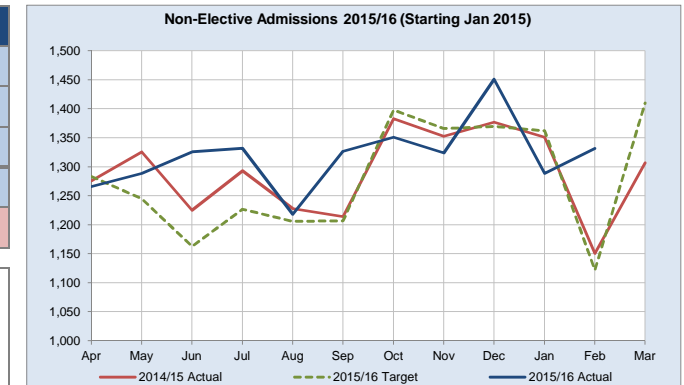


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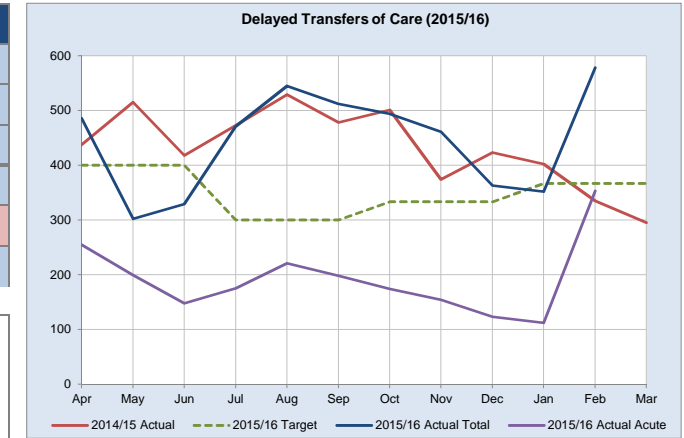
Metric (as at Feb-16)	Apr	May	Jun	Q1	Jul	Aug	Sep	Q2	Oct	Nov	Dec	Q3	Jan	Feb	Mar	Q4	Ytd (M11)	
Total non-elective admissions in to hospital (general & acute), all-ages	2014/15 Actual	1,276	1,326	1,225	3,827	1,293	1,228	1,214	3,735	1,383	1,353	1,377	4,113	1,351	1,151	1,307	3,809	14,177
	2015/16 Target	1,283	1,244	1,163	3,690	1,227	1,206	1,207	3,640	1,398	1,366	1,370	4,134	1,362	1,122	1,410	3,894	13,948
	2015/16 Actual	1,266	1,289	1,326	3,881	1,332	1,218	1,327	3,877	1,351	1,324	1,451	4,126	1,289	1,332			14,505
	Variance to Target	-17	45	163	191	105	12	120	237	-47	-42	81	-8	-73	210			557
	Against Target	▼	▲	▲	▲	▲	▲	▲	▲	▼	▼	▲	▼	▼	▲			▲

• Non-elective admissions activity was 19% above target for February. The target for February was low, reflecting the observed seasonal trends in 2014/15. This pattern did not occur in 2015/16. Year to date non-elective admissions are 4% above target and 2% above 2014/15 (see data note below). Admissions at the RUH account for 88% of the total year to date.  
 • The target is not split down in great detail so detailed analysis of actuals vs plan is not possible but more analysis of quarter 3 actuals 2015/16 vs 2014/15 is on the next page.  
 • **DATA ISSUE UPDATE:** The non-elective activity (G&A) is now being reported using the new maternity adjustment (source: BaNES Activity Plan Monitoring v3) as agreed with the RUH. The 2014/15 data have been updated to reflect this change and the data issue is resolved.  
 • **NOTE:** The 2015/16 target has been updated to reflect the revised plan figures that take into account the 2015/16 emergency admissions adjusted for the regional average.

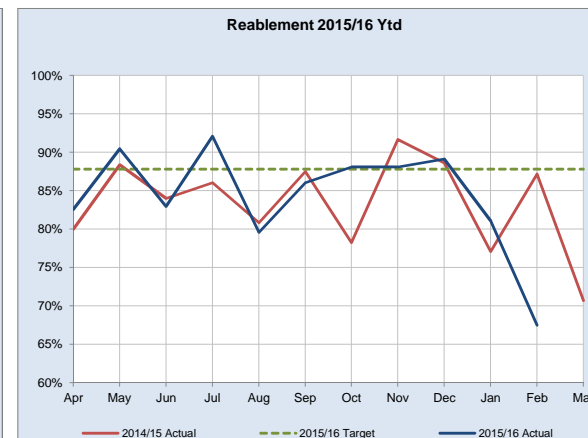
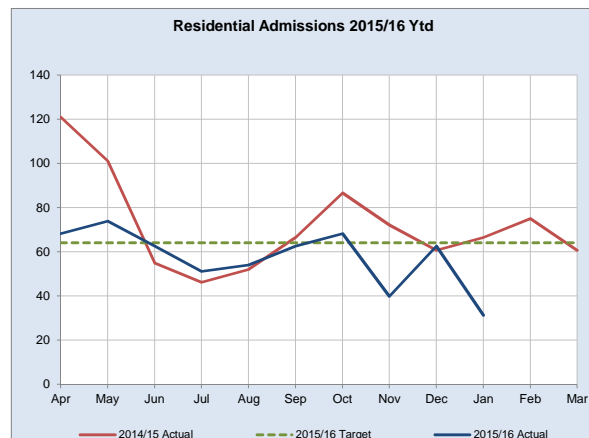


