

Strategic Dashboard Report Month 09 2015/16

Objectives

Summary of Performance

Strategic Objectives

Achieving all strategic objectives measures for quality & experience YTD.

Currently red rated are recruitment to CRN research, financial margin, cost reduction strategy, bank & agency spend and private patient activity.

Performance Report Summary

In addition to the above, currently red rated for YTD are mixed sex accommodation breaches, sepsis care bundle (blood cultures taken within 24hrs preceding first antibiotic given and delivery of at least one sepsis antibiotic within one hour of prescription), medication errors, serious incidents (including never events and red alerts), 18-weeks incomplete pathways, 26-weeks all pathways, cancelled operations (including 28-day guarantee and urgent operations cancelled twice), and referrals from other sources.

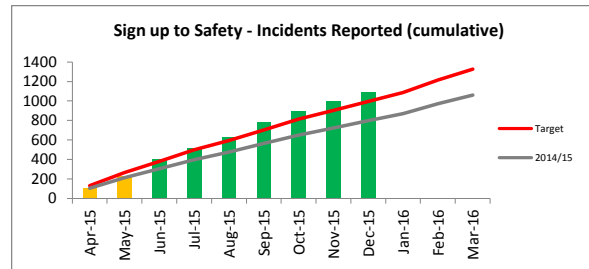
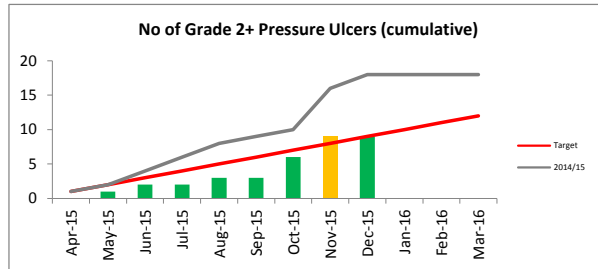
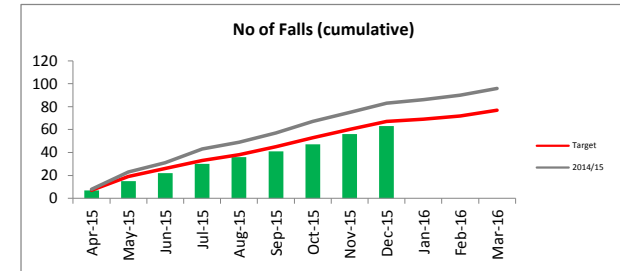
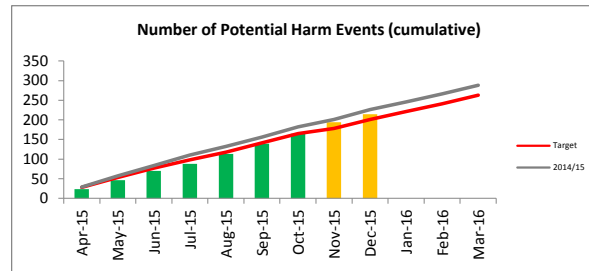
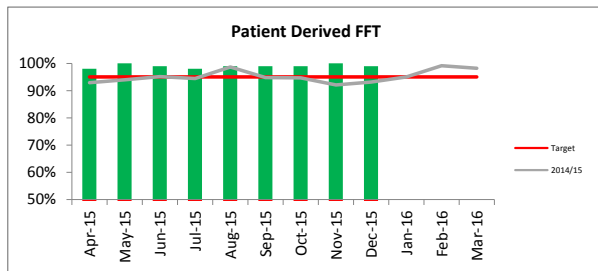
In month, diagnostic waiting times, elective length of stay for all cardiac surgery and delayed transfers of care were above target.

For details on financial indicators please refer to the Financial Report.

