

## Board of Directors

### Item 3.1

**Subject:** Month 11 SOF Performance Report  
**Date of Meeting:** Wednesday 29<sup>th</sup> March 2023  
**Presented by:** Jonathan Mathews, Chief Operating Officer  
**Purpose of Report:** For Assurance

BAF Reference	Impact on BAF
BAF2	The paper provides assurance that performance against the statutory indicators remain in line with the Trust risk appetite. Risks are highlighted in line with end of year trajectories.

Level of assurance					
✓	<b>Acceptable assurance</b> Controls are suitably designed, with evidence of them being consistently applied and effective in practice	<input type="checkbox"/>	<b>Partial assurance</b> Controls are still maturing – evidence shows that further action is required to improve their effectiveness	<input type="checkbox"/>	<b>Low assurance</b> Evidence indicates poor effectiveness of controls

#### 1. Executive Summary











The purpose of this paper is to present an update on the Trust performance for the period ending 28<sup>th</sup> February 2023 and should be read in conjunction with the performance dashboard that is attached as Appendix 1.















The Trust continues to operate in an environment that is focused on safely restoring high levels of elective activity as an output of the COVID-19 pandemic. There are currently 21 Red indicators on the dashboard reported by exception below. The Trust continues to perform well against our agreed trajectories and is in line with regional and national expectations. Industrial action, urgent demand and sickness remained risks in February 2023 and have impacted achievement of some of our key indicators.



#### 2. Performance

In terms of the Trust's statutory performance the following exceptions should be noted:







## Operational Performance

Indicator Performance				Narrative
RTT 18 weeks in aggregate - Incomplete Pathways	92.0%	 73.17%		<p>The overall 18 week position has shown a decline in position since Sept deteriorating to 73% in Feb.</p> <p>Patients continue to be clinically prioritised with a focus on long waiting patients. However late referrals and delays in the non admitted pathway has shown an increased number of tip overs to the 18 week position.</p> <p>The admitted PTL remains relatively static, but work is required on the non admitted PTL to support an overall improvement in 18 week performance.</p> <p><b>ACTION:</b> A Safe Waiting List management workstream is currently underway to look at actions for improvement. This will feed back through the Operational Board.</p>
Welsh Patients: 26 weeks Referral To Treatment waiting times - Incomplete	95.0%	 81.39%		<p>The Welsh PTL showed a small improvement in month. Patients are clinically prioritised with a focus on long waiting patients.</p> <p><b>ACTION:</b> Both the RTT &amp; Welsh Trajectories are being reviewed in relation to 23/24 planning.</p>
Referral to treatment - Incomplete Pathways 52+ weeks	48	 49		<p>The national target is to remove all 78+ week waiters by the end of March. At the end of Feb we had 7 patients over 78 weeks wait.</p> <p><b>ACTION:</b> All our long waiters are dated to meet this target, however this will be interdependent on the Urgent Surgery demand and any future industrial action dates.</p>
Overall Size of Waiting List		 5,014		<p>The overall waiting list size is being monitored based on referral trends.</p> <p>No current areas of concern that are not already mentioned above.</p>
Elective Activity Levels	100.0%	 87.68%		<p>February position was again below target in month, however YTD the Trust is 106% of the 19/20 baseline.</p> <p><b>ACTION:</b> March is expected to be in line with Trust forecast with industrial action paused while the new pay deal is considered.</p>







Indicator Performance				Narrative	
Cancelled Operations for non-clinical reasons	2.0%		2.6%		<b>ACTION:</b> All cancellations are reviewed by the Division and through the weekly performance meeting. Key themes are identified and actions in place to support improvements for 2023/24.
Patients not booked in within 28 days (non clinical cancellations)	0		3		3 Patients have been reported as 28 day cancellations within February. With industrial action in January and P2/ Urgent pressures it has been challenging to redate all patients within the 28 day period.  <b>ACTION:</b> There are actions in place to go in to the new year with no outstanding 28 day concerns.
Bed Occupancy	80.0%		77.46%		No concerns, ongoing monitoring.  Elective activity expected to increase in March 2023.
Cancer: 31 day diagnosis to 1st treatment for all cancers	96.0%		68.6%		The inability to run sustained levels of activity during Dec 22 & Jan 23 has impacted the backlog of Cancer cases to be treated in month. The Feb & March position is expected to be a similar position, given that a significant number of patients have already exceeded breach dates.  <b>ACTION:</b> Q1 23/24 Cancer Trajectory in place for improvement.
All cancers – maximum 62-day wait for first treatment from urgent GP referral for suspected cancer	85.0%		15.8%		A non-compliant position has been reported for January.  Priority attention continues on the Faster Diagnosis performance as well as expediting TCI dates based on clinical priority.  <b>ACTION:</b> Cancer Action Plan in place to support Q1 2023/24 recovery.
Cancer: 62 day Consultant Upgrade	85.0%		40.4%		<b>ACTION:</b> Cancer action plan being tracked through weekly performance and Integrated Performance Committee.
Cancer Patients meeting the Faster Diagnosis Target (FDT)	75.0%		50.0%		EBUS and CT guided biopsy capacity increased in Q3 through additional sessions. Sustainable capacity is still being explored.  <b>ACTION:</b> Cancer actions being reviewed through weekly performance.