Metric (as at Feb-16)	Apr	May	Jun	Q1	Jul	Aug	Sep	Q2	Oct	Nov	Dec	Q3	Jan	Feb	Mar	Q4	Ytd (M11)	
Delayed transfers of care (delayed days) from hospital (aged 18+)	2014/15 Actual	437	515	418	1,370	473	529	478	1,480	501	374	423	1,298	402	335	295	1,032	4,885
	2015/16 Target	400	400	400	1,200	300	300	300	900	333	333	333	1,000	367	367	367	1,100	3,833
	2015/16 Actual Total	486	302	329	1,117	471	545	512	1,528	494	461	363	1,318	352	578			4,893
	Variance to Target	86	-98	-71	-83	171	245	212	628	161	128	30	318	-15	211			1,060
	Against Target	▲	▼	▼	▼	▲	▲	▲	▲	▲	▲	▲	▲	▼	▲			▲
2015/16 Actual Acute	255	199	148	602	175	221	198	594	174	154	123	451	112	353			2,112	

• Year to date the National DTOC submission is 1% above target. See reporting changes note below. Total performance YTD is very similar to 2014/15 but 28% above target. The target for 2015/16 was set at the end of Q1 2014/15, with low figures for Q2 expected based on historic performance. However, performance during Q2 2014/15 was higher than expected and a similar pattern has been seen in 2015/16.  
 • The high figures in Q2 and Q3 were driven primarily by delays at Sirona, which had more than 300 delay days each month from August to November. The Sirona DTOC days reduced to 225 in February. The sharp rise in February is due to the increase at the RUH. More details can be seen on DTOCS dashboard.  
**REPORTING CHANGES:** National reporting that counts towards the BCF target changed in November. Up to October this was the 2015/16 Actual Total. From November it is the 2015/16 Actual Acute. Sirona have now stopped reporting nationally as community reporting is not consistent across the country. Furthermore, RUH DTOC reporting changed in February, with CHC fast-track now included in the figures.

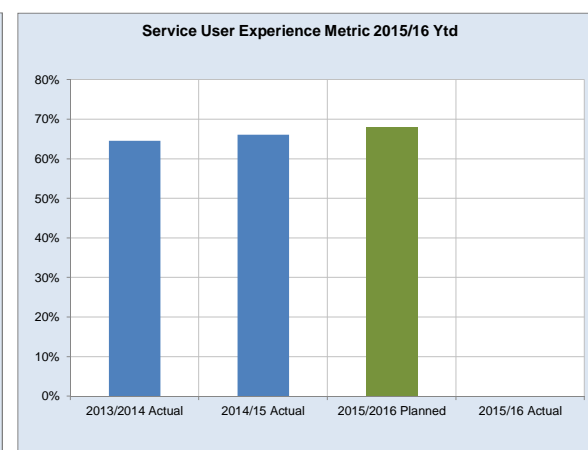
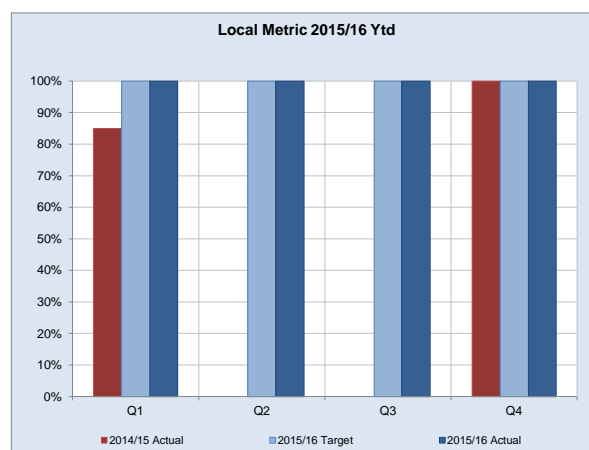


Metric (as at Jan-16)	Baseline 13/14	Planned	Ytd Target	Ytd Actual	Target	
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	2014/15	914	847	847	864	▼ Below Target
	2015/16	-	765	638	574	
	YTD Variance to target				64	
	% YTD Variance to target				-10%	



• There were 202 permanent admissions to residential or nursing homes through the year to February, 57 per 100,000 population per month on average against a monthly target of 64.  
 • This continues the 2014/15 strong performance after the Social Care Pathway Redesign was implemented from July 2014, when more people were offered reablement to try and keep them living independently.  
 • For the year to February, 84.3% of people were still at home 91 days after discharge. In February, 27 out of 40 people were still at home after 91 days. This data will be reviewed to ensure no inappropriate cases have been included.  
 • **Please note:** The proportion of older people still at home 91 days after discharge from hospital into reablement is measured nationally as those who were discharged in Q3 and 91 days later were reviewed in Q4. This report follows the results for all months (shown as the month in which the 91 days were completed) and will report against full year and Q4 national target at year end.

Metric (as at Dec-15)	Baseline 13/14	Planned	Ytd Target	Ytd Actual	On Target?	
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	2014/15	86.3%	87.1%	87.1%	83.1%	▼ Below Target
	2015/16	-	87.8%	87.8%	84.3%	
	YTD Variance to target				-3.5%	
	YTD Change from 2014/15				1.2%	

