

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**  
**COUNCIL OF GOVERNORS**  
**THURSDAY 28 NOVEMBER 2019**

|                              |  |
|------------------------------|--|
| <b>Title:</b>                | <b>PERFORMANCE REPORT AND 2019/20 ANNUAL PLAN QUARTER 2 UPDATE</b>   |
| <b>Responsible Director:</b> | Lawrence Tallon, Director of Strategy, Planning & Performance  |
| <b>Contact:</b>              | Andy Walker, Head of Strategy & Planning, Ext 13685<br>Phillippa Hentsch, Head of Strategy & Analysis, Ext 14321 |

|  |   |
|--|---|
| <b>Purpose:</b>                            | To update the Council of Governors on the Trust's performance against performance targets and to provide a Quarter 2 update on the 2019/20 Annual Plan.   |
| <b>Confidentiality Level &amp; Reason:</b> | None  |
| <b>Strategy Implementation Plan Ref:</b>   | #4 Meet regulatory requirements and operational performance standards, in line with agreed trajectories   |
| <b>Key Issues Summary:</b>                 | <ul style="list-style-type: none"> <li>• The Trust's A&amp;E performance fell by 2.7pp with recorded attendances high in September. A pattern seen elsewhere locally and nationally.</li> <li>• RTT performance deteriorated in month and the waiting list size grew.</li> <li>• Performance of the 2 week wait suspected cancer and breast symptoms improved significantly and both were above the trajectory.</li> <li>• The 62 day cancer GP and screening deteriorated in month. Both the 31 day first treatment and subsequent surgery deteriorated and were below the trajectory.</li> <li>• Further details and actions taken in response to the exceptions identified are included in the report</li> <li>• The paper covers the second quarterly review of the 2019/20 strategy implementation plan, covering the period July-September 2019.</li> </ul> |
| <b>Recommendations:</b>                    | The Council of Governors is requested to:<br><b>Accept</b> the report on progress made towards achieving performance targets and associated risks and mitigating actions.<br><b>Accept</b> the Quarter 2 2019/20 performance update against the Trust's Annual Plan.  |

|                     |                 |                        |
|---------------------|-----------------|------------------------|
| <b>Approved by:</b> | Lawrence Tallon | Date: 19 November 2019 |
|---------------------|-----------------|------------------------|

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**  
**COUNCIL OF GOVERNORS**  
**THURSDAY 28 NOVEMBER 2019**

**PERFORMANCE REPORT AND**  
**2019/20 ANNUAL PLAN QUARTER 2 UPDATE**  
**PRESENTED BY THE DIRECTOR OF STRATEGY, PLANNING &**  
**PERFORMANCE**

**1. Purpose**

This paper summarises:

- The Trust's performance for Quarter 2 2019/20 against national targets, including those in the NHS Oversight Framework. Where RAG ratings are given in the Appendix, 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 and Appendix 1 along with other targets and indicators. The report includes performance against the trajectories agreed with NHS Improvement.
- The Second quarterly update covering the period July – September to the Board against the 2019/20 implementation plan.

**2. Performance Report**

The following areas have been identified as material exceptions:

**2.1 A&E 4 Hour Waits**

Internal Trust performance<sup>1</sup> deteriorated by 2.7pp to 67.5% in September, with overall daily attendances 4.6% higher than the previous month. Performance in July and August was 69.7% and 70.2%, respectively. The performance in September was below the submitted trajectory of 83.7%. 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 fell by 1.9pp to 80.3% in September.

All sites had deterioration in performance due to sustained pressure, with daily attendances 19% higher on the 23 of September compared to that month's overall average. High levels of attendances were seen elsewhere locally and nationally too.

---

<sup>1</sup> 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.

QEHB performance fell to 62.1% with attendances 1.6pp higher than the previous month. Heartlands attendances increased by 6.9pp with performance deteriorating by 4.1pp to 64.8%. Good Hope performance fell to 65.5% with an increase in daily attendances of 5.4%.

| Site       | Daily Attendances Sep 2018 | Daily Attendances Aug 2019 | Daily Attendances Sep 2019 | Change Sep 2018 to Sep 2019 | Change Aug 2019 to Sep 2019 |
|------------|----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------|
| QEHB       | 341.9                      | 346.7                      | 352.1                      | 3.0%                        | 1.6%                        |
| Heartlands | 404.6                      | 399.5                      | 427.0                      | 5.5%                        | 6.9%                        |
| Good Hope  | 250.7                      | 250.2                      | 263.7                      | 5.2%                        | 5.4%                        |
| Solihull   | 116.4                      | 114.0                      | 118.2                      | 1.5%                        | 3.6%                        |
| <b>UHB</b> | <b>1113.5</b>              | <b>1110.4</b>              | <b>1161.0</b>              | <b>4.3%</b>                 | <b>4.6%</b>                 |

## 2.2 RTT 18 Week Incomplete Pathways, 52 Week Waits and Waiting List

In September, overall performance for 18 week incomplete pathways deteriorated to 83.6%. Performance in July and August was 85.2% and 84.1%, respectively. Quarter 2 performance was below the trajectory and national standard. The difference to planned performance is partly due to tax and pensions issues currently being experienced not only in this organisation but across the country.

Neurology and Neurosurgery performance continue to deteriorate with long waits a risk in the organisation. Additional sessions have been planned with an extra 112 clinic slots available for Neurology in November. Solutions for Neurosurgery are more challenging with alternative community pathways and redirection part of the key immediate initiatives. However, performance is forecasted to improve in October and November based on historical trends and the latest data available.

The waiting list size grew by 1,165 in month. The overall waiting size at the end of September was 91,080. The Trust is now required to reduce the total waiting list size by 4,387 patients to meet the planning guidance target.

## 2.3 Delayed Transfers of Care

The percentage of NHS and joint patients who were delayed deteriorated to 2.8% in September. However, the overall total percentage delay remained static at 5.2%. QEHB and Good Hope were the only sites with an improved overall position in September. July and August overall performance was 4.5% and 5.2%, respectively.

QEHB and Good Hope performance improved by 0.5pp to 4.1% and by 0.6pp to 5.6%, respectively. QEHB had a reduction in patients waiting for Continuing Healthcare (CHC) assessment and funding, compared to the previous month. The improved performance at Good Hope was mainly due to a 66% reduction in delays from South Staffordshire social services.

Solihull performance deteriorated by 1.9pp to 7.8% in September. The site had an increase in patients waiting for social work assessments

and allocations from Birmingham City Council. There was also an increase of 240% in those waiting for packages of care.

