

Operational Performance Report for December 2015

<b>Trust Board Meeting</b>	<b>Item: 9</b>
<b>Date: 27<sup>th</sup> January 2016</b>	<b>Enclosure: E</b>
<b>Purpose of the Report:</b> To provide an update on monthly performance for all of the key operational indicators, background issues and remedial actions where necessary. Quality, Workforce and Finance reports form separate reports this month.	
<b>For: Information</b> <input checked="" type="checkbox"/> <b>Assurance</b> <input checked="" type="checkbox"/> <b>Discussion and input</b> <input checked="" type="checkbox"/> <b>Decision/approval</b> <input type="checkbox"/>	
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<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	Board Assurance Framework
<b>Legal / Regulatory / Reputation Implications:</b>	Monitor CQC compliance
<b>Link to Relevant CQC Domain:</b> <b>Safe</b> <input checked="" type="checkbox"/> <b>Effective</b> <input checked="" type="checkbox"/> <b>Caring</b> <input checked="" type="checkbox"/> <b>Responsive</b> <input checked="" type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>	
<b>Link to Relevant Corporate Objective:</b>	
<b>Document Previously Considered By:</b>	
<b>Recommendations:</b> The Trust Board is asked to <b>note</b> the contents of this report.	

## **December 2015 Operational Performance Report**

December was reasonably strong in terms of operational performance across the Trust in all key indicators with the exception of the Emergency Access Standard which fell slightly below the target. The following areas are particularly worthy of note:

### **Emergency Access Standard**

The month end position in December for all types of attendances was 94.2% which was an improvement at the front end and with flow but this was offset by a few days across the month where we fell below 95%. The Christmas holiday period went well and the plans covering those two weeks saw a very strong performance.

Although the position has improved we are not without challenges in particular around staffing which remains very fragile. We continue to have a significant reliance on locums particularly within the middle grade tier and new cohort of nurses are joining the department are just arriving and settling in.

The new Clinical Director for AED and AAU is due to start the second week of January 2016.

### **18 Weeks Referral to Treatment**

#### **November 2015 performance summary position**

All specialties met the incomplete standard (92%) for the month of November as per Table 1 below. This is a notable achievement for the Trust.

<b>RTT measure</b>	<b>(Standard 92%)</b>	<b>Total waiting list size</b>	<b>Backlog</b>
Incomplete September	95.88	15,526	640
Incomplete October	95.76	15,512	647
Incomplete November	96.22	15,020	568

At the time of writing this report December's figures are being validated but they are above the target. Incompletes 96.34% against the 92% - all service lines are compliant against this standard.

Non Admitted 96.68% against 95%

Admitted 89.39% against 90% although this is an internal measure.

### **Cancer**

The Trust is on track to achieve all targets in December including 31 days (due to the volume we treated). Unfortunately, it will still not be enough to achieve the quarter for 31 days. The indications are that we will just fall below the standard. New processes and management in Plastics and Dermatology which have been a recent problem area have identified areas for improvement and their performance is improving and I expect them to be back on track by the end of February.

## **Key Issues for the next three months**

### **Staffing in AED**

At present, the department is short staffed in nursing, consultant and middle grade doctors. The nursing situation is easing on the back of recent recruitment drives so we expect to see this improvement over the coming months although there is still some way to go to ensure that we do not lose more nurses than we gain. Gaps still remain at Band 7 which will need focus as this is a key role on each shift to ensure that the department maintains flow.

Recruitment of senior medical staff continues. A 10 person consultant rota has been drawn up with sessional commitment from senior colleagues at other Trusts who we know and who can give a regular commitment whilst we try to attract permanent members of the team. There is a rolling advertisement for middle grade doctors on NHS jobs from which we are seeing some interest, and we are exploring other avenues in terms of rotational posts with other specialties which may be more attractive to prospective middle grade applicants.

### **Outpatients and Patient Administration**

The main outpatient department is still being re-furbished in places and the program is seriously behind. Phase one should have been completed before Christmas, and due to the fact it is not complete, there is an impact on the continuing environment for patients and staff. A detailed plan for both Outpatients and Patient Admin has been drawn up to target areas for improvement in particular around booking and prompt responses to patient queries.

Eileen Doyle  
January 2016