

Cover Sheet

Trust Board Meeting in Public: Wednesday 15 January 2025

TB2025.13

Title: Urgent and Emergency Care Oxfordshire System Dashboard

Status: For Discussion

History: N/A

Board Lead: Chief Operating Officer

Author: Chief Operating Officer

Confidential: No

Key Purpose: Assurance and Performance

Summary

- 1. The Urgent and Emergency Care (UEC) Oxfordshire System Dashboard illustrates, in a consolidated format, the relative performance of 75 indicators relating to Urgent and Emergency Care across the areas of:
 - o Admissions avoidance schemes
 - Ambulance arrivals and turnaround times
 - In-hospital performance
 - Discharges performance
 - o Emergency Department (ED) performance
- 2. The formatting of the report uses a heat map-based approach to highlight performance for each month relative to performance within the time series. For example, ED performance that is red will be at a level when it is lower than average, and green when above average, within the time period. The heat-map methodology, therefore, does not indicate whether any indicator is achieving target or at a level that meets expectations with respect to quality, efficiency or productivity. The purpose is to highlight visually how clusters of indicators change (improving or deteriorating) relative to other indicators. From this view the dashboard shows the relative importance of the following indicators on ED performance:
 - Referrals into the Urgent Community Response (UCR), HomeFirst, CH&Hub, City and North, South/ out of County
 - o Minor Injuries Unit (MIU) and First Aid Units (FAU) referrals
 - Acute Same Day Emergency care (SDEC)
 - Community SDEC
 - Medically Optimised For Discharge (MOFD) total and Average Length of Stay (ALOS)
 - Total discharges from OUH Inpatient wards on pathway 0 and 1
 - Discharge to Assess (D2A)/ Reablement pathways
- 3. The above list does not highlight statistical significance but may be used to direct further attention to some of the more detailed reports for each area within the accompanying productivity report, as well as other reports produced within the UEC system covering these areas.
- 4. Information is now available for the Primary Care indicators and this is included. Additionally, further forms of analysis using this dashboard are being considered, including statistical significance tests for changes, as well as setting targets for each indicator.
- 5. The report will be updated monthly and shared at the Oxfordshire UEC Board as well as in other performance forums. Following the meeting held in October, it has

been agreed that the dashboard will now form part of the UEC Sitrep pack presented and discussed at the Oxfordshire UEC Board.

Current Status and Trends:

- 6. There has been a gradual decline in UCR (Urgent Community Response) activity for many months, which has continued.
- 7. Out of hours and community services have seen an increase in activity, with a focus on maximising capacity
- 8. A sustainable increase in the number of people medically optimized for discharge (MOFD) has been observed, linked to the increased referrals and attendances in ED
- 9. Attendances in ED have increased, comparatively to last year.

Key Focus Areas:

- 10. Emphasis on addressing the root causes of increased ED attendances and improving admission avoidance strategies.
- 11. Integration of UCR with out-of-hours services over weekends to enhance productivity and capacity.

Recommendations

- 12. The Trust Board is asked to:
 - Review the UEC Performance Dashboard and, noting that this will continued to be developed, and that this will be used to provide assurance on system performance in connection with other detailed reports produced or with accompanying narrative.
 - Note that the Oxfordshire UEC Board review the dashboard monthly as part of the system sitrep report.

