Trust Board

NHS
Gateshead Health
NHS Foundation Trust

Report Cover Sheet

Agenda Item: 9

Date of Meeting:	27th November 2019			
Report Title:	Trust Performance Report			
Purpose of Report:	To provide an overview on performance against national and local operational performance and workforce targets, ensuring the Board receives assurance about the Trust's performance.			
	Decision: ☐	**Discussion:** ☐	**Assurance:** ☒	**Information:** ☐
Trust Goals that the report relates to: (Including reference to any specific risk)	**Goal 3** In all locations and settings of delivery, our patients will experience excellent, timely and seamless care that meets their individual needs. **Goal 6** We will have an engaged and motivated workforce living the values and behaviours of the organisation, and who are responsive and adaptive to the changing needs of our environment. **Goal 7** We will deliver value for money and help ensure the local health and care system is sustainable and well led.			
Recommendations: (Action required by Board of Directors)	The Board is asked to note the performance of the Trust against key operational performance and workforce metrics, identifying deterioration and under-performance against national standards in some areas: • Urgent and Emergency Care 4 hour standard In addition, the Board will note ongoing challenge regarding meeting the Trust's internal sickness absence and appraisal targets.			
Financial Implications:	This report contains performance information on sickness absence which is a cost to the organisation. Addressing areas of non-compliance with national access targets may have financial implications but none have been identified at the time of writing.			
Risk Management Implications:	The Trust is reporting a potential operational support need (Urgent & Emergency Care 4 hour performance) under the SOF as at 31st October.			
Human Resource Implications:	The Board is committed to supporting and motivating its workforce and is attempting to balance improvements in all three agreed metrics.			
Trust Diversity & Inclusion Objective that the report relates to: (including reference to any specific implications and actions)	**Objective 1 (patient care)** Every effort is made in meeting the national access standards to ensure all patients receive streamlined accessible services. **Objective 2 (inclusive workforce)** The Trust is committed to supporting its workforce and to demonstrate this via routine review of a number of metrics.			
Author:	Lewis Atkinson, Deputy Director Strategy & Transformation			
Presented by:	Susan Watson, Director of Strategy & Transformation			

1. Single Oversight Framework:

The scorecard below reflects the Trust performance against the operational metrics described in the Single Oversight Framework and if there are any potential support needs. As at 31st October 2019, the Trust is reporting potential support needs for A&E performance under the operational performance theme of the SOF.

Particular areas of concern include:

- Delivery of the national 4 hour access standard – although the standard has not been met for a number of months the Trust routinely retains its positon among the top 20 performers nationally and at the end of October was the 13th best performing Trust in the country. The Finance and Performance Committee was briefed in detail on the issues and actions being taken at its October meeting and is scheduled to receive a further update at its November meeting.

2019/20 Trust Performance Dashboard
NHS Improvement - Single Oversight Framework

NHS Gateshead Health NHS Foundation Trust

Category	Performance Indicator Information		PSF Trajectory	2018/19	2019/20 Performance Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Standard 2019/20	Trigger for Potential Support Need:- (2 consecutive months of non delivery of standard/PSF trajectory)*
Operational	Incomplete RTT Pathways - Waiting < 18 weeks		N	92.6%	91.7%	92.7%	92.3%	92.2%	92.3%	92.2%	92.3%						92.3%	92%	
	Maximum Waiting Time 4 hours in A&E		Y	94.0%	92.2%	92.7%	93.8%	93.7%	93.1%	91.0%	89.8%						92.3%	95%	
	62 day wait for 1st definitive treatments		N	83.6%	89.3%	80.7%	71.2%	77.1%	76.4%	73.1%	86.7%						79.2%	85%	
	62 day wait for treatment (screening patients)		N	92.8%	95.2%	100%	100%	83.3%	92.3%	91.3%	91.0%						92.7%	90%	
	Maximum 6-week wait for diagnostic procedures		N	99.5%	99.7%	99.7%	99.6%	99.7%	98.4%	99.5%	99.6%						99.5%	99%	
	Dementia assessment and referral: the number and proportion of patients aged 75 and over admitted as an emergency for more than 72 hours:	Find	N	88.6%	90.4%	90.0%	90.7%	92.9%	92.2%	93.4%							91.6%	90%	
		Assess		98.5%	100%	100%	100%	100%	98.3%	96.3%							99.1%	90%	
		Refer		89.3%	100%	100%	100%	100%	98.0%	97.5%							99.2%	90%	

Dashboard Key:

	Performance is below the required threshold		Indicative performance is below the required threshold
	Performance is above the required threshold		Indicative performance is above the required threshold

2. Workforce metrics

The tables below show current performance across the Trust for delivery of key workforce metrics against agreed internal standards.

