Performance Report – Month 03 (June)

Agenda Item: 7.1
Reference: 10B.076A
Trust Board: 26 July 2010

NHS Direct

Summary

Quality and Productivity

All Core Contract KPI targets were met for the month.

Patient/user satisfaction levels (94%) continue to exceed the 90% Target.

Access rates continued to perform well for the Combined Service with both Answered in 60 (97%) and Abandonment Rate (0.4%) significantly exceeding target.

All Clinical Access targets have been met. Urgent Calls started within 20 minutes are continuing to achieve target (96%), with Less Urgent started within 60 minutes (98%) showing continued improvements and achieving target and Non Urgent (96%) also achieving target for the first time after 4 months of gradual improvement. Efficiency gains within the Operations have been driven by continued focus on the Clinical Access Improvement Plan. The software upgrade of CSPT and CAS was carried out on 16th June. This is expected to contribute to improving and sustaining Clinical Performance Levels. The full benefits of the release will be realised over the next few months.

Our service contact volumes have continued to be below the contracted targets agreed with our NHS Commissioner, the total volume of calls answered across the service remains below the contracted level for the year (91% of Q1 forecast).

Front line staff 'time with patients' has shown a slight decrease in June (43%).

Value to Patients and the NHS

Urgent & Emergency Referrals (24.2%) from the Core Service achieved target for the fourth consecutive month.

Core Service Calls not requiring onward referral achieved the new internal standard of 60% for the third consecutive month finishing (61%).

H1/M1 calls achieved the 90% target for the third consecutive month. The implementation of CSPT v9 has led to a dramatic reduction in calls with a H1/M1 classification. Volumes have dropped from an average of over 100 per day to 3 a day and as a result performance levels are much more volatile. Discussions are taking place with the commissioners to agree a new definition for this KPI.

Great Place to Work

During June staffing levels have shown signs of improvements, however, staff sickness levels are still above target for the year (16 days per wte per annum). Dedicated resources have been introduced in HR to focus on long term sickness, in particular the rolling top 30 cases.

The first year attrition figure is unacceptably high (33%) and exit interviews show that the irregular shift patterns account for a high proportion of leavers from the frontline. It is therefore expected that the new Rosters will have a positive impact on attrition.

Planning Ahead

The 13 innovation pilots are continuing. 47 patients have already accessed the OA Knee tool and approximately 20 patients have accessed each of the urology PDAs.

Corporate Performance (Finance Summary)

As the Trust enters the second quarter of the financial year it faces significant threats and challenges to its financial stability as set out in the Finance Report, which it must quickly act upon and manage. Failure to act and to sustain improvements through the second quarter will leave

	the Trust facing the possibility of financial deficit this year.
Issues to be considered	The Board to consider current performance levels for patients and quality, service levels, finance and staffing matters.
Action required	The Board is asked to note the above summary and Board Scorecard attached
Accountable Director	Trevor Smith
Author of Paper	Craig Pattison and relevant Executive Directorates
Date prepared	12th July 2010