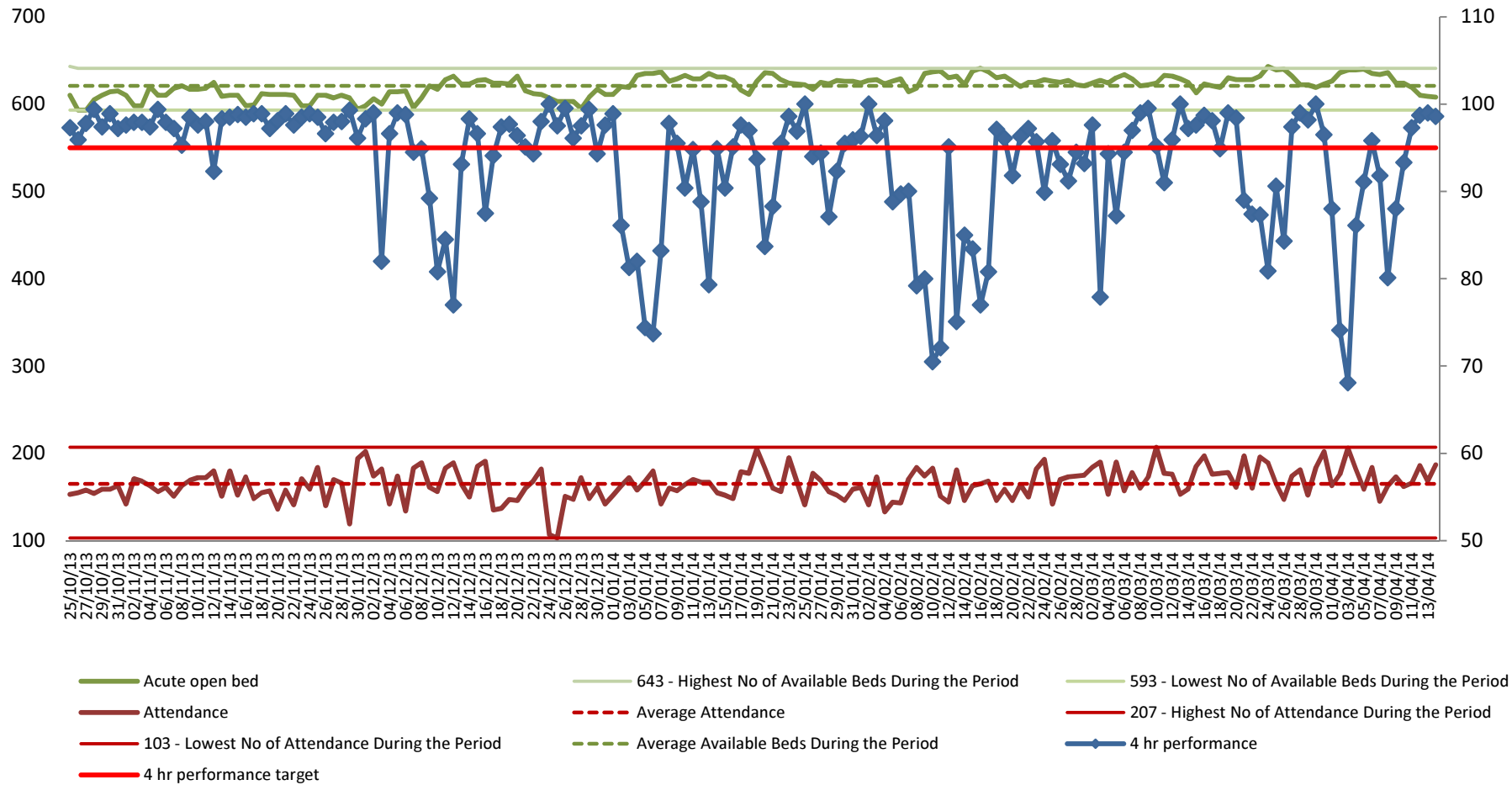


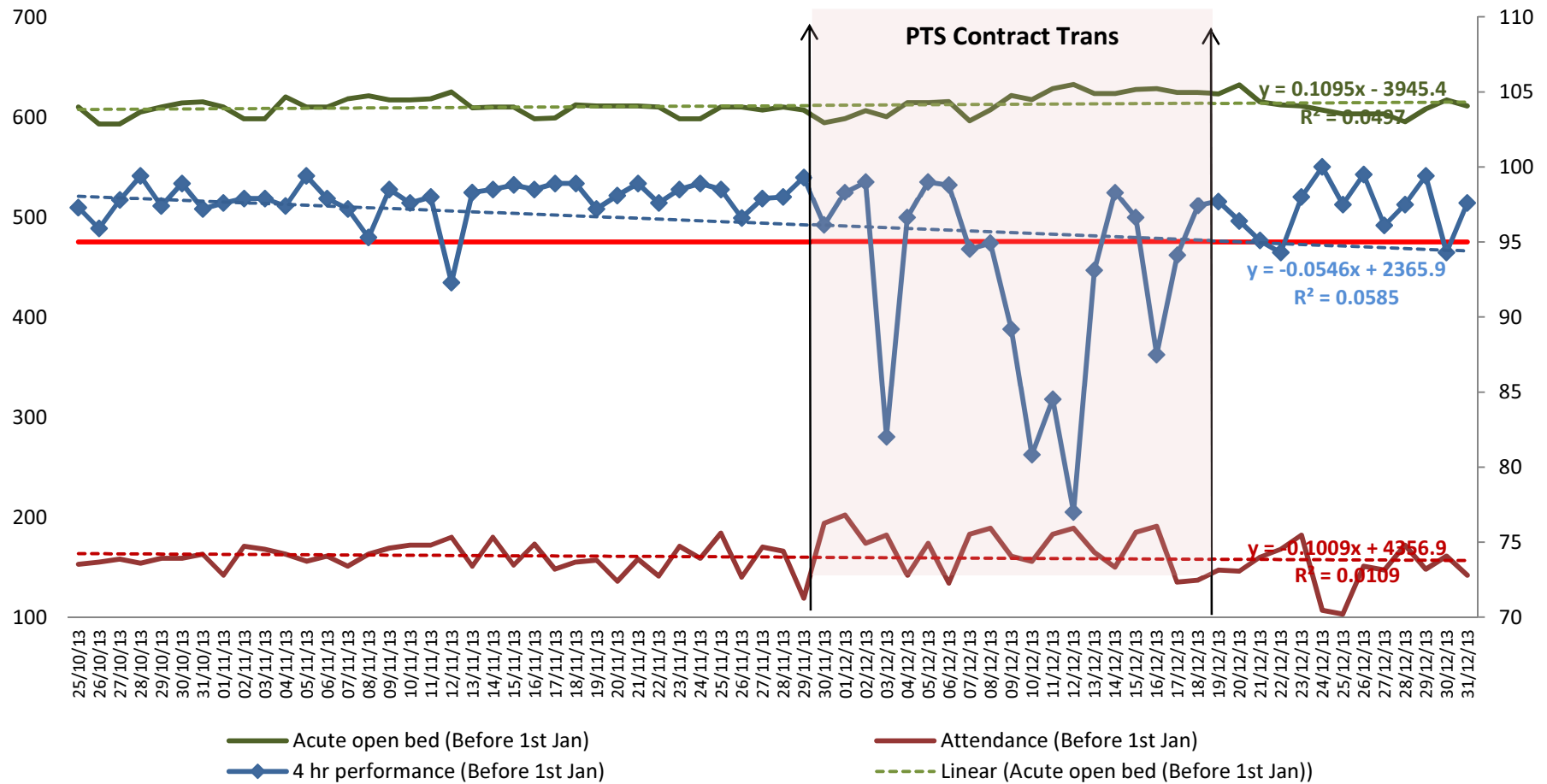
Appendix A – UCD Analysis

Performance vs Bed & Attendance



Overall performance appeared in decline, mainly happened after 1st Jan. Jan had a recovery trend (although still below 95%), Feb experienced a period of unstable and low performance, at the start of March, and performance recovered but hit another low period. TS contract changing