

# Quality and Safety, Workforce, Finance, Research and Development and Operational Performance Integrated Report

February-2021

Produced March-2021



**The Board Assurance Framework is structured around the Trust's three Strategic Goals:**

To deliver safe and high quality patient care as part of an integrated system

To support an engaged, healthy and resilient workforce

To ensure financial stability

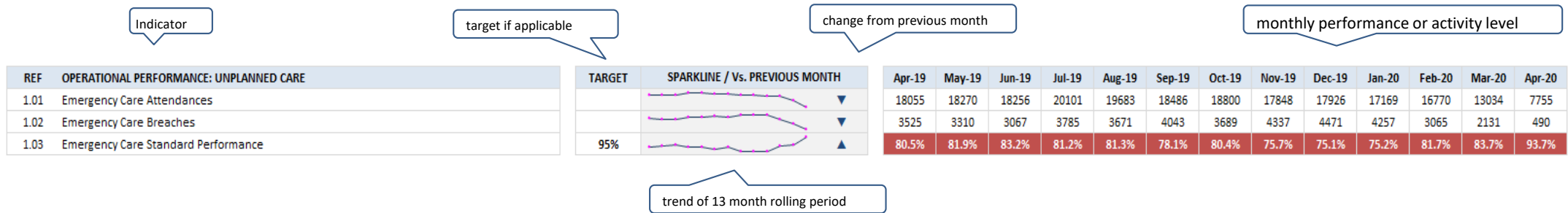
Report produced by:  
**Information Team**

# Integrated Performance Report : February-2021

## Understanding the Report

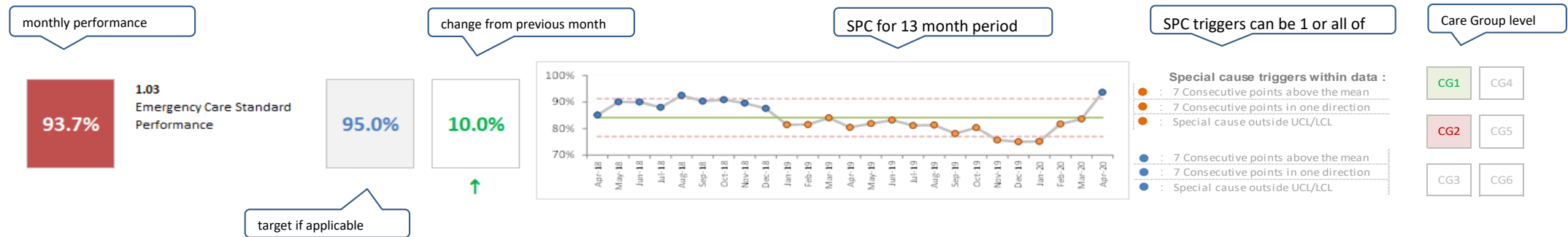
### 1. Operational Performance Summary

This section provides a summary of key performance targets for NHSI, Quality, Workforce and Finance, plus activity data. The target is either the monthly standard and performance is coloured according to achievement. This should be read in conjunction with overall trends and not taken in isolation. The table will show performance for a 13 month rolling period, which is also displayed in the snapshot overview. Change from previous month is displayed using arrow, but again this must be read in conjunction with trend analysis.



### 2. Focus Sections

This section provides a summary of key performance targets for NHSI, Quality, Workforce and Finance, plus activity data. The target is either the monthly standard and performance is coloured according to achievement. This should be read in conjunction with overall trends and not taken in isolation. The table will show performance for a 13 month rolling period, which is also displayed in the snapshot overview. Change from previous month is displayed using an arrow, but again this must be read in conjunction with trend analysis. There is also a Red/Green indicator to ascertain where the Care Group is passing/failing target at a service level, where applicable.



# QUALITY AND SAFETY REPORT

February-2021

Produced March-2021



**The Board Assurance Framework is structured around the Trust's three Strategic Goals:**

To deliver safe and high quality patient care as part of an integrated system

To support an engaged, healthy and resilient workforce

To ensure financial stability

Report produced by:  
**Information Team**

# Quality and Safety Report: February-2021

## Executive Summary

### **Trust Strategic Goals:**

- to deliver safe and high quality patient care as part of an integrated system
- to support an engaged, healthy and resilient workforce
- to ensure financial sustainability

### **Purpose of the Report:**

To provide the Board with an integrated overview of Quality and Safety indicators within the Trust

### **Executive Summary:**

#### Key discussion points for the Board are:

14 hour post take in both York and Scarborough has improved in February 2021; York having a 3.0% and Scarborough a 3.4% improvement. NEWS within 1 hour at Scarborough as improved this months by 2.5% to 87.1%; Scarborough maintains its compliance above 90% for the entire 2 year reporting period. The number of cardiac arrests remain low on both sites. The calls to outreach remain stable across both sites and are consistent with Pre COVID levels. There were 122 medication incident reported in February. There was one incident of moderate harm. In February 2021 the top 3 causes of death were Covid 19, Pneumonia and Sepsis. There were 46 deaths recorded as 1a Covid 19. In February, overall deaths reduced in the Emergency Department, the Acute Sites and in the Community. The incidence of both pressure ulcers and falls has reduced in month, reflecting a reduction in activity and patient acuity associated with the pandemic.

### **Recommendation:**

The Board is asked to receive the report and note any actions being taken.

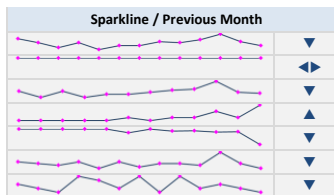
Author(s): Caroline Johnson, Deputy Head of Patient Safety & Governance  
Liam Wilson, Lead Nurse Patient Safety

Director Sponsor: James Taylor, Medical Director  
Heather McNair, Chief Nurse

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY SUMMARY: (i)

| REF  | SERIOUS INCIDENTS (data is based on SI declaration date except given final report )                |
|------|--|
| 1.01 | Number of SI's reported  |
| 1.02 | % SI's notified within 2 working days of SI being identified                                       |
| 1.03 | Number of SIs where Duty of Candour is Applicable (Moderate or Above Harm)                         |
| 1.04 | Number of SIs Where Stage 2 (Written) Duty Of Candour is Outstanding (Moderate or Above Harm)      |
| 1.05 | % Compliance with Stage 2 (Written) Duty of Candour for Serious Incidents (Moderate or Above Harm) |
| 1.06 | -Invitation to be involved in Investigation (Clinical SIs Only)                                    |
| 1.07 | -Given Final Report (If Requested - Clinical SIs Only - based on Investigation End Date)*          |

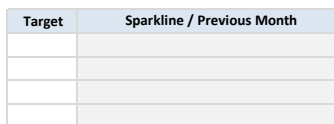


| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 13     | 9      | 4      | 9      | 2      | 6      | 6      | 10     | 9      | 12     | 18     | 10     | 6      |
| 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 100%   |
| 9      | 8      | 2      | 8      | 2      | 5      | 5      | 7      | 9      | 10     | 18     | 7      | 6      |
| 0      | 0      | 0      | 0      | 0      | 0      | 1      | 0      | 1      | 1      | 3      | 1      | 5      |
| 100%   | 100%   | 100%   | 100%   | 100%   | 100%   | 80%    | 100%   | 89%    | 90%    | 83%    | 86%    | 17%    |
| 4      | 3      | 2      | 4      | 0      | 4      | 1      | 3      | 3      | 2      | 10     | 3      | 0      |
| 2      | 1      | 0      | 4      | 3      | 1      | 4      | 0      | 4      | 1      | 2      | 1      | 0      |

\*Data for 1.07 has been refreshed for the last 13 months due to error

The harm for incidents reported within the last week of the reporting period have not been validated as investigations are ongoing. The degree of harm may change from the reporter's initial depending on the outcome of the investigation.

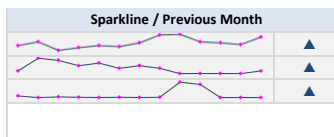
| REF  | DUTY OF CANDOUR (All Incidents - data is based on the date reported) |
|------|--|
| 1.10 | Incident Graded Moderate or Above                                    |
| 1.11 | Stage 1 - Verbal Apology Given                                       |
| 1.12 | Stage 2 - Written Apology Given                                      |
| 1.14 | % Compliance with Stage 2 (Written) Duty of Candour                  |



| TOTAL | * For Incidents Reported Between 01/03/20 and 14/02/21 |
|-------|--|
| 196   |  |
| 173   |  |
| 161   |  |
| 82.1% |  |

Note: Duty of Candour data is based on the dates incidents were reported, not the incident date, so the number of incidents graded as moderate or above harm in the DoC data may be different to those in the incident data. All harms of moderate or above are subject to ongoing validation, so degree of harm data is subject to change. In exceptional cases, it may not be possible to provide letters to patients / relatives / carers, so percentage compliance is calculated on the number of incidents where the DoC process has been signed off signed as complete.

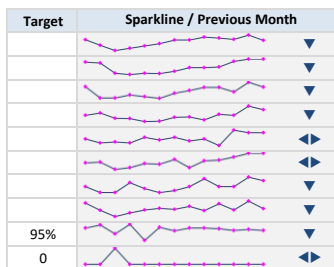
| REF  | CLAIMS                             |
|------|------------------------------------|
| 1.20 | Number of Negligence Claims        |
| 1.21 | Number of Claims settled per Month |
| 1.22 | Amount paid out per month          |
| 1.23 | Reasons for the payment            |



| Feb-20             | Mar-20             | Apr-20             | May-20             | Jun-20             | Jul-20             | Aug-20             | Sep-20             | Oct-20             | Nov-20             | Dec-20             | Jan-21             | Feb-21             |
|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| 8                  | 12                 | 3                  | 6                  | 8                  | 7                  | 11                 | 19                 | 20                 | 12                 | 11                 | 9                  | 17                 |
| 2                  | 7                  | 6                  | 4                  | 5                  | 3                  | 4                  | 3                  | 1                  | 1                  | 1                  | 1                  | 2                  |
| 1,400,000          | 245,500            | 545,000            | 325,600            | 239,000            | 285,000            | 111,000            | 415,686            | 12,500,000         | 10,654,648         | 7,500              | 14,000             | 36,500             |
| Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability | Accepted Liability |

Please note that damages data may be adjusted some time after a claim has been settled if there is a delay in agreeing a final settlement, hence data is subject to change.

| REF  | MEASURES OF HARM                                  |
|------|---|
| 1.30 | Incidents Reported                                |
| 1.31 | Incidents Awaiting Sign Off                       |
| 1.32 | Patient Falls                                     |
| 1.33 | Pressure Ulcers - Newly Developed Ulcer           |
| 1.34 | Pressure Ulcers - Deterioration of Pressure Ulcer |
| 1.35 | Pressure Ulcers - Present on Admission            |
| 1.36 | Degree of harm: serious or death                  |
| 1.37 | Medication Related Errors                         |
| 1.38 | VTE risk assessments                              |
| 1.39 | Never Events                                      |



| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1,283  | 1,050  | 824    | 925    | 1,021  | 1,115  | 1,260  | 1,262  | 1,390  | 1,354  | 1,300  | 1,480  | 1,258  |
| 902    | 871    | 500    | 453    | 502    | 484    | 570    | 697    | 700    | 725    | 920    | 1,014  | 1,010  |
| 224    | 142    | 141    | 164    | 152    | 139    | 178    | 197    | 221    | 221    | 187    | 259    | 222    |
| 97     | 108    | 81     | 80     | 65     | 67     | 87     | 89     | 74     | 102    | 97     | 144    | 125    |
| 14     | 10     | 11     | 10     | 16     | 13     | 16     | 12     | 14     | 7      | 24     | 21     | 21     |
| 133    | 137    | 104    | 111    | 130    | 127    | 148    | 112    | 142    | 146    | 159    | 177    | 177    |
| 5      | 2      | 2      | 7      | 4      | 2      | 3      | 5      | 9      | 5      | 5      | 10     | 8      |
| 143    | 102    | 67     | 88     | 104    | 114    | 108    | 125    | 100    | 139    | 105    | 155    | 112    |
| 95.2%  | 96.3%  | 93.1%  | 96.7%  | 90.7%  | 95.5%  | 94.2%  | 95.3%  | 95.2%  | 95.0%  | 94.3%  | 94.7%  | 94.4%  |
| 0      | 0      | 2      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |

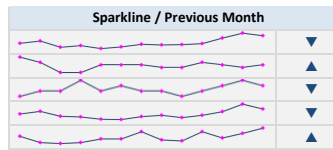
As at the beginning of November, the degree of harm is being determined by the incident reporter at the time of reporting rather than being determined during the investigation. The degree of harm may change from the reporter's initial depending on the outcome of the investigation.

VTE risk assessment performance for Jan-21 has been updated due to error

# TRUST BOARD REPORT : February-2021

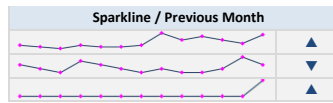
## QUALITY AND SAFETY SUMMARY: (ii)

| REF  | PRESSURE ULCERS***   |
|------|--|
| 1.40 | Number of Category 2   |
| 1.41 | Number of Category 3   |
| 1.42 | Number of Category 4   |
| 1.43 | Total no. developed/deteriorated while in our care (care of the org) - acute     |
| 1.44 | Total no. developed/deteriorated while in our care (care of the org) - community |



| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 60     | 68     | 45     | 51     | 40     | 46     | 56     | 54     | 55     | 58     | 79     | 98     | 88     |
| 6      | 4      | 0      | 0      | 3      | 3      | 3      | 2      | 2      | 4      | 3      | 2      | 3      |
| 0      | 1      | 1      | 3      | 1      | 2      | 1      | 1      | 0      | 1      | 2      | 3      | 2      |
| 80     | 94     | 69     | 66     | 53     | 52     | 67     | 74     | 62     | 73     | 92     | 131    | 106    |
| 31     | 24     | 23     | 24     | 28     | 28     | 36     | 27     | 26     | 36     | 29     | 34     | 40     |

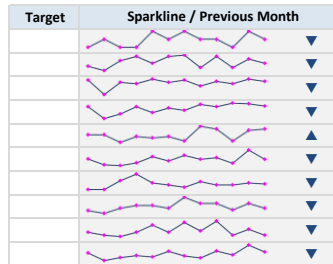
| REF  | FALLS****                          |
|------|------------------------------------|
| 1.50 | Number of falls with moderate harm |
| 1.51 | Number of falls with severe harm   |
| 1.52 | Number of falls resulting in death |



| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 2      | 1      | 0      | 2      | 1      | 1      | 2      | 9      | 5      | 7      | 5      | 3      | 8      |
| 2      | 1      | 0      | 3      | 2      | 1      | 0      | 1      | 0      | 0      | 1      | 4      | 2      |
| 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 2      |

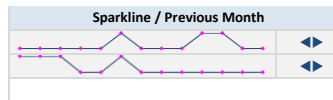
Note \*\*\* and \*\*\*\* - falls and pressure ulcers are subject to ongoing validation. The degree of harm for incidents reported within the last week of the reporting period have not been validated as investigations are ongoing. The degree of harm may change from the reporter's initial depending on the outcome of the investigation. Inpatients developing pressure ulcers in Community Hospitals are now counted in the Acute care data above (as the care they receive is the same as patients on acute wards) so this data has been recalculated. Community pressure ulcers includes the RATS and DN Teams.

| REF   | DRUG ADMINISTRATION   |
|-------|---|
| 10.20 | Medication Incidents Resulting in Moderate Harm, Serious/Severe Harm or Death |
| 10.21 | Insulin Incidents   |
| 10.22 | Antimicrobial Incidents   |
| 10.23 | Opiate Incidents  |
| 10.24 | Anticoagulant Incidents   |
| 10.25 | Missed Dose Incidents   |
| 10.26 | Discharges Incidents  |
| 10.27 | Prescribing Errors  |
| 10.28 | Preparation and Dispensing Incidents  |
| 10.29 | Administrating and Supply Incidents   |



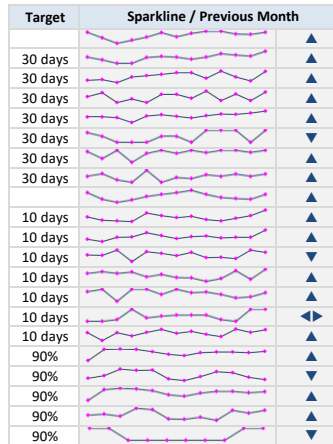
| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1      | 0      | 1      | 0      | 0      | 2      | 1      | 2      | 1      | 1      | 0      | 2      | 1      |
| 24     | 8      | 5      | 12     | 15     | 10     | 15     | 16     | 7      | 15     | 7      | 13     | 10     |
| 19     | 15     | 3      | 13     | 12     | 16     | 13     | 15     | 10     | 14     | 12     | 16     | 14     |
| 21     | 25     | 9      | 15     | 25     | 17     | 23     | 20     | 28     | 25     | 30     | 29     | 26     |
| 16     | 10     | 10     | 5      | 9      | 8      | 9      | 6      | 16     | 14     | 6      | 13     | 14     |
| 33     | 22     | 11     | 10     | 15     | 26     | 18     | 28     | 21     | 24     | 14     | 38     | 21     |
| 8      | 7      | 7      | 15     | 21     | 13     | 11     | 9      | 14     | 11     | 11     | 13     | 12     |
| 36     | 18     | 13     | 22     | 27     | 27     | 22     | 42     | 31     | 31     | 19     | 31     | 22     |
| 10     | 6      | 4      | 3      | 6      | 11     | 6      | 13     | 7      | 14     | 4      | 8      | 4      |
| 66     | 55     | 40     | 46     | 50     | 47     | 58     | 49     | 45     | 59     | 51     | 71     | 57     |

| REF  | SAFEGUARDING  |
|------|---|
| 1.70 | % of staff compliant with training (children)               |
| 1.71 | % of staff compliant with training (adult)                  |
| 1.72 | % of staff working with children who have review DBS checks |



| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 86%    | 86%    | 86%    | 86%    | 86%    | 87%    | 86%    | 86%    | 86%    | 87%    | 87%    | 86%    | 86%    |
| 88%    | 88%    | 88%    | 87%    | 87%    | 88%    | 87%    | 87%    | 87%    | 87%    | 87%    | 87%    | 87%    |

| REF  | PATIENT EXPERIENCE: COMPLAINTS, PALS AND FFT         |
|------|--|
| 2.01 | New complaints this month                            |
| 2.02 | % Complaint responses closed within target timescale |
|      | CG1  |
|      | CG2  |
|      | CG3  |
|      | CG4  |
|      | CG5  |
|      | CG6  |
| 2.03 | New PALS concerns this month                         |
| 2.04 | % PALS responses closed within target timescale      |
|      | CG1  |
|      | CG2  |
|      | CG3  |
|      | CG4  |
|      | CG5  |
|      | CG6  |
| 2.05 | FFT - York ED Recommend %                            |
| 2.06 | FFT - Scarborough ED Recommend %                     |
| 2.07 | FFT - Trust ED Recommend %                           |
| 2.08 | FFT - Trust Inpatient Recommend %                    |
| 2.09 | FFT - Trust Maternity Recommend %                    |



| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 42     | 26     | 9      | 19     | 28     | 41     | 29     | 39     | 46     | 46     | 37     | 36     | 42     |
| 57%    | 47%    | 33%    | 33%    | 56%    | 60%    | 57%    | 50%    | 58%    | 71%    | 65%    | 61%    | 81%    |
| 29%    | 32%    | 18%    | 44%    | 50%    | 55%    | 63%    | 63%    | 37%    | 71%    | 43%    | 25%    | 69%    |
| 50%    | 67%    | 25%    | 40%    | 25%    | 60%    | 60%    | 43%    | 75%    | 33%    | 61%    | 33%    | 70%    |
| 50%    | 50%    | 43%    | 0%     | 57%    | 67%    | 54%    | 40%    | 60%    | 75%    | 71%    | 82%    | 100%   |
| 80%    | 50%    | 0%     | -      | 0%     | 50%    | 50%    | 0%     | 100%   | 100%   | 100%   | -      | 100%   |
| 88%    | 33%    | 100%   | -      | 75%    | 100%   | 75%    | 100%   | 80%    | 100%   | 100%   | 83%    | 100%   |
| 50%    | 71%    | 20%    | 0%     | 100%   | 0%     | 40%    | 33%    | 63%    | 50%    | 67%    | 50%    | 67%    |
| 151    | 87     | 57     | 80     | 114    | 133    | 149    | 174    | 134    | 104    | 92     | 86     | 132    |
| 75%    | 70%    | 69%    | 68%    | 81%    | 77%    | 74%    | 76%    | 71%    | 69%    | 73%    | 77%    | 86%    |
| 62%    | 55%    | 69%    | 70%    | 83%    | 74%    | 64%    | 71%    | 73%    | 67%    | 69%    | 69%    | 92%    |
| 65%    | 64%    | 78%    | 48%    | 73%    | 69%    | 63%    | 72%    | 58%    | 59%    | 56%    | 78%    | 72%    |
| 79%    | 83%    | 79%    | 82%    | 72%    | 77%    | 71%    | 70%    | 63%    | 69%    | 85%    | 67%    | 88%    |
| 92%    | 100%   | 60%    | 100%   | 100%   | 83%    | 100%   | 88%    | 91%    | 83%    | 71%    | 75%    | 88%    |
| 71%    | 71%    | 75%    | 100%   | 79%    | 83%    | 86%    | 86%    | 86%    | 75%    | 71%    | 100%   | 100%   |
| 78%    | 58%    | 78%    | 70%    | 79%    | 87%    | 77%    | 82%    | 74%    | 68%    | 88%    | 79%    | 86%    |
| 76.8%  | 96.2%  | 97.0%  | 96.0%  | 92.2%  | 87.8%  | 85.6%  | 90.7%  | 91.7%  | 91.7%  | 90.4%  | 93.0%  | -      |
| 85.9%  | 88.9%  | 97.2%  | 95.3%  | 95.7%  | 85.1%  | 82.9%  | 87.9%  | 93.9%  | 92.6%  | 87.1%  | 83.9%  | -      |
| 78.7%  | 94.9%  | 97.1%  | 95.9%  | 93.0%  | 87.1%  | 84.8%  | 89.7%  | 92.2%  | 91.9%  | 90.0%  | 91.6%  | -      |
| 96.9%  | 97.3%  | 96.5%  | 99.6%  | 99.1%  | 95.4%  | 95.3%  | 96.1%  | 94.9%  | 98.7%  | 97.7%  | 98.8%  | -      |
| 97.7%  | 97.9%  | -      | -      | -      | -      | -      | -      | 98.7%  | 99.5%  | 99.5%  | 98.4%  | -      |

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY SUMMARY: (iii)

| REF  | CARE OF THE DETERIORATING PATIENT                     |
|------|---|
| 3.01 | 14 hour Post Take - York *                            |
| 3.02 | 14 hour Post Take - Scarborough *                     |
| 3.03 | NEWS within 1 hour of prescribed time                 |
| 3.04 | Elective admissions: EDD within 24 hours of admission |

| Target | Sparkline / Previous Month |
|--------|----------------------------|
| 90%    |                            |
| 90%    |                            |
| 90%    |                            |
| 93%    |                            |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 81%    | 83%    | 84%    | 81%    | 83%    | 82%    | 80%    | 80%    | 83%    | 83%    | 81%    | 79%    | 82%    |
| 77%    | 77%    | 68%    | 71%    | 75%    | 74%    | 69%    | 70%    | 78%    | 80%    | 77%    | 78%    | 81%    |
| 90.5%  | 90.1%  | 90.4%  | 91.0%  | 92.8%  | 93.3%  | 93.1%  | 92.7%  | 92.4%  | 92.8%  | 92.0%  | 88.3%  | 89.6%  |
| 91.7%  | 89.4%  | 91.5%  | 83.4%  | 93.9%  | 96.2%  | 94.1%  | 90.1%  | 92.2%  | 93.3%  | 93.2%  | 93.9%  | 94.8%  |

\* Data includes non-elective inpatients only, excludes Maternity, and excludes patients only admitted to the Patient Lounge. The numerator (those included as having had a Senior Review within 14hrs) includes any patient who has been marked on CPD as having had a Senior Review (post take still required) or Post Take Completed within 14 hours of admission time. It also includes any patients who have had a Length of Stay less than 14hrs.

| REF   | MORTALITY INFORMATION                             |
|-------|---|
| 10.33 | Summary Hospital Level Mortality Indicator (SHMI) |

| Target | Sparkline / Previous Month |
|--------|----------------------------|
| 1.00   |                            |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1.00   | 1.00   | 1.00   | 0.99   | 0.99   | 0.99   | 0.99   | 0.99   | 1.00   | 0.99   | 0.99   | 0.99   | -      |

| REF  | 4AT ASSESSMENT |
|------|----------------|
| 5.01 | 4AT Screening  |

| Target | Sparkline / Previous Month |
|--------|----------------------------|
| 90%    |                            |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 81.9%  | 75.8%  | 72.5%  | 85.7%  | 85.9%  | 67.4%  | 63.6%  | 58.7%  | 60.0%  | 59.4%  | 58.8%  | 54.8%  | 53.4%  |

| REF  | INFECTION PREVENTION  |
|------|---|
| 6.01 | Clostridium Difficile - meeting the C.Diff objective              |
| 6.02 | Clostridium Difficile - meeting the C.Diff objective - cumulative |
| 6.03 | MRSA - meeting the MRSA objective                                 |
| 6.04 | MSSA  |
| 6.05 | MSSA - cumulative   |
| 6.06 | ECOLI   |
| 6.07 | ECOLI - cumulative  |
| 6.08 | Klebsiella  |
| 6.09 | Klebsiella - cumulative   |
| 6.10 | Pseudomonas   |
| 6.11 | Pseudomonas - cumulative  |
| 6.12 | MRSA Screening - Elective   |
| 6.13 | MRSA Screening - Non Elective                                     |

| Target*   | Sparkline / Previous Month |
|-----------|----------------------------|
| 61 (year) |                            |
| 0         |                            |
| 30 (year) |                            |
| 61 (year) |                            |
| 95%       |                            |
| 95%       |                            |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 10     | 7      | 7      | 2      | 2      | 7      | 7      | 11     | 4      | 11     | 6      | 10     | 5      |
| 129    | 136    | 7      | 9      | 11     | 18     | 25     | 36     | 40     | 51     | 57     | 67     | 72     |
| 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |
| 2      | 5      | 5      | 6      | 2      | 1      | 3      | 4      | 6      | 7      | 11     | 7      | 7      |
| 42     | 47     | 5      | 11     | 13     | 14     | 17     | 21     | 27     | 34     | 45     | 52     | 59     |
| 6      | 8      | 14     | 8      | 10     | 18     | 13     | 9      | 23     | 14     | 6      | 20     | 7      |
| 63     | 71     | 14     | 22     | 32     | 50     | 63     | 72     | 95     | 109    | 115    | 135    | 142    |
| 2      | 1      | 1      | 2      | 4      | 7      | 4      | 8      | 7      | 4      | 4      | 6      | 6      |
| 22     | 23     | 1      | 3      | 7      | 14     | 18     | 26     | 33     | 37     | 41     | 47     | 53     |
| 1      | 1      | 4      | 0      | 1      | 2      | 1      | 2      | 2      | 3      | 0      | 3      | 2      |
| 22     | 23     | 4      | 4      | 5      | 7      | 8      | 10     | 12     | 15     | 15     | 18     | 20     |
| 84.41% | 90.23% | 74.47% | 89.47% | 80.00% | 73.47% | 82.47% | 86.44% | 83.08% | 79.49% | 78.15% | 82.46% | 81.34% |
| 90.01% | 86.54% | 88.42% | 91.06% | 93.29% | 90.23% | 92.42% | 91.12% | 92.12% | 89.59% | 89.78% | 87.57% | 90.04% |

\* Thresholds to be confirmed for 2020-21 for MSSA, ECOLI and C-DIFF.  
From April 2020 - PHE change of definitions for Trust attributed cases - reported cases include any patient positive within 28 days of last discharge

| REF           | STROKE  |
|---------------|---|
| 7.01          | Proportion of patients who experience a TIA who are assessed & treated within 24 hrs  |
| 7.02          | Proportion of stroke patients with new or previously diagnosed AF who are anti-coagulated on discharge or have a plan in the notes or discharge letter after anti-coagulation |
| SSNAP Scores: |   |
| 7.03          | Proportion of patients spending >90% of their time on stroke unit   |
| 7.04          | Scanned within 1 hour of arrival  |
| 7.05          | Scanned within 12 hours of arrival  |

| Target | Sparkline / Previous Month |
|--------|----------------------------|
| 75%    |                            |
|        |                            |
| 85%    |                            |
| 43%    |                            |
| 90%    |                            |

| Feb-20     | Mar-20 | Apr-20    | May-20    | Jun-20    | Jul-20     | Aug-20 | Sep-20 | Oct-20    | Nov-20    | Dec-20    | Jan-21    | Feb-21    |
|------------|--------|-----------|-----------|-----------|------------|--------|--------|-----------|-----------|-----------|-----------|-----------|
| 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%    | 100.0%    | 100.0%     | 100.0% | 100.0% | 100.0%    | 100.0%    | 100.0%    | 100.0%    | -         |
| Jan-Mar 20 |        | Apr-20*   | May-20*   | Jun-20*   | Jul-Sep 20 |        |        | Oct-20    | Nov-20    | Dec-20    | Jan-21    | Feb-21    |
| 89.3% (B)  |        | 77.5% (D) | 80% (C)   | 88.1% (B) | 85.6% (B)  |        |        | 86.5% (B) | 89.9% (B) | 85.7% (B) | 72.9% (E) | 90.6% (A) |
| 58.9% (A)  |        | 70% (A)   | 60.2% (A) | 63.1% (A) | 51.9% (A)  |        |        | 55.6% (A) | 56.3% (A) | 59% (A)   | 65.5% (A) | 55% (A)   |
| 96.6% (A)  |        | 96.6% (A) | 97% (A)   | 93.4% (B) | 95.3% (A)  |        |        | 100% (A)  | 97.2% (A) | 97.6% (A) | 94.5% (B) | 92.5% (B) |

\*COVID data set for the period April to June 2020. The full SSNAP data set is now being used.  
The latest month's SSNAP data is subject to change due to casenote delays and patients not yet being discharged. The January figures for the 90% time in Stroke services are low because unfortunately the acute stroke unit at York had a COVID outbreak which meant the SSNAP Data Administrators were not allowed up on to the clinical ward to start records. Also the ward was only taking potential Thrombolysis patients, so many stroke patients initially were admitted to other wards and therefore were not admitted to Stroke services in a timely manner.

| REF  | DOLS  |
|------|---|
| 8.01 | Standard Authorisation Status Unknown: Local Authority not informed the Trust of outcome  |
| 8.02 | Standard Authorisation Not Required: Patient no longer in Trust's care and within 7 day self-authorisation                          |
| 8.03 | Under Enquiry: Safeguarding Adults team reviewing progress of application with Local Authority or progress with ward                |
| 8.04 | Standard Authorisation Granted: Local Authority granted application   |
| 8.05 | Application Not Granted: Local Authority not granted application  |
| 8.06 | Application Unallocated as Given Local Authority Prioritisation: Local Authority confirmed receipt but not yet actioned application |
| 8.07 | Safeguarding Adults concerns reported to the Local Authority against the Trust  |
| 8.08 | Application Withdrawn: Patient no longer in Trust's care within the Local Authority 8 week period for assessment                    |

| Target | Sparkline / Previous Month |
|--------|----------------------------|
|        |                            |
|        |                            |
|        |                            |
|        |                            |
|        |                            |
|        |                            |
|        |                            |
|        |                            |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1      | 8      | 2      | 0      | 10     | 28     | 1      | 1      | 4      | 8      | 6      | 9      | 5      |
| 21     | 22     | 12     | 23     | 23     | 0      | 6      | 31     | 19     | 54     | 25     | 34     | 34     |
| 14     | 1      | 2      | 7      | 14     | 9      | 24     | 9      | 20     | 17     | 14     | 8      | 21     |
| 1      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 1      |
| 0      | 0      | 1      | 0      | 0      | 0      | 1      | 0      | 0      | 0      | 0      | 0      | 0      |
| 16     | 18     | 9      | 19     | 25     | 36     | 20     | 10     | 9      | 10     | 6      | 14     | 10     |
| 5      | 3      | 3      | 21     | 6      | 4      | 3      | 6      | 6      | 11     | 4      | 8      | 8      |
| 14     | 0      | 1      | 0      | 0      | 1      | 15     | 9      | 10     | 11     | 13     | 9      | 7      |

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY SUMMARY: (iv) QUANTITATIVE TABLE

