

<b>Title</b>	Performance Report August 2014
<b>File location</b>	Sharepoint site : Assurance Framework/Performance/Performance Board reports
<b>Meeting</b>	Board of Directors
<b>Date</b>	30 <sup>th</sup> September 2014

### Executive Summary

In common with the NHS as a whole the Trust continues to operate within a challenging financial environment. Our focus remains the delivery of safe, high quality services whilst ensuring we tightly manage resources and continue to improve efficiency and effectiveness. The financial challenges we are facing have been consistent through the year:

- Reduced income due largely to the successes of PERFORM projects in reducing emergency admissions to hospital
- the unusual scale of the expenditure pressures arising from the need to maintain quality clinical services through locum and agency staffing
- the scale of the Cost Improvement Programme at 7.5% of turnover, which the Trust continues to make excellent progress in delivering. Currently the programme stands at £10.5m (around 5% of turnover) which is excellent at this point in the year and is equivalent to more than 93% of last years full performance

The deficit at the end of Month 5 stands at £3,915k; this compares to a projected deficit of £431k, giving an adverse variance from plan of £3,484k. The Trust continues to have strong liquidity and, therefore, the overall Continuity of Service Risk Rating remains at 3.

Attendances to A&E and the minor injury units decreased in June, principally due to the ending of the Blaydon contract at the end of May.

Emergency contract activity for the year to date shows

- 201 spells (5%) below plan for all non-elective spells
- Emergency activity is 184 spells (5.8%) below plan. The significant areas of underperformance are Orthopaedics (-92), Diabetic Medicine (-30) and General Medicine (-36)
- Short stay activity is 2 spells (0.9%) below plan
- Non elective activity itself is 15 spells (2.5%) below plan
- Ambulatory care is 372 spells (49.4%) above plan

Elective activity is 150 spells (3.8%) below plan for the year to date. The significant area of underperformance is Orthopaedics (-133). It should be noted that there are issues being investigated with regard to coding / counting i.e. General Surgery is -237 and Gastroenterology +170; Medical Oncology is -371 and Chemo Delivery is +473.

Outpatient activity for the year to date:

- 142 spells (2%) above plan for attendances – with follow up attendances at 680 spells (5.1%) below plan (although the New to review ratio is still above target).
- The significant areas of underperformance on attendances are A&E (-100) and ENT (-45).

The turnover rate in August was 2.7%, due to transfers of staff from the Sunderland Minor Injury Units.

There were no cases of MRSA or clostridium difficile in August.

### Recommendation

The Board is requested to :

- review and comment upon the integrated performance report
- approve the mitigating actions proposed to improve performance

<b>Report Author</b>	Malcolm Walker			
<b>Executive Director/ Sponsor</b>	Mike Robson / Ian Frame / Steve Williamson			
<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 AUGUST 2014

## 1 FINANCIAL PERFORMANCE

### 1.1 Overview

In common with the NHS as a whole the Trust continues to operate within a challenging financial environment. Our focus remains the delivery of safe, high quality services whilst ensuring we tightly manage resources and continue to improve efficiency and effectiveness. The financial challenges we are facing have been consistent through the year:

- Reduced income due largely to the successes of PERFORM projects in reducing emergency admissions to hospital
- the unusual scale of the expenditure pressures arising from the need to maintain quality clinical services through locum and agency staffing
- the scale of the Cost Improvement Programme at 7.5% of turnover, which the Trust continues to make excellent progress in delivering. Currently the programme stands at £10.5m (around 5% of turnover) which is excellent at this point in the year and is equivalent to more than 93% of last years full performance

### 1.2 Performance to date

The deficit at the end of Month 5 (MO5) stands at £3,915k; this compares to a projected deficit of £431k, giving an adverse variance from plan of £3,484k. The Trust continues to have strong liquidity and, therefore, the overall Continuity of Service Risk Rating remains at a 3. The adverse variance from plan (after adjusting for the delay in the St Benedict's transfer) can be analysed as follows and we have highlighted actions being taken:

	<b>£000</b>	
Income below plan	(1,659)	Para 6 below
Pay overspend (incl CIP)	(1,632)	Para 8 below
Non pay overspend (incl CIP)	(1,578)	Para 9 below
Trustwide CIP, Reserves	1,385	
	(3,484)	
	(3,484)	

**Income – (£1,659k):** Income is below plan in the main due to elective income by £733k and non elective income by £951k. Both elements continue to underperform each month. Negotiations continue with South Tyneside CCG which has suggested a full year agreement is established to give both parties certainty about all elements of activity and income.

**Cost Improvement Programme:** Overall year to date delivery of CIP is £3,510k at MO5 which is £794k below the planned level. Currently divisional CIPs are under delivering by £1,571k in both pay (£707k) and non pay (£864k) schemes this is offset by an over delivery of £822k on Trust wide schemes. The full year effect of the currently delivered CIP is £5,036k of which 79.2% is recurrent. Details are given below of the CIP for the remainder of the year which amounts to £10,522k.

**Pay Expenditure – (£1,632k)** Significant work has been carried out to allocate reserves to medical and nursing budgets in MO5 to establish the true overspends against plan. As a result, medical staffing is now overspent by £701k and nursing by £218k. The short fall on delivered CIP for pay schemes included in the overall pay variance across the Trust is £707k. A detailed action plan has been drawn up to address medical pressures on a post by post basis. Nursing establishments will shortly complete a process of review, e-Rostering has been realigned and the Bank Module implemented to ensure that managers have accurate information and we are confident nursing will now be managed within budget.

**Non Pay Expenditure – (£1,578k):** FRMG and Executive Board have reviewed the major areas of variance with the lead Directors (Pathology, St Benedict's, IT contracts and equipment, office supplies) and are assured that corrective action is being taken. The shortfall of delivered CIP for non pay items included in the above variance is £863k.

### 1.3 Cost Improvement Programme

The CIP target has been increased by £128k to reflect the removal of contribution from the loss of the Sunderland Urgent Care Unit tender. The revised target is now £13,975k. The CIP excludes the £878k which was planned to be achieved through revenue generation schemes as a result of the PwC Perform work in T&O and has been included within the income plan for the year.

Annual performance is an achievement of £6,321k against a target of £13,975k, with a year to date achievement of £3,510k, compared to a year to date target of £4,259k, resulting in an underachievement of £749k. 79.2% of the CIP is being delivered recurrently.

The current forecast for CIP: delivery for this stage of the year in 2014/15 stands at £10,522k which is excellent when compared to the full programme for 2013/14 which was £11.75m.

## 1.4 Cash & Capital Expenditure

Cash balances at the end of August stood at £13.0m with a cash outflow for the year to date of £1,938k, compared to a planned inflow of £371k being driven in the main by the continuing deficit. Capital expenditure for the period to 31 August 2014 stood at £994k compared to the reprofiled capital programme target of £1.096k, a variance of £102k.

### 1.0 CONTRACT PERFORMANCE

Attendances to A&E and the minor injury units in August were approximately 10% lower than in July. This was the final month for the activity of the Sunderland MIUs to be reported following the loss of the contract, and from September onwards only A&E attendances will be included in this report.

Emergency contract activity for the year to date shows:

- 375 spells (5.4%) below plan for all non-elective spells – a small deterioration on the position at the end of July
- Emergency activity is 302 spells (5.7%) below plan. The significant areas of underperformance remain Orthopaedics (-167), Diabetic Medicine (-61) and Geriatric Medicine (-45)
- Short stay activity is 8 spells (2.1%) below plan
- Non elective activity itself is 64 spells (6.6%) below plan
- Ambulatory care is 333 spells (23.4%) above plan

Elective activity is 300 spells (4.6%) below plan for the year to date, which is a deterioration by 3.4% from the end of July position. An area of underperformance is Orthopaedics (-195). It should be noted that a coding issue has been identified affecting General Surgery (-485) and Gastroenterology (+310) for the quarter 1 figures, which the service has corrected from June onwards.