at the start of December resulted a 3 week period under performance target. Bed opened stepped up and remained high after 1st Jan. Attendance stepped up in March and April.

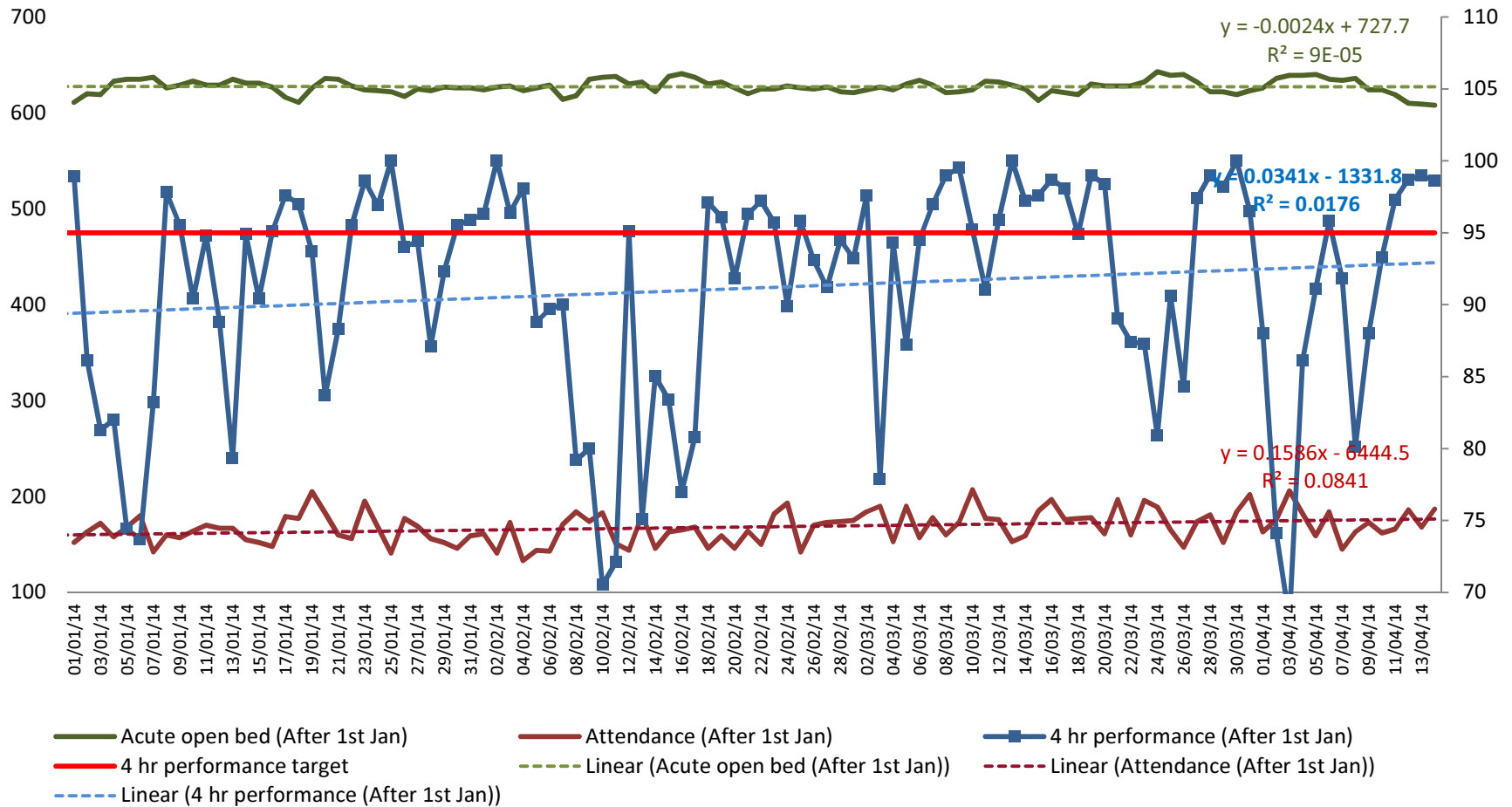
Trends - Performance vs Bed & Attendance Before 1st Jan 2014



A&E 4hr performance appeared in decline from October to December driven by PTS new contract transaction period at the beginning of December.

