

Trust Board Meeting in Public: Wednesday 10 May 2017

TB2017.48

<b>Title</b>	<b>Integrated Performance Report: Month 12</b>
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<b>Status</b>	For information.
<b>History</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>Board Lead(s)</b>	Mr Paul Brennan, Director of Clinical Services			
<b>Key purpose</b>	Strategy	Assurance	Policy	<b>Performance</b>

## Executive Summary

1. Cancer wait performance improved in February, with particularly notable improvement in 2 week waits to first appointment. The 62 day standard to first treatment from urgent GP referral was not met, but backlog reduction continues, particularly in Urology, and progress is being made towards meeting the standard in April.

2. Acute bed occupancy was above 95% during February and in early March, coinciding with lower weekly levels of 4 hour wait performance. Bed occupancy reduced below 95% from the middle of March and performance against the four hour wait standard for the month improved to 87.1%.

3. Delayed transfers of care in OUH beds have been at a high level since January.

4. Non-hospital care organised or provided by OUH through its Liaison Hub, Ambulatory Assessment Units, Acute Hospital at Home and Home Assessment and Reablement Team (HART) continues to make a significant contribution to the number of urgent care patients treated each week.

5. The 76,684 emergency admissions to OUH in 2016/17 represented growth of 7.87% on 2015/16, with Emergency Department attendances in the same period up by 3.85%.

6. Performance against the 92% Referral To Treatment (RTT) Incomplete standard improved to 90.37% at the end of March 2017, but the elective waiting list continued to grow. Nine people were waiting for treatment for over 52 weeks on Incomplete pathways at the end of March.

7. Work has continued with Divisions to plan for the additional activity required at specialty level to achieve and sustain the national RTT standard for patients on incomplete pathways.

8. As required by NHS Improvement, a trajectory for delivery of the 4 hour standard has been submitted as part of the Trust's 2017/18 plan. This has been stated to be subject to triggers which will be monitored by Oxfordshire's A&E Delivery Board. OUH plans to deliver the 62 day cancer standard throughout 2017/18. Its RTT trajectory will depend upon a revised activity plan for 2017/18 being agreed and delivered.

### 9. Recommendation

The Trust Board is asked to **receive** the Integrated Performance Report for Month 12.

## Integrated Performance Report: Month 11 (February 2017)

### 1. Key headlines on performance

- 1.1. In March 2017, 1,676 people waited over four hours in Oxford University Hospitals' Emergency Departments, down from 2,005 in February.
- 1.2. With 12,995 Emergency Department (ED) attendances in March, 87.1% of people attendances were seen and treated, admitted or discharged within 4 hours. This was 2.8% below the trajectory for the month.
- 1.3. Bed occupancy in the Trust's overnight beds, excluding maternity and well babies, was above 95% from the second week of January until the second week of March and remained above 90% until the second week of April.
- 1.4. The number of patients delayed in OUH beds awaiting transfer to care in another setting remained well above the level seen in December 2016.
- 1.5. 92.16% of OUH inpatients were recorded in March as having received harm-free care, compared to the reported level across England (for all settings delivering NHS care) of 94.1%.<sup>1</sup> OUH's recorded level in February had been 93.51%, compared to an England mean of 94.1%.
- 1.6. 123 of 13,200 patients requiring diagnostic tests or imaging in March had waited for over six weeks. The standard of no more than 1% of patients waiting for over six weeks was achieved in eleven months of 2016/17.
- 1.7. Two cases of Clostridium Difficile were reported in March and no cases of MRSA bacteraemia.
- 1.8. VTE performance was maintained at 97.1%, above the 95% standard.

### 2. Areas of exception on performance

#### **Cancer**

- 2.1. One of the eight national cancer waiting time standards was not met in February 2017, as shown in Table 1 overleaf. This represented improvement from January, notably in two week waits, with 59 of 1,619 patients with suspected cancer waiting more than two weeks for a first outpatient appointment in February compared to 171 of 1,565 in January.
  - 2.1.1. *62 day waits from urgent GP referral:* 42.5 of 196.5 patients for which OUH was accountable waited >62 days for first treatment in February. 19 of the February breaches were in the Urological tumour site group, six in Head & Neck, 4.5 in Lower GI and four in Gynaecological oncology.
  - 2.1.2. Breaches in the Urological tumour site group have shown significant improvement since mid-January. This follows the implementation of changes to the prostate cancer pathway described to the Board in January and implemented on 6 February.
  - 2.1.3. Responsibility for the Gynaecological tumour site group transferred on 1 April 2017 to the Children's and Women's Division and work is taking place to improve access to hysteroscopy, a contributory factor to 62 day waits.

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<sup>1</sup> NHS Safety Thermometer, published 12 April 2017 by NHS Digital.

2.1.4. Close scrutiny of 62 day wait performance continues with the objective of achieving and sustaining this national standard from April 2017.

