Paper ref:	TB (09/18) 007

Sandwell and West Birmingham Hospitals NHS
NHS Trust

Report Title	Chief Executive's Summary on Organisation Wide Issues		
Sponsoring Executive	Kam Dhami, Director of Governance (acting CEO)		
Report Author	Toby Lewis, Chief Executive		
Meeting	Trust Board	**Date**	6th September 2018

1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on]*

The report does not duplicate others, which detail the challenges we face to achieve our financial plan, or the changes to be made to further improve quality. Our Operating Plan for 2018-19 can be delivered, notwithstanding slippage behind our four hour improvement trajectory. Unity delivery in 2018-19 is contingent on IT resilience work concluding.

I would suggest that there is merit in discussing again:

- Efforts to tackle sickness absence in our wards which are a material risk to our financial plan for Q3 and Q4
- Work to address diagnostic waiting times
- Steps to deliver our no smoking plan for 2019
- The progress of the Healthy Lives Partnership ICS, whose draft outcomes framework has separately circulated to Board members

The governance of Midland Met procurement and IT turnaround are reflected in the recommendations below.

2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan		Public Health Plan	X	People Plan & Education Plan	X
Quality Plan	X	Research and Development		Estates Plan	X
Financial Plan	X	Digital Plan	X	Other *[specify in the paper]*	X

3. Previous consideration *[where has this paper been previously discussed?]*

N/A

4. Recommendation(s)

The Trust Board is asked to:

a.	NOTE the contents of this report and discuss actions detailed
b.	APPROVE the terms of reference for the temporary disaggregation of the MPA

5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register		n/a					
Board Assurance Framework		Risk Number(s): BAF 5 and BAF 10					
Equality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	

Chief Executive's Report to the Public Trust Board

September 2018

The nature of the work of the Board is that we focus on the sufficiency of problem solving leadership activities to tackle issues faced by our communities, patients, colleagues and partners. There remains much to do to secure a good rating based on great results, and to develop an outstanding organisation and system. We do however need to recognise what has been and is being achieved. Our Group leadership teams are driving improvement at scale and pace, and there is every reason to be confident in their ability to do so.

The IQPR shows continued achievement in a large number of areas of care and work, notably around elective care. And since the Board last met, we have secured the approval of funding and procurement approach for Midland Met. That means that we can provide a clear route-map for acute care from 2018 to 2022. The private Board discussed in July the development of an 'acute care model' rather than a specialty model as we prepare for Midland Met and work to do that, and to examine any interim reconfiguration needed in 2019, continues. We are a month behind in the development of final options, but that reflects excellent engagement from GP and clinical leaders to develop ideas and solutions.

The agenda for the Board focuses time on IT resilience and the delivery of our turnaround plan, on emergency care where planned changes in late September are intended to secure more rapid care and treatment, and on our quality plan with a focus on tackling amenable mortality. When we undertake our Well-led assessment with the Care Quality Commission in October I would expect to be well placed to confirm the governance and sufficiency of plans for improvement in each of those domains. It would be deeply disappointing if the unannounced inspections by the CQC in September found surprising or new issues which our systems have not yet identified for resolution.

1. **Our patients**

Whilst July saw an improvement of 3% in emergency care waiting times, we have fallen from 84% to 83% in August. Our improvement plan deploys the majority of its actions for gain in late September, with SMART going live at Sandwell in mid-month and at City in October. The single point of access for GP referrals goes live in October. Specialty support projects to better provide in-reach into ED are going live progressively now, with surgery starting, and changes to ED medical rotas start in late October.

A handful of patients continue to wait more than 30 minutes for initial assessment at triage and resolving this for every shift is being prioritised by local ED leaders. The Trust continues to be among the best in the west midlands at ambulance handover and RAM assessment,

and our red flag sepsis data suggests that we are identifying and caring for our most acutely unwell patients well.

Our strategy then is in three parts:

- ensure less unwell patients who could be seen outside ED are looked after there
- swiftly admit patients who clearly need acute admission and
- create space and professional time to assess and best treat those patients whose needs are less clear at initial presentation

The actions above support that strategy, and are grounded in external advice and enthusiasm by our A&E teams and wider clinical leadership. Behind this winter planning is well advanced, and our flu vaccination campaign starts shortly. Our winter ward opens in October. Whilst no national assessment templates have yet been issued in 'planning' winter, our local system is not awaiting such guidance but is seeking to ensure that we have services developed to meet need, including over the Christmas period, where bank holidays fall in such a way as to create a full fortnight of limited cover out of hospital among partner agencies. The risk is not increased admissions so much as stalled discharges.

Notwithstanding the clinical salience and stakeholder focus on emergency care, we continue to focus time on planned and diagnostic care as well. Our waiting list has risen even as waiting times have fallen, and we consistently meet the RTT standard. However, unlike in 2013-2017, for five months we have not quite achieved the 99% diagnostic wait standard. We expect to do so in October, and have plans to seek to do so in September. A long-term plan for imaging capacity, on the back of our MES investment in 2016 and successful recruitment of staff since, will be signed off before the next Board meeting. In the private Board Group Directors and executive colleagues will outline our work to develop our capacity plans for 2019-2020, as we aim to provide more services for local residents, who otherwise sometimes have to secure care further afield. With the work done to revise our ERS and bring some waiting times down to NHS leading levels, the Trust is well placed to develop and grow. A patient needing day surgery in orthopaedics for example can obtain that in 10 days at SWB – a pace not even matched in the local private sector. With the opening of our 23-hour capacity we are seeking to ring-fence and segment elective and emergency patients, although our winter plan provides for three weeks of slower planned care volumes.

The Safe domain is well reflected in our CQC Improvement Plan submission to the Board, indeed arguably most of the actions being taken in other domains bear directly on safety. Our own Safety Plan data shows strong performance and the Consistency of Care data confirms that, based on shift by shift, day by day results. The independent audit of that data that we commissioned is circulated for information to Board members. Our Quality Plan then seeks to drive further gains, with an initial focus on sepsis, and other areas of potential amenable mortality. Our longstanding openness about areas for care improvement

reinforces our evident determination to look for gains and benefits. It is encouraging that our safety summits last year in orthopaedics and maternity have produced action plans which now show improved outcomes for patients. The absolute Trust-wide focus on sepsis will do the same. A twice daily report of patients with high NEWS scores is now shared across the senior clinical leadership to ensure full transparency of potentially at-risk patients.

2. **Our workforce**

My annexes show recruitment to date against our plans. We are behind plan presently, and a reinvigorated effort is being undertaken on the back of last year's very successful campaign, the great news about Midland Met, and the growing 'sense' of our distinctive educational offer to employees. Other changes such as our provision for premature births for parental leave (both maternal and paternal), **we**mind, and our continued work on poverty pay, provide ballast to that. And innovative projects like HOP tap into recruitment markets not examined by others.

