

OCTOBER 2018 INTEGRATED PERFORMANCE REPORT



Contents

Executive Summary	Overview	3
IPR	Understanding the IPR	4
Key Performance Indicators	Monthly performance	5
IPR Sections	NHSI	8
	Quality	10
	Operational	12
	Workforce	15
	Finance	17
Glossary		25

Board of Directors - Executive Summary

<p>AGENDA ITEM:</p> <p>AUTHOR:</p> <p>PURPOSE:</p>	<p>Integrated Performance Report</p> <p>Tony Campbell, Lynn Andrews, Zoe Lintin, Lee Outhwaite & Gail Collins</p> <p>To provide the Board with an integrated overview of performance within the Trust.</p>
<p>EXECUTIVE SUMMARY</p>	<p>Key discussion points for the Board are:</p> <p>6 out of 11 standards have been achieved in October. The areas of non compliance for the month were: Use of Resource Metrics (3 vs 1), Referral To Treatment - Percentage of incomplete pathways within 18wks (88.3% vs 92%), Cancer - Percentage of patients seen within 2 weeks from GP referral (92.1% vs 93%), Cancer - Percentage of breast symptomatic patients seen within 2 weeks from GP referral (92.9% vs 93%) and ED - Percentage of ED patients treated in less than 4 hours (90.9% vs 95%)</p> <p>ED performance was non-compliant for October (90.9%). The Trust year to date national A&E 4 hour access standard (94.4%) remains above trajectory at 94%. A&E performance was non-compliant for October 2018 (90.9% against the national 95% standard). Despite a challenging period in Q3, so far the position is 92.08% which is still within the top quarter of all NHS England Level 1 provider Trusts.</p> <p>October has seen a non-compliance position with regards to 18 week RTT (88.3%), performance remains unstable, pressures in 2 week wait with increased demand has continued to push out routine waiting times, which means performance continues to be unpredictable. Weekly PTL Meetings continue to take place to pro-actively manage patients on incomplete pathways >38 weeks. The Trust has now received a response from the Commissioners regarding the Waiting List Initiative, they have agreed to support the Trust proposal for returning to levels of compliance for incomplete pathways but at tariff with no additional costs.</p> <p>The Trust is reporting non-compliance in Diagnostic pathways for October (95.9% vs. 99% target). Echocardiography (76.3% vs 99%) reporting 220 breaches at the end of October as a result of ongoing lack of capacity due to severe staff shortages. The Division now have a improvement plan in place and are working towards agreeing trajectories for returning to compliance.</p> <p>Royal Primary Care continues to experience operational challenges in terms of patient access. The team have been successful in recruiting new GP's but equally lost similar numbers due to retirements. With respect to administration resources RPC continue to struggle to maintain a stable workforce and hence improved telephone access for patients is not being achieved as expected. New recruits are in place and being trained which will deliver the expected improvements. The focus of all the team is to reduce away operational backlogs as a result of the migration to system one.</p> <p>Performance against the cancer standards is as expected following significant demand/capacity imbalances in the early part of the year. October figures reflect a compliant position in 5 out of the 7 standards, with breast symptomatic and 2 week wait reporting non-compliance. 62 day position is reporting an unvalidated position.</p> <p>The overall picture in relation to quality remains positive this month, with improvements in two out of the 3 indicators which were off-trajectory in September 2018 (E. coli and pressure ulcers). The Trust continues to show positive performance in relation to Sepsis and the rate of falls with harm. The only indicator off trajectory is the ED FFT score where a range of actions are being implemented to improve performance.</p> <p>We have been successful in attracting and recruiting a large number of newly qualified nurses and midwives, with 59 nurses joining the Trust in September and early October 2018.. This intake has had a significant and positive impact on our band 5 staff permanent nurse vacancies, reducing these to minimal levels (excludes maternity leave and long term sickness cover). This successful recruitment puts us in a stronger position in terms of staffing resilience as we head into the winter period.</p> <p>In relation to the areas of Finance & Contracting. The month 7 Control Total has not been achieved, we are £954k behind our Control Total. Failure to achieve the financial plan year to date results in a loss of £640k relating to the month 7 PSF monies, although this can be accessed if the quarter 3 position is recovered. To date £2,240k of the PSF allocation has been achieved relating to quarters 1 and 2. Trust Contingency has been phased into the financial plan from Month 4, with £444k released at month 7, of the total £1m contingency.</p>
<p>ACTION REQUIRED OF THE BOARD:</p>	<p>The Board is asked to RECEIVE the report and note the actions being taken to recovering areas of non-compliance</p>
<p>RELATED STRATEGIC OBJECTIVE(S):</p>	<p>Objectives 1-6</p>
<p>FINANCIAL IMPACT:</p>	<p>In relation to contract penalties and incentives.</p>
<p>EQUALITY IMPACT:</p>	<p>Review of key performance indicators allows the Board of Directors to identify where there may potentially be a disproportionate impact upon one or more groups with protected characteristics.</p>
<p>ENVIRONMENTAL IMPACT:</p>	<p>No report.</p>
<p>PARTNERSHIP WORKING:</p>	<p>Facilitates development of a common understanding of Trust performance with key partners within the health and social care community.</p>

Key Performance Indicators

NHSI (Strategic Objective 1: To be rated as 'outstanding' by the CQC)

	Target 18/19	Target 18/19 YTD	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18
1.0 Use of Resources Metrics	1	1								3	3	3	3	3	3
1.1 CDIFF - Incidence of clostridium difficile	31	21	0	2	2	0	3	1	1	1	2	1	3	1	2
1.2 Referral To Treatment - Percentage of incomplete pathways within 18wks	92%	92%	92.4	92.1	91.4	91.7	92.1	91.6	91.5	92.0	90.8	90.6	88.5	87.1	88.3
1.3 Cancer - Percentage of patients seen within 2 weeks from GP referral	93%	93%	94.0	96.9	93.9	93.3	97.5	89.7	94.3	96.0	96.4	97.0	96.3	93.4	92.1
1.4 Cancer - Percentage of breast symptomatic patients seen within 2 weeks from GP referral	93%	93%	94.6	100.0	95.3	93.3	98.1	71.1	87.3	94.9	100.0	100.0	91.9	90.6	92.9
1.5 Cancer - Percentage of patients 1st treated within 31 days of diagnosis	96%	96%	94.6	94.5	99.2	99.2	100.0	97.9	96.1	99.3	95.2	99.2	97.9	98.2	98.8
1.6 Cancer - Percentage of patients receiving subsequent drug treatment within 31 days	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
1.7 Cancer - Percentage of pts receiving subsequent surgery treatment within 31 days	94%	94%	100.0	97.1	90.0	100.0	100.0	100.0	90.0	80.0	100.0	100.0	100.0	100.0	100.0
1.8 Cancer - Percentage of cancer patients treated within 62 day of urgent GP referral	85%	85%	83.1	73.0	82.3	86.0	93.6	90.2	92.4	84.9	89.2	79.2	86.4	81.3	86.2
1.9 Cancer - Percentage of cancer patients treated within 62 day from screening	90%	90%	83.0	85.7	93.3	96.8	100.0	92.3	100.0	89.5	94.7	96.7	75.6	72.2	90.5
1.10 ED - Percentage of ED patients treated in less than 4 hours	95%	95%	95.6	96.7	92.8	90.0	92.9	84.8	95.8	96.7	96.4	94.2	93.9	93.9	90.9

Quality (Strategic Objective 3: To have effective partnerships – locally through more integrated care and regionally through networked clinical service models)

	Target 18/19	Target 18/19 YTD	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18
2.0 HSMR for a rolling 12 months reported 2 months in arrears	96	96	97.09	107.85	99.78	88.80	99.38	106.00	106.07	106.39	105.78	106.05	106.93	104.9	105.6
2.1 SHMI	<=expected	<=expected			1.01			1.04				1.019		0.992	
2.2 Crude mortality	<=1.7	<=1.7	1.44	1.59	2.02	2.19	2.06	1.88	1.76	1.47	1.27	1.39	1.35	1.2	1.7
2.3 MRSA - Incidence of MRSA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 E. Coli - Hospital acquired (48 Hr) Infection rates per 1,000 bed days	0.21	0.21	0.07	0.36	0.20	0.19	0.14	0.17	0.14	0.07	0.07	0.29	0.28	0.27	0.20
2.5 Number of slips, trips and falls with harm (per 1,000 bed days)	2.0	2.0	1.80	1.29	1.64	2.05	1.31	1.05	1.15	0.97	1.05	1.68	1.54	1.58	1.19
2.6 Pressure Ulcers - Number of hosp acquired grade 2/3/4 pressure per 1,000 bed days	0.5	0.5	0.29	0.58	0.75	0.70	1.00	0.41	0.43	0.37	0.37	0.15	0.81	0.89	0.46
2.7 Sepsis - Proportion of patients receiving antibiotics within 1 hour	90%	90%	87.0	86.2	81.3	72.0	73.0	76.7	88.0	92.0	92.5	98.4	98.6	94.7	98.2
2.8 Antibiotic Empiric Review - % compliance with CQUIN requirements	90%	90%	100	100	100	100	100	92	100.0	100.0	100.0	100.0	100.0	100.0	93.0
2.9 Incident reporting – rate of incidents reported per 1,000 bed days	36	36	38.60	34.09	32.51	30.64	31.51	36.60	48.77	43.70	43.43	46.20	46.70	43.3	41.3
2.10 Friends & Family score - Inpatients and Daycases	97%	97%	97.19	97.43	97.57	97.85	98.03	97.52	97.97	98.04	96.85	98.12	97.38	98.2	97.2
2.11 Friends & Family score - ED	88%	88%	80.77	77	74.57	77.4	69.13	63.87	66.06	70.19	65.57	68.42	70.35	82.47	79.05
2.12 Eliminating mixed sex breaches	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Operational (Strategic Objective 2: To have a solid foundation of core acute services meeting all national standards)

	Target 18/19	Target 18/19 YTD	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18
3.0 Referrals - Number of new outpatients referrals received			6136	6264	5168	6267	5663	6310	6496	6616	6315	6642	6330	5989	7016
3.1 Outpatients - Number of new outpatients waiting to be seen			8171	7821	7696	7208	7050	7657	7964	8470	9872	10027	10436	9873	9982
3.2 Incomplete pathways - Number of patients on an incomplete pathway	14908	14908	16990	16062	15277	14887	15726	14908	15485	16019	15959	15655	15233	15152	15262
3.3 Outpatients - Percentage of new outpatient appointments cancelled by hospital < 5 weeks			2.6	2.0	2.4	2.7	3.7	4.5	3.6	2.4	2.0	2.8	3.4	3.8	2.4
3.4 Outpatients - Percentage of fup outpatient appointments cancelled by hospital < 5 weeks			4.6	3.2	3.1	2.9	3.8	4.1	3.1	2.4	2.8	2.6	3.0	2.4	2.2
3.5 Outpatients - Percentage of new outpatient appointments DNA	6%	6%	7.1	6.8	7.8	6.6	7.2	7.0	6.9	7.0	5.9	8.1	7.9	6.8	6.9
3.6 Outpatients - Percentage of follow up outpatient appointments DNA			7.1	6.9	8.0	6.7	7.4	7.3	7.1	7.5	6.2	7.7	6.9	6.2	6.2
3.7 Outpatients - Utilisation of consultant-led clinics	98%	98%	79.0	80.1	83.2	86.0	84.9	83.7	87.0	87.0	84.2	84.3	82.4	86.6	87.9
3.8 Waiting Times - Percentage of Diagnostic waits 6 weeks or less	99%	99%	99.7	99.8	99.8	99.9	99.9	99.7	99.8	99.8	98.4	96.6	96.6	94.2	95.9
3.9 Theatre - Percentage of theatre utilisation	85%	85%	94.9	94.9	98.0	96.0	92.3	87.4							
3.10 Cancelled Operations - Percentage of on day cancellations for non clinical reasons	0.8%	0.8%	0.7	0.8	1.0	1.1	1.6	1.7	1.0	0.5	1.3	1.0	0.7	1.2	1.1
3.11 Inpatients - Average Length of Stay	3.8	3.8	3.3	3.1	3.3	3.2	3.3	3.8	3.8	3.5	3.1	3.1	3.3	3.3	3.4
3.12 Beds - Number of beds open vs plan			491	511	514	536	550	550	494	474	486	484	474	486	485
3.13 Beds - Percentage bed occupancy	87%	87%	87.6	86.8	88.1	90.9	90.5	97.3	83.3	80.2	82.4	82.4	86.6	90.8	91.8
3.14 Percentage of re-admissions within 28 days of discharge			7.2	6.9	7.6	6.5	6.9	9.1	5.5	7.0	6.4	6.8	6.9	7.1	8.0
3.15 DTOC - Percentage of patients whose discharge from hospital was delayed	2.3%	2.3%	1.7	1.3	1.2	1.6	1.9	1.6	1.0	1.0	1.0	1.2	1.2	1.5	0.7