Table 1: OUH performance against national cancer standards and England comparison

Standard		OUH performance						England
		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Feb-17
At least 93% of patients referred from a GP with suspected cancer will be seen within 2 weeks of referral.	<b>93.0%</b>	94.2%	<b>91.8%</b>	94.5%	<b>91.8%</b>	<b>89.1%</b>	96.4%	95.4%
At least 93% of patients referred from a GP with breast symptoms but not suspected cancer will be seen within 2 weeks of referral.	<b>93.0%</b>	96.3%	<b>91.7%</b>	<b>85.8%</b>	<b>83.3%</b>	94.7%	98.2%	98.3%
At least 96% of patients will receive first definitive treatment within 31 days of a decision to treat.	<b>96.0%</b>	<b>94%</b>	<b>92.3%</b>	<b>93.3%</b>	96.80%	<b>94.6%</b>	96.5%	97.7%
At least 85% of patients will receive their first treatment within 62 days of referral from a GP.	<b>85.0%</b>	<b>71.3%</b>	<b>68%</b>	<b>74.4%</b>	<b>77.7%</b>	<b>66.1%</b>	<b>78.4%</b>	<b>79.6%</b>
At least 94% of patients will receive subsequent treatment with surgery within 31 days of decision to treat.	<b>94.0%</b>	95.7%	98.1%	<b>89.9%</b>	95.7%	96%	96.2%	94.1%
At least 98% of patients will receive subsequent treatment with anti-cancer drug regimen within 31 days of decision to treat.	<b>98.0%</b>	100%	98.6%	100%	100%	98.8%	100%	99.3%
At least 94% of patients will receive subsequent radiotherapy within 31 days of a decision to treat.	<b>94.0%</b>	95.7%	97.8%	98.2%	98.5%	98.3%	99.5%	97.9%
At least 90% of patients will receive their first treatment within 62 days following referral from a screening service.	<b>90.0%</b>	100%	95.2%	100%	<b>88.9%</b>	98%	100%	90.1%

#### 4 hour waits

2.2. Bed occupancy was above 95% during February and in early March. This coincided with a drop in delivery of the 4 hour wait standard. Bed occupancy reduced below 95% from mid-March and performance improved.

Chart 1: Bed occupancy – OUH General & Acute beds (%)

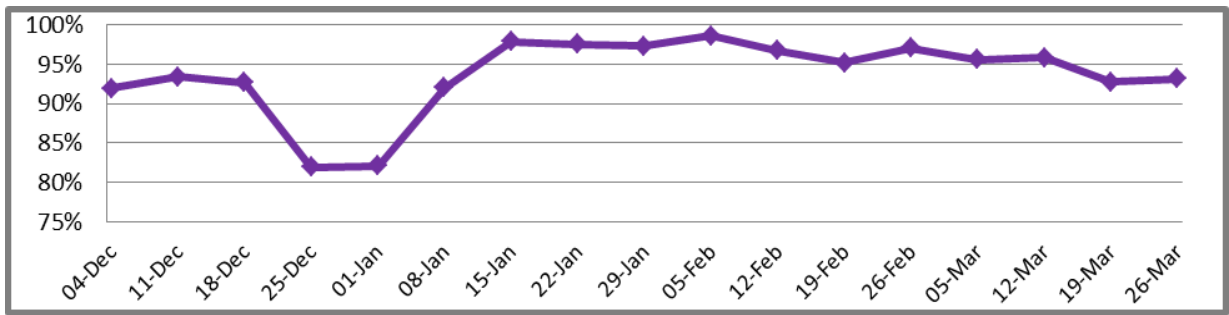
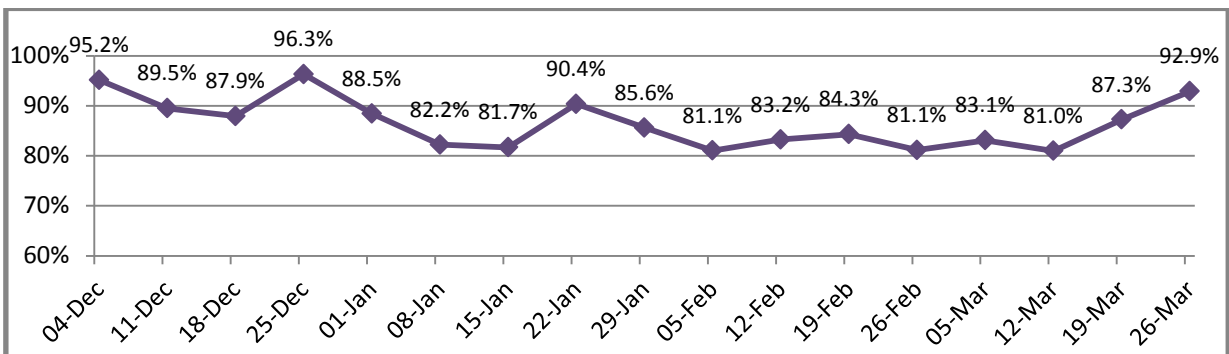