System area	Indicator	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24
A&E Performance	A&E 4hr performance (all attendance types)	57.9%	53.6%	64.4%	60.5%	64.7%	70.6%	70.3%	66.9%	68.5%	69.1%	63.7%	61.7%	57.9%	59.8%	63.7%	65.0%	72.2%	71.4%	74.9%	74.0%	78.7%	76.1%	73.1%	69.0%	68.8%
	A&E 4hr performance - Type 1	50.4%	46.1%	57.4%	53.3%	57.7%	64.8%	64.9%	61.0%	62.5%	63.0%	57.5%	55.0%	50.8%	53.2%	57.1%	58.7%	67.3%	66.1%	67.1%	66.6%	72.1%	69.1%	65.3%	59.9%	59.6%
	A&E 4hr performance - Day (8am to 5pm)	60.4%	57.7%	67.1%	62.3%	67.1%	73.8%	75.0%	72.3%	73.4%	72.7%	69.3%	66.5%	62.8%	63.2%	68.5%	70.3%	76.3%	76.3%	79.1%	79.0%	81.6%	80.2%	76.8%	73.2%	72.3%
	A&E 4hr performance - Night (5pm to 8am)	44.6%	40.1%	50.6%	47.6%	52.2%	59.1%	58.2%	53.9%	55.3%	57.3%	49.3%	47.4%	42.1%	47.3%	49.4%	50.6%	61.2%	58.9%	58.8%	57.7%	65.3%	60.9%	56.5%	49.9%	49.7%
	A&E 4hr performance - Weekdays	50.0%	47.5%	58.4%	52.6%	58.8%	64.9%	66.0%	63.2%	61.3%	62.9%	57.7%	56.6%	50.8%	52.7%	57.3%	58.7%	65.8%	66.5%	67.6%	66.1%	71.7%	69.3%	64.9%	60.1%	59.3%
	A&E 4hr performance - Weekends	59.5%	51.3%	60.5%	61.0%	62.4%	69.5%	67.6%	60.6%	70.2%	69.9%	62.9%	57.2%	56.8%	60.3%	63.6%	64.8%	75.4%	69.7%	71.1%	71.8%	77.3%	72.3%	70.8%	65.4%	65.6%
	A&E 12hr performance (all attendance types)	92.0%	89.7%	93.0%	93.1%	93.6%	96.8%	97.0%	96.6%	97.0%	96.4%	95.0%	94.2%	93.0%	92.7%	93.2%	93.7%	95.0%	95.8%	96.2%	96.7%	97.2%	95.7%	95.8%	95.3%	94.6%
	A&E 12hr trolley waits (DTA to admission)	1	3	3	2	0	4	0	0	0	0	0	0	0	3	0	1	1	0	1	0	0	0	0	0	2
Primary care	GP: Number of face-to-face GP appointments																									
1 month in arrears	(Oxfordshire)	251,104	201,377	224,078	207,590	236,927	188,803	215,357	221,596	204,375	208,766	230,364	275,333	242,564	192,010	246,721	231,534	225,726	228,351	228,052	211,312	230,380	203,888	225,115	314,516	
	GP: Number of telephone GP appointments	163,039	146,088	158,860	146,323	162,653	122,420	137,464	144,433	134,177	132,445	131,136	142,552	142,689	118,213	149,143	138,079	133,200	131,294	129,877	121,373	125,913	114,537	119,303	130,906	
	GP: Total number of GP appointments	417,363	350,608	386,859	357,152	403,211	314,276	357,468	374,948	349,052	352,090	373,285	431,775	400,313	322,554	414,614	385,540	375,839	376,346	374,314	348,223	373,198	334,449	363,531	469,188	
	GP: Number of GP hours lost to closure						119:35	15:11	138:52	0:00	0:00	0:00	0:00	11:46	39:39	18:41	40:53	13:01	9:23	2:57	19:49	86:02	398:58	601:01	793:24	1181:12
