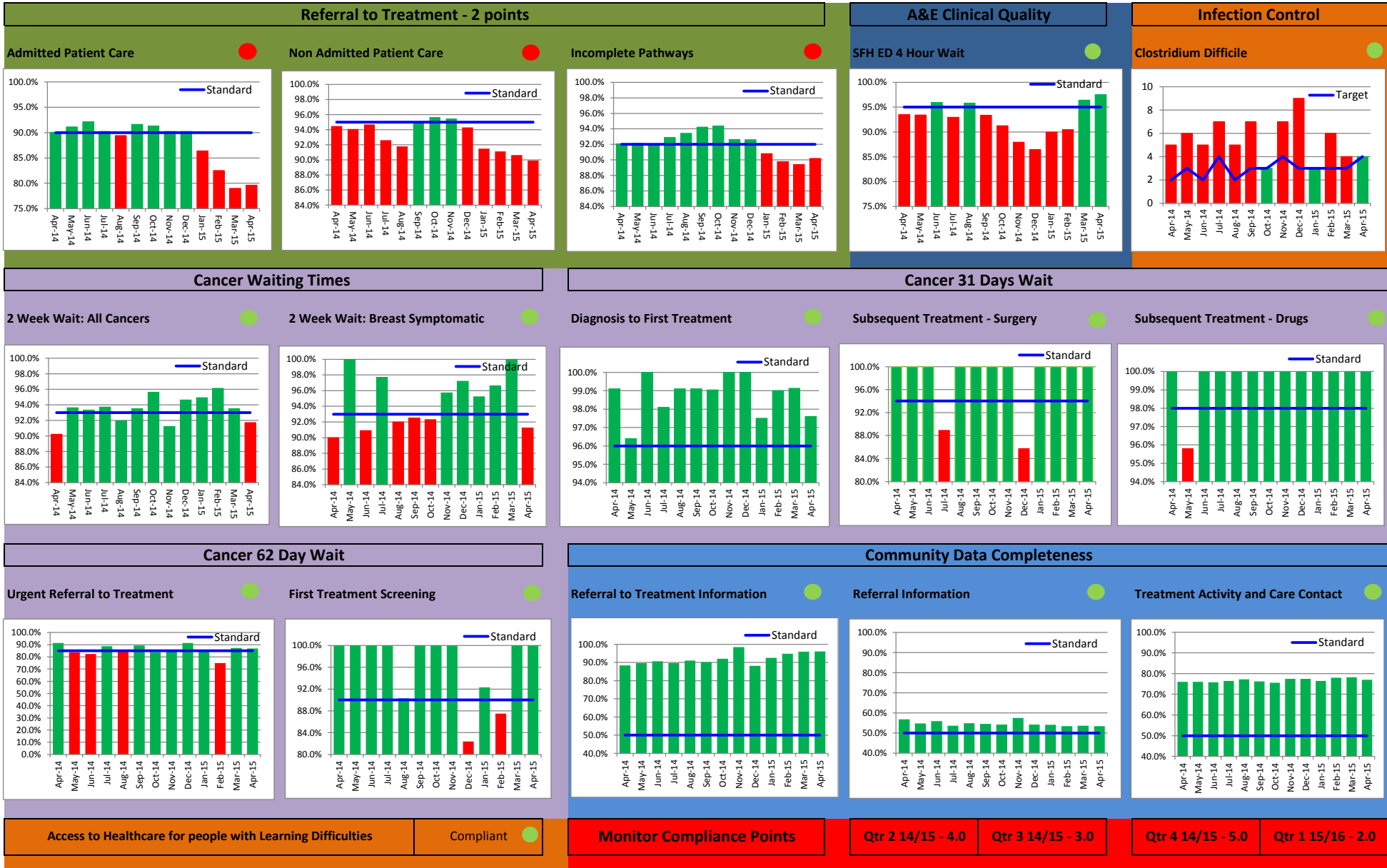


Monitor Compliance Framework: Quarter 1 April - June 2015

Monitor Compliance Framework

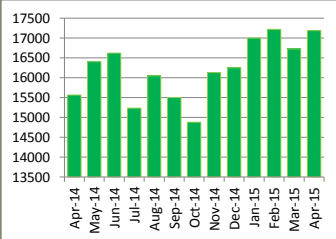


Integrated Performance Report: April 2015

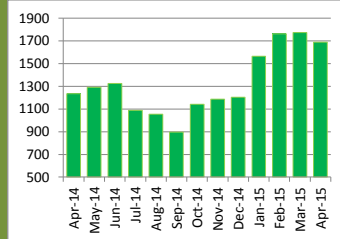
Operational

Referral to Treatment

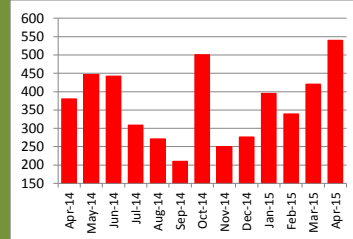
Total Patients on Incomplete Pathway



