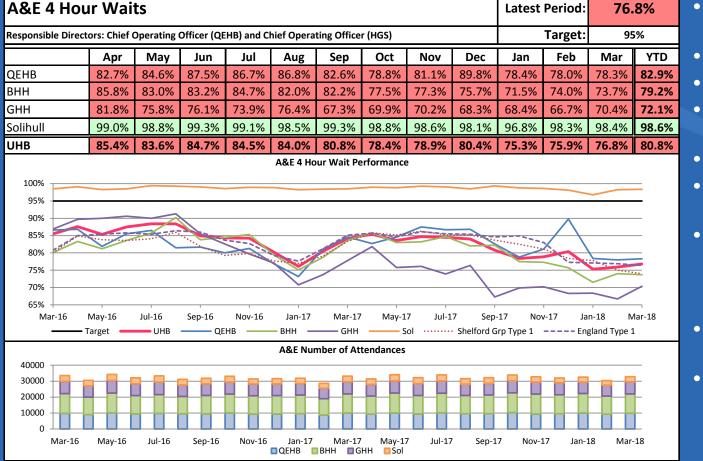
Performance Report

Lawrence Tallon

Director of Strategy, Planning and

Performance





- Overall performance increased 0.9 pp to 76.8%.
- QEHB improved by 0.3 pp.
 - GHH improved by 3.7 pp.
- Solihull fairly static at 98.4%.
- BHH fell 0.3 pp to 73.7%.
- Patterns of attendances varied across the sites.
- e BHH average daily attendances fell by 12 per day (4.4%) and QEHB fell by 12 per day (3.7%).
- GHH and Solihull had 2 more attendances per day.
- Daily average admissions fell by 3.1% at QEHB but increased by 5.5% across the HGS sites.





RTT Incomplete Pathways

Dec

90.9%

92%

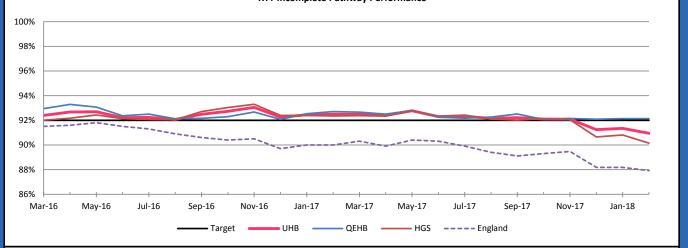
Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS) Jul Apr Mav Jun Sep Oct Aug

Feb Mar YTD Jan 92.1% 92.1% 90.8% 90.2%

Target:

Latest Period:

Nov **QEHB** 92.8% 92.3% 92.2% 92.3% 92.5% 92.1% 92.1% 92.1% 92.5% 92.3% HGS 92.8% 92.3% 92.4% 92.1% 92.0% 92.1% 92.0% 90.6% 91.8% 92.3% UHB 92.8% | 92.3% 92.3% 92.2% 92.2% 92.1% 92.1% 91.2% 91.3% 90.9% 92.0% 92.4% RTT Incomplete Pathway Performance