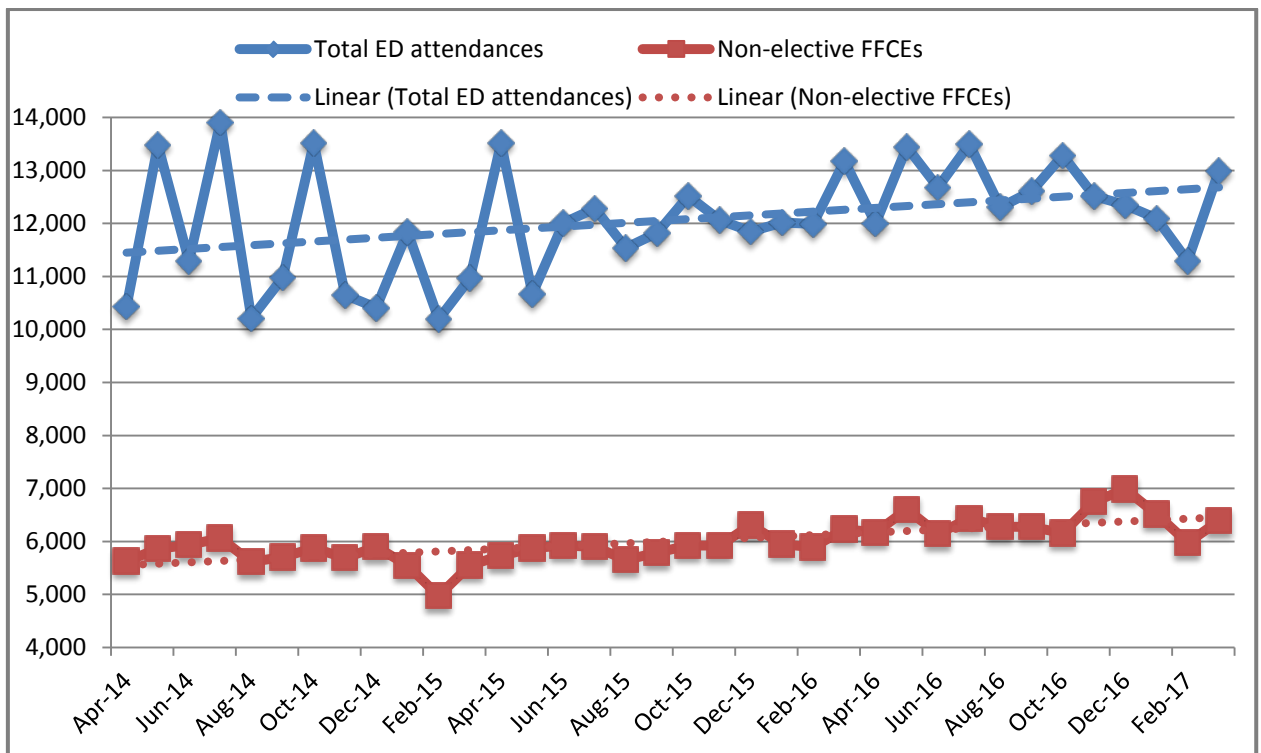
Chart 2: 4 hour wait performance



2.3. Relatively high numbers of Emergency Department attendances were seen in March.

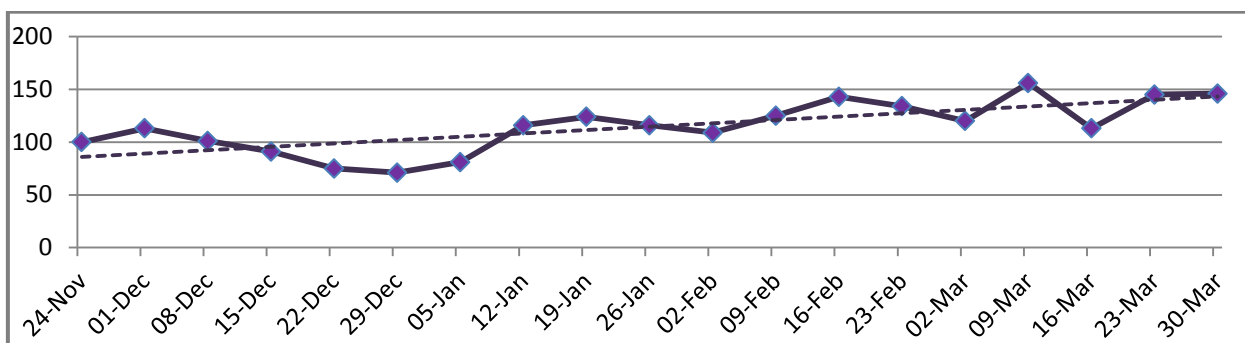
2.4. As previously seen, attendance numbers do not appear to correlate particularly closely with 4 hour wait performance. Bed occupancy does, though, and OUH bed capacity has been under pressure from continued growth in emergency admissions with the total of 76,684 in 2016/17 representing growth of 7.87% on 2015/16. In the same period, ED attendances were up 3.85%.

Chart 3: OUH ED attendances and emergency admissions, April 2014 - March 2017



2.5. Delayed transfers of care in OUH beds rose to above 100 on 12 January and reached a peak of 156 on 9 March.

Chart 4: Delayed Transfers of Care (Thursday snapshot, all commissioners, all OUH beds)



2.6. The number of bed days occupied in care homes supported by the Trust’s Liaison Hub rose to 701 in the first week of March, representing at least 100 patients of the 453 that week being provided with OUH care without being in a Trust bed. In that week, 132 were cared for in the Ambulatory Assessment Units at the Horton and JR, 32 through the Acute Hospital at Home and 189 through the Home Assessment and Reablement Team (HART).

