

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
BOARD OF DIRECTORS
THURSDAY 25 OCTOBER 2018

Title:	PERFORMANCE REPORT & ANNUAL PLAN UPDATE
Responsible Director:	Lawrence Tallon, Director of Strategy, Planning & Performance
Contact:	Andy Walker, Head of Strategy and Planning

Purpose:	To update the Board of Directors on the Trust's performance against targets.
Confidentiality Level & Reason:	None
Annual Plan Ref:	Affects all strategic aims.
Key Issues Summary:	<p>Exception reports are provided where there are risks to performance against targets.</p> <p>ED attendances rose significantly in September compared to August which led to a fall in 4 hour performance.</p> <p>RTT performance continued to fall in August. The main issues relate to reduced elective admissions at QEHB and ongoing challenges with non-admitted pathways at HGS.</p> <p>Performance against the 62 day cancer GP referral target fell, however both 2 week wait targets were achieved for the first time since February 2018.</p> <p>Further details and actions taken in response to the exceptions identified are included in the report.</p>
Recommendations:	<p>The Board of Directors is requested to:</p> <p>Accept the report on progress made towards achieving performance targets and associated risks and mitigating actions.</p>

Approved by:	Lawrence Tallon	Date: 17 October 2018
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UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
BOARD OF DIRECTORS
THURSDAY 25 OCTOBER 2018

PERFORMANCE REPORT & ANNUAL PLAN UPDATE
PRESENTED BY THE DIRECTOR OF STRATEGY, PLANNING & PERFORMANCE

1. Purpose

This paper summarises the Trust's performance against national targets, including those in the Single Oversight Framework. Where RAG ratings are given, green indicates the target is being achieved, amber that performance is slightly below target, and red that it is significantly below. Material risks are detailed in this paper whilst other targets and indicators are included in Appendix 1. An update is also provided on shorter-term planning.

2. Exception Reports

The following areas have been identified as material exceptions:

2.1 A&E 4 Hour Waits

Internal Trust performance¹ fell 1.5pp to 80.1%. When Type 3 activity from other local providers and Type 5 activity that has been redirected away from the Emergency Departments (e.g. hot clinics and direct admissions to CDU/MAU/SAU) is included, the Trust's performance for September is reported as 88.2%, a fall of 1.0pp compared to August. Good Hope saw an increase in performance of 7.0pp to 77.8% whilst Heartlands and Solihull hospitals saw falls of 8.1pp and 0.5pp respectively. Performance at QEHB was static at 82.9%. Average daily attendances were significantly higher across the Trust, being 5.8% higher than August and 3.9% higher than September 2017.

Site	Daily Attendances Sep 2017	Daily Attendances Aug 2018	Daily Attendances Sep 2018	Change Sep 2017 to Sep 2018	Change Aug 2018 to Sep 2018
QEHB	323.1	322.5	341.9	5.8%	6.0%
Heartlands	386.4	375.9	404.6	4.7%	7.6%
Good Hope	244.5	240.4	250.7	2.5%	4.3%
Solihull	118.1	113.6	116.4	-1.4%	2.4%
UHB	1072.0	1052.4	1113.5	3.9%	5.8%

HGS is undertaking a number of initiatives to mitigate the number of patients waiting more than 4 hours for treatment. At both Heartlands and Good Hope staff from Ambulatory Emergency Care regularly attend ED to identify which patients are appropriate to be seen in ambulatory care. Medical Day Hospital

¹ This refers to Type 1 performance at QEHB, BHH, GHH and Type 3 performance at Solihull, before other activity is included, such as allocated walk-in centre activity or ED diversion pathways.

staff also attend ED to identify elderly patients who would be more suited to their facility and for whom admission might be avoided. In addition, there is close monitoring of the clerking times within AMU to support onward flow. Despite these initiatives, performance continues to be affected by the increased number of patients to be seen and by late discharges and reduced use of the discharge lounge to facilitate flow. As part of the urgent care workstream, there is greater focus on assessment units and how they can provide greater support to the ED front door through diagnostic service provision.

The A&E element of the Quarter 2 Provider Sustainability Fund (PSF) payment, which is £1.43m, is at risk. Final determination of the payment is dependent on performance of the Birmingham and Solihull STP as a whole.

2.2 Delayed Transfers of Care

The percentage of NHS and joint patients who were delayed fell in August to 2.0%. There was, however, an increase in social care delays which led to the total percentage of patients whose discharge was delayed increasing by 0.3pp to 4.8%. There was a particular increase in social care delays at Good Hope caused by a lack of assessment capacity from both Birmingham City Council and South Staffordshire District Council during the summer holidays. The ongoing issues with Continuing Healthcare affecting discharges from QEHB continue to be addressed with Birmingham and Solihull CCG who commission the service from Midlands and Lancashire CSU.

2.3 RTT - 18 Week Incomplete Pathways, 52 Week Waits and Waiting List

In August, performance for 18 week incomplete pathways fell by 0.9pp to 88.6%. Performance fell for both QEHB and HGS, by 0.8pp and 0.9pp respectively. There were no 52 week breaches reported in August.

The RTT waiting list is now 2.7% larger than it was in March. The HGS waiting list has increased by 5.1% whilst QEHB has fallen in size by 1.1%. Nationally the rate of increase of the waiting list has risen further and is now 8.1% larger than the baseline, with 4.15m patients waiting.

There are now twelve treatment functions that are below target for the Trust as a whole, with three treatment functions (Cardiothoracic Surgery, Oral Surgery and Rheumatology) below 92% that were above target in July. QEHB had lower numbers of admitted elective clock stops in August, and lower emergency activity over the month. HGS has continued to make progress in reducing the admitted waiting list. The main challenge is non-admitted patients, particularly in Ophthalmology where the use of external providers is being scoped. Some caratact activity is also being carried out at QEHB.

2.4 Cancelled Operations

In August there were 106 operations cancelled on the day of surgery at QEHB (2.0% of elective admissions) and 125 at HGS (1.4%). Of these twelve were not rebooked within 28 days at QEHB and one at HGS. Five of

the breaches at QEHB were in Liver Surgery where additional theatre time will be available from November. The breach at HGS related to a complex Thoracic Surgery patient who required multiple teams to be available.

2.5 Cancer Targets

Performance for the Cancer 62 Day GP Referrals target fell 2.1pp to 79.6% in August. QEHB's performance fell by 7.3pp to 65.3%, whilst performance at HGS increased by 0.9pp to 87.7%. QEHB has seen an increase in referrals for cancer, particularly in Urology for named consultants for whom patients will wait which has affected 62 day and 31 day performance. 62 day screening performance for the Trust fell 3.6pp to 88.6%. QEHB was half a breach below target, leading to performance of 87.5%. 31 day subsequent surgery performance for QEHB fell 9.2pp to 87.5%; the Trust's overall performance therefore fell 5.6pp to 91.9%.

The 2 week wait targets for suspected cancer and for breast symptoms showed a significant improvement in performance in August, with both targets achieved for the first time since February 2018.

2.6 Dementia Finding, Assessment and Referral

Performance for the "Find" element was below target at 86.7%. All four sites saw a fall and QEHB was the only one to be above target. Daily follow up with consultants at HGS whose patients have not been screened continues, however the definitive solution will be the roll-out of PICS which mandates screening as part of the admission process.

3. **2018/19 Annual Plan Update**

The Board will be considering the proposed revised strategy for the Trust later in the agenda. If approved, this new strategic framework will then shape the approach taken to developing a shorter-term plan that can support delivery of the longer-term strategy. The new plan will be structured around the nine priorities included in Chapter 5 of the strategy. The Board and Council of Governors will have an initial opportunity to engage with this process at their joint seminar in December. The Operational Plan for 2018/19, submitted to NHS Improvement and approved by the Board of Directors in April, setting out the priorities for the year ahead has been reviewed following the end of Quarter 2 and no material exceptions, other than those already covered in this report, have been identified at this stage.

4. **Recommendations**

The Board of Directors is requested to:

Accept the report on progress made towards achieving performance targets and associated risks and mitigating actions.

Lawrence Tallon
Director of Strategy, Planning & Performance

Performance Report

Lawrence Tallon
Director of Strategy, Planning and
Performance

Material exceptions to report

A&E 4 Hour Waits

Latest Period:

Internal Type 1 & 3
System Type 1, 3 & 5

80.1%
88.2%

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)

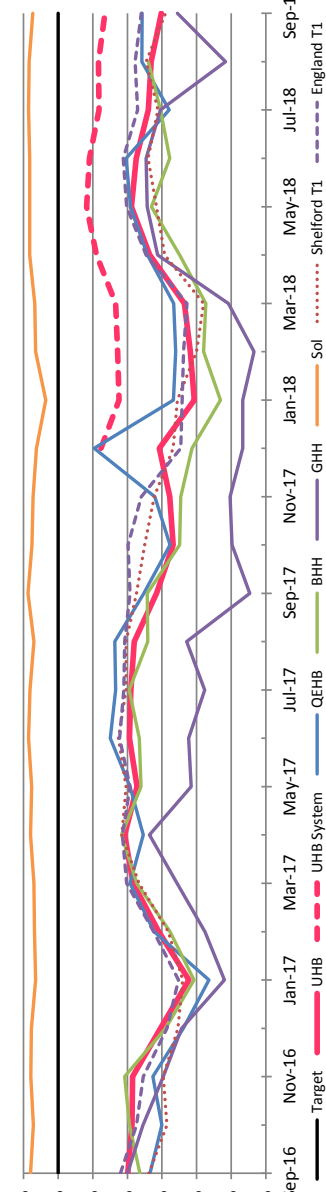
Single Oversight Framework

Target:

