

REGION

NORTH

DELIVERY DASHBOARD QUARTER 1 2014 -15



CCG:

NHS North Durham CCG



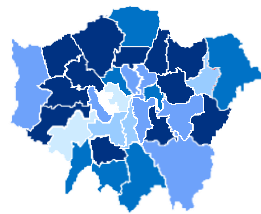
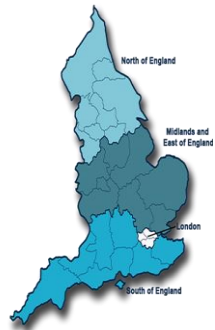
AREA TEAM

Durham Darlington & Tees

LAST REFRESH DATE

15 January 2015

- PRINTER SETUP
- PRINT OUT
- GUIDANCE
- NHS CONSTITUTION
- BETTER CARE FUND
- Q. & OUTCOME SECTION
- FINANCE



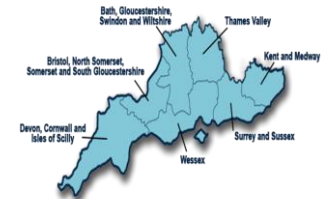
LONDON REGION



NORTH REGION



MIDLANDS REGION



SOUTH REGION

CCG BASED INDICATORS	OPERATIONAL STANDARD	QUARTER 1 PERFORMANCE	QUARTER 2 PERFORMANCE	QUARTER 3 PERFORMANCE	QUARTER 4 PERFORMANCE
Referral to Treatment waiting times for non urgent consultant-led treatment					
Admitted patients starting treatment within a maximum of 18 weeks from referral	90%	89.44%			
Non-admitted patients starting treatment within a maximum of 18 weeks from referral	95%	98.26%			
Patients on incomplete non-emergency pathways (yet to start treatment) waiting no more than 18 weeks from referral	92%	94.75%			
Number of patients waiting more than 52 weeks on incomplete pathways	0	0			
Diagnostic test waiting times					
Percentage of patients waiting 6 weeks or more for a diagnostic test	1%	4.58%			
Cancer patients - Two-week wait					
Maximum two-week wait for first outpatient appointment for patients referred urgently with suspected cancer by a GP	93%	96.57%			
Maximum two-week wait for first outpatient appointment for patients referred urgently with breast symptoms (where cancer was not initially suspected)	93%	96.12%			
Cancer waits - 31 days					
Maximum 31-day wait from diagnosis to first definitive treatment for all cancers	96%	97.29%			
Maximum 31-day wait for subsequent treatment where that treatment is a surgery	94%	98.51%			
Maximum 31-day wait for subsequent treatment where the treatment is an anti-cancer drug regime	98%	100.00%			
Maximum 31-day wait for subsequent treatment where the treatment is a course of radiotherapy	94%	98.41%			
Cancer waits - 62-days					
Maximum 62-day wait from urgent GP referral to first definitive treatment for cancer	85%	81.93%			
Maximum 62-day wait from referral from an NHS screening service to first definitive treatment for all cancers	90%	93.75%			
Maximum 62-day wait for first definitive treatment following a consultants decision to upgrade the priority of the patients (all cancers)	No operational standard	0.00%			
Mixed-Sex Accommodation					
Breaches of Mixed-Sex Accommodation	0	0			
Mental Health					
Care Programme Approach (CPA): The proportion of people under adult mental illness specialities on CPA who were followed up within 7 days of discharge from psychiatric inpatient care during the period	95%	97.14%			
PROVIDER BASED INDICATORS					
A & E waits - Patients admitted, transferred or discharged within 4 hours of their arrival at an A & E department					
COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	95%	95.71%			
CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST	95%	93.93%			
SOUTH TYNESIDE NHS FOUNDATION TRUST	95%	97.85%			
Category A Ambulance Calls NORTH EAST AMBULANCE SERVICE NHS FOUNDATION TRUST					
Category A calls resulting in an emergency response arriving within 8 minutes (Red 1)	75%	75.43%			
Category A calls resulting in an emergency response arriving within 8 minutes (Red 2)	75%	75.77%			
Category A calls resulting in an ambulance arriving at the scene within 19 minutes	95%	95.71%			
Cancelled Elective Operations: Number of urgent operations that are cancelled by the trust for non-clinical reasons, which have already been previously cancelled once for non-clinical reasons.					
COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	No operational standard	2			
THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST	No operational standard	0			

CCG BASED INDICATORS				
ANNUAL	BASELINE 2013-14		2014-15	2015-16
Preventing people from dying prematurely				
Potential years of life lost (PYLL) from causes considered amendable to healthcare (rate per 100,000 population)		PLAN		
		PERFORMANCE		
Enhancing quality of life for people with long term conditions				
Health-related quality of life for people with long term conditions (EQ-5D per 100 people with long term condition)		PLAN		
		PERFORMANCE		
Estimated diagnosis rate for people with dementia		PLAN		
		PERFORMANCE		
Positive experience of care				
Composite indicator of patient experience of primary care (i) GP Services and (ii) GP Out of Hours service (average negative responses per 100 patients)		PLAN		
		PERFORMANCE		
Patient experience of hospital care (average negative responses per 100 patients)		PLAN		
		PERFORMANCE		

