

MEETING: Trust Board
18 June 2008

TITLE: Dashboard Report

Executive Summary:

The attached report updates the Board on performance in each of the dashboard domains for April 2008. Of note are:

- Finance domain – the risk rating and CIP indicators are flagged red for the April data shown in the dashboard. The position continues into May and is highlighted in the Finance report.
- Clinical quality domain - adverse incidents indicator – there are seven points above the median line which, if next months performance is above, will result in a step change indicating a deterioration in performance
- Patient experience domain – hospital cancellation indicator – there are four points above the median line. This may be normal variation – a further three points above the line will indicate a deterioration in performance
- All other domains and indicators remain within normal performance variance

Work is underway to review the relevancy of the indicators, or the creation of new indicators, in each of the dashboard domains. In addition the sources of data are being tested for consistency of measurement and the quality of the baseline data. Non-executive and executive directors are determining the threshold scores for each indicator and how these are described to ensure that there is a clear rationale for when movement is determined to be an improvement or deterioration in performance.

The following domains have now been reviewed and the leads will report back to the Board.

- Patient experience
- Access and targets
- Finance

The following will be reviewed by 7 July 2008:

- Workforce and efficiency
- Strategy
- Clinical quality

The dashboard structure and indicators have not yet changed, however each domain will be changed as the indicators are agreed and an explanation of these changes, and the purpose and outcome for each domain, will be described to the Board at subsequent meetings.

The calculation of the overall traffic light at the top of each domain box on the dashboard is based on weightings from the Monitor compliance framework for finance and access/targets and the threshold scores for each of the other domains will determine the others.



It is proposed that the information presented to the Board is as up-to-date as possible and this would mean a move away from reporting each month's performance.

The dashboard would provide information using the 'Statistical Process Control' (SPC) run charts so that the Board can determine a rolling performance of each of the key performance indicators at each meeting. The board would move away from an in-month performance focus to a cumulative year-to-date and projected out turn performance.

ACTION:

- The Board is asked to note the report and progress on its development.
- The board is asked to approve the move towards presentation of 'live data' to enable a review of performance over time using SPC to document normal variance or step changes in performance.

REPORT FROM: Susan Sorensen, Director of Strategy & Performance

SPONSORED BY: David Sloman, Chief Executive

Financial Validation

Lead: Director of Finance

Trish Donovan
Deputy Director of Finance

Compliance with statute, directions, policy, guidance

Lead: All directors

"The Intelligent Board"

Compliance with Healthcare Commission Core/Developmental Standards

Lead: Director of Nursing & Clinical Development

Reference:
HCC Core Standards

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:
Compliance Framework
FT stage 2 assessment: E&Y report on financial reporting procedures