2.7. OUH did not meet its 4 hour wait trajectory figure in January, February or March 2017.

**RTT**

2.8. 49,352 people were waiting for elective treatment by OUH at the end of March 2017, representing a continuation of the growth in the waiting list seen since June 2016. Of these, 4,751 had been waiting for over 18 weeks, 402 fewer than in February, reducing the backlog to its level in August 2016. Performance improved to 90.37% but did not meet the 92% standard as had been intended, with the number of clock stops during the month insufficient to achieve this.

2.9. At the end of March 2017, nine people were waiting for treatment for over 52 weeks on Incomplete pathways, eight in Gynaecology and one in Maxillofacial surgery.

2.10. The twenty specialties with the most >18 week waiters at the end of February are shown below. The five specialties with the most (Gynaecology, Orthopaedics, Maxillo-Facial Surgery, ENT and Ophthalmology) between them accounted for 57.8% of the Trust’s >18 week waits.

Chart 5: Patients waiting on Incomplete pathways, February 2017: twenty Treatment Functions with greatest number of >18 week waits

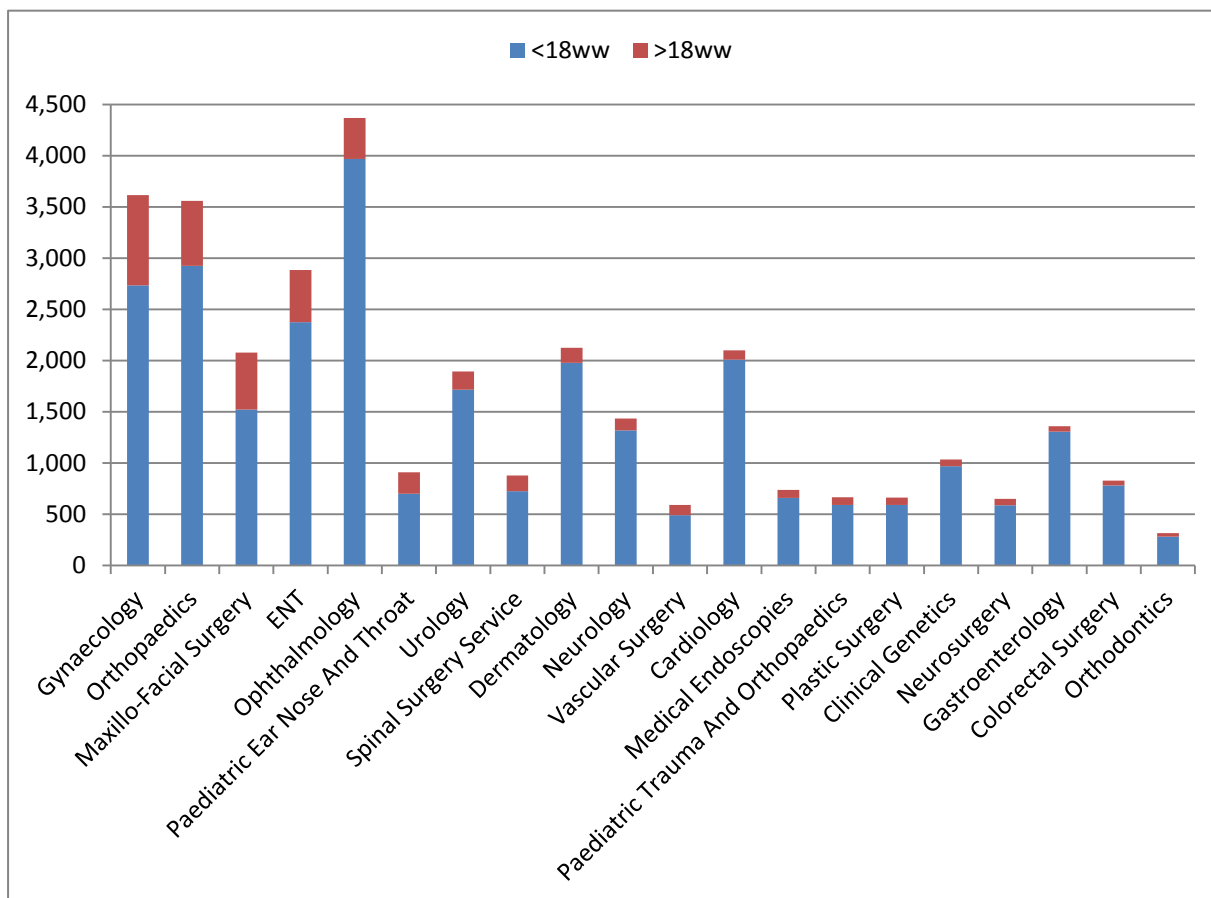


Table 2: Twenty Treatment Functions with greatest number of >18 week waits, February 2017

