

# Integrated Performance Report M03 – June 2014

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## Performance – June 2014

### Care Quality Commission

- The Trust is not currently subject to any CQC warning notices or intervention action and is awaiting the final outcome of the recent CQC inspection

### Patient Safety and Clinical Effectiveness

- Patient safety indicators continued to show expected levels of performance. There was one medication error causing severe harm in June 2014 (declared an SI in July).
- In July 2014 there has been a Never Event (Inappropriate administration of daily oral methotrexate). Immediate mitigating actions to reduce further risk have been taken while the SI investigation is undertaken.
- The latest HSMR data and SHMI data both show overall Trust mortality is lower than expected for our patient group.
- The Trust had no MRSA bloodstream infection and two Trust acquired C-Diff cases in June.
- Maternity indicators continue to show expected performance and are monitored by the Clinical Effectiveness committee

### Access and Responsiveness

- In June 2014 96.6% of patients were admitted or discharged within 4 hours with no 12 hour trolley wait breaches.
- All three RTT standards were achieved at aggregate Trust level, however there was one specialty failure (Cardiology Non Admitted Standard).
- All Cancer Access Standards were achieved.

### Patient Voice

- The June FFT scores for ED was +75 and the Inpatient score was +80. While both of these are reduction on May 2014, they continue to show positive performance against national peers.

# Performance – June 2014

## Workforce

- The Trust continues to monitor ward nursing (numbers and skill mix) on a daily basis and is assured that adequate staffing is in place. Ward staffing levels are now published on the Trust’s external website at ward level. The Trust is also continuing to monitor temporary staffing usage on a weekly basis.

## Finance

- The Trust continues to be on plan at Month 3 with a (£2.8)m deficit.
- The cost improvement plan for the year is £11.0m and in June £1.1m was achieved. This is (£0.4)m below the Trust’s “stretch” plan (to get ahead of the profile), but remains ahead of the TDA Plan for Month 3.

## Key Risks

- Finance – The risk to the forecast outturn is recorded as £8m potential adverse change. That risk is from non-payment for activity through contractual measures, non delivery of savings and divisional overspending.
- Quality – The Significant Risk Register for the Trust includes one quality risk in relation to Falls. The risk in relation to access to Paediatric medical records in ED to support Safeguarding action has been downgraded following review of audit evidence by the Paediatric Safeguarding Committee .

### Action: The Board are asked to note and accept this report

**Legal:** What are the legal considerations & implications linked to this item? Please name relevant Act

Patient safety: Legal actions from unintentional harm to patients would normally be covered by negligence, an area of English tort (civil) law, providing the remedy of compensation. Case law is extensive. Criminal action could be pursued if investigation judged intentional harm and remedies will vary according to severity.

Staff safety: The Health and Safety at Work Act etc 1974 may apply in respect of employee health and safety or non clinical risk to patients (usually reported under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995)

**Regulation:** What aspect of regulation applies and what are the outcome implications? This applies to any regulatory body.

The Care Quality Commission (CQC) regulates patient safety and quality of care and the CQC register and therefore license care services under the Health and Social Care Act 2009 and associated regulations. The health and safety executive regulates compliance with health and safety law. A raft of other regulators deal with safety of medicines, medical devices and other aspects.

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# Patient Safety and Clinical Effectiveness

