

UNITED LINCOLNSHIRE HOSPITALS TRUST

INTEGRATED PERFORMANCE REPORT

PERIOD TO 30th JUNE 2016

Document management

Title: Integrated Performance Report
To: Trust Board
From: Mark Brassington, Chief Operating Officer
Author: Katherine Hensby, Planning & Performance Manager
Date: 2nd August 2016

Purpose of the Report:

To update the Board on the performance of the Trust for the period ended 30th June 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 September 2016 reflecting performance to 31 st July 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 30th June 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 June 2016 (81.12%) and did not achieve the STF trajectory (82.00%)
- ✔ The 18 week referral to treatment incomplete target was achieved in June (92.02%)
- ✘ 3 out of the 9 Cancer targets were achieved in May 2016
- ✔ The Trust has had 0 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 June monthly sickness rate is currently 4.68%
- ✘ The percentage of agency staff used within the Trust is currently 4.50% for June 2016
- ✘ The Trust appraisal rate is below target at 67%

Monitor Compliance Framework:

Governance Risk Rating:

5.0

Mark Brassington
Chief Operating Officer
August 2016

2. TRUST PAAG

2. KEY MEASURES: PERFORMANCE AT A GLANCE
June 2016

Indicators		Standard	National Position	Current Month	Month Actual	YTD	Site Achievement (month)	Forecast Next Month	
MEETING THE HIGHEST EXPECTATIONS OF PATIENTS	SAFETY	Serious Events		June	Not Avail	Not Avail			
		Never Events	0	0	June	0	1		
		Harm Free Care	95.00%		June	92.92%			
		VTE Risk Assessment	95.00%		June	96.00%			
		Overdue CAS alerts	0		June	Not Avail			
		(Safety Thermometer) Catheter-Acquired Infection	0.5%		June	Not Avail			
		MRSA Bacteraemia (Post 48 Hours)	0	0	June	0	0		
		Clostridium difficile (Post 72 Hours)	59		June	5	11		
		MSSA	24		June	2	9		
		E-Coli	96		June	3	17		
	EFFECTIVENESS	SHMI	100	100	Oct 14- Sep 15	111.21			
		HSMR	100	100	Feb 15-Jan 16	99.54			
		EDD	90%		June	76.08%			
PPCI Call to Balloon in <150 mins		68%		Qtr 4	85.00%				
Fractured neck of femur		24 Hours 70%		June	57.10%				
		48 Hours 95%		June	88.90%				
Dementia Screening		90%		May	71.50%				
Dementia Risk Assessment		90%		May	86.70%				
Dementia Referral for Specialist Treatment		90%		May	11.10%				
PATIENT EXPERIENCE		No. complaints received			June	63			
	No. complaints still open			June	377				
	No. complaints ongoing			June	57				
	Friends & Family test : Inpatient and A&E Admission % recommended	70%		June	89% Inpatient, 79% A&E would recommend				
	Friends & Family test: Inpatient and A&E Admission Combined (Response Rate)	20%		June	28% Inpatients 21% A&E				
	Mixed sex accommodation	0		June	3	15			
	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%				

KEY	Under Performance	Under Review	Achieved	Not Applicable	Site Legend	Forecast Legend
	Under Performance				G: Grantham Site L: Lincoln Site Cl: Louth Site P: Pilgrim Site	

Indicators	Standard	Current Month	Month Actual	YTD	
DEVELOPING & SUPPORTING OUR STAFF	Turnover	n/a	June	2.06%	1.95%
	Vacancy Rate	n/a	June	10.25%	n/a
	Appraisal Rate	95%	June	67%	n/a
	Sickness Rate	4%	June	4.68%	(rolling year) 4.54%
	WTE (worked versus plan)	n/a	June	92.66%	n/a
	Use of Agency Staff	n/a	June	4.50%	n/a
	Core Learning (Fire)	85%	June	n/a	(Rolling Year) 72%
	Core Learning (Infection Control)	85%	June	n/a	(Rolling Year) 73%
	Core Learning (Equality & Diversity)	85%	June	n/a	(Rolling Year) 78%
	Core Learning (Information Governance)	85%	June	n/a	(Rolling Year) 78%
	Core Learning (Safeguarding Children Level 1)	85%	June	n/a	(Rolling Year) 88%
	Core Learning (Safeguarding Adults Level 1)	85%	June	n/a	(Rolling Year) 87%
	Core Learning (Health & Safety)	85%	June	n/a	(Rolling Year) 89%
	Core Learning (Slips)	85%	June	n/a	(Rolling Year) 91%
	Core Learning (Manual Handling)	85%	June	n/a	(Rolling Year) 89%
	Core Learning (Risk Awareness)	85%	June	n/a	(Rolling Year) 86%
	Core Learning (Fraud)	85%	June	n/a	(Rolling Year) 85%
	Core Learning (Basic Life Saving)	85%	June	n/a	(Rolling Year) 39%
	Core Learning (Nurse to bed day ratio (Midwife /Nurse/ Registered Nurse))	n/a	June	1.99	n/a

Indicators	Standard	Current Month	Month Actual	YTD	
TRANSFORMING & IMPROVING SERVICES FOR OUR PATIENTS: FINANCE	EBITDA Margin	n/a	June	-7.90%	-7.50%
	EBITDA Achieved	n/a	June	(2,949)	(8,353)
	Liquidity Ratio (days)	n/a	June		N/A
	CIP actual	n/a	June	Not available	Not available
	Capex forecast	n/a	June	654	1,556
	Agency Spend (% of pay)	n/a	June	9.10%	9.20%

