

<b>Title</b>	Performance Report December 2015
<b>Meeting</b>	Board of Directors
<b>Date</b>	28 January 2016

**Executive Summary**

The Trust is reporting a deficit for the nine months to 31 December 2015 of £7,572k. The revised internal plan anticipated a deficit of £4,443k, excluding £12,657k of income in relation to the transfer of St Benedict's Hospice which has still not transferred to the Trust, giving an adverse variance of £3,129k at the end of December 2015. The transfer of St Benedict's is now anticipated to complete on 29 February 2016.

Under the Financial Sustainability Risk Rating (FSRR) the risk rating is assessed as a 2. This rating has triggered consideration by Monitor of further regulatory action. The Trust's governance rating has been placed under review pending receipt of further information, in particular the outcome of the review the board has commissioned of its PMO and CIP programme by Deloitte and the development of a Financial Recovery Plan.

Type 1 attendances to A&E year to date are 1.8% (891) ahead of target for the year to date. Attendances through the Urgent Care Hub are under a block contract.

Emergency contract activity for the year to date shows:

- 837 spells (7.3%) above plan for all non-elective spells
- Emergency activity is 660 spells (7.3%) above plan. The significant area of underperformance is Paediatrics (-198) while General Medicine is significantly over performing (823)
- Short stay activity is 106 spells (17%) above plan
- Non elective activity itself is 71 spells (4.1%) above plan, a slight increase on October
- Ambulatory care is 255 spells (8.7%) below plan

Elective activity is 925 spells (8.3%) below plan for the year to date, a worse position than in October. T&O (-460), General Surgery (-316) Clinical Haematology (-211) and Medical Oncology (-176) are the areas of significant underperformance against target.

Outpatient activity for the year to date:

- 217 (1.1%) above plan for attendances with follow up attendances at 910 (2.6%) above plan. The significant areas of underperformance on attendances are T&O (-404), Gastroenterology (-191), and Ophthalmology (-254). Cardiology (946) and Respiratory (318) are the areas of significant over performance.

Clostridium Dificile is currently reported as 10 cases for the year against a full year threshold of 8 cases. Each case above the threshold would lead to a penalty at the end of the year of £10,000. However we have a number of cases definitely going forward to appeal, and the Trust has a very good track record of such appeals being upheld.

<b>Recommendation</b>				
The Board is requested to:				
<ul style="list-style-type: none"> <li>review and comment upon the integrated performance report alongside the detailed reports already circulated. In particular the Board will wish to review and comment upon financial performance to date, the forecast outturn and the risks identified of not achieving that forecast.</li> </ul>				
<b>Report Author</b>	Malcolm Walker			
<b>Executive Director/ Sponsor</b>	Mike Robson/Ian Frame			
<b>Purpose of paper</b>	<b>Information</b>	x	<b>Discussion</b>	x
	<b>Decision</b>		<b>Assurance</b>	x
	<b>Specific action</b>			
<b>Implications</b>	<b>Staffing</b>			
	<b>Finance</b>		x	
	<b>Legal</b>			
	<b>Public engagement</b>			
	<b>Partnership</b>		x	
	<b>Communication</b>			
	<b>Equality &amp; Diversity</b>			
	<b>Clinical</b>		x	
	<b>Risk assessment and mitigation (include risk register reference if appropriate)</b>			
<b>Link to STFT Business Plan</b>	Performance			
<b>Link to CQC outcome</b>	16			
<b>Link to Board Assurance Framework</b>	Provides assurance of performance against contract			
<b>Link to Strategic Risk Register</b>				

**REPORT TO BOARD OF DIRECTORS  
INTEGRATED PERFORMANCE REPORT DECEMBER 2015**

**1.0 FINANCIAL PERFORMANCE**

**1.1 Overview**

The Trust is reporting a deficit for the nine months to 31 December 2015 of £7,572k. The revised internal plan anticipated a deficit of £4,443k, excluding £12,657k of income in relation to the transfer of St Benedict's Hospice which has still not transferred to the Trust, giving an adverse variance of £3,129k at the end of December 2015. The transfer of St Benedict's is now anticipated to complete on 29 February 2016.

