

PERFORMANCE SCORECARD

Indicator	Indicator Source	Responsible Director	Standard / Threshold	YTD	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Q1	Q2	Q3	On Target	Of Concern	Comments			
Responsive Domain - Access Metrics																								
1	18w RTT - Percentage of Admitted RTT Pathways completed within 18 weeks	TDA & CQC	Chief Operating Officer	90%	82.2%	92.2%	92.5%	92.4%	87.1%	82.5%	85.7%	80.8%	71.1%	75.3%	73.4%	71.2%	92.4%	85.2%	75.8%	≥90%	<90%	Specialties which failed (February): Cardiology; Gen Surgery; ENT; Gynaecology; Neurosurgery; Ophthalmology; Oral Surgery; Other; T&O; Urology		
2	18w RTT - Percentage of Non-Admitted RTT Pathways completed within 18 weeks	TDA & CQC	Chief Operating Officer	95%	83.70%	96.0%	95.6%	95.7%	95.1%	90.6%	90.5%	83.98%	82.44%	87.6%	86.6%	86.4%	95.6%	92.1%	84.6%	≥95%	<95%	Specialties which failed (February): ENT; Gastroenterology; General Surgery; Gynaecology; Neurology; Neurosurgery; Ophthalmology; Oral Surgery; Other; T&O		
3	18w RTT - Percentage of Incomplete Pathways waiting less than 18 weeks	TDA & CQC	Chief Operating Officer	92%	88.1%	92.0%	92.0%	92.1%	90.2%	89.7%	86.7%	86.4%	87.5%	87.5%	87.1%	88.1%	92.1%	86.7%	87.5%	≥92%	<92%	Specialties which failed (February): Gen Surgery; Urology; T&O; Oral Surgery; Neurosurgery; Gastroenterology; Neurology; Gynaecology		
4	18w RTT - Nos of over 52 week waiters at month end	TDA	Chief Operating Officer	0	1	0	0	0	0	1	1	3	0	1	1	0	1	4	0	>=1	0	>0	1-52wk Waiter at Feb Month End - T&O Spinal Patient	
5	18w RTT - Number of Breaching Specialities	NCB	Chief Operating Officer	0	28	3	2	2	7	20	31	34	35	31	37	28	2	31	31	0	>0	0	>0	
6	Diagnostic Tests waiting longer than 6 weeks - Percentage of all waiters	TDA & CQC	Chief Operating Officer	1%	0.7%	0.1%	0.9%	0.3%	0.2%	0.3%	0.4%	0.1%	0.2%	0.7%	2.9%	0.7%	0.5%	0.3%	0.3%	<1%	>=1%	0	>0	
7	Proportion of Operations Cancelled On The Day not re-booked within 28 days	TDA & CQC	Chief Operating Officer	0%	23.9%	25.0%	20.0%	25.0%	15.2%	15.2%	26.9%	17.7%	35.0%	32.9%	23.5%	22.8%	23.3%	19.2%	23.9%	<5.0%	>5.0%	0	>0	
8	Nos of Urgent Operations being cancelled for the second time	TDA & CQC	Chief Operating Officer	0	7	0	0	0	0	0	0	0	0	3	0	4	0	0	3	0	1	0	1	4 Urgent Canc - Urology, General Surgery, Cardiac, Neurosurgery
9	Percentage of patients whose operation was cancelled at the last minute	TDA & CQC	Chief Operating Officer	1%	0.98%	0.60%	0.62%	0.65%	1.21%	0.71%	1.01%	0.63%	0.79%	1.53%	1.05%	1.98%	0.62%	0.99%	0.97%	<=1%	>1%	0	>0	
10	A&E - Percentage of patients who spent 4 hours or less in A&E	TDA & CQC	Chief Operating Officer	95%	84.54%	88.23%	86.64%	90.53%	88.09%	83.26%	84.21%	84.18%	87.57%	78.31%	78.07%	78.99%	88.34%	85.48%	83.43%	≥95%	<95%	0	>0	
