Subject:	**Norfolk and Waveney System Performance Report**
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Purpose of paper:	**Discussion and information**

Summary

The dashboard provides an overview of key performance indicators for our health and care system. It covers unplanned care, cancer, planned care and mental health.

Unplanned Care

JPUH – A&E performance has decreased to 84.8% in September. Factors include continued high volume of attendances with activity 4.1% higher in 2019/20 than in 2018/19. Other than increases in demand, factors contributing to performance include medical workforce gaps at night and weekends and an increased number of medically optimised patients with delayed discharges. Actions in place to address include additional GP streaming capacity, pathway to IC24 out of hours and improvements to flow and discharge processes/capacity. The winter plan with system partners is in development and includes demand management. Further focus is in place to embed internal professional standards. ED expansion plans to be revised to include CT scanner included in National Diagnostic Assessment Centre funding allocation. 60 minute ambulance handover delays have increased from 2.9% in August to 5.5% in September. Actions in place to reduce delays include a Senior ED Nurse coordinating flow through ED to ensure ambulance offloads are in place. The Trust is working with system partners to develop a comprehensive Urgent and Emergency care recovery work programme including actions to reduce demand and maximise flow out of the hospital.

NNUH – A&E performance has decreased to 75.4% in September. Attendances remain very high with a 2.3% increase on the previous year but with much higher levels in recent months (almost 800 more in September 2019 against September 2018). Other than the increasing levels of attendance the main causative factors continue to center around workforce limitations (30% vacancy factor). Priority actions continue to be the implementation of the 12-point system recovery plan – emphasis on the rolling out of the GP Streaming pilot to better manage demand and primary care attendance in ED. Year to date 60-minute ambulance handovers (2.4%) continue to be significantly improved on 18/19 (6.3%) however performance has worsened in September to 4.6%. DTOC has also increased again to 4.7%. Key factors impacting performance are Consultant, Nursing and Junior Doctor shortfalls, discharge planning and adherence to SAFER. A recovery action plan and enhanced support calls remain in place with NHSI/E.

QEH – Performance in September was 79.9% compared to 79.0% in August. There was one 12-hour trolley wait in September which related to a patient requiring admission to a mental health bed. There has been a sustained increase in the average number of attendances per day with growth of 5% in 2019/20 compared to 2018/19. Other than an increase in demand, underperformance is further attributed to overcrowding in and exit block from the ED (due to estates issues), ED medical and nurse staffing capacity and rota patterns not always matching changes in demand. Plans are in place to increase capital investment in the ED and emergency floor to increase capacity and improve the environment. Minor estate works in ED are in progress and due for completion in February 2020. Estates work to increase discharge lounge capacity and capacity for

same day emergency care is due to commence during quarter 3. Work continues on embedding the SAFER bundle on all wards across the Trust. A review of the medical and nursing staff establishment and rota continues, the nursing element of this is complete and the medical element will be completed by the end of October. 60 minute ambulance handover delays have reached a 6 month high of 17.3%. Performance is off track due to the continued overcrowding in and exit block from the ED; the department is limited in capacity to cohort patients which leads to delays in ambulance handover. Other than the above listed actions relating to ED floor space, performance will be improved by standardisation of the ambulance handover process. Joint work is in progress with the ambulance service, this is now being supported by NHSE/I.

Cancer – All September data remains provisional at 24/10/2019

JPUH – The Trust has seen a large increase in referrals across a range of specialties. Compounding this, the Trust has had clinical capacity challenges (vs demand), particularly for 2ww referrals. Recovery action plans are in place for breast and endoscopy to reduce the number of patients not being seen within 2 weeks. These include daily cancer date reports by body site being provided to DOM's & SOM's so that they are able to monitor the demand and to use the information to create additional clinic/endoscopy capacity in advance. Additional one stop clinics and twilight clinics are being undertaken with further weekend endoscopy sessions. Revised job planning has been undertaken to increase the DCC activity and increase availability of senior middle grade staff. Further support from breast imaging services is being provided from other trusts. Performance for two week wait GP and Breast expected to remain below standard until November.

NNUH – An increase in colorectal referrals and under-delivery of activity in Skin means that recent performance has been affected. Plans are in place to address both. 31 day surgery continues to be challenging due to the small patient numbers and capacity constraints due to continued bottleneck on Melanoma pathway. A solution is dependent on the Nuclear Medicine capital project. The main areas of underperformance on the 62-day target are Urology and Gynaecology due to delays in the diagnostic stage of the pathway, and lower GI due to delays in initial 2WW appointments. The Trust expects to meet the standard by the end of Q4.

