

Title	Performance Report February 2016
File location	Sharepoint site : Assurance Framework/Performance/Performance Board reports
Meeting	Board of Directors
Date	March 2016

Executive Summary

The Trust is reporting a deficit for the ten months to 29 February 2016 of £8,243k, a deterioration of £494k. The revised internal plan anticipated a deficit of £5,167k, excluding £12,657k of income in relation to the transfer of St Benedict's Hospice which is expected to transfer to the Trust on 31 March 2016, giving an adverse variance of £3,078k at the end of 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. A significant amount of information relating to our recovery plans, the introduction of the PMO and development of CIP for 2016/17 has been supplied to Monitor.

The year end forecast outturn now stands at a deficit of £9,166k before provisions for equal pay claims and redundancies and takes account of year end agreements with South Tyneside and Sunderland CCGs.

Type 1 attendances to A&E are 2.9% above 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:

- 1375 spells (9.9%) above plan for all non-elective spells
- Emergency activity is 1125 spells (10.2%) above plan. The significant area of underperformance is Paediatrics (-166) while General Medicine is significantly over performing (1241)
- Short stay activity is 142 spells (18.6%) above plan
- Non elective activity itself is 107 spells (5.1%) above plan
- Ambulatory care is 261 spells (7.4%) below plan

Elective activity is 1100 spells (8.1%) below plan for the year to date. T&O (-539), General Surgery (-498) Clinical Haematology (-206) and Medical Oncology (-250) are the areas of significant underperformance against target.

Outpatient activity for the year to date:

- 396 (1.6%) above plan for attendances, with follow up attendances at 603 (1.4%) above plan. The significant areas of underperformance on attendances are T&O (-499), Gastroenterology (-191), and Ophthalmology (-250). Cardiology (1155) and Respiratory (384) are the areas of significant over performance.

Following the outcome of a number of appeals Clostridium Dificile is currently reported as 6 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.

Recommendation				
The Board is requested to :				
<ul style="list-style-type: none"> • review and comment upon the integrated performance report • approve the mitigating actions proposed to improve performance 				
Report Author	Malcolm Walker			
Executive Director/ Sponsor	Mike Robson/Ian Frame			
Purpose of paper	Information	x	Discussion	x
	Decision		Assurance	x
	Specific action			
Implications	Staffing			
	Finance		x	
	Legal			
	Public engagement			
	Partnership		x	
	Communication			
	Equality & Diversity			
	Clinical		x	
	Risk assessment and mitigation (include risk register reference if appropriate)			
Link to STFT Business Plan	Performance			
Link to CQC outcome	16			
Link to Board Assurance Framework	Provides assurance of performance against contract			
Link to Strategic Risk Register				

REPORT TO BOARD OF DIRECTORS INTEGRATED PERFORMANCE REPORT

1.0 FINANCIAL PERFORMANCE

1.1 Overview

The Trust is reporting a deficit for the ten months to 29 February 2016 of £8,243k, a deterioration of £494k. The revised internal plan anticipated a deficit of £5,167k, excluding £12,657k of income in relation to the transfer of St Benedict's Hospice, which is expected to transfer to the Trust on 31 March 2016, giving an adverse variance of £3,078k at the end of 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. A significant amount of information relating to our recovery plans, the introduction of the PMO and development of CIP for 2016/17 has been supplied to Monitor and feedback is awaited.

2 Variance from Plan

When compared to the internal revised plan the adverse variance of £3,075k can be analysed as follows:

	£000	£000
Income above plan (excluding Hospice transfer)		1,247
<u>Pay</u>		
Medical overspend	(884)	
Nursing underspend	557	
Other underspend	215	
CIP not achieved	(4,183)	
		(4,295)
 <u>Non Pay</u>		
Overspend	(2,939)	
CIP over achieved	902	(2,037)
Trustwide CIP overachieved		393
Budgetary Reserves not yet allocated		1,328
Capital charges etc underspend		289
		(3,075)

The financial position has deteriorated by £494k in the month. This includes medical staffing overspending by a further £100k offset by continued underspend on Nursing (£72k) despite continued reliance on agency staffing (up £94k to £868k).