Admission avoidance	Virtual Wards new admissions	279	431	328	406	576	344	357	315	248	312	350	352	346	507	620	454	389	422	437	448	466	384	419	445	344
	Hospital @ Home - beddays consumed	2,146	1,837	2,210	2,429	3,124	1,821	2,029	2,093	1,806	1,768	1,848	2,519	2,275	3,577	3,748	2,802	2,732	2,251	2,583	3450	2861	2834	2933	3040	2508
	CARe (crisis care) team - Community pickups	52	75	64	64	61	86	126	137	93	104	126	140	121	133	133	126	113	91	123	111		105	104	114	112
	CARe (crisis care) team - Bed based pickups	104	131	99	95	77	54	32	30	26	22	13	19	29	32	32	57	47	50	49	36		49		26	30
	Patients on Home First/ reablement pathway	21	29	35	27	42	50	46	60	46	47	44	57	41	58	46	56	67	52	55	63		65	72	94	76
	Referrals into Urgent Community Response						667	717	717	658	676	743	765	703	804	805	616	805	825	782	712		707	785	710	443
	D2A referrals from bed-based settings (Home	226	247	238	248	229	190	237	214	224	248	190	200	227	226	573	360	337	348	466	389	369	415		469	395
	Referrals into CH&Hub team	93	78	82	37	51	45	41	41	44	50	41	46	32	49	95	97	93	93	91	74		85	95	74	18
	Referrals into City	221	194	185	89	117	100	103	115	100	91	90	88	115	125	301	257	212	226	245	208	269	225	232	238	229
	Referrals into North	32	51	34	31	36	27	27	31	30	17	15	22	28	33	52	52	53	61	64	45	61	70		58	54
	Referrals into South/Out of County	42	37	50	20	27	19	29	21	14	22	20	19	27	16	52	41	56	41	42	30		51		39	37
	Fiennes UCC attendances	2,207	3,261	3,425	3,272	3,849	1,608	1,332	1,625	1,555	1,501	1,568	1,659	1,720	1,628	1,542	1,419	1,728	1,896	1,824	1501		1421	1524	1964	1983
	City UCC referrals			85	306	706	552	836	867	840	750	1,018	1,305	1,117	1,139	1,340	1,337	1,360	1,229	1,259	1335	1622	1230	1289	1683	1882
	MIU and FAU referrals: Total	3,852	3,215	3,850	3,687	4,133	3,999	4,868	5,172	4,644	4,523	4,709	4,500	4,208	3,672	3,969	3,973	4,645	4,389	5,137	4407	4817	4647	4627	4517	4184
	MIU and FAU referrals: Abingdon	1,777	1,438	1,741	1,667	1,851	1,766	2,147	2,330	2,111	2,000	2,181	2,105	1,912	1,630	1,784	1,828	2,067	1,954	2,278	1938	2180	1997	2115	2129	1936
	MIU and FAU referrals: Henley	805	645	759	723	842	792	946	1,035	968	938	875	969	870	743	830	748	958	894	1,040	924	997	1024	967	903	827
	MIU and FAU referrals: Witney	1,157	1,007	1,225	1,199	1,351	1,279	1,612	1,614	1,417	1,469	1,516	1,325	1,318	1,229	1,267	1,288	1,490	1,395	1,612	1375	1517	1458	1416	1341	1326
	MIU and FAU referrals: Bicester	113	125	125	98	89	162	163	193	148	116	137	101	108	70	88	109	130	146	207	170	123	168	129	144	95