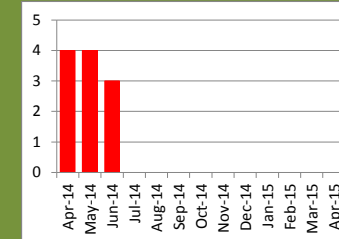
Patients Waiting over 18 Weeks



Patients Waiting over 26 Weeks

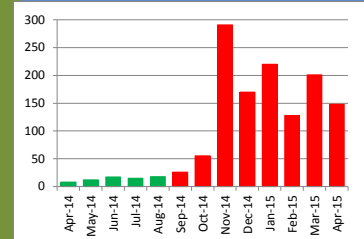


Patients Waiting over 52 Weeks



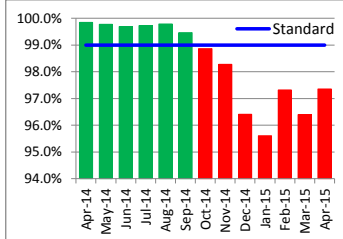
Diagnostic Waits

Patients Waiting Over 6 Weeks



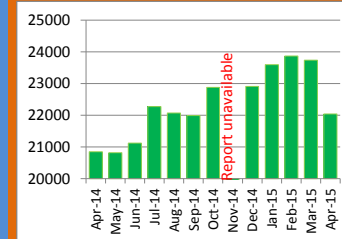
Diagnostic Waits (Continued)

