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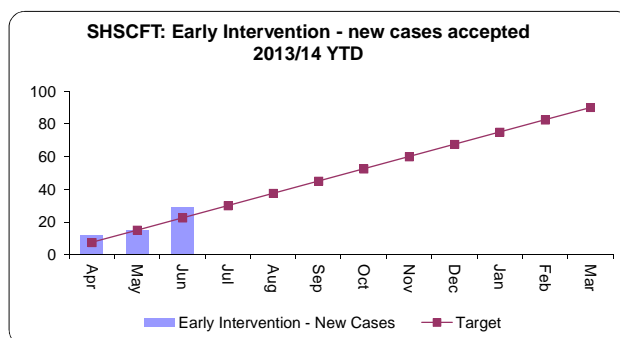
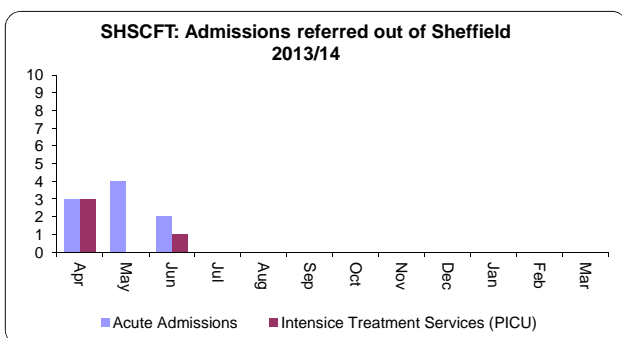
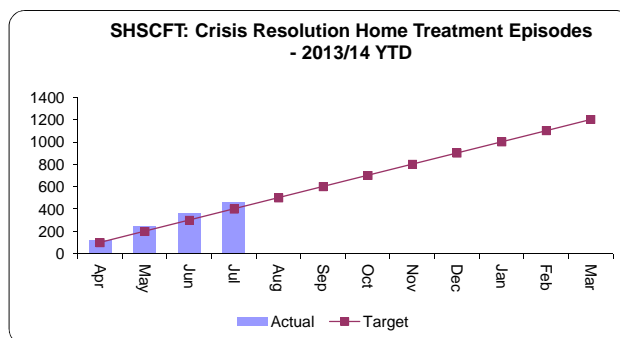
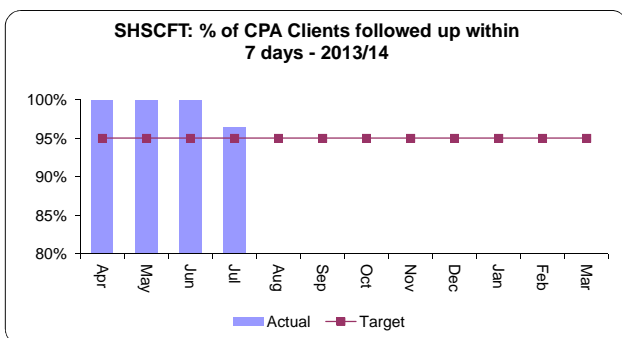
### Sheffield Health and Social Care NHS Foundation Trust

Please note that a complete update of the targets has not been possible, as SHSCFT were unable to provide all data before publication of this report.

The data for Crisis resolution and CPA 7 day follow up are only provisional.

1. Crisis Resolution/Home Treatment: As at the end of July, there have been 460 home treatment interventions against a 12-month target of 1,202. This equates to 13.8% more patients benefiting from this service than originally planned by the end of July.
2. CPA 7 day follow up: July's monthly performance is 96.43%. Actions to strengthen confidence in on-going performance are being implemented, including team-level review and confirmation reporting that follow up has taken place in advance of the 7 day period lapsing and more consistent approaches and actions from day 5 onwards, regarding maintaining proactive actions to contact the client to ensure they remain well.
3. Psychosis intervention: It has not been possible for this indicator to be updated with July data.
4. Psychological therapy services: The quarter 1 performance for psychological therapy indicators is exceeding their respective target levels.

