

Cover Sheet

Trust Board Meeting in Public: Wednesday 11 March 2026

TB2026.33

Title: Urgent and Emergency Care Oxfordshire System Dashboard

Status: For Discussion

History: N/A

Board Lead: Chief Operating Officer

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Confidential: No

Key Purpose: Assurance and Performance

1. Summary

- 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:
 - Admissions avoidance schemes
 - Ambulance arrivals and turnaround times
 - In-hospital performance
 - Discharges performance
 - Emergency Department (ED) performance

- 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)
 - 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 0-3
 - Discharge to Assess (D2A) pathways

- 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.

- 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.

- 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 2025, it has been agreed that the dashboard will now form part

of the UEC Sitrep pack presented and discussed at the Oxfordshire UEC Board.

2. Current Status and Trends:

- Emergency Department 4-hour and 12-hour performance has sustained the significant improvement seen earlier in the year during the more challenged winter months and has remained over trajectory during this time. However, a new focus on prioritising 12-hour length of stay has resulted in some 12-hour Decision to Admit (DTA) breaches. Despite this, length of stay, patient experience and safety will continue to be prioritised.
- There have been fewer GP appointments available (face to face and telephone) over the winter months. During the same period there has been continued increase in ED attendances and SDEC encounters, both community and acute.
- CARE (crisis care) average length of stay has recovered from the increase seen in the autumn.
- Referrals into Urgent Community Response continue to significantly increase month on month (threefold compared to this time last year) highlighting the continued improvement work with SCAS to redirect calls from the SCAS 'stack'.
- OUH continues to exceed its trajectory for average ambulance handover times with very minimal >60 minute and >30-minute handover delays and a significantly improved picture compared to this this time last year. Improvement work continues in relation to data accuracy within this area.
- The overall number of patients delayed in OUH has risen in December 2025 and January 2026 as expected for this time of year, however, this remains higher than in previous years for the same periods and continues a position of increased numbers overall for the year. This has been attributed to several elements including ongoing equipment delays (attributed to the unexpected necessity to change provider last year) and the increased volume of very large packages of care. This also negatively impacted reablement outcomes. Following the diversion of the very large packages last year to an alternative pathway, this has resulted in a stabilised average length of delay which has not risen to where it could have been if these changes were not made. Referrals into the Transfer of Care Hub are increasing month on month in line with increased attendances at both sites.
- As a result of improved internal patient flow work, for the last few months OUH have seen a good improvement especially with the percentage of discharges before 12 midday. This metric forms part of the Discharge Quality Priority work with several initiatives to support continued improvement.

- OUH's OPEL status has been stable, mainly sitting at OPEL 2.

3. Key Focus Areas:

- Emphasis on addressing the root causes of increased ED attendances and improving admission avoidance strategies from the urgent care community for our populations. Supporting SDEC's with increased attendances.
- Further development of SPA, to include access to SCAS 'stack' for Category 3 and 4 calls.
- Reduction in conveyances from Care Homes and patients attending ED following a fall in the community.
- 24-hour trial period in February of all conveyances with exceptions, e.g. resus, MTC etc, being called through to a medical/ED consultant to learn from cases and inform future improvement work.
- Children's and Young Person's urgent and emergency care pathway, improvement activities to be undertaken with quality improvement methodology, internal to OUH.