Treatment Function	<18ww	>18ww	Percentage <18 weeks
1. Gynaecology	2,735	882	67.75%
2. Orthopaedics	2,927	633	78.37%
3. Maxillo-Facial Surgery	1,523	556	63.49%
4. ENT	2,376	508	78.62%
5. Ophthalmology	3,968	402	89.87%
6. Paediatric Ear Nose And Throat	702	209	70.23%
7. Urology	1,717	179	89.57%
8. Spinal Surgery Service	727	153	78.95%
9. Dermatology	1,978	147	92.57%
10. Neurology	1,320	116	91.21%
11. Vascular Surgery	492	100	79.67%
12. Cardiology	2,011	89	95.57%
13. Medical Endoscopies	660	77	88.33%
14. Paediatric Trauma And Orthopaedics	591	75	87.31%
15. Plastic Surgery	592	73	87.67%
16. Clinical Genetics	969	66	93.19%
17. Neurosurgery	590	61	89.66%
18. Gastroenterology	1,307	52	96.02%

Treatment Function	<18ww	>18ww	Percentage <18 weeks
19. Colorectal Surgery	783	47	94.00%
20. Orthodontics	282	34	87.94%

### ***Demand and Capacity planning***

- 2.11. Following a process described to the Board in January, modelling has taken place at specialty level of the numbers of day case or inpatient admissions and first outpatient attendances required to achieve a sustainable waiting list size (consistent with delivery of the 92% RTT Incomplete standard) as recommended by NHS Improvement's Elective Care Intensive Support Team (IST).
- 2.12. Discussion having taken place with and within each clinically-led Division and between Divisions, assumptions have been tested and the IST's demand model used to generate the numbers of outpatients, inpatients and day cases who will need to be treated beyond the Trust's existing activity plan.
- 2.13. The demand modelling and assumptions have been shared with NHS Improvement and lead commissioners and indicate that some 66% of the identified extra outpatient activity and 63% of the admitted (day case or inpatient) activity will be needed on a recurrent basis to address the gap in the 'run rate' between demand and activity, with the remaining proportion required non-recurrently to address the backlog of long waits that has built up.
- 2.14. Ongoing dialogue with commissioners about affordability will inform Board consideration of proposed activity to reduce the waiting list to a size consistent with delivering the 92% RTT Incomplete standard.

### **3. Access standards: performance trajectories**

*2016/17*

- 3.1. Performance against 2016/17 trajectories is shown in Table 3 overleaf, with the trajectories in blue-shaded boxes.



Table 3: Operational performance trajectories for 2016/17 and performance to date

Area	Metric	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
	52wk wait Trajectory	22	50	50	50	26	26	24	22	18	15	10	6
	52wk waits actual	16	20	21	15	9	15	5	4	10	15	6	9
<b>RTT Incomplete pathways</b>	Total Patients Waiting	39,331	39,331	39,331	39,331	39,331	39,331	39,331	39,331	39,331	39,331	39,331	39,331
	Actual	43,521	44,764	44,636	44,818	46,268	46,587	47,960	47,694	46,566	46,787	47,668	49,352
	> 18 Week Waits	3,540	3,540	3,146	3,146	3,146	3,146	3,146	3,146	3,146	3,146	3,146	3,146
	Actual	3,787	3,789	3,966	4,478	4,811	5,059	5,058	4,985	5,297	5,174	5,153	4,751
	Performance	91.0%	91.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%
	Actual	91.30%	91.54%	91.11%	90.01%	89.60%	89.14%	89.45%	89.55%	88.62%	88.94%	89.19%	90.37%
<b>A&amp;E 4 hour waits</b>	Total Patients Seen	12,508	12,508	12,508	12,508	12,508	12,508	12,508	12,508	12,508	12,508	12,508	12,508
	Actual	12,000	13,442	12,680	13,496	12,308	12,610	13,286	12,519	12,350	12,093	11,294	12,995
	>4 Hour Waits	2,502	1,876	1,501	625	625	625	775	1,063	1,138	1,363	1,088	1,263
	Actual	1,494	1,747	1,501	1,673	1,649	2,169	3,469	725	1,105	1,833	2,005	1,676
	Performance	80.0%	85.0%	88.0%	95.0%	95.0%	95.0%	93.8%	91.5%	90.9%	89.1%	91.3%	89.9%
	Actual	87.55%	87.00%	88.16%	87.60%	86.60%	82.80%	73.89%	94.21%	91.05%	84.84%	82.25%	87.10%
		Q1:		84.3%		Q2:	95.0%		Q3:	92.1%		Q4:	90.3%
			87.6%			85.7%			86.1%			84.8%	
<b>Cancer 62 day waits from urgent GP referral</b>	Total Patients Seen	194	194	194	194	194	194	194	194	194	194	194	194
	Actual	174.5	164.0	179.0	170.5	188.5	171.0	147.0	180.5	177.5	193.0	196.5	
	>62 Days Wait	29	29	29	29	29	29	29	29	29	29	29	29
	Actual	40.5	30.5	52.5	46.0	43.5	49.0	47.0	46.5	39.5	65.5	42.5	
	Performance	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%
	Actual	76.79%	81.40%	70.67%	73.02%	76.92%	71.35%	68.03%	74.24%	77.75%	66.06%	78.37%	
		Q1:		85.0%		Q2:	85.0%		Q3:	85.0%		Q4:	85.0%
	Q1:		76.14%			73.87%			73.66%				

