

Strategic Dashboard Report Month 11 2014/15

Objectives

Summary of Performance

Strategic Objectives

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

Currently red rated for - value, 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, 18-weeks incomplete pathways, 26-weeks admitted, non-admitted and incomplete pathways, cancelled operations (including 28-day guarantee), and staff sickness.

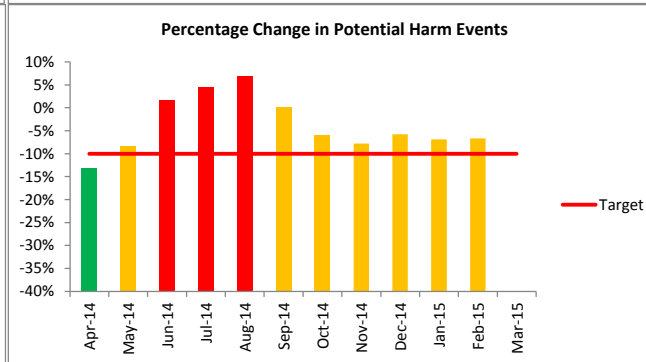
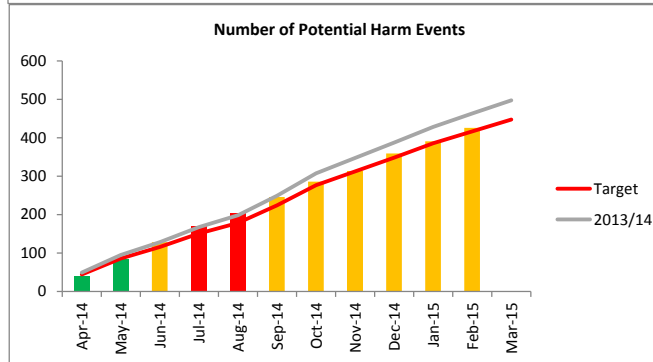
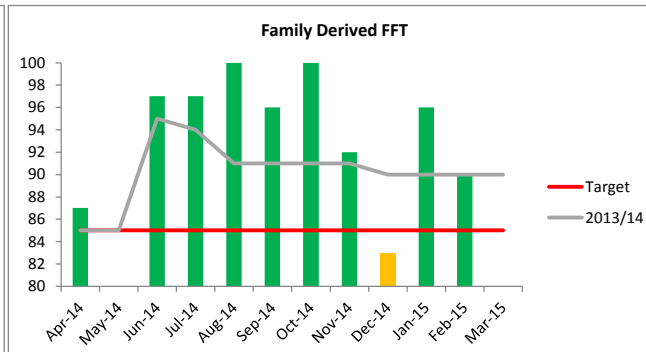
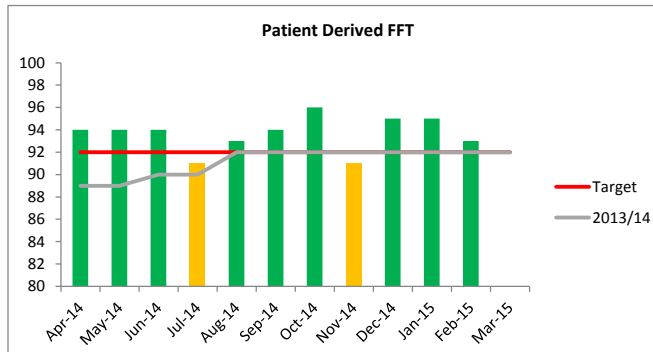
Other indicators in addition to the above which are failing in month are in-hospital deaths which is rated red for the month of February 2015.

Never events, SUIs and adverse events (red) have also been rated as red, with an exception report for SUIs in February 2015..

