

Board of Directors (in Public)

Item 4.2

Subject: Strategic Oversight Framework Metric Review 2024/25
Date: 30th April 2024
Prepared by: Phil Johnston, Head of Analytics
Presented by: Jonathan Mathews, Chief Operating Officer
Purpose: To Approve

BAF Reference	Impact on BAF
ALL	The paper provides assurance of the review of Strategic Oversight Framework ahead of 2024/25.

Level of assurance (please tick one)

To be used when the content of the report provides evidence of assurance

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

The purpose of this paper is for Board of Directors to review Strategic Oversight Framework Metrics (SOF) which have been in place since April 2023 covering annual year of 2023/24. The paper provides a view of current metrics split by Committee and some proposed additions for 24/25.

The Board of Directors is asked to review and finalise proposed metrics for the SOF in 2024/25, prior to the end May 2024.

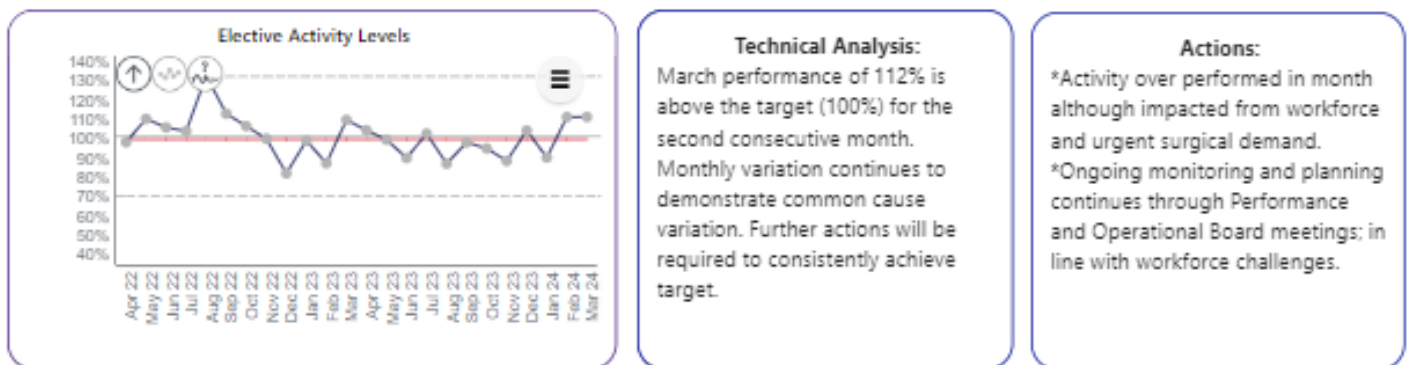
2. Background

Annually, there is a requirement for a review of metrics included in the Trusts Strategic Oversight Framework this is to ensure Performance Monitoring is relevant and up to date providing accurate assurance and focus for Board of Directors.

Metrics within the paper are split between Watch and Drive. This section displays the difference and requirement.

Drive Metric Example:

Below displays how a Drive metric would display within the SOF paper and the narrative requirements. Technical Analysis is provided by the Analytics team and Actions are required by the SRO as part of the production process.

