

# NHS Provider sector finance update

**Elizabeth O'Mahony**  
Director of Finance

**NHS Provider Directors of Finance meeting**  
**20 September 2016**



## What we will cover in this session

- Quarter 1 Financial Performance
- The 'Reset'
- Finance Special Measures
- Capital

### Iain Wallen to cover

- Month 4 Operational Performance

## Quarter 1 - Financial performance

# Quarter 1 Finance Performance (1)

NHS providers are embracing the challenge to improve their finances, with the number of trusts in deficit falling by 20%

## Financial performance



**£461m**

The reported deficit of NHS providers at Q1 2016/17



**£5m**

Better than the sector's planned deficit and in marked contrast to recent years

## A&E performance

The NHS continues to face unprecedented pressure. This seriously affects trusts' ability to meet waiting times, particularly in A&E departments.



**5.34m**

Attendances at England's A&E departments



**6.3%**

Higher than the same quarter last year

## Spending on agency staff

Our agency spend caps are having a positive impact. Spend on agency staff fell by £100m at Q1 2016/17, compared with the same period last year.



**£2.5bn**

This year's forecast spend on agency staff



**£500m**

The reduction in the amount trusts spent on agency staff since we launched our controls in October 2015



**6.1%**

The percentage of the total NHS pay bill spent on agency staff (so far in 2016/17)

# Quarter 1 Finance Performance (2)

## Non Pay



### £89m overspent

The reported a adverse variance on non-pay items at Q1 (0.04%)

60% of the overspend was related to drugs and clinical supplies

PFI operating expenses and premises costs continue to off-set other non-pay cost

## Cost Improvement Plans



### £45m below plan

Providers delivered £497 million of CIPs at Q1 and reduced total year-to-date expenditure by 2.4%

CIPs achieved were £45 million (or 8.3%) less than plan

The shortfall on pay CIPs accounts of 80% (or £37 million) of the shortfall at Q1

## Contract Sanctions



### £24m sanctions applied in Q1

Providers struggled to cope with rising demand and capacity constraints and many did not meet national standards but a reduced level of fines since the introduction of the STF

Sanctions for the year forecast at £82 million, £226 million less than the previous year

## Outsourcing & WLIs



### £77m and £38m

Outsourcing of clinical work to other providers is likely to reach £316 million at the year end, £120 million more than 2015/16

Spending on waiting list initiatives is forecast to fall from £143 million in 2015/16 to £124 million in 2016/17

## Control Totals



222 out of 238 providers signed up to CT. Live discussions with 3 of the residual 16 but NHSI no longer has full autonomy

# Quarter 1 YTD Performance (excluding STF)

At Quarter 1 there are:

- 160 providers doing better than plan totalling £69.7 million
- 39 providers on plan

Provider doing >£2 million better than plan at Q1	Control Total Basis Surplus / (Deficit) (Excluding STF)		
	Q1 YTD		
	YTD Plan Excl. STF	YTD Excl. STF	YTD Variance
Cambridge University Hospitals NHS Foundation Trust	(24,221)	(22,214)	2,007
North East London NHS Foundation Trust	(425)	1,666	2,091
Surrey and Sussex Healthcare NHS Trust	(4,842)	(2,515)	2,327
South Essex Partnership University NHS Foundation Trust	(291)	2,277	2,568
Royal Surrey County Hospital NHS Foundation Trust	(5,329)	(2,523)	2,806
Royal Cornwall Hospitals NHS Trust	(8,049)	(5,092)	2,957
Salford Royal NHS Foundation Trust	(7,175)	(4,125)	3,050
University Hospital Southampton NHS Foundation Trust	(7,943)	(3,808)	4,135

Provider >£2m worse than plan at Q1	Control Total Basis Surplus / (Deficit) (Excluding STF)		
	Q1 YTD		
	YTD Plan Excl. STF	YTD Excl. STF	YTD Variance
Barts Health NHS Trust <span style="color: blue;">(Finance Special Measures)</span>	(32,343)	(47,004)	-£14,661
Staffordshire and Stoke on Trent Partnership NHS Trust	(2,565)	(7,721)	-£5,156
The Newcastle Upon Tyne Hospitals NHS Foundation Trust	7,465	2,685	-£4,780
King's College Hospital NHS Foundation Trust	(28,080)	(32,265)	-£4,185
North Bristol NHS Trust <span style="color: blue;">(Finance Special Measures)</span>	(14,836)	(18,136)	-£3,300
Southport and Ormskirk Hospital NHS Trust	(3,623)	(6,268)	-£2,645
East of England Ambulance Service NHS Trust	27	(2,567)	-£2,594
St George's University Hospitals NHS Foundation Trust	(18,782)	(20,992)	-£2,210

BUT:

- There are 39 providers that have failed to deliver their Quarter 1 plan
- Their cumulative Quarter 1 deficit is £64.2 million

# Financial performance overview

3 months ended 30 June 2016 by Sector	Number of providers	Year to Date - Month 3 2016/17				Forecast Outturn - 2016/17			
		Plan	Actual	Variance	Deficit providers	Plan	Forecast	Variance	Deficit providers
		No.	£m	£m	£m	No.	£m	£m	No.
Acute	137	(547)	(568)	(21)	103	(1,005)	(1,078)	(73)	80
Ambulance	10	(7)	(10)	(3)	6	(12)	(31)	(19)	6
Community	18	(1)	(6)	(5)	9	25	23	(2)	4
Mental Health	56	(5)	2	7	26	51	45	(6)	18
Specialist	17	(15)	(11)	4	9	11	11	-	7
<b>Total Surplus / (deficit) - control total <sup>1</sup></b>	<b>238</b>	<b>(575)</b>	<b>(593)</b>	<b>(18)</b>	<b>153</b>	<b>(930)</b>	<b>(1,030)</b>	<b>(100)</b>	<b>115</b>
Technical Adjustments - FT and py NHS trusts <sup>2</sup>		21	22	1		77	88	11	
<b>Reported Financial surplus / (deficit)</b>		<b>(554)</b>	<b>(571)</b>	<b>(17)</b>		<b>(853)</b>	<b>(942)</b>	<b>(89)</b>	
STF		88	110	12		273	298	25	
<b>Reported Financial surplus / (deficit) after STF</b>		<b>(466)</b>	<b>(461)</b>	<b>5</b>		<b>(580)</b>	<b>(644)</b>	<b>(64)</b>	

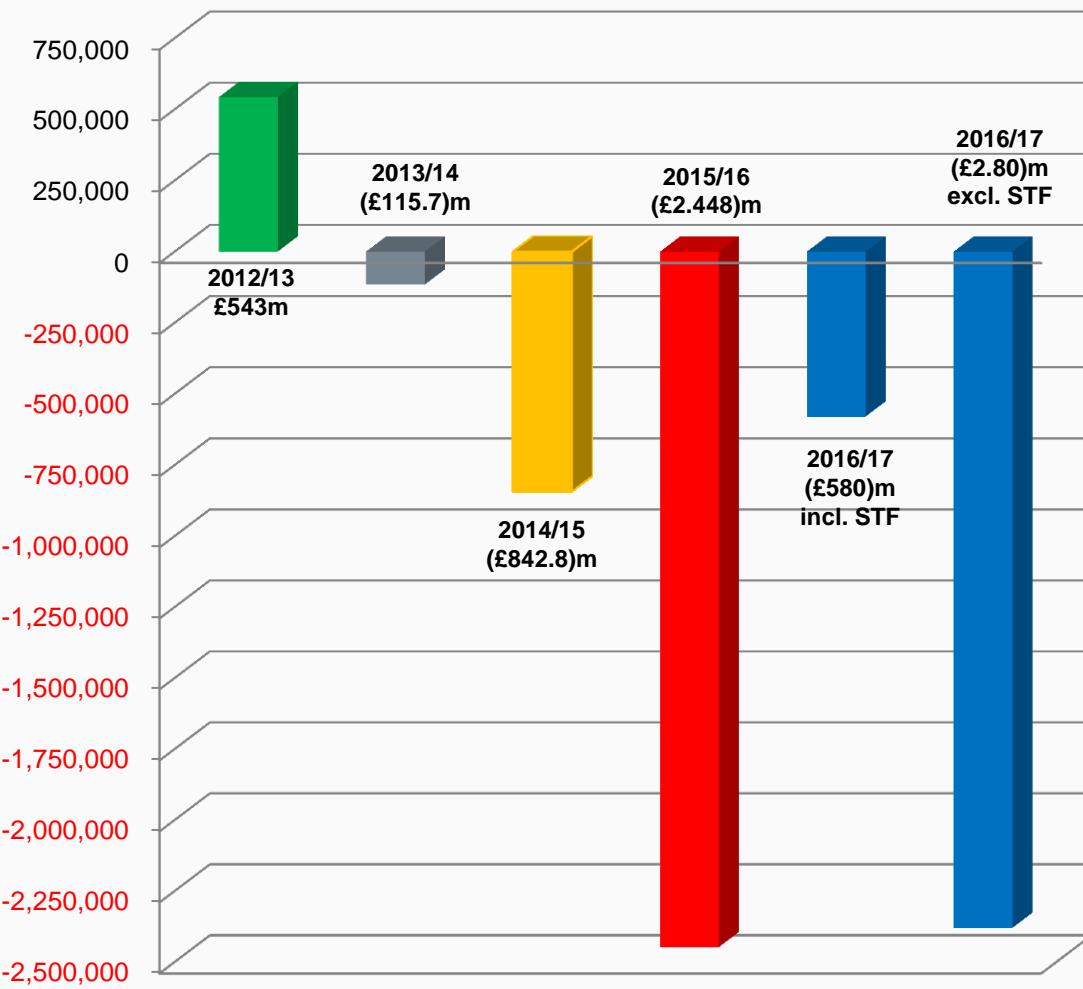
The provider sector reported a year-to-date deficit of £461 million at Q1 2016/17, £5 million ahead of plan.

The number of providers reporting a year-to-date deficit also reduced from 190 at Q1 last year to 153 this quarter, which was four fewer than planned.

3 months ended 30 June 2016 by Region	Number of Providers	Year to Date - Month 3 2016/17				Forecast Outturn - 2016/17			
		Plan	Actual	Variance	Deficit providers	Plan	Forecast	Variance	Deficit providers
		No.	£m	£m	£m	No.	£m	£m	No.
London	36	(156)	(194)	(38)	23	(275)	(274)	1	18
Midlands and East	73	(219)	(204)	15	50	(537)	(577)	(40)	38
North	74	(92)	(93)	(1)	45	(61)	(87)	(26)	33
South	55	(108)	(102)	6	35	(57)	(92)	(35)	26
<b>Total Surplus / (deficit) - control total <sup>1</sup></b>	<b>238</b>	<b>(575)</b>	<b>(593)</b>	<b>(18)</b>	<b>153</b>	<b>(930)</b>	<b>(1,030)</b>	<b>(100)</b>	<b>115</b>
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At Q1 2016/17, the reported provider-level deficit (control total basis) included £340 million of STF expected by these trusts. A further £110 million STF was not allocated at Q1 but reflected in sector's overall position. The un-allocated STF is forecast to rise to £298m by the year end. NHSI is preparing a proposal for HMT to use this residual funding as an incentive fund for those that can do better than CT

## NHS Provider Surplus / Deficit for the 5 year period to 2016/17



### What's different this year:

- 2% Efficiency
- £1.8bn STF to provider bottom lines
- Fines /Sanctions
- Performance Trajectories & in year appeals process
- Agency controls making an impact
- Provider grip

But none of this is easy and the plan profile is back-loaded!