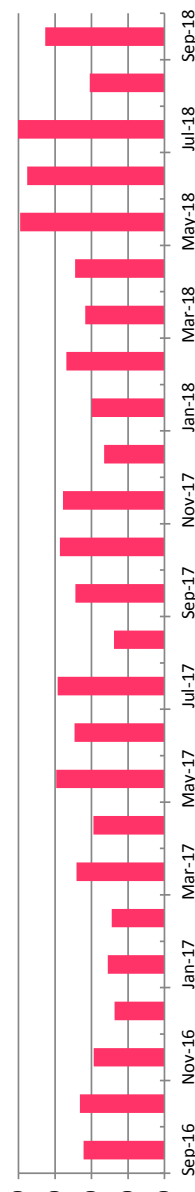
95%

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	YTD
QEHB T1	78.8%	81.1%	89.8%	78.4%	78.0%	78.3%	82.1%	84.5%	85.2%	79.0%	82.9%	82.9%	82.7%
BHH T1	77.5%	77.3%	75.7%	71.5%	74.0%	73.7%	77.5%	81.5%	78.9%	80.2%	82.0%	73.9%	79.0%
GHH T1	69.9%	70.2%	68.3%	68.4%	66.7%	70.4%	80.6%	82.1%	82.3%	80.2%	70.8%	77.8%	79.1%
Solihull T3	98.8%	98.6%	98.1%	96.8%	98.3%	98.4%	99.1%	99.1%	99.1%	99.3%	99.2%	98.7%	99.1%
UHB T1 & T3	78.4%	78.9%	80.4%	75.3%	75.9%	76.8%	81.8%	84.4%	83.7%	82.0%	81.6%	80.1%	82.3%

A&E 4 Hour Wait Performance



Daily Average Attendances



- Overall Trust performance fell 1.5pp to 80.1%.
- System performance increased 1.0pp to 88.2%
- Heartlands fell by 8.1pp to 73.9%.
- Good Hope improved by 7.0pp to 77.8%
- QEHB was static at 82.9%.
- Daily attendances across the Trust increased by 5.8% compared to August and by 3.9% compared to September 2017. Compared to August Heartlands saw a 7.6% increase and QEHB 6.0%.
- Q2 PSF funding is at risk.

RTT Incomplete Pathways

Latest Period: **88.6%**

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)

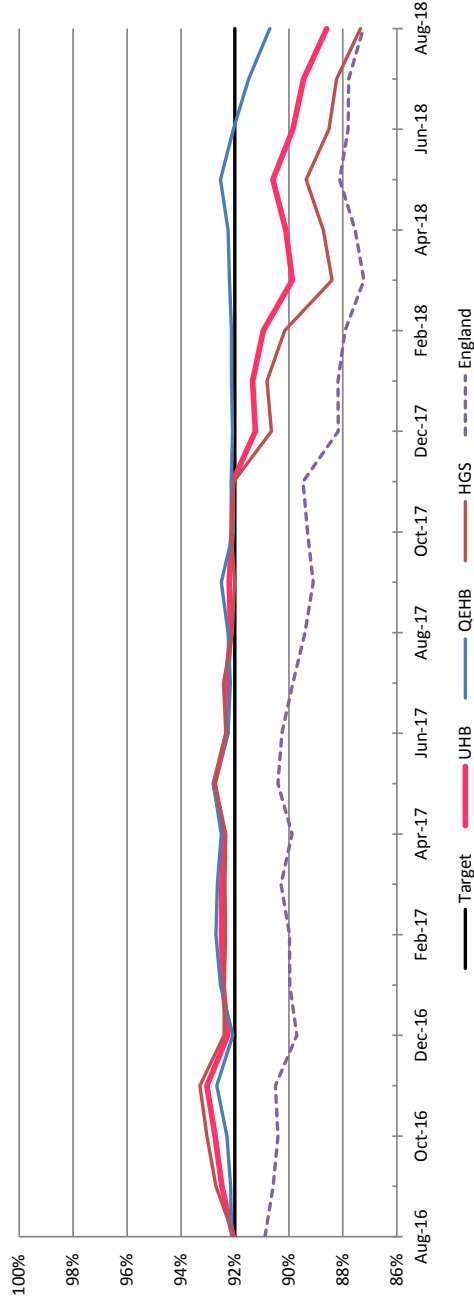
Single Oversight Framework

Target:

92%

	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD
QEHB	92.5%	92.1%	92.1%	92.1%	92.1%	92.1%	92.2%	92.3%	92.5%	92.1%	91.5%	90.7%	91.8%
HGS	92.0%	92.1%	92.0%	90.6%	90.8%	90.2%	88.4%	88.7%	89.4%	88.5%	88.2%	87.3%	88.4%
UHB	92.2%	92.1%	92.1%	91.2%	91.3%	90.9%	89.9%	90.1%	90.6%	89.9%	89.5%	88.6%	89.7%

RTT Incomplete Pathway Performance



Latest Month's RTT Incomplete Pathway Performance - Treatment Functions Below Target Overall

	Gen Surg	Gynaecology	Neurology	Neurosurg	Ophth'ology	Oral Surgery	Other	Rheum'ology	CT Surg	T&O	Urology
QEHB	86.4%	91.2%	84.1%	75.3%	89.5%	87.8%	93.2%	92.4%	100.0%	95.7%	86.9%
HGS	84.7%	91.1%	85.8%	-	79.4%	-	89.7%	91.0%	88.9%	78.8%	85.5%
UHB	85.3%	84.9%	84.9%	75.3%	82.5%	87.8%	91.4%	91.7%	90.8%	81.1%	86.0%

- Trust fell by 0.9pp to 88.6%.
- QEHB performance fell by 0.8pp to 90.7%.
- HGS fell 0.9pp to 87.3%.
- England average fell 0.6pp to 87.2%.

- HGS has continued to make progress in reducing the admitted waiting list although there has been an increase in the admitted backlog.
- Main challenge at HGS remains non-admitted patients, particularly in Ophthalmology.

- QEHB had lower numbers of admitted clock stops in August, despite lower emergency activity over the month.

RTT Waiting List Size

Latest Period: **86,679**

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)

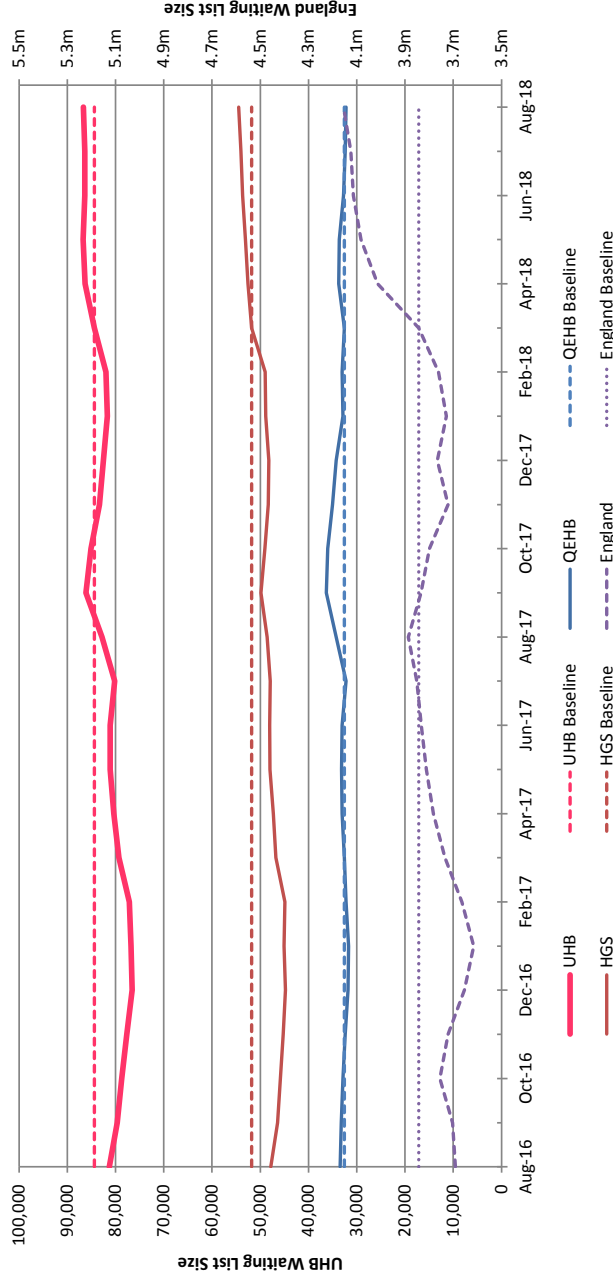
Planning Guidance

Target:

≤ 84,397

	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Change
QEHB	33,575	36,002	34,998	34,289	32,837	33,025	32,588	33,753	33,617	32,723	32,390	32,224	-364
HGS	49,865	49,070	48,354	48,252	48,860	48,985	51,791	52,533	53,086	53,664	53,997	54,455	+2,664
UHB	83,440	85,072	83,352	82,541	81,697	82,010	84,379	86,286	86,703	86,387	86,387	86,679	+2,300

RTT - Waiting List Size



- RTT waiting list fell at QEHB but rose at HGS.

- The waiting list at QEHB is now 1.1% smaller than at the end of March 2018 and HGS is 5.1% larger. The total is 2.7% larger.