Overall, the increased number of referrals received in August continued to impact upon the assessment and discharge process in September. Work continues on reducing DTOC through collaborative projects with CCG and local authority colleagues.

## 2.4 Cancer Targets

Performance for the Cancer 62 day GP referral and screening targets deteriorated by 1.8pp to 59.3% and by 18.0pp to 73.7%, respectively in September. Performance for the GP referral in July and August was 63.0% and 61.1%, respectively. July and August performance for screening was 74.6% and 91.7%, respectively. The number of screening patients treated in September remained low at 19 and as a result there is a marginal breach tolerance for achieving the standard. Performance for the 31 day first treatment and subsequent surgery were both below the trajectory and national standard in Quarter 2.

The 2 week wait suspected cancer and breast symptoms were both above the monthly trajectories with performance of 87.3% and 75.1% in September. Suspected cancer performance in July and August was 83.1% and 80.3%, respectively. Breast symptoms performance was above trajectory during the quarter with July and August performance of 38.6% and 69.7%, respectively. The improved performance reflects the effort in tackling the outstanding backlog. Also additional outpatient activity is being provided with colorectal 'straight-to-test' pathway commencing in November at QEHB.

Radiology consultant capacity constraints remain on the service. Capacity continues to be added through the use of agency locums with existing capacity prioritised for the highest risk patients. Daily monitoring is in place to ensure all available capacity is utilised and clinics are also being overbooked to further accommodate the longest waiting patients.

## 3. **2019/20 Implementation Plan Quarter 2 Update**

We continue to monitor and analyse national policy trends and publications which have an impact on the trust's strategy and implementation plan.

Since the approval of the 2019/20 implementation plan, there have been a number of trust developments that are pertinent to the Trust's future strategy and plan, which are carried over from quarter 1.

- Estates and capital infrastructure (objective 9): there have been substantial delays in securing national capital funding for ACAD. In August 2019, we received confirmation that ACAD would now be funded but NHSE and the Treasury want to complete a Full Business Case review process before the contract to commence building works can be signed and before funds are released.

- Digital healthcare (objective 5): a new strategic collaboration with Babylon Health has been developed to take forward substantial elements of our Digital First programme. Since quarter 1, the Board has agreed the contractual terms for the collaboration.
- IT and clinical information systems (objective 6): there have been further delays to the implementation timetable for key clinical information systems to be implemented at the Heartlands, Good Hope and Solihull sites.

Further detail is included in table 1.

**Table 1: significant changes to the 19/20 plan**

| Reference  | Q1 Update   | Q2 Update   |
|--|---|---|
| Estates and Capital Infrastructure<br>(Objective 9)    | <b>ACAD and capital funding</b> <ul style="list-style-type: none"> <li>• £3.5m capital funding has been allocated to Heartlands Good Hope and Solihull Hospitals for schemes below £100k.</li> <li>• No capital had been allocated to Estates projects over £100k at any site.</li> </ul>   | <ul style="list-style-type: none"> <li>• Capital funding for ACAD announced in August 2019.</li> <li>• Further evaluation to be undertaken by NHSE and the Treasury before funds are released.</li> </ul>   |
| Digital Healthcare and transformation<br>(Objective 5) | <b>Babylon</b> <ul style="list-style-type: none"> <li>• In May 2019, the Board approved in principle a new strategic collaboration with Babylon Health to develop improved triage and decision support tools for emergency care and develop options for outpatient transformation, including the use of video technologies.</li> <li>• Work stream leads have been identified, and a programme structure has been agreed.</li> <li>• Our first deliverable as part of the partnership will be “A&amp;E online” (working title), a symptom checker for patients to use in time for winter 2019.</li> </ul> | <ul style="list-style-type: none"> <li>• A&amp;E online (now branded as “Ask A&amp;E”) will be launched on 23 October.</li> <li>• Contractual discussions between Babylon and UHB successfully concluded.</li> </ul>  |
| IT Solutions<br>(Objective 6)                          | <b>PAS &amp; PICS</b> <ul style="list-style-type: none"> <li>• There were delays in the introduction of PAS and PICS to Heartlands, Good Hope and Solihull, pushing back to November 2019 and February 2020 respectively.</li> </ul>  | <ul style="list-style-type: none"> <li>• Master Patient Index consolidation ongoing, linking 50,000 patient records.</li> <li>• A “Business Change Road Show” will commence at the end of October 2019 to engage staff in the key changes they will expect to see with the introduction of PAS and PICS at Heartlands, Good Hope and Solihull.</li> <li>• The go-live date for PAS has now been delayed to March 2020.</li> <li>• Underpinning configuration and coding work support multi-site PICS on track.</li> <li>• PICS due to go live in April in Critical Care at BHH and GHH</li> </ul> |

## 5. Next steps

Following the launch of the organisation's multi-year strategy, the Board agreed to a refreshed planning process to support the delivery of the Trust's strategic objectives at its meeting in April 2019.

A key part of the process is to ensure that the strategy remains up to date and relevant. It is proposed that the next planning cycle is discussed at the joint meeting between the Board and the Council of Governors in December.

## 6. Recommendations

The Council of Governors is requested to:

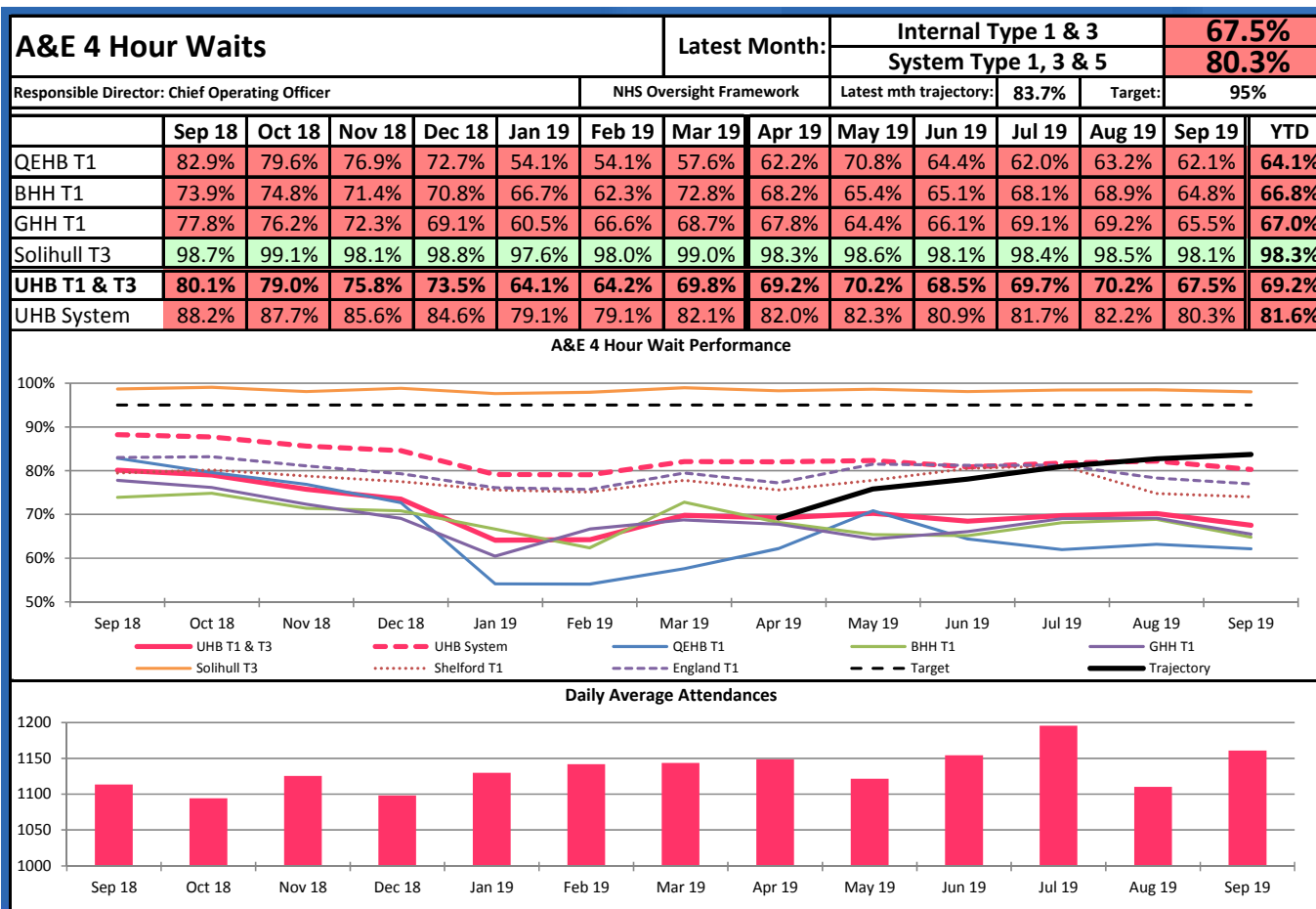
**Accept** the report on progress made towards achieving performance targets and associated risks and mitigating actions.

**Accept** the Quarter 2 2019/20 performance update against the Trust's Annual Plan.

**Lawrence Tallon**  
**Director of Strategy, Planning & Performance**

# Performance Report

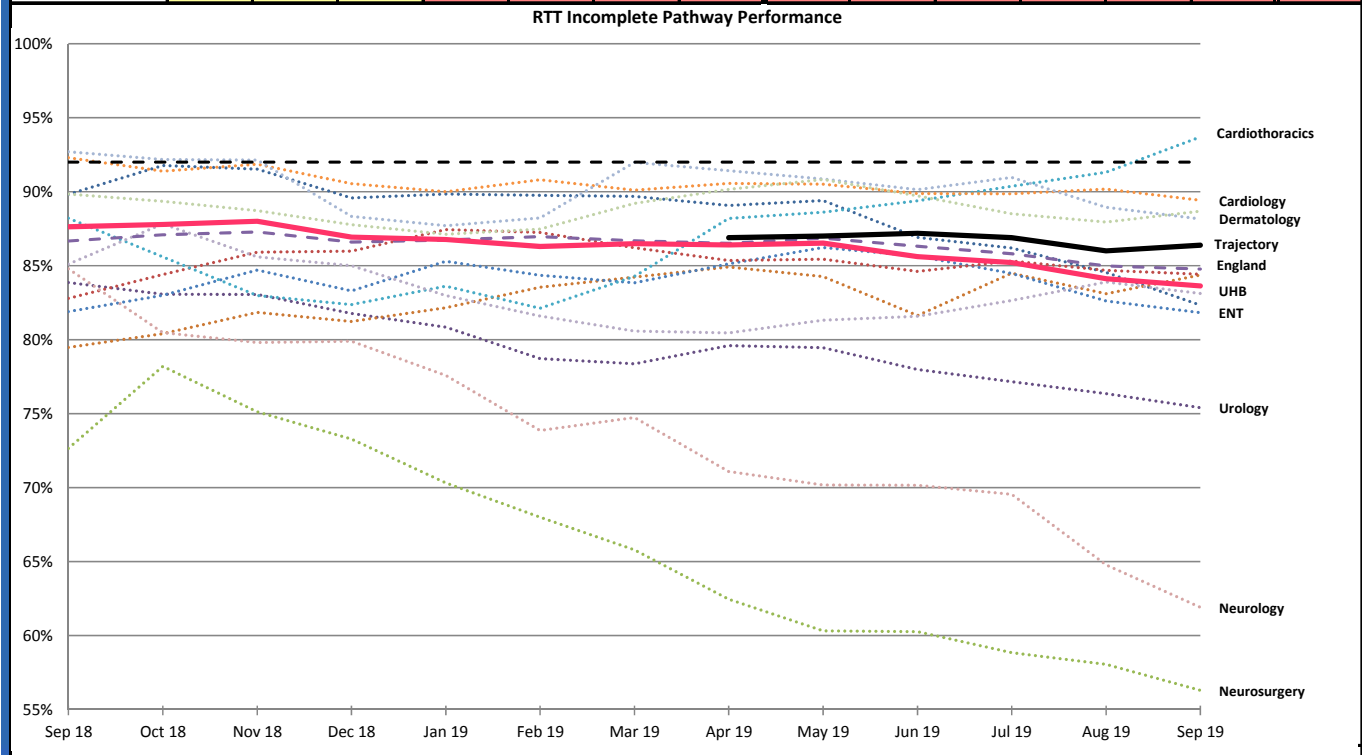
Lawrence Tallon  
Director of Strategy, Planning and  
Performance



