Borders NHS Board

NHS BORDERS HEAT PERFORMANCE SCORECARD – JULY 2013

Aim

This paper aims to update the Board with NHS Borders latest performance towards the 2013/14 national Health Efficiency Access & Treatment (HEAT) targets, as set out in NHS Borders Local Delivery Plan. The attached HEAT Performance Scorecard shows performance as at 31st July 2013.

Background

Strong Performance Management remains a key priority across NHS Borders to ensure robust monitoring of key local and national targets and priorities. Performance Scorecards are embedded across the organisation and individual services continue to implement their own scorecards with the assistance of Planning and Performance.

Attached to this paper is the July 2013 HEAT Performance Scorecard providing a summary of performance in July 2013.

Some areas of strong performance in the July 2013 Scorecard are highlighted below:

- Smoking cessation continues to perform well with the latest available data (May 2013) showing that the current target of 605 has been exceeded with 897 successful quits
- In the latest available data (May 2013), pre-operative stay continues to exceed the target of 0.68
- Online triage of referrals exceeded the 90% target
- The sickness absence percentage reduced to 3.87% under the 4% target
- Treatment of cancer within 31 days of decision to treat and treatment within 62 days for urgent referrals with suspicion of cancer performed at 100% during May 2013 (latest available data)
- 18 Weeks RTT overall performance continues to perform above the target of 90%
- There was only 1 delayed discharge over the new 2013/14 target of 2 weeks
- The Alcohol/Drug referrals into treatment within 3 weeks continues to achieve 100%
- Against a target of 0, there were no CAMHS waits over 26 weeks in June 2013 (latest available data)
- 99% of all attendees at A&E waited for less than 4 Hours above the target of 95%
- Based on the latest available data (February 2013) emergency admissions continue to reduce
- 100% of patients were admitted to the stroke unit within 1 day of admission in June 2013 (latest available data)

Please note, the SABs and C Diff targets have not been reported this month as the trajectory and reporting is currently being agreed for this year.

Summary

NHS Borders Board Meetings will continue to receive the HEAT Performance Scorecard highlighting the organisation's performance towards the national HEAT Targets.

Planning & Performance are currently working with a number of departments to produce an integrated performance report containing a range of clinical, non clinical and financial performance. These new style reports will be introduced later in 2013/14.

Recommendation

The Board is asked to **note** the July 2013 HEAT Performance Scorecard.

Policy/Strategy Implications	Regular and timely performance reporting is an expectation of the Scottish Government
Consultation	Performance against key indicators within this report have been reviewed by each Clinical Board and members of the Clinical Executive
Consultation with Professional Committees	See above
Risk Assessment	Good progress is being made against key targets, but emerging pressure areas are identified in this report. Continuous monitoring of performance is a key element in identifying risks affecting Health Service delivery to the people of the Borders
Compliance with Board Policy requirements on Equality and Diversity	The implementation and monitoring of targets will require that Lead Directors, Managers and Clinicians comply with Board requirements
Resource/Staffing Implications	The implementation and monitoring of targets will require that Lead Directors, Managers and Clinicians comply with Board requirements

Approved by

Name	Designation	Name	Designation
June Smyth	Director of Workforce & Planning		

Author(s)

Name	Designation	Name	Designation
Meriel Smith	Planning and Performance Officer		

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HEAT PERFORMANCE SCORECARD

As at 31st July 2013

July 2013

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INTRODUCTION

DASHBOARD OF HEAT TARGETS

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Current Performance Key			
R	Under Performing	Current performance is significantly outwith the trajectory set.	Exceeds the target by 11% or greater
A	Slightly Below Trajectory	Current performance is moderately outwith the trajectory set.	Exceeds the target by up to 10%
G	Meeting Trajectory	Current performance matches or exceeds the trajectory set	Overachieves, meets or exceeds the target, or rounds up to target

So that the direction of travel towards the achievement of the target can be viewed direction symbols are also included in the dashboard. These are shown below:

Direction Symbols

Better performance than previous month	↑
No change in performance from previous month	↔
Worse performance than previous month	↓
Data not available or no comparable data	-

HEAT Targets

Every year the Scottish Government Health Department (SGHD) asks each Health Board to report to them on their performance and delivery plans for the next financial year. This report is called the Local Delivery Plan (LDP) and forms an agreement on what Health Boards will achieve in the next year with SGHD. Boards are asked to work towards a number of key targets for the year which fit with the Government's health objectives. These targets are called HEAT targets because they are separated under 4 different headings:

H Health Improvement
E Efficiency and Governance
A Access to Services
T Treatment for the individual

Planned work with local partners such as Scottish Borders Council is also included.