Strategic Objective Measures 2015/16 - Quality & Experience

Indicator	YTD		Trend	Current month		Previous	Data	Frequency	Comments
	Target	Actual		Target	Dec 15	Month	Quality		
Cumulative % patient derived FFT	>=95%	99%	→	>=95%	99%	100%		M	
Potential harm events - falls, pressure ulcers, medication errors (9% reduction)	<=201	214	↑	<=23	20	29		M	
Number of Falls (20% reduction)	<=67	63	↑	<=7	7	9		M	
Number of Pressure Ulcers - grade 2+ (30% reduction)	<=9	9	↑	<=1	0	3		M	
Sign up to Safety - Incidents reported (25% increase)	>=966	1092	↓	>=93	89	112		M	
Medication Safety Thermometer indicators to be reported in Q4									

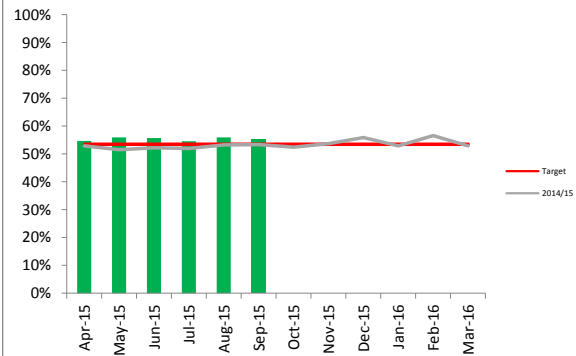
Quality & Experience



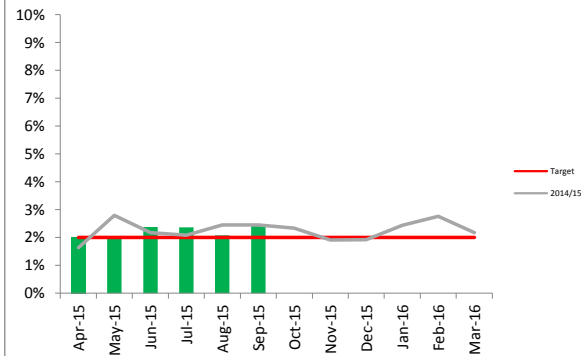
Strategic Objective Measures 2015/16 - Service & Innovation

Indicator	YTD		Trend	Current Month		Previous Month	Data Quality	Frequency	Comments
	Target	Actual		Target	Dec 15				
Market share within main catchment area	53.5%	55.4%	→	53.5%	55.3%	55.9%	Green	M	Current figures Sep-15 due to reporting lag
Market share outside main catchment area	2.0%	2.2%	→	2.0%	2.4%	2.1%	Green	M	Current figures Sep-15 due to reporting lag
Number of patients recruited into CRN research (open trials)	563	504	↓	63	25	76	Green	M	
Innovation suggestion scheme currently being reviewed by Execs									

% Market Share - Main Catchment Area



% Market Share - Outside Main Catchment Area

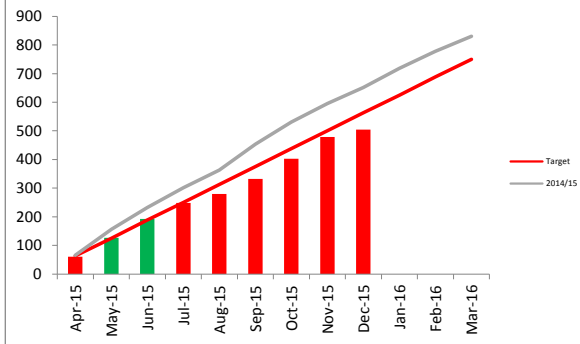


RAG rating for market share indicators :

Main catchment area
 Green - above target
 Yellow - within 2.5% of target
 Amber - within 5% of target
 Red - below target by more than 5%