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

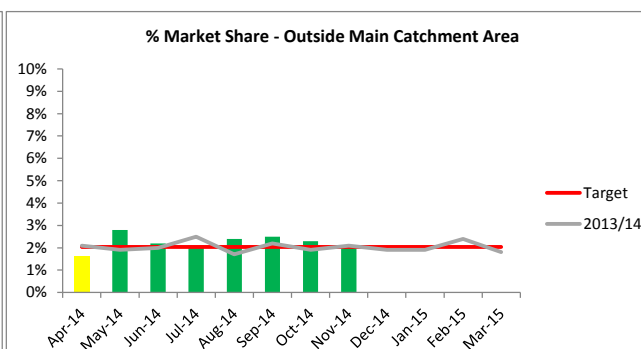
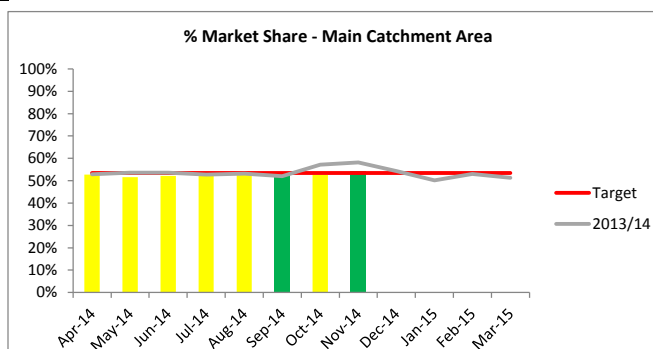
Strategic Objective Measures 2014/15 - Quality & Experience

	Indicator	YTD		Trend	Current month		Previous	Data		Comments
		Target	Actual		Target	Feb 15	Month	Quality	Frequency	
Quality & Experience	Cumulative average patient derived FFT	>=92	94	↓	>=92	93	95	G	M	
	Cumulative average family derived FFT	>=85	94	↓	>=85	90	96	S	M	
	Number of potential harm events (falls, deaths, pressure ulcers, medication errors)	<=417	426		<=417	426	389	S	M	
	Potential Harm events percentage change from 2013/2014	-10%	-7%	→	-10%	-7%	-7%	S	M	



Strategic Objective Measures 2014/15 - Service & Innovation

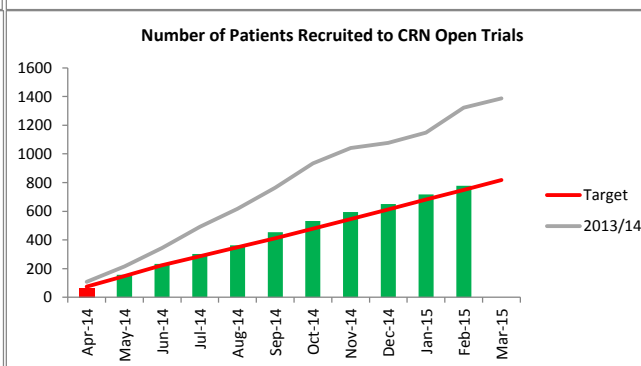
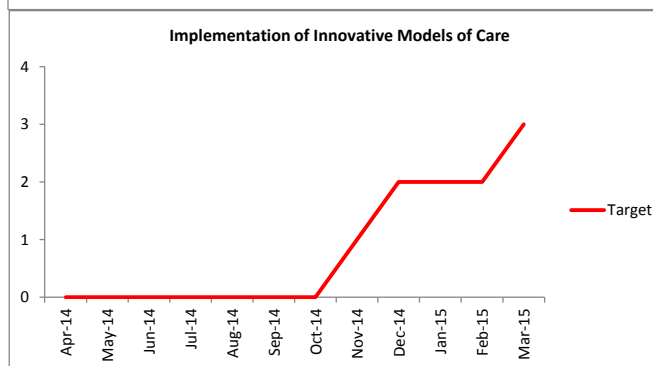
Indicator	YTD		Trend	Current month		Previous	Data		
	Target	Actual		Target	Feb 15	Month	Quality	Frequency	Comments
Market share within main catchment area	53.5%	52.8%	→	53.5%	54.5%	52.6%	P	M	Current figures Nov-14 due to reporting lag
Market share outside main catchment area	2.0%	2.3%	→	2.0%	2.1%	2.3%	P	M	Current figures Nov-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)	>=749	778		>=749	778	718	B	M	Target linked to CQUINs



RAG rating for market share indicators :

