

Strategic Dashboard Report Month 9 2014/15

Objectives

Summary of Performance

Strategic Objectives

Achieving all strategic objectives measures for quality & experience, service & innovation, value and stakeholder.

Currently red rated for workforce - turnover rate between 1-2 years service (voluntary) and staff sickness

Performance Report Summary

Currently red rated against year to date targets for number of falls, 18-weeks admitted pathways (compliant in December), 26-weeks admitted and non-admitted pathways, cancelled operations (including 28-day guarantee), and staff sickness.

The Friends and Family Test response rate, in-hospital deaths, and 26-weeks incomplete pathways are rated red for the month of December 2014.

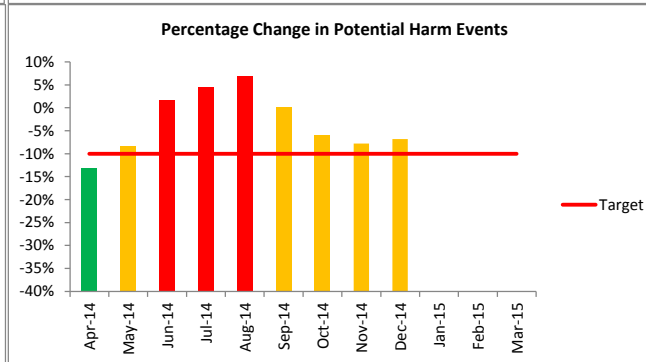
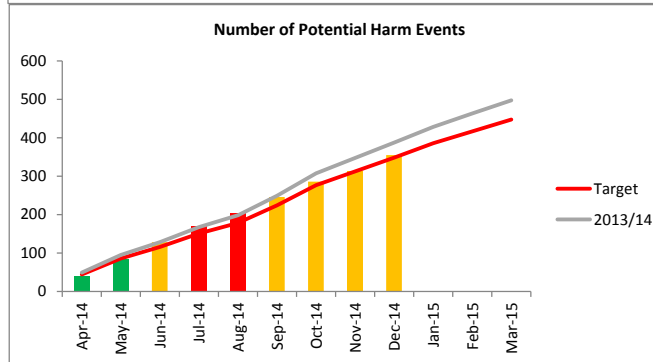
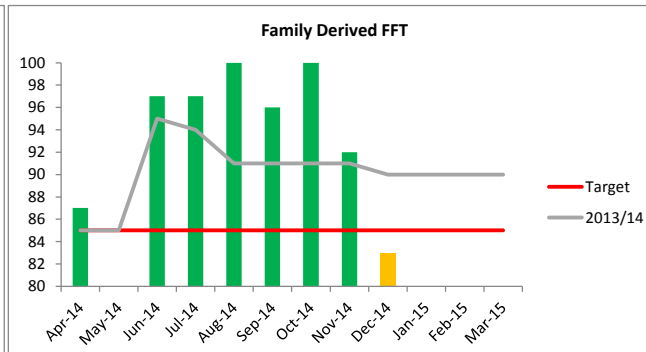
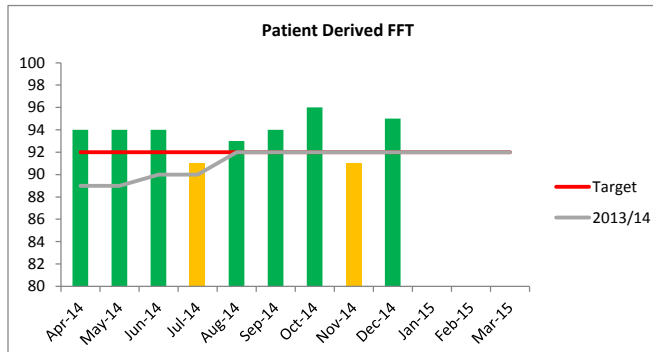
Exception reports are included for failing indicators mentioned above.

Never events, SUIs and adverse events (red) have been rated as red, however no exception report is included as these incidents have all been previously discussed at Board and no new events have been reported since July 2014.