Outpatient activity for the year to date:

- 56 spells (0.5%) below plan for attendances with follow up attendances at 1171 spells (5.4%) below plan; both areas showing deterioration on the end of July position. The significant areas of underperformance on attendances are A&E (-213) and Paediatrics (-155). Cardiology, Respiratory and Orthopaedics are the areas of significant over performance.

### 3.0 WORKFORCE

The turnover rate in August was 2.7%, due to transfers of staff from the Sunderland Minor Injury Units.

### 4.0 INFECTION CONTROL

There were no cases of MRSA or clostridium difficile in August.

## **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**

25<sup>th</sup> September 2014

## EXCEPTION ANALYSIS 1 – FINANCIAL PERFORMANCE

FINANCIAL TARGETS	YTD Budget	YTD Apr	YTD May	YTD Jun	YTD Jul	YTD Aug	YTD	Movement
Total Income £'000	82,247	16,708	33,503	50,586	67,624	84,291	84,291	▼ ► ►
Expenditure - Pay Costs £'000	64,746	13,224		39,501	52,624	65,552	65,552	▼ ► ►
Expenditure - Non Pay Costs £'000	18,271	3,763		11,572	15,537	19,384	19,384	▼ ► ►
EBITDA £'000	16,234	(279)		(486)	(279)	(645)	(645)	▼ ▲ ▼
Net Surplus / (Deficit) £'000	12,868	(933)	(1,981)	(2,447)	(537)	(3,915)	(3,915)	▼ ▲ ▼
Liquidity Ratio		12.3	11.1	15.2	12.8	12.7	12.7	▲ ▼ ►
Capital Servicing Capacity		-1.1	-1.6	-0.6	-0.5	-0.5	-0.5	▼ ► ►
Total Capital Expenditure £'000	1,096	102	297	652	818	994	994	▲ ▲ ►
Total CIP Achieved £'000	4,259	267	759	1,909	2,645	3,510	3,510	▲ ► ►

Analysis	Mitigating Measures	Gaps in Assurance
-		None
-		None
-		None
-		None
-		None

**EXCEPTION ANALYSIS 2 – WORKFORCE PERFORMANCE**

WORKFORCE TARGETS	Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Movement
Turnover Rates (FTE %)	<1.0%	0.44%	0.93%	1.70%	0.73%	2.72%	6.52%	▲ ▼ ▲
Stability Rates (FTE %)	>90%	90.0%	89.6%	89.9%	89.8%	90.6%	90.0%	▶ ▶ ▶
Sickness Absence Rates	<4.8%	5.4%	5.6%	5.5%	5.8%		5.6%	▶ ▶ ▶
KSF Reviews	>95%	4.0%	6%	11%	14%	17%	17%	▶ ▶ ▶
Fire Training	>95%	6.0%	13%	18%	24%	29%	29%	▶ ▶ ▶
Information Governance Training	>95%	9.0%	13%	21%	27%	31%	31%	▶ ▼ ▼

Analysis	Mitigating Measures	Gaps in Assurance
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**1. Turnover Rate**

- At 2.7% June was the highest rate since the acute and community services came together in July 2011.
- In August the staff of the Grindon Lane and Bunny Hill Minor Injury services transferred to Northern Doctors Urgent Care.