Under the Financial Sustainability Risk Rating (FSRR) the risk rating is assessed as a 2. This rating has triggered consideration by Monitor of further regulatory action. The Trust's governance rating has been placed under review pending receipt of further information, in particular the outcome of the review the board has commissioned of its PMO and CIP programme by Deloitte and the development of a Financial Recovery Plan.

**2 Variance from Plan**

When compared to the internal revised plan the adverse variance of £3,129k can be analysed as follows:

	<b>£000</b>	<b>£000</b>
Income above plan (excluding Hospice transfer)		689
<u>Pay</u>		
Medical overspend	(794)	
Nursing underspend	428	
Other underspend	(9)	
CIP not achieved	(2,875)	
		(3,250)
 <u>Non Pay</u>		
Overspend	(2,254)	
CIP not achieved	578	(1,675)
Trustwide CIP overachieved		208
Budgetary Reserves not yet allocated		739
Capital charges etc underspend		161
		(3,129)

The financial position has deteriorated by £762k in the month and includes £146k of payments relating to redundancy etc of £146k. The underlying monthly deficit was, therefore, £616k.

Pay expenditure pressures continue to be focussed primarily around locum/agency spend for medical staff although the variance only worsened by £79k in month demonstrating the improvements which have been made in recent months.

Spend on agency nursing staff is greater than expected by £694k, mainly within Care of the Elderly, Winter Planning and Medicine. Overall nursing is, however, underspent by £428k due to underspends in some community services and nursing posts within Corporate Services. The small positive improvement in Nursing largely offsets the negative movement in Medical Staffing.

The overall Cost Improvement Programme is £2,089k worse than originally planned and reflects the planned increase in target delivery in the second half of the financial year and the anticipated shortfall in CIP identified at Mid Year Review.

The **income** variance of £689k above plan excluding the transfer of the Hospice is an increase of £195k in month and can be analysed:

	<b>£000</b>
<u>Income</u>	
Elective In Patients	(572)
Day Cases	(651)
Non Elective/Emergency	1,661
Out Patients	39
A & E	211
Community and other income	1
Income above plan	<u>689</u>

The main feature remains the relatively large underperformance of elective activity (both in patients and day cases) which is below plan by £1,223k, however, this was only £98k below plan in month and is offset by non elective income which is better than plan by £1,661k, an improvement of £173k in month. Non elective income targets were reduced as part of the 2015/16 contract negotiations to reflect the significant reduction experienced in 2014/15 and South Tyneside CCG expect to see reductions in both A & E attendances and emergency admissions as a result of initiatives to be introduced in the latter half of this year. The Trust is not reflecting these anticipated reductions in our plan or in our forecast outturn.

### **3 Cost Improvement Programme**

The annual Cost Improvement Programme target included within the annual plan amounts to £12,742k and is profiled for majority delivery in the second half of the year to reflect Phase 3 of PERFORM. The target for the nine months to December is delivery of £8,431k, however, only £6,342k has been transacted to date giving a variance of £2,089k included within the overall variance from plan. The schemes transacted to date have a total value of £8,294k in 2015/16 of which 56% is recurrent, a total of £401k was transacted in month.

As part of the continuing review and reassessment of forecast outturn a detailed assessment of CIP is carried out each month. The deliverable programme stands at £9,345k, a shortfall of £3,398k against the original target. In addition the risk assessment for each scheme is also revised.

The current status of schemes is as follows:

Risk Categorisation		R	NR	Total	FYE
CIP Scheme identified, discussions on-going to develop full CIP plan.		61,686	0	61,686	109,459
CIP scheme fully developed and signed off by appropriate managers in division, enabling work in progress i.e. staff consultation or building work in progress.		389,701	1,097,457	1,487,158	388,996
Steps needed to realise CIP scheme complete, no remaining risks of non delivery.		520,124	1,116,762	1,636,886	567,240
Delivered		3,835,223	2,323,637	6,158,860	4,230,806
		<b>4,806,734</b>	<b>4,537,856</b>	<b>9,344,590</b>	<b>5,296,501</b>

#### 4 Cash & Capital Expenditure

Cash balances are £11,261k which is an increase of £2,068k in the month, mainly due to receipt of loan funding.