The overall Cost Improvement Programme is £2,887k worse than originally planned and continues to reflect the original 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 underperformance in month contributes £278k to the variance.

The **income** variance of £1,247k above plan excluding the transfer of the Hospice is an increase of £276k in month and can be analysed:

	Variance to Month 11 £000	In Month Movement £000
<u>Income</u>		
Elective In Patients	(654)	(79)
Day Cases	(699)	(32)
Non Elective/Emergency	2,759	548
Out Patients	33	18
A & E	337	49
Community and other income	(529)	(229)
Income above plan	1,247	276

Elective income, both in patients and day cases, remains below plan by £1,353k which is a further deterioration of £110k, it includes the impact of cancelled operations due to the Junior Doctors strike. Non elective income was above plan in month by £548k which is a similar level to January and reflects the pressure the Trust has been under since Christmas. This over performance has been reflected within the year end settlement with South Tyneside CCG. The worsening in month for all other income of £229k reflects a number of movements including an increase in the reduction for non delivery of CQUIN targets part of which had previously been included in the downside risks of the forecast outturn.

3 Cost Improvement Programme

As reported in previous months, the annual Cost Improvement Programme target included within the annual plan amounts to £12,742k and was profiled for majority delivery in the second half of the year to reflect Phase 3 of PERFORM. The target for the eleven months to February is delivery of £11,293k, however, only £8,406k has been transacted to date giving a variance of £2,887k (a worsening of £278k in month) included within the overall variance from plan. The schemes transacted to date have a total value of £9,168k in 2015/16 of which 52% is recurrent and represents 72% of the annual target.

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 £9,771k, a shortfall of £2,981k against the original target, meaning £602k of further schemes must be delivered in March. FRMG have reviewed the main elements and are confident of this level of delivery.

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.		42,813	8,599	51,412	122,688
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.		208,674	1,242,332	1,451,006	303,444
Steps needed to realise CIP scheme complete, no remaining risks of non delivery.		500,318	746,983	1,247,301	508,977
Delivered		3,917,464	3,104,115	7,021,579	4,572,591
		4,669,269	5,102,029	9,771,298	5,507,700

4 Cash & Capital Expenditure

Cash balances are £13,501k which is an increase of £1.9m in the month, mainly due to delayed capital and NHS Property payments which are expected to be paid in March. The current forecast is that the Trust will close the year with a cash balance of £9.2m.

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 11 is 97%. 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 31 March 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.

Baseline forecasts are based upon extrapolations of the most up to date period and, therefore, reflect the positive performance in income and expenditure in month 11. The baseline forecast is now a deficit of £7,334, however, this does not yet reflect all of the anticipated elements of year end agreements with Sunderland and South Tyneside CCGs.

In particular discussions with South Tyneside CCG have been based upon contractual performance up to Month 10 and CQUIN performance to Month 09. The previous assumption of the reduction of funding due to non delivery of CQUIN targets was significantly understated, resulting in the CCG retaining more funds than included in the Trust's forecasts to date (£300k), however, the CCG have increased the year end offer by an equivalent amount to reflect some of the further increase in activity in Month 11, although not the full £548k we were over plan.

As we are so close to the year end, all elements of known risk are now included in the forecast outturn. In particular the forecast includes an allowance for increased cover for bad debts reflecting detailed reviews within the Finance Department including continued delays and queries in settlement of the Radiology flooding insurance claim. The forecast outturn before provisions for redundancy and equal pay claims, further details of which will be provided to the Board, is now £9,166k. The application for funding from the ITFF to support the payment of redundancies as approved by the Board has been submitted and the outcome is awaited.