** Figures are part of an ongoing evaluation

Indicators	Standard	Current Month	Month Actual	YTD	Site Achievement (month)	Forecast Next Month	Expected Delivery Date			
MEETING THE HIGHEST EXPECTATIONS OF OUR PATIENTS	A&E	Total time in A&E: 4 hours or less	95%	June	81.12%	80.62%			n/a	
		REFERRAL TO TREATMENT	RTT: Incompletes	92%	June	92.02%	92.23%			
	Waiting times for diagnostic tests		99.0%	June	99.08%	99.08%				
	52 week waiters		0	June	4	13				
	13 week waiting standard		0.03%		not avail	not avail			n/a	
	Appointment Slot issues (ASIs)			(Snapshot at month end) June	439			n/a	n/a	
	Cancelled Operations on the day of the operation		1.10%	June	1.58%	1.80%		n/a	n/a	
	(Cancelled ops) Not treated within 28 days. (Breach)		0.00%	June	0.82%	0.93%		n/a	n/a	
	Delayed transfers of care		3.50%	June	4.23%	4.30%				
	CANCER TARGETS		2 week wait suspect cancer	93%	May	92.6%	90.2%		n/a	n/a
			2 week wait breast symptomatic	93%	May	96.6%	95.6%		n/a	n/a
		31 day first treatment	96%	May	95.0%	95.4%		n/a	n/a	
		31 day subsequent drug treatments	98%	May	97.7%	91.5%		n/a	n/a	
		31 day subsequent surgery treatments	94%	May	90.9%	85.6%		n/a	n/a	
		31 day subsequent radiotherapy treatments	94%	May	94.0%	88.6%		n/a	n/a	
		62 day Classic	85%	May	70.0%	72.1%		n/a	n/a	
		62 day screening	90%	May	86.2%	83.3%		n/a	n/a	
		62 day consultant upgrade	85%	May	87.8%	85.9%		n/a	n/a	

Indicators	Standard	Current Month	Month Actual	YTD	Notes	
MEETING THE HIGHEST EXPECTATIONS OF OUR PATIENTS	DELIVERY OF CONTRACT	Formal Contract Performance Notices (as per new Contract)	0	June	0	4*
		Formal Performance Notices	0	June	0	0**
		Contract Fines / Penalties	0	June		

*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.

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 3 June 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 from point of referral to treatment in aggregate - patients on an incomplete pathway	92%	Quarterly	92.11%	92.45%	92.02%												
	2	A&E: maximum waiting time of four hours from arrival to admission/transfer/discharge	95%	Quarterly	80.54%	83.52%	81.12%												
	3	All cancers: 62 day wait for first treatment from: Urgent GP referral for suspected cancer *	85%	Quarterly	75.60%	74.70%	70.00%												
		NHS Cancer Screening Service referral *	90%		92.10%	80.60%	86.20%												
	4	All cancers: 31 day wait for second or subsequent treatment comprising: Surgery *	94%	Quarterly	92.10%	80.40%	90.90%												
		anti cancer drug treatments *	98%		91.60%	84.60%	97.70%												
radiotherapy *		94%	90.70%		84.00%	94.00%													
5	All cancers: 31 day wait from diagnosis to first treatment *	96%	Quarterly	96.70%	95.80%	85.00%													
6	cancer: two week wait from referral to date first seen, comprising: all urgent referrals (cancer suspected) *	93%	Quarterly	92.50%	87.80%	92.60%													
	for symptomatic breast patients (cancer not initially suspected) *	93%		90.60%	94.60%	96.60%													
Outcomes	14	Meeting the C.difficile objective (cumulative)	62	Quarterly	2	5	5												
	15	Meeting the MRSA objective (cumulative)	0	Quarterly	0	0	0												
	19	Certification against compliance with requirements regarding access to health care for people with a learning disability	n/a	Quarterly	Compliant	Compliant	Compliant												
* Information is reported a month behind				Risk Rating	4	7	5	6											

Trust Internal Compliance Rating
Target Met
Target Not Met

Monitor Governance Risk Rating Calculation	
<1.0	Green
≥1.0	Amber/Green
<2.0	Amber/Red
≥2.0	Amber/Red
<4.0	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 Incomplete 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 Incompletes for June 2016							
	Apr-16	May-16	Jun-16		Lincoln	Pilgrim	Grantham	Skegness	Louth	Johnson	John C	Holbeach
Nephrology	34	30	30		Green	Grey	Green	Grey	Green	Grey	Grey	Grey
Radiology	30	30	30		Red	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Cardiology	30	36	26		Green	Red	Red	Green	Green	Green	Grey	Grey
Trauma & Orthopaedics	32	28	26		Red	Red	Red	Red	Red	Red	Red	Red
Vascular Surgery	26	12	26		Red	Green	Red	Red	Red	Green	Grey	Grey
Paediatric Trauma & Orthopaedics	10	24	24		Green	Red	Red	Grey	Green	Grey	Grey	Grey
Neurology	20	22	24		Green	Red	Red	Grey	Green	Grey	Grey	Grey
Pain Management	22	26	22		Green	Red	Red	Green	Red	Red	Grey	Grey
Diagnostic Imaging	12	22	22		Red	Grey	Grey	Grey	Grey	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.