The receipt of loans, which are drawn down a quarter in advance of capital expenditure is continuing to mask the true level of cash currently available to the Trust. Of the £11.6m of loans drawn down only £3.7m has been expended on capital (in cash terms) to date. If capital expenditure matched the draw down the cash balance would reduce to £3.4m.

The capital programme was reforecast following an achievement of 60% of plan in Q1. The plan reduced by £4.68m and performance against the revised plan at month 9 is 98%. As noted above the transfer of St Benedict's Hospice which was expected to be a capital addition of £12,657k has been further delayed, however this is now expected to complete on 29 February, 2016

#### 5 Forecast Outturn

At the mid year review on 20 and 21 October the Board agreed to revise the forecast outturn for the year to be a deficit position of £9.4m excluding the impact of the transfer of St Benedict's Hospice.

FRMG monitors deliver of each component of the forecast outturn every month based on revised baseline forecasts from Divisional Managers and their financial support.

The projected underlying deficit which includes the reforecast CIP above, the impact of controls introduced, the identification of additional mitigations plus any non recurrent factors has now reduced to £10,143k at month 09 from the baseline of £11,189k at month 07.

Whereas in previous months forecasts were included separately for elective income recovery to the year end, these are now incorporated within the baseline estimates and reflect the improvement in currently monthly performance since actions were introduced following mid year review.

In addition the expenditure baseline forecast reflects actions being taken to contain staff spend by means of vacancy controls, overtime, agency reduction etc.

Whilst final confirmation is awaited it is understood that the proposed capital to revenue transfer of £1.3m is to be actioned in month 10 and, therefore, is reflected in the forecast below which remains consistent with previous forecasts.

An estimate of redundancy costs has also been included within the revised forecast for month 9. Monitor's technical team have advised that a charge for redundancy this year would probably be a provision not an accrual and as such will hit the deficit this year but not the Department of Health's budget as provisions are charged by HM Treasury on a cash basis. An application for funding from the ITFF to support the payment of redundancies has been submitted to the Board for approval.

	<b>£000</b>
Baseline forecast at month 09	(10,143)
Houghton PCC refurbishment	300
Recharge to STFT Holdings	140
Mitigations not transacted	310
<b>Forecast at Month 9</b>	<b>(9,423)</b>
Capital to Revenue	1,300
Estimated redundancy costs to be provided	(1,611)
<b>Revised Forecast Month 9</b>	<b>(9,734)</b>

## 6 Risk

There are a range of risks which need to be resolved or for which mitigations need to be identified which are currently not part of this forecast position. These can be summarised as follows:

### 6.1 Expenditure downside risks

- In common with a number of Trusts nationally, the Trust has been subject to a large number of equal pay claims relating to the period 1998-2004. These claims have lain dormant for a number of years and due to the lack of certainty to cost, liability or timing of settlement, have not been provided for in the Accounts. Recently it has become apparent that the Employment Tribunals are making progress in dealing with historic cases and it seems possible that these may now be settled in 2015/16 financial year. As there is not enough certainty to provide for this fact it is not included in the current forecast outturn, however, the impact could be in the range £600k to £800k.
- The costs of ensuring winter resilience exceeds the currently provided for schemes. Whilst it is difficult to predict this impact it could range from 0 to £200k.
- The costs of overseas recruitment initially exceeds the benefits of reduced agency nursing costs. The impact could be from 0 to £100k.
- Gateshead NHS Foundation Trust have identified an overspend against the pathology contract which they expect the partners to share. Our share would be £202k. Further discussions need to be held regarding this potential cost as the service is not currently delivering the expected savings identified in the original business case.

## **6.2 Expenditure upside risks**

- The voluntary redundancy scheme is successful and reduces management spend from March 2016. The benefit could be £100k in 2015/16.
- Agency controls introduced by Monitor and NHS England impact at a faster rate than assumed upon costs incurred by the Trust in addition to the benefit of our own controls.