- The QEHB waiting list will increase in October when Appointment Slot Issues (referrals via e-referrals for whom an appointment was not available) are included. This was an action required following the external audit of the quality account for 2017/18. The baseline will be adjusted accordingly.

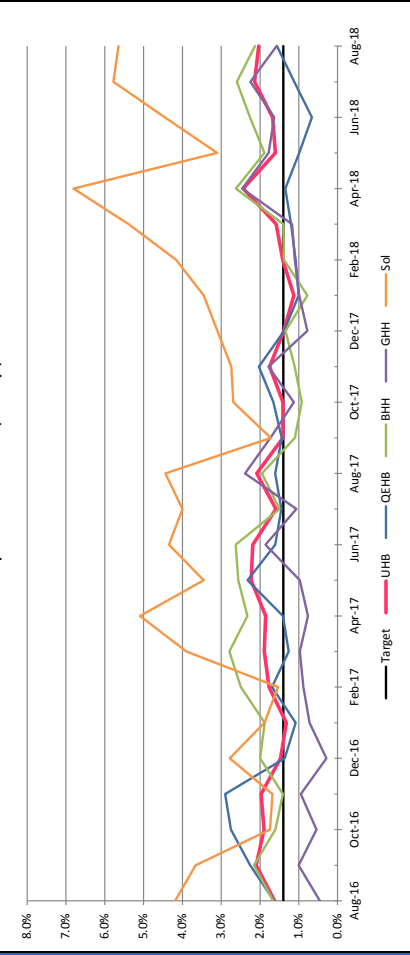
- Nationally waiting list has grown to 8.1% above baseline and is now 4.15m.



Delayed Transfers of Care (NHS & Joint)

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)													
	Latest Period:											YTD	
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul		Aug
OEHB	1.4%	1.7%	2.0%	1.4%	1.0%	1.1%	1.2%	1.3%	1.0%	0.7%	1.1%	1.6%	1.1%
BHH	1.1%	0.9%	1.1%	1.3%	0.8%	1.4%	1.4%	2.6%	1.9%	2.3%	2.6%	2.1%	2.3%
GHH	1.7%	1.1%	1.8%	0.8%	1.0%	1.1%	1.2%	2.5%	1.8%	1.6%	2.3%	1.6%	1.9%
Solihull	1.7%	2.7%	2.7%	3.1%	3.5%	4.2%	5.4%	6.8%	3.1%	4.5%	5.8%	5.6%	5.1%
UHB	1.4%	1.4%	1.8%	1.4%	1.1%	1.4%	1.6%	2.4%	1.6%	1.7%	2.1%	2.0%	2.0%

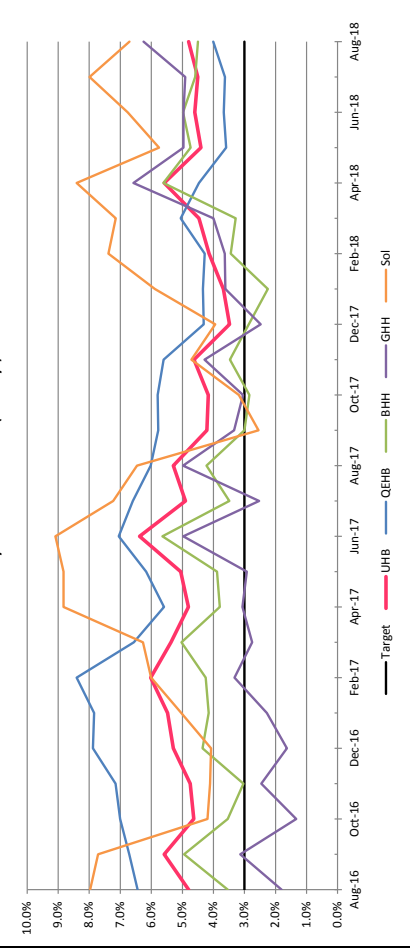
Delayed Transfers of Care (Bed Days)



Delayed Transfers of Care (All)

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)												
	Latest Period:											YTD
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	
OEHB	5.8%	5.8%	5.6%	4.3%	4.3%	4.3%	5.1%	4.5%	3.6%	3.7%	3.6%	4.0%
BHH	3.0%	2.8%	3.5%	2.9%	2.2%	3.4%	3.3%	5.6%	4.7%	5.0%	4.6%	4.9%
GHH	3.3%	3.0%	4.3%	2.5%	3.6%	3.6%	4.0%	6.6%	5.0%	5.0%	4.9%	6.2%
Solihull	2.5%	3.2%	4.7%	3.9%	5.9%	7.4%	7.1%	8.4%	5.8%	6.8%	8.0%	6.7%
UHB	4.2%	4.2%	4.6%	3.5%	3.7%	4.1%	4.5%	5.6%	4.4%	4.6%	4.5%	4.8%

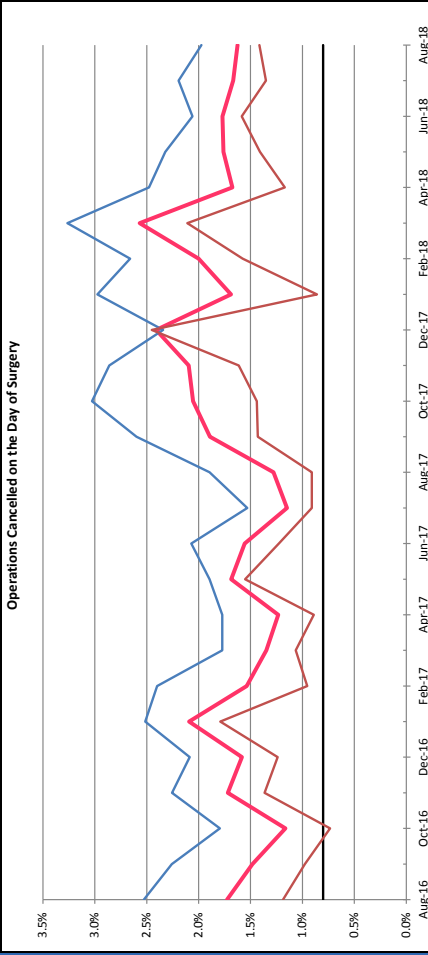
Delayed Transfers of Care (Bed Days)



- In August the percentage of NHS & Joint patients whose transfer was delayed fell to 2.0%.
- Social care performance however deteriorated so total percentage delay increased to 4.8%.
- Continued issues with Continuing Healthcare affecting QEHB are being addressed with commissioners.
- Increase in social care delays at Good Hope was caused by lack of assessment capacity from both Birmingham City Council and South Staffordshire District Council over holiday period.

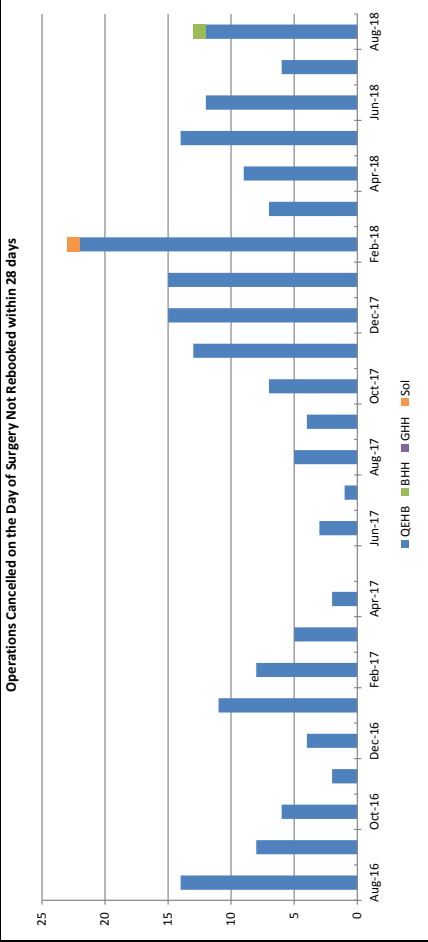
Operations Cancelled on the Day of Surgery

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)													Latest Period:		Target:		
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD				
QEHB	2.6%	3.0%	2.9%	2.3%	3.0%	2.7%	3.3%	2.5%	2.3%	2.1%	2.2%	2.0%	2.2%				
HGS	1.4%	1.4%	1.6%	2.5%	0.9%	1.6%	2.1%	1.2%	1.4%	1.6%	1.4%	1.4%	1.4%				
UHB	1.9%	2.1%	2.1%	2.4%	1.7%	2.0%	2.6%	1.7%	1.8%	1.8%	1.7%	1.6%	1.7%				



Cancelled Operations Not Rebooked Within 28 days

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)													Latest Period:		Target:		
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD				
QEHB	4	7	13	15	15	22	7	9	14	12	6	12	53				
BHH	0	0	0	0	0	0	0	0	0	0	0	0	0				
GHH	0	0	0	0	0	0	0	0	0	0	0	0	0				
Sol	0	0	0	0	0	1	0	0	0	0	0	0	0				
UHB	4	7	13	15	15	23	7	9	14	12	6	13	53				

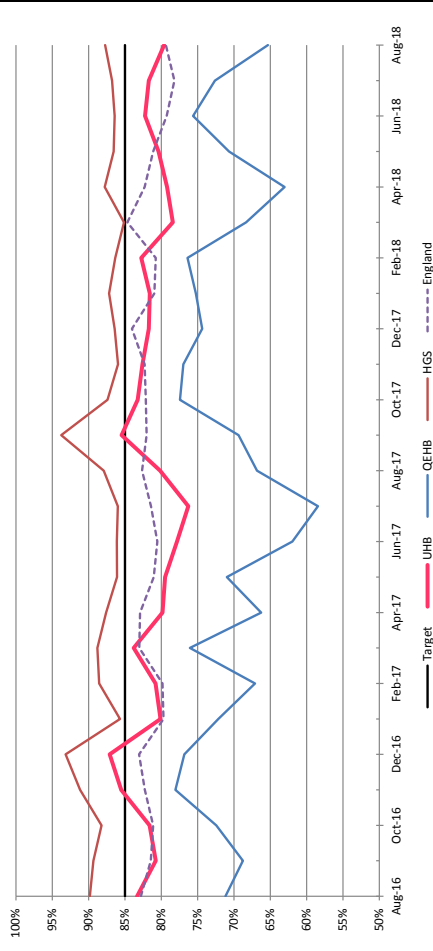


- There were 106 operations cancelled on the day of surgery at QEHB and 125 at HGS in August.
- There were 12 breaches of the 28 day guarantee at QEHB (of which 5 were Liver Surgery) and 1 at Heartlands.
- Breach at Heartlands was a complex patient requiring the involvement of multiple teams.
- Revised escalation process for escalation of 28 day breaches at QEHB from mid-September.

