

System Resilience Performance Dashboard - February

2015



Clinical Commissioning Group

	Performance Indicators	Operational Standard/ Plan	Lower Threshold	Baseline	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
Accident & I																	
A8.E (Attendances - Type 1 (Average per day) (Ref 1)			13/14 ave per day	2394 (85.5)	2767 (89.3)	2590 (86.3)	2750 (88.7)	2568 (85.6)	2846 (91.8)	2499 (80.6)	2595 (86.5)	2711 (87.5)	2623 (87.4)	2705 (87.3)	2604 (84.0)	2535 (90.5)
	Type 1 A&E at Warrington (Average per day) (Ref			uay	1038 (37.1)	1228 (39.6)	1064 (35.5)	1186 (38.3)	1068 (35.6)	1189 (38.4)	1053 (34.0)	1084 (36.1)	1156 (37.3)	1085 (36.2)	1077 (34.7)	1069 (34.5)	1022 (36.5)
	Type 1 A&E at Whiston (Average per day) (Ref 3)				1161 (41.5)	1313 (42.4)	1333 (44.4)	1323 (42.7)	1276 (42.5)	1421 (45.8)	1202 (38.8)	1293 (43.1)	1323 (42.7)	1316 (43.9)	1406 (45.4)	1339 (43.2)	1302 (46.5)
Narrative	Although the total number of A&E attendances fell in February compared to January the numbers attending per day increased and February was the busiest month for type 1 A&E attendances for Halton patients since July 2014. The activity increase was particularly acute at Whiston where February saw the largest daily average of Halton patients since reporting to the SRG began, activity at Warrington also saw an increase to the highest level since October but slightly below February 2014																
ton	Percentage of patients who spent 4 hours or less in A&E (type 1 &3) TRUST (IN MONTH figure) (ref SIT REP)	>=95%	>=94%	96%	94.0%	94.7%	94.0%	92.2%	95.8%	96.5%	96.4%	95.6%	94.7%	93.2%	91.4%	91.9%	93.0%
Whiston	Percentage of patients who spent 4 hours or less in A&E (type 1 only) TRUST (IN MONTH figure) (ref 9)	>=95%	>=94%		92.3%	93.6%	94.0%	92.6%	95.8%	96.5%	96.7%	94.7%	94.7%	91.6%	89.4%	89.9%	91.3%
L. L.	Percentage of patients who spent 4 hours or less in A&E(type 1 & 3) TRUST (IN MONTH Figure) (ref SIT REP)	>=95%	>=94%	95.5%	94.9%	97.0%	94.5%	92.8%	94.9%	91.0%	93.8%	93.3%	93.0%	91.2%	83.7%	84.1%	81.9%
Warrington	Percentage of patients who spent 4 hours or less in A&E (type 1 only) TRUST (IN MONTH Figure) (ref 7)	>=95%	>=94%		95.4%	96.4%	93.4%	91.2%	93.9%	90.0%	92.3%	91.9%	91.9%	89.7%	81.4%	81.6%	78.7%
Narrative	The 4 Hour A&E target of 95% has been missed by both Whiston and Warrington A&E departments in February, if the type 3 activity at the respective trusts is included then although performance against the target improves the target is still missed. Warrington has missed the 4-hour A&E target every month so far in 2014/15 and Februarys figure is the lowest 4-hour performance so far. Warrington has had significant problems in recent months affecting its capability to move people quickly															luickly	
% of Type 1	A&E attendances where referral source is GP (Ref			4.1%	4.7%	5.1%	5.3%	4.9%	4.8%	4.7%	4.8%	5.3%	5.5%	6.6%	7.8%	7.2%	7.7%
Narrative	The proportion of A&E attendances where the GF GP referral rate across the country was 5.8% with						nted for 7.7%	6 of all A&E a	attendances.	This should b	e looked ag	ainst a 13/14	l average of	4.1%. For co	mparison dui	ing 2012/13	the average
(%) Conve	rsion rate - A&E type 1 attendances admitted to hospital (<i>Ref 14</i>)	28%		36.2%	37.1%	37.0%	37.4%	36.7%	35.5%	35.7%	36.1%	35.9%	38.8%	37.5%	39.2%	38.6%	39.1%
Narrative	The National Audit Office report "Emergency adm 39%. The likelihood of an A&E attendance becom conversion rate as only the most acute patients w	ing an admissi	on for a Halto	n registere	d patient is h	nigher at War	rington (43%	6) than St He		• //	•					•	

