

Trust Board: Thursday 3 November 2011

TB2011.59

| | |
|-------------------------|---|
| Title | Operational Performance Report to 30 September 2011 |
| Purpose of paper | The attached scorecard summarises the Trust performance up to the end of September 2011 (month 6) against the range of metrics identified as key performance issues by the Director of Clinical Services. The report encompasses both the data and the narrative. |
| Board Lead(s) | Mr Paul Brennan, Director of Clinical Services. |

| Key purpose | Strategy | Assurance | Policy | Performance |
|--|--|-----------|--------|-------------|
| Strategic Objectives | <p>SO1 To provide high quality general acute healthcare services to the population of Oxfordshire</p> <p>SO2 To provide high quality specialist services to the population of Oxfordshire and beyond</p> <p>SO3 To be a patient-centred organisation providing high quality and compassionate care - “delivering compassionate excellence”</p> <p>SO4 To be a partner in a strengthened academic health sciences system with local academic, health and social care partners</p> <p>SO5 To meet the challenges of the current economic climate and the changes in the NHS and become a resilient, flexible and successful Foundation Trust</p> <p>SO6 To achieve the integration of the ORH and the NOC during 2011/2012, realising the benefits as set out in the business case</p> | | | |
| Links to Board Assurance Framework/Trust Key Risks/CQC Registration | <p>Risks to performance delivery and operational stability are included into TRR and the BAF</p> <p>Service delivery may impact on CQC outcome 4</p> | | | |
| Resource and financial impact | - | | | |
| Consideration of legal/ equality /diversity/engagement/risk issues | - | | | |

Operational performance report to 31 September 2011 (Month 6)

Introduction

1. The attached scorecard summarises the Trust's performance up to the end of September 2011 (Month 6). The detailed commentary resides within the scorecard.
2. The report focuses on:
 - 2.1. The key Acute Hospitals metrics used within the NHS Performance Framework.
 - 2.2. A profile of long staying patients (over 21 days) and the associated bed days consumed.
 - 2.3. Number of patient ward moves within hospital stays.
 - 2.4. Length of stay profiles.
 - 2.5. Profiles of patient discharges, by day of the week and time of day.
 - 2.6. Emergency department performance against the 4 hour standard. Included also are the new quality metrics for 2011/12. There have been a number of guidance documents released recently over changes to the Emergency Department metrics, and the final position is explained within the report.
 - 2.7. Delayed transfers of care (DToCs) and associated bed days consumed. A whole system review of the counting mechanisms was carried out during July and August which led to changes in when organisations start counting patients as delayed. The result of this is that higher numbers of patients are reported as DToC.
 - 2.8. 18 week performance, including the number of specialties complying with the 90% and 95% standards and the number of patients on incomplete pathways waiting over 18 weeks. This also now includes the new measures of median and 95th percentile waits.
 - 2.9. Theatre utilisation showing the monthly breakdown of the available theatre time by late starting sessions, turnaround times between patients, productive time, early finishing sessions and overrunning theatre sessions.

Overview

3. The Board are asked to note the following key messages highlighted by the attached scorecard;
 - 3.1. Performance against all the key access standards – 18 weeks, cancer, 4 hour and stroke was achieved in Q1 and Q2.
 - 3.2. Patients with a length of stay greater than 21 days continues to grow and this is increasing pressure across the system as we continue to operate a bed capacity above the baseline and the PCT faces financial pressure due to excess bed day costs. The Supportive Discharge Scheme will be operational at the JR by 7 November 2011 and at the Horton in December 2012. This service, delivered by the Trust, is expected to reduce recorded delays at the ORH by 50% and secure a reduction in the baseline inpatient capacity of 40 beds.
 - 3.3. DTOC are now at the highest recorded levels with numbers rising over the past four weeks from 80 to 125 within the ORH and from 164 to 213 across the

system. The ORH numbers exclude out of Oxford patients which increase the number of delays within the Trust to 134. As mentioned above the implementation of the ORH delivered supportive discharge scheme in November 2011 should see the number of delays reduce by 50% by the end of January 2012.

- 3.4. Whilst the Trust is achieving all 18 week RTT standards there is now a central focus on reducing the number of patients waiting over six weeks for diagnostic tests. The number of patients waiting over six weeks was 738 in September 2011 and the Trust has been set a target to reduce this to below 100 by 5 December 2011. A range of actions have been implemented and the number of patients waiting over six weeks has reduced to 370. The two main areas of focus are GA MRI and Endoscopy.
- 3.5. Performance against the 4 hour standard is being affected by capacity pressures however, performance in Q3 (to 23 October 2011) stands at 95.77% against the 95% target.
- 3.6. Following agreement with Divisional Directors a protocol for ED consultant direct admitting rights will be implemented on 1 November 2011.
4. Board members requested changes to the detailed performance report to incorporate trends and trajectories and to show numbers as well as percentages for certain key targets such as cancelled operations and theatre utilisation. These changes will be made post implementation of the EPR and will be included in reports from January 2012 onwards.

Recommendations

5. The Board are asked to note the content of the report.

Mr Paul Brennan, Director of Clinical Services

Mr Adrian Crookes, Business Intelligence, and Information Team.

October 2011

Performance Framework for Acute Trusts 2011-12

| | Performing thresholds | April | May | June | July | August | September | October | November | December | January | February | March | | |
|---|-----------------------|---|-------|--------|--------------|--------|-----------|---------|----------|----------|---------|----------|-------|--|--|
| Four-hour maximum wait in A&E from arrival to admission, transfer or discharge | 95% | 94.6% | 96.5% | 95.3% | 97.6% | 96.9% | 94.9% | | | | | | | | |
| Four-hour maximum wait in A&E from arrival to admission, transfer or discharge- Quarterly | | Q1 95.47% | | | Q2 96.33% | | | | | | | | | | |
| Unplanned reattendance rate Unplanned re-attendance at A&E within 7 days of original attendance | 5% | Assessed from Quarter 2 2011-12 onwards | | | 3.64% | 2.90% | 3.52% | | | | | | | | |
| Left without being seen rate | 5% | | | | 2.49% | 2.37% | 1.94% | | | | | | | | |
| Time to initial Assessment | 15 minutes | | | | 60 | 56 | 56 | | | | | | | | |
| Time to treatment | 60 minutes | | | | 88 | 79 | 79 | | | | | | | | |
| Cancelled ops - breaches of 28 days readmission guarantee as % of cancelled ops | 5% | 4.17% | 0.00% | 0.00% | 4.84% | 12.20% | 0.00% | | | | | | | | |
| MRSA | 6 | 0 | 1 | 0 | 0 | 0 | 1 | | | | | | | | |
| C Diff | 137 | 5 | 5 | 8 | 7 | 14 | 9 | | | | | | | | |
| RTT - admitted - 95th percentile | <=23 | 23.9 | 24.9 | 22.2 | 22.4 | 22.1 | 22.3 | | | | | | | | |
| RTT - non-admitted - 95th percentile | <=18.3 | 15.7 | 15.6 | 16.3 | 16.3 | 16.4 | 16.0 | | | | | | | | |
| RTT - incomplete - 95th percentile | <=28 | 21.6 | 16.6 | 16.1 | 16.2 | 16.0 | 17.0 | | | | | | | | |
| RTT - admitted - 90% in 18 weeks | 90% | 87% | 89% | 90% | 90% | 91% | 91% | | | | | | | | |
| RTT - non-admitted - 95% in 18 weeks | 95% | 97% | 97% | 96% | 97% | 97% | 97% | | | | | | | | |
| 2 week GP referral to 1st outpatient | 93% | | | | | | | | | | | | | | |
| 2 week GP referral to 1st outpatient - breast symptoms | 93% | 91.6% | 92.6% | 96.5% | 96.9% | 99.1% | 98.2% | | | | | | | | |
| 31 day second or subsequent treatment - surgery ~ | 94% | 74.5% | 95.3% | 98.9% | 100.0% | 99.4% | 100.0% | | | | | | | | |
| 31 day second or subsequent treatment - drug ~ | 98% | 98.2% | 93.5% | 98.5% | 96.4% | 100.0% | 97.5% | | | | | | | | |
| 31 day diagnosis to treatment for all cancers ~ | 96% | 100.0% | 97.8% | 100.0% | 98.6% | 100.0% | 100.0% | | | | | | | | |
| Proportion of patients waiting no more than 31 days for second or subsequent cancer treatment (radiotherapy treatments) | 94% | 97.0% | 95.9% | 96.4% | 97.1% | 99.1% | 97.8% | | | | | | | | |
| 62 day referral to treatment from screening | 90% | 93.1% | 93.9% | 97.7% | 96.2% | 97.6% | 96.6% | | | | | | | | |
| 62 day referral to treatment from hospital specialist | 85% | 78.3% | 87.5% | 87.0% | 100.0% | 85.7% | 92.3% | | | | | | | | |
| 62 days urgent GP referral to treatment of all cancers | 85% | NA | NA | 100.0% | NA | NA | NA | | | | | | | | |
| Patients that have spent more than 90% of their stay in hospital on a stroke unit | 80% | 81.4% | 84.9% | 88.0% | 86.0% | 86.5% | 90.8% | | | | | | | | |
| Delayed transfers of care | 3.50% | 72.1% | 72.9% | 86.7% | 86.4% | 82.0% | 81.1% | | | | | | | | |
| | | 7.00% | 7.68% | 5.12% | 9.41% | 10.64% | 8.91% | | | | | | | | |