4. Recommendations

- The Trust Board is asked to:
 - Review the UEC Performance Dashboard, noting that this will continue 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	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26
A&E Performance	A&E 4hr performance (all attendance types)	63.7%	65.0%	72.2%	71.4%	74.9%	74.0%	78.7%	76.1%	73.1%	69.0%	68.8%	66.7%	72.7%	70.8%	68.4%	75.5%	75.8%	80.0%	82.1%	80.1%	78.6%	78.6%	76.3%	76.0%	77.6%
	A&E 4hr performance - Type 1	57.1%	58.7%	67.3%	66.1%	67.1%	66.6%	72.1%	69.1%	65.3%	59.9%	59.6%	57.0%	63.9%	61.9%	59.8%	66.1%	66.3%	72.8%	75.4%	73.4%	71.1%	71.8%	68.0%	67.8%	69.4%
	A&E 4hr performance - Paed's Type 1	66.0%	70.0%	70.2%	74.4%	74.4%	74.8%	80.8%	81.5%	74.9%	69.0%	62.1%	63.7%	74.2%	74.8%	71.9%	76.9%	75.9%	79.9%	84.2%	81.0%	75.1%	75.2%	70.2%	70.4%	74.2%
	A&E 4hr performance - Day (8am to 5pm)	68.5%	70.3%	76.3%	76.3%	79.1%	79.0%	81.6%	80.2%	76.8%	73.2%	72.3%	69.9%	74.2%	72.9%	71.1%	76.7%	77.7%	80.6%	82.3%	79.5%	78.5%	79.4%	75.9%	75.4%	75.5%
	A&E 4hr performance - Night (5pm to 8am)	49.4%	50.6%	61.2%	58.9%	58.8%	57.7%	65.3%	60.9%	56.5%	49.9%	49.7%	47.6%	56.2%	53.3%	50.9%	57.8%	57.8%	66.8%	70.5%	68.7%	65.5%	65.5%	62.0%	62.4%	65.5%
	A&E 4hr performance - Weekdays	57.3%	58.7%	65.8%	66.5%	67.6%	66.1%	71.7%	69.3%	64.9%	60.1%	59.3%	59.7%	63.9%	61.7%	59.8%	66.8%	65.6%	73.5%	75.9%	72.9%	71.9%	72.8%	67.9%	68.2%	69.5%
	A&E 4hr performance - Weekends	63.6%	64.8%	75.4%	69.7%	71.1%	71.8%	77.3%	72.3%	70.8%	65.4%	65.6%	55.8%	69.5%	67.0%	64.3%	68.3%	73.0%	73.5%	77.3%	76.5%	72.3%	71.7%	71.4%	70.5%	73.1%
	A&E 12hr performance (Types 1 & 3)	93.2%	93.7%	95.0%	95.8%	96.2%	96.7%	97.2%	95.7%	95.8%	95.3%	94.6%	94.2%	94.5%	95.1%	96.0%	97.0%	96.7%	98.0%	99.3%	99.3%	98.8%	98.7%	98.4%	96.6%	96.3%
	A&E 12hr trolley waits (DIATo admission)	0	1	1	0	1	0	0	0	0	0	2	0	0	0	3	0	0	0	1	0	3	0	1	13	23
Primary care	GP: Number of face-to-face GP appointments (Oxfordshire)	246,721	231,534	225,726	228,351	228,052	211,312	230,380	203,888	225,115	314,516	246,551	211,441	250,236	221,129	239,092	224,479	216,784	226,327	240,414	197,288	231,457	314,369	236,143	219,816	
	GP: Number of telephone GP appointments (Oxfordshire)	149,143	138,079	133,200	131,294	129,877	121,373	125,913	114,537	119,303	130,906	122,131	114,433	135,162	121,958	129,016	118,578	116,047	122,989	125,752	104,525	120,914	124,738	112,565	112,432	
	GP: Total number of GP appointments (Oxfordshire)	414,614	385,540	375,839	376,346	374,314	348,223	373,198	334,449	363,531	469,188	390,389	347,049	412,446	365,905	393,182	366,378	357,045	374,413	393,851	325,186	382,006	474,390	381,053	365,273	
Admission avoidance	Hospital @ Home - new admissions	620	454	393	388	423	408	417	359	384	407	343	414	413	348	372	372	353	389	395	351	352	402	359	409	421
	Hospital @ Home - beddays consumed	3748	2802	2732	2251	2583	3450	2861	2834	2933	2282	2167	2677	2461	1908	2361	2376	2822	2260	2056	2222	2132	2722	2435	3290	3009
	CARe (crisis care) team - Average LoS (days)											6.4	7.8	7.3	7.3	7.4	7.5	7.8	7.5	7.2	8.8	7.7	9.3	9.5	7.9	7.4
	CARe (crisis care) team - Total hours provided											1004	1234	1398	1072	1197	1127	1495	1162	955	912	1049	1318	1309	1125	1144
	Community referrals accepted for reablement								65	72	93	76	78	118	93	83	74	80	75	72	66	49	71	62	83	78
	Referrals into Urgent Community Response											965	1289	1274	1089	1419	1548	1776	1691	1759	2171	2040	2494	2414	2681	2967