Details of the current forecast outturn are given below:-

	Likely £000
Underlying projected deficit	(7,334)
Adjust forecast over performance for year end deal	(230)
Agreed impact of CQUIN	(450)
Risk to Sunderland OOH funding	0
Sunderland MSK under performance	(197)
Pathology pressure from GFT	(202)
Tribunal costs	(102)
PwC outstanding invoice Phase 3	(117)
Aged debt review	(534)
Forecast Outturn M11	(9,166)
Redundancy provision	(1,611)
Equal Pay Costs	(400)
Revised Forecast Outturn M11	(11,177)

2.0 CONTRACT PERFORMANCE

The main features of contractual performance to date are:

- Type 1 attendances to A&E are 2.9% above 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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3.0 WORKFORCE

Though compliance figures for Fire Training are higher than previous years, they, are not on schedule to meet the end of March 2016 target. Following the introduction of the local Information Governance training tool and greater scrutiny of response rates there has been a significant improvement in compliance in recent months. By mid March compliance stood at 89%. New arrangements will be in place from 1 April 2016 for all statutory and mandatory training.

4.0 INFECTION CONTROL

Following the outcome of a number of appeals Clostridium Dificile is currently reported as 6 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.

5.0 RECOMMENDATIONS

The Board is requested to:

- review and comment upon the integrated performance report alongside the detailed reports already circulated

Mr M P Robson
Executive Director of Finance & Corporate Governance

21st March 2016

EXCEPTION ANALYSIS 1 – FINANCIAL PERFORMANCE

COMPLIANCE RISK RATING	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	
Financial Sustainability Risk Rating	4	3	3	3	2	2	2	2	2	2	2	2	
Governance Risk Rating	Green											Under Review	
FINANCIAL TARGETS	YTD Budget	YTD Apr	YTD May	YTD Jun	YTD Jul	YTD Aug	YTD Sep	YTD Oct	YTD Nov	YTD Dec	YTD Jan	YTD Feb	
Total Income £'000	180,538	15,788	31,405	47,971	64,254	80,121	96,478	113,473	130,503	147,463	164,684	181,784	Excl. St Benedicts
Expenditure - Pay Costs £'000	136,822	12,816	25,643	38,231	50,750	63,049	75,610	88,527	101,162	113,940	126,627	139,456	
Expenditure - Non Pay Costs £'000	42,605	4,035	7,696	11,760	15,799	19,652	23,513	27,678	31,810	36,228	40,386	44,637	
EBITDA £'000	13,768	(1,063)	(1,934)	2,020	(2,294)	(2,580)	(2,644)	(2,732)	(2,469)	(2,705)	(2,330)	(2,309)	
Net Surplus / (Deficit) £'000	(5,158)	(1,622)	(3,052)	(3,698)	(4,536)	(5,386)	(5,979)	(6,565)	(6,809)	(7,572)	(7,741)	(8,234)	
Liquidity Ratio		13.8	8.8	7.5	9.0	1.2	11.2	8.3	6.6	8.8	8.1	5.8	
Capital Servicing Capacity		1.6	(1.4)	(3.7)	(3.2)	(2.9)	(2.6)	(2.5)	(2.0)	(1.9)	(1.4)	(1.3)	
Total Capital Expenditure £'000	9,365	85	659	1,301	2,095	3,251	3,935	5,222	6,288	7,281	7,946	9,118	
Total CIP Achieved £'000	11,293	331	429	1,290	1,852	2,581	3,404	4,178	5,340	6,342	7,253	8,406	
Analysis	Mitigating Measures						Gaps in Assurance						
	-												
	-												
	-												
	-												