Indicator Description	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Trigger Text	Trigger Points
<b>Patient Safety</b>								
No of Never Events in month	0	0	0	0	0	0	< Target is Good	0 1
No of medication errors causing Severe Harm or Death	0	0	0	1	0	1	< Target is Good	0 1
Safety Thermometer - % of patients with harm free care (all harm)	90.4%	92.7%	94.2%	90.5%	92.8%	92.3%	> Target is Good	92% 87%
Safety Thermometer - % of patients with harm free care (new harm)	94.2%	96.5%	97.7%	95.4%	97.0%	97.3%	> Target is Good	92% 87%
Percentage of patients who have a VTE risk assessment	96%	96%	95%	95%	96%	95%	> Target is Good	95% 90%
WHO Checklist Usage - % Compliance	100%	100%	100%	100%	100%	100%	For Information	
Serious Incidents - No per 1000 Bed Days	0.29	0.13	0.34	0.24	0.40	0.06	< Target is Good	1.23 1.35
Number of overdue CAS and NPSA alerts	0	0	0	0	0	0	< Target is Good	0 1
<b>Mortality and Readmissions</b>								
HSMR (56 Monitored diagnoses - 12 Months)	88.9	88.4	84.8				< Target is Good	100 Neg Alert
Emergency readmissions within 30 days (PBR Rules)	7.0%	6.2%	7.4%	6.7%	6.6%		< Target is Good	10.9% 12.0%
<b>Infection Control</b>								
MRSA (incidences in month)	0	0	0	0	0	0	For Information	
CDiff Incidences (in month)	1	0	0	3	0	2	< Target is Good	on plan 1 stdev
MSSA	0	1	0	0	0	2	For Information	
E-Coli	23	16	15	23	25	23	For Information	
<b>Maternity</b>								
C Section Rate - Emergency	19%	20%	16%	18%	15%	14%	For Information	
C Section Rate - Elective	10%	8%	11%	10%	10%	11%	For Information	
Maternal Deaths	0	0	0	0	0	0	< Target is Good	0 1
Admissions of full term babies to neo-natal care	5.2%	6.0%	6.2%	7.6%	6.7%	7.5%	For Information	

## Patient Safety

- Patient safety indicators continue to show expected levels of performance although there was one medication errors causing severe harm or death in June 2014. This incident was a prescribing error which was declared an SI in early July and is currently undergoing investigation.
- There were no Never events in June 2014, however there has subsequently been a Never Event (Inappropriate administration of daily oral methotrexate) in July 2014. Immediate mitigating actions to reduce further risk have been taken while the SI investigation is undertaken.

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# Patient Safety and Clinical Effectiveness

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- Safety Thermometer – In June, 92.3% of patients were Harm free (including harm acquired prior to admission). In relation to New Harm, the percentage of patients with Harm free care improved to 97.3%.
- There were no overdue CAS alerts at the end of June.

## **Mortality and Readmissions**

- Mortality – The latest HSMR data and SHMI data both show overall Trust mortality is lower than expected for our patient group.
- Readmissions – No concerns and real-time data quality processes are in place.

## **Infection Control**

- There were no cases of MRSA in June, however, there were 2 cases of Cdiff. The Trust remains below trajectory YTD for Cdiff.

## **Maternity**

- Maternity continues to show positive performance. The recent audits are due to be presented to the Clinical Effectiveness committee in August 2014.

# Access and Responsiveness

Indicator Description	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Trigger Text	Trigger Points	
<b>Emergency Department</b>									
ED 95% in 4 hours	95.7%	94.7%	97.5%	96.8%	96.5%	96.6%	> Target is Good	95%	94%
Patients Waiting in ED for over 12 hours following DTA	0	0	0	0	0	0	< Target is Good	0	1
Ambulance Turnaround - Number Over 30 mins	97	96	72	83	105	77	For Information		
Ambulance Turnaround - Number Over 60 mins	18	6	0	9	19	0	For Information		
<b>18 Weeks RTT</b>									
RTT Admitted - 90% in 18 weeks	93.4%	92.0%	91.4%	92.9%	94.4%	94.7%	> Target is Good	90%	85%
RTT Non Admitted - 95% in 18 weeks	98.1%	98.1%	97.6%	97.4%	97.2%	96.5%	> Target is Good	95%	90%
RTT Incomplete Pathways - % under 18 weeks	96.2%	95.9%	96.2%	96.4%	96.0%	95.2%	> Target is Good	92%	87%
RTT Patients over 52 weeks on incomplete pathways	1	0	0	0	0	0	< Target is Good	0	1
Percentage of patients waiting 6 weeks or more for diagnostic	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	< Target is Good	1%	5%
% of operations cancelled on the day not treated within 28 days	1.3%	0.0%	0.0%	0.0%	0.0%	0.0%	< Target is Good	0%	3.5%
<b>Cancer Access</b>									
Cancer - TWR	94.5%	95.9%	96.1%	93.1%	93.1%	93.6%	> Target is Good	93%	88%
Cancer - TWR Breast Symptomatic	93.3%	99.2%	98.6%	93.7%	93.5%	93.7%	> Target is Good	93%	88%
Cancer - 31 Day Second or Subsequent Treatment (SURGERY)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	> Target is Good	94%	89%
Cancer - 31 Day Second or Subsequent Treatment (DRUG)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	> Target is Good	98%	93%
Cancer - 31 Day Diagnosis to Treatment	96.8%	99.0%	99.0%	100.0%	100.0%	98.1%	> Target is Good	96%	91%
Cancer - 62 Day Referral to Treatment Standard	87.8%	85.0%	95.2%	89.7%	87.0%	86.9%	> Target is Good	85%	80%
Cancer - 62 Day Referral to Treatment Screening	25.0%	50.0%	100.0%	100.0%	100.0%	100.0%	> Target is Good	90%	85%