Patients Waiting Less than 6 Weeks

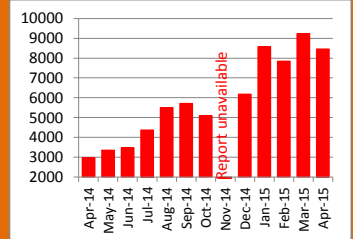


Partial Booking

Total Number of Patients on Outpatients Review List

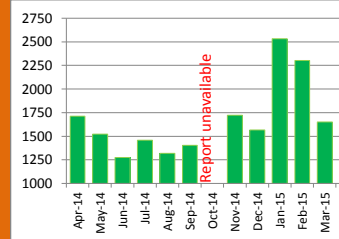


Number of Overdue Patients on Outpatients Review List

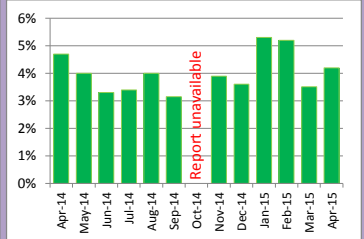


Outpatient Hospital Cancellations <5 Weeks

Total Number of Outpatient Appointments Cancelled by Hospital

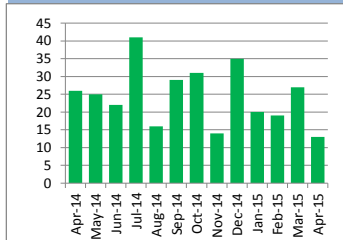


Percentage of Outpatient Appointments Cancelled by Hospital

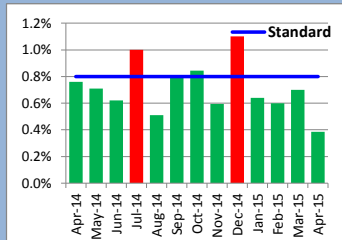


Elective Cancelled Operations

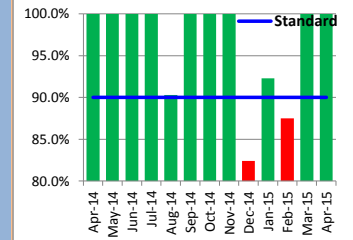
Number of Elective Cancelled Ops



Percentage of Elective Cancelled Ops

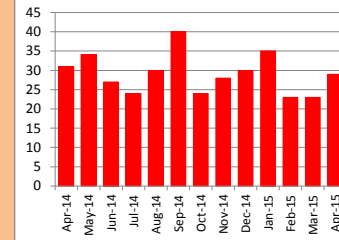


62 Day Consultant Upgrade

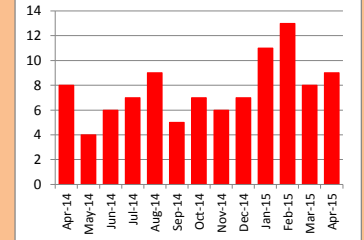


Cancer Waiting Times Compliance

Patients waiting 62 days and over



Patients Waiting Over 100 Days

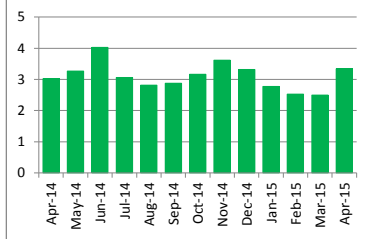


Integrated Performance Report: April 2015

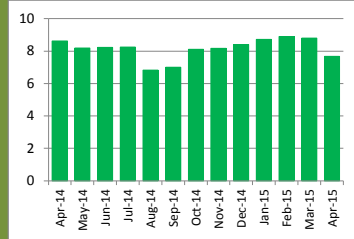
Operational

Length of Stay (Days)

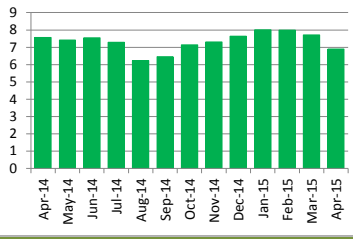
Elective Avg LoS exc Daycase based on spell discharge



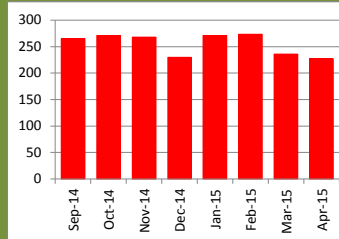
Non Elective Avg LoS exc zero based on spell discharge



Elective & Non Elective LoS exc zero based on spell discharge

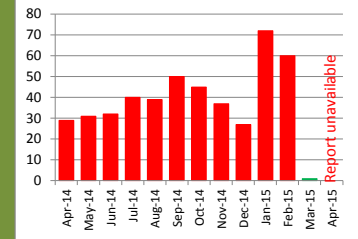


=>14 Day LoS monthly snapshot



Delayed Transfers of Care

Number of Patients Fit for discharge but delayed (monthly snapshot)

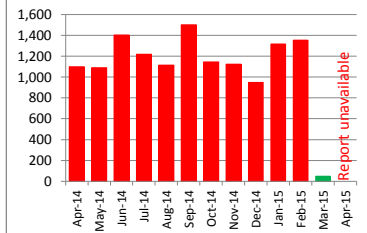


*excludes maternity and non elective transfers

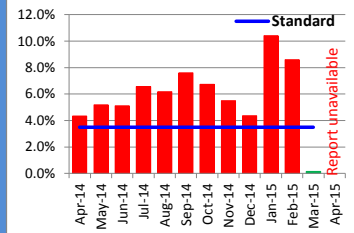
*Change in recording March 2015 following external review

Delayed Transfers of Care (Continued)

