

Trust Performance Report Month 7

Trust Board
30th November 2017



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Mortality

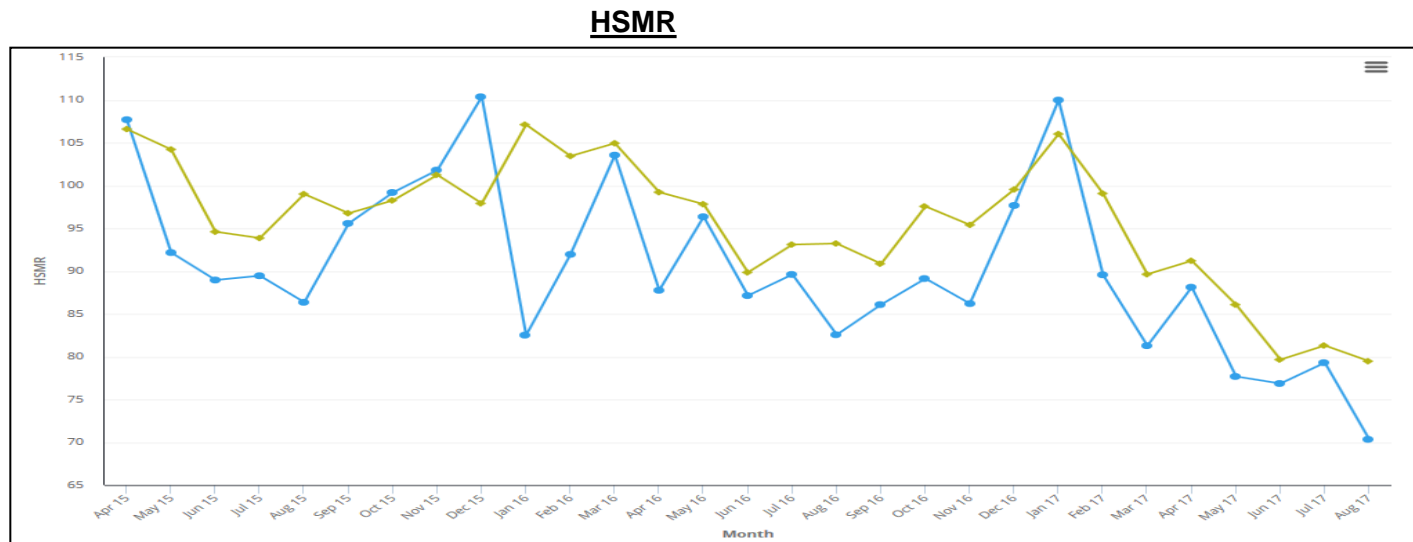


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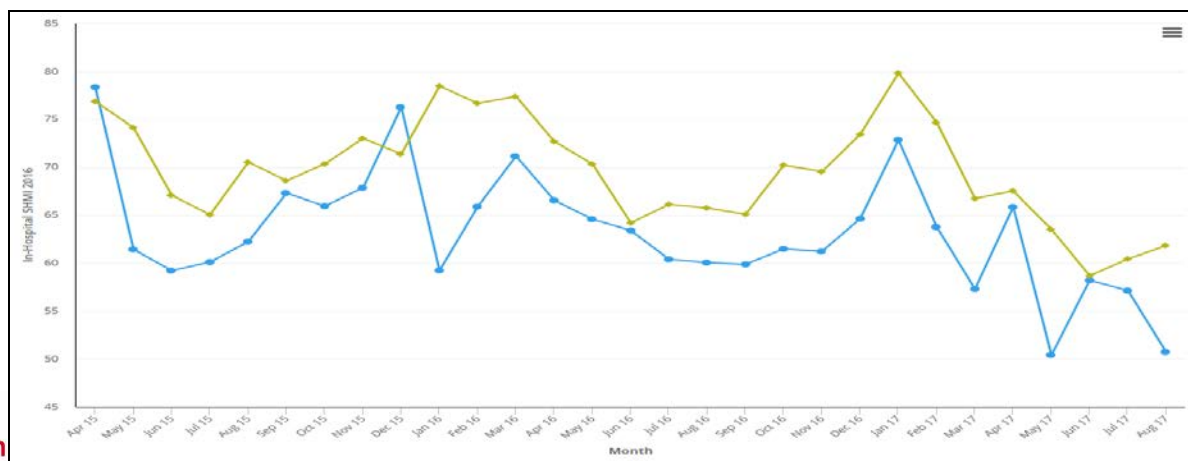
Mortality

HSMR

Trust HSMR performance against the HES peer. The HSMR has been consistently below the HES peer since January 2016. There was a spike over the winter period (January) which has reduced down in February 2017 and sustained into August.



In Hospital SHMI



In Hospital SHMI**

Since December 2015 the In Hospital SHMI has been consistently below the HES Peer.

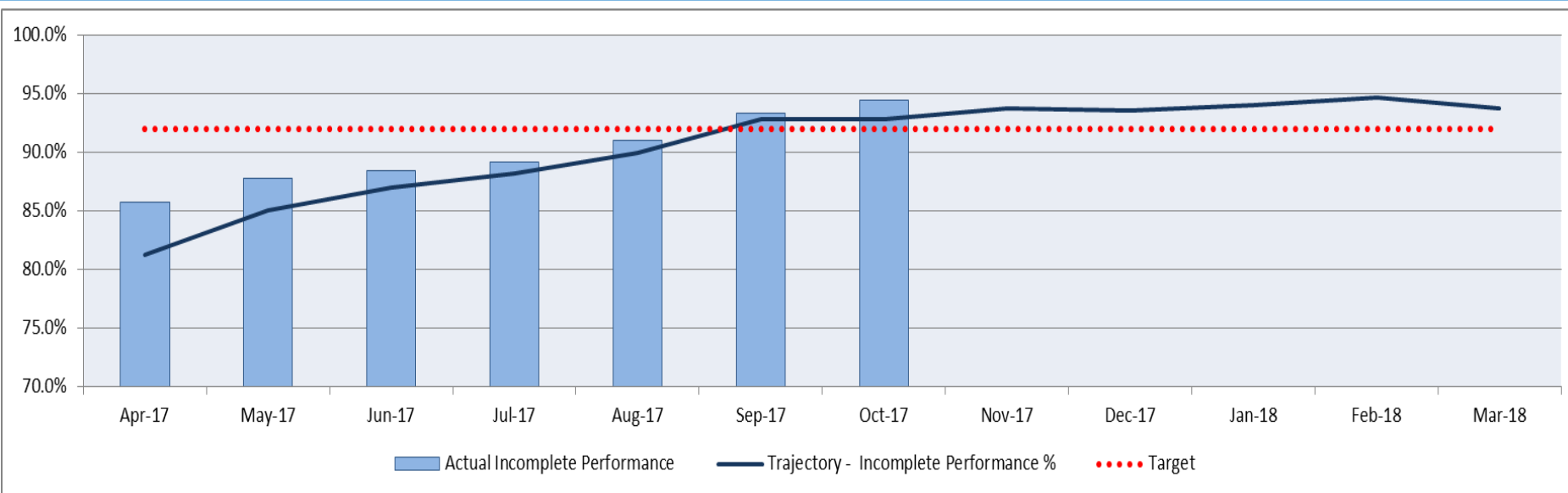
**Please note this data covers only in Hospital deaths

RTT



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RTT 2017/2018 Trajectory

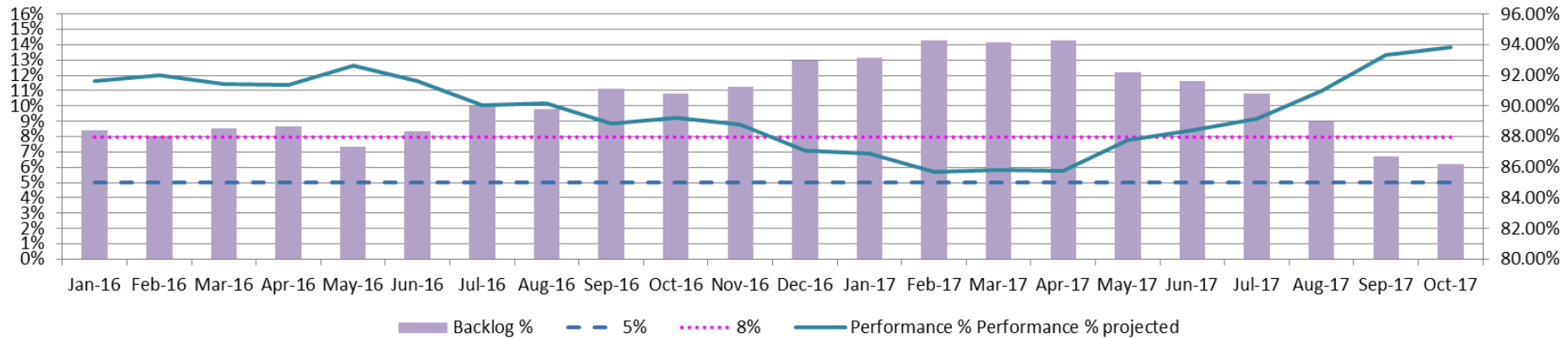


	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Referral to treatment Incomplete Trajectory - >18 weeks	3,042	2,431	2,080	1,862	1,654	1,201	1,159	1,017	1,044	973	865	1,012
Referral to treatment Incomplete Trajectory - Total patients	16,224	16,220	16,000	15,800	16,400	16,600	16,000	16,150	16,100	16,300	16,200	16,150
Trajectory - Incomplete Performance %	81.3%	85.0%	87.0%	88.2%	89.9%	92.8%	92.8%	93.7%	93.5%	94.0%	94.7%	93.7%
Referral to treatment Incomplete Actual - >18 weeks	2297	1974	1795	1581	1303	983	827					
Referral to treatment Incomplete Actual - Total patients	16107	16178	15456	14608	14507	14704	14799					
Actual Incomplete Performance	85.7%	87.8%	88.4%	89.2%	91.0%	93.3%	94.4%					

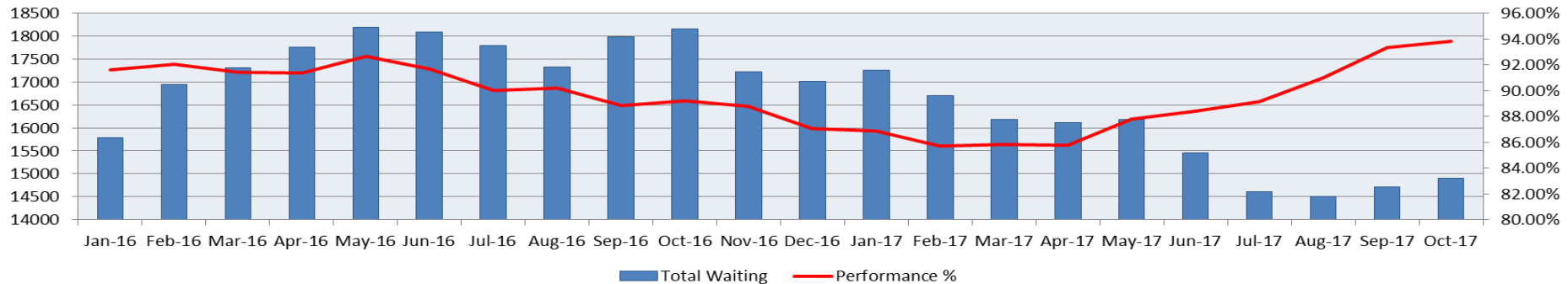
The table and graph above show the trajectory of performance for 2017/18 along with the projected list size and 18 week breaches per month.

