



Council of Governors

6 August 2013

Chief Executive's Report

1. PERFORMANCE

The Trust completed 2012/13 with a good performance for the year as a whole. The highlights were as follows:

- Cancer targets – the cancer targets were achieved for each of the quarters throughout the year which was a considerable achievement for patients and for the organisation.
- Financial performance – the Trust achieved the financial targets set for the year and in particular the planned surplus, which was achieved, has been reinvested in the Trust's capital programme.
- Emergency Services target – quarter 4 saw a continuation of the challenges which were evident in quarter 3. In particular there was higher than anticipated activity levels for emergency attendances and admissions. Hence the Trust achieved a performance of 90.1% at quarter 4 and for 2012/13 as a whole the performance was 93.2%. Whilst this was below the target of 95%, nevertheless it is testimony to the considerable efforts of all staff across the Trust that the it was able to achieve this level of performance and maintain a safe service through an extremely challenging winter.

Turning to quarter 1 of 2013/14, a summary of the Trust's performance is attached at appendix 1. This represents a good start to the year. The highlights are as follows:

- Cancer targets – the targets continue to be met and it is now over 2 years (i.e. 9 quarters in a row) when all these targets have been met.
- Emergency Services target – the continued hard work of all staff across the Trust and the implementation of the early parts of the emergency services plan have yielded benefits for both patients and performance in terms of the quarter 1 outturn being performance of 95.3% against the 4 hour target. Detailed planning is now taking place to prepare the Trust and its partners for the forthcoming winter and the possibility that the levels of activity experienced last winter may be experienced again and possibly to an even greater extent.
- Financial performance – at this early stage in the year, the Trust is currently overspent by £2.2m (1%) of turnover. The two principle reasons for this is the under-delivery on efficiency plans and a continuation of high level of emergencies in quarter 1 impacting on flow and highlighting the Trust's continuing vulnerability in this area. Seven Clinical Directorates are currently receiving support through the Trust's Performance Management Framework to ensure that their performance going forwards improves as soon as possible.

2. INFECTION CONTROL

2012/2013 MRSA PERFORMANCE

MRSA Thresholds for 2012/2013

Bacteraemia are either classified as Trust attributable or community acquired. Community acquired cases are bacteraemia that are identified on either day 0 or day 1 of the patient's stay. Any bacteraemia identified after that are considered to be Trust attributable. The Trust has been set different thresholds for MRSA by different organisation as follows:

National (Department of Health): 1
Monitor (de-minimus): 6
Contract (penalties apply): 12

MRSA Performance for June 2012

There have been no cases of MRSA bacteraemia for the month of June.

The year to date performance is 2 cases of MRSA.



2012/2013 Thresholds	
National (Department of Health): 1	
Monitor (de-minimus): 6	
Contract (penalties apply): 12	
Actual number of cases: 2	●

MRSA Screening

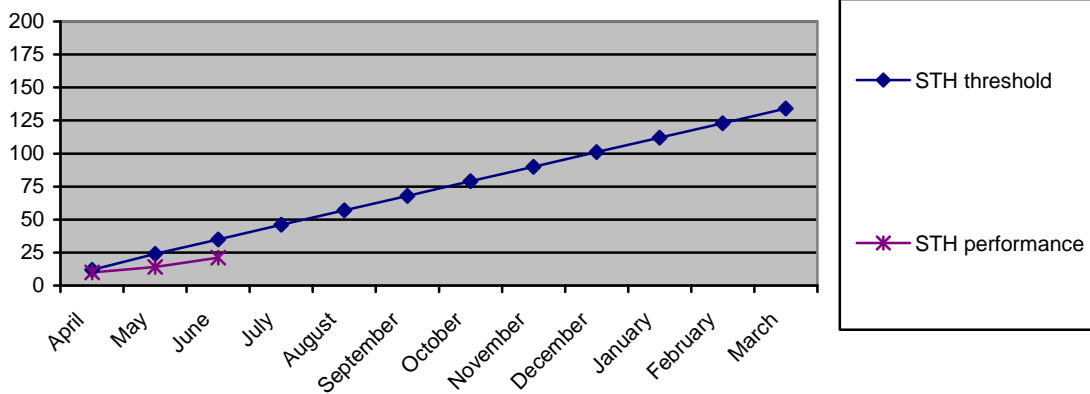
May MRSA screening figures were 129%. June MRSA screening figures were 121%.