EXCEPTION ANALYSIS 2 – WORKFORCE PERFORMANCE

WORKFORCE TARGETS	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	YTD
Turnover Rates (FTE %)	<13.5%	0.86%	0.93%	0.76%	0.54%	2.10%	1.09%	0.87%	0.99%	0.80%	1.14%	0.81%	10.89%
Stability Rates (FTE %)	>90%	89.9%	89.6%	89.7%	90.3%	90.1%	90.0%	90.0%	90.1%	90.0%	88.9%	89.5%	89.8%
Sickness Absence Rates	<4.8%	6.2%	6.1%	5.9%	5.7%	5.2%	5.1%	6.1%	5.9%	6.0%	6.3%		5.7%
KSF Reviews (Within 12 Months)	>95%								57%	56%	57%	58%	58%
Fire Training	>95%	10.0%	16%	22%	29%	34%	42%	49%	54%	58%	64%	70%	70%
Information Governance Training	>95%	8.0%	15%	22%	27%	33%	37%	44%	48%	53%	62%	76%	76%

Analysis**Mitigating Measures****Gaps in Assurance**

Though compliance figures for Fire Training are higher than previous years, they, together with Information Governance training figures are not on schedule to meet the end of March 2016 target.

KSF compliance well short of target

activity underway to ease access to these two training modules and increase communication and monitoring to enable the Trust to reach this end of year target. New arrangements will be in place from 1 April 2016.

New easier access arrangements are now in place and sanctions for non compliance are being agreed with Staff Side in readiness for 2016/17.

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	Jan-16	Feb-16	YTD
MRSA Bacteraemia	0	0	0	0	0	0	0	0	0	0	0	0	0
Clostridium Difficile	8	2	0	1	0	2	0	0	1	0	0	0	6

Analysis

Mitigating Measures

Gaps in Assurance

Following the outcome of a number of appeals Clostridium Dificile is currently reported as 6 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.

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INTEGRATED PERFORMANCE DASHBOARD - FEBRUARY 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	Jan-16	Feb-16	YTD	Penalties YTD
A&E CLINICAL INDICATORS															
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%	91.63%	88.28%	90.85%	93.27%	
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%	90.04%	92.20%	93.67%	£ 128,880
A&E Trolley Waits	A&E Trolley Waits >12 Hours	0	0	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	39	34		
Time to Treatment - Median	A&E	< 60 mins	50	46	49	50	44	46	50	52	56	58	58		
CANCER TARGETS															
14 Day	Trust Rating	93%	96.7%	97.5%	96.7%	96.8%	97.5%	97.0%	99.0%	96.7%	95.0%	96.7%	97.7%	97.0%	
31 Day - 1st Treatment	Trust Rating	96%	100%	100%	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%	100%	100%	100%	99.5%	
31 Day - Subsequent Treatment (Drugs)	Trust Rating	98%	100%	100%	100%	95.2%	100%	100%	100%	100%	100%	100%	100%	99.5%	
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%	92.5%	73.7%	77.1%	85.2%	£1,000
62 Day - Screening Programmes	Trust Rating	90%	100%	100%	N/A	100%	50%	N/A	N/A	N/A	N/A	100%	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	100%	100%		
REFERRAL TO TREATMENT TIMES															
Incomplete Pathways	Trust Rating	>92%	98.5%	96.5%	98.0%	96.0%	96.0%	96.3%	97.3%	96.2%	96.1%	96.0%	95.6%	96.6%	
Long Waits > 36 Weeks	Trust rating	0	0	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	0	0	
Diagnostic 6 Week Wait	Trust Rating	>99%	100%	99.9%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.00%	