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

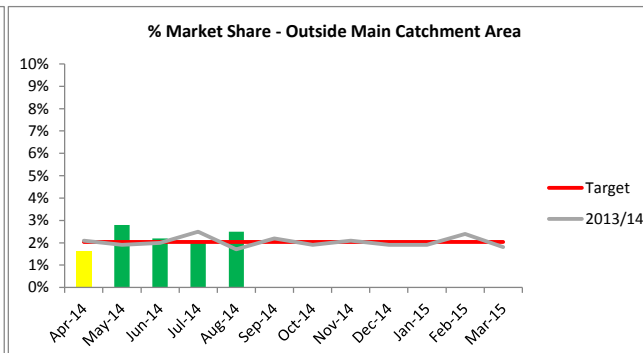
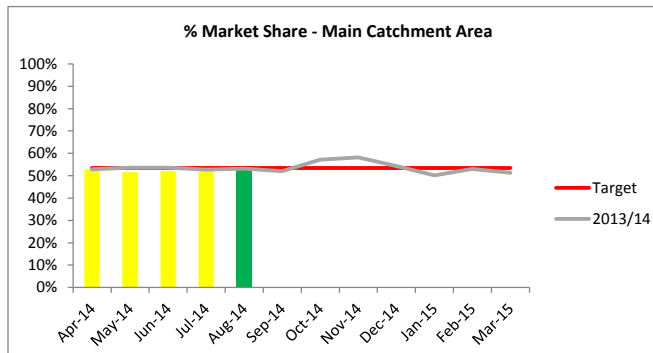
Strategic Objective Measures 2014/15 - Quality & Experience

	Indicator	YTD		Trend	Current month		Previous	Data		Comments
		Target	Actual		Target	Dec 14	Month	Quality	Frequency	
Quality & Experience	Cumulative average patient derived FFT	>=92	94	↑	>=92	95	91	G	M	
	Cumulative average family derived FFT	>=85	95	↓	>=85	83	92	S	M	
	Number of potential harm events (falls, deaths, pressure ulcers, medication errors)	<=348	355		<=348	355	313	S	M	
	Potential Harm events percentage change from 2013/2014	-10%	-7%	→	-10%	-7%	-8%	S	M	



Strategic Objective Measures 2014/15 - Service & Innovation

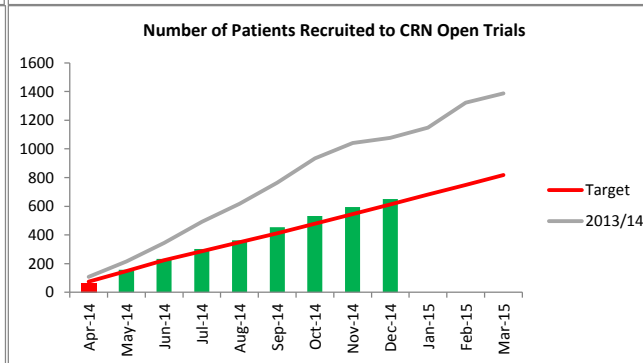
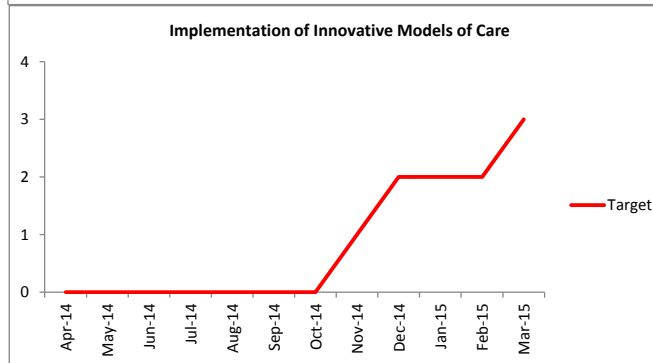
			YTD			Current month		Previous	Data		
Indicator			Target	Actual	Trend	Target	Dec 14	Month	Quality	Frequency	Comments
Service & Innovation	Market share within main catchment area		53.5%	52.5%	➡	53.5%	54.2%	52.0%	P	M	Current figures Aug-14 due to reporting lag
	Market share outside main catchment area		2.0%	2.2%	➡	2.0%	2.5%	2.1%	P	M	Current figures Aug-14 due to reporting lag
	Implementation of innovative models of care		3	0	➡	2	0	0	NA	M	
	Number of patients recruited into CRN research (open trials)		>=613	651		>=613	651	595	B	M	Target linked to CQUINs



