

Whittington Health Trust Board

24 April 2013

Title:	2012/13 Corporate Objectives – six month progress report						
Agenda item:	13/058		Paper			4	
Action requested:	For discussion						
Executive Summary:	<p>This report provides an assessment of performance against the 2012/13 Corporate Objectives.</p> <p>The Board is asked to discuss the report.</p>						
Summary of recommendations:	The Board is asked to discuss the progress made to date						
Fit with WH strategy:	This paper updates the board on progress towards achievement of Whittington Health strategic goals,						
Reference to related / other documents:	Board Assurance Framework						
Date paper completed:	15 April 2013						
Author name and title:	<i>Dr Yi Mien Koh, Chief Executive</i>			Director name and title:		<i>Dr Yi Mien Koh, Chief Executive</i>	
Date paper seen by EC	n/a	Equality Impact Assessment complete?	N	Risk assessment undertaken?	N	Legal advice received?	N

Corporate Objectives 2012/13 – Progress report

Objective	SRO	Rating 6mths	Rating 12mths	Comments
1. Delivering integrated care across Whittington Health	GB	A	A	
a. Collaborating with GPs, social services and other NHS providers to deliver integrated care strategy	GB	A	G	East Haringey integrated care pilot rolled out across Haringey and Islington.
b. Improving data quality and developing innovative metrics to enable real time monitoring and reporting of performance	MDS	A	R	Poor data quality and lack of robust monitoring processes identified by Intensive Support Team.
c. Improving communication with GPs by having electronic communication as standard and using a GP portal	MDS	A	R	GP portal not operational until EPR in place due in August 2013.
d. Electronic Patient Record to go live in April 2013	GW	A	R	EPR delayed to August 2013. Community system delayed to October 14.
2. Ensuring “no decision about me without me”	BS	A	A	
a. Improving the patient experience by one quartile as measured by national annual inpatient and outpatient surveys	BS	A	G	Improvement in Cancer Patient Experience. Friends and Family test implemented in April 2013.
b. Fifty percent of all communication with patients are to be by electronic media in 2012/13, and 75% by 2013/14	MDS	R	R	No progress and target not achieved.
c. Achieving 100% of discharge letters to be sent to GPs and patients within two working days	MDS/ MK	A	R	Standard not achieved. (Original target only applied to inpatient discharge letters.)
d. Implementation of enhanced recovery pathways across all surgical and relevant medical specialities, putting patients at the centre of their own recovery	MK	R	R	Implementation delayed.
3. Delivering efficient, effective services	RM	A	A	As measured by reference costs and KPIs.
a. Meeting key national performance indicators and standards	MDS	A	A	Achieved A&E 4 hours but not 18 weeks and cancer waiting times.
b. Achieving statutory financial duties including national mandatory financial targets	RM	G	G	Achieved.
c. Delivering £13.1 m Cost Improvement Programme (CIP)	MDS/ RM	G	G	Achieved but with some non recurrent support.
d. Full implementation of Service Line Management	RM	A	A	Service Line Reports introduced but SLM not achieved.
e. Achieving productivity levels equal to the peer group average as measured by reference cost index	MDS/ RM	A	A	Most recent reference cost of 105 is an improvement from 108 in 2011/12. 2012/13 will not be

				notified until autumn.
f. Be on trajectory to achieve top quartile performance on indicators set out in NHS London Healthcare Benchmarking tool (http://lhbt.london.nhs.uk/lhbtool.aspx)	ALL	A	A	The tool measures performance across efficiency, staff, patient flow, quality, access and finance. Overall rating of AMBER
g. Adoption of LEAN across the trust by meeting Unipart project milestones	MDS	A	R	Project implementation delayed and expected savings reduced due to not having accounted for re-provision.
4. Improving the health of the local population	MK	A	A	
a. Maintaining top decile safety record as measured by Standardised Hospital Mortality Indicator and other mortality indicators	MK	G	G	Latest SHMI (Quarter 3) is 0.71 is still the lowest in the country.
b. Operating a 7 day organisation	MK	A	A	Work in progress. Needs all consultants to be engaged
c. Improving compliance with local targets set out in Performance Dashboard as measured by step change in RAG ratings	MDS	A	A	Improved monitoring of local targets to track progress
d. Meeting waiting times targets for community services, notably musculoskeletal, physiotherapy and podiatry services	MDS	G	A	Failure to meet consistently maximum 6 week wait in physiotherapy and podiatry.
e. Implementing the health promotion strategy	YMK	G	G	Public Health Programme Board established to oversee implementation.
f. Achieving organisational equality objectives	MDS	G	G	Diversity and Equality Steering Group monitoring implementation.
5. Fostering a culture of innovation and continuous improvement	All	A	A	
a. Adoption of an innovation strategy	MK	G	A	Strategy is delayed due to restructure.
b. Achieving Foundation Trust Accountability Agreement milestones	YMK	A	A	FT application process delayed.
c. Delivering service transformations as set out in QIPP programme	MDS	A	A	Delayed due to limited management capacity and weak clinical engagement
d. Implementation of workforce and staff engagement strategies	MDS	A	G	Annual staff survey identified trust to be in top 20% of trusts in the country for staff engagement.
e. Implementation of communication plan	MDS	G	R	Trust Board failure in communication and public relations relating to strategy.
f. Implementation of the estates and sustainability strategies, including smart working	RM	G	A	Work in progress. (Excluding estates strategy)
g. Integrating research, clinical audits and teaching into professional development	MK	G	G	Achieved.
h. Achieving the mandatory training target of 90%	ALL	R	R	Did not achieve. Year end achievement was 83%

i. Improving appraisal completion rates to at least 75% in 2012/13 and 90% in 2013/14	ALL	R	R	Did not achieve. Year end achievement was 70%
j. Implementation of Whittington Health strategy	YMK	G	G	The integrated care strategy has commissioner support with a two year block contract. Further evidence is provided in the commissioners letter of support.
k. Ensuring that both undergraduate and postgraduate education is central to Whittington Health's core business	MK	G	G	Excellent feedback from trainees and students who rate the hospital a top training location.