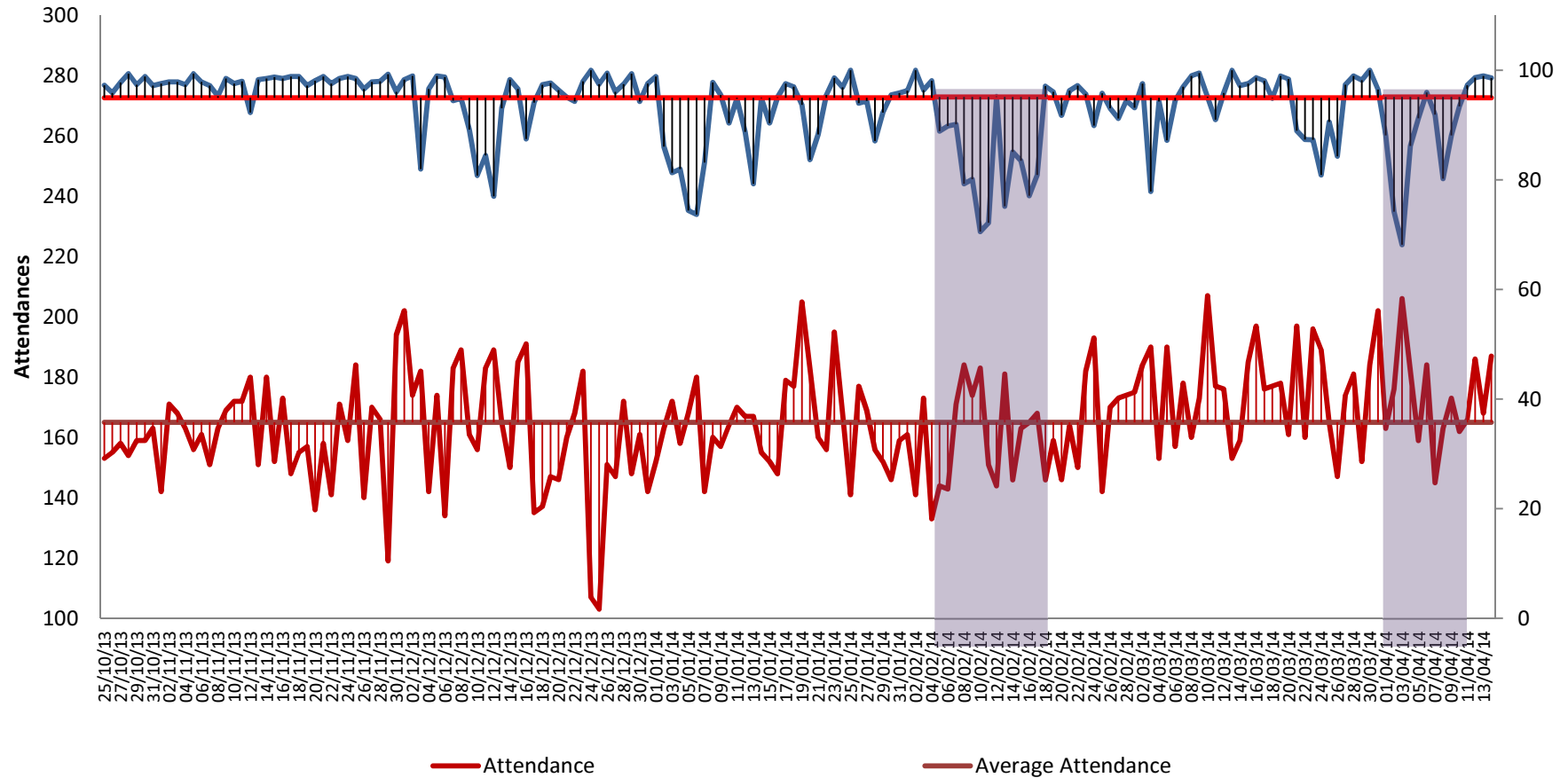
Number of Beds opened was consistent with slight increases. Attendances were in slight decline in the period.

Trends - Performance vs Bed & Attendance After 1st Jan 2014



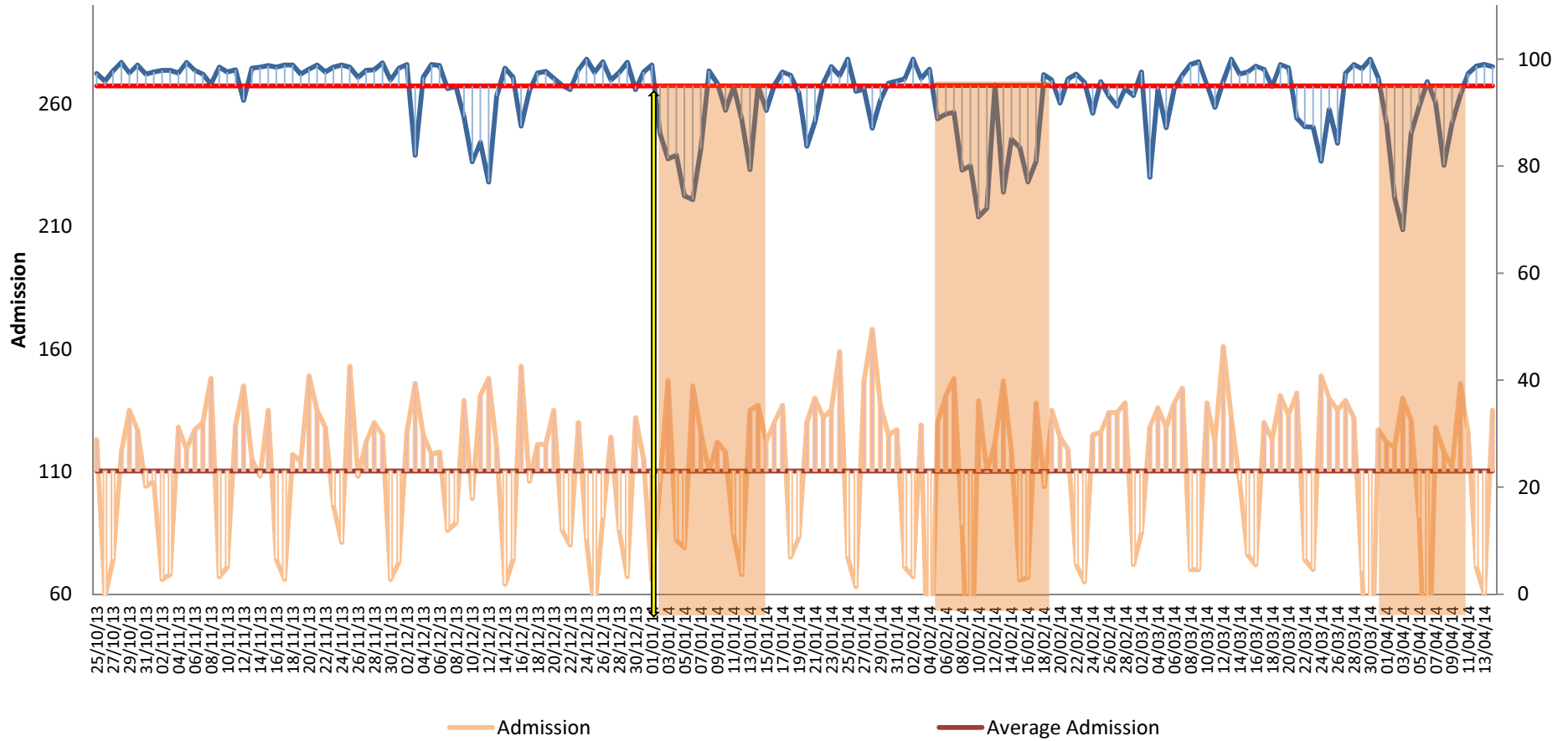
After 1st of Jan, the performance was mainly below the target. However there was an improving trend for the period in general. This is in contrast to the period before 1st of Jan where performance were mainly above the target but showed a declining trend. Bed opened stepped up from 1st Jan and remain almost the same level during the period. Attendance showed a slight increase during the period.