RAG rating for market share indicators :

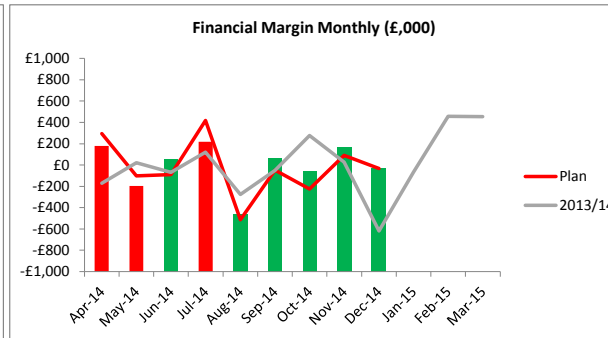
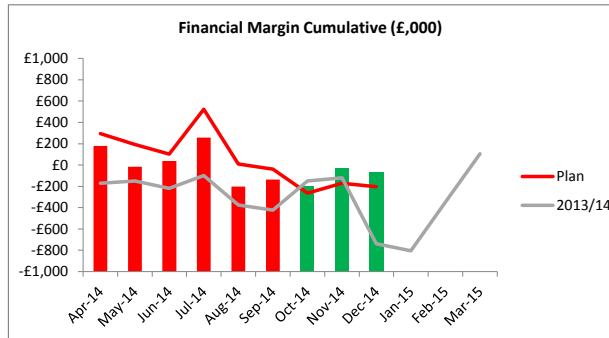
Main catchment area
 Green - above target
 Yellow - within 2.5% of target
 Amber - within 5% of target
 Red - below target by more than 5%

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%



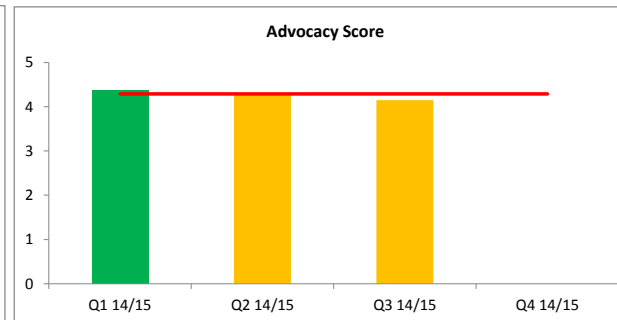
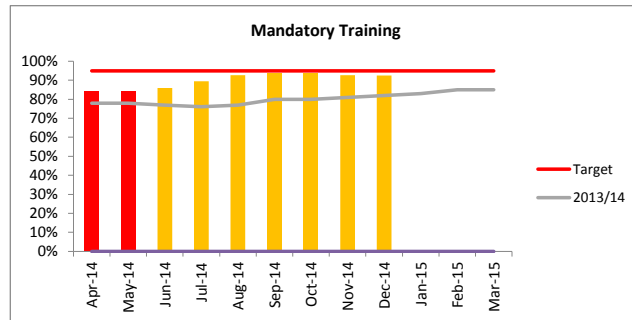
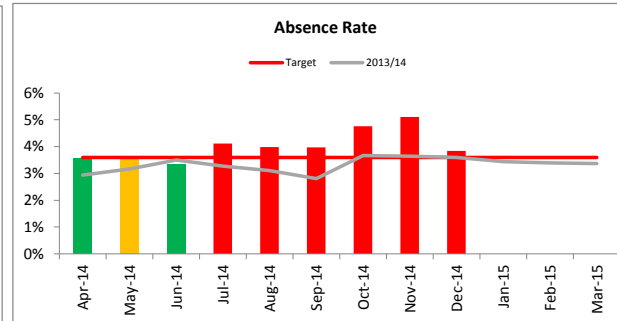
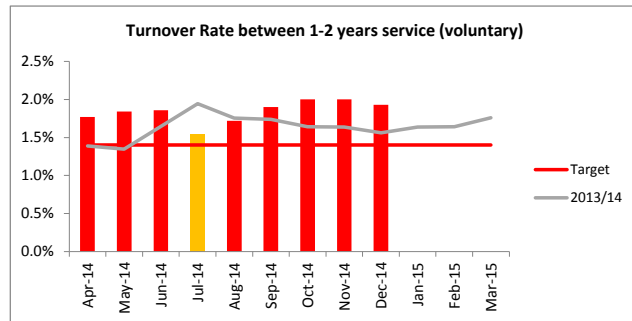
Strategic Objective Measures 2014/15 - Value