Area	Metric	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
Diagnostic waits	Total Patients Seen	11,636	11,636	11,636	11,636	11,636	11,636	11,636	11,636	11,636	11,636	11,636	11,636
	Actual	12,047	11,619	11,542	11,268	11,030	11,474	11,789	11,795	11,338	12,100	12,764	13,200
	Performance	0.99%	0.99%	0.99%	0.99%	0.99%	0.99%	0.99%	0.99%	0.99%	0.99%	0.99%	0.99%
	Actual	0.93%	0.96%	1.00%	0.95%	0.99%	0.95%	0.92%	0.96%	1.20%	0.98%	0.78%	0.93%
	>6 Week Waits	115	115	115	115	115	115	115	115	115	115	115	115
	Actual	112	112	115	107	109	109	109	113	136	119	99	123

**2017/18**

- 3.2. As part of the activity, financial and workforce plans submitted to NHS Improvement on 30 March 2017, OUH was expected to submit trajectories for performance during 2017/18 against the 4 hour, cancer 62 day and RTT Incomplete standards.
- 3.3. In accordance with national requirements set by NHS Improvement, a trajectory was submitted for 4 hour waits of 90% for each month of the year apart from March 2018, which was set at 95%:

*Table 4: 4 hour wait trajectory submitted as part of 2017/18 plan*

Metric	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
>4 hour waits	1,200	1,344	1,268	1,349	1,230	1,261	1,328	1,251	1,235	1,209	1,129	646
Total attendances	12,000	13,442	12,680	13,496	12,308	12,610	13,286	12,519	12,350	12,093	11,294	12,925
Performance	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	95.0%

- 3.4. With this, OUH explained that, as previously discussed with NHS Improvement and its lead commissioners, delivering this level of performance would be subject to triggers previously discussed by the Board, as follows:

*4 hour wait triggers*

- ED attendances are not above 2016/17 outturn on a month-by-month basis
- Emergency admissions are not above 2016/17 outturn on a month-by-month basis
- Delayed Transfers of Care in OUH beds do not exceed 60 in any week
- Repatriations within 24 hours of referral for inpatients/48hrs for ITU transfers (excluding OPEL4 days)
- Saturday and Sunday discharges are at least 75% of the Monday-Friday average
- No delays to discharges due to access to SCAS ambulance transport
- No discharges to community beds take beyond 48 hours from referral
- Social Services transfers to home care (excluding HART, interim placements and permanent care/nursing home placements) and Continuing Health Care take place within 48 hours
- Trusted Assessor model is adopted system-wide

- 3.5. OUH has also clarified that this level of performance is dependent on any patients streamed to any new GP streaming service during the year remaining in OUH's denominator for the four hour standard.

- 3.6. The trajectory for 62 day cancer waits was for achievement of the 85% standard throughout 2017/18. The small numbers involved mean some variation in the trajectory figures as follows:

*Table 5: Trajectory for 62 day waits from urgent GP referral to first cancer treatment, submitted as part of 2017/18 plan*

Metric	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
>62 days	29	26	26	26	28	25	22	29	32	31	26	27
Total seen	198	176	173	173	190	170	151	194	214	208	176	182
Performance	85.4%	85.2%	85.0%	85.0%	85.3%	85.3%	85.4%	85.1%	85.0%	85.1%	85.2%	85.2%

3.7. With elective care activity known to be out of alignment with demand, the following trajectory was submitted for RTT Incomplete 18 week waits. This reflects existing commissioned and planned activity and a continuation of existing referral trends. It is anticipated that this will be amended once a revised plan for activity in 2017/18 is agreed.

Table 6: Trajectory for 2017/18 RTT Incomplete 18 week waits, sent to NHS Improvement April 2017

Metric	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Total Number Waiting	49,340	49,810	50,280	50,750	51,220	51,690	52,160	52,630	53,100
>18 weeks	6,019	6,251	6,486	6,724	6,966	7,211	7,459	7,710	7,965
<18 weeks	43,321	43,559	43,794	44,026	44,254	44,479	44,701	44,920	45,135
<b>Performance</b>	87.80%	87.45%	87.10%	86.75%	86.40%	86.05%	85.70%	85.35%	85.00%

Metric	Jan-18	Feb-18	Mar-18
Total Number Waiting	53,570	54,040	54,510
>18 weeks	8,223	8,484	8,749
<18 weeks	45,347	45,556	45,761
<b>Performance</b>	84.65%	84.30%	83.95%

#### 4. Workforce

- 4.1. The Trust's Vacancy rate reduced to 6.32% from the 6.58% seen in January. 727 of OUH's 11,503 posts were vacant at the end of March.
- 4.2. The turnover rate reduced slightly to 14.79%, with 1,387 posts seeing turnover in the 12 months to March 2017.
- 4.3. Sickness and absence remained ahead of the Trust's target of 3%, but the twelve-month rolling average in March (at 3.18%) continued the reduction seen since October 2015.
- 4.4. Expenditure on temporary staffing rose to 8.45% of the Trust's pay bill in March, up from 7.01% in January and accounting for £4.17m of expenditure. Of this, £2.68m was spent on Bank staffing or overtime. Both this and Agency spend (of £1.49m) were above plan in the month. The Trust ended the year having spent £2,798m (15.46%) less than the ceiling set for Agency expenditure. Bank and overtime spend was £4.61m above plan for the year, with £2.1m of this in Quarter 4.

