

Appendix A: Sheffield Place Partnership Performance Dashboard (March 2023)

Performance Indicator		Sheffield HCP Delivery Group ¹	NHS Constitution Standard	2023/24 Planning Guidance Standard	Other	Direction of Travel (previous period)	Sheffield Place Latest Position		Sheffield Place Performance against standard (latest 6 months)	Benchmarking			Latest Provider Total Monthly Position			
										England Average	North East & Yorkshire	SY ICB Average	Sheffield Teaching Hospital	Sheffield Children's Hospital	Sheffield Health & Social Care	Yorkshire Ambulance Service
<small>(1) Sheffield HCP Delivery Groups Key: Community Development & Inclusion (CDI), Primary and Community Care (PC), Urgent and Emergency Care (UEC), Elective (EL), Children and Young People (CYP), Mental Health, Learning Disability, Dementia and Autism (MHLDDA)</small>																
1. Prevention and Health Inequalities	a) % of hypertension patients who are treated to target as per NICE guidance	PC		77% by 31 Mar 24			Mar-22				64.6%	64.6%				
	b) % of patients (aged 25-84) identified as having 20% or greater CVD risk score on lipid lowering therapies	PC		60%			Mar-22				58.8%	63.2%				
	c) People aged > 14 on GP LD registers receiving an annual health check and health action plan	PC, MHLDDA		75% by Mar 24				72.4%	Jan-23				74.6%			
	d) Address health inequalities and deliver on the Core20PLAS5 approach.	CDI		No specific detail				Data Source to be confirmed. Awaiting guidance from NHS England.								
2. Primary Care	a) All who contact primary care practice urgently are assessed the same day or next day according to clinical need.	PC		TBC				42.5%	Jan-23	WIP		45.3%	44.0%	41.7%		
	b) All who need a GP appointment get one within 2 weeks	PC		TBC				78.8%	Jan-23	WIP		84.1%	85.4%	81.3%		
	c) Total appointments in general practice	PC		? more by 31 Mar 24 (50m nationally)		↑	314,580	Jan-23			29,442,876	4,780,518	768,710			
	d) Total Additional Roles Reimbursement Scheme (ARRS) roles	PC		? more by 31 Mar 24 (26k nationally)			Data Source to be confirmed. NHS England will publish the General Practice Access Recovery Plan in the new year which will provide details of the actions needed to achieve the goals									
	e) Number of Completed Referrals to Community Pharmacist Consultation Service (CPCS) from general practice	PC		Improvement to pre-pandemic levels			Developing access to data. The ICB level CPCS referrals are already presented in NSHE regional packs, and data files are available for download within the reports. NHS England will publish the General Practice Access Recovery Plan in the new year which will provide details of the actions needed to achieve the goals									
	f) Number of Completed Referrals to Community Pharmacist Consultation Service (CPCS) from NHS 111	PC		Improvement to pre-pandemic levels			220	Dec-22	WIP				608			
3. Community Care	a) 2 hour Urgent Community Response (UCR) (Provider level only)	PC, UEC		70%		↑	Provider not yet available for Jan-23	Jan-23			80%	79%	92%	Provider not yet available for Jan-23		
	b) Streamline direct access and set up local pathways for direct referrals (to reduce unnecessary GP appts and improve patient	PC, EL		No specific detail			Data Source / Definition to be confirmed.									
	c) Community services waiting list total	PC		5% "year on year" increase			Data Source to be confirmed. The SitRep data will be used to estimate the more detailed / full extent of the waiting lists and will be monitored against plans to assist in validation of submissions.									
	d) Number of CYP (0-17 years) on community waiting lists per system	PC, CYP		5% "year on year" increase			Data Source to be confirmed. The SitRep data will be used to estimate the more detailed / full extent of the waiting lists and will be monitored against plans to assist in validation of submissions.									
	e) Number of Adults (18+ years) on community waiting lists per system	PC		5% "year on year" increase			Data Source to be confirmed. The SitRep data will be used to estimate the more detailed / full extent of the waiting lists and will be monitored against plans to assist in validation of submissions.									
	f) Access to Community Mental Health Services for Adults and Older Adults with Severe Mental Illnesses	PC, MHLDDA		5% "year on year" increase			WIP	Jun-22	WIP				26.9%			
4. Referral to Treatment	a) All patients wait less than 18 weeks from referral to treatment for non-urgent consultant-led treatment	EL		92%		↑	Published 66.9%	Jan-23		Published Jan-23 60.1%	Published Jan-23 67.3%	Published Jan-23 68.4%	Published Jan-23 66.4%	Published Jan-23 57.5%		
	b) No patients wait more than 52 weeks from referral to treatment for non-urgent consultant-led treatment	EL		0		↑	2,669	Jan-23		379,316	30,037	4,767	3,339	1,053		
	c) No patients wait more than 65 weeks from referral to treatment for non-urgent consultant-led treatment	EL		0 by 31 March 24		↓	1,115	Jan-23		145,003	10,398	1,822	1,655	237		
	d) Elective Ordinary Activity - 23/24 target v actual	EL		On or better than target			Targets not yet agreed. Exptected by end Feb 23.									
