NHS
Fareham and Gosport
and South Eastern Hampshire
Clinical Commissioning Groups

System Information Group
Summary Performance report
## 14th September 2016

Overall Programme

- Performance indicators have been identified by each organisation through their information lead and are under development to form a system wide report. Whilst it has been agreed by SRG members that information would be provided for the July performance report, data feeds for a number of the second level measures has not been received.
- The SRG Information Group have provided analysis on some of the indicators and request members of the Operational Group review and provide context and actions prior to the SRG Board
- As part of the wider development programme SRG members have received Tableau read access which will provide an interactive file updated weekly covering
    - PHT A&E data,
    - SCAS data
    - and if agreed, inpatient and SHFT data set (mid October).
- This can be viewed at postcode, local super output level, GP practice and CCG. Data can be cut by age, gender, method of arrival, time and day etc.
- SRG work stream groups are receiving support to utilise Tableau to identify areas of work and evaluate scheme success.
- As part of the Information Group role specific BI support will be provided to prioritised programmes.
- Further work to embed quality indicators in this report for all elements of the system is underway. The proposal was to include this data in the August report but this has been delayed.

Current Overall Metrics

Indicator	Target	WC 2.5	9.5.16	16.5	23.5	30.5	6.6	13.6	20.6.	27.6	04.7	11.07	18.7	25.7	1.8	8.8	15.8	22.9	29.9
Attendance rate	2709	2815	2819	2724	2826	2824	2828	2728	2679	2745	2902	2975	2912	2827	2755	2669	2866	2787	2769
Frail elderly attendances	483	474	414	458	464	488	459	416	448	450	445	491	520	464	445	509	502	432	444
Ambulance conveyance rate	49.8%	48.8%	48.8%	28.4%	50.9%	48.6%	42.2%	50.3%	50.3%	49.2%	49.2%	49.2%	49.2%	49.2%	51.7%	50.4%	47.3%	48.3%	48.5%
Patients seen within 4 hours	95%	72.6%	78.1%	84.9%	87.3%	77.7%	83.3%	85.1%	79.6%	77.1%	79.4%	78.4%	83.1%	83.1%	83.2%	76.4%	83.7%	79.2%	82%
Type 1 conversion rate	33%	31.4%	30.2%	31.9%	34.6%	32.8%	31.9%	33.7%	34.6%	32.4%	29.7%	30.5%	30.2%	29.9%	31.5%	32.8%	33%	33.6%	32.7%
Avoidable breaches: Minors	0	67	67	52	36	66	67	23	30	95	93	61	26	35	49	47	63	26	32
Avoidable breaches: Non-admitted	77	118	122	66	153	212	149	128	180	210	210	265	169	167	200	239	208	263	224
Breaches awaiting specialty opinion	21	49	52	19	22	32	38	20	33	32	30	32	40	28	24	45	27	38	33
Length of stay >7 days (PHT)	410	505	491	488	477	489	474	472	479	482	425	465	481	492	483	482	461	457	484
Length of stay >14 days (PHT)	190	322	324	310	320	322	310	305	304	324	288	309	304	307	315	333	314	301	308
Discharges (Weekday)	575	583	603	703	695	595	663	658	695	674	651	591	591	593	654	618	642	643	612
Discharges (Weekend)	192	176	195	193	189	176	167	196	188	197	167	93	84	161	149	164	173	182	172
Medically Fit for Discharge (Daily Average)	64	143	N/A	158	143	191	196	200	202	N/A	208	195	177	189	225	231	234	227	208
Community Average Length of stay (Spinnaker)	20	21.4	1	22.8	24.5	14.8	13.5	25.6	24.3	22.3	29.4	9.2	9.2	15.6	22.9	N/A	23	20	19.3
Community Average Length of stay (Rowan)	20	14.6	21	21.6	22.1	N/A	13.7	13.1	12	10.3	6	16.9	16.4	9.7	15.8	32.8	31	24.8	15
Community Average Length of stay (Sultan)	20	12.3	N/A	19.5	40	21.5	25	27	18	16.9	24	20.8	12.1	16.8	26	11.9	13.8	16.6	20
Community Average Length of stay (Cedar)	20	23.6	16.7	23	22	68	22.3	32.5	13	12.3	33	31.5	8.5	N/A	48.7	44.4	21.7	48.4	33.5
Community Average Length of stay (Ark Royal)	20	42.3	25.4	42.5	34	33.5	30.5	34	36.5	39.2	25	24.3	45.5	11	24.7	30.5	14	27.5	32.2

SCAS Red Activity


SCAS Red Demand

Data Source: SCAS
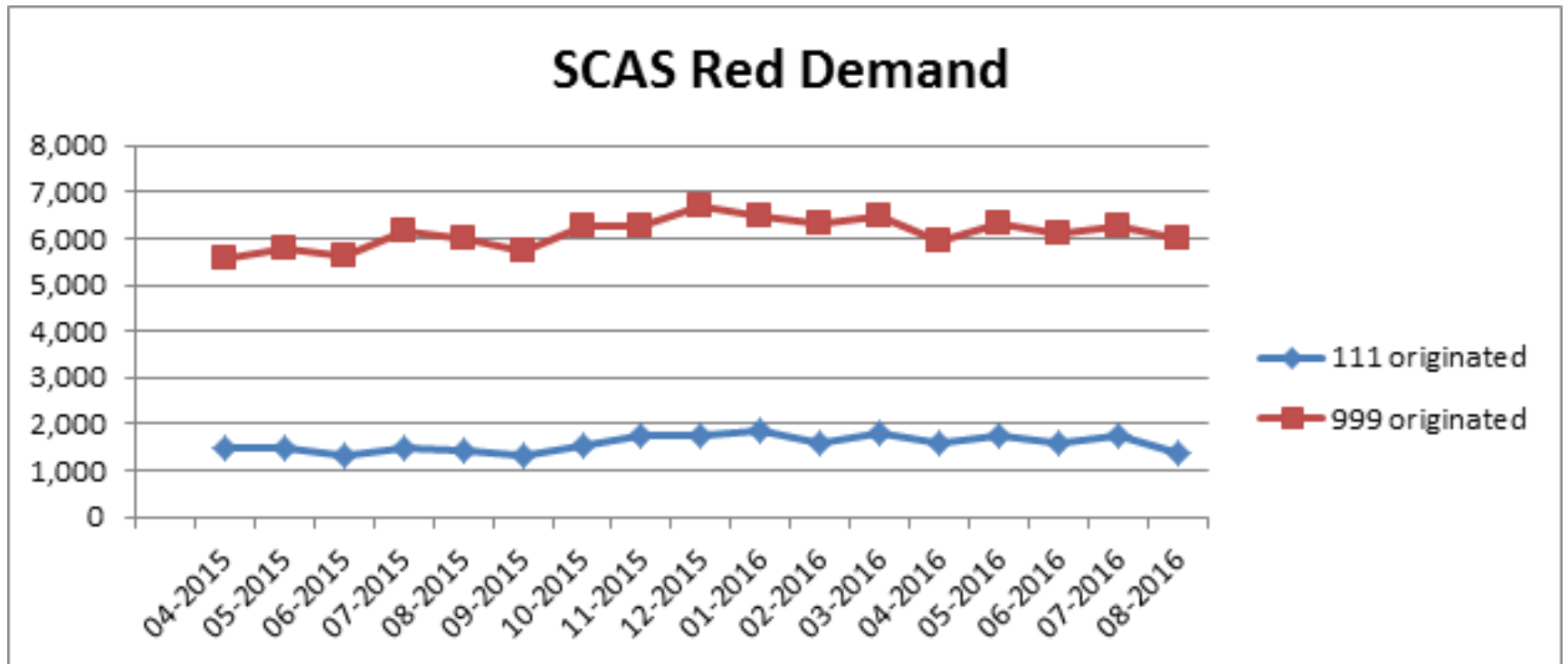
A&E Performance at PHT
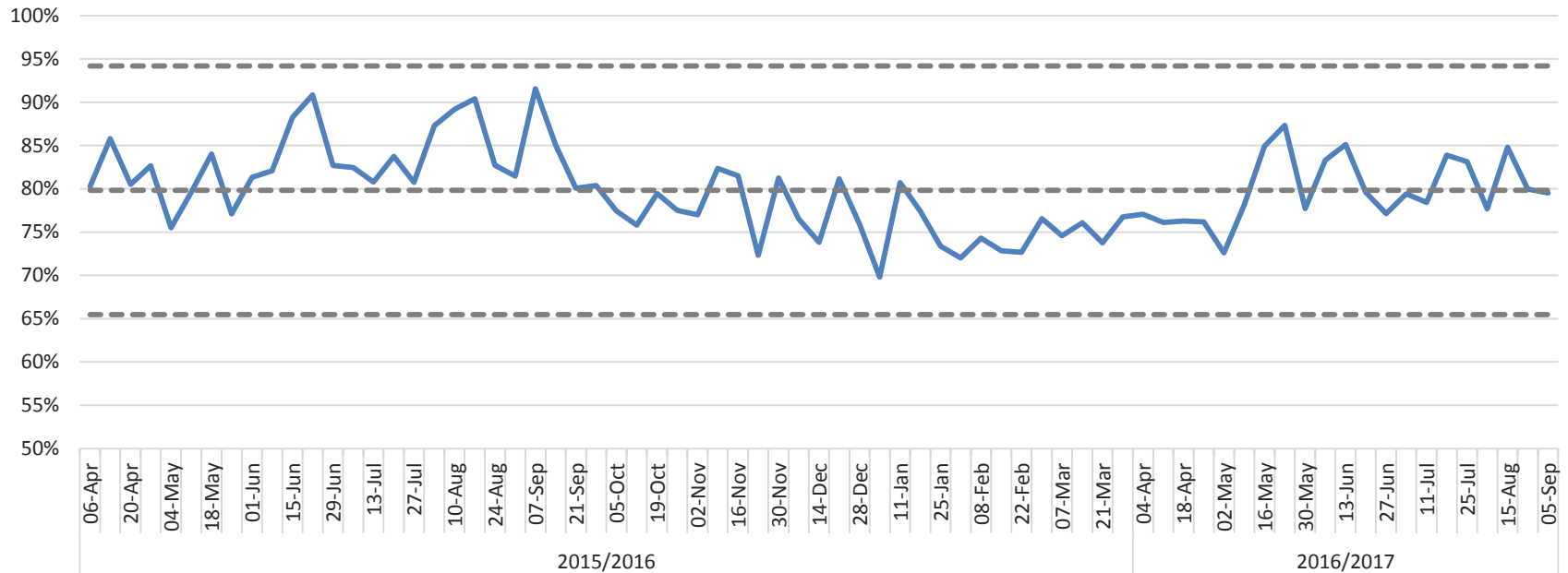
- Since mid-May A&E performance has shown some improvement and attendances broadly consistent with a slight increase in the beginning of July.

- For the month of August, A&E performance was 81.33% - which is the highest performing month since Sept 2015. Performance is below the same time last year – which was 86.21%.

- There have been no 12 hour trolley breaches.

Data Source: PHT

A&E Attendances at PHT
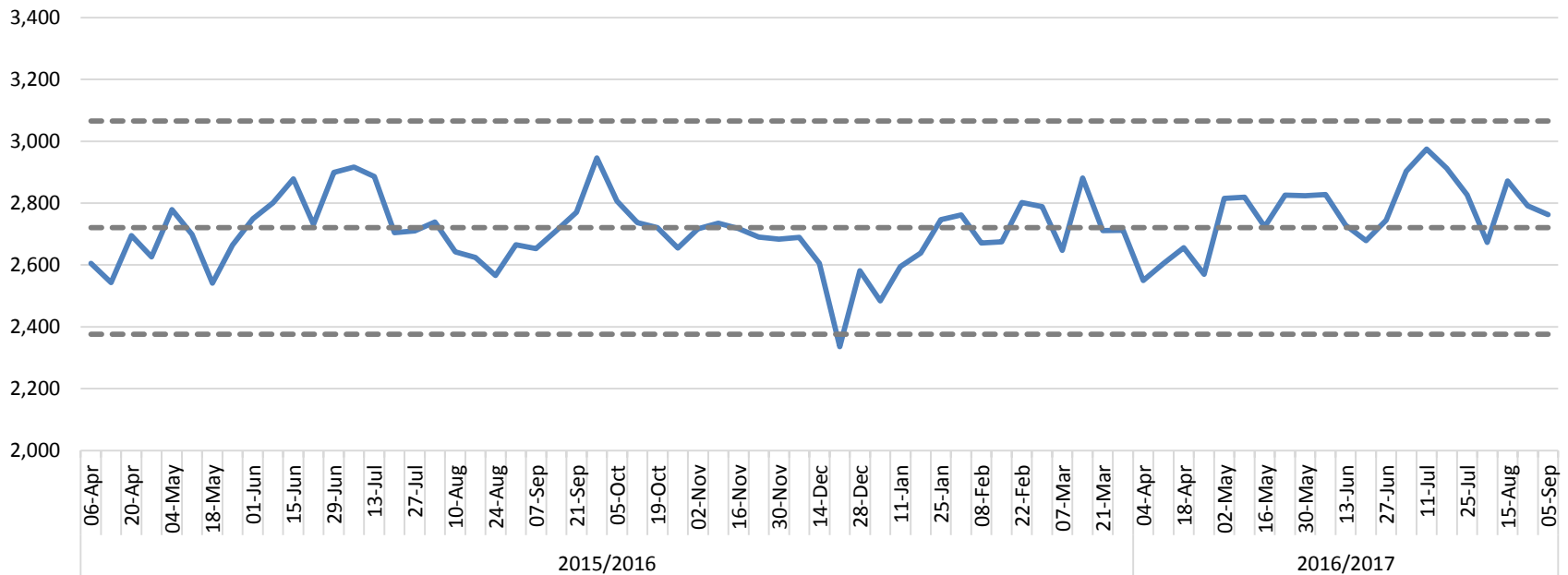
- Attendances activity is currently demonstrating the expected summer increase, replicating that seen at the same period last year.

- Average A&E activity over the last 17 months is 389 patients a day, approximately 307 of which are type 1 attendances.

- 15 minute triage has improved in the last 4 weeks but yet to flow through to impact on admissions. This may be due to the minors pilot.

Data Source: PHT

PHT Bed Occupancy (AMU/Medicine/MOPRS)
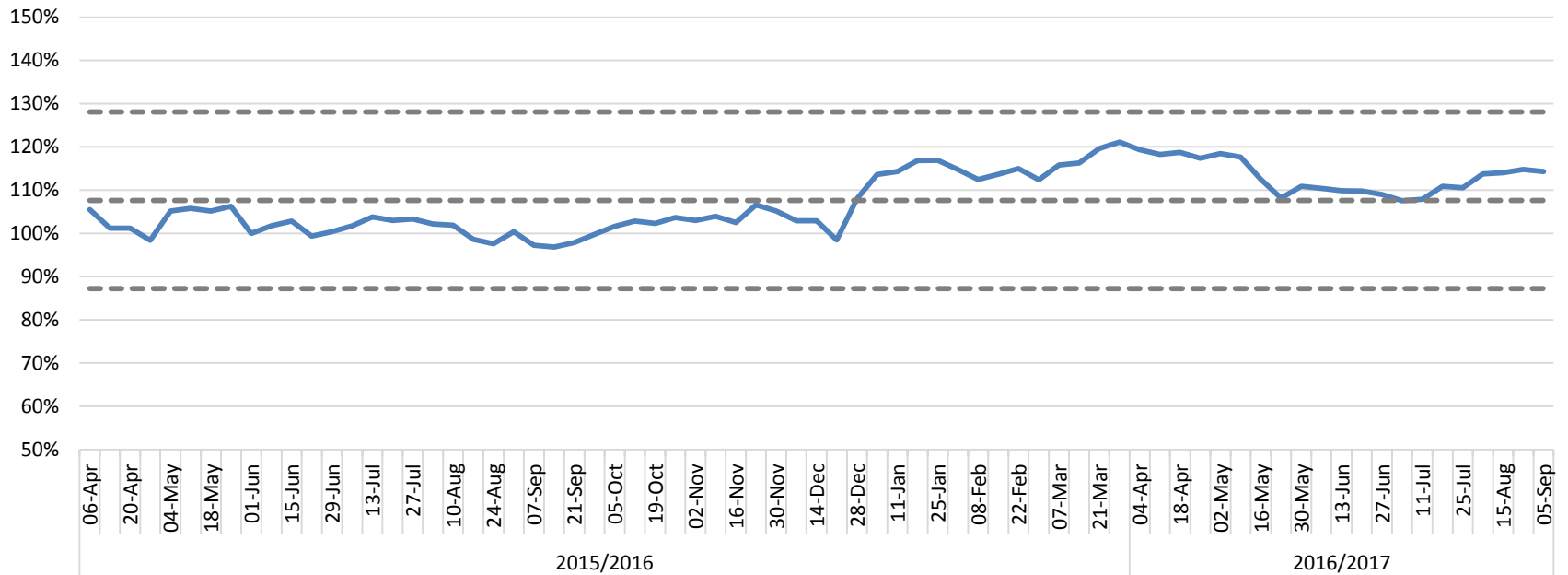
Bed Occupancy (AMU)
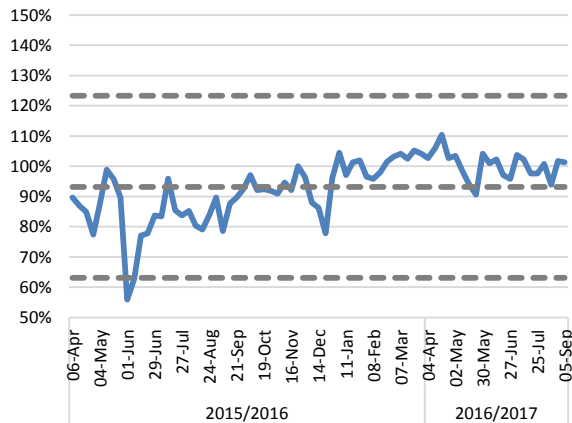
Bed Occupancy (Medicine)
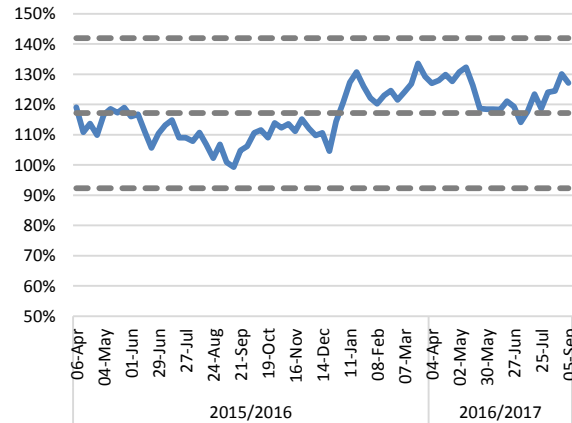
Bed Occupancy (MOPRS)