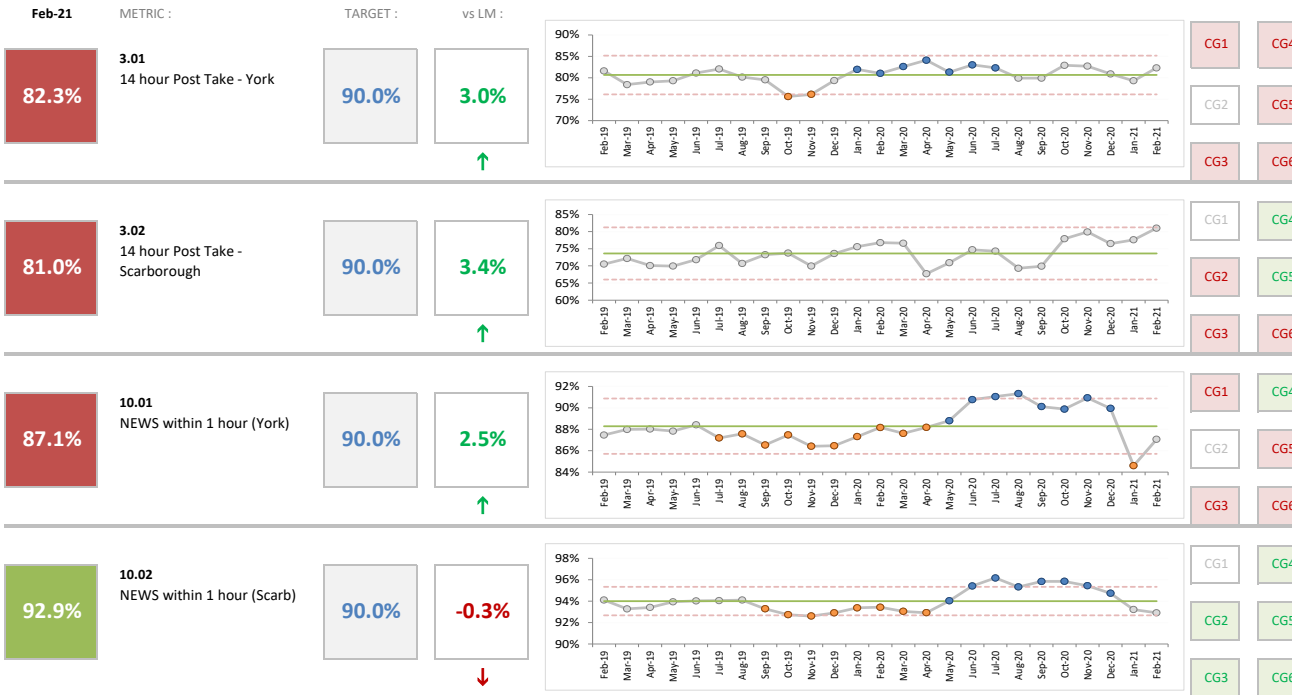
| REF  | Indicator  | Consequence of Breach  | Threshold                               | Sparkline / Previous Month  | Q4 19/20 | Q1 20/21 | Q2 20/21 | Q3 20/21 | Nov-20  | Dec-20  | Jan-21  | Feb-21  |
|------|--|--|---|---|----------|----------|----------|----------|---------|---------|---------|---------|
| 9.01 | All Patients who have operations cancelled, on or after the day of admission (including the day of surgery), for non-clinical reasons to be offered another binding date within 28 days* | Non-payment of costs associated with cancellation and re-scheduled episode of care | 0                                       |   | 20       | -        | -        | -        | -       | -       | -       | -       |
| 9.02 | No urgent operation should be cancelled for a second time*   | £5,000 per incidence in the relevant month   | 0                                       |   | 0        | -        | -        | -        | -       | -       | -       | -       |
| 9.03 | Sleeping Accommodation Breach  | £250 per day per Service User affected   | 0                                       |   | 7        | 0        | 0        | 8        | 0       | 1       | 4       | 8       |
| 9.04 | % Compliance with WHO safer surgery checklist  | No financial penalty   | 100.00%                                 |   | 100.00%  | 100.00%  | 100.00%  | 100.00%  | 100.00% | 100.00% | 100.00% | 100.00% |
| 9.05 | Completion of a valid NHS Number field in mental health and acute commissioning data sets submitted via SUS, as defined in Contract Technical Guidance                                   | £10 fine per patient below performance tolerance                                   | 99.00%                                  |   | 99.89%   | 99.95%   | 99.91%   | 99.93%   | 99.96%  | 99.91%  | 99.95%  | -       |
| 9.06 | Completion of a valid NHS Number field in A&E commissioning data sets submitted via SUS, as defined in Contract Technical Guidance   | £10 fine per patient below performance tolerance                                   | 95.00%                                  |   | 99.21%   | 99.58%   | 99.51%   | 99.52%   | 99.52%  | 99.63%  | 99.77%  | -       |
| 9.07 | Failure to ensure that 'sufficient appointment slots' are made available on the Choose and Book System   | General Condition 9  | >4% slot unavailability if              |   | 8.17%    | 12.10%   | 8.04%    | 7.61%    | 5.91%   | 9.00%   | 2.30%   | -       |
|      | Delayed Transfer of Care – All patients medically fit for discharge and issued a 'notification notice' as per joint protocol for the transfer of care                                    | As set out in Service Condition 3 and General Condition 9                          | Set baseline in Q1 and agree trajectory | Monthly Provider Report   |          |          |          |          |         |         |         |         |
| 9.08 | Trust waiting time for Rapid Access Chest Pain Clinic  | General Condition 9  | 99.00%                                  |   | 76.72%   | 75.17%   | 85.06%   | 88.78%   | 83.16%  | 96.23%  | 82.19%  | 87.50%  |
|      | Stroke Performance against Sentinel Stroke National Audit Programme (SSNAP)  | As set out in Service Condition 3 and General Condition 9                          | Best Practice Standards                 | Quarterly summary of performance against SSNAP indicators as submitted to RCP. Stroke service exception action plan to be produced and tabled at sub CMB quarterly. |          |          |          |          |         |         |         |         |
| 9.09 | Number/Percentage women who have seen a midwife by 12 weeks and 6 days (as per IPMR definition)  | General Condition 9  | 90.00%                                  |   | 91.06%   | 93.29%   | 93.03%   | 91.36%   | 91.97%  | 91.86%  | 93.23%  | 92.27%  |
| 9.10 | Number/Percentage of maternity patients recorded as smoking by 12 weeks and 6 days that are referred to a smoking cessation service subject to patient consent                           | General Condition 9  | 95.00%                                  |   | 100.00%  | 100.00%  | 100.00%  | 100.00%  | 100.00% | 100.00% | 100.00% | 100.00% |
|      | All Red Drugs to be prescribed by provider effective from 01/04/15, subject to agreement on list   | Recovery of costs for any breach to be agreed via medicines management committee   | 0                                       | CCG to audit for breaches   |          |          |          |          |         |         |         |         |
|      | All Amber Drugs to be prescribed as per shared care guidelines from 01/04/15   | Recovery of costs for any breach to be agreed via medicines management committee   | 0                                       | CCG to audit for breaches   |          |          |          |          |         |         |         |         |

\*QMCO and Monthly Sitrep Return suspended due to Covid-19



# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY: CARE OF DETERIORATING PATIENT



### HIGHLIGHTS FOR BOARD TO NOTE :

14 hour post take in both York and Scarborough has improved in February 2021; York having a 3.0% and Scarborough a 3.4% improvement. Overall figures show both sets of data show continued improvement with York being at 82.3% and Scarborough at 81.0%, both of which are below the 90% target compliance for 14 hour post take.

NEWS within 1 hour at Scarborough as improved this months by 2.5%, however is below the target threshold of 90%. Scarborough although has seen a decline, is above the 90% threshold and has maintained that for the entire time series data (over 2 years).

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY: CARE OF DETERIORATING PATIENT

Feb-21

METRIC :

TARGET :

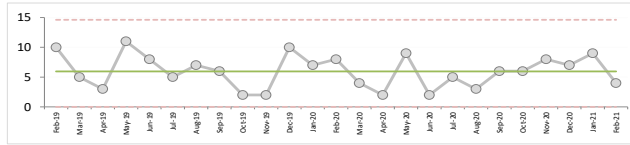
vs LM :

**4**

**10.10**  
Crash Calls (York)

-

-5

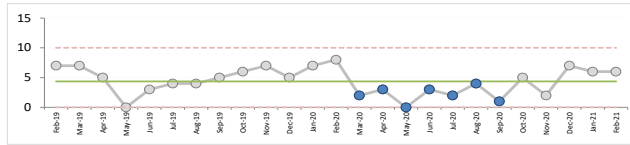


**6**

**10.12**  
Crash Calls (Scarb)

-

0

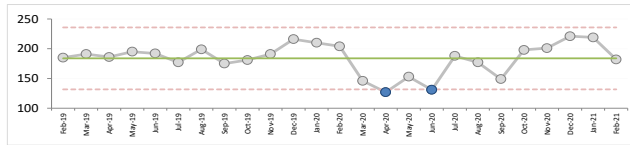


**182**

**10.13**  
Calls to Outreach Team (York)

-

-37

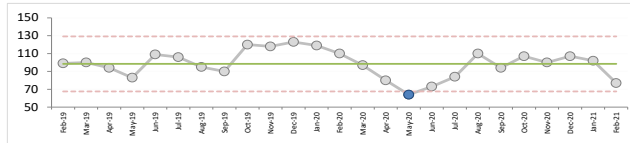


**77**

**10.14**  
Calls to Outreach Team (Scarb)

-

-25



### HIGHLIGHTS FOR BOARD TO NOTE :

The number of cardiac arrests remain low on both sites. There have incidences of failed DNACPR decisions where CPR has occurred in patients with a DNACPR order in place. The calls to outreach remain stable across both sites and are consistent with Pre COVID levels. The out of hours workstream to enhance staffing and provide task allocation has lost inertia over the last 2 months as meetings have been cancelled. The ward provision of NIV has been safe and sufficient on the COVID wards. There remains questions about ongoing non COVID NIV resource on ward 34.

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY: MEDICATION INCIDENTS

| Feb-21 | METRIC :  | TARGET : | vs LM : |  |
|--------|---|----------|---------|--|
| 1      | 10.20<br>Medication Incidents<br>Resulting in Moderate<br>Harm, Serious/Severe Harm<br>or Death | -        | -1      |  |
| 10     | 10.21<br>Insulin Incidents  | -        | -3      |  |
| 14     | 10.22<br>Antimicrobial Incidents  | -        | -2      |  |
| 26     | 10.23<br>Opiate Incidents   | -        | -3      |  |
| 14     | 10.24<br>Anticoagulant Incidents  | -        | 1       |  |
| 21     | 10.25<br>Missed Dose Incidents  | -        | -17     |  |
| 12     | 10.26<br>Discharges Incidents   | -        | -1      |  |
| 22     | 10.27<br>Prescribing Errors   | -        | -9      |  |
| 4      | 10.28<br>Preparation and Dispensing<br>Incidents  | -        | -4      |  |
| 57     | 10.29<br>Administrating and Supply<br>Incidents   | -        | -14     |  |

### HIGHLIGHTS FOR BOARD TO NOTE :

There were 122 medication incident reported in February. There was one incident of moderate harm.

A patient was started on antiplatelet medication for presumed acute coronary syndrome. This was then ruled out but the medication was continued and the patient was readmitted two weeks later with a GI Bleed.

All sub categories of medication incidents are within the natural variation.

In addition to the Trust wide Groups already established to review insulin and discharge incidents we have started to look in more detail at incident involving anticoagulation drugs.

Anticoagulants are one of the four groups of medicines associated with the majority of harm incidents within the Trust.

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY : MORTALITY

Feb-21

METRIC :

TARGET :

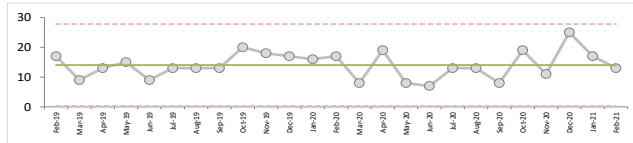
vs LM :

**13**

10.30  
ED Deaths

-

-4  
↓

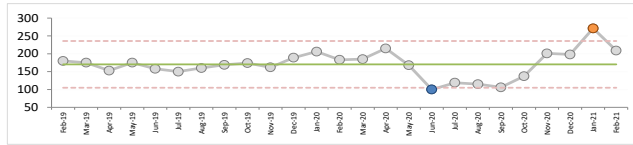


**209**

10.31  
Inpatient Deaths (Acute)

-

-62  
↓

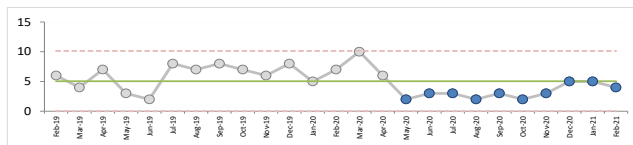


**4**

10.32  
Inpatient Deaths (Community)

-

-1  
↓



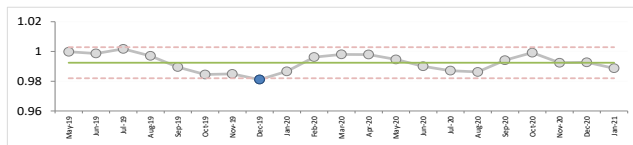
Jan-21

**0.99**

10.33  
Summary Hospital Level Mortality Indicator (SHMI)

1.00

0.00



### HIGHLIGHTS FOR BOARD TO NOTE :

In February 2021 the top 3 causes of death were Covid 19, Pneumonia and Sepsis. There were 46 deaths recorded as 1a Covid 19. In February overall deaths reduced in the Emergency Department, the Acute Sites and in the Community. The number of deaths per 1000 bed days was calculated and is shown below:

- August 2020 - 3.97 deaths per 1000 bed days
- September 2020 - 5.75 deaths per 1000 bed days
- October 2020 - 7.53 deaths per 1000 bed days
- November 2020 - 10.65 deaths per 1000 bed days
- December 2020 - 11.41 deaths per 1000 bed days
- January 2021 - 13.45 deaths per 1000 bed days
- February 2021 - 11.75 deaths per 1000 bed days

When compared to the total number of deaths per 1000 bed days during February 2020 (8.13 deaths per 1000 bed days), February 2021 had an increase in deaths.

In February 2021 there were 6 Structured Judgement Casenote Reviews (SJCR's) commissioned . The SJCR's requested were as a result of the following; 1 x complaint, 3 x medical examiner review, 1 x other and 1 x initial mortality review.

# TRUST BOARD REPORT : February-2021

## PATIENT EXPERIENCE: NEW COMPLAINTS AND PALS CASES

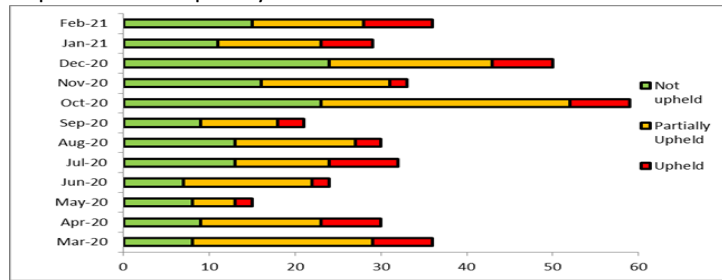
### New complaints and PALS cases by care group and site

| Care Group         | COMPLAINTS |           |          |           | PALS      |           |          |            |
|--------------------|------------|-----------|----------|-----------|-----------|-----------|----------|------------|
|                    | York       | Scarb     | Brid     | Total     | York      | Scarb     | Brid     | Total      |
| CG1                | 13         | 0         | 0        | 13        | 31        | 0         | 0        | 31         |
| CG2                | 0          | 12        | 1        | 13        | 0         | 21        | 1        | 22         |
| CG3                | 7          | 1         | 0        | 8         | 25        | 4         | 1        | 30         |
| CG4                | 2          | 0         | 0        | 2         | 6         | 3         | 0        | 9          |
| CG5                | 3          | 2         | 0        | 5         | 7         | 1         | 0        | 8          |
| CG6                | 5          | 1         | 1        | 7         | 21        | 6         | 1        | 28         |
| Corporate Services | 0          | 0         | 0        | 0         | 4         | 0         | 0        | 4          |
| <b>Total</b>       | <b>30</b>  | <b>16</b> | <b>2</b> | <b>48</b> | <b>94</b> | <b>35</b> | <b>3</b> | <b>132</b> |

During February 6 formal complaints were re-opened compared to 12 in January.

## PATIENT EXPERIENCE: CLOSED CASES

### Proportion of closed complaints by outcome

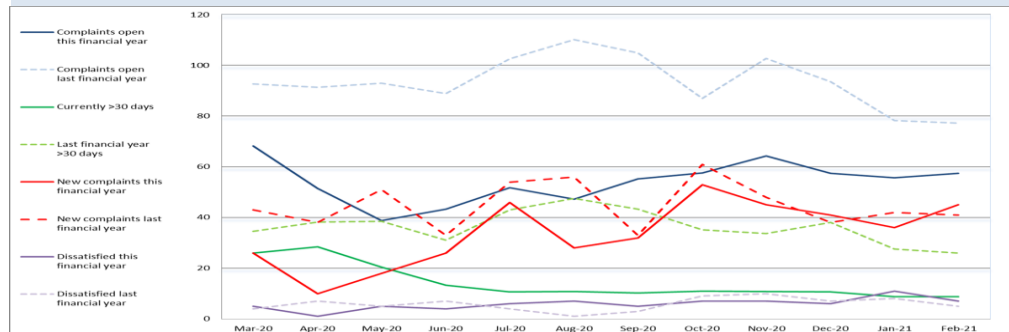


### Closed Complaints

| Care Group   | <30       |                    | 30-50    |                    | 51-100   |                    | >100     |                    | Total Closed | Total Average No of Days | % Within Target |
|--------------|-----------|--------------------|----------|--------------------|----------|--------------------|----------|--------------------|--------------|--------------------------|-----------------|
|              | Closed    | Average No of Days | Closed   | Average No of Days | Closed   | Average No of Days | Closed   | Average No of Days |              |                          |                 |
| CG1          | 9         | 20                 | 3        | 38                 | 1        | 55                 | 0        | 0                  | 13           | 27                       | 69%             |
| CG2          | 7         | 18                 | 3        | 34                 | 0        | 0                  | 0        | 0                  | 10           | 23                       | 70%             |
| CG3          | 9         | 13                 | 0        | 0                  | 0        | 0                  | 0        | 0                  | 9            | 13                       | 100%            |
| CG4          | 3         | 19                 | 0        | 0                  | 0        | 0                  | 0        | 0                  | 3            | 19                       | 100%            |
| CG5          | 4         | 19                 | 0        | 0                  | 0        | 0                  | 0        | 0                  | 4            | 19                       | 100%            |
| CG6          | 2         | 4                  | 1        | 39                 | 0        | 0                  | 0        | 0                  | 3            | 15                       | 67%             |
| Corporate S  | 0         | 0                  | 0        | 0                  | 0        | 0                  | 0        | 0                  | 0            | 0                        | 0%              |
| <b>Total</b> | <b>34</b> | <b>17</b>          | <b>7</b> | <b>37</b>          | <b>1</b> | <b>55</b>          | <b>0</b> | <b>0</b>           | <b>42</b>    | <b>21</b>                | <b>81%</b>      |

81% complaints were closed within target which is a great achievement. 17% were addressed within 30-50 working days. The longest of these was 42 working days and the delay was due to the fact that the investigating officer wanted to send the SJCR report with the complaint response but there was a delay as the SJCR needed to go through care group governance processes. 1 case (2%) was addressed in 55 working days (51-100 days) and was extended as the complainant added additional questions during the complaint process.

## PATIENT EXPERIENCE: COMPLAINT PERFORMANCE HANDLING



### Top 5 sub-subjects

| COMPLAINTS                          | York                          | Scarb     | Brid     | Total     | PALS                               | York      | Scarb                    | Brid     | Total     |
|-------------------------------------|-------------------------------|-----------|----------|-----------|------------------------------------|-----------|--------------------------|----------|-----------|
|                                     | Care needs not adequately met | 8         | 7        | 0         |                                    | 15        | Appointment availability | 13       | 3         |
| Discharge Arrangements              | 11                            | 3         | 0        | 14        | Communication with relatives/care  | 9         | 4                        | 1        | 14        |
| Attitude of nursing staff/midwives  | 6                             | 7         | 0        | 13        | Communication with Patient         | 12        | 1                        | 0        | 13        |
| Communication with Patient          | 6                             | 1         | 0        | 7         | Attitude of nursing staff/midwives | 8         | 2                        | 1        | 11        |
| Communication with relatives/carers | 2                             | 4         | 0        | 6         | Personal Property Issues           | 7         | 3                        | 0        | 10        |
| <b>Total</b>                        | <b>33</b>                     | <b>22</b> | <b>0</b> | <b>55</b> | <b>Total</b>                       | <b>49</b> | <b>13</b>                | <b>2</b> | <b>64</b> |

### Closed PALS

| Care Group         | <10       |                       | 10-20     |                       | 21-50    |                       | 51-100   |                       | >100     |                       | Total Closed | Total Average of No of Days | % Within Target |
|--------------------|-----------|-----------------------|-----------|-----------------------|----------|-----------------------|----------|-----------------------|----------|-----------------------|--------------|-----------------------------|-----------------|
|                    | Closed    | Average of No of Days | Closed    | Average of No of Days | Closed   | Average of No of Days | Closed   | Average of No of Days | Closed   | Average of No of Days |              |                             |                 |
| CG1                | 23        | 4                     | 2         | 14                    | 0        | 0                     | 0        | 0                     | 0        | 0                     | 25           | 4                           | 92%             |
| CG2                | 13        | 4                     | 3         | 11                    | 0        | 0                     | 2        | 69                    | 0        | 0                     | 18           | 12                          | 72%             |
| CG3                | 22        | 4                     | 2         | 12                    | 1        | 21                    | 0        | 0                     | 0        | 0                     | 25           | 5                           | 88%             |
| CG4                | 7         | 4                     | 1         | 11                    | 0        | 0                     | 0        | 0                     | 0        | 0                     | 8            | 5                           | 88%             |
| CG5                | 9         | 4                     | 0         | 0                     | 0        | 0                     | 0        | 0                     | 0        | 0                     | 9            | 4                           | 100%            |
| CG6                | 19        | 3                     | 3         | 10                    | 0        | 0                     | 0        | 0                     | 0        | 0                     | 22           | 4                           | 86%             |
| Corporate S        | 3         | 2                     | 1         | 10                    | 0        | 0                     | 0        | 0                     | 0        | 0                     | 4            | 4                           | 75%             |
| <b>Grand Total</b> | <b>96</b> | <b>4</b>              | <b>12</b> | <b>11</b>             | <b>1</b> | <b>21</b>             | <b>2</b> | <b>69</b>             | <b>0</b> | <b>0</b>              | <b>111</b>   | <b>6</b>                    | <b>86%</b>      |

86% PALS cases were closed within target. A further 11% were addressed within 10-20 working days with an average of 12 working days. One case was addressed within 21-50 working days (1%) and two (2%) were addressed within 85 working days (51-100). One of these cases required information from another Trust which was delayed.

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY: MATERNITY (YORK)

| YORK - MATERNITY DASHBOARD |                         |  | Measure                          | No Concerns (Green) | Of Concern (Amber) | Concerns (Red) | Feb-20    | Mar-20 | Apr-20  | May-20 | Jun-20  | Jul-20 | Aug-20  | Sep-20  | Oct-20  | Nov-20  | Dec-20 | Jan-21 | Feb-21 |       |
|----------------------------|-------------------------|--|----------------------------------|---------------------|--------------------|----------------|-----------|--------|---------|--------|---------|--------|---------|---------|---------|---------|--------|--------|--------|-------|
| <b>RESPONSIVE</b>          |                         |  |                                  |                     |                    |                |           |        |         |        |         |        |         |         |         |         |        |        |        |       |
| Activity                   | Births                  | Bookings                               | 1st m/w visit                    | ≤302                | 303-329            | ≥330           | 291       | 308    | 315     | 243    | 270     | 301    | 289     | 271     | 261     | 286     | 195    | 270    | 185    |       |
|                            |                         | Bookings <13 weeks                     | No. of mothers                   | ≥90%                | 76%-89%            | ≤75%           | 93.8%     | 92.5%  | 92.7%   | 95.5%  | 91.1%   | 93.0%  | 94.5%   | 95.2%   | 91.6%   | 90.6%   | 82.6%  | 92.2%  | 89.2%  |       |
|                            |                         | Bookings ≥13 weeks (exc transfers etc) | No. of mothers                   | < 10%               | 10.1%-19.9%        | >20%           | 3.1%      | 4.2%   | 2.5%    | 1.6%   | 4.1%    | 3.0%   | 1.4%    | 1.5%    | 4.2%    | 1.7%    | 3.6%   | 4.1%   | 2.7%   |       |
|                            |                         | Bookings ≥ 13wks seen within 2 wks     | No. of mothers                   | ≥90%                | 76%-89%            | ≤75%           | 88.9%     | 76.90% | 100.00% | 75.00% | 100.00% | 88.90% | 100.00% | 100.00% | 100.00% | 100.00% | 85.70% | 90.90% | 60.00% |       |
|                            |                         | Births                                 | No. of babies                    | ≤295                | 296-309            | ≥310           | 225       | 257    | 230     | 250    | 236     | 250    | 228     | 262     | 259     | 263     | 233    | 226    | 241    |       |
|                            | Closures                | No. of women delivered                 | No. of mothers                   | ≤295                | 296-310            | ≥311           | 222       | 253    | 225     | 247    | 235     | 248    | 227     | 258     | 254     | 258     | 233    | 226    | 239    |       |
|                            |                         | Homebirth service suspended            | No. of suspensions               | 0-3                 | 4-6                | 7 or more      | 0         | 13     | 26      | 7      | 10      | 6      | 5       | 3       | 8       | 4       | 6      | 9      | 13     |       |
|                            |                         | Women affected by suspension           | No. of women                     | 0                   | 1                  | 2 or more      | 0         | 0      | 4       | 2      | 0       | 1      | 0       | 2       | 1       | 1       | 2      | 3      | 2      |       |
|                            |                         | Community midwife called in to unit    | No. of times                     | 3                   | 4-5                | 6 or more      | 0         | 1      | 0       | 1      | 3       | 3      | 2       | 2       | 3       | 0       | 2      | 1      | 5      |       |
|                            |                         | Maternity Unit Closure                 | No. of closures                  | 0                   |                    | 1 or more      | 0         | 0      | 0       | 0      | 0       | 1      | 0       | 0       | 1       | 0       | 1      | 0      | 3      |       |
|                            |                         | SCBU at capacity                       | No. of times                     |                     |                    |                | 0         | 7      | 0       | 0      | 0       | 0      | 0       | 0       | 2       | 0       | 0      | 3      | 5      |       |
|                            |                         | SCBU at capacity of intensive cots     | No. of times                     |                     |                    |                | 0         | 0      | 1       | 27     | 28      | 28     | 24      | 28      | 26      | 30      | 24     | 25     | 0      |       |
|                            |                         | SCBU no of babies affected             | No. of babies affected           | 0                   | 1                  | 2 or more      | 0         | 0      | 0       | 0      | 0       | 0      | 0       | 0       | 0       | 1       | 1      | 0      | 1      | 0     |
| <b>WELL LED</b>            |                         |  |                                  |                     |                    |                |           |        |         |        |         |        |         |         |         |         |        |        |        |       |
| Workforce                  | Staffing                | MW to birth ratio                      | Ratio                            | ≤29.5               | 29.6 - 30.9        | >31            | 27        | 29     | 29      | 28     | 28      | 28     | 28      | 28      | 28      | 27      | 27     | 29     | 29     |       |
|                            |                         | 1 to 1 care in Labour                  | CPD                              | 100%                | 80% - 99.9%        | ≤79.9%         | 97.0%     | 97.8%  | 97.5%   | 96.8%  | 99.1%   | 98.6%  | 99.0%   | 97.3%   | 97.2%   | 95.7%   | 99.5%  | 96.6%  | 97.1%  |       |
|                            |                         | L/W Co-ordinator supernumary %         | Shift Handover Sheets            | 100%                | 80% - 99.9%        | ≤79.9%         | 91.0%     | 98.0%  | 100.0%  | 98.0%  | 98.0%   | 96.8%  | 98.3%   | 93.3%   | 84.0%   | 96.6%   | 94.0%  | 97.0%  | 91.0%  |       |
|                            |                         | Anaesthetic cover on L/W               | av.sessions/week                 | 10                  | 4-9                | ≤3             | 10        | 10     | 10      | 10     | 10      | 10     | 10      | 10      | 10      | 10      | 10     | 10     | 10     |       |
| <b>SAFE</b>                |                         |  |                                  |                     |                    |                |           |        |         |        |         |        |         |         |         |         |        |        |        |       |
| Clinical Indicators        | Neonatal/ Maternal      | Normal Births                          | No. of svd - %                   | ≥60.6%              | 60.5-55%           | <55%           | 61.4%     | 57.3%  | 53.9%   | 56.4%  | 58.8%   | 52.1%  | 53.0%   | 52.5%   | 46.6%   | 54.9%   | 56.2%  | 56.4%  | 54.9%  |       |
|                            |                         | Assisted Vaginal Births                | No. of instr. Births - %         | ≤13.2               | 13.3-17.9%         | ≥18%           | 9.5%      | 15.4%  | 17.8%   | 17.4%  | 14.9%   | 14.1%  | 15.4%   | 17.8%   | 15.7%   | 14.0%   | 15.5%  | 15.0%  | 15.5%  |       |
|                            |                         | C/S Births                             | Em & elect - %                   | ≤26%                | 26.1-27.9%         | >28%           | 28.4%     | 26.9%  | 28.4%   | 26.7%  | 25.5%   | 32.7%  | 30.8%   | 29.8%   | 37.8%   | 30.2%   | 27.9%  | 27.0%  | 29.3%  |       |
|                            |                         | Elective ceserean                      | %                                |                     |                    |                | -         | -      | -       | -      | -       | -      | -       | -       | -       | -       | -      | -      | 8.8%   | 12.6% |
|                            |                         | Emergency ceserean                     | %                                |                     |                    |                | -         | -      | -       | -      | -       | -      | -       | -       | -       | -       | -      | -      | 18.1%  | 16.7% |
|                            |                         | HDU on L/W                             | No. of women                     | 3 or less           | 4                  | 5 or more      | 12        | 12     | 24      | 16     | 8       | 7      | 24      | 15      | 19      | 12      | 13     | 13     | 12     | 13    |
|                            |                         | BBA                                    | No. of women                     | 2 or less           | 3-4                | 5 or more      | 3         | 3      | 3       | 4      | 4       | 1      | 2       | 2       | 7       | 3       | 1      | 5      | 5      |       |
|                            |                         | HSIB cases                             | No. of babies                    | 0                   | 1                  |                | -         | -      | -       | -      | -       | -      | -       | -       | -       | -       | -      | -      | 0      | 1     |
|                            |                         | NHS Resolution cases                   | No of cases                      | 0                   | 1                  | 2 or more      | 0         | 0      | 0       | 0      | 0       | 0      | 0       | 0       | 0       | 0       | 0      | 0      | 0      | 0     |
|                            |                         | Morbidity                              | Neonatal Death                   | No of babies        | 0                  |                | 1 or more | 0      | 1       | 0      | 1       | 0      | 0       | 0       | 0       | 0       | 0      | 0      | 0      | 0     |
|                            | Antepartum Stillbirth   |  | No. of babies                    | 0                   | 1                  | 2 or more      | 1         | 1      | 0       | 1      | 0       | 1      | 1       | 0       | 0       | 1       | 1      | 2      | 2      |       |
|                            | Intrapartum Stillbirths |  | No. of babies                    | 0                   |                    | 1 or more      | 0         | 0      | 0       | 0      | 0       | 0      | 0       | 0       | 0       | 0       | 0      | 0      | 0      |       |
|                            | Cold babies             |  | No of babies admitted to SCBU co | 1 or less           | 2-3                | 4 or more      | 1         | 0      | 0       | 4      | 2       | 2      | 5       | 2       | 0       | 4       | 2      | 3      | 0      |       |
|                            | Risk Management         | Breastfeeding Initiation rate          | % of babies feeding at birth     | >74.4%              | 74.3-70.1%         | <70%           | 75.9%     | 72.7%  | 73.8%   | 71.4%  | 72.0%   | 76.3%  | 69.2%   | 68.7%   | 76.1%   | 69.1%   | 75.0%  | 75.0%  | 72.8%  |       |
|                            |                         | Smoking at time of delivery            | % of women smoking at del.       | <11%                | 12-14%             | >15%           | 12.2%     | 11.1%  | 11.1%   | 14.2%  | 8.9%    | 9.7%   | 10.6%   | 12.8%   | 9.4%    | 10.9%   | 10.3%  | 8.0%   | 6.7%   |       |
|                            |                         | Si's                                   | No. of Si's declared             | 0                   |                    | 1 or more      | 0         | 0      | 0       | 0      | 0       | 0      | 0       | 0       | 0       | 0       | 3      | 1      | 0      |       |
|                            |                         | PPH > 1.5L                             | No. of women                     | 2 or less           | 3-4                | 5 or more      | 11        | 6      | 14      | 11     | 6       | 5      | 15      | 11      | 10      | 8       | 8      | 7      | 9      |       |
|                            |                         | PPH > 1.5L as % of all women           | % of births                      |                     |                    |                | 4.8%      | 2.3%   | 5.6%    | 4.4%   | 2.5%    | 1.9%   | 6.5%    | 4.2%    | 3.8%    | 3.0%    | 3.4%   | 3.0%   | 3.7%   |       |
|                            |                         | Shoulder Dystocia                      | No. of women                     | 2 or less           | 3-4                | 5 or more      | 1         | 2      | 0       | 0      | 1       | 6      | 7       | 3       | 5       | 1       | 1      | 4      | 1      |       |
|                            | New Complaints          | 3rd/4th Degree Tear                    | % of tears (vaginal births)      | ≤2.5%               | 2.6- 3.9%          | ≥4%            | 0.6%      | 2.1%   | 1.2%    | 1.1%   | 2.8%    | 1.1%   | 0.6%    | 3.8%    | 1.2%    | 0.5%    | 2.9%   | 3.5%   | 2.3%   |       |
| Informal                   |                         | No. of Informal complaints             | 0                                | 1-4                 | 5 or more          | 1              | 1         | 0      | 0       | 1      | 3       | 7      | 7       | 5       | 3       | 3       | 3      | 4      |        |       |
|                            | Formal                  | No. of Formal complaints               | 0                                | 1-4                 | 5 or more          | 0              | 0         | 0      | 1       | 1      | 1       | 2      | 1       | 2       | 1       | 4       | 1      | 2      |        |       |

Please note: Due to data cleansing that takes place, the data for the current quarter may be subject to change.