## **6.3 Income downside risks**

- Whilst negotiations continue there remains a risk that the intermediate care/reablement scheme is not funded by South Tyneside CCG (£301k).
- Forecast outturn assumes elective surgery (T&O and General Surgery) continue to improve at current rates, however, the impact of winter and the requirement to retain beds for emergency activity may frustrate this plan particularly in January (0 to £150k).
- CQUIN is currently forecast to deliver at 100% of targets and any shortfall could lead to reduction in income from Commissioners. The risk is assessed as up to £200k based upon current performance.

## **6.4 Income upside risks**

- Negotiations have commenced with Sunderland CCG and Sunderland Care and Support for extended provision of Information Technology Services in support of the Vanguard Programme. Gross income is expected to be in excess of £400k and the net benefit may be up to £100k.
- Discussions continue with South Tyneside CCG regarding potential revenue support to the Trust as part of a year end deal. The best case scenario is assumed to be £500k.

## Summary of Forecast Outturn Risks

	Range	
	Best £000	Worst £000
Forecast Outturn (incl Capital to Revenue and redundancies*)	(9,734)	(9,734)
<u>Expenditure Downside</u>		
Equal Pay Claim *	(600)	(800)
Winter Resilience	(0)	(200)
Overseas Recruitment	(0)	(100)
Gateshead FT Pathology increase	0	(200)
 <u>Expenditure Upside</u>		
Voluntary Redundancy*	100	0
Agency Controls	100	0
 <u>Income Downside</u>		
Intermediate Care	0	(301)
Elective Activity	0	(150)
CQUIN	0	(200)
 <u>Income Upside</u>		
I.T. contracting	100	0
STCCG year end	500	0
	(9,534)	(11,685)
*Exceptional items	(2,111)	(2,411)
	(7,423)	(9,274)

## 2.0 CONTRACT PERFORMANCE

Type 1 attendances to A&E year to date are 1.8% (891) ahead of target for the year to date. Attendances through the Urgent Care Hub are under a block contract.

Emergency contract activity for the year to date shows:

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- Emergency activity is 660 spells (7.3%) above plan. The significant area of underperformance is Paediatrics (-198) while General Medicine is significantly over performing (823)
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### **3.0 WORKFORCE**

Activity is underway to ensure that there is a robust annual statutory and mandatory training programme in place from 1 April 2016, linked to performance management, whilst at the same time making more sessions available to improve performance against 2015/16 targets. Particular emphasis will be placed on Information Governance training compliance, which carries with it contractual benefits.

Sickness absence rose by 0.2% in the month and continues to be a concern.

### **4.0 INFECTION CONTROL**

Clostridium Dificile is currently reported as 10 cases for the year against a full year threshold of 8 cases. Each case above the threshold would lead to a penalty at the end of the year of £10,000. However we have a number of cases definitely going forward to appeal, and the Trust has a very good track record of such appeals being upheld.

### **5.0 RECOMMENDATIONS**

The Board is requested to:

- review and comment upon the integrated performance report alongside the detailed reports already circulated. In particular the Board will wish to review and comment upon financial performance to date, the forecast outturn and the risks identified of not achieving that forecast.

**Mr M P Robson**

**Executive Director of Finance & Corporate Governance**

22 January 2016

## EXCEPTION ANALYSIS 1 – FINANCIAL PERFORMANCE

COMPLIANCE RISK RATING	Target	Apr-15	May-15	Jun-15	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14
Financial Sustainability Risk Rating	4	3	3	3	2	2	2	2	2	2
Governance Risk Rating	Green									

  

