

EXECUTIVE SUMMARY**REPORT TO THE BOARD OF DIRECTORS****HELD ON 17 JULY 2013**

Subject:	Activity and Access Report
Supporting Director:	Chief Nurse/Chief Operating Officer
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Status (see footnote):	D

PURPOSE OF THE REPORT:

To brief colleagues about the performance against the following targets: Activity Waiting Lists Cancer waiting times Accident and Emergency and Overall Performance
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KEY POINTS:

<ul style="list-style-type: none"> • The targets for the 18 week admitted, non admitted and incomplete pathways were met in May. • New outpatient activity was 1.5% above target in May and 0.3% above for the ytd. • Follow up activity was 1.2% below target in May and 0.4% below for the ytd. • The level of elective inpatient activity was 5.3% above target in May and 4.1% above for the year to date (ytd). • Non elective activity was 4.9% above expected levels in May and 6.3% for the ytd. • The waiting list for inpatients increased by 34 and the outpatient queue increased by 880 in May. • Accident and Emergency performance has been extremely challenging again but the Trust achieved the target in May with 95.3% of A&E attendances being seen within 4 hours. This gives a ytd position of 93.8%. • There were no never events in May and it is 107 days since the last never event.

IMPLICATIONS:

		TICK AS APPROPRIATE
1	Deliver the best clinical outcomes	√
2	Provide patient centred services	√
3	Employ caring and cared for staff	
4	Spend public money wisely	√
5	Deliver excellent research, education & innovation	

APPROVAL PROCESS:

Meeting	Presented	Approved	Date
TEG	CN/COO	√	03/07/13
Board of Directors	CN/COO		

¹Status: A = Approval
A* = Approval & Requiring Board Approval
D = Debate
N = Note

²Against the five aims of the STHFT Corporate Strategy 2012-2017

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

SHEFFIELD TEACHING HOSPITAL NHS TRUST

PERFORMANCE AND ACTIVITY REPORT

EXCEPTION REPORT

1. OUTPATIENTS

The current position for 2013/14 is:-

	Current month - May 13				Full Year 2013/14				ytd % variance last month
	Actual	Target	Variance	% Var	Actual	Target	Variance	% Var	
Referrals received	21168	20812	356	1.7%	43244	41624	1620	3.9%	6.1%
New Attendances	23093	22762	331	1.5%	45646	45524	122	0.3%	-0.9%
Follow up attendances	58668	59378	-710	-1.2%	118315	118756	-441	-0.4%	0.5%
Total attendances	81761	82140	-379	-0.5%	163961	164280	-319	-0.2%	0.1%
A & E attendances	12558	12360	198	1.6%	24919	24321	598	2.5%	3.3%
Outpatient Queue	24342	19802	4540	22.9%	n/a	n/a	n/a	n/a	

1.1 Referrals

The number of new referrals received in May was 21,168 compared to 22,076 in April. The number received in May 12 was 23,241 and the average for the year was 20,868. The expected levels of referrals in 13/14 has now been agreed with the commissioners and is 251,725, giving an average of 20,977 per month. The number received in the first two month is already 3.9% above expected levels. All the care groups except for SYRS and Surgical Services have received more referrals than expected. For the Trust overall more than half of the over performance is due to referrals from primary care.

1.2 New Attendances

There were 23,093 new attendances in May compared to a target of 22,762. This compares to 22,553 in April 13 and 25,262 in May 12. In terms of attendances per working day there were 1100 in May compared to 1,074 in April and an average of 1,075 in 12/13.

Across the care groups, Head & Neck were below target in May and for the year to date.

1.3 Follow up Attendances

There were 58,668 follow up attendances in May compared to a target of 59,378. This compares to 58,656 in April and 64,477 in May12. In terms of attendances per working day there were 2,794 in May compared to 2840 in April and an average of 2,760 in 12/13.

At care group level Specialised Medicine & Rehabilitation were below target in May but above target for the year to date. Head & Neck are below target for the year to date.

1.4 Outpatient Queue

The number of patients on the outpatient waiting list has risen from 23,462 at the end of April to 24,342 at the end of May. This is the highest it has been October 2006. Of these 10,093 had been waiting over 5 weeks compared to 9,467 at the end of April.