#### 5. Additional information

- 5.1. Quality, Financial, Operational and Workforce indicators are at Appendix 1.

#### 6. Recommendation

- 6.1. The Board is asked to **receive** the Integrated Performance Report for Month 12.

**Paul Brennan**

**Director of Clinical Services**

**May 2017**

Report prepared by: Jonathan Horbury

## Appendix 1

## Quality, Operational and Workforce indicators

**Data Quality Indicator**

The data quality rating has 2 components. The first component is a 5 point rating which assesses the level and nature of assurance that is available in relation to a specific set of data. The levels are described in the box below.

Rating	Required Evidence
1	Standard operating procedures and data definitions are in place.
2	As 1 plus: Staff recording the data have been appropriately trained.
3	As 2 plus: The department/service has undertaken its own audit.
4	As 2 plus: A corporate audit has been undertaken.
5	As 2 plus: An independent audit has been undertaken (e.g. by the Trust's internal or external auditors).

The second component of the overall rating is a traffic-light rating to include the level of data quality found through any auditing / benchmarking as below

Rating	Data Quality
<b>Green</b>	Satisfactory
<b>Amber</b>	Data can be relied upon but minor areas for improvement identified.
<b>Red</b>	Unsatisfactory/significant areas for improvement identified.

Quality		Standard	Current Data Period	Period Actual	YTD	Data Quality
Outcomes	Summary Hospital-level Mortality Indicator**		Sep-16	<b>0.94</b>		<b>5</b>
	Total # of deliveries		Mar-17	<b>658</b>	<b>8058</b>	<b>5</b>
	Proportion of normal deliveries	<b>62%</b>	Mar-17	<b>62.61%</b>	<b>62.7%</b>	<b>5</b>
	Proportion of C-section deliveries	<b>23%</b>	Mar-17	<b>22.34%</b>	<b>22.9%</b>	<b>5</b>
	Proportion of assisted deliveries	<b>15%</b>	Mar-17	<b>15.35%</b>	<b>14.4%</b>	<b>5</b>
	Maternal deaths		Mar-17	<b>0</b>	<b>0</b>	<b>4</b>
	30 day emergency readmission	<b>0%</b>	Mar-17	<b>3.06%</b>	<b>3.1%</b>	<b>5</b>
	Medication reconciliation completed within 24 hours of admission	<b>80%</b>	Mar-17	<b>74.71%</b>	<b>70.5%</b>	<b>4</b>
	Medication errors causing serious harm	<b>0</b>	Mar-17	<b>0</b>	<b>0</b>	<b>5</b>
	Number of CAS alerts that were closed having breached during the month	<b>0</b>	Mar-17	<b>0</b>	<b>0</b>	<b>5</b>
	Dementia CQUIN patients admitted who have had a dementia screen	<b>0%</b>	Feb-17	<b>60.99%</b>	<b>62%</b>	<b>4</b>
	Dementia diagnostic assessment and investigation	<b>0%</b>	Feb-17	<b>100%</b>	<b>87.1%</b>	<b>4</b>
	Dementia :Referral for specialist diagnosis	<b>0%</b>	Feb-17	<b>100%</b>	<b>100%</b>	<b>4</b>
Patient Experience	Patient Satisfaction -Response rate (friends & family -Inpatients)		Mar-17	<b>16.31%</b>	<b>17.3%</b>	<b>2</b>
	Patient Satisfaction- Response rate (friends & family -Maternity)		Mar-17	<b>10.07%</b>	<b>12.6%</b>	<b>2</b>
	Patient Satisfaction- Response rate (friends & family -ED)		Mar-17	<b>22.37%</b>	<b>22.6%</b>	<b>2</b>
	Friends & Family test % not likely to recommend - ED		Mar-17	<b>6.66%</b>	<b>9.3%</b>	<b>2</b>
	Friends & Family test % not likely to recommend – Inpatients		Mar-17	<b>1.8%</b>	<b>1.6%</b>	<b>2</b>
	Friends & Family test % not likely to recommend - Maternity		Mar-17	<b>0%</b>	<b>0.6%</b>	<b>2</b>

Quality		Standard	Current Data Period	Period Actual	YTD	Data Quality
	Friends & Family test % likely to recommend - ED		Mar-17	87.73%	84.8%	2
	Friends & Family test % likely to recommend – Inpatients		Mar-17	95.38%	96.1%	2
	Friends & Family test % likely to recommend - Maternity		Mar-17	97.42%	96.2%	2
Safety	Number of Serious Incidents Requiring Investigation		Mar-17	7	112	5
	% patients receiving Harm Free Care (free from pressure sores, falls, new VTE and UTIs in patients with a catheter)		Mar-17	92.16%	92.9%	3
	Never Events		Mar-17	0	2	5
	Cleaning Scores- % of inpatient areas with initial score >92%		Mar-17	44.19%	36.5%	5
	% of incidents associated with moderate harm or greater		Mar-17	0.5%	0.6%	5
	# newly acquired pressure ulcers (category 2,3 and 4)		Feb-17	86	871	5