QEH – Provisional September data shows that the majority of targets continue to be met. 31 day subsequent treatment (surgery) was missed however this was a single patient and actions to improve the process have been put in place. 62-day GP referral to treatment performance has improved to 66.4% against the standard of 85%. A cancer improvement plan is in place and the quarterly update is provided to the Trust Board. In addition to the cancer improvement plan, performance will be improved by the provision of additional, operational support to urology and lower GI. This additional support will be in place for three months (October – December) and will increase the pace in improvement work in these tumor sites.

Planned Care

18wk RTT Waiting List	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Trend	YTD Growth on Mar-19
JPUH	12,904	16,036	16,543	16,356	15,589	16,481	16,672		29%
NNUH	41,328	42,159	43,390	43,625	44,493	45,224	45,614		10%
QEH	13,562	13,691	13,758	13,630	14,469	13,796	14,088		4%

40wk RTT Waiting List	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Trend	YTD Growth on Mar-19
JPUH	48	34	54	47	36	38	40		-17%
NNUH	455	485	552	559	557	667	687		51%
QEH	130	136	96	92	81	78	59		-55%

JPUH – September's performance was 80.4%. Emerging capacity constraints within some specialties is leading to an overall increase in the waiting list with a revised baseline under discussion with the Commissioners and regulators. Capacity in challenged specialties is predominantly workforce related. Outpatient and theatre utilisation programmes are in place to increase activity. A review of waiting list processes has been undertaken and revisions are in development. A comprehensive RTT plan is in place with key focus to address data entry issues and increase inpatient activity to reduce admitted backlog of patients. Detailed Recovery Action Plans with trajectories against waiting list size have been developed for T&O, Ophthalmology, Dermatology, ENT and Gynaecology. The RTT plan is monitored via the Trust Access Group and Divisional Performance Committee.

NNUH - Performance has reduced to 81.1% in September with the overall backlog increasing. Overall performance continues to be compromised by the urgent focus on cancer work, increasing demand and a rise in cancellations due to a lack of capacity. Staffing also continues to be a challenge with pension tax issues also impacting. Intensive waiting list management is in place to reduce the risk of 52 week breaches however 40 week breaches have increased for three successive months. Capacity remains a key challenge and NNUH is working with commissioners and NHSE/I to seek further demand management schemes. Diagnostics continues to be challenged, with the MRI and CT standard now recovered, but increase in inpatient and outpatient demand in Non-Obstetric Ultrasound and reduced workforce and capacity at Global still impacting on delivery of the standard. Plans are in place to recover but conversations are ongoing with Global for additional support.

QEH – Performance was 79.6% in September. Performance is off track due to the variance in the following high-volume specialties; Urology waiting list is 50% above trajectory; performance is 17% below trajectory, Ophthalmology waiting list is 30% above trajectory; performance is 10% below trajectory and Gastroenterology waiting list is 36% above trajectory; performance is 16% below trajectory. Performance will be improved by two new Consultants appointed in Urology, start dates in October and November, Ophthalmology – additional locum capacity and outpatient utilisation improvement, Gastroenterology: triage of referrals has commenced, and a locum Consultant starts in October. Diagnostics performance for August was 90.90%, against a standard of 99%. The vast majority of breaches were in ultrasound. This is largely due to an increase in demand of circa 10% and an inability to increase capacity due to radiographer and radiologist vacancies. Performance will be improved by recruitment to two consultant

posts; one starting in September and the other in October along with additional training of radiographers to undertake sonography work; one member of staff is currently being trained. Performance is forecast to recover by October 2019.

Mental Health

Inappropriate Out of Area Placements – performance has improved since the beginning of August, with a continued focus on admission processes. A deep dive to support a system response to DToC is planned for November. Yare Ward is open and the number of working age adult acute OoAPs has decreased. System issues are however impacting on the number of older people's OoAP.

IAPT Access - the service continues to ensure only patients who meet the criteria are accepted, in line with NHSE/I expectations and best practice nationally. In addition;
• Workshop with NSFT took place on 3rd October 2019. A refreshed improvement plan was agreed and this has been shared with CCGs and NHSE/I for comment. Discussions to agree an improvement trajectory are currently taking place.
• Align the development of IAPT services with the emerging PCNs, to maximise integration and service exposure;
• Assistant Psychological Wellbeing Practitioners have been recruited to reduce drop-out rate;
• More Step 2 capacity has freed up Step 3 workers from carrying out assessments and focus on treatment capacity;
• A choose and book system has been introduced;
• Service number appears on service user phones, previously appeared as unknown number.

Dementia - The STP remains within the 95% confidence limits of the dementia diagnosis rate. In addition;
• The STP is continuing to develop the dementia community support offer for Norfolk and Waveney.
• CCGs continue to share individual work across the existing action plans, to aid progress.
• Actions are being taken forward by individual CCGs to increase the diagnosis rate, including practice visits and data cleansing.