Deployment of our Aspiring to Excellence programme has given us good insight into the best and hot spot areas for staff line management, which the Accredited Manager project is seeking to tackle. We have almost concluded moderation of PDR scores, and work to ensure fairness in those scores, and to support high potential individuals, will be reported in future People and OD committee meetings.

In October, we will issue our new pulse survey to support the **we**connect engagement programme which the Board agreed in July. Your Voice data for this summer will be available before the Board next meets and work to increase participation has shown success. Group Directors are developing localised programmes to lead the Trust-wide effort and TeamTalk this month provides employees with a chance to prioritise the work of the executive in making working at SWB a little easier or simpler. We can confidently expect that improvements in IT will be a priority for many staff.

Changes in pathology services go into effect in October. Subject to some documentation discussions before the Board meets, I am confident that we have discharged our TUPE obligations to those consulted employees. A handful of aspects of service will move to Black Country Pathology without TUPE under SLA. The change to pathology services is a major one, and whilst in due course it involves movement of many colleagues to a base at New Cross, and the balance to Sandwell, it also marks a major move in joint working across the Black Country. In the same way that presently we provide rheumatology services at Manor, now employees pay-rolled through RWT will deliver services on our sites. This welcome collaboration reinforces the "BCA spirit" that we launched in 2015, and which policy now aims to codify through STPs. Of course we move therefore from being the supplier to being in receipt of service, and the skills to manage those relationships will need to be forged in the coming six months. The Trust is the largest shareholder in BCP but will exercise that

position on a collaborative basis. The creation of the 'Specialist Institute' at Sandwell is an important indication that innovation and the development of new technologies is at the heart of programme.

The Board has rightly focused over recent months on mental wellbeing in our workforce. In November we will examine the outputs of that work as we look to tackle the causes of stress and also to better retain employees in work with reasonable adjustments. The launch of our **we**mind offer compliments bespoke projects like SafeCall and provides confidential support and advice both to employees and to line managers. Kate Thomas volunteering to be the Board's champion for employee mental wellbeing is going to provide an important basis for a communication campaign in October, timed to coincide with work we are doing in support of World Mental Health Day on October 10th. It is especially important that the work we do in this field includes and involves our medical staff. Notwithstanding local data, we know nationally and internationally that the work done by our medics is the source of considerable pressure and high reported rates of harms or ill-health. Respectful of national and professional bodies' efforts, we should not regard the wellbeing of staff as outside our scope, which is why we have insisted on access to our services for employees of Health Education England, who are trainee doctors to whom we have a duty of care.

3. **Our partners and commissioners**

The current recruitment figures for the new Aston Medical School are extremely encouraging at first intake. AMS is an important part of our future as an integrated care provider, and Nick Harding has been a champion for the programme and its primary care emphasis. We work collaboratively with both major city universities. A huge city like Birmingham needs a plurality of approaches and responses, and whether it is in education or service delivery, we need to be resolute in arguing for diversity and innovation (in a collaborative context) not monopoly or uniformity: That will best deliver improvement at pace.

To date the Trust is meeting the volumes and standards set out in our 18-19 contracts. There are a handful of areas where CQuin delivery is behind programme, and the delays to Unity since 2017 impact on that. New contracts and new contract forms are presently being consulted upon by NHS England, notably around integrated care, and we might also expect that the ten year plan due in November will set context of importance. December's Board development time will consider in detail the outcome of this work and set a course into 2019-20. This will be against the backdrop of development work being undertaken by the acting Director of Finance to ensure that the Trust's arrangements for contracting are fit for future purpose, and increasingly align the management of expenditure and income at directorate and Group level. This is a condition precedent for the business planning approach outlined in the draft paper being considered at today's private Board, which we will explore at October's public board.

At the time of writing it remains unclear whether in 2019-20 Dudley CCG will hold and host a contract for care locally, or whether we will migrate to potentially being invited to sub-contract via an MCP in that patch. As clarity emerges we can consider whether the terms of such a proposal are acceptable to the Trust. We recognise that some Sandwell residents have a GP in Dudley or vice versa and will look to maintain and provide services on a continuity basis.

4. **Our regulators**

As I reported last time we continue to work constructively with Health Education England to address training and supervision issues in ENT. I have asked David Carruthers to provide an oral update on service continuity in Q3 and Q4 to the Board at its meeting, in my absence. I have met with regulators to discuss ongoing ideas about oncology from April 2020 and those discussions continue.

The Trust has been interviewed for the Use of Resources assessment, which forms a part of the CQC well-led assessment. Board members will recall that the Trust is rated as Good for this domain, and we expect and hope to maintain that rating. The assessment is not fed back until the final CQC report and focused heavily on past results, specifically in 2016-17, which was the only year in the last decade when the Trust was in deficit. We have provided considerable evidence of the work done to participate in GIRFT and to work to use the Model Hospital data to drive improvements in our organisation. I am cautiously optimistic of a strong outcome form the assessment consistent with our long-term narrative that our finances provide considerable resource and we are need to make routine choices about how to spend those funds. Finance enables quality at SWB, as our investments demonstrate.

5. **Healthy Lives Partnership ICS and the Black Country and WB STP**

September's HLP ICS Board will be our second meeting. In addition to concluding discussions on governance we will consider the work needed to secure success with Midland Met as an operational high performing acute centre, supported by coherent out of hospital services regardless of postcode. That sense of wrapping services around patients is an important principle in creating the new model in Sandwell and western Birmingham. Place and plans matters, but clearly patients matter more, and we need to be certain that pathways developed with the intention of reducing unwarranted variation are delivered in a manner which is consistent and coordinated.

Our latest STP stocktake takes place at the end of September, and we have made strong progress since April. We would expect a positive assessment by NHS England on the back of the clinical strategy and the four place based plans which comprise our STP. That STP is not amenable to singular approaches, because, among other reasons, its elected representatives are organised in four local authority areas, and the join of health and local authority care is of vital significance to our patients.

Attention is drawn to the internal Team Talk team brief, for which a brief video is also issued to all employees. Ruth Wilkin is undertaking detailed work on how we ensure face to face communications as of right for all employees in our Trust including night working staff. This will be reported as an action plan for change to the October Board meeting.

I append my usual attachments. The nursing leadership for our organisation met earlier this month with the executive group to examine progress in both moving to a fully staffed position and to addressing any ongoing quality improvement priorities. This analysis, which is considered routinely in PMC, suggests that we have five areas, which are all wards on this occasion, where we have room for rapid improvement. There remain discrepant views about staffing needs in some of those areas, and daily tracking of rotas is in place. A very clear model for providing focused care has been agreed with the Chief Nurse and we will review at October's quality and safety committee provision in the next two months.

Finally, consistent with informal discussions in month, the Major Projects Authority agreed to split its work into two committees for the coming year. Our People Plan would be solely managed and governed via the People and OD committee, because whilst that connection remains, the digital and estate work we have to do is taking more time to govern that anticipated in 2016. The Board is asked to amend if need be and then approve the terms of reference annexed to my report.

