Integrated Performance Report
Public Guidance Pack

- What is the Integrated performance report?
- What it covers, and why
- How to understand it
- Jargon buster

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What is the Integrated Performance Report ?

Like our partner hospital Trusts in our Foundation Group, we use an Integrated Performance Report (or IPR as it is often referred to) to explain how we are performing against a range of important targets - highlighting successes as well as areas of concern.

We spend public money to care for our local population and have a duty to be open and honest about how we use this money and how we perform.

The IPR helps us to do this by being published each month before being discussed in public at our Trust Board meeting.

It uses a range of graphs, tables and text to explain how we are doing.

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What the IPR covers, and why

WVT has a set of objectives for the year 2022/2023 that are our immediate focus.
Our IPR will link back to these yearly objectives.

WORKFORCE & LEADERSHIP
Empower and enable staff to deliver the best care they can

QUALITY IMPROVEMENT
Recover and deliver services safely in spite of COVID

SUSTAINABILITY
Develop and embed a passion for sustainability

INTEGRATION
**Work together to help people plan for their care if they become ill,
or their health changes**

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How to understand our IPR

We use an analytical method called statistical process control that plots data over time. This helps us understand and explain variation - guiding us to take the most appropriate action.

You will see a range of graphs being used, alongside icons that add more analysis. These help our Board of Directors spot trends and take appropriate action or seek more explanation or assurance on the issue being reported
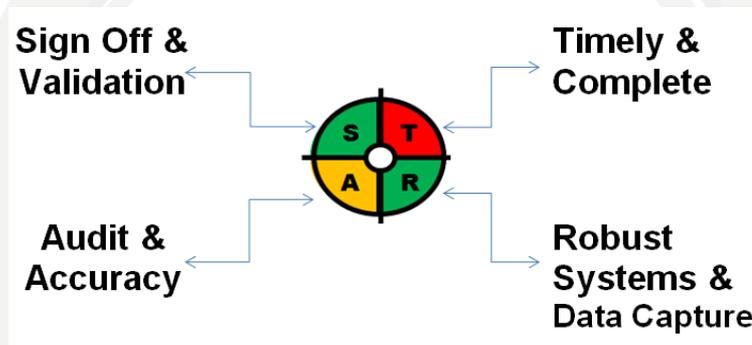
Variation			Assurance		
Common cause – no significant change	Special cause of concerning nature or higher pressure due to (H)igher or (L)ower values	Special cause of improving nature or lower pressure due to (H)igher or (L)ower values	Variation indicates inconsistently hitting passing and falling short of the target	Variation indicates consistently (P)assing the target	Variation indicates consistently (F)alling short of the target

You will also see a data quality 'traffic light' or kite mark appears next to key performance indicators in the dashboard to explain and confirm the quality of data behind a performance indicator.

Green	Good level of Assurance for the domain
Amber	Reasonable Assurance – with an action plan to move into Good
Red	Limited or No Assurance for the domain - with an action plan to move into Good

How to understand our IPR

You may also see other ratings around 'STAR' factors – adding further information and depth to the issue being reported

Sign Off & Validation

Timely & Complete

Audit & Accuracy

Robust Systems & Data Capture

Domain	Assurance sought
S - Sign Off and Validation	Is there a named accountable executive, who can sign off the data as a true reflection of the activity? Has the data been checked for validity and consistency with executive officer oversight?
T - Timely & Complete	Is the data available and up to date at the time of submission or publication. Are all the elements of required information present in the designated data source and no elements need to be changed at a later date?
A - Audit & Accuracy	Are there processes in place for either external or internal audits of the data and how often do these occur (Annual / One Off)? Are accuracy checks built into collection and reporting processes?
R - Robust Systems & Data Capture	Are there robust systems which have been documented according to data dictionary standards for data capture such that it is at a sufficient granular level?

Glossary

TERM	DESCRIPTION	TERM	DESCRIPTION
AAU	Acute Admissions Unit	CCG	Clinical Commissioning Group
ACS	Accountable Care Systems	CPIP	Cost Productivity Improvement Plan
ACE	Active Care for Everyone	CNST	Clinical Negligence Scheme for Trusts
AEDB	Accident & Emergency Delivery Board	COPD	Chronic Obstructive Pulmonary Disease
AHP	Allied Health Professional	COSHH	Control Of Substances Harmful to Health
AKI	Acute Kidney Injury	CQC	Care Quality Commission
AMU	Ambulatory Medical Unit	CQI	Commissioning for Quality & Innovation
A&E	Accident & Emergency Department	CTP	Costing Transformation Programme
BAF	Board Assurance Framework	DOLS	Deprivation of Liberty Safeguards
BAME	Black, Asian and Minority Ethnic	DCU	Day Case Unit
BGAF	Board Governance Assurance Framework	DNA	Did Not Attend
CAMHS	Child and Adolescent Mental Health Services	DTI	Deep Tissue Injury
CAS	Central Alert System	DTOC	Delayed Transfer Of Care
CAU	Clinical Assessment Unit	ECIST	Emergency Care Intensive Support Team
CCU	Coronary Care Unit	ED	Emergency Department
CD	Clostridium Difficile	EDD	Expected Date of Discharge