QUARTERLY						
CCG BASED INDICATORS	BASELINE 2013-14		QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
Composite Measure - Reducing the time people unnecessarily spend in hospital						
Avoidable emergency admissions per 100,000 population	621	PLAN				
		PERFORMANCE				
Treating and caring for people in a safe environment and protecting them from avoidable harm						
Incidence of healthcare associated infection (HCAI) i) MRSA - Includes cases which have been assigned to the CCG following a Post Infection Review	1	CEILING	0			
		PERFORMANCE	0			
Incidence of healthcare associated infection (HCAI) ii) C.difficile	11	CEILING	17.00			End of Year
		PERFORMANCE	10			
Improving Access to Psychological Therapies (IAPT)						
Access: the proportion of people entering treatment against the level of need in the general population	3.17%	PLAN	3.20%			
		PERFORMANCE				
Recovery: the proportion of people who complete treatment who are moving to recovery	48.45%	PLAN	50.02%			
		PERFORMANCE				

PROVIDER BASED INDICATORS				
QUARTERLY				
Friends and Family Test (FFT)				
FFT SCORES A&E	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	44			
CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST	76			
SOUTH TYNESIDE NHS FOUNDATION TRUST	65			
FFT SCORES INPATIENT	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	73			
THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST	81			

HALF YEARLY							
Improving the reporting of medication-related safety incidents							
MEDICATION-RELATED INCIDENTS	April - September 2013-14 - Incidents Count	April - September 2013-14 - Percentage of Total Safety Incidents	October- March 2013-14 - Incidents Count	October- March 2013-14 - Percentage of Total Safety Incidents	April - September 2014-15 - Incidents Count	April - September 2014-15 - Percentage of Total Safety Incidents	October- March 2014-15 - Incidents Count
COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	592	12.7%					
THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST	527	9.2%					
CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST	331	6.0%					

ANNUAL			
Health and Well-Being Board: 1		County Durham	
INDICATOR	BASELINE - 2013-14	PLAN	2014-15
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population		PLAN	
		PERFORMANCE	
Proportion of older people (65 and over) still at home 91 days after discharge from hospital into reablement / rehabilitation services		PLAN	
		PERFORMANCE	

QUARTERLY						
Health and Well-Being Board: 1		County Durham				
INDICATOR	BASELINE - 2013-14	PLAN	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month)	282.9	PLAN				
		PERFORMANCE	190.8			
Non-Elective Admissions rate per 100,000 population	15,455	PLAN				
		PERFORMANCE	15609			

ANNUAL			
Health and Well-Being Board: 2		County Durham	
INDICATOR	BASELINE - 2013-14	PLAN	2014-15
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population		PLAN	
		PERFORMANCE	
Proportion of older people (65 and over) were still at home 91 days after discharge from hospital into reablement / rehabilitation services		PLAN	
		PERFORMANCE	

QUARTERLY						
Health and Well-Being Board: 2		County Durham				
INDICATOR	BASELINE - 2013-14	PLAN	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month)		PLAN				
		PERFORMANCE				
Non-Elective Admissions rate per 100,000 population		PLAN				
		PERFORMANCE				

ANNUAL			
Health and Well-Being Board: 3		County Durham	
INDICATOR	BASELINE - 2013-14	PLAN	2014-15
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population		PLAN	
		PERFORMANCE	
Proportion of older people (65 and over) were still at home 91 days after discharge from hospital into reablement / rehabilitation services		PLAN	
		PERFORMANCE	

QUARTERLY						
Health and Well-Being Board: 3		County Durham				
INDICATOR	BASELINE - 2013-14	PLAN	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month)		PLAN				
		PERFORMANCE				
Non-Elective Admissions rate per 100,000 population		PLAN				
		PERFORMANCE				

ANNUAL			
Health and Well-Being Board: 4		County Durham	
INDICATOR	BASELINE - 2013-14	PLAN	2014-15
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population		PLAN	
		PERFORMANCE	
Proportion of older people (65 and over) were still at home 91 days after discharge from hospital into reablement / rehabilitation services		PLAN	
		PERFORMANCE	

QUARTERLY						
Health and Well-Being Board: 4		County Durham				
INDICATOR	BASELINE - 2013-14	PLAN	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month)		PLAN				
		PERFORMANCE				
Non-Elective Admissions rate per 100,000 population		PLAN				
		PERFORMANCE				

COVER PAGE	FINANCE SECTION NHS North Durham CCG Durham Darlington & Tees NORTH
CLICK TO VIEW REPORT	
CLICK + SIGN TO UNGROUP/GROUP ROW	



CCG BASED INDICATOR	PRIMARY/SUPPORTING INDICATOR	QUARTER 1 PERFORMANCE	QUARTER 2 PERFORMANCE	QUARTER 3 PERFORMANCE	QUARTER 4 PERFORMANCE
Plan - year to date (variance to plan as % of YTD allocation)	Primary	G			
Plan - full year (variance to plan as % of allocation)	Primary	G			
QIPP - year to date delivery	Primary	G			
QIPP - full year forecast	Primary	G			
Clear identification of risks against financial delivery and mitigations	Primary	G			
Running costs	Primary	G			
Underlying recurrent surplus on exit of 2014/15	Primary	G			
Financial Performance and Management - Supporting Indicators					
Financial position meets the 2014/15 surplus planning requirement	Supporting	G			
Planned usage of non-recurrent headroom funds in line with business rules	Supporting	G			
BPPC performance - Invoices paid within Better Payment Practice Code.	Supporting	G			
Cash utilisation	Supporting				