Workforce (Strategic Objective 4: To be in the top 20% of all NHS employers for staff experience as measured by the national staff survey and our own Your Voice survey)

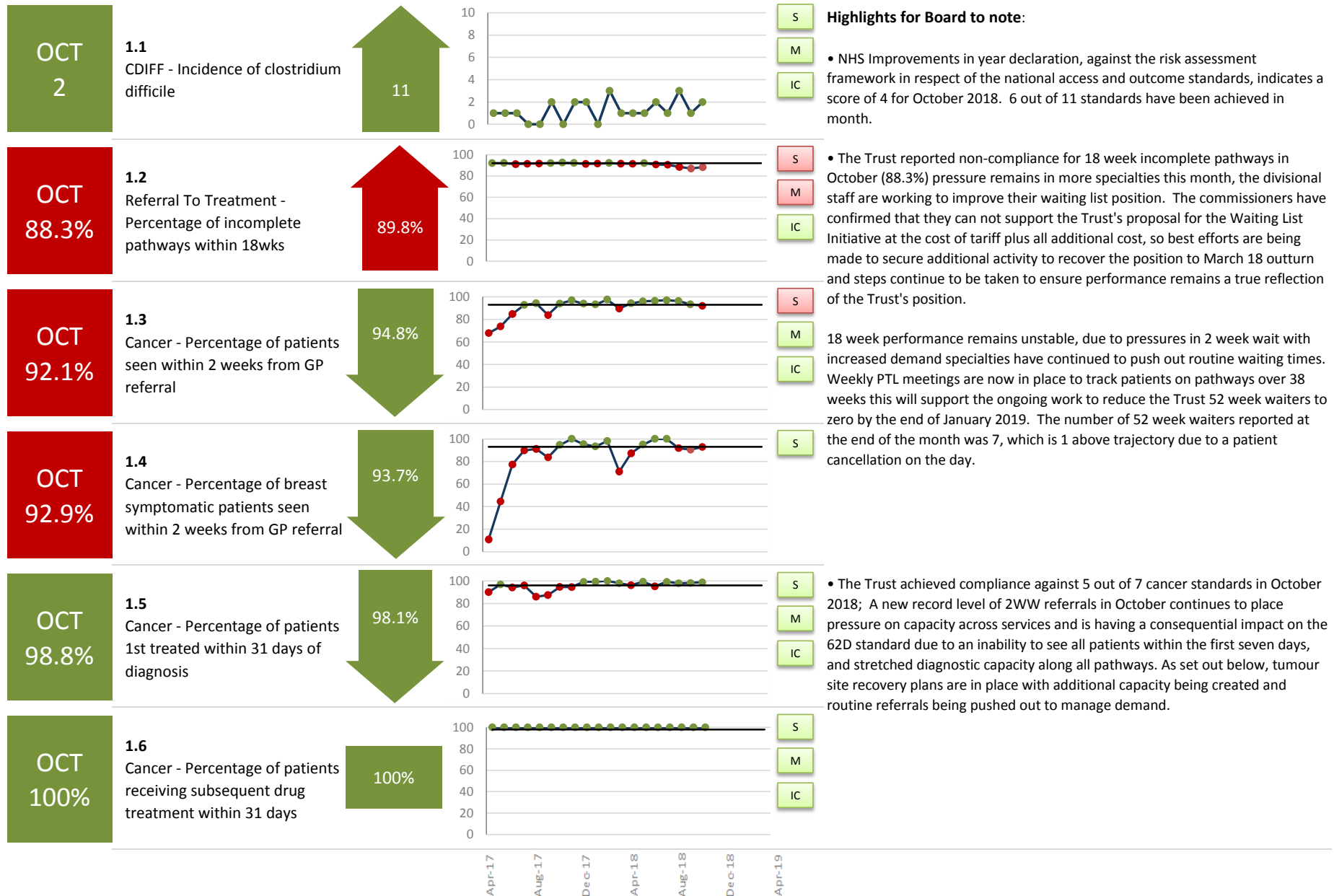
	Target 18/19	Target 18/19 YTD	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18
4.0 Staff Friends and Family Test - recommend as a place to work															
4.1 Staff Friends and Family Test - recommend care & treatment	72%	72%													
4.2 Staff Attendance	96%	96%	95.7	95.34	94.8	94.54	93.73	94.38	95.35	96.24	96.17	95.26	95.25	95.29	95.53
4.3 Staff Turnover (rolling 12 months)	12	12	10.6	10.6	10.2	10.2	10.3	9.9	9.9	9.8	9.8	9.7	10.3	10.0	9.6
4.4 Band 5 Nursing - Number of Vacancies									60.01	32.81	38.39	39.02	42.87	24.86	7.27
4.5 Consultant and Training Grade - Number of Vacancies									46.37	47.63	41.21	53.93	46.07	22.25	28.75
4.6 Agency Nursing Spend vs Plan (000's)	2400	1262	128	283	203	191	208	217	183	147	156	148	140	148	115
4.7 Locum Medical Spend vs Plan (000's)	5868	4039	891	773	839	741	788	943	694	706	709	772	569	570	595
4.8 Other Agency Spend vs Plan (000's)	1641	1135	201	155	105	114	164	152	128	189	191	129	139	127	142
4.9 Appraisals - Percentage of staff appraisals (within a rolling 12 months)	90%	90%							29.92	38.52	47.96	58.05	68.20	86.74	86.74
4.10 Appraisals - Percentage of consultant appraisals (within rolling 12 months)	90%	90%	78.39	78.28	79.05	77.0	76.92	80.00	79.79	80.41	78.28	78.29	78.30	73.82	80.31
4.11 Essential Training - Percentage of staff attending day one of essential training	90%	90%						66.00	66.00	74.00	66.00	66.00	66.00	71.00	68.00

Finance (Strategic Objective 5 - To have from NHS Improvement a financial sustainability risk rating of '4' and a 'green' governance rating, and to be deemed 'well-led' by NHS Improvement)

	Target 18/19	Target 18/19 YTD	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18
Use of Resources Metrics															
5.0 Liquidity ratio (days)	36.5	30.9	40.4	38.6	42.1	42.4	39.2	39.2	36.2	33	34	32.9	31.3	30.5	29
5.1 Capital Servicing Capacity (times)	2.43	1.28	1.96	1.51	2.29	2.41	2.26	2.48	(0.35)	(0.05)	0.78	0.83	0.98	0.91	0.82
5.2 Agency spend	10,647	6,868	7,463	8,674	9,820	10,888	12,048	13,360	1,005	2,051	3,103	4,150	4,999	5,841	6,692
5.3 I&E margin as a % of income	2.20%	(0.50%)	(0.02%)	(0.23%)	1.42%	1.48%	0.97%	1.67%	(3.95%)	(3.53%)	(1.00%)	(1.30%)	(1.20%)	(1.20%)	(1.60%)
5.4 Variance in I&E Margin	0.00%	0.00%	(0.89%)	(1.42%)	(0.04%)	(0.05%)	(1.00%)	(0.92%)	(3.45%)	(2.66%)	0.10%	0.00%	0.10%	0.00%	(1.10%)
Financial performance															
5.5 I&E - Cumulative Income & expenditure surplus/(Deficit) (before impairments) (000's)	£5,296	(£693)	(£22)	(£367)	£2,554	£2,963	£2,133	£4,057	(£766)	(£1,384)	(£626)	(£1,062)	(£1,254)	(£1,508)	(£2,287)
5.6 Contract - North Derbyshire CCG financial contract position (within 3% <->) (000's)	£140,695	£81,191	£79,257	£90,054	£101,507	£114,359	£127,051	£139,027	£11,181	£23,244	£34,698	£46,231	£57,987	£69,021	£81,259
5.7 Contract - Hardwick CCG financial contract position (within 3% <->)(000's)	£47,123	£27,197	£26,323	£30,005	£34,178	£39,113	£43,128	£46,340	£3,820	£7,242	£11,534	£15,530	£19,630	£23,319	£27,344
5.8 Cost of penalties (000's)	£0	£0	£0	£0	£0	(£20)	£0	£0	£0	£0	(£6)	(£18)	(£19)	(£23)	(£48)
5.9 Pay - including bank and agency	£158,515	£95,644	£89,709	£103,314	£116,803	£130,288	£143,678	£157,670	£13,399	£27,078	£40,609	£55,137	£68,850	£82,393	£96,323
5.10 Agency spend as % of total pay bill	6.72%	7.33%	9.2	8.9	8.5	8.3	8.4	8.9	7.5	7.57	7.6	7.53	7.26	7.09	6.95
5.11 Other Operating Expenses	£73,083	£43,147	£41,469	£47,836	£53,384	£59,775	£65,990	£72,616	£5,827	£12,270	£18,165	£24,657	£31,469	£37,467	£44,635
5.12 Financing Costs inc Depreciation	£8,720	£5,450	£5,456	£6,261	£7,063	£7,880	£8,762	£8,218	£641	£1,301	£1,957	£2,737	£3,511	£4,284	£5,056
5.13 CIP - Cumulative achievement of CIP target (000's)	£7,916	£2,259	£3,675	£4,091	£4,767	£5,166	£5,473	£5,815	£123	£218	£360	£576	£915	£1,253	£1,856
5.14 STF Achievement	£6,400	£2,880	(£1)	£0	£1,821	£710	(£766)	£1,878	£0	£0	£960	£1,387	£1,814	£2,240	£2,240
Liquidity															
5.15 Capital - Deliver the capital investment plan (85%-115% of plan) (000's)	£10,992	£6,821	£4,718	£5,225	£6,190	£6,895	£8,387	£10,281	£1,287	£2,296	£2,792	£3,366	£4,635	£5,394	£5,831
5.16 Cash balance (000's)	£27,022	£19,871	£23,772	£21,171	£24,332	£23,900	£27,107	£30,548	£27,699	£23,814	£26,477	£29,476	£30,423	£30,532	£27,874
5.17 Trade Debtors	£15,248	£19,698	£20,258	£22,701	£22,931	£23,863	£20,550	£15,075	£16,707	£19,052	£16,351	£13,979	£12,146	£10,952	£14,126
5.18 Trade Creditors	£15,811	£16,039	£16,204	£17,001	£17,196	£17,280	£19,344	£17,255	£16,960	£17,332	£16,605	£17,664	£17,138	£17,579	£18,906
5.19 Better Payment Practice Code (by number)	95%	95%	95.0	95.0	94.8	96.0	96.1	96.1	96.2	97.6	97.0	96.8	97.0	96.7	96.6

