

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST

EXECUTIVE SUMMARY
BOARD OF DIRECTORS
HELD ON 20 MAY

Subject:	Integrated Performance Board Report
Supporting TEG Member:	Kirsten Major, Director of Strategy and Operations
Authors:	Paul Buckley, Deputy Director of Strategy and Planning
Status¹	A

PURPOSE OF THE REPORT:

This paper describes the ongoing development of the Trust's Integrated Performance Report (IPR).

KEY POINTS:**Performance Indicators for 2015/16**

The Board should establish the key performance indicators and targets for the organisation aligned to those set out by Monitor, NHS England, Care Quality Commission and those identified locally. The development of the IPR in 2014/15 has resulted in the Board and the Trust Executive Group (TEG) debating and agreeing the current metrics. In March 2015 Monitor published the Risk Assessment Framework (RAF) for NHS Foundation Trusts. Contained in the RAF are the targets and indicators that Monitor use to assess and gain assurance of NHS Foundation Trust standards of governance. There are no new metrics within the RAF for the Board to consider for 2015/16.

There is also no national CQUIN scheme for the Trust in 2015/16 but there is a Local Incentive Scheme with 5 indicators for the Board to consider, which relate to:

- Dementia
- Care Planning in Community Services
- Avoiding Readmissions
- Clinic Letters
- Breastfeeding

For any in-year changes in performance metrics a formal change control process has been established. This will require any changes to the metrics agreed by the Board to be discussed at TEG prior to returning to the Board for approval.

SUI Reporting

Following a review of the reporting of serious untoward incidents (SUI) within the Trust, the following changes are included in the IPR.

Measure	Standard	Target Type	Reporting Frequency	Red	Amber	Green
Number of serious untoward incidents (SUI)	Actual number	Local	Monthly	n/a		
Approved SUI Report submitted within timescales	Zero reports beyond agreed timescales	National	Monthly	Overdue reports	n/a	No overdue reports

Well Led Framework for Governance Reviews

Monitor published guidance for NHS Foundation Trusts to support the requirement to carry out an external review of governance every three years and gain assurance that organisations are well led. The framework has four domains, ten high level questions and a body of 'good practice' outcomes and evidence base that organisations can use as part of the review. There are a range of references to performance indicators/management and a single domain on measurement with an overarching

question; "Is appropriate information on organisational and operational performance being analysed and challenged?" A detailed review of the implications for the IPR and the Trust's performance management framework will be prepared for the Board in July.

Ongoing Performance Management of Directorates

The IPR presents performance at a Trust and Directorate level across each of the STH strategic aims. As a result performance is now reported in an integrated manner across clinical, operational, financial staff and research dimensions. The Directorate level dashboard sets out the relative performance against the agreed indicators and where a number of the required standards are not met the Directorate is described as being in 'Special Measures'. There are currently 10 Directorates in Special Measures.

At a corporate level, the STH performance management process includes Directorate Reviews, Business Planning Reviews and Special Measures meetings. This process helps to develop the devolved clinical directorate structure but equally holds leadership teams to account for delivering high quality, efficient and financially sustainable services. A Directorate level IPR, a more detailed operational performance management process and system for escalation will be developed further in 2015 to provide TEG and the Board with assurance that Directorates are meeting the required standards.

Ongoing Development of the IPR

The IPR is currently produced by manually entering data into a spreadsheet. The intention is to automate production of the report and make it available on the Trust's website. The first step is to incorporate the indicators into the existing Performance Management system that is already available on the Information Services website. In order to do this all contributors to the report will be required to provide their information on a standard upload form by an agreed date. This includes the executive summary and the exception reports. To facilitate this process TEG have nominated a lead who will provide both the data and the narrative for their areas of responsibility. Once the production of the report has been automated it can then be further developed to enable 'drill down' to provide the data at a more detailed level as required.

The timetable for the completion of the IPR will be amended to include the report being made available to the Finance, Performance and Workforce Committee, Clinical Management Board and Operational Management Board on a routine basis.

IMPLICATIONS²:

AIM OF THE STHFT CORPORATE STRATEGY 2012-2017		TICK AS APPROPRIATE
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Deliver Excellent Research, Education & Innovation	✓

RECOMMENDATION(S):

The Board is asked to:

- To confirm the current key performance indicators and targets included in the IPR are to continue for 2015/16.
- Approve the change to SUI reporting and consider the addition of the Local Incentive Scheme indicators.
- To note the intention to review the implications of Monitor's 'Well Led Framework for Governance Reviews' for the IPR for the Board in July.
- Note the ongoing development of the IPR and the Trust's performance management framework.

APPROVAL PROCESS:

Meeting	Date	Approved Y/N
Finance, Performance & Workforce Committee	11 May 2015	Y
Trust Executive Group	13 May 2015	Y
Board of Directors	20 May 2015	