This page presents the key metrics that are being used during 2011/12 to score Acute hospitals performance. The overall composite weighted score has now been calculated. For the Quarter 2 measures this scores the trust at 2.78, well within the range of "performing" (the range being 2.4 to 3). To achieve overall on the ED section the trust needs to achieve, as a minimum, the total time in ED (4hour/95%) and one of the patient focus measures (unplanned reattendance rate or left without being seen rate). For total time in ED, the ORH performance dipped below 95% for the first time since April. However, Quarter 2 performance outturned comfortably above 95% at 96.33%.

The Trust reports 2 MRSA infections for the year to date and continues to track below the tolerance for CDiff infections. Achievement against RTT metrics continues. The Trust again hit the 90% threshold for admitted patients in September (fourth consecutive month). The Trust continues its focus on resolving a few problems with waits for a few inpatient specialties (eg Lower GI and Neurosurgery) and within diagnostics (endoscopy mainly) to ensure that the inpatient pathway is as short as possible. There is a more detailed narrative on Cancer performance later on in the report outlining actions being taken to maintain the current strong position. 2 week wait shows a much improved position, and is achieving the threshold at 99.1%, as is the breast symptomatic at 99.4%. The 62 day target continues to show an improved position at 86.5%. Delayed transfers of care have reduced slightly from August to 8.91% but remain above the set target for each month so far this year. A whole systems review of the data collections has highlighted a number of areas where the data was not being reported exactly as the national guidance specified. This was rectified during July, the result of which shows a much worse position, but the Trust is now confident that the correct number of delays are being reported.

Patients discharged in period with LoS >21 days

| | | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|-----------------------------------|---------------|--------|--------|--------|--------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2010-11 | Elective | 20 | 21 | 27 | 34 | 28 | 32 | 31 | 32 | 25 | 25 | 25 | 29 |
| | | Non- elective | 210 | 203 | 253 | 226 | 215 | 231 | 236 | 266 | 252 | 241 | 225 | 259 |
| | | Total | 230 | 224 | 280 | 260 | 243 | 263 | 267 | 298 | 277 | 266 | 250 | 288 |
| | 2011-12 | Elective | 28 | 30 | 34 | 29 | 20 | 20 | | | | | | |
| | | Non- elective | 233 | 288 | 278 | 276 | 261 | 189 | | | | | | |
| | | Total | 261 | 318 | 312 | 305 | 281 | 209 | | | | | | |
| | # of Cumulative bed days in Month | Elective | 1,212 | 1,302 | 1,167 | 1,346 | 788 | 959 | | | | | | |
| | | Non- elective | 10,639 | 12,191 | 12,206 | 11,839 | 10,917 | 8,424 | | | | | | |
| | | Total | 11,851 | 13,493 | 13,373 | 13,185 | 11,705 | 9,383 | - | | | | | |

The numbers of patients being discharged beyond their 21st day continues to decrease, September being 25% less than the figure in August. Year to date still shows a 12.4% increase compared to the same period for last year. The majority of this growth appears to be with patients admitted non-electively.

Beddays from patients with LoS>21 days

| | | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---------|---------------|--------|--------|--------|--------|--------|-----------|---------|----------|----------|---------|----------|--------|
| ORH | 2010-11 | Elective | 890 | 677 | 862 | 1,697 | 1,100 | 1,482 | 871 | 1,060 | 896 | 1,254 | 967 | 1,187 |
| | | Non- elective | 8,784 | 8,950 | 10,452 | 10,708 | 9,083 | 10,010 | 12,362 | 13,059 | 11,021 | 9,831 | 9,772 | 11,742 |
| | | Total | 9,674 | 9,627 | 11,314 | 12,405 | 10,183 | 11,492 | 13,233 | 14,119 | 11,917 | 11,085 | 10,739 | 12,929 |
| | 2011-12 | Elective | 1,212 | 1,302 | 1,167 | 1,346 | 788 | 959 | | | | | | |
| | | Non- elective | 10,639 | 12,191 | 12,206 | 11,839 | 10,917 | 8,424 | | | | | | |
| | | Total | 11,851 | 13,493 | 13,373 | 13,185 | 11,705 | 9,383 | | | | | | |

The 12.4% increase in the numbers of patients staying over 21 days, results in a corresponding increase in bed days of 13% comparing April to September for this year to the same period last year. This growth is more apparent in non-elective patients.

Patients in Hospital and discharged in month

* Excluding CDU, Discharge lounge, MAU & SEU, ITU (Adult, Neuro, Cardiac & Paeds)

| | | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---------|---|-------|------|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | Average Number of ward transfers | 0.93 | 0.92 | 0.93 | 0.93 | 0.92 | 0.93 | | | | | | |
| | | Number of patients with more than 3 ward stays in one spell | 359 | 351 | 353 | 394 | 384 | 387 | | | | | | |

The average number of ward moves remains at less than 1 for the first months of 2011/12.

The number of patients either still in hospital at the end of the month or discharged during the month who have experienced more than 3 ward moves is significant.

Patients in Hospital and discharged in month

* Excluding Discharge lounge

| | | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---------|---|-------|------|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | Average Number of ward transfers | 1.11 | 1.09 | 1.09 | 1.10 | 1.10 | 1.10 | | | | | | |
| | | Number of patients with more than 3 ward stays in one spell | 3132 | 3178 | 3197 | 3326 | 3199 | 3102 | | | | | | |

Patients Staying greater than 21 Days including those still in Hospital and discharged in month

* Excluding CDU, Discharge lounge, MAU & SEU, ITU/ Adult, Neuro, Cardiac & Paeds)

| | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---|-------|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | | | | | | | | | | | | |
| | Average Number of ward transfers | 1.6 | 1.5 | 1.5 | 1.4 | 1.5 | 1.5 | | | | | | |
| | Number of patients with more than 3 ward stays in one spell | 77 | 74 | 72 | 79 | 95 | 90 | | | | | | |

Patients Staying greater than 21 Days including those still in Hospital and discharged in month

* Excluding Discharge lounge

| | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---|-------|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | | | | | | | | | | | | |
| | Average Number of ward transfers | 2.0 | 1.9 | 2.0 | 1.9 | 2.0 | 2.0 | | | | | | |
| | Number of patients with more than 3 ward stays in one spell | 85 | 82 | 80 | 88 | 106 | 103 | | | | | | |