	Social Care referrals from bed based settings								519	523	429	400	449	525	466	487	539	456	458	479	404	435	564	726	660	579
	Fiennes UCC attendances	1542	1419	1728	1896	1824	1501	1682	1421	1524	1964	1983	2043	2065	1807	1659	1734	1863	1640	1654	1422	1444	1486	1428	1401	1443
	City UCC referrals	1340	1337	1360	1229	1259	1335	1622	1230	1289	1683	1882	1588	1486	1340	1314	1345	1416	1366	1404	1225	1402	1515	1363	1422	1422
	MIU attendances: Total	3969	3973	4645	4389	5137	4407	4817	4647	4627	4517	4184	3726	3979	3733	4865	4753	5289	5239	5277	4731	4975	4541	4235	3813	4173
	MIU attendances: Abingdon	1784	1828	2067	1954	2278	1938	2180	1997	2115	2129	1936	1632	1787	1758	2190	2075	2319	2311	2315	2025	2163	2056	1984	1699	1976
	MIU attendances: Henley	830	748	958	894	1040	924	997	1024	967	903	827	797	792	701	1005	981	1093	1134	1108	1061	1109	1042	906	871	919
	MIU attendances: Witney	1267	1288	1490	1395	1612	1375	1517	1458	1416	1341	1326	1187	1292	1180	1534	1539	1706	1627	1676	1494	1552	1443	1345	1243	1278
	FAU attendances: Total											249	270	366	363	474	533	529	397	425	388	367	380	352	371	367
	FAU attendances: Bicester	88	109	130	146	207	153	123	168	129	144	95	110	108	94	136	158	171	167	178	151	151	131	130	127	121
	FAU attendances: Chipping Norton				27	42	24	27	29	21	33	44	78	139	142	185	220	198	70	97	94	87	94	93	114	89
	FAU attendances: Wallingford											110	82	119	127	153	155	160	150	143	129	155	129	130	157	
	Acute SDEC: Total				3325	3583	3334	3485	3246	3384	3843	3333	3379	3557	3140	3592	3460	3337	3278	3302	3154	3338	3643	3410	3433	3610
	Acute SDEC: H-WD Rowan AU	466	447	505	500	543	472	516	449	470	578	512	485	522	493	531	507	482	471	456	450	488	504	447	525	541
	Acute SDEC: J-WD A&A	1742	1592	1669	1616	1700	1604	1618	1583	1603	1808	1559	1634	1671	1514	1666	1665	1666	1491	1482	1514	1521	1669	1544	1574	1677
	Acute SDEC: J-WD SEU triage	940	907	921	861	961	895	971	897	953	1011	895	885	968	780	986	940	902	983	1030	965	1010	1100	1026	995	1069
	Acute SDEC: J-WD Child CDU	269	259	266	264	299	257	283	241	267	327	266	270	293	258	328	272	220	236	253	180	261	292	306	279	270
	Acute SDEC: H-WD Childrens				84	80	106	97	76	91	119	101	105	103	95	81	76	67	97	81	45	58	78	87	60	53
	Acute SDEC Specialty: C-WD OncH triage	246	206	212	192	208	213	232	235	199	233	229	228	237	215	233	239	212	192	221	234	238	225	203	227	223
	Acute SDEC Specialty: C-WD Urol triage	226	189	215	211	229	205	237	277	203	233	256	239	265	246	280	272	247	247	231	218	246	233	223	232	251
	Acute SDEC Specialty: C-WD GPRU	87	87	85	103	76	89	84	99	78	81	110	93	97	88	82	108	102	88	91	92	94	96	93	86	82
	Acute SDEC Specialty: J-WD Gyn triage	359	326	386	344	320	312	380	336	326	296	266	266	347	254	282	330	317	299	338	317	308	319	296	273	311
	Acute SDEC Specialty: J-WD Maty AU	366	374	392	357	400	371	369	353	388	431	378	422	414	384	431	355	371	362	412	379	373	421	408	346	413
	Community SDEC: Total	311	323	286	303	217	263	277	234	237	289	328	328	311	253	313	302	318	319	349	276	322	357	356	397	395
Community SDEC: Abingdon EMU	140	128	124	108	87	90	123	89	98	110	119	130	116	91	131	108	116	132	143	112	119	156	125	167	146	
Community SDEC: Witney EMU	103	122	109	128	87	107	97	51	84	101	140	131	124	124	115	144	121	144	108	137	122	158	160	169		
Community SDEC: RACU	68	73	53	67	43	66	57	94	55	78	69	67	71	60	58	79	58	66	62	56	66	79	73	70	80	

