

Performance Report Summary 2015/16

	Indicator	Target	Actual	Performance Trend	Current month		Previous Month	Data Quality	Frequency	Comments	Exception
					Target	Mar 16					
Quality	Friends and family Test response rate	>=40%	47%	↓	>=40%	42%	55%	✓	M		
	Cumulative average patient derived FFT (Inpatients)	>=95%	99%	→	>=95%	99%	98%	✓	M		
	Cumulative average family derived FFT	>=90%	98%	→	>=90%	100%	100%	✓	M		
	Number of complaints	<=67	65	↓	<=6	8	5	✓	M	Target for year end is equal to or below 67	
	Mixed sex accommodation	0	53	↑	0	5	11	✓	M		Y
	Dementia case finding	>=90%	96%	↓	>=90%	97%	100%	✓	M		
	MRSA bacteraemia	0	0	→	0	0	0	✓	M		
	Clostridium Difficile	<=12	6	↑	<=12	0	1	✓	M	Monitor target	
	Clostridium Difficile - lapses in care	<=4	4	↑	<=4	0	1	✓	M	Commissioner target	
	Blood cultures taken within 24hrs preceding first antibiotic given	>=95%	70%	↑	>=95%	80%	60%	✓	M		Y
	Delivery of at least one sepsis antibiotic within 3 hours of prescription	>=95%	92%	→	>=95%	100%	100%	✓	M		
	Delivery of at least one sepsis antibiotic within 1 hour of prescription	>=95%	58%	↑	>=95%	60%	50%	✓	M		Y
	VTE risk assessment	>=95%	95.9%	→	>=95%	95.3%	95.4%	✓	M		
	Number of falls	<=77	90	→	<=5	10	9	✓	M	Target for year end is equal to or below 77	Y
	Number of avoidable pressure ulcers 2+	<=12	10	↑	<=1	0	1	✓	M	Target for year end is equal to or below 12	
	Number of medication errors	<=174	183	↓	<=16	21	11	✓	M	Target for year end is equal to or below 174	Y
	Number of in-hospital deaths	<=174	174	↑	<=13	10	17	✓	M	Target for year end is equal to or below 174	
	Observed mortality (number of in-hospital deaths / spells)	<=1.5%	1.28%	↑	<=2.2%	0.83%	1.62%	✓	M	Target is 1.3% plus 2 standard deviations	
	HSMR - all diagnosis	<100	100.12	↑	<100	109.08	119.24	✓	M	Current month Nov-15	
	HSMR - 56 diagnosis groups	<100	103	↓	<100	118.25	112.55	✓	M	Current month Nov-15	
	Risk adjusted CABG mortality	<1	0.89	↓	<1	0.89	0.95	✓	M	6-month rolling averages; latest data up to Dec-15	
	Risk adjusted non-primary PCI MACE	<1	0.14	→	<1	0.14	0.14	✓	M	6-month rolling averages; latest data up to Dec-15	
	Emergency readmissions following elective admission	<100	84.01	↓	<100	103.64	74.44	✓	M	Current month Aug-15	
	Emergency readmissions following non-elective admission	<100	103.69	↓	<100	112.07	108.12	✓	M	Current month Aug-15	
	Number of Adverse Events (red alerts), SIs & never events	0	3	→	0	0	0	✓	M		Y
	Number of incidents reported	>=1326	1417	→	>=110	122	121	✓	M	Target is based on 25% increase in reporting	
	Monitor governance risk rating	Green	Green	→	Green	Green	Green	✓	M		
	Diagnostic waiting times	>=99%	99.38%	↓	>=99%	99.13%	100%	✓	M		
	18-weeks incomplete pathway	>=92%	92.35%	→	>=92%	92.35%	92.62%	✓	M		
	Patients waiting >52 weeks	0	0	→	0	0	0	✓	M		
