

PERFORMANCE REPORT

Shelagh Smith
Chief Operating Officer



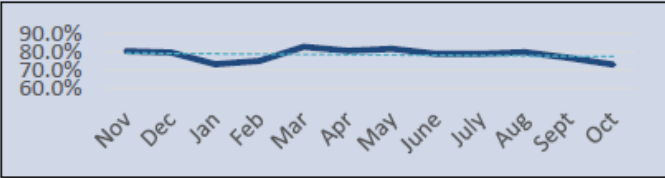
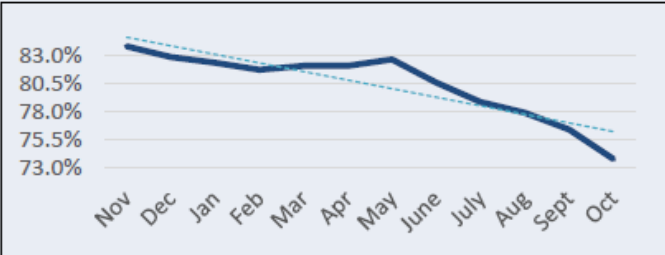
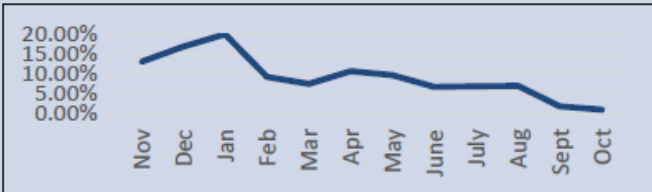
BACKGROUND

- This performance data is being provided for the Havering Health Overview Scrutiny Committee at their request, to consider which (if not all) data sets they would like to see as part of their regular performance monitoring.
- The usual Havering Council performance template has been used where possible, although not all fields are recorded in the same way by BHRUT and so, consideration is also asked for future reports as to whether flexibility can be applied to reporting of data, so as to ensure we provide the most useful data and narrative.
- There is some variation of dates, so as to provide the most up-to-date data prior to submission deadlines – all data provided is a snapshot in time, rather than a cumulative / average quarter period.



CONSTITUTIONAL STANDARDS – PERFORMANCE

A&E / ELECTIVE

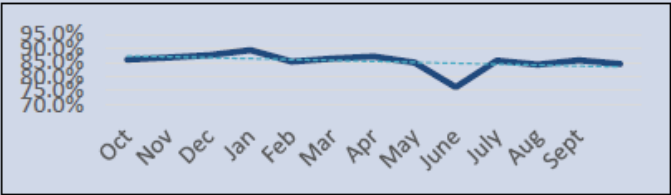
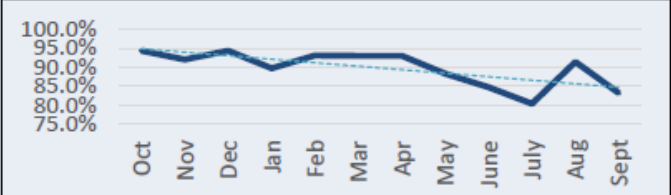
Key metrics	This month	Trend	Local Target/Threshold	National Target/Threshold
A&E performance	72.90% Queen's – 70.32% KGH – 76.92%		85.4 %	95%
RTT performance	Oct 73.73%* (unvalidated) Sept 76.4% (validated)		85.1% 84.6%	92%
Diagnostic performance	0.8%		0.2%	<1%

*RTT validation typically increases performance by c. 1.5%



CONSTITUTIONAL STANDARDS – PERFORMANCE

ELECTIVE

Key metrics	This month	Trend	Local Target/Threshold	National Target/Threshold
Cancer performance (62 Day)	Sept: 84.5% (validated)		85%	85%
Cancer performance (2WW)	Sept: 83.3% (validated)		93%	93%



CONSTITUTIONAL STANDARDS – NARRATIVE

4 Hour Access Standard

- Average daily attendances in October increased by 5.88% when compared to October 2018, whilst the average number of patients seen within 4 hours decreased by 5.83%.
- However, if attendances had remained the same as October 2018, given the number of patients seen within 4 hours, overall Trust performance would have been 77.24%, a 4.34% improvement on actual performance of 72.9% against the 85.37% trajectory.