Cancer - 62 Day GP Referrals

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)	Single Oversight Framework												Target:	
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug		YTD
QEHB	69.4%	77.4%	77.0%	74.4%	75.2%	76.4%	68.3%	63.0%	70.7%	75.6%	72.6%	65.3%	70.0%	79.6%
HGS	93.8%	87.4%	85.9%	86.4%	87.2%	86.3%	85.1%	87.8%	86.5%	86.4%	86.8%	87.7%	87.0%	80.7%
UHB	85.5%	83.2%	82.6%	81.7%	81.6%	82.8%	78.4%	79.2%	80.4%	82.2%	81.7%	79.6%	80.7%	80.7%

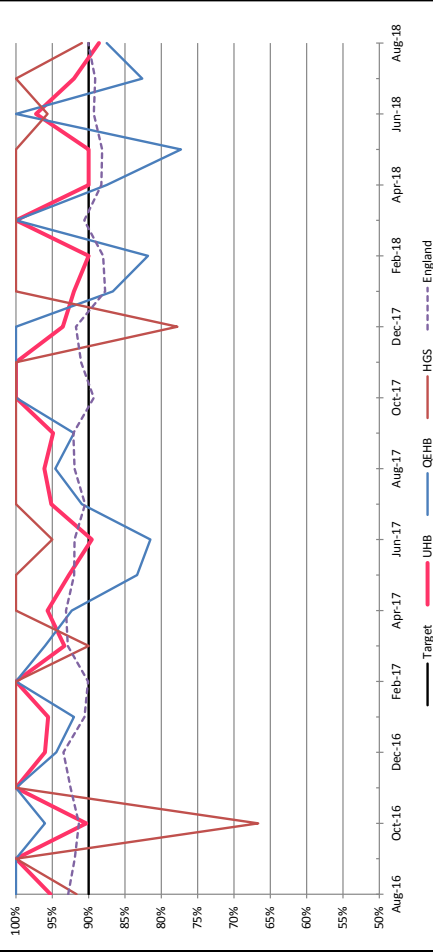
Cancer - 62 Day GP Referral Performance



Cancer - 62 Day Screening

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)	Single Oversight Framework												Target:
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	
QEHB	92.0%	100%	100%	100%	86.7%	81.8%	100%	87.5%	77.3%	100%	82.6%	87.5%	85.7%
HGS	100%	100%	100%	100%	100%	100%	100%	100%	100%	95.7%	100%	90.9%	97.8%
UHB	94.9%	100%	100%	93.5%	92.0%	90.0%	100%	90.0%	90.0%	97.2%	92.0%	88.6%	91.6%

Cancer - 62 Day Screening Performance



- Trust performance for GP referrals fell 2.1pp to 79.6%.
- HGS improved by 0.9pp to 87.7% whilst QEHB fell 7.3pp to 65.3%.
- QEHB has seen increase in referrals, particularly in Urology for named consultants for whom patients will wait which has affected 62 day and 31 day performance.
- Screening performance for the Trust fell 3.6pp to 88.6%. QEHB was half a breach below target.

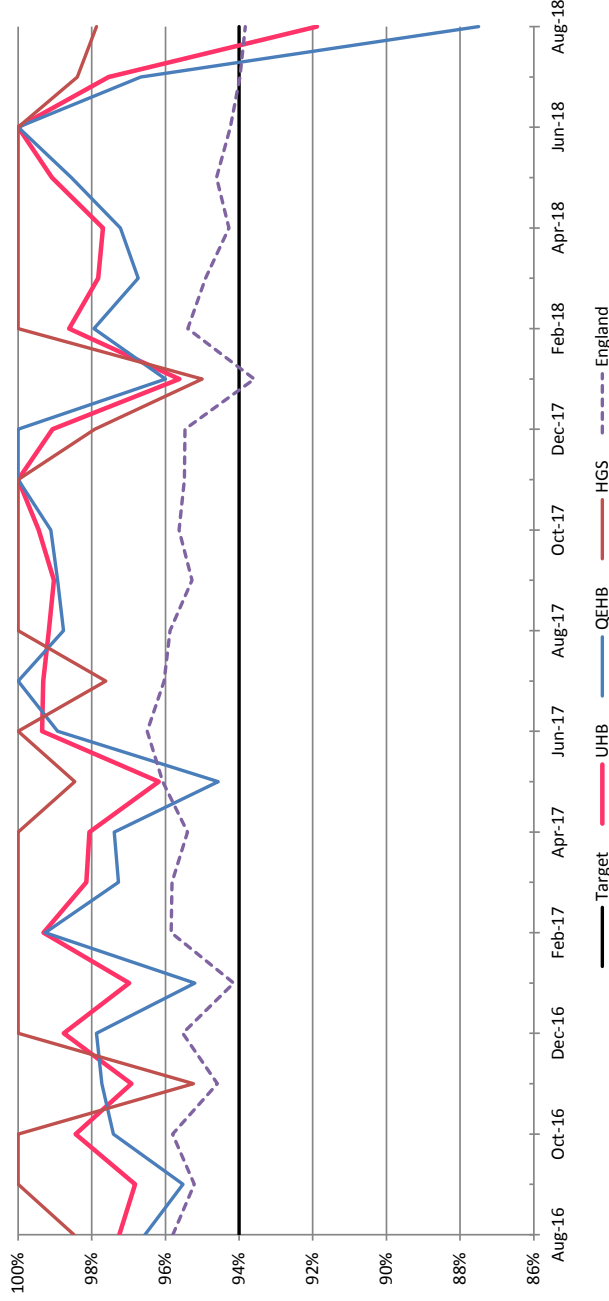
Cancer - 31 Day Subsequent Treatment (Surgery)

Latest Period: **91.9%**

Target: 94%

	Cancer Access												
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD
QEHB	98.9%	99.1%	100%	100%	96.0%	97.9%	96.7%	97.2%	98.6%	100%	96.7%	87.5%	96.2%
HGS	100%	100%	100%	97.9%	95.0%	100%	100%	100%	100%	100%	98.4%	97.9%	99.1%
UHB	99.0%	99.4%	100%	99.1%	95.6%	98.6%	97.8%	97.7%	99.1%	100%	97.5%	91.9%	97.3%

Cancer - 31 day Subsequent Treatment (Surgery) Performance

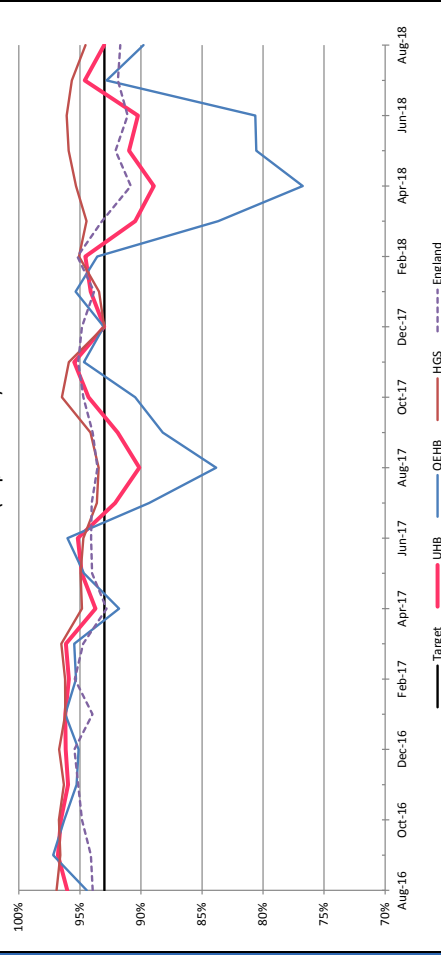


- Subsequent surgery performance for QEHB fell 9.2pp to 87.5%.
- The Trust's overall performance therefore fell 5.6pp to 91.9%.

