

<b>Report Title</b>	Integrated Quality & Performance Report – August 2020		
<b>Sponsoring Executive</b>	Dave Baker, Director of Partnerships and Innovation		
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<b>Meeting</b>	Public Board	<b>Date</b>	1 October 2020

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

- Cancer continues to improve: 31 day 94.3% vs 96% target and 62 day at 76% vs. 85% target. RTT looks to have bottomed out in July and begins to improve in August to 61% v 53% with a reduction to the backlog of ~3000 patients to ~14000. Increasing referrals see our waiting list rise to c36,000; 52 week breaches climb further to 252 in August (178 July).
- DM01 performance improves to 59% with 5,020 patients above 6 weeks but is the lowest performing in the region with 2,436 above at 13<sup>+</sup> weeks. Patient's reluctance to attend combined with policy of not referring DNAs back to their GPs are the most significant issues.
- ED activity levels are now at 85% of last year, same period. Performance has dropped again in August to 84.9% (86% last month) suggesting likely difficulty in improving performance as activity increases more to last year levels. SGH is the key issue (79.91% v 88.33% at City) with the focus being on better flow in the day to ease pressure in the evening. Outlier regionally and nationally.
- Mortality rates have risen again to 128 against HSMR with high weekend mortality rate of 137 / weekday at 125, however we have negative excess deaths for the last 2 months. A report was produced for Q&S committee which points to timing, documentation and coding as the cause. Actions are in place to resolve this.
- After peaking in June still birth rates decline to more normal levels at 4.35 per 1000 babies and Neo natal deaths achieve 0 for the first time since February.
- Falls increase in numbers and rate near to upper control level. Medicine has pinpointed a high numbers of non-observed falls in the early morning, corresponding with handovers and some faulty buzzers.
- On the persistent reds Neutropenic Sepsis, Stroke ward in 4 hour, theatre cancellations and non-elective MRSA screening perform well whereas elective screening remains low.

### 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	X	Research and Development		Estates Plan	
Financial Plan	X	Digital Plan		Other <i>[specify in the paper]</i>	

### 3. Previous consideration *[where has this paper been previously discussed?]*

OMC, WD5 Group Distribution to Group Management, PMC, CLE, QS

### 4. Recommendation(s)

The Board are asked to:

- Note the performance for August 2020 and assure itself that performance of clinical indicators are in line with expectations or actions.

### 5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register	X	Numerous				
Board Assurance Framework	X	SBAF 11: Labour Supply and SBAF 14: Amenable Mortality				
Equality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed
Quality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed