PERFORMANCE UPDATE

Performance Update

1. Introduction

The work to review the format of the various reports produced for planned care, urgent care and out of hospital care is continuing and we expect to amend the format/content of these reports to ensure that they provide the necessary performance information to enable the transformation groups to identify appropriate corrective action.

The Quality & Safety Committee and the Quality, Finance & Performance Group currently review performance and provide assurance to the Governing Body.

2. Latest Position

Our providers continue to meet most of the constitutional standards and the Governing Body are requested to note this.

The new performance report is divided into two sections; red performance (needing attention) and green performance (continue monitoring but no immediate action required).

<u>Red Performance</u>

I. **Referral to Treatment pathways : incomplete**
   In England, under the <u>NHS Constitution</u>, patients 'have the right to access certain services commissioned by NHS bodies within maximum waiting times, or for the NHS to take all reasonable steps to offer a range of suitable alternative providers if this is not possible'. The NHS Constitution sets out that patients should wait no longer than 18 weeks from GP referral to treatment.

   - Performance in the latest month (November) is below the 92% target set in the NHS constitution (Current performance is 89.0%). The main providers contributing to this underperformance are South Tees Hospitals Foundation Trust (South Tees FT) (89.2%), York Teaching Hospital Foundation Trust (York FT) (82.0%) and County Durham and Darlington Foundation Trust (County Durham & Darlington FT) (91.4%). While other providers may also contribute to the poor performance; generally the numbers of breaches are very low compared to our 3 largest providers.
   - The main specialties at South Tees FT where performance is an issue are plastic surgery (80.1% (56 breaches)) and Trauma & Orthopaedics (76.8% (395 breaches)) both plastics and T&O have been

underperforming over a prolonged period of time, with the trust putting action plans in place in order to improve performance, including waiting list cleansing and setting up joint clinics across plastics and dermatology to limit the number of breaches.

- The main specialties at York FT where there are performance issues are Ophthalmology (74.7% (24 Breaches)), Dermatology (84.0% (4 Breaches)) and General Surgery (84.2% (14 Breaches)).
- The main specialty at County Durham & Darlington FT where there is a performance issue is Ophthalmology (84.2% (15 Breaches)) which is a significant improvement over the 26 breaches in September.

II. Waiting List growth

- NHS England has an expectation that the size of the waiting list at March 2019 should be no higher than it was in March 2018. In March 2018 our waiting list was at 7,784, by November 2018 this had grown to 7,967, which is an increase of 183 waiters.

- The table below shows the increase in waiters split by provider, showing only small increases at each provider are contributing to the increase.

Provider	Mar-18	Nov-18	Inc / Dec	
SOUTH TEES HOSPITALS NHS FOUNDATION TRUST	6317	6291	-26	-0.41%
YORK TEACHING HOSPITAL NHS FOUNDATION TRUST	444	451	7	1.58%
COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	287	304	17	5.92%
BMI WOODLANDS HOSPITAL	150	171	21	14.00%
THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST	152	166	14	9.21%
HARROGATE AND DISTRICT NHS FOUNDATION TRUST	120	159	39	32.50%

III. Diagnostic test waiting times

- CCG level Performance against this metric in November failed to meet the 1% target set out in the NHS Constitution, coming in at 1.1%. There were 25 breaches of the 6 week target for this metric in November 2018.
- The main provider who contributed to this under performance was South Tees FT (20 Breaches in November) and the main test underperforming was Non-Obstetric Ultrasound at South Tees FT (14 Breaches) no other provider or test had more than 2 breaches
- South Tees are aware of the issues (capacity), they have brought in a new radiologist who is working on reducing the significant backlog at the trust. They are also working on a capacity and demand exercise in this area, with a recovery plan to be in place by the end of January to bring the service back to the levels expected.

IV. Cancelled operations: South Tees FT (Trust Position)

- The Q2 1819 position on this indicator shows 24 patients (trust overall) were not treated within 28 days of a cancellation out of 133 patients who had their operation cancelled at the last minute for non-clinical reasons at South Tees Hospitals Foundation Trust. For Hambleton, Richmondshire and Whitby patients there were 6 breaches out of 38

cancelled operations in this metric, at a rate of 15.8%, against a trust wide target of 10.1%.

