

Date of Meeting: 18/12/2012	Agenda Item No: 6.2	Enclosure: 4
Intended Outcome:		
For noting ✓	For information	For decision
Title of Report: Service Performance Report		
Aims: To update the Trust Board on operational performance.		
Executive Summary: The service performance report summarises Trust performance against a range of operating indicators for month eight of 2012/13. Operational performance against key targets remains broadly strong with some pressures within specific specialities on access targets. As reported at the last Board a concern has been raised with respect to our 18 week backlog of patients. An action plan has been prepared and agreed with NHS North of England and our commissioners. As reported at previous Board meetings we have been continuing with the process of migrating our current performance reports into the Northumbria Performance monitoring template. This is known as the Corporate Safety and Quality Regulatory Report. A draft version is attached at Appendix 1. There is further work required to complete all the indicators on this report and it is recommended that we continue to produce our current dashboard to run alongside this in Q4.		
Overview of key areas for consideration or noting: As above.		
Specific implications and links to the Trust's Strategic Aims:		
Ensure we provide high quality, safe and effective care for all our patients including meeting essential standards of safety and quality as set out by the CQC		✓
Develop a viable integrated clinical strategy for secondary care services which is sustainable and affordable		
Develop a new healthcare facility in West Cumbria that is fit for the 21st century		
Achieve sustainable financial balance through the delivery of the Trust's internal Cost Improvement Programme, securing a viable contract income from our GP commissioners and contributing to the system wide cost reductions		
To develop and implement a successful merger or acquisition plan that enables the Trust to become part of an existing NHS Foundation Trust		
Recommendations: The Trust Board is asked to note the content of the report. The Trust Board is asked to approve the Corporate Safety and Quality template.		

Prepared by:

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Director of Operations

Presented by:

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Director of Operations

**TRUST BOARD
PERFORMANCE REPORT
Month Eight (November)
Performance reported in
December 2012**

INTRODUCTION

This report provides the Trust Board with a summary of the organisations service performance against a range of key performance indicators as at November 2012.

OPERATING PERFORMANCE

The full Performance Dashboard is located at Appendix 1. The Performance Dashboard structure has eleven distinct sections and these are identified below:

1. Quality: headline measures
2. Resources: headline measures
3. Quality: supporting measures
4. Resources: supporting measures
5. Local monitoring
6. Local productivity metrics
7. Local workforce metrics
8. Local quality metrics
9. Estates metrics
10. Facilities metrics
11. Referral to Treatment analysis by speciality

In addition to national requirements local targets have also been maintained, particularly around productivity metrics.

2. REFERRAL TO TREATMENT ANALYSIS BY SPECIALTY

18 Weeks

We continue to work closely with the Intensive Support Team (IST) to ensure our systems and processes are fit for purpose to ensure sustainability of the 18 week RTT targets.

Following their initial visit in August the finalised report is expected imminently. Focussed areas of work are as follows:-

- Capacity and Demand modelling by speciality.
- Development of PTLs
- Agreement of RTT stages by speciality
- Workshops for Business Managers and clinicians and identification of Clinical Champions

IST expertise continues to be offered to the Trust to support delivery of the Improvement Plan.

The agreed action plan to clear the backlog of incomplete pathways is being monitored weekly.

Fortnightly calls with CCG and NHS NoE continue.

Elective activity has been affected by the recent emergency pressures causing some specialities to slip against their agreed plan and actions have been taken to address this.

Performance against the admitted target of 90% and the incomplete pathway target of 92% is expected to be affected. Commissioners have been notified that admitted care delivery is expected to be 80% in December 2012 and 67-77% during Q4.

Providing capacity is available and the action plan is delivered performance is currently expected to normalise in Q1 of 2013/14.

3. TRANSFERS OF CARE

We are continuing to meet with the wider health economy about a whole system approach to Delayed Transfer of Care (DTC). It has been agreed by all partners in the health economy (including Local Authority) that an integrated Discharge Team will be implemented and located on both acute hospital sites. Pump priming monies from commissioning will fund a 12 month management post to oversee and develop this service (due to be advertised across all health economy in the first two weeks of October). It is planned that existing staff who currently undertake a discharge function in all three organisations will come together to establish a core hospital discharge team. This team will clearly define and establish (with senior guidance) appropriate function of the team over the following 6-12 months. The primary focus will be on the high volume delays in the system. This will include new operational policies shared funding streams and shared metrics. There is now

a shared action plan which is reviewed weekly by senior leads from all organisations, including commissioners.