STP High Level System Dashboard - Summary

in good health
The Norfolk and Waveney Health and Care Partnership

Metrics	Status of latest data	Current target	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Trend
Acute Unplanned Care Performance Metrics (includes aggregate of JPUH, NNUH and QEH unless otherwise stated)																
A&E 4 hr performance (whole trust. NNUH includes WIC)	Validated	95%	86.9%	88.3%	86.0%	83.9%	78.4%	77.2%	79.5%	78.3%	84.2%	83.3%	82.0%	80.2%	78.4%	
A&E Total Attendances (as above)	Validated	-	29,033	29,162	28,331	28,983	29,123	27,204	30,226	29,891	31,210	30,302	32,746	32,330	30,522	
A&E Total Breaches (as above)	Validated	-	3,801	3,409	3,961	4,679	6,292	6,206	6,211	6,478	4,921	5,069	5,890	6,411	6,579	
Emergency admissions (N&W CCGs only)	Validated	-	7,538	8,127	8,150	8,169	8,595	7,578	8,394	8,129	8,220	7,900	8,382	7,786		
DTOC - delayed days (includes acute + non-acute trusts, Norfolk patients)	Validated	-	2,738	2,709	2,551	2,681	2,974	2,150	2,530	2,153	2,981	2,748	2,704	2,819		
% of A&E Ambulance handover delays > 60 min	Validated	-	8.2%	5.2%	10.7%	11.6%	15.2%	14.0%	6.6%	4.9%	3.3%	4.7%	5.7%	5.6%	7.5%	
Acute Cancer Performance Metrics (includes aggregate of JPUH, NNUH and QEH)																
Two week wait GP referral (%)	Provisional	93%	79.6%	82.3%	79.3%	92.2%	88.8%	91.0%	87.5%	91.4%	91.0%	84.6%	85.0%	81.6%	80.0%	
Two week wait breast symptoms (%)	Provisional	93%	97.8%	97.3%	63.7%	53.3%	54.8%	47.4%	47.7%	82.5%	80.0%	87.4%	93.9%	92.1%	89.3%	
31 days from diagnosis to first treatment (%)	Provisional	96%	97.3%	96.3%	97.1%	97.6%	95.3%	96.9%	97.2%	96.9%	96.7%	98.3%	98.6%	97.5%	97.3%	
62 days from GP referral to first treatment (%)	Provisional	85%	76.9%	77.0%	76.4%	76.7%	70.5%	73.4%	77.4%	77.6%	72.6%	77.1%	72.4%	69.5%	70.4%	
Acute Planned Care Performance Metrics (includes aggregate of JPUH, NNUH and QEH)																
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	83.4%	82.9%	83.0%	81.8%	81.7%	82.2%	82.5%	83.0%	84.0%	82.9%	82.3%	81.6%	80.7%	
Total number incomplete pathways	Validated	-	70,828	71,166	70,567	69,990	68,983	68,302	67,794	71,886	73,691	73,611	74,551	75,501	76,374	
Total number of 40 week breaches	Validated	-	756	651	649	770	758	681	633	655	702	698	674	783	786	