16/17 delivery impacts on 17/18 and beyond

Early view on Month 5.....

# NHS England Financial Performance

Year-to-date and full year forecast for NHS England at Quarter 1

Net Expenditure	Year to Date				Forecast Outturn			
	Plan £m	Actual £m	Under/(over) spend		Plan £m	FOT £m	Under/(over) spend	
			£m	%			£m	%
CCGs	18,857.5	18,914.9	(57.4)	0.0%	76,131.3	76,141.8	(10.5)	0.0%
Direct Commissioning	6,234.2	6,234.5	(0.3)	0.0%	25,737.0	25,737.0	-	-
Running, programme costs and other	309.6	274.2	35.4	11.4%	3,947.9	3,891.1	56.8	1.4%
<b>Total before Technical Adjustments</b>	<b>25,401.3</b>	<b>25,423.6</b>	<b>(22.3)</b>	<b>(0.1%)</b>	<b>105,816.2</b>	<b>105,769.9</b>	<b>46.3</b>	<b>0.0%</b>
Technical and Ringfenced adjustments					(166.0)	(37.2)	(128.8)	
<b>Total non-ringfenced RDEL under/(over) spend</b>	<b>25,401.3</b>	<b>25,423.6</b>	<b>(22.3)</b>	<b>(0.1%)</b>	<b>105,650.2</b>	<b>105,732.7</b>	<b>(82.5)</b>	<b>(0.1%)</b>

## Regional analysis

2016/17 - Month 3 (June 2016) Net Expenditure	Year to Date Net Expenditure				Forecast Net Expenditure			
	Plan £m	Actual £m	Var £m	Var %	Plan £m	Forecast £m	Var £m	Var %
<b>Local</b>								
North	5,803.3	5,809.7	(6.4)	(0.1%)	23,428.8	23,428.8	0.0	0.0 %
Midlands & East	5,489.6	5,531.3	(41.7)	(0.8%)	22,183.1	22,188.0	(4.9)	0.0 %
London	2,906.3	2,912.8	(6.5)	(0.2%)	11,769.8	11,775.5	(5.7)	0.0 %
South	4,658.3	4,661.1	(2.8)	(0.1%)	18,659.6	18,659.5	0.1	0.0 %
Quality Premium	0.0	0.0	0.0	0.0 %	90.0	90.0	0.0	0.0 %
<b>Total Local</b>	<b>18,857.5</b>	<b>18,914.9</b>	<b>(57.4)</b>	<b>(0.3%)</b>	<b>76,131.3</b>	<b>76,141.8</b>	<b>(10.5)</b>	<b>0.0 %</b>

The regional analysis above excludes direct commissioning

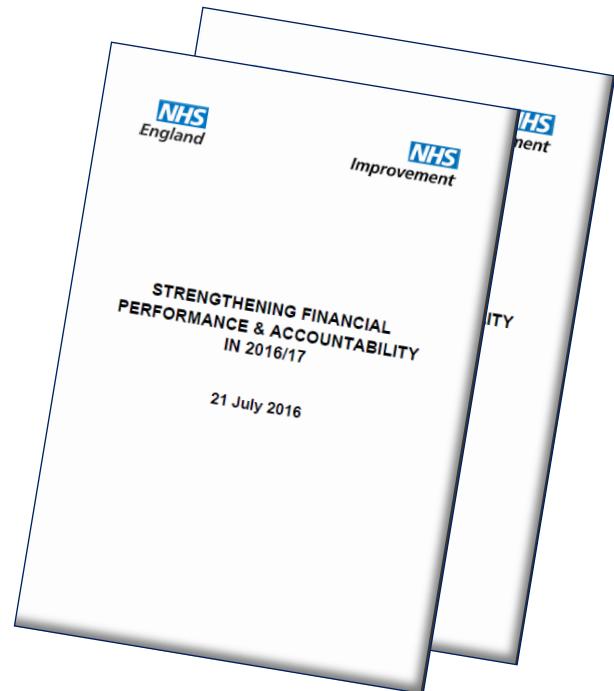
The direct commissioning position is on plan with a £3.5m ytd deficit in specialist commissioning being offset by underspends in public health and dentistry

## Financial reset

# The Finance 'Reset' (1)

- Finance reset published on 21 July 2016 sets out a series of actions to support the NHS achieve financial sustainability, improve operational performance and restore financial discipline
- Summarises recent announcements and measures and packages them into a single document
- Restates the criteria to access the £1.8bn Sustainability Fund dependent on providers meeting control totals and spending limits as well as their individually agreed performance trajectories in accident and emergency, RTT and cancer. Plus further Q&A.
- National fines replaced with provider-specific incentives linked to agreed organisation-specific published performance improvement trajectories
- New controls to fast track savings from procurement, pathology and temporary staffing from providers

Strengthening financial performance and accountability in 2016/17 | NHS Improvement

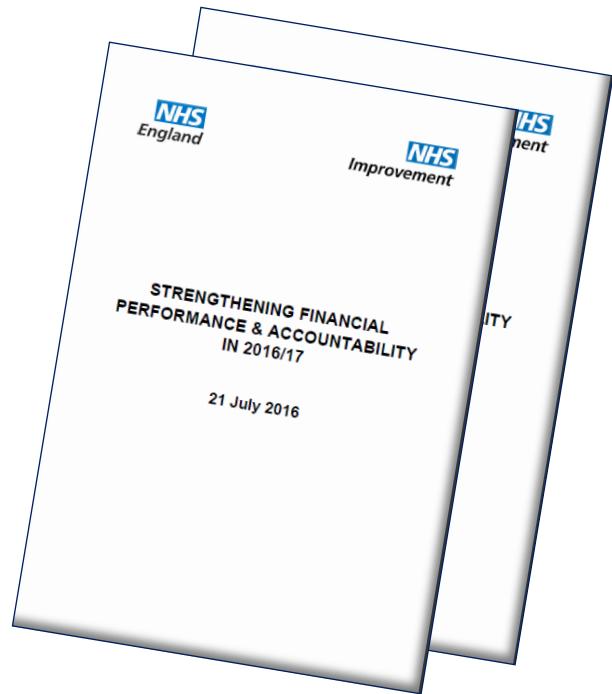


## The Finance 'Reset' (2)

However, there are several other items in the reset document that had not been shared with the wider sector at the date of publication:

- Signalled the need for the provider sector **to go further than the current plan for a deficit of £580m**
- Changes to the planning process **signalled with a two-year NHS planning and contracting round** for 2017/18 to 2018/19 starting from September 16.
- Expenditure control totals for all CCGs including off-payroll staff controls
- Analysis of **63 providers' pay bill growth** (line of enquiry)
- Ranking of all CCGs on the Improvement and Assessment Framework
- Agreed operational performance trajectories for all NHS providers that had signed up to a control total
- **Financial Special Measures introduced for providers** and CCGs not meeting commitments

**Strengthening financial performance and accountability in 2016/17 | NHS Improvement**



## Financial Special Measures

- Introduced new intervention regimes of special measures which will be applied to both trusts and CCGs who are not meeting their financial commitments
- A provider will be considered for Financial Special Measures if any of the following three criteria applies:
  1. The provider has not agreed a control total and is forecasting a deficit for 2016/17
  2. The provider has agreed a control total but has a significant negative variance against the control total plan, has a significant deficit
  3. The provider has an exceptional financial governance failure (e.g. significant fraud or irregularity)

## Where financial special measures is triggered

- NHS Improvement will arrange a rapid but intensive on-site process to identify the key issues and agree a recovery plan
- This team, led by an improvement director, supported by NHS Improvement and drawing on peer support, will examine finance, clinical and workforce expertise, as well as leadership, governance and capability
- A rapid recovery plan will be agreed within a month and, in most cases, a detailed plan within two months. It will also involve examining the wider strategic direction providers have planned as part of their STP

# FSM update

1 <sup>st</sup> Tranche of FSM Providers	Executive Lead	Initial meeting with provider Chair, CEO and FD	1 <sup>st</sup> Milestone	Financial Improvement Directors
Barts Health NHS Trust	Jim Mackey	18 August 2016	30 September 2016	In place
Croydon Health Services NHS Trust	Stephen Hay	20 July 2016	6 September 2016	In place
Norfolk and Norwich NHS Foundation Trust	Stephen Hay	29 July 2016	14 September 2016	In place
Maidstone and Tunbridge Wells NHS Trust	Bob Alexander	11 August 2016	19 September 2016	In place
North Bristol NHS Trust	Bob Alexander	8 August 2016	4 October 2016	In place

- Five challenged providers placed in FSM following Finance reset on 21 July 2016
- Each provider in FSM has been given one month to develop a credible and robust plan to deliver a rapid financial recovery plan. The clock starts on the one month process after the initial kick off meeting
- Finance Improvement Directors are in place for all providers in FSM. Their role is crucial to oversee the development of the recovery plan and advise on key issues, including the capacity and capability of the management team and Board
- Monthly process to review financial results on a two month rolling basis. NHSI are currently reviewing Month 4 financial returns and 'near misses' and are investigating a shortlist of potential providers who may enter into FSM

## Capital update

# Capital - Overview

Comprehensive Spending Review (CDEL)	2016/17 £bn	2017/18 £bn	2018/19 £bn	2019/20 £bn	2020/21 £bn
Gross NHS Capital Budget	4.810	4.810	4.810	4.810	4.810
NHS Total Capital Budget	3.610	3.810	4.310	4.560	4.810
Provider Sector Capital Budget	2.729	2.729			

- Delivery in last three financial years has been between £3bn and £3.3bn after local capital to revenue transfers in 2015/16 of £325m
- Provider plan figures for 2016/17 forecast spend of £4.3bn.
  - Although Quarter 1 spend is significantly less than plan, and
  - A large number of providers do not have the cash to fund the schemes
  - High quality provider capital forecasting is essential as this information is being used to inform future policy direction. Please can you review your forecast urgently for Month 6
- Historical level of underspends significant
- Considerable pressure on capital budget in short to medium term, increasing in 2017/18