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	A&E 4hr performance - Paed's Type 1	66.0%	70.0%	70.2%	74.4%	74.4%	74.8%	80.8%	81.5%	74.9%	69.0%	62.1%	63.7%	74.2%	74.8%	71.9%	76.9%	75.9%	79.9%	84.2%	81.0%	75.1%	75.2%	70.2%	70.4%	74.2%
	A&E 4hr performance - Day (8am to 5pm)	68.5%	70.3%	76.3%	76.3%	79.1%	79.0%	81.6%	80.2%	76.8%	73.2%	72.3%	69.9%	74.2%	72.9%	71.1%	76.7%	77.7%	80.6%	82.3%	79.5%	78.5%	79.4%	75.9%	75.4%	75.5%
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	A&E 4hr performance - Weekdays	57.3%	58.7%	65.8%	66.5%	67.6%	66.1%	71.7%	69.3%	64.9%	60.1%	59.3%	59.7%	63.9%	61.7%	59.8%	66.8%	65.6%	73.5%	75.9%	72.9%	71.9%	72.8%	67.9%	68.2%	69.5%
	A&E 4hr performance - Weekends	63.6%	64.8%	75.4%	69.7%	71.1%	71.8%	77.3%	72.3%	70.8%	65.4%	65.6%	55.8%	69.5%	67.0%	64.3%	68.3%	73.0%	73.5%	77.3%	76.5%	72.3%	71.7%	71.4%	70.5%	73.1%
	A&E 12hr performance (Types 1 &3)	93.2%	93.7%	95.0%	95.8%	96.2%	96.7%	97.2%	95.7%	95.8%	95.3%	94.6%	94.2%	94.5%	95.1%	96.0%	97.0%	96.7%	98.0%	99.3%	99.3%	98.8%	98.7%	98.4%	96.6%	96.3%
	A&E 12hr trolley waits (DIA to admission)	0	1	1	0	1	0	0	0	0	0	2	0	0	0	3	0	0	0	0	1	0	3	0	1	13
Ambulance	OUH Percentage of ambulances with turnaround time >30 minutes	10.9%	10.9%	8.9%	7.8%	7.9%	7.39%	6.9%	8.5%	7.5%	10.7%	11.7%	10.5%	9.6%	8.3%	6.8%	5.6%	6.4%	4.7%	5.0%	5.0%	5.2%	5.6%	6.6%	6.0%	
	OUH Percentage of ambulances with turnaround time >60 minutes	1.0%	1.3%	0.7%	0.4%	0.8%	0.81%	0.5%	0.8%	0.5%	1.1%	1.3%	0.8%	0.5%	0.5%	0.8%	0.2%	0.5%	0.2%	0.3%	0.2%	0.2%	0.3%	0.6%	0.3%	
	OUH average ambulance handover time (h:mm:ss)	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	0:20:07	0:19:23	0:18:17	0:17:28	0:17:14	0:17:16	0:16:48	0:17:10	0:16:53	0:17:00	0:17:24	0:17:26	0:17:23	
In hospital	OUH G&A bed occupancy	95.7%	95.5%	95.7%	95.2%	92.7%	93.1%	93.95%	92.52%	93.39%	94.10%	94.68%	93.83%	94.95%	95.11%	94.00%	93.48%	92.45%	90.90%	92.42%	93.04%	94.16%	93.29%	94.18%	92.79%	95.31%
	OUH ALoS while Medically Fit for Discharge (MOFD)	7.1	8.2	6.7	6.7	6.3	7.0	5.7	5.8	6.4	6.1	5.4	5.7	6.5	6.2	5.5	4.8	5.6	5.6	5.9	6.2	6.5	5.5	5.7	6.2	6.6
	OUH Average number of MOFD patients per day Community Hospitals: Average number of MOFD patients per day	120 14	125 23	95 27	98 28	96 27	91 21	87 29	90 29	92 28	99 23	90 21	113 23	121 22	99 18	90 19	90 20	104 24	106 24	105 23	108 23	113 29	104 21	105 18	118 23	134 17