	Acute SDEC: total	2,861	2,839	2,798	2,628	2,910	2,485	2,956	2,808	2,754	2,905	3,009	3,088	3,092	2,902	3,149	2,956	3,070	2,981	3,221	2,971	3,105	2,929	3,026	3,397	2,966
	Acute SDEC: H-WD Rowan AU	350	376	386	347	426	355	490	430	414	416	448	444	452	419	470	452	493	496	548	472	516	449	470	578	512
	Acute SDEC: J-WD AAU	1,686	1,766	1,569	1,471	1,605	1,347	1,580	1,449	1,455	1,508	1,610	1,707	1,765	1,650	1,739	1,597	1,656	1,624	1,712	1604		1583	1603	1808	1559
	Acute SDEC: J-WD SEU triage	825	697	843	810	879	783	886	929	885	981	951	937	875	833	940	907	921	861	961	895	971	897	953	1011	895
	Acute SDEC Specialty: C-WD OncHTriage	199	229	222	196	206	196	228	216	209	233	220	232	240	220	246	206	212	192	208	213		235	199	233	229
	Acute SDEC Specialty: C-WD UrolTriage	196	196	188	166	206	184	232	187	214	217	252	240	226	193	226	189	215	211	229	205	237	277	203	233	256
	Acute SDEC Specialty: C-WD GPRU	100	84	86	83	110	112	101	93	79	76	98	85	78	88	87	87	85	103	76	89	-	99		81	110
	Acute SDEC Specialty: J-WD Gyn Triage	309	286	333	339	356	314	306	303	344	325	307	325	316	320	359	326	386	344	320	312	380	336	326	296	266
	Acute SDEC Specialty: J-WD Maty AU	420	432	403	361	369	352	337	387	408	396	370	453	355	371	366	374	392	357	400	371		353	388	431	378
	Community SDEC: total									218	255	252	272	274	-	311	323	286	303	217	263	277	234	-	289	328
	Community SDEC: Abingdon EMU									81	104	113	114	118		140	128	124	108	87		-	89		110	119
	Community SDEC: Witney EMU									84	98	80	95	86		103	122	109	128	87	-	97	51	84	101	140
	Community SDEC: RACU									53	53	59	63	70	55	68	73	53	67	43	66	57	94	55	78	69
Ambulance	OUH Percentage of ambulances with	0.000	40.000	0.60	0.651	40.00	- 4	0.001	F F	7.00	0.000	44.00	40.00	40.00	44.00	40.00	40.00	0.001	7.001	7.611	7.000/	0.000	0.50	7.50	40.70	44.704
1 month in arrears	turnaround time >30 minutes	8.4%	10.0%	6.4%	6.9%	13.6%	5.1%	6.6%	5.5%	7.3%	9.2%	11.8%	13.6%	10.9%	11.6%	10.9%	10.9%	8.9%	7.8%	7.9%	7.39%	6.9%	8.5%	7.5%	10.7%	11.7%
	OUH Percentage of ambulances with	1.004	0.000	1 100	1.00/	0.004	0.50/	0.407	0.007	0.50/	0.004	0.704	1.004	1 100	1.40	1.00/	1 00/	0.704	0.404	0.007	0.010/	0.50/	0.004	0.50	1.10/	1 20/
	turnaround time >60 minutes	1.0%	2.6%	1.1%	1.3%	2.3%	0.5%	0.4%	0.3%	0.5%	0.8%	0.7%	1.9% 0:21:00	1.1%	1.4% 0:19:54	1.0%	1.3%	0.7%	0.4%	0.8%	0.81%	0.5%	0.8%	0.5%	1.1%	1.3%
	OUH average ambulance handover time						0:16:14	0:17:09	0:16:57	0:17:42	0:18:43	0:19:47	0:21:00	0:19:27	0:19:54	0:19:47	0:19:09	0:18:39	0:17:46	0:18:07	0:17:48	0:17:14	0:17:59	0:18:24	0:19:13	0:19:53