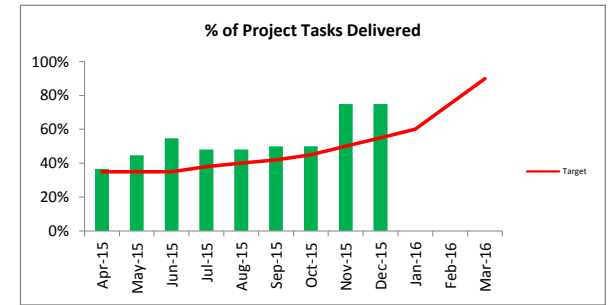
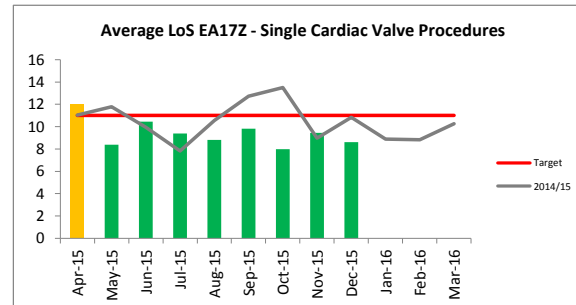
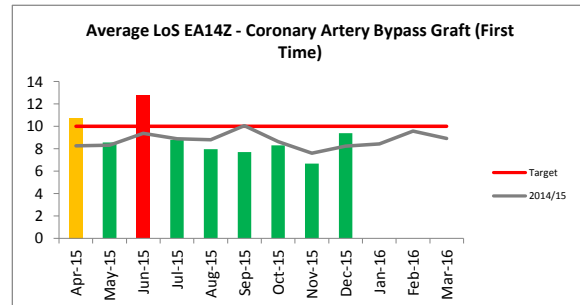
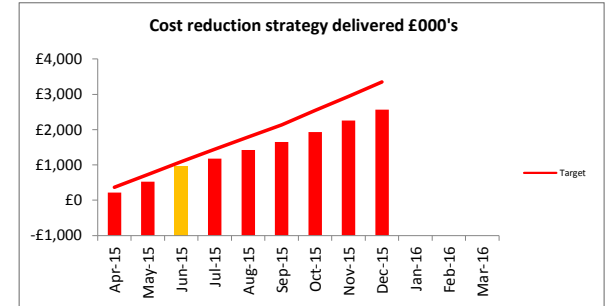
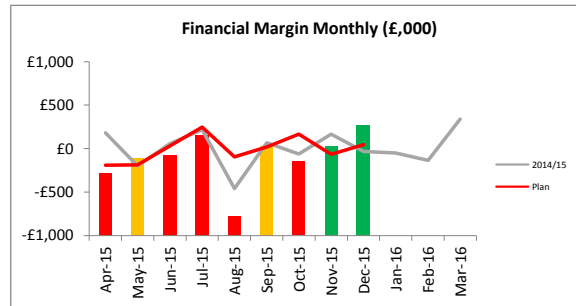
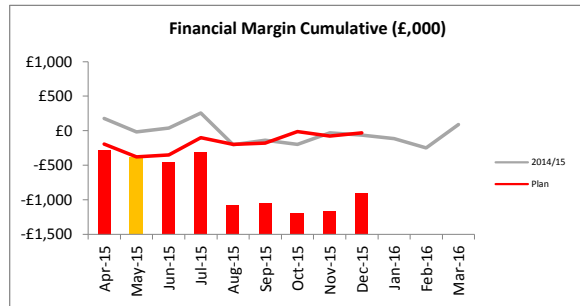
Outside main catchment area
 Green - above target
 Yellow - within 0.5% of target
 Amber - within 1% of target
 Red - below target by more than 1%

Number of patients recruited into CRN research (open trials)