	Operational Standard/	Lower														
Performance Indicators	Plan	Threshold	Baseline	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
Non-Elective Emergency admissions - (based on Admission me	ethod 21 - 'Acci	ident and eme	rgency or d	ental casualt	y departmen	t of the Heal	lth care Prov	vider)								
No. of patients discharged following admission via A&E (ref 24)			935	875	911	936	978	873	1034	882	894	1025	928	980	973	945
													I			
Narrative % of patients discharged following admission from A&E with																
zero length of stay (<i>Ref 28</i>)	<=33.3%	<=37%	32.8%	30.2%	32.8%	35.2%	34.7%	35.3%	36.3%	35.2%	36.8%	34.7%	35.8%	34.5%	31.6%	33.7%
January saw the lowest percentage of patients d	ischarged with	a zero day ler	gth of stay	so far in 2014	1/15 and belo	ow the basel	ine figure fo	r 2013/14					I		I.	
Narrative																
	45 50/	15 (0)	15 60/			305	278	256	305	253	284	325	300	210	198	
Emergency Re-admissions 30 days (corp perf rpt 14)	15.5%	15.6%	15.6%			(21.3%)	(17.0%)	(16.4%)	(17.4%)	(16.3%)	(16.8%)	(17.4%)	(16.9%)	(16.5%)	(13.1%)	
A multi-organisational Task and Finish group - a	cute, NWAS, H	BC, CCG and c	linicians hav	ve been taske	ed with revie	wing the cur	rent positio	n with a view	to initiating	appropriate	measures fo	r improveme	ent. Although	February da	ta is not avai	able the
readmission rate in January was very low.																
Narrative																
Alcohol related Hospital Admissions - (based on first complete	ed hospital epis	ode data whe	re AAF = 1 i													
Wholly attributable admissions (ref 17)				93	103	72	107	91	99	90	96	102	90	87	86	83
Warrington and Halton Hospitals NHS foundation trust (ref				40	48	26	60	47	50	35	35	45	33	34	37	26
18)																
St Helens and Knowsley Hospitals Trust (ref 19)				37	38	34	36	33	36	38	38	42	43	38	42	44
Wholly attributable admissions - Male (ref 20)				57	71	43	67	54	68	60	65	71	56	63	58	55
Wholly attributable admissions - Female (ref 21)				36	32	29	40	37	31	30	31	31	34	24	28	28
Wholly attributable admissions with a zero length of stay (ref																
22)				39	45	32	59	40	47	44	45	40				
Wholly attributable admissions - average length of stay (days)				5.2	2.2	3.5	1.6	1.9	2.8	2.8	4.2	2.4				
(ref 23)							-		-	-						
Urgent Care Centres		1		-												
Total non type 1 A&E				3641	4304	4144	4308	4080	4171	3598	4056	3705	3535	3632	3617	3314
				120	120	120	139	120	125	110	425	120	110	117	447	440
Type 3 & Type 4 (ave per day)				130	139	138	139	136	135	116	135	120	118	117	117	118
(34b) Halton Patient Attendances - HCRC walk in centre				2646	3070	2942	3079	2799	2892	2523	2790	2610	2558	2804	2753	2417
(Widnes) Type 4																
(34b) Halton Patient Attendances - Minor Injuries Unit (Runcorn) Type 3				995	1234	1202	1229	1281	1279	1075	1266	1095	977	828	864	897
Ratio of Type 3 /4 attendances at MIU or HCRC to Type 1	1			1.00	1.00	1 70	1 70	1 74	1.00	1.00	1 71	1.40	1 47	1.40	1.50	1.42
attendance at Whiston or Warrington				1.66	1.69	1.73	1.72	1.74	1.60	1.60	1.71	1.49	1.47	1.46	1.50	1.43
Whilst increases in type 1 activity have been with	nessed, activity	at the MIU ar	nd WIC has r	educed, Feb	ruary saw th	e smallest nu	umber of typ	e 3/4 attend	ances as a ra	tio to type 1	attendances	s, falling to 1	1.43 :1			
Narrative																