**EXCEPTION ANALYSIS 3 – HEALTHCARE ACQUIRED INFECTION PERFORMANCE**

HEALTHCARE ACQUIRED INFECTION	Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Movement
MRSA Bacteraemia	0	0	0	0	0	0	0	▶ ▶ ▶
Clostridium Difficile	10	0	1	0	0	0	1	▶ ▶ ▶

Analysis	Mitigating Measures	Gaps in Assurance
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- There were no cases of MRSA or clostridium difficile in July and August

## INTEGRATED PERFORMANCE DASHBOARD - AUGUST 2014

COMPLIANCE RISK RATING	Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Movement
Continuity of Services Risk Rating	4	3	3	3	3	3	3	▶▶▶
Governance Risk Rating	Green	Green	Green	Green	Green	Green	Green	▶▶▶

  

FINANCIAL TARGETS	YTD Budget	YTD Apr	YTD May	YTD Jun	YTD Jul	YTD Aug	YTD	Movement
Total Income £'000	82,247	16,708	33,503	50,586	67,624	84,291	84,291	▼▶▶
Expenditure - Pay Costs £'000	64,746	13,224		39,501	52,624	65,552	65,552	▼▶▶
Expenditure - Non Pay Costs £'000	18,271	3,763		11,572	15,537	19,384	19,384	▼▶▶
EBITDA £'000	16,234	(279)		(486)	(279)	(645)	(645)	▼▲▼
Net Surplus / (Deficit) £'000	12,868	(933)	(1,981)	(2,447)	(537)	(3,915)	(3,915)	▼▲▼
Liquidity Ratio		12.3	11.1	15.2	12.8	12.7	12.7	▲▼▶
Capital Servicing Capacity		-1.1	-1.6	-0.6	-0.5	-0.5	-0.5	▼▶▶
Total Capital Expenditure £'000	1,096	102	297	652	818	994	994	▲▲▶
Total CIP Achieved £'000	4,259	267	759	1,909	2,645	3,510	3,510	▲▶▶

  

HEALTHCARE ACQUIRED INFECTION	Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Movement
MRSA Bacteraemia	0	0	0	0	0	0	0	▶▶▶
Clostridium Difficile	10	0	1	0	0	0	1	▶▶▶

**Patient Access and Waiting Time Metrics**

Metric		Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Movements
<b>A&amp;E CLINICAL INDICATORS</b>									
4 Hours Wait	Trust rating	>95%	98.09%	97.87%	97.50%	98.98%	100%	98.42%	↓ ↑ ↑
Time to Initial Assessment - 95th Percentile	A&E	< 15 mins	27	30	22	22	20		↓ → ↓
Time to Treatment - Median	Trust Rating	< 60 mins	56	55	49	45	41		↓ ↓ ↓
<b>CANCER TARGETS</b>									
14 Day	Trust Rating	93%	96.9%	96.1%	96.5%	97.1%	95.7%	96.5%	↑ ↑ ↓
31 Day - 1st Treatment	Trust Rating	96%	100%	100%	100%	100%	100%	100%	→ → →
31 Day - Subsequent Treatment (Surgery)	Trust Rating	94%	100%	100%	100%	100%	100%	100%	→ → →
31 Day - Subsequent Treatment (Drugs)	Trust Rating	98%	100%	100%	100%	100%	100%	100%	→ → →
62 Day 2 Week Wait Referrals	Trust Rating	85%	90.0%	95.5%	80.0%	95.0%	69.6%	86.9%	↓ ↑ ↓
62 Day - Screening Programmes	Trust Rating	90%	N/A	0.0%	0.0%	N/A	N/A		→ → →
62 Day - Consultant Upgrades	Trust Rating	>85%	N/A	0.0%	0.0%	N/A	N/A		→ → →
<b>REFERRAL TO TREATMENT TIMES</b>									
18 Weeks Admitted	Trust Rating	> 90%	95.8%	95.6%	98.0%	95.9%	97.3%	96.5%	↑ ↓ ↑
18 Weeks Non-Admitted	Trust Rating	>95%	99.0%	99.1%	98.8%	98.5%	98.5%	98.8%	↓ ↓ →
Incomplete Pathways	Trust Rating	>92%	93.7%	94.2%	94.0%	94.0%	94.1%	94.0%	→ → →
Long Waits > 36 Weeks	Trust rating	0	0	0	0	0	0	0	→ → →
Long Waits > 52 Weeks	Trust rating	0	0	0	0	0	0	0	→ → →
Diagnostic 6 Week Wait	Trust Rating	>99%	100%	99.7%	99.9%	99.6%	100%	99.9%	↑ ↓ ↑
<b>GUM ACCESS</b>									
Offered Appointment for < 48 Hours	Trust Rating	100%	100%	100%	100%	100%	100%	100%	→ → →
Seen in < 48 Hours	Trust Rating	95%	98.9%	98.3%	98.6%	98.7%	98.5%	98.6%	→ → →