Performance and A&E Attendance

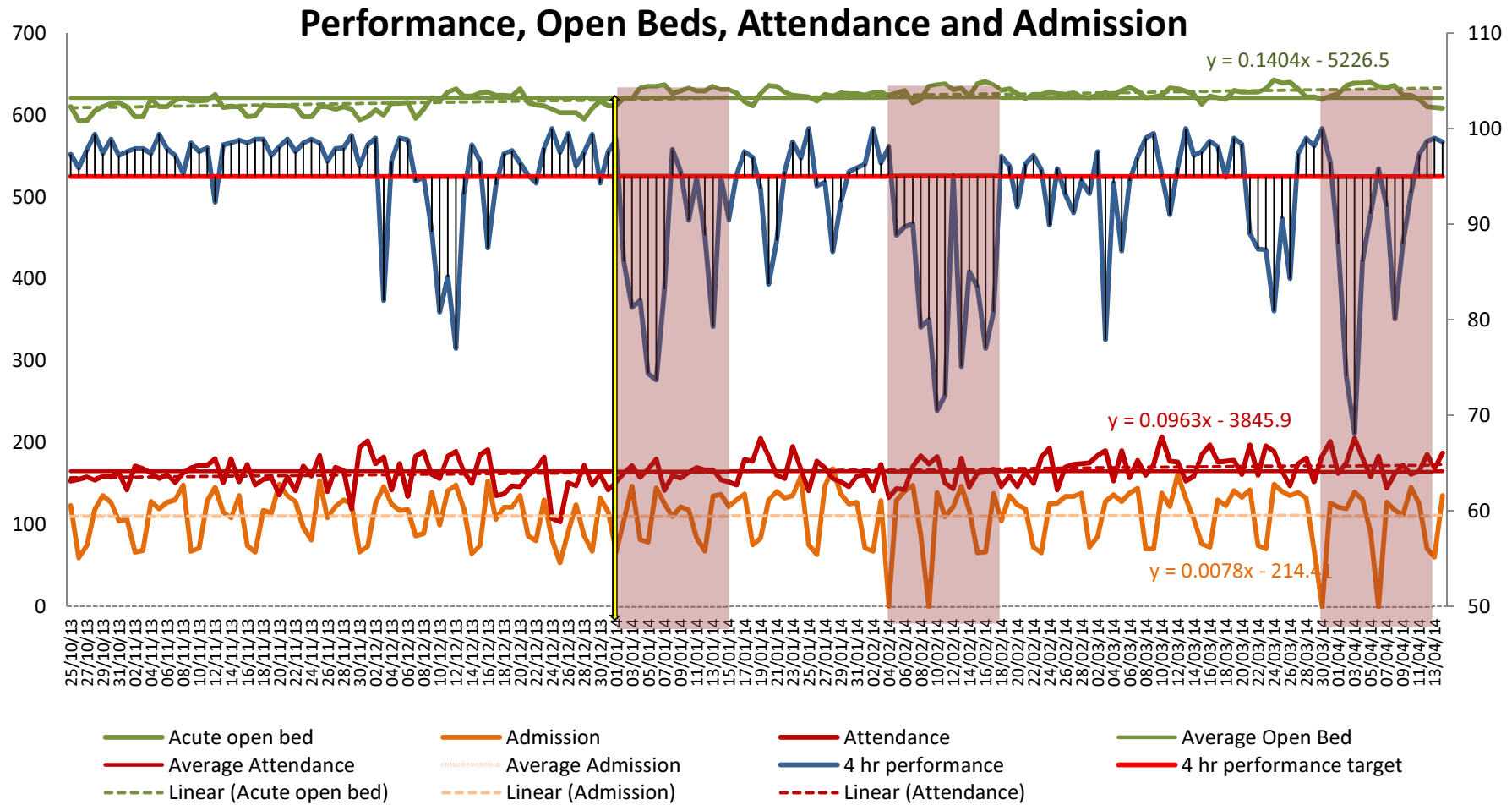


Low performance peak points did not appear to be correspondent with high attendance peak points, with one exception: the lowest performance (68.1%) happened on the same day (03/04/2014) as the second highest attendance (206 attendances). At the start of Jan and Feb when poor performance persisted for consecutive days, attendances were not consistent high. However poor performance and high attendances appeared for the same days in late March and early April.