2012/2013 C.DIFF PERFORMANCE

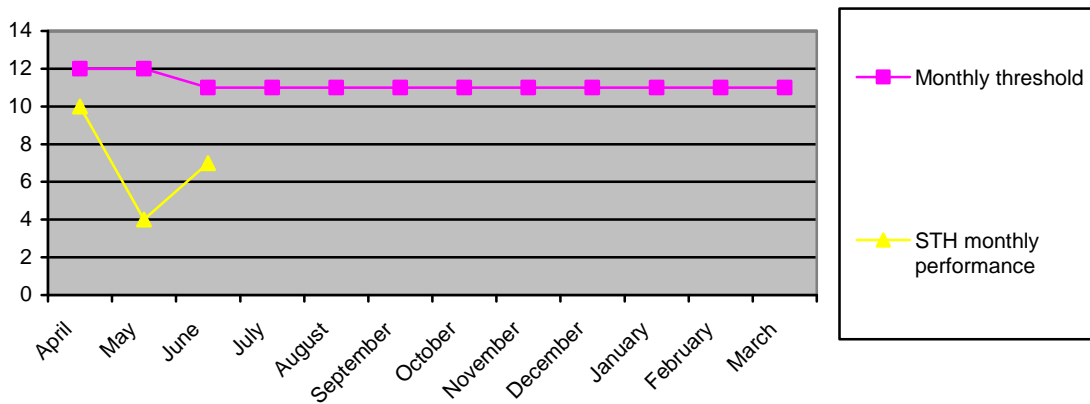
STHFT has recorded 7 positive samples for June. The year to date performance is 21 cases of C.diff against a national target of 134.

The health community performance is always one month in arrears to allow for the allocation of cases in Sheffield residents treated in other hospitals. The position in May was year to date performance of 35 cases against a year to date threshold of 31.

C.diff year to date performance



C.diff monthly performance



The year to date performance is 21 cases of C.diff against a contract threshold of 35.

Surveillance

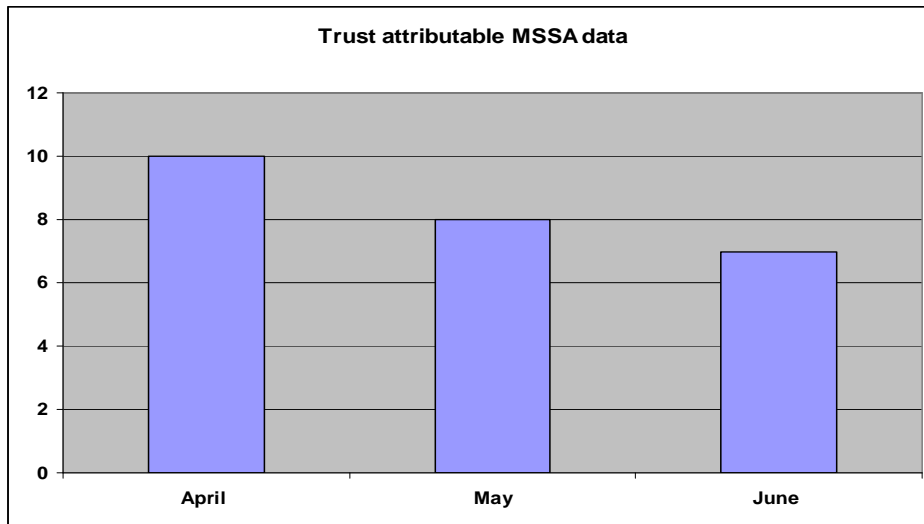
There are no wards currently under surveillance for C.diff.