Referral to treatment (RTT) /Cancer/ Diagnostics

- The Trust reported 16 patients over 52 weeks in September, in line with the trajectory we have agreed with our commissioners.
- We delivered against the national diagnostic performance target for October, reporting 0.80% breaches (against a national standard of 1%). This was improved compared to September, when we reported 1.62%. We reported fewer than half the number of breaches in October (82 breaches) compared to September (171). Both MRI and ultrasound were below the 1% threshold.
- Our RTT waiting list fell by 1,230 patients to 41,337 in September (from 42,567 in August). We expect this to fall again when we report November.
- To support our outpatients transformation plan, and to further reduce our patient waiting list, we have commenced clinical triage of cardiology and neurosurgery patients to make sure the most clinically important patients are seen as soon as possible and ensure that patients are seen in the most appropriate setting. This follows on from initial pilot work in general surgery and trauma and orthopedics which is continuing.



LENGTH OF STAY - PERFORMANCE

Indicator and Description	Value	Tolerance	2019/20 Annual Target	2019/20 Q2 Target	October 2019 Performance	Short Term DOT against July 2019	Long Term DOT against October 2018
7days (Internal agreement; excluding Critical care and maternity)	Smaller is better	n/a	296	n/a	400	348	345
21 Days (Target set using national long length of stay methodology; excluding Critical care and maternity)	Smaller is better	n/a	85	n/a	141	113	126



LENGTH OF STAY - NARRATIVE

- Red2Green is a national initiative that looks to highlight delays in patient care, our team then looks at how every day can be made to count and implements improvement initiatives to help transform our services and patient flow
- The programme is implemented on 30 wards across the Trust who have all made individual improvement pledges
- We have recently launched 'Red2Green Live' which enables data on delays to be reviewed daily following afternoon rounds to help unlock delays for patients
- We have held three 'perfect week' events throughout 2019, helping to highlight the importance of patient flow and learn from each campaign and had success in reducing length of stay as a result
- We have established a weekly rhythm to target high demand days and built in a weekly long length of stay reviews to improve our 7 and 21 length of stay patients
- We have introduced weekly conference calls with our health system partners (CCG and LAs)
- The majority of our increase in 21 day length of stay patients are within neuro and stroke



VACANCIES (% OF FTE) - PERFORMANCE

Indicator and Description	Value	Tolerance	2019/20 Annual Target	2019/20 Q2 Target	October 2019 Performance	Short Term DOT against July 2019	Long Term DOT against October 2018
Medical and dental	Lower is better	n/a	n/a	n/a	11.6%	14.5%	14.9%
Registered nurse and midwifery	Lower is better	n/a	n/a	n/a	15.3%	18.2%	15.5%
Clinical other	Lower is better	n/a	n/a	n/a	13.2%	14.7%	8.4%
Non-clinical	Lower is better	n/a	n/a	n/a	12.1%	12.4%	15.1%
Overall vacancy	Lower is better	n/a	11%	11%	13.4%	15.3%	13.2%



VACANCIES - NARRATIVE

- Medical recruitment
 - Academy of surgery (innovative way to attract new doctors globally – recruited from more than 20 countries)
 - Acute division 33 Clinical Fellow posts in pipeline
 - Time to hire has reduced from 150 days to 71 days in last 12 months
- Nursing recruitment
 - Senior intern programme (first of its kind in the country)
 - Improved retention rates – from 25% leaving within first year to 9%
 - Nurse Associate programme – 57 qualified
 - Nurse apprenticeships
- Over next six months circa 23 Philippine nurses due to join each month
- Seeing continued improvement in turnover and stability rates
- During 19/20 increase in starters due to medical recruitment drive
- Some areas remain challenging locally and nationally



FINANCE – PERFORMANCE

Indicator and Description	Value	Tolerance	2019/20 Annual target	2019/20 target to October	2019/20 Performance to October	2019/20 Q1 Performance to October	2018/19 Performance to October
Financial performance	Positive is better	n/a	-£50.8m	-£26.2m	-£31m	-£13.9m	-£38.2m



FINANCE – NARRATIVE

- Delivery of the planned £50.8m deficit will trigger payment of £27.7m through the Financial Recovery and Provider Sustainability Funds
- Integral to the Trust plan are a number of key transformational programmes of work:
 1. Elective flow – reducing waste from this process will improve efficiency and performance with savings materialising through more effective use of theatre capacity
 2. Reduction in outpatient activity – reducing the number of unwarranted outpatient appointments. The ambition is to reduce by 10% per year
 3. Reduce spend on premium cost staffing
- We have high levels of confidence in our diagnosis of the deficit drivers but implementing the necessary changes is taking longer than planned.
- Additional short term cost control initiatives are being put in place to close the current gap to plan