While the 12 month rolling average for sickness was 4.40% in October, the in-month figure was 4.13%. This is an improving position, with the rolling average being the lowest it has been for the last year. CMT has recently approved a revised action plan for the management of sickness that is being implemented. Core training compliance has recovered this month to above the agreed standard, with positive improvements in Surgery and Medicine, albeit we are aware completions are likely to reduce throughout the Winter months. Appraisals remain a priority for improvement in all clinical departments - however this is an improving position, and is being balanced alongside core training requirements; both of which take staff away from clinical duties. Focus is being given to ensure both the quality of appraisal conversation, as well as them occurring. Core training and appraisal numbers are reviewed and discussed by CMT weekly. The Human Resources Committee receives a broader range of metrics and is exploring with teams the reasons for under-performance against targets.

Workforce metrics

No.	Performance Indicator	Target	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19
1	Trust sickness absence rate (12 month rolling rate)	4.00%	4.65%	4.62%	4.65%	4.58%	4.67%	4.56%	4.53%	4.54%	4.54%	4.56%	4.50%	4.45%	4.40%
2	Core training compliance (12 month rolling rate)	85%	84.69%	83.22%	86.22%	87.20%	87.77%	88.40%	88.51%	88.01%	88.22%	87.66%	88.07%	84.80%	87.39%
3	Appraisal compliance (12 month rolling rate)	85%	72.00%	72.01%	70.14%	71.42%	71.20%	72.53%	75.06%	74.11%	72.28%	69.45%	69.95%	74.69%	76.60%
4	Staff turnover rate	No target	12.59%	12.65%	12.54%	12.20%	12.52%	12.47%	13.23%	12.74%	12.82%	12.86%	13.00%	12.60%	13.52%

Business Unit / Directorate			Chief Executive	Clinical Support & Screening	Community Services	Finance	IT & Information	Medicine & Elderly	Nursing & Midwifery	Strategy & Transformation	Surgical Services
5	Sickness	4.00%	3.25%	3.21%	5.54%	2.32%	4.49%	4.90%	4.32%	3.46%	4.81%
6	Appraisal	85%	85.19%	79.75%	79.85%	91.18%	84.97%	72.11%	93.50%	87.78%	70.71%
7	Turnover	No target	7.22%	11.75%	11.61%	21.58%	9.58%	14.15%	12.30%	25.35%	15.10%

Key: Confirmed performance on or above target | Performance progress towards target | Confirmed performance below target

Business Unit:	Equality, Diversity and Human Rights	Fire Safety	Heath, Safety and Welfare	Infection Preventon and Control Lvl 1 and 2	Information Governance	Moving and Handling Lvl 1 and 2	NHS Conflict Resolution	Preventing Radicalisation Lvl 1 & 2 and 3, 4 & 5	Resuscitation All Levels	Safeguarding Adults Lvl 1 and 2	Safeguarding Children Lvl 1, 2 and 3	Total
Chief Executive	89.29%	85.71%	89.29%	92.86%	92.86%	92.86%	75.00%	96.00%	100.00%	85.71%	85.71%	88.53%
Clinical Support & Screening	96.85%	82.17%	96.65%	92.14%	84.14%	91.53%	92.51%	95.56%	76.27%	96.47%	76.98%	89.79%
Community Services	97.64%	83.22%	96.93%	86.08%	85.58%	87.22%	95.04%	96.85%	79.46%	97.09%	81.33%	89.65%
Finance	100.00%	91.18%	100.00%	96.97%	94.12%	93.94%	97.06%	100.00%	N/A	100.00%	100.00%	97.31%
IT & Information	98.98%	91.84%	97.96%	98.95%	93.88%	97.93%	95.41%	98.29%	N/A	98.95%	96.94%	96.88%
Medicine & Elderly	90.87%	69.42%	90.00%	73.07%	71.15%	69.21%	84.90%	86.11%	61.96%	91.26%	75.02%	78.44%
Nursing & Midwifery	98.43%	92.91%	98.43%	93.33%	92.91%	92.50%	97.64%	97.44%	83.33%	96.58%	93.13%	94.61%
QEF	60.23%	66.45%	66.45%	64.30%	63.67%	82.65%	76.60%	62.21%	52.70%	62.74%	62.00%	66.70%
Strategy and Transformation	96.84%	92.63%	95.79%	95.51%	93.68%	92.22%	93.68%	97.70%	90.00%	96.59%	95.79%	94.97%
Surgical Services	91.67%	74.84%	92.30%	76.71%	75.56%	77.54%	88.72%	87.25%	73.45%	91.77%	72.59%	81.93%