Performance and Admission

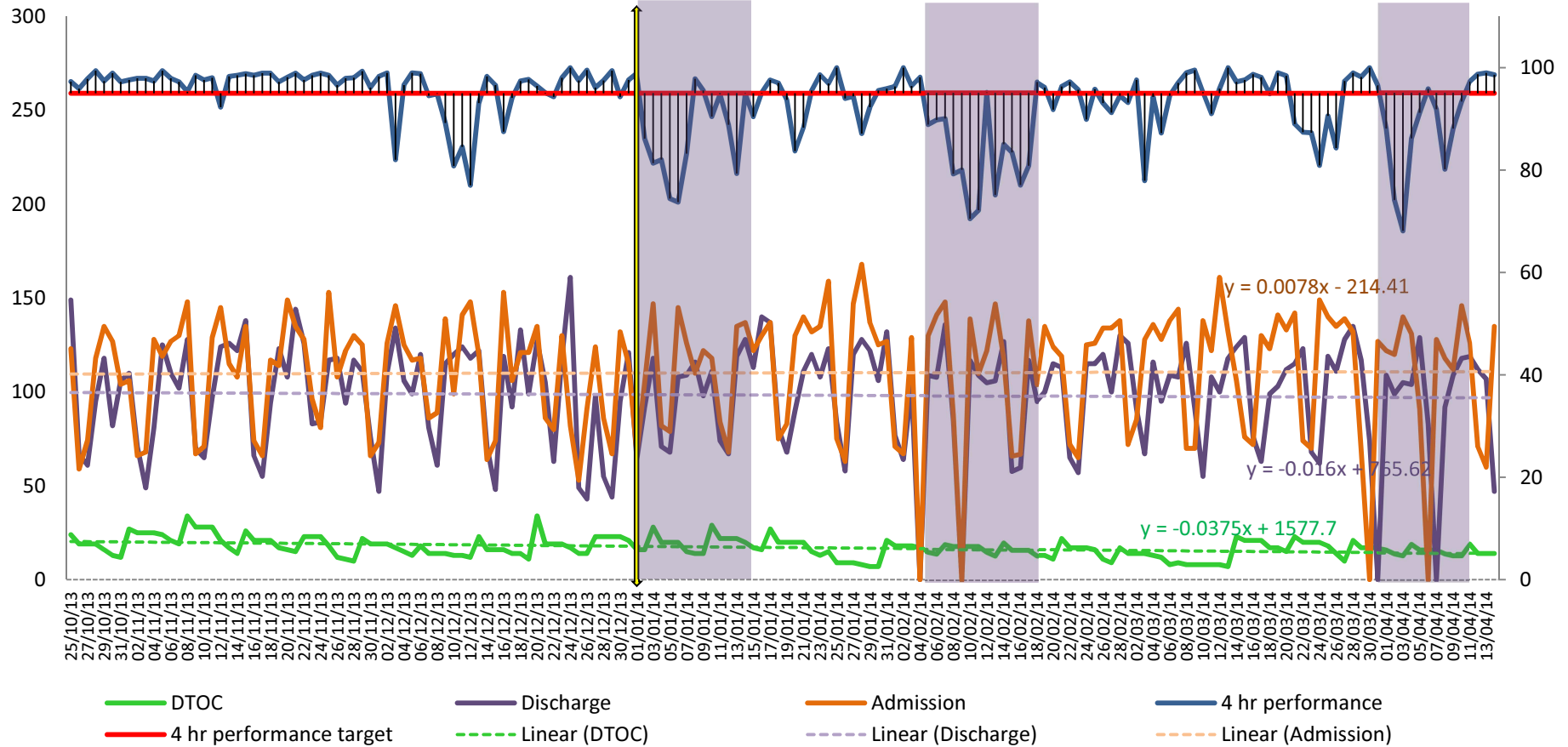


Data missing for admission on 4th & 9th Feb, 30th March and 6th April. The pattern shows that poor performances were not in correspondence with high admissions.



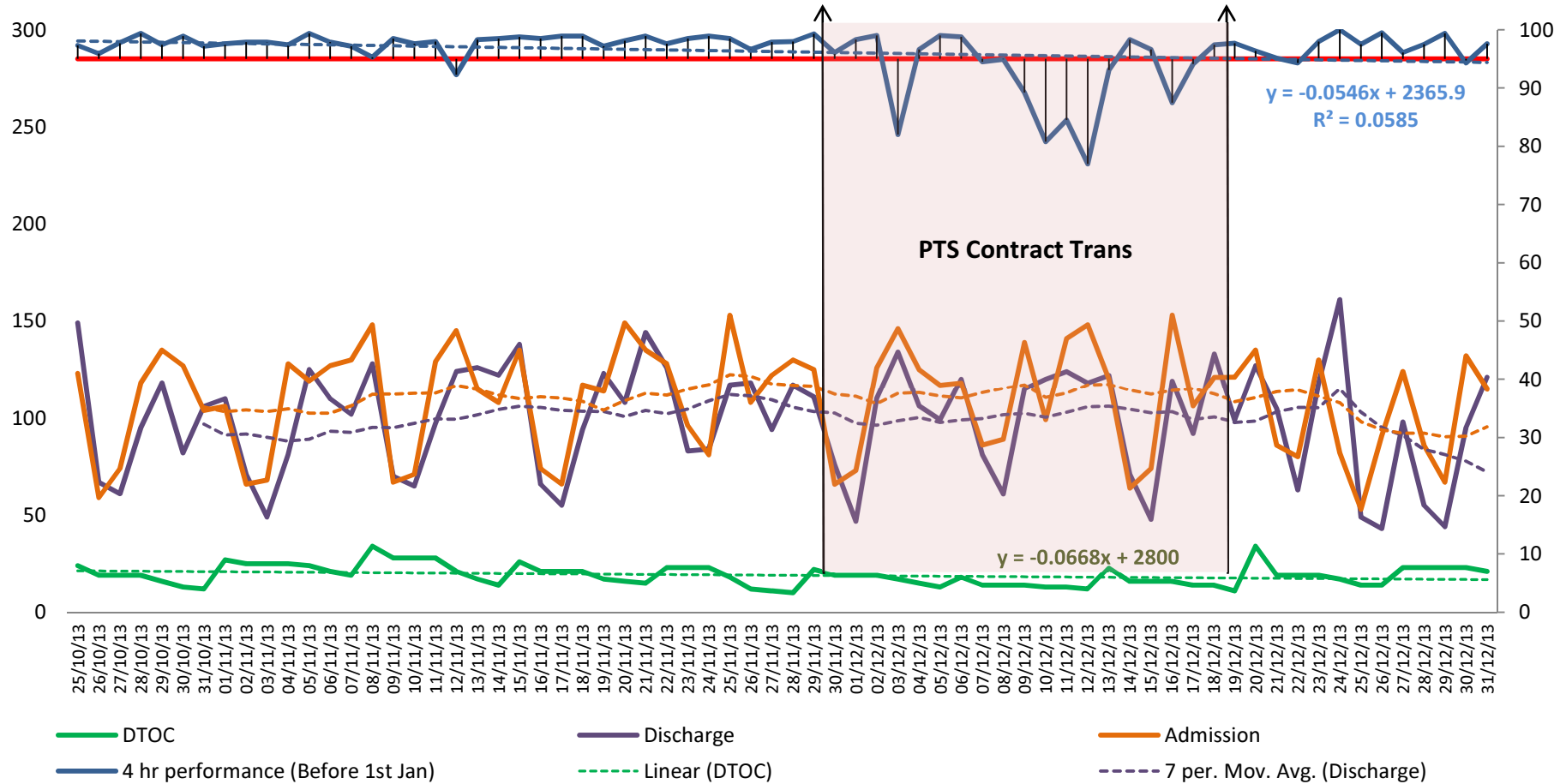
Data missing for admissions on 4th & 9th Feb, 30th March and 6th April. Over the data period (Oct - Apr), open bed showed an increasing trend on a slope of 14%. Attendance also showed an increasing trend but only slightly (9.6%). Admission trend line overlapped with the average line and showed a very light increase of 0.78%. Attendances and Admissions not peaked at the same time. Where poor performance appeared, Open bed peaked above the average, but not in corresponded with admissions. This may suggest that increasing bed was not due to admissions.

