

UNITED LINCOLNSHIRE HOSPITALS TRUST

INTEGRATED PERFORMANCE REPORT

PERIOD TO 31st MAY 2016

Document management

Title: Integrated Performance Report
To: Trust Board
From: Mark Brassington, Chief Operating Officer
Author: Katherine Hensby, Planning & Performance Manager
Date: 5th July 2016

Purpose of the Report:

To update the Board on the performance of the Trust for the period ended 31st May 2016, and set out the plans and trajectories for performance improvement.

The Report is provided to the Board for:

Decision	Discussion
Assurance x	Endorsement

Recommendations:

The Board is asked to note the current performance and future projections for improvement.

This is an evolving report and the Board are invited to make suggestions as we continue to develop it.

Strategic Risk Register	Performance KPIs year to date As detailed in the report
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Resource Implications (e.g. Financial, HR) None
Assurance Implications: The report is a central element of the Board Assurance Framework
Patient and Public Involvement (PPI) Implications None
Equality Impact None
Information exempt from Disclosure None
Requirement for further review? The report will be updated in August 2016 reflecting performance to 30 th June 2016.

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1. Executive Summary

The purpose of this report is to update the Board on the performance of the Trust for the period ending 31st May 2016. The report provides an integrated summary of indicators that have been aligned to the Trust's goals and objectives. This includes measures on quality, workforce, transformation, finance, contractual and service delivery.

Performance against the Trust's goals & objectives:

Transforming and Improving Services for our Patients.....

Making them sustainable, affordable and accessible within Lincolnshire and treating patients in the most appropriate care setting.

Meeting the Highest Expectations of Patients.....

Delivering consistently safe, effective and reliable care to satisfied patients

- ✿ The Trust did not achieve the 4 hour waiting time target in A&E in May 2016 (83.52%) but did achieve the STF trajectory (82.00%)
- ✓ The 18 week referral to treatment incomplete target was achieved in May (92.45%)
- ✗ 2 out of the 9 Cancer targets were achieved in April 2016
- ✗ The Trust has had 1 case of MRSA during 2016/17 to date.
- ✗ The latest mortality position is 101.69 for Sep 2014- Aug 2015 (HSMR)

Developing and Supporting our Workforce.....

Delivering skilled, compassionate and efficient care to our patients

- ✗ The May monthly sickness rate is currently 4.73%
- ✗ The percentage of agency staff used within the Trust is currently 4.53% for May 2016
- ✗ The Trust appraisal rate is below target at 66%

Monitor Compliance Framework:

Governance Risk Rating:

7.0

Mark Brassington
Chief Operating Officer
July 2016

2. TRUST PAAG

2. KEY MEASURES: PERFORMANCE AT A GLANCE May 2016

Indicators		Standard	National Position	Current Month	Month Actual	YTD	Site Achievement (month)	Forecast Next Month	
SAFETY	Serious Events			May	Not Avail	Not Avail			
	Never Events	0	0	May	1	1		✘	
	Harm Free Care	95.00%		May	91.33%				
	VTE Risk Assessment	95.00%		May	96.64%				
	Overdue CAS alerts	0		May	Not Avail			✓	
	(Safety Thermometer) Catheter-Acquired Infection	0.5%		May	Not Avail			✓	
	MRSA Bacteraemia (Post 48 Hours)	0	0	May	1	1		✘	
	Clostridium difficile (Post 72 Hours)	59		May	5	6		✓	
	MSSA	24		May	2	7			
	E-Coli	96		May	5	14			
	EFFECTIVENESS	SHMI	100	100	Oct 14- Sep 15	111.21			
		HSMR	100	100	Feb 15-Jan 16	99.54			
EDD		90%		May	76.22%				
PPCI Call to Balloon in <150 mins		68%		Qtr 4	85.33%				
Fractured neck of femur		24 Hours 70%		May	58.90%				
		48 Hours 95%		May	94.50%				
Dementia Screening		90%		April	92.30%				
Dementia Risk Assessment		90%		April	94.70%				
Dementia Referral for Specialist Treatment		90%		April	37.50%				
PATIENT EXPERIENCE		No. complaints received			May	63			
	No. complaints still open			May	419				
	No. complaints ongoing			May	60				
	Friends & Family test : Inpatient and A&E Admission % recommended	70%		May	88% Inpatient, 82% A&E would recommend				
	Friends & Family test: Inpatient and A&E Admission Combined(Response Rate)	20%		May	29% Inpatients 21% A&E				
	Mixed sex accommodation	0		May	2	12			
	Staff FFT: % of staff who would recommend the trust if they needed care			Q4	62%				
Staff FFT: % of staff who would recommend the trust to friends & family as a place to work			Q4	54%					