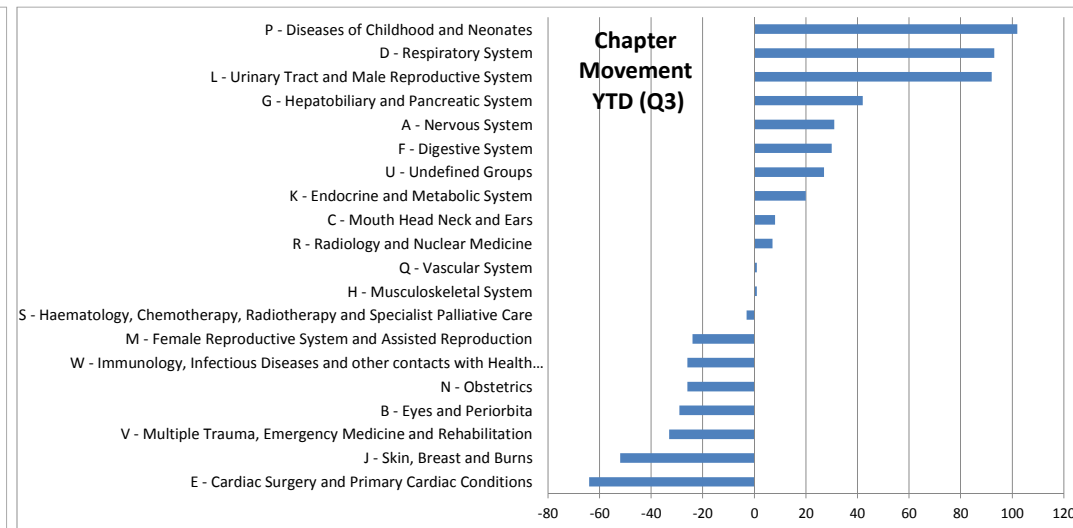
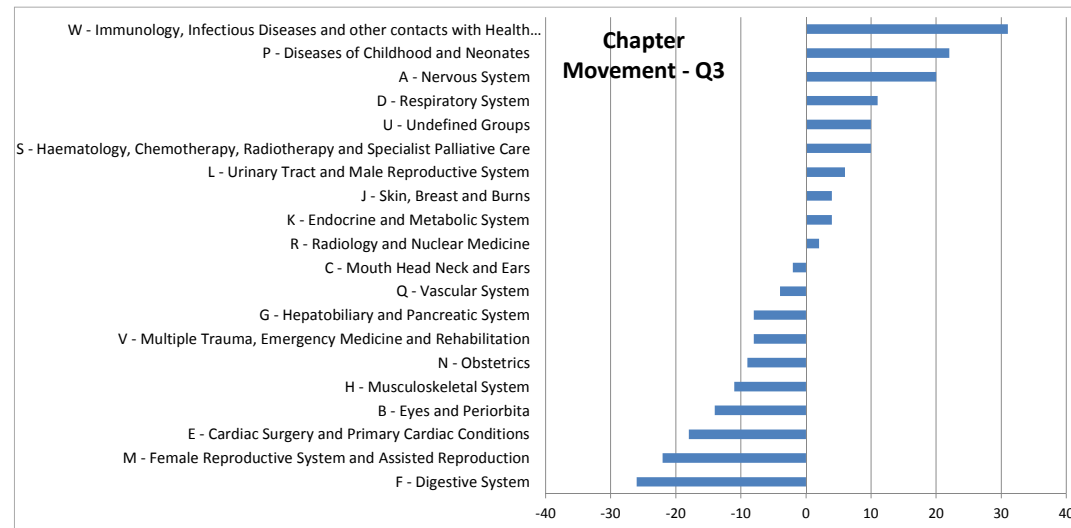


• The Local Metric has been very successful, hitting 100% in each quarter. For Q4, 594 patients were being case managed with a care plan at the end of March 2016. A new local metric is being developed for 2016/17 and this is what will be reported on going forward.  
 • The 2014/15 result meets the target at 66.1% for over 65's. This compares to the result for all ages of 69%.  
 • There is a tough target of 68% in 2015/16 that will need to be supported by the ongoing work on the social care pathway and its processes and systems (e.g. Liquid Logic implementation) and the joint deliverable to review and improve the carers over 65's pathway.  
 • **Please note:** this indicator is only updated on an annual basis and reported in June.

Metric (as at Q4-15/16)	Q1 14/15	Planned	Ytd Target	Ytd Actual	On Target?	
Proportion of high risk people case managed via Community Cluster Teams with a personalised care plan & lead accountable professional.	2014/15	90%	95%	95%	100%	◀▶ On Target
	2015/16	-	100%	100%	100%	
	YTD Variance to target				0	
	% YTD Variance to target				0%	

Metric (as at 2014/15)	Actual 13/14	Planned	Ytd Target	Ytd Actual	On Target?	
How many users of care and support services said they were extremely or very satisfied with their care and support (ASCOF 3A). For respondents over 65.	2014/15	64.6%	66.0%	66.0%	66.1%	TBC
	2015/16	-	68.0%	68.0%	TBC	
	% YTD Variance to target				-	
	% Annual Change in Experience Metric				-	

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Non-elective Admissions (actuals)	Year	Q1	Q2	Q3	Q4	YTD
	2014 /15	3,827	3,735	4,113	3,809	
	2015/16	3,881	3,877	4,126		
	Variance	54	142	13		

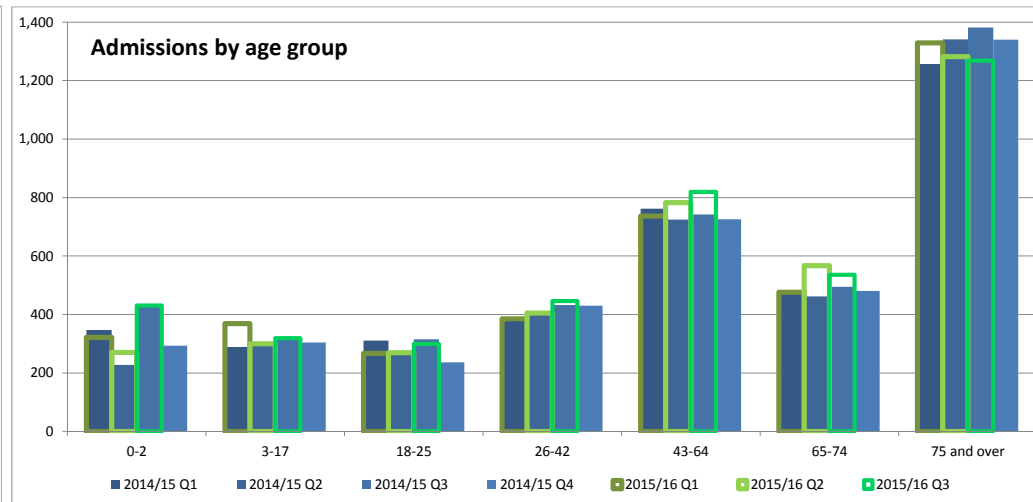
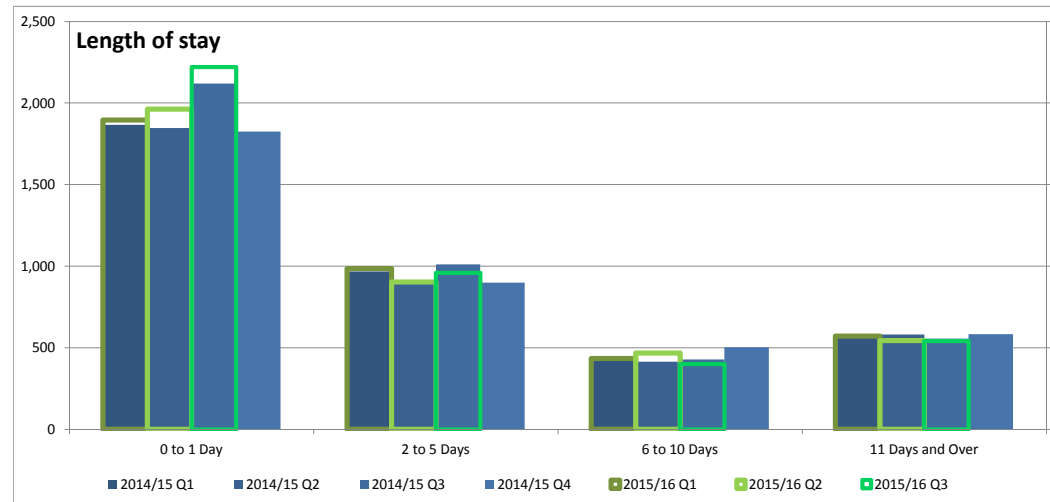
**Non-Elective Admissions by Chapter - Q3**