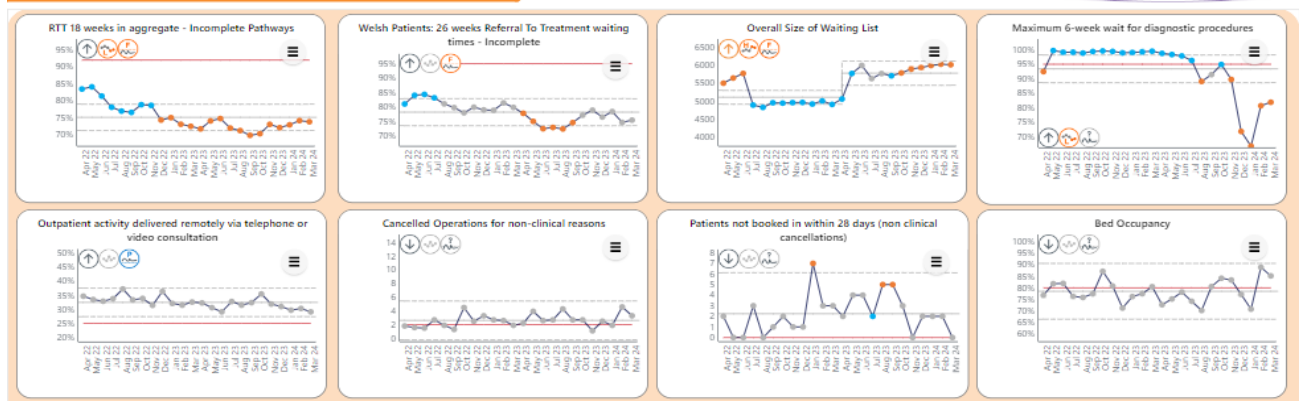


Watch Metric Example:

These are standardised with no Technical or Action Metric requirements, any concerns or improvements can be written up within the overall Committee Section Summary.

Strategic Oversight Framework

Operational Performance - Watch Metrics



5. Process

Meetings have taken place with the Exec Lead to review each sections metrics and any proposed changes before the end of April 2024. Updates will be shared with wider the wider NED and Exec group and followed up with any further individual meetings if required.

New metrics may require a manual process of departmental data being sent to the Analytics team on a monthly basis if the source cannot be automated through our data warehouse.

6. Proposed Metrics

The full metrics along with the proposed changes are set out in the appendix as follows:

- Appendix A - A reference for Appendix B and C of which Committee is responsible for each metric.
- Appendix B – Lists the metrics monitored across 2023/24 and whether they are to remain or be removed/ replaced for 2024/25.
- Appendix C - Lists any proposed additional metrics for 2024/25.
- Appendix D - List of metrics Committees want to review with wider stakeholders during the year for further consideration to include for 2024/25.

7. Recommendation

This paper provides a view of the metrics included in the Trusts 2023/24 SOF. It also provides some proposed additions for 2024/25. The metrics for the SOF need to be finalised by the end of May 24.

The Board of Directors is asked to review and finalise proposed metrics for the SOF in 2024/25, prior to the end of April 2024.

Appendix A – SOF responsibilities

Committee	Description	SRO	Deputy
FIN	Finance	James Thomson	James Bradley
OP	Operational Performance	Jonathan Mathews	Lucy Currie/Kiran Chokkar/Glenna Smith
WF	People	Jane Royds	Rachael McDonald
QoC	Quality of Care	Joan Mathews	Julie Roy