RTT Summary October 2017

Backlog as a percentage of the waiting list



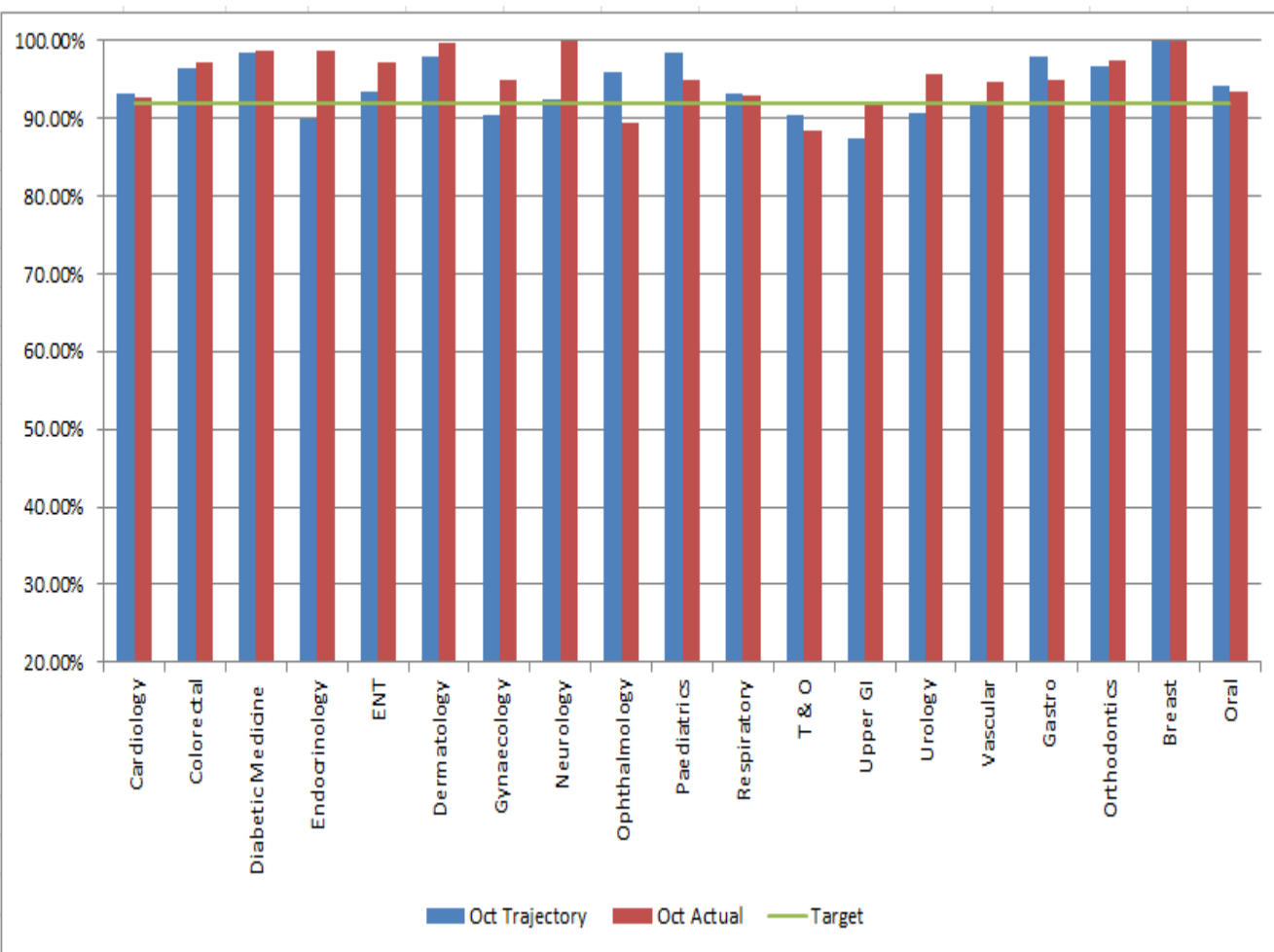
Total Waiting List Vs 18 Weeks Performance



Octobers RTT performance was 93.81% against a trajectory of 93.7%.

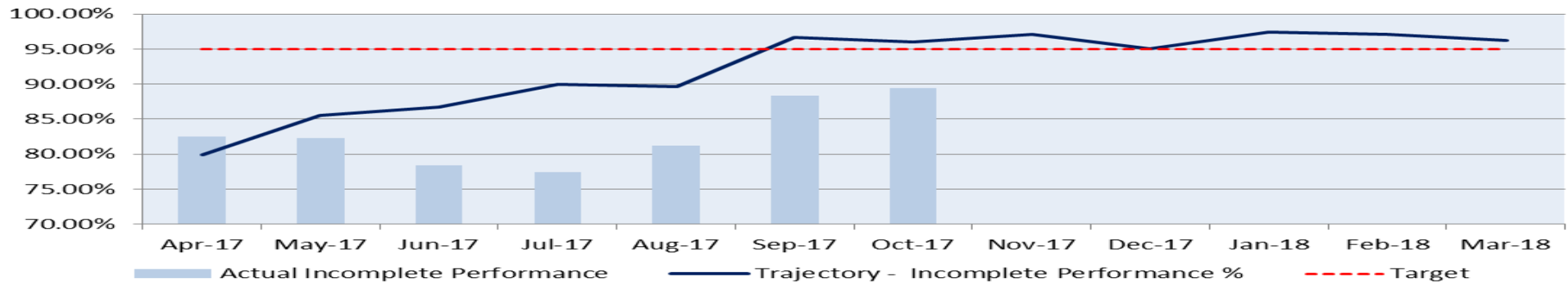
Speciality Performance Against Trajectory Combined

Specialty	Oct Trajectory	Oct Actual	Variance
Cardiology	93.12%	92.65%	-0.47%
Colorectal	96.32%	97.18%	0.86%
Diabetic Medicine	98.55%	98.72%	0.17%
Endocrinology	89.83%	98.75%	8.92%
ENT	93.43%	97.11%	3.68%
Dermatology	98.04%	99.60%	1.57%
Gynaecology	90.36%	95.02%	4.66%
Neurology	92.40%	100.00%	7.60%
Ophthalmology	95.99%	89.45%	-6.54%
Paediatrics	98.49%	95.03%	-3.45%
Respiratory	93.25%	92.90%	-0.35%
T & O	90.41%	88.37%	-2.04%
Upper GI	87.39%	92.05%	4.65%
Urology	90.70%	95.75%	5.06%
Vascular	92.06%	94.74%	2.69%
Gastro	97.91%	94.87%	-3.04%
Orthodontics	96.77%	97.39%	0.61%
Breast	100.00%	100.00%	0.00%
Oral	94.06%	93.35%	-0.71%
Total Incompletes	16000	14799	-1201
<18	14841	13972	-869
BACKLOG	1159	827	-332
Total Performance	92.76%	94.41%	1.66%



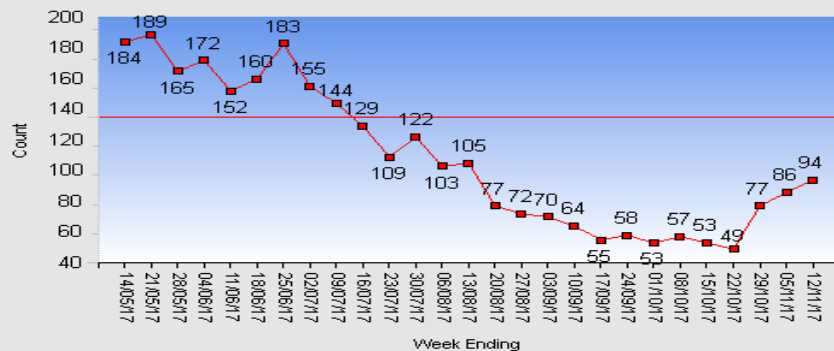
The above table and graph shows performance by speciality against trajectory and the variance from plan for the combined performance

RTT - Ophthalmology

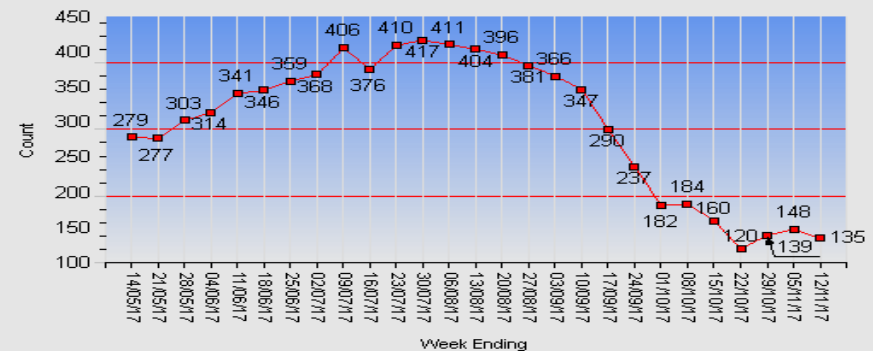


Ophthalmology	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Referral to treatment Incompletes Trajectory - >18 w weeks	570	405	356	257	279	84	101	71	132	67	76	98
Referral to treatment Incompletes Trajectory - Total patients	2842	2807	2673	2561	2688	2495	2517	2451	2637	2634	2641	2580
Trajectory - Incomplete Performance %	79.94%	85.57%	86.68%	89.96%	89.62%	96.63%	95.99%	97.10%	94.99%	97.46%	97.12%	96.20%
Referral to treatment Incompletes Actual - >18 weeks	453	473	539	531	445	263	229					
Referral to treatment Incompletes Actual - Total patients	2597	2667	2492	2349	2371	2246	2170					
Actual Incomplete Performance	82.56%	82.26%	78.37%	77.39%	81.23%	88.29%	89.45%					

Non-Admitted Backlog Count (Last 26 Weeks)

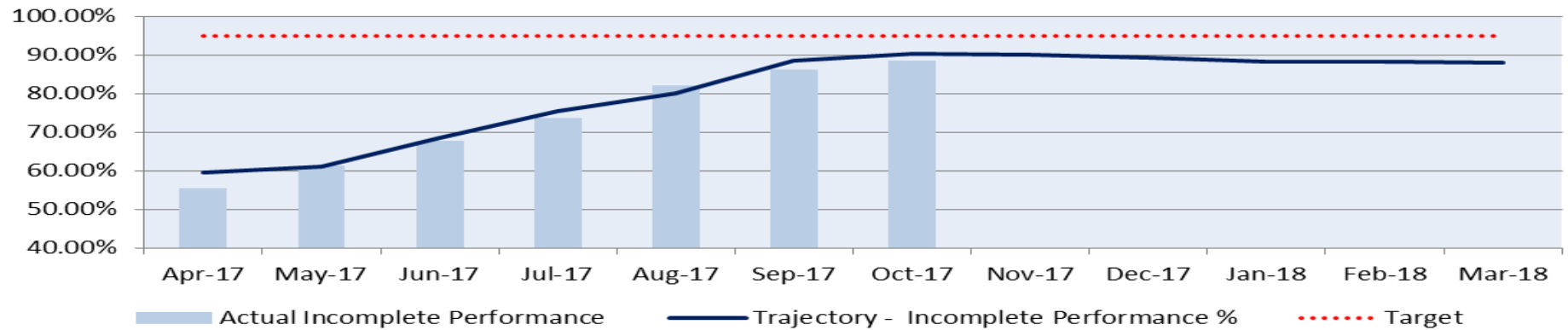


Admitted Backlog Count (Last 26 Weeks)



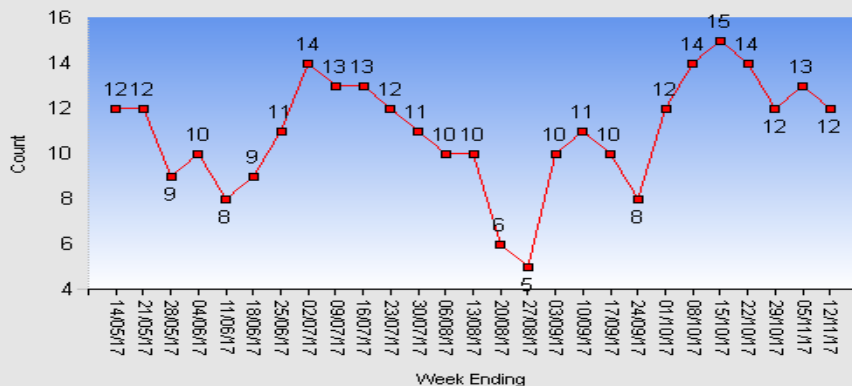
Ophthalmology has struggled to hit the operational targets, however the as the backlog is improving. Additional activity was scheduled during September & October to assist in clearing 18 week backlog, this appears to show an improvement in performance

RTT – Trauma & Orthopaedic

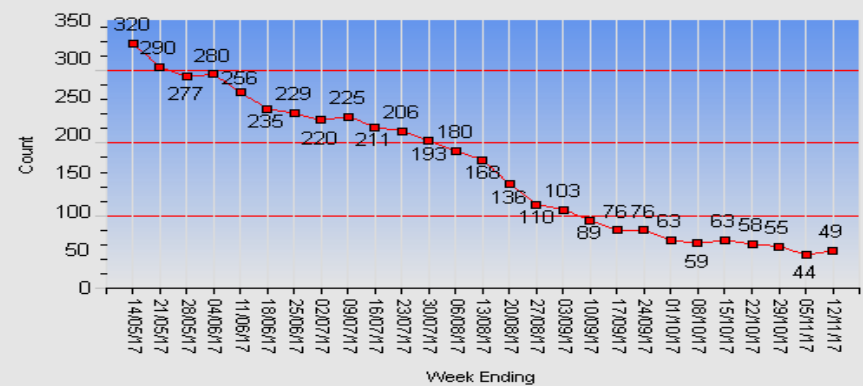


Trauma & Orthopaedic	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Referral to treatment Incompletes Trajectory - >18 w weeks	511	465	342	244	185	97	74	80	97	92	81	73
Referral to treatment Incompletes Trajectory - Total patients	1259	1191	1087	996	931	840	772	807	895	783	685	605
Trajectory - Incomplete Performance %	59.41%	60.96%	68.54%	75.50%	80.13%	88.45%	90.41%	90.09%	89.16%	88.25%	88.18%	87.93%
Referral to treatment Incompletes Actual - >18 w weeks	466	351	265	222	134	92	75					
Referral to treatment Incompletes Actual - Total patients	1045	908	820	844	748	669	645					
Actual Incomplete Performance	55.41%	61.34%	67.68%	73.70%	82.09%	86.25%	88.37%					

