

Executive Performance Report October 2014

Position as at 31st October 2014

Airedale NHS Foundation Trust
Executive Performance Report

Monitor Risk Assessment Framework - Service Performance

October 2014



Cancer Standards		(Position as at 31st October 2014)													Weighting	Monitoring
Quarterly (Quarter To Date Position Shown)		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			
Trajectory	31 day to subsequent treatment (surgery)	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%		
		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		
Trajectory	31 day to subsequent treatment (drugs)	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%		
		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		
Trajectory	62 day referral to treatment	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%		
		88.5%	89.3%	90.5%	95.0%	94.8%	94.6%	85.2%								
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		
Trajectory	62 day referral to treatment (Screening)	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%		
		100.0%	100.0%	100.0%	100.0%	66.7%	90.0%	91.7%	100.0%							
Rating		Green	Green	Green	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green		

De minimis rule of 5 cases per quarter applies to all of the above individual standards.

Cancer Standards		(Position as at 31st October 2014)													Weighting	Monitoring
Quarterly (Quarter To Date Position Shown)		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			
Trajectory	14 day referral to app (excl NFT breast)	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%		
		97.1%	97.3%	97.5%	98.7%	96.8%	97.5%	99.3%								
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		
Trajectory	14 day referral to app (symptomatic breast)	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%		
		93.8%	96.4%	97.2%	94.4%	94.7%	96.3%	100.0%								
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		
Trajectory	31 day diagnosis to treat	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%		
		100.0%	99.1%	98.9%	100.0%	100.0%	100.0%	100.0%	100.0%							
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		

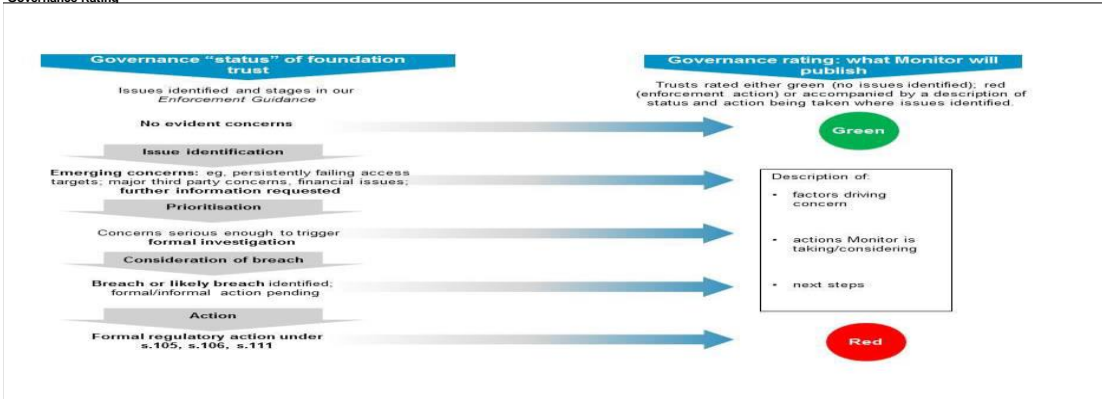
De minimis rule of 5 cases per quarter applies to all of the above individual standards.

Data completeness: Community Services		(Position as at 31st October 2014)													Weighting	Monitoring
Quarterly (Quarter To Date Position Shown)		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			
Trajectory	Referral to treatment information	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%		
		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	TBC								
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		
Trajectory	Referral information	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%		
		91.7%	91.6%	91.7%	92.5%	92.6%	92.4%	TBC								
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		
Trajectory	Treatment activity information	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%		
		99.9%	99.9%	99.9%	99.7%	99.7%	99.7%	TBC								
Rating		Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		

Service Performance Rating

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Actual	Green	Green	Green	Amber	Green	Green	Green					

Governance Rating



Notes:

Rounding principle not to be utilised for any standard (i.e. for a target of 98% then performance must be 98.0% or above in order to achieve the standard).
Non-achievement of any standard weighted 1.0 for three or more consecutive quarters leads to 4.0 penalty points being applied and an automatic Red rating.