Patient Safety

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	YTD	Penalties YTD
A&E CLINICAL INDICATORS															
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%	8.78%	7.53%	8.39%	
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%	2.55%	2.36%	2.06%	
AMBULANCE HANDOVER															
% Handover Time Recorded	Trust Rating	90%	67.3%	73.4%	71.3%	63.7%	65.3%	72.0%	68.6%	66.8%	60.9%	57.9%	51.2%	65.3%	
Ambulance Handover > 15 minutes	Trust Rating		46	34	36	47	29	32	35	37	32	69	42	439	
Ambulance Handover > 30 minutes	Trust Rating	0	9	2	6	2	2	0	7	5	10	22	24	89	£17,800
Ambulance Handover > 60 minutes	Trust Rating	0	2	1	0	0	0	0	2	0	0	5	2	12	£12,000
Number of Diverts/Deflects Initiated	Trust Rating	0	1	0	7	0	0	9	2	4	3	-	-	26	£52,000
Number of Diverts/Deflects Accepted	Trust Rating		5	6	4	0	0	2	6	0	1	-	-	24	-£36,000
FRACTURED NECK OF FEMUR															
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%	69.6%	65.0%	80.0%	73.5%	
STROKE CARE															
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%	72.7%	62.1%	71.8%	
TIA Patients Assessed & Treated 24 Hours	Trust Rating	> 60%	-	-	-	-	-	-	-	-	-	-	-	-	
HOSPITAL CARE															
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%	1.1%	2.4%	1.7%	
Emergency Readmissions Within 30 Days	Trust Rating	6.4%	7.2%	8.0%	7.6%	7.7%	8.5%	6.55%	7.9%	7.8%	8.0%	7.5%	-	7.8%	
VTE Risk Assessment	Trust Rating	95%	96.90%	97.07%	97.29%	96.60%	96.91%	95.81%	96.60%	96.19%	95.48%	96.53%	95.64%	96.46%	
HOSPITAL ACQUIRED INFECTIONS															
MRSA Bacteraemia	Cumulative Trust Rating	0	0	0	0	0	0	0	0	0	0	0	0	0	
Clostridium Difficile	Cumulative Trust Rating YTD	8	2	0	1	0	2	0	0	1	0	0	0	6	
MRSA Screening - Elective	Trust Rating	100%	73.7%	80.6%	79.8%	74.4%	86.7%	75.7%	89.8%	73.3%	76.4%	71.7%	85.4%	79.0%	
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%	73.6%	71.3%	72.6%	

Patient Experience

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	YTD	Penalties YTD
Mixed Sex Accomodation Breaches	Trust Rating	0	0	0	1	0	0	0	0	1	0	0	1	3	£750
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	26	7	60	
Cancellation of Elective Operation - No Date Offered Withi	Trust Rating	0	0	0	0	0	0	0	0	0	0	0	0	0	
Cancellation of Elective Operations - Urgent Ops Cancelled	Trust Rating	0	0	0	0	0	0	0	0	0	0	0	0	0	
MATERNITY CARE															
Women Seen By Midwife Before 13 Weeks	Trust Rating	>90%	88.6%	93.8%	87.8%	92.9%	91.1%	87.0%	90.6%	93.6%	95.1%	93.0%	84.6%	90.9%	
Women Smoking Through Pregnancy	Trust Rating	< 24.5%	27.0%	25.8%	20.9%	22.5%	22.3%	18.1%	15.6%	17.0%	21.0%	27.1%	23.5%	21.8%	
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%	39.0%	42.4%	50.5%	
Smoking At Time Of Delivery (SSATOD) - Provider		< 24.5%	-	-	29.2%	-	-	28.5%	-	-	18.0%	-	-	25.2%	
Smoking At Time Of Delivery (SSATOD) - ST Residents		< 24.5%	-	-	25.8%	-	-	23.3%	-	-	-	-	-	24.7%	
CHOOSE & BOOK															
1st Outpatient Appointment Booked on C&B	Trust Rating	90%	89.0%	80.0%	90.0%	-	-	-	-	-	-	-	-	86.3%	
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%	11.7%	10.2%	8.5%	7.1%	8.0%	-	-	-	-	9.1%	

