

Subject:	Item 8. Appendix B: Norfolk and Waveney System Performance Report (July / August 2019)
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<p>Summary:</p> <p>The following dashboard provides an overview of the key performance indicators across the system.</p> <p>Unplanned Care</p> <p>James Paget University Hospital (JPUH) – A&E performance remained consistent with August at 86.2% Factors include a high volume of attendances at 7,775 which is significantly higher than previous months. There is concern about the high number of ambulance attendances in month. In addition there were medical workforce gaps at night and at weekends. Recovery plans include the continued enhanced review of long stay and medically optimised patients along with system partner engagement in primary and community and social care. In addition the Winter plan with system partners is in development.</p> <p>Norfolk and Norwich University Hospital (NNUH) – A&E Performance has decreased to 78.1% in August from 80.6% in July. 60 minute handover delays remain flat for a third month at 2.3%. Delayed Transfers of Care have also increased to 4.4%. Key factors impacting performance are Consultant, Nursing and Junior Doctor shortfalls, discharge planning and adherence to SAFER. A recovery action plan and enhanced support calls remain in place with NHSI/E.</p> <p>Queen Elizabeth Hospital (QEH) – Performance in August was 79.0% compared to 81.1% in July. Challenges to performance include a sustained increase in the average number of attendances. For example there has been a 3% increase in attendances in August 2019 compared to August 2018. There was also a 5% increase in emergency admissions in August 2019 compared to August 2018. Overcrowding in ED has been a factor and flow in and out of the department has been challenged during the month. Further to this, ED medical and nurse staffing capacity and rota pattern has not always matched with demand.</p> <p>Performance will be improved by increased capital investment in the ED and emergency floor to increase capacity and improve the environment, due for completion in February 2020. This includes plans to minimise delays between ED and assessment areas; embed the SAFER bundle across the Trust and improve discharge planning. A review of the medical and nursing staff establishment and rota will be complete by the end of October 2019. The above factors have also impacted 60 min ambulance handover delays. Further work is ongoing to standardise the ambulance handover process. Joint work is in progress with the ambulance service; this will be embedded by the end of quarter 4.</p> <p>Cancer – All August data remains provisional at 24/09/2019</p> <p>JPUH – The Trust has seen a large increase in referrals across a range of specialties. Compounding this, the Trust has had clinical capacity challenges (vs demand), particularly for two week wait referrals. Recovery action plans are in place for breast and endoscopy to reduce the number of patients not being seen within two weeks. These include daily cancer date reports by body site being provided to DOM's & SOM's so that</p>	

they are able to monitor the demand and to use the information to create additional clinic / endoscopy capacity in advance. Additional one stop clinics and twilight clinics are being undertaken (with further weekend endoscopy sessions) and this has supported the increase in performance seen across all failing metrics. Revised job planning has been undertaken to increase the DCC activity and increase availability of senior middle grade staff. Further support from breast imaging services is being provided from other trusts.

NNUH – Trust had previously met the GP two week wait target however an increase in colorectal referrals and under-delivery of activity in Skin means that recent performance has been affected. Plans are in place to address both. 31 day surgery continues to be challenging due to the small patient numbers and capacity constraints due to continued bottleneck on Melanoma pathway. A solution is dependent on the Nuclear Medicine capital project. The main areas of underperformance on the 62 day target are Urology and Gynaecology due to delays in the diagnostic stage of the pathway, and lower GI due to delays in initial two week wait appointments. The Trust expects to meet the standard by the end of Q4.

QEH – Provisional August data shows that two week wait breast did recover as forecast in August with the target now being met for the first time in 7 months. 62-day GP referral to treatment performance has worsened to 64.2% against the standard of 85%. A cancer improvement plan is in place and the quarterly update is provided to the Trust Board. In addition to the cancer improvement plan, performance will be improved by the provision of additional, operational support to urology and lower GI. This additional support will be in place for three months (October – December) and will increase the pace in improvement work in these tumor sites.