Toby Lewis

Chief Executive

August 31st 2018

Annex A – Team Talk slide deck
Annex B – Clinical Leadership Executive Summary
Annex C – Recruitment scorecard
Annex D – Safe staffing summary
Annex E – Digital MPA terms of reference
Annex F – Estates MPA terms of reference

SWB TeamTalk

August 2018

Annex A

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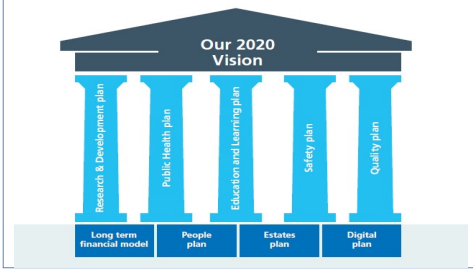
Welcome to SWB TeamTalk

Becoming renowned as the best integrated care system in the NHS…



Ruth Wilkin
Director of Communications

SWB TeamTalk

August 2018

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Team Talk Agenda

1.00pm: Tune In: Local and national news

1.10pm: Learning from Excellence: Baby Friendly Accreditation

1.25pm: What's on your mind? Worries and issues

1.40pm: Things you need to know

1.50pm: This month's topic: Making working life easier

The Chief Executive's video monthly post will be issued this week and will reflect TeamTalk feedback.

SWB TeamTalk

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August 2018 Tune in – Local and national news

QIHD poster competition – Launches during w/c 10th September to share good practice, quality initiatives and improvements, for clinical and non-clinical services, in poster format. A share of £5000 prize money is available for the best entries. Help is available from the library team and Medical Illustration. Closing date is 26th October and teams are encouraged to discuss entry options in Sept and Oct QIHDs with winners announced during November. All entries will be on display and colleagues can vote for their favourites. #welearn

wemind – new mental health support from 1st September

In September we go live with a new programme of mental health support for colleagues. This includes bespoke workshops on topics such as grief and loss, sleep and managing stress at work. A new 24/7 counselling service launches as well as an exciting new app, the Stress Free Island that allows you to assess your mental wellbeing and includes therapeutic activities to help you manage and improve your health and wellbeing. Download it from 1.09.18 at your app store – search for Feel Stress Free. You will need to use the code SWBH0001

Face to face communications audit – As part of our ongoing plans to improve engagement, managers have been asked to complete a short survey telling us how they currently communicate with their teams. The survey closes on 7 Sept. Please take a few moments to give us your feedback so we can identify what works well, where there are current gaps and what we can do to strengthen this vital communications cascade within our organisation.

Last chances! Your Voice survey closes on Friday 31 August as does **star awards voting**. Don't miss theses opportunities to have your say.

New Secretary of State for Health and Social Care outlines key priorities for the NHS

Matt Hancock has stated that his top three priorities for the NHS are: **workforce** – enabling everyone to reach their full potential with support for training and career development; technology - to make care better for patients and working lives better for staff; and, prevention – keeping patients well and at home where possible plus improved tools for self-care. Read his full speech here https://www.gov.uk/government/speeches/matt-hancock-my-priorities-for-the-health-and-social-care-system

10 year plan for the NHS

The government announced increased funding for the NHS and in return asked for the NHS to produce a 10 year plan for how the funding will be used. Work on the 10 year plan is underway with consultation with staff, patients and stakeholders.

The annual cricket match against local GPs will now take place on Sunday 2 September. Please come along and support our team from 1pm - 6pm, West Bromwich Dartmouth Cricket Club, Sandwell Park, Birmingham Road, West Bromwich, B71 4JQ.

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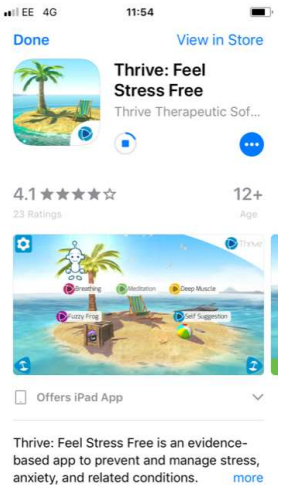
Wemind – new mental health support from 1st September

- 24/7 confidential counselling service goes live on 1 September for all colleagues - Freephone 0800 174319
- Stress free island app – search for Feel Stress Free in app stores and use SWBH0001 code to when you sign up to get your free access
- Mental health masterclasses on a range of topics including grief and loss, stress at work and sleep techniques – look on Connect for the full schedule
- On site support during September with information, help to sign up and taster sessions.
- Come to the Health and Wellbeing Day on 3rd October at City Hospital to find out more



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Welearn – QIHD poster competition

Today sees the launch of the first QIHD Poster Competition which will become an annual event in the corporate calendar and is part of our welearn programme of knowledge transfer inside our organisation.

welearn

Why?
To share good practice, quality initiatives, innovations, research and partnerships that have resulted in improvements for our patients, relatives and colleagues. To have this work celebrated and recognised with a chance to win a share of the £5,000 of prizes available to teams whose entries are judged as the very best by an esteemed panel.

How?
We are looking to see improvement projects and programmes written up and captured in a poster. Don't be put off by this because help is available. Medical Illustration will provide support to design and produce the poster and you can discuss your ideas on content with the Library services team.

Who?
Entries are encouraged and welcomed from everyone because this is an invitation to showcase good work. So if you work with patients or provide support in non-clinical areas send in your posters.

When?
The competition will be launched during week beginning 10th September 2018 when the poster templates and content guidelines will become available on Connect. Look out for the article in the September Heartbeat. Teams will be encouraged to discuss entry options at the September and October QIHDs. Closing date for poster submissions will be 26th October 2018. Posters will be displayed in the Education Centre and the foyer of Hallam Restaurant from 19th November for staff to view. They will also be posted on Connect with an opportunity for staff to vote for their favourite ideas. The winners will be announced at a Poster Exhibition at the end of November.