Clinical Commissioning Group (CCG) Performance and Quality Schedule 2014/2015

No.	Operational Standards	Threshold (2014/15)	Method of Measurement (2014/15)	Consequence of Breach	Quarter 1		Quarter 2		October		Quarter 3		Year to Date	
					Numerator	Denominator	Numerator	Denominator	Numerator	Denominator	Numerator	Denominator	Numerator	Denominator
Maternity & Gynaecology														
28	% mothers smoking at delivery	Year on Year improvement Rate <=2012/13 or 2013/13 target whichever is lower. 13%	Local monthly contract reporting	Breach: Mothers smoking during pregnancy 2012/13 or 2013/13 target whichever is lower in quarter Consequence: Report and action plan to be provided and reviewed as part of agreed contract management process	68	528	78	559	22	173	22	173	168	1260
					12.9%		14.0%		12.7%		12.7%		13.3%	
32	Percentage of women who have seen a midwife or a maternity healthcare professional, for assessment of health and social care needs, risks and choices by 12 completed weeks of pregnancy.	90%	Local contract reporting. Quarterly data submitted to CCGs	Breach: Below 90% in 2 consecutive months Consequence: Report and action plan to be provided and reviewed as part of agreed contract management process	590	648	616	655	188	203	188	203	1394	1506
					91.0%		94.0%		92.6%		92.6%		92.6%	
33	Midwifery quality indicator 1) Maintaining current quality and care threshold within Maternity Services a) 1:1 performance b) Midwifery staffing ratio c) Divers	1a) 1:1 performance 1b) Ratio of 1:28 to be maintained 1c) Report on divers within 48 working hours of the divert	1a & b) Reported monthly (from Evolution) 1c) To be reported direct to AWC within 48 hours of divert	Breach: 1) 1a) 1:1 performance not reported monthly 1b) Ratio < 1.30 1c) Report on divers not received within 48 working hours of the divert Consequence: Initial breach Report and action plan to be provided and reviewed as part of agreed contract management process										
35	Chlamydia screening: % of TOPS	100% Offered 95% Screened	% of TOPS screened for Chlamydia local report. Local monthly contract reporting	Breach: <100% (offered) and/or <95% (screened) in any individual month (local reporting to be agreed) Consequence: Report and action plan to be provided and reviewed as part of agreed contract management process	15	15	12	12	2	2	2	2	29	29
					100.0%		100.0%		100.0%		100.0%		100.0%	
36	Termination of Pregnancy Waiting Time. All service users should be offered an assessment appointment within 7 calendar days of referral or self referrals	100%	Local monthly contract reporting. TOPS Local dataset elements of date of referral and consultation used to validate CCG patients	Breach: <95% within 7 calendar days in 2 consecutive months. Consequence: Contract management process as set out in general Conditions GCG to be applied	21	21	20	20	8	8	8	8	49	49
					100.0%		100.0%		100.0%		100.0%		100.0%	
37	Termination of Pregnancy Waiting Times. All service users choosing to proceed with a termination should be offered an appointment for the procedure within 7 calendar days after the decision to proceed has been taken	100%	Local monthly contract reporting. TOPS Local dataset to be extended to include "Decision to proceed" data field.	Breach: <95% within 7 calendar days in 2 consecutive months. Consequence: Contract management process as set out in general Conditions GCG to be applied	21	21	20	20	8	8	8	8	49	49
					100.0%		100.0%		100.0%		100.0%		100.0%	
38	Contraception provided at surgical TOP procedure	70%	Local monthly contract reporting. Numerator: Number of women choosing LARC post surgical TOP within the reporting period. Denominator: Number of surgical TOP within the reporting period	Breach: <70% Consequence: Full detailed report on how contraception services are delivered in TOPS services with data to support the number of LARCs offered and reasons for rejection of LARC	21	21	20	20	8	8	8	8	49	49
					100.0%		100.0%		100.0%		100.0%		100.0%	
39	Number of women who are given 4 bottle of healthy start vitamins	90% of women who are registered as booked in	Local monthly contract reporting.	Breach: <90% Consequence: Report and action plan to be provided and reviewed as part of agreed contract management process										
					100%		100%		100%		100%		100%	
Community														
44	ACT: Bed utilisation - % step up and % step down in each period (Curragate and Holmwood NH Intermediate Care Beds - virtual beds now excluded)	70% step up expected bed utilisation 30% step down expected bed utilisation	Local monthly contract reporting. Quarterly activity report to commissioner.	Breach: 10% shift in step up/step down ratio in quarter. Consequence: Report and action plan to be provided and reviewed as part of agreed contract management process	18	58	26	49	12	18	12	18	58	125
					31.0%		57.1%		66.7%		66.7%		45.4%	
					40	58	21	49	6	18	6	18	67	125
					69.0%		42.0%		23.3%		23.3%		52.6%	
E-communications with GPs														
45	E-communications with GPs following inpatient discharge and outpatient attendance	80% of letters sent to GPs following inpatient discharge are sent electronically 50% of letters sent to GPs following each outpatient attendance are sent electronically by Q4	Local monthly contract reporting	Breach: <80% of inpatient discharge letters <50% Outpatient letters sent electronically. Consequence: Report and action plan to be provided and reviewed as part of agreed contract management process	7992	8350	7908	8255	2723	2836	2723	2836	18623	19441
					95.7%		95.0%		96.0%		96.0%		95.8%	
					19024	28202	19178	28224	6643	10153	6643	10153	44845	66779
					67.5%		67.0%		65.4%		65.4%		67.2%	
Reduce face to face follow-up contacts														
46	Reduce face to face follow-up contacts	Reduce face to face follow-up contacts in general surgery, gynaecology, orthopaedics and urology by 75%	Local monthly contract reporting	Breach: Reduction in face to face follow-up contacts < % (Q1), < % (Q2), < % (Q3) and < % (Q4) Consequence: Report and action plan to be provided and reviewed as part of agreed contract management process	156	19860	182	20296	57	6513	57	6513	395	46669
					0.79%		0.90%		0.88%		0.88%		0.85%	
Emergency Re-admissions														
47	Emergency Re-admissions	Percentage of re-admissions which are avoidable is 15%	SUS reporting. Local monthly contract reporting.	Provider should not be reimbursed above the agreed threshold for emergency re-admissions. Providers should not be reimbursed for the proportion of readmissions judged to have been avoidable by any agency. The Provider should co-operate with the Commissioner in a clinical review of re-admissions within an agreed period.	707	5400	768	5140	279	1774	279	1774	1754	12314
					13.1%		14.9%		15.7%		15.7%		14.2%	
Training & Education														
50	Safeguarding adults & children	100% of all new staff will undergo safeguarding adults and children training as part of induction and within 3 months of taking up post. Identified staff members should not work with adults or children without direct supervision, until training completed	Local monthly contract reporting.	Breach: <95% compliance in 2 consecutive months in either adult or children training Consequence: 1) 1st breach Report and remedial action plan to be provided and reviewed as part of agreed contract management process 2) 2nd breach Contract management process as set out in general Conditions GCG to be applied	82	82	92	92	27	27	27	27	201	201
					100.0%		100.0%		100.0%		100.0%		100.0%	
51	Infection prevention & control	100% of all new staff will undergo infection prevention and control training as part of induction and within 3 months of taking up post.	Local monthly contract reporting.	Breach: <95% training compliance in 2 consecutive months. Consequence: 1) 1st breach Report and remedial action plan to be provided and reviewed as part of agreed contract management process. 2) 2nd breach Contract management process as set out in general Conditions GCG to be applied	82	82	92	92	27	27	27	27	201	201
					100.0%		100.0%		100.0%		100.0%		100.0%	
52	100% of all new staff who provide care and treatment will have undergone Mental Capacity Act awareness training at the part of induction and within 3 months of taking up post.	95% compliance	Local monthly contract reporting.	Breach: <95% training compliance in 2 consecutive months Consequence: 1) 1st breach Report and remedial action plan to be provided and reviewed as part of agreed contract management process. 2) 2nd breach Contract management process as set out in general Conditions GCG to be applied	251	251	132	132	45	45	45	45	428	428
					100.0%		100.0%		100.0%		100.0%		100.0%	
Published Formulary														
53	Failure to publish Formulary	Yes/No	Publication on Provider's website	Withholding of up to 1% of the monthly sums payable by the Commissioners under Service Condition 36 (Payment Terms) per month until publication	Completed		Completed		Completed		Completed		Completed	
Duty of Candour														
54	Duty of Candour	Each failure to notify the Relevant Person of a suspected or actual Reportable Patient Safety Incident (as per Guidance)	Provider to include a paragraph within their quarterly patient safety report indicating that they have met the Duty of Candour and any exceptions to this	Recovery of the cost of the episode of care or £10,000 if the cost of the episode of care is unknown.	100%		100%		100%		100%		100%	