Planned Care

JPUH – July 18 week performance has worsened to 81.5% and there has been an increase in the overall backlog by 349 patients. A comprehensive RTT plan is in place with key focus to address data entry issues and increase inpatient activity to reduce admitted backlog of patients. Capacity in challenged specialties is predominantly workforce related. Detailed Recovery Action Plans with trajectories against waiting list size have been developed for T&O, Ophthalmology, Dermatology, ENT and Gynaecology. The RTT plan is monitored via the Trust Access Group and Divisional Performance Committee.

NNUH - Overall performance continues to be compromised by the urgent focus on cancer work and increasing demand. August has seen a marginal decrease in performance to 81.8%. The overall backlog has increased for the 8th month in a row due to increasing demand and lack of capacity, with pension tax issues also impacting. Intensive waiting list management is in place to reduce the risk of 52 week breaches however 40 week breaches have increased from 557 in July to 667 in August. Capacity remains a key challenge and NNUH is working with commissioners and NHSE/I to seek further demand management schemes. Diagnostics continues to be challenged, with the MRI and CT standard now recovered, but increase in inpatient and outpatient demand in Non-Obstetric Ultrasound and reduced workforce and capacity at Global impacting on August delivery of the standard. Plans are in place to recover but conversations are ongoing with Global for additional support.

QEH – Good performance in August with 80.69% against the recovery trajectory of 80.96%. At the end of August 2019, the total Trust waiting list was 13,814 against a trajectory of 13,861 and the total backlog of patients waiting over 18 weeks was 2,667 against a trajectory of 2,639. Performance remains in line with the agreed trajectory and will be maintained by performance management at specialty level. Diagnostics performance for August was 90.90%, against a standard of 99%. There were 362 breaches in the month, of which 341 were in ultrasound. This is largely down to an increase in demand of c.10% and an inability to increase capacity due to radiographer and radiologist vacancies. Performance will be improved by recruitment to two consultant posts; one starting in September and the other in October along with additional training of radiographers to undertake sonography work; one member of staff is currently being trained. Performance is forecast to recover by October 2019.

Mental Health

Inappropriate Out of Area Placements – performance has improved since the beginning of August, with a continued focus on the tightening of admission processes. A Mental Health deep dive to support a system response to Delayed Transfers of Care is planned for late October. At the time of writing, Yare Ward remains on track to open which will provide additional local capacity.

Improving Access to Psychological Therapies (IAPT) – the service continues to ensure only patients who meet the criteria are accepted, in line with NHSE/I expectations and best practice nationally. Actions from last month's update remain in train as follows:

- Workshop taking place on 3rd October 2019 to agree the final improvement plan for IAPT Access; CCGs and NSFT.
- Align the development of IAPT services with the emerging PCNs, to maximise integration and service exposure;
- Assistant PWP's have been recruited to reduce drop-out rate;
- More Step 2 capacity has freed up Step 3 workers from carrying out assessments and focus on treatment capacity;
- A choose and book system has been introduced;
- Service number appears on service user phones, previously appeared as unknown number.

Dementia - The STP remains within the 95% confidence limits of the dementia diagnosis rate.

- The STP is continuing to develop the dementia community support offer for Norfolk and Waveney.
- CCGs continue to share individual work across the existing action plans, to aid progress.
- Actions are being taken forward by individual CCGs to increase the diagnosis rate, including practice visits and data cleansing.