Data Source: PHT
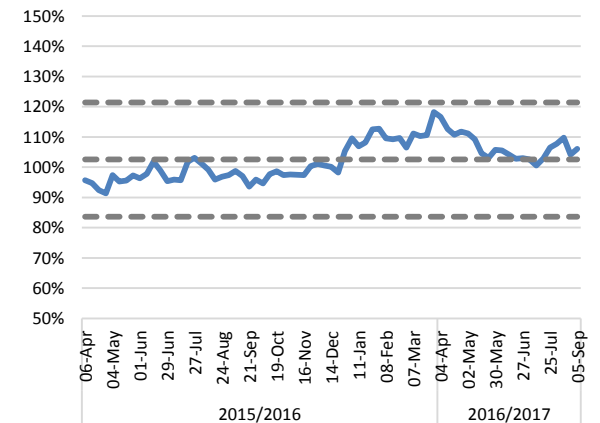
PHT Delayed Transfers of Care

Approximate Monthly DTOC Rate
(Calculated using monthly DTOC submissions and quarterly occupied bed figures)
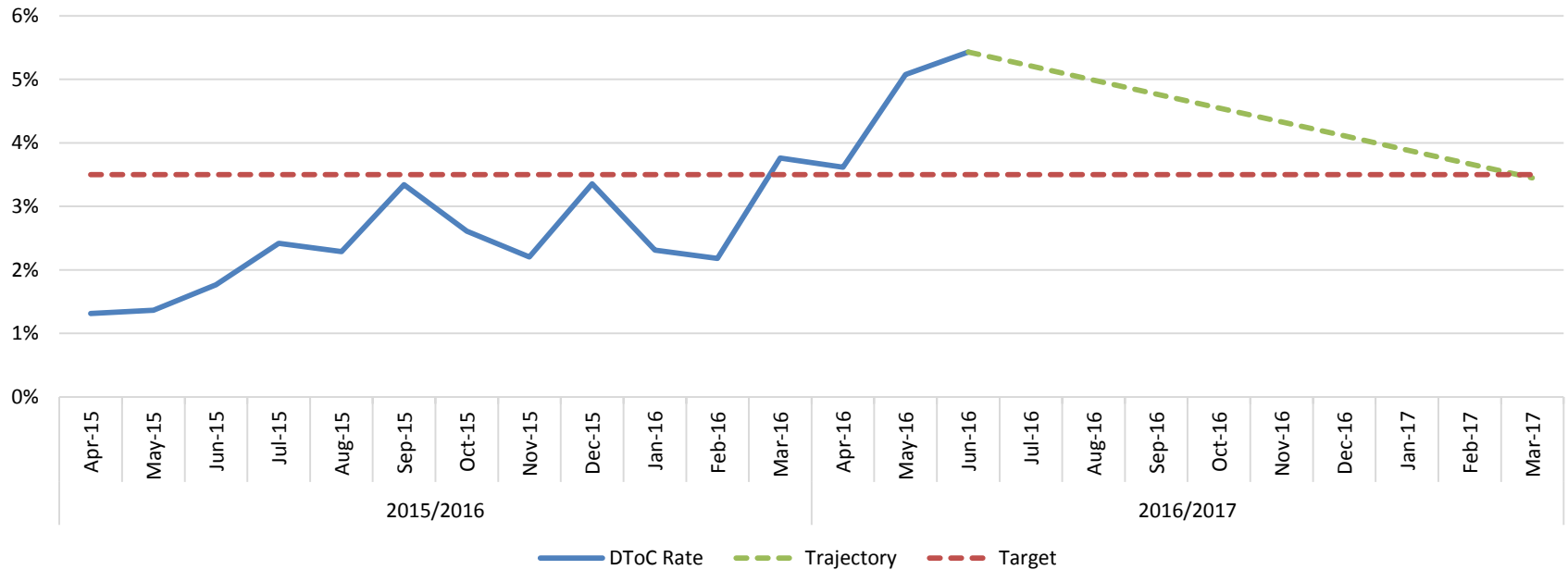
- The delayed transfers of care rate has continued to rise during August. Work to manage the current backlog is beginning to take effect and there has been a reduction in days lost since the last week in August.
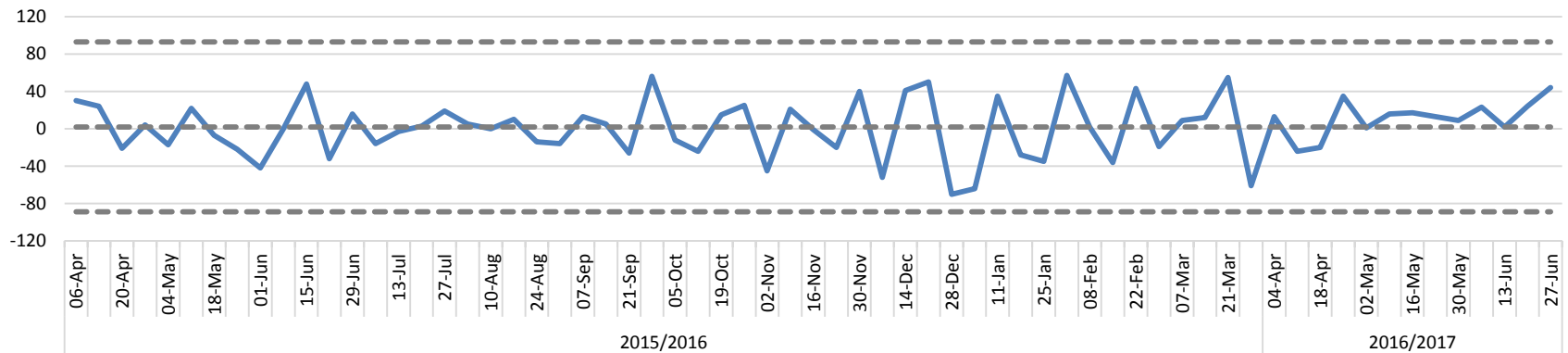
Admissions & Discharges

Admissions
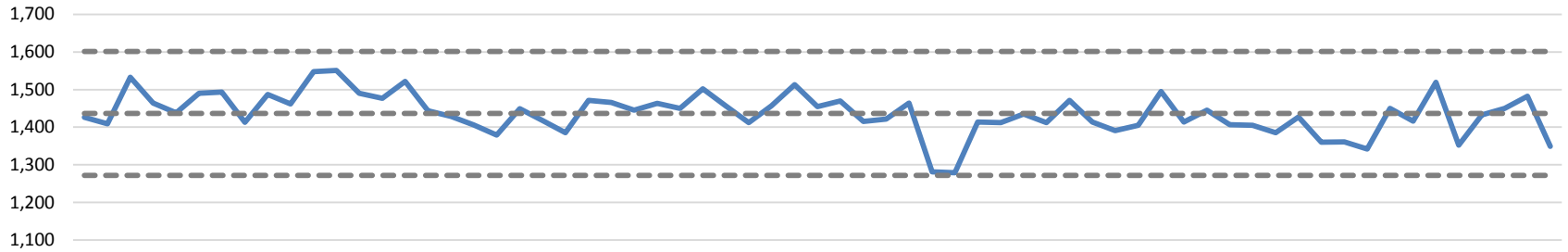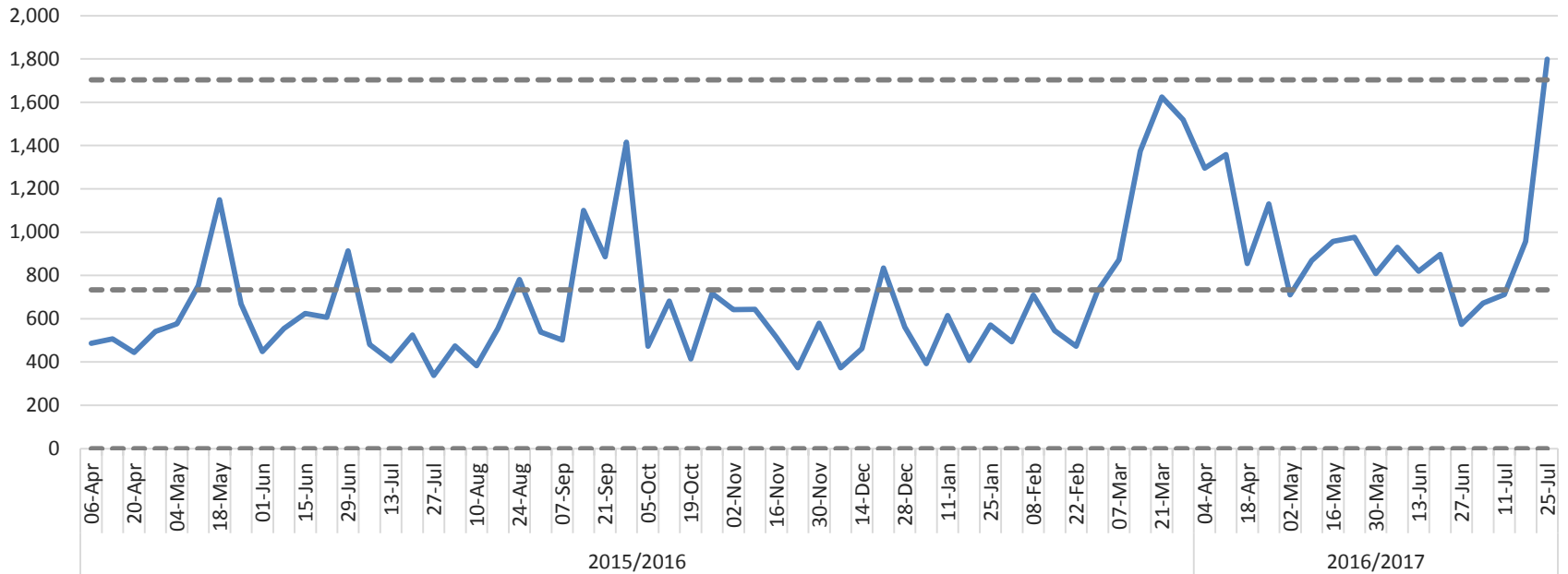

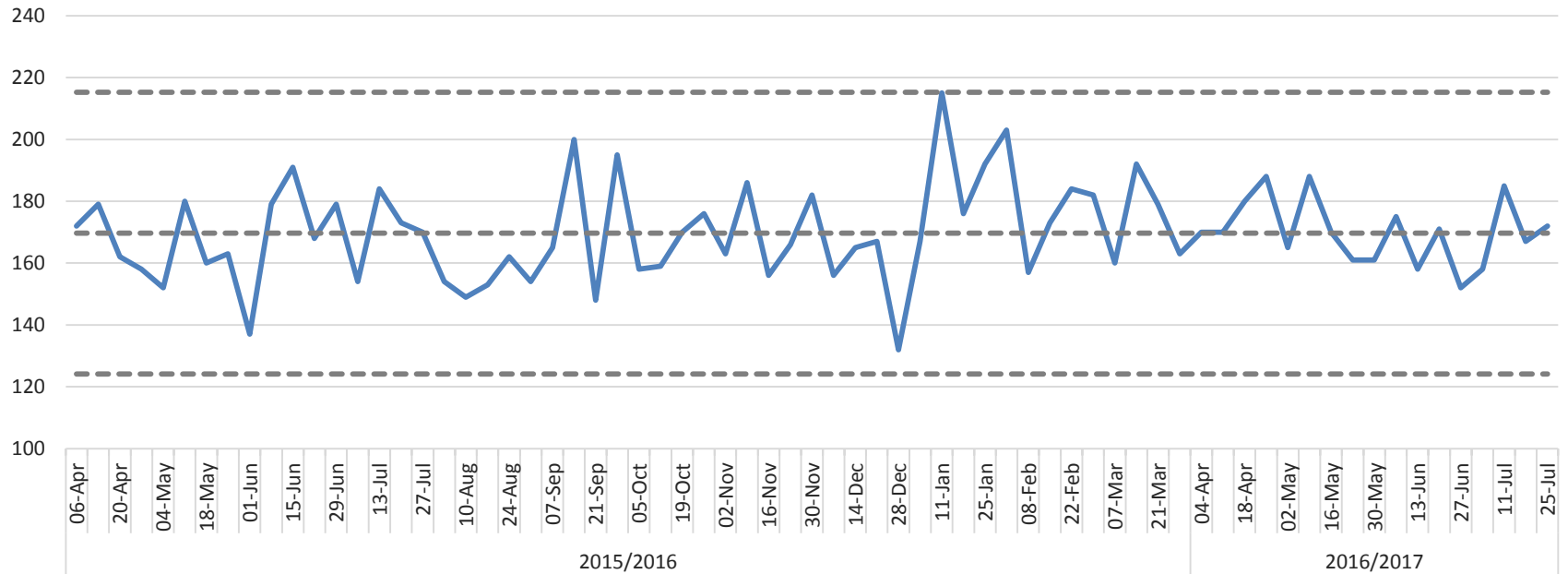## Discharges

Variation

2015/2016   2016/2017
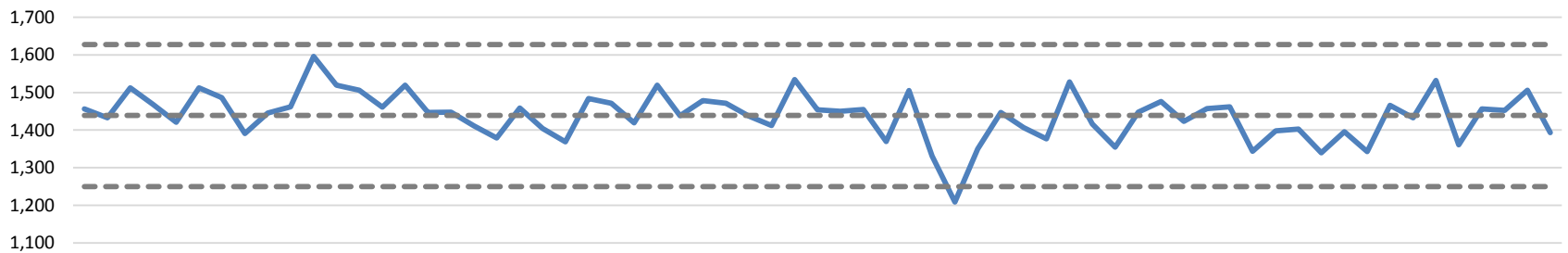
Data Source: SUS PbR Mart (admissions data not received until patients are discharged, so latest weeks removed for consistency)

Excess Bed Days

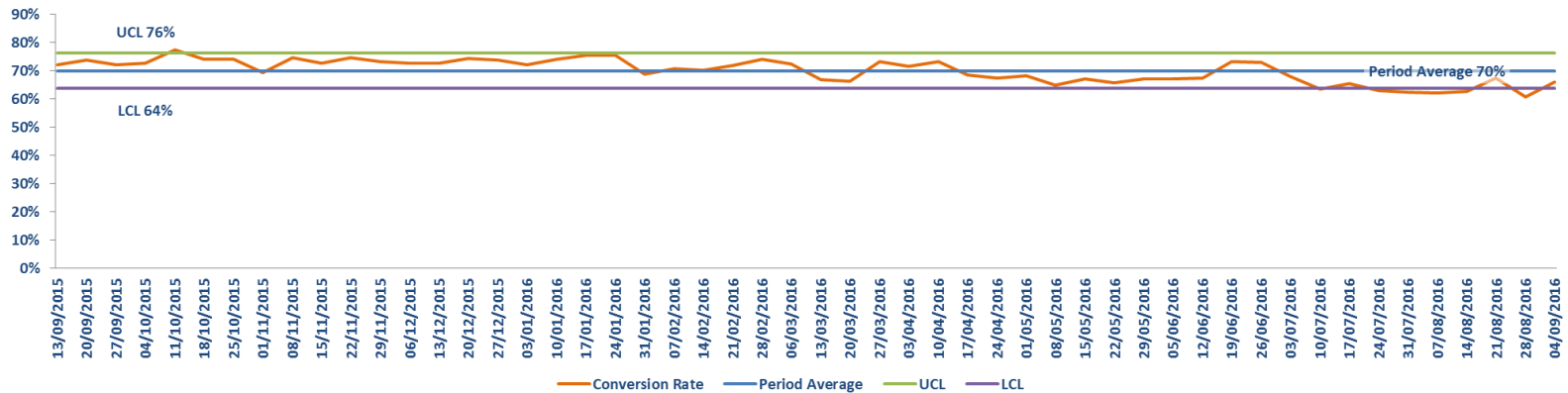Data Source: SUS PbR Mart (XBDs applied to week in which discharge takes place)

Stranded Patients

Data Source: SUS PbR Mart (stranded patients counted in week in which discharge takes place)

Frailty Interface Team

A&E Conversion Rate By Week Ending

- There is a sustained reduction in conversion rates for >85 year olds from April onwards, when geriatrician presence was introduced in FIT.
- Average waiting times in ED for >85 year olds has reduced, and shows improved compliance with the 4 hour target. This shows that early identification and assessment of frailty is improving the pathway and timeliness of intervention.
- There are continued, sustained volumes of patients attending ED, for the >75 year olds, showing that reduced conversions is not linked to reduced attendances.
- There is no significant change in re-attendances for >75 year olds, showing that the clinical decision making in FIT to turn around patients promptly, is not resulting in increased re-admissions within 30 days.