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August 2018

Learning from excellence:

Baby Friendly Reaccreditation

Louise Thompson: Infant Feeding Coordinator

Accredited as Baby Friendly by unicef UNITED KINGDOM

Baby Friendly
A global programme

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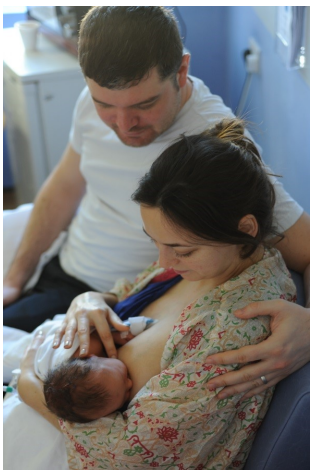

Promoting health and wellbeing for all babies

Maternity standards

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- Pregnant women are prepared
- Closeness, skin-to-skin and feeding straight after birth
- Breastfeeding off to a good start
- Informed decisions about other food for babies
- Close and loving relationships

Breastmilk

Not just about nutrition

Sandwell and West Birmingham Hospitals NHS Trust

Formula	Breastmilk
	IMMUNOGLOBULINS
	VIRAL FRAGMENTS
	WHITE CELLS
	ENZYMES
	OLIGOSACCHARIDES
	BIFIDUS FACTOR
	HORMONES
	ANTI-INFLAMMATORY
	NUCLEOTIDES
	TRANSFER FACTORS
VITAMINS & MINERALS	VITAMINS & MINERALS
FATS	FATS
CARBOHYDRATES	CARBOHYDRATES
PROTEIN	PROTEIN
WATER	WATER

Parents need <u>and</u> deserve

Sandwell and West Birmingham Hospitals NHS Trust

- ✓ Evidence based information
- ✓ Unbiased information
- ✓ Impartial information

ADVERTISING DOES NOT PROVIDE THIS

It is our responsibility as health professionals to provide evidence based information.

Prior to re-accreditation

NHS Sandwell and West Birmingham Hospitals NHS Trust

- First attained accreditation in 2015. All women interviewed by BFI had been seen by the feeding team
- Feeding team were a reactive service solving feeding problems as they arose
- Readmission <28 days continued to rise
- Limited time available for audit
- Leadership support but room for improved engagement

What did we do to improve breastfeeding outcomes?

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- Leadership engagement and BFI strategy group created
- Policies and guidance to enable consistent care
- Skilled and knowledgeable workforce
- Sensitive, reliable **face-to-face** support
- Audit and analysis of breastfeeding data to address areas of weakness
- Collaborative working with allied care providers
- Stakeholder input and feedback
- Continued implementation of the Code

Local challenges

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- Continuing the momentum!
- An increase in the number of staff who can explain why supplements should be avoided unless clinically indicated
- An increase in the number of staff who were able to discuss the International Code of Marketing of Breastmilk Substitutes
- Supplements of infant formula for breastfed babies are referred to the Designation Committee.
- Changes to provision and organisation of breastfeeding services in Sandwell and Birmingham Community
- Staffing

Any questions or ideas?

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swbh.nhs.uk where everyone matters

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August 2018

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What's on your mind?

Your opportunity to raise any issues or ask a question.

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August 2018

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Feedback from July's Q&A sessions

Time off for hospital appointments

If plenty of notice given, colleagues should be able to have leave for time off to attend hospital appointments. The Trust has a rapid access process for people who may have to wait for a referral to a different Trust, but they could be seen more quickly within our own organisation. This is accessed via occupational health.

Vacancy approval – why does the process take so long?

There is a process for vacancy approvals and reviews for external advert happen on a weekly basis. Directorates who have a balanced financial plan should have no delays in progressing for recruitment. A new process is being implemented this month with escalation for any delayed requests. Teams should also consider asking for over recruitment approval if there is clear seasonality to your hires and exits.

How will the Trust police smoking when the ban takes effect?

Our anti-smoking approach from 5th July 2019 means that there will be no smoking on any of our sites from that date. Through the public health committee we are working on how we best prepare for this implementation including supporting smokers to quite ahead of the smoke free date and how we enforce our approach.

Where will the two new car parks at Sandwell and City be located? Will there be an increase in charges?

The Board have approved our plans to progress with new multi-storey car parks on part of our existing parking areas at Sandwell and City Hospitals. The detailed plans will be subject to planning consent and we will work with a developer following a procurement exercise and together determine the precise location, size and scope of the additional facilities. We retain control over the charges applied by the car parks.

When will the SWBH Benefits electronic purchase offers be available again?

There are two windows for the home technology scheme per year, one in spring (April-May) and the other one in autumn (October – November). The next window should run from the start of October until mid to end of November.

swbh.nhs.uk where everyone matters

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August 2018

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Things you need to know – from our Clinical Leadership Executive

Completing Midland Met: The government have accepted the Trust Board's recommendation that the project should now be completed on a public finance basis. This means that central monies will be provided to us to finish the construction. We will shortly go to the market to find a contractor to complete the work. We would expect to issue that tender in early November with completion in 2022. In a few weeks' time we expect to confirm a contractor to undertake some remedial work on the site this winter and into next spring.

Sorting out our IT: A major plan of work has been agreed by the Board to try and reduce lost time due to IT problems. The details of the plan were outlined in the Chief Executive's Friday message of August 17th. The first stage of the plan is functioning WiFi during September. The next step is a complete reconfiguration of our network during October. Unity will only go live when we are convinced that the IT is stable enough to consistently well. However, Unity training continues and everyone needs to get booked in before the month ends.

Annual CQC inspection: We are expecting to be inspected during September, and employee focus groups start w/b September 3rd. These are a chance to highlight good work and raise concerns. Please get involved. When the inspections do occur please ensure that you maintain patient confidentiality and data security, whilst giving the inspection teams chance to see what you do and the improvements made since 2017. A good rating would open up some freedoms and funding to the Trust that our current rating inhibits.

Sepsis: Sepsis remains our number 1 quality priority and we believe that 50 lives a year could be saved by better practice Trust-wide. The sepsis screening trigger has been added to the Safety Plan checklist, and daily reports are now issued to clinical leaders where we believe that a trigger may have been missed. During September and October we want to step up the campaign inside our organisation to get this right. If you have ideas and suggestions, or concerns, please contact David Carruthers, our medical director.

SWB TeamTalk

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July TeamTalk Topic feedback – Improving colleague engagement

Your Voice closes on August 31st. The next Trust-wide and national staff surveys go out in October.

Research shows that organisations with high levels of employee engagement are more **efficient and effective**, and that highly engaged employees bring many positives to a workplace including more **client focus**, **creativity** and **less time off work**. An engaged workforce has also shown to put **greater effort** in their work to achieve the objectives of an organisation. One of the ways we measure engagement is through responses to the national staff survey and Your Voice. We want to make sure these surveys are well responded to, so that feedback can be acted on.

Your feedback told us:

- Managers should ensure that staff have time and resources allocated to be able to take part in surveys. Where IT is limited, alternatives methods should be available.
- Regular meetings should be held to encourage discussions and development, not simply held in response to problems.
- Feedback should be acted upon and discussions kept open, honest and inclusive for all colleagues.
- Anonymous surveys should be handled sensitively to ensure feedback from smaller teams is not identifiable

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TeamTalk Topic – August 2018

Last month we asked your views on colleague engagement. It is clear from the feedback that there are some daily frustrations that get in the way of your ability to do a great job at work and how you feel about your role and our organisation. In coming weeks we launch our engagement programme for the next two years – called **we**connect. This aims to raise engagement in all our directorates to the level of our current best performers.

Part of that programme is about making working at the Trust easier, by doing some simple things well. Below are ten things that we are working on in the next six months, but we want to know what your top three priorities are – and whether you have suggestions about what would help. Please feedback in the normal way or post individual responses to the Comms team in Trinity House.

