

Trust Board Meeting: Wednesday 13 November 2013
TB2013.124

Title	Integrated Performance Report
--------------	--------------------------------------

Status	For discussion and to consider whether there is appropriate assurance regarding current and future performance.
History	The report provides a summary of the Trust's performance against a range of key performance indicators as agreed by the Trust Board.

Board Lead(s)	Mr Paul Brennan, Director of Clinical Services			
Key purpose	Strategy	Assurance	Policy	Performance

Integrated Performance Report Month 6

Executive Summary

1. Key Highlights on performance

- Patients spend $\geq 90\%$ of time on stroke unit, 15.8% above standard;
- There were zero Medication errors causing serious harm reported in September 2013;
- RTT Admitted and Non-admitted and Incomplete targets were achieved at Trust level;
- The 4 hour A/E standard was achieved for Q2 at 95.6% and in October at 95.8%;
- All Cancer standards were achieved in September except for 62 day wait to first treatment;
- Mixed Sex Accommodation, zero breaches reported for the first six months;
- The percentage of adult inpatients who have had a VTE risk assessment was 95.19%.

Areas of exception on performance

- There was one MRSA bacteraemia reported in September 2013, a total of 2 for the year. Both cases of MRSA have been assessed as unavoidable by Oxfordshire Clinical Commissioning Group;
- Clostridium Difficile reported cases were 5, for September 2013, 1 below the monthly limit ;
- The number of acquired and avoidable grade 3/4 pressure ulcers reported in August was 5, with a year to date total of 20;
- Delayed Transfers of Care is 7.7% above target in September which represents an increase of 0.4% for a third month in a row. The average number of delays in September was 148;
- RTT at speciality level was not achieved in five specialties for admitted, one specialty for non-admitted and four specialties for incompletes;
- Four patients waited over 52 weeks, three patients for orthopaedic surgery and one patient for cardiac surgery;
- Diagnostic waits over 6 weeks have now reduced to 202 patients compared to the position in April when 2,500 patients were waiting over 6 weeks. The maximum over 6 week wait threshold is 110;
- Staff Turnover rate has decreased slightly, 0.4% above target in September;

Key Standards – in month 6

18 Week RTT, A/E & Cancelled Operations

2. **A/E 95% of patients seen within 4 hours from arrival/trans/discharge:** The Trust achieved the 4 hour target for Q2 which was 95.6%. October has seen an increased in A/E attendances and delays to patients being discharged home
3. **18 Week Referral to Treatment [RTT] performance:** The Trust achieved all its Trust wide targets for September. For Admitted patients Ear Nose & Throat (ENT), Ophthalmology, Neurosurgery, Plastic Surgery and Gynaecology failed the standard at specialty level. In addition Orthopaedics failed the non-admitted standard. Orthopaedics, ENT, Ophthalmology and Plastic Surgery failed at specialty level for incompletes. Recovery plans are in place for all specialties. Four patients waited over 52 weeks, three patients for orthopaedic surgery, two have been treated and one redated for surgery on 27/11/13. The one patient for cardiac surgery had breached but has been treated.

4. **Diagnostic waits waiting 6 weeks or more:** 202 patients are waiting over 6 weeks. Further work is being progressed to reduce numbers in October.
5. **Cancer performance:** All cancers – 62 day wait for first treatment failed in September due to low numbers and patient choice.

Activity

6. **Delayed Transfers of Care** remain a major cause of concern for the Trust, with the in-month level at 11.2% against a target of 3.5% which represents an increase of 0.4% since July. However, this translates into a system-wide year to date average of 142 patient delays. At the week ending 27th October 2013 114 patients were delayed in the OUH, which represents an increase of 30 patients compared to the position at the beginning of October 2013.

Quality

7. **MRSA – bacteraemia** individual case has been reviewed and classified as unavoidable.

Finance

Balance Sheet

7. **Debtors > 90 Days as % of Total NHS** - Additional capacity has been brought in to review systems impacting on private patient debt with capacity diverted from the core finance team to support this action.
8. **EBITDA compared to Plan** - An in-depth assessment of the forecast year-end position was carried out as part of the Month 3 Divisional performance reviews and the Trust believes it can still meet its target although there are considerable risks which could materialize. A further in-depth review will be held as part of the Month 6 Divisional performance reviews.

Workforce

9. **Turnover Rate** – There has been an increase in the volume of leavers when compared to the same point in 2012. A Retention Group has been established to examine key causes of turnover and to assist in retention initiatives. Turnover will not reduce immediately and will take until the third quarter to reach trajectory.

Monitor Compliance Framework (Foundation Trust Indicators)

10. 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 for August = 1 Amber/Green

11. Cancer – 62 day wait for first treatment.

Finance Overall Risk Rating for August = 3 Green

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

14. Liquidity - Year to date includes modelled working capital. Forecast outturn also includes FT loan.

Recommendations

The Trust Board is asked to receive the Integrated Performance Report for Month 6.

Paul Brennan
Director of Clinical Services

Sara Randall
Deputy Director of Clinical Services

November 2013