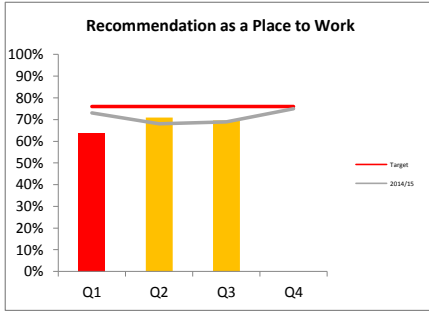
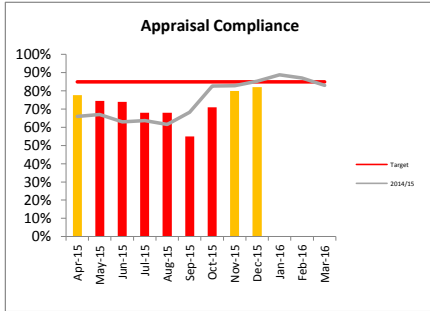
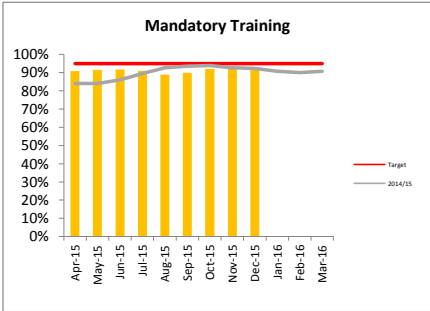
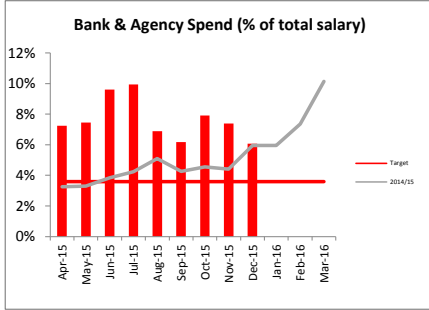
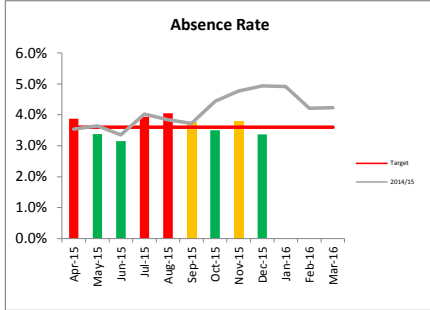
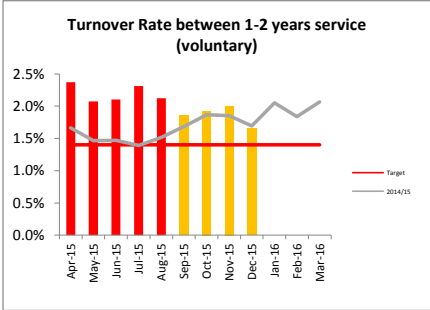
Strategic Objective Measures 2015/16- Value

	Indicator	YTD		Trend	Current month		Previous Month	Data Quality	Frequency	Comments
		Plan	Actual		Plan	Dec 15				
Value	Financial margin for the total trust (£,000) - cumulative	-£32	-£906	↑	-£46	£267	£28	✓	M	Data is normalised Net Surplus
	Cost reduction strategy delivered £000's (4% reduction)	£3,347	£2,566	↓	£404	£313	£318	✓	M	
	Average LoS EA14Z - Elective Coronary Artery Bypass Graft (First Time)	<=10	8.98	↓	<=10	9.38	6.67	✓	M	
	Average LoS EA17Z - Elective Single Cardiac Valve Procedures	<=11	9.42	↑	<=11	8.60	9.45	✓	M	
	% of project tasks delivered (PMO Office)	>=55%	75%	→	>=55%	75%	75%	✓	M	current month is the YTD