Non-Admitted Backlog Count (Last 26 Weeks)



Admitted Backlog Count (Last 26 Weeks)



November Projected RTT Performance

Admitted Incomplete Pathways

	Open Clocks		Performance %
	Total Open Clocks	18+ Wks	
Reporting Specialty			
Cardiology	128	24	81.25
Cardiothoracic Surgery	1		100.00
Dermatology			
Ear, Nose & Throat (ENT)	177	6	96.61
Gastroenterology	8		100.00
General Medicine	1		100.00
General Surgery	523	68	87.00
Geriatric Medicine	1		100.00
Gynaecology	208	32	84.62
Neurology			
Neurosurgery			
Ophthalmology	689	138	79.97
Oral Surgery	136	29	78.68
Other	128	15	88.28
Plastic Surgery			
Thoracic Medicine	13		100.00
Trauma & Orthopaedics	375	70	81.33
Urology	305	34	88.85
	2,693	416	84.55

Non Admitted

	Open Clocks		Performance %
	Total Open Clocks	18+ Wks	
	754	53	92.97
	14		100.00
	711	1	99.86
	1798	49	97.27
	1069	49	95.42
	452	4	99.12
	1793	41	97.71
	147	3	97.96
	1039	50	95.19
	1		100.00
	1		100.00
	1492	85	94.30
	605	16	97.36
	725	37	94.90
	426	38	91.08
	245	16	93.47
	831	9	98.92
	12,103	451	96.27

Combined

	Open Clocks		Performance %
	Total Open Clocks	18+ Wks	
	882	77	91.27
	15		100.00
	711	1	99.86
	1975	55	97.22
	1077	49	95.45
	453	4	99.12
	2316	109	95.29
	148	3	97.97
	1247	82	93.42
	1		100.00
	1		100.00
	2181	223	89.78
	741	45	93.93
	853	52	93.90
	439	38	91.34
	620	86	86.13
	1136	43	96.21
	14,796	867	94.14

November's predicted combined incomplete performance is currently at 94.14%, with overall performance being driven by the admitted pathway. The figures above are subject to month end validation.

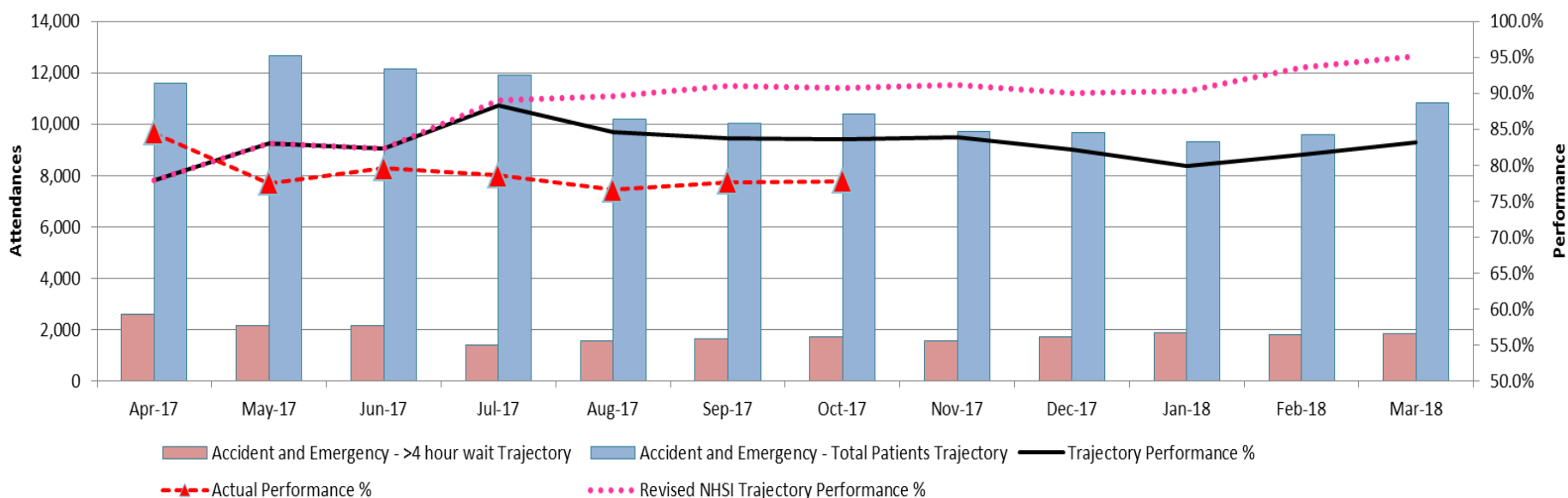
The operational plan target for November is 93.7%

Urgent Care Update



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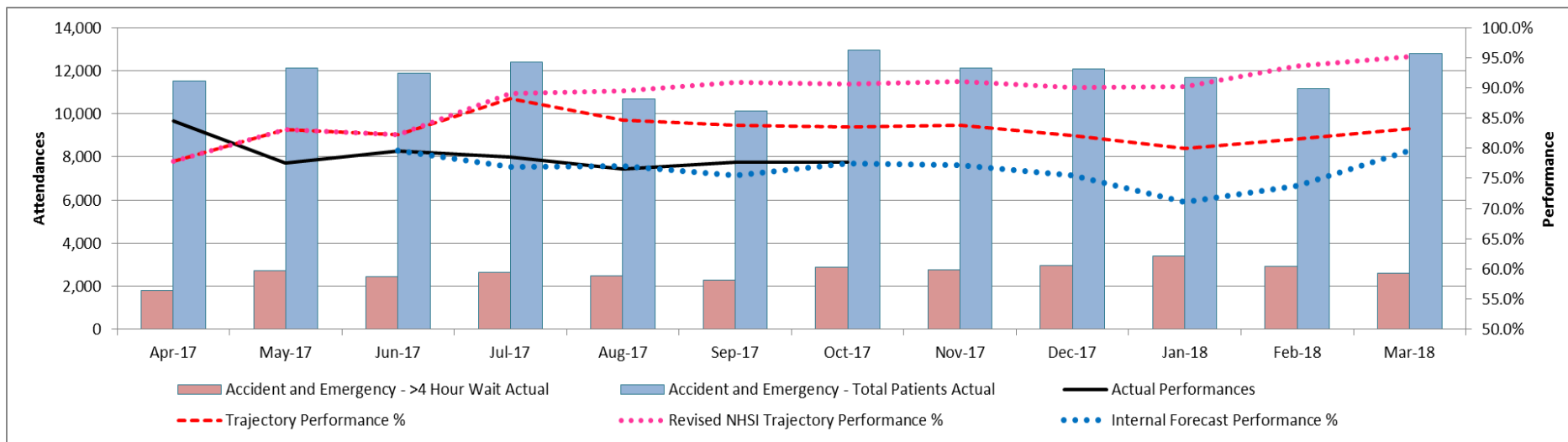
A&E 2017-2018 Trust Trajectory



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Accident and Emergency - >4 hour wait Trajectory	2,570	2,141	2,153	1,402	1,569	1,627	1,712	1,563	1,725	1,863	1,776	1,818
Accident and Emergency - Total Patients Trajectory	11,602	12,654	12,126	11,919	10,201	10,012	10,400	9,692	9,667	9,289	9,583	10,810
Trajectory Performance %	77.8%	83.1%	82.2%	88.2%	84.6%	83.7%	83.5%	83.9%	82.2%	79.9%	81.5%	83.2%
Revised NHSI Trajectory Performance %	77.8%	83.1%	82.2%	89.0%	89.6%	91.0%	90.7%	91.1%	90.0%	90.3%	93.7%	95.2%
Accident and Emergency - >4 Hour Wait Actual	1786	2721	2429	2654	2496	2265	2878					
Accident and Emergency - Total Patients Actual	11520	12106	11877	12391	10663	10133	12932					
Actual Performance %	84.5%	77.5%	79.5%	78.6%	76.6%	77.6%	77.7%					

The table and graph above show the A&E trajectory of performance for 2017/18 along with the projected attendances and breaches by month based on the Trusts internal trajectory. October actual performance was 77.7% against a target of 83.5%. As of October 2017 the Shropshire Minor Injury Unit attendances have been mapped to the Trust.

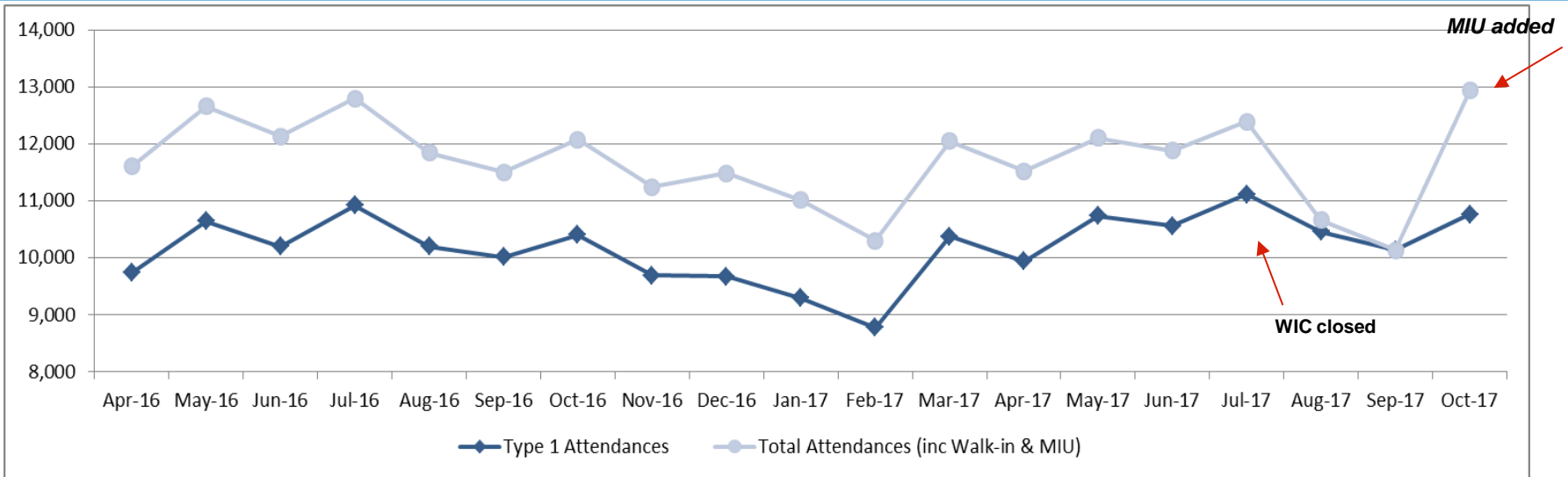
A&E 2017-2018 Trust Trajectory vs Current Forecast



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Accident and Emergency - >4 Hour Wait Actual	1,786	2,722	2,429	2,654	2,496	2,265	2,878	2,754	2,964	3,385	2,933	2,608
Accident and Emergency - Total Patients Actual	11,520	12,106	11,879	12,391	10,663	10,133	12,932	12,099	12,074	11,688	11,167	12,793
Actual Performances	84.5%	77.5%	79.6%	78.6%	76.6%	77.6%	77.7%					
Internal Forecast Performance %				76.9%	77.0%	75.5%	77.6%	77.2%	75.5%	71.0%	73.7%	79.6%
Trajectory Performance %	77.8%	83.1%	82.2%	88.2%	84.6%	83.7%	83.5%	83.9%	82.2%	79.9%	81.5%	83.2%
Revised NHSI Trajectory Performance %	77.8%	83.1%	82.2%	89.0%	89.6%	91.0%	90.7%	91.1%	90.0%	90.3%	93.7%	95.2%

**** please note as of Oct 2017 MIU community to be added to the Trust Attendances, the internal forecast has been adjusted to take this into account.**