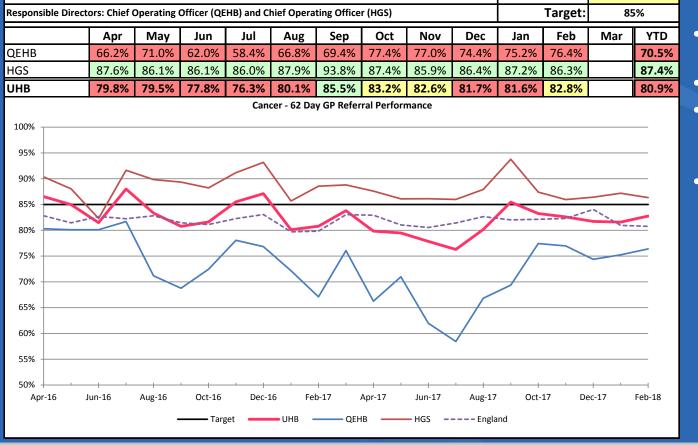


Latest Month's KTT Incomplete Pathway Performance - Treatment Functions Below Target													
Dermatology ENT Gen Surg Gynaecology Neurology Neurosurg Ophth'ology Plastics T&O Urolog													
93.7%	93.3%	85.3%	-	91.4%	84.1%	76.8%	96.0%	96.7%	92.9%				
90.8%	90.4%	89.9%	91.4%	91.1%	-	92.4%	75.6%	73.2%	89.9%				
92.2%	91.4%	88.4%	91.4%	91.3%	84.1%	86.3%	93.5%	76.4%	90.9%				
	93.7% 90.8%	Dermatology ENT 93.7% 93.3% 90.8% 90.4%	Dermatology ENT Gen Surg 93.7% 93.3% 85.3% 90.8% 90.4% 89.9%	Dermatology ENT Gen Surg Gynaecology 93.7% 93.3% 85.3% - 90.8% 90.4% 89.9% 91.4%	Dermatology ENT Gen Surg Gynaecology Neurology 93.7% 93.3% 85.3% - 91.4% 90.8% 90.4% 89.9% 91.4% 91.1%	Dermatology ENT Gen Surg Gynaecology Neurology Neurosurg 93.7% 93.3% 85.3% - 91.4% 84.1% 90.8% 90.4% 89.9% 91.4% 91.1% -	Dermatology ENT Gen Surg Gynaecology Neurology Neurosurg Ophth'ology 93.7% 93.3% 85.3% - 91.4% 84.1% 76.8% 90.8% 90.4% 89.9% 91.4% 91.1% - 92.4%	Dermatology ENT Gen Surg Gynaecology Neurology Neurosurg Ophth'ology Plastics 93.7% 93.3% 85.3% - 91.4% 84.1% 76.8% 96.0% 90.8% 90.4% 89.9% 91.4% 91.1% - 92.4% 75.6%	93.7% 93.3% 85.3% - 91.4% 84.1% 76.8% 96.0% 96.7% 90.8% 90.4% 89.9% 91.4% 91.1% - 92.4% 75.6% 73.2%				

- Trust performance fell by 0.4 pp to 90.9%.
- Still 2% significantly above England average.
- QEHB static at 92.1%.
- HGS fell 0.6 pp to 90.2%.
- Seven HGS treatment functions below 92%: Dermatology, ENT, Gen Surgery, Gynaecology, Neurology, Plastic Surgery, T&O and Urology.
- At QEHB General Surgery. Neurology, Neurosurgery and Ophthalmology below.
- Largest no. of breaches in T&O at HGS and Ophthalmology at QEHB.







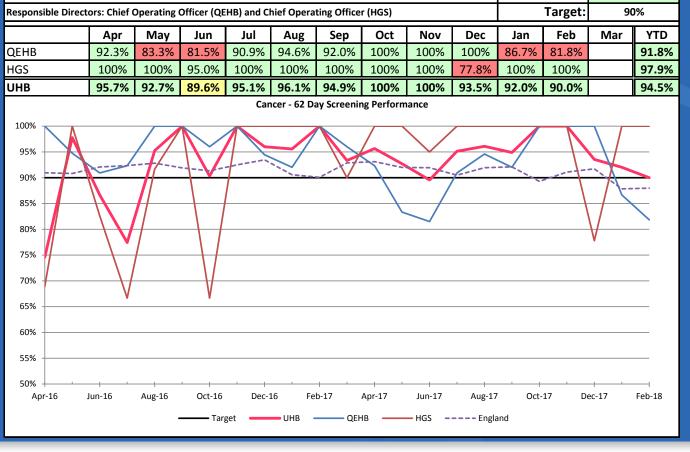
- Trust performance was 82.8%.
- HGS above target at 86.3%.

82.8%

Latest Period:

- QEHB improved to 76.4%.
- QEHB performance excluding tertiary referrals was 85.2%.
- If late tertiary referrals were to be reallocated in line with the national rules the Trust's performance would be 84.7%.

Cancer - 62 Day GP Referrals



 Target met overall with 90% performance.

90.0%

Latest Period:

- HGS achieved 100%.
- QEHB below target at 81.8% this was only 1.0 breach of the target. This was due to patient choice.
- Provisional data shows QEHB on track to hit the target for Q4.