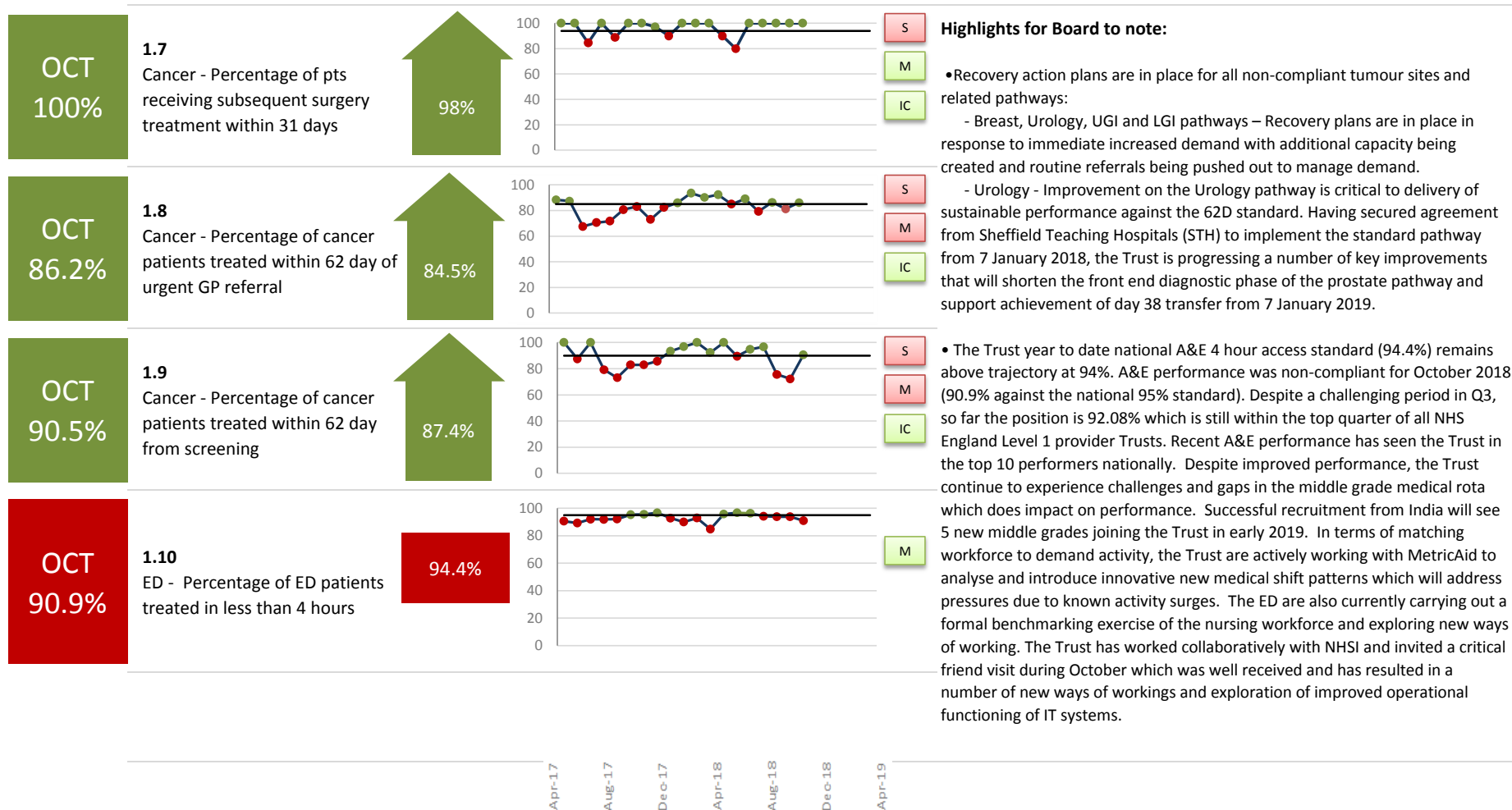
NHS Improvement (NHSI)

(Strategic Objective 1: To be rated as 'outstanding' by the CQC)



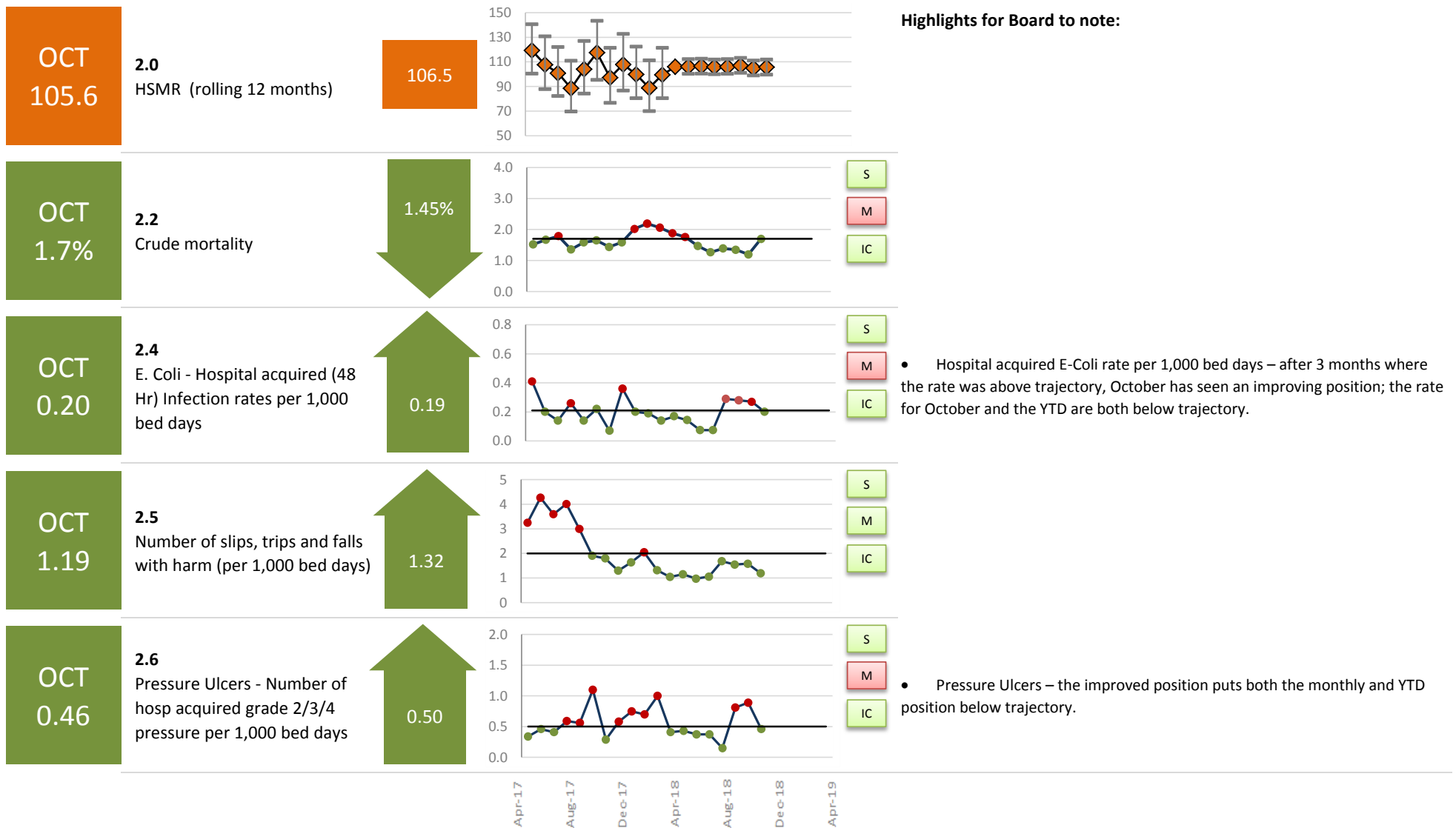
NHS Improvement (NHSI)

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Quality

(Strategic Objective 3: To have effective partnerships – locally through more integrated care and regionally through networked clinical service models)



Highlights for Board to note:

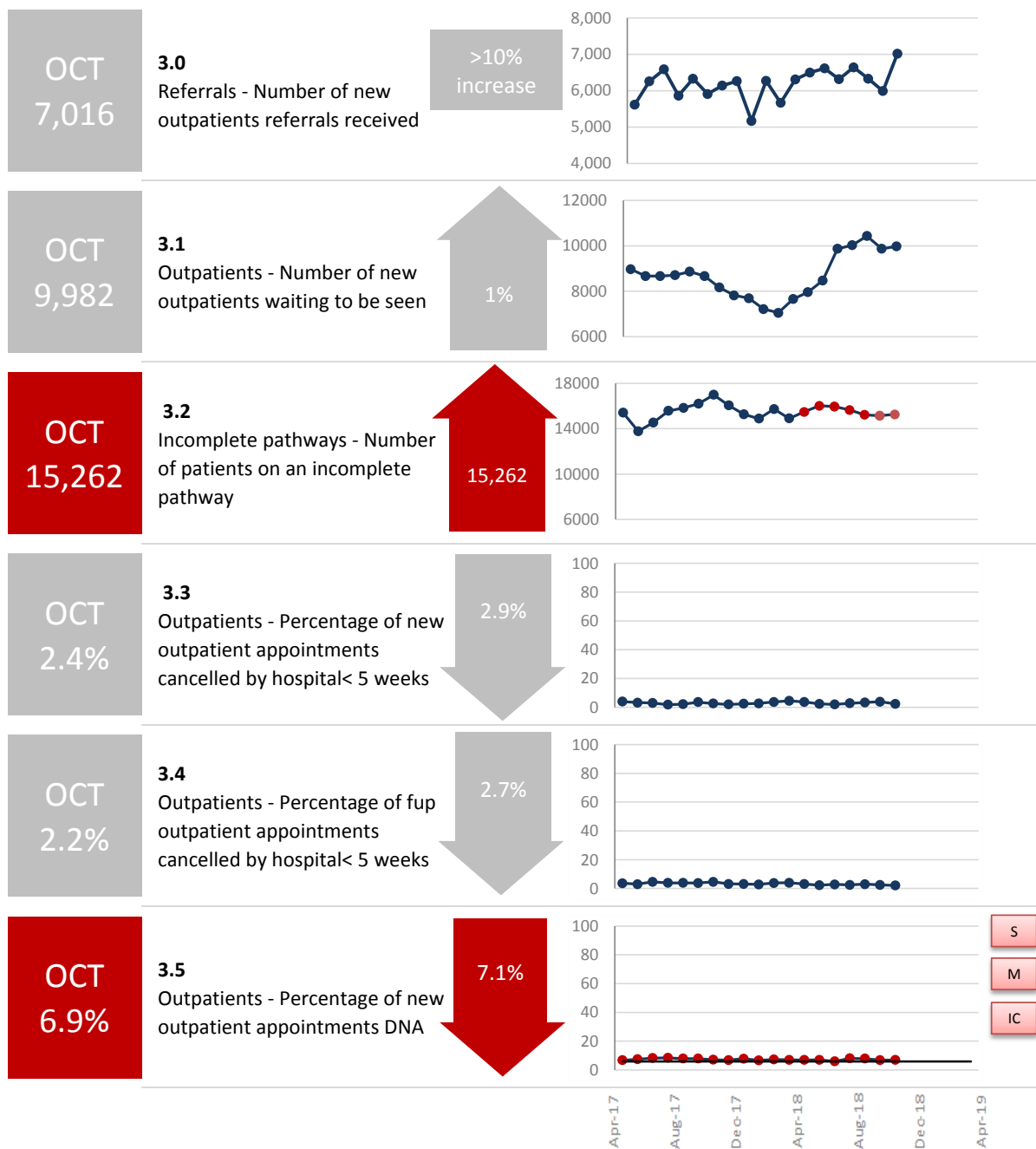
Quality

(Strategic Objective 3: To have effective partnerships – locally through more integrated care and regionally through networked clinical service models)



Operational

(Strategic Objective 2: To have a solid foundation of core acute services meeting all national standards)



Highlights for Board to note:

- Management of whole hospital activity has been exceptional. Average length of stay during the period remains consistent, the core bed base is now 458 with the closure of Elizabeth Ward (excluding Critical Care & Maternity) but with escalation beds being report daily up to a maximum of 18, these beds are open ahead of the Trust winter plan. Occupancy has deteriorated this month and is reporting over the standard of 87%, with additional beds open during the period. Delayed discharges remains compliant and is now being monitored against the local target of 2.3 and readmissions within 28 days has slightly deteriorated when compared with last month. These measures continue to be monitored closely within Divisions and at the Weekly Operational Meetings to ensure the improvements in length of stay and any reduction in beds that is agreed is not having any impact on patient experience. Management of patient flow at any one point in time remains key.

