

# UNITED LINCOLNSHIRE HOSPITALS TRUST INTEGRATED PERFORMANCE REPORT

PERIOD TO 31<sup>st</sup> JANUARY 2016

#### **Document management**

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Title:	Integrated Performance	Danart
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To: Trust Board

From: Mark Brassington, Chief Operating Officer

Author: Katherine Hensby, Planning & Performance Manager

Date: 1<sup>st</sup> March 2016

#### **Purpose of the Report:**

To update the Board on the performance of the Trust for the period ended 31<sup>st</sup> January 2016, and set out the plans and trajectories for performance improvement.

#### The Report is provided to the Board for:

Decision		Discussion
Assurance x	1	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

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 April 2016 reflecting performance to 29<sup>th</sup> February 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 31<sup>st</sup> January 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 January 2016 (82.73%)
- ✓ The 18 week referral to treatment incomplete target was achieved in January (92.48%)
- 6 out of the 9 Cancer targets were achieved in December 2015
- The Trust has had 1 case of MRSA during 2015/16 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 January monthly sickness rate is currently 4.82%
- The percentage of agency staff used within the Trust is currently 5.00% for January 2016
- The Trust appraisal rate is below target at 67%

Monitor Compliance Framework:

Governance Risk Rating:

3.0

Mark Brassington Chief Operating Officer March 2016

## 2. TRUST PAAG

# 2. KEY MEASURES: PERFORMANCE AT A GLANCE January 2016

								Site	Forecast
	Indi	cators	Standard	National Position	Current Month	Month Actual	YTD	Achievement (month)	Next Month
		Serious Events			January	3	74	CL L	
		Never Events	0	0	January	0	2	CL L P G	<b>✓</b>
		Harm Free Care	95.00%		January	93.57%		CL L P G	
		VTE Risk Assessment	95.00%		Quarter 3	95.10%		CL L	
	ЕТУ	Overdue CAS alerts	0		January	0		CL L P G	<b>✓</b>
	SAFETY	(Safety Thermometer) Catheter-Acquired Infection	0.5%		January	0.00%		CL L	<b>✓</b>
		MRSA Bacteraemia (Post 48 Hours)	0	0	January	0	1	CL L	<b>✓</b>
		Clostridium difficile (Post 72 Hours)	59		January	4	45	CL L	<b>✓</b>
		MSSA	24		January	3	22	CL L	
		E-Coli	96		January	5	58	CL L P G	
		SHMI	100	100	Apr 14 - Mar 15	111.14		CL L P G	
TIENTS		HSMR	100	100	Sep 14- Aug 15	101.69		CL L	
OF PA		EDD	90%		January	75.83%		CL L P G	
MEETING THE HIGHEST EXPECTATIONS OF PATIENTS	VESS	PPCI Call to Balloon in <150 mins	68%		Qtr 3	85.80%		PLG	
EXPECT	EFFECTIVENESS	Fractured neck of femur	24 Hours 70%		January	64.29%		PL	
GHEST	#		48 Hours 95%		January	97.14%			
畫		Dementia Screening	90%		December	87.13%		CL L	
EETING		Dementia Risk Assessment	90%		December	84.64%		CL L	
Σ		Dementia Referral for Specialist Treatment	90%		December	57.63%		CL L	
		No. complaints received			January	74		CL L P G	
		No. complaints still open			January	4	07		
		No. complaints ongiong			January	6			
	IENCE	Friends & Family test : Inpatient and A&E Admission % recommended	70%		January		nt, 83% A&E commend	CL L P G	
	PATIENT EXPERIENCE	Friends & Family test: Inpatient and A&E Admission Combined(Response Rate)	20%		January	30% Inpatients 22% A&E		CL L P G	
	PAT	Mixed sex accommodation	0		January	19	65	CL L	
		Staff FFT: % of staff who would recommend the trust if they needed care			Qtr 3	n/a			
		Staff FFT: % of staff who would recommend the trust to friends & family as a place to work			Qtr 3	n/a			

	would recommend the trust to friends & famil a place to work		Qtr 3	n/a		
KEY	Under Performance Under Review Achieved Not Applicable	G: Grantham Site L: Lincoln Site CI: Louth Site P: Pilgrim Site	<b>V</b> t	he following Standard is fo	orecast to be a g month orecast not to b following mor	oe .