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	22	17	22	29	29	13	0	2	2	1	1	1	0	
Diagnostic tests within 6 weeks	Validated	99%	99.3%	99.3%	99.3%	98.2%	95.4%	98.3%	99.1%	98.2%	97.0%	98.0%	98.2%	95.9%	97.7%	
Number of patients waiting > 6 weeks	Validated	-	109	122	122	306	852	332	178	352	588	385	353	758	436	
GP acute referrals (all CCGs)	Provisional	-	16,137	18,377	17,942	14,697	17,998	17,006	18,190	17,272	18,800	17,084	19,190	16,534	19,746	
Non-GP acute referrals (all CCGs)	Provisional	-	8,912	10,410	10,239	8,380	10,397	9,289	10,456	9,688	10,288	9,524	10,791	8,980	10,725	
Avoidable emergency admissions (N&W CCGs only)	Validated	-	1,704	1,919	2,115	2,231	2,366	2,136	2,154	1,986	1,902	1,760	1,815	1,703		
Mental Health Metrics (all NSFT other than Dementia)																
IAPT: access rates (local target)	Provisional	1.58%	1.00%	1.37%	1.57%	1.36%	1.60%	1.44%	1.55%	1.41%	1.22%	1.27%	1.65%	1.20%	0.99%	
IAPT: recovery rates	Provisional	50%	52.7%	50.6%	51.2%	51.4%	59.0%	59.4%	55.5%	58.3%	59.5%	58.8%	57.9%	56.4%	58.6%	
IAPT: first treatment <6 weeks	Provisional	75%	91.1%	86.8%	84.7%	86.6%	92.0%	98.7%	99.4%	99.2%	98.5%	98.0%	98.1%	97.5%	94.6%	
EIP: treatment started <2 weeks (local target) (3 month rolling)	Provisional	56%	79.9%	82.7%	83.0%	81.7%	82.0%	84.6%	83.5%	93.2%	88.4%	72.1%	70.7%	67.1%	64.4%	
CYP: eating disorders - Urgent (seen in 1 wk) (3 month rolling)	Provisional	90%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	
CYP: eating disorders - Routine (seen in 4 wks) (3 month rolling)	Provisional	90%	79.3%	80.0%	85.7%	73.9%	64.0%	58.3%	84.2%	100.0%	95.5%	96.0%	90.5%	83.3%	64.3%	
Out of area placements (bed days - 18-65, in month)	Provisional	-	625	755	755	765	1,100	1,025	1,421	1,742	1,440	1,369	1,663	1,024	545	
Out of area placements (bed days - 65+, in month)	Provisional	-	50	30	0	30	45	105	16	0	31	73	87	7	46	
Dementia diagnosis (non-NSFT)	Validated	66.7%	64.2%	63.3%	63.5%	63.5%	63.4%	63.4%	64.1%	63.6%	63.8%	64.1%	64.3%	64.2%	64.1%	
Primary and Community Metrics																
Proportion of older people still at home 91 days after discharge	Validated	90%	86.6%	86.6%	86.4%	84.1%	90.0%	85.7%	86.1%	80.7%	84.5%	82.3%	85.6%	91.4%		
18 Week 'Incomplete' Waiting Times	Validated	92%	87.9%	89.3%	87.9%	86.4%	88.6%	89.9%	90.8%	91.9%	93.3%	94.8%	95.8%	95.3%	95.3%	