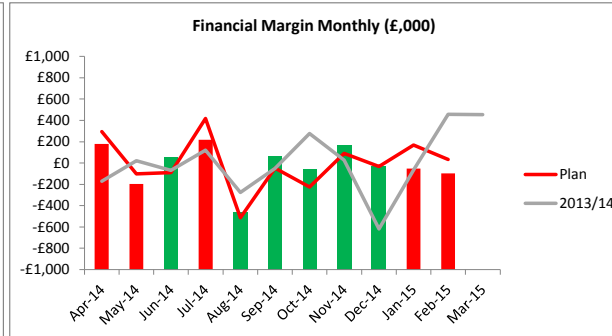
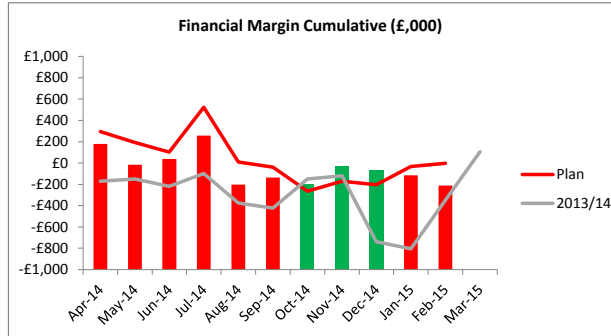
Main catchment area
 Green - above target
 Yellow - within 2.5% of target
 Amber - within 5% of target
 Red - below target by more than 5%

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%



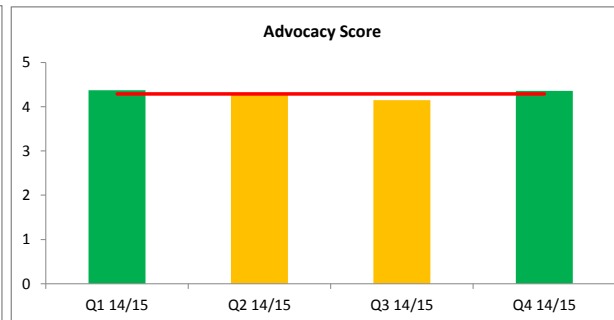
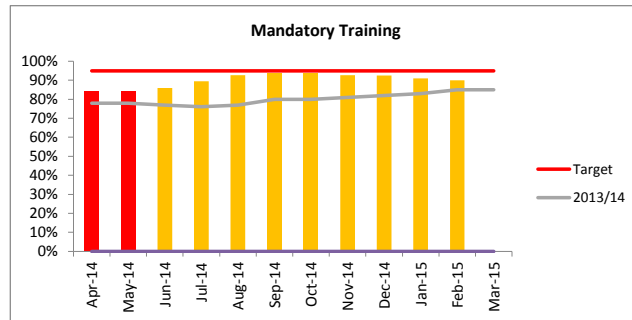
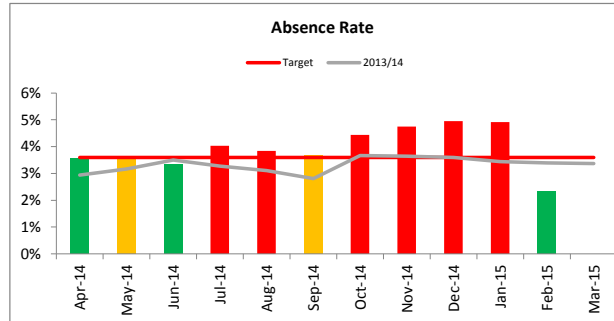
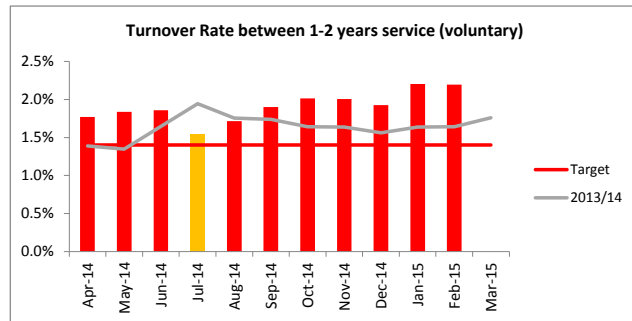
Strategic Objective Measures 2014/15 - Value

	Indicator	YTD		Trend	Current month		Previous	Data		
		Plan	Actual		Plan	Feb 15	Month	Quality	Frequency	Comments
Value	Financial margin for the total trust (£,000) - cumulative	-£2	-£210	↓	-£2	-£210	-£114	S	M	Data is normalised Net Surplus
	Financial margin for the total trust (£,000) - monthly	-£2	-£210	↓	£32	-£96	-£52	S	M	Data is normalised Net Surplus