# TRUST BOARD REPORT : February-2021

## QUALITY AND SAFETY: MATERNITY (SCARBOROUGH)

| SCARBOROUGH - MATERNITY DASHBOARD |                           |   | Measure                          | No Concerns (Green) | Of Concern (Amber) | Concerns (Red) | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |       |
|-----------------------------------|---------------------------|---|----------------------------------|---------------------|--------------------|----------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| <b>RESPONSIVE</b>                 |                           |   |                                  |                     |                    |                |        |        |        |        |        |        |        |        |        |        |        |        |        |       |
| <b>Activity</b>                   | <b>Births</b>             | Bookings                                | 1st m/w visit                    | ≤210                | 211-259            | ≥260           | 151    | 163    | 187    | 139    | 128    | 168    | 137    | 124    | 171    | 167    | 145    | 187    | 143    |       |
|                                   |                           | Bookings <13 weeks                      | No. of mothers                   | ≥90%                | 76%-89%            | ≤75%           | 90.7%  | 89.6%  | 90.4%  | 97.1%  | 95.3%  | 91.1%  | 88.3%  | 92.7%  | 86.5%  | 89.8%  | 86.2%  | 93.6%  | 92.3%  |       |
|                                   |                           | Bookings ≥13 weeks (exc transfers etc)  | No. of mothers                   | < 10%               | 10%-20%            | >20%           | 8.6%   | 6.7%   | 8.0%   | 2.9%   | 1.6%   | 4.8%   | 8.0%   | 4.8%   | 8.8%   | 4.8%   | 3.4%   | 2.7%   | 2.8%   |       |
|                                   |                           | Bookings ≥ 13wks seen within 2 wks      | No. of mothers                   | ≥90%                | 76%-89%            | ≤75%           | 85%    | 82%    | 67%    | 75%    | 50%    | 87%    | 100%   | 100%   | 100.0% | 75%    | 100%   | 80%    | 50%    |       |
|                                   |                           | Births                                  | No. of babies                    | ≤170                | 171-189            | ≥190           | 110    | 117    | 101    | 113    | 105    | 120    | 115    | 119    | 127    | 106    | 100    | 96     | 94     |       |
|                                   | No. of women delivered    | No. of mothers                          | ≤170                             | 171-189             | ≥190               | 107            | 117    | 101    | 113    | 103    | 118    | 114    | 117    | 127    | 106    | 100    | 96     | 93     |        |       |
|                                   | <b>Closures</b>           | Homebirth service suspended             | No. of suspensions               | 0-3                 | 4-6                | 7 or more      | 0      | 13     | 26     | 0      | 10     | 18     | 13     | 19     | 21     | 23     | 25     | 21     | 18     |       |
|                                   |                           | Women affected by suspension            | No. of women                     | 0                   | 1                  | 2 or more      | 0      | 0      | 1      | 0      | 0      | 1      | 1      | 0      | 3      | 0      | 1      | 0      | 0      |       |
|                                   |                           | Community midwife called in to unit     | No. of times                     | 3                   | 4-5                | 6 or more      | 2      | 0      | 0      | 3      | 2      | 2      | 3      | 3      | 6      | 2      | 0      | 1      | 1      |       |
|                                   |                           | Maternity Unit Closure                  | No. of closures                  | 0                   |                    | 1 or more      | 1      | 0      | 0      | 0      | 0      | 0      | 0      | 1      | 1      | 0      | 0      | 1      | 0      |       |
|                                   |                           | SCBU at capacity                        | No of times                      |                     |                    |                | 0      | 1      | 3      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |       |
|                                   |                           | SCBU at capacity of intensive care cots | No. of times                     |                     |                    |                | 0      | 0      | 0      | 0      | 0      | 1      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |       |
| SCBU no of babies affected        |                           | No. of babies affected                  | 0                                | 1                   | 2 or more          | 0              | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |        |       |
| <b>WELL LED</b>                   |                           |   |                                  |                     |                    |                |        |        |        |        |        |        |        |        |        |        |        |        |        |       |
| <b>Workforce</b>                  | <b>Staffing</b>           | M/W to birth ratio                      | Ratio                            | ≤29.5               | 29.6-30.9          | >31            | 21     | 21     | 22     | 22     | 22     | 21     | 21     | 21     | 21     | 21     | 21     | 23     | 20     |       |
|                                   |                           | 1 to 1 care in Labour                   | CPD                              | ≥100%               | 80% - 99.9%        | ≤79.9%         | 98.0%  | 99.0%  | 98.9%  | 100.0% | 96.7%  | 98.1%  | 97.1%  | 99.0%  | 97.1%  | 97.7%  | 98.9%  | 96.5%  | 97.5%  |       |
|                                   |                           | L/W Co-ordinator supernumary %          | Shift Handover Sheets            | ≥100%               | 80% - 99.9%        | ≤79.9%         | 96.6%  | 96.7%  | 100.0% | 95.0%  | 95.0%  | 98.0%  | 100.0% | 95.0%  | 98.0%  | 96.6%  | 100.0% | 100.0% | 100.0% |       |
|                                   |                           | Anaesthetic cover on L/W                | av.sessions/week                 | ≥10                 | 4-9                | ≤3             | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 5      |       |
| <b>SAFE</b>                       |                           |   |                                  |                     |                    |                |        |        |        |        |        |        |        |        |        |        |        |        |        |       |
| <b>Clinical Indicators</b>        | <b>Neonatal/ Maternal</b> | Normal Births                           | No. of svd - %                   | ≥60.6%              | 60.5-55%           | <55%           | 66.1%  | 68.6%  | 73.5%  | 70.3%  | 65.7%  | 76.9%  | 70.4%  | 64.7%  | 62.2%  | 65.1%  | 64.7%  | 62.9%  | 68.8%  |       |
|                                   |                           | Assisted Vaginal Births                 | No. of instr. Births - %         | ≤13.2               | 13.3-17.9%         | ≥18%           | 4.7%   | 2.6%   | 6.9%   | 5.3%   | 4.9%   | 5.9%   | 4.4%   | 2.6%   | 6.3%   | 4.7%   | 7.0%   | 5.2%   | 5.4%   |       |
|                                   |                           | C/S Births                              | Em & elect - %                   | ≤26%                | 26.1-27.9%         | >28%           | 29.0%  | 28.2%  | 18.8%  | 21.2%  | 28.2%  | 15.3%  | 25.4%  | 33.3%  | 31.5%  | 30.2%  | 27.0%  | 30.2%  | 24.7%  |       |
|                                   |                           | Elective ceserean                       | %                                |                     |                    |                | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | 0.104  | 15.1% |
|                                   |                           | Emergency ceserean                      | %                                |                     |                    |                | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | 0.198  | 9.7%  |
|                                   |                           | HDU on L/W                              | No. of women                     | 3 or less           | 4                  | 5 or more      | 3      | 4      | 2      | 7      | 3      | 3      | 3      | 2      | 4      | 7      | 4      | 3      | 4      |       |
|                                   |                           | BBA                                     | No. of women                     | 2 or less           | 3-4                | 5 or more      | 0      | 1      | 0      | 4      | 1      | 3      | 0      | 1      | 1      | 0      | 0      | 1      | 1      |       |
|                                   |                           | HSIB cases                              | No. of babies                    | 0                   | 1                  | 2 or more      | 0      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | 0      | 0     |
|                                   | NHS Resolution cases      | No of cases                             | 0                                | 1                   | 2 or more          | 0              | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |       |
|                                   | <b>Morbidity</b>          | Neonatal Death                          | No of babies                     | 0                   |                    | 1 or more      | 1      | 0      | 0      | 1      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |       |
|                                   |                           | Antepartum Stillbirth                   | No. of babies                    | 0                   | 1                  | 2 or more      | 1      | 0      | 0      | 0      | 0      | 1      | 0      | 0      | 1      | 0      | 2      | 1      | 0      |       |
|                                   |                           | Intrapartum Stillbirths                 | No. of babies                    | 0                   |                    | 1 or more      | 0      | 0      | 0      | 0      | 0      | 0      | 1      | 0      | 0      | 0      | 0      | 0      | 0      |       |
|                                   |                           | Cold babies                             | No of babies admitted to SCBU co | 1 or less           | 2-3                | 4 or more      | 0      | 4      | 5      | 3      | 1      | 0      | 2      | 0      | 1      | 1      | 2      | 3      | 2      |       |
|                                   | <b>Risk Management</b>    | Breastfeeding Initiation rate           | % of babies feeding at birth     | >74.4%              | 74.3-70.1%         | <70%           | 65.1%  | 61.5%  | 56.4%  | 59.8%  | 56.2%  | 62.2%  | 62.3%  | 65.5%  | 62.7%  | 59.4%  | 49.0%  | 61.1%  | 73.1%  |       |
|                                   |                           | Smoking at time of delivery             | % of women smoking at del.       | <11%                | 12-14%             | >15%           | 19%    | 14%    | 21%    | 18%    | 18%    | 17%    | 15%    | 15%    | 19%    | 18%    | 25%    | 24%    | 24%    |       |
|                                   |                           | SI's                                    | No. of SI's declared             | 0                   |                    | 1 or more      | 0      | 0      | 1      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |       |
|                                   |                           | PPH > 1.5L                              | No. of women                     | 2 or less           | 3-4                | 5 or more      | 3      | 3      | 1      | 3      | 2      | 2      | 4      | 1      | 3      | 5      | 4      | 1      | 3      |       |
|                                   |                           | PPH > 1.5L as % of all women            | % of births                      |                     |                    |                | 2.7    | 2.5    | 1.0    | 2.5    | 2.8    | 1.7    | 3.5    | 1      | 2.4    | 5      | 3      | 1.0    | 3.1    |       |
|                                   |                           | Shoulder Dystocia                       | No. of women                     | 2 or less           | 3-4                | 5 or more      | 3      | 0      | 2      | 0      | 1      | 2      | 0      | 1      | 1      | 0      | 0      | 0      | 1      |       |
|                                   | <b>New Complaints</b>     | 3rd/4th Degree Tear                     | % of tears (vaginal births)      | ≤2.5%               | 2.6- 3.9%          | ≥4%            | 1.3%   | 0.0%   | 0.0%   | 1.1%   | 1.3%   | 0.0%   | 0.0%   | 0.0%   | 0.0%   | 0.0%   | 2.7%   | 0.0%   | 1.4%   |       |
| Informal                          |                           | No. of Informal complaints              | 0                                | 1-4                 | 5 or more          | 2              | 0      | 1      | 2      | 2      | 0      | 4      | 2      | 4      | 2      | 1      | 1      | 1      |        |       |
|                                   |                           | Formal                                  | No. of Formal complaints         | 0                   | 1-4                | 5 or more      | 0      | 2      | 1      | 0      | 1      | 0      | 0      | 1      | 0      | 0      | 0      | 1      | 0      |       |

Please note: Due to data cleansing that takes place, the data for the current quarter may be subject to change.

# WORKFORCE PERFORMANCE REPORT

February-2021

Produced March 2021



**The Board Assurance Framework is structured around the Trust's three Strategic Goals:**

To deliver safe and high quality patient care as part of an integrated system

To support an engaged, healthy and resilient workforce

To ensure financial stability

Report produced by:  
**Information Team**



# TRUST BOARD REPORT : February-2021

## WORKFORCE

STRATEGIC OBJECTIVE : To support an engaged, healthy and resilient workforce

| REF  | Vacancies  | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|--|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1.01 | Trust vacancy factor   |        |                            | 8.0%   | 8.0%   | 8.0%   | 7.0%   | 6.0%   | 6.0%   | 4.1%   | 7.0%   | 7.0%   | 6.0%   | 7.0%   | 6.0%   | 5.0%   |
| 1.02 | Nursing and Midwifery vacancy rate - Trust                   |        |                            | 8.1%   | 8.1%   | 8.1%   | 8.6%   | 8.0%   | 4.6%   | 4.9%   | 6.5%   | 6.5%   | 7.0%   | 7.7%   | 7.4%   | 7.1%   |
| 1.03 | Nursing and Midwifery vacancy rate - York                    |        |                            | 5.1%   | 5.1%   | 5.1%   | 6.4%   | 5.0%   | 0.8%   | 1.4%   | 3.2%   | 4.1%   | 4.0%   | 5.3%   | 5.0%   | 4.4%   |
| 1.04 | Nursing and Midwifery staff group vacancy rate - Scarborough |        |                            | 14.8%  | 14.8%  | 14.8%  | 13.8%  | 14.9%  | 13.3%  | 13.2%  | 14.3%  | 12.2%  | 14.2%  | 13.2%  | 13.1%  | 13.6%  |
| 1.05 | Medical and Dental vacancy rate - Trust                      |        |                            | 10.7%  | 10.6%  | 10.6%  | 10.0%  | 10.0%  | 6.9%   | 6.9%   | 9.7%   | 9.5%   | 9.6%   | 9.7%   | 8.5%   | 8.5%   |
| 1.06 | Medical and Dental vacancy rate - York                       |        |                            | 10.7%  | 10.7%  | 10.7%  | 9.7%   | 9.7%   | 5.5%   | 5.5%   | 9.9%   | 9.2%   | 8.7%   | 9.3%   | 7.8%   | 7.9%   |
| 1.07 | Medical and Dental vacancy rate - Scarborough                |        |                            | 10.9%  | 10.6%  | 10.6%  | 10.6%  | 10.6%  | 10.6%  | 10.6%  | 9.0%   | 10.0%  | 11.9%  | 10.9%  | 10.4%  | 10.1%  |
| 1.08 | AHP vacancy rate - Trust                                     |        |                            | 3.1%   | 2.0%   | 3.1%   | 1.6%   | 4.8%   | 6.2%   | 2.7%   | 2.5%   | 1.5%   | 1.0%   | 2.1%   | 1.8%   | 1.8%   |
| 1.09 | Other Registered Healthcare Scientists vacancy rate - Trust  |        |                            | 3.5%   | -3.4%  | -1.5%  | -2.2%  | -1.4%  | 3.1%   | 3.5%   | 3.9%   | 4.9%   | 5.1%   | 6.9%   | 8.6%   | 8.3%   |

| REF  | Retention                   | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|-----------------------------|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 2.01 | Trust stability (Headcount) |        |                            | 87.8%  | 88.2%  | 88.3%  | 88.6%  | 88.8%  | 88.8%  | 89.5%  | 89.8%  | 89.8%  | 89.7%  | 89.6%  | 90.3%  | 90.27% |

| REF  | Temporary Workforce  | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20  | Mar-20  | Apr-20  | May-20  | Jun-20  | Jul-20  | Aug-20  | Sep-20  | Oct-20  | Nov-20  | Dec-20  | Jan-21  | Feb-21  |
|------|--|--------|----------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| 3.01 | Total FTE Medical and Dental roles covered by bank and agency  |        |                            | 99.4    | 117.4   | 116.0   | 119.7   | 118.9   | 128.4   | 124.3   | 115.5   | 111.9   | 118.6   | 107.4   | 115.0   | 98.7    |
| 3.02 | Temporary medical and dental shifts covered by bank (% as proportion of all coverage by bank and agency)   |        |                            | 56.0%   | 60.0%   | 58.0%   | 54.0%   | 55.0%   | 56.0%   | 55.0%   | 52.0%   | 51.0%   | 61.0%   | 59.0%   | 66.0%   | 65.0%   |
| 3.03 | Temporary medical and dental shifts covered by agency (% as proportion of all coverage by bank and agency) |        |                            | 44.0%   | 40.0%   | 42.0%   | 46.0%   | 45.0%   | 44.0%   | 45.0%   | 48.0%   | 49.0%   | 39.0%   | 41.0%   | 34.0%   | 35.0%   |
| 3.04 | Total FTE nurse staffing roles covered by bank and agency (RN's and HCA's)                                 |        |                            | 439.0   | 441.0   | 368.6   | 406.4   | 352.5   | 383.0   | 427.0   | 424.0   | 455.0   | 477.0   | 432.0   | 493.0   | 450.0   |
| 3.05 | Temporary nurse staffing bank filled (FTE)   |        |                            | 311.1   | 320.6   | 299.8   | 337.1   | 305.1   | 313.0   | 339.0   | 334.0   | 353.0   | 378.0   | 334.0   | 403.0   | 365.0   |
| 3.06 | Temporary nurse staffing agency filled (FTE)   |        |                            | 127.9   | 120.4   | 68.7    | 69.3    | 47.5    | 70.0    | 88.0    | 90.0    | 102.0   | 99.0    | 98.0    | 90.0    | 85.0    |
| 3.07 | Temporary nurse staffing unfilled (FTE)  |        |                            | 134.4   | 138.1   | 289.3   | 179.1   | 86.7    | 91.0    | 121.0   | 161.0   | 201.0   | 215.0   | 232.0   | 229.0   | 199.0   |
| 3.08 | Temporary nurse shifts covered by bank (% as proportion of all coverage by bank and agency)                |        |                            | 70.9%   | 72.7%   | 81.4%   | 83.0%   | 86.5%   | 81.7%   | 79.4%   | 78.8%   | 77.6%   | 79.2%   | 77.3%   | 81.7%   | 81.1%   |
| 3.09 | Temporary nurse shifts covered by agency (% as proportion of all coverage by bank and agency)              |        |                            | 29.1%   | 27.3%   | 18.6%   | 17.0%   | 13.5%   | 18.3%   | 20.6%   | 21.2%   | 22.4%   | 20.8%   | 22.7%   | 18.3%   | 18.9%   |
| 3.10 | Unfilled temporary nurse staffing requests (%)   |        |                            | 23.4%   | 22.9%   | 44.0%   | 30.6%   | 19.7%   | 19.0%   | 22.0%   | 28.0%   | 31.0%   | 31.0%   | 35.0%   | 32.0%   | 31.0%   |
| 3.11 | Pay Expenditure - Total (£000)   |        |                            | £30,450 | £30,715 | £30,698 | £32,678 | £32,383 | £31,639 | £32,544 | £33,131 | £32,110 | £32,623 | £34,367 | £34,006 | £33,374 |
| 3.12 | Pay Expenditure - Contracted (£000)  |        |                            | £24,745 | £24,379 | £25,456 | £25,970 | £26,148 | £26,087 | £26,293 | £27,130 | £26,384 | £26,616 | £27,808 | £27,580 | £26,772 |
| 3.13 | Pay Expenditure - Locums (£000)  |        |                            | £182    | £206    | £203    | £182    | £231    | £268    | £189    | £206    | £122    | £75     | £351    | £185    | £198    |
| 3.14 | Pay Expenditure - Bank (£000)  |        |                            | £1,754  | £2,033  | £1,592  | £2,508  | £1,990  | £1,688  | £2,347  | £1,758  | £1,963  | £2,522  | £2,143  | £2,473  | £2,512  |
| 3.15 | Pay Expenditure - Agency (£000)  |        |                            | £1,371  | £1,641  | £1,168  | £1,342  | £1,222  | £1,139  | £1,442  | £1,463  | £1,576  | £1,231  | £1,406  | £1,118  | £1,084  |
| 3.16 | Pay Expenditure - Additional Hours (£000)  |        |                            | £2,238  | £2,265  | £1,993  | £2,419  | £2,609  | £2,327  | £2,165  | £2,448  | £1,942  | £2,002  | £2,472  | £2,509  | £2,575  |
| 3.17 | Pay Expenditure - Overtime (£000)  |        |                            | £161    | £191    | £286    | £257    | £184    | £130    | £108    | £127    | £122    | £176    | £187    | £141    | £233    |

| REF  | Absence Management                   | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|--------------------------------------|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 4.01 | Absence Rate Trust (excluding YTHFM) | 3.9%   |                            | 4.2%   | 4.6%   | 5.9%   | 5.8%   | 4.5%   | 4.2%   | 4.4%   | 4.5%   | 4.9%   | 5.7%   | 5.2%   | 5.7%   | -      |

| REF  | COVID-19 Absence Management | TARGET | SPARKLINE / PREVIOUS WEEK | 15-Jan | 22-Jan | 29-Jan | 05-Feb | 12-Feb | 19-Feb | 26-Feb |
|------|-----------------------------|--------|---------------------------|--------|--------|--------|--------|--------|--------|--------|
| 5.01 | All absence                 |        |                           | 546.29 | 544.71 | 527.57 | 500.86 | 498.43 | 492.43 | 480.57 |
| 5.02 | COVID-19 related absence    |        |                           | 278.57 | 286.14 | 260.14 | 211.14 | 184.43 | 159.43 | 151.43 |

| REF  | Disciplinary and Grievance  | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|---|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 6.01 | Live disciplinary or bullying and harassment cases (Including investigations) |        |                            | 7      | 2      | 2      | 2      | 2      | 3      | 6      | 3      | 3      | 4      | 4      | 4      | 6      |
| 6.02 | Live grievance cases  |        |                            | 7      | 1      | 1      | 1      | 2      | 1      | 3      | 3      | 9      | 6      | 5      | 7      | 8      |

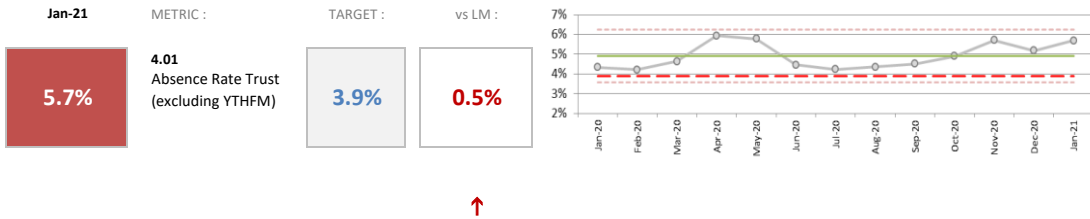
| REF  | Learning and Organisational Development          | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|--|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 7.01 | Trust Stat & Mand Training compliance            | 85%    |                            | 85.0%  | 86.0%  | 87.0%  | 87.0%  | 87.0%  | 88.0%  | 88.0%  | 86.0%  | 87.0%  | 87.0%  | 87.0%  | 85.0%  | 85.0%  |
| 7.02 | Trust Corporate Induction Compliance             | 95%    |                            | 96.0%  | 95.0%  | 94.0%  | 94.0%  | 94.0%  | 95.0%  | 95.0%  | 95.0%  | 95.0%  | 95.0%  | 95.0%  | 95.0%  | 95.0%  |
| 7.03 | Non-medical staff core training compliance       | 85%    |                            | 88.0%  | 88.0%  | 87.0%  | 87.0%  | 87.0%  | 88.0%  | 89.0%  | 88.0%  | 87.0%  | 87.0%  | 87.0%  | 87.0%  | 87.0%  |
| 7.05 | Non-medical staff corporate induction compliance | 95%    |                            | 96.0%  | 96.0%  | 94.0%  | 94.0%  | 94.0%  | 95.0%  | 96.0%  | 96.0%  | 96.0%  | 96.0%  | 96.0%  | 96.0%  | 97.0%  |
| 7.06 | Medical staff core training compliance           | 85%    |                            | 69.0%  | 70.0%  | 71.0%  | 72.0%  | 73.0%  | 74.0%  | 68.0%  | 70.0%  | 70.0%  | 72.0%  | 72.0%  | 73.0%  | 74.0%  |
| 7.08 | Medical staff corporate induction compliance     | 95%    |                            | 93.0%  | 92.0%  | 93.0%  | 94.0%  | 95.0%  | 95.0%  | 88.0%  | 88.0%  | 88.0%  | 89.0%  | 90.0%  | 90.0%  | 90.0%  |

| REF  | Appraisal Compliance                 | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|--------------------------------------|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 8.01 | Trust (excluding medical and dental) | 90%    |                            | 74.7%  | 1.8%   | 3.7%   | 6.8%   | 13.1%  | 22.0%  | 36.3%  | 70.5%  | 83.6%  | 89.6%  | 93.4%  | 93.4%  | 93.4%  |

## TRUST BOARD REPORT : February-2021

### WORKFORCE : SICKNESS ABSENCE RATE



#### HIGHLIGHTS FOR BOARD TO NOTE :

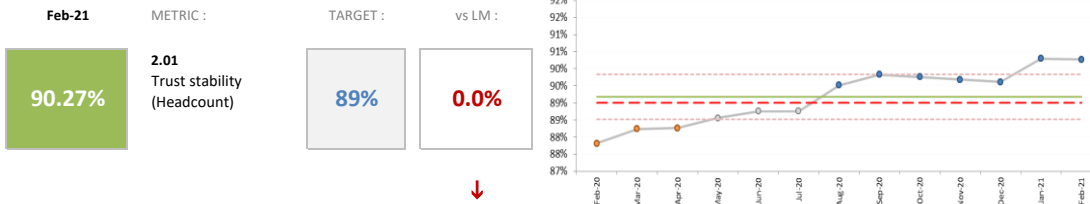
The overall trust sickness absence percentage rose in January in line with the increase in Covid-19 transmission in the community. Local monitoring in February shows a reduction from these levels, though there has been some rebound in absences classified as Covid-related which coincided with the refreshed national guidance on shielding.

There has been a very slight decrease in the number of absences due to mental health in January. Although with a recorded absence rate of 28.8%, mental health continues to dominate the primary reason for absences across the Trust. Infectious diseases (primarily COVID) is returning an absence rate of 15.8% for January, and musculoskeletal problems (including back problems) follow closely with a rate of 14.6%.

The Trust continues with its expanded programme of interventions to support staff mental health and wellbeing.

## TRUST BOARD REPORT : February-2021

### WORKFORCE : RETENTION RATE

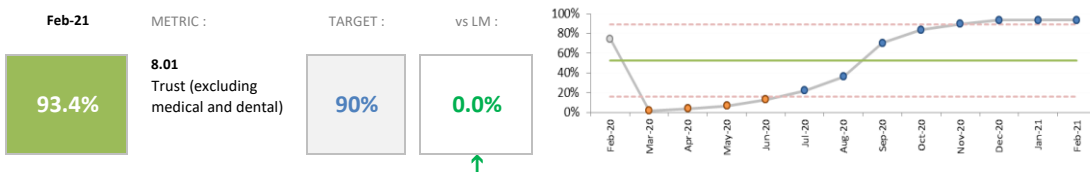


#### HIGHLIGHTS FOR BOARD TO NOTE :

February returned a stability rate of 90.27%. Leaver numbers remain low across all staff groups (under 10%), the exception being the Additional Professional Scientific & Technical Group, where the loss of six Physician Associates in the last 12-months has contributed to a lower rate of stability. The Trust is working with this group to better establish the role within the organisation, in response to feedback from exit interviews.

## TRUST BOARD REPORT : February-2021

### WORKFORCE : APPRAISAL COMPLIANCE



#### HIGHLIGHTS FOR BOARD TO NOTE :

Following the new appraisal window which was introduced last year, the appraisal window for 2021 will be opened in two phases to coincide with the work that has been undertaken around the new values and behaviour framework.

Phase one of the appraisal window will be open between 1 and 31 May, and will be when the Board, senior management teams, care group directors, care group managers, care group nursing and AHP leads have their appraisals. The phase two appraisal window open for all staff on 1 June and run until 30 September.

# TRUST BOARD REPORT : February-2021

## WORKFORCE : PAY EXPENDITURE (£000)



### HIGHLIGHTS FOR BOARD TO NOTE :

#### Nursing and Midwifery

The Nursing and Midwifery Vacancy Report reveals a 7.11% vacancy factor across the Trust. Split by site, York returns a vacancy rate of 4.37% and Scarborough 13.60% respectively. The overall Trust vacancy factor has reduced by 0.28%. This is mainly due to a number of candidates commencing employment at the York site.

Following a successful bid to NHSE/I to support the recruitment of 100 Health Care Assistants from non-health and social care backgrounds, recruitment campaigns have sourced a significant number of candidates. 42 are expected to commence this month (17 in Scarborough and 25 in York), with the remaining candidates attending induction in April and May once their employment checks have completed.

#### Medical and Dental

The overall trust position is returning a vacancy rate of 8.5%. Split by site, this is 7.9% at York and 10.1% at Scarborough respectively. Since the February report, the Trust has onboarded four new Consultants: an Obstetrician/Gynaecologist (Locum Consultant - York); an Orthopaedic Surgeon (York); an Emergency Medicine Doctor (Scarborough); and an Anaesthetist (York).

#### Temporary Staffing

Finance reports continue to show expenditure increases throughout February. The most significant spike is recorded in expenditure related to overtime hours, which has returned an increase of 65.2%. This was also noted during the first COVID peak, from around April last year.

Medical & Dental temporary staffing figures detail 98.66 FTE vacancies were covered collectively by bank employees and agency workers in February. The vacancy cover was fulfilled by 65% of bank employees, and 35% of agency workers.

M&D staffing reports reveal that there were a total of 1,783 ad hoc shift requests throughout February. Bank employees filled 1,237 shifts out of the total number of requests, while agency workers fulfilled the duties of 491 shifts. The rate of unfilled shifts was 3.08%.

February returned a total of 649 FTE shift requests for temporary nursing/midwifery and HCAs. Agency workers fulfilled 85 of these vacancy requests, and bank employees covered 365 shifts. The rate of unfilled shifts was 31%, which was a total of 199 vacant shifts.

# TRUST BOARD REPORT : February-2021

## WORKFORCE : STATUTORY AND MANDATORY TRAINING COMPLIANCE



### HIGHLIGHTS FOR BOARD TO NOTE :

The Trust is maintaining steady progress with statutory and mandatory training compliance. Compliance for medical and dental staff remains a key area of attention.

As the Trust moves towards another recovery phase, it is supporting staff who have been redeployed during the Pandemic through a re-boarding programme co-designed and implemented with clinical and operational colleagues. Support for individuals and teams continues through resilience workshops, individual coaching and facilitated sessions to review lessons learnt, to agree action plans and to build and restore relationships.

To support the Trust's values and culture work, Michael West, Senior Visiting Fellow at the King's Fund and Professor of Organisational Psychology at Lancaster University, will deliver a 'Living Compassionate Leadership' virtual masterclass, specifically for staff in our Trust. Two dates have been arranged; 29<sup>th</sup> April and 4<sup>th</sup> May 2021.

## TRUST BOARD REPORT : February-2021

### WORKFORCE : OTHER AND WIDER UPDATES

#### WORKFORCE: OTHER

Following an exceptional year, the Trust is actively discussing how it can best recognise staff for their incredible efforts during the Pandemic. It is a hot topic nationally, with Trusts up and down the country adopting different approaches. A popular offer has been the provision of additional annual leave, but this feels unsuited to the Trust's current context with significant numbers of frontline staff reporting difficulty in using their full allocation for 2020-21. Alternatives options include extended break times for staff, and investment in infrastructure to support staff wellbeing. The Directors are continuing to discuss the issue with Staff Side colleagues and will provide an update shortly.