## Emergency Department

- Emergency activity continues to drive operational pressure in the Emergency Department and inpatient bed-stock with activity remaining higher than prior year.
- In June 2014 96.6% of patients were admitted or discharged within 4 hours with no 12 hour trolley wait breaches.
- The number of ambulance hand over delays have decreased in June with 77 between 30 and 60 mins and 0 over one hour.

# Access and Responsiveness

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## Referral to Treatment (RTT) and Diagnostics

- In June 2014, all three RTT standards were achieved at aggregate Trust level with one specialty failure (Cardiology Non Admitted).
- RTT standards remain under pressure nationally and from July onwards the Trust is working to significantly reduce the number of patients on incomplete pathways over 18 weeks (the “Backlog”). This will result in both specialty and Trust level failure of the Admitted / Non Admitted RTT standards.
- Within Diagnostics, the quality standard for waits over 6 weeks was achieved.
- There were no urgent operations cancelled twice, or breaches of the 28 day target.

## Cancer Access

- All cancer standards were achieved in June 2014.

# Patient Voice and Workforce

Indicator Description	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Trigger Text	Trigger Points
<b>Patient Voice</b>								
Inpatient FFT - Net Promoter Score	76	74	80	84	82	80	For Information	
Emergency department Friends & Family (Net Promoter Score)	80	78	76	78	77	75	For Information	
Maternity FFT - Antenatal Net Promoter Score	67	62	77	71	71	68	For Information	
Maternity FFT - Delivery Net Promoter Score	79	75	76	74	71	76	For Information	
Maternity FFT - Postnatal Ward Net Promoter Score	64	44	55	47	43	51	For Information	
Maternity FFT - Postnatal Community Care Net Promoter Score	74	82	64	71	67	75	For Information	
Mixed Sex Breaches	0	0	0	0	0	0	< Target is Good	0 1
Complaints (rate per 10,000 occupied bed days)	24	27	25	16	27	22	For Information	
<b>Workforce</b>								
Average fill rate – registered nurses/midwives (%) - Day					97.3%	97.7%	For Information	
Average fill rate – care staff (%) - Day					95.6%	97.3%	For Information	
Average fill rate – registered nurses/midwives (%) - Night					97.5%	97.9%	For Information	
Average fill rate – care staff (%) - Night					96.7%	97.5%	For Information	
Overall Sickness Rate	3.9%	3.9%	3.2%	3.0%	3.3%	3.6%	< Target is Good	5.2% 5.7%
%age of staff who have had appraisal in last 12 months	81%	76%	87%	80%	82%	80%	For Information	
Staff Turnover rate	14.5%	14.8%	14.3%	14.6%	14.5%	15.0%	For Information	

## Patient Voice

- The June FFT scores for ED was +75, this is the lowest since November 2013 (the highest score to date has been January +80). For the past seven months the ED FFT scores has been between +80 and +75.
- The Inpatient score has dropped by 2 points this month to +80, the inpatient FFT scores have been between +84 and +80 for the last four months.
- The June maternity FFT scores are +77 for delivery and +75 for postnatal community care, both of these are improvements on the May scores. The score of +68 for antenatal care represents a small drop (down from +71) and the +51 score for the postnatal ward is an improvement on +43 in May.
- National Friends and Family Test (FFT) data for May was released in early July. The +77 May score for the Emergency Department (ED) again placed it 11<sup>th</sup> best in the country. The May inpatient score of +82 meant that the Trust score was above the national average of +74.