SHSCFT Indicators	Target	June	July	Change
Crisis Resolution / Home treatment	1202	367	460	▲
Psychosis intervention - New cases (YTD)	90	29		
Psychosis intervention - Maintain Capacity	270	197		
CPA 7 day follow up (YTD)	95%	100.00%	96.43%	▼
Anxiety/depression:		Q4	Q1	
% receiving Psychological therapy	3.8%	5.83%	5.88%	▲
% referred for psychological therapy receiving it	65.5%	67.06%	73.67%	▲
Psychological therapy pts. move to recovery	44.40%	80.30%	79.53%	▼



## APPENDIX B: Ambulance Trust Performance Measures

### Yorkshire Ambulance Service

For July 2013, both the Category A 8 minute (Red 1 & Red 2) and 19 minute targets continued to be achieved at the Yorkshire Ambulance Service (YAS) Trust level. Performance is formally reviewed monthly by commissioners at the Yorkshire & Humber 999 Contract Management Board.

The 8 minute target is split into two parts: Red 1 and Red 2. This split reflects the way Ambulance Trusts already sub-divide their Category A calls for operational purposes:

1. Red 1 calls are the most time-critical and cover cardiac arrest patients who are not breathing and do not have a pulse and other severe conditions such as airway obstruction. These make up less than 5% of all calls.
2. Red 2 calls are serious but less immediately time-critical and cover conditions such as stroke and fits.

#### **Key Risks:**

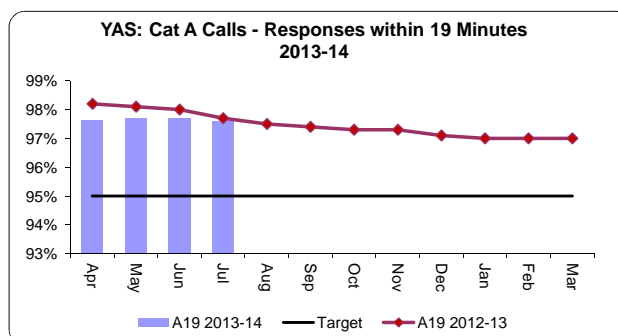
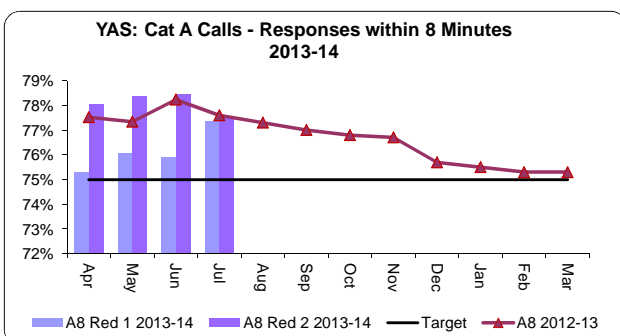
Red 1 - 8 minute - performance to be sustained over winter - although YAS will be required to produce a winter plan to mitigate the impact of the weather - and further discussions will take place with YAS about their plans to maintain the Red 1 - 8 min performance - above 75%.

#### **Key points to note:**

Agreement has been reached with Arriva Transport Solutions Ltd to commence a non-paramedic GP Urgent service from September 2013 to run in parallel with the existing paramedic led GP urgents service provided by YAS. Arrangements are being made to ensure the transition from YAS to Arriva runs smoothly.

#### **YAS Indicators**

	<u>Target</u>	<u>June</u>	<u>July</u>	<u>Monthly Change</u>
Cat A 8 minutes Red 1 (YTD)	75%	75.92%	77.37%	▲
Cat A 8 minutes Red 2 (YTD)	75%	78.45%	77.46%	▼
Cat A 19 minutes (YTD)	95%	97.68%	97.58%	▼



Data has increasingly become available for the new quality indicators and shows there is a varying degree of fluctuation month-on-month. As target levels have not yet been published, RAG ratings are not reflected in the table below.