Average LOS on Discharge

Levels: Trust, Site, Speciality (of Dominant episode)

| | | April | May | June | July | August | September | October | November | December | January | February | March | |
|-----|--------------------------|----------------------------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|--|
| ORH | Number of patients | 0-2 Days | 12315 | 12745 | 13692 | 13495 | 13014 | 13131 | | | | | | |
| | | 2-5 days | 1481 | 1458 | 1414 | 1494 | 1424 | 1355 | | | | | | |
| | | 5-7 Days | 431 | 397 | 434 | 419 | 415 | 369 | | | | | | |
| | | 7-14 days | 547 | 573 | 612 | 579 | 584 | 541 | | | | | | |
| | | 14+ Days | 485 | 516 | 548 | 490 | 523 | 391 | | | | | | |
| | | Total number of patients | 15259 | 15689 | 16700 | 16477 | 15960 | 15787 | | | | | | |
| | Number of bed days | 0-2 Days | 4850 | 4972 | 5092 | 4731 | 4725 | 5515 | | | | | | |
| | | 2-5 days | 5892 | 5468 | 5222 | 5556 | 5395 | 5667 | | | | | | |
| | | 5-7 Days | 3015 | 2570 | 2778 | 2731 | 2689 | 2613 | | | | | | |
| | | 7-14 days | 5830 | 5845 | 6368 | 5986 | 6120 | 6168 | | | | | | |
| | | 14+ Days | 15947 | 16971 | 17559 | 16446 | 15974 | 12829 | | | | | | |
| | Total number of Bed days | 35534 | 35826 | 37019 | 35450 | 34903 | 32792 | | | | | | | |
| | Average LOS | Average LOS Elective | 3.70 | 3.71 | 3.83 | 3.78 | 3.58 | 3.28 | | | | | | |
| | | Average LOS Non-elective | 5.15 | 5.03 | 5.28 | 4.79 | 4.97 | 4.73 | | | | | | |
| | | Average LOS Non-elective non-eme | 3.34 | 3.41 | 3.58 | 3.50 | 3.38 | 3.60 | | | | | | |
| | | Day case | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | | | | |
| | | Average LOS | 2.33 | 2.28 | 2.22 | 2.15 | 2.19 | 2.08 | | | | | | |

It is clear from the data presented that the longer staying patients (i.e. patients who stay over 21 days) have a higher average number of ward moves during their stays.

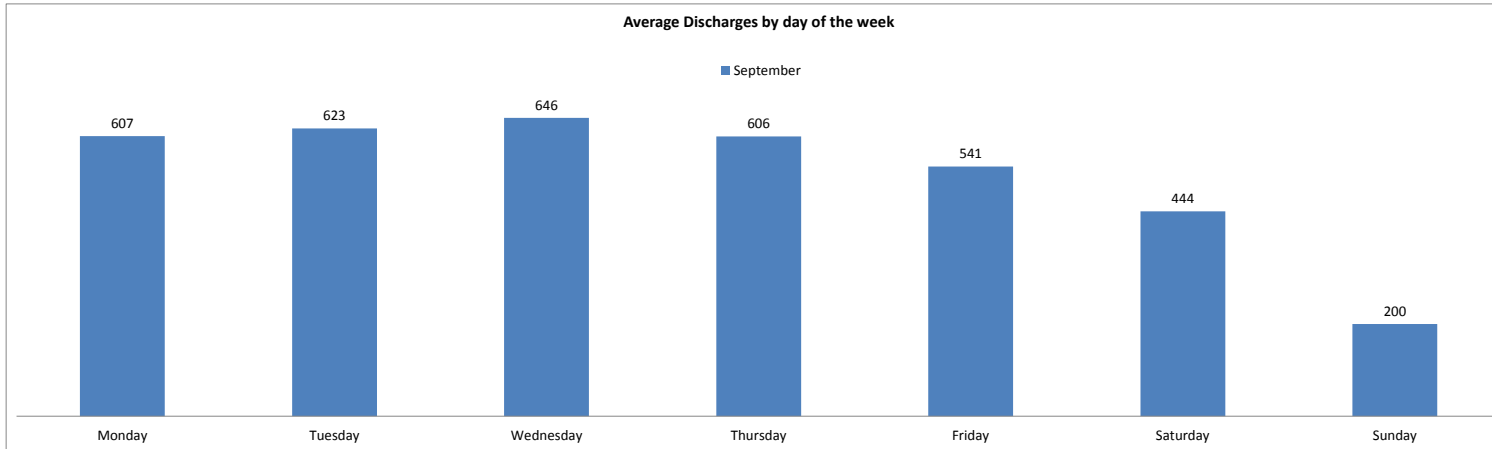
The attached length of stay profile shows the proportion of patients within each length of stay category and the bed days associated with those patients. September shows 2.5% of patients stayed in our hospitals over 14 days, this is slightly lower than for August. These patients accounted for 39.1% of all bed days. Conversely, 83.2% of patients stayed in our hospitals between 0 and 2 days and these account for 16.8% of the total bed days.

September's length of stay was marginally lower than August's.

Discharge Profile

Average number of Discharges in Month by Day of Discharge
 *Exclude daycase wards & discharge lounge

| | | April | May | June | July | August | September | October | November | December | January | February | March |
|--------------|----------------------------|-----------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | Average Number of patients | Day of the week | | | | | | | | | | | |
| | Monday | 562 | 539 | 639 | 617 | 580 | 607 | | | | | | |
| | Tuesday | 625 | 479 | 643 | 615 | 599 | 623 | | | | | | |
| | Wednesday | 643 | 646 | 648 | 653 | 503 | 646 | | | | | | |
| | Thursday | 660 | 637 | 493 | 647 | 596 | 606 | | | | | | |
| | Friday | 642 | 686 | 690 | 674 | 669 | 541 | | | | | | |
| | Saturday | 343 | 459 | 490 | 478 | 446 | 444 | | | | | | |
| | Sunday | 199 | 210 | 255 | 188 | 210 | 200 | | | | | | |
| Total | Total number of Patients | 15685 | 15857 | 16570 | 16830 | 16094 | 15805 | | | | | | |



The discharge data clearly shows, both from an average across the year to date and within the individual months that there is a dip in the number of discharges at a weekend, particularly on Sunday, across our hospitals. Sunday discharges account for less than a third of the discharges that occur on any other given weekday.

Average number of Discharges in Month by Hour of Discharge

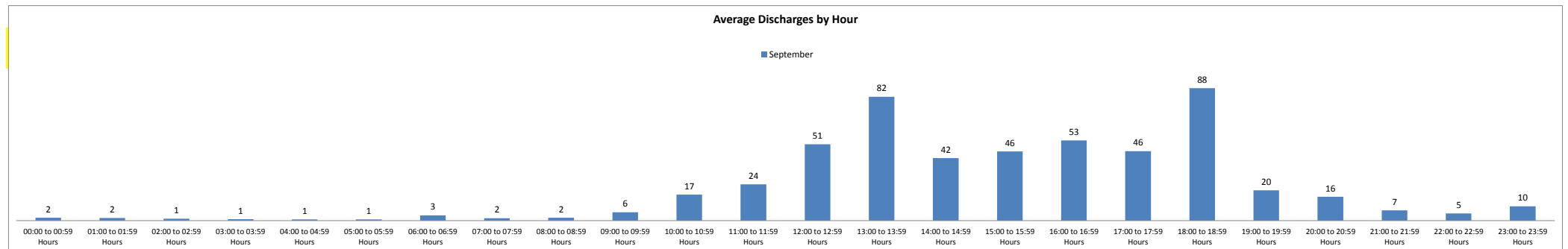
Level: Trust

| ORH | Hour | April | May | June | July | August | September | October | November | December | January | February | March |
|----------------------------|--------------------------|----------------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|
| | | 00:00 to 00:59 Hours | 1 | 1 | 2 | 1 | 1 | 2 | | | | | |
| Average Number of patients | 01:00 to 01:59 Hours | 1 | 1 | 1 | 1 | 1 | 2 | | | | | | |
| | 02:00 to 02:59 Hours | 2 | 1 | 1 | 1 | 1 | 1 | | | | | | |
| | 03:00 to 03:59 Hours | 1 | 1 | 1 | 1 | 1 | 1 | | | | | | |
| | 04:00 to 04:59 Hours | 1 | 1 | 1 | 1 | 1 | 1 | | | | | | |
| | 05:00 to 05:59 Hours | 1 | 1 | 1 | 1 | 1 | 1 | | | | | | |
| | 06:00 to 06:59 Hours | 2 | 3 | 3 | 3 | 4 | 3 | | | | | | |
| | 07:00 to 07:59 Hours | 3 | 1 | 2 | 1 | 1 | 2 | | | | | | |
| | 08:00 to 08:59 Hours | 2 | 2 | 2 | 2 | 3 | 2 | | | | | | |
| | 09:00 to 09:59 Hours | 6 | 6 | 6 | 7 | 6 | 6 | | | | | | |
| | 10:00 to 10:59 Hours | 17 | 16 | 16 | 17 | 17 | 17 | | | | | | |
| | 11:00 to 11:59 Hours | 20 | 22 | 20 | 22 | 22 | 24 | | | | | | |
| | 12:00 to 12:59 Hours | 46 | 47 | 49 | 49 | 50 | 51 | | | | | | |
| | 13:00 to 13:59 Hours | 76 | 76 | 85 | 93 | 83 | 82 | | | | | | |
| | 14:00 to 14:59 Hours | 39 | 39 | 43 | 41 | 40 | 42 | | | | | | |
| | 15:00 to 15:59 Hours | 44 | 46 | 48 | 47 | 46 | 46 | | | | | | |
| | 16:00 to 16:59 Hours | 53 | 50 | 58 | 53 | 51 | 53 | | | | | | |
| | 17:00 to 17:59 Hours | 53 | 48 | 48 | 52 | 45 | 46 | | | | | | |
| | 18:00 to 18:59 Hours | 94 | 91 | 101 | 91 | 89 | 88 | | | | | | |
| | 19:00 to 19:59 Hours | 21 | 20 | 20 | 22 | 23 | 20 | | | | | | |
| | 20:00 to 20:59 Hours | 15 | 16 | 19 | 17 | 13 | 16 | | | | | | |
| | 21:00 to 21:59 Hours | 10 | 10 | 10 | 7 | 7 | 7 | | | | | | |
| | 22:00 to 22:59 Hours | 6 | 5 | 6 | 6 | 4 | 5 | | | | | | |
| | 23:00 to 23:59 Hours | 9 | 9 | 9 | 9 | 10 | 10 | | | | | | |
| Total | Total number of Patients | 15685 | 15857 | 16570 | 16830 | 16094 | 15805 | | | | | | |