The formatting of the report uses a heat map-based approach to highlight performance for each month relative to performance within the time series. For example, ED performance that is red will be at a level when it is lower than average, and green when above average, within the time period. The heat-map methodology, therefore, does not indicate whether any indicator is achieving target or at a level that meets expectations with respect to quality, efficiency or productivity. The purpose is to highlight visually how clusters of indicators change (improving or deteriorating) relative to other indicators. From this view the dashboard shows the relative importance of the indicators on ED performance. We are committed to ensuring that everyone can access this document as part of the Accessible Information Standard. If you have any difficulty accessing the information in this report, please contact us.

System area	Indicator	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24
A&E Performance	A&E 4hr performance (all attendance types)	57.9%	53.6%	64.4%	60.5%	64.7%	70.6%	70.3%	66.9%	68.5%	69.1%	63.7%	61.7%	57.9%	59.8%	63.7%	65.0%	72.2%	71.4%	74.9%	74.0%	78.7%	76.1%	73.1%	69.0%	68.8%
	A&E 4hr performance - Type 1	50.4%	46.1%	57.4%	53.3%	57.7%	64.8%	64.9%	61.0%	62.5%	63.0%	57.5%	55.0%	50.8%	53.2%	57.1%	58.7%	67.3%	66.1%	67.1%	66.6%	72.1%	69.1%	65.3%	59.9%	59.6%
	A&E 4hr performance - Day (8am to 5pm)	60.4%	57.7%	67.1%	62.3%	67.1%	73.8%	75.0%	72.3%	73.4%	72.7%	69.3%	66.5%	62.8%	63.2%	68.5%	70.3%	76.3%	76.3%	79.1%	79.0%	81.6%	80.2%	76.8%	73.2%	72.3%
	A&E 4hr performance - Night (5pm to 8am)	44.6%	40.1%	50.6%	47.6%	52.2%	59.1%	58.2%	53.9%	55.3%	57.3%	49.3%	47.4%	42.1%	47.3%	49.4%	50.6%	61.2%	58.9%	58.8%	57.7%	65.3%	60.9%	56.5%	49.9%	49.7%
	A&E 4hr performance - Weekdays	50.0%	47.5%	58.4%	52.6%	58.8%	64.9%	66.0%	63.2%	61.3%	62.9%	57.7%	56.6%	50.8%	52.7%	57.3%	58.7%	65.8%	66.5%	67.6%	66.1%	71.7%	69.3%	64.9%	60.1%	59.3%
	A&E 4hr performance - Weekends	59.5%	51.3%	60.5%	61.0%	62.4%	69.5%	67.6%	60.6%	70.2%	69.9%	62.9%	57.2%	56.8%	60.3%	63.6%	64.8%	75.4%	69.7%	71.1%	71.8%	77.3%	72.3%	70.8%	65.4%	65.6%
	A&E 12hr performance (all attendance types)	92.0%	89.7%	93.0%	93.1%	93.6%	96.8%	97.0%	96.6%	97.0%	96.4%	95.0%	94.2%	93.0%	92.7%	93.2%	93.7%	95.0%	95.8%	96.2%	96.7%	97.2%	95.7%	95.8%	95.3%	94.6%
	A&E 12hr trolley waits (DTA to admission)	1	3	3	2	0	4	0	0	0	0	0	0	0	3	0	1	1	0	1	0	0	0	0	0	2
In hospital	OUH G&A bed occupancy	96.8%	96.6%	95.9%	96.3%	96.5%	95.2%	95.6%	93.6%	93.0%	93.5%	94.7%	95.1%	96.5%	94.9%	95.7%	95.5%	95.7%	95.2%	94.1%	94.1%	93.71%	94.47%	93.65%	94.10%	96.27%
	OUH ALOS while Medically Fit for Discharge																									
	(MOFD)	8.6	7.6	7.5	6.9	6.7	5.9	6.4	6.4	6.0	6.6	6.8	6.3	6.1	5.9	7.1	8.2	6.7	6.7	6.3	7	5.7	5.8	6.4	6.1	5.4
	OUH Average number of MOFD patients per day	119	102	105	82	68	87	85	94	87	87	79	83	96	104	120	125	95	98	96	91	87	90	92	99	90
	Community Hospitals: ALOS while MOFD	15.6	19.1	21.9	20.4	17.0	5.0	6.0	4.0	4.0	2.0	8.0	3.0	10.0	5.0	4.0	9.0	5.0	7.0	5.0	5.0	7.0	9.0	4.0	7.0	6.0