The specialities where the queue has increased are Cardiology, Dermatology, ENT, Gynaecology, Ophthalmology, Orthopaedics and Urology.

1.5 A & E ATTENDANCES

There were 12,558 A & E attendances in May compared to a target of 12,360. This compares to 12,361 attendances in April and 12,260 in May 12. In May 95.3% of attendances were seen within 4 hours, giving a year to date position of 93.8%. This compares to 92.3% in April and 95.2% in May 12.

2. INPATIENTS

The position for 2013/14 is:-

	Current month - May 13				Full Year 2013/14				ytd % variance last month
	Actual	Target	Variance	% Var	Actual	Target	Variance	% Var	
Elective Spells	11235	10671	564	5.3%	22223	21342	881	4.1%	3.0%
Non Elective Spells	6977	6648	329	4.9%	13907	13081	826	6.3%	7.7%
Total Spells	18212	17319	893	5.2%	36130	34424	1706	5.0%	4.8%
Waiting List	9301	8912	389	4.4%	n/a	n/a	n/a	n/a	n/a

2.1 Elective Spells

There were 11,235 spells in May compared to a target of 10,671. This compares to 10,981 spells in April 13 and 11,343 in May 12. This is 5.3% above target. There were 535 spells per working day in May this was higher than in April (523) but at a similar level to March. The average for 12/13 was 510 spells per day. Across the care groups, SYRS and Surgical Services were below target in May and for the year to date as they were for last year as a whole.

2.2 Non Elective Spells

In May there were 6,977 non elective spells compared to a target of 6,648. This is 4.9% above target compared to 5.1% above for 12/13 overall. In May all the Care Groups were above target apart from Specialised Cancer, Medicine & Rehabilitation and they are also below target for the year to date. The non elective spells were higher than in April (6,945) and significantly higher than in May 12 (6,319).

2.3 Inpatient Waiting List

The number of patients on the inpatient waiting list rose from 9267 at the end of April to 9301 at the end of May. The number of patients waiting over 20 weeks also rose from 557 patients at the end of April to 593 at the end of May. As a result of the impact of winter pressures, cancer referrals and some specific capacity issues this is the highest number waiting over 20 weeks since September 2006. The long waiters are primarily in Cardiology, Orthopaedics, Urology, Neurosciences and Vitreoretinal Surgery.

3. OTHER CONTRACT ACTIVITY

3.1 Maternity Pathways

	Actual	Target	Variance
Antenatal - standard	731	703	+28
Antenatal – intermediate	395	410	-15
Antenatal – intensive	85	79	+6
Antenatal - total	1211	1192	+19
Postnatal – standard	683	878	-195
Postnatal – intermediate	370	302	68
Postnatal - intensive	6	7	-1
Postnatal - total	1059	1187	-128

For the first time Maternity care is being commissioned based on separate pathways of care for antenatal and postnatal care rather than on the basis of individual outpatient attendances and hospital stays. The pathways included are those starting in this financial year. The level of the pathway reflects the amount of resource required to treat the woman. It is based on factors affecting the current pregnancy, including social factors, the woman’s medical conditions not directly related to the pregnancy and her previous obstetric history. For example a woman expecting twins or more would fall into the ‘intensive category’ as would a woman with HIV or diabetes. A woman who has a BMI of more than 35 or who has a history of pre-eclampsia would fall into the ‘intermediate’ category. The assessment of the level of the pathway is made by clinical staff after the booking visit to the hospital after the 12 week scan has been carried out.

3.2 Critical Care

	Actual	Target	Variance
Cardiac Critical Care	1301	1233	+68
Neonatal Critical Care	2625	2820	-195
Neurosciences Critical Care	1216	1227	-11
General Adult Critical Care	2478	2148	+329

Critical Care activity is reimbursed on the basis of the level of care that the patient requires and this income is in addition to that for the main hospital spell. Neonatal and Neurosciences are below expected levels for the year so far.