Total Number of Delayed Discharge Occupied Bed Days



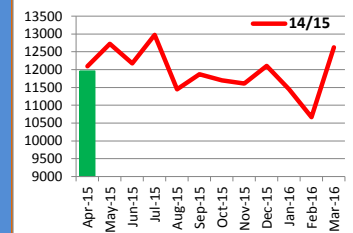
% of Delayed Discharges of Care



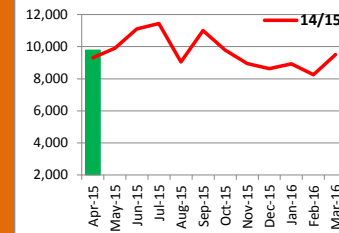
*Change in recording March 2015 following external review

Monthly Activity 15/16 v 14/15

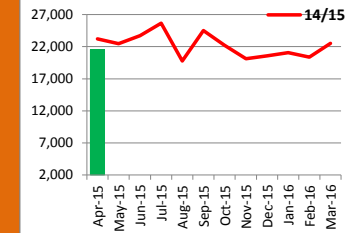
ED Attendances



First Outpatient

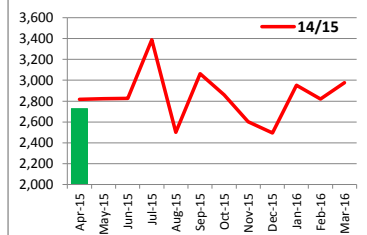


Follow Up Outpatient

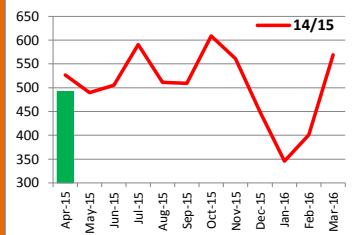


Monthly Activity 15/16 v 14/15

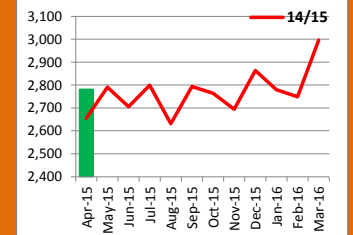
Daycase



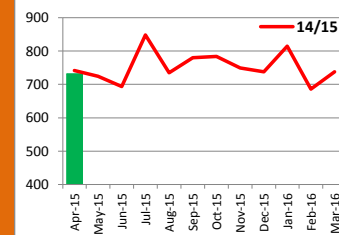
Elective Inpatients



Emergency



Other Emergency



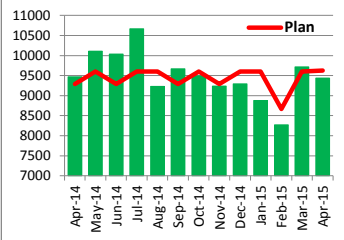
* based on discharges

* based on discharges

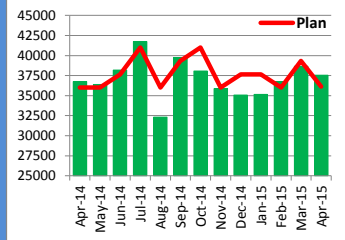
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Contract Activity Actual V Plan

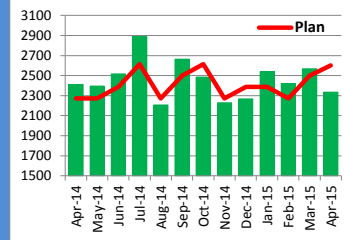
ED Attendances



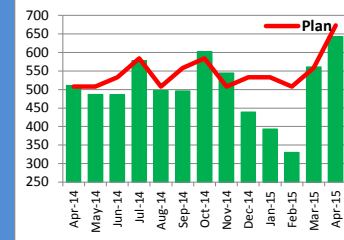
Outpatient



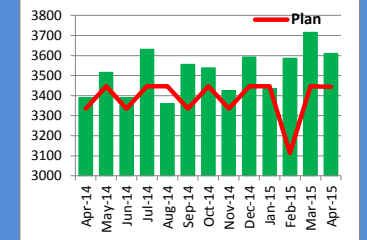
Daycase & Regular Attenders



Elective Inpatients

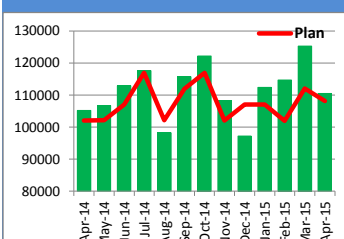


Non-Elective Inpatients

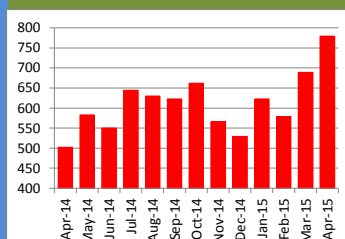


Contract Activity Actual V Plan (Continued)