	Indicator	YTD		Trend	Current month		Previous	Data		
		Plan	Actual		Plan	Dec 14	Month	Quality	Frequency	Comments
Value	Financial margin for the total trust (£,000) - cumulative	-£204	-£63	↓	-£204	-£63	-£32	S	M	Data is normalised Net Surplus
	Financial margin for the total trust (£,000) - monthly	-£204	-£63	↓	-£32	-£31	£166	S	M	Data is normalised Net Surplus



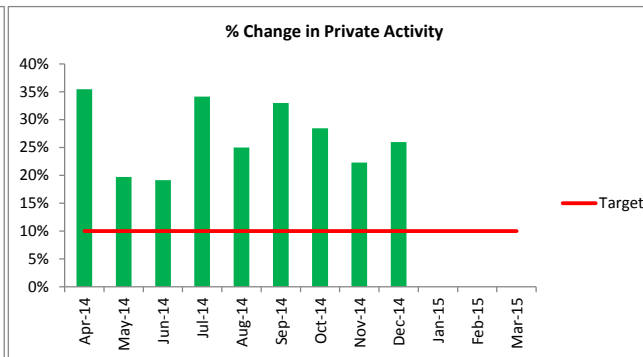
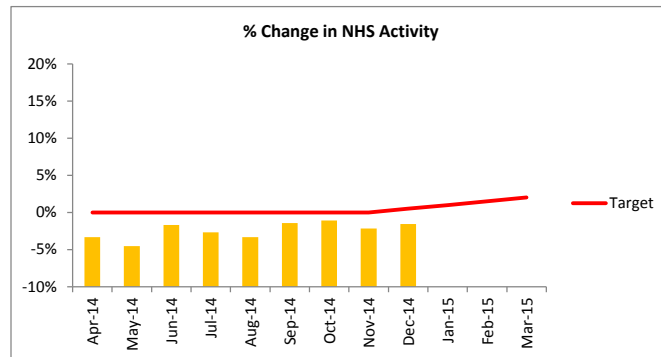
Strategic Objective Measures 2014/15 - Workforce

Indicator	YTD		Trend	Current month		Previous Month	Data		
	Target	Actual		Target	Dec 14		Quality	Frequency	Comments
Turnover Rate between 1-2 years service (voluntary)	1.4%	1.9%	→	1.4%	1.9%	2.0%	S	M	Figures are rolling 12 months
Overall Staff Sickness	3.6%	4.0%	↑	3.6%	3.84%	5.1%	S	M	Figures subject to change due to input timing
Mandatory Training Compliance	95%	92%	→	95%	92%	93%	S	M	
Advocacy Score	4.29	4.15	↓	Current Quarter		Previous			
				Target	Q2	Quarter			
				4.29	4.15	4.27	B	Q	Q2 figures taken from Staff FFT Survey



Strategic Objective Measures 2014/15 - Stakeholders

Indicator	YTD		Trend	Current month		Previous	Data		
	Target	Actual		Target	Dec 14	Month	Quality	Frequency	Comments
NHS activity (inpatients) - to increase activity by 2%	>=8699	9533		>=8699	9533	8509	P	M	
NHS activity percentage change from 2013/2014	>=0.5%	-1.6%	→	>=0.5%	-1.6%	-2.2%	P	M	Year end target of >=2%
PP activity (inpatients) - to increase activity by 10%	>=276	354		>=276	354	307	S	M	
PP activity percentage change from 2013/2014	>=10%	26.0%	↑	>=10%	26.0%	22.3%	S	M	
Stakeholder recommendation survey (under development)	Y						NA	M	