#### **Quality Indicators**

	<u>Target</u>	<u>May</u>	<u>June</u>	<u>Monthly Change</u>
Re-contact after discharge (Phone)		12.8%	7.9%	▼
Re-contact after discharge (Treatment at scene)		7.1%	6.8%	▼
Re-contact after discharge (Frequent Caller)		2.5%	2.0%	▼
Time to answer call (Median)	5 sec	1	1	◄►
Time to answer call (95th Percentile)		20	21	▲
Time to answer call (99th Percentile)		77	84	▲
Time to treatment (Median)		5.2	5.3	▲
Time to treatment (95th Percentile)		13	13	◄►
Time to treatment (99th Percentile)		19.1	19.7	▲
Call closed with advice (Phone advice)		5.1%	4.8%	▼
Call closed with advice (Transport)		27.0%	29.3%	▲
<b>Clinical Indicators</b>		<u>February</u>	<u>March</u>	
Outcome from Cardiac Arrest (CA) All		25.4%	21.9%	▼
Outcome from CA Utstein Group (UG)		46.5%	47.1%	▲
Outcome from acute STEMI Angioplasty		89.1%	81.2%	▼
STEMI Care Bundle		78.3%	78.8%	▲
Outcome from Stroke 60 min to Stroke Unit		61.5%	59.5%	▼
Stroke - Appropriate Care Bundle		95.6%	94.4%	▼
Outcome from CA - Survival to Discharge All		7.7%	7.6%	▼
Outcome from CA - Survival to Discharge UG		22.1%	17.6%	▼
Service Experience		N/A	N/A	

# APPENDIX C: Contract Activity



Sheffield Teaching Hospitals NHS Foundation Trust

Sheffield Clinical Commissioning Group

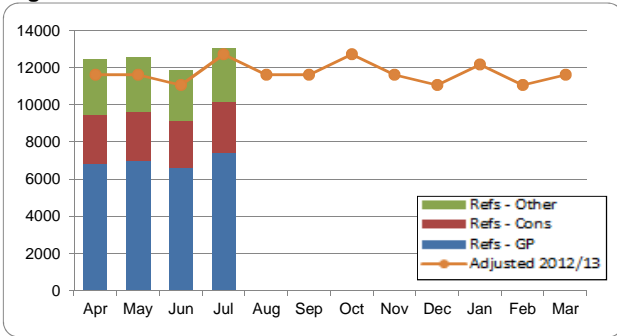
Performance against Sheffield CCG Activity Target at Month 4, April - July 2013

**PLEASE NOTE:** The financial performance is reported separately in the Finance Report

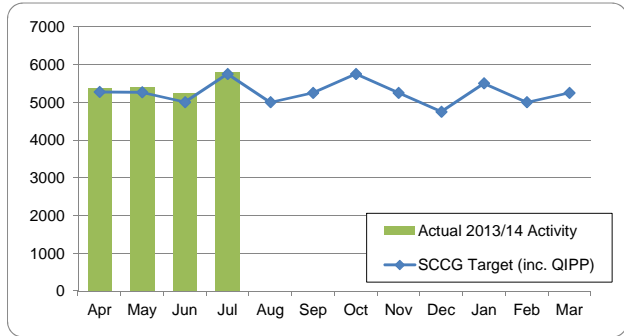
Outpatient First Attendances: 4.9% above plan  
 Outpatient Follow-ups: 2% above plan  
 Outpatient Procedures: 6.3% above plan

Inpatient Elective Spells: 2.5% above plan  
 Inpatient Non-elective Spells: 5.4% above plan  
 A&E Attendances: 6.3% above plan