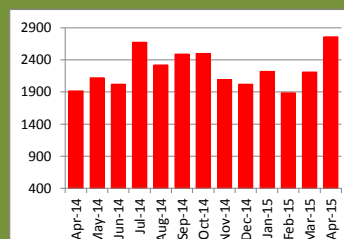
Others



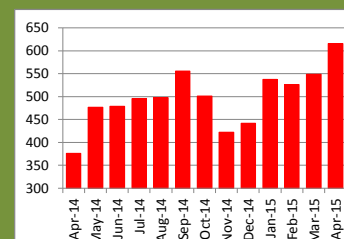
Total Variable Pay per WTE (£)



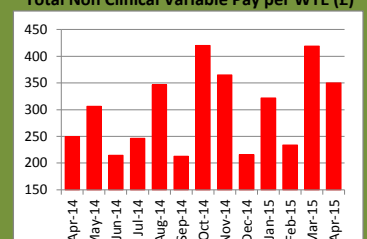
Total Medical Variable Pay per WTE (£)



Total Nursing Variable Pay per WTE (£)

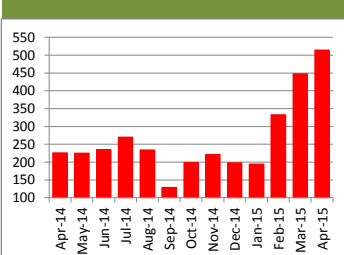


Total Non Clinical Variable Pay per WTE (£)



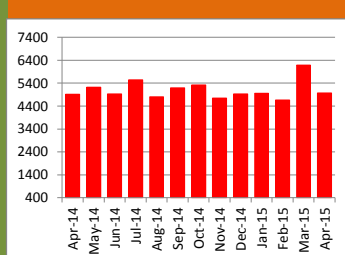
Variable Pay per WTE

Total Other Clinical Variable Pay per WTE (£)



Clinical Income per WTE

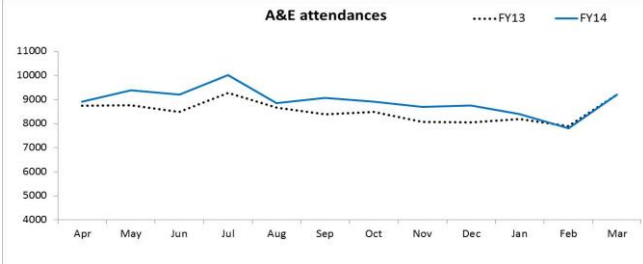
Total Clinical Income per WTE (£'000)



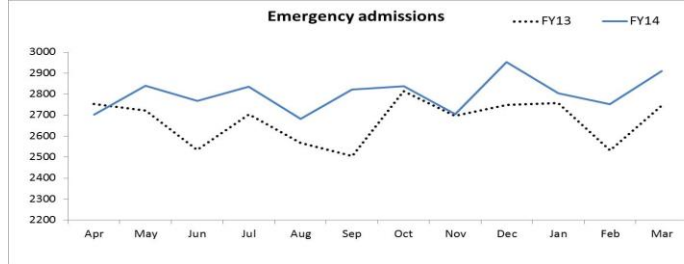
Operational

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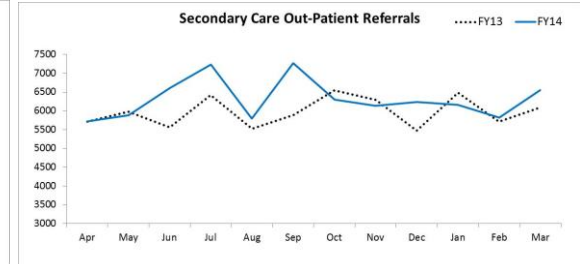
Better Together Programme Level KPIs - March 2015 Report



A&E Attendances - observations
The chart above shows the detail of current A&E attendances data per month for the Mid Notts CCGs each financial year starting FY April 2013.