11	A&E - Nos of Patients who have waited >12 hours in A&E from Decision to Admit	TDA & CQC	Chief Operating Officer	0	13	0	0	0	0	1	1	1	0	0	3	7	0	2	1	0	1	0	1	
12	A&E - Ambulance Handover Delays of over 30 mins and less than 60 mins - Number	NCB	Chief Operating Officer	0	7,408	537	697	611	632	651	616	776	646	829	740	673	1,845	1,899	2,251	tbc	tbc	0	>0	Ambulance handover delays are unvalidated
13	A&E - Ambulance Handover Delays of over 60 mins - Number	NCB	Chief Operating Officer	0	778	42	88	49	34	64	97	71	55	95	81	102	179	195	221	tbc	tbc	0	>0	Ambulance handover delays are unvalidated
14	A&E - A&E Attendance to Emergency Admission (via A&E) Ratio	Local	Chief Operating Officer	23%	25.4%	24.3%	24.3%	23.3%	22.4%	22.6%	22.7%	23.6%	25.3%	28.0%	32.3%	31.6%	24.0%	22.6%	25.5%	≥23%	>23%	0	>0	
15	No of Ambulance Conveyances to ED	Local	Chief Operating Officer	TBC	45,090	4,044	4,321	4,071	4,185	4,114	4,013	4,216	4,016	4,437	4,113	3,560	12,577	12,312	12,669	n/a	n/a	0	>0	Feb avg per day = 127 (L Nov - 130, Dec - 143, Jan - 133)
16	A&E 7 day Reattendance Rate	Local	Chief Operating Officer	<=5%	7.2%	7.9%	8.3%	7.2%	8.2%	8.7%	7.7%	7.6%	8.0%	7.8%	7.2%	6.6%	7.2%	8.7%	7.8%	7.8%	0	>0	0	>0
17	Cancer: 2 week wait referral to date first seen	TDA & CQC	Chief Operating Officer	93%	93.62%	98.0%	99.3%	96.2%	96.0%	96.7%	93.6%	92.0%	96.0%	95.1%	94.1%	L	91.3%	95.5%	93.9%	≥93%	<93%	0	>0	
18	Cancer: 2 week wait referral to date first seen - Breast Symptomatic	TDA & CQC	Chief Operating Officer	93%	97.40%	98.8%	98.1%	96.9%	98.1%	94.0%	96.6%	96.6%	98.4%	97.7%	98.0%	L	97.9%	96.5%	97.6%	≥93%	<93%	0	>0	
19	Cancer: 31 day wait from diagnosis to first treatment	TDA & CQC	Chief Operating Officer	96%	97.64%	98.2%	98.9%	97.1%	96.9%	98.8%	97.1%	97.9%	97.8%	97.9%	96.2%	L	98.0%	97.5%	97.9%	96%	<96%	0	>0	
20	Cancer: 62 day wait for first treatment from urgent GP referral	TDA & CQC	Chief Operating Officer	85%	82.67%	90.1%	78.2%	78.3%	86.3%	89.7%	84.7%	80.5%	75.5%	85.8%	80.1%	L	81.1%	86.8%	80.3%	85%	<85%	0	>0	
21	Cancer: 31 day wait for second or subsequent treatment - surgery	TDA & CQC	Chief Operating Officer	94%	96.91%	94.3%	95.2%	95.6%	100.0%	97.0%	100.0%	100.0%	100.0%	100.0%	91.3%	96.8%	L	95.0%	97.8%	97.8%	94%	<94%	0	>0
22	Cancer: 31 day wait for second or subsequent treatment - Chemotherapy	TDA & CQC	Chief Operating Officer	98%	100%	100%	100%	100%	98.3%	100%	100%	100%	100%	100%	100%	L	100%	99.3%	100%	98%	<98%	0	>0	
23	Cancer: 31 day wait for second or subsequent treatment - Radiotherapy	TDA & CQC	Chief Operating Officer	94%	95.85%	96.2%	95.0%	94.6%	94.5%	93.8%	99.4%	95.0%	94.0%	99.3%	98.1%	L	95.3%	96.0%	95.8%	94%	<94%	0	>0	