STP High Level System Dashboard - Summary



Metrics	Status of latest data	Current target	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Trend
Acute Unplanned Care Performance Metrics (includes aggregate of JPUH, NNUH and QEH unless otherwise stated)																
A&E 4 hr performance (whole trust. NNUH includes WIC)	Validated	95%	87.5%	86.9%	88.3%	86.0%	83.9%	78.4%	77.2%	79.5%	78.3%	84.2%	83.3%	82.0%	80.2%	
A&E Total Attendances (as above)	Validated	-	31,309	29,033	29,162	28,331	28,983	29,123	27,204	30,226	29,891	31,210	30,302	32,746	32,330	
A&E Total Breaches (as above)	Validated	-	3,916	3,801	3,409	3,961	4,679	6,292	6,206	6,211	6,478	4,921	5,069	5,890	6,411	
Emergency admissions (N&W CCGs only)	Validated	-	7,889	7,538	8,127	8,150	8,169	8,595	7,578	8,394	8,129	8,219	7,901	8,382		
DTOC - delayed days (includes acute + non-acute trusts. Norfolk patients)	Validated	-	2,944	2,738	2,709	2,551	2,681	2,974	2,150	2,530	2,153	2,981	2,748	2,704		
% of A&E Ambulance handover delays > 60 min	Validated	-	8.5%	8.2%	5.2%	10.7%	11.6%	15.2%	14.0%	6.6%	4.9%	3.3%	4.7%	5.7%	2.8%	
Acute Cancer Performance Metrics (includes aggregate of JPUH, NNUH and QEH)																
Two week wait GP referral (%)	Provisional	93%	87.5%	79.6%	82.3%	79.3%	92.2%	88.8%	91.0%	87.5%	91.4%	91.0%	84.6%	85.0%	81.6%	
Two week wait breast symptoms (%)	Provisional	93%	96.1%	97.8%	97.3%	63.7%	53.3%	54.8%	47.4%	47.7%	82.5%	80.0%	87.4%	93.9%	91.6%	
31 days from diagnosis to first treatment (%)	Provisional	96%	97.0%	97.3%	96.3%	97.1%	97.6%	95.3%	96.9%	97.2%	96.9%	96.7%	98.3%	98.6%	97.3%	
62 days from GP referral to first treatment (%)	Provisional	85%	77.6%	76.9%	77.0%	76.4%	76.7%	70.5%	73.4%	77.4%	77.6%	72.6%	77.1%	72.4%	68.9%	
Acute Planned Care Performance Metrics (includes aggregate of JPUH, NNUH and QEH)																
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	84.7%	83.4%	82.9%	83.0%	81.8%	81.7%	82.2%	82.5%	82.2%	83.4%	83.2%	82.4%	81.5%	
Total number incomplete pathways	Validated	-	70,713	70,828	71,166	70,567	69,990	68,983	68,302	67,794	68,523	70,186	70,509	72,067	72,495	
Total number of 40 week breaches	Validated	-	730	756	651	649	770	758	681	633	653	700	697	674	782	
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	14	22	17	22	29	29	13	0	0	2	0	1	1	
