

TRUST BOARD
31st January 2013

TITLE	Balanced Scorecard for January (reporting Decembers' data)
EXECUTIVE SUMMARY	In December the Trust continued to meet the emergency access target (95.9%). The Trust has now achieved £3.96m surplus year to date against a target of £4.6m. The forecast for the year end remains at £3.3million. December's finances were under plan by £0.2 million. The FRR remained at 4 which is in-line with the plan and it is expected to be 3 by the year end.
BOARD ASSURANCE (RISK)/ IMPLICATIONS	The paper highlights the key measures the Trust monitors itself against and outlines the actions being taken where necessary.
STAKEHOLDER/ PATIENT IMPACT AND VIEWS	N/A
EQUALITY AND DIVERSITY ISSUES	N/A
LEGAL ISSUES	N/A
The Trust Board is asked to:	Discuss the paper.
Submitted by:	David Fluck, Medical Director Raj Bhamber, Director of Workforce and OD Simon Marshall, Director of Finance and information
Date:	23 rd January 2013
Decision:	For Discussion

TRUST BOARD**31st January 2013****Balanced Scorecard****Scorecard Commentary – December**

As with the previous month the Trust's underlying internal objectives for 2012/13 remain as:

- Ensure the emergency pathway is improved to ensure an efficient flow of patients and as a result meets all national targets
- Ensure the financial plan is met.

In December the Trust continued to meet the emergency access target (95.9%). The Operations Team are now focused on reviewing the surgical emergency pathway and the paediatric pathway. The Trust has engaged a part time project manager to work with a dedicated clinical lead to review the surgical pathway. The Paediatric department has reviewed its pathway and its making changes from the middle of January. The change will increase the number of patients seen in an ambulatory model rather than them being formally admitted to the hospital. The Trust has now achieved £3.96m surplus year to date against a target of £4.6m. The forecast for the year end remains at £3.3million. December's finances were under plan by £0.2 million. The FRR remained at 4 which is in-line with the plan and it is expected to be 3 by the year end.

The SHMI mortality rate for December was 73 bringing the year to date position to 62. The RAMI score for December was 108. This is high score is as a result of 20 un-coded deaths at the time of the data being pulled for this report. Following coding the new score is 89.2.

There were 27 complaints in December bringing the year to date total to 339. Therefore the Trust is forecasting to achieve its target of receiving less than 500 complaints by year end.

With one case of C-difficile in December, our year to date total is at eleven. The forecast for the year end is that the Trust will achieve the target. There were no cases of MRSA in December, keeping the year to date total to two against a target of one. Due to the low target level, Monitor does not reduce the governance rating until there are more than six cases in a year. The Trust continues to have higher levels of falls than it would like. One of the falls in December resulted in harm. The Trust is predicting that it will not achieve its own target. The falls reduction campaign has started as planned with increasing awareness of the issue on the wards. There is a falls conference planned for early February where detailed actions will be created to reduce the incidence rate.

Two patients had hospital acquired VTE's in December. This brings the year to date figure to 19, which is above the year-end target of 12. The Trust has appointed a VTE nurse whose primary role will be on working with the clinical teams to reduce the incidence of VTE's within the hospital.

During November ASPH continued to achieve all the key Monitor targets within the compliance framework including the four hour emergency access standard (95.9%). The A&E conversion rate remained at below target levels at 23% as a result of the changes to the clinical pathway. The clinical pathway changes also continue to have a positive effect on the use of ambulatory care pathways where usage remained at the target level of 29.7%.

Emergency work continues to significantly over perform against plan, with the year to date activity now 8% above plan (last month 7.7% above YTD plan). The increasing over performance is in part due to PCT QIPP schemes not being as effective as planned (£0.4m plan relating to Emergency pathways in the month, and £2.7m year to date). Elective work dropped month on month and is now at 0.3% above YTD plan (last month 1.8% above YTD plan). This was largely due to patients cancelling elective procedures during the holidays in the surgical specialties, as well as the suspension of elective work for 2 weeks in December in Trauma & Orthopaedics. There was a 6% increase in A&E attendances in December; however, since the plan increased the YTD activity variance has decreased to 3% above plan (last month 4.7% above plan). Maternity income continues to come in below plan, as the birth rate remains below plan and activity is 2.3% below plan (last month was 1.6% below YTD plan), and marginally below prior year (0.4% below 2011/12 YTD). Overall, activity income is now gross £6m ahead of plan year to date and an estimate has been made to reduce this to allow for increased NEL cap penalties (now £2m higher than plan YTD). The plan YTD assumes PCT QIPP of £4.2m (out of a full year total of £6.5m, with £0.7m of schemes scheduled to start in month 9).

Following the outcome of the audit with NHS Surrey the readmissions penalty rate has been set at 22.5%. This generates a fine to the Trust of £2.7 million for 2012/13.

Reported market share performance remains stable though it should be noted that this does not include the effect of EDICS who do not report their activity to SUS. Vascular market share declined in December, but remains high year to date. Bariatric surgery has now crept above the target level, due to a high activity month. As a result of the specialist commissioning guidance in relation to many services the Trust provides, a plan will need to be developed over the next few months to ensure that these services can continue to be provided. Plans to increase general market share within Surrey are being focused on two areas; West Byfleet and Cobham.

The establishment reduction (24 wte) is attributable to the workforce reconciliation of Surrey Pathology Service. Agency usage remains above target and is supported by an action plan which is being driven by the Chief Nurse, Medical Director and Deputy Chief Executive. Cumulative turnover (leavers in the previous 12 months) is above target due to the use of fixed term contracts to support organisational change, whilst the number of leavers last

month reduced from 45 to 30 (a positive trend). Mandatory training compliance is adverse in comparison with last month and may be due to difficulties with reporting (urgently under investigation).

Trust Balanced Scorecard - December 2012

1. To achieve the highest possible quality of care and treatment for our patients

Patient Safety & Quality	Annual Target 12/13	Annual Forecast 12/13	Dec Actual	Performance			YTD 12/13	
				Oct	Nov	Dec		
1-01 Summary Hospital-level Mortality Indicator (SHMI)	N	<100	<100	73	▼	◀▶	▼	62
1-02 Risk Adjusted Mortality Index (RAMI)	N	<100	<100	89.2	▼	▲	▼	66
1-03 Crude mortality (Excluding readmissions)	L	1.6	<1.6	1.9%	▼	▼	▼	1.6%
1-05 MRSA (Hospital only)	N	1	2	0	▼	▲	◀▶	2
1-06 C.Diff (Hospital only)	N	20	18	1	▼	▲	▼	11
1-07 VTE (hospital acquired with PE or DVT)	L	14	23	2	◀▶	▲	◀▶	19
1-08 Serious Incidents Requiring Investigation (SIRI)	L	75	83	4	▼	▲	◀▶	54
1-09 SIRI Grade 2 (proportion of total SIRI)	L	13.0%	13.0%	0.0%	▲	▼	▲	13%
1-10 Falls (Total Number)	L	462	701	69	▲	▼	▼	544
1-11 Falls - resulting in significant injury (grade 3)	L	<15	15	1	◀▶	▲	◀▶	12
1-12 Stroke Patients (90% of stay on Stroke Unit)	N	80.0%	80.0%	83.3%	▼	▲	▼	84.0%
1-13 Average Bed Occupancy (inc escalation)	L	92.0%	88.4%	87.1%	▲	▲	▲	88.4%
1-14 Patient Moves (ward changes >=3)	L	<7.5%	7.3%	7.2%	▼	◀▶	▲	7.3%
1-15 Patient Satisfaction (NetPromoter Score)	L	65%	60.0%	-	◀▶	▼		60%
1-16 Formal complaints (Total Number)	L	<500	451	27	▼	▼	▲	339
1-17 Formal complaints (rate per discharge - IP only)	L	0.44%	0.52%	0.17%	▼	▲	▲	0.52%

1-08 Target Adjusted to 75 as per Suzanne Rankin

1-14 Target Adjusted to <7.5% as per Suzanne Rankin

1-15 Your Feedback submissions ceased during December 2012, Family and Friends Test to replace

3. To deliver the Trust's clinical strategy of joined up healthcare

Clinical Strategy	Annual Target 12/13	Annual Forecast 12/13	Dec Actual	Performance			YTD 12/13	
				Oct	Nov	Dec		
3-01 Attendances at RAC	L	844	967	92	▲	▼	◀▶	728
3-02 Admissions from Nursing Homes (emergency adm)		5.3%	4.3%	4.1%	▲	▼	◀▶	4.3%
3-03 Trust 4Hr Target *	N	95.0%	95.0%	95.9%	▲	▼	▲	96.2%
3-04 Emergency Conversion Rate	C	23.8%	25.2%	23.5%	▲	▲	▼	24.1%
3-05 Ambulatory Care Pathways*	N	30.0%	26.9%	29.7%	▲	▼	▲	27%
3-06 Readmissions within 30 days - Elective	N	3.15%	3.2%	3.39%	▲	▼	▼	3.21%
3-07 Readmissions within 30 days - Emergency	N	12.60%	14.0%	12.05%	▼	▲	▼	13.97%
3-08 Discharge Rate at weekends *	C	13.50%	15.0%	17.97%	▼	▼	▲	14.28%
3-09 Day Surgery Rate (BADs procedures)	N	85%	85%	84.2%	▼	▲	▼	84.2%
3-10 Overall Elective Market Share*	L	>66%	64.1%	62.5%	▼	▼	▼	64.1%
3-11 Overall Elective Market Share (Bariatric)*	L	30%	30.2%	36.4%	▲	▲	▼	30.2%
3-12 Overall Elective Market Share (Vascular)*	L	50%	43.1%	39.4%	▲	▼	▲	43.1%
3-13 R&D *	L	444	TBC	142	◀▶	◀▶	◀▶	142
3-14 Elective Activity (Spells)	L	34,417	34,157	2467	▲	▼	▼	25618
3-15 Emergency Activity (Spells)	L	37,644	39,939	3369	▲	▼	▲	29980
3-16 Outpatient Activity (New Attendances)	L	110,242	101,324	8,093	▲	▼	▼	76,134

3-03 * As per Monitor reporting (includes Ashford)

3-05 * 2 Additional Pathways (Total 20 Pathways)

3-08 * Methodology as per CQUIN target, excludes Maternity and Births

3-10 * Market Share reported 2 month in arrears

3-13 * R&D figures are reported 1 month retrospective and cumulative. They include both observations and intervention

2. To recruit, retain and develop a high performing workforce

Workforce	Annual Target 12/13	Annual Forecast 12/13	Dec Actual	Performance			YTD 12/13
				Oct	Nov	Dec	
2-01 Establishment (WTE)	3264 *1	3226 *1	3220	▲	▲	▲	3220
2-02 Establishment (£Pay)	£139,394k	£140,941k	£111,804k	▲	▼	▲	£105,581k
2-03 Establishment growth (WTE) *2	42	35	1	▲	▲	▲	29
2-04 Establishment growth (£Pay)	* 3	* 3	* 3	◀▶	◀▶	◀▶	* 3
2-05 Establishment Reduction (WTE)	97	128	24	▲	◀▶	▲	128
2-06 Establishment Reduction (£Pay) *4	£3,447k	£3,427k	£267k	▲	▼	▼	£2,589k
2-07 Agency Staff use (WTE)	<45	<48	52	▲	▼	▲	55
2-08 Agency Staff (£Pay) *5	£5,047k	£8,514k	£702k	▼	▼	▲	£6,337k
2-09 Bank Staff use (WTE)	<280	<280	261	▲	▼	▲	246
2-10 Bank Staff (£Pay) *5	£10,937k	£10,937k	£693k	▲	▼	▲	£6,780k
2-11 Vacancy Rate (%)	<10%	<10%	7.8%	▲	▼	▲	7.8%
2-12 Staff turnover rate	<13%	<13%	14.8%	▼	▼	▼	14.8%
2-13 Stability	>85%	>85%	84.3%	▲	▼	▼	84.3%
2-14 Sickness absence	<3.0%	<3.0%	2.81%	▲	▼	▼	2.79%
2-15 Staff Appraisals	98%	98%	91.0%	▲	▲	▼	91.0%
2-16 Statutory and Mandatory Staff Training	98%	98%	92%	◀▶	▲	▼	92%

*1 Establishment forecast updated at the end of quarter 3

*2 Reflects additional funding agreed in or added to 2012/13 budgets

*3 Data to be completed by Finance team

*4 Pay expenditure linked to WTE reductions in establishment

*5 Included within Establishment (£pay)

4. To ensure the financial sustainability of the Trust through business growth and efficiency gains

Finance & Efficiency	Annual Target 12/13	Annual Forecast 12/13	Dec Actual	Performance			YTD 12/13	
				Oct	Nov	Dec		
4-01 Monitor Financial Risk Rating	3	3	4	◀▶	◀▶	◀▶	4	
4-02 Total income excluding interest (£000)	£225,816	£231,215	£18,188	▲	▲	▲	£173,906	
4-03 EBITDA actual (£000)	£17,020	£17,091	£548	▼	▲	▼	£13,542	
4-04 I&E net operational surplus (£000)	£3,300	£3,300	£528	▼	▲	▼	£3,906	
4-05 CIP Savings achieved (£000)	£12,000	£11,931	£1,078	▲	▲	▲	£8,905	
4-06 CQUINs	£4,236	£3,292	£274	▼	▼	▼	£2,469	
4-07 Month end cash balance (£000)	£12,560	£12,560	£13,291	▼	▼	▼	£13,291	
4-08 Capital Expenditure Purchased (£000)	£11,752	£9,183	£513	▼	▼	▼	£3,956	
4-09 Contract Penalties	£0	£200k	£0	◀▶	▼	▲	£200K	
4-10 Business Rules (2 month in arrears)	£2m	£1.4m	£105k**	◀▶	◀▶	◀▶	£1.02M	
4-11 Readmission Costs **	1889k	£2.7m	£225k	◀▶	◀▶	◀▶	£2.03M	
4-12 Average LoS Elective*	L	3.32	3.7	4.01	▲	▼	▼	3.75
4-13 Average LoS Non-Elective*	L	6.99	7.1	6.53	▼	▲	▲	7.17
4-14 Outpatients DNA	L	<=6%	7.5%	7.9%	▼	▲	▼	7.5%
4-15 Daycase Rate (whole Trust)	L	>84%	80%	82.8%	▼	▼	▲	80.9%
4-16 Theatre Utilisation***	L	>=85%	-	73.1%	▲	▲	▼	74.3%

* Average LOS figures have now been calculated using the same methodology applied to the calculations for the Real Time contract.

** Estimated Figure

*** Utilisation based on Time Used (Proc End - Anaesthetic Induction) as % of Available Session Time (4hours)

Delivering or exceeding Target	▲	Improvement on previous Month	▲
Underachieving Target	◀▶	No change to previous month	◀▶
Failing Target	▼	Deterioration on previous month	▼