STP High Level System Dashboard - JPUH

in good health
The Norfolk and Waveney Health and Care Partnership

Metrics	Status of latest data	Current target	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Trend	2018/19 YTD	2019/20 YTD	% var
Unplanned Care Performance Metrics																			
A&E 4 hr performance (whole trust)	Validated	95%	92.7%	90.3%	94.3%	87.2%	84.7%	80.1%	83.7%	86.4%	90.1%	89.9%	86.1%	86.0%	84.8%		91.6%	87.2%	
A&E Total Attendances (as above)	Validated	-	6,561	6,617	6,266	6,541	6,613	6,046	6,978	7,041	7,133	7,040	7,710	7,775	7,037		42,013	43,736	4.1%
A&E Total Breaches (as above)	Validated	-	481	641	358	834	1,012	1,203	1,140	960	705	713	1,075	1,088	1,070		3,545	5,611	58.3%
Emergency admissions (N&W CCGs only)	Validated	-	1,476	1,603	1,635	1,683	1,671	1,623	1,699	1,615	1,603	1,409	1,699	1,488			7,662	7,814	2.0%
Delayed transfers of care (DTOC) - delayed days as % of occupied bed days	Validated	3.5%	1.8%	1.5%	3.0%	1.0%	2.2%	1.4%	1.2%	0.8%	1.1%	1.5%	1.5%	1.5%	1.1%		2.1%	1.3%	
# DTOC - NHS (Norfolk patients)	Validated	-	42	39	42	7	48	35	28	0	21	42	56	35	40		622	194	-68.8%
# DTOC - Social Care (Norfolk patients)	Validated	-	155	141	296	98	215	126	126	92	105	133	126	133	74		804	663	-17.5%
# DTOC - Both NHS / Social Care (Norfolk patients)	Validated	-	0	0	0	7	14	0	0	0	0	0	0	7	14		4	21	425.0%
% of A&E Ambulance handover delays > 60 min	Validated	-	0.3%	0.5%	0.0%	1.1%	2.6%	7.1%	5.5%	1.2%	0.4%	0.1%	4.0%	2.9%	5.5%		0.6%	2.4%	
Cancer Performance Metrics																			
Two week wait GP referral (%)	Provisional at 25/10/19	93%	97.4%	97.5%	96.4%	97.4%	94.5%	94.1%	90.9%	94.6%	84.0%	85.3%	94.3%	92.3%	90.1%		96.5%	90.2%	
Two week wait breast symptoms (%)	Provisional at 25/10/19	93%	96.7%	95.8%	96.3%	93.4%	87.2%	82.5%	62.7%	88.9%	47.7%	73.0%	85.2%	71.4%	61.0%		97.0%	70.9%	
31 days from diagnosis to first treatment (%)	Provisional at 25/10/19	96%	100.0%	100.0%	100.0%	98.9%	100.0%	100.0%	100.0%	99.0%	100.0%	99.1%	99.1%	98.1%	100.0%		99.9%	99.1%	
31 days subsequent treatment - surgery (%)	Provisional at 25/10/19	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%		100.0%	100.0%	
31 days subsequent treatment - drug treatment (%)	Provisional at 25/10/19	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%		100.0%	100.0%	
31 days subsequent treatment - radiotherapy (%)	Provisional at 25/10/19	94%	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.		0 pts.	0 pts.	
62 days from GP referral to first treatment (%)	Provisional at 25/10/19	85%	85.6%	86.7%	87.0%	83.5%	80.7%	78.3%	89.8%	89.8%	73.1%	76.3%	65.8%	82.9%	82.1%		79.5%	78.0%	
62 days from screening to first treatment (%)	Provisional at 25/10/19	90%	100.0%	90.9%	100.0%	92.3%	96.3%	100.0%	100.0%	100.0%	100.0%	95.5%	100.0%	88.9%	50.0%		99.2%	96.1%	
Planned Care Performance Metrics																			
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	86.9%	87.1%	87.5%	85.7%	83.8%	84.0%	84.4%	86.2%	85.5%	82.0%	81.4%	81.8%	80.4%		86.9%	80.4%	
Total number incomplete pathways	Validated	-	13,191	12,904	13,211	13,073	13,117	13,101	12,904	16,036	16,543	16,356	15,589	16,481	16,672		13,191	16,672	26.4%
Total number of 40 week breaches	Validated	-	84	43	26	36	42	48	48	34	54	47	36	38	40		84	40	-52.4%
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	0	0	0	0	0	0	0	2	2	1	0	1	0		0	0	-
Diagnostic tests within 6 weeks	Validated	99%	100.0%	99.8%	99.9%	99.1%	98.5%	99.3%	99.4%	99.2%	98.9%	99.1%	99.4%	98.5%	99.3%		100.0%	99.3%	
Number of patients waiting > 6 weeks	Validated	-	1	7	2	29	51	27	23	30	45	36	24	51	24		1	24	2300.0%
GP acute referrals (all CCGs)	Validated	-	3,537	4,133	4,008	3,133	3,997	3,725	3,911	3,742	4,009	3,582	3,947	3,640	4,234		23,604	23,154	-1.9%
Non-GP acute referrals (all CCGs)	Validated	-	2,326	2,619	2,611	2,156	2,648	2,276	2,746	2,490	2,633	2,323	2,939	2,062	2,461		13,874	14,908	7.5%
Avoidable emergency admissions (N&W CCGs only)	Validated	-	378	446	490	594	549	543	517	470	430	382	446	373			2,059	2,101	2.0%