**TRUST BOARD REPORT : February-2021**

**WORKFORCE : CARE GROUP CORE COMPLIANCE BY STAFF GROUP**

STRATEGIC OBJECTIVE : To support an engaged, healthy and resilient workforce

Feb-21

|   | Adult Advanced Life Support | Adult Life Support | Conflict Resolution | Deprivation of Liberty Safeguards (DoLS) Level 1 | Deprivation of Liberty Safeguards (DoLS) Level 2 | Fire Safety Awareness (High Risk) | Fire Safety Awareness (Low Risk) | Health, Safety and Welfare | Infection Prevention and Control Level 1 | Infection Prevention and Control Level 2 | Information Governance and Data Security | Manual Handling Practical Level 1 | Manual Handling Practical Level 2 | Manual Handling Theory | Mental Capacity Act Level 1 | Mental Capacity Act Level 2 | Paediatric Advanced Life Support | Paediatric Life Support | PREVENT Awareness Basic | PREVENT Awareness Level 3 | Safeguarding Adults Level 1 | Safeguarding Adults Level 2 | Safeguarding Children Level 1 | Safeguarding Children Level 2 | Safeguarding Children Level 3 Modules (Core Staff) | Safeguarding Children Level 3 Modules (Specialist Staff) |
|---|-----------------------------|--------------------|---------------------|--|--|-----------------------------------|----------------------------------|----------------------------|--|--|--|-----------------------------------|-----------------------------------|------------------------|-----------------------------|-----------------------------|----------------------------------|-------------------------|-------------------------|---------------------------|-----------------------------|-----------------------------|-------------------------------|-------------------------------|--|--|
| <b>CG1 Acute Elderly Emergency General Medicine and Community Services York</b> |                             |                    |                     |  |  |                                   |                                  |                            |  |  |  |                                   |                                   |                        |                             |                             |                                  |                         |                         |                           |                             |                             |                               |                               |  |  |
| Add Prof Scientific and Technic   |                             | 100%               | 100%                |  | 100%   | 100%                              |                                  | 100%                       |  | 100%                                     | 100%                                     | 100%                              | 67%                               | 100%                   |                             | 100%                        |                                  |                         | 75%                     |                           | 100%                        |                             |                               | 100%                          | 100%   | 100%   |
| Additional Clinical Services  | 83%                         | 88%                | 43%                 | 84%  | 88%  | 91%                               | 89%                              | 94%                        | 90%                                      | 88%                                      | 100%                                     | 84%                               | 90%                               | 43%                    | 83%                         |                             | 79%                              | 87%                     | 77%                     | 90%                       | 88%                         | 83%                         | 86%                           | 50%                           |  |  |
| Administrative and Clerical   | 61%                         | 94%                | 72%                 |  |  |                                   |                                  | 93%                        | 94%                                      | 95%                                      |  | 95%                               | 93%                               |                        | 68%                         |                             |                                  | 95%                     |                         |                           | 95%                         |                             |                               | 95%                           | 96%  |  |
| Allied Health Professionals   |                             | 91%                | 98%                 |  | 91%  | 60%                               | 95%                              | 96%                        |  | 95%                                      | 95%                                      | 98%                               | 93%                               | 97%                    |                             | 91%                         |                                  |                         |                         | 96%                       |                             | 94%                         | 100%                          | 93%                           |  | 100%   |
| Healthcare Scientists   |                             | 100%               | 100%                |  |  |                                   | 100%                             | 100%                       | 100%                                     |  | 100%                                     | 95%                               | 95%                               |                        |                             |                             |                                  | 90%                     | 90%                     |                           | 100%                        |                             |                               | 100%                          |  |  |
| Medical and Dental  | 56%                         | 78%                | 83%                 |  | 73%  | 91%                               | 73%                              | 88%                        |  | 82%                                      | 86%                                      |                                   | 71%                               | 83%                    |                             | 73%                         | 48%                              | 27%                     |                         | 84%                       |                             | 83%                         | 83%                           | 66%                           |  |  |
| Nursing and Midwifery Registered  | 65%                         | 88%                | 92%                 |  | 88%  | 94%                               | 92%                              | 93%                        |  | 90%                                      | 92%                                      |                                   | 85%                               | 92%                    |                             | 87%                         |                                  | 79%                     |                         | 94%                       | 100%                        | 93%                         | 90%                           | 79%                           | 100%   |  |
| Students  |                             | 100%               | 100%                |  | 0%   |                                   | 100%                             | 100%                       |  | 100%                                     | 100%                                     |                                   | 100%                              | 100%                   |                             | 0%                          |                                  |                         |                         | 100%                      |                             | 100%                        |                               |                               |  |  |
| <b>CG2 Acute Emergency and Elderly Medicine-Scarborough</b>                     |                             |                    |                     |  |  |                                   |                                  |                            |  |  |  |                                   |                                   |                        |                             |                             |                                  |                         |                         |                           |                             |                             |                               |                               |  |  |
| Additional Clinical Services  |                             | 91%                | 92%                 |  | 88%  | 94%                               | 100%                             | 93%                        | 100%                                     | 91%                                      | 95%                                      |                                   | 89%                               | 94%                    |                             | 88%                         |                                  |                         | 80%                     | 92%                       | 64%                         |                             | 92%                           | 100%                          | 94%  | 50%  |
| Administrative and Clerical   |                             | 75%                | 91%                 | 54%  |  |                                   |                                  | 88%                        | 90%                                      | 92%                                      | 100%                                     | 91%                               |                                   | 100%                   | 94%                         | 59%                         |                                  |                         | 87%                     |                           | 91%                         |                             | 89%                           | 94%                           | 75%  |  |
| Allied Health Professionals   |                             | 93%                | 93%                 |  | 82%  |                                   |                                  | 96%                        | 95%                                      |  | 93%                                      | 96%                               | 80%                               | 92%                    | 98%                         |                             |                                  |                         |                         | 91%                       |                             | 84%                         |                               | 89%                           |  |  |
| Estates and Ancillary   |                             | 100%               | 100%                | 56%  |  |                                   |                                  | 89%                        | 100%                                     | 100%                                     |  | 89%                               | 78%                               | 89%                    | 56%                         |                             |                                  |                         | 100%                    |                           | 100%                        |                             |                               | 100%                          |  |  |
| Healthcare Scientists   |                             | 100%               | 100%                |  |  |                                   |                                  | 86%                        | 100%                                     | 86%                                      |  | 100%                              | 71%                               |                        |                             |                             |                                  | 71%                     | 86%                     |                           | 100%                        |                             |                               | 100%                          |  |  |
| Medical and Dental  | 63%                         | 85%                | 87%                 |  | 72%  | 96%                               | 73%                              | 91%                        |  | 85%                                      | 87%                                      |                                   | 83%                               | 89%                    |                             | 73%                         | 67%                              | 60%                     |                         | 84%                       |                             | 86%                         | 87%                           | 61%                           |  |  |
| Nursing and Midwifery Registered  | 72%                         | 84%                | 95%                 |  | 87%  | 95%                               | 100%                             | 97%                        |  | 92%                                      | 96%                                      |                                   | 87%                               | 96%                    |                             | 86%                         |                                  | 94%                     |                         | 95%                       |                             | 95%                         | 96%                           | 90%                           |  |  |
| <b>CG3 Surgery</b>  |                             |                    |                     |  |  |                                   |                                  |                            |  |  |  |                                   |                                   |                        |                             |                             |                                  |                         |                         |                           |                             |                             |                               |                               |  |  |
| Add Prof Scientific and Technic   |                             | 87%                | 97%                 |  | 87%  | 91%                               | 95%                              | 95%                        | 100%                                     | 91%                                      | 95%                                      | 86%                               | 85%                               | 92%                    |                             | 87%                         |                                  |                         | 81%                     | 100%                      | 92%                         | 100%                        | 94%                           | 100%                          | 94%  |  |
| Additional Clinical Services  |                             | 85%                | 89%                 |  | 82%  | 86%                               |                                  | 98%                        | 89%                                      | 94%                                      | 84%                                      | 99%                               | 85%                               | 89%                    |                             | 81%                         |                                  |                         | 100%                    | 85%                       | 66%                         | 87%                         | 86%                           | 92%                           | 87%  |  |
| Administrative and Clerical   |                             | 100%               | 93%                 | 55%  | 100%   |                                   |                                  | 93%                        | 95%                                      | 95%                                      |  | 97%                               | 94%                               | 100%                   | 94%                         | 64%                         |                                  |                         | 93%                     |                           | 96%                         | 100%                        | 95%                           | 92%                           |  |  |
| Allied Health Professionals   |                             | 92%                | 100%                |  | 100%   |                                   |                                  | 100%                       | 100%                                     |  | 100%                                     | 100%                              | 100%                              | 100%                   |                             | 100%                        |                                  |                         |                         | 100%                      |                             | 100%                        |                               | 100%                          |  |  |
| Estates and Ancillary   |                             | 100%               | 80%                 | 44%  |  |                                   |                                  | 80%                        | 85%                                      | 80%                                      |  | 85%                               | 75%                               | 90%                    | 50%                         |                             |                                  |                         | 85%                     |                           | 85%                         |                             | 83%                           | 100%                          |  |  |
| Healthcare Scientists   |                             | 91%                | 91%                 |  | 84%  |                                   |                                  | 94%                        | 94%                                      | 94%                                      |  | 94%                               | 82%                               |                        | 94%                         |                             |                                  |                         | 88%                     |                           | 100%                        | 94%                         |                               | 85%                           |  |  |
| Medical and Dental  | 0%                          | 74%                | 83%                 |  | 79%  | 92%                               | 88%                              | 89%                        |  | 86%                                      | 87%                                      |                                   | 70%                               | 88%                    |                             | 79%                         |                                  |                         | 86%                     |                           | 83%                         |                             | 82%                           | 100%                          | 0%   |  |
| Nursing and Midwifery Registered  | 66%                         | 92%                | 93%                 |  | 86%  | 93%                               | 93%                              | 92%                        |  | 91%                                      | 91%                                      |                                   | 86%                               | 92%                    |                             | 86%                         |                                  | 81%                     |                         | 95%                       |                             | 91%                         |                               | 92%                           |  |  |
| <b>CG4 Cancer and Support Services</b>  |                             |                    |                     |  |  |                                   |                                  |                            |  |  |  |                                   |                                   |                        |                             |                             |                                  |                         |                         |                           |                             |                             |                               |                               |  |  |
| Add Prof Scientific and Technic   |                             | 100%               | 99%                 |  | 100%   |                                   | 100%                             | 97%                        | 98%                                      | 100%                                     | 97%                                      | 99%                               | 100%                              | 96%                    |                             | 83%                         |                                  |                         | 96%                     | 100%                      | 100%                        | 83%                         | 100%                          | 99%                           |  |  |
| Additional Clinical Services  |                             | 87%                | 91%                 |  | 92%  | 82%                               |                                  | 93%                        | 94%                                      | 94%                                      | 84%                                      | 94%                               | 92%                               | 93%                    | 94%                         |                             |                                  |                         | 93%                     | 67%                       | 94%                         | 93%                         | 95%                           | 94%                           |  |  |
| Administrative and Clerical   |                             | 100%               | 95%                 | 75%  |  |                                   |                                  | 97%                        | 95%                                      | 94%                                      |  | 95%                               | 91%                               |                        | 94%                         | 75%                         |                                  |                         | 93%                     |                           | 97%                         |                             | 95%                           | 92%                           |  |  |
| Allied Health Professionals   |                             | 87%                | 90%                 |  | 90%  | 92%                               |                                  | 98%                        | 93%                                      | 100%                                     | 92%                                      | 94%                               | 100%                              | 93%                    | 94%                         |                             |                                  |                         | 100%                    | 96%                       | 100%                        | 93%                         | 100%                          | 89%                           |  |  |
| Estates and Ancillary   |                             |                    | 100%                |  |  |                                   |                                  | 100%                       | 100%                                     | 100%                                     |  | 100%                              | 50%                               |                        | 50%                         |                             |                                  |                         | 100%                    |                           | 100%                        |                             | 100%                          |                               |  |  |
| Healthcare Scientists   |                             |                    | 95%                 |  |  |                                   |                                  | 96%                        | 95%                                      | 95%                                      |  | 97%                               | 94%                               |                        | 95%                         |                             |                                  |                         | 90%                     |                           | 93%                         |                             | 96%                           |                               |  |  |
| Medical and Dental  | 67%                         | 78%                | 78%                 |  | 74%  | 80%                               | 85%                              | 82%                        | 78%                                      | 80%                                      | 81%                                      | 78%                               | 69%                               | 82%                    |                             | 74%                         |                                  |                         | 67%                     | 87%                       | 67%                         | 78%                         | 72%                           | 85%                           |  |  |
| Nursing and Midwifery Registered  | 20%                         | 96%                | 95%                 |  | 90%  | 96%                               | 96%                              | 98%                        |  | 94%                                      | 96%                                      |                                   | 91%                               | 95%                    |                             | 88%                         |                                  |                         | 100%                    | 97%                       |                             | 92%                         | 100%                          | 92%                           |  |  |
| <b>CG5 Family Health &amp; Sexual Health</b>                                    |                             |                    |                     |  |  |                                   |                                  |                            |  |  |  |                                   |                                   |                        |                             |                             |                                  |                         |                         |                           |                             |                             |                               |                               |  |  |
| Add Prof Scientific and Technic   |                             | 0%                 | 0%                  |  | 0%   |                                   | 0%                               | 50%                        | 50%                                      |  | 50%                                      | 100%                              |                                   | 100%                   |                             | 0%                          |                                  |                         | 0%                      |                           | 50%                         |                             | 0%                            |                               |  | 100%   |
| Additional Clinical Services  |                             | 89%                | 89%                 |  | 81%  | 91%                               | 97%                              | 92%                        | 100%                                     | 88%                                      | 94%                                      | 100%                              | 84%                               | 96%                    |                             | 83%                         |                                  |                         | 82%                     | 86%                       | 60%                         | 85%                         | 94%                           | 79%                           | 100%   |  |
| Administrative and Clerical   |                             |                    | 94%                 | 80%  | 50%  |                                   | 97%                              | 96%                        | 95%                                      |  | 96%                                      | 91%                               | 94%                               | 84%                    | 50%                         |                             |                                  |                         | 90%                     | 60%                       | 94%                         | 100%                        | 95%                           | 100%                          | 60%  |  |
| Allied Health Professionals   |                             | 93%                | 95%                 |  | 95%  | 100%                              | 95%                              | 95%                        |  | 93%                                      | 97%                                      | 100%                              | 92%                               | 97%                    |                             | 95%                         |                                  |                         | 93%                     |                           | 98%                         |                             | 100%                          | 100%                          | 96%  |  |
| Estates and Ancillary   |                             |                    | 100%                | 50%  |  |                                   | 100%                             | 100%                       | 50%                                      |  | 100%                                     | 100%                              |                                   | 100%                   | 100%                        |                             |                                  |                         | 100%                    |                           | 50%                         |                             | 100%                          |                               |  |  |
| Healthcare Scientists   |                             |                    |                     |  |  |                                   |                                  | 100%                       | 100%                                     |  | 100%                                     | 100%                              |                                   | 100%                   |                             |                             |                                  |                         | 100%                    |                           |                             |                             | 100%                          |                               |  |  |
| Medical and Dental  | 69%                         | 76%                | 87%                 |  | 77%  | 89%                               | 93%                              | 87%                        |  | 85%                                      | 82%                                      |                                   | 74%                               | 87%                    |                             | 74%                         | 44%                              | 74%                     |                         | 87%                       |                             | 84%                         | 88%                           | 87%                           | 83%  |  |
| Nursing and Midwifery Registered  |                             | 93%                | 94%                 |  | 89%  | 95%                               | 92%                              | 96%                        |  | 91%                                      | 94%                                      |                                   | 87%                               | 92%                    |                             | 89%                         |                                  | 88%                     |                         | 97%                       |                             | 92%                         | 100%                          | 94%                           | 85%  |  |
| <b>CG6 Specialised Medicine &amp; Outpatients Services</b>                      |                             |                    |                     |  |  |                                   |                                  |                            |  |  |  |                                   |                                   |                        |                             |                             |                                  |                         |                         |                           |                             |                             |                               |                               |  |  |
| Add Prof Scientific and Technic   |                             | 72%                | 94%                 |  | 96%  | 100%                              | 94%                              | 97%                        | 99%                                      | 100%                                     | 90%                                      | 81%                               |                                   | 96%                    |                             | 96%                         |                                  |                         | 96%                     | 100%                      | 90%                         | 98%                         | 100%                          | 97%                           |  | 100%   |
| Additional Clinical Services  |                             | 93%                | 98%                 | 100%   | 89%  | 67%                               | 99%                              | 96%                        | 100%                                     | 95%                                      | 98%                                      |                                   | 92%                               | 98%                    | 100%                        | 89%                         |                                  |                         | 95%                     | 100%                      | 100%                        | 95%                         | 100%                          | 96%                           |  |  |
| Administrative and Clerical   |                             | 67%                | 95%                 | 62%  |  |                                   | 96%                              | 95%                        | 96%                                      |  | 97%                                      | 93%                               |                                   | 95%                    | 62%                         |                             |                                  |                         | 90%                     |                           | 95%                         |                             | 97%                           | 93%                           | 100%   |  |
| Allied Health Professionals   |                             | 90%                | 96%                 |  | 94%  |                                   |                                  | 94%                        | 94%                                      |  | 90%                                      | 94%                               |                                   | 96%                    |                             | 96%                         |                                  |                         |                         | 96%                       |                             | 96%                         |                               | 90%                           |  |  |
| Estates and Ancillary   |                             |                    | 100%                | 100%   |  |                                   | 100%                             | 100%                       | 100%                                     |  | 100%                                     | 100%                              |                                   | 100%                   | 100%                        |                             |                                  |                         | 100%                    |                           | 100%                        |                             | 100%                          |                               |  |  |
| Healthcare Scientists   |                             | 67%                | 88%                 |  |  |                                   | 100%                             | 88%                        | 75%                                      |  | 100%                                     | 100%                              |                                   | 100%                   |                             |                             |                                  |                         | 100%                    |                           | 100%                        |                             | 100%                          |                               |  |  |
| Medical and Dental  | 71%                         | 72%                | 85%                 |  | 77%  | 90%                               | 86%                              | 85%                        |  | 83%                                      | 82%                                      |                                   | 75%                               | 85%                    |                             | 76%                         |                                  | 100%                    |                         | 84%                       |                             | 82%                         | 85%                           |                               |  |  |
| Nursing and Midwifery Registered  |                             | 100%               | 94%                 | 93%  |  | 83%                               | 88%                              | 91%                        | 93%                                      |  | 89%                                      | 94%                               |                                   | 89%                    | 95%                         |                             | 85%                              |                         | 98%                     |                           | 91%                         |                             | 90%                           | 100%                          |  |  |

**TRUST BOARD REPORT : February-2021**

**WORKFORCE : CARE GROUP CORE COMPLIANCE BY STAFF GROUP**

STRATEGIC OBJECTIVE : To support an engaged, healthy and resilient workforce

Feb-21

| <u>Monthly Care Group Core Compliance by Staff Group</u> | Adult Advanced Life Support | Adult Life Support | Conflict Resolution | Deprivation of Liberty Safeguards (DoLS) Level 1 | Deprivation of Liberty Safeguards (DoLS) Level 2 | Fire Safety Awareness (High Risk) | Fire Safety Awareness (Low Risk) | Health, Safety and Welfare | Infection Prevention and Control Level 1 | Infection Prevention and Control Level 2 | Information Governance and Data Security | Manual Handling Practical Level 1 | Manual Handling Practical Level 2 | Manual Handling Theory | Mental Capacity Act Level 1 | Mental Capacity Act Level 2 | Paediatric Advanced Life Support | Paediatric Life Support | PREVENT Awareness Basic | PREVENT Awareness Level 3 | Safeguarding Adults Level 1 | Safeguarding Adults Level 2 | Safeguarding Children Level 1 | Safeguarding Children Level 2 | Safeguarding Children Level 3 Modules (Core Staff) | Safeguarding Children Level 3 Modules (Specialist Staff) |
|--|-----------------------------|--------------------|---------------------|--|--|-----------------------------------|----------------------------------|----------------------------|--|--|--|-----------------------------------|-----------------------------------|------------------------|-----------------------------|-----------------------------|----------------------------------|-------------------------|-------------------------|---------------------------|-----------------------------|-----------------------------|-------------------------------|-------------------------------|--|--|
| <b>CG Trust Estates and Facilities Management</b>        |                             |                    | 91%                 |  |  |                                   | 100%                             | 100%                       | 91%                                      |  | 100%                                     | 100%                              |                                   | 100%                   |                             |                             |                                  |                         | 91%                     |                           | 100%                        |                             | 82%                           |                               |  |  |
| Administrative and Clerical Estates and Ancillary        |                             |                    | 100%                |  |  |                                   | 100%                             | 100%                       | 100%                                     |  | 100%                                     | 100%                              |                                   | 100%                   |                             |                             |                                  |                         | 100%                    |                           | 100%                        |                             | 100%                          |                               |  |  |
| <b>LLP CG Estates &amp; Facilities</b>                   |                             |                    | 100%                |  |  |                                   | 100%                             | 100%                       | 100%                                     |  | 100%                                     | 100%                              |                                   | 100%                   |                             |                             |                                  |                         | 100%                    |                           | 100%                        |                             |                               | 50%                           |  |  |
| Additional Clinical Services                             |                             |                    | 91%                 |  |  |                                   | 91%                              | 93%                        | 95%                                      |  | 92%                                      | 87%                               |                                   | 91%                    |                             |                             |                                  |                         | 88%                     |                           | 94%                         |                             | 92%                           |                               |  |  |
| Administrative and Clerical Estates and Ancillary        |                             |                    | 83%                 | 48%  |  |                                   | 75%                              | 83%                        | 80%                                      |  | 77%                                      | 73%                               | 86%                               | 74%                    | 50%                         |                             |                                  |                         | 65%                     |                           | 79%                         |                             | 79%                           |                               |  |  |
| Healthcare Scientists                                    |                             |                    | 100%                |  |  |                                   | 100%                             | 100%                       | 100%                                     |  | 100%                                     | 100%                              |                                   | 100%                   |                             |                             |                                  |                         | 100%                    |                           | 100%                        |                             | 100%                          |                               |  |  |
| <b>CG Corporate Services</b>                             |                             |                    | 20%                 | 68%  |  | 22%                               | 66%                              | 66%                        | 74%                                      | 0%                                       | 68%                                      | 66%                               |                                   | 68%                    |                             | 22%                         |                                  | 33%                     | 76%                     | 33%                       | 72%                         | 33%                         | 81%                           | 64%                           |  |  |
| Add Prof Scientific and Technic                          |                             |                    | 57%                 | 64%  |  | 60%                               | 63%                              | 82%                        | 65%                                      | 81%                                      | 63%                                      | 63%                               | 83%                               | 63%                    | 70%                         | 59%                         |                                  |                         | 67%                     | 50%                       | 89%                         | 65%                         | 100%                          | 65%                           |  |  |
| Additional Clinical Services                             |                             |                    | 0%                  | 91%  | 0%   |                                   | 91%                              | 91%                        | 91%                                      | 100%                                     | 92%                                      | 90%                               | 100%                              | 92%                    | 0%                          |                             |                                  |                         | 89%                     |                           | 91%                         |                             | 91%                           | 100%                          |  |  |
| Administrative and Clerical                              |                             |                    | 65%                 | 62%  |  | 68%                               | 65%                              | 75%                        | 68%                                      |  | 62%                                      | 62%                               |                                   | 68%                    | 68%                         |                             |                                  |                         |                         | 62%                       |                             | 68%                         | 100%                          | 59%                           |  |  |
| Allied Health Professionals                              |                             |                    |                     | 70%  |  |                                   | 80%                              | 70%                        | 90%                                      |  | 70%                                      | 100%                              | 50%                               | 100%                   |                             |                             |                                  |                         | 100%                    |                           | 100%                        |                             | 90%                           |                               |  |  |
| Estates and Ancillary                                    |                             |                    | 29%                 | 33%  |  |                                   | 33%                              | 33%                        | 42%                                      |  | 50%                                      | 33%                               |                                   | 25%                    |                             |                             |                                  |                         |                         | 0%                        | 25%                         |                             | 100%                          |                               |  |  |
| Healthcare Scientists                                    | 58%                         | 60%                | 49%                 |  |  | 44%                               | 59%                              | 90%                        | 55%                                      | 54%                                      | 53%                                      |                                   | 36%                               | 55%                    |                             | 44%                         | 100%                             |                         | 48%                     |                           | 52%                         |                             | 49%                           | 77%                           | 88%  |  |
| Medical and Dental                                       |                             | 80%                | 82%                 |  |  | 73%                               | 78%                              | 98%                        | 80%                                      | 83%                                      | 77%                                      | 81%                               | 78%                               | 72%                    | 81%                         | 73%                         |                                  |                         | 84%                     | 100%                      | 78%                         | 77%                         | 83%                           |                               | 52%  |  |
| Nursing and Midwifery Registered                         |                             |                    |                     |  |  |                                   |                                  |                            |  |  |  |                                   |                                   |                        |                             |                             |                                  |                         |                         |                           |                             |                             |                               |                               |  |  |

## TRUST BOARD REPORT : February-2021

### WORKFORCE: MEDICAL AND DENTAL VACANCIES

STRATEGIC OBJECTIVE : To support an engaged, healthy and resilient workforce

Scarborough

| Directorate                 | Consultant |      |         |          |           | SAS Grades |      |         |          |           | Training Grades (Inc Trust Grades) |      |         |          |           | Foundation Grades |      |         |          |           | Total |      |         |          |           |
|-----------------------------|------------|------|---------|----------|-----------|------------|------|---------|----------|-----------|------------------------------------|------|---------|----------|-----------|-------------------|------|---------|----------|-----------|-------|------|---------|----------|-----------|
|                             | Estab      | Vacs | Leavers | Starters | Net vac % | Estab      | Vacs | Leavers | Starters | Net vac % | Estab                              | Vacs | Leavers | Starters | Net vac % | Estab             | Vacs | Leavers | Starters | Net vac % | Estab | Vacs | Leavers | Starters | Net vac % |
| <b>Care Group 2</b>         | 31         | 12   | 0       | 3        | 29.0%     | 21         | 4    | 0       | 0        | 19.0%     | 55                                 | 6    | 0       | 2        | 7.3%      | 26                | 1    | 0       | 1        | 0.0%      | 133   | 23   | 0       | 6        | 12.8%     |
| Elderly Medicine            | 5          | 1    | 0       | 0        | 20.0%     | 2          | 0    | 0       | 0        | 0.0%      | 13                                 | 2    | 0       | 0        | 15.4%     | 3                 | 0    | 0       | 0        | 0.0%      | 23    | 3    | 0       | 0        | 13.0%     |
| Emergency & Acute Medicine  | 12         | 5    | 0       | 2        | 25.0%     | 14         | 3    | 0       | 0        | 21.4%     | 17                                 | 1    | 0       | 1        | 0.0%      | 4                 | 0    | 0       | 0        | 0.0%      | 47    | 9    | 0       | 3        | 12.8%     |
| General Medicine            | 14         | 6    | 0       | 1        | 35.7%     | 5          | 1    | 0       | 0        | 20.0%     | 25                                 | 3    | 0       | 1        | 8.0%      | 19                | 1    | 0       | 1        | 0.0%      | 63    | 11   | 0       | 3        | 12.7%     |
| <b>Care Group 3</b>         | 20         | 4    | 0       | 1        | 15.0%     | 14         | 1    | 0       | 1        | 0.0%      | 16                                 | 1    | 0       | 0        | 6.3%      | 10                | 0    | 0       | 0        | 0.0%      | 60    | 6    | 0       | 2        | 6.7%      |
| General Surgery & Urology   | 2          | 1    | 0       | 0        | 50.0%     | 5          | 0    | 0       | 0        | 0.0%      | 6                                  | 1    | 0       | 0        | 16.7%     | 9                 | 0    | 0       | 0        | 0.0%      | 22    | 2    | 0       | 0        | 9.1%      |
| Head & Neck                 | 0          | 0    | 0       | 0        | 0.0%      | 2          | 0    | 0       | 0        | 0.0%      | 0                                  | 0    | 0       | 0        | 0.0%      | 1                 | 0    | 0       | 0        | 0.0%      | 3     | 0    | 0       | 0        | 0.0%      |
| Theatres, Anaesthetics & CC | 18         | 3    | 0       | 1        | 11.1%     | 7          | 1    | 0       | 1        | 0.0%      | 10                                 | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 35    | 4    | 0       | 2        | 5.7%      |
| <b>Care Group 4</b>         | 3          | 0    | 0       | 0        | 0.0%      | 0          | 0    | 0       | 0        | 0.0%      | 0                                  | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 3     | 0    | 0       | 0        | 0.0%      |
| Radiology                   | 3          | 0    | 0       | 0        | 0.0%      | 0          | 0    | 0       | 0        | 0.0%      | 0                                  | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 3     | 0    | 0       | 0        | 0.0%      |
| <b>Care Group 5</b>         | 19         | 1    | 0       | 0        | 5.3%      | 4          | 0    | 0       | 0        | 0.0%      | 18                                 | 1    | 0       | 0        | 5.6%      | 6                 | 1    | 0       | 0        | 16.7%     | 47    | 3    | 0       | 0        | 6.4%      |
| Child Health                | 11         | 1    | 0       | 0        | 9.1%      | 1          | 0    | 0       | 0        | 0.0%      | 10                                 | 1    | 0       | 0        | 10.0%     | 4                 | 0    | 0       | 0        | 0.0%      | 26    | 2    | 0       | 0        | 7.7%      |
| Obstetrics & Gynaecology    | 8          | 0    | 0       | 0        | 0.0%      | 3          | 0    | 0       | 0        | 0.0%      | 8                                  | 0    | 0       | 0        | 0.0%      | 2                 | 1    | 0       | 0        | 50.0%     | 21    | 1    | 0       | 0        | 4.8%      |
| <b>Care Group 6</b>         | 18         | 1    | 0       | 0        | 5.6%      | 9          | 1    | 0       | 0        | 11.1%     | 6                                  | 2    | 0       | 0        | 33.3%     | 2                 | 0    | 0       | 0        | 0.0%      | 35    | 4    | 0       | 0        | 11.4%     |
| Ophthalmology               | 4          | 0    | 0       | 0        | 0.0%      | 3          | 1    | 0       | 0        | 33.3%     | 1                                  | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 8     | 1    | 0       | 0        | 12.5%     |
| Specialist Medicine         | 6          | 1    | 0       | 0        | 16.7%     | 1          | 0    | 0       | 0        | 0.0%      | 0                                  | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 7     | 1    | 0       | 0        | 14.3%     |
| Trauma & Orthopaedics       | 8          | 0    | 0       | 0        | 0.0%      | 5          | 0    | 0       | 0        | 0.0%      | 5                                  | 2    | 0       | 0        | 40.0%     | 2                 | 0    | 0       | 0        | 0.0%      | 20    | 2    | 0       | 0        | 10.0%     |
| <b>Total</b>                | 91         | 18   | 0       | 4        | 15.4%     | 48         | 6    | 0       | 1        | 10.4%     | 95                                 | 10   | 0       | 2        | 8.4%      | 44                | 2    | 0       | 1        | 2.3%      | 278   | 36   | 0       | 8        | 10.1%     |