V. Accident & Emergency

- Performance against the 4 hour wait target for A&E is at 93.6% in December 2018 (failing target) against a target of 95%.
- The main providers impacting on our performance against this metric are York FT (87.6%), and County Durham and Darlington FT (88.6%).

VI. Ambulance Performance (YAS) – Category 1 – Response within 8 Minutes

- Changes in reporting at YAS have resulted in this data no longer being available, discussions are currently being held between eMBED and Harrogate CCG/ YAS to establish if this information can be produced in the future.

- Yorkshire Ambulance Service have provided the following table relating to their mean performance against different categories of callouts, showing the average waiting time is over the target against each of the categories.

	Denominator	Value	Target
October 2018	*Category 1 – Mean*	00:07:02	00:07:00
	Category 2 – Mean	00:20:29	00:18:00
	Category 2 – 90th Centile	00:42:36	00:40:00
	Category 4 – 90th Centile	03:44:04	03:00:00

VII. Ambulance Handover Times:
% Delays over 30 minutes (Friarage Hospital)

- There were 3 delays of over 30 minutes at the Friarage hospital in November 2018 (1.2%), this is an improvement on the 7 delays seen in September 2018.

VIII. Healthcare Associated Infections:

MRSA

- There was 1 CCG attributed MRSA case in November 2018 which occurred at York FT.

- The case has been investigated and a review is in progress.

- This is only the second case of MRSA that has been reported for our CCG this year.

IX. Estimated diagnosis rate for people with dementia:

The CCG remains under the 66.7% target for this indicator, with a diagnosis rate of 62.2% in November 2018, this is an improvement on previous months.

The CCG is working with GP practices across Hambleton, Richmondshire and Whitby areas to help understand any difficulties around dementia diagnosis that might prevent patients being offered appropriate support and assessment. It is also meeting regularly with the local Dementia Action Alliance to understand the affects from a patient and carer point of view.

We are currently working with our local GP practices more closely with the aim of improving dementia diagnosis rates.

X. Number of people who receive psychological therapies:

The CCG is failing to meet the target in 2 of the metrics within the Mental Health / Improving access to Psychological Therapies group of indicators, these are

- The % of people who have depression and/or anxiety disorders who receive psychological therapies, is 1.3% in November 2018 against a target of 1.5%, and continues an increasing performance in this indicator seen over the last 3 months.

- The number of people who receive psychological therapies, is195 in November 2018 against a target of 225. The 195 represents an increase of 65 patients receiving psychological therapies from the 130 reported in October 2019.