The main changes in admissions by injury type compared to Q3 2014/15 are:

- Reduction of 26 to 482 for Digestive System.
- Reduction of 22 to 57 for Female Reproductive System
- Reduction of 18 to 474 for Cardiac Surgery and Primary Cardiac Conditions
- Increase of 31 to 356 for Immunology, Infectious Diseases and other contacts
- Increase of 22 to 725 for Diseases of Childhood and Neonates
- Increase of 20 to 286 for Nervous System

Through the year to date the most substantial increases have been for:

- Diseases of Childhood and Neonates, which ties in to the increase in admissions in the 3 to 17 year age group in Q1 (see below)
- Respiratory System
- Urinary Tract and Male Reproductive System



**Length of stay**

Admissions with a 0-1 day length of stay were 5% higher in Q3 than the same period last year, an increase of 100 admissions. Short stays reduced across the quarters in 2014/15 and have subsequently increased throughout 2015/16.

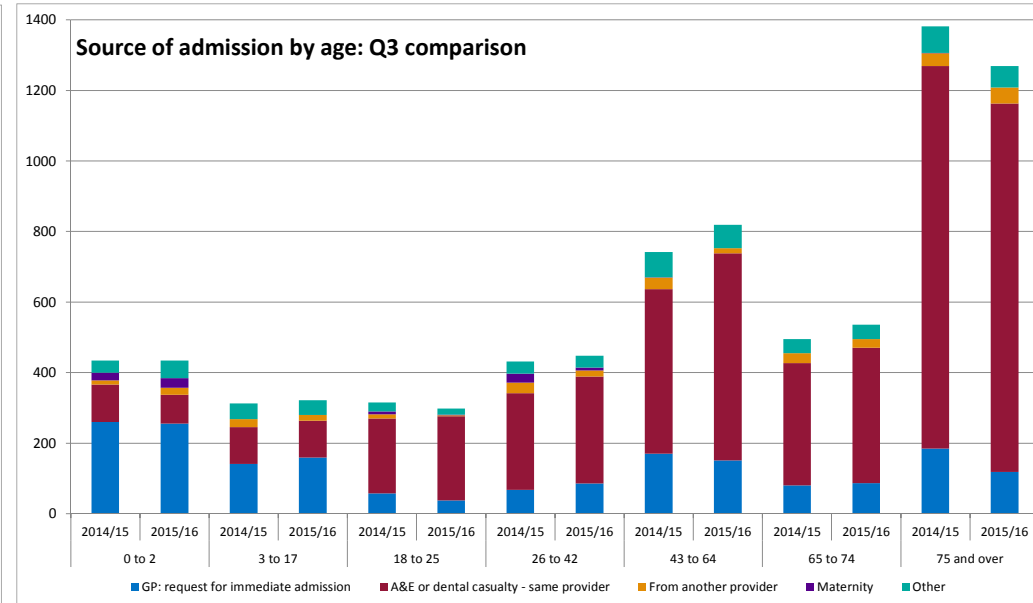
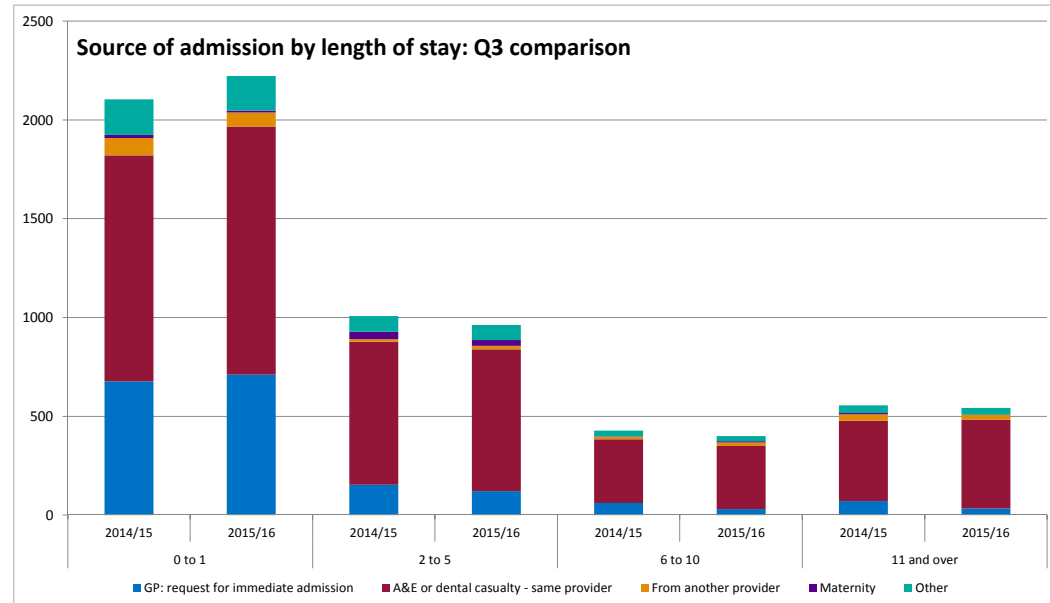
Admissions resulting in a length of stay of 2 days or more were a total of 95 fewer than in Q3 2014/15.