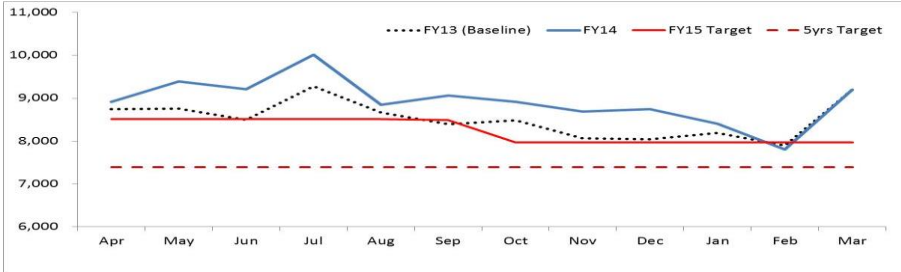


Emergency Admissions - observations:
The chart above shows the detail of current Emergency Admissions data per month for the Mid Notts CCGs each financial year starting FY April 2013.



Secondary Care Out-Patient Referrals:
The chart above shows the detail of current secondary care out-patient referrals data per month for the Mid Notts CCGs each financial year starting FY April 2013.

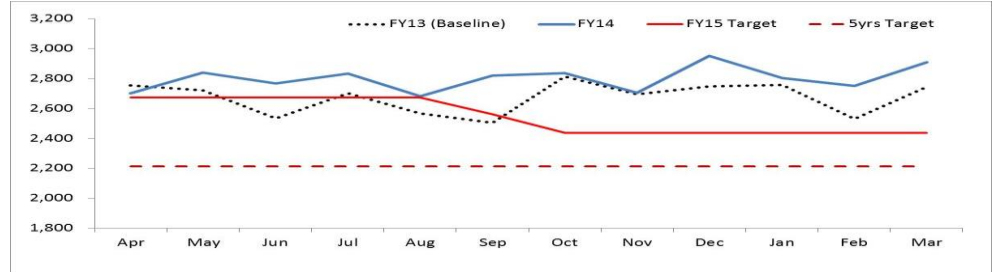
OBJECTIVE 1- 15.1% REDUCTION IN A&E ATTENDANCES



ED attendances observations:
The chart above shows the detail of current A&E Attendance data per month for the Mid Notts CCGs each financial year starting FY April 2013.

- The red lines indicate the trajectory for the fall in attendances required to achieve a 15.1% reduction over 5 years against the modelled demographic growth in activity.

OBJECTIVE 2 - 19.5% REDUCTION IN NON-ELECTIVE ACUTE ADMISSIONS



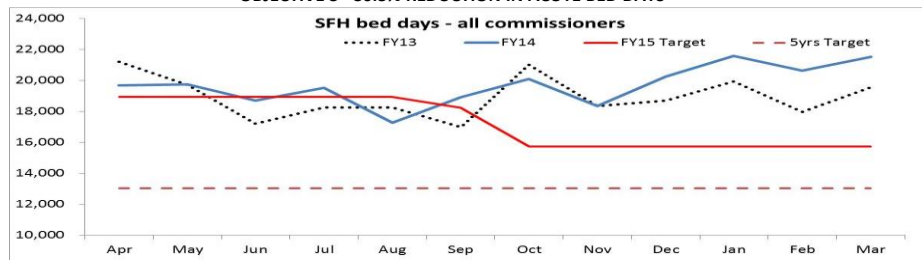
Emergency Admissions observations:
The chart above shows the detail of current emergency admissions data per month for the Mid Notts CCGs each financial year starting FY April 2013.

- The red lines indicate the trajectory for the fall in admissions required to achieve a 19.5% reduction over 5 years against the modelled demographic growth in activity.