STP High Level System Dashboard - NNUH

in good health
The Norfolk and Waveney Health and Care Partnership

Metrics	Status of latest data	Current target	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Trend	2018/19 YTD	2019/20 YTD	% var
Unplanned Care Performance Metrics																			
A&E 4 hr performance (whole trust, inc. WIC)	Validated	95%	86.3%	88.9%	85.6%	82.5%	77.1%	76.0%	76.9%	72.7%	82.1%	80.1%	80.6%	78.1%	75.4%		88.1%	78.2%	
A&E Total Attendances (as above)	Validated	-	16,800	16,973	16,425	16,764	16,829	15,847	17,264	16,900	18,046	17,194	18,727	18,256	17,596		104,315	106,719	2.3%
A&E Total Breaches (as above)	Validated	-	2,307	1,879	2,367	2,936	3,852	3,800	3,992	4,606	3,239	3,426	3,624	3,998	4,323		12,394	23,216	87.3%
Emergency admissions (N&W CCGs only)	Validated	-	4,093	4,481	4,313	4,401	4,649	4,006	4,468	4,373	4,384	4,321	4,537	4,301			21,336	21,916	2.7%
Delayed transfers of care (DTOC) - delayed days as % of occupied bed days	Provisional	3.5%	5.0%	4.3%	3.3%	3.8%	4.0%	2.2%	3.1%	2.7%	4.2%	3.4%	4.1%	4.4%	4.7%		4.3%	3.9%	
# DTOC - NHS (Norfolk patients)	Provisional	-	533	326	274	281	429	262	354	298	247	253	314	466	495		3,384	2,073	-38.7%
# DTOC - Social Care (Norfolk patients)	Provisional	-	644	739	500	564	686	267	514	380	830	534	666	637	462		3,081	3,509	13.9%
# DTOC - Both NHS / Social Care (Norfolk patients)	Provisional	-	47	47	55	132	0	26	7	32	65	119	147	108	304		297	775	160.9%
% of A&E Ambulance handover delays > 60 min	Validated	-	11.0%	5.0%	12.9%	16.4%	18.6%	15.0%	2.1%	2.8%	0.3%	2.3%	2.3%	2.3%	4.6%		6.3%	2.4%	
Cancer Performance Metrics																			
Two week wait GP referral (%)	Provisional	93%	68.5%	71.9%	67.0%	88.1%	84.4%	88.1%	87.0%	94.9%	93.0%	79.7%	76.3%	72.2%	70.9%		81.0%	81.0%	
Two week wait breast symptoms (%)	Provisional	93%	97.9%	98.1%	44.9%	28.6%	36.5%	28.4%	47.1%	98.6%	94.2%	92.5%	96.7%	96.3%	99.5%		95.8%	96.1%	
31 days from diagnosis to first treatment (%)	Provisional	96%	96.4%	94.7%	96.6%	97.0%	93.3%	96.6%	96.6%	96.5%	96.9%	97.4%	98.9%	97.1%	96.4%		96.7%	97.3%	
31 days subsequent treatment - surgery (%)	Provisional	94%	77.8%	79.8%	86.4%	84.5%	79.0%	89.6%	83.9%	83.0%	84.2%	88.8%	89.0%	87.5%	83.5%		87.5%	86.2%	
31 days subsequent treatment - drug treatment (%)	Provisional	98%	100.0%	99.4%	100.0%	99.0%	98.5%	99.2%	99.2%	99.1%	98.4%	98.2%	99.2%	98.3%	90.8%		99.9%	97.7%	
31 days subsequent treatment - radiotherapy (%)	Provisional	94%	97.7%	97.2%	98.9%	97.4%	94.5%	100.0%	95.3%	96.6%	97.0%	96.3%	96.4%	97.4%	92.9%		98.3%	96.2%	
62 days from GP referral to first treatment (%)	Provisional	85%	72.0%	70.8%	71.5%	73.5%	62.9%	71.7%	68.2%	76.3%	76.5%	75.6%	73.5%	67.2%	68.3%		73.1%	73.2%	
62 days from screening to first treatment (%)	Provisional	90%	78.3%	66.7%	81.0%	81.4%	89.8%	82.9%	96.8%	84.6%	82.6%	79.5%	72.6%	94.1%	78.6%		85.4%	81.2%	
Planned Care Performance Metrics																			
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	83.1%	82.6%	82.6%	81.9%	82.1%	82.5%	82.8%	82.6%	83.9%	83.5%	82.9%	81.8%	81.1%		83.1%	81.1%	
Total number incomplete pathways	Validated	-	42,053	42,460	41,864	41,444	40,979	41,120	41,328	42,159	43,390	43,625	44,493	45,224	45,614		42,053	45,614	8.5%
Total number of 40 week breaches	Validated	-	483	423	429	465	466	465	455	485	552	559	557	667	687		483	687	42.2%
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	15	16	21	28	28	12	0	0	0	0	1	0	0		15	0	-100.0%
Diagnostic tests within 6 weeks	Validated	99%	99.1%	99.0%	99.1%	97.6%	93.5%	97.7%	98.8%	97.5%	96.8%	98.2%	98.9%	96.9%	97.5%		99.1%	97.5%	
Number of patients waiting > 6 weeks	Validated	-	93	101	98	256	769	287	142	290	382	210	129	348	274		93	274	194.6%
GP acute referrals (all CCGs)	Provisional	-	9,575	10,888	10,648	8,993	10,706	10,229	10,942	10,682	11,377	10,305	11,633	9,970	11,359		62,989	65,326	3.7%
Non-GP acute referrals (all CCGs)	Provisional	-	4,987	5,842	5,889	4,764	5,850	5,278	5,791	5,442	5,763	5,376	5,966	5,201	5,760		31,700	33,508	5.7%
Avoidable emergency admissions (N&W CCGs only)	Validated	-	853	992	1,060	1,110	1,226	1,067	1,105	1,026	983	927	924	880			4,437	4,740	6.8%