5. Diagnostic test waiting times	a) Patients wait 6 weeks or less from the date they were referred	EL		99%	Increase in line with 95% by Mar 25 ambition	↑	Published 87.6%	Jan-23		Published Jan-23 69.2%	Published Jan-23 75.4%	Published Jan-23 73.8%	Published Jan-23 77.9%	Published Jan-23 76.7%		
	b) Diagnostic Activity - 23/24 target v actual	EL		On or better than target			Targets not yet agreed - to be agreed end March-23									

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6. Ambulance response times	a) Category 1 (life threatening) calls resulting in an emergency response arriving within 7 minutes (average response time)	UEC	7 mins		↓	8mins 24secs	Feb-23		8mins 30secs	8mins 24secs				8mins 24secs	
	b) Category 1 calls resulting in an emergency response arriving within 15 minutes (90th percentile response time)	UEC	15 mins		↔	14mins 44secs	Feb-23		15mins 6secs	14mins 22secs				14mins 44secs	
	c) Category 2 (emergency) calls resulting in an emergency response arriving within 18 minutes (average response time)	UEC	18 mins	30 mins average for 23/24		↑	27mins 35secs	Feb-23		32mins 20secs	32mins 29secs				27mins 35secs
	d) Category 2 calls resulting in an emergency response arriving within 40 minutes (90th percentile response time)	UEC	40 mins			↑	1hrs02mins	Feb-23		1hrs08mins	1hrs15mins				1hrs02mins
	e) Category 3 (urgent) calls resulting in an emergency response arriving within 120 minutes (90th percentile response time)	UEC	120 mins			↑	3hrs09mins	Feb-23		4hrs06mins	4hrs02mins				3hrs09mins
	f) Category 4 (less urgent) calls resulting in an emergency response arriving within 180 minutes (90th percentile response time)	UEC	180 mins			↑	3hrs34mins	Feb-23		5hrs18mins	2hrs57mins				3hrs34mins
7. Ambulance handover / crew clear times	a) Ambulance Handover - reduction in the number of delays over 30 minutes in clinical handover of patients to A&E	UEC	Local Reduction			↑	20.0%	Feb-23			29.5%	48.6%	4.9%		20.0%
	b) Ambulance Handover - reduction in the number of delays over 1 hour in clinical handover of patients to A&E	UEC	Local Reduction			↑	8.9%	Feb-23			12.6%	23.6%	0.0%		8.9%
	c) Crew Clear - reduction in the number of delays over 30 minutes from clinical handover of patients to A&E to vehicle being ready for	UEC	Local Reduction			↓	22.0%	Feb-23			12.2%	14.7%	25.0%		22.0%
	d) Crew Clear - reduction in the number of delays over 1 hour from clinical handover of patients to A&E to vehicle being ready for next	UEC	Local Reduction			↓	2.1%	Feb-23			1.2%	1.9%	2.1%		2.1%
8. A&E Waits	a) Patients are admitted, transferred or discharged within 4 hours of arrival at A&E	UEC	95%	76% by March 24		↓	77.7%	Feb-23		68.9%	65.8%	74.1%	88.6%		
	b) No patients wait more than 12 hours from decision to admit to admission	UEC	0			↑	27	Feb-23		37837	298	27	0		
9. Other Acute Hospital Measures	a) Zero instances of mixed sex accommodation which are not in the overall best interest of the patient (MSA breach rate, per 1,000 finished consultant episodes (for benchmarking comparator))	UEC/EL	0			↑	1 (0.1)	Jan-23		4938 (3.2)	358 (1.4)	4 (0.1)	0	0	0
	b) Operations cancelled, on or after the day of admission, for non-clinical reasons to be offered another date within 28 days (provider)	UEC/EL	Local Reduction			↑	35	Q3 22/23			485	87	31	4	
	c) Adult general and acute type 1 bed occupancy (adjusted for void beds) (provider data only)	UEC/EL		92%		↓		Feb-23			92.8%	90.2%	89.6%	75.3%	
	d) No right to reside - Over 7 days (provider only- weekly snapshot)	UEC			↓	↓		Feb-23				367 (no TRFT data)	221		
	e) No right to reside - Over 14 days (provider only- weekly snapshot)	UEC			↓	↓		Feb-23				255 (no TRFT data)	157		
	f) No right to reside - Over 21 days (provider only- weekly snapshot)	UEC			↓	↑		Feb-23				177 (no TRFT data)	116		
10. Cancer	a) Percentage of cancers diagnosed at stage 1 and 2	EL		Increase in line with 75% by 2028 ambition		↓	50.4%	2019			51.3%				