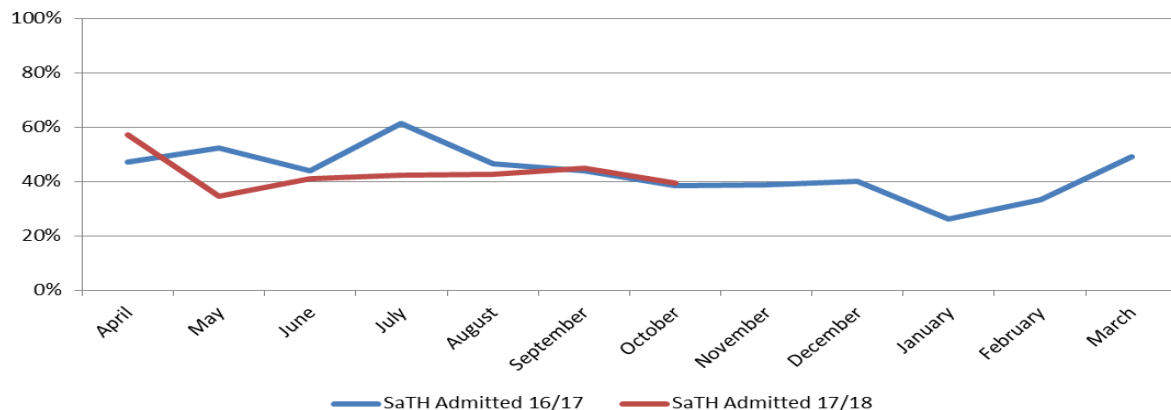
A/E Performance & Attendance's



		Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Total
Planned Trajectory	Attendance	11602	12654	12126	11919	10201	10012	10400	9692	9667	9289	9583	10810	127955
	>4 Hour Wait	2570	2141	2153	1402	1569	1627	1712	1563	1725	1863	1776	1818	21919
	Performance	77.85%	83.08%	82.24%	88.24%	84.62%	83.75%	83.54%	83.87%	82.16%	79.94%	81.47%	83.18%	82.87%
Actual Performance	ED Attendance	11520	12106	11878	12391	10663	10133	10764						79455
	MIU Attendance							2168						2168
	>4 SATH Non-Admitted	827	1192	1093	1311	1218	1046	1515						8202
	>4 SATH Admitted	959	1529	1336	1343	1277	1219	1363						9026
	>4 RSH Non-Admitted	306	520	411	435	567	473	601						3313
	>4 RSH Admitted	537	834	794	678	711	749	783						5086
	>4 PRH Non-Admitted	521	672	682	876	651	573	914						4889
	>4 PRH Admitted	422	695	542	665	566	470	580						3940
	>4 Total	1786	2721	2429	2654	2495	2265	2878						17228
	SaTH Performance	84.50%	77.52%	79.55%	78.58%	76.60%	77.65%	73.26%	0.00%	0.00%	0.00%	0.00%	0.00%	78.32%
	Performance with MIU	84.50%	77.52%	79.55%	78.58%	76.60%	77.65%	77.75%	0.00%	0.00%	0.00%	0.00%	0.00%	78.89%

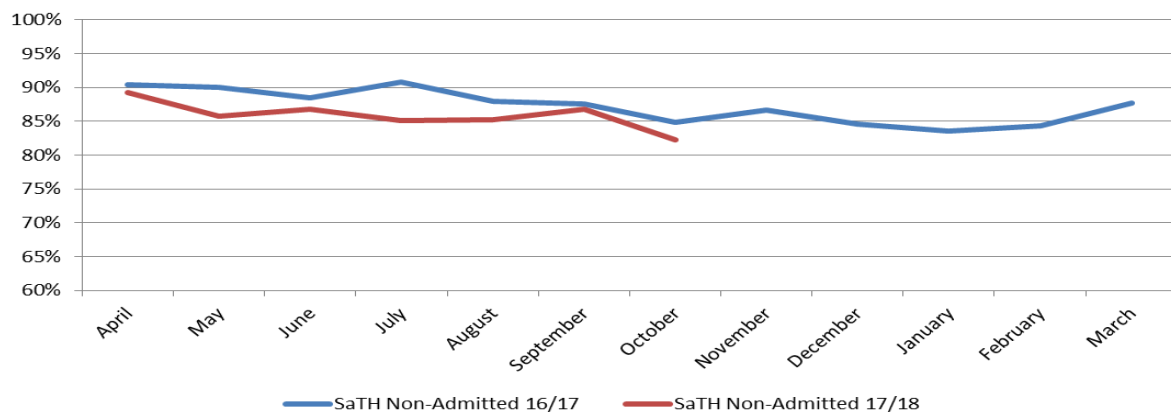
A&E SaTH YTD Performance

SaTH Admitted Performance



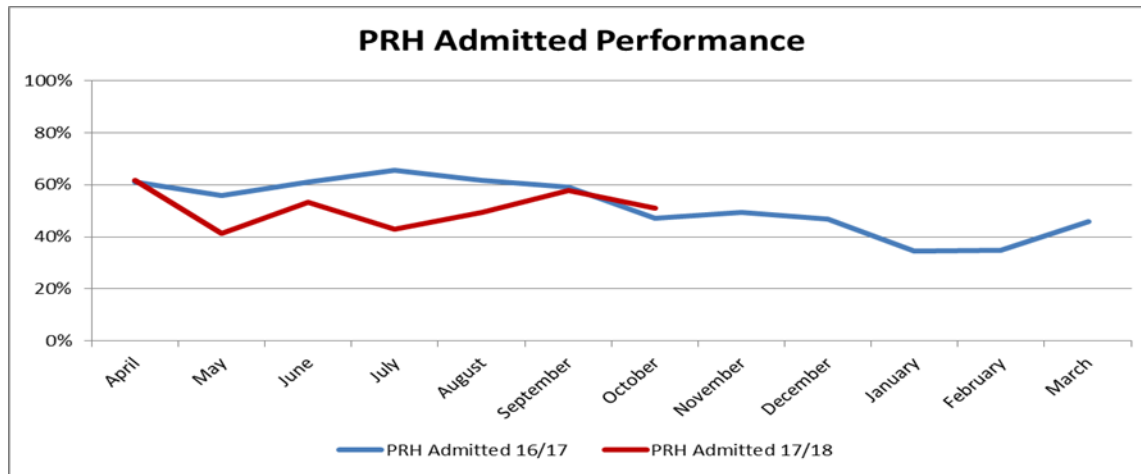
- SaTH admitted attendance year to date is up 4% (614 attendances) compared to same time last year.
- SaTH Admitted breaches are up 13.35% (1063 breaches)
- SaTH Admitted performance is down 4.68%

SaTH Non-Admitted Performance

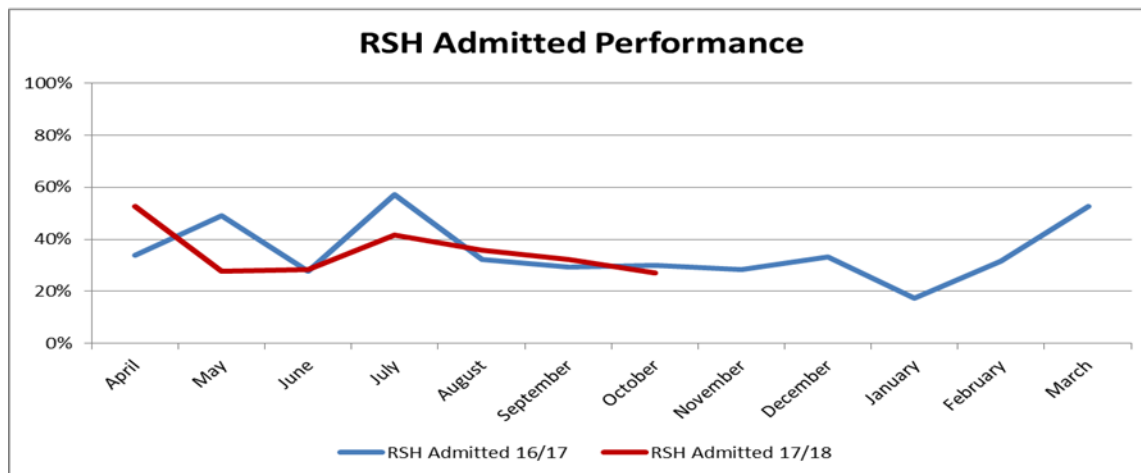


- SaTH Non-Admitted attendance year to date is up 1.72% (979 attendances) compared to same time last year
- SaTH Non-Admitted breaches are up 26.41% (1714)
- SaTH Non-Admitted performance is down 2.77%

A&E Admitted Performance by Site



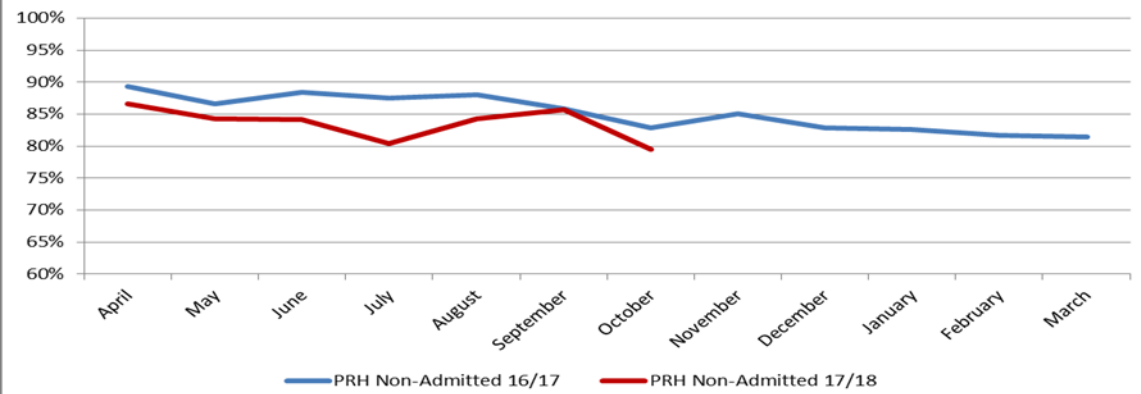
- PRH admitted attendance year to date is up 7.4% (556 attendances) compared to same time last year.
- PRH Admitted breaches are up 28.0% (863 breaches)
- PRH Admitted performance is down 7.9%



- RSH admitted attendance year to date is up 0.7% (60 attendances) compared to same time last year
- RSH Admitted breaches are up 4.2% (203).
- RSH Admitted performance is down 2%

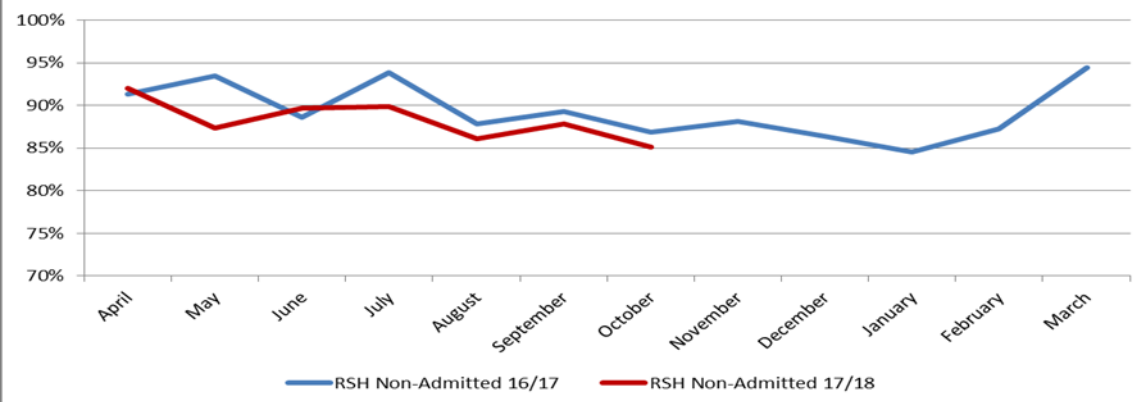
A&E Non Admitted Performance by Site

PRH Non-Admitted Performance



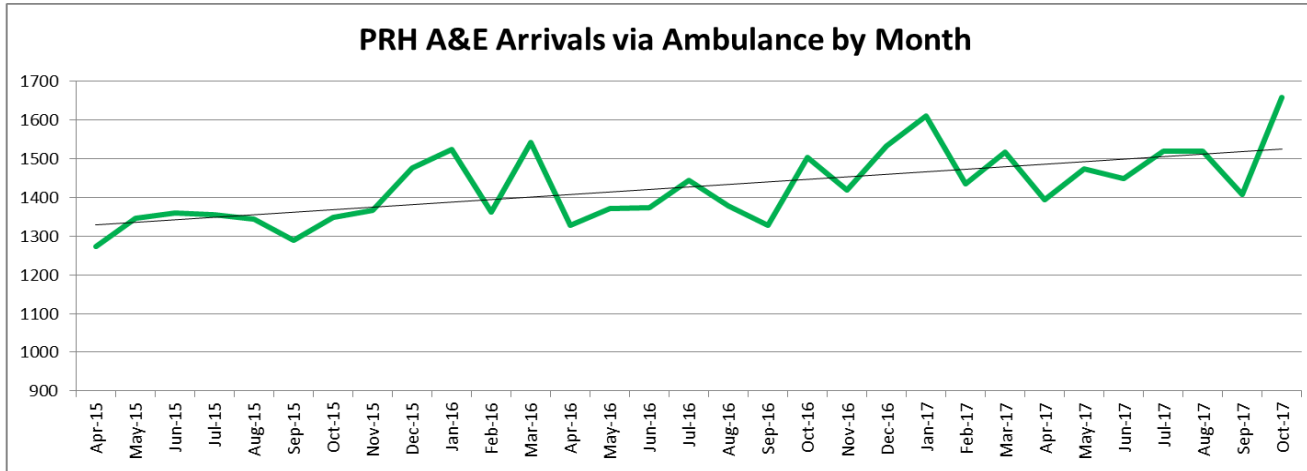
- PRH Non-admitted attendance year to date is up 3.4% (989 attendances) compared to same time last year.
- PRH Non-admitted breaches are up 31.2% (1163 breaches)
- PRH Non-admitted performance is down 3.5%