RAG rating for increasing NHS / PP activity :

Green - above target

Amber - below target, but on course to deliver driver indicators

Red - below target and failing driver indicators

Performance Report Summary 2014/15

	Indicator	YTD		Year-end Forecast	Performance Trend	Current month		Previous Month	Data Quality	Frequency	Comments	Exception
		Target	Actual			Target	Dec 14					
Quality	Friends and family Test response rate	>=37%	36%	40%	↓	>=37%	29%	41%	G	M	Year end target of 40%	Y
	Cumulative average patient derived FFT	>=92	94	94	↑	>=92	95	91	G	M		
	Cumulative average family derived FFT	>=85	95	95	↓	>=85	83	92	S	M		
	Number of complaints	<=50	39	52	→	<=5	4	5	B	M	Target for year end is equal to or below 67	
	Mixed sex accomodation	0	0	0	→	0	0	0	S	M		
	Dementia case finding	>=90%	93.0%	93.0%	↓	>=90%	80%	100%	S	M		
	MRSA bacteraemia	0	0	0	→	0	0	0	P	M		
	Clostridium Difficile	<=12	4	6	→	<=9	4	4	P	M	Cumulative Monitor target	
	Clostridium Difficile - lapses in care	<=1	1	1	→	<=1	1	1	P	M	Cumulative Commissioner target	
	VTE risk assessment	>=95%	94.1%	95.0%	→	>=95%	95.3%	95%	S	M		
	Number of falls	<=31	83	111	→	<=2	8	8	B	M	Target for year end is equal to or below 43	Y
	Number of pressure ulcers	<=25	20	27	↑	<=2	3	5	B	M	Tagret for year end is equal to or below 29	
	Number of medication errors	<=114	121	161	↓	<=17	11	5	B	M	Target for year end is equal to or below 151	
	Number of in-hospital deaths	<=143	131	175	↓	<=13	20	9	G	M	Target for year end is equal to or below 179	Y
	HSMR - all diagnosis	<100	93.4	93.4	↓	<100	97.6	91.9	G	M	Current month Aug 14	
	HSMR - 56 diagnosis groups	<100	84.4	84.4	→	<100	90.2	71.0	G	M	Current month Aug 14	
	Risk adjusted CABG mortality	<1	1.16	0.95	→	<1	1.16	0.94	G	M	YTD is rolling 6-mths /current month Sep 14	
	Risk adjusted non-primary PCI MACE	<1	0.27	0.35	→	<1	0.45	0.00	G	M	YTD is rolling 6-mths /current month Sep 14	
	Emergency readmissions - same provider	<=0.97%	0.64%	0.65%	→	<=0.97%	0.76%	0.84%	P	M	Data up to Nov-14 due to 30-days for outcome	
	Number of Never events	0	2	2	→	0	0	0	B	M		
	Number of SUIs	0	2	2	→	0	0	0	B	M		
	Number of adverse events (red alerts)	0	1	1	→	0	0	0	B	M		
	Number of incidents reported	<=112.2	84.3	80	↑	<=112.2	48	71	B	M	Target is based on monthly average 13/14	
Performance	Monitor governance risk rating	Green	Green	Green	→	Green	Green	Green	P	M		
	Diagnostic waiting times	>=99%	99.95%	99.95%	→	>=99%	100.00%	100.00%	S	M		
	18-weeks admitted pathway	>=90%	86.88%	90.50%	↑	>=90%	91.76%	77.89%	P	M	Surgery admitted pathways failed	Y
	18-weeks non-admitted pathway	>=95%	96.97%	96.50%	→	>=95%	97.15%	96.76%	P	M	Surgery non-admitted pathways failed	