Operational		Standard	Current Data Period	Period Actual	YTD	Data Quality
	RTT: Incomplete % within 18 weeks	92%	Mar-17	90.37%	89.9%	4
	RTT: Admitted % within 18 weeks	90%	Mar-17	72.81%	77.9%	4
	RTT: Non-admitted % within 18 weeks	95%	Mar-17	83.94%	86.8%	4
	>52 week RTT waits: Incomplete	0	Mar-17	9	145	4
	>52 week RTT waits: Admitted	0	Mar-17	8	79	4
	>52 week RTT waits: Non-admitted	0	Mar-17	7	56	4
	% Diagnostic waits of 6 weeks or more	1%	Mar-17	0.93%	1%	3
	Last minute cancellations - % of all elective admissions	0.5%	Mar-17	0.75%	0.5%	3
	% patients not rebooked within 28 days	0%	Mar-17	5.41%	6.1%	5
	Urgent cancellations	0	Mar-17	11	278	5
	Urgent cancellations - second time	0	Mar-17	0	0	5
	Time to surgery (% patients having their operation within the time specified according to their clinical categorisation)	0%	Feb-17	93.84%	96%	3
	# of Emergency Department attendances		Mar-17	12,995	151,073	5
	% ≤ 4 hours from arrival to admission, transfer or discharge	95%	Feb-17	82.25%	86%	5
	Delayed transfers of care: # (snapshot)*	0	Mar-17	146	1,233	4
	Delayed transfers of care as % of occupied beds*	3.5%	Mar-17	12.59%	9%	5
	Theatre Utilisation - Elective	80%	Mar-17	73.8%	74.7%	4
	Theatre Utilisation – Emergency	70%	Mar-17	51.57%	54.2%	4
	Theatre Utilisation – Total	75%	Mar-17	68.34%	69.7%	4
	Results Endorsed within 7 days	NA	Mar-17	78.39%	75.4%	4
	Contract Variations Open	NA	Mar-17	2		
	Contract Notices Open	NA	Mar-17	2		
	% of discharge summaries sent to GP within 24hrs	98%	Mar-17	80.69%	77.4%	4

Operational	Standard	Current Data Period	Period Actual	YTD	Data Quality
%patients first cancer treatment <62 days of urgent GP referral	85%	Feb-17	78.43%	74.1%	4
%patients first cancer treatment <62 days of screening referral	90%	Feb-17	100%	95.3%	4
%patients first treatment <1 month of cancer diagnosis	96%	Feb-17	96.51%	94.7%	4
%patients subsequent cancer treatment <31days - surgery	94%	Feb-17	96.2%	95.8%	4
%patients subsequent cancer treatment <31days - drugs	98%	Feb-17	100%	99.8%	4
%patients subsequent treatment <31days – radiotherapy	94%	Feb-17	99.49%	95.2%	4
% <2 week wait for first appointment from urgent GP referral for suspected cancer	93%	Feb-17	96.35%	93.1%	5
% <2 week wait from urgent referral with breast symptoms	93%	Feb-17	98.23%	91.6%	5
Same sex accommodation breaches	0	Mar-17	0	18	5
% stroke patients spending ≥ 90% of time on stroke unit	85%	Mar-17	94%	92.9%	5
Hospital-acquired MRSA bacteraemia	0	Mar-17	0	6	5
Clostridium difficile incidence	<5	Mar-17	2	53	5
% adult inpatients assessed for VTE risk	95%	Feb-17	97.1%	96.4%	5

Workforce	Plan	Current Data Period	Period Actual	YTD	Data Quality
Sickness absence**	3.3%	Mar-17	3.18%		5
Turnover rate	12.65%	Mar-17	14.79%		5
Vacancy rate	4.5%	Mar-17	6.32%		5
Substantive staff in post	10,953.6	Mar-17	11,010.6		4
Bank and overtime expenditure as % of pay	3.67%	Mar-17	5.41%		4
Agency expenditure as % of pay	2.78%	Mar-17	3.02%		5

Finance		Plan YTD	Current Data Period	YTD
Capital	Capital Service Cover metric	2.656	Mar-17	1.805
	Capital Service rating	1		2
Liquidity	Working capital balance (£m)	3.645	Mar-17	(31.971)
	Operating expenses within EBITDA, total (£m)	(913.404)	Mar-17	(938.562)
	Liquidity metric (Days)	1.4	Mar-17	(12.3)
	Liquidity rating	1		3
Income and Expenditure	I&E Surplus Margin (%)	3.62%	Mar-17	0.36%
	I&E Margin rating	1		2
	I&E Variance from plan rating			4
Agency staffing	Total expenditure on Agency staff	(18.098)	Mar-17	(15.305)
	Agency metric	1		1
Use of Resources	Use of Resources Rating			3