

## PERFORMANCE MANAGEMENT

The new corporate performance management arrangements have been successfully launched, with the initial meeting of the Performance Management Group on 2<sup>nd</sup> November 2006, the minutes of which are appended to this paper.

The Group received and considered performance reports on the HEAT targets, as well as the Delivering for Health Quarterly Report and the recently re-instated SEHD Quarterly Fact Sheet.

Consideration was given to possible supplementary indicators and reports, and to future reporting arrangements for progress in relation to the top priorities under 'A Picture of Health'.

It was agreed that, each month, the Board's attention would be drawn to any particular highlights and to any targets where achievement was proving particularly challenging. The key issues for this month are set out below:-

<b>HIGHLIGHTS:</b>	
A&E	I Ross, Director of Acute Services  Achieved target of 95% of attenders spending less than 4 hours in A&E in October 2006, 2 months ahead of plan.
Cancer	I Ross, Director of Acute Services  Achieved 100% colorectal referrals being treated within the 62 day target in October 2006, from a starting point of 50% in April 2006. Achieved 93% of lung cancer referrals being treated within the 62 day target in October 2006.

<b>CHALLENGES:</b>	
Finance	<p>S Goldsmith, Director of Finance</p> <p>Deficit increase from £-606K in August 2006 to £-901k in September 2006. A separate Board seminar was held on 8 November regarding this.</p>
ASCs	<p>I Ross, Director of Acute Services</p> <p>Number has only reduced by 106 since April 2006, against a plan of 459. Increase is in part due to the impact of increased activity to deliver diagnostic and inpatient waiting time targets. Action is being taken to (a) reduce new additions and (b) address those currently on the ASC list. The expectation is that the trajectory for December 2006 will still be achieved, and that the December 2007 target will still be delivered.</p>
Outpatients	<p>I Ross, Director of Acute Services</p> <p>As at September 2006, number waiting more than 18 weeks had increased by 1429 against a planned reduction of 250. This is partly due to increased activity to address inpatient waiting times resulting in uneven peaks of outpatient activity. Action is being taken to achieve and sustain the target.</p>

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