Cancer - 2 Week Wait (Suspected Cancer)

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)	Cancer Access												Latest Period:	93.0%	
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD	Target:	93%
QEHB	88.2%	90.5%	94.7%	93.0%	95.4%	93.6%	83.7%	76.7%	80.6%	80.6%	92.8%	89.8%	84.3%		
HGS	94.1%	96.5%	95.9%	93.0%	93.4%	95.1%	94.5%	95.3%	95.9%	96.1%	95.7%	94.5%	95.5%		
UHB	91.9%	94.3%	95.5%	93.0%	94.1%	94.6%	90.5%	89.0%	91.0%	90.2%	94.6%	93.0%	91.6%		

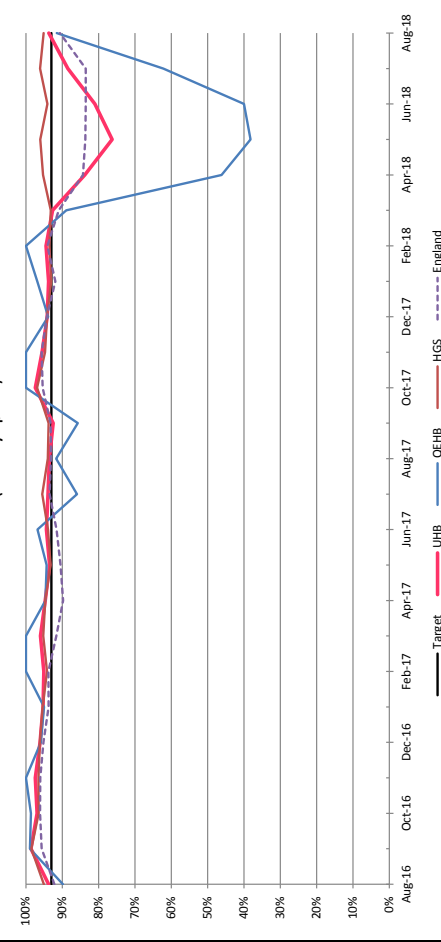
Cancer - 2 Week Wait (Suspected Cancer) Performance



Cancer - 2 Week Wait (Breast Symptoms)

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)	Cancer Access												Latest Period:	93.7%	
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD	Target:	93%
QEHB	85.7%	100%	100%	93.9%	96.9%	100%	88.9%	46.2%	38.2%	40.0%	62.2%	91.5%	57.6%		
HGS	93.7%	96.9%	94.8%	94.2%	93.1%	93.6%	93.1%	95.3%	96.0%	94.1%	96.1%	95.1%	95.3%		
UHB	92.5%	97.4%	95.6%	94.2%	93.8%	94.5%	92.7%	83.8%	76.2%	81.0%	88.4%	93.7%	84.4%		

Cancer - 2 Week Wait (Breast Symptoms) Performance



- The Trust achieved both two week wait targets for the first time since February 2018.
- Suspected cancer performance fell by 1.6pp to 93.0%.
- QEHB performance for suspected cancer fell due to increased referrals that it was not possible to see in time.
- Breast symptom performance increased by 5.3pp to 93.7%.
- QEHB breast symptom performance increased significantly following appointment of a locum breast radiologist.

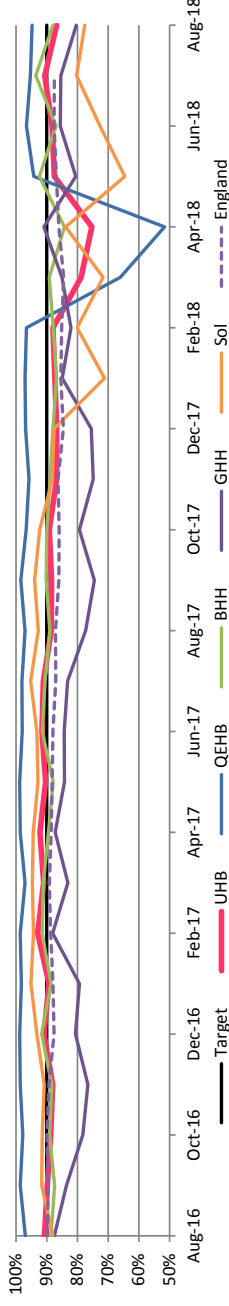
Dementia Finding, Assessment and Referral

Responsible Director: Interim Medical Director

Single Oversight Framework

	Latest Period:												YTD
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	
QEHB - Find	98.4%	96.6%	95.7%	96.8%	97.0%	96.6%	66.0%	51.6%	94.2%	96.6%	95.3%	94.7%	86.3%
BHH - Find	90.1%	90.0%	88.9%	88.0%	86.8%	87.8%	89.1%	84.2%	92.4%	86.9%	93.6%	88.0%	89.0%
GHH - Find	74.5%	79.3%	74.8%	75.5%	84.9%	82.0%	85.0%	90.9%	80.5%	85.5%	85.4%	80.3%	84.6%
Solihull - Find	94.0%	92.3%	88.1%	87.6%	71.2%	80.1%	71.6%	83.8%	64.5%	72.6%	80.2%	77.6%	76.5%
UHB - Find	88.4%	89.1%	86.7%	86.8%	87.3%	88.0%	78.8%	75.3%	87.5%	88.3%	90.6%	86.7%	85.6%
QEHB - Assess	100%	100%	100%	97.6%	100%	100%	95.0%	100%	100%	97.4%	97.1%	100%	98.8%
BHH - Assess	100%	100%	92.6%	96.4%	78.3%	87.1%	69.2%	100%	86.4%	95.2%	88.5%	78.6%	89.6%
GHH - Assess	100%	88.9%	100%	100%	100%	95.0%	100%	96.2%	100%	88.5%	96.0%	100%	95.7%
Sol - Assess	100%	66.7%	77.8%	64.3%	83.3%	100%	90.0%	80.0%	62.5%	90.9%	100%	100%	83.8%
UHB - Assess	100%	93.0%	94.9%	94.0%	92.9%	95.2%	88.8%	96.4%	92.8%	93.8%	94.4%	93.0%	94.1%
QEHB - Refer	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
BHH - Refer	100%	100%	100%	100%	100%	100%	-	100%	-	-	100%	100%	100%
GHH - Refer	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Sol - Refer	100%	-	100%	100%	100%	100%	100%	-	-	100%	100%	100%	100%
UHB - Refer	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Dementia Finding Performance



- Performance for the “Find” element was below target at 86.7%.
- All four sites saw a fall and QEHB was the only one to be above target.
- Heartlands fell by 5.6pp, and Good Hope by 5.1pp.
- Solihull was the lowest performing site falling 2.6pp to 77.6%.

Flu Vaccinations as at 14 October

QEHB - Frontline Staff by Staff Group

Group	Number of Frontline Staff	Number of Staff Vaccinated	%
Doctors/Dentists	1237	553	44.7%
Qualified Nurse	2457	1071	43.6%
Additional Clinical Services	3822	626	16.4%
Allied Health Professionals	506	397	78.5%
Health Care Scientist	403	112	27.8%
QEHB	7148	2759	38.6%

HGS - Frontline Staff by Staff Group

Group	Number of Frontline Staff	Number of Staff Vaccinated	%
Doctors	1020	359	35.2%
Nursing & Midwifery	3224	781	24.2%
Clinical Support	2785	880	31.6%
Professionally Qualified	1268	351	27.7%
Other/Unknown		103	
HGS	8297	2474	29.8%

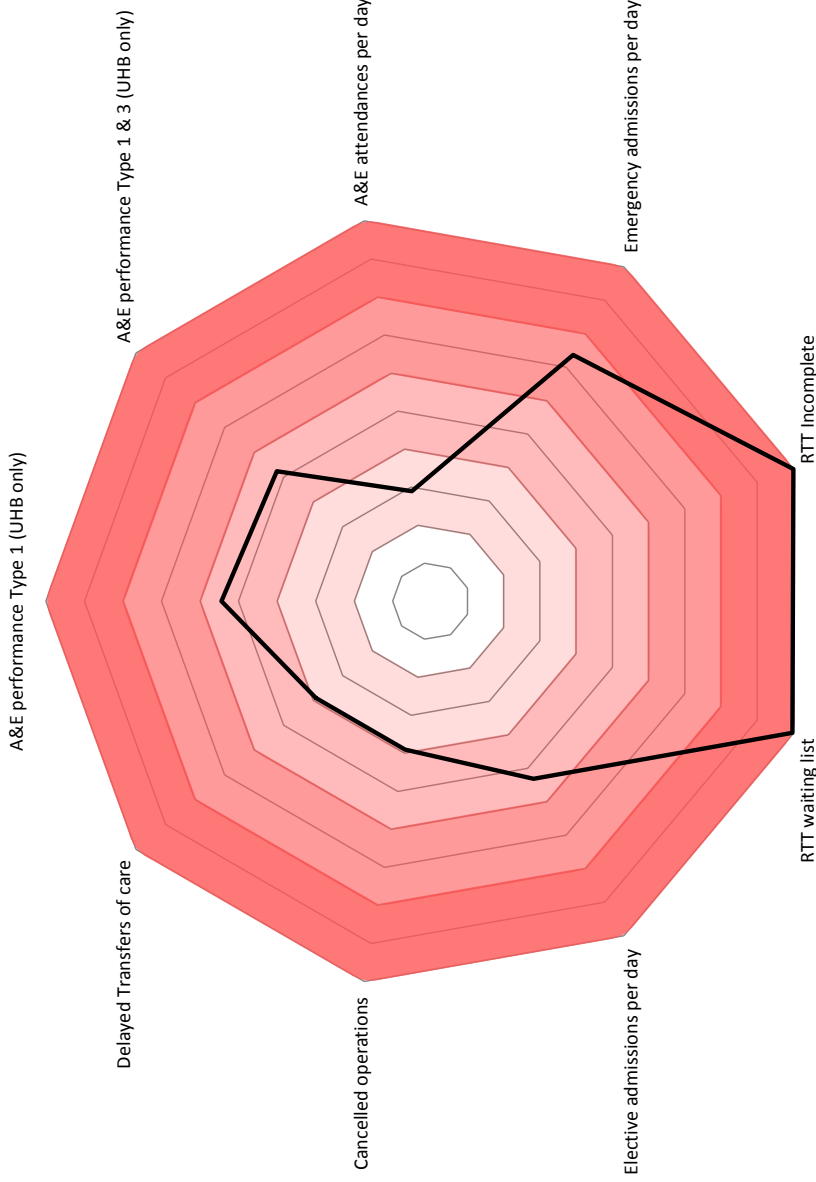
QEHB - Nursing Staff Only by Division

Division	Number of Nurses & Midwives	Number of Staff Vaccinated	%
A	1174	368	31.3%
B	565	272	48.1%
C	791	274	34.6%
D	528	279	52.8%
QEHB	3058	1193	39.0%

