

Trust Board Committee Meeting: Wednesday 14 January 2015
TB2015.06

Title	Integrated Performance Report – Month 8
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Status	For report
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 8

Executive Summary

1. Key Highlights on performance

- MRSA bacteraemia; no cases were reported in November.
- Patients spending $\geq 90\%$ of time on stroke unit, achieved 86% against a standard of 80% in November.
- Diagnostic waits over 6 weeks, 60 patients waited over 6 weeks at the end of November, achieving the standard of no more than 1% waiting over 6 weeks.
- 18 week RTT Incomplete standard was achieved in November.

2. Areas of exception on performance

- Ten same sex accommodation breaches reported for November.
- CDiff: 8 cases were reported in November.
- A/E 4 hour standard of 95%, outturn for November was 86.18%, Q3 position 89.09%.
- The percentage of adult inpatients that had a VTE risk assessment in Quarter 3 to date is 94.6%, which is marginally below the required standard of 95%.
- Delayed Transfers of Care as a percentage of occupied beds is at 11.17% for Quarter 3 against the standard of 3.5%.
- 18 week RTT Admitted performance was 82.79% against the 90% standard with Non-Admitted at 92.88% against a standard of 95% for November, which is in line with the agreed national 'managed fail' arrangement.
- 26 adult patients and two children waited 52 weeks or more for treatment in November.
- Staff turnover rate of 13.07%, 2.57% above the standard.
- Staff sickness absence rate was 3.61%, 0.61% above the standard.
- The vacancy rate was 6.73%, 1.73% above the standard.

3. Key Standards – in Month 8

3.1. 18 Week RTT, A/E & Cancelled Operations

- 3.1.1. **A/E 95% of patients seen within 4 hours from arrival/transfer/ discharge:** Performance at the end of November was 86.18% with performance of 89.09% for Q3 and year to date performance at 92%.
- 3.1.2. **18 Week Referral to Treatment [RTT] performance:** The RTT admitted and non-admitted standards failed in November in line with the national 'managed fail' arrangement, with performance at 82.79% and 92.88% against the 90% and 95% targets respectively. The incomplete standard was achieved at 92.56% against the 90% target.
- 3.1.3. **Twenty-eight reported 52 week breaches;** of which fourteen patients were admitted in November (nine plastic surgery patients, of whom two were children, one Ophthalmology, two spinal and two ophthalmology patients) and four had non-admitted clock stops (one Ophthalmology, one physiotherapy and two spinal patients). The remaining ten patients have admission dates (four in December and two in January) and four have follow-up appointments to review treatment options.

3.2. Activity

3.2.1. **Delayed Transfers of Care** continue to be a major cause of concern for the Trust with performance for Quarter 3 at 11.17% against a target of 3.5%. The monthly average for November was 134 delays across the system for Oxfordshire residents.

3.3. Cancer Waits

3.3.1. **Cancer waits:** 62 day urgent GP referral did not achieve the standard in October, which was 80.49% against the standard of 85%. All other seven standards were achieved as follows:

- 62 day screening achieved 100% against the standard of 90%
- 1st treatment within 1 month of diagnosis achieved 97.06% against the standard of 96%
- Subsequent treatment within 31 days for surgery achieved 95.88% against the standard of 94%
- Subsequent treatment within 31 days for drug achieved 100% against the standard of 98%
- Subsequent treatment within 31 days for radiotherapy achieved 98.7% against the standard of 94%
- 2 week wait achieved 95.04% against the standard of 93%
- 2 week wait breast achieved 96.3% against the standard of 93%.

4. Capacity

4.1. As part of the Winter Plan the Trust was planning to increase acute bed capacity as follows:

Bedford/Adams JR	4 beds
F Ward Horton	3 beds
OCE NOC	10 beds
John Warin CH	10 beds
7E	10 beds

4.2. The Bedford/Adams, F Ward and John Warin beds are operational.

4.3. The last few weeks have been extremely difficult with 41 beds closed due to safe staffing, and a decision was made to defer the opening of the additional capacity on 7E until the Trust had succeeded in re-opening the 41 established beds currently closed due to staffing difficulties.

4.4. In addition, confirmation has been received that the Tranche 2 Winter Funds (£560,000) will be allocated to the Trust to commission capacity in the private sector. Negotiations have been concluded with four nursing homes to procure 27 beds to open in December and January to release beds on the Post-Acute Unit at the JR. At 5th January 2015, 24 of these beds were in use with the remaining 3 due to be operational by 9th January 2015.

5. Workforce

5.1. Turnover Rates

5.1.1. Turnover increased from 12.79% in October to 13.07% in November and is 2.57% above the KPI target. Reducing staff turnover is a key area of focus. In addition to current recruitment activity, other interventions concerned with improving staff retention include:

- staff engagement and involvement initiatives;
- staff recognition and reward;
- mitigating high cost living;
- development and implementation of multi-professional Education Training Strategy;
- implementation of the Leadership and Talent Development Strategic framework;
- Creating and sustaining the right environment.

6. Recommendations

The Trust Board is asked to receive the Integrated Performance Report for Month 8.

Paul Brennan, Director of Clinical Services
Sara Randall, Deputy Director of Clinical Services

January 2015