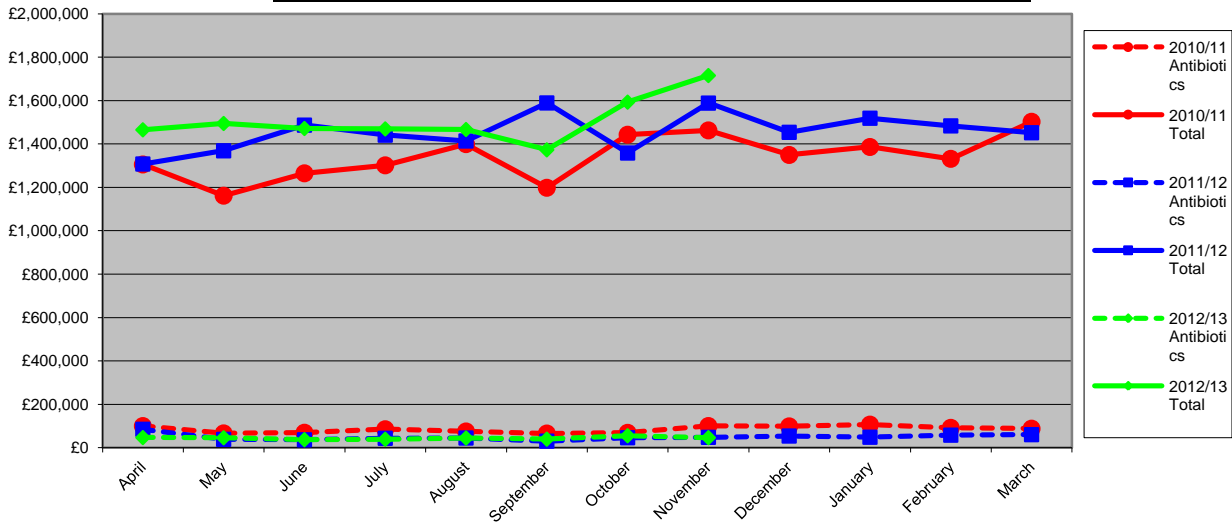
4. PHARMACY METRICS

The charts below highlight expenditure for three key areas comparing expenditure against total drug spend and also comparing the current year and the previous two years.

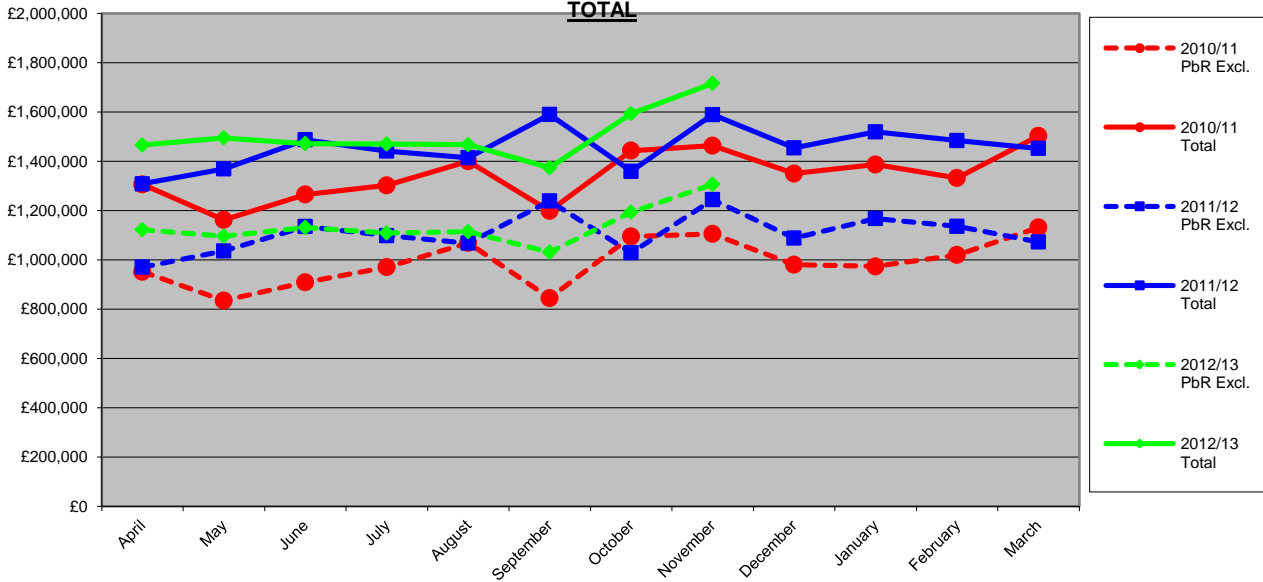
Expenditure up to the end of month 8 of 2012/13 on antibiotic drugs accounts for 3% of total expenditure comparable to the same period in 2011/12 which was 3.2%.