York

| Directorate                 | Consultant |      |         |          |           | SAS Grades |      |         |          |           | Training Grades (Inc Trust Grades) |      |         |          |           | Foundation Grades |      |         |          |           | Total |      |         |          |           |
|-----------------------------|------------|------|---------|----------|-----------|------------|------|---------|----------|-----------|------------------------------------|------|---------|----------|-----------|-------------------|------|---------|----------|-----------|-------|------|---------|----------|-----------|
|                             | Estab      | Vacs | Leavers | Starters | Net vac % | Estab      | Vacs | Leavers | Starters | Net vac % | Estab                              | Vacs | Leavers | Starters | Net vac % | Estab             | Vacs | Leavers | Starters | Net vac % | Estab | Vacs | Leavers | Starters | Net vac % |
| <b>Care Group 1</b>         | 77         | 18   | 0       | 8        | 13.0%     | 16         | 5    | 0       | 2        | 18.8%     | 81                                 | 10   | 3       | 3        | 12.3%     | 43                | 1    | 0       | 0        | 2.3%      | 217   | 34   | 3       | 13       | 11.1%     |
| Community                   | 0          | 0    | 0       | 0        | 0.0%      | 1          | 0    | 0       | 0        | 0.0%      | 0                                  | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 1     | 0    | 0       | 0        | 0.0%      |
| Elderly Medicine            | 16         | 3    | 0       | 0        | 18.8%     | 2          | 1    | 0       | 0        | 50.0%     | 16                                 | 1    | 0       | 0        | 6.3%      | 3                 | 0    | 0       | 0        | 0.0%      | 37    | 5    | 0       | 0        | 13.5%     |
| Emergency & Acute Medicine  | 25         | 10   | 0       | 5        | 20.0%     | 10         | 3    | 0       | 2        | 10.0%     | 39                                 | 8    | 2       | 3        | 17.9%     | 8                 | 1    | 0       | 0        | 12.5%     | 82    | 22   | 2       | 10       | 17.1%     |
| General Medicine            | 36         | 5    | 0       | 3        | 5.6%      | 3          | 1    | 0       | 0        | 33.3%     | 26                                 | 1    | 1       | 0        | 7.7%      | 32                | 0    | 0       | 0        | 0.0%      | 97    | 7    | 1       | 3        | 5.2%      |
| <b>Care Group 3</b>         | 115        | 4    | 0       | 1        | 2.6%      | 32         | 2    | 0       | 0        | 6.3%      | 68                                 | 4    | 1       | 0        | 7.4%      | 18                | 0    | 0       | 0        | 0.0%      | 233   | 10   | 1       | 1        | 4.3%      |
| General Surgery & Urology   | 42         | 0    | 0       | 0        | 0.0%      | 12         | 0    | 0       | 0        | 0.0%      | 21                                 | 1    | 0       | 0        | 4.8%      | 12                | 0    | 0       | 0        | 0.0%      | 87    | 1    | 0       | 0        | 1.1%      |
| Head & Neck                 | 22         | 0    | 0       | 0        | 0.0%      | 12         | 1    | 0       | 0        | 8.3%      | 15                                 | 1    | 0       | 0        | 6.7%      | 6                 | 0    | 0       | 0        | 0.0%      | 55    | 2    | 0       | 0        | 3.6%      |
| Theatres, Anaesthetics & CC | 51         | 4    | 0       | 1        | 5.9%      | 8          | 1    | 0       | 0        | 12.5%     | 32                                 | 2    | 1       | 0        | 9.4%      | 0                 | 0    | 0       | 0        | 0.0%      | 91    | 7    | 1       | 1        | 7.7%      |
| <b>Care Group 4</b>         | 60         | 6    | 2       | 0        | 13.3%     | 2          | 1    | 0       | 0        | 50.0%     | 16                                 | 0    | 0       | 0        | 0.0%      | 2                 | 0    | 0       | 0        | 0.0%      | 80    | 7    | 2       | 0        | 11.3%     |
| Cancer Support              | 14         | 1    | 0       | 0        | 7.1%      | 2          | 1    | 0       | 0        | 50.0%     | 6                                  | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 22    | 2    | 0       | 0        | 9.1%      |
| Laboratory Medicine         | 16         | 1    | 0       | 0        | 6.3%      | 0          | 0    | 0       | 0        | 0.0%      | 5                                  | 0    | 0       | 0        | 0.0%      | 2                 | 0    | 0       | 0        | 0.0%      | 23    | 1    | 0       | 0        | 4.3%      |
| Radiology                   | 30         | 4    | 2       | 0        | 20.0%     | 0          | 0    | 0       | 0        | 0.0%      | 5                                  | 0    | 0       | 0        | 0.0%      | 0                 | 0    | 0       | 0        | 0.0%      | 35    | 4    | 2       | 0        | 17.1%     |
| <b>Care Group 5</b>         | 38         | 4    | 0       | 0        | 10.5%     | 10         | 4    | 0       | 0        | 40.0%     | 29                                 | 6    | 1       | 0        | 24.1%     | 9                 | 0    | 0       | 0        | 0.0%      | 86    | 14   | 1       | 0        | 17.4%     |
| Child Health                | 19         | 0    | 0       | 0        | 0.0%      | 2          | 0    | 0       | 0        | 0.0%      | 15                                 | 2    | 0       | 0        | 13.3%     | 4                 | 0    | 0       | 0        | 0.0%      | 40    | 2    | 0       | 0        | 5.0%      |
| Obstetrics & Gynaecology    | 16         | 3    | 0       | 0        | 18.8%     | 1          | 0    | 0       | 0        | 0.0%      | 13                                 | 3    | 1       | 0        | 30.8%     | 3                 | 0    | 0       | 0        | 0.0%      | 33    | 6    | 1       | 0        | 21.2%     |
| Sexual Health               | 3          | 1    | 0       | 0        | 33.3%     | 7          | 4    | 0       | 0        | 57.1%     | 1                                  | 1    | 0       | 0        | 100.0%    | 2                 | 0    | 0       | 0        | 0.0%      | 13    | 6    | 0       | 0        | 46.2%     |
| <b>Care Group 6</b>         | 66         | 4    | 0       | 5        | -1.5%     | 18         | 1    | 0       | 1        | 0.0%      | 27                                 | 2    | 0       | 1        | 3.7%      | 8                 | 0    | 0       | 0        | 0.0%      | 119   | 7    | 0       | 7        | 0.0%      |
| Ophthalmology               | 20         | 1    | 0       | 1        | 0.0%      | 6          | 0    | 0       | 0        | 0.0%      | 6                                  | 0    | 0       | 0        | 0.0%      | 1                 | 0    | 0       | 0        | 0.0%      | 33    | 1    | 0       | 1        | 0.0%      |
| Specialist Medicine         | 32         | 2    | 0       | 3        | -3.1%     | 4          | 1    | 0       | 1        | 0.0%      | 13                                 | 1    | 0       | 0        | 7.7%      | 0                 | 0    | 0       | 0        | 0.0%      | 49    | 4    | 0       | 4        | 0.0%      |
| Trauma & Orthopaedics       | 14         | 1    | 0       | 1        | 0.0%      | 8          | 0    | 0       | 0        | 0.0%      | 8                                  | 1    | 0       | 1        | 0.0%      | 7                 | 0    | 0       | 0        | 0.0%      | 37    | 2    | 0       | 2        | 0.0%      |
| <b>Total</b>                | 356        | 36   | 2       | 14       | 6.7%      | 78         | 13   | 0       | 3        | 12.8%     | 221                                | 22   | 5       | 4        | 10.4%     | 80                | 1    | 0       | 0        | 1.3%      | 735   | 72   | 7       | 21       | 7.9%      |

Net vacancy % = (Vacancies + Leavers Pending - Starters Pending) / Establishment  
Includes all known leavers and new starters



## TRUST BOARD REPORT : February-2021

WORKFORCE: NURSING, MIDWIFERY AND CARE STAFF VACANCIES

STRATEGIC OBJECTIVE : To support an engaged, healthy and resilient workforce

Feb-20

|                                      | Budgeted Establishment        |               |                | Staff in post        |               |               | Confirmed Leavers        |             |              | Starters in next 3 month        |             |              | Net Vacancy (WTE)        |               |              | Net Vacancy (%)        |                 |               |
|--------------------------------------|-------------------------------|---------------|----------------|----------------------|---------------|---------------|--------------------------|-------------|--------------|---------------------------------|-------------|--------------|--------------------------|---------------|--------------|------------------------|-----------------|---------------|
|                                      | B5-8                          | B4            | B2-3           | B5-8                 | B4            | B2-3          | B5-8                     | B4          | B2-3         | B5-8                            | B4          | B2-3         | B5-8                     | B4            | B2-3         | B5-8                   | B4              | B2-3          |
| <b>TRUST</b>                         | <b>2151.22</b>                | <b>107.55</b> | <b>1020.56</b> | <b>1992.19</b>       | <b>160.77</b> | <b>965.28</b> | <b>19.71</b>             | <b>0.00</b> | <b>12.22</b> | <b>25.80</b>                    | <b>1.00</b> | <b>12.38</b> | <b>152.94</b>            | <b>-54.22</b> | <b>55.12</b> | <b>7.11%</b>           | <b>-50.41%</b>  | <b>5.40%</b>  |
| <b>YORK</b>                          | <b>1511.87</b>                | <b>87.39</b>  | <b>680.01</b>  | <b>1444.87</b>       | <b>107.60</b> | <b>648.80</b> | <b>14.40</b>             | <b>0.00</b> | <b>6.62</b>  | <b>15.40</b>                    | <b>1.00</b> | <b>5.64</b>  | <b>66.00</b>             | <b>-21.21</b> | <b>32.19</b> | <b>4.37%</b>           | <b>-24.27%</b>  | <b>4.73%</b>  |
| <b>SCARBOROUGH &amp; BRIDLINGTON</b> | <b>639.35</b>                 | <b>20.16</b>  | <b>340.55</b>  | <b>547.32</b>        | <b>53.17</b>  | <b>316.48</b> | <b>5.31</b>              | <b>0.00</b> | <b>5.60</b>  | <b>10.40</b>                    | <b>0.00</b> | <b>6.74</b>  | <b>86.94</b>             | <b>-33.01</b> | <b>22.93</b> | <b>13.60%</b>          | <b>-163.74%</b> | <b>6.73%</b>  |
| <b>CARE GROUP 1</b>                  | <b>Budgeted Establishment</b> |               |                | <b>Staff in post</b> |               |               | <b>Confirmed Leavers</b> |             |              | <b>Starters in next 3 month</b> |             |              | <b>Net Vacancy (wte)</b> |               |              | <b>Net Vacancy (%)</b> |                 |               |
| <b>YORK</b>                          |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
| Acute                                | 416.95                        | 33.38         | 264.66         | 375.16               | 44.40         | 274.42        | 2.00                     | 0.00        | 1.00         | 12.60                           | 0.00        | 3.60         | 31.19                    | -11.02        | -12.36       | 7.48%                  | -33.01%         | -4.67%        |
| Community                            | 150.54                        | 19.60         | 120.45         | 157.98               | 9.40          | 113.44        | 2.00                     | 0.00        | 2.20         | 0.80                            | 1.00        | 1.04         | -6.24                    | 9.20          | 8.17         | -4.15%                 | 46.94%          | 6.78%         |
| <b>Total</b>                         | <b>567.49</b>                 | <b>52.98</b>  | <b>385.11</b>  | <b>533.14</b>        | <b>53.80</b>  | <b>387.86</b> | <b>4.00</b>              | <b>0.00</b> | <b>3.20</b>  | <b>13.40</b>                    | <b>1.00</b> | <b>4.64</b>  | <b>24.95</b>             | <b>-1.82</b>  | <b>-4.19</b> | <b>4.40%</b>           | <b>-3.44%</b>   | <b>-1.09%</b> |
| <b>CARE GROUP 2</b>                  | <b>Budgeted Establishment</b> |               |                | <b>Staff in post</b> |               |               | <b>Confirmed Leavers</b> |             |              | <b>Starters in next 3 month</b> |             |              | <b>Net Vacancy (wte)</b> |               |              | <b>Net Vacancy (%)</b> |                 |               |
| <b>SCARBOROUGH</b>                   |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
|                                      | 288.00                        | 10.76         | 193.65         | 226.07               | 33.60         | 185.10        | 0.00                     | 0.00        | 2.80         | 6.00                            | 0.00        | 3.14         | 55.93                    | -22.84        | 8.21         | 19.42%                 | -212.27%        | 4.24%         |
| <b>Total</b>                         | <b>288.00</b>                 | <b>10.76</b>  | <b>193.65</b>  | <b>226.07</b>        | <b>33.60</b>  | <b>185.10</b> | <b>0.00</b>              | <b>0.00</b> | <b>2.80</b>  | <b>6.00</b>                     | <b>0.00</b> | <b>3.14</b>  | <b>55.93</b>             | <b>-22.84</b> | <b>8.21</b>  | <b>19.42%</b>          | <b>-212.27%</b> | <b>4.24%</b>  |
| <b>CARE GROUP 3</b>                  | <b>Budgeted Establishment</b> |               |                | <b>Staff in post</b> |               |               | <b>Confirmed Leavers</b> |             |              | <b>Starters in next 3 month</b> |             |              | <b>Net Vacancy (wte)</b> |               |              | <b>Net Vacancy (%)</b> |                 |               |
| <b>YORK</b>                          |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
| Wards/Units                          | 265.99                        | 12.41         | 99.87          | 261.03               | 24.00         | 96.68         | 3.00                     | 0.00        | 0.50         | 1.00                            | 0.00        | 0.00         | 6.96                     | -11.59        | 3.69         | 2.62%                  | -93.39%         | 3.69%         |
| Theatres                             | 121.33                        | 0.00          | 45.41          | 106.97               | 1.00          | 38.52         | 0.00                     | 0.00        | 0.00         | 1.00                            | 0.00        | 0.00         | 13.36                    | -1.00         | 6.89         | 11.01%                 | 0.00%           | 15.17%        |
| sub-total York                       | <b>387.32</b>                 | <b>12.41</b>  | <b>145.28</b>  | <b>368.00</b>        | <b>25.00</b>  | <b>135.20</b> | <b>3.00</b>              | <b>0.00</b> | <b>0.50</b>  | <b>2.00</b>                     | <b>0.00</b> | <b>0.00</b>  | <b>20.32</b>             | <b>-12.59</b> | <b>10.58</b> | <b>5.25%</b>           | <b>-101.45%</b> | <b>7.28%</b>  |
| <b>SCARBOROUGH</b>                   |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
| Wards/Units                          | 133.72                        | 3.80          | 48.00          | 115.92               | 11.80         | 44.09         | 0.80                     | 0.00        | 0.00         | 2.80                            | 0.00        | 3.60         | 15.80                    | -8.00         | 0.31         | 11.82%                 | -210.53%        | 0.65%         |
| Theatres                             | 52.75                         | 0.00          | 23.04          | 46.24                | 1.80          | 20.53         | 0.00                     | 0.00        | 0.00         | 0.00                            | 0.00        | 0.00         | 6.51                     | -1.80         | 2.51         | 12.34%                 | 0.00%           | 10.89%        |
| sub-total Scarborough                | <b>186.47</b>                 | <b>3.80</b>   | <b>71.04</b>   | <b>162.16</b>        | <b>13.60</b>  | <b>64.62</b>  | <b>0.80</b>              | <b>0.00</b> | <b>0.00</b>  | <b>2.80</b>                     | <b>0.00</b> | <b>3.60</b>  | <b>22.31</b>             | <b>-9.80</b>  | <b>2.82</b>  | <b>11.96%</b>          | <b>-257.89%</b> | <b>3.97%</b>  |
| <b>CG Total</b>                      | <b>573.79</b>                 | <b>16.21</b>  | <b>216.32</b>  | <b>530.16</b>        | <b>38.60</b>  | <b>199.82</b> | <b>3.80</b>              | <b>0.00</b> | <b>0.50</b>  | <b>4.80</b>                     | <b>0.00</b> | <b>3.60</b>  | <b>42.63</b>             | <b>-22.39</b> | <b>13.40</b> | <b>7.43%</b>           | <b>-138.12%</b> | <b>6.19%</b>  |
| <b>CARE GROUP 4</b>                  | <b>Budgeted Establishment</b> |               |                | <b>Staff in post</b> |               |               | <b>Confirmed Leavers</b> |             |              | <b>Starters in next 3 month</b> |             |              | <b>Net Vacancy (wte)</b> |               |              | <b>Net Vacancy (%)</b> |                 |               |
| <b>YORK</b>                          |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
|                                      | 117.20                        | 4.51          | 26.16          | 107.39               | 6.45          | 22.31         | 1.00                     | 0.00        | 0.00         | 0.00                            | 0.00        | 1.00         | 10.81                    | -1.94         | 2.85         | 9.22%                  | -43.02%         | 10.89%        |
| <b>SCARBOROUGH</b>                   |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
|                                      | 25.68                         | 3.60          | 5.00           | 24.20                | 4.17          | 4.61          | 0.00                     | 0.00        | 0.00         | 0.00                            | 0.00        | 0.00         | 1.48                     | -0.57         | 0.39         | 5.76%                  | -15.83%         | 7.80%         |
| <b>Total</b>                         | <b>142.88</b>                 | <b>8.11</b>   | <b>31.16</b>   | <b>131.59</b>        | <b>10.62</b>  | <b>26.92</b>  | <b>1.00</b>              | <b>0.00</b> | <b>0.00</b>  | <b>0.00</b>                     | <b>0.00</b> | <b>1.00</b>  | <b>12.29</b>             | <b>-2.51</b>  | <b>3.24</b>  | <b>8.60%</b>           | <b>-30.95%</b>  | <b>10.40%</b> |
| <b>CARE GROUP 5</b>                  | <b>Budgeted Establishment</b> |               |                | <b>Staff in post</b> |               |               | <b>Confirmed Leavers</b> |             |              | <b>Starters in next 3 month</b> |             |              | <b>Net Vacancy (wte)</b> |               |              | <b>Net Vacancy (%)</b> |                 |               |
| <b>YORK</b>                          |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
| Registered Midwives                  | 105.98                        | 0.00          | 0.00           | 112.17               | 0.00          | 0.00          | 4.20                     | 0.00        | 0.00         | 0.00                            | 0.00        | 0.00         | -1.99                    | 0.00          | 0.00         | -1.88%                 | 0.00%           | 0.00%         |
| Registered Nurses                    | 147.83                        | 0.00          | 0.00           | 133.85               | 0.00          | 0.00          | 0.60                     | 0.00        | 0.00         | 0.00                            | 0.00        | 0.00         | 14.58                    | 0.00          | 0.00         | 9.86%                  | 0.00%           | 0.00%         |
| Other                                | 0.00                          | 11.36         | 58.55          | 0.00                 | 15.55         | 45.67         | 0.00                     | 0.00        | 0.00         | 0.00                            | 0.00        | 0.00         | 0.00                     | -4.19         | 12.88        | 0.00%                  | -36.88%         | 22.00%        |
| sub-total York                       | <b>253.81</b>                 | <b>11.36</b>  | <b>58.55</b>   | <b>246.02</b>        | <b>15.55</b>  | <b>45.67</b>  | <b>4.80</b>              | <b>0.00</b> | <b>0.00</b>  | <b>0.00</b>                     | <b>0.00</b> | <b>0.00</b>  | <b>12.59</b>             | <b>-4.19</b>  | <b>12.88</b> | <b>4.96%</b>           | <b>-36.88%</b>  | <b>22.00%</b> |
| <b>SCARBOROUGH</b>                   |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
| Registered Midwives                  | 62.63                         | 0.00          | 0.00           | 70.90                | 0.00          | 0.00          | 2.20                     | 0.00        | 0.00         | 0.00                            | 0.00        | 0.00         | -6.07                    | 0.00          | 0.00         | -9.69%                 | 0.00%           | 0.00%         |
| Registered Nurses                    | 41.87                         | 0.00          | 0.00           | 33.83                | 0.00          | 0.00          | 0.80                     | 0.00        | 0.00         | 0.60                            | 0.00        | 0.00         | 8.24                     | 0.00          | 0.00         | 19.68%                 | 0.00%           | 0.00%         |
| Other                                | 0.00                          | 1.00          | 32.46          | 0.00                 | 1.80          | 31.79         | 1.00                     | 0.00        | 0.00         | 0.00                            | 0.00        | 0.00         | 1.00                     | -0.80         | 0.67         | 0.00%                  | -80.00%         | 2.06%         |
| sub-total Scarborough                | <b>104.50</b>                 | <b>1.00</b>   | <b>32.46</b>   | <b>104.73</b>        | <b>1.80</b>   | <b>31.79</b>  | <b>4.00</b>              | <b>0.00</b> | <b>0.00</b>  | <b>0.60</b>                     | <b>0.00</b> | <b>0.00</b>  | <b>3.17</b>              | <b>-0.80</b>  | <b>0.67</b>  | <b>3.03%</b>           | <b>-80.00%</b>  | <b>2.06%</b>  |
| <b>CG Total</b>                      | <b>358.31</b>                 | <b>12.36</b>  | <b>91.01</b>   | <b>350.75</b>        | <b>17.35</b>  | <b>77.46</b>  | <b>8.80</b>              | <b>0.00</b> | <b>0.00</b>  | <b>0.60</b>                     | <b>0.00</b> | <b>0.00</b>  | <b>15.76</b>             | <b>-4.99</b>  | <b>13.55</b> | <b>4.40%</b>           | <b>-40.37%</b>  | <b>14.89%</b> |
| <b>CARE GROUP 6</b>                  | <b>Budgeted Establishment</b> |               |                | <b>Staff in post</b> |               |               | <b>Confirmed Leavers</b> |             |              | <b>Starters in next 3 month</b> |             |              | <b>Net Vacancy (wte)</b> |               |              | <b>Net Vacancy (%)</b> |                 |               |
| <b>YORK</b>                          |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
|                                      | 108.23                        | 4.80          | 64.51          | 105.15               | 5.20          | 57.76         | 1.60                     | 0.00        | 2.92         | 0.00                            | 0.00        | 0.00         | 4.68                     | -0.40         | 9.67         | 4.32%                  | -8.33%          | 14.99%        |
| <b>SCARBOROUGH</b>                   |                               |               |                |                      |               |               |                          |             |              |                                 |             |              |                          |               |              |                        |                 |               |
|                                      | 34.03                         | 1.00          | 38.40          | 29.01                | 0.00          | 30.36         | 0.51                     | 0.00        | 2.80         | 1.00                            | 0.00        | 0.00         | 4.53                     | 1.00          | 10.84        | 13.31%                 | 100.00%         | 28.23%        |
| <b>CG Total</b>                      | <b>142.26</b>                 | <b>5.80</b>   | <b>102.91</b>  | <b>134.16</b>        | <b>5.20</b>   | <b>88.12</b>  | <b>2.11</b>              | <b>0.00</b> | <b>5.72</b>  | <b>1.00</b>                     | <b>0.00</b> | <b>0.00</b>  | <b>9.21</b>              | <b>0.60</b>   | <b>20.51</b> | <b>6.47%</b>           | <b>10.34%</b>   | <b>19.93%</b> |

Notes:  
 Net vacancy % = (Vacancies + Leavers Pending - Starters Pending) / Establishment  
 Leavers = currently serving notice  
 Starters = accepted appointment, now pending start date

# FINANCE PERFORMANCE REPORT

February-2021

Produced March-2021



**The Board Assurance Framework is structured around the Trust's three Strategic Goals:**

To deliver safe and high quality patient care as part of an integrated system

To support an engaged, healthy and resilient workforce

To ensure financial stability

# TRUST BOARD REPORT : February-2021

## SUMMARY INCOME AND EXPENDITURE POSITION

STRATEGIC OBJECTIVE : TO ENSURE FINANCIAL STABILITY

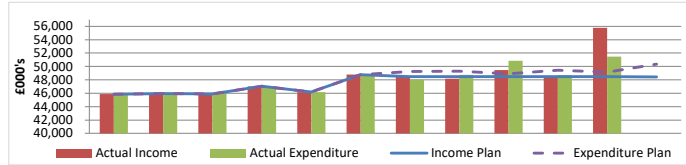
Feb-21 METRIC:

PLAN:

6.01  
Income and Expenditure

**£2,522**

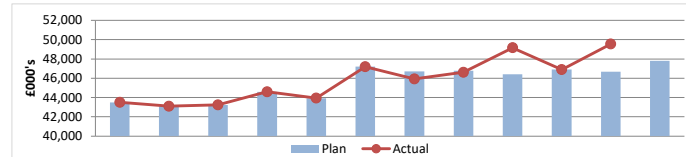
**-£3,558**



6.02  
Operational Expenditure against Plan (exc. COVID)

**£49,550**

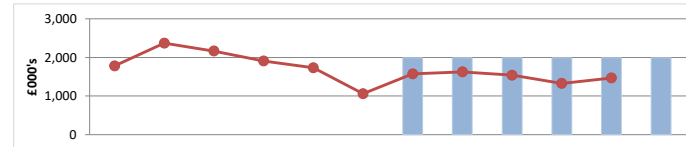
**£46,665**



6.03  
COVID-19 Expenditure

**£1,467**

**£1,987**



Monthly % Covid Spend of Operational Spend: 3.0%

6.04  
Income against plan (exc. Truing Up)

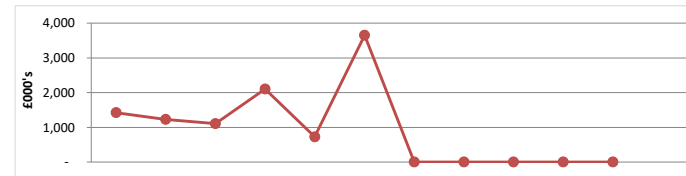
**£55,754**

**£48,484**



6.05  
Value of Truing Up Required

**£0**



### Highlights for the Board to Note:

#### Emergency Financial Regime

To support the NHS in its response to COVID-19 all normal financial arrangements have been suspended and an initial new national, temporary, emergency financial framework was put and was in operation until 30 September 2020. For the second half of the financial year, a new revised framework is now in place, and February is the fifth month to report under this new framework.

The revised framework for the second half of the year is allocation based, comprising a base allocation to cover the cost of normal activities and a secondary allocation to cover additional costs resulting from the Covid-19 pandemic. Other features of the revised framework are the NHSE/I expectation that organisations generate other 'non-patient' activity income commensurate with the levels seen in 2019/20; and the retrospective top-up process used in the first half of the year has been withdrawn. The emphasis from NHSE/I has now changed for the second half of the year with a greater focus on reintroducing financial control, with the Trust being expected to manage within its allocation and plans agreed with system partners.

The financial plan for the second half of the year submitted to NHSE/I was presented to, and agreed by the Board at its 4 November 2020 meeting. The agreed plan results in a £5.5m I&E deficit for the second half of the year, and is attributable to (a) other 'non-patient activities' income being £4.6m less than assumed by NHSE/I in determining commissioner allocations to the Trust, and (b) an increased annual leave accrual of £0.9m for staff unable to take their full leave entitlement due to the Covid-19 pandemic.

#### Month 11 Position

The Trust's performance for months 1 to 6 under the previous financial regime is shown on the graphs for completeness, and to illustrate that the Trust balanced its I&E each month as expected and for the first half year of 2020/21 overall, as a result of the retrospective top up process under the previous financial framework.

The graphs then go on to show the plans for months 7 to 12 under the new revised financial framework, against which actual performance will be measured. For February, the Trust is reporting an I&E position of £2.5m surplus against a planned deficit of £3.6m, placing it £6.1m ahead of the plan submitted to NHSE/I.

Income is £7.8m ahead of plan. The Board are reminded that from M7 onwards the trueing up arrangements in place for M1-6 have been withdrawn by NHSE/I, so graph 6.05 will report zero trueing up from this date. The income for M11 represents a significant stepped increase over M10. It now includes £3.0m (£3.5m full year) notified by NHSE/I to cover the planned non-clinical income shortfall, £1.0m income for activity using Independent Sector Providers, as well as income for PCR testing, Education & Training, R&D, and other income being ahead of plan to give an overall favourable variance.

Operational expenditure overall is £2.3m ahead of plan. Pay, Other Expenses and Clinical supplies are ahead of plan, with the latter linked to PCR testing, hearing aids, orthopaedic implants, and pacemakers. Partially offsetting this figure, expenditure on Covid-19 and elective activity costs across pay, drugs, and other expenditure are behind plan.

# TRUST BOARD REPORT : February-2021

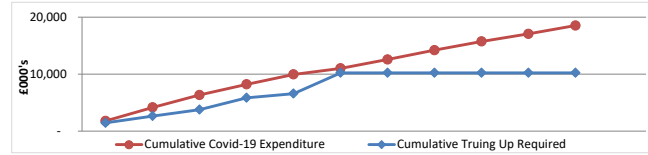
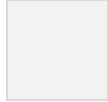
## SUMMARY INCOME AND EXPENDITURE POSITION

STRATEGIC OBJECTIVE : TO ENSURE FINANCIAL STABILITY

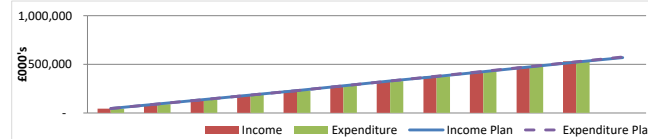
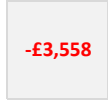
Feb-21 METRIC:

PLAN:

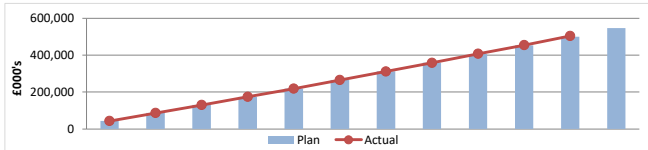
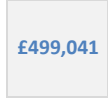
**-£8,305**  
6.06  
Cumulative COVID-19  
Expenditure and Cumulative  
Truing Up Requirement



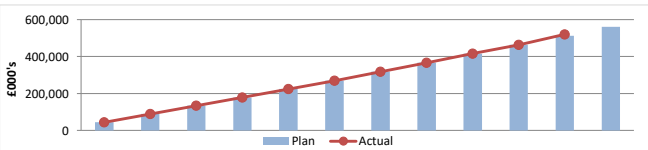
**£2,522**  
6.07  
Cumulative Income and  
Expenditure Position against  
Plan



**£503,708**  
6.08  
Cumulative Operational  
Expenditure against Plan  
(exc. COVID)



**£519,778**  
6.09  
Cumulative Income against  
plan (exc. Truing Up)



### Income and Expenditure Account

|   | Annual Plan<br>£000's | YTD Plan<br>£000's | YTD Actual<br>£000's | YTD<br>Variance<br>£000's | Forecast<br>Outturn<br>£000's |
|---|-----------------------|--------------------|----------------------|---------------------------|-------------------------------|
| NHS England   | 65,140                | 59,748             | 62,146               | 2,398                     | 67,105                        |
| Clinical commissioning groups   | 442,610               | 403,420            | 402,206              | -1,214                    | 439,920                       |
| Local authorities   | 4,303                 | 3,946              | 4,068                | 122                       | 4,436                         |
| Non-NHS: private patients   | 187                   | 171                | 186                  | 15                        | 187                           |
| Non-NHS: other  | 1,859                 | 1,432              | 1,752                | 320                       | 1,869                         |
| <b>Operating Income from Patient Care Activities</b>                      | <b>514,099</b>        | <b>468,717</b>     | <b>470,358</b>       | <b>1,641</b>              | <b>513,517</b>                |
| Research and development (both IFRS 15 and non-IFRS 15 income)            | 2,117                 | 1,950              | 2,163                | 213                       | 2,290                         |
| Education and training (excluding notional apprenticeship levy income)    | 19,728                | 18,111             | 19,905               | 1,794                     | 21,988                        |
| Other income  | 34,652                | 33,380             | 37,586               | 4,206                     | 41,587                        |
| <b>Other Operating Income</b>   | <b>56,497</b>         | <b>53,441</b>      | <b>59,654</b>        | <b>6,213</b>              | <b>65,865</b>                 |
| Employee Expenses   | -394,058              | -359,777           | -360,997             | -1,220                    | -398,127                      |
| Drugs Costs   | -57,205               | -51,970            | -50,164              | 1,806                     | -53,778                       |
| Supplies and Services - Clinical  | -43,904               | -37,379            | -39,719              | -2,340                    | -45,731                       |
| Depreciation  | -10,119               | -9,275             | -9,277               | -2                        | -10,120                       |
| Amortisation  | -330                  | -305               | -963                 | -658                      | -1,050                        |
| CIP   | 0                     | 0                  | 0                    | 0                         | 0                             |
| Other Costs   | -64,179               | -61,281            | -61,127              | 154                       | -67,197                       |
| <b>Total Operating Expenditure</b>  | <b>-569,795</b>       | <b>-519,987</b>    | <b>-522,247</b>      | <b>-2,260</b>             | <b>-576,003</b>               |
| <b>OPERATING SURPLUS/(DEFICIT)</b>  | <b>801</b>            | <b>2,171</b>       | <b>7,765</b>         | <b>5,594</b>              | <b>3,379</b>                  |
| Finance income  | 2                     | 2                  | 14                   | 12                        | 12                            |
| Finance expense   | -522                  | -481               | -466                 | 15                        | -517                          |
| PDC dividends payable/refundable  | -5,728                | -5,249             | -4,791               | 458                       | -5,267                        |
| <b>NET FINANCE COSTS</b>  | <b>-5,447</b>         | <b>-3,557</b>      | <b>2,522</b>         | <b>6,079</b>              | <b>-2,393</b>                 |
| Other gains/(losses) including disposal of assets                         | 0                     | 0                  | 0                    | 0                         | 0                             |
| Share of profit/ (loss) of associates/ joint ventures                     | 0                     | 0                  | 0                    | 0                         | 0                             |
| Gains/(losses) from transfers by absorption                               | 0                     | 0                  | 0                    | 0                         | 0                             |
| Movements in fair value of investments, investment property and financial | 0                     | 0                  | 0                    | 0                         | 0                             |
| Corporation tax expense   | 0                     | 0                  | 0                    | 0                         | 0                             |
| <b>SURPLUS/(DEFICIT)</b>  | <b>-5,447</b>         | <b>-3,557</b>      | <b>2,522</b>         | <b>6,079</b>              | <b>-2,393</b>                 |

The table above includes the latest forecast outturn position. There are two issues to note as follows:

Other income includes an interim cash payment of £3.5m from NHSE. This was paid in February 2021 but is subject to refinement. It is expected that the payment will be reduced/removed to the extent that the Trust does not need it to present a balanced position at year-end.