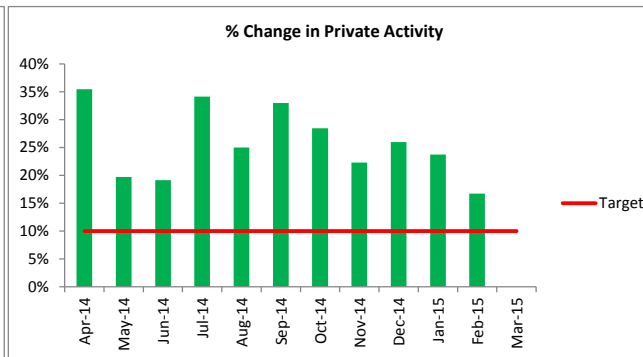
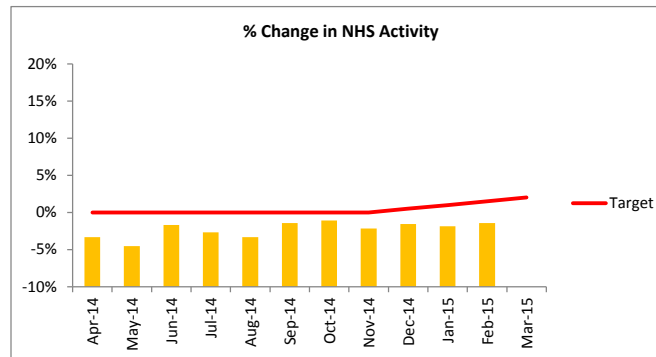
Strategic Objective Measures 2014/15 - Workforce

