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6 S H F L D O L V W 6 H U Y L F H V We will provide innovative, high quality specialist care delivering outstanding outcomes for a wider population	

Vision – To Deliver an outstanding experience for every patient			
	Positives	Challenges	Plans / Forecasts
	Sickness: Theatres group established and ongoing. Additional target areas in play Initial stages of STP wide collaboration for health and wellbeing underway HAWB strategy in development Sickness fallen slightly to 2.09%, compared to local Trusts average of 3.59% (last year M3 Salisbury FT sickness was 3.41%) Engagement: OD and Engagement plan and second meeting took place in July positive staff survey results – engagement score in top 20% in the country Other: MaST compliance stands at 85.29% Medical appraisal rates are 85.54%	Sickness Long term sickness decreased this month, "anxiety/stress/depression" remaining top 20% of cases. Hotspot directorate - Surgery Engagement: Staff morale at time of intense operational pressures Areas of concern in staff survey Other: Data revalidation and IT system check has reduced non-medical appraisal to 75% - trajectory to 85% for September	Sickness: Theatres working group supporting managers on a case by case basis Managing attendance policy (now approved) and managers toolkit in progress. OH service redesign, HAWB strategy Head of HAWB post being recruited to Engagement: Staff engagement group is established Long term retention strategy for all staff groups is in progress Nursing – first area of activity Engagement plan in development Other: Plan to move back to compliance managed through compliance reviews.
Resources (DoF)	Trust achieved PSF funding for financial plan delivery for Q1 £0.4m (however did not achieve A&E element).	Early risks identified to the forecast, which include: o Year to date shortfall of CIP delivery and productivity plans. o Delivery of the additional	Mitigating actions in place for CIP delivery, progress updates to be monitored through F&P committee. Commercial assessment to be completed for OML (end of August). Development of Subsidiary Governance

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KPI	Overall Commentary			
			May-18	Jun-18 T
		1 Rheumatology	31.06%	26.29%
		2 District Pharmacy	17.82%	19.29%
		3 Dermatology	20.82%	18.93%
		1 Musculo-Skeletal Directorate	11.60%	11.82%
		1 Add Prof Scientific and Technical	13.14%	13.53%

1 Obstetrics & Gynaecology	25	26
2 Therapy Services	14	21
3 Finance and Procurement	19	19
1 Clinical Support & Family Services	82	82
1 Administrative and Clerical	88	83

	May-18	Jun-18 T
1 Spinal Unit	21.56%	23.61%
2 Orthopaedics	19.48%	22.89%
3 Adult Medical Wards	17.47%	22.16%
1 Musculo-Skeletal Directorate	10.68%	13.21%
1 Nursing and Midwifery Registered	18.38%	18.34%

1 Adult Medical Wards	24.26	30.78
2 Orthopaedics	22.82	26.81
3 Spinal Unit	23.28	25.49
1 Musculo-Skeletal Directorate	55.19	68.22
1 Nursing and Midwifery Registered	170.10	169.57

KPI	Overall Commentary			
			May-18	Jun-18 T
		1 Laundry	100.00%	100.00%
		2 Gastroenterology - Medical Staff	100.00%	100.00%
		3 O&G - Medial Staff	100.00%	100.00%
		1 Surgery Directorate	62.50%	57.94%
		1 Professions Allied to Medicine	100.00%	100.00%

1 Laundry	£100,077	£129,113
2 Theatre Staff - ODP's	£ 55,616	£ 55,200
3 Emergency Department Nursing	£ 44,496	£ 52,424
1 Medicine Directorate	£295,228	£291,411
1 Nursing and Midwifery Registered	£306,575	£306,345

	May-18	Jun-18 T
1 Main Outpatients	15.54%	15.49%
2		

Non-Medical Appraisals Target 85%	Appraisal compliance has increased to 76.70% and is red rated. 71 departments are red rated and these will be the focus over the next month to reach target.	lowest appraisal rates				
				Jun-18	Jul-18	T
		1	Director of Operations	52.00%	50.00%	
		2	Nurse Management (Quality)	60.00%	51.72%	
		3	Pembroke Unit	57.14%	53.13%	
		1	Medicine	67.00%	70.90%	
		1	Additional Clinical Services	81.61%	72.23%	