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Indicator	Level of Reporting		Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Q1 2018/19	Q2 2018/19	2018/19	Direction of Travel (last 12 Months)	3 Month Trend
Planned Care																			
Referral to Treatment																			
Referral to Treatment pathways: Incomplete	CCG	Actual	90.9%	90.6%	90.8%	89.8%	90.5%	91.0%	91.1%	90.8%	90.1%	89.4%	89.1%	89.0%	90.9%	90.1%	90.1%		↓
		Target	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%		
Diagnostics																			
Diagnostic test waiting times	CCG	Actual	2.6%	2.4%	0.6%	1.1%	1.4%	1.0%	1.5%	1.4%	0.7%	1.0%	1.1%	1.1%	1.5%	1.0%	1.1%		↑
		Target	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%		
Cancelled Operations																			
Cancelled Operations - South Tees	STH (Trust Wide)	Actual	13.5%			16.6%			16.4%			18.0%			16.4%	18.0%	17.3%		↑
		Target	14.0%			12.6%			14.3%			10.1%			14.3%	10.1%	12.9%		
Unplanned Care																			
A&E																			
A&E waiting time - total time in the A&E department, StRep data	% of STH activity (CCG weighted)	Actual	89.8%	87.7%	90.3%	90.6%	92.1%	95.3%	94.4%	93.2%	93.7%	94.1%	94.5%	93.6%	94.0%	93.7%	93.9%		↓
		Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%		
A&E - % Attendances - Type 1, StRep data	% of STFT & CDD activity (CCG weighted)	Actual	86.6%	84.0%	87.4%	88.0%	89.6%	93.9%	92.6%	91.0%	91.6%	92.2%	92.9%	91.6%	92.1%	91.6%	92.0%		↓
		Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%		
Ambulance performance - YAS																			
Category 1 - Mean	YAS (Region)	Actual	00:08:12	00:08:10	00:08:07	00:08:17	00:08:02	00:08:20	00:07:38	00:07:19	00:07:03	00:07:18	00:07:10	00:07:02	00:08:01	00:07:13	00:07:32		↓
		Target	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00	00:07:00		
Category 2 - Mean	YAS (Region)	Actual	00:27:58	00:26:57	00:25:08	00:25:38	00:21:39	00:22:54	00:21:30	00:20:29	00:19:25	00:20:19	00:19:58	00:20:29	00:22:02	00:20:05	00:20:50		↑
		Target	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00	00:18:00		
Category 2 - 90th Centile	YAS (Region)	Actual	01:00:47	00:59:30	00:55:13	00:57:34	00:45:53	00:48:43	00:45:08	00:42:40	00:39:47	00:42:10	00:41:37	00:42:36	00:46:35	00:41:32	00:43:31		↑
		Target	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00	00:40:00		
Category 4 - 90th Centile	YAS (Region)	Actual	04:22:05	03:45:02	03:33:15	03:17:37	01:06:51	03:37:09	02:43:11	03:12:55	02:45:47	03:51:53	02:47:56	03:44:04	02:54:07	03:16:52	04:09:20		↓
		Target	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00	03:00:00		
Ambulance Handover Time																			
Ambulance handover time - % Delays over 30 minutes (Friarage Hospital)	Trust Site	Actual	1.6%	0.7%	0.4%	1.2%	0.4%	0.4%	0.9%	1.3%	0.8%	2.9%	1.4%	1.2%	0.6%	1.7%	1.2%		↓
		Target	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%		
Ambulance handover time - Delays of +30 minutes (Friarage Hospital)	Trust Site	Num	4	2	1	3	1	1	2	3	2	7	4	3	4	12	23		
Ambulance handover time - Total Delays (Friarage Hospital)	Trust Site	Den	248	267	240	252	238	249	233	235	240	241	291	248	718	716	1973		
Mental Health/ IAPT																			
IAPT																			
% of people who have depression and/or anxiety disorders who receive psychological therapies	CCG	Actual	1.2%	1.4%	1.0%	1.2%	1.2%	1.3%	1.1%	1.1%	0.6%	0.9%	1.3%		3.5%	2.6%	7.7%		↑
		Target	1.4%	1.4%	1.4%	1.4%	1.4%	1.4%	1.4%	1.5%	1.5%	1.5%	1.5%	1.5%	4.3%	4.4%	18.0%		
Number of people who receive psychological therapies	CCG	Actual	180	205	150	170	175	185	165	160	125	130	195		525	415	1135		↑
		Target	203	203	203	203	212	212	212	217	217	217	225	225	635	650	2664		
Dementia																			
Estimated diagnosis rate for people with dementia.	CCG	Actual	64.1%	62.6%	62.7%	62.0%	61.2%	60.2%	60.0%	60.7%	61.0%	61.4%	61.2%	62.2%	60.0%	61.0%	61.0%		↑
		Target	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%		

Indicator	Level of Reporting		Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Q1 2018/19	Q2 2018/19	2018/19	Direction of Travel (last 12 Months)	3 Month Trend
HCAI and Quality																			
Hospital Infections																			
Incidence of healthcare associated infection (HCAI): MRSA	CCG ATTRIBUTED	Actual	0	0	0	0	0	0	0	1	0	0	0	1	0	1	2		↑
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		