24	Cancer: 62 day wait for first treatment from referral from a nhs cancer screening service	TDA & CQC	Chief Operating Officer	90%	89.73%	93.0%	93.0%	94.7%	97.1%	82.5%	85.5%	87.6%	84.6%	90.9%	90.7%	L	93.5%	88.1%	87.6%	90%	<90%	0	>0	
25	Cancer: 62 day wait for first treatment from referral following a Consultants Decision to Upgrade	TDA & CQC	Chief Operating Officer	90%	94%	100%	100%	90.5%	100%	86.4%	100%	90.9%	91.7%	100%	100%	L	94.7%	94.3%	92.7%	90%	<90%	0	>0	
26	Stroke: % of Pts who spend > 90% of time on stroke unit	TDA & CQC	Chief Operating Officer	80%	86.1%	93.4%	88.2%	87.5%	87.5%	84.2%	81.1%	82.9%	93.4%	79.7%	82.26%	87.10%	89.7%	84.3%	85.4%	≥80%	<80%	0	>0	
27	Stroke: % admitted directly to stroke unit	TDA & CQC	Chief Operating Officer	90%	71.9%	78.7%	77.6%	91.7%	86.1%	79.0%	58.5%	62.9%	72.1%	55.1%	61.3%	67.7%	78.7%	74.5%	63.4%	≥90%	<90%	0	>0	
28	Stroke: % scanned in less than 1 hrs of hospital arrival	TDA & CQC	Chief Operating Officer	50%	68.7%	67.3%	70.6%	71.9%	71.4%	81.8%	61.9%	59.0%	59.3%	68.6%	70.0%	75.0%	69.7%	71.7%	63.7%	≥50%	<50%	0	>0	
29	Stroke: % of Patients scanned within 24 hours	TDA & CQC	Chief Operating Officer	100%	96.9%	96.2%	95.5%	100%	96.9%	100%	92.8%	93.5%	96.2%	97.9%	96.8%	100%	97.3%	96.4%	98.0%	100%	<100%	0	>0	
30	Stroke: % of high risk TIA cases treated in 24 hours	TDA & CQC	Chief Operating Officer	60%	85.8%	87.0%	75.0%	84.0%	95.0%	100%	92.0%	95.0%	78.0%	92.0%	100%	93.0%	75.3%	95.7%	88.3%	≥60%	<60%	0	>0	
31	Stroke: % of low risk TIA patients seen in 7 days	TDA & CQC	Chief Operating Officer	100%	95.5%	97.0%	95.0%	90.0%	94.0%	96.0%	100%	92.0%	100%	100%	100%	97.0%	94.0%	96.7%	97.3%	100%	<100%	0	>0	
Responsive Domain - Local Performance/System wide Measures																								
32	Outpatient New to Follow-up Ratio (all)	Local	Chief Operating Officer	1.92	2.28	2.52	2.37	2.34	2.3	2.27	2.21	2.14	2.17	2.23	2.33	2.22	2.41	2.26	2.18	<1.92	>1.92	0	>0	
33	GP OP Referral Rates	Local	Chief Operating Officer	n/a	158116	13,884	14,650	15,336	16,125	13,478	15,143	16,443	13,860	13,704	14,271	11,222	43,870	44,746	44,007	n/a	n/a	0	>0	referral rate trends are largely unchanged
34	Two-week wait GP Referral Rates	Local	Chief Operating Officer	n/a	17881	1436	1639	1750	1866	1516	1618	1700	1585	1455	1682	1634	4825	5000	4740	n/a	n/a	0	>0	referral rate trends are largely unchanged
35	Average Admission Length of Stay - Non-Electives	Local	Chief Operating Officer	TBC	5.14	4.92	5	5.01	4.73	5.02	5.18	5.3	4.97	5.19	5.46	5.81	4.97	4.98	5.18	tbc	tbc	0	>0	
36	Nos of NEL Beddays above HRG Trimpont (excess beddays)	Local	Chief Operating Officer	27,348	27355	2486	2674	2599	2402	2688	2920	2705	2513	2831	3537	L	7759	8010	8049	tbc	tbc	0	>0	