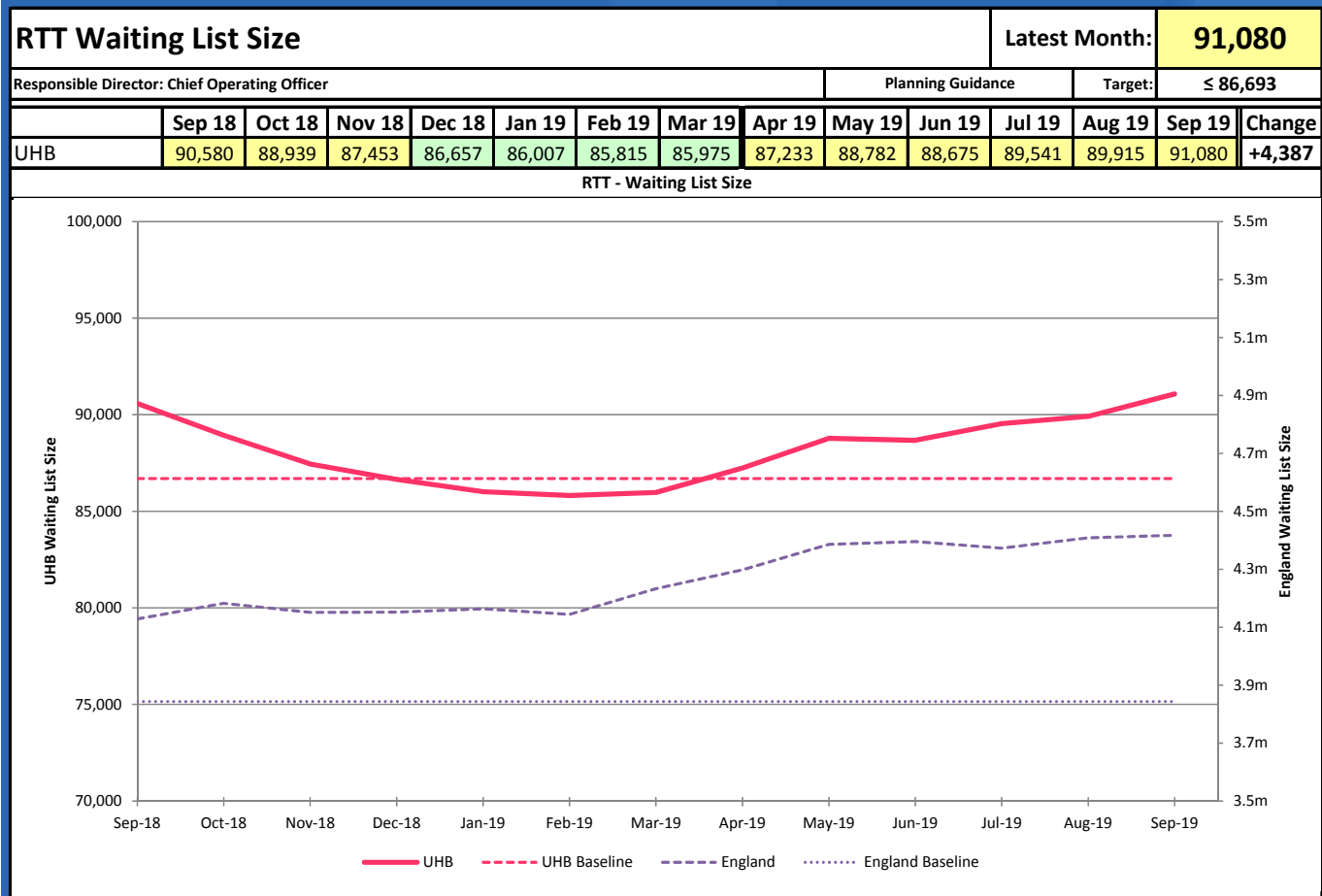
- Overall Trust performance deteriorated by 2.7pp to 67.5%.
- This was below the trajectory for the month of 83.7%.
- System performance deteriorated to 80.3%.
- Average daily attendances in September were 1,161, with particular pressure on 23<sup>rd</sup> with a record high of 1,389.
- As a result of sustained pressure, all sites had a deterioration in performance.
- Overall daily attendances in September were 4.6% higher than the previous month.
- Increased attendances seen elsewhere locally and nationally.



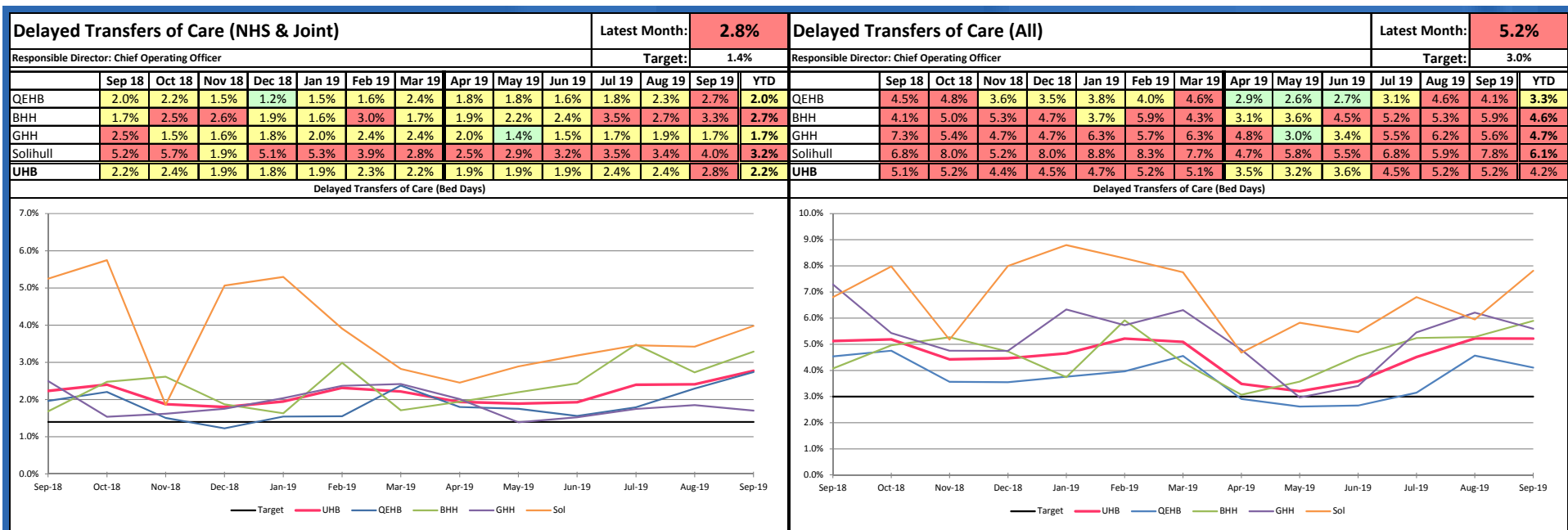
| RTT Incomplete Pathways                       |        |        |        |        |                         |        |        |                        |        |        | Latest Month: |        | 83.6%  |       |
|---|--------|--------|--------|--------|-------------------------|--------|--------|------------------------|--------|--------|---------------|--------|--------|-------|
| Responsible Director: Chief Operating Officer |        |        |        |        | NHS Oversight Framework |        |        | Latest mth trajectory: |        | 86.4%  | Target:       | 92%    |        |       |
|   | Sep 18 | Oct 18 | Nov 18 | Dec 18 | Jan 19                  | Feb 19 | Mar 19 | Apr 19                 | May 19 | Jun 19 | Jul 19        | Aug 19 | Sep 19 | YTD   |
| UHB   | 87.6%  | 87.8%  | 88.0%  | 86.9%  | 86.8%                   | 86.3%  | 86.5%  | 86.4%                  | 86.5%  | 85.6%  | 85.2%         | 84.1%  | 83.6%  | 85.2% |