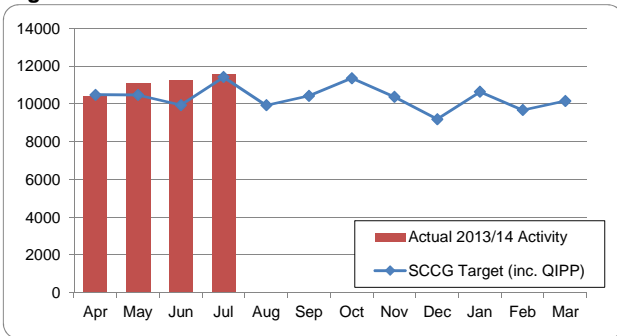
**Figure 1: Referrals<sup>1</sup>**



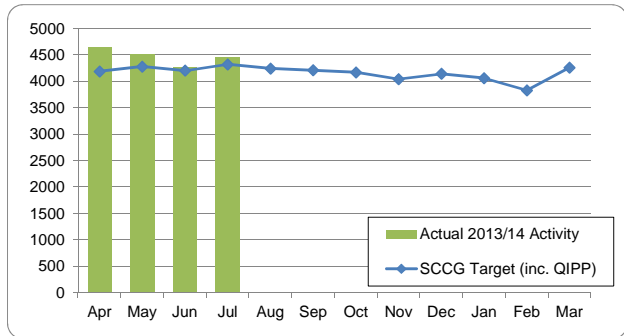
**Figure 4: Electives**



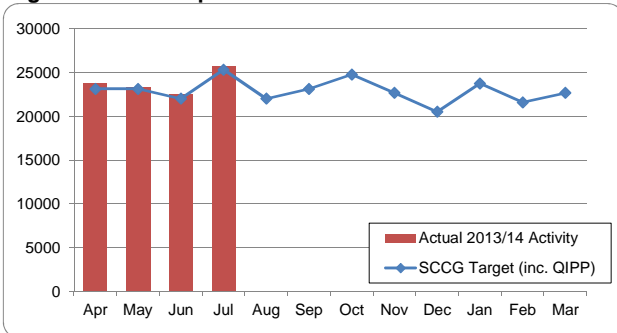
**Figure 2: Firsts<sup>2</sup>**



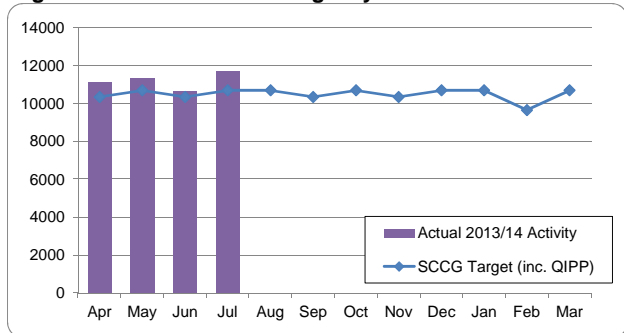
**Figure 5: Non-Electives**



**Figure 3: Follow-ups**



**Figure 6: Accident and Emergency**



**Table 1. Outpatient Activity**

Activity	2013/14	Target	Var	% Var
Firsts	44,409	42,354	2,055	4.9%
Follow-ups	95,555	93,705	1,850	2.0%
OP Payable Procedures	20,507	19,294	1,213	6.3%
Follow-ups:First Ratio	2.15	2.21	-0.06	-2.7%

**Table 2. Inpatient and A&E Activity**

Activity	2013/14	Target	Var	% Var
Electives	21,830	21,301	529	2.5%
Non Electives	17,922	16,996	926	5.4%
Excess Bed Day Costs (£000s)	£ 3,428	£ 3,248	£ 180	5.5%
A&E	44,724	42,060	2,664	6.3%

Source: STHFT Contract Monitoring

**Notes:**

<sup>1</sup> Referrals compared to 2012/13, adjusted for working days and counting changes.

Includes all Sheffield activity (CCG and NHS England) for specialties >50% CCG commissioned.

All remaining data is Sheffield CCG only (i.e. excluding NHS England commissioned activity - specialised and dental).