# Capital - Challenges

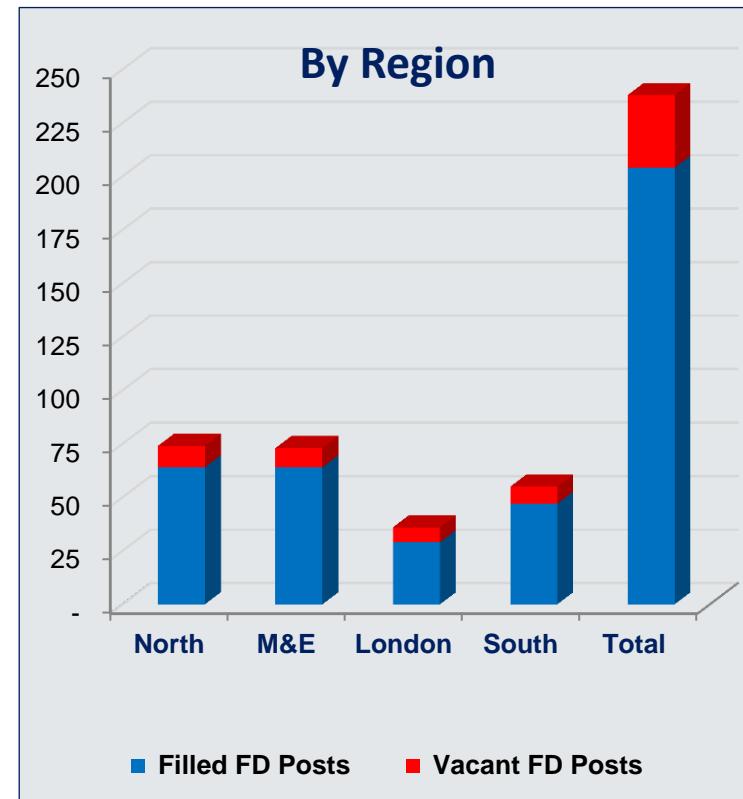
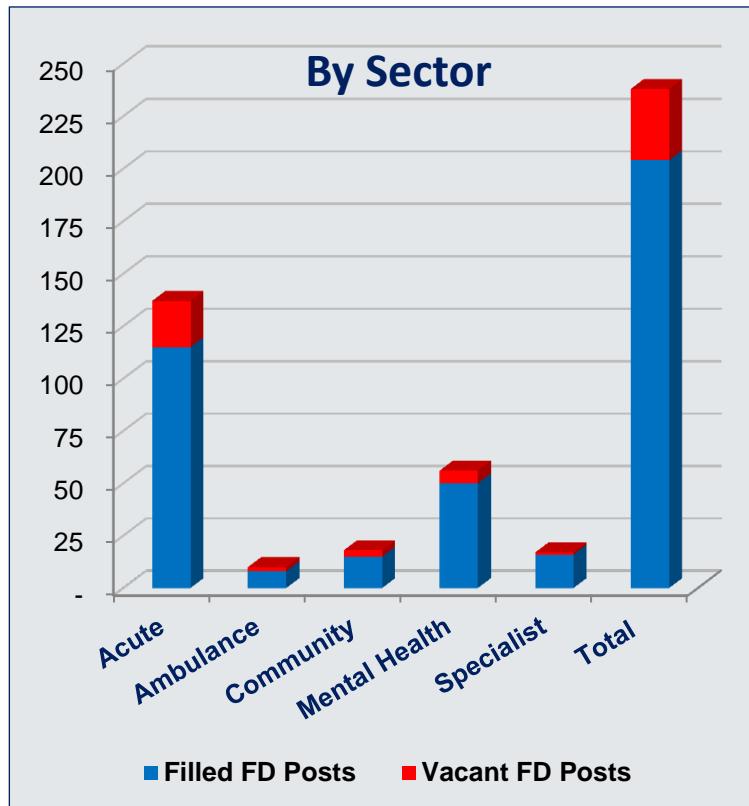
- Affordability
- Disposals of £329m assumed by DH, if this value can be increased then can be recycled into the sector as additional CDEL
- Grants, Donations and IFRIC12 spend is also excluded from the gross CDEL position
- Pressure increasing for capital controls with HMT direction possible because of the current forecast - **FDs to review assumptions urgently**
- Potential for investment decisions to require NHSI/DH/ HMT approval over de-minimus values
- Impact of capital constraint is a growing concern
- Challenge in delivering transformation plans evident and under discussion with DH/HMT

## Finance Director Recruitment

# Finance Director Recruitment

NHS

Improvement



By Sector	Filled FD Posts	Vacant FD Posts	% Vacancies
Acute	115	22	16%
Ambulance	8	2	20%
Community	15	3	17%
Mental Health	50	6	11%
Specialist	16	1	6%
Total	204	34	14%

By Region	Filled FD Posts	Vacant FD Posts	% Vacancies
North	64	10	14%
M&E	64	9	12%
London	29	7	19%
South	47	8	15%
Total	204	34	14%

## Where are we....

- We know now of this is easy .....
- We're under pressure on the money and the performance standards. Signs of improvement but still a long way to go....
- It is not credible to say that we won't get any savings from the following areas in 2016/17. We need to be clear what can be delivered by provider and agree the scope and pace. In addition we need the savings built into plans for 2017/18 and 2018/19
  1. Planned cost growth in 2016/17 and actual growth in 2015/16
  2. Back office and pathology consolidation – Carter Implementation
  3. Unsustainable service consolidation
- There is still too much variation in quality and delivery
- We have to use a challengingly rapid STP process to plot a path to sustainability and new care models in all 44 footprints
- Trying to do all this simultaneously is a massive leadership challenge
- We will do absolutely everything we can to support you and give you the space to deliver. This will be easier if we can give confidence and the sector is on track at Quarter 2. **This will be a very important milestone for us all**
- We will be introducing a protocol for changes to forecasts so we can be confident that we have a consistent approach and that Boards have considered and told us about the remedial actions they will be taking to bring the forecast back on track

# Provider sector service performance to 31 July 2016

**Iain Wallen**  
Director of Information and Analytics

**NHS Provider Directors of Finance meeting**  
**20 September 2016**



# Summary of Performance against key waiting time standards

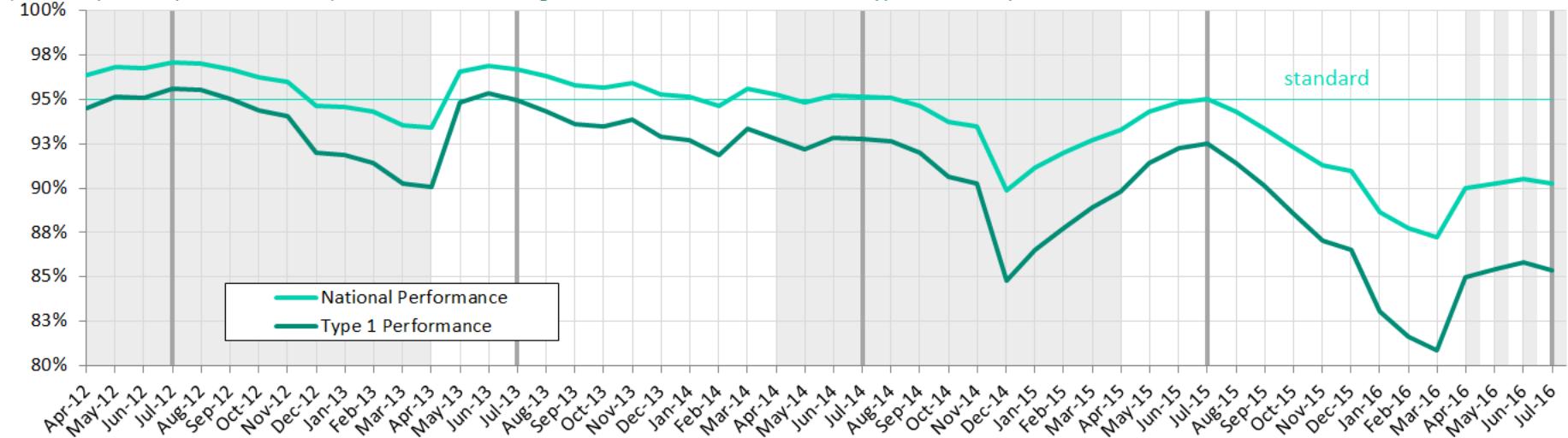
*Improvement*

Standard		Latest performance	Previous year	Year-to-date (YTD)	YTD (previous year)
A&E	Patients admitted, transferred or discharged within 4 hours of arrival in A&E (95%)	90.3%	95.0%	90.3%	94.4%
Ambulance *	Category A Red 1 calls responded to within 8 minutes (75%)	67.6%	74.3%	69.0%	75.2%
	Category A Red 2 calls responded to within 8 minutes (75%)	60.3%	70.1%	62.4%	71.7%
	Category A (Red 1&2) calls responded to within 19 minutes of a request for an ambulance vehicle to transport the patient (95%)	89.5%	93.5%	90.8%	94.5%
RTT	Patients with incomplete pathways waiting 18 weeks or less to start consultant-led treatment (92%)	91.3%	92.9%	N/A	N/A
	Patients with incomplete pathways waiting more than 52 weeks to start consultant-led treatment (zero tolerance)	1,076	786	N/A	N/A
Cancer	Two week wait from urgent GP referral to see a specialist where cancer is suspected (93%)	94.4%	93.9%	93.8%	93.8%
	31 day wait from diagnosis to first definitive treatment (96%)	97.8%	97.8%	97.6%	97.6%
	62 day wait from urgent GP referral to first definitive treatment (85%)	82.2%	81.9%	82.3%	81.9%
Diagnostics	Patients waiting more than 6 weeks from referral to diagnostic test (1%)	1.4%	1.8%	N/A	N/A

# A&E Attendances - National Performance

## Performance against A&E standard

(Standard) 95% of patients admitted, transferred or discharged within four hours of arrival in all types of A&E departments

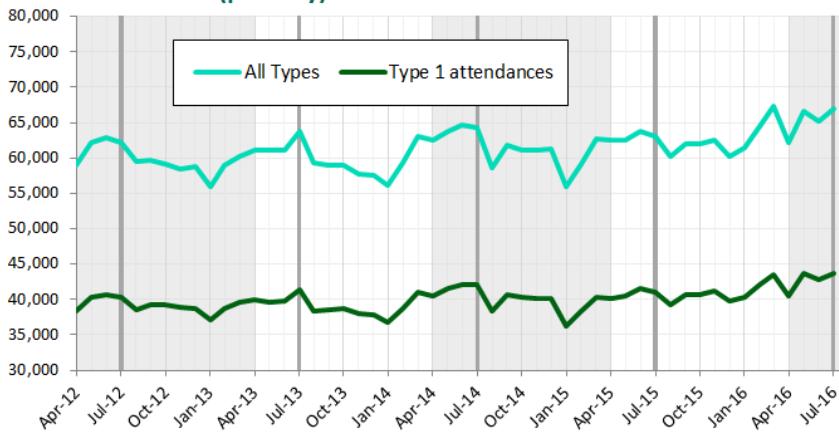


- A&E performance has been on a **downward trend** for the past five years with sharper declines seen in the last two years.
- The long-term trend is one of **increasing activity** for both attendances and emergency admissions.

