**Report Cover Sheet**

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| Report to: | Board of Directors Meeting | |
| Date of the Meeting: | 24th June 2020 | |
| Agenda Item: | P1-098-20 | |
| Title: | IPR M2 2020/2021 | |
| Report prepared by: | Hannah Gray, Head of Performance and Planning | |
| Executive Lead: | Joan Spencer, Director of Operations | |
| Status of the Report: | Public | Private |
|  | X |  |

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| --- | --- |
| Paper previously considered by: |  |
| Date & Decision: |  |

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| Purpose of the Paper/Key Points for Discussion: | This report provides the Trust Board with an update on performance for month two (May 2020). The access, efficiency, quality, research and innovation, workforce and finance performance scorecards are presented, each followed by exception reports of key performance indicators (KPIs) against which the Trust is not compliant.  Points for discussion include under performance, developments and key actions for improvement. |

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| Action Required: | Discuss | X |
| Approve |  |
| For Information/Noting |  |

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| Next steps required |  |

*The paper links to the following strategic priorities (please tick)*

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| Deliver **outstanding care locally** | **** | Collaborative system **leadership** to **deliver better** patient **care** | **** |
| **Retain** and **develop outstanding staff** | **** | Be **enterprising** |  |
| **Invest** in **research &** **innovation** to deliver **excellent** patient **care** in the future | **** | Maintain **excellent** quality, operational and financial **performance** | **** |

*The paper relates to the following Board Assurance Framework (BAF) Risks*

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| **BAF Risk** | **Please Tick** |
| 1. If we do not optimise quality outcomes we will not be able to provide outstanding care | **** |
| 2. If we do not prioritise the costs of the delivering the Transforming Cancer Care Programme we will not be able to maintain our long-term financial strength and make appropriate strategic investments. | **** |
| 3. If we do not have the right infrastructure (estate, communication & engagement, information and technology) we will be unable to deliver care close to home. |  |
| 4. If we do not have the right innovative workforce solutions including education and development, we will not have the right skills, in the right place, at the right time to deliver the outstanding care. | **** |
| 5. If we do not have an organisational culture that promotes positive staff engagement and excellent health and well-being we will not be able to retain and attract the right workforce. | **** |
| 6. If we fail to implement and optimise digital technology we will not deliver optimal patient outcomes and operational effectiveness. | **** |
| 7. If we fail to position the organisation as a credible research partner we will limit patient access to clinical trials and affect our reputation as a specialist centre delivering excellent patient care in the future. | **** |
| 8. If we do not retain system-side leadership, for example, SRO for Cancer Alliance and influence the National Cancer Policy, we will not have the right influence on the strategic direction to deliver outstanding cancer services for the population of Cheshire & Merseyside. | **** |
| 9. If we do not support and invest in entrepreneurial ideas and adapt to changes in national priorities and market conditions we will stifle innovative cancer services for the future. |  |
| 10. If we do not continually support, lead and prioritise improved quality, operational and financial performance, we will not provide safe, efficient and effective cancer services. | **** |

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| **Equality & Diversity Impact Assessment** | | |
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| Are there concerns that the policy/service could have an adverse impact on: | YES | NO |
| Age |  | **** |
| Disability |  | **** |
| Gender |  | **** |
| Race |  | **** |
| Sexual Orientation |  | **** |
| Gender Reassignment |  | **** |
| Religion/Belief |  | **** |
| Pregnancy and Maternity |  | **** |

If YES to one or more of the above please add further detail and identify if a full impact assessment is required.