Contract Monitoring Metrics

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	YTD	Penalties YTD
IAPT PERFORMANCE															
Depression/Anxiety Access to IAPT	Trust Rating	YTD 13.75%	1.57%	1.41%	1.60%	1.60%	1.18%	1.43%	1.70%	1.49%	1.06%	1.69%	1.35%	16.08%	
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%	52.75%	54.85%	51.49%	53.30%	
% 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%	50.10%	56.10%	73.02%	
% 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%	98.5%	100%	99.48%	
CONTINUING HEALTHCARE PERFORMANCE															
% of new assessments undertaken within 28 days	Trust Rating	95%	53.72%	60.29%	71.43%	67.83%	87.78%	94.69%	96.81%	99.07%	100%	96.51%	96.15%	80.89%	
% of 3 month reviews undertaken within 28 days	Trust Rating	95%	100%	98.04%	100%	100%	100%	98%	93.22%	98.21%	100%	100%	100%	98.93%	
% of additional reviews undertaken within 28 days of p	Trust Rating	95%	-	-	0%	25.00%	36.36%	33.33%	7.14%	20.00%	0.00%	0.00%	0.00%	17.19%	
Number of Annual Reviews Carried Out	Trust Rating	0	58	64	45	68	64	46	86	80	80	65	39	695	
% of annual reviews undertaken within 28 days	Trust Rating	95%	83.93%	74.60%	37.78%	79.41%	100%	91.30%	84.88%	77.50%	35.00%	81.54%	94.87%	75.72%	
FLU VACCINATIONS															
Housebound Patients Vaccinated by 31 December	Trust Rating	> 90%	n/a	n/a	n/a	n/a	n/a	n/a	n/a	88.16%	96.02%	96.02%	96.02%		

Data Quality

Metric		Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	YTD	Penalties YTD
COMMUNITY INFORMATION DATASET COMPLETENESS															
Overall Position	Trust Rating	>50%													
ACUTE INFORMATION DATASET COMPLETENESS															
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%	99.00%	98.87%	98.58%	
Completion of valid NHS Number field in acute data set	Trust Rating	99%	99.59%	99.78%	99.66%	99.80%	99.50%	99.56%	99.50%	99.77%	99.78%	99.78%	99.83%	99.69%	
IAPT INFORMATION DATASET COMPLETENESS															
Completion of IAPT Minimum Data Set	Trust Rating	90%	100%	100%	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	Jan-16	Feb-16	YTD	Penalties YTD
Emergency Activity															
A&E Attendances	Trust Contract	55450	5175	5179	5340	5225	4995	5125	5261	5183	5093	5385	5072	57033	
All Non Elective Spells	Trust Rating	13933	1332	1314	1329	1353	1275	1396	1383	1411	1499	1523	1493	15308	
Emergency Activity	Trust Rating	11068	1065	1029	1033	1040	1001	1120	1120	1139	1200	1217	1229	12193	
Short Stay Activity	Trust Rating	766	86	89	83	92	92	79	85	73	77	84	68	908	
Non Elective	Trust Rating	2100	181	196	213	221	182	197	178	199	222	222	196	2207	
Ambulatory Care	Trust Rating	3545	299	266	251	363	309	288	283	290	320	307	308	3284	
Elective Care Activity															
Total Activity	Trust Rating	13527	1052	1041	1177	1188	1045	1194	1228	1220	1100	1107	1075	12427	
Inpatient Activity	Trust Rating	1552	94	125	132	131	117	128	117	125	117	81	118	1285	
Planned Same Day Activity	Trust Rating	11974	958	916	1045	1057	928	1066	1111	1095	983	1026	957	11142	
Outpatient Activity															
New Attendances	Trust Rating	24107	2197	2020	2508	2166	2044	2418	2258	2534	2057	2098	2203	24503	
Multi Professional Attendances	Trust Rating	940	77	90	65	107	65	77	72	67	68	86	59	833	
Follow Up Attendances	Trust Rating	43013	3968	3802	4364	4171	3516	4449	3969	4204	3665	3861	3647	43616	
Follow Up Multi Professional Attendances	Trust Rating	3018	253	240	206	211	183	226	227	204	197	253	172	2372	
Procedures	Trust Rating	3496	355	321	341	355	268	363	294	318	372	372	356	3715	
Outpatient Non Face to Face	Gastroenterology	50	3	6	5	4	1	3	1	3	3	1	3	33	
New to Follow Up Ratio	Trust Rating	2.3	2.56	2.58	2.39	2.66	2.48	2.48	2.43	2.31	2.57	2.48	2.32	-	