FINANCIAL TARGETS	YTD Budget	YTD Apr	YTD May	YTD Jun	YTD Jul	YTD Aug	YTD Sep	YTD Oct	YTD Nov	YTD Dec
Total Income £'000	146,774	15,788	31,405	47,971	64,254	80,121	96,478	113,473	130,503	147,463
Expenditure - Pay Costs £'000	111,737	12,816	25,643	38,231	50,750	63,049	75,610	88,527	101,162	113,940
Expenditure - Non Pay Costs £'000	34,406	4,035	7,696	11,760	15,799	19,652	23,513	27,678	31,810	36,228
EBITDA £'000	13,288	(1,063)	(1,934)	2,020	(2,294)	(2,580)	(2,644)	(2,732)	(2,469)	(2,705)
Net Surplus / (Deficit) £'000	(4,442)	(1,622)	(3,052)	(3,698)	(4,536)	(5,386)	(5,979)	(6,565)	(6,809)	(7,572)
Liquidity Ratio		13.8	8.8	7.5	9.0	1.2	11.2	8.3	6.6	8.8
Capital Servicing Capacity		1.6	(1.4)	(3.7)	(3.2)	(2.9)	(2.6)	(2.5)	(2.0)	(1.9)
Total Capital Expenditure £'000	7,398	85	659	1,301	2,095	3,251	3,935	5,222	6,288	7,281
Total CIP Achieved £'000	8,431	331	429	1,290	1,852	2,581	3,404	4,178	5,340	6,342

  

Analysis	Mitigating Measures	Gaps in Assurance
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-		
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**EXCEPTION ANALYSIS 2 – WORKFORCE PERFORMANCE**

<b>WORKFORCE TARGETS</b>	<b>Target</b>	<b>Apr-15</b>	<b>May-15</b>	<b>Jun-15</b>	<b>Jul-15</b>	<b>Aug-15</b>	<b>Sep-15</b>	<b>Oct-15</b>	<b>Nov-15</b>	<b>Dec-15</b>	<b>YTD</b>
Turnover Rates (FTE %)	<13.5%	0.86%	0.93%	0.76%	0.54%	2.10%	1.09%	0.87%	0.99%	0.80%	8.94%
Stability Rates (FTE %)	>90%	89.9%	89.6%	89.7%	90.3%	90.1%	90.0%	90.0%	90.1%	90.0%	90.0%
Sickness Absence Rates	<4.8%	6.2%	6.1%	5.9%	5.7%	5.2%	5.1%	6.1%	5.9%	6.1%	5.8%
KSF Reviews (Within 12 Months)	>95%								57%	56%	56%
Fire Training	>95%	10.0%	16%	22%	29%	34%	42%	49%	54%	58%	58%
Information Governance Training	>95%	8.0%	15%	22%	27%	33%	37%	44%	48%	53%	53%

<b>Analysis</b>	<b>Mitigating Measures</b>	<b>Gaps in Assurance</b>
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## EXCEPTION ANALYSIS 3 – HEALTHCARE ACQUIRED INFECTION PERFORMANCE

HEALTHCARE ACQUIRED INFECTION	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	YTD
MRSA Bacteraemia	0	0	0	0	0	0	0	0	0	0	0
Clostridium Difficile	8	2	0	1	0	2	0	2	1	2	10

## Analysis

- Clostridium Dificile is currently reported as 10 cases for the year against a full year threshold of 8 cases. Each case above the threshold would lead to a penalty at the end of the year of £10,000.

## Mitigating Measures

- However we have a number of cases definitely going forward to appeal, and the Trust has a very good track record of such appeals being upheld.