## % Discharges With LOS <=72 Hours By Week Ending
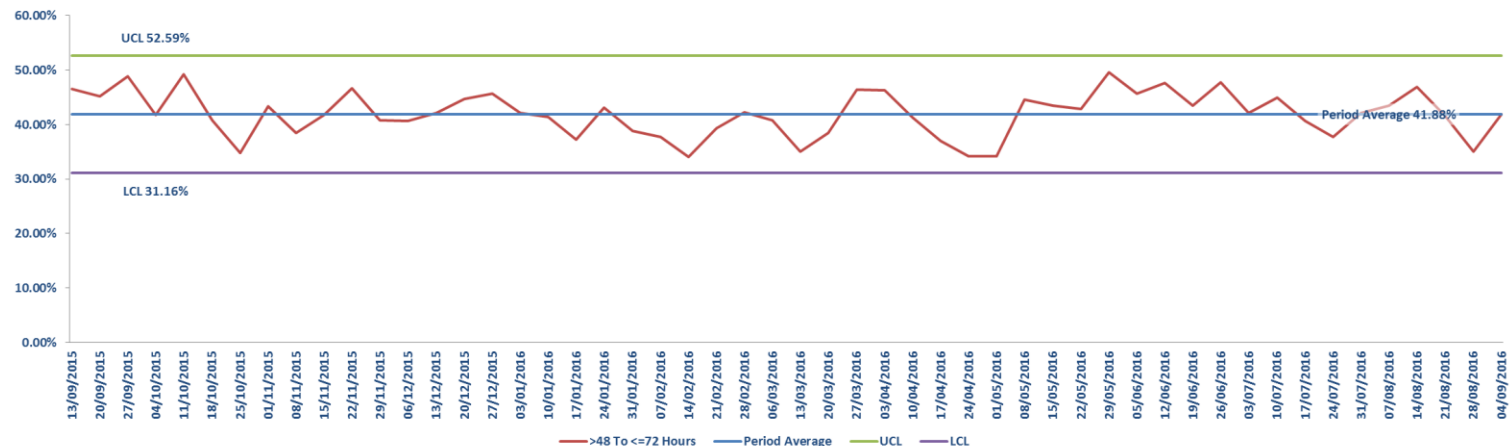
Community Referrals: Southern Health
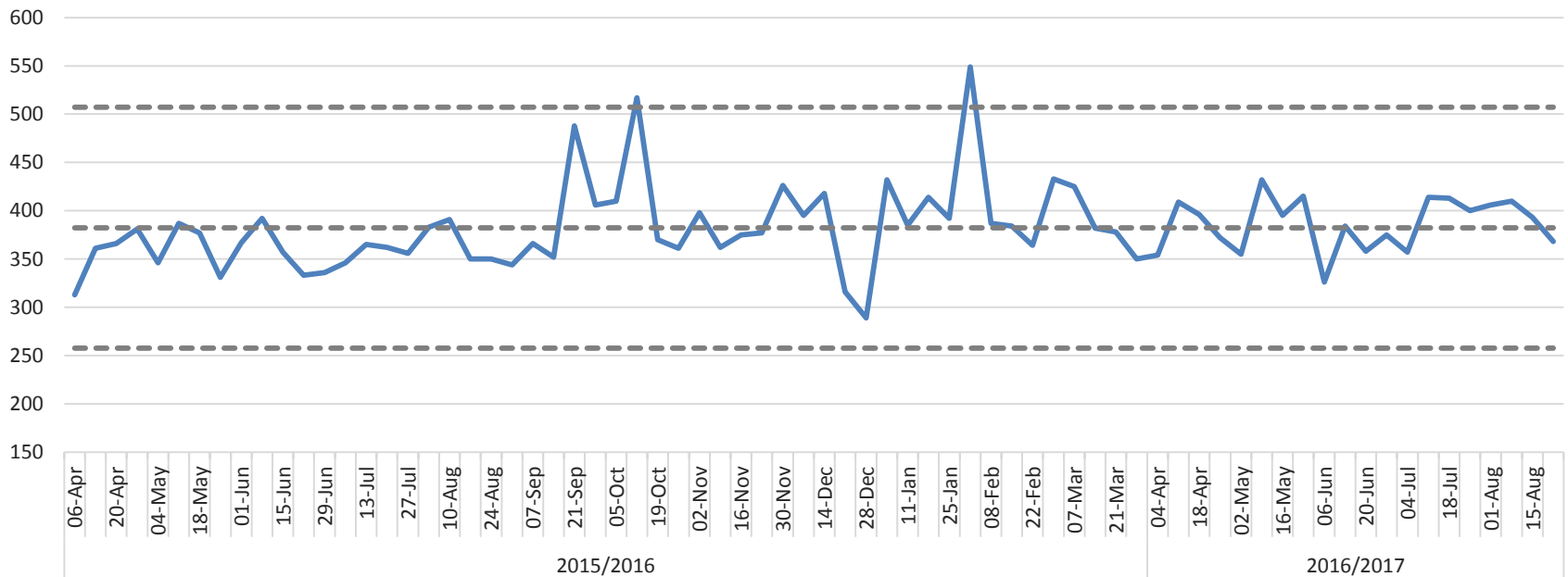
- The increasing trend reflects the increase in referrals from QA Hospital in relation to Discharge to Assess and the increased capacity to deliver packages of care from carers within the team. 70% of referrals to the team come from QA Hospital.