RSH Non-Admitted Performance

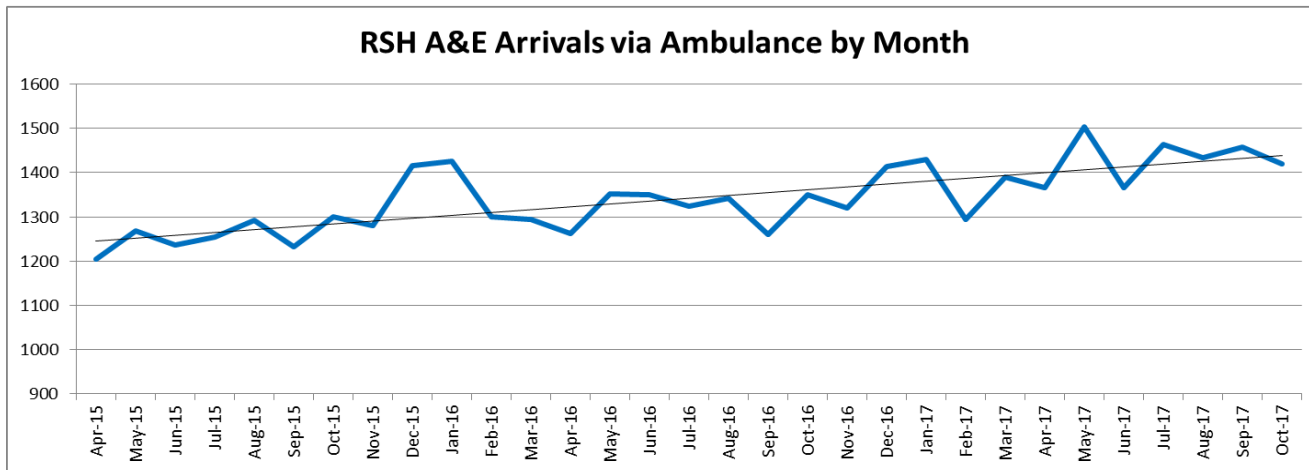


- RSH Non-admitted attendance year to date is down 0.04% (-11 attendances) compared to same time last year.
- RSH Non-Admitted breaches are up 19.8% (548 breaches)
- RSH Non-Admitted performance is down 1.9%

A&E Arrivals via Ambulance



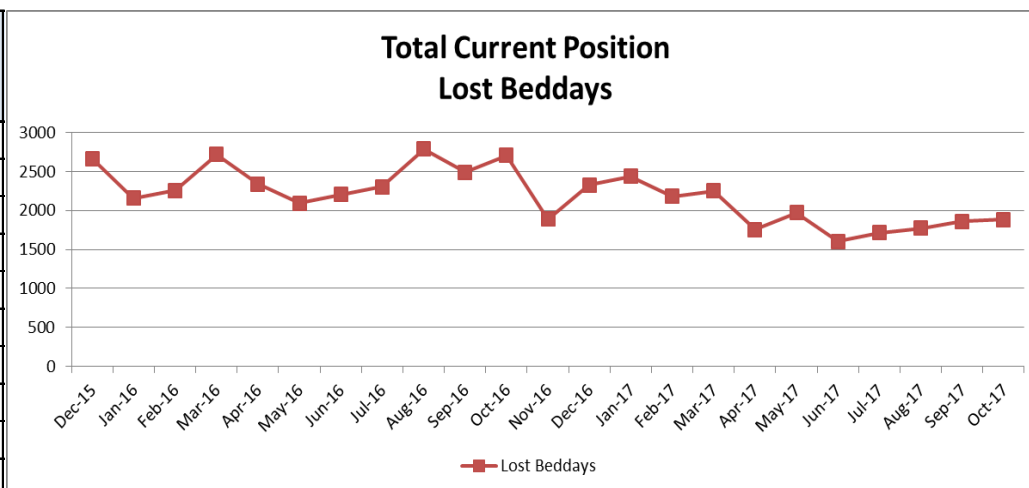
- At PRH there were 10.38% (156) more arrivals via ambulance when comparing Oct-17 to Oct-16
- Ambulance arrivals were up 17.91% (252) compared to last month



- At RSH there were 5% (68) more arrivals via ambulance when comparing Oct-17 to Oct-16
- Ambulance arrivals were down 2.67% (-39) compared to last month

MFFD Trust Total

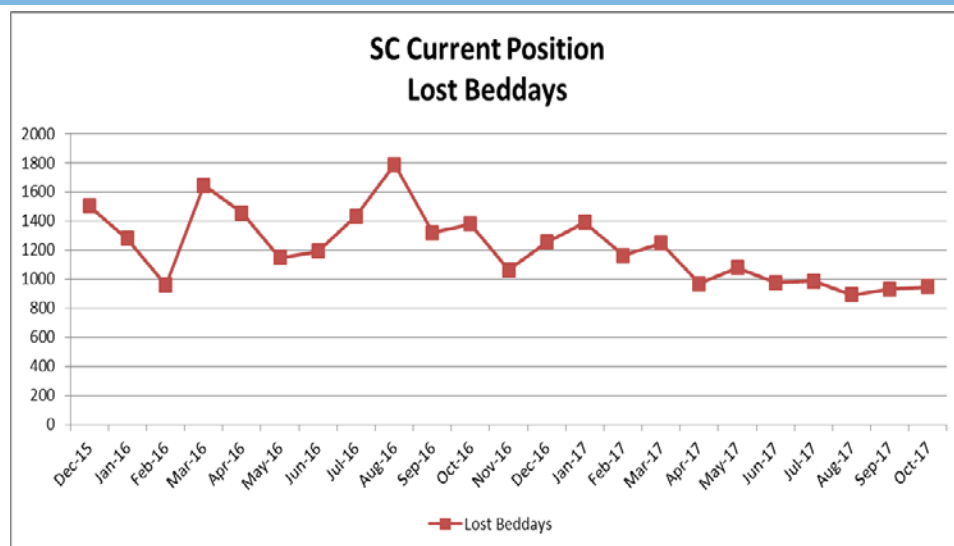
Discharge Month	No. Patients	Lost Beddays	Average Days on List	Avg Patients per week
Nov-15	379	2349	6	95
Dec-15	428	2662	6	107
Jan-16	419	2158	5	105
Feb-16	399	2254	6	100
Mar-16	447	2715	6	112
Apr-16	434	2338	5	109
May-16	373	2093	6	93
Jun-16	393	2202	6	98
Jul-16	352	2304	7	88
Aug-16	394	2786	7	99
Sep-16	366	2491	7	92
Oct-16	384	2703	7	96
Nov-16	417	1886	5	104
Dec-16	394	2326	6	99
Jan-17	468	2434	5	117
Feb-17	415	2179	5	104
Mar-17	440	2247	5	110
Apr-17	370	1752	5	93
May-17	430	1971	5	108
Jun-17	385	1604	4	96
Jul-17	403	1711	4	101
Aug-17	391	1770	5	98
Sep-17	399	1860	5	100
Oct-17	459	1882	4	115



The number of lost bed days is showing a slight increase in the last 3 months, however this is still lower than the same time last financial year.

MFFD Shropshire

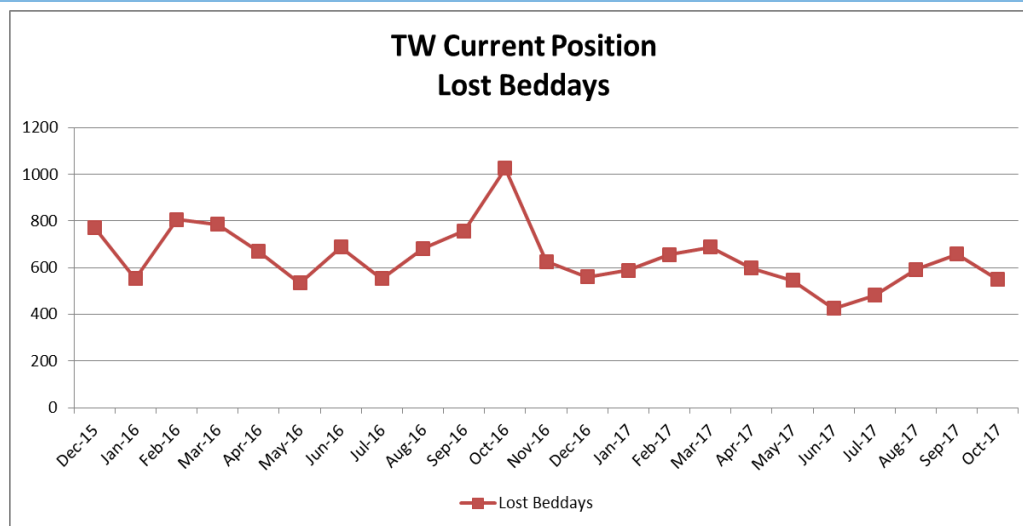
Discharge Month	No. Patients	Lost Beddays	Average Days on List	Avg Patients per week
Nov-15	208	1254	6	52
Dec-15	233	1503	6	58
Jan-16	267	1279	5	67
Feb-16	219	958	4	55
Mar-16	270	1644	6	68
Apr-16	269	1456	5	67
May-16	223	1148	5	56
Jun-16	237	1190	5	59
Jul-16	218	1433	7	55
Aug-16	250	1788	7	63
Sep-16	207	1318	6	52
Oct-16	239	1379	6	60
Nov-16	259	1062	4	65
Dec-16	248	1253	5	62
Jan-17	292	1391	5	73
Feb-17	257	1163	5	64
Mar-17	272	1246	5	68
Apr-17	238	968	4	60
May-17	272	1078	4	68
Jun-17	234	974	4	59
Jul-17	257	988	4	64
Aug-17	224	889	4	56
Sep-17	216	931	4	54
Oct-17	269	946	4	67



The number of lost bed days attributed to Shropshire has seen a greater reduction when compared to Telford & Wrekin (please next page).

MFFD Telford & Wrekin

Discharge Month	No. Patients	Lost Beddays	Average Days on List	Avg Patients per week
Nov-15	113	733	6	28
Dec-15	128	772	6	32
Jan-16	106	554	5	27
Feb-16	118	806	7	30
Mar-16	121	786	6	30
Apr-16	117	670	6	29
May-16	101	534	5	25
Jun-16	100	689	7	25
Jul-16	87	554	6	22
Aug-16	95	682	7	24
Sep-16	106	757	7	27
Oct-16	95	1026	11	24
Nov-16	113	627	6	28
Dec-16	92	560	6	23
Jan-17	118	589	5	30
Feb-17	105	656	6	26
Mar-17	118	689	6	30
Apr-17	89	599	7	22
May-17	101	546	5	25
Jun-17	97	425	4	24
Jul-17	94	482	5	24
Aug-17	114	592	5	29
Sep-17	130	658	5	33
Oct-17	120	549	5	30



Telford and Wrekin attributed lost beddays are showing a rise since Jun 17, however October has shown a decline.

October ED performance

Trust

Overall performance is 78.90% ytd, with 88.97% on non-admitted and 42.80% for patients waiting admission. Solutions to improving these performance statistics lie in the individual hospital sites. The common feature about the performance is that the discharge processes from hospital beds creates a log jam at both hospitals at times, this is both simple discharge patterns and for patients who require more complex follow-up arrangements. Because discharges of patients can be slow, there is a requirement to open additional beds to accommodate and surge in demand. These additional beds are also opened in areas of the hospital where we need to place non-admitted patients for their on-going care, these patients subsequently also have to stay in the ED's for extended periods instead of going to CDU facilities. Notwithstanding this diagnosis there are still processes within the ED's that require additional attention, actions are detailed in the next slide.