## Gaps in Assurance

## INTEGRATED PERFORMANCE DASHBOARD - DECEMBER 2015

### Patient Access and Waiting Time Metrics

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	YTD	Penalties YTD
<b>A&amp;E CLINICAL INDICATORS</b>													
4 Hours Wait	A&E Type 1 - Monthly	>95%	91.42%	95.51%	91.07%	95.01%	96.57%	95.97%	94.94%	92.53%	91.88%	93.68%	
4 Hours Wait	A&E Type 1 & 3 - Monthly	>95%	91.42%	95.51%	91.07%	95.01%	96.57%	95.97%	95.42%	93.61%	92.93%	94.14%	£ 69,000
A&E Trolley Waits	A&E Trolley Waits >12 Hours	0	0	0	0	0	0	0	0	0	0	0	
Time to Initial Assessment - 95th Percentile	A&E	< 15 mins	34	33	36	31	31	28	30	31	32		
Time to Treatment - Median	A&E	< 60 mins	50	46	49	50	44	46	50	52	56		
<b>CANCER TARGETS</b>													
14 Day	Trust Rating	93%	96.7%	97.5%	96.7%	96.8%	97.5%	97.0%	99.0%	96.7%	95.0%	97.0%	
31 Day - 1st Treatment	Trust Rating	96%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
31 Day - Subsequent Treatment (Surgery)	Trust Rating	94%	100%	100%	100%	95.2%	100%	100%	100%	100%	90.9%	99%	
31 Day - Subsequent Treatment (Drugs)	Trust Rating	98%	100%	100%	100%	95.2%	100%	100%	100%	100%	90.9%	99%	
62 Day 2 Week Wait Referrals	Trust Rating	85%	94.1%	89.2%	78.6%	93.8%	82.4%	75.0%	90.3%	88.2%	91.9%	87.0%	
62 Day - Screening Programmes	Trust Rating	90%	100%	100%	N/A	100%	50%	N/A	N/A	N/A	N/A		
62 Day - Consultant Upgrades	Trust Rating	>85%	N/A	100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
<b>REFERRAL TO TREATMENT TIMES</b>													
Incomplete Pathways	Trust Rating	>92%	98.5%	96.5%	98.0%	96.0%	96.0%	96.3%	97.3%	96.2%	96.1%	96.8%	
Long Waits > 36 Weeks	Trust rating	0	0	0	0	0	0	0	0	0	0	0	
Long Waits > 52 Weeks	Trust rating	0	0	0	0	0	0	0	0	0	0	0	
Diagnostic 6 Week Wait	Trust Rating	>99%	100%	99.9%	100%	100%	100%	100%	100%	100%	100%	99.99%	

### Patient Safety

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	YTD	Penalties YTD
<b>A&amp;E CLINICAL INDICATORS</b>													
A&E Unplanned Reattendance	Trust Rating	< 5%	9.00%	8.24%	7.63%	8.25%	9.31%	8.45%	7.78%	8.81%	8.61%	8.45%	
A&E Left Without Being Seen	Trust Rating	< 5%	2.35%	1.94%	1.88%	1.95%	2.26%	1.75%	1.96%	1.42%	2.23%	1.96%	
<b>AMBULANCE HANDOVER</b>													
% Handover Time Recorded	Trust Rating	90%	67.3%	73.4%	71.3%	63.7%	65.3%	72.0%	68.6%	66.8%	60.9%	67.7%	
Ambulance Handover > 15 minutes	Trust Rating		46	34	36	47	29	32	35	37	32	328	
Ambulance Handover > 30 minutes	Trust Rating	0	9	2	6	2	2	0	7	5	10	43	£8,600
Ambulance Handover > 60 minutes	Trust Rating	0	2	1	0	0	0	0	2	0	0	5	£5,000
Number of Diverts/Deflects Initiated	Trust Rating	0	1	0	7	0	0	9	-	-	-	17	£34,000
Number of Diverts/Deflects Accepted	Trust Rating		5	6	4	0	0	2	-	-	-	17	-£25,500
<b>FRACTURED NECK OF FEMUR</b>													
Patients Operated on Within 36 Hours	Trust Rating	> 75%	73.7%	80.0%	66.7%	77.3%	84.6%	76.5%	76.2%	70.6%	84.6%	75.7%	
<b>STROKE CARE</b>													
90% of Time on a Stroke Unit	Trust Rating	>80%	68.0%	76.9%	77.8%	54.5%	81.3%	71.4%	84.6%	64.7%	77.8%	73.2%	
TIA Patients Assessed & Treated 24 Hours	Trust Rating	> 60%	-	-	-	-	-	-	-	-	-	-	
<b>HOSPITAL CARE</b>													
Delayed Transfers of Care	Trust Rating	=< 5%	1.8%	1.0%	1.4%	2.0%	2.3%	1.2%	1.7%	2.1%	1.9%	1.7%	
Emergency Readmissions Within 30 Days	Trust Rating	6.4%	7.2%	8.0%	7.6%	7.7%	8.5%	6.55%	8.0%	7.8%	-	7.8%	
VTE Risk Assessment	Trust Rating	95%	96.90%	97.07%	97.29%	96.60%	96.91%	95.81%	96.60%	96.10%	94.06%	96.37%	
<b>HOSPITAL ACQUIRED INFECTIONS</b>													
MRSA Bacteraemia	Cumulative Trust Rating	0	0	0	0	0	0	0	0	0	0	0	
Clostridium Difficile	Cumulative Trust Rating YTD	8	2	0	1	0	2	0	2	1	2	10	
MRSA Screening - Elective	Trust Rating	100%	73.7%	80.6%	79.8%	74.4%	86.7%	75.7%	89.8%	73.3%	76.4%	79.1%	
MRSA Screening - Non Elective	Trust Rating	100%	76.9%	75.8%	71.0%	72.1%	67.3%	70.0%	68.0%	77.1%	74.9%	72.6%	

