

Trust Commentary

Activity in May 2014 has largely under performed against plan for Elective pathways but over performed in Non-Elective Points of Delivery (PODs). Performance reporting has been split into the two contract forms, as agreed for the 2014/15 Contract Year. The 'PBR Managed Contract' (consisting of the four local East Kent CCGs) is 2.7% down against plan for all 'pbr' activity and the 'Other Pbr Contract' (a combination of Specialised Commissioning, Public Health and the remaining out of area CCGs) is also under-performing by 4.5%.

Referrals, at a Corporate level, appear close to plan for the four EK CCGs. This does however hide significant variances at specialty level with Orthopaedic primary care referrals over performing by ~20%. This is particularly evident in SKC CCG, and is believed to be linked to the perceived decommissioning of the ICATs service in Primary Care. Continuation of these referral levels will lead to increases in the Referral to Treatment (RTT) backlog and potential failure of the RTT standard.

A&E activity is over performing the East Kent Contract by +3% with particular peaks at WHH (+6.72% on last year) and KCH (+7.04% on last year). SKC CCG is driving this increase with a +14.7% increase in attendances compared to the same period year. Continued high levels of A&E attendances will result in an inability to achieve the 4 hour standard and maintain the current bed pressures across the Hospital sites. Work is underway with local commissioners to understand the increases and jointly reduce A&F attendances.

Key National Targets

| Monitor | MTD | QTD | YTD |
|--|-----|-----|-----|
| Domain: Patient Safety | 5 | 5 | 5 |
| Metric Name: Cases of CDiff (Cumulative) | 1 | 1 | 1 |
| Metric Name: A&F Time In A&F (%) | 5 | 5 | 5 |
| Metric Name: Cancer: 2NWW (All) | 5 | 1 | 1 |
| Metric Name: Cancer: 2NWW (Breast) | 5 | 5 | 5 |
| Metric Name: Cancer: 3D (Diag - Treat) | 5 | 5 | 5 |
| Metric Name: Cancer: 3D (2nd Treat - Surg) | 5 | 5 | 5 |
| Metric Name: Cancer: 3D (Drug) | 1 | 5 | 5 |
| Metric Name: Cancer: 6D (GP Ref) | 5 | 1 | 1 |
| Metric Name: Cancer: 6D (Screening Ref) | 5 | 5 | 5 |
| Metric Name: RTT-Admitted (%) | 5 | 5 | 5 |
| Metric Name: RTT-Incompltes (%) | 5 | 5 | 5 |
| Metric Name: DMOT: Diagnostic Waits | 5 | 1 | 1 |

Internally Monitored Indicators

| Domain | Metric Name | Quality | MTD | QTD | YTD |
|-----------------------|--|---------|-----|-----|-----|
| Patient Safety | Metric Name: HSMR | Quality | 5 | 5 | 5 |
| | Metric Name: Crude Mortality EL (per 1,000) | Quality | 5 | 5 | 5 |
| | Metric Name: Crude Mortality NEL (per 1,000) | Quality | 5 | 4 | 4 |
| | Metric Name: Readmissions: EL dis. 30d (L2M%) | Quality | 5 | 5 | 5 |
| Effectiveness | Metric Name: Readmissions: NEL dis. 30d (L2M%) | Quality | 5 | 5 | 5 |
| | Metric Name: Activity (% Variance to Plan) | Quality | 5 | 5 | 5 |
| Domain | Metric Name: Referrals - Primary Care | Quality | 1 | 1 | 1 |
| | Metric Name: Referrals - Total | Quality | 1 | 1 | 1 |
| | Metric Name: A&E Attendances | Quality | 1 | 5 | 5 |
| | Metric Name: Outpatient Appointments | Quality | 1 | 1 | 1 |
| | Metric Name: Elective Admissions | Quality | 1 | 2 | 2 |
| | Metric Name: Non-Elective Admissions | Quality | 5 | 5 | 5 |
| | Metric Name: DNA Rate: New | Quality | 5 | 5 | 5 |
| Access & Productivity | Metric Name: DNA Rate: Follow-Up | Quality | 5 | 5 | 5 |
| | Metric Name: Efficiency | Quality | 5 | 5 | 5 |
| Domain | Metric Name: Clinical Time Worked (%) | Quality | 3 | 3 | 3 |
| | Metric Name: Unplanned Agency Expense | Quality | 1 | 1 | 1 |
| | Metric Name: Appraisal Quality | Quality | 5 | 5 | 5 |
| | Metric Name: Training Plans (Quarterly) | Quality | 5 | 5 | 5 |
| | Metric Name: Sickness (%) | Quality | 3 | 3 | 3 |
| Access & Productivity | Metric Name: BADS | Quality | 5 | 5 | 5 |
| | Metric Name: Theatres: Session Utilization (%) | Quality | 4 | 5 | 5 |
| | Metric Name: Non-Clinical Cancellations (%) | Quality | 5 | 5 | 5 |
| Access & Productivity | Metric Name: Non-Clinical Canc. Breaches (%) | Quality | 5 | 5 | 5 |

| Overview of Trust Financial Performance | | | | |
|---|---------------|-------------------|---------------------|--|
| Trust Key Performance Indicators (£m) | Annual target | Year to Date Plan | Year to Date Actual | Monitor Continuity of Service Risk Rating |
| Total operating income | 532.5 | 86.6 | 86.3 | Continuity of Service Risk Rating The financial statements and summaries in this report are prepared for internal performance monitoring purposes and have not been audited. The Trust accepts no liability for any decisions made by persons external to the Trust based on this information. |
| CIP savings | 26.8 | 3.2 | 2.2 | |
| EBITDA | 30.1 | 5.6 | 3.8 | |
| I&E net surplus | (0.9) | 1.1 | (0.6) | |
| Cash balance | 27.4 | 34.0 | 43.1 | |

Note: Detailed financial tables are on page 3

Statement of Comprehensive Income (Income and Expenditure)

Trust income in May was marginally below plan. The Income and Expenditure deficit for month 2 is £0.6m, this is £1.6m below the plan.

- The subsidiary company (Healthix Limited which runs the Spencer Wing at QEOMH) is reporting a marginal surplus in May, which is above plan.

Improvement Programme

The Trust has achieved £3.2m of efficiency savings up to the end of May which is £1m below plan (see page 4).

Statement of Financial Position (Balance Sheet)

The Trust Statement of Financial Position and Cash summary are set out on page 3.

- The Trust has £22.7m of net current assets at the end of May, and total net assets of £317.9m. The closing cash balance of £43.1m is £9.1m favourable to plan, mainly due to the settling of outstanding debt by the Specialised Commissioning Group (SCG).

Capital Expenditure Programme

The table on page 3 summarises £3.3m of expenditure on capital projects in the year so far.

Financial Performance Indicators

The Trust is achieving the highest rating of 4 under Monitor's Continuity of Service Risk Rating.

Identified Financial Risks

- The principal risk to achievement of the 2014/15 annual financial plan is considered to be the following:
- Full achievement of the £26.8m CIP plan will be a critical factor in achieving the Trust financial plan.

How financial risks are being addressed

- The following actions are in place:
- Savings plans that cross divisional boundaries have been adjusted to reflect operational challenges due to high demand for Trust services. With support from Corporate functions, focus remains on Divisions implementing agreed actions to improve delivery of CIP schemes.