**Source of admission by length of stay**

The majority of those staying less than one day were admitted through A&E; 1,255 (56%) had A&E or dental casualty as the source of admission.

The growth in patients staying 0-1 days between Q3 2014/15 and Q3 2015/16 included increases of:

- 112 (10%) increase admitted through A&E.
- 34 (5%) increase admitted following a GP request.



**Admissions by age**

Admissions for those aged 43-64 continued to be substantially higher than last year at 819 in Q3 2015/16 compared to 742 in the same period last year. Admissions for 65-74 year olds were also higher than last Q3 at 536 but down slightly compared to Q2.

Admissions for those aged 75 and over were 113 (8%) lower than Q3 2014/15, continuing the decrease from Q2.

**Source of admission by age**

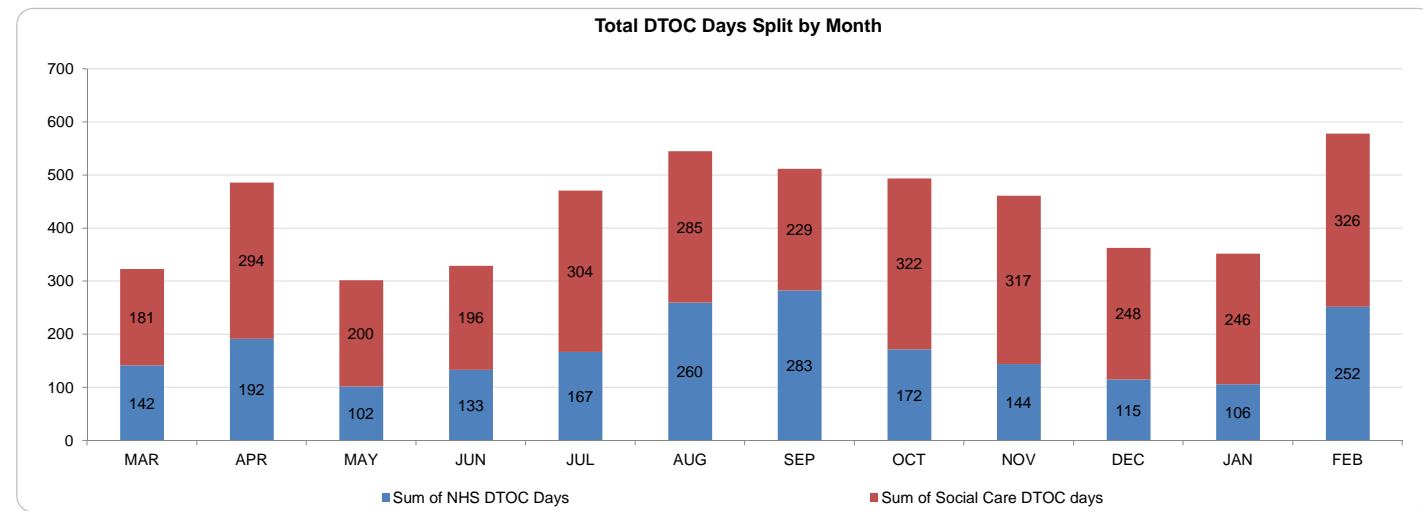
The growth in admissions for 43-64 year olds compared to Q3 2014/15 occurred mainly from A&E or dental casualty, which increased 26% (120 admissions) for this age group. A&E admissions also increased by 11% (37) for 65-74 year olds.

Admissions for those aged 75 and over decreased by 36% (66) for GP admissions and 4% (40) for A&E admissions.

Delayed Transfers of Care (DToC) by reporting provider 2015/16

ALL BANES PATIENTS - Feb. 2016

Graph 1.



Graph 2.

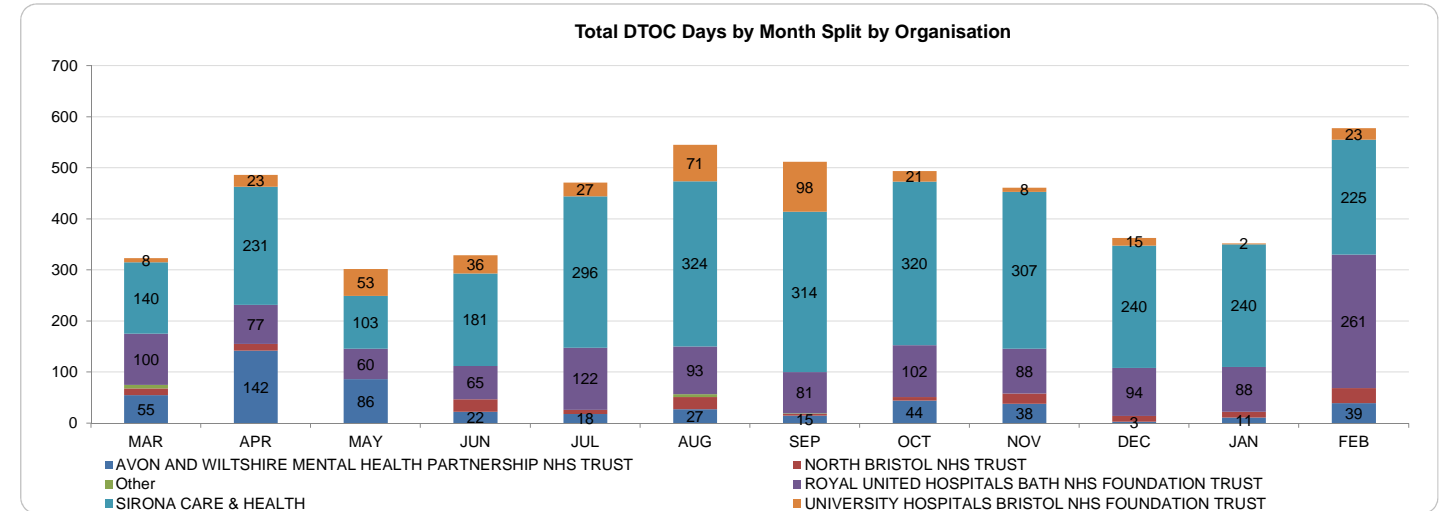


Table 1.