3.3 Occupied bed nights

	Actual	Target	Variance
Spinal Injuries	2741	2725	+16
Spinal Ventilated Beds	438	385	+53
Palliative Care	906	1060	-154
Rehabilitation	990	857	+98

Activity in Spinal Injuries, including that for ventilated beds, Palliative Care and Rehabilitation is measured in terms of occupied bed nights. The number of occupied bed nights in Palliative Care is below target for the year to date.

4. 18 WEEKS RTT PERFORMANCE

	Actual	Target	Variance
% admitted patients < 18 weeks	91.4%	90%	+1.4%
% non admitted patients < 18 weeks	96.0%	95%	+1.0%
% incomplete pathways < 18 weeks	93.7%	92%	+1.7%

The target for the percentage of RTT admitted pathways completed within 18 weeks was met in May. The specialities that did not achieve the 90% target were General Surgery, Orthopaedics and

Dermatology. For non-admitted pathways, the target was met for the Trust as a whole but not in Cardiology, Neurology, Neurosurgery and Orthopaedics.

For incomplete pathways, Cardiology, Cardiothoracic Surgery, General Surgery and Orthopaedics did not achieve the target of 92% of incomplete pathways waiting less than 18 weeks. Overall the Trust achieved this target.

There were 39,997 incomplete pathways at the end of May of which 2,519 were waiting over 18 weeks.

5. CANCER WAITING TIMES POSITION AS AT 13 JUNE 2013

	Total Q1	Breaches Q1	% Q1	Target
Urgent referral from primary care – 2 week wait	2504	158	93%	93%
Breast symptoms – 2 week wait	364	18	95%	93%
First treatment started within 31 days	1016	15	98%	96%
Subsequent treatment started within 31 days - radiotherapy	627	2	99%	94%
Subsequent treatment started within 31 days - drugs	435	1	99%	98%
Subsequent treatment started within 31 days - surgery	185	3	98%	94%
Treatment started within 62 days – GP referral	341.5	41.5	87%	85%
Treatment started within 62 days – Consultant referral	105.5	8	92%	n/a
Screening	55	1.5	97%	90%

The data shows the provisional position for quarter 1.

Not all tumour sites are achieving the waiting time standards. The tumour sites not meeting the standards are:-

2WW (93% compliance)

- Brain 91% (61 seen, 5 breached) decreased from 93%
- Gynae 92% (208 seen, 16 breached) improved from 89%
- LGI 92% (352 seen, 26 breached) improved from 89%
- UGI 89% (319 seen, 34 breached) static
- Urology 89% (256 seen, 26 breached) improved from 87%

All the breaches are due to 'patient choice', except for a couple of administrative errors. Specialties are well aware of the need to offer a first appointment as early as possible within the 14 day window, ideally by day 7 as this provides opportunities to provide choice for patients within the 14 days. Trust compliance has improved from 92% (April) to 93%. The threshold should be achieved by the end of the quarter.

Breast 2ww (93% compliance)

Improved from 92% (April) to 95% (with adjustments). The threshold should be achieved by the end of the quarter.

Subsequent treatment - Surgical (94% compliance)

- Urology 92% (40 treated, 3 breached) improved from 84%

Treatment started within 62 day - GP referral (85% compliance)

- Brain/CNS 50% (1 treated, 0.5 breached)
- Sarcoma 66% (3 treated, 1 breached)
- UGI 74% (31 treated, 8 breached) decreased from 83%
- Urology 79% (66.5 treated, 13.5 breached) decreased from 81%
- Other 71% (2.5 treated, 1 breached)

There are no particular concerns for Brain/CNS, Sarcoma and Other. However, there are concerns about capacity in Upper GI and Urology. The Trust performance against the 62 day target is 87% overall but has been declining. In the surgical care group patients are now being man marked. Other specialties have been asked to do the same to provide an accurate picture for Q1. Performance is not as high as it has been in recent comparable quarters. However, on balance, it is felt that the threshold should be achieved by the end of the quarter.

Cons Upgrade (85% compliance not mandated)

- UG 75% (6 treated, 1.5 breached)
- Urology 80% (2.5 treated, 0.5 breached)

Performance in both of these areas has improved from 66% in April