- Trust incomplete RTT deteriorated to 83.6%, and is below the trajectory for the month of 86.4%.
- Neurology and Neurosurgery performance continues to deteriorate due to capacity constraints.
- Neurology plans to deliver additional sessions with a further 112 clinic slots in November and alternative community pathways are being explored in order to improve the Neurosurgery position.
- Overall performance is expected to improve in October and November.



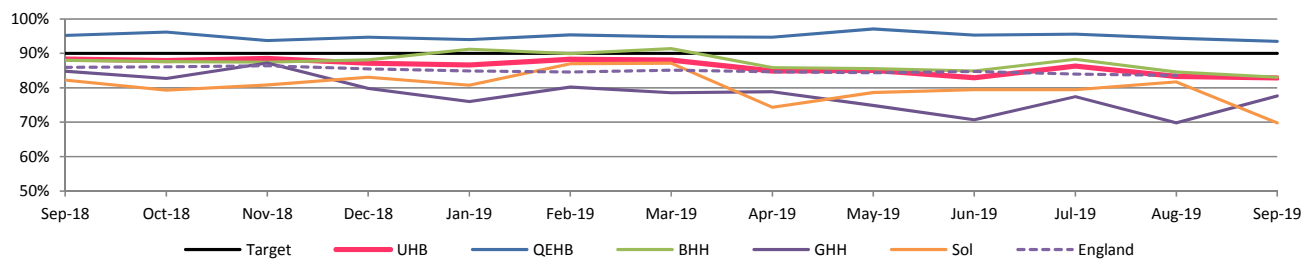
- The RTT waiting list size grew in month by 1,165.
- The waiting list size of 91,080 is now 4,387 (5.1%) above baseline and 0.6% higher than the same period last year.
- September 19 performance is similar to the previous year, when the waiting list size peaked in September 18 before reducing.
- As the waiting list size is growing, a significant opportunity to improve the waiting list size appears to be in additional outpatient capacity or efficiency.
- Nationally the waiting list grew to 4.42m which is 17.9% above the baseline.



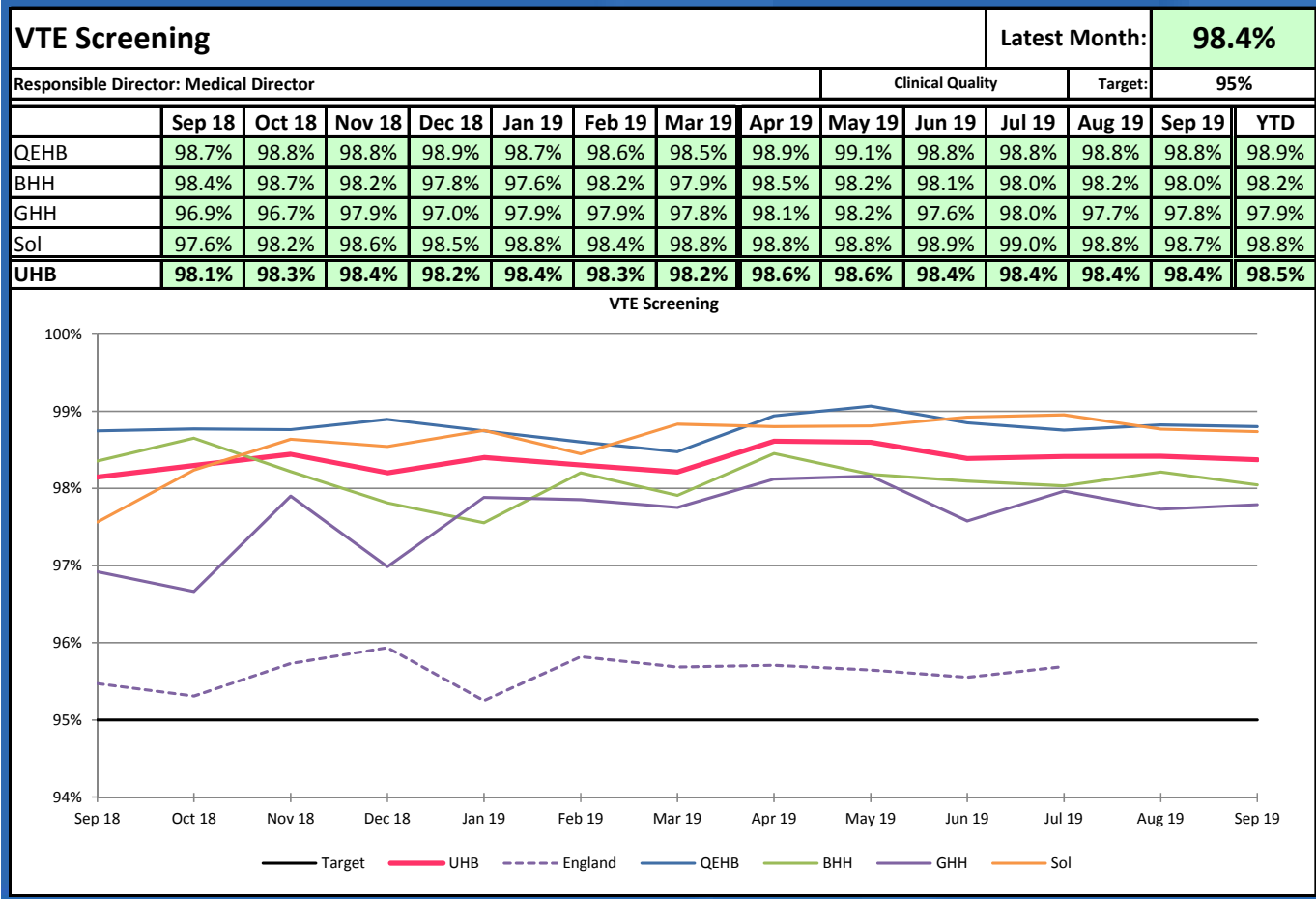
- The overall percentage of NHS and joint delays deteriorated to 2.8%.
- However, the total percentage delay remained static at 5.2%.
- QEHB and Good Hope improved by 0.5pp to 4.1% and 0.6pp to 5.6%, respectively.
- Solihull and Heartlands overall performance deteriorated by 1.9pp to 7.8% and 0.6pp to 5.9%.
- Solihull deteriorating position is mainly due to a 114% increase in Birmingham City Council delays. The site also experienced an increase in patients awaiting packages of care.