The pattern on the times of day that patients are discharged from the hospitals' beds is very consistent over the time that this has been monitored. It is clear that the vast majority of patients are discharged from beds during the afternoons. This issue can cause problems with the flow of patients through the hospitals as the peak in ED attendances and GP referred emergency admissions tends to be around early to mid-morning, which also coincides with the time the majority of the elective admissions. This would support the notion of discharges taking place much earlier in the day to improve patient flow.

This may also reflect the non-timely way that the PAS system is updated by operational staff on a day to day basis.

Average Discharges by Hour



Discharges By POD Inpatients September 2011

| | | Total # of funded Beds | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-----|---------|----------------------------|--------|---------|-----------|----------|--------|----------|--------|
| ORH | 2011-12 | Elective | 1864 | 2095 | 2122 | 2447 | 2187 | 972 | 110 |
| | | Non-elective and Emergency | 1864 | 2095 | 2122 | 2447 | 2187 | 972 | 110 |
| | | 1599 | 1864 | 2095 | 2122 | 2447 | 2187 | 972 | 110 |

The data clearly shows that the dip in discharges at a weekend is apparent in both elective and non-elective patients.

On discharge times the same pattern is reflected in both elective and non-elective patients. The vast majority of the discharging happening from mid morning onwards through to late afternoon with 25% of all Non-Elective discharges occurring between 3pm and 5pm.

| | | Total # of funded Beds | 00:00 to 00:59 | 01:00 to 01:59 | 02:00 to 02:59 | 03:00 to 03:59 | 04:00 to 04:59 | 05:00 to 05:59 | 06:00 to 06:59 | 07:00 to 07:59 | 08:00 to 08:59 | 09:00 to 09:59 | 10:00 to 10:59 | 11:00 to 11:59 | 12:00 to 12:59 | 13:00 to 13:59 | 14:00 to 14:59 | 15:00 to 15:59 | 16:00 to 16:59 | 17:00 to 17:59 | 18:00 to 18:59 | 19:00 to 19:59 | 20:00 to 20:59 | 21:00 to 21:59 | 22:00 to 22:59 | 23:00 to 23:59 |
|-----|---------|----------------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| ORH | 2011-12 | Elective | 1 | 1 | 0 | 0 | 2 | 0 | 75 | 15 | 23 | 143 | 360 | 510 | 1262 | 2244 | 766 | 769 | 1928 | 887 | 2135 | 245 | 144 | 41 | 41 | 205 |
| | | Non-elective and Emergency | 59 | 55 | 39 | 27 | 23 | 26 | 29 | 34 | 53 | 95 | 305 | 427 | 531 | 540 | 804 | 954 | 941 | 726 | 721 | 480 | 379 | 173 | 107 | 88 |
| | | 1599 | 59 | 55 | 39 | 27 | 23 | 26 | 29 | 34 | 53 | 95 | 305 | 427 | 531 | 540 | 804 | 954 | 941 | 726 | 721 | 480 | 379 | 173 | 107 | 88 |

Delayed discharges

**for bed days:exclude:daycase wards, maty,well babies etc using OPS team bedstock*

| | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---------|---|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | Number of Delayed patients at month end | 71 | 74 | 51 | 93 | 105 | 88 | | | | | |
| | | Total Delayed bed days in month | 2061 | 2307 | 1736 | 2556 | 3248 | 3373 | | | | | |
| | | Total number of bed days available <i>*exclude:daycase wards, maty,well babies etc using OPS team bedstock</i> | 37170 | 38409 | 37170 | 38409 | 38409 | 37170 | | | | | |
| | | Number of patients Medically fit and not discharged at month end | 128 | 130 | 119 | 106 | 108 | 116 | | | | | |
| | | Total number of Bed days used by patients Medically fit and not discharged at month end | 1799 | 1962 | 1671 | 1347 | 1248 | 1685 | | | | | |
| | | % Bed days used by patients Medically fit and not discharge at month end | 5% | 5% | 4% | 4% | 3% | 5% | | | | | |

The reported number of Delayed transfers of care (DTCs) remains very high. Delayed patients now occupy over 10% of acute bed stock across the three hospital sites, with a particular difficulty at the Horton site where greater than 25% of acute beds are occupied by delayed patients. Strenuous efforts continue with commissioning and provider colleagues to reduce the burden of delays on the financial and operational performance of the Trust. Initiatives are being progressed rapidly (not least the Supported Discharge Service) that will mitigate the problem to some extent over the difficult Winter months, but their effectiveness may be limited by a lack of response by Social Care partners. The importance and severity of Whole System delays should not be underestimated. The lack of timely discharges not only contributes to underlying constraints in flow through acute beds but have an additional sporadic impact, often severe. Downstream delays contribute substantially to impairment of outflow from the Emergency Departments and continue to threaten the delivery of key operational targets including the A&E standards

Admissions

| POD / Admission Meth | | April | May | June | July | August | September | October | November | December | January | February | March | Full Year Total | YTD | |
|----------------------|---------|--|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-----------------|-------|-------|
| ORH | 2008-09 | Non- Elective | 4135 | 4190 | 4155 | 4343 | 4036 | 4213 | 4501 | 4432 | 4647 | 4448 | 4165 | 4885 | 52150 | 25072 |
| | 2010-11 | Elective | 1619 | 1606 | 1782 | 1719 | 1708 | 1737 | 1742 | 1789 | 1405 | 1531 | 1571 | 1694 | 19903 | 10171 |
| | | Non- Elective | 4485 | 4708 | 4630 | 4770 | 4516 | 4356 | 4779 | 4549 | 4672 | 4487 | 4135 | 4713 | 54800 | 27465 |
| | | Non- Elective non-emergency | 1957 | 2003 | 1974 | 2053 | 2024 | 2136 | 2152 | 2034 | 2030 | 2164 | 2018 | 1915 | 24460 | 12147 |
| | | Day case | 7170 | 6943 | 7501 | 7436 | 7224 | 7665 | 7703 | 8333 | 7122 | 7253 | 7085 | 8141 | 89576 | 43939 |
| | 2011-12 | Elective | 1388 | 1520 | 1698 | 1560 | 1544 | 1441 | | | | | | | 9151 | 9151 |
| | | Non- Elective | 4447 | 4603 | 4520 | 4624 | 4550 | 4258 | | | | | | | 27002 | 27002 |
| | | Non- Elective non-emergency | 2024 | 2139 | 2091 | 2133 | 1997 | 1970 | | | | | | | 12354 | 12354 |
| | | Day case | 7232 | 7481 | 8410 | 8025 | 7825 | 8010 | | | | | | | 46983 | 46983 |
| | | Emergency Re-admissions within 30 days | 4.22% | 3.88% | 3.83% | 3.97% | 4.17% | 3.02% | | | | | | | | |

Total admissions for the year to date are 1.9% higher than in the previous for the same period. Non-elective admissions are 2% lower for the first six months of this year compared to the same period last year. Elective inpatient admissions are 10% lower for the same period last year whilst Day Cases are 7% higher. Overall elective activity has increased by 4% compared to same period last year.