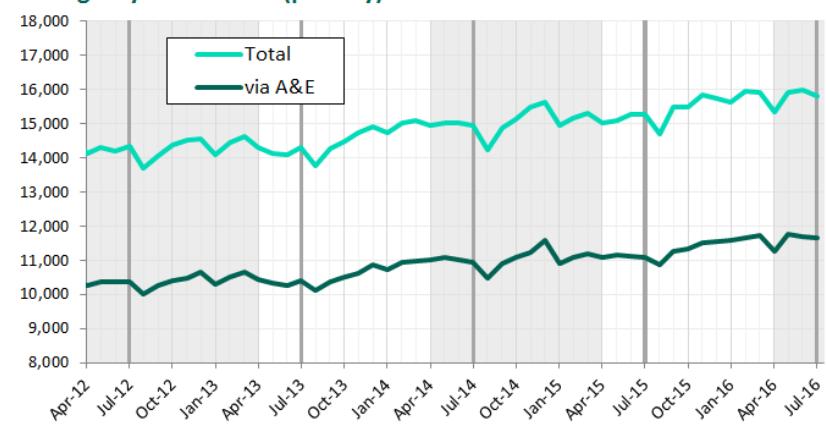
Performance	July-16	July-15	Change
Proportion of patients admitted, transferred or discharged within four hours of arrival in all types of A&E	90.3%	95.0%	-4.7ppt <span style="color: red;">▼</span>
Year-to-date (YTD) performance	90.3%	94.4%	-4.1ppt <span style="color: red;">▼</span>
Number of months since standard last met	12 (Jul-15)		
Number of months since standard missed in last 12 months	12		
Number of providers (with Type 1) missing the standard	122 of 139 (88%)		
Worst ever performance	87.3% (Mar-16)		

# A&E Attendances - National Activity

**A&E attendances (per day)**



**Emergency admissions (per day)**



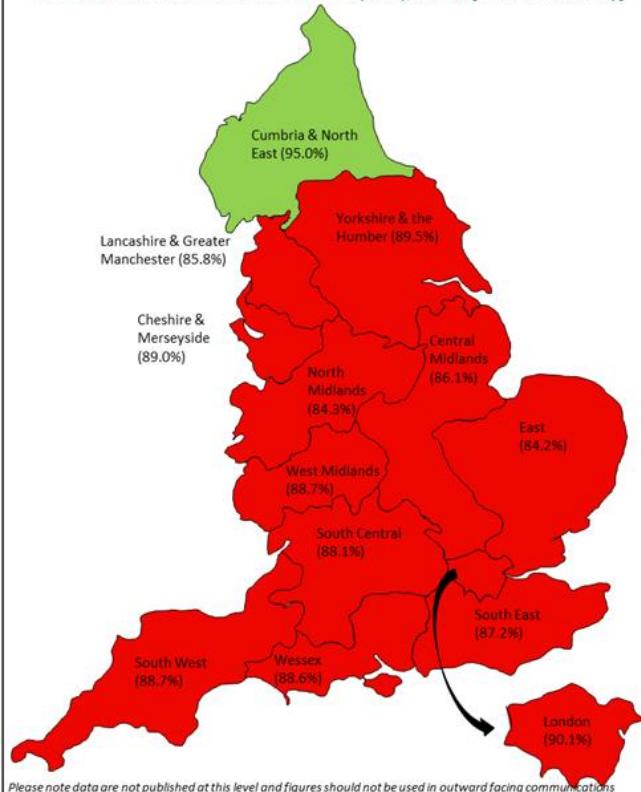
Demand and activity	Jul-16	Jul-15	Change	% change
Total attendances	2,075,939	1,952,895	123,044	6.3%
Total attendances >4 hours	201,988	97,475	104,513	107.2%
Numbers seen within 4 hours	1,873,951	1,855,420	18,531	1.0%
Total emergency admissions	490,221	473,914	16,307	3.4%
Emergency admissions via A&E	361,779	344,041	17,738	5.2%
Waits for admission from decision to admit (over 4 hours)	37,466	17,275	20,191	116.9%
Waits for admission from decision to admit (over 12 hours)	113	22	91	413.6%

# A&E Attendances – Sub-Regional performance (based on acute trusts only)

1

sub-region met the operational standard in Jul-16

A&E attendances seen within 4 hours (95%), Jul-16 [Acute trusts only]



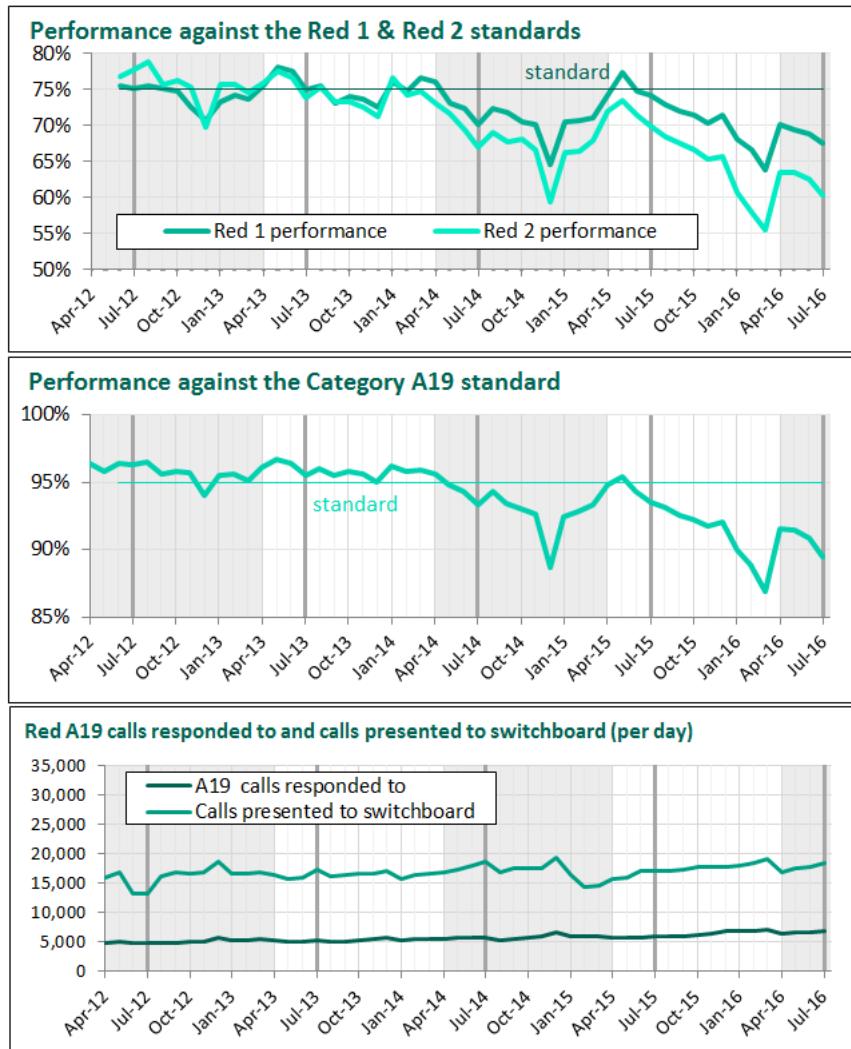
Region (North to South)	Performance			Attendances		Emergency admissions	Waits for admission from decision to admit	
	Latest	Previous month	Change	Total	...within 4 hours		4hr+	12hr+
CUMBRIA & NORTH EAST	95.0%	94.8%	▲	132,560	125,984	23,577	1,202	7
YORKSHIRE & THE HUMBER	89.5%	89.8%	▼	174,365	156,124	36,792	3,556	0
LANCASHIRE & GTR MANCHESTER	85.8%	88.4%	▼	150,835	129,461	30,452	5,268	70
CHESHIRE & MERSEYSIDE	89.0%	89.2%	▼	107,691	95,808	21,002	2,677	2
CENTRAL MIDLANDS	86.1%	87.8%	▼	111,750	96,251	24,463	2,096	0
NORTH MIDLANDS	84.3%	83.3%	▲	98,740	83,235	20,308	2,270	15
WEST MIDLANDS	88.7%	89.6%	▼	155,068	137,596	31,504	3,187	3
EAST	84.2%	83.6%	▲	112,244	94,481	26,644	2,535	0
LONDON	90.1%	88.9%	▲	345,575	311,434	58,556	4,917	11
SOUTH CENTRAL	88.1%	90.3%	▼	74,294	65,479	19,401	2,762	1
SOUTH EAST	87.2%	88.9%	▼	137,573	120,028	34,474	3,719	2
WESSEX	88.6%	88.7%	▼	58,898	52,187	14,241	1,865	0
SOUTH WEST	88.7%	89.6%	▼	82,260	72,977	20,299	1,396	2
ENGLAND (ACUTE ONLY)	88.5%	88.8%	▼	1,741,853	1,541,045	361,713	37,450	113
ENGLAND (ALL ORGS)	90.3%	90.5%	▼	2,075,939	1,873,951	490,221	37,466	113

# A&E Attendances - Acute provider level performance

	Provider	Performance			Total Attendances
		Latest	Previous month	Change	
Worst performers	NOTTINGHAM	72.2%	71.0%	1.1%	17,124
	THE PRINCESS ALEXANDRA HOSPITAL	72.8%	70.6%	2.2%	9,108
	PETERBOROUGH AND STAMFORD (FT)	74.9%	83.5%	-8.6%	9,653
	UNIVERSITY HOSPITALS OF LEICESTER	76.9%	80.6%	-3.7%	20,149
	MID ESSEX HOSPITAL SERVICES	77.2%	76.4%	0.8%	8,593
(Most improved)	NORTH MIDDLESEX UNIVERSITY HOSPITAL	89.1%	77.1%	12.0%	13,445
	UNIVERSITY HOSPITAL OF SOUTH MANCHESTER (FT)	86.8%	76.6%	10.2%	8,463
	CHESTERFIELD ROYAL HOSPITAL (FT)	87.9%	82.1%	5.8%	7,301
	YORK TEACHING HOSPITAL (FT)	92.6%	87.2%	5.5%	17,709
	HINCHINGBROOKE HEALTH CARE	81.0%	76.4%	4.7%	4,274
(Biggest decline)	SALFORD ROYAL (FT)	81.8%	94.0%	-12.2%	8,814
	EAST CHESHIRE	79.4%	88.1%	-8.6%	4,652
	PETERBOROUGH AND STAMFORD (FT)	74.9%	83.5%	-8.6%	9,653
	GEORGE ELIOT HOSPITAL	89.1%	95.0%	-5.9%	6,820
	UNIVERSITY HOSPITALS OF MORECAMBE BAY (FT)	86.2%	91.7%	-5.4%	10,133

# Ambulance Response times – National performance based on 8 Providers due to Ambulance Response Programme in operation

N.B. Due to SWAS, YAS and WMAS participating in the ARP clinical coding pilot, all data below excludes these three trusts.



Performance	Jul-16	Jul-15	Change	
Category A Red 1 call responded to within 8 minutes (75%)	67.6%	74.3%	-6.8ppt	
Category A Red 2 calls responded to within 8 minutes (75%)	60.3%	70.1%	-9.7ppt	
Category A (Red 1 & Red 2) calls responded to within 19 minutes of a request for an ambulance vehicle to transport the patient (95%)	89.5%	93.5%	-4.0ppt	
Number of months since any standard last met		14		
Number of months any standard missed in last 12 months		12		
Demand and activity	Jul-16	Jul-15	Change	
Monthly total	Category A Red 1 calls responded to	10,103	8,920	1,183
	Category A Red 2 calls responded to	203,068	171,997	31,071
	Cat A calls that resulted in an ambulance arriving at the scene	212,236	180,071	32,165
Per day	Category A Red 1 calls responded to per day	326	288	13.3%
	Category A Red 2 calls responded to per day	6,551	5,548	18.1%
	Cat A calls that resulted in an ambulance arriving at the scene	6,846	5,809	17.9%

# Ambulance Response Times – Ambulance Trust Performance

**N.B. Due to SWAS, YAS and WMAS participating in the ARP clinical coding pilot, all data below excludes these three trusts.**