| Dementia Finding, Assessment and Referral |        |        |        |        |        |        |        |        |        | Latest Month:           |        | Find    | 82.8%  |       |
|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------------------------|--------|---------|--------|-------|
| Responsible Director: Medical Director    |        |        |        |        |        |        |        |        |        | NHS Oversight Framework |        | Assess  | 97.6%  |       |
|   |        |        |        |        |        |        |        |        |        |                         |        | Refer   | 100%   |       |
|   |        |        |        |        |        |        |        |        |        |                         |        | Target: | 90%    |       |
|   | Sep 18 | Oct 18 | Nov 18 | Dec 18 | Jan 19 | Feb 19 | Mar 19 | Apr 19 | May 19 | Jun 19                  | Jul 19 | Aug 19  | Sep 19 | YTD   |
| QEHB - Find                               | 95.2%  | 96.2%  | 93.7%  | 94.7%  | 94.0%  | 95.4%  | 94.8%  | 94.7%  | 97.2%  | 95.3%                   | 95.6%  | 94.4%   | 93.5%  | 95.1% |
| BHH - Find                                | 88.0%  | 87.6%  | 87.5%  | 88.2%  | 91.3%  | 89.9%  | 91.4%  | 85.9%  | 85.5%  | 84.9%                   | 88.3%  | 84.6%   | 83.1%  | 85.4% |
| GHH - Find                                | 84.8%  | 82.7%  | 87.2%  | 79.9%  | 76.0%  | 80.2%  | 78.6%  | 78.9%  | 74.9%  | 70.7%                   | 77.4%  | 69.8%   | 77.6%  | 75.0% |
| Solihull - Find                           | 82.3%  | 79.3%  | 80.8%  | 83.1%  | 80.8%  | 87.0%  | 87.2%  | 74.3%  | 78.6%  | 79.5%                   | 79.4%  | 81.7%   | 69.8%  | 77.0% |
| <b>UHB - Find</b>                         | 88.3%  | 88.0%  | 88.5%  | 87.2%  | 86.6%  | 88.3%  | 88.1%  | 84.9%  | 85.0%  | 83.0%                   | 86.4%  | 83.3%   | 82.8%  | 84.3% |
| QEHB - Assess                             | 97.0%  | 100%   | 100%   | 98.1%  | 97.6%  | 97.7%  | 100%   | 100%   | 100%   | 100%                    | 100%   | 100%    | 100%   | 100%  |
| BHH - Assess                              | 85.7%  | 78.8%  | 100%   | 96.2%  | 100%   | 90.9%  | 95.5%  | 96.7%  | 100%   | 100%                    | 97.1%  | 92.9%   | 95.5%  | 97.3% |
| GHH - Assess                              | 84.4%  | 100%   | 90.0%  | 88.9%  | 100%   | 100%   | 100%   | 92.9%  | 100%   | 100%                    | 100%   | 90.9%   | 92.9%  | 96.4% |
| Sol - Assess                              | 90.9%  | 100%   | 75.0%  | 100%   | 100%   | 92.3%  | 100%   | 93.8%  | 100%   | 100%                    | 100%   | 100%    | 100%   | 98.9% |
| <b>UHB - Assess</b>                       | 89.2%  | 93.2%  | 93.5%  | 96.4%  | 98.9%  | 95.1%  | 98.8%  | 96.7%  | 100%   | 100%                    | 98.9%  | 96.8%   | 97.6%  | 98.4% |
| QEHB- Refer                               | 100%   | 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%                    | 100%   | 100%    | 100%   | 100%  |
| GHH - Refer                               | 100%   | 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%   | 100%    | 100%   | 100%  |
| <b>UHB - Refer</b>                        | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%                    | 100%   | 100%    | 100%   | 100%  |

Dementia Finding Performance



- Performance for the “Find” element deteriorated by 0.5pp to 82.8%.
- QEHB remained the only site above target with performance at 93.5%.
- Heartlands and Solihull performance deteriorated by 1.5pp to 83.1% and by 11.9pp to 69.8%, respectively.
- Good Hope performance improved by 7.8pp to 77.6%.
- The “Assess” component improved to 97.6%, whilst the “Refer” element maintained its excellent performance of 100%.