- Royal Primary Care continues to experience operational challenges in terms of patient access. The team have been successful in recruiting new GP's but equally lost similar numbers due to retirements. With respect to administration resources RPC continue to struggle to maintain a stable workforce and hence improved telephone access for patients is not being achieved as expected. New recruits are in place and being trained which will deliver the expected improvements. The focus of all the team is to reduce away operational backlogs as a result of the migration to system one.

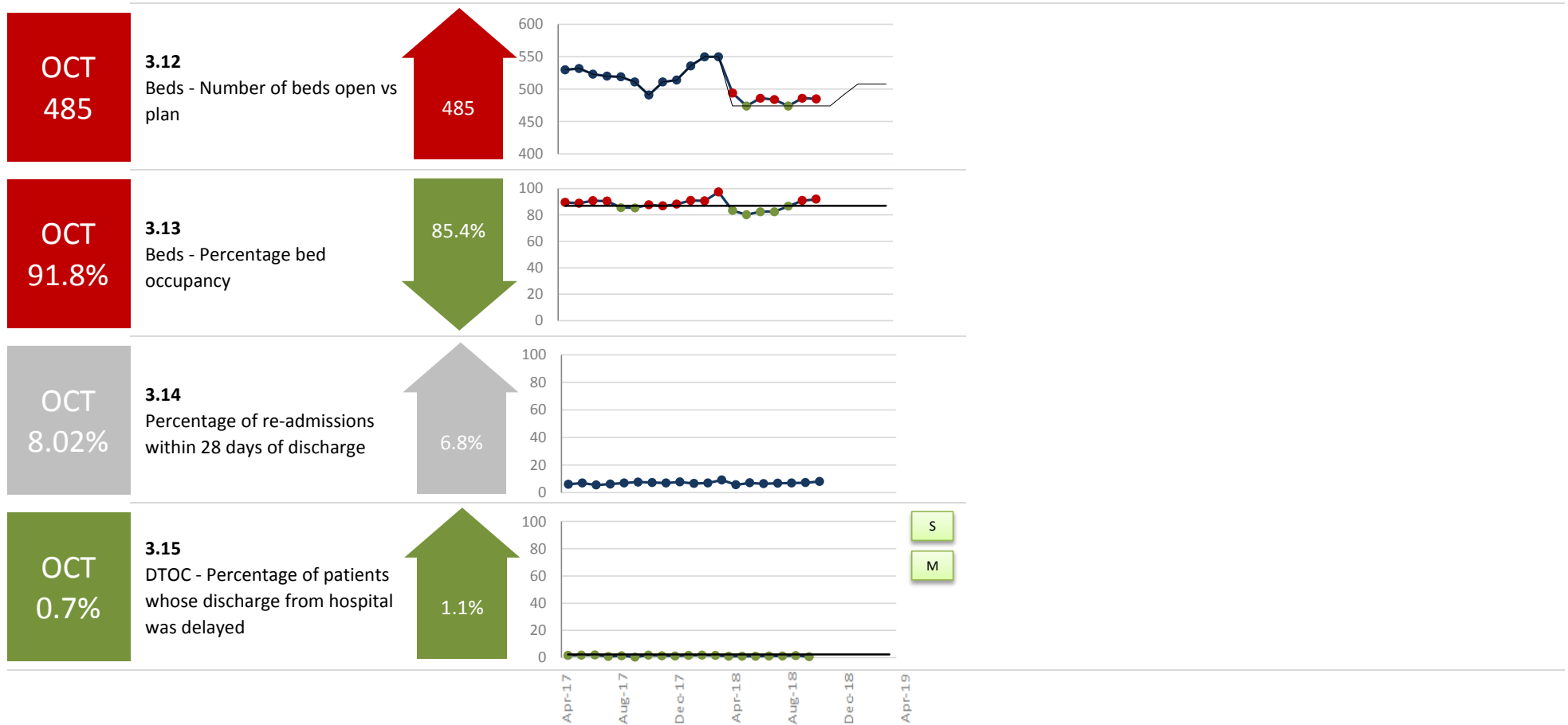
Operational

(Strategic Objective 2: To have a solid foundation of core acute services meeting all national standards)



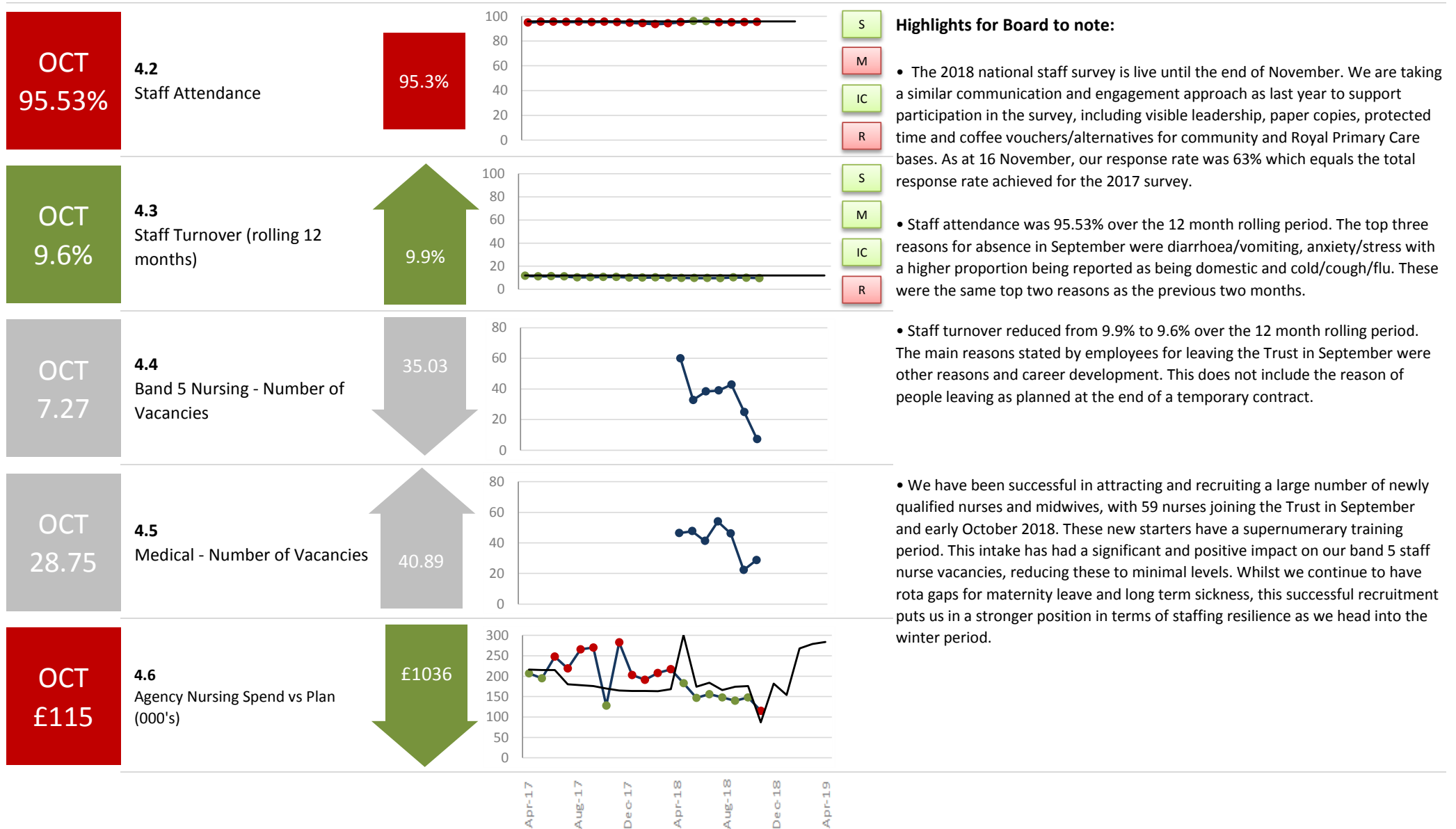
Operational

(Strategic Objective 2: To have a solid foundation of core acute services meeting all national standards)



Workforce

(Strategic Objective 4: To be in the top 20% of all NHS employers for staff experience as measured by the national staff survey and our own Your Voice survey)



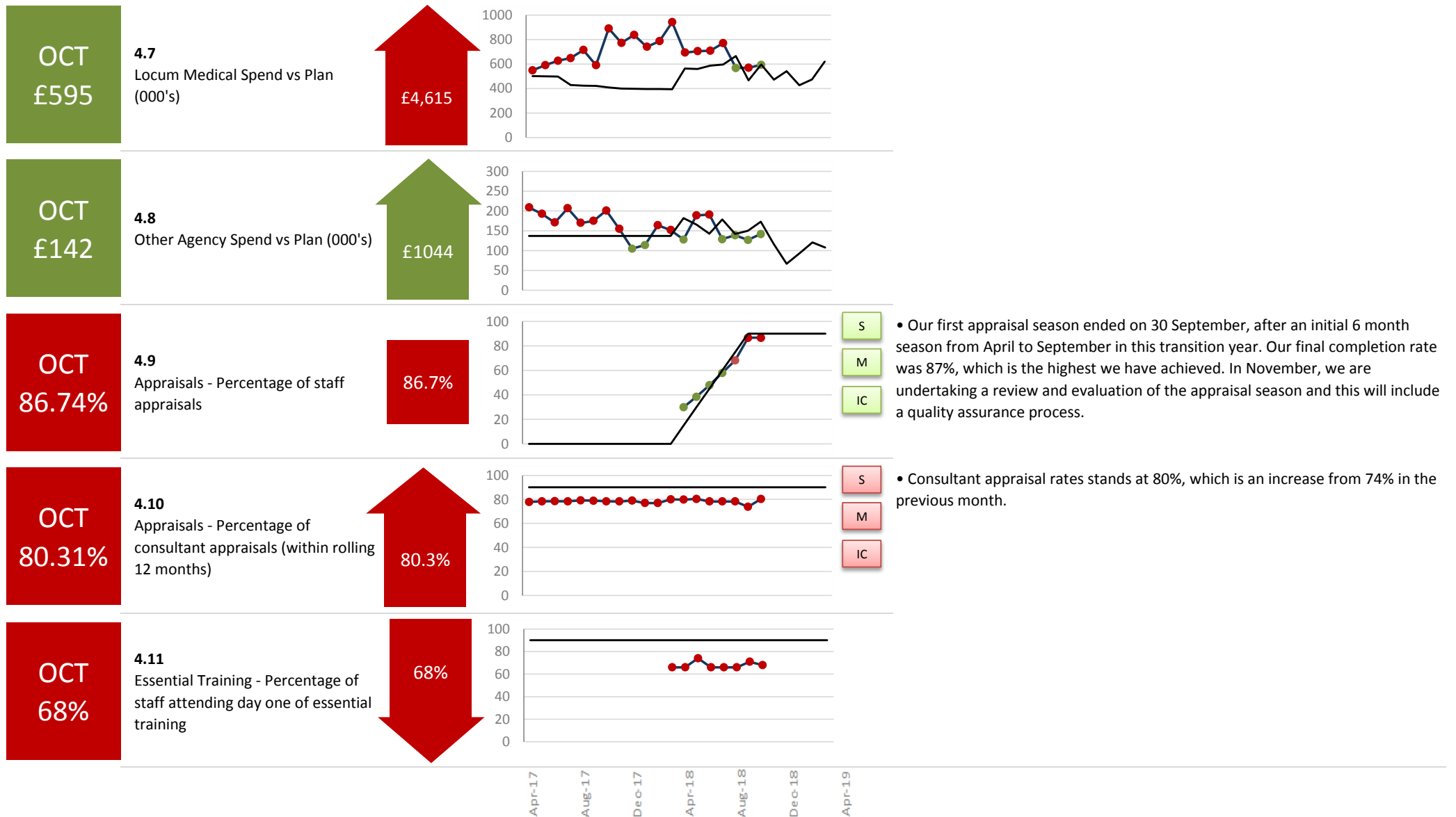
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Highlights for Board to note:

- The 2018 national staff survey is live until the end of November. We are taking a similar communication and engagement approach as last year to support participation in the survey, including visible leadership, paper copies, protected time and coffee vouchers/alternatives for community and Royal Primary Care bases. As at 16 November, our response rate was 63% which equals the total response rate achieved for the 2017 survey.
- Staff attendance was 95.53% over the 12 month rolling period. The top three reasons for absence in September were diarrhoea/vomiting, anxiety/stress with a higher proportion being reported as being domestic and cold/cough/flu. These were the same top two reasons as the previous two months.
- Staff turnover reduced from 9.9% to 9.6% over the 12 month rolling period. The main reasons stated by employees for leaving the Trust in September were other reasons and career development. This does not include the reason of people leaving as planned at the end of a temporary contract.
- We have been successful in attracting and recruiting a large number of newly qualified nurses and midwives, with 59 nurses joining the Trust in September and early October 2018. These new starters have a supernumerary training period. This intake has had a significant and positive impact on our band 5 staff nurse vacancies, reducing these to minimal levels. Whilst we continue to have rota gaps for maternity leave and long term sickness, this successful recruitment puts us in a stronger position in terms of staffing resilience as we head into the winter period.

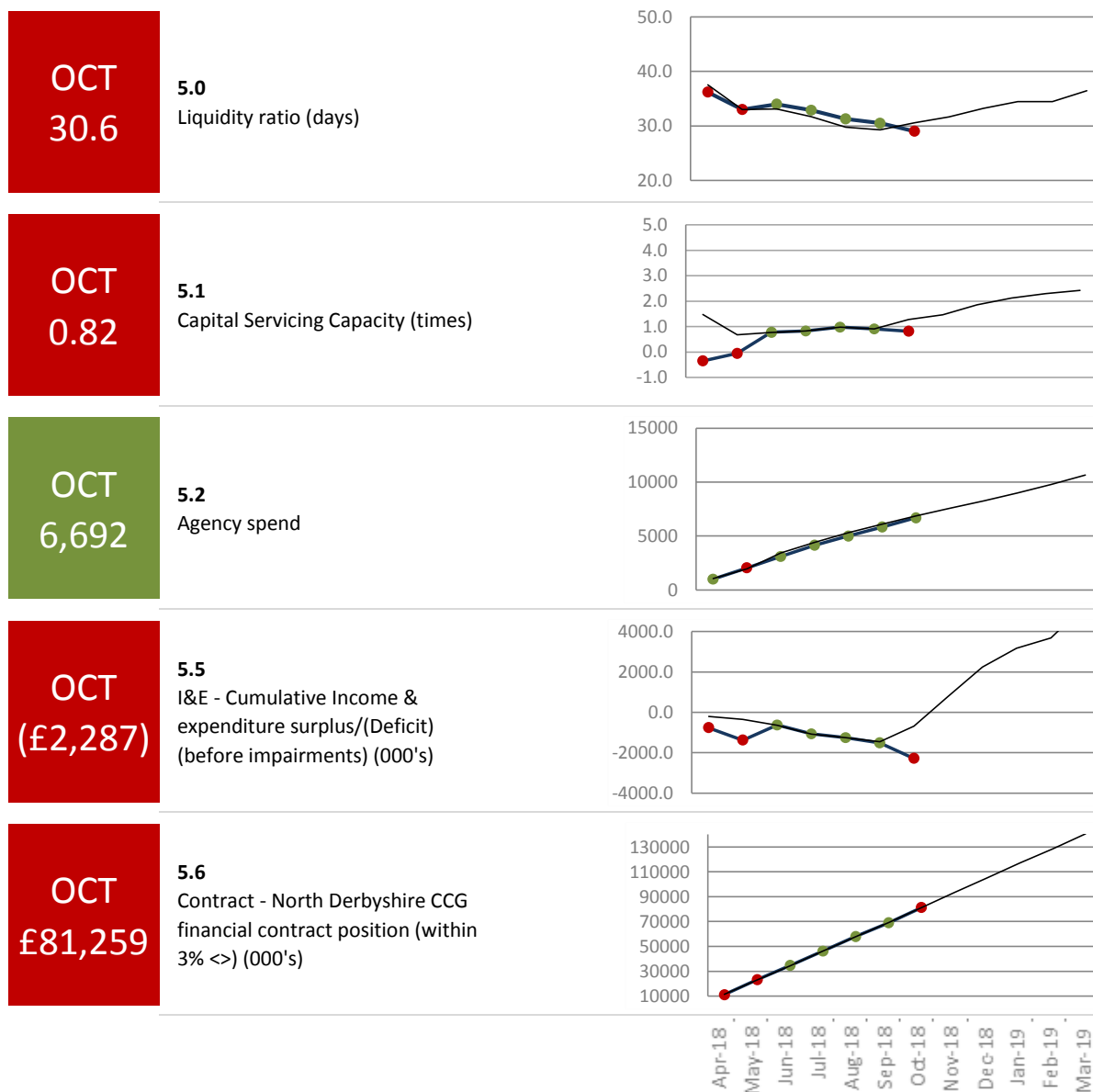
Workforce

(Strategic Objective 4: To be in the top 20% of all NHS employers for staff experience as measured by the national staff survey and our own Your Voice survey)



Finance

(Strategic Objective 5 - To have from NHS Improvement a financial sustainability risk rating of '4' and a 'green' governance rating, and to be deemed 'well-led' by NHS Improvement)



Highlights for Board to note:

1. A Use of Resources metric score of 3 has been achieved for Month 7 which is off plan.

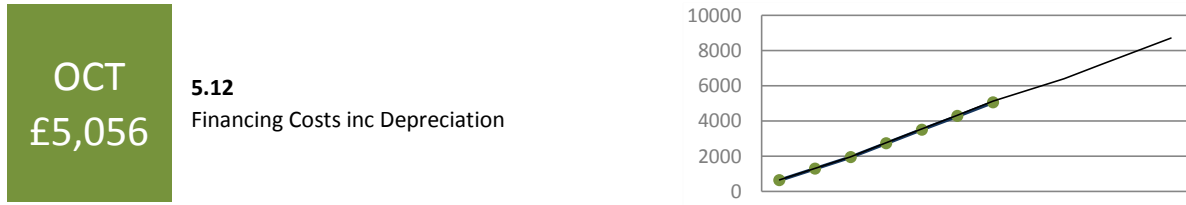
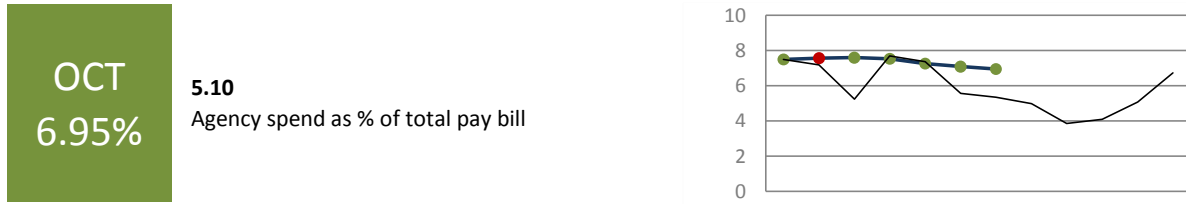
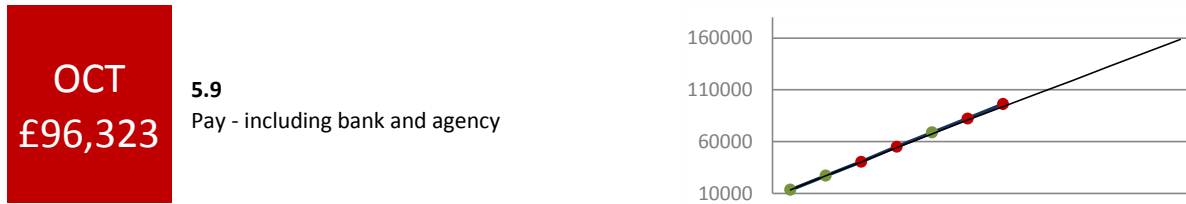
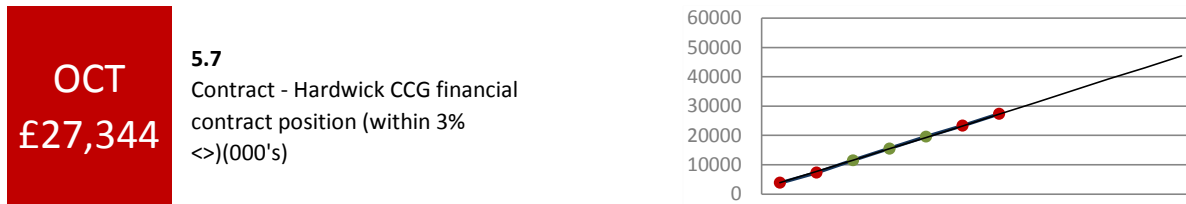
TABLE 1 Finance and use of resources metrics	YTD Plan	YTD Actual	18/19 Plan	Forecast
Capital service cover rating	3	4	2	2
Liquidity rating	1	1	1	1
I&E margin rating	3	4	1	1
Distance from financial plan		3		2
Agency rating	2	2	2	2
Risk rating after overrides		3		1

2. The year to date planned Control Total has not been achieved. We are £954k behind of our control total trajectory. (Appendix 1 – Income and Expenditure position).

TABLE 1 £'000s	Annual Plan	Plan YTD	Actual YTD	Variance YTD
NHS IMPROVEMENT CONTROL TOTAL	-1,104	-3,573	-4,527	954
Plus S&TF	6,400	2,880	2,240	640
SURPLUS / (DEFICIT) including S&TF	5,296	-693	-2,287	1,594
Remove net donated income and depreciation	-1	-56	-59	-3
NET SURPLUS / (DEFICIT) BEFORE IMPAIRMENTS & RESTRUCTURING	5,295	-749	-2,346	1,597

3. Income is £0.5m ahead of the budgeted position (£1m ahead of plan month 6). The key YTD variances include: Unplanned care income has deteriorated in month and is now £0.3m behind plan YTD, planned care income is £0.3m ahead of plan driven by increased volume in outpatients, A&E income is £0.5m ahead of plan £0.4m of which is volume related and high cost drugs are £0.3m ahead of plan.

(Strategic Objective 5 - To have from NHS Improvement a financial sustainability risk rating of '4' and a 'green' governance rating, and to be deemed 'well-led' by NHS Improvement)



Apr-18
May-18
Jun-18
Jul-18
Aug-18
Sep-18
Oct-18
Nov-18
Dec-18
Jan-19
Feb-19
Mar-19

Highlights for Board to note:

Significant progress has been made to reduce the coding backlog however the non elective position has moved by £0.4m from month 6 to month 7 as a result of the variance between estimated price and actual price for September activity, now coded. The September case mix represents the lowest month since 2016/17. An assumption has been made that we can achieve £100k per month for September and October in relation to reviewing and ensuring the accuracy of clinical coding.