STP High Level System Dashboard - QEH

in good health
The Norfolk and Waveney Health and Care Partnership

Metrics	Status of latest data	Current target	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Trend	2018/19 YTD	2019/20 YTD	% var
Unplanned Care Performance Metrics																			
A&E 4 hr performance (whole trust)	Validated	95%	82.1%	84.0%	78.1%	84.0%	74.9%	77.3%	82.0%	84.7%	83.8%	84.7%	81.1%	79.0%	79.9%		84.8%	82.2%	
A&E Total Attendances (as above)	Validated	-	5,672	5,572	5,640	5,678	5,681	5,311	5,984	5,950	6,031	6,068	6,309	6,299	5,889		34,807	36,546	5.0%
A&E Total Breaches (as above)	Validated	-	1,013	889	1,236	909	1,428	1,203	1,079	912	977	930	1,191	1,325	1,186		5,284	6,521	23.4%
Emergency admissions (N&W CCGs only)	Validated	-	1,969	2,043	2,202	2,085	2,275	1,949	2,227	2,141	2,233	2,170	2,146	1,997	2,038		12,220	12,725	4.1%
Delayed transfers of care (DTOC) - delayed days as % of occupied bed days	Validated	3.5%	2.8%	2.6%	2.4%	2.5%	1.4%	1.3%	1.4%	1.2%	1.5%	1.9%	1.3%	0.9%	1.1%		2.3%	1.3%	
# DTOC - NHS (Norfolk patients)	Validated	-	277	274	249	242	142	120	138	118	160	200	109	65	86		1,602	738	-53.9%
# DTOC - Social Care (Norfolk patients)	Validated	-	73	47	33	73	41	32	42	27	37	37	62	44	49		198	256	29.3%
# DTOC - Both NHS / Social Care (Norfolk patients)	Validated	-	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	-
% of A&E Ambulance handover delays > 60 min	Validated	-	12.1%	11.6%	18.1%	13.3%	22.0%	20.2%	18.6%	14.6%	14.2%	15.2%	16.6%	16.4%	17.3%		9.3%	15.7%	
Cancer Performance Metrics																			
Two week wait GP referral (%)	Provisional	93%	93.2%	98.3%	97.3%	97.4%	95.9%	95.1%	86.0%	81.0%	91.9%	95.9%	96.7%	96.2%	96.6%		95.7%	93.0%	
Two week wait breast symptoms (%)	Provisional	93%	98.5%	96.9%	100.0%	100.0%	91.3%	86.3%	29.8%	20.9%	66.1%	83.3%	91.5%	98.0%	94.6%		98.2%	73.9%	
31 days from diagnosis to first treatment (%)	Provisional	96%	97.3%	97.7%	96.2%	98.8%	97.2%	95.3%	96.5%	96.1%	93.2%	100.0%	97.2%	98.1%	97.9%		97.8%	97.0%	
31 days subsequent treatment - surgery (%)	Provisional	94%	100.0%	100.0%	92.9%	100.0%	100.0%	100.0%	100.0%	92.3%	100.0%	100.0%	100.0%	85.7%	83.3%		100.0%	94.0%	
31 days subsequent treatment - drug treatment (%)	Provisional	98%	100.0%	97.9%	98.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	97.1%		100.0%	99.6%	
31 days subsequent treatment - radiotherapy (%)	Provisional	94%	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.		0 pts.	0 pts.	
62 days from GP referral to first treatment (%)	Provisional	85%	80.3%	85.9%	82.4%	80.0%	79.7%	74.6%	85.9%	70.9%	63.7%	81.1%	75.8%	63.9%	66.4%		81.6%	70.4%	
62 days from screening to first treatment (%)	Provisional	90%	96.0%	100.0%	85.0%	100.0%	100.0%	92.3%	100.0%	100.0%	100.0%	100.0%	94.1%	100.0%	90.9%		97.5%	98.3%	
Planned Care Performance Metrics																			
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	81.2%	79.9%	80.1%	78.5%	78.8%	79.5%	79.8%	80.4%	82.5%	81.8%	81.1%	80.7%	79.6%		81.2%	79.6%	
Total number incomplete pathways	Validated	-	15,584	15,802	15,492	15,473	14,887	14,081	13,562	13,691	13,758	13,630	14,469	13,796	14,088		15,584	14,088	-9.6%
Total number of 40 week breaches	Validated	-	189	185	194	269	250	168	130	136	96	92	81	78	59		189	59	-68.8%
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	7	1	1	1	1	1	0	0	0	0	0	0	0		7	0	-100.0%
Diagnostic tests within 6 weeks	Validated	99%	99.4%	99.5%	99.3%	99.3%	99.0%	99.5%	99.6%	99.1%	95.5%	96.4%	94.8%	91.0%	96.4%		99.4%	96.4%	
Number of patients waiting > 6 weeks	Validated	-	15	14	22	21	32	18	13	32	161	139	200	359	138		15	138	820.0%
GP acute referrals (all CCGs)	Validated	-	3,025	3,356	3,286	2,571	3,295	3,052	3,337	2,848	3,414	3,197	3,610	2,924	4,153		19,406	20,146	3.8%
Non-GP acute referrals (all CCGs)	Validated	-	1,599	1,949	1,739	1,460	1,899	1,735	1,919	1,756	1,892	1,825	1,886	1,717	2,504		10,155	11,580	14.0%
Avoidable emergency admissions (N&W CCGs only)	Validated	-	473	481	565	527	591	526	532	490	489	451	445	450	486		2,748	2,811	2.3%

