Paper ref: TB (07/21) 0012

Sandwell and West Birmingham Hospitals

				NHS Trust	
Report Title	Integrated Quality & Performance Report – May 2021				
Sponsoring Executive	tive Dave Baker, Director of Partnerships and Innovation				
Report Author	Matthew Maguire – Associate Director Performance and Strategic Insi			d Strategic Insigh	t
Meeting	Public	c Board	Date 1s	t July 2021	
1. Suggested discussion	on poin	Its [two or three issues you consider t	e Committee should foc	us on]	
• There were 2 x Never events - wrong site surgery in Ophthalmology (patient has had					
corrective surgery) and an unintended connection to air instead of oxygen in City ED, both					
patients were unaffected. After a National CAS alert Trusts have been asked to purchase					
alternative devices not requiring medical air to be delivered via an air flowmeter. Following					
		eters except those tethered t			be
discarded, and all m	edical	air outlets no longer require	should be reversi	bly capped off.	
•		ins below standards (April la			
	-	t targets across the cancer ir		•	•
•		2 week Breast Symptomatic	-		
was discussed at OMC and plans are in place for Dermatology, Breast, Haematuria. Overall 2					
week performance may not start to come back on track until Aug/Sept.					
• HSMR reporting March is at 105 (148), a significant drop. SHMI reporting February is at 106					
(135). These reductions were predicted as we emerge from the latest Covid wave. Of note is					
that these measures are now lower than corresponding rates in 2019 when they were 119 and 114 respectively i.e. pre Covid and pre Unity. The rolling 12 month measure will need to					
			-		1 to
work its way out over the next 12 months. Further improvement work continues.					
 Imaging - Urgent GP 5 day imaging performance is reporting 46%, 18 months ago it was around 71% so a reduction of 25%. The clinical group has been asked to produce a plan. 					
 The A&E performance for May; delivered 84%, against other Acute and Combined trusts. This 					
		edian performance was 82%			
•		-	•		
ED department without being seen increased from 3.6% in April to 5.1% in May. The time to treatment in ED shows an increase by a month on month basis of 30% increase to 217					
minutes (Median tir					
•		d to 5.9%, the fifth consecuti	e month to its low	vest % in 18	
		er at 10.5% - achieving the ta			+.
		[indicate with an 'X' which Plan this p			
Safety Plan		ublic Health Plan		Education Plan	Х
Quality Plan	X Re	esearch and Development	Estates Plan		
Financial Plan		igital Plan	Other [specify in	the paper]	
3. Previous considera	tion [w/	here has this paper been previously dis	ussed?]		
WD5 Flash, OMC, PMC,					
4. Recommendation(
The Trust Board is aske					
a. Note the May perfe		e			
		c ch governance initiatives this matter re	ates to and where show	n elaborate]	
Trust Risk Register	n x whic	Numerous	ares to una where show	n endboratej	
Board Assurance Framework SBAF 11: Labour Supply and SBAF 14: Amenable Mortality					
Equality Impact Assessment Is this required? Y N X If 'Y' date completed					
		Is this required? Y N	X If 'Y' date cor	· ·	
Quality Impact Assessm	ient			npieteu	