4 Hour standard by Month - Sitrep Periods

*ORH Type 1 & 2

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|--------------|---------|------------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-------|--------|
| ORH Type 1 | 2010-11 | # of Attendances | 9076 | 9911 | 9503 | 9941 | 8884 | 9104 | 9406 | 9021 | 8919 | 8986 | 8397 | 9892 | 111040 |
| | | # of Breaches | 181 | 173 | 182 | 159 | 235 | 472 | 641 | 977 | 1343 | 1409 | 903 | 475 | 7150 |
| | | Performance | 98.0% | 98.3% | 98.1% | 98.4% | 97.4% | 94.8% | 93.2% | 89.2% | 84.9% | 84.3% | 89.2% | 95.2% | 93.6% |
| ORH Type 1&2 | 2011-12 | # of Attendances | 8991 | 9164 | 11303 | 8849 | 8173 | 11177 | | | | | | | 57657 |
| | | # of Breaches | 516 | 349 | 578 | 233 | 282 | 623 | | | | | | | 2581 |
| | | Performance | 94.3% | 96.2% | 94.9% | 97.4% | 96.5% | 94.4% | | | | | | | 95.5% |
| | | 94.6% | 96.5% | 95.3% | 97.6% | 96.9% | 94.9% | | | | | | | 95.9% | |

Average waits in A&E

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|---------|---------------------------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|-------|
| ORH | 2011-12 | Average wait in minutes *Type 1 | 172 | 171 | 175 | 162 | 165 | 172 | | | | | | | 170 |
| | | Breaches *Type 1&2 | 516 | 349 | 578 | 233 | 282 | 623 | | | | | | | 2581 |
| | | Performance % * Type 1&2 | 94.6% | 96.5% | 95.3% | 97.6% | 96.9% | 94.9% | | | | | | | 95.9% |

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|-------------------------------------|---------------------------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|-------|
| ORH | <i>*Major or Minor Patient type</i> | | | | | | | | | | | | | | |
| | 2011-12 Major | Average wait in minutes *Type 1 | 216 | 208 | 222 | 197 | 203 | 211 | | | | | | | 210 |
| | | Breaches *Type 1 | 429 | 325 | 520 | 175 | 231 | 464 | | | | | | | 2144 |
| | | Performance % * Type 1 | 87.7% | 90.3% | 87.7% | 94.6% | 92.8% | 89.2% | | | | | | | 90.2% |
| | 2011-12 Minor | Average wait in minutes *Type 1 | 145 | 149 | 147 | 142 | 140 | 148 | | | | | | | 145 |
| | | Breaches *Type 1 | 87 | 24 | 58 | 58 | 51 | 159 | | | | | | | 437 |
| | | Performance % * Type 1 | 98.4% | 99.6% | 99.2% | 99.0% | 99.0% | 97.7% | | | | | | | 98.8% |

Achievement of the Trust A&E 4 hour access standard remained satisfactory for the second quarter; the average across the quarter was 96% and the average type 1 ED wait continues to be below 3 hours. Activity continues to rise, and September saw the highest activity ever (month: 11,177 attendances; single week: 2,500; single day: 405). Day-to-day achievement of the access standard is variable, largely reflecting periodic constraints on flow from the department to inpatient areas, itself impacted by high levels of DTOC. The comprehensive Action Plan is continually updated, and further key elements are in place. Reflecting the internal progress that has been made, Minors performance is excellent, at almost 99% for the year to date. Majors performance is less good, reflecting both the DTOC position (many Majors patients require admission) and on going work at the interface between ED and downstream clinical teams. There is currently intensive management of staffing levels in both EDs to ensure that gaps in rotas are covered, supplemented by in reaching acute physician/Geratology input to support prompt assessment, treatment and discharge. The number of medical escalation beds that are open to ensure patient flow is maintained through ED and the EAU are significant and well above the planned numbers contained in the Directorate's financial plan.

The Directorate remains very aware of the importance of the A&E standards and their vulnerability to internal and external factors, and is further developing its escalation plan to strengthen the response to surges of activity

4 Hour standard by Quarter Sitrep Months

| | | | Q1 | Q2 | | |
|-----|--------------|------------------------|---------------|---------------|-------|-------|
| | | | Sitrep Months | Sitrep Months | | |
| | | <i>From</i> | 04/04/2011 | 04/07/2011 | | |
| | | <i>To</i> | 03/07/2011 | 30/09/2011 | | |
| | | <i>Attendance Type</i> | | | | |
| ORH | Admitted | | Type 1 | 88.2% | 92.4% | |
| | Not Admitted | | Type 1 | 97.6% | 97.3% | |
| | All Patients | | Type 1 & 2 | 95.5% | 96.3% | |
| ORH | JR | Admitted | | Type 1 | 89.9% | 93.0% |
| | | Not Admitted | | Type 1 | 97.1% | 96.7% |
| | | All Patients | | Type 1 & 2 | 95.4% | 96.1% |
| ORH | HH | Admitted | | Type 1 | 82.3% | 90.5% |
| | | Not Admitted | | Type 1 | 98.4% | 98.4% |
| | | All Patients | | Type 1 & 2 | 95.6% | 96.9% |

This table shows achievement of the four hour standard broken down by A&E site and by admitted and non-admitted (for type 1 attendances only). Data is presented according to "SitRep months" and by calendar months (SitRep months have been devised by the DoH, to map weeks more consistently into months and quarters)

Quarter 2 performance has been significantly ahead of Quarter 1. Weaker areas of performance include patients admitted to the JRH and particularly the HGH, where capacity constraints due largely to 'DTC' have been a significant issue

Total time spent in Department

| | | Thresholds | April | May | June | July | August | September | October | November | December | January | February | March |
|------------------|-----------------------|-----------------|-------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|
| <i>*In Hours</i> | | | | | | | | | | | | | | |
| JR | Admitted patients | 95th Percentile | 7.55 | 6.40 | 7.85 | 3.98 | 4.00 | 7.57 | | | | | | |
| | Not Admitted patients | | 3.98 | 3.98 | 3.98 | 3.92 | 3.97 | 4.53 | | | | | | |
| HH | Admitted patients | | 8.73 | 7.85 | 10.47 | 6.57 | 7.85 | 6.07 | | | | | | |
| | Not Admitted patients | | 3.93 | 3.98 | 3.93 | 3.93 | 3.87 | 3.83 | | | | | | |
| JR | Admitted patients | Median | 3.70 | 3.65 | 3.73 | 3.62 | 3.68 | 3.80 | | | | | | |
| | Not Admitted patients | | 2.68 | 2.75 | 2.80 | 2.52 | 2.53 | 2.82 | | | | | | |
| HH | Admitted patients | | 3.72 | 3.72 | 3.73 | 3.48 | 3.57 | 3.53 | | | | | | |
| | Not Admitted patients | | 2.28 | 2.60 | 2.28 | 2.42 | 2.12 | 2.02 | | | | | | |
| JR | Admitted patients | Maximum | 18.60 | 17.95 | 23.13 | 12.43 | 14.40 | 20.10 | | | | | | |
| | Not Admitted patients | | 16.82 | 19.82 | 26.77 | 11.15 | 9.15 | 19.55 | | | | | | |
| HH | Admitted patients | | 20.63 | 14.33 | 19.02 | 24.00 | 19.95 | 12.22 | | | | | | |
| | Not Admitted patients | | 29.85 | 16.55 | 27.98 | 17.20 | 18.27 | 16.72 | | | | | | |

Time to Treatment and Time to initial Assessment

| | | Thresholds | April | May | June | July | August | September | October | November | December | January | February | March |
|------------------|---|-------------------|-------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|
| <i>*In Hours</i> | | | | | | | | | | | | | | |
| JR | Time to initial Assessment (Arrivals by ambulance) | Median | 0.27 | 0.28 | 0.25 | 0.23 | 0.23 | 0.25 | | | | | | |
| HH | | | 0.20 | 0.18 | 0.17 | 0.15 | 0.08 | 0.02 | | | | | | |
| JR | | Maximum | 24.58 | 24.15 | 24.32 | 24.07 | 25.08 | 24.98 | | | | | | |
| HH | | | 7.55 | 1.93 | 2.03 | 3.05 | 3.87 | 1.28 | | | | | | |
| JR | 95th Percentile | 0.25 Hours | 1.03 | 1.07 | 1.13 | 1.13 | 1.07 | 1.15 | | | | | | |
| HH | | 0.73 | 0.62 | 0.67 | 0.80 | 0.68 | 0.55 | | | | | | | |
| JR | Time to Treatment | Median | 1.50 | 1.62 | 1.62 | 1.48 | 1.47 | 1.73 | | | | | | |
| HH | | | 1.37 | 1.57 | 1.37 | 1.43 | 1.10 | 1.05 | | | | | | |
| JR | | Maximum | 44.55 | 49.70 | 27.18 | 30.02 | 52.65 | 28.47 | | | | | | |
| HH | | | 13.13 | 7.27 | 14.08 | 8.83 | 13.68 | 9.93 | | | | | | |
| JR | 95th Percentile | Threshold not set | 3.62 | 3.55 | 3.55 | 3.43 | 3.60 | 3.85 | | | | | | |
| HH | | 3.47 | 3.65 | 3.48 | 3.48 | 3.12 | 3.08 | | | | | | | |