Simple things well: Top10 staff suggestions

1. More flexible working approaches	6. The vacancy process being too slow
2. Improved communication about change	7. The right uniform to do my job
3. Raising concerns being simpler	8. Getting equipment fixed quickly
4. More printers and computers	9. Guaranteed car parking
5. IT that works every day	10. Improved personal security at work

Sandwell and West Birmingham Hospitals NHS
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CLINICAL LEADERSHIP EXECUTIVE: SUMMARY NOTE	
Date	29th August 2018
Attendees	Group Triumvirates, Executive Group and Staff Convenor
Key points of discussion relevant to the Board	• A frank discussion about IT risks, consequences and remedial actions • A review of the detailed improvement/action plan for emergency departments led by the Chief Operating Officer. • Pathology services – a forward plan was provided on the overview of the management of services from the group that are not migrating to BCP. • A presentation on the current success and progress for research and development activity across the Trust. • Guidance on the forthcoming CQC inspection (autumn 2018).
Positive highlights of note	• Funding received to re-commence construction of Midland Metropolitan Hospital. • Achievement of the "Employer with Heart Charter" award. • Living Wage Accreditation has been received (first in West Midlands to achieve this standard). • New laser equipment successfully implemented in Urology Department following an initial trial period. • Implementation of successful/innovative treatment for child hayfever. • New 24/7 staff mental health support service "WEmind" launched with a free app.
Matters presented for information or noting	• The monthly review of integrated quality and performance report, trust risk register and the financial performance report.
Decisions made	• n/a
Matters of concern or key risks to escalate to the Board	• Maintaining focus / meeting timelines to improve IT infrastructure.

Toby Lewis, Chief Executive
Chair of the Clinical Leadership Executive
For the meeting of the Trust Board scheduled for 6th September 2018