Performance, Admissions, Discharge & DToC



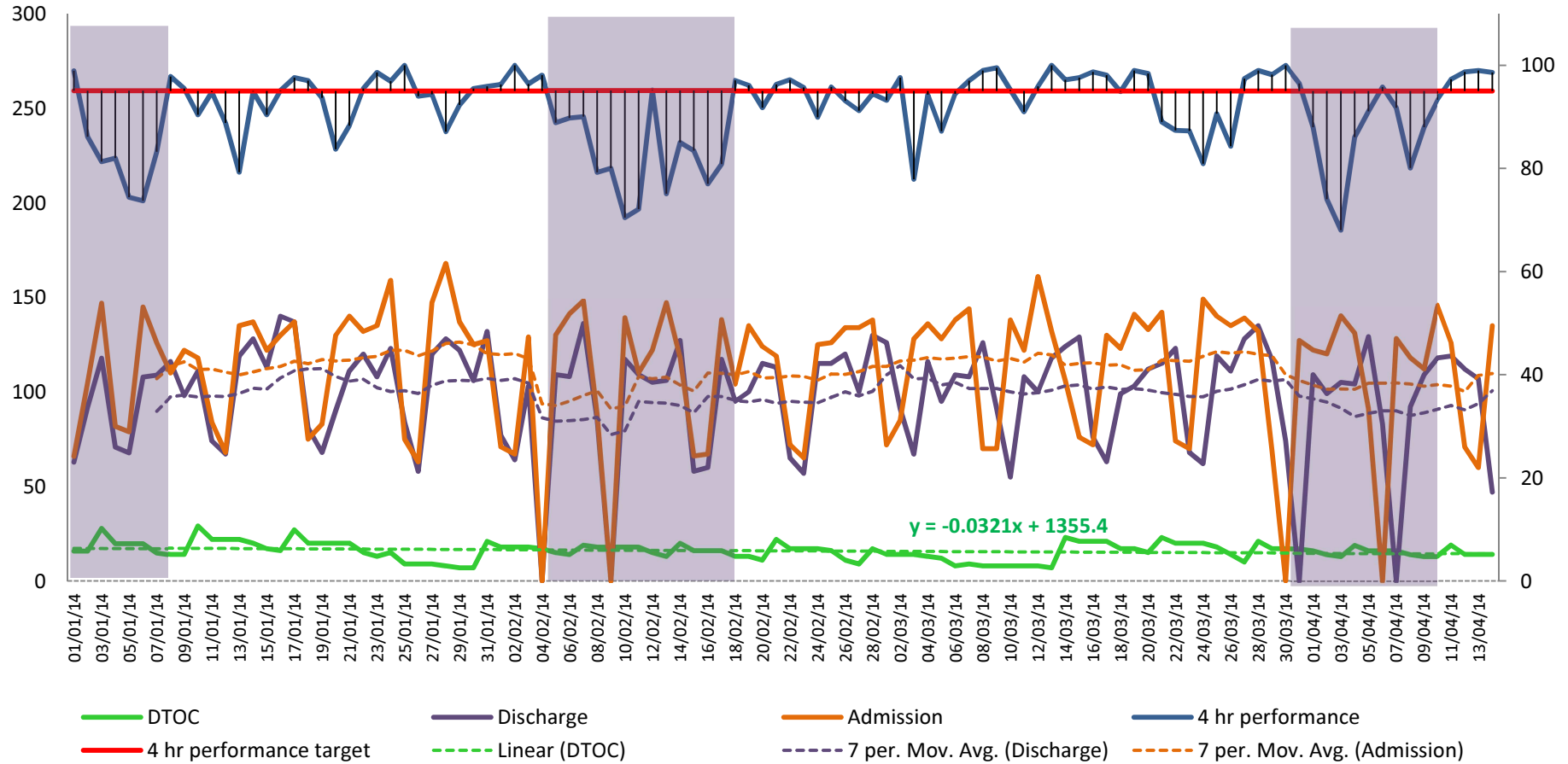
Both DToC and Discharge showed decreasing trends, with DToC on 3.75% and Discharge on 1.6%. In the three poor performance periods, no particular high DToC could be observed, but low discharge rate. Data missing for admission or Discharge for 4th & 9th Feb, 30th March and 6th April.