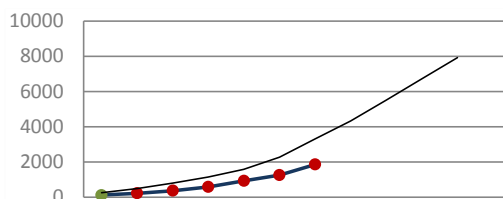
4. Expenditure is £2.1m overspent at month 7 (£1m month 6). Pay Expenditure is £0.7m above plan at month 7. Medical staffing is £0.9m overspent, £0.2m of which relates to under delivery of CIP with the remainder driven by agency pressures, particularly in surgery and RPC. The in month position has deteriorated significantly due to unplanned agency spend in Orthopaedics and Anaesthetics. Nursing is £0.7m overspent at month 7 (£0.5m month 6) due to bank and agency usage covering sickness and maternity leave within Medicine and Integrated Care and supporting one to one care for patients. A number of registered nurses have started in October but are largely supernumerary initially leading to a short term agency and bank cost pressure. Other staffing is underspent by £0.9m, of which £0.4m relates to contingency with further underspends due to vacancies within pathology, RPC and corporate areas.

Non Pay is £1.5m overspent against the budgeted position Other expenditure is overspent by £1.1m which includes the £0.4m personal injury provision, £0.2m related to computer licenses and maintenance, consultancy and professional fees are £0.2m overspent related to extending the Meridian work and advice related to the wholly owned subsidiary business case. Drugs are overspent by £0.4m mainly due to high cost drugs above plan, matched by an over performance on income.

(Strategic Objective 5 - To have from NHS Improvement a financial sustainability risk rating of '4' and a 'green' governance rating, and to be deemed 'well-led' by NHS Improvement)

OCT
£1,856

5.13
CIP - Cumulative achievement of CIP target (000's)

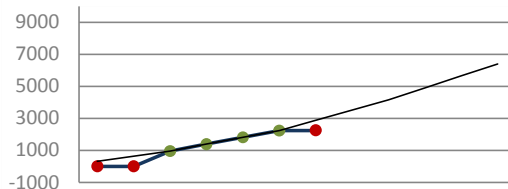


Highlights for Board to note:

5. The Cost Improvement Plan (CIP) to support delivery of the financial plan for 2018/19 is £7.9m. In month 7 CIP delivery is £1.9m against a plan of £2.3m. Full-year this equates to £3.3m against the target of £7.9m (42%), however £0.9m of this is non recurrent.

OCT
£2,240

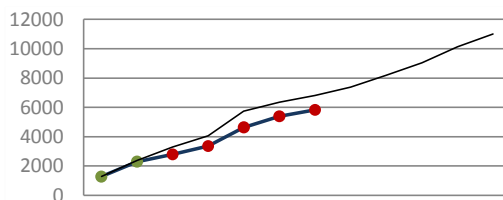
5.14
STF Achievement



6. Agency spend is £0.2m better than plan at month 7, with actual spend of £6.7m against a plan of £6.9m. Medical agency spend is a key challenge and forms a material part of CIP plans particularly within the Surgical division. Agency spend is reviewed in detail at Workforce Delivery Group.

OCT
£5,831

5.15
Capital - Deliver the capital investment plan (85%-115% of plan) (000's)

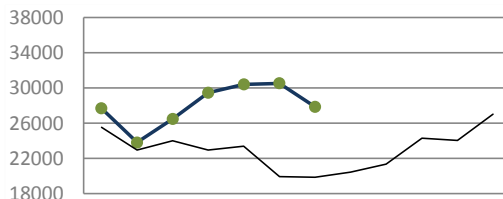


7. System Update. QIPP continues to be discussed weekly at the CEO/FD Joined Up Care Derbyshire meetings. Agreement has almost been reached with NHS England on a balanced QIPP position with the corresponding contract adjustments being worked through with DCHS & mental health. There is also an additional £3m QIPP badged against the acute sector with the specifics yet to be agreed.

8. Key Risks. The key drivers of financial risk as at month 7 are;

OCT
£27,874

5.16
Cash balance (000's)

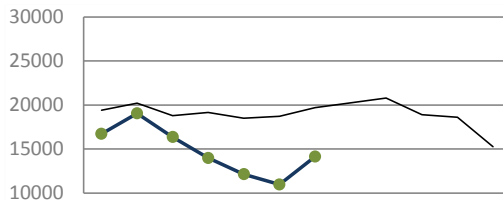


- Achievement of CIP plans including theatre redesign and medical agency savings and the realisation of identified efficiencies.
- If the non elective case mix reduction is sustained it presents a risk to achievement of the control total.

9. The cash position to date is £27.9m against a plan of £19.9m, the variance relates to timing differences in receivables (£5.6m) and the underspend on capital (£1m). (Appendix 3).

OCT
£14,126

5.17
Trade Debtors



10. The capital plan for 2018/19 is £11.1m. The month 7 capital expenditure to date is £5.8m against a plan of £6.8m, £1m behind plan mainly due to slippage on Divisional equipment and the Urgent Care Village project to date.

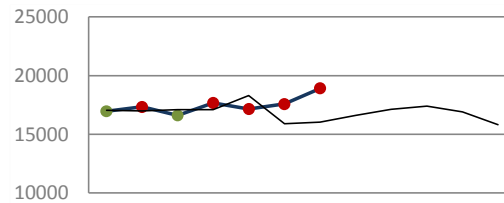
Apr-18
May-18
Jun-18
Jul-18
Aug-18
Sep-18
Oct-18
Nov-18
Dec-18
Jan-19
Feb-19
Mar-19

Finance

(Strategic Objective 5 - To have from NHS Improvement a financial sustainability risk rating of '4' and a 'green' governance rating, and to be deemed 'well-led' by NHS Improvement)

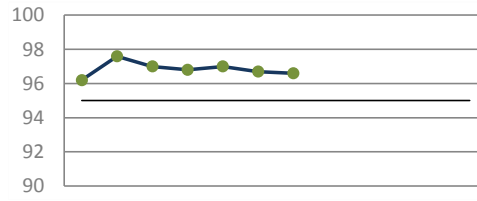
OCT
£18,906

5.18
Trade Creditors



OCT
96.7%

5.19
Better Payment Practice Code (by number)



Apr-18
May-18
Jun-18
Jul-18
Aug-18
Sep-18
Oct-18
Nov-18
Dec-18
Jan-19
Feb-19
Mar-19

Key actions:

Key Actions	Timescales	Monitoring
Review and recover CIP shortfall versus plan	Ongoing	Transformation Group
Review and monitor cost control arrangements within Divisions	Nov	Monitored through assurance meetings
Assess impact of RTT recovery on financial position.	Nov	Reported to HLT
Further development of opportunities schedule	Nov	Reported to HLT

Chesterfield Royal Hospital NHS Foundation Trust

Income & Expenditure Statement 1 April 2018 - 31 October 2018

	For the period 1 April 2018 to 31st October 2018					Month 6 Variance £'000
	APR Plan £'000	Budget £'000	Actual £'000	Variance £'000	Percent Variance	
INCOME						
Patient Care Income						
Elective Income	29,388	17,332	17,520	188	1.1	167
Non Elective Income	76,194	42,919	42,519	(400)	(0.9)	97
Outpatients	20,164	16,003	16,087	84	0.5	107
A&E Income	10,498	6,105	6,642	537	8.8	435
Pathology Income	4,464	2,604	2,738	134	5.1	140
High Cost Drugs and Devices Income	13,586	7,925	8,155	230	2.9	73
Other types of Activity Income - including RPC	61,153	31,956	32,023	67	0.2	(171)
Sustainability and Transformation Fund	6,400	2,880	2,240	(640)	(22.2)	0
Total NHS Clinical Income	221,847	127,724	127,924	200	0.2	848
Non NHS Clinical Income						
Private Patient Income	15	8	14	6	75.0	3
Other Non NHS Clinical Income	898	524	483	(41)	(7.8)	(19)
Total Non NHS Clinical Income	913	532	497	(35)	(6.6)	(16)
Other Income						
- Education & Training	8,196	4,855	4,956	101	2.1	90
- Research & Development	492	308	292	(16)	(5.2)	(10)
- Charitable Contribution to Capital Expenditure	48			0	0.0	(4)
- Other Non Patient Care Income	14,119	9,745	10,007	262	2.7	50
Total Non Patient Care Income	22,855	14,908	15,255	347	2.3	126
TOTAL OPERATING INCOME	245,615	143,164	143,676	512	0.4	957
EXPENDITURE						
Pay Expenditure						
Medical & Dental Staff	(45,167)	(27,296)	(28,172)	(876)	3.2	(526)
Nursing & Midwifery Staff	(59,055)	(36,039)	(36,779)	(740)	2.1	(464)
Other Staff & Contingencies	(54,461)	(32,309)	(31,371)	938	(2.9)	804
Total Pay Expenditure	(158,683)	(95,644)	(96,322)	(678)	(0.7)	(186)
Non-Pay Expenditure						
Drugs	(6,958)	(3,649)	(3,851)	(202)	5.5	(108)
Clinical Supplies	(16,626)	(10,683)	(10,668)	15	(0.1)	80
Other Expenditure & Contingencies	(35,747)	(20,891)	(21,968)	(1,077)	5.2	(715)
High Cost Drugs and Devices Pass Through Exp	(13,586)	(7,925)	(8,155)	(230)	0.0	(73)
Total Non-Pay Expenditure	(72,917)	(43,148)	(44,642)	(1,494)	(3.5)	(816)
TOTAL OPERATING EXPENDITURE	(231,600)	(138,792)	(140,964)	(2,172)	(1.6)	(1,002)
EARNINGS BEFORE INTEREST, TAX, DEPRECIATION & AMORTISATION (EBITDA) (PRE CHARITABLE DONATION FOR CAPEX ADJUSTMENT)	14,015	4,372	2,712	(1,660)	(38.0)	(44)
EBITDA %	5.7%	3.1%	1.9%	1.2%		0.1%
Depreciation	(5,657)	(3,028)	(3,028)	0	0.0	0
PDC Dividend	(2,881)	(1,981)	(1,981)	0	0.0	0
Other Financing Costs	(266)	(163)	(163)	0	0.0	(1)
Interest Receivable	84	49	115	66	134.7	53
NET SURPLUS / (DEFICIT) BEFORE IMPAIRMENTS & RESTRUCTURING	5,295	(751)	(2,345)	(1,594)	212.3	8
Less Charitable Contribution to Capital Expenditure	1			0		2
NHS IMPROVEMENT CONTROL TOTAL	5,296	(751)	(2,345)	(1,594)	212.3	10
Less PSF Fund (above)	(6,400)	(2,880)	(2,240)	640		0
NHS IMPROVEMENT CONTROL TOTAL exc PSF (Excludes Impairments)	(1,104)	(3,631)	(4,585)	(954)		10
Net Impairments	(872)	(327)	0	327		0.0
NET SURPLUS / (DEFICIT) AFTER IMPAIRMENTS & RESTRUCTURING	(1,976)	(3,958)	(4,585)	(627)		10