Recruitment Activity Report

ANNEX C

Report Date: 21/08/2018

Criteria			Measure/Month	Actual						Forecast						Target	
				Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19		
Band 5 Nurses (excluding Theatre Practitioners)	SIP	FTE	Establishment		768.26	771.89	775.27	774.27	768.42	768.42	768.42	768.42	768.42	768.42	768.42		
		FTE	FTE In Post		642.76	642.62	642.38	630.33	622.76	616.35	645.34	674.33	678.32	674.06	708.05		
		FTE	New Starters		5.00	6.72	5.97	2.72	6.17	4.60	40.00	40.00	15.00	6.75	45.00		
		FTE	Leavers		11.01	11.61	1.53	11.03	4.56	11.01	11.01	11.01	11.01	11.01	11.01		
		FTE	Vacancies in month		125.50	129.27	132.89	143.94	145.66	152.07	123.08	94.09	90.10	94.36	60.37	88.33	----- Over Target
	Offers External Applicants	FTE	Conditional offers (in month)		31.26	20.24	6.92	35.00	25.60	10.00	15.00	44.00	15.00	15.00	10.00		
		FTE	Offers Confirmed (in month)		7.67	16.60	10.20	10.20	12.92	11.17	10.69	10.69	10.69	10.69	10.69		
Band 5 Community Nurses	SIP	FTE	Establishment	165.47	156.47	156.47	161.47	156.47	156.47	156.47	156.47	156.47	156.47	156.47	156.47		
		FTE	FTE In Post	143.26	140.35	141.10	144.07	140.07	137.66	137.09	144.52	143.95	143.38	142.81	146.24		
		FTE	New Starters	0.00	0.00	0.00	1.60	0.00	1.80	0.00	8.00	0.00	0.00	0.00	4.00		
		FTE	Leavers	0.61	0.00	0.53	1.51	0.61	0.00	0.57	0.57	0.57	0.57	0.57	0.57		
		FTE	Vacancies in month	22.21	16.12	15.37	17.40	16.40	18.81	19.38	11.95	12.52	13.09	13.66	10.23	31.73	----- Target Met
	Offers External Applicants	FTE	Conditional offers (in month)	0.00	0.60	1.80	0.60	3.00	6.00	1.00	1.00	1.00	1.00	1.00	1.00		
		FTE	Offers Confirmed (in month)	0.00	0.00	0.60	4.00	0.30	0.00	0.15	0.15	0.15	0.15	0.15	0.15		
Band 5 Nursing (Total)	SIP	FTE	Establishment		924.73	928.36	936.74	930.74	924.89	924.89	924.89	924.89	924.89	924.89	924.89		
		FTE	FTE In Post		783.11	783.72	786.45	770.40	760.42	753.44	789.86	818.28	821.70	816.87	854.29		
		FTE	New Starters		5.00	6.72	7.57	2.72	7.97	4.60	48.00	40.00	15.00	6.75	49.00		
		FTE	Leavers		11.01	12.14	3.04	11.64	4.56	11.58	11.58	11.58	11.58	11.58	11.58		
		FTE	Vacancies in month		141.62	144.64	150.29	160.34	164.47	171.45	135.03	106.61	103.19	108.02	70.60	120.06	----- Over Target
	Offers External Applicants	FTE	Conditional offers (in month)		31.86	22.04	7.52	38.00	31.60	11.00	16.00	45.00	16.00	16.00	11.00		
		FTE	Offers Confirmed (in month)		7.67	17.20	14.20	10.50	12.92	11.32	10.84	10.84	10.84	10.84	10.84		
Band 6 Nurses (excluding Theatre Practitioners)	SIP	FTE	Establishment		388.74	383.34	382.61	386.21	386.31	386.31	386.31	386.31	386.31	386.31	386.31		
		FTE	FTE In Post		366.38	355.26	358.03	365.29	363.69	362.29	361.38	360.46	359.55	358.63	357.72		
		FTE	New Starters		2.82	0.43	3.61	0.00	6.40	1.85	2.34	2.34	2.34	2.34	2.34		
		FTE	Leavers		3.25	9.48	2.60	2.60	4.99	3.25	3.25	3.25	3.25	3.25	3.25		
		FTE	Vacancies in month		22.36	28.08	24.58	20.92	22.62	24.02	24.94	25.85	26.77	27.68	28.60	34.05	----- Target Met
	Offers External/Internal Applicants	FTE	Conditional offers (in month)		5.00	1.61	6.16	5.00	8.60	0.20	5.00	5.00	5.00	5.00	5.00		
		FTE	Offers Confirmed (in month)		9.82	2.00	3.00	3.00	7.25	2.00	3.00	3.00	3.00	3.00	3.00		
Band 6 Community Nurses	SIP	FTE	Establishment	150.15	145.95	145.95	145.95	145.95	145.95	145.95	145.95	145.95	145.95	145.95	145.95		
		FTE	FTE In Post	139.91	137.15	137.15	136.29	134.29	133.57	132.92	132.27	131.62	130.97	130.32	129.67		
		FTE	New Starters	0.00	1.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00		
		FTE	Leavers	0.70	0.00	0.00	0.60	2.00	1.19	0.65	0.65	0.65	0.65	0.65	0.65		
		FTE	Vacancies in month	10.24	8.80	8.80	9.66	11.66	12.38	13.03	13.68	14.33	14.98	15.63	16.28	9.61	----- Over Target
	Offers External Applicants	FTE	Conditional offers (in month)	0.00	0.00	1.00	3.00	0.50	0.76	0.00	0.50	0.50	0.50	0.50	0.50		
		FTE	Offers Confirmed (in month)	0.00	0.00	0.00	0.00	0.00	2.00	1.00	0.00	0.00	0.00	0.00	0.00		
Band 6 Nursing (Total)	SIP	FTE	Establishment		534.69	529.29	528.56	532.16	532.26	532.26	532.26	532.26	532.26	532.26	532.26		
		FTE	FTE In Post		503.53	492.41	494.32	499.58	497.26	495.21	493.65	492.08	490.52	488.95	487.39		
		FTE	New Starters		3.82	0.43	3.61	0.00	7.40	1.85	2.34	2.34	2.34	2.34	2.34		
		FTE	Leavers		3.25	9.48	3.20	4.60	6.18	3.90	3.90	3.90	3.90	3.90	3.90		
		FTE	Vacancies in month		31.16	36.88	34.24	32.58	35.00	37.05	38.62	40.18	41.75	43.31	44.88	43.66	----- Target Met
	Offers External Applicants	FTE	Conditional offers (in month)		5.00	2.61	9.16	5.50	9.36	0.20	5.50	5.50	5.50	5.50	5.50		
		FTE	Offers Confirmed (in month)		9.82	2.00	3.00	3.00	9.25	3.00	3.00	3.00	3.00	3.00	3.00		
Band 5 & 6 Midwives	SIP	FTE	Establishment	192.39	192.39	192.39	186.19	186.19	186.19	186.19	186.19	186.19	186.19	186.19	186.19		
		FTE	FTE In Post	162.67	158.47	156.07	156.19	156.83	154.21	153.31	154.41	153.51	152.61	151.71	150.81		
		FTE	New Starters	0.00	0.00	1.43	1.34	0.00	0.00	0.00	2.00	0.00	0.00	0.00	0.00		
		FTE	Leavers	1.20	2.92	3.84	0.00	0.00	0.60	0.90	0.90	0.90	0.90	0.90	0.90		
		FTE	Vacancies in month	29.72	33.92	36.32	30.00	29.36	31.98	32.88	31.78	32.68	33.58	34.48	35.38	26.64	----- Over Target
	Offers External/Internal Applicants	FTE	Conditional offers (in month)	0.00	0.00	0.00	0.00	2.00	2.00	12.52	0.00	0.00	0.00	0.00	0.00		
		FTE	Offers Confirmed (in month)	0.00	0.92	0.42	0.42	0.42	0.00	0.00	0.42	0.42	0.42	0.42	0.42		
Consultants	SIP	FTE	Establishment	320.10	321.10	322.10	319.28	320.73	321.68	321.68	321.68	321.68	321.68	321.68	321.68		
		FTE	FTE In Post	287.65	283.80	282.65	282.70	282.02	279.32	283.77	284.22	284.67	285.12	285.57	286.02		
		FTE	New Starters	0.00	3.00	1.00	1.00	2.00	2.00	6.00	2.00	2.00	2.00	2.00	2.00		
		FTE	Leavers	2.90	3.90	0.50	0.90	2.20	0.00	1.55	1.55	1.55	1.55	1.55	1.55		
		FTE	Vacancies in month	32.45	37.30	39.45	36.58	38.71	42.36	37.91	37.46	37.01	36.56	36.11	35.66	33.36	----- Over Target
	Offers External Applicants	FTE	Conditional offers (in month)	0.00	4.00	0.00	2.00	1.00	3.00	4.00	2.00	2.00	2.00	2.00	2.00		
		FTE	Offers Confirmed (in month)	0.00	3.00	0.00	0.00	0.00	5.00	0.00	0.00	0.00	0.00	0.00	0.00		
Specialty Registrars (including Junior Specialist Doctors)	SIP	FTE	Establishment		311.00	311.00	311.00	311.00	311.00	311.00	311.00	311.00	311.00	311.00	311.00		
		FTE	FTE In Post		257.00	258.00	258.00	258.00	258.00	263.00	263.00	263.00	263.00	263.00	263.00		
		FTE	New Starters		0.00	7.00	8.00	7.00	1.70	209.00	26.00	14.00	5.00	1.00	0.00		
		FTE	Leavers		10.71	6.00	11.00	3.68	76.00	204.00	26.00	14.00	5.00	1.00	0.00		
		FTE	Vacancies in month		54.00	54.00	53.00	53.00	53.00	48.00	48.00	48.00	48.00	48.00	48.00	36.00	----- Over Target
	Offers External Applicants	FTE	Conditional offers (in month)	0.00	0.00	0.00	3.00	62.00	43.00	9.00	3.00	3.00	3.00	3.00	3.00		
		FTE	Offers Confirmed (in month)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		

Notes:

Staff in post this includes staff in post as at the first of the month

New starters Actual - : This includes all agreed start dates from the first of the month

New starters forecast: Based on average number of new recruits due to recruitment campaigns and number of student nurses likely to accept offers.

Leavers -: Figures based on terminations received into ESR and assuming that managers are submitting termination data in a timely fashion.

Leavers: With the exception of band 5 staff nurses and midwives, the leaver figure is based on the WTE leaving the organisation. For band 5 staff nurses/midwives, this also includes the WTE moving internally to take into account the impact of internal promotion.

Turnover forecast: Based on average for the staff group/band over the previous year.

Band 5 Nurses: Report includes data on band 5 nursing posts within the Trust with the exception of midwives. Reporting on external recruitment activity i.e. activity that improves vacancy bottom line given this is an entry level post.