**RED 1 PERFORMANCE, 75% (JUL-16)**



**RED 2 PERFORMANCE, 75% (JUL-16)**



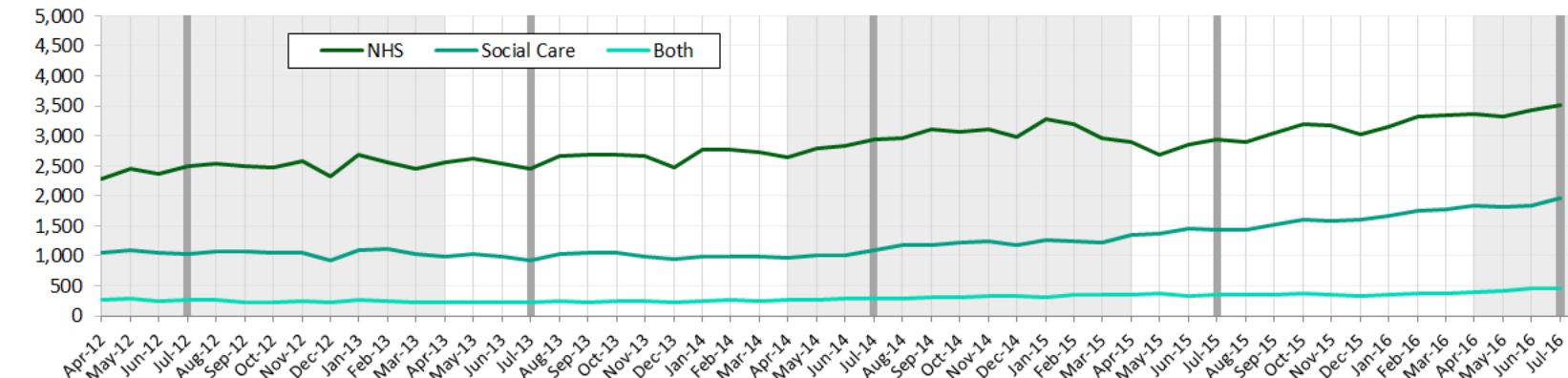
**CAT A PERFORMANCE, 95% (JUL-16)**



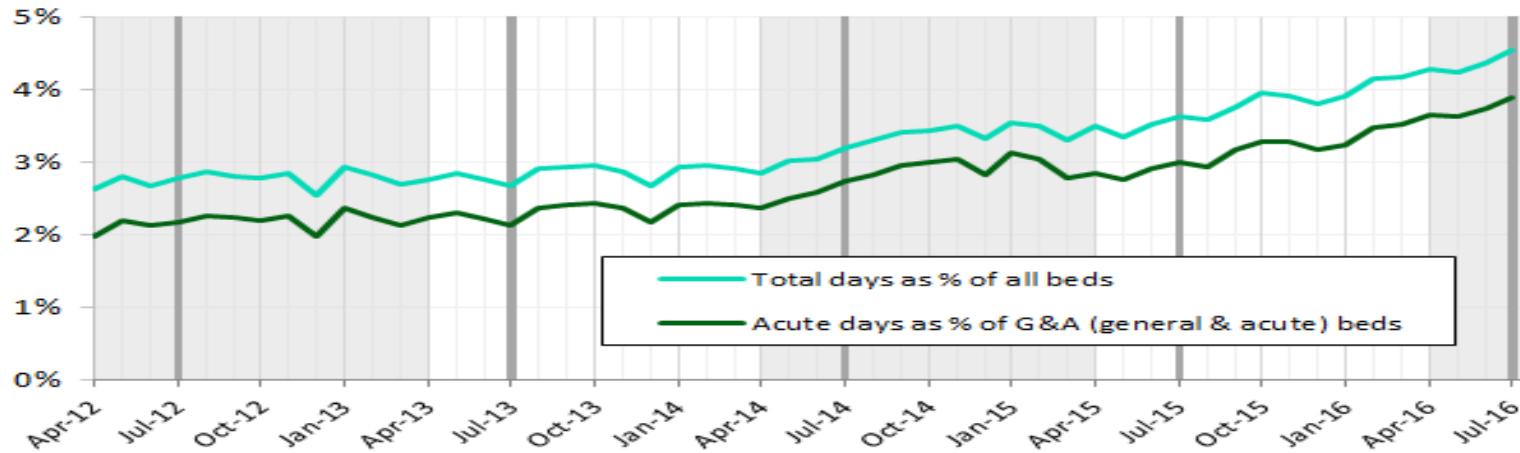
# Delayed Transfers of Care - Overview

## Number of delayed days (per day) by responsible organisation

No standard



## Number of delayed days as percentage of available beds



59.1% of all delayed days were attributed to the NHS (Jul-16) 29.0% of these were due to patients awaiting further non-acute NHS care

33.1% of all delayed days were attributed to Social Care (Jul-16) 36.1% of these were due to patients awaiting care package in their own home

# Delayed Transfers of Care – Provider and Local Authority

Worst performers (acute trusts)		
Provider	Total Delayed Days	Delayed days as % of consultant-led beds
WESTON AREA HEALTH	1,153	13.7%
NORTHERN DEVON HEALTHCARE	1,324	13.3%
NORTH CUMBRIA	2,377	12.8%
MOORFIELDS EYE HOSPITAL (FT)	31	12.0%
UNIVERSITY HOSPITAL OF SOUTH MANCHESTER (FT)	2,824	11.4%

Biggest changes (acute trusts)				
Provider	Change (▲ improvement, ▼ deterioration)	Total Delayed Days	Delayed days as % of consultant-led beds	
PAPWORTH HOSPITAL (FT)	▲ 0.0%	1	0.0%	
NORTHUMBRIA HEALTHCARE (FT)	▲ 0.0%	10	0.0%	
THE CHRISTIE (FT)	▲ 0.1%	8	0.1%	
ROYAL BROMPTON & HAREFIELD (FT)	▲ 0.2%	24	0.2%	
THE ROYAL MARSDEN (FT)	▲ 0.2%	14	0.3%	
WESTON AREA HEALTH	▼ 13.7%	1,153	13.7%	
NORTHERN DEVON HEALTHCARE	▼ 13.3%	1,324	13.3%	
NORTH CUMBRIA	▼ 12.8%	2,377	12.8%	
MOORFIELDS EYE HOSPITAL (FT)	▼ 12.0%	31	12.0%	
UNIVERSITY HOSPITAL OF SOUTH MANCHESTER (FT)	▼ 11.4%	2,824	11.4%	

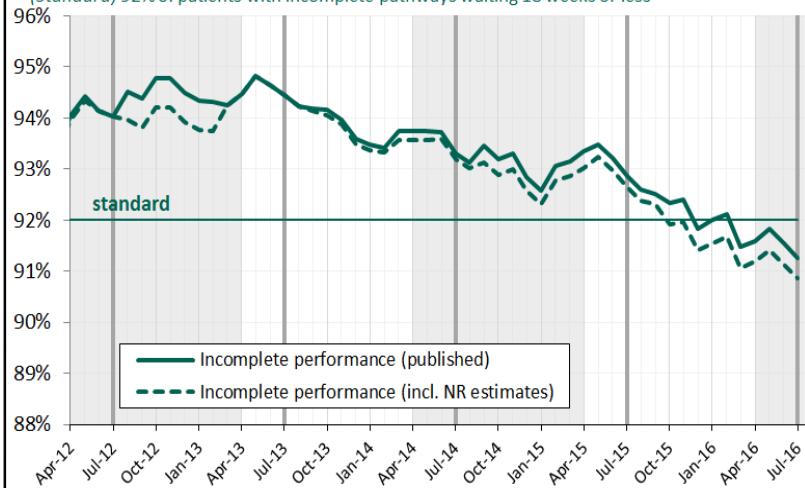
Worst performers (Local Authority, based on all providers)		
LA	Total Delayed Days attributable to social care	Delayed days (per day) per 10,000 population aged over 75
SOUTHAMPTON UA	1,116	25.5
TAMESIDE	872	19.2
MANCHESTER	1,148	18.0
READING UA	456	17.4
CUMBRIA	2,468	17.0

Biggest changes (Local Authority, based on all providers)				
LA	Change (▲ improvement, ▼ deterioration)	Total Delayed Days attributable to social care	Delayed days (per day) per 10,000 population aged over 75	
HAMMERSMITH & FULHAM	▲	-4.5	269	11.9
NOTTINGHAM UA	▲	-2.7	136	2.7
WALSALL	▲	-2.6	338	5.2
REDBRIDGE	▲	-2.5	50	1.0
WEST BERKSHIRE UA	▲	-2.4	253	7.5
SOUTHAMPTON UA	▼	8.8	1,116	25.5
READING UA	▼	7.5	456	17.4
TAMESIDE	▼	7.1	872	19.2
STOKE-ON-TRENT UA	▼	6.0	730	14.1
BLACKBURN WITH DARWEN UA	▼	5.9	269	10.6