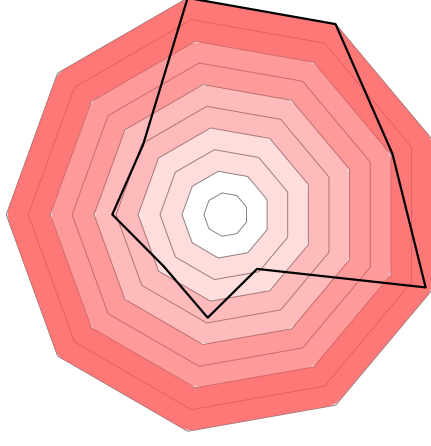
HGS - Nursing and Midwifery Staff Only by Division

Division	Number of Nurses & Midwives	Number of Staff Vaccinated	%
1	495	97	19.6%
2	741	122	16.5%
3	861	224	26.0%
4	600	141	23.5%
5	415	94	22.7%
Other/Unknown	112	103	
HGS	3224	781	24.2%

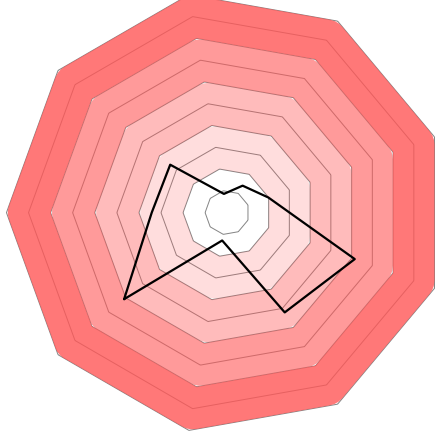
Pressure Chart - August 2018



Pressure Chart - July 2018



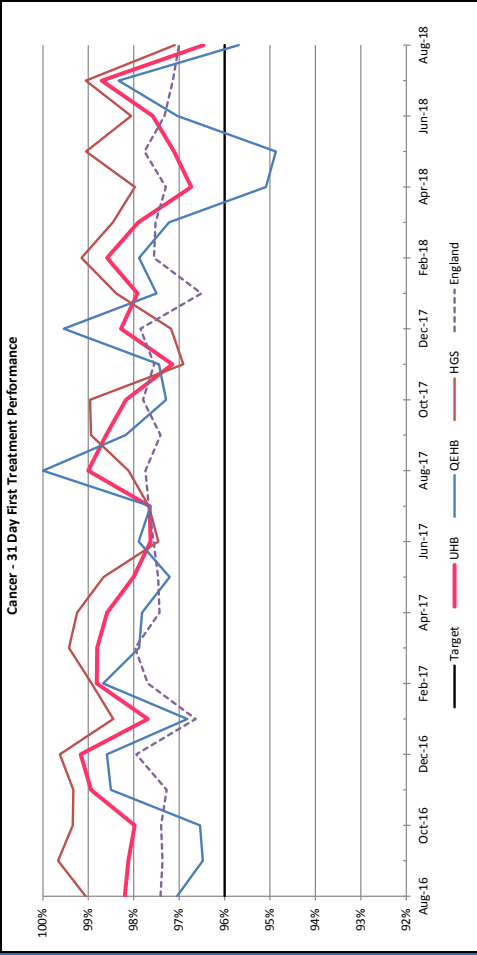
Pressure Chart - August 2017



Other targets and indicators for information

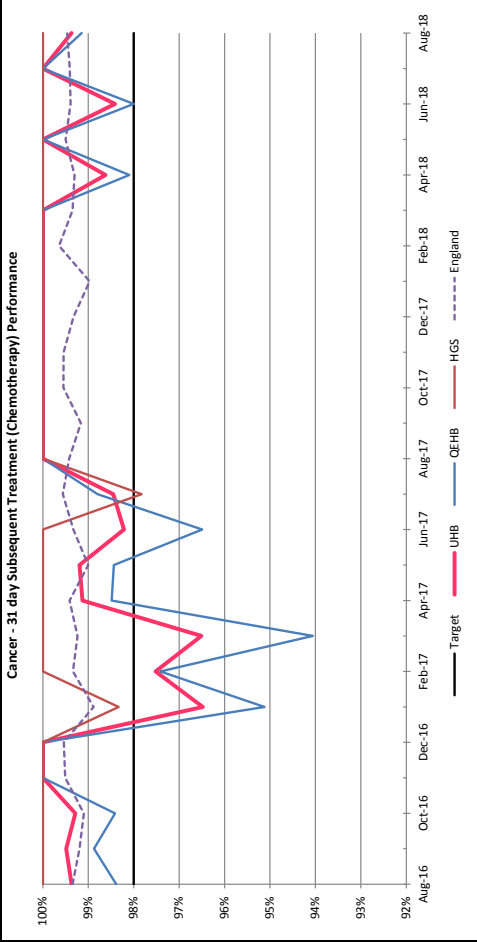
Cancer - 31 Day First Treatment

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)		Cancer Access												Latest Period:	96.5%	
		Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD	Target:	96%
QEHB		98.2%	97.3%	97.4%	99.5%	97.5%	97.9%	97.2%	95.1%	94.9%	97.0%	98.3%	95.7%	96.3%		
HGS		98.9%	99.0%	96.9%	97.2%	98.4%	99.2%	98.5%	98.0%	99.1%	98.1%	99.1%	97.1%	98.3%		
UHB		98.6%	98.2%	97.1%	98.3%	97.9%	98.6%	97.9%	96.7%	97.1%	97.6%	98.7%	96.5%	97.4%		



Cancer - 31 Day Subsequent Treatment (Chemotherapy)

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)		Cancer Access												Latest Period:	99.4%	
		Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD	Target:	98%
QEHB		100%	100%	100%	100%	100%	100%	100%	98.1%	100%	98.0%	100%	99.1%	99.1%		
HGS		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
UHB		100%	100%	100%	100%	100%	100%	100%	98.6%	100%	98.4%	100%	99.4%	99.3%		



- 31 day first treatment target fell by 2.2pp to 96.5%.
- QEHB first treatment performance was below target at 95.7%.
- 31 day subsequent chemotherapy performance was 99.4%.



- 31 day subsequent radiotherapy performance fell 2.0pp to 95.7%.

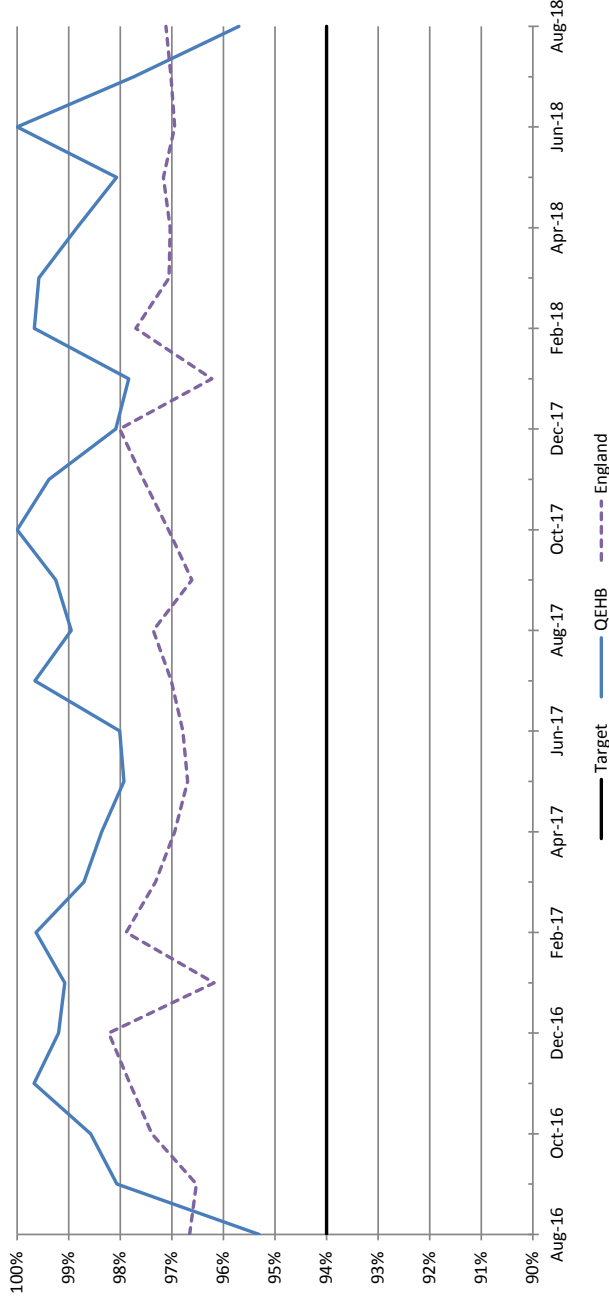
Cancer - 31 Day Subsequent Treatment (Radiotherapy)

