

**Trust Board Meeting: Tuesday, 12 February 2013**  
**TB2013.28**

<b>Title</b>	Integrated Performance Report Month 9
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<b>Status</b>	The report provides a summary of the Trust's performance against a range of key performance indicators as agreed by the Trust Board.
<b>History</b>	Regular monthly report

<b>Board Lead</b>	Mr Paul Brennan, Director of Clinical Services			
<b>Key purpose</b>	Strategy	Assurance	Policy	<b>Performance</b>

## Integrated Performance Report Month 9

### Executive Summary

1. The format has now been updated for month 9, the first two pages show performance '**at a Glance**' across four domains Operational, Finance, Quality and Workforce. The following pages highlight areas of red and amber exceptions for the month with more detail narrative to explain underperformance and actions taken to improve performance. The metrics will be reviewed in line with the new operating framework for 2014/15.
2. The metrics included in this report are headline indicators from the Operating Framework 2012/13, Monitor's Compliance Framework and the NHS Outcomes Framework. The report gives an overview of the Trust's performance as seen externally via Monitor Compliance Self Certification predictions. The Trust Summary view provides, at a glance, an assessment of how the Trust is performing at month 0 against the key performance indicators agreed by the Trust Board.

### Key Highlights on performance

- Aseptic Non Touch Technique (ANTT) when preparing and administering injectable medicines, continues to be above target at 96.8%
- VTE risk assessments 3.1% above target
- A/E 4 hour wait has been above the 95% target, for Q2 was 96% and Q3 95.9% despite 2000 more A/E attendances in December. For the month of December performance just missed the target at 94%. January has not achieved the target, the final two months will be the most challenging of the year.
- RTT Admitted and Non-admitted targets were achieved at Trust level and at speciality level for non-admitted.
- All Cancer standards were met for November 2012.

### Areas of exception on performance

- DToC is 4% above target, delays have continued to grow during January, escalation beds continue to be open
- 18 Week RTT Admitted target at individual speciality level was not achieved for General Surgery
- Diagnostic waits for MSK ultrasound and MRI have exceeded the 6week wait, recovery plans are being progressed
- Bank and Agency spend has increased this month due to the level of vacancies and escalation beds open.

### Key Standards – in month 9.

#### 18 Week RTT, A/E & Cancelled Operations

3. **18 Week Referral to Treatment [RTT] performance:** The Trust achieved all its Trust wide targets for December. However at an individual speciality level for 'admitted' patients, General Surgery performed below 90% for the month. Additional theatre lists have been booked through February and March in order to achieve the required 90% by March 2013.

4. For hospital cancellations and patients rebooked within 28 days validation has commenced.

### Activity

5. Data Quality EPR meetings continue. Outpatient Patient Treatment List and cancellations have started validation
6. Critically, each division has established contingency plans to ensure all patients are seen in a timely way.
7. **Delayed Transfers of Care** remain a major cause of concern for the Trust, with the in-month level at 7.5% against a target of 3.5%. This equates to a system-wide monthly average number of delays of 102 in December 2012. A snapshot on 23<sup>rd</sup> January shows that the OUH has 125 delays across the four sites. The Supported Discharge Team is operating with an average of 60 patients per week and the Single Point of Access and new system wide discharge pathways were implemented on 3 December 2012.

### Cancer waits

8. **All Cancer Standards** were achieved in November 2012.

### Finance

#### Balance Sheet

9. **Debtors > 90 Days as % of Total Non-NHS** - The amount of debt owed as recorded on the Accounts Receivable system (A/R) has reduced every month since July. £0.8m of the amount owed by non-NHS organisations and over 90 days old is owed by the University of Oxford. In January 2013 Jersey General Hospital settled most of the old debt attributed to them. The amount of total debt over 90 days old was 22.5% at the start of the year and has been brought down to 15.2% at the end of December.

### Income & Expenditure

10. **Non-Pay as % of Plan** - The Trust's level of activity over-performance is generating additional non-pay expenditure, which represents approximately one third of cost and are variable to a significant degree. The over-performance on elective, non-elective and out-patient activities would result in £5.0m additional non-pay spend on a proportionate basis. Expenditure on "pass through" drugs and devices was £3.6m greater than plan after the first nine months of the year.
11. **CIP Performance as % of Plan** - Performance against savings is monitored at Divisional monthly performance reviews. KPMG have been asked to strengthen the process for identifying and delivering CIP plans for 2013/14 and 2014/15.

### Quality

12. **Same sex accommodation breaches** - eight in total at the Horton in EAU due to significant increase in ED activity and capacity pressures. No breaches reported in December

**Workforce**

13. **Vacancy Rate** - The vacancy rate does not represent an absolute position of staffing levels as temporary workforce employed to part cover vacancy posts. Vacancies continue to be filled as quickly as possible. A new KPI has been introduced within recruitment setting a 13 week turnaround period to bring a candidate into post. A specialist recruitment service is being developed for areas/positions with difficulties in recruiting to vacant posts.

**Monitor Compliance Framework (Foundation Trust Indicators)**

14. The Trust is required to complete a monthly self-certification against Monitor's reporting standards giving external stakeholders a view of Trust performance. These predictions are based on historic and current data:

**Governance Risk Rating = 0 Green**

15. Non-compliance with requirements regarding access to healthcare for people with a learning disability. The Trust is implementing action plans to ensure compliance and currently delivers 3 of 6 standards and partially meets the remainder. Full compliance expected from December –awaiting update from Elaine Strachan-Hall.

**Finance Overall Risk Rating = 3 Green**

16. Planned surplus for the year is less than 1%

17. Liquidity - IBP assumes a DH loan to deliver an FRR of 3 at year end but this is not currently included in the forecast.

**Conclusions**

18. The Trust Board is asked to note the Integrated Performance Report for Month 9 showing headline performance and consider whether there is appropriate assurance regarding current and future performance.

**Paul Brennan, Director of Clinical Services**

**Sara Randall, Deputy Director of Clinical Services**

**February 2013**