

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

**BOD 06/2023**

(Agenda item: 8(a))

# Board of Directors

**25th January 2023**

**Integrated Performance Report (IPR)**

**For: Information & Assurance**

**Executive Summary**

The Integrated Performance Report (IPR) report provides the Board of Directors with an integrated view of the strategic domains of Operational Performance, Quality, People, Finance and Research & Education.

**IPR - Performance Summary**

1. **Delivery of the NHS National Oversight Framework**

The Trust continues to perform well against the targeted metrics with the exception of Inappropriate OAPs bed days used.

The Trust used **414 inappropriate OAP Bed days in October 2022** (171 inappropriate OAP bed days in Bucks, and 243 inappropriate OAP bed days in Oxon).

The directorates have been focused on reducing the use of OAPs to improve the quality of patient care and improve cost control. There has been minimal use of inappropriate OAPs from April through to November however December levels have been relatively high following a significant spike in demand, the associated activity, and clinical complexity. This is also in part due to the reduction in externally contracted beds previously purchased from Elysium.



1. **SE Regional Performance and how we compare**

Performance is reported quarterly. There has been no change in the Trust’s performance in relation to its peers since the last report in November 2022. Some metrics in the regional performance report continue to be impacted by the clinical systems outage and are not available.

1. **Delivery of strategic objectives (Objective Key Results (OKRs)**

The Trust has 32 OKRs (18 relating to quality, 9 to people and 5 to sustainability). 21 of the OKRs have targets (8 quality OKRs have targets, 8 people OKRs have targets and all of the 5 sustainability OKRs have targets).

The table below provides an overview of the 13 OKRs that are **currently being progressed** and their performance compared to last month.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strategic objective** | **OKR** | **Target** | **Last month’s performance unless stated otherwise** | **This month’s performance unless stated otherwise** | **Status/Trend** |
| **Quality** | Clinical supervision compliance | 95% | 51% | 61% | **Improving** performance |
| **Quality** | Lester Tool completion in the community | 75% | 66% (June performance) | 64% (July – latest available due to clinical systems outage) | **Declining** performance May-July |
| **Quality** | Lester Tool completion in the EIP service | 90% | 84.5% (June performance) | 80.5% (July – latest available due to clinical systems outage) | **Declining** performance May-July |
| **Quality** | Evidence patients have been involved in their care plans | 95% | 83% (June performance) | 80%  | **Fluctuating** performance  |
| **People** | Reduce agency usage to NHSE/I target  | <10.2% | 10.6% | 13.2% | **Declining**performance |
| **People** | Staff sickness | <3.5% | 5.7% | 6.6% | **Fluctuating** performance |
| **People** | Reduction in turnover | <10% | 16.1% | 16.2% | **Declining**performance |
| **People** | Reduction in early turnover | <9% | 19.0% | 19.4% | **Declining**performance |
| **People** | Reduction in vacancies | <9% | 12.9% | 12% | **Fluctuating** performance |
| **People** | Personal Development Review (PDR) compliance | 95% | 38% | 41% | **Improving but behind trajectory** |
| **People** | PPST compliance | 95% | 82.3% | 84% | **Fluctuating** performance |
| **Sustainability** | Delivery of cost improvement plan | £- | £1.35m adverse | £1.5m adverse | **Declining**performance |
| **Sustainability** | Achievement of all 8 targeted NOF measures | 8 | 2 not achieved (OAPs) | 2 not achieved (OAPs) | No change |

Please see the report for further information and plans to address.

**Patient Activity and Demand:**

Activity and demand is usually reported in the IPR supporting report, however, as a result of the National clinical systems outage, data since August has not been available.

The Trust has successfully deployed replacement clinical information systems. EMIS (for community services) and RIO (for mental health). Further work is now underway to optimise and extend the functionality as part of the Frontline Digitisation Programme which is supported by NHS Digital.

The Trust has contracted with a third party supplier to accelerate the work to refresh and reinstate the operational reporting that would be normally be presented within this section of the report.

**Recommendation**

The Board of Directors are asked to note the contents of this report and provide further feedback for continuous development.

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**Lead Executive Director: Martyn Ward.**

**Executive Director – Digital & Transformation**