Please note:

Some anomalies may occur in data due to time lags in data availability and national reporting schedules.

Performance on the HEAT targets and standards are detailed within in this report. The following table summarises the achievements for the financial year 2013/14 to date, the arrows indicate performance and direction of travel towards achieving targets compared to previous month:

Indicator	Apr 13	May 13	Jun 13	Jul 13	Aug 13	Sep 13	Oct 13	Nov 13	Dec 13	Jan 14	Feb 14	Mar 14
Number of inequalities targeted cardiovascular health checks	R -	R ↑	G ↑	R ↑								
Smoking cessation successful quits in most deprived areas [1]	G ↑	G ↑	G ↑	↑								
New patient DNA rate	R ↓	R ↓	R ↓	R ↓								
Same day surgery [2]	↑	↓	↓	-								
Pre-operative stay [2]	↑	↓	↑	-								
Online Triage of Referrals	↑	↓	↓	G ↓								
eKSF annual reviews complete	R -	R ↑	R ↑	R ↑								
PDP's Complete	R -	R ↑	R ↑	R ↑								
Sickness Absence Reduced	R -	R ↑	↑	G ↑								
Treatment within 62 days for Urgent Referrals of Suspicion of Cancer [3]	G ↑	A ↓	G ↑	-								
Treatment within 31 days of decision to treat for all Patients diagnosed with Cancer [3]	G ↔	G ↔	G ↔	-								

Indicator	Apr 13	May 13	Jun 13	Jul 13	Aug 13	Sep 13	Oct 13	Nov 13	Dec 13	Jan 14	Feb 14	Mar 14
18 Wk RTT: 12 wks for outpatients	R ↓	R ↓	R ↓	R ↓								
18 Wk RTT: 12 wks for inpatients	R ↑	R ↑	R ↓	R ↓								
18 Wk RTT: Admitted Pathway Performance	R ↑	↓	↓	↑								
18 Wk RTT: Admitted Pathway Linked Pathway	↑	↓	↑	G ↓								
18 Wk RTT: Non-admitted Pathway Performance	↔	G ↓	G ↑	↑								
18 Wk RTT: Non-admitted Pathway Linked Pathway	G ↓	G ↑	G ↓	↑								
Combined Performance	G ↑	↓	↓	G ↑								
Combined Performance Linked Pathway	↑	↓	↓	G ↑								
No CAMHS waits over 18 wks [3]	↑	↓	↑	-								
No Psychological Therapy waits over 18 wks [3]	↓	↑	↓	-								
No Delayed Discharges over 2 Wks	-	G ↓	G ↔	↑								
90% of Alcohol/Drug Referrals into Treatment within 3 weeks	G ↔	G ↔	G ↔	↔								
4 Week Waiting Target for Diagnostics	R ↓	R ↓	R ↑	R ↑								
4-Hour Waiting Target for A&E	↓	↑	↑	G ↓								
Emergency admission aged 75 or over (per 1,000) [4]	↑	↑	↑	G ↑								

Indicator	Apr 13	May 13	Jun 13	Jul 13	Aug 13	Sep 13	Oct 13	Nov 13	Dec 13	Jan 14	Feb 14	Mar 14
Diagnosis of dementia	A ↓	↑	↑	↑								
Reduction in rate (per 100,000) of A&E Attendees	R ↓	R ↑	R ↓	R ↓								
Further Reduce Rate of Staph aureus bacteraemia [5]	-	-	-	-								
Further Reduce Rate of C. Diff (CDAD) cases in over 65s [5]	-	-	-	-								
Admitted to the Stroke Unit within 1 day of admission	↔	G ↔	G ↔	-								

[1] There is a 2 month time lag for smoking cessation. The target is to be delivered over 3 years by 2013/14 and is monitored cumulatively.
[2] There is usually 1 month lag in data however SMR updates running behind schedule therefore data shown is most up to date.
[3] Due to verification processes for national reporting, there is a 1 month lag time for the data
[4] There is a lag time for Emergency admission aged 75 or over (per 100,000)
[5] This target is to be delivered over a 2 year period (2011/12 & 2012/13). Progress will continue to be closely monitored during 2012/13, performance indicator on monthly activity. The trajectory is still to be confirmed with the service therefore there is no RAG status
[6] No data supplied by the service for July 13.