Latest Period: **95.7%**

94%

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)	Cancer Access												Target:
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	
QEHB	99.3%	100%	99.4%	98.1%	97.8%	99.7%	99.6%	98.8%	98.1%	100%	97.7%	95.7%	98.1%
HGS	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
UHB	99.3%	100%	99.4%	98.1%	97.8%	99.7%	99.6%	98.8%	98.1%	100%	97.7%	95.7%	98.1%

Cancer - 31 day Subsequent Treatment (Radiotherapy) Performance



6 Week Diagnostics

Latest Period: **99.6%**

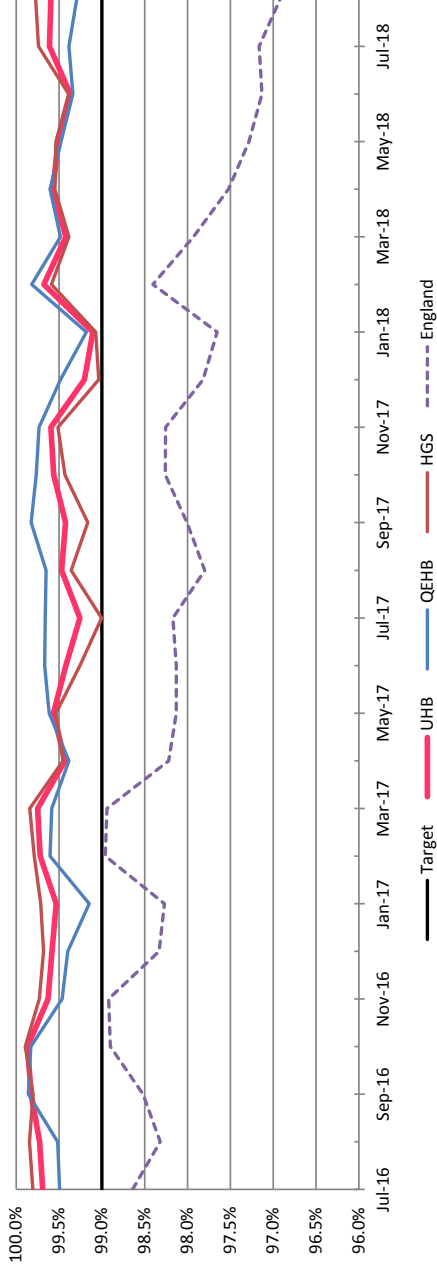
Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)

Single Oversight Framework

Target: **99%**

	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD
QEHB	99.8%	99.8%	99.7%	99.5%	99.2%	99.8%	99.5%	99.6%	99.5%	99.3%	99.4%	99.3%	99.4%
HGS	99.2%	99.4%	99.5%	99.0%	99.1%	99.6%	99.4%	99.5%	99.5%	99.4%	99.7%	99.8%	99.6%
UHB	99.4%	99.6%	99.6%	99.2%	99.1%	99.7%	99.4%	99.6%	99.5%	99.4%	99.6%	99.6%	99.5%

6 Week Diagnostics Performance



Latest Month's 6 Week Diagnostics Performance - Modalities Below Target Overall

	Cystoscopy	Urodynamics
QEHB	95.9%	31.5%
HGS	100.0%	95.8%
UHB	97.0%	47.4%

- Performance was static overall with 99.6% performance.
- Only one modality was below target at HGS, down from five
- At QEHB the same two modalities were below target as last month – cystoscopy and urodynamics. A business case is in development for a clinical scientist for urodynamics which would increase capacity.
- Nationally performance continued to fall to 96.9%.

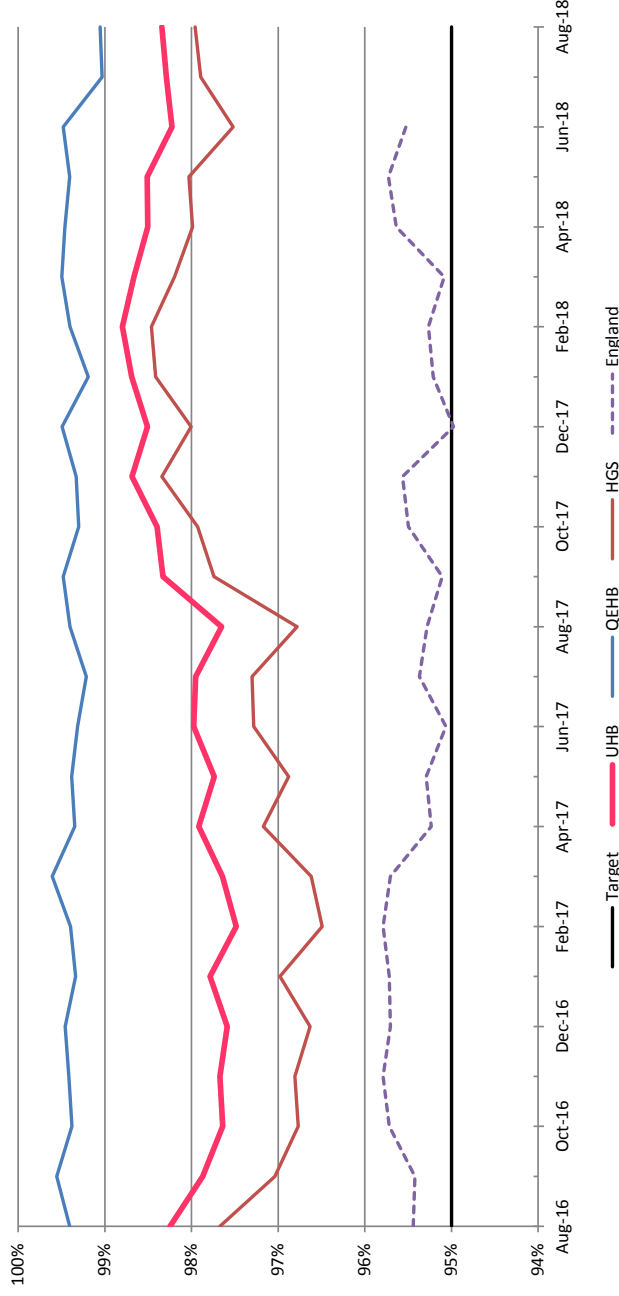
VTE Screening

Latest Period: **98.3%**

Target: **95%**

	Clinical Quality												
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD
QEHB	99.5%	99.3%	99.3%	99.5%	99.2%	99.4%	99.5%	99.5%	99.4%	99.5%	99.0%	99.1%	99.3%
HGS	97.7%	97.9%	98.3%	98.0%	98.4%	98.5%	98.2%	98.0%	98.0%	97.5%	97.9%	98.0%	97.9%
UHB	98.3%	98.4%	98.7%	98.5%	98.7%	98.8%	98.7%	98.5%	98.5%	98.2%	98.3%	98.3%	98.4%

VTE Screening



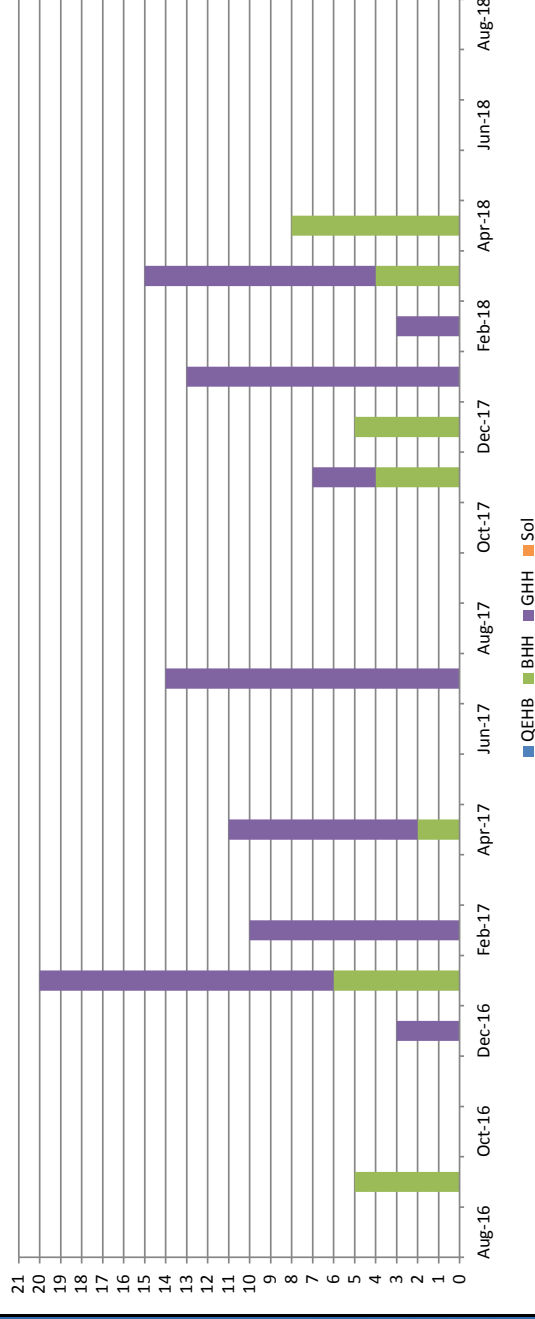
- The Trust continues to achieve the VTE screening measure with performance well above the national average.