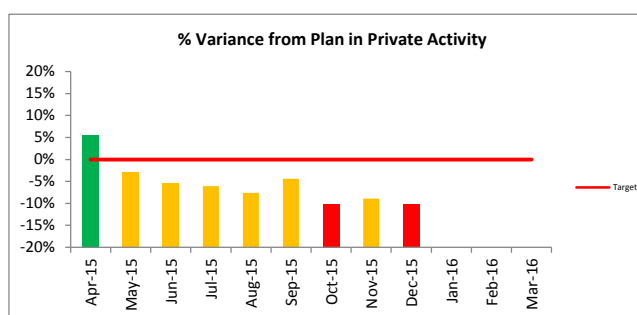
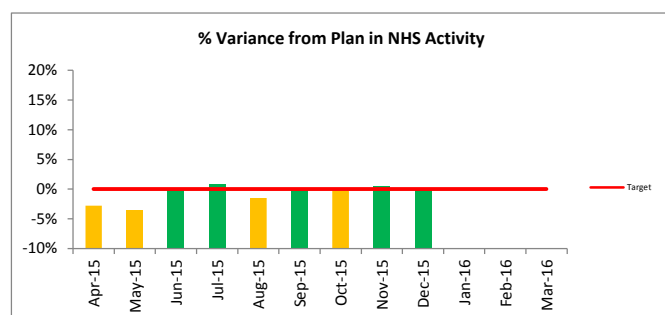
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Item 8.1	YTD		Trend	Current month		Previous	Data		Comments
Indicator	Target	Actual		Target	Dec 15	Month	Quality	Frequency	
Turnover Rate between 1-2 years service (voluntary(FTC excluded))	1.4%	1.66%	↑	1.4%	1.66%	2.00%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	Monthly figures are rolling 12 months
Absence Rate	3.6%	3.65%	↑	3.6%	3.37%	3.80%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	Figures subject to change due to input schedule
Absence Days	-	13189	↑	-	1428	1556	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	
Mandatory Training Compliance	95%	93%	→	95%	93%	93%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	
Appraisal Compliance	85%	82%	↑	85%	82%	80%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	
Bank & Agency Spend (% of total salary)	3.6%	7.6%	↑	3.6%	6.1%	7.4%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	
Bank Spend (% of total salary)	-	2.5%	↑	-	2.5%	2.8%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	
Agency Spend (% of total salary)	-	5.2%	↑	-	3.6%	4.6%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	M	
				Current Quarter		Previous			
				Target	Q3	Quarter			
Engagement Score (Improve by 10%)	4.31	4.02	-	4.31	4.02		<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Q	Q3 figures taken from National Staff Survey
Advocacy Score (maintain)	4.29	4.18	-	4.29	4.18		<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Q	Q3 figures taken from National Staff Survey
Recommendation as a Place to Work (Improve by 10%)	76%	70%	↑	76%	70%	71%	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Q	Q3 figures taken from National Staff Survey



Strategic Objective Measures 2015/16 - Stakeholders

Stakeholders	Indicator	YTD		Trend	Current month		Previous Month	Data Quality	Frequency	Comments
		Target	Actual		Target	Dec 15				
	NHS activity (inpatients) - to achieve plan	>=9920	9923		>=1109	1061	1159		M	
	NHS activity % variance from plan	0%	0.03%	↓	0%	-4.3%	6.4%		M	
	PP activity (inpatients) - to achieve plan	>=341	306		>=39	31	36		M	
	PP activity % variance from plan	0%	-10.3%	↓	0%	-20.5%	0.0%		M	



RAG rating for performance against plan:

NHS Activity:-
 Green - above target
 Amber - below target, but increase from previous year
 Red - below target and decrease from previous year

Private Activity:-
 Green - above target
 Amber - below target, but within 10% variance
 Red - below target and greater than 10% variance