Cancer - 62 Day Screening

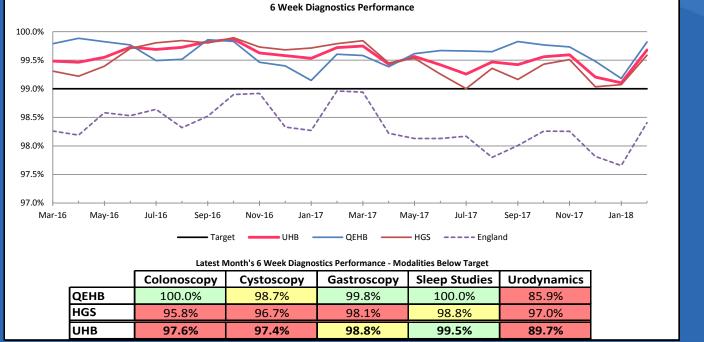
Responsible Direct	Target:		99%										
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
QEHB	99.4%	99.6%	99.7%	99.7%	99.6%	99.8%	99.8%	99.7%	99.5%	99.2%	99.8%		99.4%
HGS	99.5%	99.5%	99.3%	99.0%	99.4%	99.2%	99.4%	99.5%	99.0%	99.1%	99.6%		99.3%

99.4%

99.6%

99.6%

99.2%



Target met overall with 99.7% performance.

99.7%

99.4%

Latest Period:

99.1% 99.7%

 Five modalities below target at HGS, two at QEHB.



6 Week Diagnostics

99.4%

99.6% 99.4%

99.3%

99.5%

UHB



Responsible Direct	sible Director: Medical Director & Deputy Chief Executive											90)%
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
QEHB - Find	98.6%	98.8%	97.9%	98.0%	97.0%	98.4%	96.6%	95.7%	96.8%	97.0%	96.7%		97.4%
BHH - Find	89.4%	87.9%	91.4%	90.5%	89.0%	90.1%	90.0%	88.9%	88.0%	86.8%	87.8%		89.0%
GHH - Find	87.2%	84.2%	84.3%	83.1%	77.3%	74.5%	79.3%	74.8%	75.5%	84.9%	82.0%		80.5%
Solihull - Find	94.4%	92.8%	93.1%	95.2%	92.7%	94.0%	92.3%	88.1%	87.6%	71.2%	80.1%		88.5%
UHB - Find	92.1%	90.4%	91.5%	91.1%	88.5%	88.4%	89.1%	86.7%	86.8%	87.3%	88.0%		89.0%
QEHB - Assess	100%	100%	100%	100%	100%	100%	100%	100%	97.6%	100%	100%		99.7%
BHH - Assess	100%	87.2%	94.4%	86.2%	100%	100%	100%	92.6%	96.4%	78.3%	87.1%		91.9%
GHH - Assess	83.3%	100%	84.8%	92.6%	88.5%	100%	88.9%	100%	100%	100%	95.0%		93.6%
Sol - Assess	100%	100%	72.7%	88.9%	80.0%	100%	66.7%	77.8%	64.3%	83.3%	100%		81.6%
UHB - Assess	94.6%	95.3%	90.5%	92.9%	95.2%	100%	93.0%	94.9%	94.0%	92.9%	95.2%		94.3%
QEHB- Refer	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%
BHH - Refer	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%
GHH - Refer	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%
Sol - Refer	100%	100%	-	-	100%	100%	-	100%	100%	100%	100%		100%
UHB - Refer	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%
100%					Dementia	Finding Po	erformanc	е					
100%													—
90%										-			_
80%					_/	\sim							\Rightarrow
											_	-/\	
70% ↓ Apr-16	Jun-16	Aug-16	Oct-16	Dec-	16 E	eb-17	Apr-17	Jun-17	Aug-1	7 Oct	-17 D	ec-17	 Feb-18
Αρι-10	Juli-10	-	arget =	UHB		QEHB	——— BH		— GHH	Sol		England	1 50-10

 Trust performance for the 'Find' element improved to 88% but remained below 90% target.

Find: 88.0%

Assess: 95.2% Refer: 100.0%

Latest Period:

- Heartlands was close to the target with performance of 87.8%.
- Good Hope was 82.0%.
- Solihull was 80.1%.
- Trust achieved 'Assess' component overall.
- Heartlands was below target but this equated to only one additional patient under the 90% target.
- 'Refer' component was achieved with 100% compliance.



NHS
University Hospitals Birmingham

Dementia Assessment and Referral

HGS		99.2%	98.7%	97.5%	97.7%	98.1%	98.9%	99.0%	96.9%	97.2%	98.4%	99.2%		98.2%	
UHB		98.6%	98.0%	97.6%	97.6%	99.0%	98.6%	98.2%	97.1%	98.3%	97.9%	98.6%		98.1%	
	Cancer - 31 Day First Treatment Performance														
100% —															
	<u> </u>		_ /	<u> </u>	_		_			_/\			٨		
99%		_	\sim				\leftarrow					/		/	
		/		_ /		$\mathbb{N}^{\prime}/\!\!/$					1	\ /	~//		
98%		\wedge							*	/		1/	-1,/	_	
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96% -														_	
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93%															
92%		-			-								1		
Apr-	-16 J	un-16	Aug-16	Oct-16	Dec-1	.6 Fe	0-17	Apr-17	Jun-17	Aug-17	Oct-	17 D€	ec-17	Feb-18	
			-	Targ	get —	UHB -	QEH	ів ——	HGS -	Engla	nd				