	Indicators	Standard	Current Month	Month Actual	YTD
	Turnover	n/a	January	2.10%	8.97% (as at end of March 2015)
	Vacancy Rate	n/a	January	7.09%	n/a
	Appraisal Rate	95%	January	67%	n/a
	Sickness Rate	4%	January	4.82%	(rolling year) 4.57%
	WTE (worked versus plan)	n/a	January	95.45%	n/a
	Use of Agency Staff	n/a	January	5.00%	n/a
TAFF	Core Learning (Fire)	85%	January	n/a	(Rolling Year) 65%
OUR S	Core Learning (Infection Control)	85%	January	n/a	(Rolling Year) 69%
RTING	Core Learning (Equality & Diversity)	85%	January	n/a	(Rolling Year) 71%
UPPO	Core Learning (Information Governance)	85%	January	n/a	(Rolling Year) 72%
VG & S	Core Learning (Safeguarding Children Level 1)	85%	January	n/a	(Rolling Year) 82%
DEVELOPING & SUPPORTING OUR STAFF	Core Learning (Safeguarding Adults Level 1)	85%	January	n/a	(Rolling Year) 81%
DE	Core Learning (Health & Safety)	85%	January	n/a	(Rolling Year) 88%
	Core Learning (Slips)	85%	January	n/a	(Rolling Year) 89%
	Core Learning (Manual Handling)	85%	January	n/a	(Rolling Year) 87%
	Core Learning (Risk Awareness)	85%	January	n/a	(Rolling Year) 83%
	Core Learning (Fraud)	85%	January	n/a	(Rolling Year) 74%
	Nurse to bed day ratio (Midwife /Nurse/ Registered Nurse)	n/a	January	1.95	n/a

Indicators		Standard	Current Month	Month Actual	YTD		
S	EBITDA Margin	n/a	January	-10.10%	-11.70%		
SERVICE	EBITDA Achieved	n/a	January	(3,505)	(40,518)		
TRANSFORMING & IMPROVING SERVICES FOR OUR PATIENTS: FINANCE	Liquidity Ratio (days) n/a January				N/A		
ING & I OR OUR FIN	CIP actual	n/a	January	880	9,304		
ANSFORM	Capex forecast	n/a	January	2,218	12,019		
TR	Agency Spend (% of pay)	n/a	January	9.60%	10.50%		

<sup>\*\*</sup> Figures are part of an ongiong evaluation

	In	dicators	Standard	Current Month	Month Actual	YTD	Site Achievement (month)	Forecast Next Month	Expecte Deliver Date
	A&E	Total time in A&E: 4 hours or less	95%	January	82.73%	87.70%	PL	×	n/a
		RTT: Admitted	90%	January	68.72%	73.86%	CL L P G	n/a	
		RTT: Non-Admitted	95%	January	87.75%	88.56%	CL L	n/a	
		RTT: Incompletes	92%	January	92.48%	91.83%	CL L	<b>\</b>	
	MENT	Waiting times for diagnostic tests	99%	January	99.14%	99.24%	CL L	<b>\</b>	
10	TREAT	52 week waiters	0	January	2	10	CL L	<b>✓</b>	
TIENTS	AL TO	13 week waiting standard	0.03%	January	not avail	not avail	CL L	×	n/a
MEETING THE HIGHEST EXPECTATIONS OF OUR PATIENTS	REFERRAL TO TREATMENT	Appointment Slot issues (ASI's)		(Snapshot at month end) January	383		Q L P G	n/a	n/a
IS OF (		Cancelled Operations on the day of the operation	1.10%	January	1.93%	1.93%	CL L P G	n/a	n/a
ATION		(Cancelled ops) Not treated within 28 days. (Breach)	0.00%	January	23.64%	10.80%	CL L P G	n/a	n/a
XPECT		Delayed transfers of care	3.50%	January	7.60%	6.55%	CL L	×	
HEST E		2 week wait suspect cancer	93%	December	95.5%	91.4%	CL L	n/a	n/a
HE HIG		2 week wait breast symptomatic	93%	December	94.3%	83.0%	PLG	n/a	n/a
ETINGT		31 day first treatment	96%	December	98.1%	97.4%	CL L	n/a	n/a
ME	RGETS	31 day subsequent drug treatments	98%	December	94.0%	98.3%	CL P G	n/a	n/a
	CANCER TARGETS	31 day subsequent surgery treatments	94%	December	97.1%	95.2%	CL L	n/a	n/a
	CAN	31 day subsequent radiotherapy treatments	94%	December	97.4%	90.0%		n/a	n/a
		62 day Classic	85%	December	84.8%	75.4%	CL L	n/a	n/a
		62 day screening	90%	December	81.2%	86.0%	CL L	n/a	n/a
		62 day consultant upgrade	85%	December	85.2%	95.3%	CL L	n/a	n/a