Performance Report Summary 2015/16

	Indicator	Target	Actual		Performance Trend	Current month		Previous Month	Data Quality	Frequency	Comments	Exception
			YTD	Year-end Forecast		Target	Dec 15					
Quality	Friends and family Test response rate	>=40%	43%	42%	↑	>=40%	51%	46%		M		
	Cumulative average patient derived FFT (Inpatients)	>=95%	99%	99%	→	>=95%	99%	100%		M		
	Cumulative average family derived FFT	>=90%	98%	98%	↑	>=90%	100%	98%		M		
	Number of complaints	<=50	48	64	→	<=5	5	5		M	Target for year end is equal to or below 67	
	Mixed sex accomodation	0	31	41	↑	0	3	4		M		Y
	Dementia case finding	>=90%	97%	95%	↑	>=90%	97%	91%		M		
	MRSA bacteraemia	0	0	0	→	0	0	0		M		
	Clostridium Difficile	<=12	4	4	↓	<=9	4	3		M	Cumulative Monitor target	
	Clostridium Difficile - lapses in care	<=4	2	2	↓	<=3	2	1		M	Cumulative Commissioner target	
	Blood cultures taken within 24hrs preceding first antibiotic given	>=95%	69%	85%	↑	>=95%	78%	73%		M		Y
	Delivery of at least one sepsis antibiotic within one hour of prescription	>=95%	60%	85%	↓	>=95%	83%	85%		M		Y
	VTE risk assessment	>=95%	96.1%	96.0%	→	>=95%	95.1%	95.3%		M		
	Number of falls	<=67	63	77	↑	<=7	7	9		M	Target for year end is equal to or below 77	
	Number of avoidable pressure ulcers 2+	<=9	9	12	↑	<=1	0	3		M	Target for year end is equal to or below 12	
	Number of medication errors	<=132	142	189	↑	<=14	13	17		M	Target for year end is equal to or below 174	Y
	Number of in-hospital deaths	<=132	129	172	↓	<=17	16	14		M	Target for year end is equal to or below 174	
	Observed mortality (number of in-hospital deaths / spells)	<=1.5%	1.26%	1.43%	↓	<=2.2%	1.47%	1.2%		M	Target is 1.3% plus 2 standard deviations	
	HSMR - all diagnosis	<100	95.69	95.00	→	<100	108.90	113.36		M	Current month Sep-15	
	HSMR - 56 diagnosis groups	<100	99.52	95.00	↓	<100	115.90	100.73		M	Current month Sep-15	
	Risk adjusted CABG mortality	<1	0.94	0.85	→	<1	0.94	0.86		M	6-month rolling averages; latest data up to Sep-15	
	Risk adjusted non-primary PCI MACE	<1	0.20	0.50	→	<1	0.20	0.23		M	6-month rolling averages; latest data up to Sep-15	
	Emergency readmissions following elective admission	<100	91.90	95.00	↓	<100	102.40	53.10		M	Current month Feb-15	
	Emergency readmissions following non-elective admission	<100	79.60	85.00	↓	<100	107.70	95.40		M	Current month Feb-15	
	Number of Adverse Events (red alerts), SIs & never events	0	3	3	→	0	0	0		M		Y
	Number of incidents reported	>=996	1092	1456	↓	>=93	89	112		M	Target is based on 25% increase in reporting	
Performance	Monitor governance risk rating	Green	Green	Green	→	Green	Green	Green		M		
	Diagnostic waiting times	>=99%	99.32%	99.00%	↑	>=99%	98.72%	97.82%		M		Y
	18-weeks incomplete pathway	>=92%	89.99%	92.00%	↓	>=92%	89.99%	92.60%		M		Y
	Patients waiting >52 weeks	0	0	0	→	0	0	0		M		
	26-weeks admitted pathway - Welsh patients	>=95%	86.92%	90.00%	↑	>=95%	92.31%	89.76%		M		Y
	26-weeks non-admitted pathway - Welsh patients	>=98%	93.84%	95.00%	→	>=98%	98.11%	96.30%		M		Y
	26-weeks incomplete pathway - Welsh patients	>=95%	93.44%	95.00%	↓	>=95%	92.65%	95.71%		M		Y
	Cancer 14-day wait	>=93%	100%	100%	→	>=93%	100%	100%		M		
	Cancer 31-day wait (first treatment)	>=96%	99.60%	99.00%	→	>=96%	100%	100%		M		
	Cancer 31-day wait (subsequent treatment)	>=94%	100%	100%	→	>=94%	100%	100%		M		
	Cancer 62-day wait (urgent GP)	>=85%	92.50%	90.00%	↓	>=85%	85.71%	88.89%		M	Unadjusted performance was 78.26%	
	Cancer 62-day wait (Consultant upgrade)	>=85%	96.55%	95.00%	→	>=85%	100%	100%		M	Unadjusted performance was 50%	
	Cancelled operations	<=0.6%	1.91%	2.00%	↓	<=0.6%	2.66%	2.47%		M		Y
	Cancelled operations seen in 28-days	100%	98%	98%	→	100%	100%	100%		M	Two 28-day breaches previously reported in April	Y
	Urgent operations cancelled 2nd time	0	1	1	→	0	0	0		M		Y
	Delayed transfers of care	<=4.5%	4.80%	4.50%	↓	<=4.5%	7.20%	4.12%		M	New commissioner target of 4.5%	Y
	Bed occupancy	>=85%	83.17%	85.00%	↓	>=85%	81.94%	87.60%		M		
	Elective length of stay for cardiac surgery (days)	<=11	11.46	11.00	↓	<=11	13.3	12.5		M		Y
	Referrals - GP	16,506	18,973	25,297	↓	1,702	1,957	2,192		M		
	Referrals - DGH	7,605	7,855	10,473	→	805	855	878		M		
	Referrals - Other	8,331	8,018	10,691	↓	857	728	915		M		Y
	Community data completeness - Referrals	>=50%	100%	100%	→	>=50%	100%	100%		M		
	Community data completeness - Treatments	>=50%	100%	100%	→	>=50%	100%	100%		M		