98.2%

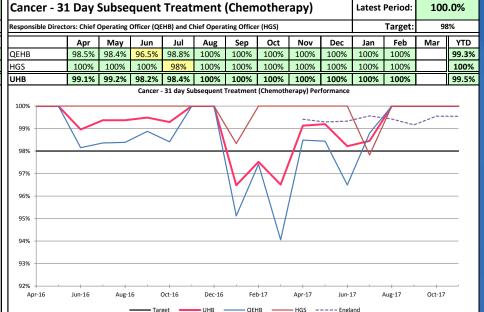
Oct

97.3%

Nov

97.4% 99.5%

Dec



- 31 day first treatment target achieved with 97.2% performance.
- 31 day subsequent chemotherapy target also achieved with 100% performance



Cancer - 31 Day First Treatment

Apr

QEHB

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)

97.6%

100%

97.2% 97.9%



98.6%

96%

YTD

98.0%

Mar

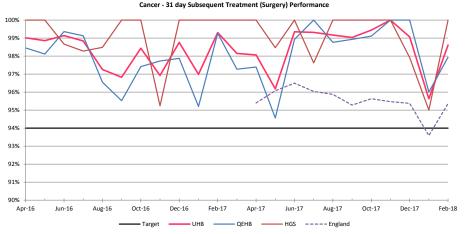
Latest Period:

97.5% 97.9%

Jan

Target:

Feb



Sep

98.9%

100%

99.0%

Oct

99.1%

100%

99.4%

Nov

100%

100%

100%

Dec

100%

97.9%

99.1%

Cancer - 31 Day Subsequent Treatment (Surgery)

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)

Jun

98.9%

96.2% 99.3%

100%

97.6%

99.3%

98.8%

100%

99.2%

Apr

QEHB

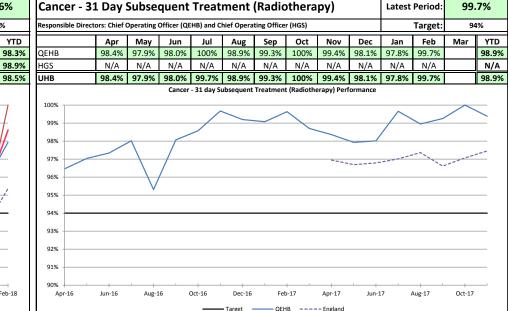
HGS

UHB

May

94.6%

98.5%



- 31 day subsequent surgery target achieved with 98.6% performance.
- 31 day subsequent radiotherapy target also achieved with 99.7% performance





98.6%

94%

YTD

Mar

Latest Period:

Jan

96.0%

95.0%

95.6%

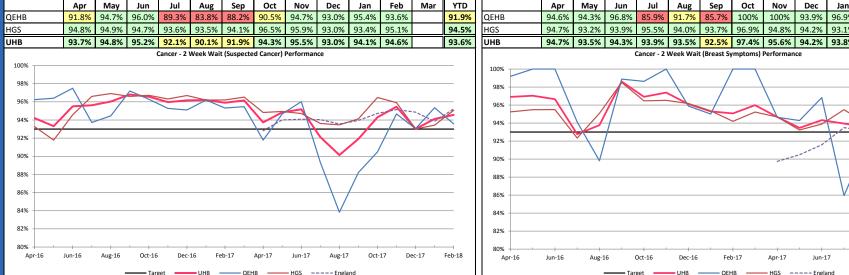
Target:

Feb

97.9%

100%

98.6%

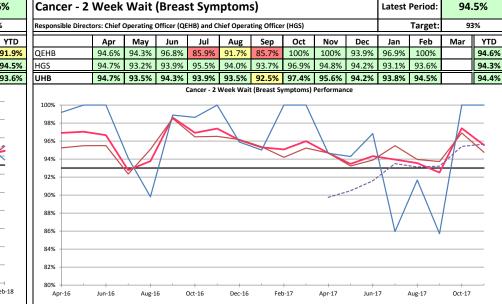


94.6%

93%

Latest Period:

Target:



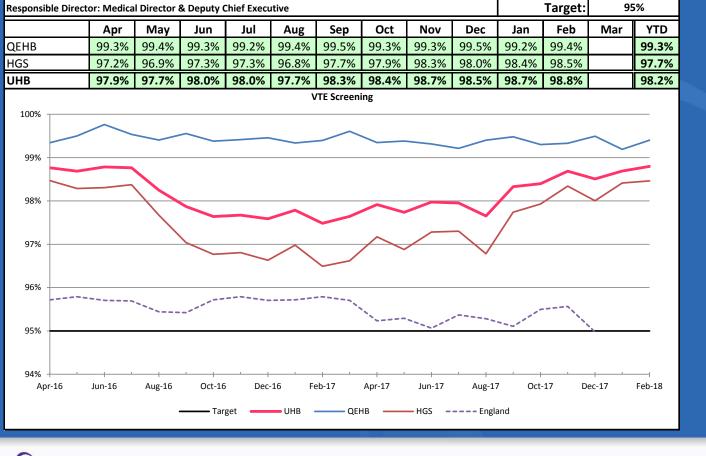
Both two week wait targets were achieved with improved performance.



Cancer - 2 Week Wait (Suspected Cancer)

Responsible Directors: Chief Operating Officer (QEHB) and Chief Operating Officer (HGS)





 The Trust continues to achieve this measure with HGS seeing a fairly steady improvement since August 2017.

98.8%

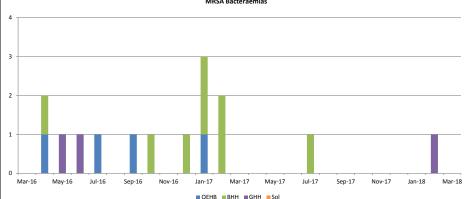
Latest Period:

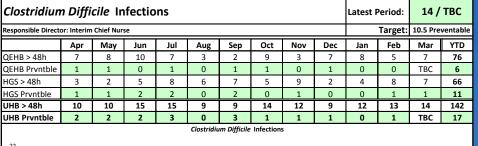


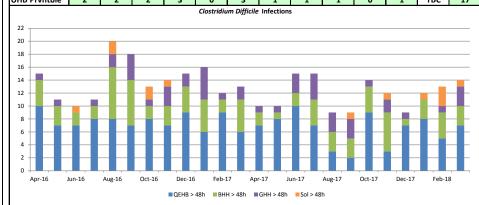
VTE Screening



IVIRSA Bac	teraer	nıas								Latest I	Period:	()
Responsible Direct	or: Interim	Chief Nur	se								Target:	()
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
QEHB	0	0	0	0	0	0	0	0	0	0	0	0	0
ВНН	0	0	0	1	0	0	0	0	0	0	0	0	1
GHH	0	0	0	0	0	0	0	0	0	0	1	0	1
Solihull	0	0	0	0	0	0	0	0	0	0	0	0	0
UHB	0	0	0	1	0	0	0	0	0	0	1	0	2
					MRS	SA Bactera	emias						







- There have been no further cases of MRSA bacteraemia.
- There were 7 Post-48-hour *Clostridium difficile* infections (CDI) at QEHB in March: 3 at Heartlands, 3 at Good Hope and 1 at Solihull.
- One CDI at HGS was identified as resulting from a lapse of care.
- QEHB will achieve its full-year contractual trajectory for preventable CDI cases.