HRW CCG - NHS Constitution - 2018/19 - Green

Generated on: 10 January 2019

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Indicator	Level of Reporting		Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Q1 2018/19	Q2 2018/19	2018/19	Direction of Travel (last 12 Months)	3 Month Trend
Planned Care																			
Referral to Treatment																			
Number of >52 week Referral to Treatment in Incomplete Pathways	CCG	Actual	1	1	0	0	0	0	1	0	0	0	0	0	1	0	1		–
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Cancer																			
All Cancer 2 week waits	CCG	Actual	94.0%	93.8%	95.1%	92.9%	93.5%	95.9%	91.7%	94.3%	91.2%	91.0%	93.7%	93.9%	93.8%	92.2%	93.2%		↑
		Target	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%		
Breast Symptoms (Cancer Not Suspected) 2 week waits	CCG	Actual	98.2%	93.8%	100.0%	83.3%	91.4%	91.3%	92.6%	92.9%	96.8%	90.5%	100.0%	97.1%	91.8%	93.6%	94.0%		↑
		Target	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%		
Cancer 31 day waits: first definitive treatment	CCG	Actual	98.2%	92.5%	100.0%	98.7%	97.6%	98.7%	98.6%	100.0%	98.7%	100.0%	98.8%	97.0%	98.3%	99.5%	98.6%		↓
		Target	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%		
Cancer 31 day waits: subsequent cancer treatments-surgery	CCG	Actual	100.0%	91.3%	90.9%	83.3%	87.5%	100.0%	100.0%	95.7%	100.0%	94.4%	100.0%	100.0%	95.8%	96.0%	96.4%		↑
		Target	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%		
Cancer 31 day waits: subsequent cancer treatments-anti cancer drug regimens	CCG	Actual	100.0%	100.0%	100.0%	100.0%	100.0%	92.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	97.1%	100.0%	98.9%		–
		Target	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%		
Cancer 31 day waits: subsequent cancer treatments-radiotherapy	CCG	Actual	100.0%	98.2%	92.9%	87.5%	89.3%	95.8%	100.0%	95.5%	100.0%	93.3%	92.1%	100.0%	94.7%	97.3%	95.8%		↑
		Target	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%		
% patients receiving first definitive treatment for cancer within two months (62 days) of an urgent GP referral for suspected cancer (inc 31 day Rare cancers)	CCG	Actual	92.1%	83.9%	85.2%	95.8%	93.6%	88.2%	87.5%	81.8%	89.3%	94.1%	90.9%	88.5%	89.7%	87.6%	88.9%		↓
		Target	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%		
Percentage of patients receiving first definitive treatment for cancer within 62-days of referral from an NHS Cancer Screening Service.	CCG	Actual	100.0%	100.0%	100.0%	Nil Return	100.0%	100.0%	100.0%	100.0%	100.0%	Nil Return	100.0%	100.0%	100.0%	100.0%	100.0%		
		Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%		
Percentage of patients receiving first definitive treatment for cancer within 62-days of a consultant decision to upgrade their priority status.	CCG	Actual	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
		Target																	
Cancelled Operations																			
No urgent operations cancelled for a 2nd time - South Tees	STH (Trust Wide)	Actual	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		–
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Mixed Sex Accommodation																			
Mixed Sex Accommodation (MSA) Breaches (Rate per 1,000 FCEs)	CCG	Actual	0.00	0.00	0.00	0.00	0.00	0.23	0.00	0.00	0.00	0.00	0.22	0.00	0.08	0.00	0.1		↑
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Number of MSA breaches for the reporting month in question	CCG	Actual	0	0	0	0	0	1	0	0	0	0	1	0	1	0	2		↑
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Unplanned Care																			
Trolley Waits																			
12 hour trolley waits in A&E - Hambleton Richmond and Whitby CCG	CCG	Actual	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0		–
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
12 hour trolley waits in A&E - South Tees	STH (Trust Wide)	Actual	0	8	0	0	0	0	0	0	0	0	0	0	0	0	0		–
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Ambulance performance - YAS																			
Category 1 - 90th Centile	YAS (Region)	Actual	00:14:19	00:13:56	00:13:57	00:14:15	00:13:44	00:14:11	00:12:55	00:12:31	00:12:05	00:12:28	00:12:23	00:12:13	00:13:39	00:12:21	00:12:54		↓
		Target	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00	00:15:00		
Category 3 - 90th Centile	YAS (Region)	Actual	02:41:47	02:31:51	02:24:28	02:25:24	00:54:00	02:24:07	02:12:53	02:07:31	01:59:28	01:57:25	01:57:34	01:58:25	02:14:27	02:01:28	02:01:03		↑
		Target	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00	02:00:00		

