

ITEM: 11/011
Doc: 08

Meeting: Trust Board
Date: 26 January 2011

Title: Dashboard Report

Executive Summary: The Board will notice that the Dashboard cover page now includes a top level Quality and Risk Profile (QRP) report. The six performance indicators are the CQC top level summary of the 16 outcomes reported in the fuller report. Ratings for each of the indicators are based on CQC measurement of our performance. Where the Trust's rating according to CQC is within confidence limits this is termed "as expected". Where above the upper limit this is termed "excellent" and if below the lower limit it would be reported as "poor".

Trust performance in December is as follows:

Clinical Quality

- There were no MRSA bacteraemias in November/ December however there has been one post 48-hour case in January. Root cause analysis is underway and a verbal update will be given at the Board meeting. The Trust is still below its upper threshold limit of four for the year.

Patient Experience

- The net promoter score for out-patient patient satisfaction remains marginally above the median for the fourth consecutive month.
- Single sex breaches – the Trust is now required to report centrally its single sex accommodation breaches on a monthly basis. There were no breaches in December. Matrons have undertaken a survey of patients to understand their perception of single sex accommodation and this will be presented to a future trust board.
- Hospital cancellations remain high – this performance will be analysed under separate cover in paper 10 of this Board.

Access & Targets

- The trust continues to maintain an internal target for the emergency department (ED) of 98% of patients seen and discharged/admitted within 4-hours. The national standard is 95%. ED performance in December was 96%. The Chief Executive has commissioned a review of ED by an external ED consultant to ensure the Trust is taking every action required to ensure performance returns to the required standard. A report to Trust Board will follow on completion of this review
- Out-patient follow up ratio has seen a significant fall in December that reflects the implementation of the follow up policy. It is anticipated that this will in turn reduce the DNA rate for follow up patients that remains above target (performance can be seen in the QIPP domain)
- NHS number completeness performance is red rated. Specific data quality resource has now been redirected to improve data quality against this measure

Strategy

- Haringey market share for first out patient referrals continues to be below expected levels and has now seen a downward step change. We are investigating whether this is as a result of an overall fall in market volume or a shift in market share away from the Whittington.

Workforce & Efficiency (QIPP)

- The average length of stay has remained below the median for the sixth successive month – there have been a very high level of admissions and this fall in LOS represents a significant productivity improvement. The Trust has managed to keep closed its allocated winter pressure beds which contributes to delivering CIP
- **Vacancy and turnover rates** – the vacancy rate has breached the lower control limit for a second month. Turnover has slightly increased. Taken together these indicators reflect the Whittington's success in recruiting quickly into vacant posts.

Finance

- See the main Finance report for detail on the Trust's financial performance.

Action:	To discuss performance and consider changes proposed.
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Report from:	David Emmerson Assistant Director of IM&T (Information Services)
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Sponsor:	Fiona Smith Director of Planning & Performance
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Compliance with statute, directions, policy, guidance	Reference:
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Lead: All directors

NHS Operating Framework
CQC Annual Assessment