Diagnostic tests within 6 weeks	Validated	99%	99.3%	99.3%	99.3%	99.3%	98.2%	95.4%	98.3%	99.1%	98.2%	97.0%	98.0%	98.2%	95.9%	
Number of patients waiting > 6 weeks	Validated	-	118	109	122	122	306	852	332	178	352	588	385	353	761	
GP acute referrals (all CCGs)	Provisional	-	16,996	16,137	18,377	17,942	14,697	17,998	17,006	18,190	17,272	18,800	17,084	19,190	18,384	
Non-GP acute referrals (all CCGs)	Provisional	-	9,264	8,912	10,410	10,239	8,380	10,397	9,289	10,456	9,688	10,288	9,524	10,791	10,174	
Avoidable emergency admissions (N&W CCGs only)	Validated	-	1,711	1,704	1,919	2,115	2,231	2,366	2,136	2,154	1,986	1,901	1,760	1,815		
Mental Health Metrics (all NSFT other than Dementia)																
IAPT: access rates (local target)	Provisional	1.58%	1.04%	1.00%	1.37%	1.57%	1.36%	1.60%	1.44%	1.55%	1.41%	1.22%	1.27%	1.65%	1.20%	
IAPT: recovery rates	Provisional	50%	46.0%	52.7%	50.6%	51.2%	51.4%	59.0%	59.4%	55.5%	58.3%	59.5%	58.8%	57.9%	56.4%	
IAPT: first treatment <6 weeks	Provisional	75%	94.9%	91.1%	86.8%	84.7%	86.6%	92.0%	98.7%	99.4%	99.2%	98.5%	98.0%	98.1%	97.5%	
EIP: treatment started <2 weeks (local target) (3 month rolling)	Provisional	56%	74.2%	79.9%	82.7%	83.0%	81.7%	82.0%	84.6%	83.5%	93.2%	88.4%	72.1%	70.7%	67.1%	
CYP: eating disorders - Urgent (seen in 1 wk) (3 month rolling)	Provisional	90%	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%	
CYP: eating disorders - Routine (seen in 4 wks) (3 month rolling)	Provisional	90%	89.7%	79.3%	80.0%	85.7%	73.9%	64.0%	58.3%	84.2%	100.0%	95.5%	96.0%	90.5%	83.3%	
Out of area placements (bed days - 18-65, in month)	Provisional	-	460	625	755	755	765	1,100	1,025	1,421	1,715	1,440	1,369	1,704	1,176	
Out of area placements (bed days - 65+, in month)	Provisional	-	65	50	30	0	30	45	105	16	0	31	73	87	31	
Dementia diagnosis (non-NSFT)	Validated	66.7%	62.8%	64.2%	63.3%	63.5%	63.5%	63.4%	63.4%	64.1%	63.6%	63.8%	64.1%	64.3%	64.2%	
Primary and Community Metrics																
Proportion of older people still at home 91 days after discharge	Validated	90%	86.9%	86.6%	86.6%	86.4%	84.1%	90.0%	85.7%	86.1%	78.9%	81.8%	84.2%	85.7%		
18 Week 'Incomplete' Waiting Times	Validated	92%	87.3%	87.9%	89.3%	87.9%	86.4%	88.6%	89.9%	90.8%	91.8%	93.3%	94.8%	95.6%		