Band 6 Nurses: Figures include all band 6 nurses i.e. charge nurses, sisters, community practitioners with the exclusion of midwives

Specialty Registrars (including Junior Specialist Doctors): Includes all approved doctors in training posts except foundation Y1 and Y2 doctors. It also includes GPSTs that are being trained at SWBH but employed by lead employer (St Helens)

Data source: ESR, Recruitment data base and Medical Staffing Database

Nurse Fill Rate' (Safer Staffing) data for Jul 2018

ANNEX D

Ward name	Main 2 Specialties on each ward	Main 2 Specialties on each ward	Day	Day	Day	Day	Night	Night	Night	Night	Day	Day	Night	Night	Care Hours Per Patient Day (CHPPD)				Note
			Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff										
	Specialty 1	Specialty 2	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Cumulative count over the month of patients at 23:59 each day	Registered midwives/ nurses	Care Staff	Overall	
Critical Care - Sandwell	192 - CRITICAL CARE MEDICINE		2784	2886	342	306	2552	2607	0	44	103.7%	89.5%	102.2%	#DIV/0!	246	22.3	1.4	23.8	
AMU A - Sandwell	300 - GENERAL MEDICINE	320 - CARDIOLOGY	3450	3283	1380	1506	3243	3323	1380	1426	95.2%	109.1%	102.5%	103.3%	1206	5.5	2.4	7.9	
Lyndon 1 - Paediatrics	420 - PAEDIATRICS	110 - TRAUMA & ORTHOPAEDICS	558	546	372	231	1012	979	341	352	97.8%	62.1%	96.7%	103.2%	336	4.5	1.7	6.3	
Lyndon 2 - Surgery	100 - GENERAL SURGERY	110 - TRAUMA & ORTHOPAEDICS	1426	1345	1017	983	1012	1012	713	747	94.3%	96.7%	100.0%	104.8%	685	3.4	2.5	6.0	
Lyndon 3 - T&O/Stepdown	110 - TRAUMA & ORTHOPAEDICS	160 - PLASTIC SURGERY	1426	1391	1426	1587	1069	1069	1426	1621	97.5%	111.3%	100.0%	113.7%	796	3.1	4.0	7.1	
Lyndon 4	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1725	1489	1725	1506	1380	1311	1725	1299	86.3%	87.3%	95.0%	75.3%	804	3.5	3.5	7.0	
Lyndon 5 - Acute Medicine	100 - GENERAL SURGERY	300 - GENERAL MEDICINE	1610	1242	1610	1224	1288	1276	1610	1058	77.1%	76.0%	99.1%	65.7%	739	3.4	3.1	6.5	
Lyndon Ground - PAU/Adolescents	420 - PAEDIATRICS	110 - TRAUMA & ORTHOPAEDICS	1116	1116	372	342	1023	913	341	297	100.0%	91.9%	89.2%	87.1%	323	6.3	2.0	8.3	
Older Persons Assessment Unit (OPAU) -	430 - GERIATRIC MEDICINE		1380	1339	1035	1104	1035	1035	1035	1207	97.0%	106.7%	100.0%	116.6%	554	4.3	4.2	8.5	
Newton 3 - T&O	110 - TRAUMA & ORTHOPAEDICS	430 - GERIATRIC MEDICINE	1782	1679	1437	1552	1242	1190	1437	1702	94.2%	108.0%	95.8%	118.4%	837	3.4	3.9	7.3	
Newton 4 - Stepdown/Stroke/Neurology	314 - REHABILITATION	300 - GENERAL MEDICINE	1380	1288	1035	1023	1380	1357	1035	1023	93.3%	98.8%	98.3%	98.8%	866	3.1	2.4	5.4	
Newton 5 - Haematology	304 - CLINICAL PHYSIOLOGY	300 - GENERAL MEDICINE	690	713	345	333	690	678	345	345	103.3%	96.5%	98.3%	100.0%	294	4.7	2.3	7.0	
Priory 2 - Colorectal/General Surgery	100 - GENERAL SURGERY		1782	1713	1069	1012	1426	1426	1069	1092	96.1%	94.7%	100.0%	102.2%	717	4.4	2.9	7.3	
Priory 4 - Stroke/Neurology	300 - GENERAL MEDICINE	400 - NEUROLOGY	2070	1811	1035	1213	1725	1656	1035	1460	87.5%	117.2%	96.0%	141.1%	670	5.2	4.0	9.2	
Priory 5 - Gastro/Resp	340 - RESPIRATORY MEDICINE	301 - GASTROENTEROLOGY	1380	1339	1035	1040	1035	1322	690	1035	97.0%	100.5%	127.7%	150.0%	908	2.9	2.3	5.2	
SAU - Sandwell	100 - GENERAL SURGERY	110 - TRAUMA & ORTHOPAEDICS	1426	1437	713	621	1426	1460	356	345	100.8%	87.1%	102.4%	96.9%	491	5.9	2.0	7.9	
CCS - Critical Care Services - City	192 - CRITICAL CARE MEDICINE		2976	2796	372	348	2728	2607	0	0	94.0%	93.5%	95.6%	#DIV/0!	177	30.5	2.0	32.5	
D5/D7 - Cardiology (Female)	320 - CARDIOLOGY	300 - GENERAL MEDICINE	3450	3312	690	695	2760	2875	0	0	96.0%	100.7%	104.2%	#DIV/0!	755	8.2	0.9	9.1	
D11 - Male Older Adult	430 - GERIATRIC MEDICINE		1035	1029	1035	1023	1035	782	690	885	99.4%	98.8%	75.6%	128.3%	524	3.5	3.6	7.1	
D15 - Gastro/Resp/Haem (Male)	340 - RESPIRATORY MEDICINE	301 - GASTROENTEROLOGY	1035	1029	1035	695	1035	759	690	632	99.4%	67.1%	73.3%	91.6%	436	4.1	3.0	7.1	
D16 - (Female)	301 - GASTROENTEROLOGY	340 - RESPIRATORY MEDICINE	1035	822	1035	730	1035	713	690	598	79.4%	70.5%	68.9%	86.7%	448	3.4	3.0	6.4	
D19 - Paediatric Medicine	420 - PAEDIATRICS	120 - ENT	744	744	372	288	682	682	0	0	100.0%	77.4%	100.0%	#DIV/0!	224	6.4	1.3	7.7	
D25	101 - UROLOGY	120 - ENT									#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		#DIV/0!	#DIV/0!	#DIV/0!	From Donna James : FSW
D26 - Female Older Adult	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1035	1035	1035	1029	1035	1035	690	701	100.0%	99.4%	100.0%	101.6%	604	3.4	2.9	6.3	
D27 - City Surgical Unit (CSU)	101 - UROLOGY	120 - ENT	1736	1667	966	971	1230	1184	713	690	96.0%	100.5%	96.3%	96.8%	441	6.5	3.8	10.2	From Donna James : D21
D43 - Community RTG	318- INTERMEDIATE CARE	430 - GERIATRIC MEDICINE	1426	1219	1383	1374	1069	1058	1069	1046	85.5%	99.3%	99.0%	97.8%	781	2.9	3.1	6.0	
D47 - Geriatric MEDICAL	430 - GERIATRIC MEDICINE		724	764	1426	1380	713	678	713	713	105.5%	96.8%	95.1%	100.0%	549	2.6	3.8	6.4	
D17 (Gynae Ward)	502 - GYNAECOLOGY		579	552	411	354	744	744	372	372	95.3%	86.1%	100.0%	100.0%	383	3.4	1.9	5.3	From Tracy Weston : D17
Labour Ward - City	501 - OBSTETRICS		3921	3193	713	569	3921	3013	713	586	81.4%	79.8%	76.8%	82.2%	341	18.2	3.4	21.6	
City Maternity - M1	501 - OBSTETRICS	424- WELL BABIES	1069	1046	663	661	1069	920	356	333	97.8%	99.7%	86.1%	93.5%	507	3.9	2.0	5.8	
City Maternity - M2	501 - OBSTETRICS	424- WELL BABIES	1069	908	663	701	1069	816	356	356	84.9%	105.7%	76.3%	100.0%	493	3.5	2.1	5.6	
AMU 1 - City	300 - GENERAL MEDICINE	320 - CARDIOLOGY	4140	3990	1725	1719	4140	3852	1725	1782	96.4%	99.7%	93.0%	103.3%	1380	5.7	2.5	8.2	
Neonatal	422- NEONATOLOGY		2495	2876	713	419	2495	2289	743	467	115.3%	58.8%	91.7%	62.9%	754	6.9	1.2	8.0	
Serenity Birth Centre - City	501 - OBSTETRICS		1069	1132	713	373	1069	1104	356	598	105.9%	52.3%	103.3%	168.0%	46	48.6	21.1	69.7	
Ophthalmology Main Ward - City	130 - OPHTHALMOLOGY	180 - ACCIDENT & EMERGENCY	281	277	217	206	536	499	0	37	98.6%	94.9%	93.1%	#DIV/0!	166	4.7	1.5	6.1	
Eliza Tinsley Ward - Community RTG	318- INTERMEDIATE CARE	300 - GENERAL MEDICINE	1069	914	1426	1328	713	724	1069	1058	85.5%	93.1%	101.5%	99.0%	684	2.4	3.5	5.9	
Henderson	318- INTERMEDIATE CARE		1069	971	1552	1408	713	690	1069	1023	90.8%	90.7%	96.8%	95.7%	653	2.5	3.7	6.3	
Leasowes	318- INTERMEDIATE CARE		1116	1104	1248	1242	744	744	744	744	98.9%	99.5%	100.0%	100.0%	545	3.4	3.6	7.0	
MCCarthy	318- INTERMEDIATE CARE		713	707	1069	1063	713	701	713	690	99.2%	99.4%	98.3%	96.8%	488	2.9	3.6	6.5	
	Trust Totals		**59771**	**56704**	**36410**	**34159**	**53786**	**51083**	**28009**	**28364**	**94.9%**	**93.8%**	**95.0%**	**101.3%**	**21851**	**4.9**	**2.9**	**7.8**	