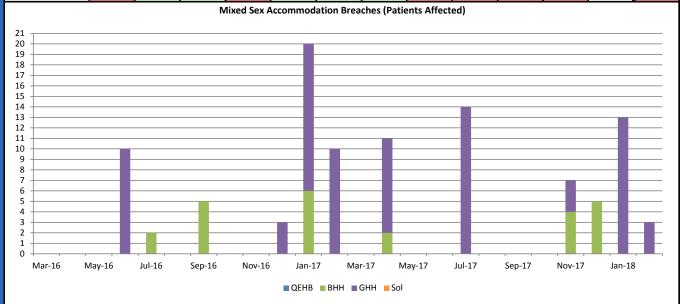




Mixed Sex Accommodation Responsible Director: Interim Chief Nurse

Latest Period: Target: 0

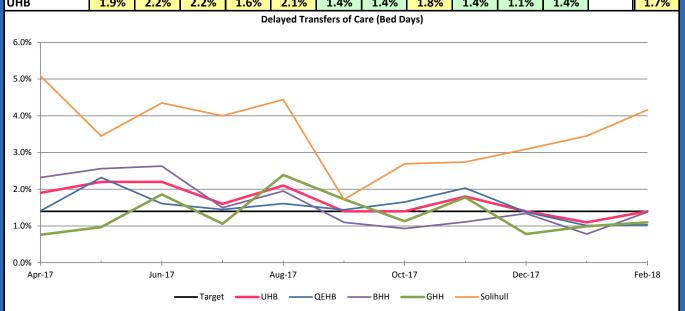
Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar **YTD QEHB** 0 0 0 0 0 0 0 0 0 0 внн 0 0 0 0 0 4 5 0 0 11 GHH 42 9 0 0 14 0 0 0 3 0 13 3 Solihull 0 0 0 0 0 0 0 0 0 0 **UHB** 11 0 O 13 3 53



- One breach of mixed sex accommodation guidance in February involving three patients at Good Hope.
- to place a female patient into triage for monitoring when there were already two male patients bedded in that area at the time due to capacity issues on site.
- There was nowhere else to safely place the female patient at the time.
- All attempts to preserve the privacy and dignity of the patients were made and patients moved to same sex accommodation as soon as possible.



1													
Responsible Direct	Target:		1.4%										
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
QEHB	1.4%	2.3%	1.6%	1.5%	1.6%	1.4%	1.7%	2.0%	1.4%	1.0%	1.0%		1.5%
ВНН	2.3%	2.6%	2.6%	1.5%	2.0%	1.1%	0.9%	1.1%	1.3%	0.8%	1.4%		1.6%
GHH	0.8%	1.0%	1.9%	1.1%	2.4%	1.7%	1.1%	1.8%	0.8%	1.0%	1.1%		1.3%
Solihull	5.1%	3.5%	4.4%	4.0%	4.4%	1.7%	2.7%	2.7%	3.1%	3.5%	4.2%		3.6%
LIHR	1 9%	2 2%	2 2%	1.6%	2 1%	1 /1%	1 4%	1.8%	1 /1%	1 1%	1 /1%		1 7%



 Indicator now uses the new national definition of measuring total bed days delayed over the month rather than the number of patients on a census date. This gives a better picture of delays over the entire month.

1.4%

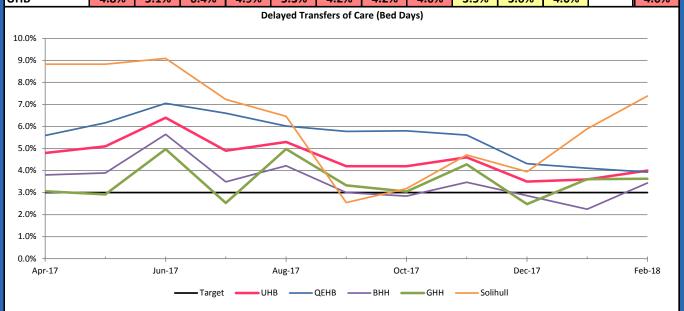
Latest Period:

- % occupied bed days that were occupied by a patient whose transfer of care was delayed increased for reasons other than social care increased from 1.1% to 1.4%.
- Solihull Hospital has the highest proportion of bed days occupied by patients whose transfer is delayed.



Delayed Transfers of Care (NHS & Joint)

Responsible Direct	Target:		3.0%										
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
QEHB	5.6%	6.2%	7.1%	6.6%	6.0%	5.8%	5.8%	5.6%	4.3%	4.1%	3.9%		5.5%
внн	3.8%	3.9%	5.6%	3.5%	4.2%	3.0%	2.8%	3.5%	2.9%	2.3%	3.4%		3.5%
GHH	3.1%	2.9%	5.0%	2.5%	5.0%	3.3%	3.1%	4.3%	2.5%	3.6%	3.6%		3.5%
Solihull	8.8%	8.8%	9.1%	7.2%	6.5%	2.6%	3.2%	4.7%	4.0%	5.9%	7.4%		6.2%
LIHR	4.8%	5 1%	6.4%	4 9%	5.3%	4 2%	4 2%	4.6%	3 5%	3.6%	4 0%		4.6%



 Increase in social carerelated delays as well as NHS and joint led to an increase in % of delayed bed days to 4.0% in February.

4.0%

Latest Period:

- National data submissions at HGS from 1 April 2018 have been amended to further improve the robustness of the data as there has been a level of under reporting.
- This is expected to lead to a significant increase of up to 100% in the reported rate for HGS from April.

Delayed Transfers of Care (All)