Please Note: Work is ongoing to agree accurate reporting on SABs & CDiff targets. Updates will be included in the next Scorecard.

DASHBOARD OF HEAT TARGETS

Target no	Target Descriptor	Target Date	2013/14 Target	Current Target	Current Performance	Performance Last Month	Performance Compared to Last Month	Status
Std	Number of inequalities targeted cardiovascular health checks (cumulative)	Mar 2014	465	155	117	84	↑	R
Health Imp	Smoking cessation 4 weeks successful quits in most deprived areas (cumulative) [1]	Mar 2014	840	605	904	897	↑	G
Std	New patient DNA rate	Mar 2014	4%	4%	6.1%	5.4%	↓	R
	Same day surgery (January) [2]		86%	86%	83.4%	84.7%	↓	
	Pre-operative stay (January) [2]	Mar 2014	0.68	0.68	0.18	0.38	↑	G
Std	Online Triage of Referrals	Mar 2014	90%	90%	91.9%	92.1%	↓	G
Std	Increase the proportion of new-born children breastfed at 6-8 weeks [3]	Mar 2014	33%	33%	31.25 (Mar13)	33.1% (Feb13)	↓	
Std	eKSF annual reviews complete	Mar 2014	80%	25%	7.6%	4.5%	↑	R
	PDPs recorded on eKSF		80%	25%	13.5%	10.6%	↑	R
Std	Sickness Absence Reduced	Mar 2014	4%	4%	3.87%	4.03%	↑	
Std	Treatment within 62 days for Urgent Referrals of Suspicion of Cancer [4]	Mar 2014	100%	100%	100%	94.4%	↑	
	Treatment within 31 days of decision to treat for all Patients diagnosed with Cancer [4]				100%	100%	↔	G
Access	18 Wk RTT: 12 wks for outpatients	Mar 2014	0		858	688	↓	R
	18 Wk RTT: 12 wks for inpatients				42	35	↓	
	18 Wk RTT: Admitted Pathway Performance		90%	90%	78.4%	74.3%	↑	R
	18 Wk RTT: Admitted Pathway Linked Pathway				96.4%	97.3%	↓	G
	18 Wk RTT: Non-admitted Pathway Performance				95.8%	95.5%	↑	
	18 Wk RTT: Non-admitted Pathway Linked Pathway				93.6%	92.8%	↑	G

Target no	Target Descriptor	Target Date	2013/14 Target	Current Target	Current Performance	Performance Last Month	Performance Compared to Last Month	Status
Access	Combined Performance	Mar 2014	90%	90%	92.7%	91.8%	↑	G
	Combined Performance Linked Pathway				94.1%	93.5%	↑	
Access	No CAMHS waits over 18 wks [5]	Dec 2014	0	0	0	1	↑	G
Access	No Psychological Therapy waits over 18 wks [5]	Dec 2014	0	0	13	11	↓	R
Access	No Delayed Discharges over 2 Wks	Mar 2014	0	15	1	2	↑	
	Delayed Discharges under 2 wks	As at the 15th of July there were 7 delayed discharges under 2 weeks.						
Access	90% of Alcohol/Drug Referrals into Treatment within 3 weeks	Mar 2014	95%	95%	100%	100%	↔	G
Std	4 Week Waiting Target for Diagnostics[6]	Mar 2014	0	0	54	57	↑	
Access	4-Hour Waiting Target for A&E	Mar 2014	95%	95%	99.0%	99.3%	↓	G
Treatment	Emergency admission aged 75 or over (per 1,000)[7]	Mar 2014	5258	5258	3992 (Feb13)	4137 (Jan13)	↑	G
Treatment	Diagnosis of dementia	Mar 2014	995	995	987	975	↑	A
Treatment	Reduction in rate (per 100,000) of A&E Attendees	Mar 2014	1582	1603	1899	1755	↓	
Treatment	Admitted to the Stroke Unit within 1 day of admission[8]	Mar 2014	90%	90%	100% [9]	100% [9]	↔	G

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