



**East Suffolk and
North Essex
NHS Foundation Trust**

Board of Directors

Thursday, 31 January 2019

Report Title:	Performance Report Month 9 (December) 2018/19
Executive/NED Lead:	Director of Finance
Report author(s):	Head of Financial Strategy and Assurance Reporting with relevant Executive Directors
Previously considered by:	Monthly Report to Board of Directors

Approval

Discussion

Information

Assurance

Executive summary

The report for month 9 (December) outlines the performance of the Trust. It includes the Trust's key performance indicators, and in the main provides analysis at an overall organisational level, though for some areas there is discussion of performance by site (notably mortality and A&E access). Actions being taken to address performance issues are considered and agreed through the Trust's Assurance Committees (Quality & Patient Safety; Finance; People & Organisational Development). Key issues for the Board of Directors are commented upon in the escalation reports included in the report.

Generally, good progress continues to be made to ensure that reporting is at 'ESNEFT' level and there is no deficit relative to the richness of information enjoyed by the legacy organisations. Unsurprisingly though, there are some areas where reporting challenges are still being encountered.

The Trust is working to address some of the issues faced around quality, safety, performance and finance; but it is recognised that some performance metrics still need to improve.

The report includes sections measuring performance against NHS Improvement's single oversight framework (SOF); as well as outlining work and the changes that are now progressing following the establishment of ESNEFT in relation to the accountability framework and the new Trust's overarching strategy. Both will have a bearing on the future content and focus of the performance report which will need to evolve in conjunction with these developments.

Any indicators not available when collating this report will be advised to the Board as necessary. In November 2017 a small number of changes were made to the information and metrics NHSI use to assess providers' performance under each theme, and the indicators that trigger consideration of a potential support need. The updated metrics are to be reviewed and will be incorporated in the Board report at the earliest opportunity

Progress in a number of areas is covered in the attached report. Key points to note include:

Quality & Patient Safety:

- HSMR - Latest data available for discharges during September 2018 showed an in-month HSMR of 113.1 for the Trust, with a 12 month rolling figure of 110.6 (both metrics worse than November). ESNEFT is one of 5 trusts in the region of 15 non-specialist trusts with a higher than expected HSMR.
- By site, Colchester reported an in-month HSMR of 136, with a 12 month rolling figure of 118.5. IHT reported an in-month HSMR of 98.8, with a 12 month rolling figure of 104.4. A high level of uncoded activity on the Colchester site in particular persists, and is impacting on mortality reporting. This is a concern.
- The SHMI for the 12 months to June 2018 was 113.29, compared to 110.88 for the 12 mths to March 2018. This metric is now only available at Trust level.
- Serious harm falls – There were 5 serious harm falls at the point of incident in December.
- Never events – there were no never events in December. One never event was reported in November which related to administration of a medication by the wrong route.
- There were 21 developed grade 2–4 pressure ulcers reported in October in relation to ESNEFT hospital beds (4 Colchester and 17 Ipswich), the same total as the previous month.
- There were 7 incidents (5 Colchester, 2 Ipswich) considered to meet the criteria of being a serious incident and reported to commissioners. This compared to 11 in November (7 Colchester, 4 Ipswich).
- Complaints – there were 64 complaints in December, a reduction from the 97 recorded for November.
- Infection control – the first MRSA bacteraemia on either site this financial year was reported on the Ipswich site in December. C difficile cases have shown an increase in numbers (particularly at the CGH site). The total number of cases was 26 at the end of December, with 10 cases deemed as applicable to trajectory.
- Caesarean section rates – these are increasing nationally, and were 32.78% for Colchester and 28.77% for Ipswich (November data).

Operational:

- A&E 4 hour standard performance for the economy in December was 92.13%, below the national standard of 95%. Colchester site delivered 95.73% whilst Ipswich achieved 85.21%.
- December's current RTT position is 88.11%. This is below the trajectory of 91.51% and has deteriorated relative to November.
- 62 day cancer waits for 1st treatment remain below national target of 85%. Performance was 77.5% for November (validated position), which was 1.8% above the trajectory of 75.5%.

Finance:

- In December the Trust incurred a deficit of £6.1m (YTD deficit of £31.1m); this was adverse to plan by £18.4m. The use of resources rating remains at the lowest level of 4.
- There was a shortfall in CIP delivery of £0.3m in December (YTD adverse variance of £3.4m).
- The Trust is currently forecasting to deliver £26.6m CIPs against the Q2-4 ESNEFT target of £32.7m.
- A financial forecast exercise undertaken at the end of M8 indicated an outturn adverse variance of £13.2m (before PSF). After PSF loss is taken into account this adverse variance increased to £30.1m (PSF for the ESNEFT period is £16.9m). The actual M9 position represented a better position than forecast by £0.4m.

People & Organisational Development:

- Voluntary turnover (rolling 12 months) fell to 10.1% for ESNEFT.
- Mandatory training compliance improved to 74.9%.
- Appraisals compliance was 65.1%, an improvement of close to 10% compared to the rate of 55.6% for November.
- Overall nursing fill rates were 90.5% in December, higher than the previous month (83.9%).

Action Required of the Board/Assurance Committee**Click here to enter text**

- To note the Trust's performance

Link to Strategic Objectives (SO)			Please tick
SO1	Acting in the best interests of every patient every day	To deliver care in the right place at the right time in line with national best practice	<input checked="" type="checkbox"/>
		To ensure a positive patient experience at every contact by providing safe, effective, kind and compassionate care	<input checked="" type="checkbox"/>
		To achieve sustainable quality improvements in the delivery of care	<input checked="" type="checkbox"/>
SO2	Supporting our Workforce to look after every patient, every day	To deliver a positive patient-centred culture of great care for patients	<input checked="" type="checkbox"/>
		To engage, support and develop staff to achieve their potential	<input checked="" type="checkbox"/>
		To train and support all staff to take personal responsibility and accountability for their actions and the actions of others to drive organisational success	<input checked="" type="checkbox"/>
SO3	Achieving financial sustainability and organisational resilience	To develop constructive relationships with partner organisations to deliver sustainable and effective care for patients	<input checked="" type="checkbox"/>
		To deliver consistently and sustainably against national and local priorities	<input checked="" type="checkbox"/>
		To maximise value for money in delivering healthcare in our locality	<input checked="" type="checkbox"/>

Risk Implications for the Trust <i>(including any clinical and financial consequences)</i>	Noted within the separate escalation reports
Trust Risk Appetite	Quality: The Board has a cautious view of risk when it comes to patient safety, patient experience or clinical outcomes and places the principle of "no harm" at the heart of every decision it takes

Legal and regulatory implications <i>(including links to CQC outcomes, Monitor, inspections, audits, etc)</i>	The report includes dashboards of performance against key national targets.
Financial Implications	<p>ESNEFT is tasked by NHS Improvement with delivering a control of £40.4m, £21.6m after the receipt of Provider Sustainability Funding. This includes the Q1 control total that had been set for CHUFT.</p> <p>The ESNEFT target has been derived from the aggregation of the control totals set for the legacy organisations. CHUFT agreed to a control total imposed by NHS Improvement of £25.01m; £12.57m after receipt of Sustainability & Transformation Funding.</p> <p>IHT agreed to a control total imposed by NHS Improvement of £22.831m; £15.33m after receipt of Sustainability & Transformation Funding.</p>
Equality and Diversity	None apparent