Capital Expenditure Statement

Capital Expenditure - NHSI 5 Year Plan						1 April 18 - 31 October 18			Forecast Outturn 18/19		
	2018/19 £'000	2019/20 £'000	2020/21 £'000	2021/22 £'000	2022/23 £'000	Plan to date £000's	Actual £000's	Variance £000's	FOT 17/18	Variance	Comment
Development Schemes											
<i>Imaging Reorganisation</i>	2,070					2,003	2,036	33	2,082	12	Estimated outturn of final IHP costs and gain share
<i>ED Extension including GP streaming</i>	1,192					1,192	1,117	(75)	1,147	(45)	Included estimate of gain share
<i>Urgent Care Village</i>	1,000	8,800	8,800	1,500		425	216	(209)	1,355	355	Best estimate based on cashflow from IHP plus internal staffing and advisors - VAT included
<i>Additional Substation</i>	75					0	0	0	0	(75)	Estates have put in place a change in practice so this is not required any longer
<i>PACU/IHDU/ITU</i>	300	7,700				119	5	(114)	180	(120)	Work is progressing on the business cases however it is unlikely that £300k will be spend by the end of the year.
Total Development Schemes	4,637	16,500	8,800	1,500	0	3,739	3,373	(366)	4,764	127	
Maintenance Schemes											
<i>Pharmacy Aseptic refurbishment</i>	445					445	483	38	513	68	Overspend due to delay in start of works and discovery items, and extended programme
<i>Ward refurbishments</i>	1,200	1,200	1,200	1,200	1,200	0	0	0	2	(1,198)	It has been agreed no ward upgrade can happen this financial year.
<i>Estates schemes</i>	550	230	230	230	230	325	214	(111)	550	0	
Total Maintenance Schemes	2,195	1,430	1,430	1,430	1,430	770	697	(73)	1,065	(1,130)	
Other Capital Expenditure											
<i>Central IT Equipment & Applications</i>	1,160	1,500	1,500	1,500	1,500	837	428	(409)	1,160	0	LIMS Project delayed beyond 18/19. However it has been agreed to bring forward other projects to offset the underspend.
<i>Divisional Equipment, minor works & Applications</i>	3,000	2,000	2,000	2,000	2,000	1,475	1,174	(301)	3,448	448	Divisions have prioritise their £9.5m equipment due for replacement, along side minor works and IT applications. They are in the process of checking they can get these by the end of March 19.
Total Other Expenditure	4,160	3,500	3,500	3,500	3,500	2,312	1,602	(710)	4,608	448	
<i>Other schemes & previous years unders/overs</i>	0	0	0	0	0	0	158	158	166	166	
Total NHS Capital Expenditure	10,992	21,430	13,730	6,430	4,930	6,821	5,830	(991)	10,603	(389)	
Donated Assets	96	100	100	100	100	0	0	0	96	0	
TOTAL CAPITAL EXPENDITURE	11,088	21,530	13,830	6,530	5,030	6,821	5,830	(991)	10,699	(389)	

KEY POINTS

We are currently £1.0m (14.5%) below the capital expenditure plan. The forecast outturn is now expected to be £10.7m.

The Development & Maintenance Schemes are below plan by £440k due to delays in schemes compared to planned. Yearend expenditure is now expected to be £1m below plan as ward upgrades will not happen before yearend. This will partly fund expected overspend on equipment and expenditure delayed from previous year.

Divisional equipment and minor works schemes are underspent by £300k this mainly relates to delay of replacement X-Ray rooms. Divisions have prioritised equipment requirements and these are now expected to be £450k overspend which is funded with the underspend on ward upgrades.

Central IT expenditure is £400k behind plan due to the LIMS project and Core Network upgrade. Lims project will not happen in 18/19 other plans have now been agreed to be brought forward so expenditure by the end of the year will be as planned.

There is also £160k expenditure from the 17/18 plan that was not finalised by March 18.

ACTIONS TO BE TAKEN

Divisions have prioritised equipment and are in the process of confirming, in conjunction with procurement, that these can be on site for the end of March 19. If any changes are needed this report will be updated.

Divisions, Estates and Finance to continue to review scheme costs and timescales and report when necessary.

Chesterfield Royal Hospital NHS Foundation Trust

Balance Sheet as at 31 October 2018

	APR Plan Balance Sheet (£'000)	YTD Plan Balance Sheet (£'000)	YTD Actual Balance Sheet (£'000)	Variance from Plan (£'000)	M7 Year end Forecast Actuals (£'000)	Variance (£'000)
FIXED ASSETS	108,108	104,671	116,959	12,288	107,708	(400)
DEBTORS DUE OVER 1YR	708	708	639	(69)	708	0
CURRENT ASSETS						
Stock	4,400	4,300	4,341	41	4,400	0
Trade & Other Receivables: NHS	11,100	14,600	8,996	(5,604)	11,100	0
Trade & Other Receivables: Non-NHS	3,440	4,390	4,492	102	3,440	0
Cash & Short-Term Deposits	27,022	19,871	27,874	8,003	27,421	399
	45,962	43,161	45,703	2,542	46,361	399
CURRENT LIABILITIES						
Trade & Other Payables: Capital	(825)	(240)	(930)	(690)	(825)	0
Trade & Other Payables: Non-Capital	(14,986)	(15,799)	(18,092)	(2,293)	(14,986)	0
Short-Term Capital Loans & Finance Lease Creditors	(1,620)	(2,124)	(2,124)	0	(1,620)	0
Short-Term Deferred Income	(764)	(764)	(895)	(131)	(764)	0
Short-Term Provisions	(218)	(223)	(207)	16	(218)	0
NET CURRENT ASSETS	27,549	24,011	23,455	(556)	27,948	399
TOTAL ASSETS LESS CURRENT LIABILITIES	136,365	129,390	141,053	11,663	136,364	(1)
LONG-TERM CAPITAL LOANS & FINANCE LEASE CREDITORS	(12,150)	(12,960)	(12,960)	0	(12,150)	0
LONG-TERM PROVISIONS	(1,874)	(1,931)	(1,903)	28	(1,874)	0
TOTAL ASSETS EMPLOYED	122,341	114,499	126,190	11,691	122,340	(1)
FINANCED BY:						
TAXPAYERS EQUITY						
Public Dividend Capital	48,223	48,223	48,223	0	48,223	0
Revaluation Reserve	17,339	14,995	21,526	6,531	17,333	(6)
Income & Expenditure Reserve	56,778	51,281	56,441	5,160	56,784	6
	122,340	114,499	126,190	11,691	122,340	0

Cash Flow Statement 1 April 2018 to 31 October 2018

	APR Plan Cash Flow (£'000)	YTD Plan Cash Flow (£'000)	YTD Actual Cash Flow (£'000)	Variance from Plan (£'000)	M7 Year end Forecast Actuals (£'000)	Variance (£'000)
EBITDA	13,919	4,372	2,712	(1,660)	13,834	(85)
Working Capital Movements	(1,258)	(5,956)	2,730	8,686	(1,222)	36
Cash Flow from Operating Activities	12,661	(1,584)	5,442	7,026	12,612	(49)
Capital Expenditure - NHS	(10,992)	(6,821)	(5,831)	990	(10,603)	389
Disposal proceeds	0	0	0	0	0	0
Cash Flow before Financing	1,669	(8,405)	(389)	8,016	2,009	340
Financing						
PDC Paid	(2,378)	(1,195)	(938)	257	(2,378)	0
PDC Received	0	0	0	0	0	0
Interest Received/(Paid)	(193)	(94)	(37)	57	(100)	93
Finance leases	0	0	0	0	0	0
Charitable donations (cash) to capital expenditure	0	0	0	0	0	0
Capital loan repayment	(2,624)	(1,310)	(1,310)	0	(2,624)	0
Capital loan drawdown	0	0	0	0	0	0
	(5,195)	(2,599)	(2,285)	314	(5,102)	93
Net Cash Movement	(3,526)	(11,004)	(2,674)	8,330	(3,093)	433
Reconciliation of Cash Balance Movements						
Opening Cash 01/04/2018	30,548	30,548	30,548	0	30,514	(34)
Closing Cash 31/10/2018	27,022	19,871	27,874	8,003	27,421	399
Net Cash Movement	(3,526)	(10,677)	(2,674)	8,003	(3,093)	

Balance Sheet is £11.7m ahead of plan due to a combination of the following:




































- Fixed assets - £12.3m ahead of plan mainly due to the 2017/18 YE outturn for the valuation of Land & Buildings being higher than planned due to the revised estate valuation inclusive of VAT.
- Trade & Other Receivables: NHS - £5.6m lower than plan mainly due to NHS Trade Receivables being lower than anticipated.
- Cash - £8.0m higher than plan mainly due to timing differences of Receivables.
- Trade & Other Payables: Capital - £0.7m higher than planned mainly due to timing differences.
- Trade & Other Payables: Non Capital - £2.3m higher than planned mainly due to timing differences.
- Revaluation Reserve - £6.5m ahead of plan due to the 2017/18 YE outturn for the valuation of Land & Buildings being higher than planned due to the revised estate valuation inclusive of VAT.
- Income & Expenditure Reserve - £5.2m ahead of plan mainly due to the 2017/18 YE outturn being higher than planned due to the revised estate valuation resulting in lower impairments, plus a higher than planned YTD deficit.