# TRUST BOARD REPORT : February-2021

## SUMMARY INCOME AND EXPENDITURE POSITION

STRATEGIC OBJECTIVE : TO ENSURE FINANCIAL STABILITY

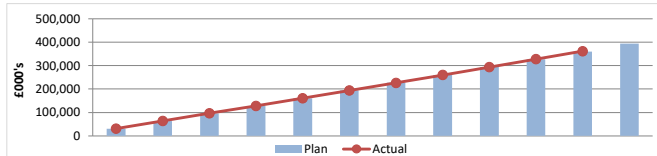
Feb-21 METRIC:

PLAN:

**£33,727**

6.1 Pay expenditure against plan

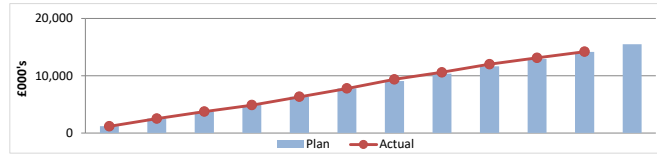
**£33,167**



**£1,085**

6.11 Agency expenditure against plan

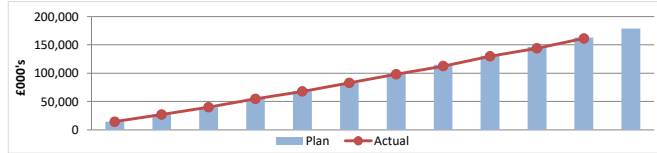
**£1,280**



**£17,290**

6.12 Non-pay expenditure against plan

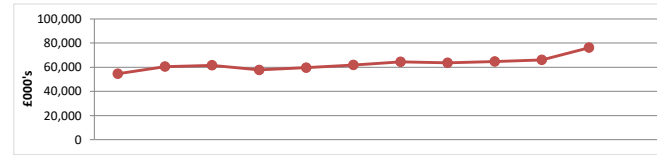
**£16,006**



**£76,198**

6.13 Cash Position

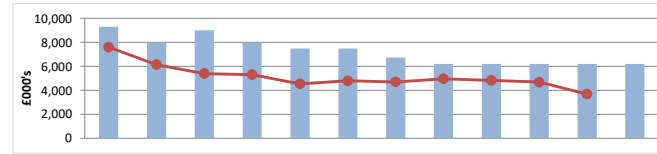
**£0**



**£3,688**

6.14 Debtors

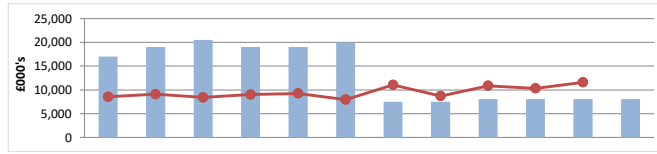
**£6,204**



**£11,592**

6.15 Creditors

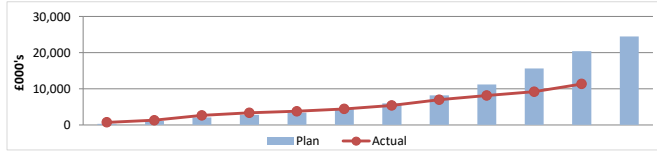
**£8,060**



**£11,362**

6.16 Capital

**£20,423**



### Pay Expenditure Analysis

| Staff Group                           | Annual Plan    | Year to Date   |                |                  |               |               |                | Total        | Variance |
|---------------------------------------|----------------|----------------|----------------|------------------|---------------|---------------|----------------|--------------|----------|
|                                       |                | Plan           | Contract       | WLI/<br>Overtime | Bank          | Agency        |                |              |          |
| Consultants                           | 68,644         | 62,431         | 53,229         | 824              | 1,528         | 4,175         | 59,755         | -2,676       |          |
| Medical and Dental                    | 50,240         | 46,001         | 35,966         | 171              | 7,706         | 3,525         | 47,368         | 1,367        |          |
| Nursing                               | 101,186        | 92,344         | 79,683         | 564              | 7,052         | 6,108         | 93,407         | 1,063        |          |
| Healthcare Scientists                 | 8,846          | 8,094          | 8,089          | 160              | 27            | 24            | 8,301          | 207          |          |
| Scientific, Therapeutic and technical | 11,864         | 10,844         | 10,761         | 90               | 23            | 9             | 10,883         | 39           |          |
| Allied Health Professionals           | 23,826         | 21,759         | 21,297         | 343              | 75            | 24            | 21,739         | -20          |          |
| HcAs and Support Staff                | 46,826         | 42,819         | 35,489         | 203              | 6,924         | 77            | 42,693         | -126         |          |
| Exec Board and Senior managers        | 21,460         | 19,605         | 15,128         | 54               | 0             | 250           | 15,432         | -4,173       |          |
| Admin & Clerical                      | 59,676         | 54,518         | 58,995         | 886              | 144           | 0             | 60,025         | 5,507        |          |
| Pay Reserves                          | 0              | 0              | 0              | 0                | 0             | 0             | 0              | 0            |          |
| Apprenticeship Levy                   | 1,490          | 1,362          | 1,393          | 0                | 0             | 0             | 1,393          | 31           |          |
| <b>TOTAL</b>                          | <b>394,058</b> | <b>359,777</b> | <b>320,030</b> | <b>3,295</b>     | <b>23,480</b> | <b>14,193</b> | <b>360,996</b> | <b>1,219</b> |          |

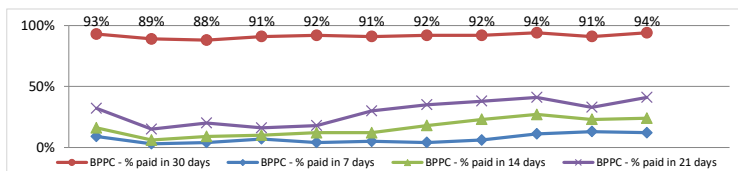
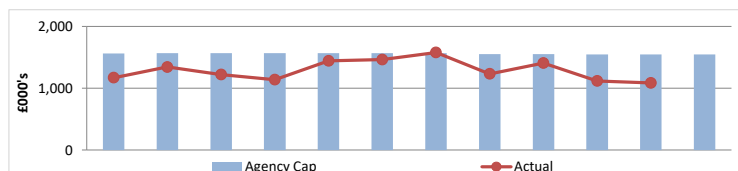
# TRUST BOARD REPORT : February-2021

## SUMMARY INCOME AND EXPENDITURE POSITION

STRATEGIC OBJECTIVE : TO ENSURE FINANCIAL STABILITY

| Feb-21 | METRIC:                                 | PLAN:  |
|--------|---|--------|
| £0     | 6.17<br>Capital Service Cover           | £0     |
| £0     | 6.18<br>Liquid Ratio                    | £0     |
| £0     | 6.19<br>I&E Margin                      | £0     |
| £0     | 6.2<br>I&E Margin Variance from Plan    | £0     |
| £1,085 | 6.21<br>Agency Spend against Agency Cap | £1,546 |

| BPPC Performance             |                                  |
|------------------------------|----------------------------------|
| Within 30 days<br><b>94%</b> | 6.22<br>BPPC - % paid in 30 days |
| Within 14 days<br><b>24%</b> | 6.23<br>BPPC - % paid in 7 days  |
|                              | 6.24<br>BPPC - % paid in 14 days |
|                              | 6.25<br>BPPC - % paid in 21 days |
|                              | <b>12%</b>                       |
|                              | <b>41%</b>                       |



### Highlights for the Board to Note:

|  | Plan for Year | Plan for Year-to-date | Actual Year-to-date | Forecast for Year |
|--|---------------|-----------------------|---------------------|-------------------|
| Capital Service Cover (20%)            |               |                       |                     |                   |
| Liquidity (20%)                        |               |                       |                     |                   |
| I&E Margin (20%)                       |               |                       |                     |                   |
| I&E Margin Variance From Plan (20%)    |               |                       |                     |                   |
| Agency variation from Plan (20%)       |               |                       |                     |                   |
| <b>Overall Use of Resources Rating</b> |               |                       |                     |                   |

### Other Financial Issues:

The Board should be aware that as part of the emergency financial regime the delivery of the Trust's Cost Improvement Programme (CIP) has been suspended. No adjustment has been made to income levels for any implied efficiency requirement.

It is clear from discussions with the National Team that there is an expectation that productivity improvements and efficiency gains for the NHS will feature in the post-COVID recovery programme. To that end, whilst actual delivery of the CIP has been suspended, work continues with Care Groups and Directorates to prepare plans; including the continued review of model hospital opportunities, the development of regular efficiency opportunities and the capture of transformational changes to service delivery accelerated as part of the Trust's (and wider NHS) COVID-19 response effort.

Metrics 6.17 through 6.20 are not being actively reviewed by NHSE/I due to the operation of the current emergency financial regime. When normal operation resumes it is expected these will remain key assessment metrics. 6.21 showing our agency spend against plan remains a live assessment metric and, at present, we are using less agency staff than plan.

The Trust's compliance with the Better Payments Practice Code (BPPC) is consistently good with an average of around 94% of suppliers now paid within 30 days. The Board are aware that all Trusts have been asked to accelerate payments down to 7 days where possible. This is proving challenging to maintain all the usual checks and assurances to validate payment but the Trust is averaging around 12%. At this stage we have no benchmarking information to assess our performance against.

# TRUST BOARD REPORT : February-2021

## SUMMARY INCOME AND EXPENDITURE POSITION

STRATEGIC OBJECTIVE : TO ENSURE FINANCIAL STABILITY

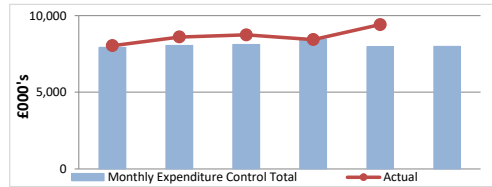
Feb-21 METRIC:

**£43,255**

6.51  
Acute Elderly Emergency  
General Medicine and  
Community Services - York

PLAN:

**£40,573**



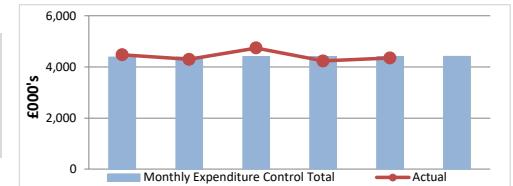
METRIC:

**£22,117**

6.57  
LLP Facilities Management

PLAN:

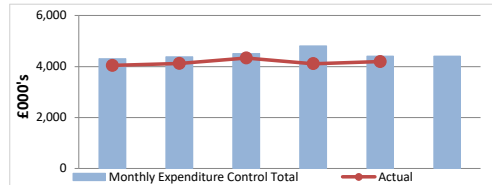
**£21,982**



**£20,797**

6.52  
Acute Emergency and  
Elderly Medicine-  
Scarborough

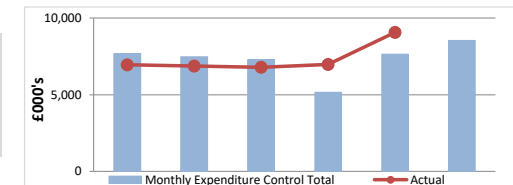
**£22,412**



**£36,675**

6.58  
Corporate Services

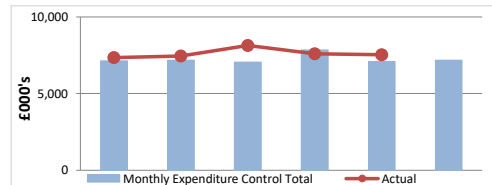
**£35,273**



**£38,059**

6.53  
Surgery

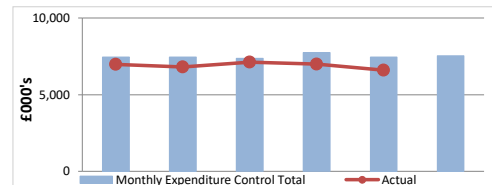
**£36,330**



**£34,527**

6.54  
Cancer and Support Services

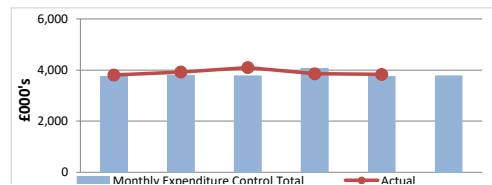
**£37,493**



**£19,508**

6.55  
Family Health & Sexual  
Health

**£19,126**



# RESEARCH AND DEVELOPMENT REPORT

February-2021

Produced March-2021



**The Board Assurance Framework is structured around the Trust's three Strategic Goals:**

To deliver safe and high quality patient care as part of an integrated system

To support an engaged, healthy and resilient workforce

To ensure financial stability



# TRUST BOARD REPORT : February-2021

## CLINICAL RESEARCH PERFORMANCE REPORT

### Recruitment

|         | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Total |
|---------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------|
| 2020-21 | 615 | 597 | 440 | 461 | 420 | 330 | 259 | 463 | 279 | 511 | 197 |     | 4572  |
| 2019-20 | 334 | 275 | 284 | 297 | 345 | 218 | 466 | 615 | 475 | 425 | 249 |     | 3983  |
| 2018-19 | 249 | 322 | 562 | 354 | 731 | 531 | 365 | 408 | 145 | 319 | 442 | 512 | 4940  |
| 2017-18 | 222 | 280 | 291 | 262 | 244 | 340 | 358 | 535 | 167 | 546 | 311 | 483 | 4039  |



Despite concentrating mainly on Covid studies to date this year we have still recruited 4572 patients into our clinical trials, which is fantastic as this means that we have smashed our accrual target of 3800, set by the CRN. This demonstrates an incredible amount of hard work from the team across all our clinical areas.

### Covid Study Breakdown April-Feb 21

| Covid Studies   | Accruals Running Total 20/21 |
|---|------------------------------|
| CCP (ISARIC)  | 1587                         |
| Genomic - Scarborough                                 | 5                            |
| Genomic - York  | 86                           |
| Recovery - Scarborough                                | 41                           |
| Recovery - York                                       | 178                          |
| REMAP CAP   | 28                           |
| PRIEST - Scarborough                                  | 215                          |
| PRIEST - York   | 298                          |
| Covpall   | 0                            |
| Pan Covid - Scarborough                               | 7                            |
| Pan Covid - York                                      | 51                           |
| SARS- COV2 (SIREN) - Scarborough                      | 98                           |
| SARS- COV2 (SIREN) - York                             | 200                          |
| Psychological Impact                                  | 478                          |
| DISCOVER  | 24                           |
| CLARITY   | 15                           |
| Adapt Sepsis  | 12                           |
| UKOSS - Scarborough                                   | 8                            |
| UKOSS - York  | 41                           |
| COVID TOTAL - All Care Groups Portfolio Studies       | 3323                         |
| COVID TOTAL - All Care Groups** Non Portfolio Studies | 49                           |

Not included in CRN return total of 4572

Not included in CRN return total of 4572

Not included in CRN return total of 4572

### Non Covid CG Totals April -Dec 2020

|                          |      |
|--------------------------|------|
| CG1 Non Covid Accruals   | 1103 |
| CG2 Non Covid Accruals   | 9    |
| CG3&5 Non Covid Accruals | 70   |
| CG4 Non Covid Accruals   | 31   |
| CG6 Non Covid Accruals   | 36   |
| TOTAL                    | 1249 |

|                             |      |
|-----------------------------|------|
| Recruitment Target for Year | 3800 |
| Open Trials                 | 70   |
| Total Due to Close 20/21    | 11   |

|                |     |
|----------------|-----|
| Commercial     | 6%  |
| Non-Commercial | 94% |
| Interventional | 30% |
| Observational  | 70% |
| I & O          | 0%  |

**CCP** The aim of the study is develop a mechanistic understanding of disease processes, understand pathogen characteristics associated with virulence such that risk factors for severe illness so treatments can be developed.

**Recovery** Randomised Evaluation of Covid 19 Therapy- Covid 19 confirmed patients will be randomly allocated between several treatment arms, each to be given in addition to the usual standard of care

**Remap Cap** This is a complex drug study looking at lots of different treatments to see if any of them have a therapeutic effect on patients.

**Priest** The aim is to identify the most accurate triage method for predicting severe illness among patients attending the emergency department with suspected respiratory infection

**GenoMICC** This study aims to establish a prospective DNA resource for hypothesis-testing and genome-wide discovery of host genetic variants underlying susceptibility to severe infection and outcomes.

**COVPALL** A national study looking to evaluate the COVID 19 response within palliative and end of life care services to help identify common challenges and best practices.

**Pan Covid** A global registry of women with suspected COVID-19 or confirmed SARS-CoV-2 infection in pregnancy and their neonates; understanding natural history to guide treatment and prevention

**SIREN** This study is investigating the impact of detectable anti SARS-COV2 antibodies on the incidence of COVID-19 in healthcare workers

**Psychological Impact of COVID-19** A public health survey investigating how people's emotional and mental health has been impacted by the pandemic.

**DISCOVER** The aim of this study is to compare and contrast trajectories of disability in activities of daily living (ADLs) over time, among adults with advanced lung cancer or respiratory disease particularly during the COVID pandemic

**Adapt Sepsis** The aim of this study is to determine whether treatment protocols based on monitoring daily CRP (C-reactive protein) or PCT (procalcitonin) safely allow a reduction in duration of antibiotic therapy in hospitalised adult patients with suspected sepsis.

**\*\* We also support some Covid studies that do not count towards our accrual target**

**UKOSS** This study aims to determine the incidence of hospitalisation with pandemic-type influenza or novel coronavirus in pregnancy and the outcomes of pandemic-type influenza or novel coronavirus in pregnancy for mother and infant.

**Neonatal Complications of COVID-19** A national registry recording information on babies with confirmed SARS-CoV-2 infection and any complications they develop throughout their Neonatal care.

**EDSAB HOME** Evaluating Detection of SARS-CoV-2 antibodies using home test kits. The project will evaluate the "first purchase" Home Testing Kits which the national programme will be using, while providing a route to rapid validation & verification of alternatives which may be available later in 2020.

**COVID-Trach** A national cohort study collecting outcome data for COVID-19 patients undergoing tracheostomy procedures.

# OPERATIONAL PERFORMANCE REPORT

February-2021

Produced March-2021



**The Board Assurance Framework is structured around the Trust's three Strategic Goals:**

To deliver safe and high quality patient care as part of an integrated system

To support an engaged, healthy and resilient workforce

To ensure financial stability

Report produced by:  
**Information Team**

## Operational Performance Report: February-2021

### Executive Summary

#### **Trust Strategic Goals:**

- to deliver safe and high quality patient care as part of an integrated system
- to support an engaged, healthy and resilient workforce
- to ensure financial sustainability

#### **Purpose of the Report:**

To provide the Board with an integrated overview of performance within the Trust.

#### **Executive Summary:**

##### **Key discussion points for the Board are:**

Nationally, the COVID-19 Pandemic NHS Emergency Preparedness, Resilience and Response incident level has moved back to a level 4 national response as the NHS has experienced a reduction in COVID-19 admissions following the 'third wave' of the pandemic seen throughout January and early February 2021. A level 4 national response is defined as "an incident that requires NHS England National Command and Control to support the NHS response; NHS England to coordinate the NHS response in collaboration with local commissioners at the tactical level".

The Trust has continued to operate within its COVID-19 surge plan throughout February and as at the 10th of March there were 47 COVID-19 positive inpatients in our acute and community hospitals. The number of COVID-19 positive inpatients peaked on the 26th of January at 216. The Trust has exceeded the 'peak' seen in wave 1 of the pandemic (131 on the 1st May 2020).

The Trust has had 2,691 COVID-19 positive inpatients since 17th March 2020, with 2,040 patients discharged, sadly 600 patients have died.

COVID-19 pressures affected the level of elective inpatients during February with the decision to stand down all routine (Priority 3 & Priority 4) ordinary elective surgery at York Hospital from the 13th of January. Ordinary electives are stood down at Scarborough site with the Day Unit continuing to operate with a plan to restart scheduling elective overnight stay patients from the 22nd March.

Cancer and Priority 2 surgical operations continued with the Nuffield Hospital and Clifton Park Treatment Centre utilised for Cancer and Priority 2 surgery from the 1st to 28th of February. The Trusts' Theatre prioritisation panel has been re-instated including independent ethics review.

In all 90 elective day case and inpatient procedures were cancelled by the Trust for COVID-19 reasons during February. The Trust's Medical Director has oversight of all cancellations.

Outpatient services were also affected in February; a number of services were stood down in January to support redeployment to the COVID-19 wards on the York site where staff were able to work on wards. As the Trust de-escalated in line with the Surge Plan services have returned to normal in the second half of February.

The Trust's COVID-19 surge plan has been under continuous review and was refreshed in readiness for the January and early February 2021 third wave taking into account lessons learnt in November and December 2020. As at the 10th of March York Hospital had two COVID-19 positive wards plus one admitting ward and there was one COVID-19 positive ward on the Scarborough site.

**Executive Summary (cont.):**

**Key discussion points for the Board are:**

Trust Planning

The implementation of the Trust surge plan has affected the Phase 3 activity plan (developed in September 2020 and submitted to NHSE). A significant COVID-19 surge was flagged as a risk to the delivery of the plan from the outset and this has materialised in January and much of February.

| Point of Delivery          | Phase 3 Plan | February Actual | Variance |
|----------------------------|--------------|-----------------|----------|
| Non-Electives              | 5,994        | 4,412           | -1,582 ↓ |
| First Outpatient Appts     | 21,648       | 20,317          | -1,331 ↓ |
| Follow up Outpatient Appts | 36,170       | 38,956          | 2,786 ↑  |
| Ordinary Electives         | 491          | 387             | -104 ↓   |
| Day Cases                  | 5,080        | 4,156           | -924 ↓   |

Day Case and Ordinary Elective activity was provisionally below the required 90% of 2019/20 outturn however provisional activity in Outpatients exceeded 100% of 2019/20 outturn. Due to the third wave of COVID-19 the Elective Incentive Scheme has been suspended indefinitely.

February Performance Headlines:

- 79.3% of ED patients were admitted, transferred or discharged within four hours during February 2021.
- The Trust achieved compliance in one out of seven cancer standards in January 2021; a deep dive clinical summit has been convened for late March to understand the causal factors and improvement actions to be taken.
- 2,581 fifty-two week wait pathways have been declared for the end of February 2021.
- The Trust saw a decline against the overall Referral to Treatment backlog, with the percentage of patients waiting under 18 weeks at month end decreasing from 63.9% in January to 62.8% at the end of February 2021.

**Recommendation:**

The Board is asked to receive the report and note the impact on the Trust KPIs and the actions being taken to address the performance challenges.

Author(s): Andrew Hurren, Deputy Head of Operational Planning and Performance  
Lynette Smith, Head of Operational Planning and Performance  
Steve Reed, Head of Community Services

Director Sponsor: Wendy Scott, Chief Operating Officer

Date: Mar 2021

# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE SUMMARY

| REF  | OPERATIONAL PERFORMANCE: UNPLANNED CARE   | TARGET | SPARKLINE / Vs. PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|---|--------|--------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1.01 | Emergency Care Attendances  |        |                                | 16770  | 13034  | 7755   | 10753  | 11889  | 14453  | 16142  | 15001  | 14254  | 12112  | 12370  | 11553  | 10842  |
| 1.02 | Emergency Care Breaches   |        |                                | 3065   | 2131   | 490    | 766    | 673    | 1098   | 2146   | 2661   | 2734   | 2001   | 2766   | 2752   | 2241   |
| 1.03 | Emergency Care Standard Performance   | 95%    |                                | 81.7%  | 83.7%  | 93.7%  | 92.9%  | 94.3%  | 92.4%  | 86.7%  | 82.3%  | 80.8%  | 83.5%  | 77.6%  | 76.2%  | 79.3%  |
| 1.04 | ED Conversion Rate: Proportion of ED attendances subsequently admitted                        |        |                                | 44%    | 42%    | 43%    | 42%    | 42%    | 41%    | 39%    | 41%    | 42%    | 44%    | 43%    | 43%    | 43%    |
| 1.05 | ED Total number of patients waiting over 8 hours in the departments                           |        |                                | 801    | 468    | 55     | 105    | 53     | 102    | 209    | 384    | 444    | 258    | 503    | 593    | 445    |
| 1.06 | ED 12 hour trolley waits  | 0      |                                | 4      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 7      | 14     | 21     | 43     |
| 1.07 | ED: % of attendees assessed within 15 minutes of arrival                                      |        |                                | 61%    | 64%    | 71%    | 71%    | 70%    | 65%    | 61%    | 60%    | 61%    | 65%    | 63%    | 65%    | 69%    |
| 1.08 | ED: % of attendees seen by doctor within 60 minutes of arrival                                |        |                                | 38%    | 48%    | 88%    | 79%    | 77%    | 68%    | 52%    | 48%    | 49%    | 58%    | 58%    | 60%    | 62%    |
| 1.09 | ED - Percentage of patients who Left Without Being Seen (LWBS)                                | 5%     |                                | 2.1%   | 2.4%   | 0.8%   | 0.8%   | 0.8%   | 1.4%   | 1.8%   | 1.8%   | 1.6%   | 1.1%   | 1.7%   | 1.4%   | 1.5%   |
| 1.10 | ED - Median time between arrival and treatment (minutes)                                      |        |                                | 194    | 183    | 145    | 150    | 151    | 158    | 181    | 190    | 192    | 177    | 199    | 206    | 193    |
| 1.11 | Ambulance handovers waiting 15-29 minutes   |        |                                | 943    | 799    | 477    | 542    | 502    | 586    | 611    | 542    | 613    | 561    | 696    | 710    | 598    |
| 1.12 | Ambulance handovers waiting 15-29 minutes - improvement trajectory                            |        |                                | 681    | 677    | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 1.13 | Ambulance handovers waiting 30-59 minutes   |        |                                | 465    | 324    | 113    | 126    | 91     | 118    | 152    | 147    | 129    | 151    | 209    | 200    | 101    |
| 1.14 | Ambulance handovers waiting 30-59 minutes - improvement trajectory                            |        |                                | 304    | 285    | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 1.15 | Ambulance handovers waiting >60 minutes   |        |                                | 263    | 176    | 6      | 15     | 14     | 13     | 27     | 37     | 60     | 26     | 44     | 102    | 19     |
| 1.16 | Ambulance handovers waiting >60 minutes - improvement trajectory                              |        |                                | 231    | 215    | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 1.17 | Ambulance handovers: Percentage waiting within 15 mins (shadow monitoring)                    |        |                                | 54.6%  | 58.4%  | 75.2%  | 75.3%  | 78.1%  | 77.0%  | 76.9%  | 77.4%  | 76.6%  | 72.0%  | 71.1%  | 69.5%  | 74.5%  |
| 1.18 | ED - Mean time in department (mins) for non-admissions (shadow monitoring)                    |        |                                | 197    | 186    | 133    | 138    | 140    | 150    | 177    | 184    | 190    | 170    | 185    | 192    | 183    |
| 1.19 | ED - Mean time in department (mins) for admissions (shadow monitoring)                        |        |                                | 279    | 254    | 187    | 196    | 183    | 194    | 234    | 269    | 269    | 247    | 310    | 341    | 314    |
| 1.21 | ED - Mean time between RFT and admission (mins) for admissions (shadow monitoring)            |        |                                | 96     | 82     | 51     | 58     | 47     | 48     | 66     | 87     | 92     | 89     | 134    | 170    | 146    |
| 1.22 | ED - Number of non-admissions waiting 12+ hours (shadow monitoring)                           |        |                                | 34     | 27     | 1      | 8      | 0      | 7      | 15     | 15     | 36     | 23     | 38     | 40     | 39     |
| 1.23 | ED - Number of admissions waiting 12+ hours (shadow monitoring)                               |        |                                | 188    | 98     | 3      | 15     | 2      | 8      | 45     | 94     | 132    | 81     | 225    | 323    | 232    |
| 1.24 | ED - Critical time standards (shadow monitoring - awaiting guidance on metrics)               |        |                                | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 2.01 | Non Elective Admissions (excl Paediatrics & Maternity)  |        |                                | 5004   | 3978   | 2936   | 3572   | 3989   | 4545   | 4707   | 4678   | 4692   | 4381   | 4477   | 4188   | 3381   |
| 2.02 | Non Elective Admissions - Paediatrics   |        |                                | 779    | 568    | 305    | 345    | 352    | 369    | 364    | 479    | 454    | 471    | 382    | 351    | 376    |
| 2.05 | Patients with LOS 0 Days (Elective & Non-Elective)  |        |                                | 2410   | 1906   | 1089   | 1375   | 1628   | 1899   | 1861   | 1930   | 1973   | 1903   | 1737   | 1479   | 1552   |
| 2.06 | Total number of patients during the month with a LoS >= 7 Midnights (Elective & Non-Elective) |        |                                | 1103   | 778    | 622    | 710    | 705    | 766    | 934    | 962    | 985    | 946    | 982    | 1063   | 885    |
| 2.07 | Ward Transfers - Non clinical transfers after 10pm  | 100    |                                | 91     | 51     | 65     | 39     | 15     | 25     | 25     | 41     | 50     | 39     | 47     | 35     | 53     |
| 2.08 | Emergency readmissions within 30 days   |        |                                | 939    | 689    | 454    | 575    | 698    | 760    | 788    | 842    | 997    | 931    | 810    | -      | -      |
| 2.09 | Stranded Patients at End of Month - York, Scarborough and Bridlington                         |        |                                | 342    | 147    | 176    | 185    | 184    | 149    | 230    | 264    | 273    | 266    | 266    | 325    | 291    |
| 2.10 | Average Bed Days Occupied by Stranded Patients - York, Scarborough and Bridlington            |        |                                | 387    | 311    | 144    | 178    | 176    | 175    | 203    | 253    | 266    | 278    | 264    | 303    | 287    |
| 2.12 | Super Stranded Patients at End of Month - York, Scarborough and Bridlington                   |        |                                | 121    | 55     | 38     | 40     | 34     | 30     | 35     | 70     | 87     | 63     | 67     | 81     | 86     |
| 2.13 | Average Bed Days Occupied by Super Stranded Patients - York, Scarborough and Bridlington      |        |                                | 133    | 98     | 39     | 42     | 43     | 40     | 40     | 57     | 80     | 78     | 72     | 79     | 85     |

| REF  | OPERATIONAL PERFORMANCE: PLANNED CARE  | TARGET | SPARKLINE / Vs. PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|--|--------|--------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 3.01 | Outpatients: All Referral Types  |        |                                | 18830  | 15399  | 7568   | 10898  | 15767  | 18216  | 16877  | 20842  | 21296  | 19632  | 19581  | 17076  | 16231  |
| 3.02 | Outpatients: GP Referrals  |        |                                | 9044   | 7416   | 2062   | 3985   | 5950   | 7383   | 6853   | 8067   | 8566   | 7997   | 7776   | 6534   | 7027   |
| 3.03 | Outpatients: Consultant to Consultant Referrals                                  |        |                                | 2063   | 1705   | 893    | 1038   | 1220   | 1429   | 1348   | 1703   | 1686   | 1647   | 1646   | 1564   | 1463   |
| 3.04 | Outpatients: Other Referrals   |        |                                | 7723   | 6278   | 4613   | 5875   | 8597   | 9404   | 8676   | 11072  | 11044  | 9988   | 10159  | 8978   | 7741   |
| 3.05 | Outpatients: 1st Attendances   |        |                                | 14027  | 11572  | 4866   | 5711   | 7909   | 9973   | 9590   | 12070  | 13191  | 13299  | 12802  | 12716  | 11926  |
| 3.06 | Outpatients: Follow Up Attendances   |        |                                | 31425  | 28489  | 16495  | 17379  | 21649  | 25178  | 24389  | 30170  | 31619  | 32920  | 30501  | 31532  | 30485  |
| 3.07 | Outpatients: 1st to FU Ratio   |        |                                | 2.24   | 2.46   | 3.39   | 3.04   | 2.74   | 2.52   | 2.54   | 2.50   | 2.40   | 2.48   | 2.38   | 2.48   | 2.56   |
| 3.08 | Outpatients: DNA rates   |        |                                | 6.1%   | 5.7%   | 4.2%   | 4.0%   | 4.3%   | 5.0%   | 6.2%   | 6.3%   | 6.2%   | 6.5%   | 6.1%   | 7.0%   | 6.2%   |
| 3.09 | Outpatients: Cancelled Clinics with less than 14 days notice                     | 180    |                                | 250    | 751    | 1331   | 653    | 734    | 707    | 236    | 249    | 188    | 263    | 216    | 333    | 248    |
| 3.10 | Outpatients: Hospital Cancelled Outpatient Appointments for non-clinical reasons |        |                                | 978    | 2070   | 3855   | 3191   | 3571   | 4441   | 2192   | 1867   | 1461   | 1276   | 1271   | 1036   | 1002   |
| 3.11 | Outpatients: Follow-up Partial Booking (FUPB) Overdue                            |        |                                | 12971  | 14468  | 16876  | 19525  | 21994  | 24726  | 26543  | 28149  | 28225  | 28182  | 27550  | 25782  | 24835  |
| 4.01 | Elective Admissions  |        |                                | 666    | 489    | 109    | 170    | 254    | 341    | 351    | 416    | 557    | 505    | 513    | 437    | 486    |
| 4.02 | Day Case Admissions  |        |                                | 6215   | 4924   | 1953   | 2447   | 3414   | 4435   | 4447   | 5439   | 5902   | 5629   | 5430   | 4652   | 4505   |
| 4.03 | Cancelled Operations within 48 hours - Bed shortages                             |        |                                | 10     | 333    | 14     | 0      | 3      | 0      | 2      | 3      | 5      | 8      | 10     | 121    | 10     |
| 4.04 | Cancelled Operations within 48 hours - Non clinical reasons                      |        |                                | 89     | 408    | 21     | 4      | 19     | 28     | 37     | 57     | 65     | 89     | 37     | 183    | 87     |
| 4.05 | Theatres: Utilisation of planned sessions  |        |                                | 74%    | 58%    | 16%    | 25%    | 41%    | 66%    | 72%    | 66%    | 68%    | 69%    | 68%    | 57%    | 62%    |
| 4.06 | Theatres: number of sessions held  |        |                                | 720    | 484    | 104    | 98     | 264    | 537    | 586    | 693    | 726    | 712    | 675    | 604    | 639    |