Performance, Admissions, Discharge & DToC Before 1st Jan 2014



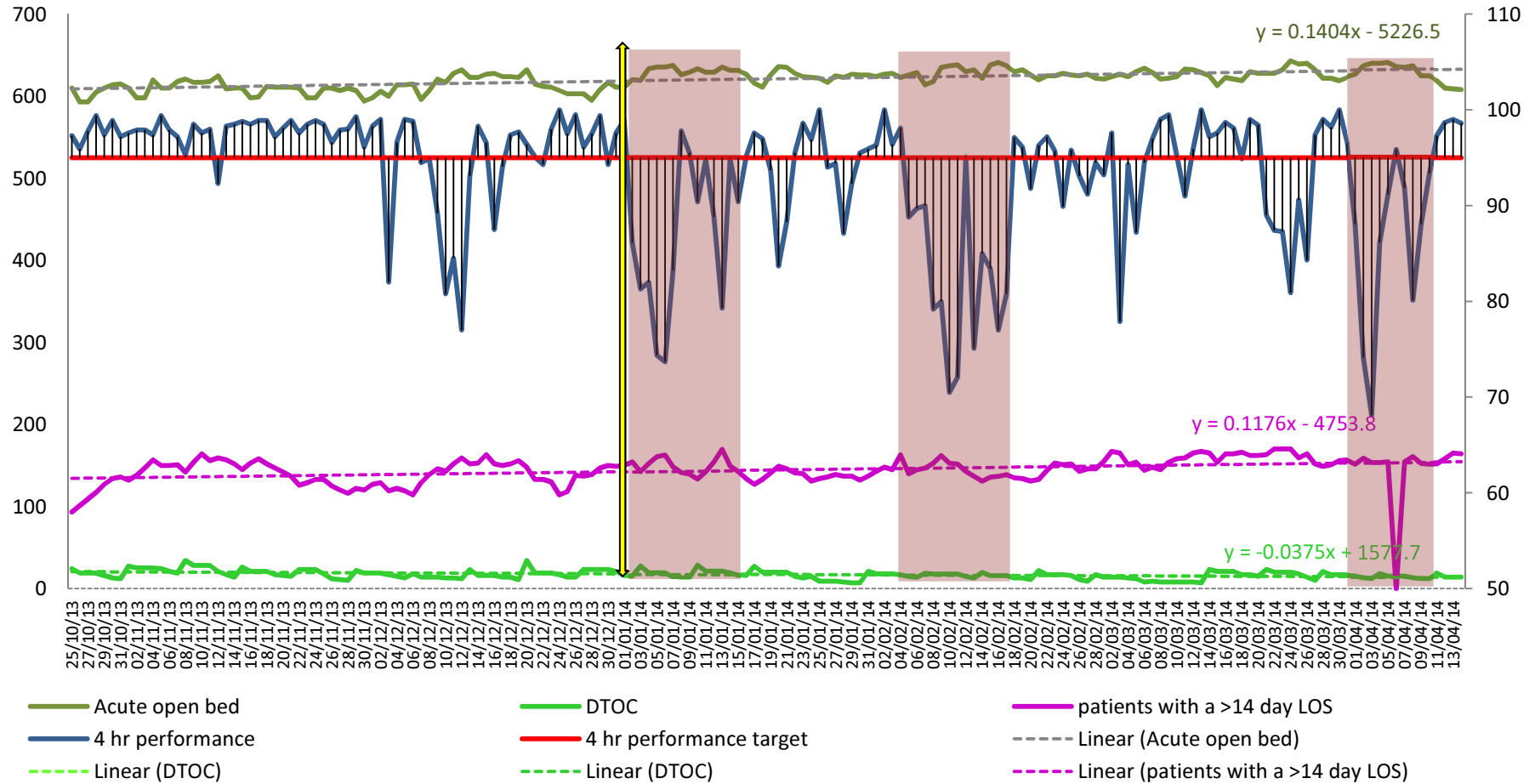
Before 1st Jan, Discharge and Admissions seemed to be on synchronised pattern in particular during the period up to December. 7 points moving averages of Admissions and Discharges appeared to travel on similar directions. The gaps between Discharge and Admission appeared to be evenly distributed without extreme.

Performance, Admissions, Discharge & DToC After 1st Jan 2014



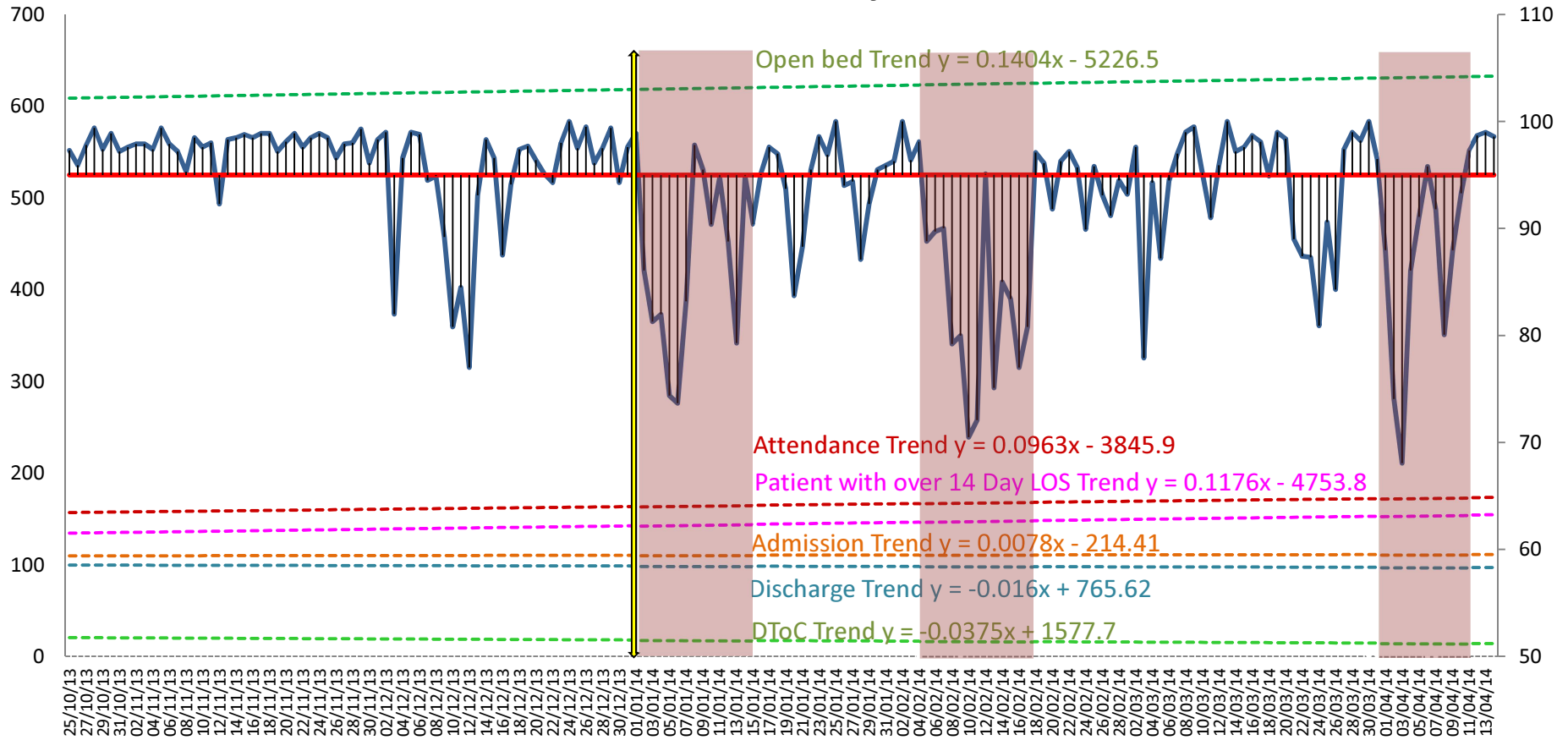
After 1st Jan, Admission and Discharge appeared to be unsynchronised with larger gaps between them than they were before 1st Jan. 7 points moving average appeared to less travel in the same direction than they did before 1st Jan. Data missing for admission or Discharge for 4th & 9th Feb, 30th March and 6th April.