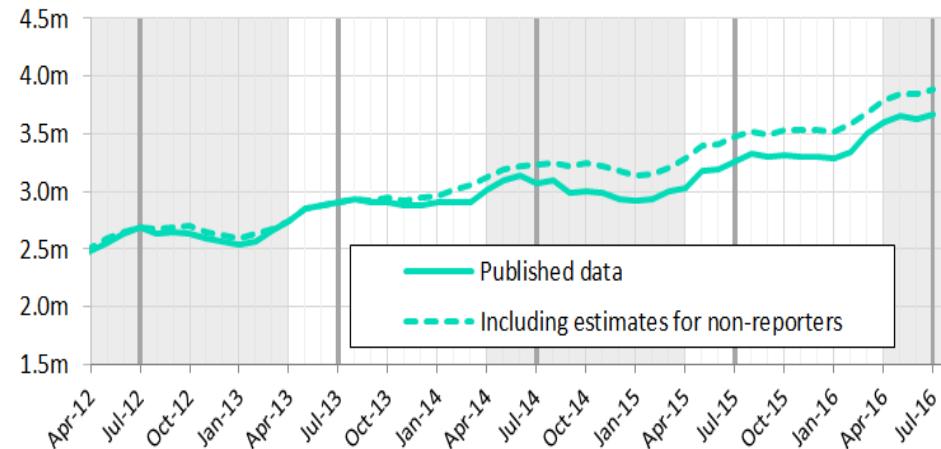
# RTT Waiting Times - Overview

## Performance against RTT incomplete standard

(Standard) 92% of patients with incomplete pathways waiting 18 weeks or less

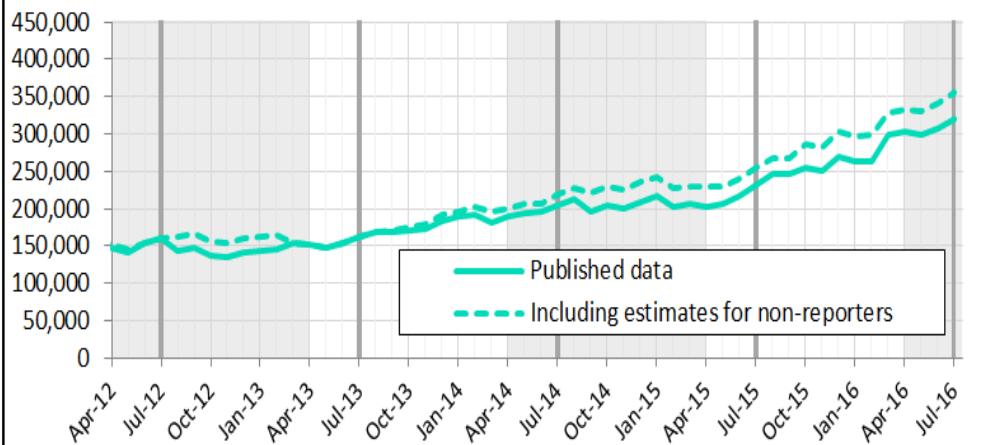


## Size of total waiting list

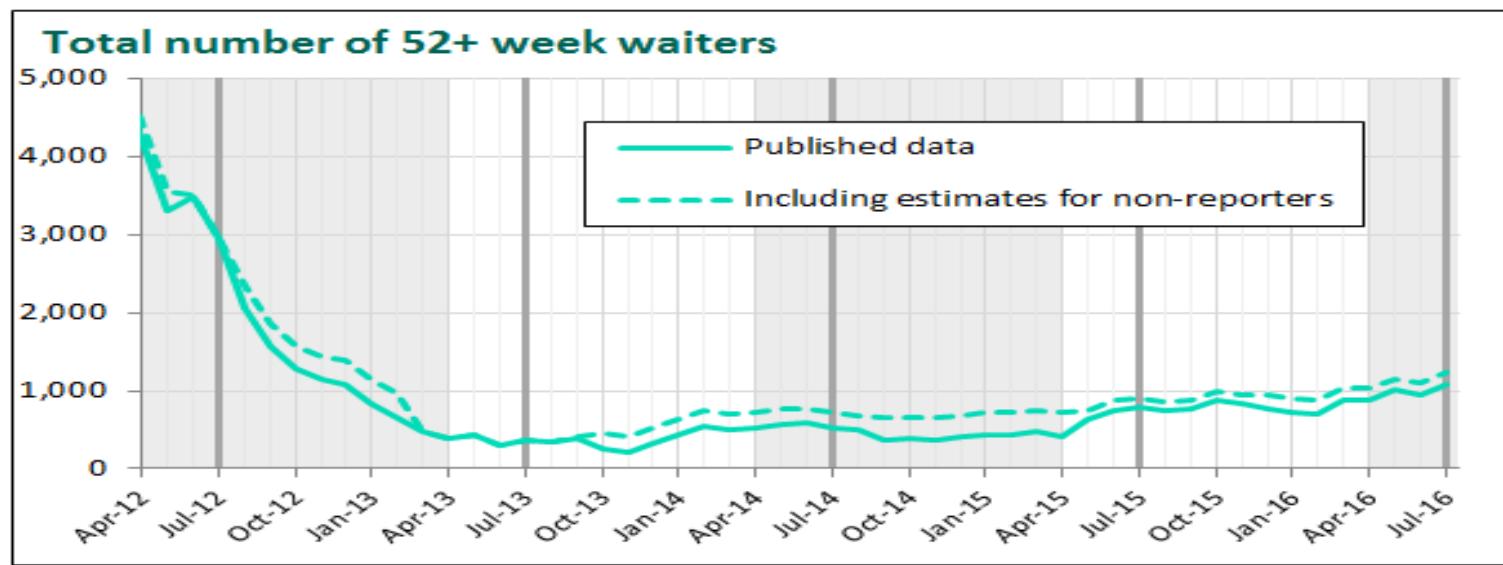


Performance	Jul-16	Jul-15	Change
Patients with incomplete pathways waiting 18 weeks or less to start consultant-led treatment (92%)	91.3%	92.9%	-1.6ppt
Number of months since standard last met	5 (Feb-16)		
Number of months standard missed in last 12 months	7		
Number of acute trusts missing the standard (incl NR)	68 of 154 (44%)	36 of 154 (23%)	32
Worst month	91.3% (Jul-16)		
Waiting list and clearance times (published)	Jul-16	Jul-15	Change
Total waiting list	3,664,907	3,260,044	12%
18+ weeks	320,605	232,507	38%
52+ weeks	1,076	786	37%
Clearance on current activity assuming no additions	12.4 weeks	11.6 weeks	0.8 weeks

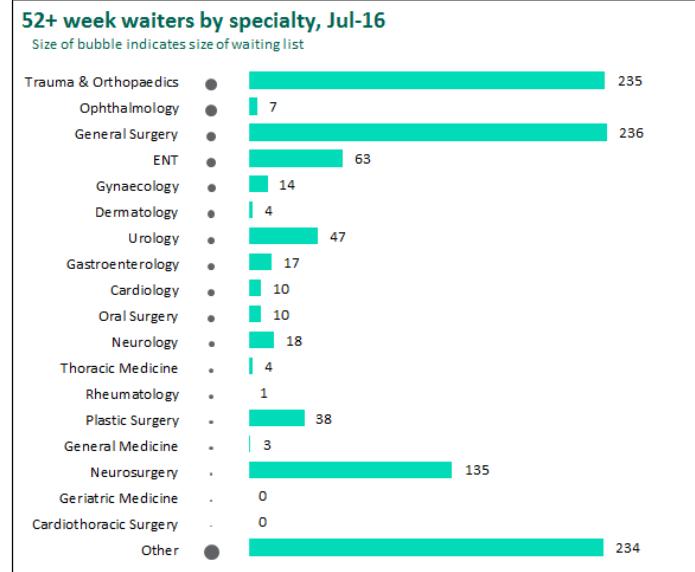
## Total number of 18+ week waiters



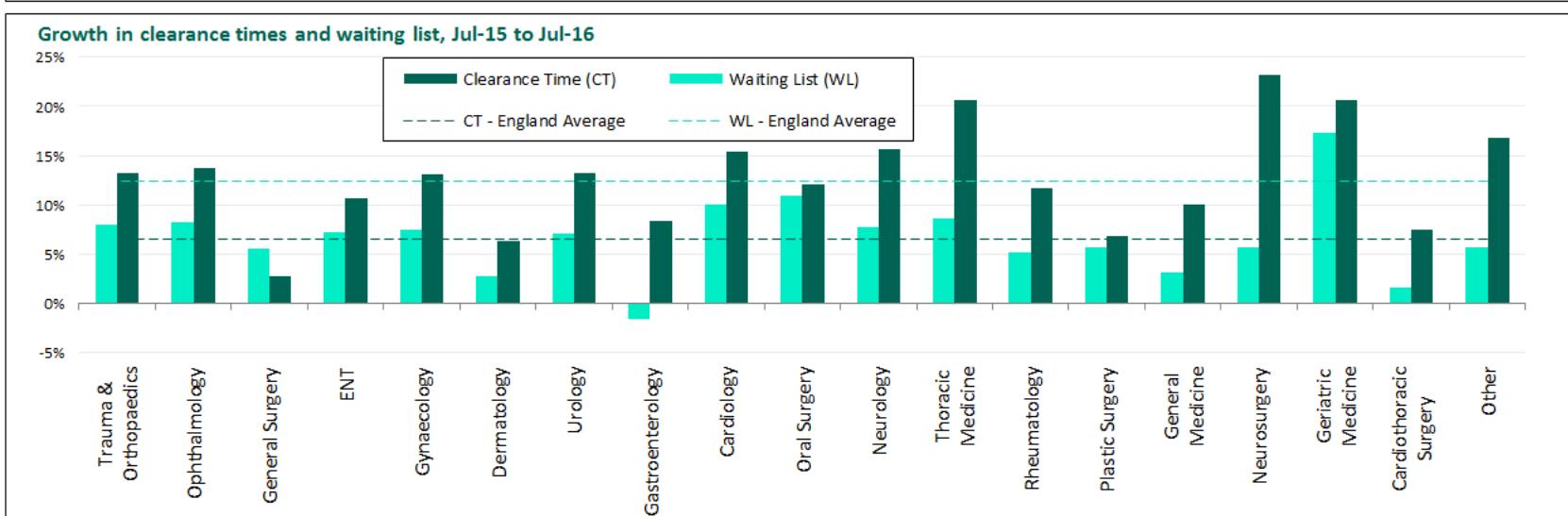
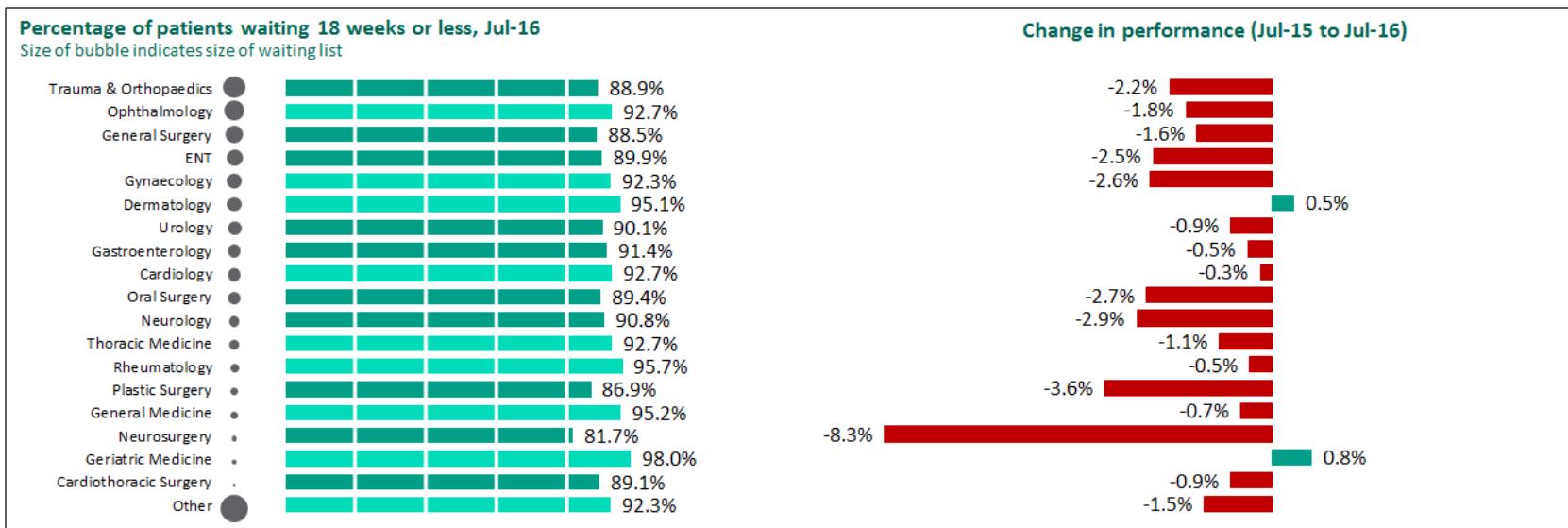
# RTT Waiting Times – Waiting list clearance times and activity



10 providers with most 52 week waiters	Jul-16	Jun-16	12 month trend (Latest period to right)
BRIGHTON AND SUSSEX UNIVERSITY	211	92	
KING'S COLLEGE HOSPITAL (FT)	154	137	
IMPERIAL COLLEGE HEALTHCARE	117	79	
NORTH BRISTOL	78	81	
UNIVERSITY HOSPITALS OF LEICESTER	77	130	
THE ROYAL WOLVERHAMPTON	64	100	
PLYMOUTH HOSPITALS	57	50	
UNIVERSITY HOSPITAL OF SOUTH MANCH	49	21	
THE ROYAL ORTHOPAEDIC HOSPITAL (FT)	34	37	
UNIVERSITY HOSPITALS OF NORTH MIDLA	28	32	
ENGLAND	1076	943	



