity Closures	Add
Access and Responsiveness - Annual Plan - Improve Efficiency of Elective Care	
TBC - Theatres	Add
Last Minute Elective Cancellations for non clinical reasons	Add
OP Clinic Utilisation	Add
DNA Rate	Add
Appt to Attend Ratio	Add
Day Case Rate	Add
Activity - OPD	Add
Activity - Theatres	Add
Activity - Angio	Add
Activity - Endoscopy	Add
Caring	
Emergency Department FFT - % positive responses	Retain
Inpatient FFT - % positive responses	Retain

Maternity FFT - Antenatal - % positive responses	Retain
Maternity FFT - Delivery - % positive responses	Retain
Maternity FFT - Postnatal Ward - % positive responses	Retain
Maternity FFT - Postnatal Community Care - % positive responses	Retain
Outpatient FFT - % positive responses	Retain
Mixed Sex Breaches	Retain
Complaints (rate per 10,000 occupied bed days)	Retain
Caring - Annual Plan - Create best environment for patients	
Meeting to discuss	
Well Led	
Overall Sickness Rate	Retain
%age of staff who have had appraisal	Retain - Revise to YTD
Staff Turnover rate	Retain
Total Establishment (WTE)	Retain
Vacancy Rate (All Staff)	Retain
%age of staff who have completed MAST training in the last 12 months	Retain
Data Security Awareness Training	Add
% Trust wide policies in date	Add
Well Led - Annual Plan - Staff Health, well being and working lives	
Meeting to discuss	

4. Recommendation

- The board is asked to agree the proposed changes to content and layout for introduction over Q1 of 2017/18

Angela Stevenson
Chief Operating Officer
April 2017