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## Patient Voice and Workforce

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- In maternity our May FFT scores are above the national average for antenatal and delivery (+71 and +71 against a national average of +67). However the postnatal ward score remains somewhat below the national average (+43 compared to a national average of +67).
- There were no Mixed Sex Breaches in June 2014.

### Workforce

- The Trust continues to monitor ward nursing (numbers and skill mix) on a daily basis and is assured that adequate staffing is in place. This data is submitted to Unify and published on NHS Choices and at ward level on the Trust's website.
- Staff Turnover has slightly increased in June to 15%. HR Business Partners within the divisions continue to support improvements in recruitment and retention.
- The percentage of staff having had an appraisal within the last 12 months has decreased slightly in June to 80%. Improvements are being introduced to manager notifications and also monthly training sessions for newly appointed managers.
- Sickness absence increased slightly to 3.6% in June 2014.

# Finance

Indicator Description	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	YTD	Trigger Basis
	M10	M11	M12	M01	M02	M03	RAG	
<b>Overall Financial Position</b>								
- Outturn £m Surplus / (Deficit) - Plan	0.0	0.0	0.0	2.3	2.3	2.3		
- Outturn £m Surplus / (Deficit) - Forecast	0.3	0.3	0.3	2.3	2.3	2.3	G	Red is a deficit < (0.1)% income
- YTD £m Surplus / (Deficit) - Plan	0.0	0.0	0.0	(0.9)	(1.7)	(2.8)		
- YTD £m Surplus / (Deficit) - Actual	0.3	0.3	0.3	(0.9)	(1.7)	(2.8)	G	Red is a variance < (0.1)%
- Outturn UNDERLYING £m Surplus / (Deficit) - Plan	(3.5)	(3.5)	(3.5)	3.4	3.4	3.4		
- Outturn UNDERLYING £m Surplus / (Deficit) - Actual	(4.3)	(4.3)	(4.3)	3.4	3.4	3.4	G	Red is a variance <£(0.5m)
- YTD Savings £m - Actual	8.7	9.9	11.1	0.4	0.6	1.1	G	Red is adverse <(1.0)%
- OT Risk £m Surplus / (Deficit) - Assessment	(5.5)	(4.3)	0.0	(8.5)	(8.0)	(8.0)	R	Red is a deficit <£(0.5m)
- Outturn Cash position £m Fav / (Adv) - Forecast	2.6	2.6	2.6	2.6	2.6	2.6	G	Red is <£(0.6)m adv to plan and <£0.6m)
- YTD Cash position £m Fav / (Adv) - Actual	3.8	8.3	2.6	2.9	2.6	2.4	G	Red is <£(0.6)m adv to plan and <£0.6m)
- YTD Liquid ratio - days	(1.0)	(1.0)	(13.0)	(16.0)	(15.0)	(18.0)	R	Red is <(15) days Green is >15 days
- YTD BPPC (overall) value £m	84%	84%	85%	94%	94%	94%	A	Red is <85% Green is >95%
- YTD BPPC (overall) volume £m	84%	84%	85%	87%	89%	90%	A	Red is <85% Green is >95%
- Outturn Capital spend Fav / (Adv) - forecast	16.4	16.4	16.4	19.3	19.3	19.3	G	Red is <£(0.5m) adv to plan

- The Trust continues to be on plan at Month 3 with a (£2.8)m deficit.
- The Divisional positions continue to worsen, noting that red rated savings schemes provide much of the adverse variance and part of the cost (particularly on non-pay) is balanced by income from activity. However, emergency activity remains unseasonably high providing other pressures.
- Revised financial forecast scenarios will be presented to the Board shortly, but currently the Trust is forecasting delivery of its planned surplus. There is, however, risk to this position from the balance of emergency activity and cost improvement delivery
- The cost improvement plan for the year is £11.0m and in June £1.1m was achieved. This is (£0.4)m below the Trust's "stretch" plan (to get ahead of the profile), but remains ahead of the TDA Plan for Month 3.
- The cash balance at the end of June 2014 was £2.4m, slightly ahead of the planned position.
- The capital forecast is spend of £19.3m. This includes the (now confirmed) £0.9m carried forward from last year for theatres.