Data Source: Southern Health

Southern Health DTOC OPMH
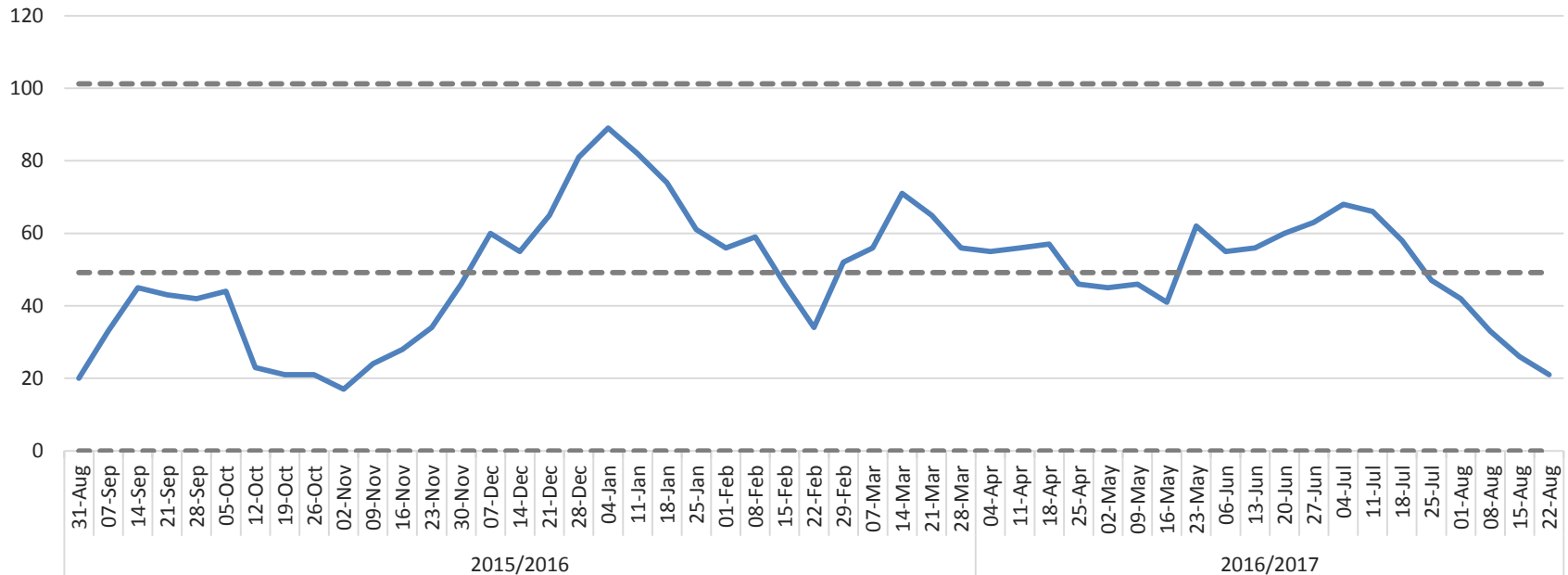
- In response to the increasing trend in DTOCs, the Division introduced a weekly conference call with the respective Ward Mangers to support them in escalating blockages and delays.

- We worked closely with our partners in Adult Service and established direct contact between named Social Workers and Ward Managers.

- Long term placement for patients with behavioural problems associated with their dementia remains challenging, although planning earlier and timely escalation of blockages maintains the improvement noted.

Data Source: Southern Health

Community Referrals: Solent
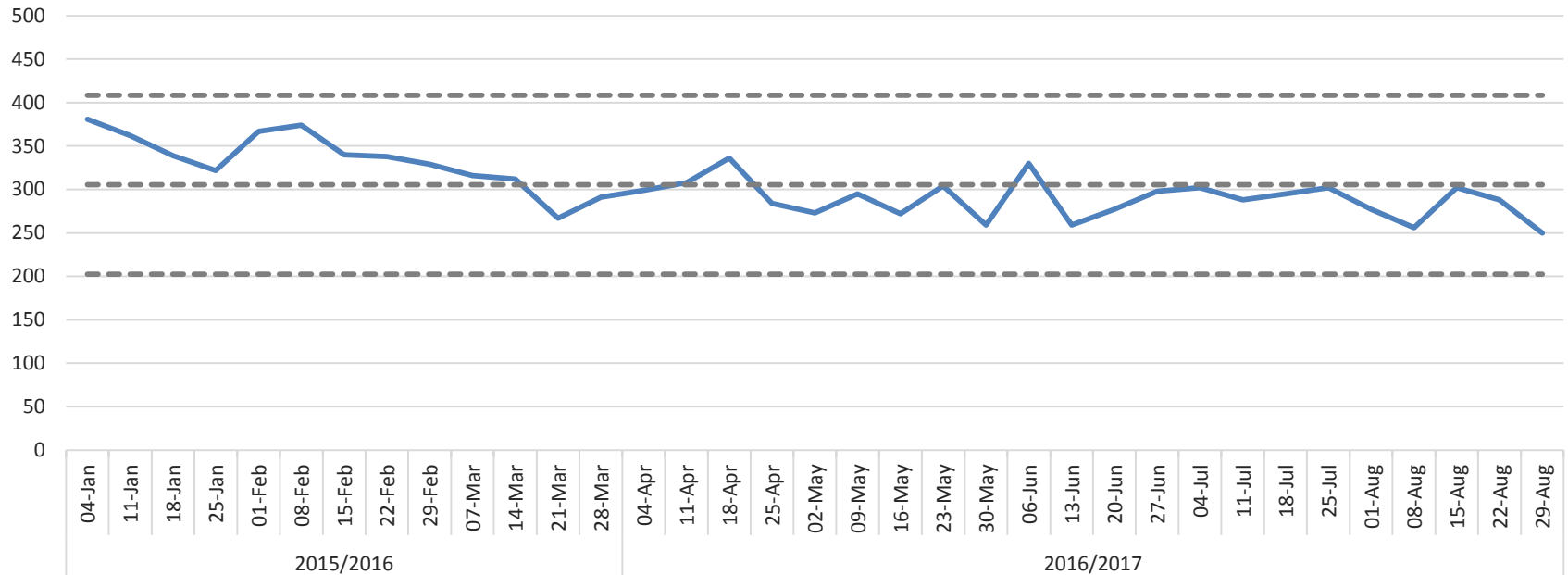
Despite stable trend in new referrals Community Nursing caseload has shown sustained increase since early July; work is being undertaken to validate alongside implementation of revised service specification.

Spinnaker - August 16	
Available Bed Days in Month	460
Occupied Bed Days	496
% Occupied in Month	93 %
Length of Stay Discharged Pts	440
ALOS of Discharged Pts in Month	22
Delayed Transfers of Care	0

Data Source: Solent