Outpatient attendances exclude Clinical Psychology, Diabetes, Hearing Services, Palliative Medicine and Obstetrics.

<sup>2</sup> First outpatient attendances include CDU (Clinical Decision Unit) Attendances which account for one third of the overperformance.

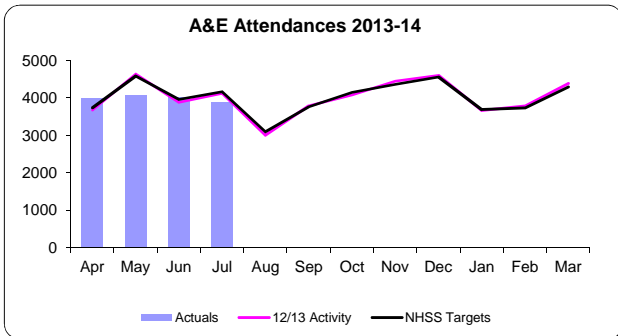
Excess Bed Day Costs include MFF (Market Forces Factor).

Produced by NHS Sheffield CCG Contract Team, August 2013

## APPENDIX C: Contract Activity

### Sheffield Children's NHS Foundation Trust

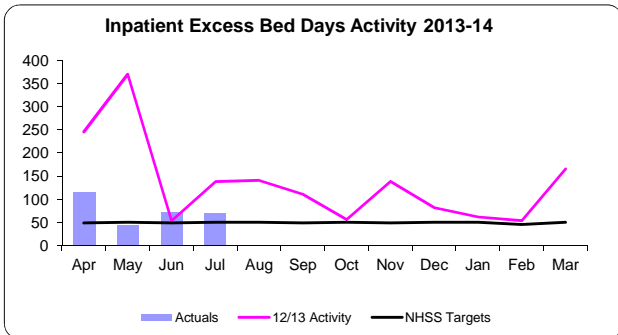
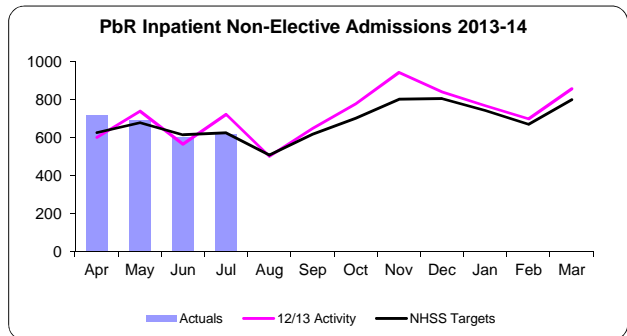
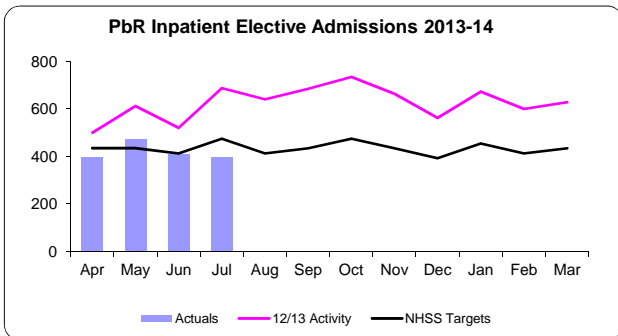
2013/14 Actual performance against Plan and 2012/13 performance



A&E activity fluctuated throughout 2012/13, but the first 4 months of 2013/14 show a slight decrease in attendances. Activity is just below the target level for July.

Following their dip below the '95% within 4 hours' target level in April and improvement in May and June, as at the end of July, SCHFT's cumulative A&E performance has risen again, to 97.40%.