Performance, Open Beds, DToC and Patients with a >14 Day LOS



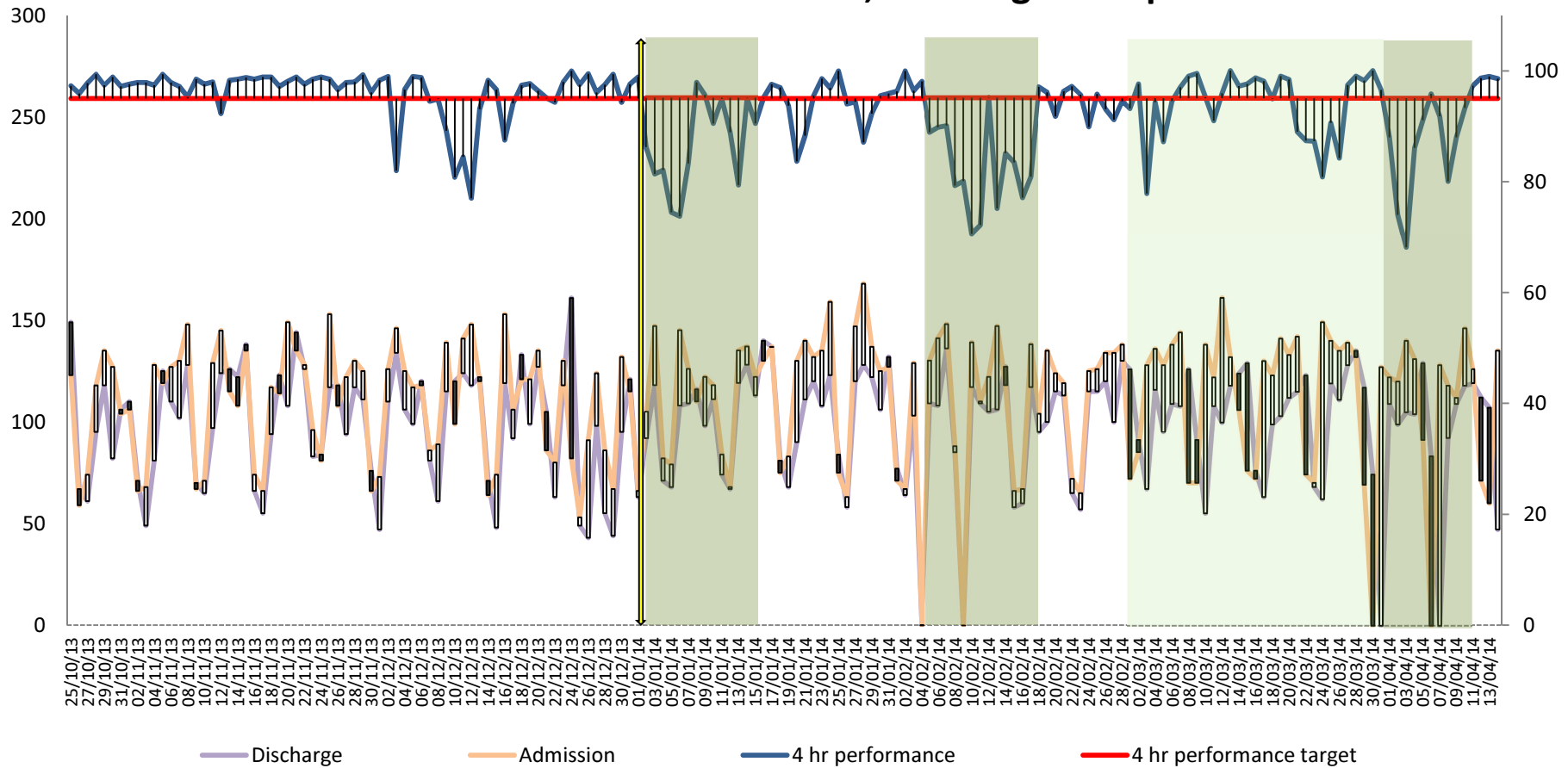
Both Open bed and Patients with over 14 days LOS demonstrated increasing trend with Open bed on 14% slope and Patients with 14 days LOS on 11.76% slop. Data missing for patient with over 14 days LOS on 6th April

Trends of Performance, Open Bed, Attendances, Admissions, Discharge, Patients with over 14 days LOS & DToC



During the winter period, the following trends appeared. Open bed was the fastest growing elements with a slope of 14%, followed by Patients with over 14 days LOS at 11.8% slope. Attendances also increased at a slope of 9.6%, but Admissions only increased at 0.8% slope. Discharge was on a decrease slope of 1.6%, DToC was on decrease trend of 3.8% slope.

Performance vs Admissions, Discharge & Gaps



In general daily Admissions were above daily Discharge, with intervals where discharge was higher than admission. Before 1st Jan, the mix of high Admission (than Discharge) and high Discharge (than Admission) was evenly distributed. After 1st Jan, there were fewer occasions where discharge was higher than the admissions. Poor performances were observed at the date points where there were repeated days when Admissions were higher than Discharge. This indicates an accumulative impact of Admission higher than Discharge. From March, much higher discharge than admission appeared on a

regular basis. The regularity suggests there might be interventions such as changes of work practices. The intervention may have impact on performance as daily admissions / daily attendance stepped up in at the start of March.