Indicators	Standard	Current Month	Month Actual	YTD
Turnover	n/a	May	1.89%	1.89%
Vacancy Rate	n/a	May	10.17%	n/a
Appraisal Rate	95%	May	66%	n/a
Sickness Rate	4%	May	4.73%	(rolling year) 4.54%
WTE (worked versus plan)	n/a	May	92.79%	n/a
Use of Agency Staff	n/a	May	4.53%	n/a
Core Learning (Fire)	85%	May	n/a	(Rolling Year) 71%
Core Learning (Infection Control)	85%	May	n/a	(Rolling Year) 72%
Core Learning (Equality & Diversity)	85%	May	n/a	(Rolling Year) 77%
Core Learning (Information Governance)	85%	May	n/a	(Rolling Year) 77%
Core Learning (Safeguarding Children Level 1)	85%	May	n/a	(Rolling Year) 87%
Core Learning (Safeguarding Adults Level 1)	85%	May	n/a	(Rolling Year) 85%
Core Learning (Health & Safety)	85%	May	n/a	(Rolling Year) 89%
Core Learning (Slips)	85%	May	n/a	(Rolling Year) 91%
Core Learning (Manual Handling)	85%	May	n/a	(Rolling Year) 89%
Core Learning (Risk Awareness)	85%	May	n/a	(Rolling Year) 85%
Core Learning (Fraud)	85%	May	n/a	(Rolling Year) 83%
Core Learning (Basic Life Saving)	85%	May	n/a	(Rolling Year) 33%
Nurse to bed day ratio (Midwife /Nurse/ Registered Nurse)	n/a	May	1.99	n/a

Indicators	Standard	Current Month	Month Actual	YTD
EBITDA Margin	n/a	May	7.50%	7.40%
EBITDA Achieved	n/a	May	(2,777)	(5,404)
Liquidity Ratio (days)	n/a	May	N/A	
CIP actual	n/a	May	Not available at present	Not available at present
Capex forecast	n/a	May	902	902
Agency Spend (% of pay)	n/a	May	8.90%	8.40%

** Figures are part of an ongoing evaluation

Indicators		Standard	Current Month	Month Actual	YTD	Site Achievement (month)	Forecast Next Month	Expected Delivery Date
A&E	Total time in A&E: 4 hours or less	95%	May	83.52%	82.11%		✘	n/a
	RTT: Admitted	90%	May	65.92%	66.49%			
	RTT: Non-Admitted	95%	May	89.43%	89.25%			
	RTT: Incompletes	92%	May	92.45%	92.28%		✓	
	Waiting times for diagnostic tests	0.9%	May	0.94%	0.92%		✓	
	52 week waiters	0	May	7	9		✓	
	13 week waiting standard	0.03%		not avail	not avail		✘	n/a
	Appointment Slot issues (ASIs)		(Snapshot at month end) May	592				n/a
	Cancelled Operations on the day of the operation	1.10%	May	not avail	not avail			n/a
	(Cancelled ops) Not treated within 28 days. (Breach)	0.00%	May	not avail	not avail			n/a
	Delayed transfers of care	3.50%	May	4.67%	4.34%		✘	
	CANCER TARGETS	2 week wait suspect cancer	93%	April	87.8%	87.8%		
2 week wait breast symptomatic		93%	April	94.6%	94.6%			n/a
31 day first treatment		96%	April	95.8%	95.8%			n/a
31 day subsequent drug treatments		98%	April	84.6%	84.6%			n/a
31 day subsequent surgery treatments		94%	April	80.4%	80.4%			n/a
31 day subsequent radiotherapy treatments		94%	April	84.0%	84.0%			n/a
62 day Classic		85%	April	74.7%	74.7%			n/a
62 day screening		90%	April	80.6%	80.6%			n/a
62 day consultant upgrade		85%	April	85.0%	85.0%			n/a

Indicators		Standard	Current Month	Month Actual	YTD
DELIVERY OF CONTRACT	Formal Contract Performance Notices (as per new Contract Management Clauses)	0	May	0	4*
	Formal Performance Notices	0	May	0	0**
	Contract Fines / Penalties	0	May		

*There are no new Contract Performance Notices but notices raised in 2015/16 have been "rolled over" into 2016/17.

** A Contract Exception Notice is the next stage of the Contract Management Clause and normally involves a financial penalty.

Fine for A&E, RTT, 62 Day Cancer and Diagnostics are waived linked to the STF trajectories. The Trust will continue to monitor performance/sanctions against all other national standards and fines.

KEY	Under Performance	Under Review	Achieved	Not Applicable	CL L G	G: Grantham Site L: Lincoln Site CL: Louth Site P: Pilgrim Site	Standard is forecast to be achieved the following month	Standard is forecast not to be achieved the following month

3. Monitor Compliance Framework

In June 2015, Monitor reviewed the appropriate reporting requirements in line with changes to relevant policies. Following the removal of admitted and non-admitted referral to treatment targets the Monitor Compliance Framework has been updated to reflect these changes meaning Trusts are only required to report against the incompletes target for 18 Week RTT.