DTOC Reason 2014/15	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	15/16 YTD Total	% of Total
CARE PACKAGE IN HOME	24	16	18	49	28	24	58	21	18	0	8	56	296	15%
COMMUNITY EQUIP ADAPT	5	21	0	0	0	12	7	11	0	0	23	0	74	4%
COMPLETION ASSESSMENT	1	14	19	9	5	22	23	7	2	2	0	9	112	6%
DISPUTES	0	0	0	0	0	1	0	0	0	0	0	0	1	0%
FURTHER NON ACUTE NHS	30	2	17	33	96	107	54	26	22	63	41	126	587	30%
HOUSING	7	57	0	0	0	7	43	68	0	9	0	8	192	10%
NURSING HOME	20	43	33	33	16	36	63	20	95	22	13	51	425	22%
PATIENT FAMILY CHOICE	39	32	15	4	8	37	16	0	2	1	7	0	122	6%
PUBLIC FUNDING	0	0	0	0	0	0	7	3	0	0	0	0	10	1%
RESIDENTIAL HOME	16	7	0	5	14	14	12	16	5	18	14	2	107	6%
<b>Total</b>	<b>142</b>	<b>192</b>	<b>102</b>	<b>133</b>	<b>167</b>	<b>260</b>	<b>283</b>	<b>172</b>	<b>144</b>	<b>115</b>	<b>106</b>	<b>252</b>	<b>1,926</b>	<b>100%</b>

Table 2.

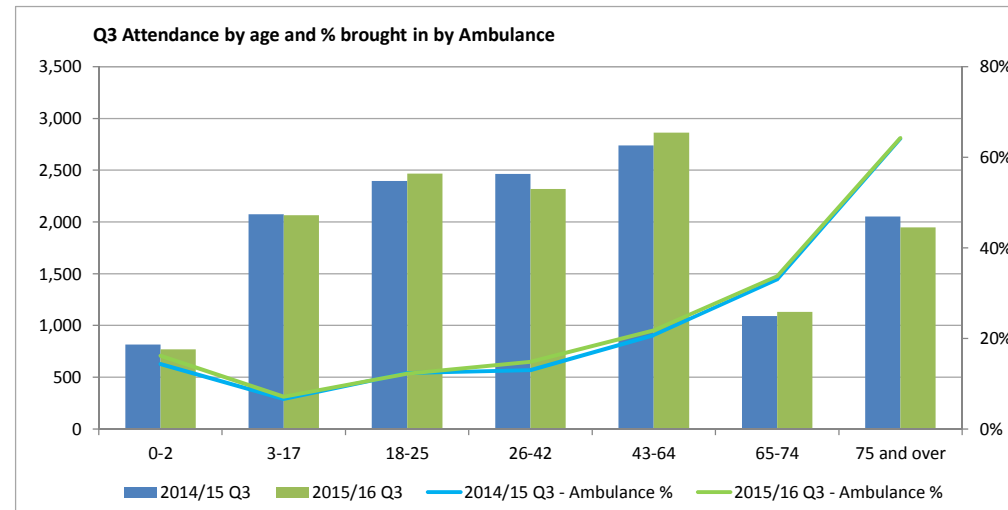
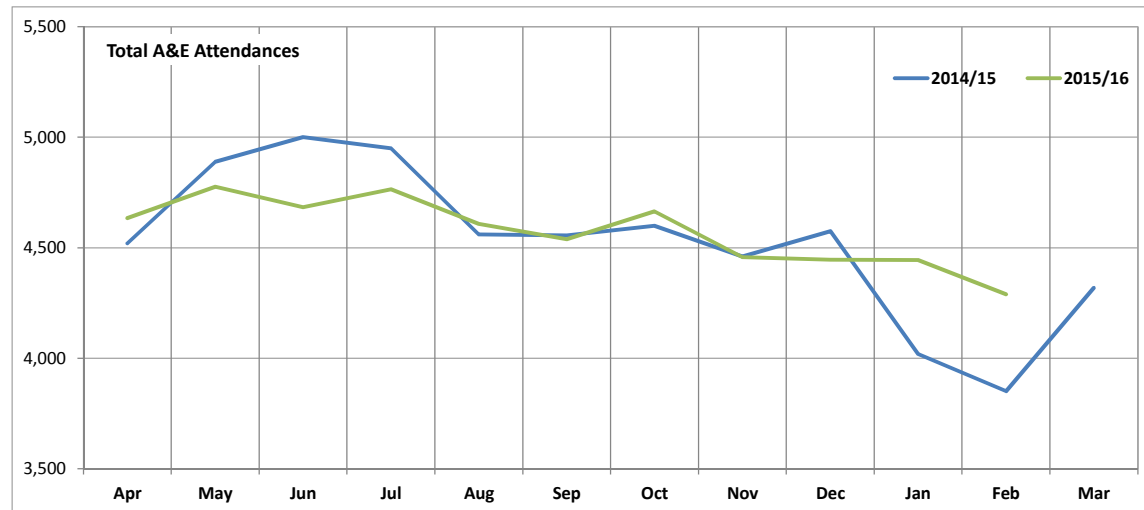
DTOC Reason 2014/15	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	15/16 YTD Total	% of Total
CARE PACKAGE IN HOME	44	45	52	44	127	138	106	166	169	113	120	129	1,209	41%
COMMUNITY EQUIP ADAPT	0	0	0	0	0	0	0	0	0	0	0	1	1	0%
COMPLETION ASSESSMENT	10	34	0	9	10	15	0	17	3	19	14	30	151	5%
DISPUTES	0	0	0	0	0	0	0	0	0	0	28	0	28	1%
FURTHER NON ACUTE NHS	0	0	0	0	0	0	0	0	0	0	0	0	0	0%
HOUSING	0	0	0	0	0	0	0	0	0	0	0	0	0	0%
NURSING HOME	101	162	112	95	57	78	100	87	66	45	50	126	978	33%
PATIENT FAMILY CHOICE	15	0	10	17	0	9	0	16	30	16	0	0	98	3%
PUBLIC FUNDING	0	0	1	0	13	6	7	15	30	16	0	9	97	3%
RESIDENTIAL HOME	11	53	25	31	97	39	16	21	19	39	34	31	405	14%
<b>Total</b>	<b>181</b>	<b>294</b>	<b>200</b>	<b>196</b>	<b>304</b>	<b>285</b>	<b>229</b>	<b>322</b>	<b>317</b>	<b>248</b>	<b>246</b>	<b>326</b>	<b>2,967</b>	<b>100%</b>

