The Whittington Hospital **NHS**

NHS Trust

ITEM: 5

| **MEETING:** | Trust Board |
| | 16th January 2008 |

| **TITLE:** | Performance Dashboard Report |

SUMMARY:

This paper presents an update on the development of the Dashboard Report for the Trust Board.

| **ACTION:** | For discussion and approval |

| **REPORT FROM:** | David Emmerson, Assistant Director of IM&T |

| **SPONSORED BY:** | Susan Sorensen, Director of Strategy & Performance |

Financial Validation Lead: Director of Finance	Not applicable

Compliance with statute, directions, policy, guidance Lead: All directors	Not applicable

Compliance with Healthcare Commission Core/Developmental Standards Lead: Director of Nursing & Clinical Development	**Reference:** Not applicable

Compliance with Auditors' Local Evaluation standards (ALE) Lead: Director of Finance	**Reference:** Not applicable

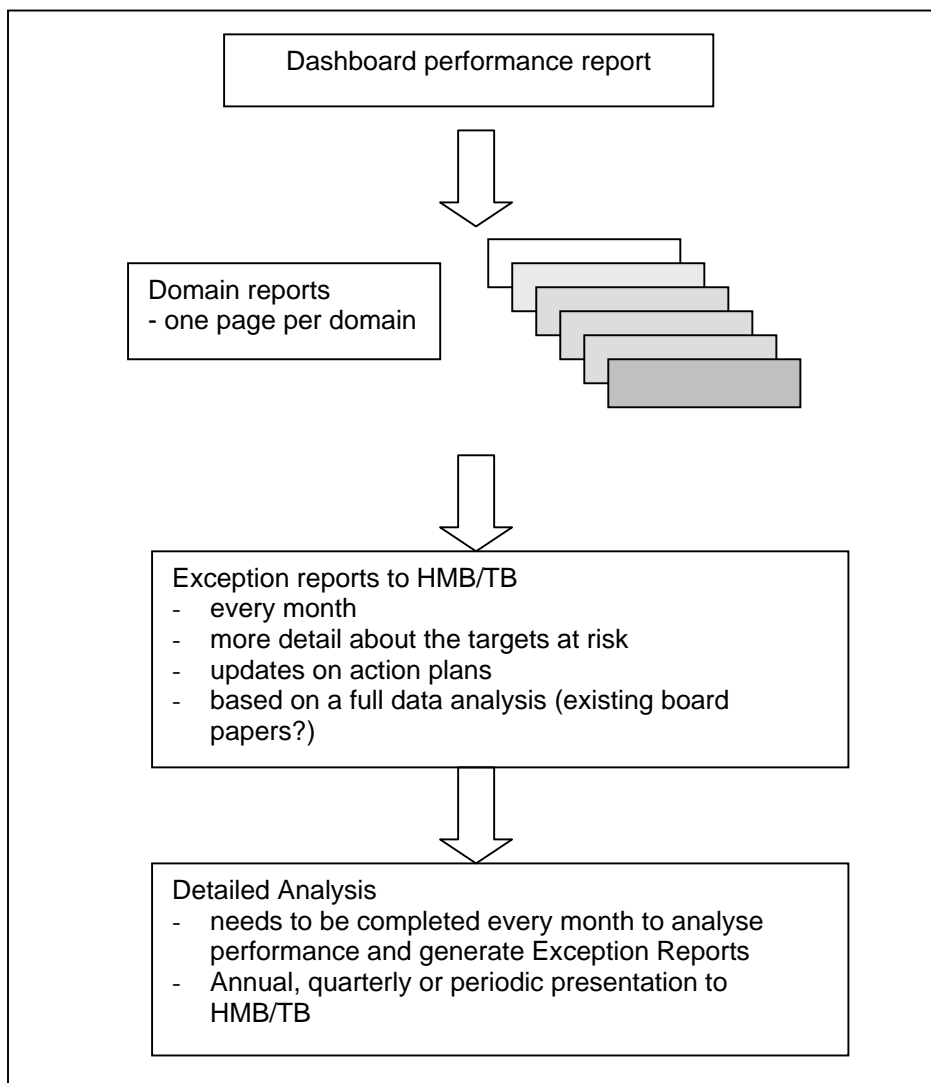| **Compliance with requirements of FT application and monitoring regime** Lead: Director of Strategy & Performance	**Reference:** Not applicable