KEY:

Monitor indicators

Performance Report Summary 2015/16

	Indicator	Target	Actual		Performance Trend	Current month		Previous Month	Data Quality	Frequency	Comments	Exception
			YTD	Year-end Forecast		Target	Dec 15					
Workforce	Overall staff sickness	<=3.6%	3.65%	3.60%	↑	<=3.6%	3.37%	3.80%	■	M		
	Overall staff turnover - voluntary	<=9%	8.00%	8.70%	↑	<=9%	8.00%	8.70%	■	M	Rolling 12-month figures	
	Mandatory training	>=95%	93%	95%	→	>=95%	93%	93%	■	M		
	Appraisals	>=85%	82%	85%	↑	>=85%	82%	80%	■	M		
	Total vacancies	TBD	95.9	92.2	↓	TBD	95.9	92.2	■	M		
	Nursing vacancies	TBD	54.3	56.6	↑	TBD	54.3	56.6	■	M		
	Advocacy score	4.29	4.18	4.29	→	4.29	4.18	4.15	■	Y	Q3 figure taken from National Staff Survey	
Finance	Financial Sustainability Risk Rating	3	3	3	↓	3	3	2	■	M		
	Capital Service Capacity Rating	4	3	4	→	4	3	3	■	M		
	Liquidity Rating	3	2	2	→	3	2	2	■	M		
	Liquidity (Days)	-6.5	-7.4	-8.6	↑	-6.5	-7.4	-7.7	■	M		
	IE Margin Metric	2	2	2	↓	2	2	1	■	M		
	Variance in IE Margin	3	3	3	↓	3	3	2	■	M		
	Net Surplus £000's	-32	-906	-1,200	↑	46	267	28	■	M		
	Normalised Net Surplus £000's	-32	-906	-1,200	↑	46	267	28	■	M		
	Cost reduction strategy delivered £000's	3,347	2,566	3,192	↓	404	313	318	■	M		
	Cash Balance	7,527	7,495	6,273	↓	1,912	-1,682	2,981	■	M		
	Capital expenditure £000's	-3,880	-2,927	-5,013	↓	-533	-208	-396	■	M		
	Percentage of nursing agency staff	7%	10%	6%	↑	7%	9%	13%	■	M	Target for year end is 6% - Monitor Cap 3%	
	Total agency cost £000's	-33	-2,602	-3,672	↑	-4	-202	-258	■	M		
	Total bank cost £000's	-101	-1,240	-1,616	↑	-11	-137	-160	■	M		

KEY:

Monitor indicators