Comments:

The total number of DTOC days in February was 578, up from 352 in January. The main driver of this growth was the increase in DTOC days at the RUH from 88 in January to 261 in February. RUH DTOC reporting changed during this period, with CHC fast-track now included in the figures. For the CCG as a whole, Social Care DTOCs increased to 326 days. Care package delays remained high and Nursing Home delays increased substantially to 126 days. This may in part relate to the closure of one of B&NES's nursing homes in February. NHS DTOCs increased to 252 days. The main NHS delay reason was "Further non-acute NHS".

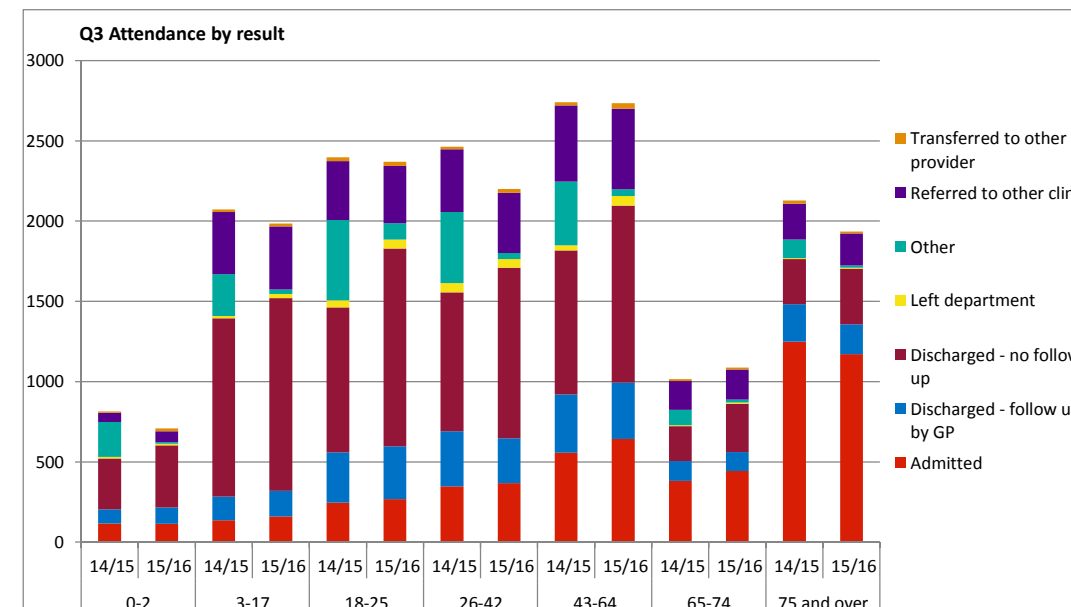
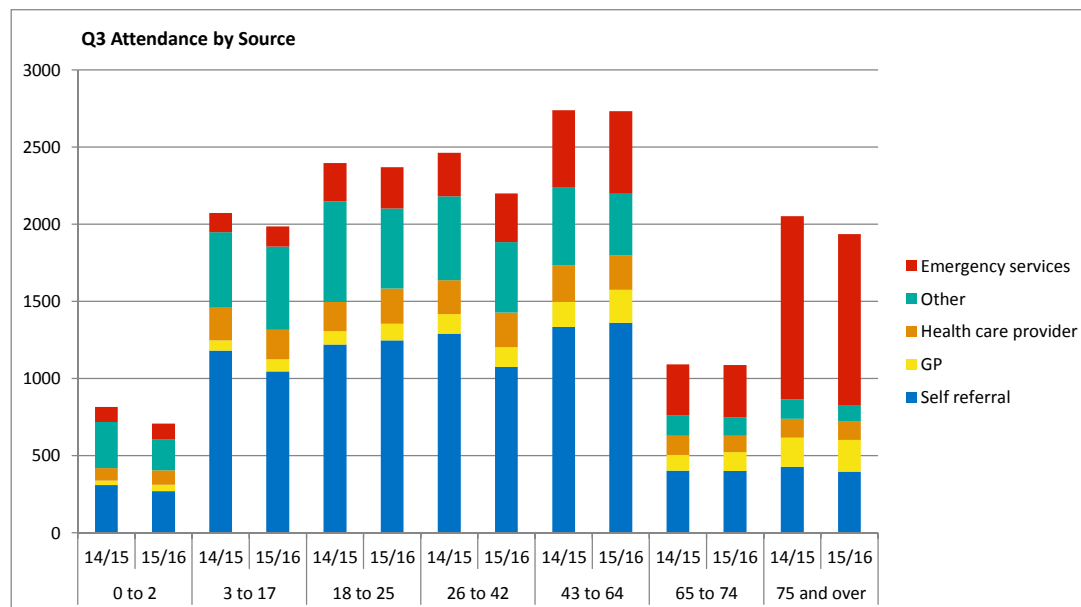
The delays at the RUH were evenly split between Social Care and NHS delays, with the main reasons being "Further non-acute NHS" and "Care package in home". Sirona DTOCs continued a gradually reducing trend to 225 with the main delay reasons being "Nursing Home" and "Care package in home".

