

ITEM : 09/125
Doc: 06

Meeting: Trust Board
Date: 16 September 2009

Title: Dashboard Report

Executive Summary:

Patient Experience

- The introduction of the new electronic patient feedback system completed at the end of August. The number of patient surveys captured in August was 856. The presentation of the information relating to patient information presented to the Board will be reviewed and will change from November.
- The denominator for the single sex indicator is occupied bed days and that has reduced with the bed closures for ward refurbishment over the summer. As the Trust is running with 20 fewer beds in the system it has been difficult at times to balance the need for admission against the single sex performance. Where a patient has to be admitted to a mixed sex area consent is obtained in advance. Performance is expected to improve once all ward refurbishment has completed and wards are back to their original locations.

Access & Targets

- There were no MRSA bacteraemia cases in August and in fact for the last 140 days at the time of writing this report. The Trust performance is below the 12 month trajectory for the first time.
- The Trust's ED 4-hour target performance has continued to improve and August saw the highest ever monthly performance of 99.5%. The year to date performance is 98.37%.

Strategy

- Maternity deliveries dipped below plan. There was an increase in women who required transfer pre delivery due to high risk pregnancy complications.
- ED attendance saw a decline in month – this can be seen as usual variation for August when looking at previous years.

Workforce & Efficiency

- The vacancy rate has reduced again, however as it is still higher than the upper control limit is remains red risk rated. Appendix 1 of the report provides a detail of progress against the recruitment plans for nurses in key areas. Staff turnover has fallen to its lowest level since recording commenced.
- Length of stay reduced significantly over the previous two months. It is believed that the reduction in bed numbers due to the ward refurbishment program resulted in an efficiency gain. Admission activity is being carefully monitored to determine at what point clinical safety requires the opening of additional capacity during the winter months so that costs can be contained through this reduced length of stay.
- The increase in the day case rate is a statistical artifact and caused by the reduction in in-patient surgery which changed the proportional rate of day case work reported.
- The increase in DNA rate has been analyzed and is a result of patients not attending during the holiday period.

- The out patient follow up ratio has fallen again this month and reflects the changes to patient management by specialist teams. The Board will recollect that high follow up ratios in some clinical specialties are now associated with financial penalties by the PCT.

Finance

Many of the finance indicators are red rated and the financial report provides in depth analysis of the financial performance.

Action: The Trust Board is asked to review Trust performance.

Report from: Fiona Elliott, Director of Planning and Performance