STP High Level System Dashboard - JPUH














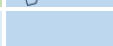

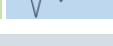












Metrics	Status of latest data	Current target	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Trend
Unplanned Care Performance Metrics																
A&E 4 hr performance (whole trust)	Validated	95%	91.4%	92.7%	90.3%	94.3%	87.2%	84.7%	80.1%	83.7%	86.4%	90.1%	89.9%	86.0%	86.2%	
A&E Total Attendances (as above)	Validated	-	7,401	6,561	6,617	6,266	6,541	6,613	6,046	6,978	7,041	7,133	7,040	7,710	7,775	
A&E Total Breaches (as above)	Validated	-	633	481	641	358	834	1,012	1,203	1,140	960	705	713	1,075	1,088	
Emergency admissions (N&W CCGs only)	Validated	-	1,569	1,476	1,603	1,635	1,683	1,671	1,623	1,699	1,615	1,603	1,410	1,699		
Delayed transfers of care (DTOC) - delayed days as % of occupied bed days	Validated	3.5%	3.9%	1.8%	1.5%	3.0%	1.0%	2.2%	1.4%	1.2%	0.8%	1.1%	1.5%	1.5%	1.5%	
# DTOC - NHS (Norfolk patients)	Validated	-	105	42	39	42	7	48	35	28	0	21	42	56	35	
# DTOC - Social Care (Norfolk patients)	Validated	-	328	155	141	296	98	215	126	126	92	105	133	126	133	
# DTOC - Both NHS / Social Care (Norfolk patients)	Validated	-	0	0	0	0	7	14	0	0	0	0	0	0	7	
% of A&E Ambulance handover delays > 60 min	Validated	-	0.5%	0.3%	0.5%	0.0%	1.1%	2.6%	7.1%	5.5%	1.2%	0.4%	0.1%	4.0%	2.8%	
Cancer Performance Metrics																
Two week wait GP referral (%)	Provisional at 20/09/19	93%	94.4%	97.4%	97.5%	96.4%	97.4%	94.5%	94.1%	90.9%	94.6%	84.0%	85.3%	94.3%	92.1%	
Two week wait breast symptoms (%)	Provisional at 20/09/19	93%	96.8%	96.7%	95.8%	96.3%	93.4%	87.2%	82.5%	62.7%	88.9%	47.7%	73.0%	85.2%	69.8%	
31 days from diagnosis to first treatment (%)	Provisional at 20/09/19	96%	99.2%	100.0%	100.0%	100.0%	98.9%	100.0%	100.0%	100.0%	99.0%	100.0%	99.1%	99.1%	98.1%	
31 days subsequent treatment - surgery (%)	Provisional at 20/09/19	94%	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%	
31 days subsequent treatment - drug treatment (%)	Provisional at 20/09/19	98%	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%	
31 days subsequent treatment - radiotherapy (%)	Provisional at 20/09/19	94%	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	
62 days from GP referral to first treatment (%)	Provisional at 20/09/19	85%	79.3%	85.6%	86.7%	87.0%	83.5%	80.7%	78.3%	89.8%	89.8%	73.1%	76.3%	65.8%	83.3%	
62 days from screening to first treatment (%)	Provisional at 20/09/19	90%	100.0%	100.0%	90.9%	100.0%	92.3%	96.3%	100.0%	100.0%	100.0%	100.0%	95.5%	100.0%	88.9%	
Planned Care Performance Metrics																
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	86.9%	86.9%	87.1%	87.5%	85.7%	83.8%	84.0%	84.4%	83.0%	82.6%	83.5%	81.9%	81.5%	
Total number incomplete pathways	Validated	-	13,269	13,191	12,904	13,211	13,073	13,117	13,101	12,904	12,673	13,038	13,254	13,105	13,454	
Total number of 40 week breaches	Validated	-	116	84	43	26	36	42	48	48	32	52	46	36	37	
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	1	0	0	0	0	0	0	0	0	2	0	0	0	
Diagnostic tests within 6 weeks	Validated	99%	99.8%	100.0%	99.8%	99.9%	99.1%	98.5%	99.3%	99.4%	99.2%	98.9%	99.1%	99.4%	99.4%	
Number of patients waiting > 6 weeks	Validated	-	7	1	7	2	29	51	27	23	30	45	36	24	51	
GP acute referrals (all CCGs)	Validated	-	3,766	3,537	4,133	4,008	3,133	3,997	3,725	3,911	3,742	4,009	3,582	3,947	3,651	
Non-GP acute referrals (all CCGs)	Validated	-	2,540	2,326	2,619	2,611	2,156	2,648	2,276	2,746	2,490	2,633	2,323	2,939	2,113	
Avoidable emergency admissions (N&W CCGs only)	Validated	-	426	378	446	490	594	549	543	517	470	430	382	446		