Appendix B – 2023/24 Metrics

Committee	Metric Name	Threshold	View	Update
FIN	Better Payment Practice Code	95	Watch	
FIN	Capital Expenditure (Trust Level)	Profile	Drive	
FIN	Cash in Bank (Trust Level)	0	Watch	
FIN	I & E distance from target (cumulative) - £,000	0	Watch	
FIN	Liquidity (days)	0	Watch	
FIN	Recurrent CIP identified	100	Drive	
OP	Bed Occupancy	80	Watch	
OP	Cancelled Operations for non-clinical reasons	2	Watch	
OP	Cancer Patients meeting the Faster Diagnosis Target (FDT)	75	Drive	
OP	Cancer: 31-day decision to treat to treatment standard	96	Watch	Drive 24/25
OP	Cancer: 62-day referral to treatment standard	85	Watch	
OP	Elective Activity Levels	100	Drive	
OP	Maximum 6-week wait for diagnostic procedures	95	Watch	
OP	Outpatient activity delivered remotely via telephone or video consultation	25	Watch	
OP	Overall Size of Waiting List	0	Watch	
OP	Patients not booked in within 28 days (non clinical cancellations)	0	Watch	
OP	PIFU Pathway	113	Drive	
OP	Referral to treatment - Incomplete Pathways 52+ weeks	47	Drive	
OP	RTT 18 weeks in aggregate – Incomplete Pathways	92	Watch	Remove 24/25
OP	Welsh Patients: 26 weeks Referral To Treatment waiting times – Incomplete	95	Watch	Remove 24/25
WF	Appraisals Compliance	90	Watch	
WF	Long Term Sickness	3.4	Watch	
WF	Mandatory Training Compliance	95	Watch	Drive 24/25
WF	NHS Staff Survey - Staff recommendation of the organisation as a place to work	76	Drive	
WF	Short Term Sickness	3.4	Watch	
WF	Staff Sickness (All Staff)	3.4	Drive	
WF	Staff Turnover	10	Drive	
QoC	% of radiological alerts with a response document	95	Drive	
QoC	95% of all patients to receive a copy of their Discharge Summary on day of discharge	95	Watch	Drive 24/25
QoC	Clostridium Difficile	0	Watch	
QoC	Delayed Transfers of care	5	Watch	
QoC	Delirium Risk Assessment to be completed on Admission and once a day	90	Watch	
QoC	Delivery of at least one sepsis antibiotic within one hour of prescription (LHCH target)	90	Drive	
QoC	Dementia - Find	90	Watch	
QoC	FFT: REPUTATION	95	Watch	
QoC	Gram Negative Bacteraemias	0	Watch	
QoC	Incidents - Serious incidents, Never Events, Adverse Events (Red)	1	Watch	
QoC	MRSA Bacteraemias	0	Watch	
QoC	MSSA Bacteraemias	0	Watch	
QoC	Number of Falls	8	Watch	
QoC	Number of Incidents No Harm and Near Miss	143	Watch	
QoC	Number of Incidents rated Minor Harm or Above	25	Drive	
QoC	Number of LHCH acquired grade 2 pressure ulcers (due to lapses in care)	0.5	Watch	
QoC	Number of LHCH acquired grade 3+ pressure ulcers (due to lapses in care)	0	Watch	
QoC	Nutrition - Patients scoring high risk (2 or more) are referred to dietician	90	Drive	

QoC	Occurrence of any Never Events	0	Watch	
QoC	Primary PCI - 150 minute 'Call-to-balloon' (national target)	95	Watch	
QoC	Quantity of complaints	6	Watch	
QoC	Surgical Site Infections	0	Watch	
QoC	Venous thromboembolism (VTE) risk assessment	95	Watch	
QoC	Number of LHCH acquired grade 3+ pressure ulcers (due to lapses in care)	95	Watch	
QoC	Nutrition - Patients scoring high risk (2 or more) are referred to dietician	Profiled	Drive	
QoC	Occurrence of any Never Events	0	Watch	
QoC	Primary PCI - 150 minute 'Call-to-balloon' (national target)	0	Watch	
QoC	Quantity of complaints	0	Watch	
QoC	Surgical Site Infections	100	Drive	
QoC	Venous thromboembolism (VTE) risk assessment	80	Watch	

Appendix C – Proposed additional metrics for 2024/25

Committee	Metric Name	Threshold	View	Update
OP	Letters waiting to be Typed	tbc	Watch	New 2024/25
OP	35 Weeks Referral to Treatment Waiting Times - Incomplete Pathways	tbc	Watch	New 2024/25
OP	Referral to treatment - Incomplete Pathways 65+ weeks	tbc	Drive	New 2024/25
FIN	Pay Spend vs Budget	tbc	tbc	New 2024/25
FIN	WTE versus Establishment	tbc	tbc	New 2024/25
QoC	Incident Closures within 28 days	95	Watch	New 2024/25
QoC	Door to Balloon 90 min	95	Watch	New 2024/25

Appendix D – Metrics to be reviewed during 2024/25

Committee	Metric Name	Threshold	View	Update
QoC	Mortality Reviews Completed within 30 days (Doctors)	80	tbc	tbc
QoC	Mortality Reviews Completed within 30 days (Nurses)	80	tbc	tbc
WF	EDI: Bullying and Harassment of Staff by Patient and Relatives	tbc	tbc	tbc
WF	EDI: My Organisation Treats me fairly	tbc	tbc	tbc