The expenditure for PbR excluded drugs is 76% of the total drugs spend, and PbR included drugs account for 24%.

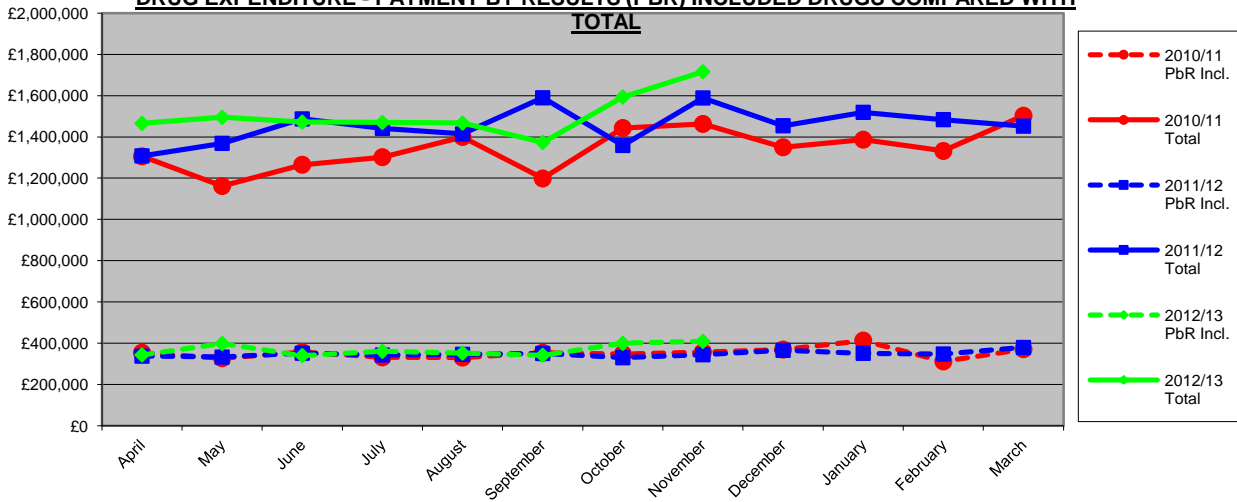
EXPENDITURE ON ANTIBIOTICS COMPARED WITH TOTAL EXPENDITURE



DRUG EXPENDITURE - PAYMENT BY RESULTS (PbR) EXCLUDED DRUGS COMPARED WITH TOTAL



DRUG EXPENDITURE - PAYMENT BY RESULTS (PbR) INCLUDED DRUGS COMPARED WITH TOTAL



APPENDIX 1

PERFORMANCE DASHBOARD

In summary the dashboard provides: -

- A profile of performance in each month of the current year, up to and including, the latest data available.
- All data items are shown using a monthly profile with the exception of a small number of indicators which use a quarterly profile.
- The criteria for traffic lighting (trajectory position) is used to assess performance for the current data period. Grey shading for the latest month indicates that data is not yet available for that period, at the time of the production of the report.
- The letters “nad” in a grey shaded box means that there was “no applicable data (nad)” for that particular period/month.
- The “Year to Date” column is also traffic lighted for those indicators where performance has to be achieved across the whole of the year.