STP High Level System Dashboard - NNUH



Metrics	Status of latest data	Current target	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Trend
Unplanned Care Performance Metrics																
A&E 4 hr performance (whole trust, inc. WIC)	Validated	95%	87.7%	86.3%	88.9%	85.6%	82.5%	77.1%	76.0%	76.9%	72.7%	82.1%	80.1%	80.6%	78.1%	
A&E Total Attendances (as above)	Validated	-	17,857	16,800	16,973	16,425	16,764	16,829	15,847	17,264	16,900	18,046	17,194	18,727	18,256	
A&E Total Breaches (as above)	Validated	-	2,196	2,307	1,879	2,367	2,936	3,852	3,800	3,992	4,606	3,239	3,426	3,624	3,998	
Emergency admissions (N&W CCGs only)	Validated	-	4,259	4,093	4,481	4,313	4,401	4,649	4,006	4,468	4,373	4,383	4,321	4,537	4,301	
Delayed transfers of care (DTOC) - delayed days as % of occupied bed days	Provisional	3.5%	4.7%	5.0%	4.3%	3.3%	3.8%	4.0%	2.2%	3.1%	2.7%	4.2%	3.4%	4.1%	4.4%	
# DTOC - NHS (Norfolk patients)	Provisional	-	628	533	326	274	281	429	262	354	298	247	253	314	466	
# DTOC - Social Care (Norfolk patients)	Provisional	-	530	644	739	500	564	686	267	514	380	830	534	666	637	
# DTOC - Both NHS / Social Care (Norfolk patients)	Provisional	-	27	47	47	55	132	0	26	7	32	65	119	147	108	
% of A&E Ambulance handover delays > 60 min	Validated	-	10.3%	11.0%	5.0%	12.9%	16.4%	18.6%	15.0%	2.1%	2.8%	0.3%	2.3%	2.3%	2.3%	
Cancer Performance Metrics																
Two week wait GP referral (%)	Provisional	93%	81.2%	68.5%	71.9%	67.0%	88.1%	84.4%	88.1%	87.0%	94.9%	93.0%	79.7%	76.3%	72.2%	
Two week wait breast symptoms (%)	Provisional	93%	96.1%	97.9%	98.1%	44.9%	28.6%	36.5%	28.4%	47.1%	98.6%	94.2%	92.5%	96.7%	96.3%	
31 days from diagnosis to first treatment (%)	Provisional	96%	96.2%	96.4%	94.7%	96.6%	97.0%	93.3%	96.6%	96.6%	96.5%	96.9%	97.4%	98.9%	96.9%	
31 days subsequent treatment - surgery (%)	Provisional	94%	83.5%	77.8%	79.8%	86.4%	84.5%	79.0%	89.6%	83.9%	83.0%	84.2%	88.8%	89.0%	86.5%	
31 days subsequent treatment - drug treatment (%)	Provisional	98%	100.0%	100.0%	99.4%	100.0%	99.0%	98.5%	99.2%	99.2%	99.1%	98.4%	98.2%	99.2%	98.0%	
31 days subsequent treatment - radiotherapy (%)	Provisional	94%	98.4%	97.7%	97.2%	98.9%	97.4%	94.5%	100.0%	95.3%	96.6%	97.0%	96.3%	96.4%	97.3%	
62 days from GP referral to first treatment (%)	Provisional	85%	75.8%	72.0%	70.8%	71.5%	73.5%	62.9%	71.7%	68.2%	76.3%	76.5%	75.6%	73.5%	66.2%	
62 days from screening to first treatment (%)	Provisional	90%	93.6%	78.3%	66.7%	81.0%	81.4%	89.8%	82.9%	96.8%	84.6%	82.6%	79.5%	72.6%	93.9%	
Planned Care Performance Metrics																
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	84.3%	83.1%	82.6%	82.6%	81.9%	82.1%	82.5%	82.8%	82.6%	83.9%	83.5%	82.9%	81.8%	
Total number incomplete pathways	Validated	-	42,000	42,053	42,460	41,864	41,444	40,979	41,120	41,328	42,159	43,390	43,625	44,493	45,227	
Total number of 40 week breaches	Validated	-	456	483	423	429	465	466	465	455	485	552	559	557	667	
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	8	15	16	21	28	28	12	0	0	0	0	1	0	
Diagnostic tests within 6 weeks	Validated	99%	99.1%	99.1%	99.0%	99.1%	97.6%	93.5%	97.7%	98.8%	97.5%	96.8%	98.2%	98.9%	96.9%	
Number of patients waiting > 6 weeks	Validated	-	93	93	101	98	256	769	287	142	290	382	210	129	348	
GP acute referrals (all CCGs)	Provisional	-	10,095	9,575	10,888	10,648	8,993	10,706	10,229	10,942	10,682	11,377	10,305	11,633	10,662	
Non-GP acute referrals (all CCGs)	Provisional	-	5,051	4,987	5,842	5,889	4,764	5,850	5,278	5,791	5,442	5,763	5,376	5,966	5,559	
Avoidable emergency admissions (N&W CCGs only)	Validated	-	815	853	992	1,060	1,110	1,226	1,067	1,105	1,026	982	927	924	880	