	18-weeks incomplete pathway	>=92%	93.26%	92.50%	→	>=92%	93.26%	94.18%	P	M	Surgery incomplete pathways failed	
	Patients waiting >52 weeks	0	0	0	→	0	0	0	P	M		
	26-weeks admitted pathway	>=95%	90.34%	93.00%	↑	>=95%	95.45%	84.62%	S	M		Y
	26-weeks non-admitted pathway	>=98%	92.41%	95.00%	↑	>=98%	100.00%	79.17%	S	M		Y
	26-weeks incomplete pathway	>=95%	95.03%	95.00%	→	>=95%	94.23%	96.05%	S	M		Y
	Cancer 14-day wait	>=93%	99.47%	99.50%	→	>=93%	100.00%	100.00%	S	M		
	Cancer 31-day wait (first treatment)	>=96%	99.53%	99.50%	↓	>=96%	97.83%	100.00%	S	M		
	Cancer 31-day wait (subsequent treatment)	>=94%	100.00%	100.00%	→	>=94%	100.00%	100.00%	S	M		
	Cancer 62-day wait (urgent GP)	>=85%	90.04%	88.00%	↓	>=85%	85.71%	90.91%	S	M		
	Cancer 62-day wait (Consultant upgrade)	>=85%	97.22%	95.00%	→	>=85%	100.00%	100.00%	S	M		
	Cancelled operations	<=0.6%	1.30%	1.30%	↑	<=0.6%	1.00%	2.30%	B	M		Y
	Cancelled operations seen in 28-days	100%	99%	99%	↓	100%	86%	100%	B	M		Y
	Delayed transfers of care	<=5%	4.70%	4.90%	↓	<=5%	4.80%	3.10%	S	M		
	Bed occupancy	80-90%	80.70%	81.00%	↓	80-90%	80.00%	84.00%	P	M		
	Length of stay	<6.6 days	6.40	6.30	↓	<6.6 days	7.1	6.2	P	M		
	Referrals - GP	16,025	16,430	21,907	↓	1,568	1,687	1,856	S	M		
	Referrals - DGH	7,111	7,519	10,025	→	677	739	764	S	M		
	Referrals - Other	6,403	7,116	9,488	↓	710	772	881	S	M		
	Community data completeness - Referrals	>=50%	100%	100%	→	>=50%	100%	100%	S	M		
	Community data completeness - Treatments	>=50%	100%	100%	→	>=50%	100%	100%	S	M		
Workforce	Overall staff sickness	<=3.6%	4.00%	3.80%	↑	<=3.6%	3.84%	5.10%	S	M	Figures subject to change due to input timing	Y
	Overall staff turnover - voluntary	<=9%	8.03%	8.50%	→	<=9%	8.03%	8.19%	S	M	Rolling 12-month figures	
	Mandatory training	>=95%	92%	95%	→	>=95%	92%	93%	S	M		
	Appraisals	>=85%	85%	85%	↑	>=85%	85%	83%	S	M		
	Advocacy score	4.29	4.15	4.3	↓	4.29	4.15	4.27	B	Q	Latest data Q2 14/15; previous data Q1 14/15	
Finance	Monitor Continuity of Service Risk Rating	4	4	4	→	4	4	4	P	M		
	Capital Service Capacity Rating	4	4	4	→	4	4	4	P	M		
	Liquidity Rating	2	3	3	→	2	3	3	P	M		
	Liquidity (Days)	-8.7	-0.7	-6.7	↑	-8.7	-0.7	-2.8	P	M		
	Net Surplus £000's	-204	-498	-32	↓	-32	-41	166	P	M		
	Normalised Net Surplus £000's	-204	-63	405	↓	-32	-31	166	P	M		
	Cost reduction strategy delivered £000's	4,155	3,357	4,652	↑	534	496	453	P	M		
	Cash Balance	11,527	9,378	7,952	↓	1,095	415	532	P	M		
	Capital expenditure £000's	-2,696	-1,383	-4,800	↓	-740	-134	-275	P	M		
	Total agency cost £000's	-99	-924	-1,130	↓	-10	-171	-90	P	M	YTD cost equates to 1.8% of total staff costs	
	Total bank cost £000's	-106	-1,108	-1,442	↓	-12	-147	-141	P	M	YTD cost equates to 2.2% of total staff costs	

KEY:

Monitor indicators