Indicators			Standard	Current Month	Month Actual	YTD	
INS OF		Formal Contract Performance Notices (as per new Contract Management Clauses)	0	January	5 (but supersedi ng 3 previous	5*	* Th con ther Noti Con
HEST EXPECTATION PATIENTS	ONTRACT	Formal Performance Notices	0	January	0	0	Octo Can NHS for I orig
MEETING THE HIGHEST EXPECTATIONS OF OUR PATIENTS	DELIVERY OF CONTRACT	Contract Fines / Penalties	0	January	Fines had calculated performand the constitution of the constitution of the community of the constitution of the calculation of the calcu	we been based on the against tutional ards. so on-going issioners cation and the for Q1-3. rective for ation of	** A stag and

The 2015/16 NHS Contract has new contract management clauses such as here are no longer Contract Query votices but instead escalation directly to Contract Performance Notice (CPN). In Detober, CCGs raised 4 new CPNs; A&E, ancer, Cancelled Operations & Stroke. HMSE Specialised formally raised a CPN or Neonates replacing the notice riginally dating back to Dec 2011.

A Contract Exception Notice is the next age of the Contract Management Clause d normally involves a financial penalty

#### 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 Tr	ust: Monitor Compliance Framework	Targets - Month 10 January 2015/16

GOVERNANCE RISK RATINGS: Monitor Compliance Framework 2015/16 - Governance Indicators