Income and Expenditure Divisional Summary - Month 7





	Income Expenditure : Position			Income				Expenditure				Net Position			
	Annual Plan £'000	Annual Plan £'000	Annual Plan £'000	Plan YTD	Actual YTD	Variance (Fav)/Adv	Risk Rating	Plan YTD	Actual YTD	Variance (Fav)/Adv	Risk Rating	Plan YTD	Actual YTD	Variance (Fav)/Adv	Risk Rating
Surgical Services Division															
Integrated Surgery	(29,383)	15,222	(14,161)	(17,058)	(17,158)	(100)	G	8,990	9,062	72	A	(8,068)	(8,096)	(28)	G
Orthopaedics and Specialist	(24,223)	12,011	(12,212)	(14,106)	(14,767)	(661)	G	7,120	7,092	(28)	G	(6,986)	(7,675)	(689)	G
Surgical Support Services	(10,350)	25,789	15,439	(6,044)	(5,751)	292	A	15,154	15,123	(31)	G	9,110	9,372	261	A
General Surgical Specialties	0	(1,149)	(1,149)	0	0	0		(28)	338	366	R	(28)	338	366	R
Integrated Surgery Total	(63,956)	51,873	(12,083)	(37,208)	(37,676)	(468)	G	31,236	31,615	379	A	(5,972)	(6,061)	(89)	G
Medicine & Emergency Care Division															
Acute Medicine	(13,391)	16,146	2,755	(7,741)	(8,246)	(505)	G	9,229	9,678	449	A	1,488	1,432	(56)	G
Specialty Medicine	(10,545)	11,521	976	(6,183)	(6,698)	(515)	G	6,523	6,676	153	A	340	(22)	(362)	G
General Medicine	(53,909)	15,568	(38,341)	(30,570)	(29,608)	963	A	9,191	9,414	223	A	(21,379)	(20,194)	1,186	A
Medicine & EC Divisionwide	0	6,514	6,514	0	0	0		4,207	4,085	(122)	G	4,207	4,085	(122)	G
Medicine & Emergency Care Division Total	(77,845)	49,749	(28,096)	(44,494)	(44,552)	(58)	G	29,150	29,853	703	A	(15,344)	(14,699)	645	A
Integrated Care Division															
Maternity and Gynaecology	(19,235)	9,596	(9,639)	(11,049)	(10,923)	126	A	5,679	6,073	394	A	(5,370)	(4,850)	520	A
Child Health and CAMHS	(17,469)	14,170	(3,299)	(10,114)	(10,081)	33	A	8,301	8,135	(166)	G	(1,813)	(1,946)	(133)	G
Pharmacy & Therapies	(2,106)	9,366	7,260	(1,229)	(1,132)	97	A	5,729	5,457	(272)	G	4,500	4,325	(175)	G
Imaging	(5,514)	8,792	3,278	(3,216)	(3,415)	(199)	G	5,181	5,446	265	A	1,965	2,031	66	A
Pathology	(4,519)	8,889	4,370	(2,636)	(2,785)	(149)	G	5,240	4,960	(280)	G	2,604	2,175	(429)	G
General Integrated Care	0	909	909	0	0	0		546	593	47	A	546	593	47	A
Integrated Care Division Total	(48,843)	51,722	2,879	(28,245)	(28,336)	(92)	G	30,676	30,664	(12)	G	2,431	2,328	(104)	G
Royal Primary Care	(5,189)	5,592	403	(3,027)	(2,886)	141	A	3,326	3,395	69	A	299	509	210	R
High Cost Drugs/Chemo	(13,586)	12,779	(807)	(7,925)	(8,155)	(230)	G	7,189	7,419	230	A	(736)	(736)	(0)	G
CQUIN including reserve	(4,727)	0	(4,727)	(2,758)	(2,678)	80	A	0	0	0		(2,758)	(2,678)	80	A
Patient Transport	(1,278)	1,174	(104)	(745)	(745)	0	G	685	613	(72)	G	(60)	(133)	(72)	G
Block & Other	(734)	0	(734)	(442)	(656)	(214)	G	0	0	0		(442)	(656)	(214)	G
STF	(6,400)	0	(6,400)	(2,880)	(2,240)	640	R	0	0	0		(2,880)	(2,240)	640	R
Total Clinical	(222,557)	172,889	(49,668)	(127,724)	(127,924)	(200)	G	#####	103,559	1,297	A	(25,462)	(24,365)	1,097	A
Corporate & Other															
Facilities	0	11,298	11,298	0	0	0		7,200	7,296	96	A	7,200	7,296	96	A
Finance	0	3,205	3,205	0	0	0		1,596	1,943	346	R	1,596	1,943	346	R
IT	0	3,914	3,914	0	0	0		2,270	2,458	189	A	2,270	2,458	189	A
Workforce & OD	0	2,944	2,944	0	0	0		1,458	1,229	(229)	G	1,458	1,229	(229)	G
Chief Execs	0	397	397	0	0	0		461	589	128	R	461	589	128	R
Information & Central team (COO)	0	4,936	4,936	0	0	0		3,128	2,986	(141)	G	3,128	2,986	(141)	G
Medical Director	0	(930)	(930)	0	0	0		(560)	(513)	47	A	(560)	(513)	47	A
Clinical Standards & Governance	0	10,679	10,679	0	0	0		6,217	6,172	(45)	G	6,217	6,172	(45)	G
Capital Charges	0	9,592	9,592	0	0	0		4,336	4,284	(52)	G	4,336	4,284	(52)	G
Reserves & Corporate	0	(790)	(790)	0	0	0		432	267	(165)	G	432	267	(165)	G
Total Corporate	0	45,245	45,245	0	0	0		26,537	26,711	174	A	26,537	26,711	174	A
Trust Position	(222,557)	218,134	(4,423)	(127,724)	(127,924)	(200)	G	#####	130,270	1,471	A	1,075	2,346	1,271	R
Less net donated income and depreciation	0	0	0	0	0	0		(56)	(59)	(3)		(56)	(59)	(3)	
Less Impairments		(873)	(873)	0	0	0		(327)	0	327		(327)	0	327	
Less Shortfall on S&T fund due to Operational targets	6,400		6,400	2,880	2,240	(640)		0	0	0		2,880	2,240	(640)	
NHS Improvement Control Total	-216,157	217,261	1,104	-124,844	-125,684	(840)	G	#####	130,212	1,795	A	3,572	4,527	955	R

Glossary

NHSI

1.0	Use of Resources Metrics		
1.1	CDIFF - Incidence of clostridium difficile	Number of CDiff incidences reported during the month	
1.2	Referral To Treatment - Percentage of incomplete pathways within 18wks	Total number of patients who were admitted for treatment within 18 weeks of their referral / Total number of patients who were admitted for treatment within the period	   
1.3	Cancer - Percentage of patients seen within 2 weeks from GP referral	Total number of patients seen within 14 days of an urgent GP referral for suspected cancer / Total number of patients with a referral for suspected cancer seen within the period	   
1.4	Cancer - Percentage of breast symptomatic patients seen within 2 weeks from GP referral	Total number of patients seen within 14 days of an urgent GP referral for suspected cancer / Total number of patients with a referral for suspected cancer seen within the period	   
1.5	Cancer - Percentage of patients 1st treated within 31 days of diagnosis	Total number of patients treated within 31 days from their decision to treat date / Total number of patients treated within the period	   
1.6	Cancer - Percentage of patients receiving subsequent drug treatment within 31 days	Total number of patients treated within 31 days from their decision to treat date (earliest clinical appropriate date to start of second or subsequent treatment) / Total number of patients receiving subsequent drug treatment within the period	   
1.7	Cancer - Percentage of pts receiving subsequent surgery treatment within 31 days	Total number of patients treated within 31 days from their decision to treat date (earliest clinical appropriate date to start of second or subsequent treatment) / Total number of patients receiving subsequent surgery treatment within the period	   
1.8	Cancer - Percentage of cancer patients treated within 62 day of urgent GP referral	Total number of patients treated within 62 days from an urgent GP referral / Total number of patients treated within the period from an urgent GP referral	   
1.9	Cancer - Percentage of cancer patients treated within 62 day from screening	Total number of patients treated within 62 days from an urgent referral from NHS cancer screening programme / Total number of patients treated within the period from an urgent GP referral	   
1.10	ED - Percentage of ED patients treated in less than 4 hours	Total number of patients who were seen, treated and discharged/admitted from ED within 4 hours / Total number of patients who were seen, treated and discharged/admitted from ED in the period	   

Quality

2.0	HSMR for a rolling 12 months reported 2 months in arrears	HSMR for a rolling 12 months reported 2 months in arrears	
2.1	SHMI		
2.2	Crude mortality	Number of patients who died in hospital as a percentage of all discharges	   

2.3	MRSA - Incidence of MRSA		
2.4	E. Coli - Hospital acquired (48 Hr) Infection rates per 1,000 bed days	Number of incidences of hospital acquired (post 48 hour) E Coli per month reported per 1000 bed days	
2.5	Number of slips, trips and falls with harm (per 1,000 bed days)	Number of incidences of slips, trips and falls which resulted in harm per month reported per 1000 bed days	
2.6	Pressure Ulcers - Number of hosp acquired grade 2/3/4 pressure per 1,000 bed days	Number of incidents of hospital acquired grade 2,3,4 pressure ulcers per month reported per 1,000 bed days	
2.7	Sepsis - Proportion of patients receiving antibiotics within 1 hour	% of patients with red flag sepsis who receive antibiotics within 60 minutes of Sepsis being identified (from monthly Sepsis audit).	
2.8	Antibiotic Empiric Review - % compliance with CQUIN requirements	% of patients with red flag sepsis who's antibiotics are reviewed within 72 hours of commencement.	
2.9	Incident reporting – rate of incidents reported per 1,000 bed days		
2.10	Friends & Family score - Inpatients and Daycases		
2.11	Friends & Family score - ED	Score - Total respondents (Inpatient/Daycase) who answered Extremely likely or likely / Total number of respondents.	
2.12	Eliminating mixed sex breaches	Score - Total respondents (ED) who answered Extremely likely or likely / Total number of respondents.	

Operational

3.0	Referrals - Number of new outpatients referrals received	Number of referrals received within the period	
3.1	Outpatients - Number of new outpatients waiting to be seen	Number of patients waiting for a new appointment within the period	
3.2	Outpatients - Number of follow up outpatients waiting to be seen	Number of patients waiting for a follow up appointment within the period	
3.3	Outpatients - Percentage of new outpatient appointments cancelled by hospital < 5 weeks	The number of patients whose booked new outpatient appointment was cancelled by the hospital with < 5 weeks notice / the total number of outpatients in the period	
3.4	Outpatients - Percentage of fup outpatient appointments cancelled by hospital < 5 weeks	The number of patients whose booked follow up outpatient appointment was cancelled by the hospital with < 5 weeks notice / the total number of outpatients in the period	
3.5	Outpatients - Percentage of new outpatient appointments DNA	The number of patients who DNA'd their booked new appointment within the period / the total number of outpatients in the period	

3.6	Outpatients - Percentage of follow up outpatient appointments DNA	The number of patients who DNA'd their booked follow up appointment within the period / the total number of outpatients in the period	
3.7	Outpatients - Utilisation of consultant-led clinics	The number of consultant led follow up clinics slots booked / the total number of consultant led follow up clinics slots	
3.8	Waiting Times - Percentage of Diagnostic waits 6 weeks or less	Number of patients waiting less than 6 weeks for a diagnostic test (defined within the DM01 guidance) / Number of patients waiting for a diagnostic test within the period	
3.9	Theatre - Percentage of theatre utilisation		
3.10	Cancelled Operations - Percentage of on day cancellations for non clinical reasons	Number of operations cancelled on the day for non-clinical reasons / The total number of EL FFCEs within the period	
3.11	Inpatients - Average Length of Stay	Total length of stay for patients discharged within the period / Number of spells discharge within the period	
3.12	Beds - Number of beds open vs plan	Number of beds open at the end of each month, compared to planned number of beds	
3.13	Beds - Percentage bed occupancy	Number of occupied bed days / Number of available bed days	
3.14	Percentage of re-admissions within 28 days of discharge	Number of patients emergency re-admissions (admission methods 21-28, excluding cancer patients) / Number of spells within the period	
3.15	DTOC - Percentage of patients whose discharge from hospital was delayed	Number of days a patients discharge was delayed in the month as a proportion of the number of occupied beds.	

Workforce

4.0	Staff Friends and Family Test - recommend as a place to work		
4.1	Staff Friends and Family Test - recommend care & treatment		
4.2	Staff Attendance	Staff attendance over 12 month rolling period	
4.3	Staff Turnover (rolling 12 months)		
4.4	Band 5 Nursing Vacancy Rate	Number of WTE Band 5 nursing roles that are vacant at month end	
4.5	Consultant and Training Grade Vacancy Rate	Number of WTE medical roles that are vacant at month end	

4.6	Agency Nursing Spend vs Plan (000's)	Amount of agency spend vs plan	
4.7	Locum Medical Spend vs Plan (000's)	Amount of agency spend vs plan	
4.8	Other Agency Spend vs Plan (000's)	Amount of agency spend vs plan	
4.9	Appraisals - Percentage of staff appraisals (within a rolling 12 months)		■ ■ ■ ■
4.10	Appraisals - Percentage of consultant appraisals (within rolling 12 months)	Percentage of consultants and fellows staff who have had an appraisal in the last 12 months	■ ■ ■ ■ ■
4.11	Essential Training - Percentage of staff attending day one of essential training	Percentage of staff who have attended essential training sessions in the period	■ ■ ■ ■

Finance

5.0	Liquidity ratio (days)		■ ■ ■ ■
5.1	Capital Servicing Capacity (times)		■ ■ ■ ■
5.2	Agency spend		
5.3	I&E margin as a % of income		■ ■ ■ ■ ■
5.4	Variance in I&E Margin		■ ■ ■ ■ ■
5.5	I&E - Cumulative Income & expenditure surplus/(Deficit) (before impairments) (000's)		■ ■ ■ ■ ■
5.6	Contract - North Derbyshire CCG financial contract position (within 3% <=>) (000's)		■ ■ ■ ■ ■
5.7	Contract - Hardwick CCG financial contract position (within 3% <=>)(000's)		■ ■ ■ ■ ■
5.8	Cost of penalties (000's)		■ ■ ■ ■
5.9	Pay - including bank and agency		

5.10 Agency spend as % of total pay bill

5.11 Other Operating Expenses

5.12 Financing Costs inc Depreciation

5.13 CIP - Cumulative achievement of CIP target (000's)

5.14 STF Achievement

5.15 Capital - Deliver the capital investment plan (85%-115% of plan) (000's)

5.16 Cash balance (000's)

5.17 Trade Debtors

5.18 Trade Creditors

5.19 Better Payment Practice Code (by number)