Indicator Performance				Narrative
Venous thromboembolism (VTE) risk assessment	95.0%		92.17% 	No current concerns, ongoing monitoring.

## Quality of Care

Indicator Performance				Narrative
Hospital Standardised Mortality Ratio (HSMR) - basket diagnoses	101		107 	No current concerns, ongoing monitoring.
Hospital Standardised Mortality Ratio (HSMR) - all diagnoses	101		104 	Although higher than target, no concerns noted. ongoing monitoring.
Delayed Transfers of care	5.0%		5.09% 	System pressure has significantly impacted our ability to transfer patients out of the Hospital. Reviews are undertaken weekly and escalations managed by our discharge team.

## Organisational Health

Indicator Performance				
Staff Sickness (All Staff)	3.4%		4.97% 	Sickness has increased slightly this month but there is continued focus on long term sick where we have seen really good progress. Stress and Anxiety remains the number one reason for absence and there has been a slight increase.
Staff Turnover	10.0%		11.86% 	Turnover remains an area of focus and there has been a slight reduction in turnover within month. <b>ACTION:</b> There is a robust retention action plan which has avid interest from NHSE. The HR team continue to concentrate on hot spot areas and listening events continue.
Mandatory Training Compliance	95.0%		93.78% 	Mandatory training compliance has improved over the last 3 months. <b>ACTION:</b> We will continue to drive mandatory training compliance through bronze and gold command.

Indicator Performance			
Recurrent CIP identified	100.0%	● 90.43%	 <b>ACTION:</b> KLOE being pursued by Divisions; non-recurrent savings provide mitigation
NHS Staff Survey - Staff recommendation of the organisation as a place of treatment	96.0%	● 90.62%	 <p>LHCH came 2nd in the country for care is our top priority (90%) and 3rd as a place for treatment (91%) in the staff survey - results released 9.3.23.</p> <b>ACTION:</b> The staff survey action plans are focused on making improvements for staff to feel confident in recommending the Trust as a place of treatment for their friends and family.

### 3. Financial Position

The financial performance for the period ending 28th February 2023 is a £3,714k surplus against a £2,134k surplus plan, therefore £1,581k better than plan. The forecast for the year-end is a surplus of £4,126k which is £1,800k better than plan as result of higher interest receivable on cash balances due to Bank of England rate increases. There has been an agreement to improve our position with the ICB as a result of non-recurrent income gains.

Income is better than plan as whilst the majority of patient related income remains on block contracts, the Trust has seen over-performance on Isle of Man and national screening programmes. Elective Recovery Funding (ERF) which is variable in nature has been assumed in line with plan reflecting the agreed ICB in-year approach to not transact variation. In addition, Wales has agreed the 2021/22 final ERF payment which has been recognised in year and leads to a non-recurrent gain (it has also been agreed to recognise 2022/23 ERF Wales performance). Recovery of private patient income is a workstream that is being progressed operationally and improvement has been seen in recent months although the year to date position remains below plan.

Expenditure is worse than plan. There are some pressures in medical and nursing pay which is related to covering vacancies and this is offset by underspends in other staff groups. Non-pay pressures include unidentified CIP, energy and drugs and consumables pressures, partially offset by underspends in capital charges and better than anticipated interest income.

CIP targets have been allocated to Divisions and Departments and work has progressed in identifying schemes with 90% identified for recurrent delivery. In year slippage is reducing and transaction of schemes is progressing.

Capital expenditure was £11,885k year to date related to the ongoing progress on the catheter labs refurbishment, new mobile scanners and the agreed backlog maintenance schemes.

The Trust retains a strong cash balance.

#### **4. Industrial action**

Although no strike days were enacted in Feb 2023, LHCH continued to work with partners to ensure appropriate plans were in place to deal with any service disruptions proposed for the month.

The Divisions continue to look at actions to mitigate performance, however our long waiter and cancer trajectories remain a risk for Q4 given March's proposed industrial action dates. Strategic command and control structures will continue to plan for any future strike days, but the impact will mean delays in patient care, extension of performance trajectories and a decrease in financial performance.

The financial and performance impact of the Junior Doctor Strike for the 13<sup>th</sup>-15<sup>th</sup> March 2023 is currently being reviewed and this will be reported to the Board in April 2023.

#### **5. Conclusion**

Non-Elective pathways continue to be a priority for Q4 with significant pressure in the C&M system. Cancer and long waiter trajectories are in place, however performance remains a risk and action plans are in place and closely monitored with the clinical and operational teams. Industrial action continues to be the most significant risk to Q4 performance. Recovery plans and actions will continue to be reviewed through weekly performance, with extended trajectories fed through to the Integrated Performance Committee and Operational Board.

#### **5. Recommendation**

The Board of Directors are asked to NOTE the content of the paper and associated actions detailed within it.