Teachment in agregate - patients on an incomplete   92%   Quarterly   90.00%   90.85%   91.07%   91.90%   92.11%   92.81%   92.44%   92.29%   92.40%   92.48%   92.	A	ea	Indicator	Threshold	Monitoring Period	Apr-15	May-15	Jun-15	Quarter 1 Actual	Jul-15	Aug-15	Sep-15	Quarter 2 Actual	Oct-15	Nov-15	Dec-15	Quarter 3 Actual	Jan-16	Feb-16	Mar-16	Quarter 4 Forecast
2		1	treatment in aggregate - patients on an incomplete	92%	Quarterly	90.00%	90.85%	91.07%		91.90%	92.11%	92.81%		92.44%	92.29%	92.40%		92.48%			
Urgent GP referral for suspected cancer *   NHS Cancer Screening Service referral *   90%   74.30%   91.30%   85.70%   77.80%   100.00%   73.90%   84.20%   87.50%   92.50%   81.20%		2	5	95%	Quarterly	87.30%	87.60%	90.67%		91.37%	89.17%	90.17%		86.41%	86.52%	84.88%		82.73%			
All cancers: 31 day wait for second or subsequent treatment comprising: Surgery *  anti cancer drug treatments *  radiotherapy *  All cancers: 31 day wait from diagnosis to first treatment *  Guarterly 95.30% 80.90% 95.30% 96.00% 93.00% 93.00% 93.00% 93.00% 95.30% 96.00% 93.10% 95.30% 96.00% 93.10% 95.30% 96.00% 93.10% 95.30% 96.00% 93.10% 95.00% 95.		3	-	85%	Quarterly	74.70%	76.50%	67.30%		72.40%	72.70%	78.20%		70.30%	74.10%	86.20%		84.80%			
All cancers: 31 day wait for second or subsequent treatment comprising: Surgery*  anti cancer drug treatments *  78			NHS Cancer Screening Service referral *	90%		74.30%	91.30%	85.70%		77.80%	100.00%	73.90%		84.20%	87.50%	92.50%		81.20%			
Fadiotherapy *   94%   95.30%   80.90%   75.30%   83.00%   96.00%   93.10%   95.10%   94.90%   98.00%   97.40%   98.00%   97.40%   98.00%   97.40%   98.00%   97.40%   98.00%   97.40%   98.00%   99.00%   98.00%   99.00	Access	4	-	94%	Quarterly	97.60%	91.70%	97.40%		91.90%	95.30%	96.70%		91.30%	97.10%	94.40%		94.40%			
Solution			anti cancer drug treatments *	98%		99.10%	98.90%	100.00%		96.50%	99.20%	98.90%		98.40%	100.00%	98.80%		94.00%			
Treatment *   96%   Quarterly   95.50%   99.60%   96.00%   95.20%   97.40%   93.60%   98.40%   99.10%   99.00%   98.10%   99.00%   98.10%   99.00%   98.10%   99.00%   98.10%   99.00%   98.10%   99.00			radiotherapy *	94%		95.30%	80.90%	75.30%		83.00%	96.00%	93.10%		95.10%	94.90%	98.00%		97.40%			
Seen, comprising: all urgent referrals (cancer   93%   25.00%   1.80		5		96%	Quarterly	95.50%	99.60%	96.00%		95.20%	97.40%	93.60%		98.40%	99.10%	99.00%		98.10%			
suspected) * 93% 79.10% 44.30% 87.00% 88.50% 83.40% 85.80% 81.80% 87.80% 93.80% 94.30%		6	seen, comprising: all urgent referrals (cancer	93%	Quarterly	87.00%	81.90%	91.40%		91.90%	92.70%	92.70%		88.90%	91.80%	95.70%		95.50%			
15 Meeting the MRSA objective (cumulative) 0 Quarterly 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				93%		79.10%	44.30%	87.00%		88.50%	83.40%	85.80%		81.80%	87.80%	93.80%		94.30%			
O learning disability	es	14	Meeting the C.difficile objective (cumulative)	62	Quarterly	2	3	4		3	5	7		5	2	9		4			
O learning disability	Ĕ	15	Meeting the MRSA objective (cumulative)	0	Quarterly	1	0	0		0	0	0		0	0	0		0			
	Outco	19	regarding access to health care for people with a	n/a	Quarterly	Compliant	Compliant	Compliant		Compliant	Compliant	Compliant		Compliant	Compliant	Compliant		Compliant			
* Information is reported a month behind	* Informa	tion is rep	ported a month behind					·													<u></u>

Trust Internal Compliance					
Rating					
Target Met					
	Target Not Met				

Monitor Governance							
Risk Rating Calculation							
<1.0	Green						
≥1.0	Amber/Green						
<2.0	Alliber/Green						
≥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 pa	thways							
greater than 18 wks								
Position	Rating							
0-2%	0							
2-4%	2							
4-6%	4							
6-8%	6							
8-10%	8							
>10%	10							

Number of ASIs							
Rating							
0							
2							
4							
6							
8							
10							

Mean Pathway Length								
Position Ratin								
0-5 wks	0							
5-7.2 wks	2							
7.2-9 wks	4							
9-10 wks	6							
10-12 wks	8							
>12 wks	10							

Past RTT Performance							
Position	Rating						
>5 months achieve 92%	0						
3-5 months achieve 92%	2						
1-3 months achieve 92%	4						
Previous month performance was between 91-92%	6						
Previous month performance was between 90-91%	8						
Previous month performance was less than 90%	10						

	1						
Incompletes RTT							
Standard Risk Rating							
Rating	Risk						
0	No Risk						
0-8	NO RISK						
8-16	Low Risk						
16-24	Medium Risk						
24-32	High Dick						
32-40	High Risk						

		ncomp sk Rati		Risk Rating Trend	Site Achievement of RTT Incompletes for January 2016					16		
Specialty	Nov-15	Dec-15	Jan-16		Lincoln	Pilgrim	Grantham	Skegness	Louth	Johnson	John C	Holbeach
Trauma & Orthopaedics	28	30	34									
Nephrology	18	24	32									
Nuclear Medicine	30	24	30									
Neurology	28	26	26									
Vascular Surgery	26	26	26	• • •								
Maxillo-Facial Surgery	24	24	20									
General Surgery	20	20	20	• • •								
Paediatrics	10	16	20									
Paediatric Surgery	6	8	20									
Dermatology	14	18	18									

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.