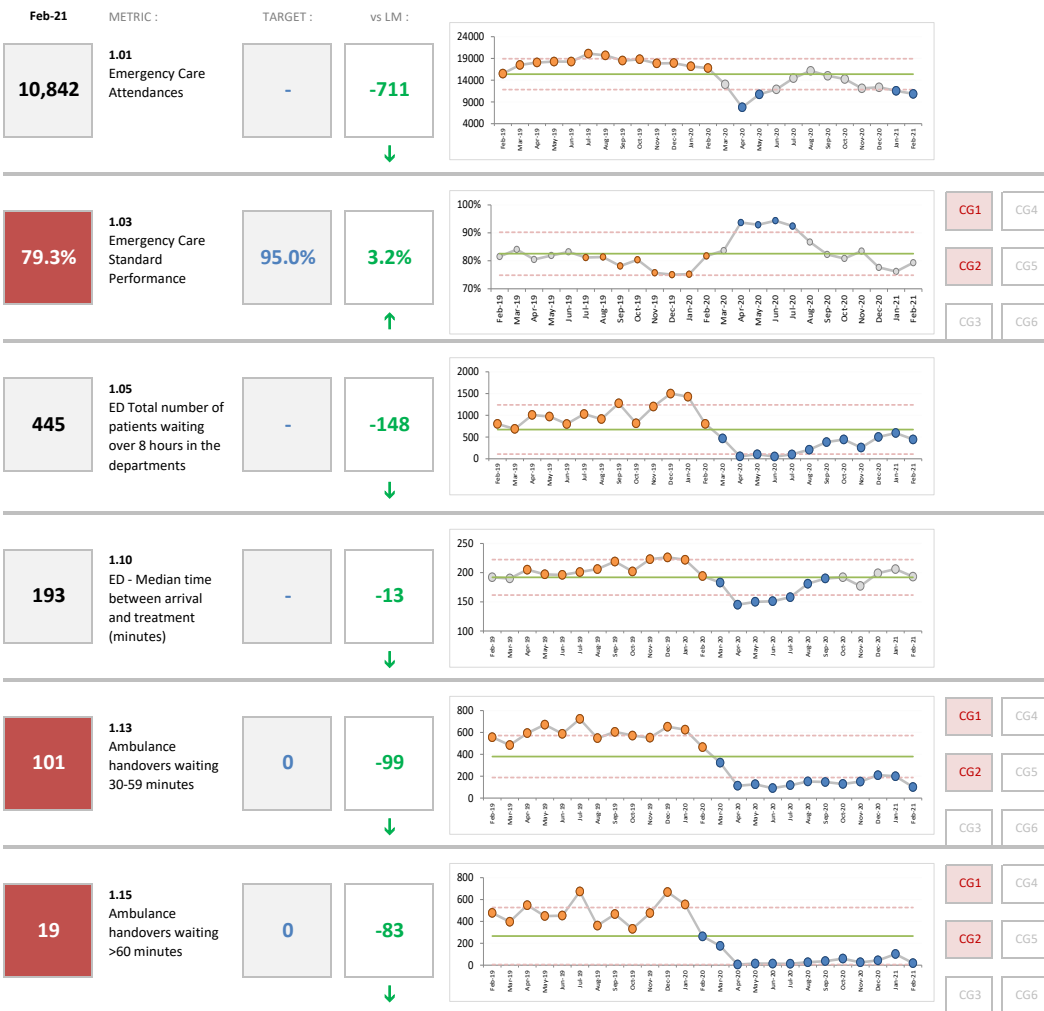
# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE SUMMARY

| REF   | DIAGNOSTICS   | TARGET | SPARKLINE / Vs. PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|---|---|--------|--------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 3.12  | Diagnostics: Patients waiting <6 weeks from referral to test                          | 99%    |                                | 86.1%  | 75.1%  | 22.6%  | 23.0%  | 34.3%  | 46.2%  | 46.6%  | 53.7%  | 61.0%  | 66.4%  | 63.5%  | 61.0%  | 66.6%  |
| 3.13  | Diagnostics: Total Fast Track Waiters   |        |                                | 417    | 383    | 462    | 596    | 597    | 723    | 537    | 618    | 740    | 645    | 750    | 655    | 671    |
| 3.19  | Diagnostics: Urgent Radiology Waiters   |        |                                | 393    | 140    | 176    | 259    | 337    | 417    | 379    | 502    | 695    | 707    | 702    | 627    | 733    |
| 3.38  | Total Overdue Planned Radiology Waiters   |        |                                | 317    | 390    | 894    | 1333   | 1300   | 1103   | 1137   | 760    | 617    | 367    | 341    | 735    | 605    |
| 3.22  | Total Radiology Reporting Backlog   |        |                                | 4910   | 4671   | 1040   | 503    | 260    | 926    | 1346   | 1804   | 1530   | 1441   | 2962   | 1718   | 2176   |
| 3.31  | Total Endoscopy Surveillance Backlog (Red)  |        |                                | 835    | 746    | 870    | 973    | 1073   | 1161   | 1264   | 1337   | 1345   | 1307   | 1384   | 1467   | 1485   |
| REF   | 18 WEEKS REFERRAL TO TREATMENT  | TARGET | SPARKLINE / Vs. PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
| 5.01  | RTT Percentage of incomplete pathways within 18wks                                    | 92%    |                                | 73.6%  | 69.7%  | 58.7%  | 49.5%  | 42.0%  | 42.3%  | 52.7%  | 60.0%  | 65.5%  | 67.5%  | 66.7%  | 63.9%  | 62.8%  |
| 5.02  | RTT Waits over 52 weeks for incomplete pathways                                       | 0      |                                | 0      | 32     | 158    | 452    | 910    | 1360   | 1764   | 1986   | 2176   | 2250   | 2251   | 2506   | 2581   |
| 5.03  | RTT Waits over 26 weeks for incomplete pathways                                       | 0      |                                | 3866   | 4413   | 5734   | 7567   | 8800   | 9815   | 10435  | 9771   | 7751   | 6489   | 6031   | 6085   | 6184   |
| 5.04  | RTT Waits over 36 weeks for incomplete pathways                                       | 0      |                                | 1311   | 1681   | 2474   | 3424   | 4597   | 5458   | 6131   | 6163   | 6125   | 5701   | 4651   | 4037   | 3693   |
| 5.05  | RTT Total Waiting List  | 29,583 |                                | 29534  | 28508  | 24947  | 24888  | 25057  | 25107  | 26141  | 27042  | 27908  | 27646  | 28040  | 27154  | 27193  |
| 5.06  | Number of RTT patients on Admitted Backlog (18+ weeks)                                |        |                                | 4075   | 4540   | 5506   | 6442   | 7114   | 7182   | 6654   | 6019   | 5318   | 4716   | 4375   | 4341   | 4328   |
| 5.07  | Number of RTT patients on Non Admitted Backlog (18+ weeks)                            |        |                                | 3727   | 4085   | 4797   | 6133   | 7429   | 7296   | 5711   | 4787   | 4323   | 4275   | 4963   | 5453   | 5792   |
| 5.08  | RTT Mean Week Waiting Time - Incomplete Pathways (Shadow monitoring)                  | 8.5    |                                | 12.0   | 13.7   | 17.7   | 20.1   | 21.4   | 21.4   | 20.7   | 19.6   | 18.2   | 17.5   | 17.7   | 18.2   | 18.1   |
| REF   | CANCER (ONE MONTH BEHIND DUE TO NATIONAL REPORTING TIMETABLE)                         | TARGET | SPARKLINE / PREVIOUS MONTH     | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
| 6.01  | Cancer 2 week (all cancers)   | 93%    |                                | 94.4%  | 90.8%  | 85.6%  | 96.9%  | 96.4%  | 95.0%  | 94.5%  | 88.7%  | 93.4%  | 93.5%  | 94.2%  | 90.2%  | -      |
| 6.02  | Cancer 2 week (breast symptoms)   | 93%    |                                | 99.1%  | 95.3%  | 90.9%  | 95.7%  | 97.6%  | 96.4%  | 95.1%  | 95.1%  | 88.0%  | 93.9%  | 97.3%  | 80.0%  | -      |
| 6.03  | Cancer 31 day wait from diagnosis to first treatment                                  | 96%    |                                | 100.0% | 96.8%  | 98.6%  | 99.4%  | 97.8%  | 96.8%  | 97.0%  | 97.3%  | 96.8%  | 98.9%  | 97.0%  | 95.7%  | -      |
| 6.04  | Cancer 31 day wait for second or subsequent treatment - surgery                       | 94%    |                                | 91.1%  | 94.4%  | 75.0%  | 82.1%  | 89.7%  | 88.2%  | 81.8%  | 92.6%  | 88.4%  | 87.5%  | 90.9%  | 85.3%  | -      |
| 6.05  | Cancer 31 day wait for second or subsequent treatment - drug treatments               | 98%    |                                | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 98.1%  | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | -      |
| 6.06  | Cancer 62 Day Waits for first treatment (from urgent GP referral)                     | 85%    |                                | 73.3%  | 84.0%  | 75.1%  | 81.2%  | 82.5%  | 79.1%  | 81.6%  | 75.5%  | 74.2%  | 74.3%  | 75.5%  | 70.0%  | -      |
| 6.07  | Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral)* | 90%    |                                | 96.8%  | 95.6%  | 100.0% | -      | -      | -      | -      | -      | 91.2%  | 91.1%  | 86.7%  | 80.5%  | -      |
| 6.08  | Cancer 28 Day Wait - Faster Diagnosis Standard  | 75%    |                                | 72.3%  | 69.4%  | 54.2%  | 67.1%  | 64.4%  | 65.9%  | 62.3%  | 63.9%  | 61.1%  | 61.5%  | 66.7%  | 53.6%  | -      |
| *62 day screening: months with five or fewer records from May-20 are not included |   |        |                                |        |        |        |        |        |        |        |        |        |        |        |        |        |
| REF   | COMMUNITY   | TARGET | SPARKLINE / Vs. PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
| 7.01  | Referrals to District Nursing Team  |        |                                | 1621   | 1614   | 1806   | 1857   | 2139   | 2169   | 1816   | 2068   | 2148   | 2091   | 1913   | 1956   | 1761   |
| 7.02  | % CRT Patients Seen within 2 days of Referral   |        |                                | 53.0%  | 58.7%  | 89.7%  | 96.2%  | 91.9%  | 92.4%  | 92.1%  | 83.3%  | 85.3%  | 83.1%  | 89.2%  | 84.3%  | 73.1%  |
| 7.03  | Number of District Nursing Contacts   |        |                                | 16947  | 18851  | 16259  | 18289  | 20800  | 21927  | 20296  | 20081  | 20941  | 21013  | 20258  | 19294  | 17983  |
| 7.04  | Referrals to York Community Response Team   |        |                                | 114    | 181    | 208    | 189    | 179    | 171    | 157    | 214    | 196    | 216    | 198    | 227    | 190    |
| 7.05  | Referrals to Selby Community Response Team  |        |                                | 60     | 54     | 57     | 67     | 58     | 48     | 65     | 58     | 69     | 58     | 60     | 69     | 57     |
| 7.07  | Number of York CRT Contacts   |        |                                | 2745   | 3849   | 4197   | 4469   | 3711   | 4653   | 4444   | 4782   | 5265   | 5799   | 5221   | 4856   | 3900   |
| 7.08  | Number of Selby CRT Contacts  |        |                                | 1583   | 1840   | 1365   | 1269   | 1529   | 1734   | 1451   | 1574   | 1759   | 1730   | 1342   | 1269   | 1288   |
| 7.10  | Community Inpatient Units Average Length of Stay (Days)                               |        |                                | 16.3   | 16.5   | 12.4   | 9.7    | 10.9   | 9.8    | 12.3   | 12.8   | 13.5   | 15.1   | 12.1   | 10.5   | 12.5   |
| 7.11  | % Community Therapy Team Patients Seen within 6 weeks of Referral                     |        |                                | 63.0%  | 37.4%  | 61.2%  | 65.3%  | 71.7%  | 70.8%  | 64.8%  | 62.8%  | 54.9%  | 53.0%  | 56.3%  | 53.1%  | 46.4%  |
| REF   | CHILDREN AND YOUNG PERSONS (0-17 YEARS)   | TARGET | SPARKLINE / Vs. PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
| 8.01  | Emergency Care Standard Performance (Type 1 only)                                     | 95%    |                                | 93.5%  | 93.7%  | 98.3%  | 98.4%  | 98.5%  | 97.5%  | 94.1%  | 92.6%  | 93.6%  | 94.9%  | 96.6%  | 97.3%  | 97.1%  |
| 8.02  | ED patients waiting over 8 hours in department  |        |                                | 6      | 6      | 2      | 1      | 0      | 2      | 1      | 2      | 5      | 7      | 1      | 1      | 2      |
| 8.03  | Cancer 2 week (all cancers)   | 93%    |                                | 85.7%  | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 75.0%  | 100.0% | 100.0% | 100.0% | 100.0% | -      |
| 8.05  | Diagnostics: Patients waiting <6 weeks from referral to test                          | 99%    |                                | 90.0%  | 78.6%  | 17.1%  | 14.6%  | 34.2%  | 41.4%  | 44.8%  | 52.0%  | 57.8%  | 55.5%  | 54.5%  | 51.8%  | 50.9%  |
| 8.06  | RTT Percentage of incomplete pathways within 18wks                                    | 92%    |                                | 81.4%  | 78.4%  | 67.3%  | 55.5%  | 44.6%  | 41.1%  | 51.7%  | 59.8%  | 67.4%  | 70.7%  | 70.5%  | 66.8%  | 66.3%  |
| 8.07  | RTT Total Waiting List  |        |                                | 2553   | 2495   | 2056   | 1994   | 2009   | 1903   | 1997   | 2179   | 2195   | 2081   | 2040   | 2026   | 2102   |
| 8.08  | RTT Waits over 52 weeks for incomplete pathways                                       |        |                                | 0      | 2      | 7      | 24     | 51     | 102    | 147    | 192    | 224    | 227    | 211    | 225    | 218    |

# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE: ED



### HIGHLIGHTS FOR BOARD TO NOTE:

79.3% of ED patients were admitted, transferred or discharged within four hours during February 2021. This compares with 81.7% in February 2020. Root cause analysis of Emergency Care Standard (ECS) breaches continues at both sites, themes include delays in ED assessment and admission. During February both York and Scarborough sites have had front line staff absences due to COVID-19 Track and Trace and self-isolation requirements.

York Hospital Locality ECS Performance was 82.2%. The estate has been reconfigured throughout the third wave to support the COVID-19 Surge Plan, with two COVID-19 positive wards plus one admitting ward in operation as at the 10th of March.

Scarborough Hospital Locality ECS Performance was 75.3%. Scarborough's overall performance has been impacted by a significant reduction in the number of Type 3 attendances (a reduction of 59% compared to February 2020).

At the end of February there were three COVID-19 positive wards plus one admitting ward open on the Scarborough site.

There were forty three twelve-hour trolley waits in January 2021; all on the Scarborough Hospital site. The Care Group Team are undertaking a deep dive exercise to further explore and understand causal factors with a Quality and Performance Summit to be held on the 22nd of March. This Summit will be led by the Chief Operating Officer in conjunction with the Medical Director and Chief Nurse and will discuss and agree collectively what actions will be taken to address this situation.

NHS England and Improvement published a report on the 15th December 2020 entitled the 'Transformation of urgent and emergency care: models of care and measurement'. This report sets out the final recommendations on the urgent and emergency care standards from the Clinically-led Review of NHS Standards. It sets out proposed measures which "align with the strategy for transforming urgent and emergency care provision". The intention is to enable a new national focus on measuring what is both important to the public, but also clinically meaningful. These indicators have been developed through extensive field testing with a number of acute NHS Trusts and through consultation with an extensive group of clinical and patient representative stakeholders. Patients, clinicians and the public now have an opportunity to respond to these findings in a consultation period. The index section of this report displays the proposed metrics (Ref: 1.17 to 1.23) which will be shadow monitored throughout the consultation period.

Non-Elective admissions have been affected by the third national lockdown; down 32% in February 2021 on the same period last year (-1,623 admissions). York Hospital saw a reduction of 902 admissions (-28%) with Scarborough seeing a reduction of 721 (-41%) compared to February 2020.

The Trust continues to work with system partners to explore options to sustain urgent care flows, and prevent crowded Emergency Department waiting areas, this includes the national '111 First' ('talk before you walk') initiative which commenced on plan in December. This provides a further filter or clinical triage process before attending a booked appointment in the Urgent Treatment Centre or Emergency Department.

Super-Stranded (Length of Stay [LoS] of 21+ Days) patients at the end of February 2020 were up compared to the end of January (81 to 86 patients). System level escalation meetings have been reinstated to ensure all efforts are made to ensure patients who do not have the right to reside (medically fit) are in an appropriate place of care or supported at home. The system Discharge Coordinators and Executive Leads (as per the COVID-19 Discharge Guidance) supports escalation and action.



# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE: CANCER



### HIGHLIGHTS FOR BOARD TO NOTE:

Trust cancer performance in January 2020 was challenged, with only one out of the seven cancer standards met; a deep dive clinical summit has been convened for late March to understand the causal factors and improvement actions to be taken.

The Trust saw deterioration against the Cancer two week waiting times for urgent referrals target, with performance of 90.2% in January. This was above the national performance of 83.4%.

For 37.5% of the patients that were not seen within 14 days, the delay was initiated by the patient. January was a surge month for COVID-19 and this may have influenced patient decisions to delay their appointments. This was particularly notable in Head and Neck referrals (100% of breaches were due to patient choice), with Gynaecology, upper GI and Skin also seeing more than 50% of breaches due to patient choice.

Following a reduction in the number of cancer fast track referrals received in January referrals received in February (1,568) have recovered and were slightly up 5% (+71 referrals) compared to February 2020.

Performance against the 62 day wait for first treatment target was 70%. This equates to 46 breaches, with sixty percent on Colorectal and Urological pathways. 69% of patient delays were due to capacity or health care initiated delays. All patients are tracked through the operational teams, with weekly escalations to senior managers. This was below the national performance of 71.2%.

At the end of February 2021 there were 116 patients on the Trust's Patient Tracking List (PTL) that had waited over 62 days, a decrease of 39 against the end of January 2021 position. Of those waiting over 62 days, 86 are awaiting diagnosis; tackling this backlog is a top priority for the Trust and the Humber, Coast and Vale system and is a key element of the recovery work.

Of the patients treated in January, there were 14 patients who had waited more the 105 days. The majority were due to complex or inconclusive diagnostics, with delays due to capacity also reported for Urological pathways. There has been a real focus on the long wait patients at the Trust's weekly PTL Cancer Wall meetings. There were 108 on the 27th July 2020, as at the 10th of March 2021 there were 23. To understand the impact of longer waits for patients the Trust undertakes Clinical Harm Reviews (CHR). All long waiting (105+ days) patients receive a CHR that looks at the chronology of a patient's care and ascertains whether the delay to treatment has resulted in any harm. This is a clinician-led process that reports to the Cancer Delivery Board and then into the Trust's Quality Committee.



# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE: DIAGNOSTICS

Feb-21

METRIC :

TARGET :

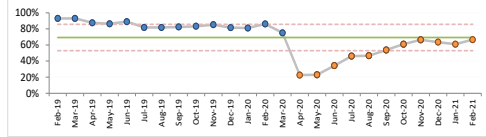
vs LM :

66.6%

**3.12**  
Diagnostics:  
Patients waiting <6  
weeks from  
referral to test

99%

5.6%



CG1

CG4

CG2

CG5

CG3

CG6

### HIGHLIGHTS FOR BOARD TO NOTE:

February saw a significant improvement against the diagnostics target with 66.6% of patients waiting less than 6 weeks for their diagnostic test at the end of the month; this is almost a 6% increase compared to the end of January position. The latest available data shows the national position at the end of January was 66.7%.

The Endoscopy performance was 52.2% (January; 51.2%). Endoscopy performance was affected by the January surge in COVID-19 as staff were redeployed to support the wards, in total six lists per week had to be cancelled. Endoscopy staff returned to their substantive roles from the 22nd of February.

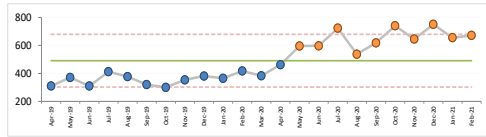
Radiology has been affected by the COVID-19 pandemic however improvement was seen in the radiology diagnostics performance at the end of February; up to 70.3% (January; 62.7%), with MRI performing at 82% and CT; 89%.

671

**3.13**  
Diagnostics: Total  
Fast Track Waiters

-

16

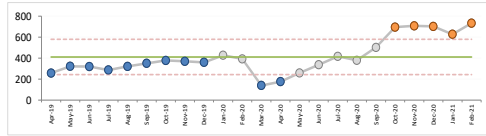


733

**3.19**  
Diagnostics: Urgent  
Radiology Waiters

-

106



605

**3.38**  
Total Overdue  
Planned Radiology  
Waiters

-

-130



2176

**3.22**  
Total Radiology  
Reporting Backlog

-

458

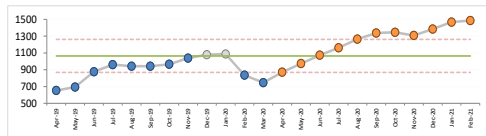


1,485

**3.31**  
Total Endoscopy  
Surveillance  
Backlog (Red)

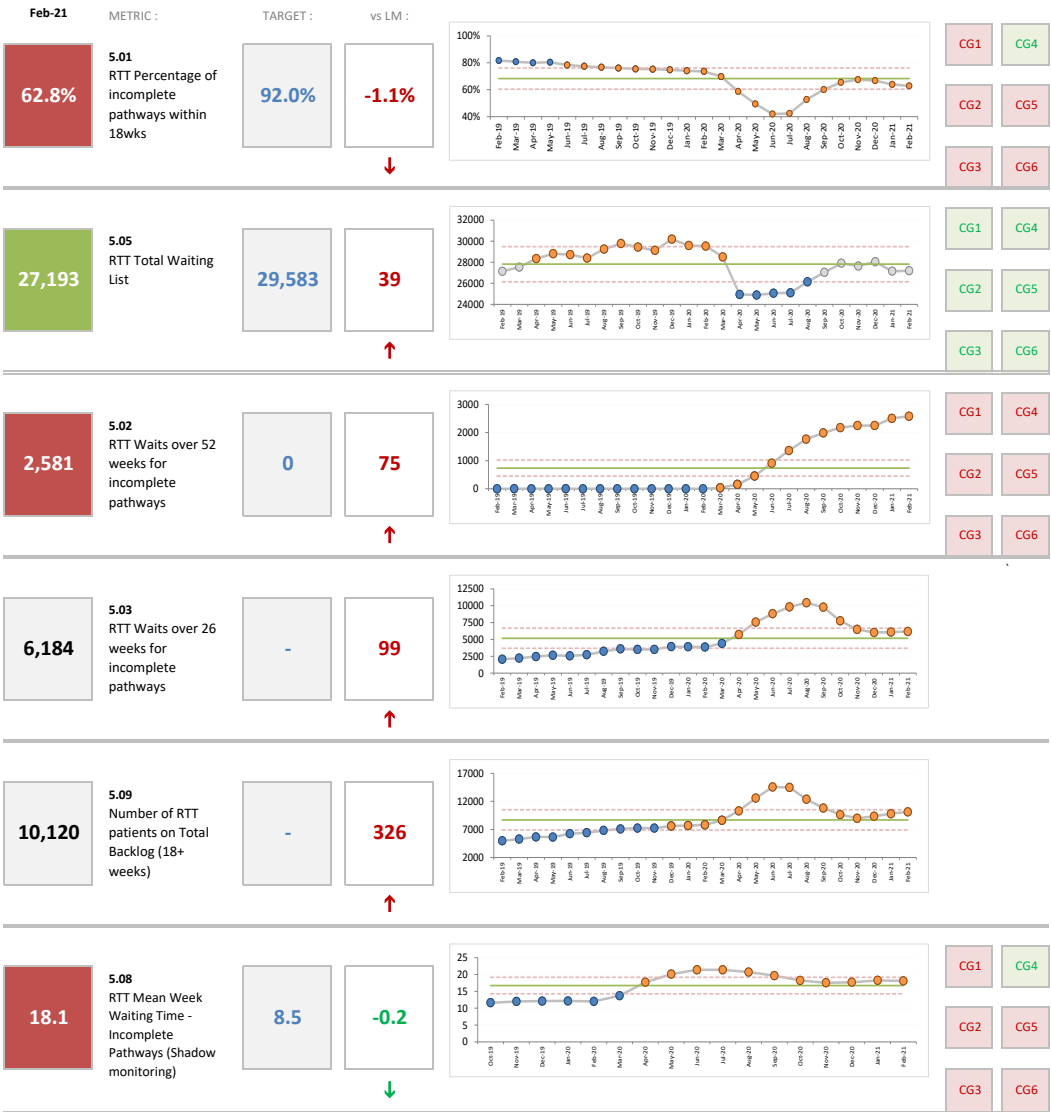
-

18



# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE: REFERRAL TO TREATMENT (RTT)



### HIGHLIGHTS FOR BOARD TO NOTE :

While the majority of our patients continue to be treated within 18 weeks of referral, the proportion of patients waiting more than 18 weeks has increased in February, with the overall RTT position declining from 63.9% of patients waiting less than 18 weeks from referral to treatment to 62.8%. The latest available data shows the national position at the end of January was 66.2%.

The reduction in the Trust's overall RTT position was primarily driven by referrals from GPs continuing at below the level seen during the same period last year, a reduction of 22% (-2,017). Cardiology, Ear, Nose and Throat and Ophthalmology all saw a circa 30% reduction in February 2021 compared to the same period in 2020.

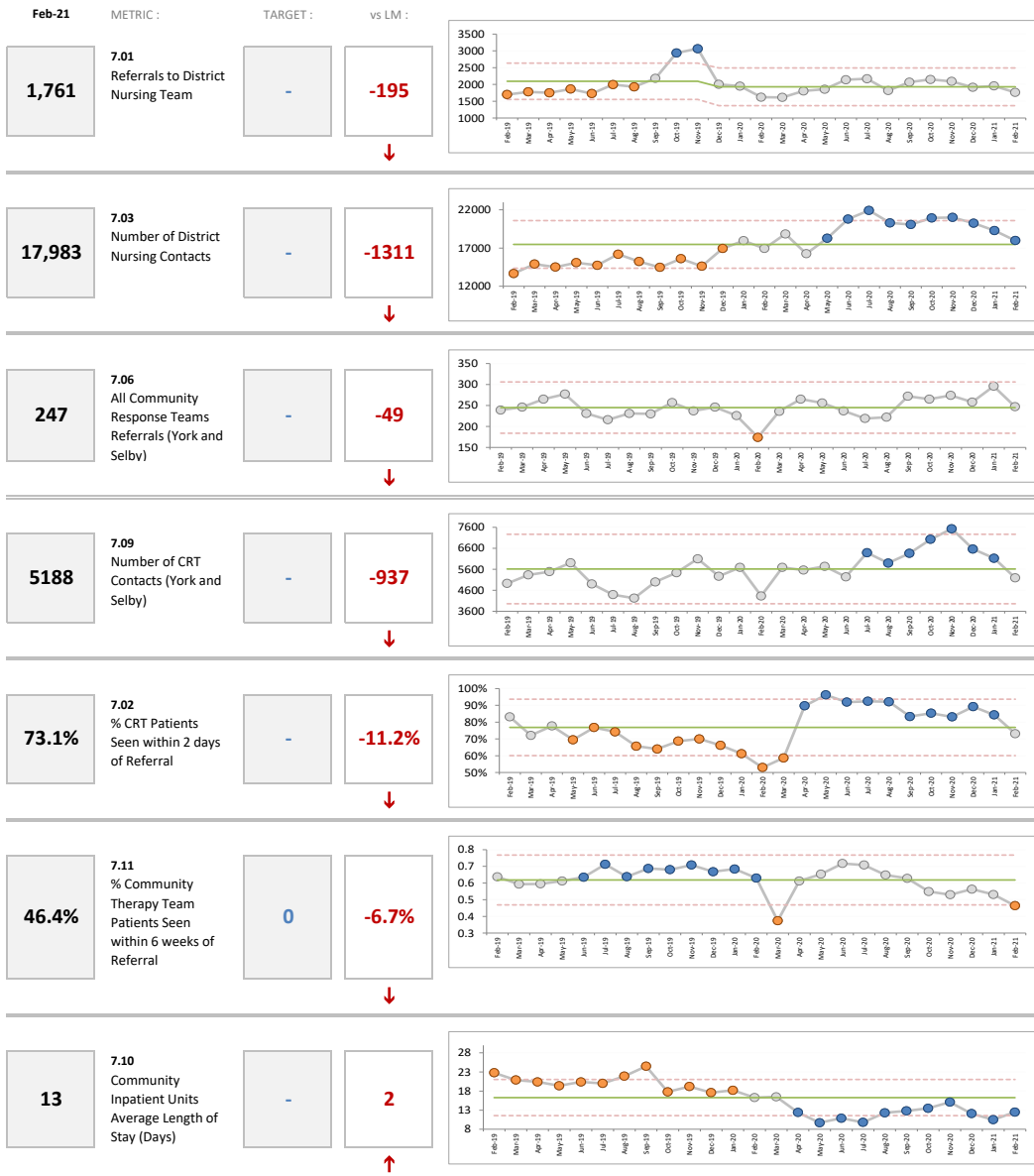
The Trust's RTT Total Waiting List (TWL) increased by 39 from the end of January and stood at 27,193. The Trust therefore remains on target to achieve the 2020/21 requirement to have fewer than 29,583 open clocks at the end of March 2021. It is not currently anticipated that routine GP referral numbers will return to last year's levels during quarter four 2020/21.

Due to the stand down of routine surgery the number of long waiter patients increased in January. The Trust had 2,581 patients waiting 52 weeks or longer at the end of January 2021 which was significantly below the projection submitted to regulators in September as part of the Phase 3 plan (5,367, -2,786).

The Trust is developing its approach to sustainable recovery as COVID prevalence reduces. The Trust started de-escalation in February, with a comprehensive programme for elective transformation focussed on Outpatient Transformation, maximising capacity through internal productivity, use of estate and working collaboratively across Humber Coast and Vale Integrated Care System.

# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE: COMMUNITY ACTIVITY



### HIGHLIGHTS FOR BOARD TO NOTE :

District Nursing teams continue to see activity levels above expected levels with a tenth consecutive month where contact activity has been above average, although the last three months have all returned to be within expected limits. Combined with high levels of staff absence, teams are continuing to use prioritisation guidance to defer lower priority activity and will now move this to a waiting list to provide greater transparency over the numbers of patients who are waiting. An additional measure is being developed to show the total number of patients who are waiting beyond the date that we intended to carry out their planned intervention.

The Community Response Teams also continue to support greater numbers of patients at home, both to avoid an admission to hospital and to support earlier discharge. Funding has been secured from the national discharge support fund to provide additional capacity (although this will come to an end in March 2021) and planned activity in Community Therapy teams has been stood down to release staff to support unplanned care. February has seen additional pressure in the Community Response Team through staff absence which is reflected in the reduction in patients seen within 2 days. An additional measure showing the impact on waiting times for the Community Therapy teams from providing additional capacity into the Community Response Team shows a deterioration in the percentage of patients seen within 6 weeks. Work is ongoing to measure the baseline 2hr response for the most urgent patients in the community in line with the new national standards to be reported from April 2021.

Length of stay in the community inpatient units remains below the historical average; ensuring capacity is available to allow patients to commence their rehabilitation as soon as their acute phase is completed.

# TRUST BOARD REPORT: February-2021

## OPERATIONAL PERFORMANCE: CHILDREN AND YOUNG PERSONS (0-17 YEARS)

| Feb-21 | METRIC :   | TARGET : | vs LM : |  |  |
|--------|--|----------|---------|--|--|
| 97.1%  | 8.01<br>ECS Performance<br>(Type 1 only)                     | 95%      | -0.1%   |  | CG1<br>CG2<br>CG3<br>CG4<br>CG5<br>CG6 |
| 2      | 8.02<br>ED patients waiting<br>over 8 hours in<br>department | -        | 1       |  |  |
| 100.0% | Jan-21<br>8.03<br>Cancer 14 day<br>performance               | 93%      | 0.0%    |  | CG1<br>CG2<br>CG3<br>CG4<br>CG5<br>CG6 |
| 50.9%  | 8.05<br>Diagnostics  | 99%      | -0.9%   |  | CG1<br>CG2<br>CG3<br>CG4<br>CG5<br>CG6 |
| 66.3%  | 8.06<br>RTT performance                                      | 92%      | -0.5%   |  | CG1<br>CG2<br>CG3<br>CG4<br>CG5<br>CG6 |
| 2,102  | 8.07<br>RTT TWL  | 2567     | 76      |  | CG1<br>CG2<br>CG3<br>CG4<br>CG5<br>CG6 |
| 218    | 8.08<br>RTT 52 week<br>waiters                               | 0        | -7      |  | CG1<br>CG2<br>CG3<br>CG4<br>CG5<br>CG6 |

### HIGHLIGHTS FOR BOARD TO NOTE:

Performance against the ECS for patients aged 0-17 achieved target at 97.1% in February, a third consecutive month that the target was achieved.