STP High Level System Dashboard - QEH

Metrics	Status of latest data	Current target	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Trend
Unplanned Care Performance Metrics																
A&E 4 hr performance (whole trust)	Validated	95%	82.0%	82.1%	84.0%	78.1%	84.0%	74.9%	77.3%	82.0%	84.7%	83.8%	84.7%	81.1%	79.0%	
A&E Total Attendances (as above)	Validated	-	6,051	5,672	5,572	5,640	5,678	5,681	5,311	5,984	5,950	6,031	6,068	6,309	6,299	
A&E Total Breaches (as above)	Validated	-	1,087	1,013	889	1,236	909	1,428	1,203	1,079	912	977	930	1,191	1,325	
Emergency admissions (N&W CCGs only)	Validated	-	2,061	1,969	2,043	2,202	2,085	2,275	1,949	2,227	2,141	2,233	2,170	2,146	1,998	
Delayed transfers of care (DTOC) - delayed days as % of occupied bed days	Validated	3.5%	2.0%	2.8%	2.6%	2.4%	2.5%	1.4%	1.3%	1.4%	1.2%	1.5%	1.9%	1.3%	0.9%	
# DTOC - NHS (Norfolk patients)	Validated	-	255	277	274	249	242	142	120	138	118	160	200	109	65	
# DTOC - Social Care (Norfolk patients)	Validated	-	6	73	47	33	73	41	32	42	27	37	37	62	44	
# DTOC - Both NHS / Social Care (Norfolk patients)	Validated	-	0	0	0	0	0	0	0	0	0	0	0	0	0	
% of A&E Ambulance handover delays > 60 min	Validated	-	14.3%	12.1%	11.6%	18.1%	13.3%	22.0%	20.2%	18.6%	14.6%	14.2%	15.2%	16.6%	11.9%	
Cancer Performance Metrics																
Two week wait GP referral (%)	Provisional	93%	94.6%	93.2%	98.3%	97.3%	97.4%	95.9%	95.1%	86.0%	81.0%	91.9%	95.9%	96.7%	95.9%	
Two week wait breast symptoms (%)	Provisional	93%	95.6%	98.5%	96.9%	100.0%	100.0%	91.3%	86.3%	29.8%	20.9%	66.1%	83.3%	91.5%	96.2%	
31 days from diagnosis to first treatment (%)	Provisional	96%	97.5%	97.3%	97.7%	96.2%	98.8%	97.2%	95.3%	96.5%	96.1%	93.2%	100.0%	97.2%	98.0%	
31 days subsequent treatment - surgery (%)	Provisional	94%	100.0%	100.0%	100.0%	92.9%	100.0%	100.0%	100.0%	100.0%	92.3%	100.0%	100.0%	100.0%	83.3%	
31 days subsequent treatment - drug treatment (%)	Provisional	98%	100.0%	100.0%	97.9%	98.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
31 days subsequent treatment - radiotherapy (%)	Provisional	94%	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	0 pts.	
62 days from GP referral to first treatment (%)	Provisional	85%	80.7%	80.3%	85.9%	82.4%	80.0%	79.7%	74.6%	85.9%	70.9%	63.7%	81.1%	75.8%	64.2%	
62 days from screening to first treatment (%)	Provisional	90%	93.3%	96.0%	100.0%	85.0%	100.0%	100.0%	92.3%	100.0%	100.0%	100.0%	100.0%	94.1%	100.0%	
Planned Care Performance Metrics																
Incomplete - RTT % waiting treatment <18 weeks	Validated	92%	83.7%	81.2%	79.9%	80.1%	78.5%	78.8%	79.5%	79.8%	80.4%	82.5%	81.8%	81.1%	80.7%	
Total number incomplete pathways	Validated	-	15,444	15,584	15,802	15,492	15,473	14,887	14,081	13,562	13,691	13,758	13,630	14,469	13,814	
Total number of 40 week breaches	Validated	-	158	189	185	194	269	250	168	130	136	96	92	81	78	
Incomplete - RTT no. waiting treatment >52 weeks	Validated	0	5	7	1	1	1	1	1	0	0	0	0	0	0	
Diagnostic tests within 6 weeks	Validated	99%	99.4%	99.4%	99.5%	99.3%	99.3%	99.0%	99.5%	99.6%	99.1%	95.5%	96.4%	94.8%	90.9%	
Number of patients waiting > 6 weeks	Validated	-	18	15	14	22	21	32	18	13	32	161	139	200	362	
GP acute referrals (all CCGs)	Validated	-	3,135	3,025	3,356	3,286	2,571	3,295	3,052	3,337	2,848	3,414	3,197	3,610	4,071	
Non-GP acute referrals (all CCGs)	Validated	-	1,673	1,599	1,949	1,739	1,460	1,899	1,735	1,919	1,756	1,892	1,825	1,886	2,502	
Avoidable emergency admissions (N&W CCGs only)	Validated	-	470	473	481	565	527	591	526	532	490	489	451	445	450	