	b) 2 week (14 day) wait from GP referral to first OP with suspicion of cancer	EL	93%			↑	85.9%	Jan-23		77.8%	86.5%	85.9%	100.0%		
	c) 2 week (14 day) wait from GP referral to first OP with breast symptoms (cancer not initially suspected)	EL	93%			↓	2.5%	Jan-23		75.7%	48.4%	8.9%			
	d) 1 month (31 day) wait from diagnosis with suspicion of cancer to first treatment	EL	96%			↓	80.5%	Jan-23		92.0%	90.0%	82.8%	100%		
	e) 1 month (31 day) wait for second/subsequent treatment, where treatment is anti-cancer drug regimen	EL	98%			↓	86.8%	Jan-23		98.8%	96.0%	96.5%	100%		
	f) 1 month (31 day) wait for second/subsequent treatment, where treatment is radiotherapy	EL	94%			↓	81.8%	Jan-23		90.8%	79.8%	86.9%	100%		
	g) 1 month (31 day) wait for second/subsequent treatment, where treatment is surgery	EL	94%			↑	58.8%	Jan-23		80.9%	63.8%	60.4%	100%		
	h) 2 month (62 day) wait from urgent GP referral to first treatment	EL	85%			↓	36.3%	Jan-23		60.3%	58.3%	43.3%			
	i) 2 month (62 day) wait from referral from an NHS screening service to first treatment	EL	90%			↓	20.0%	Jan-23		67.1%	75.9%	20.0%			
	j) 2 month (62 day) wait following a consultant's decision to upgrade the priority of the patient to first treatment	EL	(85% threshold)			↑	66.7%	Jan-23		73.9%	71.1%	67.4%			
	k) Total patients waiting over 62 days (STH only) - Weekly PTL	EL		Continue to reduce		↓		Feb-23					204		
	l) Total patients waiting over 104 days (STH only) - Weekly PTL	EL		Continue to reduce		↓		Feb-23					90		
	m) 28 Day Faster Diagnosis Standard	EL	75%	75% by 31 Mar 24		↓	64.7%	Jan-23		68.5%	71.6%	69.2%	93%		

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11. Maternity	a) Personalised & safe care: every woman receiving a personalised care plan and being supported to make informed choices	CYP		Increase				Data source to be defined.							
	b) Stillbirths per 1,000 total births (Sheffield Jessop Wing only, local data)	CYP		Reduce			3.84	Sep-22			3.45				
	c) Stillbirths per 1,000 total births (Local Authority level)	CYP		Reduce		↓	2.78	2020		3.81					
	d) Neonatal deaths per 1,000 total live births (Local Authority level)	CYP		Reduce		↑	2.43	2020		2.67					
	e) Maternity staff fill rates against funded establishment	CYP		Increase				Data source to be defined.							
12. Mental Health, Learning Disabilities, Autism and Dementia	a) People under adult mental illness specialties to be followed up within 72 hour of discharge from Inpatient services	MHLDDA	80%	n/a				Jan-23						81.0%	
	b) Total "Inappropriate Out of Area" Patient bed days rolling 3 months	MHLDDA		"Work towards" zero		↑	1940	Dec-22				2885			
	c) Place %age of SYB total, "Inappropriate Out of Area" Patient bed days rolling 3 months	MHLDDA				↓	67.2%	Dec-22							
	d) Women accessing Perinatal Mental Health Services (YTD)	MHLDDA		Improved access		↑	320	Dec-22				985			
	e) % of SYB total, Women accessing Perinatal Mental Health Services (YTD)	MHLDDA				↓	32.5%	Dec-22							
	f) No. CYP (0-17yrs) receiving at least one contact in the reporting period - % of indicative trajectory achieved	MHLDDA, CYP		100%			53.9%	Nov-22	WIP			70.0%			
	g) IAPT Access Monthly - % of indicative trajectory achieved	MHLDDA		100%			85.3%	Nov-22	WIP			84.2%			
	h) Under 18s with a learning disability and/or who are autistic per million under 18s are cared for in an inpatient unit	MHLDDA		<12-15			4	Feb-23	WIP			8			
	i) Adults with a learning disability and/or who are autistic per million adults are cared for in an inpatient unit	MHLDDA		<30			5	Feb-23	WIP			39			
	k) Estimated rate of prevalence of people aged over 65 diagnosed with dementia	MHLDDA		66.7%		↓	70.3%	Dec-22		62.2%		69.7%			
13. Workforce	a) Staff retention and attendance	Other		Improve in line with NHS People Promise			Data source to be defined.								
14. Use of resources	a) Financial Position	Other		Balanced net position for 23/24		Data source to be defined.									