

Board of Directors

Report

Subject: Integrated Performance Report
Date: 26.11.2015
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Executive Summary

The report shows on-going concerns in key areas.

RTT Incomplete pathway achieved 92.04% (target 92%) with the admitted and non-admitted failing to reach their indicative targets (non-reportable) which indicates an increased likelihood of further pressure on this target. The diagnostic tests achieved 96.12% (target 99%). This was due to issues in endoscopy for which there is a trajectory for recovery during December, echocardiogram which is now back above 99%, dexascan which is very low in number and sleep studies which continue to present an issue.

62 day cancer pathways achieved 90.9% for September and 80.5% for October which is due to on-going work to catch up with long waiting patients and has a trajectory to achieve compliance for Q4.

Length of stay shows significant improvement and turnaround workstreams are in place to achieve better than national average.

Theatre utilisation is low and a work stream to improve this is being designed.

Outpatient clinic utilisation was low and has improved markedly, action needs to be applied to reduce DNA rates through improved communications, better call handling and application of the access policy.

Recommendation

Members are asked to note the report and make recommendations for action.

Relevant Strategic Priorities (please mark in bold)

To consistently deliver a high quality patient experience safely and effectively	To develop extended clinical networks that benefit the patients we serve
To eliminate the variability of access to and outcomes from our acute services	To provide efficient and cost-effective services and deliver better value healthcare
To reduce demand on hospital services and deliver care closer to home	

How has organisational learning been disseminated	Training programme in place for access policy and practice plus turnaround work streams are implementing and embedding change.
Links to the BAF and Corporate Risk Register	This issue relates financial and access risks on the register
Details of additional risks associated with this paper (<i>may</i>)	Monitor scorecard effected by non-delivery of key access targets.

<i>include CQC Essential Standards, NHSLA, NHS Constitution)</i>	
Links to NHS Constitution	The NHS constitution clearly sets out a series of pledges and rights for what patients can expect from the NHS with regard to waiting times
Financial Implications/Impact	Avoids costly additional working through failure to plan appropriately. Treats patients within target timescales and avoids penalties
Legal Implications/Impact	Avoids CCG financial penalties
Partnership working & Public Engagement Implications/Impact	NA
Committees/groups where this item has been presented before	NA
Monitoring and Review	Single PTL being developed. The IPR is reported monthly with RTT reported to Divisional Teams weekly.
Is a QIA required/been completed? If yes provide brief details	No