Integrated Performance Report: April 2015

Better Together Programme Level KPIs - March 2015 Report continued

OBJECTIVE 3 - 30.5% REDUCTION IN ACUTE BED DAYS

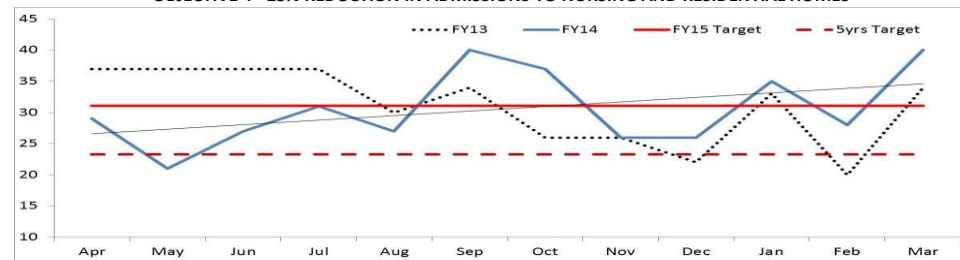


Acute bed days observations:

The chart above shows the detail of current non-elective acute bed days per month for Sherwood Forest Hospitals each financial year starting FY April 2013.

- The red lines indicate the trajectory for the fall in acute bed days required to achieve a 30.5% reduction over 5 years against the modelled demographic growth in activity.

OBJECTIVE 4 - 25% REDUCTION IN ADMISSIONS TO NURSING AND RESIDENTIAL HOMES

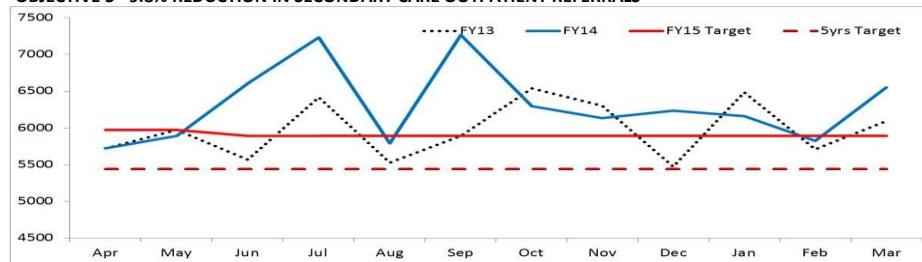


Admissions of older people admitted into long term nursing or residential care observations:

The chart above shows the detail of current older people admissions into long term care for the Mid Notts CCGs each financial year starting FY April 2013.

- The red lines indicate the trajectory for the fall in admissions needed to achieve a 25% reduction over 5 years, against the modelled demographic growth in activity.

OBJECTIVE 5 - 9.8% REDUCTION IN SECONDARY CARE OUTPATIENT REFERRALS

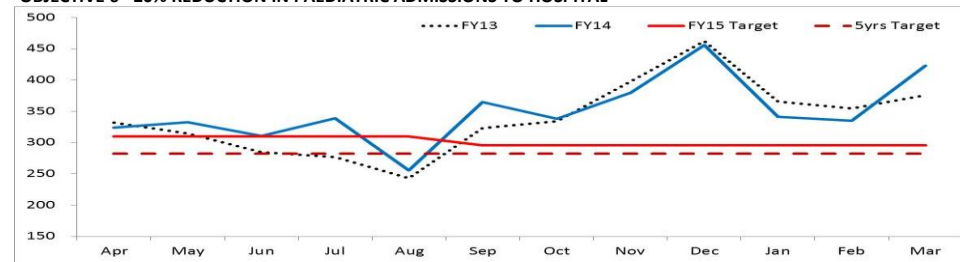


GP referrals observations:

The chart above shows the detail of current secondary care out-patient referrals data per month for the Mid Notts CCGs each financial year starting FY April 2013.

- The red lines indicate the trajectory for the fall in referrals required to achieve a 9.8% reduction over 5 years against the modelled demographic growth in activity.

OBJECTIVE 6 - 20% REDUCTION IN PAEDIATRIC ADMISSIONS TO HOSPITAL



Paediatric admissions observations:

The chart above shows the detail of current paediatric admissions data per month for Sherwood Forest Hospitals each financial year starting FY April 2013.

- The red lines indicate the trajectory for the fall in admissions required to achieve a 20% reduction over 5 years against the modelled demographic growth in activity.