STP High Level System Dashboard - data sources, notes and caveats

Metrics	Data sources, notes and caveats
Unplanned Care Performance Metrics	
A&E 4 hr performance	<i>Source: A&E Attendances and Emergency Admissions, NHS England</i> Comprises whole provider figures including MIU and WIC for NNUH. Apr-18 NNUH figures adjusted using local WIC data as the nationally published figures did not include WIC.
A&E Total Attendances (as above)	
A&E Total Breaches (as above)	
Emergency admissions (N&W CCGs only)	<i>Source: SUS+.</i> Only includes activity from the five N&W CCGs. JPUH emergency admissions exclude admissions identified as having been treated within the Ambulatory Care Unit.
Delayed transfers of care (DTC) - % of delayed days vs available bed days	<i>Sources: Monthly Delayed Transfers of Care Data, NHS England & Bed Availability and Occupancy Data – Overnight, NHS England</i> Norfolk only.
# DTC - NHS	There is no official denominator to agree DTC rates, so the latest KH03 quarterly return for overnight occupied beds has been used. As such these figures will not reconcile with any other reported figures.
# DTC - Social Care	Prior to Jun-18, JPUH were only submitting delay codes to NHS delays and not including social care.
# DTC - Both NHS / Social Care	
% of Ambulance handover delays - 60 min	<i>Source: Contract Files, East of England Ambulance Service NHS Trust</i> It's important to note that there is a discrepancy between EEAST and QEH views of handover delays at QEH.
Cancer Performance Metrics	
Two week wait GP referral (%)	<i>Source: Cancer Waiting Times, NHS England</i> Figures for the most recent month are submitted directly by providers and are provisional only.
Two week wait breast symptoms (%)	Comprises whole provider figures.
31 days from diagnosis to first treatment (%)	
31 days subsequent treatment - surgery (%)	
31 days subsequent treatment - drug treatment (%)	
31 days subsequent treatment - radiotherapy (%)	
62 days from GP referral to first treatment (%)	
62 days from screening to first treatment (%)	
Planned Care Performance Metrics	
Incomplete - RTT % waiting treatment <18 weeks	<i>Source: Consultant-led Referral to Treatment Waiting Times, NHS England</i> Comprises whole provider figures.
Total number incomplete pathways	
Total number of 40 week breaches	
Incomplete - RTT no. waiting treatment >52 weeks	
Diagnostic tests within 6 weeks	<i>Source: Monthly Diagnostics Data, NHS England</i> Comprises whole provider figures.
Number of patients waiting > 6 weeks	
GP acute referrals (all CCGs)	<i>Source: Monthly Activity Return, NHS England</i> Includes activity from all CCGs to afford a whole provider view.
Non-GP acute referrals (all CCGs)	
Avoidable emergency admissions (N&W CCGs only)	<i>Source: SUS+.</i> Only includes activity from the five N&W CCGs. JPUH emergency admissions exclude admissions identified as having been treated within the Ambulatory Care Unit. Avoidable Admissions have not been aggregated to STP level for the latest month due to low clinical coding completeness at JPUH, which shows an artificial reduction.
Mental Health Metrics	
IAPT: access rates (local target)	<i>Source: NSFT PI01 – Dashboard.</i> 2018/19: 16.8% locally agreed target; 2019/20: 19% locally agreed target. Clarification required around 19/20 locally agreed target.
IAPT: recovery rates	<i>Source: NSFT PI01 – Dashboard.</i> 50% national target. Also published nationally - local data more timely
IAPT: first treatment <6 weeks	<i>Source: NSFT PI01 – Dashboard.</i> 75% national target. Also published nationally - local data more timely.
EIP: treatment started <2 weeks (local target)	<i>Source: NSFT PI01 – KPI Monitoring Report Norfolk and Waveney.</i> RAG rated against 2018/19 - 53%; 2019/20 - 56% national target. Also published nationally - local data more accurate
CYP: eating disorders - Urgent (seen in 1 wk)	<i>Source: NSFT PI01 – KPI Monitoring Report Norfolk and Waveney.</i> RAG rated against 90% local target. Also published nationally - local data more accurate
CYP: eating disorders - Routine (seen in 4 wks)	
Out of area placements (bed days - 18-65, in month)	<i>Source: NSFT PI07B – Dashboard.</i> Trajectory to be agreed. Apr-18 to Feb-19 Nationally Published, Mar-19 onwards NSFT report.
Out of area placements (bed days - 65+, in month)	Data reconciliation project currently in progress with NSFT.
Dementia diagnosis	<i>Source: NHS Digital Dementia Diagnosis publication</i> - based on NHS Digital Reports that are taken from the GP's QOF register.