Current Reporting Period: Feb 16



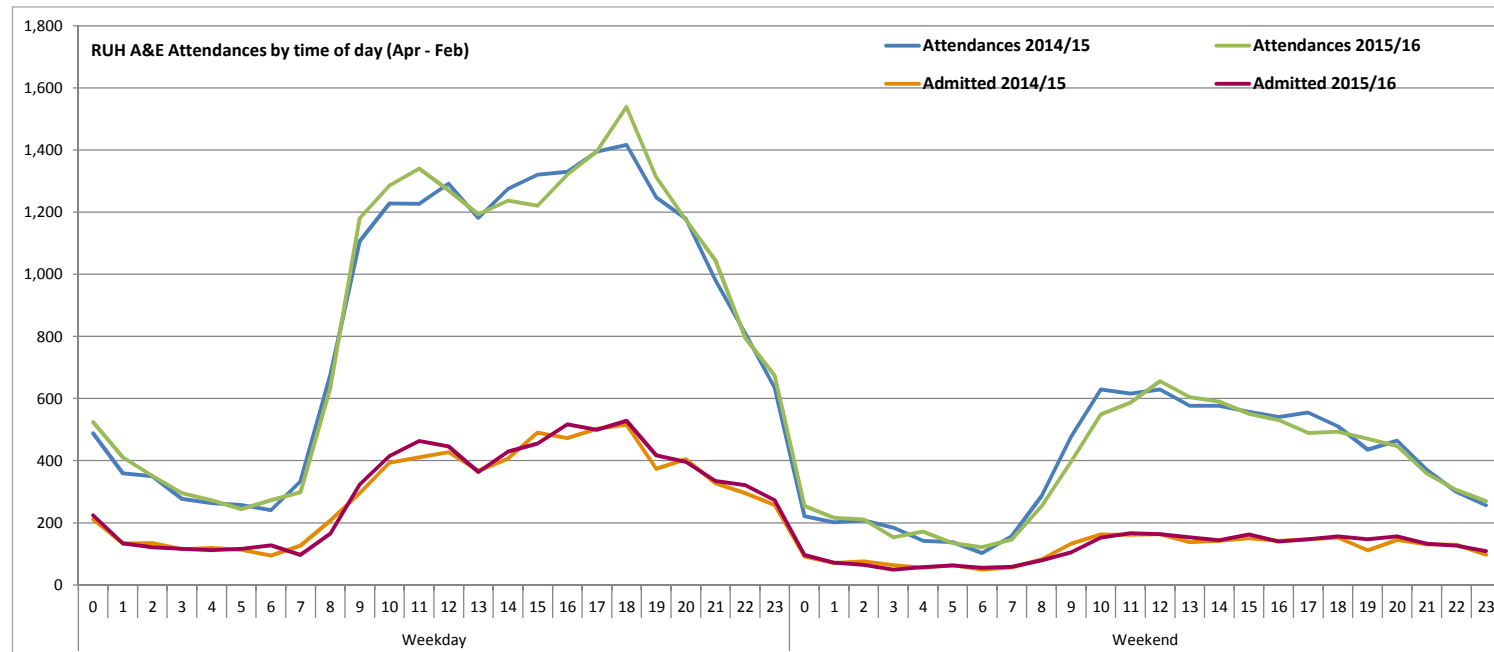
**A&E Attendances**  
 There were 13,567 A&E attendances in Q3 2015/16; 0.5% lower than the same period last year.  
 Through the year to date, total attendances have seen less pronounced seasonality than in 2014/15, and have not dropped substantially in January and February. Attendances for these last two months are 11% higher than in 2014/15.

**A&E Attendances by age and % brought in by ambulance**  
 Compared to Q3 2014/15, A&E attendance decreased by:  
 • 11% for 26-42 year olds (-264)  
 • 13% for 0-2 year olds (-107)  
 • 6% for those aged 75 and over (-117)  
 • 4% for 3-17 year olds (-88)  
 The percentage of patients brought in by ambulance rose slightly for all age groups, with the most notable changes being 3% increases for 0-2 year olds and 26-42 year olds.



**A&E Attendances by source of referral**  
 Self-referrals decreased compared to Q3 2014/15 by 17% (215) for 26-42 year olds and 11% (134) for 3-17 year olds.  
 Emergency services referrals decreased by 7% (81) for those aged 75 and over.  
 Other: Police, Work, Educational establishment, Dental Practitioner, Social Services and others

**A&E Attendances by result**  
**Note:** A substantial reduction in "null" coding of attendance result means that very few attendances are now shown as having an "other" result. The increases in the number shown being discharged with no follow up, discharged with GP follow up and referred to another clinic are therefore likely to largely reflect this change.  
 The higher numbers of 43-64 and 65-74 year olds and lower numbers of 75+ year olds admitted compared to Q3 2014/15 are thought to be real changes and link to the changes seen in non-elective admissions.



RUH A&E Attendance by arrive time and % admitted (Apr - Feb)					
	2014/15		2015/16		% change in number of attendances
	Number	% Admitted	Number	% Admitted	
<b>Weekday</b>					
Day	12,772	34%	12,984	34%	2%
OOH	8,094	36%	8,303	36%	3%
<b>Weekend</b>					
Day	5,669	26%	5,446	27%	-4%
OOH	3,466	35%	3,513	36%	1%
<b>Total</b>	<b>30,001</b>	<b>33%</b>	<b>30,246</b>	<b>34%</b>	<b>1%</b>

**RUH A&E Attendances by arrival time and % admitted**  
 A&E attendances at the RUH YTD are 2% higher during day time hours, with more pronounced morning (09:00 - 12:00) and late afternoon (18:00) peaks. Weekday out of hours (OOH) attendances have increased 3% YTD. In contrast, weekend day time attendances have decreased.  
 Compared to last year, a higher proportion of patients attending A&E on a weekend are admitted. Patients attending on weekend day times are still the least likely to be admitted.