**Data Quality**

Metric		Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Trends
<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%	99.63%	99.41%	99.53%	99.02%	99.23%	0.00%	→ ↓ →
Completion of valid NHS Number field in acute data sets	Trust Rating	99%	99.74%	99.83%	99.84%	99.54%	99.58%	0.00%	→ → →
<b>IAPT INFORMATION DATASET COMPLETENESS</b>									
Completion of IAPT Minimum Data Set	Trust Rating	90%	100%	100%	100%	100%	100%	100.00%	→ → →

**Patient Safety**

Metric		Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Trends
<b>A&amp;E CLINICAL INDICATORS</b>									
A&E Unplanned Reattendance	Trust Rating	< 5%	6.01%	6.12%	6.75%	6.78%	6.94%	6.48%	↑ → ↑
A&E Left Without Being Seen	Trust Rating	< 5%	1.99%	2.00%	1.81%	1.60%	1.71%	1.83%	↓ ↓ ↑
Admissions for DVT Through A&E	Trust Rating	Continuous Improvement	0.00%	6.67%	6.25%	42.86%	7.14%	12.33%	→ ↑ ↓
Admissions for Cellulitis Through A&E	Trust Rating	Continuous Improvement	20.00%	37.14%	22.22%	17.95%	17.65%	22.83%	↓ ↓ →
Patients Presenting in High Risk Categories	Trust Rating	Continuous Improvement	n/a	n/a	n/a	n/a	n/a		
<b>AMBULANCE HANDOVER</b>									
% Handover Time Recorded	Trust Rating	90%	76.1%	76.5%	76.5%	73.8%	74.8%		→ ↓ ↑
Ambulance Handover > 15 minutes	Trust Rating		22	58	38	29	39		↑ ↑ ↓
Ambulance Handover > 30 minutes	Trust Rating	0	7	10	4	4	3		↑ → ↑
Ambulance Handover > 60 minutes	Trust Rating	0	0	4	0	0	0		↑ → →
<b>FRACTURED NECK OF FEMUR</b>									
Patients Operated on Within 36 Hours	Trust Rating	> 75%	87.0%	60.0%	72.7%	56.3%	100.0%	75.6%	↑ ↓ ↑
<b>STROKE CARE</b>									
90% of Time on a Stroke Unit	Trust Rating	>80%	81.0%	50.0%	41.7%	84.2%	80.0%		↓ ↑ ↓
TIA Patients Assessed & Treated 24 Hours	Trust Rating	> 60%	-	-	-	-	-		→ → →
<b>HOSPITAL CARE</b>									
Delayed Transfers of Care	Trust Rating	=< 5%	0.1%	0.3%	0.7%	1.8%	0.8%		↑ ↑ ↓
Emergency Readmissions Within 30 Days	Trust Rating	6.4%	5.7%	7.3%	6.3%	6.6%	-		↓ ↑ →
VTE Risk Assessment	Trust Rating	95%	97.65%	97.64%	97.42%	97.96%	96.49%		↓ ↑ ↓
<b>HOSPITAL ACQUIRED INFECTIONS</b>									
MRSA Bacteraemia	Cumulative Trust Rating	0	0	0	0	0	0	0	→ → →
MSSA	Cumulative Trust Rating	TBC	0	0	1	1	0	2	↑ → ↓
Clostridium Difficile <sup>* Quality Report</sup>	Cumulative Trust Rating YTD	10	0	1	0	0	0	1	↓ → →
E-coli	Cumulative Trust Rating	Continuous Improvement	2	0	1	1	1	5	↑ → →
MRSA Screening - Elective	Trust Rating	100%	135.0%	131.4%	122.2%	113.3%	142.2%	127.9%	↓ ↓ ↑
MRSA Screening - Non Elective	Trust Rating	100%	100.0%	100.3%	100.1%	100.0%	100.2%	100.1%	→ → →