### Patient Experience

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	YTD	Penalties YTD
Mixed Sex Accomodation Breaches	Trust Rating	0	0	0	1	0	0	0	0	0	0	1	£250
Publication of Formulary	Trust Rating												
Duty of Candour	Trust Rating												
Cancellation of Elective Operation	Trust Rating	0	0	6	2	5	2	4	3	4	1	27	
Cancellation of Elective Operation - No Date Offered Within 28 Days	Trust Rating	0	0	0	0	0	0	0	0	0	0	0	
Cancellation of Elective Operations - Urgent Ops Cancelled 2nd Time	Trust Rating	0	0	0	0	0	0	0	0	0	0	0	
<b>MATERNITY CARE</b>													
Women Seen By Midwife Before 13 Weeks	Trust Rating	>90%	88.6%	93.8%	87.2%	93.5%	91.1%	87.1%	90.6%	93.6%	93.3%	90.8%	
Women Smoking Through Pregnancy	Trust Rating	< 24.5%	27.0%	25.8%	20.9%	22.5%	22.3%	15.5%	14.7%	14.2%	19.3%	20.1%	
Mothers Initiating Breastfeeding	Trust Rating	> 56.8%	46.0%	54.5%	56.0%	57.0%	49.1%	55.9%	43.2%	55.7%	54.6%	52.6%	
Smoking At Time Of Delivery (SSATOD) - Provider Service Qtr Position		< 24.5%	-	-	29.2%	-	-	28.5%	-	-	-	24.6%	
Smoking At Time Of Delivery (SSATOD) - ST Residents Qtr Position		< 24.5%	-	-	25.8%	-	-	23.3%	-	-	-	24.7%	
<b>CHOOSE &amp; BOOK</b>													
1st Outpatient Appointment Booked on C&B	Trust Rating	90%	89.0%	80.0%	-	-	-	-	-	-	-	84.5%	
Bookings With Named Consultant Team	Including 2 Week Wait	80%	82.0%	78.4%	-	-	-	-	-	-	-	80.2%	
Bookings With Named Consultant Team	Excluding 2 Week Wait	100%	89.0%	85.2%	-	-	-	-	-	-	-	87.1%	
Slot Utilisation Issues	Trust Rating	=< 4%	7.8%	10.0%	-	-	-	-	-	-	-	0.0%	