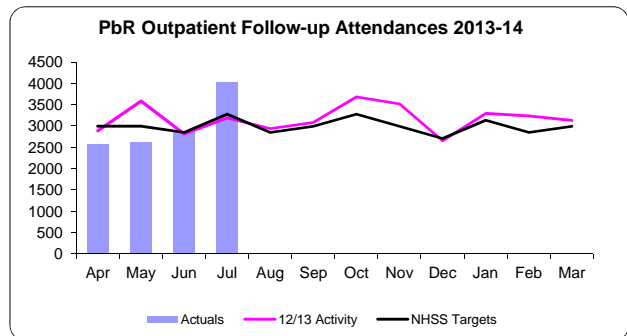
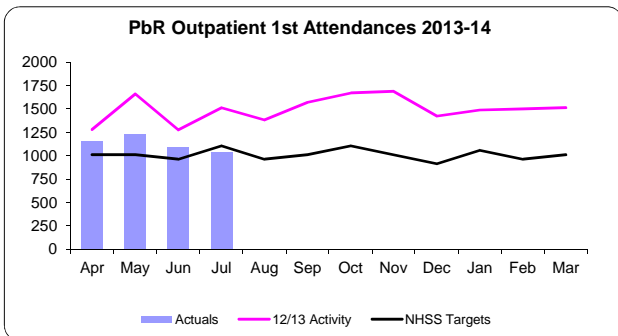
It should be noted that all A&E attendances at the Trust are Type 1 in nature.



Elective activity reduced further in July and is below planned levels. Non-elective admission levels have risen slightly in July and are at planned level for the month.

Although still lower than the level seen in April, excess bed days are still just above the planned amount for the month.

Outpatient first attendances remain below the levels seen last year and are also just under plan, but follow-ups in July were much higher than the same time last year and well above planned levels for the month.



#### Position to July 2013:

SCHFT outpatient firsts are overtrading by 435 attendances and follow-ups are undertrading by 76. In terms of elective activity, there is currently an undertrade of 83 spells. Non-elective activity is currently overtrading by 87 spells. Excess bed days are overperforming by 102 bed-days. There is currently an undertrade on A&E attendances of 453.

Activity figures are from SCHFT contract monitoring information  
SCHFT Finance Team

