

Trust Board meeting 20 November 2008

TB2008.81

Subject	Board Performance Report - September 2008 (month 6)			
Purpose of paper	To update the Trust Board on current performance against the Trust's balanced scorecard.			
Board Lead(s)	Mr Andrew Stevens, Director of Planning & Information			
Background papers (if any)	Trust Business Plan 2008/09			
Action/decision required	To note current performance. To identify areas where further action is needed.			
Key purpose	Strategy	Assurance	Policy	<u>Performance</u>
Strategic Goal(s)	To be hospitals of choice (SG1) To be world-leading teaching hospitals and an AHSC (SG2) To achieve financial sustainability and long-term growth (SG3) To be an excellent employer (SG4)			
Strategic Objective(s)	All			
Links to: Board Assurance Framework/ Trust Key Risks/Annual Health Check element(s)	Performance targets in all five domains are linked to the delivery of the Trust's objectives as outlined in the BAF. Risks to the achievement of these targets are included in the Trust key risks.			
Also considered by	Relevant performance monitoring bodies within the Trust.			
Resource and financial impact	Not applicable			
Consideration of legal/equality/diversity/engagement issues	Not applicable			
Acronyms and abbreviations used	MRSA - methicillin-resistant <i>Staphylococcus aureus</i> ; C.diff - <i>Clostridium Difficile</i> .			

Service Performance – September 2008 (Month 6)

Introduction

1. The attached report summarises the Trust's performance up to the end of September 2008 (Month 6) against the five performance domains within the balance scorecard that forms part of the Trust's 2008/09 Business Plan.

Customer Focus

2. As part of the action plan agreed with the PCT to manage the over performance on the Trust's contract with Oxfordshire PCT, the Trust is required to extend inpatient outpatient and diagnostic waiting times for non-urgent patients. As a result of this action, the Trust is now breaching a number of the waiting times targets set at the beginning of the year. This has result in the performance against a number of the waiting times targets being traffic-lighted as red. Five of the eight indicators which for September were traffic-lighted as red fall into this category. The Trust is still meeting the two key national 18 week wait indicators.
3. As at the end of September 2008, the Trust was still failing to meet the fractured neck of femur target. An action plan has been agreed with the objective of ensuring the target is met within quarter 3 of the current financial year. Performance to date within the quarter stands at 83%, significantly above the target level of 72%.
4. Key elements of the plan to increase the number of non-elective patients operated on within 24 hours are dependent on the opening of the cancer centre and the freeing up of theatre capacity on the John Radcliffe site. However, work is being undertaken to secure improvements through process changes in advance of this.
5. While the Trust continues to meet the target for the percentage of genitourinary medicine patients offered an appointment within 48 hours of contacting the service, further work is being undertaken to ensure that the target is met for the percentage of patients actually seen within 48 hours. Measures include alterations to the opening hours of the service and the introduction of more walk-in clinics.

Quality and Safety

6. In September there were five cases of MRSA against a monthly target of 4 cases. Although at the end of September, the Trust was two cases above its year to date profile, performance for the year to date has since improved and is below the limit for the number of cases. CDiff performance remains well below the profiled limit.
7. In September there was a deterioration in the performance against the indicator measuring the speed with which members of the public receive a response to their complaints. This related to three complaints, two of which were complex and interrelated and, therefore, required significant time to prepare a full response.
8. September saw an increase in the number of patient falls. The reasons behind this are being identified and monitored through the Trust's clinical governance processes.

9. Two of the data quality indicators (ethnic group monitoring and coding) and the breast feeding initiation indicator have remained amber. Additional coders have recently been appointed which together with planned strengthening of the coding processes will help to improve performance. Performance against the patient ethnic group indicator has continued on its upwards trend and is approaching the Trust's challenging internal target of 95%. The Trust's performance is significantly above the national target of 80%.

Productivity and Improvement

10. The Trust's performance within the Productivity and Improvement domain remains variable and has declined over the last three months.
11. Although there was a slight improvement in September against both the average length of stay and the day case rate indicators, performance remains traffic-lighted as amber. The cumulative year to date position for average length of stay is achieving the target. The action being agreed with the PCT to manage contract over performance represents a risk to the achievement of the day case rate target, since it will have a disproportionate impact on the more routine cases. There was a slight deterioration in performance against the theatre utilisation indicator. Performance against the same day admissions indicator also deteriorated in September. Performance in all four areas remains the focus of the performance improvement programme. Performance against delayed discharges and long stayers remains traffic-lighted as red.

Finance

12. In September all finance indicators were traffic lighted as green. Overall financial performance is discussed in more detail in the report of the Director of Finance and Procurement.

Workforce

13. Performance against the workforce domain remains in line with that of previous months.

Andrew Stevens
Director of Planning & Information
September 2008