**Patient Experience**

Metric		Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Trends
Mixed Sex Accomodation Breaches	Trust Rating	0	0	0	0	0	0	0	→ → →
Cancellation of Elective Operation	Trust Rating	0	6	11	6	4	5	32	↓ ↓ ↑
Cancellation of Elective Operation - No Date Offered Within 28 Days	Trust Rating	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	→ → →
<b>MATERNITY CARE</b>									
Women Seen By Midwife Before 13 Weeks	Trust Rating	>90%	94.4%	87.8%	94.4%	90.0%	87.1%	90.8%	↑ ↓ ↓
Women Smoking Through Pregnancy	Trust Rating	< 24.5%	28.5%	11.2%	24.2%	22.4%	26.7%	23.0%	↑ ↓ ↑
Mothers Initiating Breastfeeding	Trust Rating	> 56.8%	51.6%	57.0%	55.4%	49.1%	50.0%	52.6%	↓ ↓ ↑
<b>CHOOSE &amp; BOOK</b>									
1st Outpatient Appointment Booked on C&B	Trust Rating	90%	88.0%	91.0%	88.7%	80.0%	76.0%	84.7%	↓ ↓ ↓
Bookings With Named Consultant Team	Including 2 Week Wait	80%	81.0%	81.2%	82.4%	82.4%	82.4%	81.8%	↑ → →
Bookings With Named Consultant Team	Excluding 2 Week Wait	100%	88.3%	88.5%	89.7%	89.7%	89.7%	89.2%	↑ → →
Slot Utilisation Issues	Trust Rating	=< 4%	13.1%	10.5%	13.1%	20.2%	19.4%	15.1%	↑ ↑ ↓

**Contract Monitoring Metrics**

Metric		Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Trends
<b>CHLAMYDIA SCREENING</b>									
Offered	Trust Rating	100%	100%	100%	100%	100%	100%	100%	→ → →
Uptake	Trust Rating	35%	21.33%	19.80%	20.65%	23.72%	21.29%	21.31%	↑ ↑ ↓
Positivity Rate	Trust Rating	2.4%	n/a	n/a	n/a	n/a	n/a	n/a	
<b>CHILDHOOD IMMUNISATIONS</b>									
HPV	Trust Rating (3rd of 3 Doses)	90%	58.70%	74.70%	89.80%	92.40%	92.40%	92.40%	↑ ↑ →
<b>IAPT PERFORMANCE</b>									
Depression/Anxiety Access to IAPT	Trust Rating	YTD 6.25%	1.39%	1.38%	1.27%	1.34%	1.12%	6.50%	↓ → ↓
Completed Treatment and Moving to Recovery	Trust Rating	50.0%	53.37%	55.56%	54.46%	53.86%	48.80%	53.23%	↓ ↓ ↓
Completion of IAPT Minimum Data Set Outcome	Trust Rating	90.0%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	→ → →
<b>COMMUNITY BREASTFEEDING PERFORMANCE</b>									
Coverage	Trust Rating	95%	95.22%	95.61%	98.14%	95.24%	93.62%		↑ ↓ ↓
Prevalence	Trust Rating	End of Year	36.14%	28.44%	25.88%	29.85%	27.95%		↓ ↑ ↓
<b>CONTINUING HEALTHCARE PERFORMANCE</b>									
% of new assessments undertaken within 28 days	Trust Rating	95%	38.57%	61.05%	42.03%	39.06%	25.71%	43.42%	↓ ↓ ↓
% of 3 month reviews undertaken within 28 days	Trust Rating	95%	97.44%	100%	98.31%	98.84%	92.16%	97.53%	↓ ↑ ↓
% of additional reviews undertaken within 28 days of plan	Trust Rating	95%	0%	20%	0%	0%	33.33%	8.70%	↓ → ↑
Number of Annual Reviews Carried Out	Trust Rating	0	44	39	31	50	32	196	↓ ↑ ↓
% of annual reviews undertaken within 28 days	Trust Rating	95%	81.82%	100%	96.77%	100%	100%	95.41%	↓ ↑ →
Phase 1 - Completed Retrospective Restitution Cases	Trust Rating	240	50	5	5	15	18	93	→ ↑ ↑
<b>FLU VACCINATIONS</b>									
Housebound Patients Vaccinated by 31 December	Trust Rating	> 90%	n/a	n/a	n/a	n/a	n/a		→ → →
<b>HEALTH VISITOR NUMBERS</b>									
Number of Health Visitors Employed	Trust Rating	180.00	177.61	177.88	176.64	176.80	176.30		↓ ↑ ↓