	Operational Standard/	Lower														
Performance Indicators	Plan	Threshold	Baseline	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
Out of Hours	i iun	Threshold	Baseline	10011	initial 11		intay 11	Juli 11	301 11	7105 11	30p 14	000 11		Dec 14	3011 13	100 10
Total number of Halton calls completed on Adastra (% variance from 13/14 activity) (ref 57)	0%-7.5% from 13/14 base	7%-15% from base	13/14 actual	1559	1788	1775 (+5%)	1938 (+14%)	1472 (+4%)	1465 (+13%)	1556 (+4%)	1312 (-2%)	1489 (+13%)	1637 (+11%)	2210 (+17%)	1929 (+18%)	1587 (+2%)
RAG banding has been introduced, this shows the						hlights that a	lmost every	month in 201	L4/15 has be	en busier th	an the corres	ponding mo	nth in 2013/2	L4 and that [December an	d January
Narrative were exceptionally busy months having 17% mor	e calls compar	ed with the co	rrespondin	ng month in 2	2013/14.											
Ambulance - NWAS			1													
The number of category A (red 1) calls resulting in an emergency response arriving at the scene of the incident (% within 8 minutes) (ref 83)	75%	none		25 (64.00%)	38 (68.42%)	30 (76.67%)	42 (76.19%)	27 (55.56%)	36 (75.0%)	44 (81.82%)	35 (68.57%)	40 (77.5%)	36 (63.9%)	61 (63.93%)	37 (67.6%)	40 (92.5%)
The number of category A (red 2) calls resulting in an emergency response arriving at the scene of the incident (% within 8 minutes) (ref 86)	75%	none		540 (75.0%)	624 (74.4%)	606 (77.6%)	573 (74.0%)	562 (73.3%)	589 (68.1%)	567 (73.0%)	558 (75.5%)	637 (73.9%)	612 (69.9%)	743 (60.16%)	664 (60.4%)	606 (61.9%)
The number of category A (red 1& 2) calls resulting in an emergency response arriving at the scene of the incident (% within 8 minutes) (<i>ref 83-88</i>)	75%	none	613 (76.7%)	565 (74.5%)	662 (74.0%)	636 (77.5%)	615 (74.1%)	589 (72.5%)	625 (68.5%)	611 (73.6%)	593 (75.0%)	677 (74.2%)	648 (69.5%)	804 (60.4%)	701 (60.8%)	646 (63.8%)
The most urgent (Red 1) calls achieved the target March but higher than the corresponding month Narrative		-		-	-	nt calls (Red 2	2) saw an slig	ght improvem	ent in perfo	rmance but s	still significan	tly below tar	get and a red	duction in ac	tivity compa	red to
Turnaround times (Average) (mins) Whiston	<15	<30	27.68	27.31	26.36	27.25	26.36	27.36	27.32	28.25	28.12	28.6	31.2	32.4	32	27.4
Turnaround times (Average) (mins) Warrington	<15	<30	23.90	22.45	22.28	22.38	23.47	23.21	25.03	25.1	24.58	25.5	26.2	32.5	30.6	32.1
Ambulance turnaround times improved again in f above 30 minutes.	Eebruary at Wh	histon and the	average tu	rnaround tin	ne is back be	low 30 minut	tes and the l	owest since J	uly 2014. At	Warrington	, average am	bulance turn	around time	s increased i	n February a	nd remain
Delayed Discharge Transfers - Halton GP registered patients -	Snapshot take	n last Thursda	y of the Mo	onth												
			6.6	7 (245)	5 (268)	14 (257)	6 (235)	9 (196)	4 (225)	6 (239)	2 (145)	5 (133)	7 (223)	9 (280)	11 (317)	8 (296)
(158 & 159) Number of delayed discharge transfers & (Days)																
Halton reported a high number of delayed transfordelays at 5BP. These have now been addressed twas witnessed.				,	0		•				,				0	
Intermediate Care Services - Halton Borough Council																
Numbers referred to Intermediate care				143	127	145	117	126	137	103	121	140	124	134	171	147
		<u>.</u>			1			<u> </u>		1						
Narrative																

	Operational Standard/	Lower														
Performance Indicators	Plan	Threshold	Baseline	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
Referral To Treatment Times																
Admitted (Halton Registered Patients)	90.0%	89.0%	92.7%	93.9%	94.2%	94.3%	95.2%	95.6%	92.5%	91.5%	93.4%	93.7%	94.0%	94.9%	94.8%	95.1%
All Patients Warrington Trust (TRUST LEVEL)	90.0%	89.0%	91.7%	92.8%	93.4%	92.6%	93.2%	93.6%	90.7%	90.3%	92.0%	92.1%	92.7%	93.0%	92.9%	92.2%
All Patients St Helens Trust (TRUST LEVEL)	90.0%	89.0%	93.8%	93.7%	93.6%	94.3%	96.0%	96.7%	94.7%	94.0%	95.6%	96.6%	96.0%	97.0%	96.9%	95.7%
Non-Admitted (Halton Registered Patients)	95.0%	94.0%	98.0%	98.0%	98.1%	98.3%	98.5%	98.8%	97.7%	97.9%	97.9%	97.8%	97.2%	98.3%	97.4%	98.3%
All Patients Warrington Trust (TRUST LEVEL)	95.0%	94.0%	97.8%	98.1%	97.9%	98.0%	97.6%	98.5%	97.8%	97.7%	98.1%	97.6%	97.0%	97.5%	97.0%	97.3%
All Patients St Helens Trust (TRUST LEVEL)	95.0%	94.0%	98.0%	98.2%	98.6%	98.6%	98.7%	98.5%	98.4%	98.5%	99.0%	98.4%	98.3%	98.6%	98.1%	98.4%
Incomplete (Halton Registered Patients)	92.0%	91.0%	95.5%	94.8%	95.4%	95.7%	96.0%	95.8%	95.6%	96.2%	96.1%	95.7%	96.2%	95.6%	95.0%	95.1%
All Patients Warrington Trust (TRUST LEVEL)	92.0%	91.0%	93.2%	94.4%	94.7%	94.5%	94.6%	94.9%	94.9%	95.3%	94.9%	94.5%	94.3%	94.0%	93.5%	93.9%
All Patients St Helens Trust (TRUST LEVEL)	92.0%	91.0%	96.2%	96.5%	97.0%	97.6%	97.7%	97.7%	97.6%	98.2%	98.5%	98.1%	98.2%	98.0%	97.4%	97.8%
RTT targets have been met at both CCG and T	rust level for all th	nree headline	measures.													

Narrative