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Glossary

TERM	DESCRIPTION	TERM	DESCRIPTION
EDS	Electronic Discharge Summary	HDU	High Dependency Unit
EPMA	Electronic Prescribing & Medication Administration	HSE	Health & Safety Executive
EPR	Electronic Patient Record	HFMA	Healthcare Financial Management Association
ESR	Electronic Staff Record	HAFD	Hospital Acquired Functional Decline
FAU	Frailty Assessment Unit	HSMR	Hospital Standardised Mortality Ratio
FBC	Full Business Case	HV	Health Visitor
FOI	Freedom of Information	ICS	Integrated Care System
F&F	Friends & Family	IG	Information Governance
FRP	Financial Recovery Plan	IV	Intravenous
FTE	Full Time Equivalent	JAG	Joint Advisory Group
GWA	Gilwern Assessment Unit	KPIs	Key Performance Indicators
GEH	George Eliot Hospital	LAC	Looked After Children
GIRFT	Getting It Right First Time	LAT	Looked After Team
GMC	General Medical Council	LMNS	Local Maternity and Neonatal System
HASU	Hyper Acute Stroke Unit	LOCSIPPS	Local Safety Standards for Invasive Procedures
HCA	Healthcare Assistant	LOS	Length Of Stay

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Glossary

TERM	DESCRIPTION	TERM	DESCRIPTION
MASD	Moisture Associated Skin Damage	OOH	Out Of Hours
MCA	Mental Capacity Act	PALS	Patient Advice & Liaison Service
MES	Managed Equipment Services	PAS	Patient Administration System
MHPS	Maintaining High Professional Standards	PCIP	Patient Care Improvement Plan
MIU	Minor Injury Unit	PIFU	Patient Initiated Follow Up
MLU	Midwifery Led Unit	PPE	Personal Protective Equipment
MRSA	Methicillin-Resistant Staphylococcus Aureus	PFI	Private Finance Initiative
MSSA	Methicillin-Sensitive Staphylococcus Aureus	PID	Project Initiation Document
MASD	Moisture Associated Skin Damage	PIFU	Patient Initiated Follow Up
NEWS	National Early Warning Scores	PLACE	Patient Led Assessment of the Care Environment
NHSCFA	NHS Counter Fraud Authority	PHE	Public Health England
NHSLA	NHS Litigation Authority	PROMs	Patient Reported Outcome Measures
NICE	National Institute for Health & Clinical Excellence	PTL	Patient Tracking List
NIV	Non-invasive ventilation	QIA	Quality Impact Assessment
OBC	Outlined Business Case	QIP	Quality Improvement Programme
OOC	Out Of County	RAG	Red, Amber, Green rating

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Glossary

TERM	DESCRIPTION	TERM	DESCRIPTION
RCA	Root Cause Analysis	SWFT	South Warwickshire NHS Foundation Trust
ReSPECT	Recommended Summary Plan for Emergency Care and Treatment	TMB	Trust Management Board
RGN	Registered General Nurse	TIA	Transient Ischemic Attack
RRR	Rapid Responsive Review	TOR	Terms of Reference
RTT	Referral to Treatment	TTO	To Take Out
SAA	Surgical Assessment Area	TVN	Tissue Viability Nurse
SCBU	Special Care Baby Unit	UTI	Urinary Tract Infection
SDEC	Same Day Emergency Care	WTE	Whole Time Equivalent
SOP	Standard Operating Procedures	WHO	World Health Organisation
SOC	Strategic Outline Case	WVT	Wye Valley NHS Trust
SSNAP	Sentinel Stroke National Audit Programme	WW	Week Wait
SHMI	Summary Hospital Level Mortality Indicator	YTD	Year To Date
SI	Serious Incident	#NOF	Fractured Neck of Femur
SIRI	Serious Incident Requiring Investigation		
SOP	Standard Operating Procedure		
STF	Sustainability and Transformation Funding		

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