United Lincolnshire Hospitals NHS Trust: Monitor Compliance Framework Targets - Month 2 May 2016/17

GOVERNANCE RISK RATINGS: Monitor Compliance Framework 2016/17 - Governance Indicators

Area	Indicator	Threshold	Monitoring Period	Apr-16	May-16	Jun-16	Quarter 1 Actual	Jul-16	Aug-16	Sep-16	Quarter 2 Actual	Oct-16	Nov-16	Dec-16	Quarter 3 Actual	Jan-17	Feb-17	Mar-17	Quarter 4 Forecast	
Access	1	maximum time of 18 weeks frm point of referral to treatment in aggregate - patients on an incomplete pathway	92%	Quarterly	92.11%	92.45%														
	2	A&E: maximum waiting time of four hours from arrival to admission/transfer/discharge	95%	Quarterly	80.54%	83.52%														
	3	All cancers: 62 day wait for first treatment from: Urgent GP referral for suspected cancer *	85%	Quarterly	75.60%	74.70%														
		NHS Cancer Screening Service referral *	90%		92.10%	80.60%														
	4	All cancers: 31 day wait for second or subsequent treatment comprising: Surgery *	94%	Quarterly	92.10%	80.40%														
		anti cancer drug treatments *	98%		91.60%	84.60%														
radiotherapy *		94%	90.70%		84.00%															
5	All cancers: 31 day wait from diagnosis to first treatment *	96%	Quarterly	96.70%	95.80%															
6	cancer: two week wait from referral to date first seen, comprising: all urgent referrals (cancer suspected) *	93%	Quarterly	92.50%	87.80%															
	for symptomatic breast patients (cancer not initially suspected) *	93%		90.60%	94.60%															
Outcomes	14	Meeting the C.difficile objective (cumulative)	62	Quarterly	2	5														
	15	Meeting the MRSA objective (cumulative)	0	Quarterly	0	1														
	19	Certification against compliance with requirements regarding access to health care for people with a learning disability	n/a	Quarterly	Compliant	Compliant														

* Information is reported a month behind

Risk Rating	4	7																	
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Trust Internal Compliance Rating	
Target Met	Green
Target Not Met	Red

Monitor Governance Risk Rating Calculation	
<1.0	Green
≥1.0	Amber/Green
<2.0	Amber/Red
≥2.0	Amber/Red
<4.0	Amber/Red
≥4.0	Red

GOVERNANCE RISK RATING

Monitor assign a Governance Risk Rating to reflect quality of services at a Trust. Higher levels of governance risk may serve to trigger greater regulatory action.

The Risk Rating is calculated from performance against service indicators. Each of these indicators is given a weighting and compliance with all indicators would achieve a Risk Rating of 0.

For each non-compliant indicator the weighted score is applied and the total of these formulate the Risk Rating.

The numerical score is RAG rated using the table to the left.

Monitor may apply a red Governance Risk Rating where any indicator with a rating of 1.0 is breached for three successive quarters.

For each of the non-compliant indicators a failure in one month is considered to be a quarterly failure.

4. Referral to Treatment Assurance Framework

The RTT assurance framework consists of four indicators for the Incompletes RTT Pathway. The indicators look at both the achievement and sustainability of the 92% standard. These indicators along with the risk rating are detailed below:

% incomplete pathways greater than 18 wks		Number of ASIs		Mean Pathway Length		Past RTT Performance		Incompletes RTT Standard Risk Rating	
Position	Rating	Position	Rating	Position	Rating	Position	Rating	Rating	Risk
0-2%	0	1-10	0	0-5 wks	0	>5 months achieve 92%	0	0	No Risk
2-4%	2	10-20	2	5-7.2 wks	2	3-5 months achieve 92%	2	0-8	
4-6%	4	20-30	4	7.2-9 wks	4	1-3 months achieve 92%	4	8-16	Low Risk
6-8%	6	30-40	6	9-10 wks	6	Previous month performance was between 91-92%	6	16-24	Medium Risk
8-10%	8	40-50	8	10-12 wks	8	Previous month performance was between 90-91%	8	24-32	High Risk
>10%	10	>50	10	>12 wks	10	Previous month performance was less than 90%	10	32-40	

Specialty	RTT Incompletes Risk Rating			Risk Rating Trend	Site Achievement of RTT							
	Mar-16	Apr-16	May-16		Lincoln	Pilgrim	Grantham	Skegness	Louth	Johnson	John C	Holbeach
Cardiology	28	30	36		Green	Red	Red	Green	Red	Green	Green	Grey
Nephrology	40	34	30		Green	Red	Green	Grey	Grey	Grey	Grey	Grey
Nuclear Medicine	30	30	30		Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Radiology	20	30	30		Red	Green	Grey	Grey	Grey	Grey	Grey	Grey
Trauma & Orthopaedics	30	32	28		Red	Red	Red	Green	Red	Red	Red	Red
Pain Management	20	22	26		Green	Red	Red	Red	Red	Green	Grey	Grey
Paediatric Trauma & Orthopaedics	22	10	24		Green	Red	Red	Grey	Green	Grey	Grey	Grey
Neurology	16	20	22		Green	Red	Red	Grey	Red	Grey	Grey	Grey
Diagnostic Imaging	2	12	22		Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Colorectal Surgery	12	24	20		Red	Red	Green	Grey	Red	Grey	Grey	Grey

The risk rating applied to each specialty will give an indication as to whether they are at risk of not achieving the RTT incompletes standard in future months.