The Queen Elizabeth Hospital NHS
King's Lynn
NHS Foundation Trust

REPORT TO BOARD OF DIRECTORS (IN PUBLIC)

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Karen Croker Interim Chief Operating Officer	Decision		High	Med	Low
	Discussion	√	√		
	Information	√			
LEAD MANAGERS:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Divisional Directors: Andrew Sidebotham Sarah Jones Karen Hansed Lesley Deacon	Strategic				
	Operational	√			
	Governance		**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
PEER ASSIST:	**PEER REVIEW:**				
			Integrated Report for current Board meeting		
CQC Domain: (safe, caring, effective, responsive, well-led)	All domains				

Meeting Date: 31 January 2017
Report Title: Operational Performance Report – Exception Report

PURPOSE:

This Exception Report provides the Board with a summary of the key operational performance against national standards highlighted for **month 9, December 2016** (noting that cancer is reported 1 month in arrears – November).

SUMMARY:

Performance delivery during December has been good with the Trust delivering against all statutory targets with the exception of the A & E four hour standard.

Whilst the four hour standard of 95% was not achieved, this was missed by 1.99%. Making achievement for this month in excess of the nationally delivered position.

Delivery against the 62 day cancer standard was met in November at 86.96%.

Standards consistently delivering above the required level which have been achieved again in month:

- RTT 92.97% (Standard 92%)
- Diagnostics 0.44% (standard 1%)
- All cancer standards

1. Emergency Access Standards

Emergency care standard

Emergency target	*95.00%*	*Compared to previous month*
AE performance	93.01%	▲
QTD	90.92%	▲
YTD	91.11%	▲
Ambulance total	1658	▲
Ambulance between 30-60 mins (target 0)	102	▲
Ambulance over 60 mins (target 0)	33	▼
Ambulance %<=15 mins	32.57%	▲

Whilst delivery against the four hour standard falls short of the required 95% it should be noted that this is for the ninth consecutive month above the STF delivery trajectory agreed with NHS England at the beginning of 2016/17 and is a consistently better position than that seen both regionally and nationally.

Whilst ED performance is consistently in the top quartile, the trust does continue to struggle to deliver the required performance against ambulance handovers. With only 32.57% of ambulance arrivals off-loaded within 15 minutes it is clear that despite process improvement to deliver ED performance this has remained at a constant level year to date. During the month operational pressures have caused difficulties in improving delivery, with increasing batching of ambulance arrivals leading to difficulties in off-loading. The operational teams are committed to improving this position and continue to embed the transformation work to improve patient flow.

It should be noted that performance against the A & E Clinical Quality Indicators of triage and time to treatment are well within target despite these operational pressures, these are key measures of clinical safety within the departments.

2. Cancer

Cancer standard

		Compared to previous month
2 week wait (target 93%)	98.45%	▲
31 day first treatment (target 96%)	99.00%	▲
31 day subsequent treatment surgery (target 94%)	100.00%	▶
31 day subsequent treatment drug (target 98%)	100.00%	▲
62 day first treatment (target 85%)	86.96%	▲
62 day screening treatment (target 90%)	100.00%	▶

The Trust achieved all statutory cancer targets for the first time this financial year, whilst the forecast for December also above the 85% standard it should be noted that delivery does remains fragile due to the high number of tertiary referrals for treatment and patient choice.

The November position for 62 days reported a total of 9 breaches of the standard, some of those shared between tertiary centres.

All breaches are subject to review at monthly Cancer Breach Review Meetings with patients who breach by 104 days subject to a harm review as per recommended practice. A Trust Cancer Steering Group has been established and have met for the first time in January., membership of this group includes the CCG GP Cancer Lead and CCG Commissioning Manager to improve engagement with the aim of consistent delivery of the standard moving forward.

3. RTT

The Trust Board should be aware that a small number of breaches of 52 weeks have been identified during December. As a result five patients will be reported as 52 week breaches; three will be reported in January and a potential two in February 2017, a full report has been presented and discussed at the Trust Finance and Performance Committee.