Cancer 14 Day performance for those aged 0-17 was 100% in January. On average the Trust sees three to four patients in this age category each month.

RTT performance against the 92% target is higher than the Trust overall performance (66.3% compared to 62.8%). The Trust is declaring 218 RTT fifty-two week waiters relating to children and young people at the end of February 2021; down from 225 at the end of January 2021. Children comprise circa 40% of the Total Waiting List, yet comprise approximately 8% of the total number of the fifty-two week breaches that the Trust is declaring for the end of February 2021 (2,581).

The majority of the patients are under Ear, Nose and Throat, Urology and Maxillo-Facial Surgery. Those under ENT are predominately waiting for 'Grommet Insertion' or 'Adenotonsillectomy', under Urology the majority are waiting for 'Circumcision' and Maxillo-Facial surgery has a significant number of patients awaiting Surgical Removal/Exposure of Tooth. The operational teams are working to prioritise these on the all-day paediatric lists.

# TRUST BOARD REPORT : February-2021

## OPERATIONAL PERFORMANCE SUMMARY - SCARBOROUGH

| REF  | OPERATIONAL PERFORMANCE: UNPLANNED CARE   | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|---|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1.01 | Locality Emergency Care Attendances   |        |                            | 7775   | 6068   | 3395   | 4496   | 4930   | 6483   | 7486   | 6415   | 5998   | 4830   | 4881   | 4608   | 4436   |
| 1.02 | Locality Emergency Care Breaches  |        |                            | 1138   | 828    | 322    | 478    | 375    | 650    | 1089   | 1088   | 1357   | 965    | 1251   | 1018   | 1098   |
| 1.03 | Locality Emergency Care Standard Performance  | 95%    |                            | 85.4%  | 86.4%  | 90.5%  | 89.4%  | 92.4%  | 90.0%  | 85.5%  | 83.0%  | 77.4%  | 80.0%  | 74.4%  | 77.9%  | 75.2%  |
| 1.04 | ED Conversion Rate: Proportion of ED attendances subsequently admitted                        |        |                            | 61%    | 56%    | 52%    | 54%    | 52%    | 50%    | 47%    | 52%    | 52%    | 53%    | 53%    | 53%    | 51%    |
| 1.05 | ED Total number of patients waiting over 8 hours in the departments                           |        |                            | 291    | 172    | 37     | 79     | 38     | 75     | 139    | 169    | 303    | 152    | 318    | 359    | 276    |
| 1.06 | ED 12 hour trolley waits  | 0      |                            | 4      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 7      | 14     | 17     | 43     |
| 1.07 | ED: % of attendees assessed within 15 minutes of arrival                                      |        |                            | 45%    | 48%    | 38%    | 36%    | 34%    | 25%    | 27%    | 32%    | 33%    | 34%    | 33%    | 40%    | 44%    |
| 1.08 | ED: % of attendees seen by doctor within 60 minutes of arrival                                |        |                            | 30%    | 42%    | 86%    | 77%    | 85%    | 71%    | 51%    | 50%    | 44%    | 54%    | 61%    | 67%    | 63%    |
| 1.09 | ED – Percentage of patients who Left Without Being Seen (LWBS)                                | 5%     |                            | 1.7%   | 2.2%   | 0.9%   | 1.3%   | 1.4%   | 2.1%   | 2.3%   | 1.9%   | 2.3%   | 1.8%   | 1.6%   | 1.1%   | 1.8%   |
| 1.10 | ED - Median time between arrival and treatment (minutes)                                      |        |                            | 217    | 207    | 179    | 184    | 181    | 191    | 213    | 217    | 236    | 221    | 237    | 227    | 237    |
| 1.11 | Ambulance handovers waiting 15-29 minutes   |        |                            | 450    | 393    | 290    | 293    | 272    | 304    | 317    | 293    | 289    | 311    | 376    | 368    | 314    |
| 1.13 | Ambulance handovers waiting 30-59 minutes   |        |                            | 265    | 166    | 80     | 82     | 56     | 74     | 100    | 93     | 78     | 100    | 135    | 82     | 54     |
| 1.14 | Ambulance handovers waiting 30-59 minutes - improvement trajectory                            |        |                            | 220    | 210    | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 1.15 | Ambulance handovers waiting >60 minutes   |        |                            | 105    | 60     | 5      | 13     | 13     | 12     | 24     | 21     | 51     | 24     | 27     | 20     | 7      |
| 1.16 | Ambulance handovers waiting >60 minutes - improvement trajectory                              |        |                            | 131    | 130    | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 1.17 | Ambulance handovers: Percentage waiting within 15 mins (shadow monitoring)                    |        |                            | 49.9%  | 56.9%  | 68.3%  | 71.4%  | 75.2%  | 75.9%  | 73.6%  | 74.7%  | 73.6%  | 66.5%  | 64.0%  | 67.2%  | 69.3%  |
| 1.18 | ED - Mean time in department (mins) for non-admissions (shadow monitoring)                    |        |                            | 241    | 211    | 170    | 176    | 169    | 184    | 217    | 212    | 251    | 217    | 237    | 219    | 236    |
| 1.19 | ED - Mean time in department (mins) for admissions (shadow monitoring)                        |        |                            | 270    | 245    | 206    | 224    | 209    | 221    | 274    | 291    | 326    | 299    | 371    | 351    | 398    |
| 1.21 | ED - Mean time between RFT and admission (mins) for admissions (shadow monitoring)            |        |                            | 66     | 54     | 47     | 59     | 45     | 47     | 77     | 86     | 115    | 109    | 179    | 169    | 205    |
| 1.22 | ED - Number of non-admissions waiting 12+ hours (shadow monitoring)                           |        |                            | 20     | 13     | 1      | 7      | 0      | 6      | 11     | 11     | 30     | 20     | 29     | 22     | 25     |
| 1.23 | ED - Number of admissions waiting 12+ hours (shadow monitoring)                               |        |                            | 85     | 29     | 3      | 14     | 2      | 8      | 41     | 64     | 118    | 71     | 168    | 152    | 186    |
| 1.24 | ED - Critical time standards (shadow monitoring - awaiting guidance on metrics)               |        |                            | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 2.01 | Non Elective Admissions (excl Paediatrics & Maternity)  |        |                            | 1755   | 1424   | 1025   | 1233   | 1307   | 1551   | 1579   | 1520   | 1536   | 1320   | 1402   | 1341   | 1034   |
| 2.02 | Non Elective Admissions - Paediatrics   |        |                            | 301    | 224    | 110    | 125    | 132    | 160    | 144    | 170    | 165    | 151    | 153    | 124    | 132    |
| 2.05 | Patients with LOS 0 Days (Elective & Non-Elective)  |        |                            | 868    | 640    | 305    | 399    | 481    | 594    | 537    | 587    | 618    | 527    | 475    | 468    | 455    |
| 2.06 | Total number of patients during the month with a LoS >= 7 Midnights (Elective & Non-Elective) |        |                            | 399    | 302    | 231    | 284    | 253    | 291    | 390    | 362    | 371    | 347    | 364    | 386    | 327    |
| 2.07 | Ward Transfers - Non clinical transfers after 10pm  | 33     |                            | 30     | 25     | 31     | 11     | 4      | 10     | 5      | 10     | 16     | 11     | 12     | 5      | 17     |
| 2.08 | Emergency readmissions within 30 days   |        |                            | 336    | 230    | 177    | 209    | 231    | 250    | 233    | 261    | 287    | 278    | 247    | -      | -      |
| 2.09 | Stranded Patients at End of Month (Scarborough & Bridlington)                                 |        |                            | 122    | 70     | 58     | 66     | 60     | 52     | 104    | 111    | 117    | 102    | 100    | 131    | 124    |
| 2.10 | Average Bed Days Occupied by Stranded Patients (Scarborough & Bridlington)                    |        |                            | 145    | 120    | 57     | 63     | 66     | 67     | 88     | 113    | 111    | 111    | 117    | 115    | 117    |
| 2.12 | Super Stranded Patients at End of Month (Scarborough & Bridlington)                           |        |                            | 45     | 19     | 14     | 9      | 11     | 10     | 16     | 37     | 44     | 29     | 27     | 28     | 41     |
| 2.13 | Average Bed Days Occupied by Super Stranded Patients (Scarborough & Bridlington)              |        |                            | 46     | 36     | 15     | 14     | 16     | 16     | 19     | 29     | 40     | 38     | 30     | 31     | 34     |

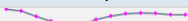


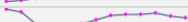


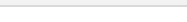
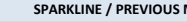
  

| REF  | OPERATIONAL PERFORMANCE: PLANNED CARE  | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|--|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 3.01 | Outpatients: All Referral Types  |        |                            | 6224   | 5119   | 2315   | 3602   | 5229   | 6349   | 5916   | 7764   | 7938   | 6964   | 7117   | 6124   | 5881   |
| 3.02 | Outpatients: GP Referrals  |        |                            | 3285   | 2733   | 808    | 1422   | 2035   | 2495   | 2255   | 2843   | 2840   | 2608   | 2672   | 2422   | 2523   |
| 3.03 | Outpatients: Consultant to Consultant Referrals                                  |        |                            | 671    | 560    | 250    | 299    | 363    | 411    | 467    | 551    | 512    | 454    | 518    | 532    | 439    |
| 3.04 | Outpatients: Other Referrals   |        |                            | 2268   | 1826   | 1257   | 1881   | 2831   | 3443   | 3194   | 4370   | 4586   | 3902   | 3927   | 3170   | 2919   |
| 3.05 | Outpatients: 1st Attendances   |        |                            | 4713   | 3751   | 1352   | 1462   | 1887   | 2422   | 2584   | 3490   | 4013   | 3837   | 3740   | 3944   | 3978   |
| 3.06 | Outpatients: Follow Up Attendances   |        |                            | 8977   | 7650   | 4180   | 4333   | 5075   | 6215   | 6087   | 7393   | 7869   | 8360   | 8230   | 8410   | 8174   |
| 3.07 | Outpatients: 1st to FU Ratio   |        |                            | 1.90   | 2.04   | 3.09   | 2.96   | 2.69   | 2.57   | 2.36   | 2.12   | 1.96   | 2.18   | 2.20   | 2.13   | 2.05   |
| 3.08 | Outpatients: DNA rates   |        |                            | 7.0%   | 6.9%   | 5.4%   | 4.1%   | 4.5%   | 5.7%   | 7.1%   | 7.3%   | 7.3%   | 7.8%   | 7.3%   | 8.2%   | 6.9%   |
| 3.09 | Outpatients: Cancelled Clinics with less than 14 days notice                     | 60     |                            | 121    | 248    | 434    | 218    | 290    | 208    | 63     | 89     | 57     | 108    | 93     | 109    | 86     |
| 3.10 | Outpatients: Hospital Cancelled Outpatient Appointments for non-clinical reasons |        |                            | 362    | 701    | 1234   | 1126   | 1170   | 1049   | 442    | 285    | 239    | 344    | 451    | 336    | 309    |
| 4.01 | Elective Admissions  |        |                            | 243    | 196    | 22     | 63     | 105    | 76     | 74     | 119    | 198    | 180    | 154    | 174    | 192    |
| 4.02 | Day Case Admissions  |        |                            | 1764   | 1421   | 691    | 1041   | 1145   | 1386   | 1459   | 1695   | 1846   | 1750   | 1728   | 1656   | 1630   |
| 4.03 | Cancelled Operations within 48 hours - Bed shortages                             |        |                            | 2      | 86     | 5      | 0      | 0      | 0      | 1      | 0      | 1      | 3      | 0      | 0      | 0      |
| 4.04 | Cancelled Operations within 48 hours - Non clinical reasons                      |        |                            | 25     | 107    | 8      | 1      | 2      | 3      | 1      | 17     | 7      | 18     | 3      | 24     | 31     |
| 4.05 | Theatres: Utilisation of planned sessions  |        |                            | 62%    | 39%    | 0%     | 20%    | 32%    | 53%    | 64%    | 64%    | 70%    | 72%    | 70%    | 64%    | 64%    |
| 4.06 | Theatres: number of sessions held  |        |                            | 209    | 153    | 38     | 61     | 97     | 112    | 159    | 182    | 203    | 209    | 205    | 208    | 198    |

# TRUST BOARD REPORT : February-2021


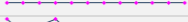

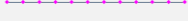
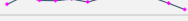



## OPERATIONAL PERFORMANCE SUMMARY - SCARBOROUGH

| REF  | 18 WEEKS REFERRAL TO TREATMENT   |
|------|--|
| 5.01 | Incomplete Pathways  |
| 5.02 | Waits over 52 weeks for incomplete pathways                                    |
| 5.03 | Waits over 26 weeks for incomplete pathways                                    |
| 5.04 | Waits over 36 weeks for incomplete pathways                                    |
| 5.05 | RTT Total Waiting List (RTT TWL)   |
| 5.06 | Number of patients on Admitted Backlog (18+ weeks)                             |
| 5.07 | Number of patients on Non Admitted Backlog (18+ weeks)                         |
| 5.08 | Mean Week Waiting Time - Incomplete Pathways (Shadow monitoring from Oct-2019) |

| TARGET | SPARKLINE / PREVIOUS MONTH   |
|--------|--|
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 77.3%  | 73.4%  | 62.4%  | 53.2%  | 44.9%  | 45.5%  | 56.3%  | 63.4%  | 68.2%  | 69.4%  | 68.6%  | 66.0%  | 66.1%  |
| 0      | 13     | 54     | 136    | 234    | 335    | 445    | 544    | 627    | 669    | 676    | 722    | 713    |
| 1049   | 1205   | 1580   | 2088   | 2456   | 2792   | 3032   | 2926   | 2249   | 1936   | 1752   | 1768   | 1655   |
| 357    | 452    | 620    | 894    | 1219   | 1462   | 1683   | 1791   | 1790   | 1697   | 1336   | 1239   | 1001   |
| 9693   | 9347   | 7856   | 7716   | 7860   | 7896   | 8374   | 8939   | 9068   | 9057   | 9200   | 8856   | 8640   |
| 943    | 1089   | 1362   | 1639   | 1845   | 1836   | 1625   | 1710   | 1510   | 1378   | 1266   | 1239   | 1229   |
| 1261   | 1398   | 1590   | 1970   | 2484   | 2469   | 2034   | 1564   | 1370   | 1389   | 1620   | 1768   | 1698   |
| 11.1   | 12.7   | 16.8   | 19.1   | 20.2   | 20.0   | 19.2   | 18.2   | 17.2   | 16.8   | 16.8   | 17.0   | 16.6   |

| REF  | CANCER (ONE MONTH BEHIND DUE TO NATIONAL REPORTING TIMETABLE)                        |
|------|--|
| 6.01 | Cancer 2 week (all cancers)  |
| 6.02 | Cancer 2 week (breast symptoms)  |
| 6.03 | Cancer 31 day wait from diagnosis to first treatment                                 |
| 6.04 | Cancer 31 day wait for second or subsequent treatment - surgery                      |
| 6.05 | Cancer 31 day wait for second or subsequent treatment - drug treatments              |
| 6.06 | Cancer 62 Day Waits for first treatment (from urgent GP referral)                    |
| 6.07 | Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral) |
| 6.08 | Cancer 28 Day Wait - Faster Diagnosis Standard                                       |

| TARGET | SPARKLINE / PREVIOUS MONTH   |
|--------|--|
| 93%    |  |
| 93%    |  |
| 96%    |  |
| 94%    |  |
| 98%    |  |
| 85%    |  |
| 90%    |  |
| 75%    |  |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 90.4%  | 90.9%  | 84.7%  | 94.3%  | 92.9%  | 96.9%  | 94.0%  | 85.6%  | 91.8%  | 91.1%  | 92.9%  | 91.9%  | -      |
| -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 100.0% | 95.4%  | 98.0%  | 100.0% | 95.3%  | 98.0%  | 95.1%  | 95.8%  | 96.8%  | 96.6%  | 96.7%  | 97.6%  | -      |
| 0.0%   | 66.7%  | 0.0%   | 54.5%  | 100.0% | 100.0% | 90.0%  | 66.7%  | 85.7%  | 100.0% | 80.0%  | 50.0%  | -      |
| 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | -      |
| 66.0%  | 79.7%  | 73.1%  | 72.2%  | 75.0%  | 70.3%  | 77.8%  | 79.1%  | 83.9%  | 77.8%  | 67.9%  | 57.1%  | -      |
| -      | 0.0%   | -      | -      | -      | -      | -      | -      | 0.0%   | 0.0%   | -      | 0.0%   | -      |
| 66.0%  | 55.7%  | 43.1%  | 45.8%  | 48.5%  | 50.2%  | 45.4%  | 46.1%  | 53.2%  | 50.0%  | 53.9%  | 41.1%  | -      |

\*62 day screening: months with five or fewer records at Trust level from May-20 are not included

# TRUST BOARD REPORT : February-2021

## OPERATIONAL PERFORMANCE SUMMARY - YORK

| REF  | OPERATIONAL PERFORMANCE: UNPLANNED CARE   | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|---|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1.01 | Locality Emergency Care Attendances   |        |                            | 8995   | 6966   | 4360   | 6257   | 6959   | 7970   | 8656   | 8586   | 8256   | 7282   | 7489   | 6945   | 6406   |
| 1.02 | Locality Emergency Care Breaches  |        |                            | 1927   | 1303   | 168    | 288    | 298    | 448    | 1057   | 1573   | 1377   | 1036   | 1515   | 1734   | 1143   |
| 1.03 | Locality Emergency Care Standard Performance  | 95%    |                            | 78.6%  | 81.3%  | 96.2%  | 95.4%  | 95.7%  | 94.4%  | 87.8%  | 81.7%  | 83.3%  | 85.8%  | 79.8%  | 75.0%  | 82.2%  |
| 1.04 | ED Conversion Rate: Proportion of ED attendances subsequently admitted                        |        |                            | 36%    | 34%    | 38%    | 36%    | 36%    | 36%    | 35%    | 35%    | 36%    | 40%    | 38%    | 38%    | 39%    |
| 1.05 | ED Total number of patients waiting over 8 hours in the departments                           |        |                            | 510    | 296    | 18     | 26     | 15     | 27     | 70     | 215    | 141    | 106    | 185    | 359    | 169    |
| 1.06 | ED 12 hour trolley waits  | 0      |                            | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 4      | 0      |
| 1.07 | ED: % of attendees assessed within 15 minutes of arrival                                      |        |                            | 68%    | 72%    | 91%    | 88%    | 88%    | 86%    | 78%    | 74%    | 74%    | 79%    | 77%    | 76%    | 79%    |
| 1.08 | ED: % of attendees seen by doctor within 60 minutes of arrival                                |        |                            | 42%    | 52%    | 89%    | 80%    | 73%    | 66%    | 52%    | 47%    | 52%    | 60%    | 56%    | 57%    | 62%    |
| 1.09 | ED - Percentage of patients who Left Without Being Seen (LWBS)                                | 5%     |                            | 2.2%   | 2.5%   | 0.8%   | 0.5%   | 0.6%   | 1.1%   | 1.5%   | 1.8%   | 1.3%   | 0.8%   | 1.7%   | 1.6%   | 1.3%   |
| 1.10 | ED - Median time between arrival and treatment (minutes)                                      |        |                            | 182    | 169    | 123    | 131    | 133    | 139    | 161    | 175    | 170    | 155    | 176    | 191    | 170    |
| 1.11 | Ambulance handovers waiting 15-29 minutes   |        |                            | 493    | 406    | 187    | 249    | 230    | 282    | 294    | 249    | 324    | 250    | 320    | 342    | 284    |
| 1.13 | Ambulance handovers waiting 30-59 minutes   |        |                            | 200    | 158    | 33     | 44     | 35     | 44     | 52     | 54     | 51     | 51     | 74     | 118    | 47     |
| 1.14 | Ambulance handovers waiting 30-59 minutes - improvement trajectory                            |        |                            | 84     | 75     | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 1.15 | Ambulance handovers waiting >60 minutes   |        |                            | 158    | 116    | 1      | 2      | 1      | 1      | 3      | 16     | 9      | 2      | 17     | 82     | 12     |
| 1.16 | Ambulance handovers waiting >60 minutes - improvement trajectory                              |        |                            | 100    | 85     | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 1.17 | Ambulance handovers: Percentage waiting within 15 mins (shadow monitoring)                    |        |                            | 58.3%  | 59.8%  | 81.9%  | 79.0%  | 81.0%  | 78.3%  | 80.1%  | 80.2%  | 79.2%  | 77.5%  | 77.1%  | 71.2%  | 78.4%  |
| 1.18 | ED - Mean time in department (mins) for non-admissions (shadow monitoring)                    |        |                            | 184    | 178    | 116    | 125    | 129    | 135    | 159    | 174    | 167    | 152    | 165    | 182    | 162    |
| 1.19 | ED - Mean time in department (mins) for admissions (shadow monitoring)                        |        |                            | 286    | 262    | 171    | 175    | 165    | 173    | 206    | 254    | 228    | 214    | 269    | 334    | 259    |
| 1.21 | ED - Mean time between RFT and admission (mins) for admissions (shadow monitoring)            |        |                            | 121    | 106    | 54     | 56     | 48     | 48     | 57     | 88     | 75     | 75     | 103    | 170    | 108    |
| 1.22 | ED - Number of non-admissions waiting 12+ hours (shadow monitoring)                           |        |                            | 14     | 14     | 0      | 1      | 0      | 1      | 4      | 4      | 6      | 3      | 9      | 18     | 14     |
| 1.23 | ED - Number of admissions waiting 12+ hours (shadow monitoring)                               |        |                            | 103    | 69     | 0      | 1      | 0      | 0      | 4      | 30     | 14     | 10     | 57     | 171    | 46     |
| 1.24 | ED - Critical time standards (shadow monitoring - awaiting guidance on metrics)               |        |                            | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      | -      |
| 2.01 | Non Elective Admissions (excl Paediatrics & Maternity)  |        |                            | 3249   | 2554   | 1911   | 2339   | 2682   | 2994   | 3128   | 3158   | 3156   | 3061   | 3075   | 2847   | 2347   |
| 2.02 | Non Elective Admissions - Paediatrics   |        |                            | 478    | 344    | 195    | 220    | 220    | 209    | 220    | 309    | 289    | 320    | 229    | 227    | 244    |
| 2.05 | Patients with LOS 0 Days (Elective & Non-Elective)  |        |                            | 1542   | 1266   | 784    | 976    | 1147   | 1305   | 1324   | 1343   | 1355   | 1376   | 1262   | 1011   | 1097   |
| 2.06 | Total number of patients during the month with a LoS >= 7 Midnights (Elective & Non-Elective) |        |                            | 704    | 476    | 391    | 426    | 452    | 475    | 544    | 600    | 614    | 599    | 618    | 677    | 558    |
| 2.07 | Ward Transfers - Non clinical transfers after 10pm  | 67     |                            | 61     | 26     | 34     | 28     | 11     | 15     | 20     | 31     | 34     | 28     | 35     | 30     | 36     |
| 2.08 | Emergency readmissions within 30 days   |        |                            | 603    | 459    | 277    | 398    | 467    | 510    | 555    | 581    | 710    | 653    | 563    | -      | -      |
| 2.09 | Stranded Patients at End of Month   |        |                            | 220    | 77     | 118    | 119    | 124    | 97     | 126    | 153    | 156    | 164    | 166    | 194    | 167    |
| 2.10 | Average Bed Days Occupied by Stranded Patients  |        |                            | 241    | 191    | 87     | 116    | 110    | 108    | 115    | 140    | 155    | 167    | 147    | 188    | 170    |
| 2.12 | Super Stranded Patients at End of Month   |        |                            | 76     | 36     | 24     | 31     | 23     | 20     | 19     | 33     | 43     | 34     | 40     | 53     | 45     |
| 2.13 | Average Bed Days Occupied by Super Stranded Patients  |        |                            | 87     | 62     | 24     | 28     | 27     | 24     | 20     | 28     | 40     | 40     | 42     | 48     | 51     |

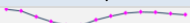



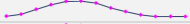
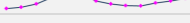
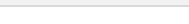
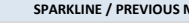
  

| REF  | OPERATIONAL PERFORMANCE: PLANNED CARE  | TARGET | SPARKLINE / PREVIOUS MONTH | Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|------|--|--------|----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 3.01 | Outpatients: All Referral Types  |        |                            | 12606  | 10280  | 5253   | 7296   | 10538  | 11867  | 10961  | 13078  | 13358  | 12668  | 12464  | 10952  | 10350  |
| 3.02 | Outpatients: GP Referrals  |        |                            | 5759   | 4683   | 1254   | 2563   | 3915   | 4888   | 4598   | 5224   | 5726   | 5389   | 5104   | 4112   | 4504   |
| 3.03 | Outpatients: Consultant to Consultant Referrals                                  |        |                            | 1392   | 1145   | 643    | 739    | 857    | 1018   | 881    | 1152   | 1174   | 1193   | 1128   | 1032   | 1024   |
| 3.04 | Outpatients: Other Referrals   |        |                            | 5455   | 4452   | 3356   | 3994   | 5766   | 5961   | 5482   | 6702   | 6458   | 6086   | 6232   | 5808   | 4822   |
| 3.05 | Outpatients: 1st Attendances   |        |                            | 9314   | 7821   | 3514   | 4249   | 6022   | 7551   | 7006   | 8580   | 9178   | 9462   | 9062   | 8772   | 7948   |
| 3.06 | Outpatients: Follow Up Attendances   |        |                            | 22448  | 20839  | 12315  | 13046  | 16574  | 18963  | 18302  | 22777  | 23750  | 24560  | 22271  | 23122  | 22311  |
| 3.07 | Outpatients: 1st to FU Ratio   |        |                            | 2.41   | 2.66   | 3.50   | 3.07   | 2.75   | 2.51   | 2.61   | 2.65   | 2.59   | 2.60   | 2.46   | 2.64   | 2.81   |
| 3.08 | Outpatients: DNA rates   |        |                            | 5.8%   | 5.3%   | 3.8%   | 4.0%   | 4.2%   | 4.8%   | 5.9%   | 6.0%   | 5.9%   | 6.1%   | 5.7%   | 6.5%   | 5.9%   |
| 3.09 | Outpatients: Cancelled Clinics with less than 14 days notice                     | 120    |                            | 129    | 503    | 897    | 435    | 444    | 499    | 173    | 160    | 131    | 155    | 123    | 224    | 162    |
| 3.10 | Outpatients: Hospital Cancelled Outpatient Appointments for non-clinical reasons |        |                            | 616    | 1369   | 2621   | 2065   | 2401   | 3392   | 1750   | 1582   | 1222   | 932    | 820    | 700    | 693    |
| 4.01 | Elective Admissions  |        |                            | 423    | 293    | 87     | 107    | 149    | 265    | 277    | 297    | 359    | 325    | 359    | 263    | 294    |
| 4.02 | Day Case Admissions  |        |                            | 4451   | 3503   | 1262   | 1406   | 2269   | 3049   | 2988   | 3744   | 4056   | 3879   | 3702   | 2996   | 2875   |
| 4.03 | Cancelled Operations within 48 hours - Bed shortages                             |        |                            | 8      | 247    | 9      | 0      | 3      | 0      | 1      | 3      | 4      | 5      | 10     | 121    | 10     |
| 4.04 | Cancelled Operations within 48 hours - Non clinical reasons                      |        |                            | 64     | 301    | 13     | 3      | 17     | 25     | 36     | 40     | 58     | 71     | 34     | 159    | 56     |
| 4.05 | Theatres: Utilisation of planned sessions  |        |                            | 78%    | 69%    | 41%    | 34%    | 47%    | 70%    | 75%    | 66%    | 67%    | 68%    | 66%    | 54%    | 61%    |
| 4.06 | Theatres: number of sessions held  |        |                            | 511    | 331    | 66     | 37     | 167    | 425    | 427    | 511    | 523    | 503    | 470    | 396    | 441    |

# TRUST BOARD REPORT : February-2021

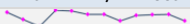
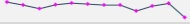


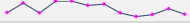

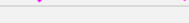

## OPERATIONAL PERFORMANCE SUMMARY - YORK

| REF  | 18 WEEKS REFERRAL TO TREATMENT   |
|------|--|
| 5.01 | Incomplete Pathways  |
| 5.02 | Waits over 52 weeks for incomplete pathways                                    |
| 5.03 | Waits over 26 weeks for incomplete pathways                                    |
| 5.04 | Waits over 36 weeks for incomplete pathways                                    |
| 5.05 | RTT Total Waiting List (RTT TWL)   |
| 5.06 | Number of patients on Admitted Backlog (18+ weeks)                             |
| 5.07 | Number of patients on Non Admitted Backlog (18+ weeks)                         |
| 5.08 | Mean Week Waiting Time - Incomplete Pathways (Shadow monitoring from Oct-2019) |

| TARGET | SPARKLINE / PREVIOUS MONTH   |
|--------|--|
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 71.8%  | 68.0%  | 57.0%  | 47.8%  | 40.6%  | 40.9%  | 51.0%  | 58.4%  | 64.1%  | 66.5%  | 65.8%  | 62.9%  | 61.2%  |
| 0      | 19     | 104    | 316    | 676    | 1025   | 1319   | 1442   | 1549   | 1581   | 1575   | 1784   | 1868   |
| 2817   | 3208   | 4154   | 5479   | 6344   | 7023   | 7403   | 6845   | 5502   | 4553   | 4279   | 4359   | 4529   |
| 954    | 1229   | 1854   | 2530   | 3378   | 3996   | 4448   | 4372   | 4335   | 4004   | 3315   | 2905   | 2692   |
| 19841  | 19161  | 17091  | 17172  | 17197  | 17211  | 17767  | 18103  | 18840  | 18589  | 18840  | 18298  | 18553  |
| 3132   | 3451   | 4144   | 4803   | 5269   | 5346   | 5029   | 4309   | 3808   | 3338   | 3109   | 3102   | 3099   |
| 2466   | 2687   | 3207   | 4163   | 4945   | 4827   | 3677   | 3223   | 2953   | 2886   | 3343   | 3685   | 4094   |
| 12.5   | 14.2   | 18.1   | 20.6   | 21.9   | 22.0   | 21.4   | 20.3   | 18.7   | 17.9   | 18.2   | 18.8   | 18.8   |

| REF  | CANCER (ONE MONTH BEHIND DUE TO NATIONAL REPORTING TIMETABLE)                         |
|------|---|
| 6.01 | Cancer 2 week (all cancers)   |
| 6.02 | Cancer 2 week (breast symptoms)   |
| 6.03 | Cancer 31 day wait from diagnosis to first treatment                                  |
| 6.04 | Cancer 31 day wait for second or subsequent treatment - surgery                       |
| 6.05 | Cancer 31 day wait for second or subsequent treatment - drug treatments               |
| 6.06 | Cancer 62 Day Waits for first treatment (from urgent GP referral)                     |
| 6.07 | Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral)* |
| 6.08 | Cancer 28 Day Wait - Faster Diagnosis Standard  |

| TARGET | SPARKLINE / PREVIOUS MONTH   |
|--------|--|
| 93%    |  |
| 93%    |  |
| 96%    |  |
| 94%    |  |
| 98%    |  |
| 85%    |  |
| 90%    |  |
| 75%    |  |

| Feb-20 | Mar-20 | Apr-20 | May-20 | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 96.1%  | 90.7%  | 85.7%  | 97.8%  | 97.2%  | 94.5%  | 94.5%  | 89.8%  | 93.9%  | 94.4%  | 94.7%  | 89.7%  | -      |
| 99.1%  | 95.3%  | 90.9%  | 95.7%  | 97.6%  | 96.4%  | 95.1%  | 95.1%  | 88.0%  | 93.9%  | 97.3%  | 80.0%  | -      |
| 100.0% | 97.4%  | 98.9%  | 99.2%  | 98.6%  | 96.6%  | 97.7%  | 97.6%  | 97.2%  | 99.6%  | 97.1%  | 95.0%  | -      |
| 93.2%  | 97.0%  | 75.0%  | 85.7%  | 85.0%  | 85.2%  | 79.2%  | 100.0% | 88.6%  | 86.4%  | 92.1%  | 92.9%  | -      |
| 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 98.0%  | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | -      |
| 75.1%  | 84.5%  | 74.9%  | 86.6%  | 86.3%  | 82.3%  | 83.6%  | 74.9%  | 71.2%  | 73.0%  | 79.1%  | 73.4%  | -      |
| 96.8%  | 96.6%  | 100.0% | -      | -      | -      | -      | -      | 96.8%  | 97.7%  | 86.7%  | 91.7%  | -      |
| 74.3%  | 71.5%  | 55.1%  | 72.1%  | 67.1%  | 68.5%  | 65.1%  | 66.8%  | 63.2%  | 63.7%  | 69.0%  | 56.9%  | -      |

\*62 day screening: months with five or fewer records at Trust level from May-20 are not included