### Contract Activity Metrics

Metric	From*		YTD Target	Apr-14	May-14	Jun-14	Jul-14	Aug-14	YTD	Trends		
<b>Emergency Activity</b>												
<b>A&amp;E Attendances</b>	Con	Trust Contract	56271	11777	12580	10396	10318	9364	54435	↓	→	↓
		Trust Total	59930	12505	13282	11077	10996	9735	57595	↓	→	↓
<b>All Non Elective Spells</b>	Con	Trust Rating	6658	1261	1293	1267	1268	1194	6283	→	→	↓
<b>Emergency Activity</b>	Con	Trust Rating	5300	981	1046	989	1035	947	4998	↓	→	↓
<b>Short Stay Activity</b>	Con	Trust Rating	381	75	80	79	64	75	373	→	↓	↑
<b>Ambulatory Care</b>	Con	Trust Rating	1424	338	391	396	369	263	1757	→	↓	↓
<b>Elective Care Activity</b>												
<b>Total Activity</b>	Con	Trust Rating	6552	1238	1223	1298	1423	1070	6252	↑	↑	↓
<b>Inpatient Activity</b>	Con	Trust Rating	794	133	145	151	167	143	739	→	↑	↓
<b>Planned Same Day Activity</b>	Con	Trust Rating	5759	1105	1078	1147	1256	927	5513	↑	↑	↓
<b>Outpatient Activity</b>												
<b>Attendances</b>	Con	Trust Rating	12029	2297	2343	2742	2570	2021	11973	↑	↓	↓
<b>Multi Professional Attendances</b>	Con	Trust Rating	1429	68	82	97	72	76	395	↑	↓	↑
<b>Follow Up Attendances</b>	Con	Trust Rating	21655	4058	3982	4586	4443	3415	20484	↑	→	↓
<b>Follow Up Multi Professional Attendances</b>	Con	Trust Rating	1297	273	253	311	265	238	1340	↑	↓	↓
<b>Procedures</b>	Con	Trust Rating	393	37	25	35	91	65	253	↑	↑	↓
<b>New to Follow Up Ratio</b>	Con	Trust Rating	2.3	2.65	2.6	2.46	3	3	2.56	↓	→	→
<b>Community Tariff Activity</b>												
<b>GUM (In Area Treatments)</b>	Con	Trust Rating	6821	1165	1210	1165	1356	1154	6050	→	↑	↓
<b>Community Block Contract Activity</b>												
<b>District Nursing</b>	Con	Trust Rating	213870	47858	49177	47688	51312	48740	244775	→	↑	↓
<b>Urgent Care Teams</b>	Con	Trust Rating	10081	2425	2338	2343	2337	2257	11700	→	→	→
<b>Intermediate Care Team</b>	Con	Trust Rating	23019	4535	4894	4707	4923	4684	23743	→	→	↓