

ITEM: 08/186

DOC: 7

Meeting: Trust Board
Date: 17 December 2008

Title: Dashboard Report

Executive Summary: Following last months review of the dashboard by the Trust Board a number of changes have been made to the presentation of the data to enable a more accurate review of Trust benchmarked performance.

Within the access and targets domain the KPI for MRSA bacteraemia cases per bed day now shows Trust performance compared to national and regional performance. The data has been taken from the required submissions by Trusts to the Health Protection Agency.

Within the clinical quality domain the benchmark data demonstrated in KPIs for overall mortality rate and readmissions has been updated to reflect performance in the last 12 months and these both show that Trust performance has improved.

Work continues to develop the datasets required to populate the missing elements of the dashboard which the board approved for inclusion at the last meeting. In addition an analysis of the Trusts performance against national benchmarks to determine its position relative to the top decile and quartile performers is underway. This will be used to identify the work required to improve Trust performance in the coming year to, where indicated, move from the bottom half of the league to the top quartile, and the top half to the top decile.

Performance exception report

- o There is one red rated KPI to report and this is the MRSA performance within the access and targets domain. Detail of this will be reported to the board as a separate item at today's meeting.

Action: To:

- o note and discuss performance within the domains
- o comment on the changes to the dashboard

Report from: Fiona Elliott, Director of Planning and Performance

Financial Validation

Lead: Director of Finance

Christine Daniels, Assistant Director of Finance

<p>Compliance with statute, directions, policy, guidance</p> <p>Lead: All directors</p>	<p>Reference:</p> <p>“The Intelligent Board” Report</p>
<p>Compliance with Healthcare Commission Core/Developmental Standards</p> <p>Lead: Director of Nursing & Clinical Development</p>	<p>Reference:</p> <p>n/a</p>
<p>Compliance with Auditors’ Local Evaluation standards (ALE)</p> <p>Lead: Director of Finance</p>	<p>Reference:</p> <p>n/a</p>
<p>Evidence for self-certification under the Monitor compliance regime</p> <p>Lead: All directors</p>	<p>Compliance framework reference:</p> <p>Appendix C3</p>