## Appendix D: Public Health Outcome Framework (PHOF) Indicators

Quarterly Report of Public Health Outcome Framework (PHOF) Indicators for Sheffield CCG Governing Body							
							Date: 15-Aug-13
PHOF Indicator ID	PHOF Indicator	Latest Annual time period	Value	Statistically significant compared to England	General Trend Annual	Change last annual period	Notes
1.13 (i)	% of Offenders who re-offend from a rolling 12 month period	2010	28.2	Worse	A	A	Crude rate per 1,000 population
1.13 (ii)	The average number of re-offences committed per offender from a rolling 12 month period	2010	0.75	No Diff	A	R	Crude rate per offender
1.15 (i)	Statutory Homelessness Acceptances (households found to be eligible for assistance, unintentionally homeless and falling within a priority need group)	2012/13	5.1	Worse(*)	A	G	Rate per 1,000 households
1.15 (ii)	Statutory Homelessness: Households in temporary accommodation	2012/13	0.76	Better(*)	A	R	Rate per 1,000 households
2.2 (i)	Breastfeeding: % Initiating breastfeeding	2012/13	77.7	Better	A	R	% of mothers
2.2 (ii)	Breastfeeding: % Babies receiving breast milk at 6-8 weeks	2012/13	50.8	Better	A	G	% of babies
2.3	Smoking status of Mothers at time of delivery	2012/13	14.1	No Diff	R	A	% of mothers
2.4	Conception Rate of Under 18 year olds	2011	35.2	Worse	G	G	per 1,000 females aged 15-17
2.15(i)	Successful completion of drug treatment: Opiate (for example Heroin) users	2011	8.5	No Diff	G	G	% of adult users in treatment
2.15(ii)	Successful completion of drug treatment: Non-Opiate users	2011	38.8	No Diff	G	G	% of adult users in treatment
2.20(i)	% women eligible for breast screening adequately screened - coverage	2012	79.0	Better	G	G	% women eligible for breast screening adequately screened (aged 53-70yrs)
2.20(ii)	% women eligible for cervical screening adequately screened - coverage	2012	75.8	Better	A	A	% women eligible for breast screening adequately screened (aged 53-70yrs)
2.21(iv)	(iv) % babies registered within the area (currently CCG) both at births and at the time of the report who are eligible for newborn blood spot screening and have a conclusive result recorded on the Child Health System within an effective timeframe.	Not Available					
2.21(v)	(iv) % babies eligible for newborn hearing screening for whom the screening process is complete within 4 weeks corrected age (hospital programmes - well babies, all programme NICU (Neonatal Intensive Care Unit) babies) or 5 weeks corrected age (community programmes - well-babies).	Not Available					
2.21(vii)	Diabetic Retinopathy (damage to the retina caused by complications of diabetes) Screening	2011/12	92	Better	G	G	(% aged 12+ offered screening who attended a digital screening event)
2.22(i)	% of Eligible who are offered and an NHS Health Check Programme	2012/13	6.1	Worse	G	G	(% eligible population aged 40-74 offered a check during financial yr)
2.22(ii)	% of Eligible who have received an NHS Health Check	2012/13	2.5	Worse	G	G	(% eligible population aged 40-74 offered a check during financial yr, who received one)
3.2	Chlamydia Diagnoses (for 15-24 year olds)	2012	1852	Better	N/A	N/A	Crude rate per 100,000 aged 15-24 yr old <sup>1</sup>
3.3 (iii)1	DTaP/IPV/Hib (Diphtheria, Tetanus, Pertussis (whooping cough), polio and Haemophilus influenzae type b) vaccination coverage: 1 year olds	2011/12	95.0	No Diff	G	G	%
3.3 (iii)2	DTaP/IPV/Hib (Diphtheria, Tetanus, Pertussis (whooping cough), polio and Haemophilus influenzae type b) vaccination coverage: 2 year olds	2011/12	96.6	No Diff	G	A	%
3.3 (iv)	MenC (Meningitis C) vaccination coverage for 1 year olds	2011/12	93.7	No Diff	G	A	%
3.3 (v)	PCV (Pneumococcal Conjugate Vaccine) coverage - for 1 year olds	2011/12	94.1	No Diff	G	G	%
3.3 (vi)2	Hib/MenC (Haemophilus influenzae type b and Meningitis C) vaccination coverage for 2 year olds	2011/12	93.9	Better	G	R	%
3.3 (vi)5	Hib/MenC (Haemophilus influenzae type b and Meningitis C) vaccination coverage for 5 year olds	2011/12	92.6	Better	N/A	N/A	%
3.3 (vii)	PCV (Pneumococcal Conjugate Vaccine) booster vaccination for 2 year olds	2011/12	92.8	Better	G	G	%
3.3 (viii)	MMR (Measles, Mumps, and Rubella) vaccination coverage - Receiving One dose for 2 year olds	2011/12	92.4	Better	G	G	%
3.3 (ix)	MMR (Measles, Mumps, and Rubella) vaccination coverage - Receiving One dose for 5 year olds	2011/12	94.5	Better	G	G	%
3.3 (x)	MMR (Measles, Mumps, and Rubella) vaccination coverage - Receiving Two doses for 5 year olds	2011/12	87.5	Better	G	G	%
3.3 (xii)	HPV (Human Papilloma Virus) vaccination coverage - for 12-13 year olds	2011/12	93.0	Better	G	G	%

NOTE: (\*) statistical significance not available

Provided by: Public Health Intelligence Team (Ann Richardson), Sheffield City Council

**FOOTNOTE <sup>1</sup> In 2012, several changes were made to the collection and reporting of chlamydia activity data, to deliver a simpler and more representative national surveillance system. It is important to note that as a result of the revisions, chlamydia data for 2012 onwards are not directly comparable with data reported in earlier years.**