Unplanned reattendance & Left before seen rates

| | | Thresholds | April | May | June | July | August | September | October | November | December | January | February | March |
|----|-----------------------|-----------------------------|-------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|
| JR | 2011-12 | Unplanned reattendance rate | 5% | 2.63% | 2.30% | 2.30% | 2.57% | 2.16% | 1.91% | | | | | |
| HH | | | 3.41% | 3.44% | 2.62% | 2.34% | 2.77% | 2.00% | | | | | | |
| JR | Left before seen rate | 5% | 3.25% | 3.68% | 3.57% | 3.12% | 3.11% | 3.86% | | | | | | |
| HH | | | 3.87% | 3.79% | 2.74% | 4.66% | 2.48% | 2.83% | | | | | | |

Work continues to enhance the quality of data precision as well as the timeliness of initial assessment. Many elements of the enhanced Action Plan are relevant, and facilitation of flow by services (ORHT and other providers) downstream of ED remains vitally important to the timely delivery of care in ED.

The total time spent in the department metrics are split into 2 sections, admitted and non-admitted. The ORH is performing well against the median waits, all of which are inside the 4 hour threshold across both sites for admitted and non-admitted. However, the 95th percentile and maximum waits are problematic; the Trust is struggling to achieve the 95th percentile for both sites for patients who get admitted; reduction of DTOC pressures would greatly facilitate improved performance.

The performance as stated for time to treatment and time to initial assessment are unsatisfactory, both impacted substantially by data quality issues that the Directorate is exploring. For example, time to initial assessment is routinely less than 5 minutes for ambulance arrivals (an excellent performance), yet the data suggests delays approximating to one hour on both sites due to errors in time-stamping.

The Trust is currently performing very well against the unplanned re-attendance rate and the left before seen rate. The Action Plan is expected to further reduce 'left before seen' rates.

Patients with Senior Review

| | | | Thresholds | April | May | June | July | August | September | October | November | December | January | February | March | |
|-----|---------|--|------------|--------|--------|--------|--------|--------|-----------|---------|----------|----------|---------|----------|-------|--|
| JR | 2011-12 | Patients with on set of Non-Traumatic Chest pain | Unknown | 62.06% | 53.17% | 55.11% | 53.04% | 53.76% | 58.21% | | | | | | | |
| HH | | | | 57.36% | 56.93% | 56.91% | 71.83% | 69.85% | 69.23% | | | | | | | |
| JR | | Reattendances less that 72 hours | | 22.88% | 26.55% | 23.81% | 25.62% | 30.00% | 35.48% | | | | | | | |
| HH | | | | 13.58% | 23.17% | 14.29% | 32.08% | 27.27% | 47.73% | | | | | | | |
| JR | | Febrile Child under 1 year | | 38.10% | 50.00% | 38.46% | 35.29% | 42.11% | 75.00% | | | | | | | |
| HH | | | | 0.00% | 75.00% | 50.00% | 16.67% | 33.33% | N/A | | | | | | | |
| JR | | Patients with Senior review | | 51.97% | 46.98% | 47.96% | 45.80% | 48.72% | 53.79% | | | | | | | |
| HH | | | | 40.28% | 44.84% | 42.55% | 59.70% | 55.61% | 63.58% | | | | | | | |
| ORH | | | | 48.54% | 46.31% | 46.46% | 49.79% | 50.82% | 56.39% | | | | | | | |
| | | | | | | | | | | | | | | | | |

This metric shows the percentage of patients having a senior doctor review for specific medical conditions, split by the site of the Emergency Department. There is no agreed threshold of acceptable performance. The specified presenting conditions vary substantially in severity as judged by the Triage Nurse (for example many cases of chest pain may be clearly muscular in origin), and so the absence of senior medical review does not necessarily indicate suboptimal quality of care.

Ambulatory Care for Emergency Conditions

| | | | Thresholds | April | May | June | July | August | September | October | November | December | January | February | March | |
|-----|---------|--|------------|--------|---------|--------|--------|--------|-----------|---------|----------|----------|---------|----------|-------|--|
| JR | 2011-12 | Percentage of patients diagnosed with DVT ending in admission | Unknown | 42.86% | 10.00% | 25.00% | 0.00% | 50.00% | 0.00% | | | | | | | |
| HH | | | | 33.33% | 100.00% | 0.00% | 0.00% | 66.67% | 50.00% | | | | | | | |
| JR | | Percentage of patients diagnosed with Cellulitis ending in admission | | 27.27% | 33.33% | 63.64% | 50.00% | 55.56% | 60.00% | | | | | | | |
| HH | | | | 12.50% | 25.00% | 25.00% | 11.11% | 16.67% | 10.00% | | | | | | | |
| ORH | | Percentage of A&E attendances for cellulitis & DVT that end in admission | 27.59% | 25.00% | 37.04% | 22.22% | 34.38% | 28.00% | | | | | | | | |
| | | | Thresholds | April | May | June | July | August | September | October | November | December | January | February | March | |
| JR | 2011-12 | Number of Inpatient admissions with a Primary Diagnosis of DVT | Unknown | 3 | 4 | 4 | 5 | 6 | 2 | | | | | | | |
| CH | | | | 0 | 0 | 1 | 0 | 1 | 0 | | | | | | | |
| HH | | | | 3 | 4 | 1 | 1 | 1 | 3 | | | | | | | |
| JR | | Number of Inpatient admissions with a Primary Diagnosis of Cellulitis | | 28 | 28 | 27 | 34 | 33 | 30 | | | | | | | |
| CH | | | | 14 | 16 | 17 | 10 | 11 | 9 | | | | | | | |
| HH | | | | 15 | 24 | 17 | 16 | 15 | 14 | | | | | | | |
| ORH | | Number of admissions for Cellulitis and DVT per head of weighted population (527503) | | 0.012% | 0.014% | 0.013% | 0.013% | 0.013% | 0.011% | | | | | | | |

These metrics show the percentage of patients (with 2 specific ambulatory medical conditions) admitted to hospital. The numbers of patients involved in this metric are very small, for both conditions but especially in DVT, averaging 4 patients admitted a month this year, and this results in considerable month-to-month volatility in performance. The aim of this particular metric is to drive health economies to develop systems to avoid admission for these types of ambulatory conditions. Oxfordshire has well advanced systems for the management of many conditions (such as DVT, chest pain and infections) on an ambulatory (outpatient) basis.

Number of Patients admitted, transferred or discharged in the last 30 minutes of 4 Hour wait

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|---------|-------------------------------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|-------|
| ORH | 2011-12 | Percentage of patients *Type 1 | 26.7% | 28.9% | 28.0% | 26.7% | 28.7% | 28.8% | | | | | | | 28.0% |
| | | Number of patients *Type 1 | 2402 | 2644 | 3160 | 2364 | 2349 | 3221 | | | | | | | 16140 |
| | | Total number of attendances *Type 1 | 8991 | 9164 | 11303 | 8849 | 8173 | 11177 | | | | | | | 57657 |

The number of patients that are admitted, transferred or discharged during the last 30 minutes of their 4 hour stays remains at higher levels than are desirable. Continued execution of the ED 4 hour standard Action Plan will result in performance improvements. Both internal and downstream constraints remain factors, but both are being addressed vigorously.

Average LOS in MAU, SEU, CDU and EAU in Hours

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|---------|-------|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|----|
| ORH | 2011-12 | MAU | 17 | 15 | 21 | 17 | 18 | NA | | | | | | | 18 |
| | | SEU | 47 | 48 | 50 | 56 | 57 | 54 | | | | | | | 52 |
| | | EAU | 12 | 11 | 11 | 9 | 11 | 12 | | | | | | | 11 |

LoS remained fairly stable across the SEU (JRH) and Emergency Assessment Units (JRH & HGH) clinical areas.