STP High Level System Dashboard - data sources, notes and caveats

Metrics	Data sources, notes and caveats
Unplanned Care Performance Metrics	
A&E 4 hr performance	*Source: A&E Attendances and Emergency Admissions, NHS England* Comprises whole provider figures including MIU and WIC for NNUH. Apr-18 NNUH figures adjusted using local WIC data as the nationally published figures did not include WIC.
A&E Total Attendances (as above)	
A&E Total Breaches (as above)	
Emergency admissions (N&W CCGs only)	*Source:* SUS+. Only includes activity from the five N&W CCGs. JPUH emergency admissions exclude admissions identified as having been treated within the Ambulatory Care Unit.
Delayed transfers of care (DTOC) - % of delayed days vs available bed days	*Sources: Monthly Delayed Transfers of Care Data, NHS England & Bed Availability and Occupancy Data – Overnight, NHS England* Norfolk only. There is no official denominator to agree DTOC rates, so the latest KH03 quarterly return for overnight occupied beds has been used. As such these figures will not reconcile with any other reported figures. Prior to Jun-18, JPUH were only submitting delay codes to NHS delays and not including social care.
# DTOC - NHS	
# DTOC - Social Care	
# DTOC - Both NHS / Social Care	
% of Ambulance handover delays - 60 min	*Source: Contract Files, East of England Ambulance Service NHS Trust* It's important to note that there is a discrepancy between EEAST and QEH views of handover delays at QEH.
Cancer Performance Metrics	
Two week wait GP referral (%)	*Source: Cancer Waiting Times, NHS England* Figures for the most recent month are submitted directly by providers and are provisional only. Comprises whole provider figures.
Two week wait breast symptoms (%)	
31 days from diagnosis to first treatment (%)	
31 days subsequent treatment - surgery (%)	
31 days subsequent treatment - drug treatment (%)	
31 days subsequent treatment - radiotherapy (%)	
62 days from GP referral to first treatment (%)	
62 days from screening to first treatment (%)	
Planned Care Performance Metrics	
Incomplete - RTT % waiting treatment <18 weeks	*Source: Consultant-led Referral to Treatment Waiting Times, NHS England* Comprises whole provider figures.
Total number incomplete pathways	
Total number of 40 week breaches	
Incomplete - RTT no. waiting treatment >52 weeks	
Diagnostic tests within 6 weeks	*Source: Monthly Diagnostics Data, NHS England* Comprises whole provider figures.
Number of patients waiting > 6 weeks	
GP acute referrals (all CCGs)	*Source: Monthly Activity Return, NHS England* Includes activity from all CCGs to afford a whole provider view.
Non-GP acute referrals (all CCGs)	
Avoidable emergency admissions (N&W CCGs only)	*Source: SUS+* . Only includes activity from the five N&W CCGs. JPUH emergency admissions exclude admissions identified as having been treated within the Ambulatory Care Unit. Avoidable Admissions have not been aggregated to STP level for the latest month due to low clinical coding completeness at JPUH, which shows an artificial reduction.
Mental Health Metrics	
IAPT: access rates (local target)	*Source: NSFT PI01 – Dashboard.* 2018/19: 16.8% locally agreed target; 2019/20: 19% locally agreed target. National target is 22% for 2019/20.
IAPT: recovery rates	*Source: NSFT PI01 – Dashboard.* 50% national target. Also published nationally - local data more timely
IAPT: first treatment <6 weeks	*Source: NSFT PI01 – Dashboard.* 75% national target. Also published nationally - local data more timely.
EIP: treatment started <2 weeks (local target)	*Source: NSFT PI01 – KPI Monitoring Report Norfolk and Waveney.* RAG rated against 2018/19 - 53%; 2019/20 - 56% national target. Also published nationally - local data more accurate
CYP: eating disorders - Urgent (seen in 1 wk)	*Source: NSFT PI01 – KPI Monitoring Report Norfolk and Waveney.* RAG rated against 90% local target. Also published nationally - local data more accurate
CYP: eating disorders - Routine (seen in 4 wks)	
Out of area placements (bed days - 18-65, in month)	*Source: NSFT PI07B – Dashboard.* Trajectory to be agreed. Apr-18 to Feb-19 Nationally Published, Mar-19 onwards NSFT report. Data reconciliation project currently in progress with NSFT.
Out of area placements (bed days - 65+, in month)	
Dementia diagnosis	*Source: NHS Digital Dementia Diagnosis publication* - based on NHS Digital Reports that are taken from the GP's QOF register.
Other Metrics	
Prescribing Spend by ASTRO-PU	*Source: Arden and GEM CSU* Figures are practice spend and exclude any chargebacks/rebates.