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					Numerator	Denominator	Numerator	Denominator	Numerator	Denominator	Numerator	Denominator	Numerator	Denominator
		Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of Breach	Quarter 1		Quarter 2		October		Quarter 3		Year to Date	
SURGICAL														
55	Wrong site surgery	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
56	Wrong implant/prosthesis	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
57	Retained foreign object post-operation	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		1		0		0		1	
MEDICATION														
58	Wrongly prepared high-risk injectable medication	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
59	Maladministration of potassium containing solutions	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
60	Wrong route administration of chemotherapy	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
61	Wrong route administration of oral/enteral treatment	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
62	Intravenous administration of epidural medication	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
63	Maladministration of Insulin	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
64	Overdose of midazolam during conscious sedation	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
65	Opioid overdose of an opioid naive Patient	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
66	Inappropriate administration of daily oral methotrexate	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
GENERAL HEALTHCARE														
67	Falls from unrestricted windows	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
68	Entrapment in bedrails	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
69	Transfusion of ABO incompatible blood components	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
70	Transplantation of ABO incompatible organs as a result of error	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
71	Misplaced naso- or oro-gastric tubes	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
72	Wrong gas administered	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
73	Failure to monitor and respond to oxygen saturation	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
74	Air embolism	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
75	Misidentification of Patients	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
76	Severe scalding of Patients	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	
MATERNITY														
77	Maternal death due to post-partum haemorrhage after elective caesarean section	-0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	Recovery of the costs for the procedure or episode (or, where these cannot be accurately established, £2,000) plus any additional charges incurred for any corrective procedure or necessary care in consequence of the Never Event	0		0		0		0		0	