MSSA

The Trust continues to return data on the number of cases of MSSA bacteraemia to the Health Protection Agency. Cases are labelled as either Trust attributable or community acquired. For June, 7 Trust attributable cases of MSSA bacteraemia were recorded.

Performance on MSSA for the last 12 months is 72 cases; there have been 25 cases reported since April 2012. Although there is no threshold set for MSSA bacteraemia in 2012/2013, work will continue within the Trust to try to reduce the number of cases of MSSA bacteraemia.

There are currently no national benchmarks available to allow the Trust to compare its performance with that of other Trusts.

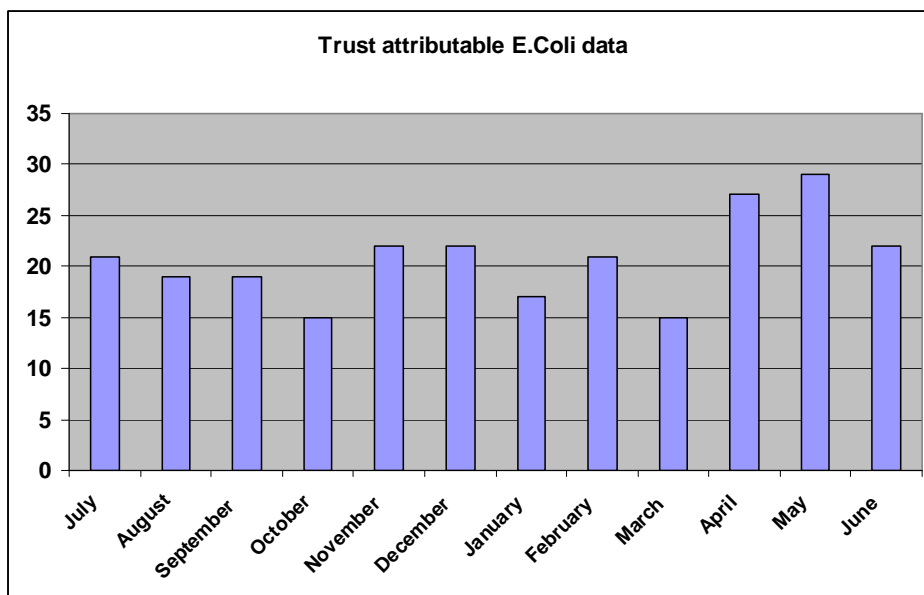


E.COLI

The Trust commenced returning data on the number of cases of E.Coli bacteraemia to the Health Protection Agency in June 2011. Cases are labelled as either Trust attributable or community acquired. For June, 22 Trust attributable cases of E.Coli bacteraemia were recorded.

Currently it is not expected that the Trust will be set a reduction target for E.Coli bacteraemia as E.Coli bacteraemia is often not directly associated with healthcare.

After 12 months, the total Trust attributable cases of E.Coli stands at 249 cases.



There are currently no national benchmarks available to allow the Trust to compare its performance with that of other Trusts.

3. COMMUNICATIONS

Since the last Council of Governors' meeting a number of developments and achievements have been recognised locally and nationally.

The Trust won an award which ranks them in the top 40 Hospital Trusts according to a leading provider of healthcare and healthcare improvement services. The CHKS Top 40 award is based on the results of testing the Trust's performance in 22 key areas which included safety, clinical effectiveness, health outcomes, efficiency, patient experience and quality of care.

Sheffield Teaching Hospitals was also named in the top ten for the number of clinical trials it is offering to patients in a national league table. New figures published by the National Institute for Health Research rank the Trust ninth out of 390 NHS Trusts for supporting patients to take part in groundbreaking research which could one day revolutionise NHS care. They also show that there was a 12 per cent increase in the number of studies run from the previous year, from 259 to 290, with nearly 7,000 patients taking part. A very successful public awareness day also took place last month across the Trust to raise awareness of the importance of clinical research and a high number of members of the public and staff took the opportunity to visit talks, demonstrations and exhibits in various departments to find out more.