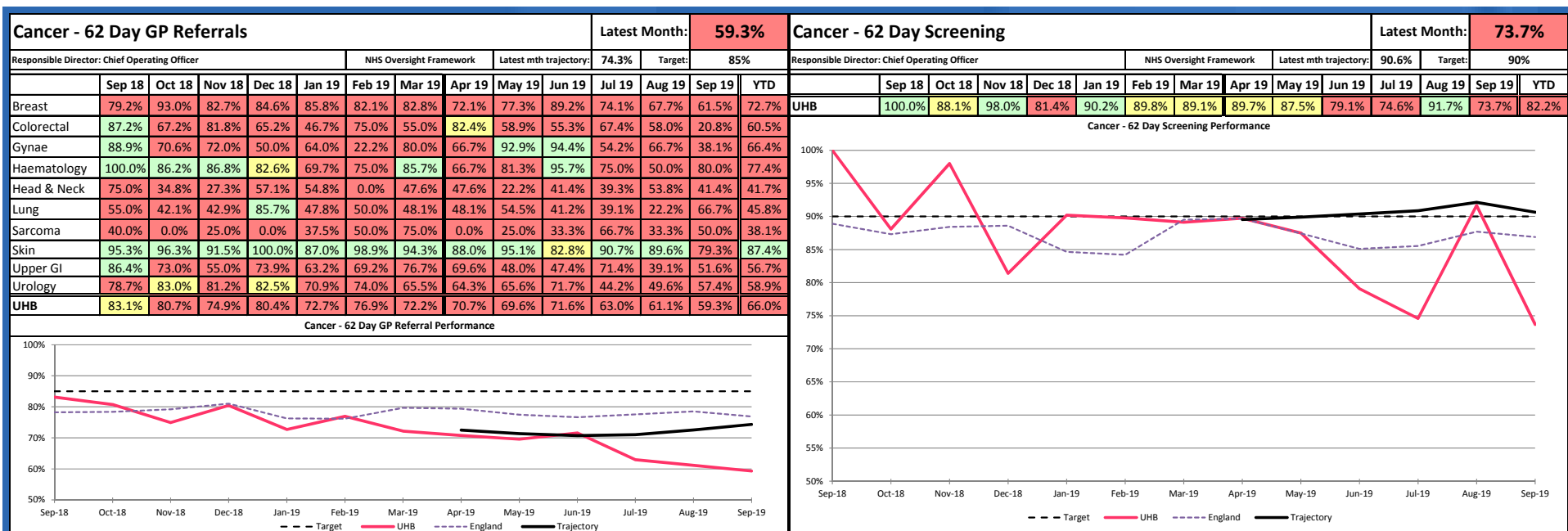
- The Trust performance remained static for the fourth consecutive month at 98.4%.

| Mixed Sex Accommodation           |          |          |          |          |          |          |          |          |          |          |          |          | Latest Month: | 0        |
|-----------------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|---------------|----------|
| Responsible Director: Chief Nurse |          |          |          |          |          |          |          |          |          |          |          |          | Target:       | 0        |
|                                   | Sep 18   | Oct 18   | Nov 18   | Dec 18   | Jan 19   | Feb 19   | Mar 19   | Apr 19   | May 19   | Jun 19   | Jul 19   | Aug 19   | Sep 19        | YTD      |
| QEHB                              | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0             | 0        |
| BHH                               | 0        | 0        | 0        | 0        | 0        | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0             | 0        |
| GHH                               | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0             | 0        |
| Solihull                          | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0             | 0        |
| <b>UHB</b>                        | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>2</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b>      | <b>0</b> |

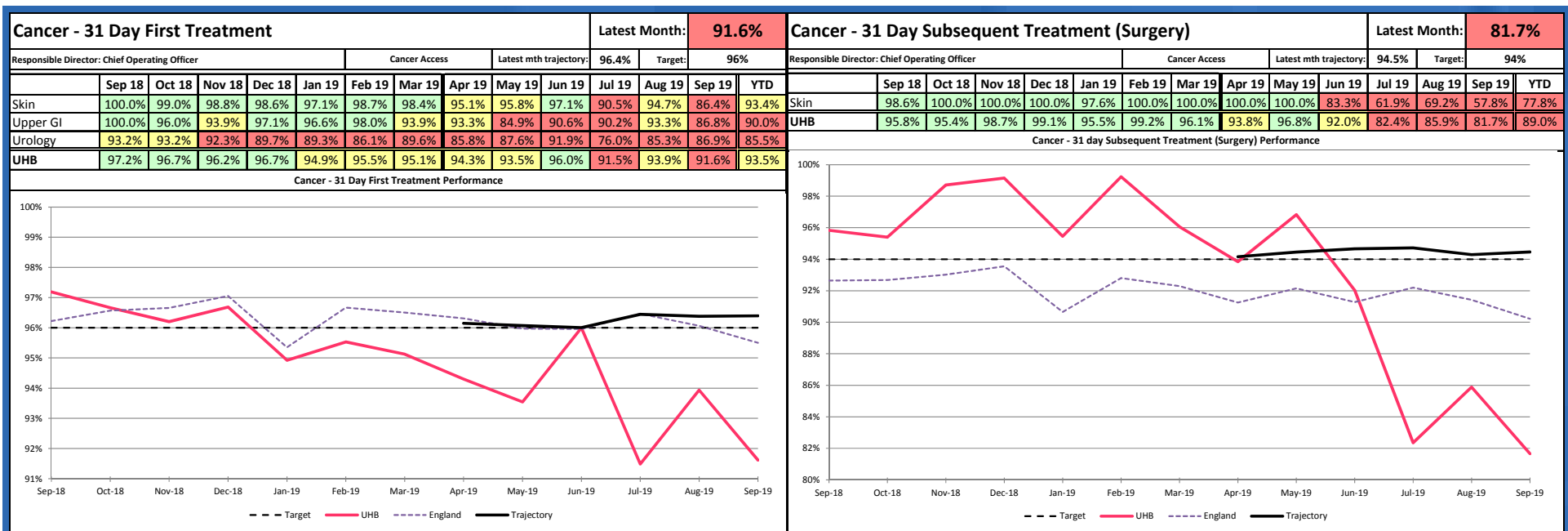
**Mixed Sex Accommodation Breaches (Patients Affected)**

| Month  | QEHB | BHH | GHH | Sol |
|--------|------|-----|-----|-----|
| Sep-18 | 0    | 0   | 0   | 0   |
| Oct-18 | 0    | 0   | 0   | 0   |
| Nov-18 | 0    | 0   | 0   | 0   |
| Dec-18 | 0    | 0   | 0   | 0   |
| Jan-19 | 0    | 0   | 0   | 0   |
| Feb-19 | 0    | 2   | 0   | 0   |
| Mar-19 | 0    | 0   | 0   | 0   |
| Apr-19 | 0    | 0   | 0   | 0   |
| May-19 | 0    | 0   | 0   | 0   |
| Jun-19 | 0    | 0   | 0   | 0   |
| Jul-19 | 0    | 0   | 0   | 0   |
| Aug-19 | 0    | 0   | 0   | 0   |
| Sep-19 | 0    | 0   | 0   | 0   |

- There were no breaches of mixed sex accommodation guidance reported in September.