37	Nos of Patients triggering excess beddays	Local	Chief Operating Officer	-	2541	269	257	236	251	247	262	271	288	246	214	L	762	760	805	tbc	tbc	0	>0	
Responsive Domain - Bed Occupancy																								
38	Percentage of occupied beds (General & Acute)	CQC Surveillance Indicators	Chief Operating Officer	90%	90.98%	89.99%	91.01%	88.60%	88.92%	90.22%	91.95%	93.18%	91.12%	90.54%	94.30%	90.83%	89.88%	90.35%	91.62%	tbc	tbc	0	>0	
39	Percentage of occupied Adult Critical Care beds	CQC Surveillance Indicators	Chief Operating Officer	90%	96.42%	92.73%	89.94%	93.20%	99.55%	97.87%	99.53%	98.71%	92.93%	96.06%	100.19%	100.00%	91.93%	98.98%	95.93%	tbc	tbc	0	>0	
40	Percentage of occupied paediatrics/neonatal beds	CQC Surveillance Indicators	Chief Operating Officer	90%	82.13%	84.32%	87.61%	87.50%	87.68%	85.56%	90.98%	86.73%	81.14%	68.77%	73.31%	69.07%	86.49%	88.04%	78.85%	tbc	tbc	0	>0	
Safety Domain																								
41	Nos of cases of MRSA bloodstream infections	TDA & CQC	Medical Director Chief Nurse	0	4	0	0	1	0	0	1	0	1	0	1	0	1	1	1	0	1	0	>0	
42	Nos of C. Difficile infections	TDA & CQC	Medical Director Chief Nurse	50	38	4	2	1	4	6	3	4	4	5	3	2	7	13	13	<4.17 per month	>4.17 per month	0	>0	2013-14 incidence was 48
43	Number of Medication error causing serious harm (Severe / Catastrophic)	TDA & CQC	Medical Director Chief Nurse	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	>=1	0	>0	
44	Incidence of newly-acquired category 3 or 4 pressure ulcers	TDA	Medical Director Chief Nurse	TBC	5	1	1	1	0	0	1	0	0	1	0	3	1	1	tbc	tbc	0	>0		
45	Nos of falls resulting in severe injury or death (Moderate, Severe and Catastrophic)	TDA	Medical Director Chief Nurse	TBC	21	3	2	1	3	1	1	3	1	0	3	3	6	5	3	tbc	tbc	0	>0	Note this was re-stated for October's report to include falls categorised as Moderate
46	Percentage of Harm Free Care - Safety Thermometer	TDA	Medical Director Chief Nurse	TBC	94.5%	94.7%	94.2%	93.0%	95.4%	94.0%	92.1%	96.6%	95.2%	95.9%	94.3%	94.6%	94.0%	93.8%	95.9%	tbc	tbc	0	>0	
47	Number of Serious Incidents reported each month.	TDA	Medical Director Chief Nurse	TBC	57	6	2	5	7	2	8	7	5	3	6	6	13	17	15	tbc	tbc	0	>0	
48	Duty of Candour - Conversation within 10 days - % Compliance	CQC	Medical Director Chief Nurse	TBC	30.5%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100%	25.0%	33.3%	27.8%	N/A	N/A	37.5%	tbc	tbc	0	>0	Statutory Duty of Candour came into effect from 1st Oct
49	Duty of Candour - Report within 45 days - % Compliance	Local	Medical Director Chief Nurse	TBC	100%	N/A	N/A	N/A	N/A	N/A	N/A	100%	N/A	N/A	N/A	N/A	N/A	100%	0	tbc	tbc	0	>0	
50	"Never Events" reported in month	TDA & CQC	Medical Director Chief Nurse	0	5	1	1	2	0	0	1	0	0	0										