PRH

- Overall summary performance is 76.55%
- Minors non-admitted average 91.28
- Majors non-admitted average 52.47
- Admitted patients average 49.97
- CDU and UCC have both opened in recent weeks and are not yet well established
- There are some mornings when the department has patients waiting for admission, however these are fewer occasions than RSH and usually with fewer patients
- Attendances at the ED's has increased, more so at PRH than RSH

RSH

- Overall summary performance is 76.47%
- Minors non-admitted average 96.28
- Majors non-admitted average 61.62
- Admitted patients average 33.94
- CDU has existed at RSH for some time along with an UCC which results in a different flow of patients away from the main ED
- Patients are waiting for admission most mornings in the ED and this pattern continues throughout the day.
- Fewer patients are discharged from hospital than the number that require admission resulting in an outflow problem and as a result additional beds are opened across the hospital, including the CDU. This creates a log jam in the ED so that neither patients who require admission or those who need on-going non admitted care in the CDU can access those facilities

Delivery of Improvement

Actions taken

- Streaming all patients on arrival
- Double streaming at times of surge activity
- Ambulance handover nurse 12 hours a day GP streaming/UCC opened at PRH
- CDU opened at PRH
- Direct specialty access in T&O, Gynaecology
- Recruited additional ENP's, who will join the team in January
- Fourth locum consultant employed to join the team of five substantive consultant staff
- HALO's in place for the winter period started 16th November
- Breach analysis undertaken on a weekly basis to identify trends
- Workshop with medical leads from Leicester on international recruitment
- Implemented the national update to the information system ECDS
- Validating attendance and breaches on a daily basis
- Implemented fit to sit in the majors area and for patients brought in by ambulance
- Frailty pathway piloted and established at RSH
- Silver command structures in place on both sites and will continue over the win

Plans

- Reduce the number of beds opened at times of escalation in ambulatory areas
- Continue to monitor specialty breaches to identify additional actions for improvement either in the ED or within the specialty
- Implement criteria led discharges
- Executive leadership to energise Red 2 Green and SAFER processes on every ward
- Achieve 30% of discharges before midday (November part month at 20%)
- Improve the accuracy of Expected date of discharge (EDD)
- Improve the criteria and numbers of patients being directed to GP streaming/UCC at PRH
- Capital resources made available to build UCC at PRH
- Capital Bid made for resources to build a CDU at PRH
- System wide complex discharge action plan now in place
- Complex discharges by site tracked each day and in daily urgent care report
- 5 Year Workforce Transformation plan developed
- OD plan developed to support cultural development and implementation being planned
- Accelerate ACP developments via HEE

Areas of focus for Urgent and Emergency Care

Admitted performance biggest challenge on both sites

Focus on LoS and discharge patterns

Number of patients over 7 days increased

Winter escalation beds planned including rebasing bed capacity between scheduled and unscheduled care

Theory of constraints work – Alex Knight

Non admitted

MIU performance added into profile – would lift performance by 3.52% every month YTD if applied back to April

Keep strong and strengthen minors non admitted

Majors non admitted greater than 4 hour stay - alternative pathways with specialties (frailty, T&O, gynaecology)

CDU's struggling at both hospitals due to bed capacity for admitted patients

Complex discharge

System wide action plan in place

Daily tracking underway

Target of 60% to be received before midday by 1st Dec, 80% by 31st January

Workforce

Recruitment successes in nursing/ENP and locum consultant

Substantive doctor recruitment remains a challenge

Clinical team modelling to address workforce gaps more creatively

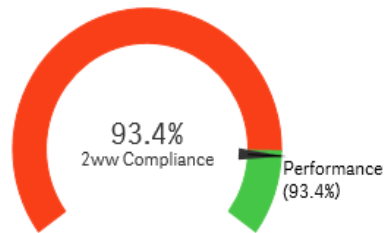
Cancer and Diagnostics



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Cancer Summary – September 2017

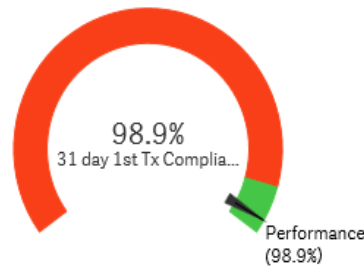
2 Week Wait - Detail



2ww Breast Compliance

93.8% \sim 2.8%
Previous Month Difference

31 Day - Detail



31d Surgery Compliance

100.0% \sim 4.2%
Previous Month Difference

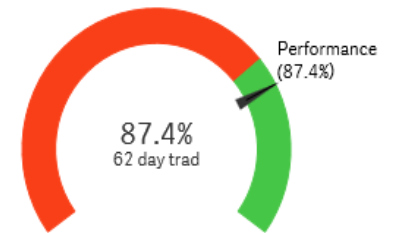
31d Chemo Compliance

100.0% \sim 0.0%
Previous Month Difference

31d Radiotherapy Compliance

100.0% \sim 1.2%
Previous Month Difference

62 Day - Detail



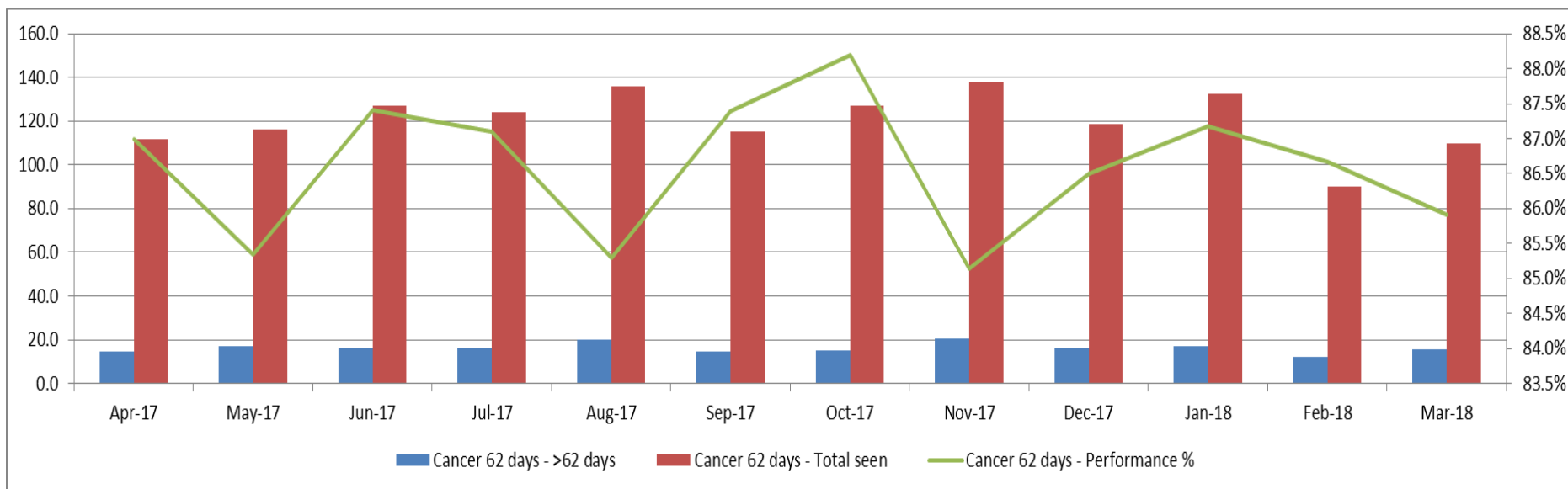
62 day screening

100.0% \sim 8.0%
Previous Month Difference

62 day upgrades

86.0% Δ -3.2%
Previous Month Difference

Cancer 2017/2018 Trajectory



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Cancer 62 days - >62 days	14.5	17.0	16.0	16.0	20.0	14.5	15.0	20.5	16.0	17.0	12.0	15.5
Cancer 62 days - Total seen	111.5	116.0	127.0	124.0	136.0	115.0	127.0	138.0	118.5	132.5	90.0	110.0
Cancer 62 days - Performance %	87.0%	85.3%	87.4%	87.1%	85.3%	87.4%	88.2%	85.1%	86.5%	87.2%	86.7%	85.9%
Cancer 62 days Actual - >62 days	14.5	17.0	31.0	16.5	22	17						
Cancer 62 days Actual - Total seen	113.0	118.0	133.0	137.5	147	135						
Cancer 62 days Actual - Performance %	87.2%	85.6%	76.7%	88.0%	85.0%	87.4%						

Octobers predicted performance is 80.2% which is 4.8% below target and 8% below trajectory.

Radiology reporting is contributing to this actions have been taken to resolve this by increasing outsourcing of reporting.

Cancer Performance (Site Specific Performance)

										SaTH YTD
Measure	Monthly Target %	March	April	May	June	July	August	September	National Average	
62 days urgent ref to treatment	85	86.61%	87.17%	85.59%	76.70%	88.00%	85.03%	87.40%	81.90%	85.10%
Brain	85	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A
Breast	85	100% 0/21	100% 0/15	93.30% 1/15	100% 0/17	100% 0/17	100% 0/29	100% 0/23	93.3%	99.10%
Colorectal	85	90.50% 2/21	80.00% 2/10	73.30% 4/15	60.00% 6/15	77.40% 3½/15½	76.9% 3/13	77.80% 4/18	72.3%	74.00%
Gynaecology	85	80.00% 1½/7½	100% 0/4	66.70% 2½/7½	58.80% 3.5/8.5	93.30% ½/7½	100% 0/7	92.90% ½/7	76.0%	81.90%
Haematology	85	75.00% 2/8	50.00% 2/4	80.00% 1/5	50.00% 4/8	88.90% 1/9	84.20% 1½/9½	100% 0/7	81.6%	77.60%
Head & Neck	85	100% 0/4	100% 0/3	40.00% 3/5	75.00% 1/4	80.00% 1/5	60.00% 4/10	80.00% ½/2½	64.2%	67.80%
Lung	85	36.80% 6/9½	68.80% 2.5/8	88.90% 1/9	57.60% 7/16.5	57.10% 6/14	76.00% 3/12½	70.60% 5/17	68.9%	68.20%
Skin	85	100% 0/19½	96.30% 1/27	95.80% 1/24	95.20% 1/21	97.20% 1/36	95.80% 1/24	94.70% 2/38	94.8%	95.90%
Upper GI	85	72.00% 3½/12½	71.40% 2/7	76.90% 1½/6½	45.50% 6/11	100% 0/9	66.70% 3/9	63.60% 2/5½	75.2%	69.80%
Urology	85	91.70% 2/24	86.60% 4.5/33.5	93.50% 2/31	96.60% 1/29.5	84.40% 3½/22½	79.30% 6/29	87.50% 2/16	78.8%	88.20%

- Zero tolerance of administrative breaches.
- Robust SLAS and service specifications in place with tertiary centres.
- Radiology reporting remains challenged actions are in place to improve this with outsourcing of reporting to be increased

Cancer 104 + Days – Actions to improve performance

- All patients between 63 and 82 days to have care plan in place to avoid 104 day waits
- RCAs to be reviewed and actions to followed up with Care Groups.
- Review of all patient choice breaches and actions to reduce these.
- Cancer lead Nurse is reviewing all the patient pathways with the CNS teams action is been taken based on the findings of the review.

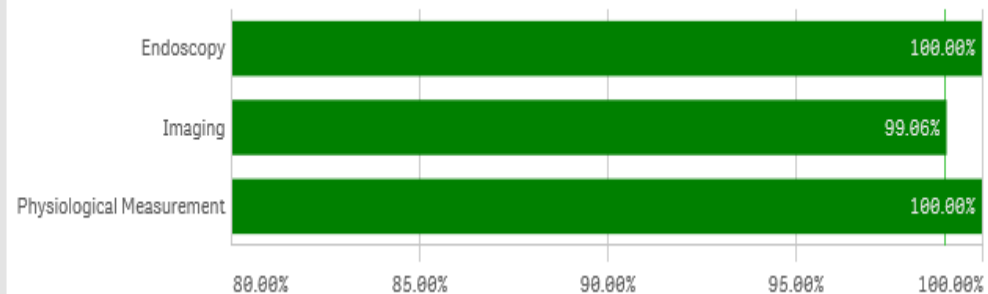
Diagnostic Waiting Times – October 2017

% of patients awaiting a diagnostic test, who have waited less than 6 weeks compared to 99% target

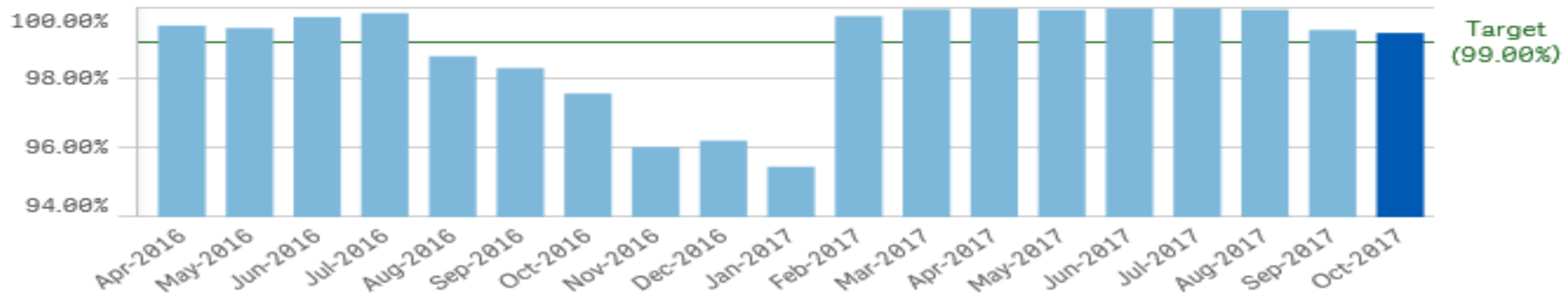
% waited under 6 weeks

99.25% ✓ -0.09%
Previous Month Difference

% of patients awaiting a diagnostic test by Group, who have waited less than 6 weeks compared to 99% target



% of patients awaiting a diagnostic test, who have waited less than 6 weeks - monthly trend



The Diagnostic wait times have been achieved for October the diagnostic target is projected to continue to achieve. Imaging remains challenged due to increased referrals for MRI and CT scans, out sourcing of activity to mitigate this has been put in place.

