Sandwell and West Birmingham Hospitals **NHS**



Report Title	Integrated Quality & Performance Report - June 2019-20		
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Meeting	Trust Board	Date 1 st August 2019	

1. **Suggested discussion points** [two or three issues you consider the Trust Board should focus on]

In month exceptions:

- 1x never Event was reported foreign object (swab) retained (Gynae patient)
- Late cancellations at 40 in June (previous persistent red) above the 20 internal target and above the 0.8% national standard against total elective admissions (at 1.2% in June); This returns to being a persistent red
- Diagnostic performance recovers to 99.05% in June ahead of July recovery target
- Serious Incidents were 12 in month. This increases from 3 in May and exceeds the previous high of 9 for the last 18 months shown in the IQPR.

Persistent Red exception reporting:

- Open Referrals reduction to c58,000 at the end of June. OMC delivery target 30,000 set for Sept19.
- Stroke Ward admissions within 4 hours misses its recovery date of May 19; June performance at 68% vs 80% target and revised recovery plan set for Aug19 at OMC.
- 6x52 week breaches on the incomplete pathway have been confirmed for June. Persistent red target was set initially at zero by April19, OMC revised to Sept19.
- A&E Re-attendance rate has increased above 5% target for the last three months and hence reinstated to persistent red focus. June reported at 5.44%
- RTT at 92% in all specialities was planned to deliver for June; as at June we reported 4x specialities still below this target; re-visited and agreed at OMC with improvement plans to deliver between Aug-Nov.
- FFT target for 25% response rate has been met for June (26%) for IP only, not for OP/Maternity, which exec lead will be progressing and bringing plan back to PMC;
- Bed Moves (between 10pm-6am) seen large improvement month on month from 698-583 in June.

New Indicators introduced in the June IQPR:

- Ward Sickness rate at 3%; graph by ward, and ward sickness for the Trust level which is at 6.7% in June
- Imaging key performance indicators on total turn-around-time (TAT) and associated targets

2. Alignment to 2020 Vision [indicate with an X' which Plan this paper supports]					
Safety Plan	X	Public Health Plan	X	People Plan & Education Plan	X
Quality Plan	Х	Research and Development		Estates Plan	
Financial Plan		Digital Plan		Other [specify in the paper]	

Previous consideration [where has this paper been previously discussed?]

OMC, PMC, Q&S

4. R	Recommend	lation	(s)

The Trust Board is asked to:

Quality Impact Assessment

- **NOTE** the June 2019 exceptions a.
- b. ASSURE improvement plans are in progress to address under-performing areas

Is this required?

5. Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]						
Trust Risk Register		n/a				
Board Assurance Framework		n/a				
Equality Impact Assessment	ls	this required?	Υ	N	Χ	If 'Y' date completed

If 'Y' date completed