	26-weeks admitted pathway - Welsh patients	>=95%	85.20%	↓	>=95%	82.44%	82.11%	✓	M		Y
	26-weeks non-admitted pathway - Welsh patients	>=98%	93.54%	↓	>=98%	91.67%	94.87%	✓	M		Y
	26-weeks incomplete pathway - Welsh patients	>=95%	93.52%	↓	>=95%	92.92%	94.85%	✓	M		Y
	Cancer 14-day wait	>=93%	100%	→	>=93%	100%	100%	✓	M		
	Cancer 31-day wait (first treatment)	>=96%	99.53%	↑	>=96%	100%	97.44%	✓	M		
	Cancer 31-day wait (subsequent treatment)	>=94%	100%	→	>=94%	100%	100%	✓	M		
	Cancer 62-day wait (urgent GP)	>=85%	91.61%	↓	>=85%	85.71%	100%	✓	M	Unadjusted performance was 77.42%	
	Cancer 62-day wait (Consultant upgrade)	>=85%	95.45%	↑	>=85%	100%	85.71%	✓	M	Unadjusted performance was 57.14%	
	Cancelled operations	<=0.6%	1.76%	↓	<=0.6%	1.80%	0.72%	✓	M		Y
	Cancelled operations seen in 28-days	100%	97%	→	100%	100%	100%	✓	M		Y
	Urgent operations cancelled 2nd time	0	1	→	0	0	0	✓	M		Y
	Delayed transfers of care	<=4.5%	5.31%	↓	<=4.5%	6.62%	7.39%	✓	M	New commissioner target of 4.5%	Y
	Bed occupancy	>=85%	82.67%	↑	>=85%	83.01%	84.13%	✓	M		
Performance	Elective length of stay for cardiac surgery (days)	<=11	10.48	↓	<=11	11.07	10.42	✓	M		
	Referrals - GP	23,355	26,296	↓	2,285	2,096	2,592	✓	M		
	Referrals - DGH	10,062	10,401	↓	878	833	895	✓	M		
	Referrals - Other	11,279	10,683	→	826	824	834	✓	M		Y
	Community data completeness - Referrals	>=50%	100%	→	>=50%	100%	100%	✓	M		
	Community data completeness - Treatments	>=50%	100%	→	>=50%	100%	100%	✓	M		
	Overall staff sickness	<=3.6%	3.65%	↑	<=3.6%	3.34%	3.45%	✓	M		
	Overall staff turnover - voluntary	<=9%	6.50%	↑	<=9%	6.50%	7.20%	✓	M	Rolling 12-month figures	
	Mandatory training	>=95%	95%	↓	>=95%	95%	94%	✓	M		
	Appraisals	>=85%	90%	↓	>=85%	90%	90%	✓	M		
Workforce	Total vacancies	TBD	80.2	↓	TBD	80.2	95.3	✓	M		
	Nursing vacancies	TBD	49.6	↓	TBD	49.6	57.1	✓	M		
	Advocacy score	4.29	4.18	↓	4.29	4.18	4.18	✓	Y	Figure taken from National Staff Survey	
	Financial Sustainability Risk Rating	3	3	↑	3	3	2	✓	M		
	Capital Service Capacity Rating	4	4	↑	4	4	3	✓	M		
	Liquidity Rating	2	2	↑	2	2	2	✓	M		
	Liquidity (Days)	-7.2	-10.3	↓	-7.2	-10.3	-7.4	✓	M		
	IE Margin Metric	2	2	↑	2	2	1	✓	M		
	Variance in IE Margin	3	3	↑	3	3	3	✓	M		
	Net Surplus £000's	-300	-1,296	↑	-18	20	-155	✓	M		
Finance	Normalised Net Surplus £000's	-300	-1,191	↑	-18	125	-155	✓	M		
	Cost reduction strategy delivered £000's	4,560	3,309	↓	404	-7	300	✓	M		
	Cash Balance	6,989	7,856	↓	1,477	-1,995	1,089	✓	M		
	Capital expenditure £000's	-5,305	-4,944	↑	-581	-1,158	-409	✓	M		
	Percentage of nursing agency staff	6%	11%	↑	6%	11%	9%	✓	M	Target for year end is 6% - Monitor Cap 3%	
	Total agency cost £000's	-44	-3,320	↓	-4	-282	-206	✓	M		
	Total bank cost £000's	-135	-1,685	↓	-11	-191	-139	✓	M		

KEY:

Monitor indicators