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June 2018

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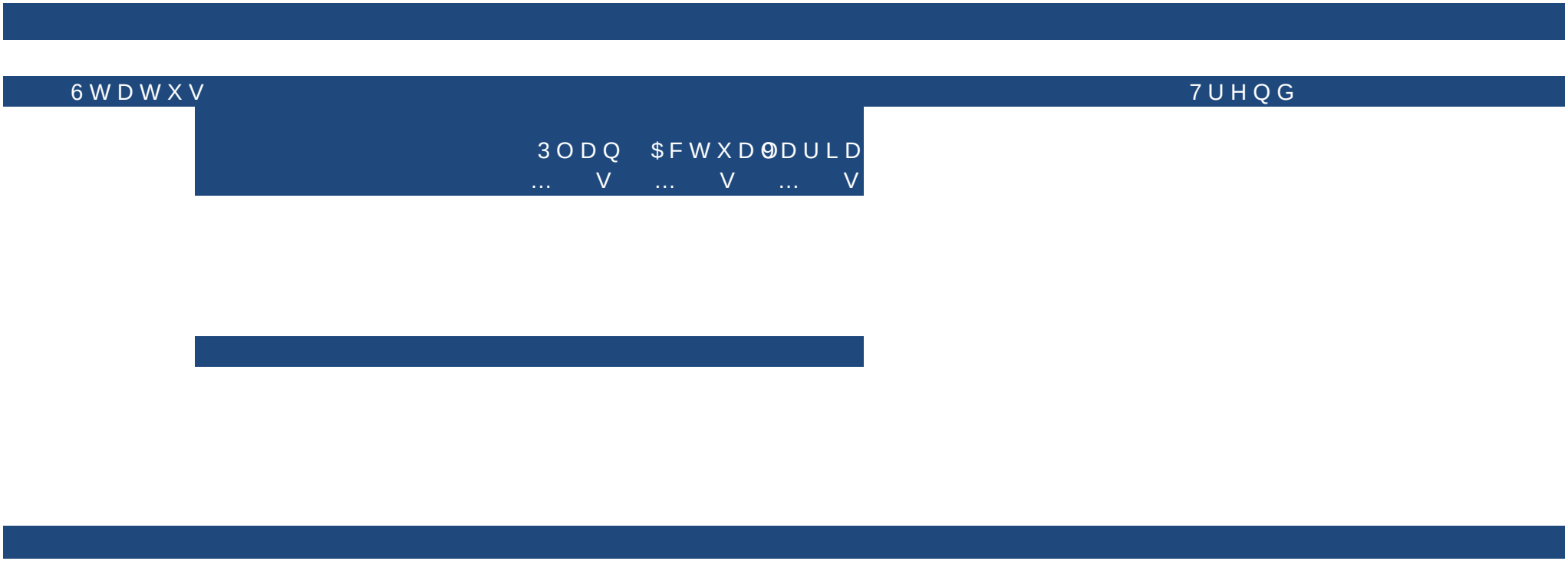
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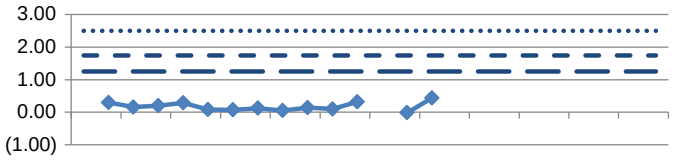

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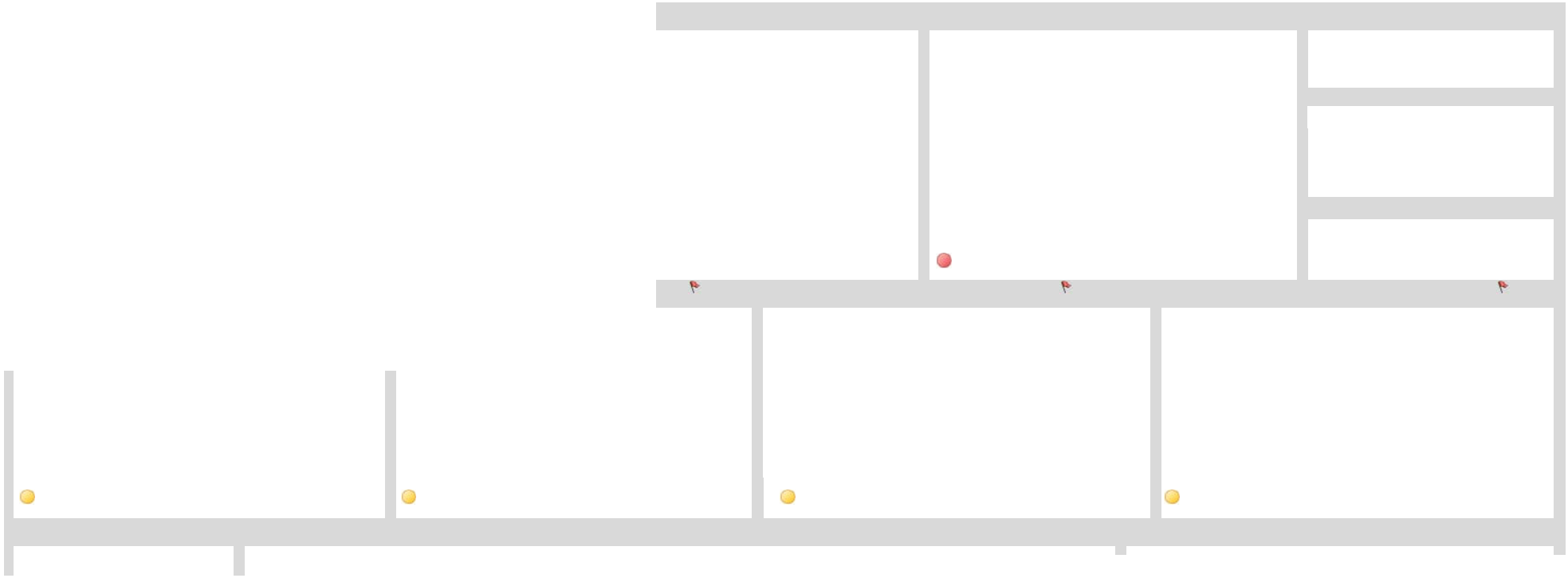
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