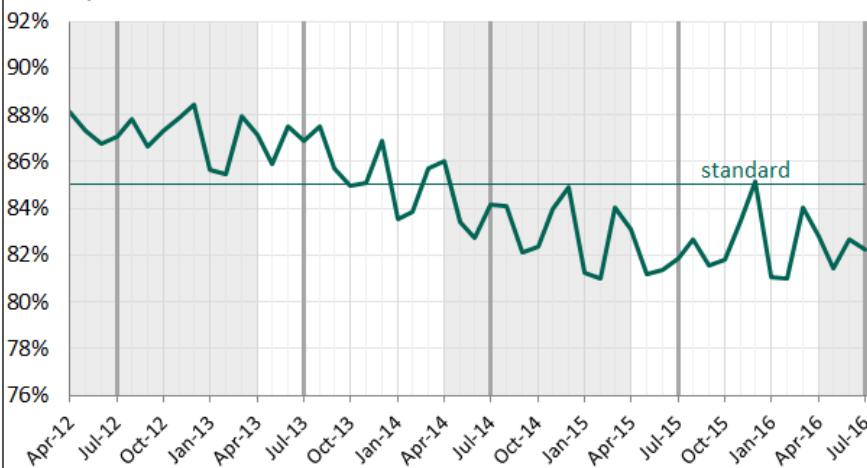
# RTT Waiting Times - Specialties



# Cancer Waiting Times - Overview

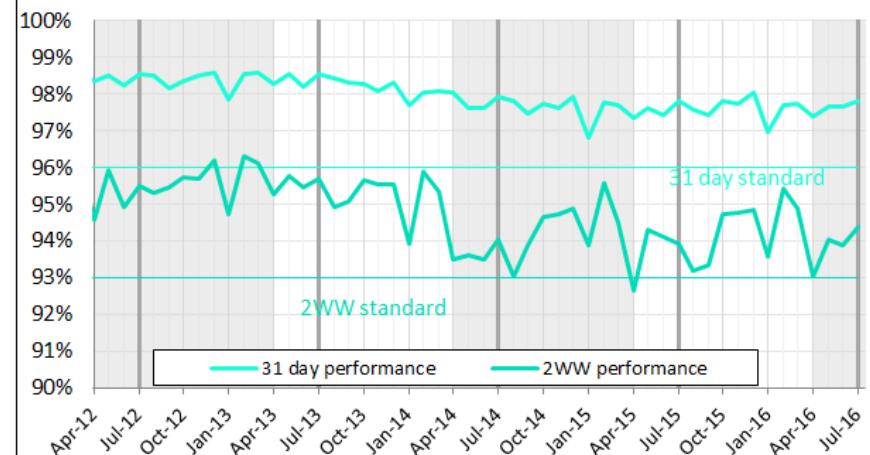
## Performance against the 62d cancer standard

(Standard) 85% of patients began first treatment within 62 days of an urgent GP referral for suspected cancer



## Performance against the 2WW and 31d cancer standards

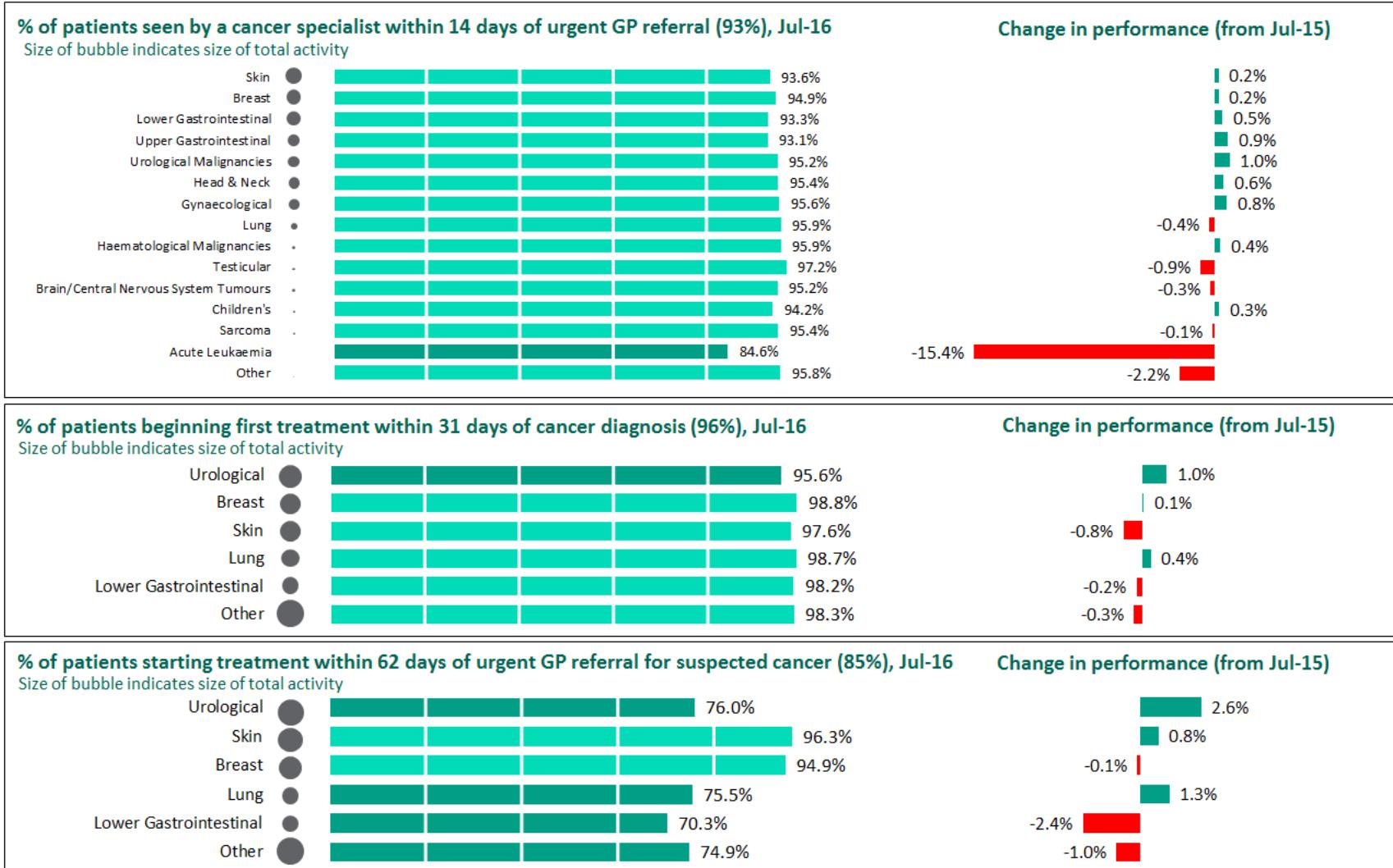
(Std) 93% of patients saw a specialist within 2 wks of urgent GP ref. for suspected cancer  
(Std) 96% of patients began first treatment within 31 days of decision to treat for cancer



## 62 day standard

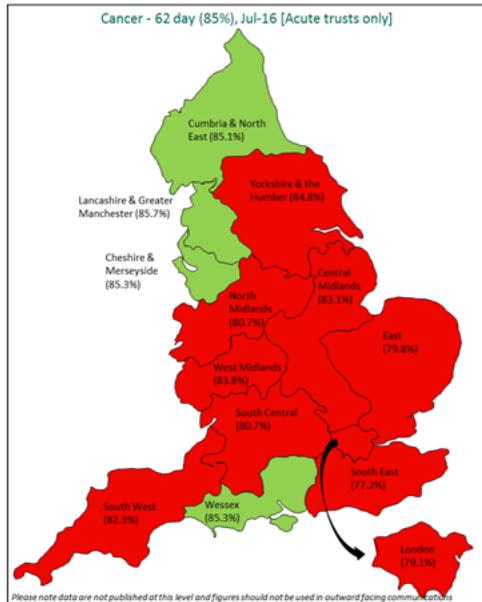
Performance	Jul-16	YTD
Current year	82.2%	82.3%
Previous year	81.9%	81.9%
Better (▲) or worse (▼) than same period in previous year	▲	▲
Number of months since standard was last met	7	
Number of months missed in the last 12 months	11	
Worst month	81.0% (Feb-15)	
Number of acute providers missing the standard	76 of 154 (49%)	
Activity	Jul-16	YTD
Seen within standard	9,606	39,088
Seen outside standard	2,075	8,411
Total seen	11,681	47,499

# Cancer Waiting Times – Tumour Group

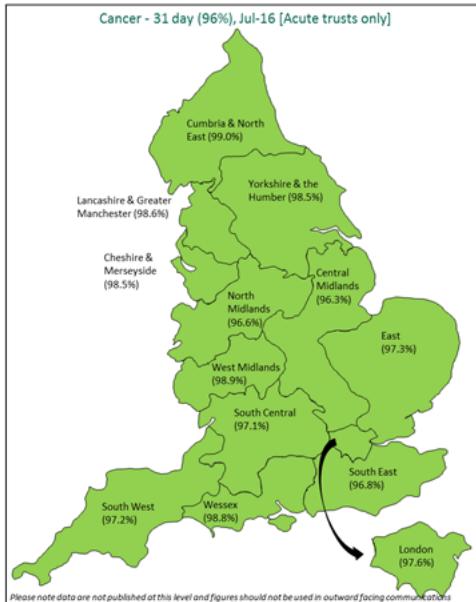


# Cancer Waiting Times – Region and acute provider

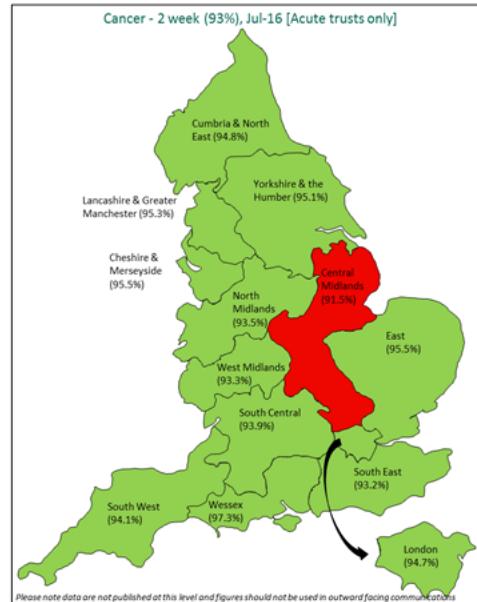
4 regions met the 62 day standard (Jul-16)



13 regions met the 31 day standard (Jul-16)



12 regions met the 2WW standard (Jul-16)



49% trusts missed the 62 day standard (Jul-16)

Worst performers (62-day)	Latest performance	Activity
THE CLATTERBRIDGE CANCER CENTRE (FT)	64.1%	46
GUY'S AND ST THOMAS' (FT)	65.3%	110
WORCESTERSHIRE ACUTE HOSPITALS	67.7%	147
NORTH MIDDLESEX UNIVERSITY HOSPITAL	68.5%	27
UNIVERSITY COLLEGE LONDON HOSPITALS (FT)	68.6%	80

12% trusts missed the 31 day standard (Jul-16)

Worst performers (31-day)	Latest performance	Activity
MID ESSEX HOSPITAL SERVICES	89.6%	202
UNIVERSITY HOSPITALS OF LEICESTER	90.4%	353
MEDWAY (FT)	92.3%	117
MEDWAY (FT)	92.3%	117
OXFORD UNIVERSITY HOSPITALS (FT)	92.4%	328