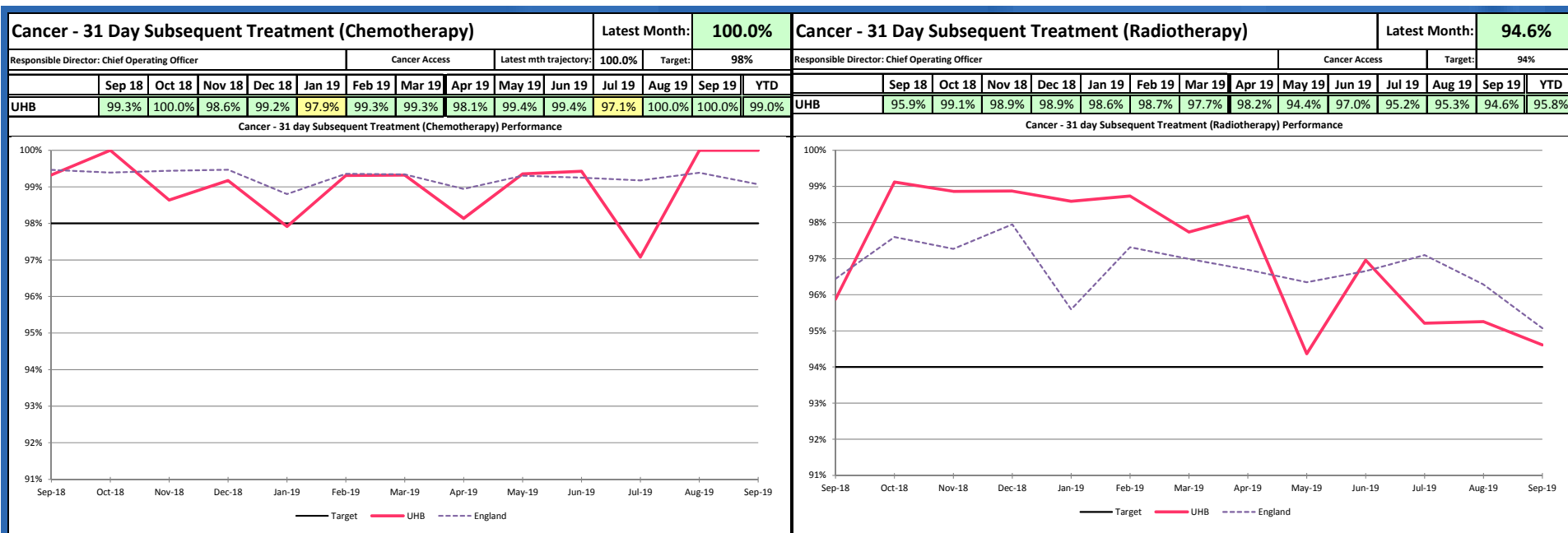


- The Trust's overall performance for GP referrals deteriorated by 1.8pp to 59.3%, whilst screening performance deteriorated to 73.7% against the monthly trajectory of 90.6%.
- The key issues driving this remain elevated referral demand, workforce constraints in key specialties and the ongoing difficulty in providing ad-hoc initiative activity due to revised pension taxation rules.
- Revised internal assurance arrangements are being enacted as a short to medium term measure and a revised recovery plan has been submitted to the CCG.

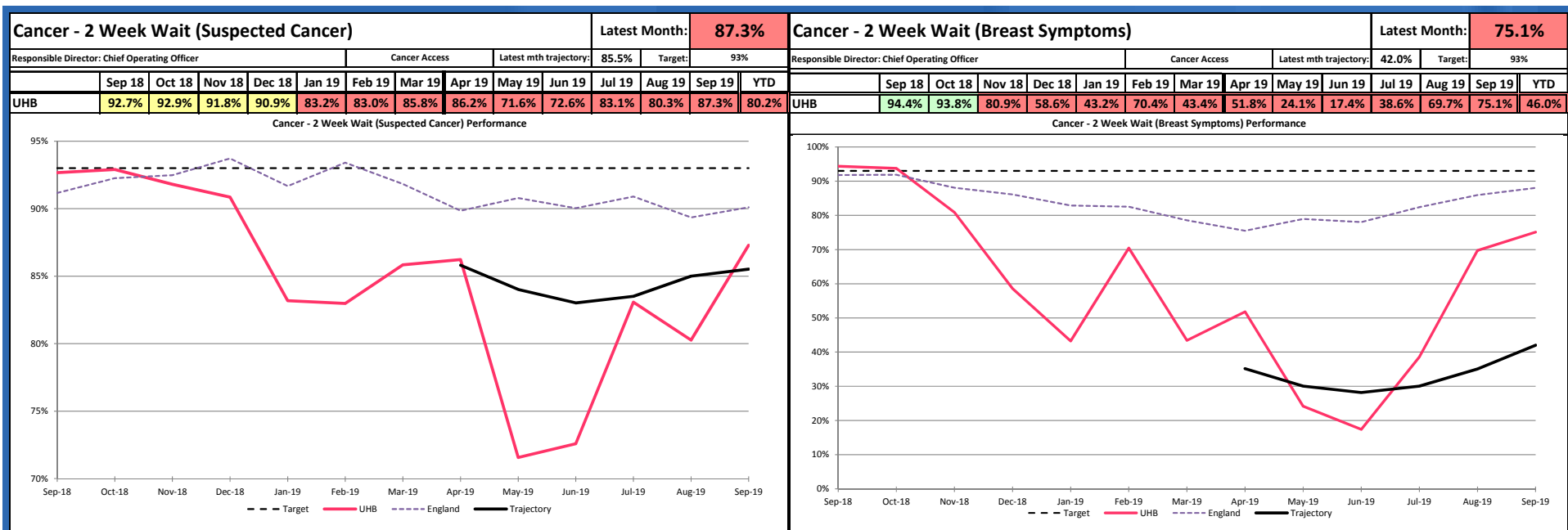


- 31 day first treatment performance deteriorated to 91.6%, and is below the monthly trajectory of 96.4%.
- Subsequent surgery performance for the Trust deteriorated by 4.2pp to 81.7%, due to 22 breaches.
- Urology and Skin contributed to the majority of breaches. The key issues are consultant capacity and challenges in Radiology resulting in delays to patients undergoing Sentinel Lymph Node Biopsy (SNLB).
- Replacing consultants have been appointed (Urology) and services are seeking to utilise locums to mitigate the impact in the short-term. Opportunities for outsourcing are also being explored.





- 31 day subsequent chemotherapy maintained its excellent performance of 100%.
- 31 day subsequent radiotherapy performance fell to 94.6%.



- Performance for 2 week waits for suspected cancer improved to 87.3%, and is above the monthly trajectory of 85.5%.
- Performance for the 2 week wait breast symptoms continues to improve and is now significantly above the trajectory.
- Challenges remain in Colorectal where there has been a significant increase in referral demand. The 'straight to test' best practice pathway commenced at QEHB in November.
- All specialties are reviewing 2ww demand and capacity and providing plans to address any identified gaps.