Workforce



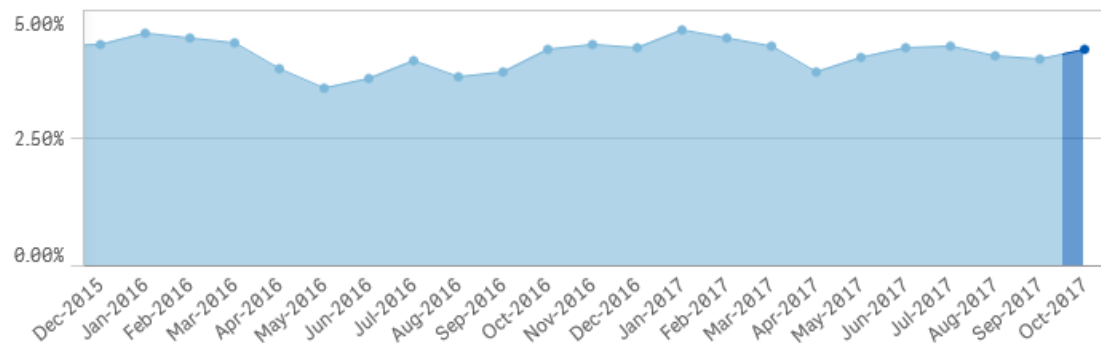
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Workforce Sickness

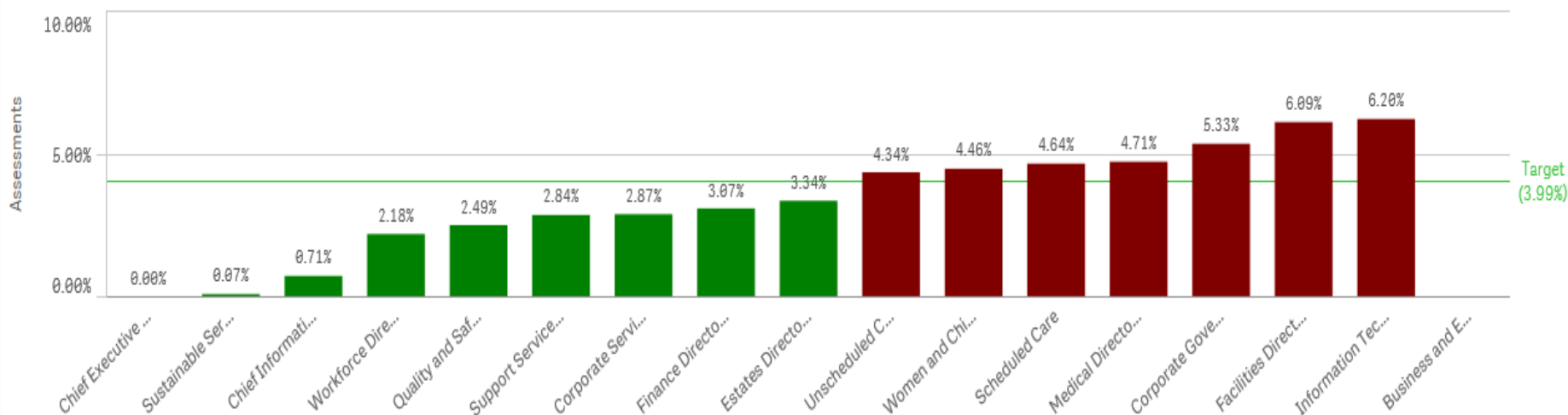
Absent FTE

4.21% ▲ 0.19%
Previous Month Difference

% FTE Absent - Monthly Trend

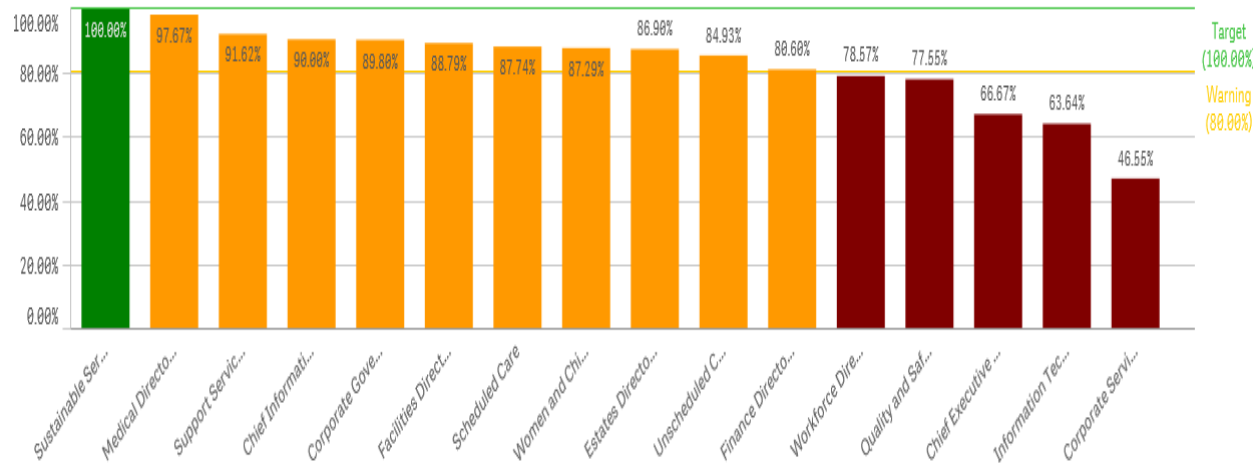


% FTE Attended by Directorate



Workforce – Training and Appraisals Oct 2017

% Appraisals Completed within Timescales split by Care Group

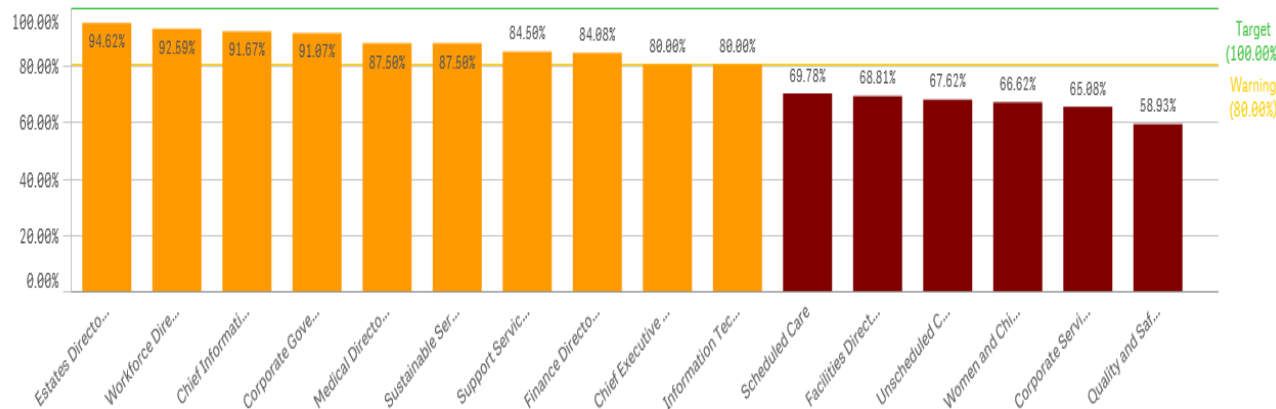


Appraisals in Timescales

86.78% $\Delta -0.21\%$
Previous Month Difference

% Appraisals Completed within Timescales for Month

% SSU Compliance split by Care Group



SSU Compliance

72.76% $\Delta -1.87\%$
Previous Month Difference

% SSU Compliance for Month

Staff Turn Over Oct 2017 – exc. Junior Doctors

Recruitment Rate

9.64%

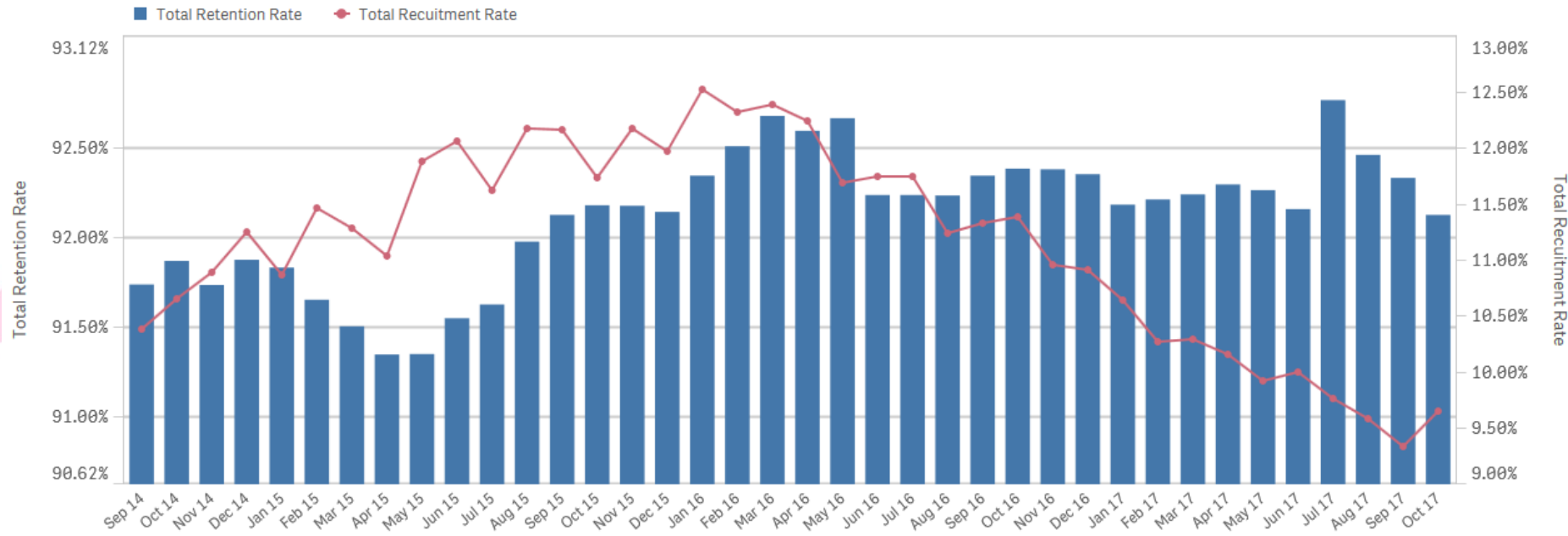
Recruitment Rate is total WTE new starters as a percentage of the trust/department total WTEs

Retention Rate

92.12%

Retention Rate is total WTE retained by the trust as a percentage of the trust/department total WTEs

Retention Overlaid with Recruitment



Quality



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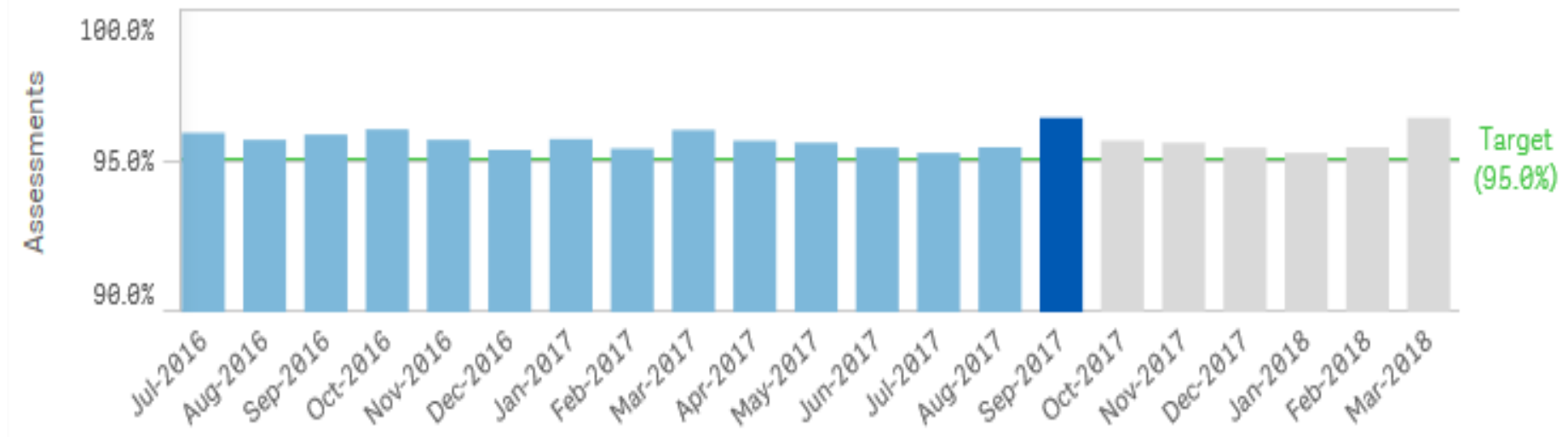
VTE Performance Sept 2017

