

## Cover report to the Trust Board meeting to be held on 2 November 2017

Trust Board paper L

<b>Report Title:</b>	People, Process and Performance Committee – Committee Chair’s Report (formal Minutes will be presented to the next Trust Board meeting)
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<b>Reporting Committee:</b>	People, Process and Performance Committee
<b>Chaired by:</b>	Andrew Johnson, Non-Executive Director
<b>Lead Executive Director(s):</b>	Tim Lynch, Interim Chief Operating Officer Louise Tibbert, Director of Workforce and Organisational Development
<b>Date of last meeting:</b>	26 October 2017

**Summary of key matters considered by the Committee and any related decisions made:**

This report provides a summary of the following key issues considered at the People, Process and Performance Committee on 26 October 2017:

- **Workforce Update** - the report provided an update as at month 6 on the following workforce metrics: (1) paybill, worked and contracted whole time equivalents and agency update (including workforce productivity measures); (2) recruitment, retention and redesign (including vacancy and turnover rates, and apprenticeship management levy); (3) attendance/sickness, staff well-being, inclusion strategies, and (4) organisational development indicators. It was noted that agency spend was currently above target, although a regional agency event on 6 October 2017 with suppliers had been very successful. Time to Hire performance required improvement and CMGs were proactively engaging with HR to achieve this. It was acknowledged that there was a financial risk with regards to the apprenticeship levy. In discussion of this item, it was agreed that a deep dive on sickness and occupational health would be provided at the November 2017 committee meeting and that further improvements to the workforce update report would also be seen at that meeting.
- **UHL Lean** – following a request at the September 2017 Finance and Investment Committee, a paper was provided on the lean capabilities at UHL including proposed next steps. In discussion of the item, it was agreed that a further report detailing the resource requirements for the project and the proposed lean tools to be utilised would be provided at the December 2017 committee meeting`.
- **UHL and LLR Winter Plan** – the paper outlined the plan for winter pressures in 2017/18, building on learning from 2016/17. Due to limited timing the paper was only briefly discussed but members were requested to email their comments to the author, copying in the Committee Chair and Interim Corporate and Committee Services Officer. It was acknowledged that over the winter period 20 additional respiratory beds would be opened at Glenfield Hospital to cope with anticipated demand.
- **Quality and Performance Report – Month 6**

The report detailed the quality and performance metrics as at month 6. Specific discussions took place around the following indicators:

- *52 week patient* – one patient at the end of September 2017; none anticipated for the end of October 2017; this represents a significant improvement YOY.
- *Diagnostic 6 week wait* – remains compliant for the 12<sup>th</sup> consecutive month;
- *Cancer 2 week wait* – the 93% trajectory has been achieved for over a year;
- *Cancer 31 and 62 day* – was not achieved in August 2017;
- *Referral to Treatment* – was 91.5% against a target of 92%, partly due to cancelled operations and loss of

theatre capacity at Glenfield due to urgent essential maintenance;

- *Inpatient and Day Case Patient Satisfaction (FFT)* – the Quality Commitment of 97% had been achieved, and
- *Pressure ulcers* – there had been one Grade 4 reported this financial year due to regrading of a Grade 3 pressure ulcer from June 2017; the data has been retrospectively updated as per national requirements.

In addition to this paper there was a supplementary paper which focused on three specific areas of performance which were currently out of kilter with requirements, these were: **(1) RTT 18 and 52 weeks; (2) 62-day cancer and (3) cancelled operations.**

In discussion of **RTT 18 week performance** it was noted that the Trust currently ranked 6<sup>th</sup> out of 18 peers. Of the 18 trusts in UHL's peer group; five were achieving RTT performance with UHL at 91.8% narrowly missing the 92% performance standard for July 2017. The paper detailed the reasons for the performance. Assurance was received that action plans were in place for each of the lower performing CMG areas and that these would be monitored.

In discussion of **62-day cancer** it was noted that support had been received from the NHSI team. The current peer information for July 2017 ranked UHL as 8<sup>th</sup> out of 18 peer trusts. Relative and actual performance had seen sustained improvement against peers. Work was underway to identify the resource requirements needed to reduce "first seen" performance for each of the main tumour sites from a 2 week wait to 7 days. It was noted that late referrals from tertiary centres continued to impact on UHL performance, however as at 1 April 2018 reporting requirements would change and accountability would rest with the original centre after 38 days. In discussion of this item, it was agreed that a further update on 62 day cancer performance improvement would be provided at the November 2017 committee meeting.

In discussion of **cancelled operations** on the day the reasons for the cancellations were sighted in more detail and a discussion took place around how these could be reduced.

- ***Minutes for Information:***

The following minutes were received for information:

- Executive Performance Board (26 September 2017)
- Executive Workforce Board (18 July 2017 and 17 October 2017)

#### **Matters requiring Trust Board consideration and/or approval:**

- ***UHL Lean*** – agreement was sought (and received) from the PPP Committee for support of the UHL Lean Initiative (as presented) with onward recommendation to the Trust Board to support its implementation (paper F).
- ***Grade 3 to 4 pressure ulcer upgrade*** – the Trust Board should be aware of this regrading from June 2017 and the consequent change in UHL data.

#### **Matters referred to other Committees:**

There were no matters requiring onward referral to other meetings.

**Date of next meeting:**

30 November 2017