Number of patients spending less than 1 day/ 23.59 hrs as an emergency admission

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|---------|---|------|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|-------|
| ORH | 2011-12 | Number of patients (Emergency admissions) | 1847 | 1940 | 1865 | 2026 | 1986 | 1823 | | | | | | | 11487 |
| | | Number of patients (A&E) | 1017 | 1134 | 1013 | 1163 | 1171 | 1005 | | | | | | | 6503 |
| | | Total Number of Emergency Admissions | 4447 | 4603 | 4520 | 4624 | 4550 | 4258 | | | | | | | 27002 |
| | | Percentage under 1 day | 42% | 42% | 41% | 44% | 44% | 43% | | | | | | | 43% |

The number of emergency admissions that stay in the hospitals' beds for less than 24 hours was 46% in September, increased slightly from previous months.

Number of Cancellations

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|---------|--|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|-----|
| ORH | 2011-12 | Number of Cancellations (Elective) | 48 | 53 | 67 | 124 | 41 | 76 | | | | | | | 409 |
| | | Number of 28 day Cancellation Breaches | 2 | 0 | 0 | 6 | 5 | 0 | | | | | | | 13 |

The cancellations during September increased from August but remained below the peak experienced in July. There were no breaches of the 28day cancellation rule, reflecting the low number of cancellations in August.

18 Weeks

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|---------|--|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|--------|
| ORH | 2011-12 | % Achievement Admitted (adjusted) | 87% | 89% | 90% | 90% | 91% | 91% | | | | | | | 90% |
| | | % Achievement Non-Admitted | 97% | 97% | 96% | 97% | 97% | 97% | | | | | | | 97% |
| | | Number of incomplete pathways | 43582 | 42829 | 42140 | 41450 | 40358 | 40486 | | | | | | | 250845 |
| | | Total number of patients treated over 18 weeks -Admitted pathway | 446 | 320 | 341 | 319 | 302 | 316 | | | | | | | 2044 |

| | | April | May | June | July | August | September | October | November | December | January | February | March | |
|-----|---------|--|------|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|--|
| ORH | 2011-12 | Admitted Median wait (in weeks) | 8.1 | 9.1 | 8.3 | 8.3 | 7.8 | 7.6 | | | | | | |
| | | Admitted 95th percentile of waits (in weeks) | 23.9 | 24.9 | 22.2 | 22.4 | 22.1 | 22.3 | | | | | | |
| | | Non-Admitted Median wait (in weeks) | 2.9 | 3.4 | 3.2 | 3.2 | 3.4 | 3.7 | | | | | | |
| | | Non-Admitted 95th percentile of waits (in weeks) | 15.7 | 15.6 | 16.3 | 16.3 | 16.4 | 16.0 | | | | | | |
| | | Incompletes Median wait (in weeks) | 6.0 | 6.3 | 5.7 | 6.1 | 6.3 | 6.1 | | | | | | |
| | | Incompletes 95th percentile of waits (in weeks) | 21.6 | 16.6 | 16.1 | 16.2 | 16.0 | 17.0 | | | | | | |

18 Weeks- Number of specialties achieving the following targets

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD |
|-----|---------|---------------------------------------|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|
| ORH | 2011-12 | Admitted 18 weeks 90% (out of 40) | 24 | 29 | 31 | 32 | 31 | 24 | | | | | | |
| | | Non admitted 18 weeks 95% (out of 66) | 46 | 45 | 42 | 52 | 47 | 52 | | | | | | |

18 Weeks- Number of Key treatment functions achieving the following targets

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD |
|-----|---------|---------------------------------------|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|
| ORH | 2011-12 | Admitted 18 weeks 90% (out of 19) | 8 | 12 | 11 | 11 | 13 | 12 | | | | | | |
| | | Non admitted 18 weeks 95% (out of 19) | 16 | 13 | 13 | 13 | 15 | 15 | | | | | | |

18 week incompletes over 18 weeks

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD |
|-----|---------|-----------------------------|-------|-------|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-------|
| ORH | 2011-12 | On Admitted PTL | 668 | 762 | 467 | 632 | 679 | 637 | | | | | | 3845 |
| | | Not on Admitted PTL | 16775 | 16817 | 15642 | 13699 | 15009 | 15652 | | | | | | 93594 |
| | | Total number of incompletes | 17443 | 17579 | 16109 | 14331 | 15688 | 16289 | | | | | | 97439 |

Non-admitted performance still remains at a strong level showing consistent hitting of the 95% standard. Admitted performance shows a similar position to last month, and continues to show an achieving position for the fourth consecutive month.

The backlog remains at a similar level to that of April's. The number of patients waiting for admitted care who have already breached 18 weeks stands at 946 (week ending 18th September).

The Trust remains on weekly reporting to South Central SHA for the diagnostic waits over 6 weeks. Particular waiting time problems are being experienced in endoscopy, General anaesthetic MRI and Neurophysiology. Endoscopy is likely to be an ongoing problem for a few months yet, although the temporary Medinet solution should help contain this.

Waiting list

Number of Patients OP, INPAT and Daycase waiting over 6 weeks (OP) and 8 weeks (INPAT/DC) by spec (includes diagnostics & treatment)
 *exclude planned

| | | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---------|--|-------|------|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | Number of Outpatients waiting over 4 weeks | 3712 | 3100 | 3369 | 3754 | 3806 | 3794 | | | | | | |
| | | Number of Inpatients waiting over 10 weeks | 666 | 607 | 545 | 508 | 550 | 648 | | | | | | |
| | | Number of daycases waiting over 10 weeks | 944 | 965 | 936 | 868 | 921 | 1068 | | | | | | |

Waiting list - Number of Patients in planned waiting list

Inpatients and Daycase

| | | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---------|---|-------|------|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | Number of patients on a planned waiting list with a past treat by | 631 | 677 | 619 | 522 | 617 | 730 | | | | | | |
| | | Number of patients on a planned waiting list with a future treat by | 5765 | 6059 | 5641 | 5737 | 6001 | 6330 | | | | | | |
| | | Number of patients without a date | 355 | 327 | 297 | 324 | 163 | 122 | | | | | | |

Waiting list - Inpatients & Outpatients

Inpatients and Outpatients

| | | | April | May | June | July | August | September | October | November | December | January | February | March |
|-----|---------|--|-------|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|
| ORH | 2011-12 | Number of inpatients waiting over 26 weeks | 188 | 186 | 157 | 154 | 164 | 172 | | | | | | |
| | | Number of Outpatients waiting over 13 week | 427 | 291 | 272 | 267 | 174 | 293 | | | | | | |

The number of outpatients waiting over 4 weeks remains above the position at the start of the year.

The overall numbers of inpatients and daycases waiting over 10 weeks increased by 245 in September, an increase of 147 daycases and 98 inpatients.

The Planned patients with past 'to be treated by' dates increased again during September to 730.

The number of patients without a date fell by 41 in September to 122.

The numbers of patients with extremely long waits for inpatients (incl daycases) as increased slightly but is still running at about 16 lower than were in April and May. The numbers of long waiting outpatients has increased by 119 on August to 293.