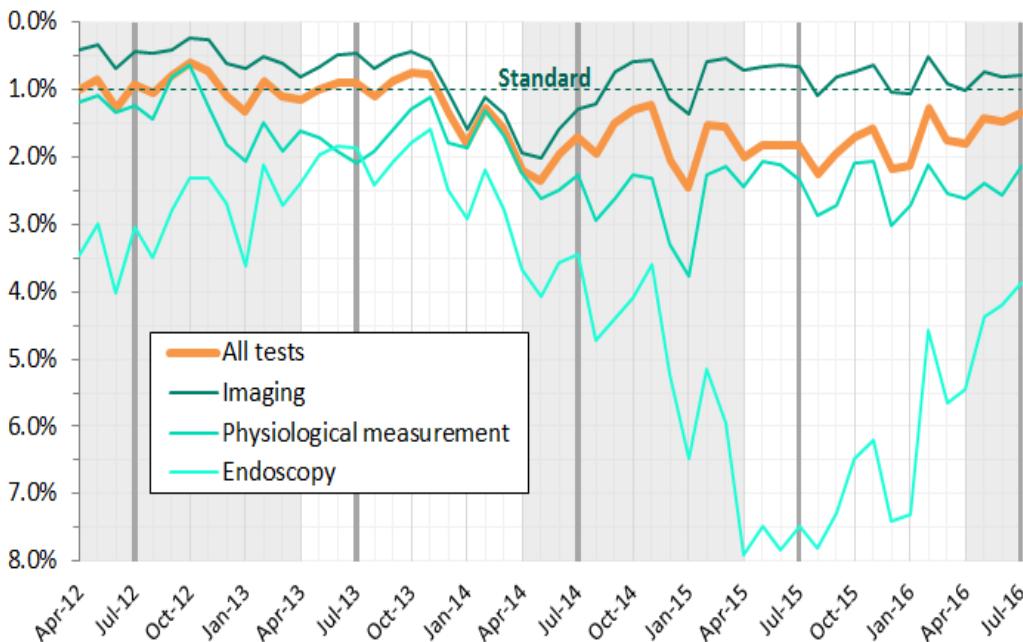
14% trusts missed the 2WW standard (Jul-16)

Worst performers (2WW)	Latest performance	Activity
WORCESTERSHIRE ACUTE HOSPITALS	75.5%	1,348
MEDWAY (FT)	76.4%	1,262
NORTHERN DEVON HEALTHCARE	77.2%	404
WEST HERTFORDSHIRE HOSPITALS	81.0%	1,226
UNITED LINCOLNSHIRE HOSPITALS	82.7%	1,627

# Diagnostic Test Waiting Times - Overview *Improvement*

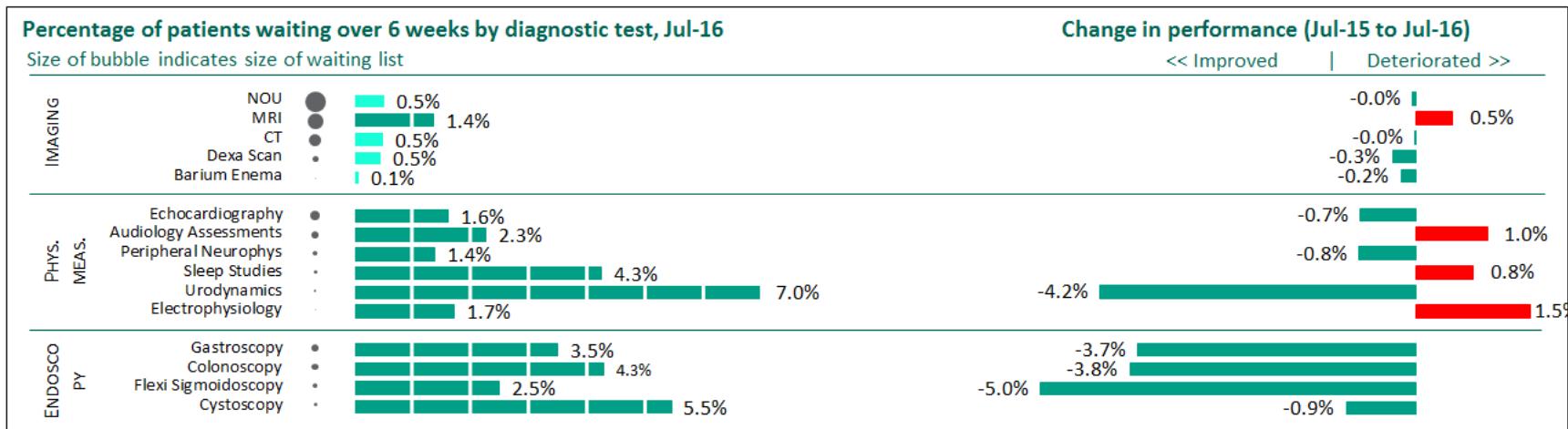
## Performance against diagnostic test standard

(Standard) Less than 1% of patients waiting more than 6 weeks from referral

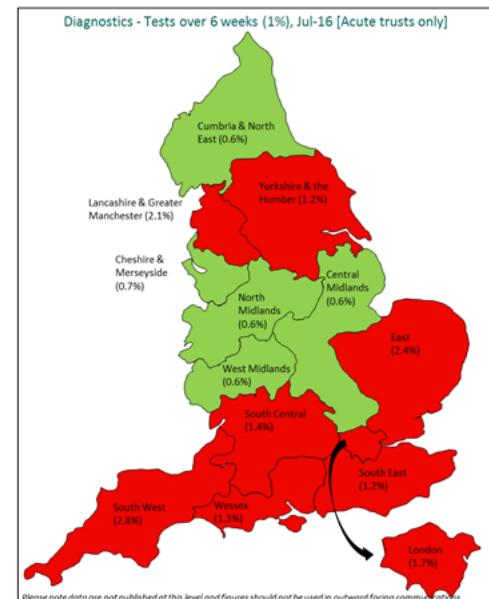


Performance	Jul-16	Jul-15	Change
Less than 1% of patients waiting more than 6 weeks from referral	1.4%	1.8%	-0.5ppt
Number of months since standard last met	32		
Number of months standard missed in last 12 months	12		
Number of acute trusts missing the standard	42 of 152 (28%)		
Worst month	2.4% (Jan-15)		
Waiting list	Jul-16	Jul-15	Change
Total	883,618	857,460	3.1%
Imaging	634,364	609,770	4.0%
Endoscopies	105,250	114,184	-7.8%
Activity	Jul-16	Jul-15	Change
Total	1,753,221	1,774,232	-1.2%
Imaging	1,354,005	1,355,112	-0.1%
Endoscopies	145,104	148,288	-2.1%

# Diagnostic Test Waiting Times – Modality, region and acute provider

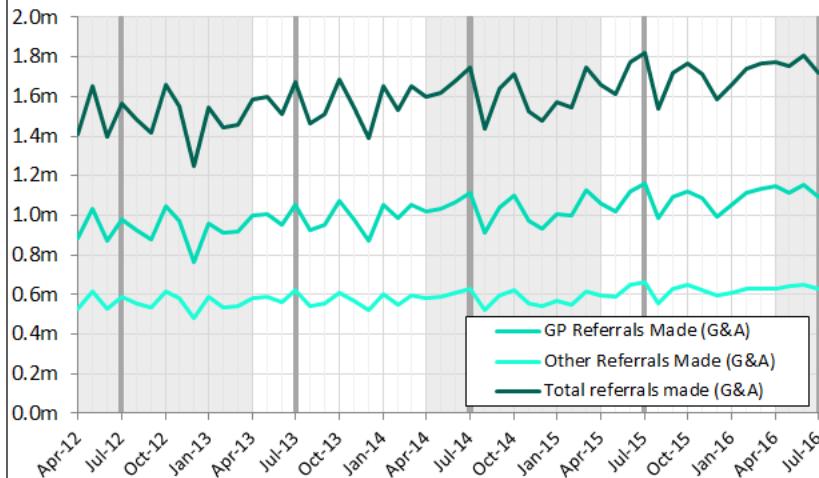


10 worst performers			5 biggest changes				
Acute provider	Latest performance	Waiting List	Acute provider	Change (▲ improvement, ▼ deterioration)	Latest performance	Waiting List	
CAMBRIDGE (FT)	10.0%	7,483	MEDWAY (FT)	▲	-5.0%	4.9%	6,553
PENNINE ACUTE HOSPITALS	8.6%	10,799	GREAT ORMOND STREET (FT)	▲	-3.8%	6.2%	563
TAUNTON AND SOMERSET (FT)	7.9%	5,725	MID YORKSHIRE HOSPITALS	▲	-2.8%	1.8%	7,409
DORSET COUNTY HOSPITAL (FT)	7.8%	3,120	UNIVERSITY COLLEGE LONDON HOSPITALS (FT)	▲	-2.7%	3.7%	9,022
KING'S COLLEGE HOSPITAL (FT)	6.8%	11,192	KING'S COLLEGE HOSPITAL (FT)	▲	-2.6%	6.8%	11,192
GREAT WESTERN HOSPITALS (FT)	6.7%	5,003	PENNINE ACUTE HOSPITALS	▼	4.4%	8.6%	10,799
GREAT ORMOND STREET (FT)	6.2%	563	CAMBRIDGE (FT)	▼	2.3%	10.0%	7,483
MEDWAY (FT)	4.9%	6,553	LEWISHAM AND GREENWICH	▼	2.2%	3.2%	6,973
UNIVERSITY HOSPITALS BRISTOL (FT)	3.9%	8,474	GREAT WESTERN HOSPITALS (FT)	▼	1.3%	6.7%	5,003
WEST SUFFOLK (FT)	3.9%	2,469	SOUTH TEES HOSPITALS (FT)	▼	1.2%	1.4%	6,544

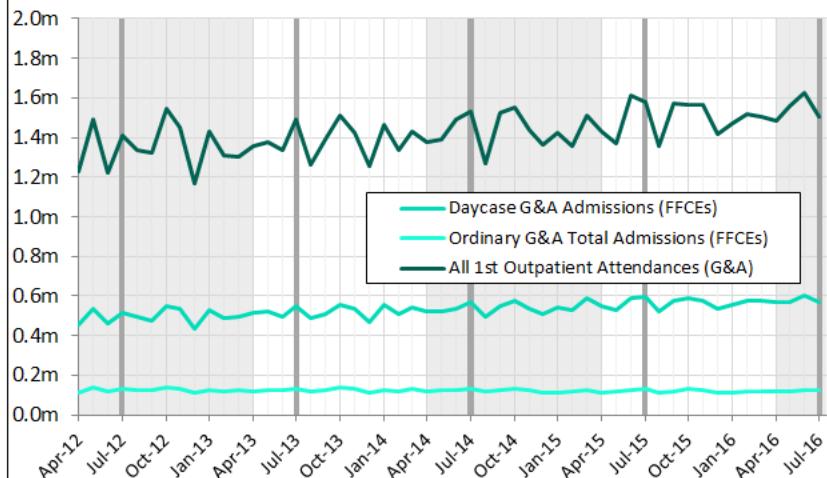


# Monthly Hospital Activity - National

**G&A (General and Acute) referrals made**



**Elective and outpatient activity (G&A)**



	Aug-15 to Jul-16	Aug-14 to Jul-15	% change
<b>Demand</b>			
GP referrals made	13,081,919	12,450,995	5.1%
Other referrals made	7,468,757	7,073,287	5.6%
Total referrals made	20,550,676	19,524,282	5.3%
<b>Activity</b>			
First outpatient appointments seen	18,152,562	17,435,475	4.1%
Elective admissions	8,242,689	8,054,708	2.3%
<b>Efficiency</b>			
Day case rate	82.6%	81.9%	0.7ppt

**Referral and activity (general and acute), indexed to Apr-12**

Rolling 6 month average, adjusted for working days