London 2012 Olympic Gold Medallist Nicola Adams MBE officially opened the Clinical Immunology and Allergy Unit (CIAU) which provides treatment for her Coach, Alwyn Belcher. Last year saw the relocation of the CIAU at the Northern General Hospital. The new Unit offers a larger capacity day case area, more consulting rooms, and improved facilities and comfort for patients and staff.

The state of the art £11m laboratory centre which gives patients across the region faster and more specialised test results has been officially opened at the Northern General Hospital. The centre will enable more than 10 million tests to be processed each year helping healthcare professionals at the trust and GPs in the community as well as other hospitals across the region, the UK and Europe. The new centre has brought together all the different specialist laboratory staff under one roof meaning more efficient working, better collaboration and the ability to use new automated robots which can process more patient results than ever before. This reorganisation has also meant that the Trust can maximise the latest technology they have in many fields such as analysing patients' DNA to help cancer sufferers or patients with genetic abnormalities in their blood. Work has also been carried out at the Royal Hallamshire Hospital to centralise the specialist Histopathology and Haematology Oncology departments which means cancer patients across South Yorkshire and North Derbyshire will continue to receive the most rapid results and expert diagnoses'.

Local MP David Blunkett marked 75 years of Firth Park Community Clinic being open and providing services to the local community during a full day of celebrations.

Professor Wendy Tindale, Scientific Director at Sheffield Teaching Hospitals NHS Foundation Trust and Clinical Director of the National Institute for Health Research Devices for Dignity Healthcare Technology Co-operative, is among an elite group of women across the country honoured by the Health Service Journal's inaugural Inspirational Women awards for outstanding leadership in her field. Professor Hilary Chapman, Chief Nurse/Chief Operating Officer has also been named as one of the top Clinical Leaders according to the Health Service Journal. The Journal judged which clinicians made the greatest impact on health policy, service transformation, and innovation.

And finally Professor Tony Weetman, Honorary Consultant Endocrinologist has been honoured by the American Thyroid Association for his outstanding research into the treatment and detection of thyroid problems. Professor Weetman is only the third person from the UK to be bestowed the American Thyroid Association's prestigious Paul Starr Award.

SUMMARY OF OVERALL POSITION

MAY 2013

	Target	May 13	Q1	ytd 13/14	Last Year 12/13
FINANCIAL POSITION	In financial balance				
CANCER WAITS					
2 WEEK WAITS	93% seen within 2 weeks				
31 DAY DECISION TO TREAT TO TREATMENT	96% treated within 31 days				
62 DAY REFERRAL TO TREATMENT	85% treated within 62 days				
31 DAY SUBSEQUENT TREATMENT	98% treated within 31 days				
18 WEEK REFERRAL TO TREATMENT					
ADMITTED PATHWAYS	90% seen within 18 weeks				
NON ADMITTED PATHWAYS	95% seen within 18 weeks				
INCOMPLETE PATHWAYS	92% waiting less than 18 weeks				
ACTIVITY					
ELECTIVE INPATIENTS	On target				
NON ELECTIVE INPATIENTS	On target				
NEW OUTPATIENTS	On target				
FOLLOW UP ATTENDANCES	On target				
A&E ATTENDANCES	On target				
A&E STANDARDS					
WAITING TIME	95% seen within 4 hours				
PATIENT EXPERIENCE					
MRSA	No more than 1 case in 2 months				
CLOSTRIDIUM DIFFICILE	Less than 6 cases per month				
NEVER EVENTS	No never events				
MIXED SEX ACCOMMODATION	No breaches				
OPERATIONS CANCELLED ON THE DAY	Less than 77 operations per month cancelled on the day				
CQUINS INDICATORS	On target for CQUINS indicators	n/a	n/a	n/a	

	On target
	<= 5% from target
	> 5% from target except for 18 week performance where red is failure to meet target
	improving from previous month
	deteriorating from previous month
	no change from previous month