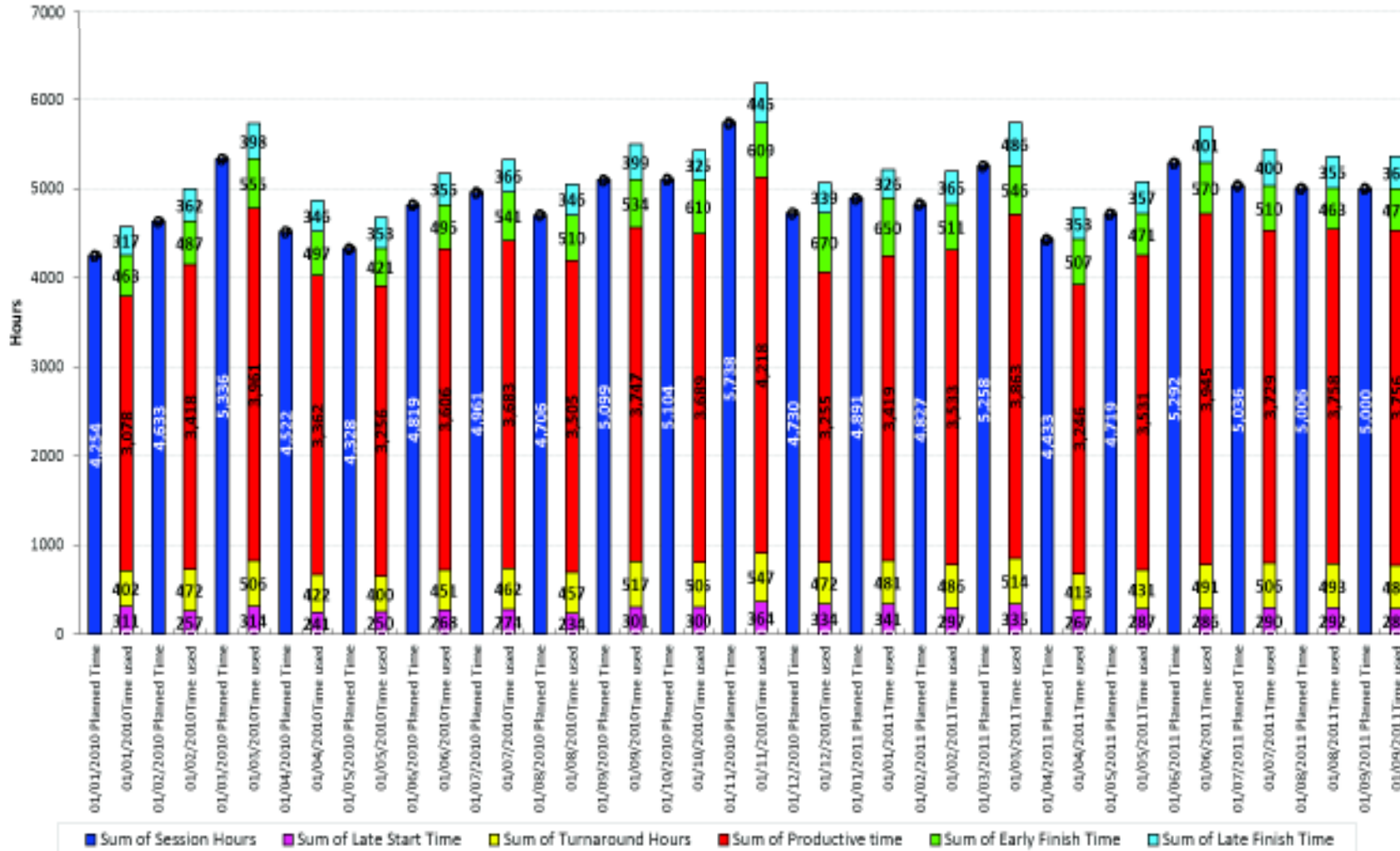
Cancer

| | | Performing Thresholds | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|--|-----------------------|-------|--------|-------|--------|--------|-----------|---------|----------|----------|---------|----------|--------|--------|-------|
| ORH | 2 week wait | 2010-11 | | 90.1% | 91.8% | 90.0% | 90.5% | 88.3% | 90.2% | 92.7% | 90.8% | 86.8% | 69.6% | 77.6% | 86.2% | 87.3% |
| | | 2011-12 | 93% | 91.6% | 92.6% | 96.5% | 96.9% | 99.1% | 98.2% | | | | | | | |
| | 2 week wait breast symptomatic referrals | 2010-11 | | 83.0% | 82.2% | 86.2% | 87.2% | 85.1% | 97.6% | 92.4% | 80.2% | 72.3% | 21.4% | 35.7% | 61.9% | 73.9% |
| | | 2011-12 | 93% | 74.5% | 95.3% | 98.9% | 100.0% | 99.4% | 100.0% | | | | | | | |
| | 31 days subsequent all treatments | 2010-11 | | 100.0% | 99.4% | 99.4% | 99.5% | 98.8% | 95.5% | 71.7% | 76.1% | 85.6% | 88.9% | 97.8% | 88.7% | 90.4% |
| | | 2011-12 | 95%* | 95.8% | 94.9% | 98.5% | 96.7% | 98.6% | 98.1% | | | | | | | |
| | 31 days | 2010-11 | | 97.4% | 99.5% | 99.5% | 99.2% | 98.4% | 95.0% | 97.9% | 95.6% | 98.7% | 94.4% | 97.3% | 99.1% | 97.6% |
| | | 2011-12 | 96% | 97.0% | 95.9% | 96.4% | 97.1% | 99.1% | 97.8% | | | | | | | |
| | 62 days screening | 2010-11 | | 100.0% | 90.0% | 87.5% | 93.6% | 87.5% | 81.8% | 85.7% | 70.6% | 100.0% | 84.6% | 86.7% | 93.1% | 88.0% |
| | | 2011-12 | 90% | 78.3% | 87.5% | 87.0% | 100.0% | 85.7% | 92.3% | | | | | | | |
| | 62 days | 2010-11 | | 74.5% | 83.3% | 84.8% | 82.4% | 76.2% | 74.7% | 71.5% | 80.1% | 76.7% | 70.7% | 69.3% | 84.9% | 78.9% |
| | | 2011-12 | 85% | 81.4% | 84.9% | 88.0% | 86.0% | 86.5% | 90.8% | | | | | | | |
| | Consultant upgrades | 2010-11 | | 100.0% | 0.0% | 100.0% | 100.0% | 100.0% | 100.0% | NA | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 93.8% |
| | | 2011-12 | 85% | NA | NA | 100.0% | NA | NA | NA | | | | | | | |

*This is an indicative target, there is no composite target for 31 days subsequent all treatments

The ORH met all Cancer Waiting Times targets in September. Whilst all teams should be congratulated on the delivery of the targets a sustained effort is required to maintain this level of performance in the future. Implementation of Cancer performance action plans continues to be closely monitored through fortnightly meetings chaired by the Oncology Clinical Director. Good progress can be reported on the action plans for LGI, Breast, Urology and pathology. Sustainable improvement plans are required for lung and gynae-oncology. Gynae-oncology – the service has requested the need for 4 x 10 hour theatre lists in the new theatre timetable which has now been approved and will commence from 10th October. Extra theatre lists have been secured in October including two weekends - this will prevent 8 breaches. Concerns around the provision of Pre-Operative Assessment have been escalated. The service is still awaiting the start of a post menopausal bleed clinic which would significantly streamline the patient pathway. The Oncology Clinical Director will liaise with the Women's CD to agree a start date. Urology –continuous monitoring of joint clinics is required to ensure there is sufficient capacity. This piece of work is being co-ordinated by the Urology OSM and Cancer Manager. Ensuring theatre lists are not reduced or cancelled (due to lack of anaesthetic cover) requires daily monitoring by the urology service. Job planning process underway moving towards annualised job plans to provide greater cross cover and flexibility. Development of business case for substantive Urologist/s (currently locum in post). LGI- continues to implement their action plan however considerable constraints continue with lack of capacity in endoscopy. Lung –The service has appointed a substantive replacement for Dr Breen who starts in February 2012. In the meantime a locum is in place and is covering the MDT chair role to ensure the pathway is closely monitored.

Theatre Hours Used 01/01/2010 to 30/09/2011



The chart details the breakdown of actual monthly usage time, in hours, within all theatres for planned sessions into Late starts, turnaround (time taken between patients), productive time (operating time), early finish times and late finish times (overruns). These actual usage times are plotted against the planned theatre times. There is a fairly consistent pattern outlined at the monthly aggregated level that shows around 75% to 80% of the total used time being used on operating, of which approximately 7 to 10% of this time is used as list overruns. Approximately 14% of the total available operating time is taken up by either late starts or early finishes.

Reporting on theatre use is now present on the Trust's Business Intelligence reporting tool (ORBIT) and can be viewed on a daily basis by operational and corporate managers/clinicians.

Additional Performance metrics

| | | April | May | June | July | August | September | October | November | December | January | February | March | YTD | |
|-----|--|-------|------|------|------|--------|-----------|---------|----------|----------|---------|----------|-------|-----|-------|
| ORH | 2011-12 | | | | | | | | | | | | | | |
| | Number of First Attendances per month by GP referral | 8810 | 7609 | 8297 | 7364 | 7809 | 7448 | | | | | | | | 47337 |
| | Number of First attendances per month by Consultant | 3509 | 3178 | 3454 | 3244 | 3260 | 3356 | | | | | | | | 20001 |