% of Patients assessed for VTE

VTE Assessed

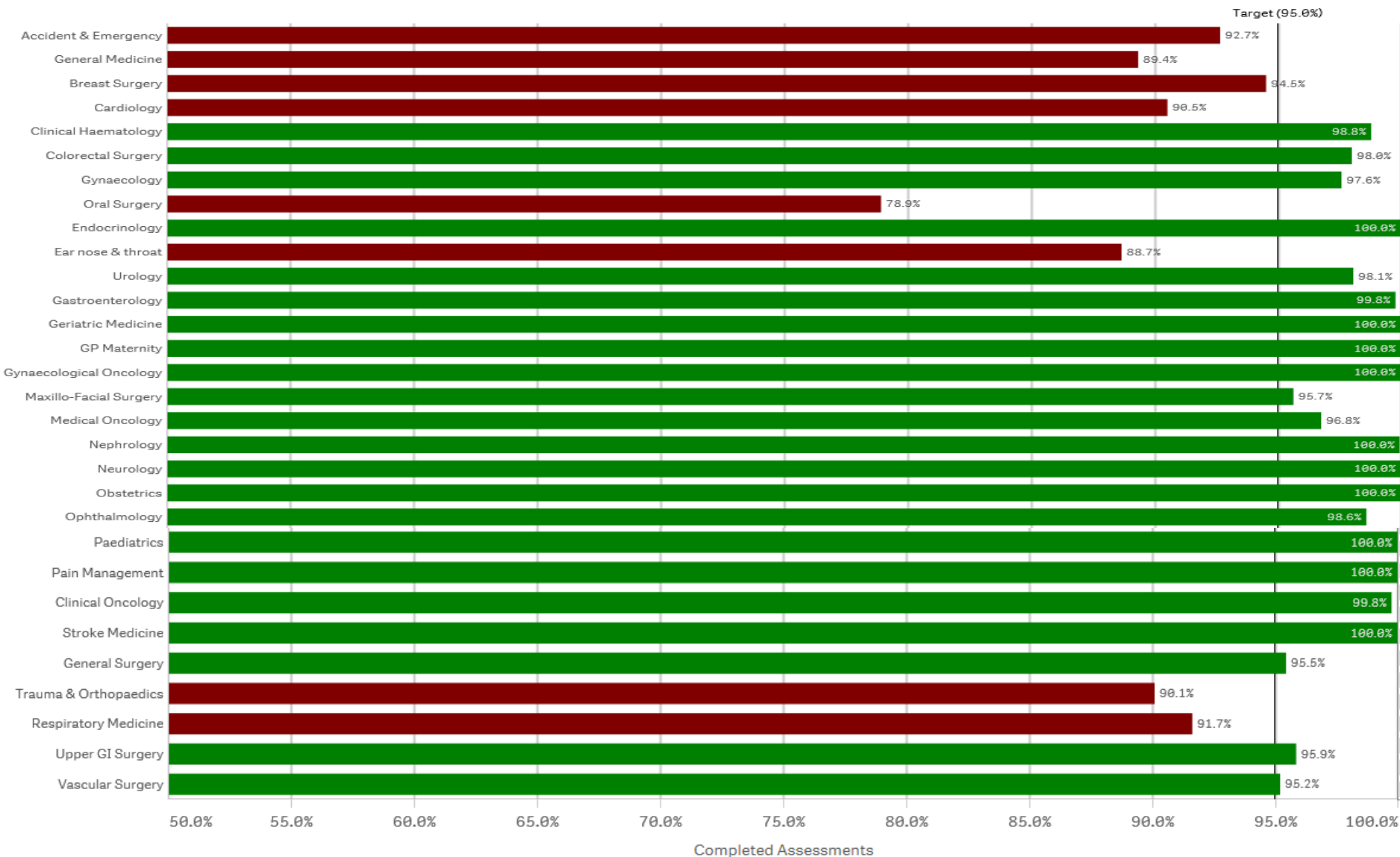
96.4% ✓ 1.0%
Previous Month Difference

% of Patients assessed for VTE - Monthly Trend



VTE Performance Sept 2017 – By Specialty

% of Patients assessed for VTE by Specialty



Quality and Safety

Measure	Year end 16/17	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	April 17	May 17	June 17	July 17	Aug 17	Sep 17	Oct 17	Year to date 2017/18	Monthly Target 2017/18	Annual Target 2017/18
Clostridium Difficile infections reported	21	2	2	0	1	3	4	3	1	3	1	3	3	18	2	25
MRSA Bacteraemia Infections	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MSSA Bacteraemia Infections	9	1	0	0	2	1	0	1	1	0	6	2	3	13	None	None
E. Coli Bacteraemia Infections	31	7	1	0	3	1	1	1	1	3	3	1	2	12	None	None
MRSA Screening (elective) (%)	95.2	91.2	94.8	95.0	95.8	95.5	95.4	95.9	95.9	95.6	95.6	95.5	95.7	95.6	95%	95%
MRSA Screening (non elective) (%)	94.4	94.7	94.7	95.0	94.2	95.2	96.3	95.0	96.1	96.1	97.0	97.2	96.5	96.3	95%	95%
Grade 2 Avoidable	35	2	2	5	0	6	2	2	2	4	2	1	2	15	0	0
Grade 2 Unavoidable	112	13	9	4	9	9	10	19	5	11	9	4	2	60	None	None
Grade 3 Avoidable	9	2	1	0	0	0	0	0	1	0	1	2	1	5	0	0
Grade 3 Unavoidable	9	0	0	1	4	1	0	1	2	4	3	0	2	12	None	None
Grade 4 Avoidable	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Grade 4 Unavoidable	2	0	0	1	1	0	0	0	1	0	0	0	0	1	None	None
Falls reported as serious incidents	5	1	1	0	0	0	0	0	1	0	1	0	0	2	None	None
Number of Serious Incidents	61	5	2	4	3	1	2	4	6	1	4	4	10	31	None	None

Quality and Safety cont....

Measure	Year end 16/17	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	April 17	May 17	June 17	July 17	Aug 17	Sep 17	Oct 17	Year to date 2017/18	Monthly Target 2017/18	Annual Target 2017/18
Never Events	5	3	0	0	0	0	0	0	0	0	0	0	1	1	0	0
Harm Free Care (%)	94.17 %	96.33	93.54	95.49	92.54	93.9	94.31	94.81	93.48	91.15	92.09	89.91	90.86	92.37	95%	95%
No New Harms (%)	97.94 %	99.27	98.16	98.62	96.77	97.16	98.47	98.18	97.49	95.24	96.59	96.83	96.34	97.02	None	None
WHO Safe Surgery Checklist (%)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
VTE Assessment		95.64	95.31	95.66	95.34	95.96	95.6	95.5	95.4	95.2	95.4	96.4		96.4	95%	95%
MSA including ITU discharge delays>12hrs	361	31	39	27	33	30	26	17	37	39	31	37	33	188	None	None
Complaints (No)	424	41	31	47	45	49	44	56	42	61	50	45	45	298	None	None
Friends and Family Response Rate (%)	23.8%	23.5	20.7	20.0	22.0	23.8	32.2	22.5	23.3	19.5	20.1	18.3	15%	20.1	None	None
Friends and Family Test Score (%)	96.6%	96.0	96.5	96.6	96.7	96.6	97.1	96.7	97.0	96.2	97.1	97.2	96.1	97.1	75%	75%

Finance Update



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Operational finance position

		Flexed Financial Plan	YTD			In Month		
			Plan	Actual	Variance	Plan	Actual	Variance
			£000s	£000s	£000s	£000s	£000s	£000s
Income		349,225	203,100	200,981	(2,119)	30,100	29,701	(399)
Pay		(236,969)	(139,108)	(142,057)	(2,949)	(19,953)	(20,367)	(414)
Non-Pay		(113,051)	(63,198)	(65,870)	(2,672)	(9,551)	(10,060)	(509)
Total expenditure		(350,020)	(202,306)	(207,927)	(5,621)	(29,504)	(30,427)	(923)
EBITDA		(795)	794	(6,946)	(7,740)	596	(726)	(1,322)
Finance Costs		(14,583)	(8,422)	(8,434)	(12)	(1,206)	(1,231)	(25)
Surplus/(deficit) pre STF		(15,378)	(7,628)	(15,380)	(7,752)	(610)	(1,957)	(1,347)
STF		9,315	4,192	4,192	0	932	932	0
Surplus/(deficit) post planned STF		(6,063)	(3,436)	(11,188)	(7,752)	322	(1,025)	(1,347)
Month 7 forecast Position		(18,887)	(10,923)	(11,188)	(265)	(760)	(1,025)	(265)

The Trust has recorded a year to date variance to plan of £7.752m.

In month the Trust had planned a surplus of £0.322m however, actually delivered a £1.025m deficit. Historically October has always been a month where the Trust has delivered a surplus due to increased activity volumes.

October performance against forecast

	October Forecast	October Actual	Variance
	£000	£000	£000
Income	30,630	30,633	3
Pay	(20,380)	(20,367)	13
Non Pay	(9,809)	(10,060)	(251)
Total Expenditure	(30,190)	(30,427)	(237)
EBITDA	441	206	(234)
Finance Costs	(1,201)	(1,231)	(31)
Surplus / (deficit)	(760)	(1,025)	(265)
Cumulative	(10,923)	(11,188)	(265)

The above illustrates an overall increased deficit in month compared to the forecast of £0.265m. The predominate area of overspend is within non pay.

Revised Forecast outturn at month 7

			April	May	June	July	August	September	October	November	December	January	February	March	Total	Last Mth Outturn	Variance
Income			26727	30218	31043	29065	28820	28667	30633	30853	28402	30541	28985	30930	354883	354412	471
Pay			-19810	-20516	-20380	-20200	-20434	-20350	-20367	-20583	-20847	-20952	-20785	-20731	-245955	-245847	-108
Non Pay			-8588	-9661	-9830	-9462	-9266	-9003	-10060	-9549	-9456	-9578	-9564	-9793	-113809	-113046	-763
Total Expenditure			-28398	-30177	-30210	-29662	-29700	-29353	-30427	-30131	-30303	-30529	-30349	-30524	-359764	-358893	-871
EBITDA			-1671	41	833	-597	-880	-686	206	722	-1901	12	-1365	406	-4880	-4481	-399
Finance Costs			-1151	-1194	-1195	-1196	-1217	-1250	-1231	-1209	-1209	-1209	-1209	-1209	-14480	-14406	-74
Surplus / (deficit)			-2822	-1153	-362	-1793	-2097	-1936	-1025	-487	-3111	-1198	-2574	-803	-19361	-18887	-474
Cumulative			-2822	-3975	-4337	-6130	-8227	-10163	-11188	-11675	-14786	-15984	-18557	-19361			

The revised deficit is £0.474m worse than month 6.

However, further to this, the gap could potentially increase by £0.210m at the end of quarter 2 in light of CQUIN discussions and potential failure to deliver £0.211m for 'improving services for people with mental health need who present to A&E'. This could further increase to £0.475m if no action is taken taking the outturn position to £19.836m deficit.

Is current forecast realistic?

	Actual average per month April - October	Forecast average per month November - March	Variance
	£000	£000	£000
Income	29,310	29,942	632
Pay	(20,294)	(20,780)	(486)
Non Pay	(9,410)	(9,588)	(178)
Finance Costs	(1,205)	(1,209)	(4)
Average Deficit	(1,598)	(1,635)	(36)

Cash flow

Cashflow 2017/18

	Actual	Forecast	Forecast	Forecast	Forecast	Forecast	Total To Date
	October Month	November Month	December Month	January Month	February Month	March Month	And Forecast
	£000's	£000's	£000's	£000's	£000's	£000's	£000's
Income I&E	30,890	27,638	28,077	30,746	28,453	42,913	355,883
Pay I&E	(20,033)	(20,945)	(21,227)	(21,182)	(21,116)	(21,193)	(245,955)
Non Pay I&E	(9,599)	(10,859)	(10,691)	(11,369)	(8,607)	(10,736)	(113,809)
Finance Costs I&E (inc Capital)	(526)	(731)	(1,118)	(1,468)	(2,633)	(4,897)	(15,480)
TOTAL I&E	733	(4,897)	(4,959)	(3,272)	(3,903)	6,086	(19,361)
Non-receipt of STF Funding						(8,127)	(8,127)
Creditor Suppression inc impact of QIA decision		(586)	146	1,600	1,600	1,600	4,360
Cashflow before receipt of agreed Cash Support	733	(5,483)	(4,813)	(1,672)	(2,303)	(441)	(23,128)
Revolving Working Capital - I&E Deficit	0	0	1,087	0	0	0	6,063
TOTAL CASHFLOW	733	(5,483)	(3,726)	(1,672)	(2,303)	(441)	(17,065)
Loan in Lieu of STF	(1,188)	0	0	0	0	(3,469)	0
PRH A&E Streaming - Expenditure	0	0	0	(250)	(250)	(500)	(1,000)
Other 'timing' cashflows	(1,682)	4	4	(1,233)	(1,233)	(2,997)	(2,925)
Cash b/f	7,418	6,469	990	(2,732)	(5,887)	(9,672)	5,625
Cash c/f	6,469	990	(2,732)	(5,887)	(9,672)	(13,609)	(15,365)

Requirement for Working Capital Support to ensure that minimum bank balance of £1.700m is maintained.	0	0	4,432	3,155	3,785	3,937	17,065
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