Indicator	YTD		Trend	Current month		Previous Month	Data		
	Target	Actual		Target	Feb 15		Quality	Frequency	Comments
Turnover Rate between 1-2 years service (voluntary)	1.4%	2.2%	→	1.4%	2.2%	2.2%	S	M	Figures are rolling 12 months
Overall Staff Sickness	3.6%	3.95%	↑	3.6%	2.32%	4.9%	S	M	Figures subject to change due to input timing
Mandatory Training Compliance	95%	90%	→	95%	90%	91%	S	M	
Advocacy Score	4.29	4.36	↑	Current Quarter		Previous			
				Target	Q4	Quarter			
				4.29	4.36	4.15	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	Feb 15	Month	Quality	Frequency	Comments
Stakeholders	NHS activity (inpatients) - to increase activity by 2%	>=10907	11661		>=10907	11661	10596	P	M	
	NHS activity percentage change from 2013/2014	>=1.5%	-1.4%	→	>=1.5%	-1.4%	-1.9%	P	M	Year end target of >=2%
	PP activity (inpatients) - to increase activity by 10%	>=343	386		>=343	412	386	S	M	
	PP activity percentage change from 2013/2014	>=10%	16.7%	↓	>=10%	16.7%	23.7%	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	Feb 15					
Quality	Friends and family Test response rate	>=39%	40%	40%	↓	>=39%	43%	55%	G	M	Year end target of 40%	
	Cumulative average patient derived FFT	>=92	94	94	↓	>=92	93	95	G	M		
	Cumulative average family derived FFT	>=85	94	94	↓	>=85	90	96	S	M		
	Number of complaints	<=61	49	53	↑	<=6	4	6	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%	95.0%	95.0%	→	>=90%	100%	100%	S	M		
	MRSA bacteraemia	0	0	0	→	0	0	0	P	M		
	Clostridium Difficile	<=12	4	5	→	<=11	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%	94.4%	95.0%	↑	>=95%	96.4%	95.2%	S	M		
	Number of falls	<=39	89	97	→	<=4	3	3	B	M	Target for year end is equal to or below 43	Y
	Number of pressure ulcers	<=24	22	24	↓	<=1	2	0	B	M	Tagret for year end is equal to or below 25	
	Number of medication errors	<=139	155	169	↑	<=13	13	17	B	M	Target for year end is equal to or below 151	
	Number of in-hospital deaths	<=169	155	169	↓	<=11	17	12	G	M	Target for year end is equal to or below 179	Y
	HSMR - all diagnosis	<100	94.9	94.9	↑	<100	59.0	86.2	G	M	Current month Nov 14	
	HSMR - 56 diagnosis groups	<100	88.3	88.3	↑	<100	62.7	95.7	G	M	Current month Nov 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%	0.60%	0.65%	↓	<=0.97%	0.74%	0.37%	P	M	Data up to Jan-15 due to 30-days for outcome	
	Number of Never events	0	2	2	→	0	0	0	B	M		
	Number of SUIs	0	6	6	↓	0	1	0	B	M	Grade 3 pressure ulcer	Y
	Number of adverse events (red alerts)	0	1	1	→	0	0	0	B	M		
	Number of incidents reported	<=112.2	88	88	↓	<=112.2	97	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%	99.96%	99.96%	→	>=99%	100.00%	100.00%	S	M		
	18-weeks admitted pathway	>=90%	87.29%	85.00%	↓	>=90%	86.25%	90.85%	P	M	Surgery admitted pathways failed	Y
	18-weeks non-admitted pathway	>=95%	96.80%	96.00%	↑	>=95%	96.71%	95.36%	P	M		
	18-weeks incomplete pathway	>=92%	89.96%	90.00%	↓	>=92%	89.96%	91.37%	P	M	Surgery incomplete pathways failed	Y
	Patients waiting >52 weeks	0	0	0	→	0	0	0	P	M		
	26-weeks admitted pathway	>=95%	90.03%	92.00%	↓	>=95%	80.41%	90.85%	S	M		Y
	26-weeks non-admitted pathway	>=98%	93.17%	95.00%	↓	>=98%	90.00%	95.36%	S	M		Y
	26-weeks incomplete pathway	>=95%	94.86%	94.50%	↑	>=95%	94.14%	91.37%	S	M		Y
	Cancer 14-day wait	>=93%	99.59%	99.50%	→	>=93%	100.00%	100.00%	S	M		
	Cancer 31-day wait (first treatment)	>=96%	99.44%	99.50%	↓	>=96%	96.67%	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%	90.91%	88.00%	→	>=85%	92.59%	94.44%	S	M		
	Cancer 62-day wait (Consultant upgrade)	>=85%	97.92%	95.00%	→	>=85%	100.00%	100.00%	S	M		
	Cancelled operations	<=0.6%	1.44%	1.50%	↓	<=0.6%	2.21%	1.28%	B	M		Y
	Cancelled operations seen in 28-days	100%	99%	99%	→	100%	100%	100%	B	M		Y
	Delayed transfers of care	<=5%	4.69%	4.90%	↑	<=5%	3.39%	5.85%	S	M		
	Bed occupancy	80-90%	82.53%	82.00%	↑	80-90%	89.90%	85.59%	P	M		
	Length of stay	<6.6 days	6.32	6.30	↓	<6.6 days	6.58	5.8	P	M		
	Referrals - GP	19,832	20,973	22,880	↓	1,705	2,228	2,302	S	M		
	Referrals - DGH	8,811	9,097	9,924	→	793	741	732	S	M		
	Referrals - Other	8,757	10,203	11,131	→	769	865	875	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%	3.95%	3.80%	↑	<=3.6%	2.32%	4.92%	S	M	Figures subject to change due to input timing	Y
	Overall staff turnover - voluntary	<=9%	9.60%	9.00%	↓	<=9%	9.60%	8.80%	S	M	Rolling 12-month figures	
	Mandatory training	>=95%	90%	95%	→	>=95%	90%	91%	S	M		
	Appraisals	>=85%	86%	85%	↓	>=85%	86%	89%	S	M		
	Advocacy score	4.29	4.36	4.36	↑	4.29	4.36	4.15	B	Q	Latest data Q4 14/15; previous data Q3 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	4	P	M		
	Liquidity (Days)	-9.6	-0.2	-6.7	↓	-9.6	-0.2	0.7	P	M		
	Net Surplus £000's	-2	-646	-172	↓	32	-96	-52	P	M		
	Normalised Net Surplus £000's	-2	-210	265	↓	32	-96	-52	P	M		
	Cost reduction strategy delivered £000's	5,239	4,143	4,544	↓	542	451	496	P	M		
	Cash Balance	11,276	8,944	7,952	↑	722	-56	-378	P	M		
	Capital expenditure £000's	-4,004	-2,419	-5,218	↑	-877	-591	-445	P	M		
	Total agency cost £000's	-120	-1,444	-1,575	↓	-10	-273	-247	P	M	YTD cost equates to 1.8% of total staff costs	
	Total bank cost £000's	-129	-1,289	-1,406	↓	-12	-122	-60	P	M	YTD cost equates to 2.2% of total staff costs	

KEY:

Monitor indicators