Mixed Sex Accommodation

Responsible Director: Interim Chief Nurse

	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD
QEHB	0	0	0	0	0	0	0	0	0	0	0	0	0
BHH	0	0	4	5	0	0	4	8	0	0	0	0	8
GHH	0	0	3	0	13	3	11	0	0	0	0	0	0
Solihull	0	0	0	0	0	0	0	0	0	0	0	0	0
UHB	0	0	7	5	13	3	15	8	0	0	0	0	8

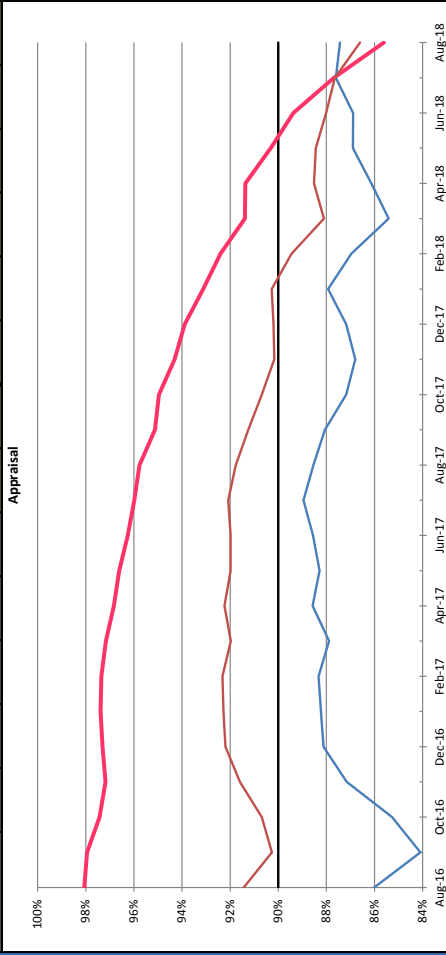
Mixed Sex Accommodation Breaches (Patients Affected)



- There were no reported breaches of mixed sex breach accommodation for the fourth consecutive month.

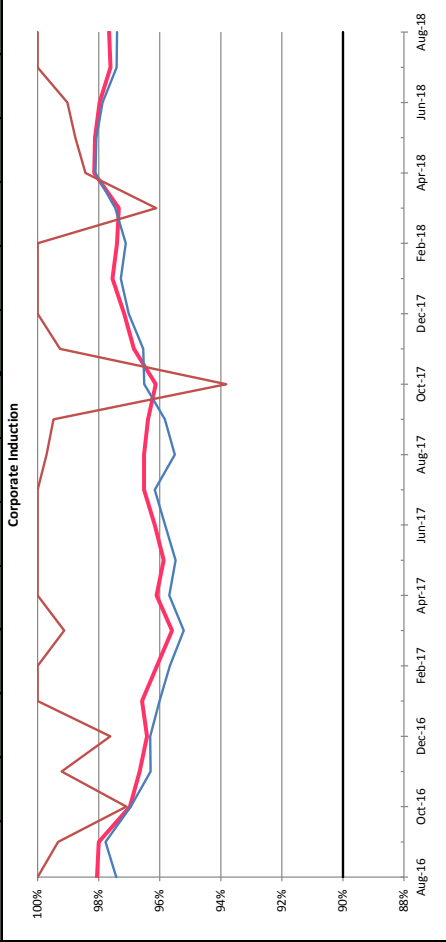
Appraisal

	Responsible Director: Executive Director of Workforce & Innovation												Latest Period:		90%	
	Workforce												Target:			
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Latest			
OEHB	95.1%	95.0%	94.3%	93.9%	93.1%	92.4%	91.4%	91.4%	90.3%	89.4%	87.7%	85.6%	85.6%			86.6%
HGS	88.1%	87.2%	86.8%	87.2%	87.9%	87.0%	85.4%	86.1%	86.9%	86.9%	87.6%	87.4%	87.4%			86.6%
UHB	91.2%	90.7%	90.2%	90.2%	90.3%	89.4%	88.1%	88.5%	88.4%	88.0%	87.6%	86.6%	86.6%			86.6%



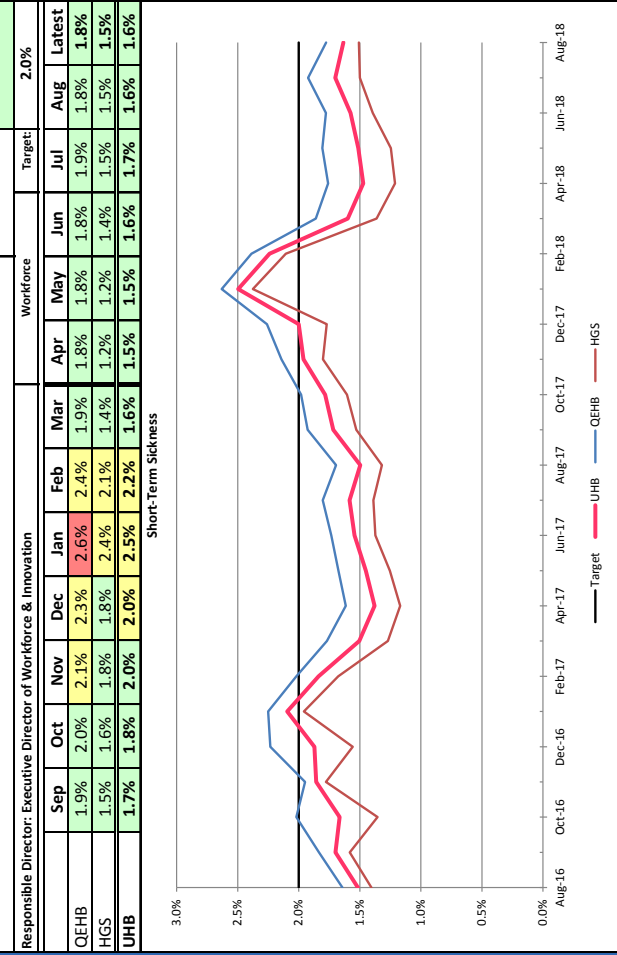
Corporate Induction

	Responsible Director: Executive Director of Workforce & Innovation												Latest Period:		90%	
	Workforce												Target:			
	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Latest			
OEHB	95.8%	96.5%	96.5%	97.0%	97.3%	97.1%	97.5%	98.1%	98.1%	97.9%	97.4%	97.4%	97.4%			97.7%
HGS	99%	94%	99%	100%	100%	100%	96%	98%	99%	99%	100%	100%	100%			97.7%
UHB	96.4%	96.1%	96.8%	97.2%	97.5%	97.4%	97.3%	98.1%	98.1%	98.0%	97.6%	97.7%	97.7%			97.7%

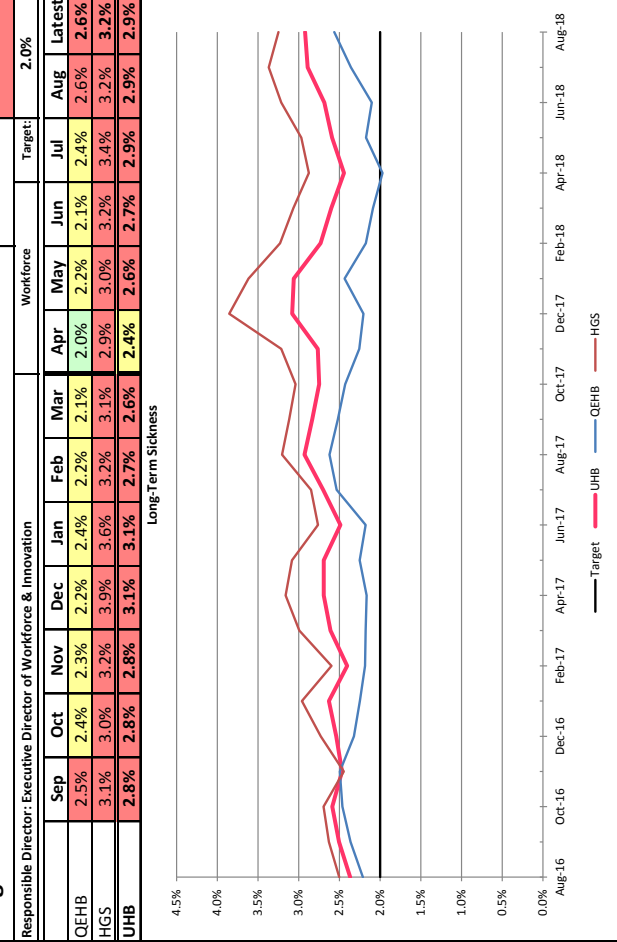


- Lag in reporting continues to affect QEHB reported performance on appraisals.
- August's completion rate of 86.6% is the same as the July figure reported last month.
- Corporate induction completion remains well above target.

Short-Term Sickness



Long-Term Sickness



- Short-term fell 0.1pp to 1.6%.
- Total long-term sickness was static at 2.9%. QEHB increased by 0.2pp to 2.6% whilst HGS fell 0.2pp to 3.2%.
- A factor is the definition of long term sickness which is greater than 21 days at HGS and 28 days at QEHB. A consultation on an aligned policy is underway.