	Community Hospitals: Average number of																									
	MOFD patients	76	61	44	56	14	12	11	13	10	16	13	14	20	12	14	23	27	28	27	21	29	29	39	43	47
Discharge																										
	Percentage of patients discharged before 12:00	17.2%	16.8%	17.4%	17.3%	17.6%	17.5%	17.7%	18.3%	18.3%	17.1%	16.8%	18.3%	17.7%	18.2%	18.3%	17.4%	16.4%	15.7%	17.4%	17.1%	17.00%	17.03%	15.76%	17.01%	16.71%
	Percentage of patients discharged before 17:00	60.4%	59.1%	61.2%	61.3%	59.9%	58.9%	59.2%	59.0%	61.4%	59.8%	59.5%	61.0%	60.3%	60.4%	60.9%	61.9%	60.5%	58.8%	59.6%	58.3%	60.38%	57.97%	56.79%	60.92%	59.56%
	Total discharges from OUH inpatient wards:																									
	Pathway 0	5,131	5,000	5,009	4,613	4,968	4,768	5,184	5,114	4,982	4,962	5,029	5,003	5,130	4,930	4,628	4,260	4,743	4,425	4,811	4726	4916	4839	4690	5048	5009
	Total discharges from OUH inpatient wards:																									
	Pathway 1	137	132	128	122	291	257	280	295	272	262	238	286	328	298	333	237	293	273	278	254	259	291	246	299	267
	Total discharges from OUH inpatient wards:																									
	Pathway 2	161	117	131	124	240	235	222	244	233	244	216	216	230	225	214	215	217	186	226	212	207	199	195	223	192
	Total discharges from OUH inpatient wards:																									
	Pathway 3	154	204	159	140	196	181	149	191	177	160	142	156	155	159	166	169	168	174	138	123	108	95	130	123	97
	Percentage of patients aged 18+ discharged on																									
	pathway 0 or 1	92.2%	92.2%	93.0%	92.8%	89.8%	89.5%	91.3%	89.6%	90.1%	90.7%	91.5%	91.1%	91.0%	90.7%	90.7%	90.4%	90.8%	91.1%	91.4%	92.0%	92.90%	93.30%	92.03%	92.36%	93.51%
	Number discharged on D2A/ Reablement																									
	pathway	139	182	238	248	229	190	230	234	237	280	204	254	242	247	369	320	328	351	411	358	402	400	397	466	418
	% reablement outcomes: reaching																									
	independence	83.5%	71.0%	74.3%	73.7%	72.2%	71.6%	77.4%	77.7%	86.8%	83.2%	80.0%	79.8%	79.5%	82.2%	77.3%	75.0%	66.1%	69.2%	72.0%	69.4%	71.73%	71.50%	72.40%	74.00%	81.94%
	% reablement outcomes: reduction in care																									
	needs	91.2%	87.1%	90.1%	85.0%	88.2%	92.2%	90.8%	88.6%	96.2%	90.4%	92.2%	92.1%	93.0%	92.1%	85.9%	86.0%	83.5%	86.4%	85.4%	83.1%	78.53%	87.85%	84.90%	84.68%	91.63%
	Total referrals received by Transfer of Care																									
	(ToC) Hub				409	461	364	455	430	421	394	376	463	433	418	479	419	435	397	453	-	494	452		472	541
	JR: Days at OPEL 1	0	0	3	1	2	9	11	9	12	13	5	7	0	3	0	3	2	10	7	10		8	3	2	2
	JR: Days at OPEL 2	2	2	6	2	5	8	10	14	14	15	13	6	12	4	0	6	11	6	14			13	_	9	5
	JR: Days at OPEL 3	26	22		25	24	13	10	6	5	3	10	17	16	21	21	20	18	14	10	8	11	10		20	23
	JR: Days at OPEL 4	2		8	0	0	0	0	1	0	0	2	1	2	3	10	0	0	0	0	0	0	0	0	0	0
	HH: Days at OPEL 1	2	1	3	2	3	9	14	3	12	15	11	8	2	4	6	12	13	10	24			28		22	19
	HH: Days at OPEL 2	8	4	9	4	8	7	12	16	9	8	10	6	10	4	7	4	8	7	5	-		3	•	7	7
	HH: Days at OPEL 3	18	22		21	19	14	5	10	10	8	9	15	15	19	9	13	10	13	2	1	3	0	-	2	4
	HH: Days at OPEL 4	2	4	5	1	1	0	0	1	0	0	0	2	3	4	9	0	0	0	0	0	0	0	0	0	0