### Contract Monitoring Metrics

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	YTD	Penalties YTD
<b>IAPT PERFORMANCE</b>													
Depression/Anxiety Access to IAPT	Trust Rating	YTD 11.25%	1.57%	1.41%	1.60%	1.60%	1.18%	1.42%	1.72%	1.54%	1.08%	13.13%	
Completed Treatment and Moving to Recovery	Trust Rating	50.0%	52.94%	53.13%	53.88%	54.74%	52.35%	53.89%	54.91%	50.73%	52.79%	53.31%	
% Patients Seen Within 6 Weeks	Trust Rating	75.0%	75.90%	72.50%	78.00%	82.80%	82.40%	77.60%	79.00%	76.60%	72.20%	77.44%	
% Patients Seen Within 18 Weeks	Trust Rating	95.0%	98.50%	99.60%	99.80%	99.70%	99.40%	99.80%	100%	99.7%	99.3%	99.53%	
<b>CONTINUING HEALTHCARE PERFORMANCE</b>													
% of new assessments undertaken within 28 days	Trust Rating	95%	54.17%	60.29%	71.43%	67.14%	87.78%	94.64%	96.81%	99.07%	100%	78.37%	
% of 3 month reviews undertaken within 28 days	Trust Rating	95%	100%	98.04%	100%	100%	100%	100%	93.22%	98.25%	100%	98.90%	
% of additional reviews undertaken within 28 days of plan	Trust Rating	95%	-	-	0%	25.00%	36.36%	33.33%	7.14%	20.00%	0.00%	18.97%	
Number of Annual Reviews Carried Out	Trust Rating	0	58	64	45	68	64	46	85	79	76	585	
% of annual reviews undertaken within 28 days	Trust Rating	95%	83.93%	74.60%	37.78%	79.41%	100%	91.30%	84.71%	77.22%	36.84%	74.23%	
<b>FLU VACCINATIONS</b>													
Housebound Patients Vaccinated by 31 December	Trust Rating	> 90%	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	88.16%	#DIV/0!	

### Data Quality

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	YTD	Penalties YTD
<b>COMMUNITY INFORMATION DATASET COMPLETENESS</b>													
Overall Position	Trust Rating	>50%											
<b>ACUTE INFORMATION DATASET COMPLETENESS</b>													
Completion of a valid NHS Number field in A&E	Trust Rating	95%	98.11%	97.97%	99.03%	98.72%	98.74%	98.30%	98.35%	98.55%	98.74%	98.50%	
Completion of valid NHS Number field in acute data sets	Trust Rating	99%	99.59%	99.78%	99.66%	99.80%	99.50%	99.56%	99.50%	99.77%	99.78%	99.66%	
<b>IAPT INFORMATION DATASET COMPLETENESS</b>													
Completion of IAPT Minimum Data Set	Trust Rating	90%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

### Contract Activity Metrics

Metric		YTD Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	YTD	Penalties YTD
<b>Emergency Activity</b>													
A&E Attendances	Trust Contract	45736	5175	5179	5340	5225	4995	5125	5261	5176	5081	46557	
All Non Elective Spells	Trust Rating	11455	1333	1315	1327	1353	1275	1396	1383	1408	1502	12292	
Emergency Activity	Trust Rating	9098	1066	1029	1033	1040	1001	1120	1120	1136	1213	9758	
Short Stay Activity	Trust Rating	630	86	90	81	92	92	79	85	73	58	736	
Non Elective	Trust Rating	1727	181	196	213	221	182	197	178	199	231	1798	
Ambulatory Care	Trust Rating	2923	299	266	251	363	309	288	283	290	319	2668	
<b>Elective Care Activity</b>													
Total Activity	Trust Rating	11159	1052	1041	1177	1188	1045	1194	1228	1213	1096	10234	
Inpatient Activity	Trust Rating	1284	94	125	132	131	117	128	117	125	116	1085	
Planned Same Day Activity	Trust Rating	9875	958	916	1045	1057	928	1066	1111	1088	980	9149	
<b>Outpatient Activity</b>													
New Attendances	Trust Rating	19992	2197	2020	2508	2166	2044	2418	2258	2531	2067	20209	
Multi Professional Attendances	Trust Rating	780	77	90	65	107	65	77	72	67	68	688	
Follow Up Attendances	Trust Rating	35152	3968	3802	4364	4171	3516	4449	3969	4173	3650	36062	
Follow Up Multi Professional Attendances	Trust Rating	2466	253	240	206	211	183	226	227	204	197	1947	
Procedures	Trust Rating	2834	355	321	341	355	268	363	294	316	360	2973	
Outpatient Non Face to Face	Gastroenterology	41	3	6	5	4	1	3	1	3	3	29	
New to Follow Up Ratio	Trust Rating	2.3	2.56	2.58	2.39	2.66	2.48	2.49	2.43	2.31	2.57	-	