1.   <u>Introduction</u>

The overall design concept of the Performance Dashboard Report was agreed by ET in mid-December 2007 and was presented to the Trust Board on 19th December 2007. This report provides a worked example to demonstrate the format, the reporting structure and how the report should be used.

2.   **Design Principles**

The basic principle of the dashboard is that it is an **<u>alert mechanism</u>**.

The dashboard has six domains with a number of indicators that are coded and rated as Red, Amber or Green. Each domain will have a drill down report limited to a single page that provides additional information on the component indicators and quantification where possible.

More detailed information on the indicators that are not green will be contained within the Exception Reports presented by executive directors each month. This is a change to the current reporting structure where the full report is presented each month.

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              │        Dashboard performance report │
              └─────────────────────────────────────┘
                              ↓

  ┌───────────────────┐     ▭▭▭▭▭
  │ Domain reports    │
  │ - one page per    │
  │   domain          │
  └───────────────────┘
                ↓

  ┌─────────────────────────────────────────────┐
  │ Exception reports to HMB/TB                  │
  │  -  every month                              │
  │  -  more detail about the targets at risk    │
  │  -  updates on action plans                  │
  │  -  based on a full data analysis (existing  │
  │     board papers?)                           │
  └─────────────────────────────────────────────┘
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  ┌─────────────────────────────────────────────┐
  │ Detailed Analysis                            │
  │  -  needs to be completed every month to     │
  │     analyse performance and generate         │
  │     Exception Reports                        │
  │  -  Annual, quarterly or periodic            │
  │     presentation to HMB/TB                   │
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3.   Development Timetable

A very ambitious development timetable is in place for this report.

January – March   Source all the data, agree data definitions, devise a weighting system for each domain that generates the higher level rating, and establish management processes to provide the information in accordance with the required timescale.

March/April   Review the dashboard for fitness for purpose (agree indicators to be used in 2008/09).

April onwards   Development of an electronic dashboard (review proprietary products versus in house development).

4.   Worked Example

A worked example is attached using the Access and Targets domain.

At the top level there are three indicators relating to the targets the Trust has to achieve. The Referral to Treatment target has been shown separately as it is the highest priority for the Trust. Each indicator is coded as (G)reen, (A)mber or (R)ed and there is a link to go to the domain report that gives the detail. In this case there are a large number of component indicators that have been coded with the actual numbers and percentages. The domain report provides a further method of identifying the issues that need attention – the detail about what has caused the issue and what is been done to remedy the situation will be contained within the Exception reports.

 Because there are so many components for this domain the Monitor/Provider Agency methodology has been used. Each indicator has a weighting and the total score defines the overall rating for the section. The detail of this process for the Access and Targets domain is also attached for information.

5.   Recommendations

The Trust Board is requested to:

(a)   Approve the initial set of Indicators. There will be a review within three months to adjust the indicators if the initial set is not appropriate.

(b)   Approve the overall design concept of an alert mechanism.

(c)   Note the fundamental change is information reporting implied by this development and the need for all executive directors to review existing board papers to be consistent with this approach.

(d)   Note the ambitious timetable for development. The key risks are the availability of data to fit into the board timetable and development resources at a very busy time (SLA negotiations, delivery of 18 weeks and productivity improvements).

(e)   Note that from April 2008 onwards the content of the dashboard will be mainly fixed and development will switch to the appropriate delivery mechanism.