Indicator	Level of Reporting		Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Q1 2018/19	Q2 2018/19	2018/19	Direction of Travel (last 12 Months)	3 Month Trend
Ambulance Handover Time																			
Ambulance handover time - % Delays over 60 minutes (Friarage Hospital)	Trust Site	Actual	0.4%	0.0%	0.0%	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%		–
		Target	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%		
Ambulance handover time - Delays of +60 minutes (Friarage Hospital)	Trust Site	Num	1	0	0	2	0	0	0	0	0	0	0	0	0	0	0		
Ambulance handover time - Total Delays (Friarage Hospital)	Trust Site	Den	248	287	240	252	238	249	233	235	240	241	291	248	718	716	1973		
Mental Health/ IAPT																			
IAPT																			
% of people who are moving to recovery	CCG	Actual	47.1%	52.2%	52.6%	59.3%	50.0%	50.0%	60.9%	50.0%	45.0%	55.0%	52.0%		53.7%	50.0%	51.9%		↓
		Target	50.0%	50.0%	50.0%	50.0%	50.3%	50.3%	50.3%	50.2%	50.2%	50.2%	50.2%	50.2%	50.3%	50.2%	50.2%		
The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment against the number of people who finish a course of treatment in the reporting period.	CCG	Actual	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%	100.0%	100.0%		–
		Target	95.0%	95.0%	95.0%	95.0%	95.1%	95.1%	95.1%	95.1%	95.1%	95.1%	95.1%	95.1%	95.1%	95.1%	95.1%		
The proportion of people that wait 18 weeks or less from referral to their first IAPT treatment appointment against the number of people who enter treatment in the reporting period.	CCG	Actual	100.0%	100.0%	100.0%	100.0%	97.1%	100.0%	100.0%	100.0%	98.0%	100.0%	100.0%		99.0%	98.9%	99.1%		↓
		Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%		
The proportion of people that wait 6 weeks or less from referral to entering a course of IAPT treatment against the number of people who finish a course of treatment in the reporting period.	CCG	Actual	100.0%	95.8%	100.0%	96.6%	100.0%	100.0%	95.8%	96.3%	95.2%	100.0%	100.0%		96.6%	97.1%	98.2%		↓
		Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%		
The proportion of people that wait 6 weeks or less from referral to their first IAPT treatment appointment against the number of people who enter treatment in the reporting period.	CCG	Actual	94.4%	97.6%	96.7%	97.1%	97.1%	94.6%	93.9%	100.0%	96.0%	92.3%	92.3%		95.2%	96.7%	95.3%		↑
		Target	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%		
Number of ended referrals in the reporting period that received a course of treatment against the number of ended referrals in the reporting period that received a single treatment appointment enter treatment in the reporting period.	CCG	Actual	78.5%	75.0%	65.0%	37.9%	57.1%	48.2%	54.2%	55.6%	61.9%	50.0%	53.8%		52.1%	55.7%	53.9%		↑
		Target	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%		
% of those patients on Care Programme Approach (CPA) discharged from inpatient care who are followed up within 7 days	n/a	Actual	100.0%			100.0%			100.0%			97.1%			100.0%	97.1%	99.0%		↓
		Target	95.0%			95.0%			95.0%			95.0%			95.0%	95.0%	95.0%		
HCAI and Quality																			
Hospital Infections																			
Incidence of healthcare associated infection (HCAI): Clostridium difficile (C.difficile)	CCG ATTRIBUTED	Actual	1	3	3	1	0	3	3	2	4	3	3	3	6	9	21		–
		Target	3	2	6	5	4	5	1	5	5	2	3	5	10	11	44		
Healthcare acquired infections (HCAI): MRSA	STH TRUST APPORTIONED	Actual	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1		–
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Healthcare associated infection (HCAI): Clostridium difficile (C.difficile)	STH TRUST APPORTIONED	Actual	1	3	1	5	3	3	4	7	3	4	7	0	10	14	31		↓
		Target	3	1	5	5	5	4	4	4	5	4	4	5	13	13	54		
Healthcare acquired infection (HCAI) measure (E.Coli)	CCG ATTRIBUTED	Actual	7	2	9	12	15	14	10	12	8	13	10	7	39	33	89		↓
		Target	31	32	28	35	33	35	33	34	37	41	44	35	101	112	418		
Smoking at time of Delivery																			
Maternal smoking at delivery.	CCG	Actual	8.0%			9.6%			7.6%			6.1%			7.6%	6.1%	7.6%		↓
		Target	14.1%			7.0%			14.1%			14.1%			14.1%	14.1%	14.1%		