Discharge	Percentage of patients discharged before 12:00	18.3%	17.4%	16.4%	15.7%	17.4%	17.1%	17.00%	17.03%	15.76%	17.01%	16.71%	17.90%	18.70%	18.05%	17.31%	17.39%	17.36%	16.78%	17.84%	16.76%	16.86%	18.11%	18.39%	18.08%	18.27%
	Percentage of patients discharged before 17:00	60.9%	61.9%	60.5%	58.8%	59.6%	58.3%	60.38%	57.97%	56.79%	60.92%	59.56%	60.13%	60.72%	61.01%	60.85%	58.28%	58.72%	58.08%	59.52%	58.98%	58.51%	60.21%	60.29%	62.38%	61.65%
	Total discharges from OUH inpatient wards: Pathway 0	4628	4260	4743	4425	4811	4726	4916	4839	4690	5048	5009	4666	4652	4131	4802	4707	4772	4782	4860	4607	4694	5069	4766	4584	4617
	Total discharges from OUH inpatient wards: Pathway 1	333	237	293	273	278	254	259	291	246	299	267	265	314	252	297	303	303	294	308	275	275	301	264	276	295
	Total discharges from OUH inpatient wards: Pathway 2	214	215	217	186	226	212	207	199	195	223	192	213	228	220	234	222	174	165	183	155	187	165	152	182	185
	Total discharges from OUH inpatient wards: Pathway 3	166	169	168	174	138	123	108	95	130	123	97	84	29	32	28	34	31	51	54	50	33	38	23	51	48
	Percentage of OUH patients aged 18+ discharged on pathway 0 or 1	90.7%	90.4%	90.8%	91.1%	91.4%	92.0%	92.90%	93.30%	92.03%	92.36%	93.51%	92.48%	92.67%	92.81%	93.55%	93.05%	93.45%	93.20%	92.62%	93.29%	92.76%	93.38%	93.98%	93.03%	92.46%
	Reablement outcomes: % Independent								86%	84%	91%	84%	86%	86%	85%	80%	74%	74%	73%	71%	75%	71%	79%	78%	84%	
	JR: Days at OPEL1	0	3	2	10	7	10	11	8	3	2	2	3	3	3	4	5	3	16	11	9	5	7	6	7	2
	JR: Days at OPEL2	0	6	11	6	14	12	9	13	9	9	5	8	10	10	18	16	17	14	16	19	23	22	19	10	15
	JR: Days at OPEL3	21	20	18	14	10	8	11	10	18	20	23	20	18	15	9	9	11	0	4	3	2	2	5	14	13
	JR: Days at OPEL4	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
	HH: Days at OPEL1	6	12	13	10	24	24	24	28	24	22	19	9	14	16	19	20	24	30	29	27	24	27	11	7	13
	HH: Days at OPEL2	7	4	8	7	5	5	4	3	5	7	7	9	11	6	9	9	7	0	2	4	6	3	13	14	12
	HH: Days at OPEL3	9	13	10	13	2	1	3	0	1	2	4	13	5	6	3	1	0	0	0	0	0	1	6	10	6
HH: Days at OPEL4	9	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	

Figure The formatting of the report uses a heat mat-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. This 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: We are committed to ensuring that this report provides assurance and forms part of the Oxfordshire UEC System Sitrep pack