Safe Staffing (Rota Fill Rates and CHPPD) Collection

Organisation: RXK **Sandwell And West Birmingham Hospitals NHS Trust**

Please provide the URL to the page on your trust website where your staffing information is available

(Please can you ensure that the URL you attach to the spreadsheet is correct and links to the correct web page and include 'http://' in your URL)

https://www.swbh.nhs.uk/

Only complete sites your organisation is accountable for

Hospital Site Details			Main 2 Specialties on each ward		Day				Night				Day	
					Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff			
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name	Ward name	Specialty 1	Specialty 2	Total monthly planned staff	Total monthly actual staff	Total monthly planned staff	Total monthly actual staff	Total monthly planned staff	Total monthly actual staff	Total monthly planned staff	Total monthly actual staff	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Critical Care - Sandwell	192 - CRITICAL CARE MEDICINE		2784	2886	342	306	2552	2607	0	44	103.7%	89.5%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	AMU A - Sandwell	300 - GENERAL MEDICINE	320 - CARDIOLOGY	3450	3283	1380	1506	3243	3323	1380	1426	95.2%	109.1%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Lyndon 1 - Paediatrics	420 - PAEDIATRICS	110 - TRAUMA & ORTHOPA	558	546	372	231	1012	979	341	352	97.8%	62.1%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Lyndon 2 - Surgery	100 - GENERAL SURGERY	110 - TRAUMA & ORTHOPA	1426	1345	1017	983	1012	1012	713	747	94.3%	96.7%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Lyndon 3 - T&O/Stepdown	110 - TRAUMA & ORTHOPA	160 - PLASTIC SURGERY	1426	1391	1426	1587	1069	1069	1426	1621	97.5%	111.3%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Lyndon 4	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1725	1489	1725	1506	1380	1311	1725	1299	86.3%	87.3%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Lyndon 5 - Acute Medicine	100 - GENERAL SURGERY	300 - GENERAL MEDICINE	1610	1242	1610	1224	1288	1276	1610	1058	77.1%	76.0%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Lyndon Ground - PAU/Adoles	420 - PAEDIATRICS	110 - TRAUMA & ORTHOPA	1116	1116	372	342	1023	913	341	297	100.0%	91.9%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Older Persons Assessment U	430 - GERIATRIC MEDICINE		1380	1339	1035	1104	1035	1035	1035	1207	97.0%	106.7%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Newton 3 - T&O	110 - TRAUMA & ORTHOPA	430 - GERIATRIC MEDICINE	1782	1679	1437	1552	1242	1190	1437	1702	94.2%	108.0%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Newton 4 - Stepdown/Stroke/	314 - REHABILITATION	300 - GENERAL MEDICINE	1380	1288	1035	1023	1380	1357	1035	1023	93.3%	98.8%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Newton 5 - Haematology	304 - CLINICAL PHYSIOLOG	300 - GENERAL MEDICINE	690	713	345	333	690	678	345	345	103.3%	96.5%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Priory 2 - Colorectal/General	100 - GENERAL SURGERY		1782	1713	1069	1012	1426	1426	1069	1092	96.1%	94.7%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Priory 4 - Stroke/Neurology	300 - GENERAL MEDICINE	400 - NEUROLOGY	2070	1811	1035	1213	1725	1656	1035	1460	87.5%	117.2%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	Priory 5 - Gastro/Resp	340 - RESPIRATORY MEDI	301 - GASTROENTEROLOG	1380	1339	1035	1040	1035	1322	690	1035	97.0%	100.5%
RXK01	SANDWELL GENERAL HOSPITAL - RXK01	SAU - Sandwell	100 - GENERAL SURGERY	110 - TRAUMA & ORTHOPA	1426	1437	713	621	1426	1460	356	345	100.8%	87.1%
RXK02	CITY HOSPITAL - RXK02	CCS - Critical Care Services	192 - CRITICAL CARE MEDICINE		2976	2796	372	348	2728	2607	0	0	94.0%	93.5%
RXK02	CITY HOSPITAL - RXK02	D5/D7 - Cardiology (Female)	320 - CARDIOLOGY	300 - GENERAL MEDICINE	3450	3312	690	695	2760	2875	0	0	96.0%	100.7%
RXK02	CITY HOSPITAL - RXK02	D11 - Male Older Adult	430 - GERIATRIC MEDICINE		1035	1029	1035	1023	1035	782	690	885	99.4%	98.8%
RXK02	CITY HOSPITAL - RXK02	D15 - Gastro/Resp/Haem (M	340 - RESPIRATORY MEDI	301 - GASTROENTEROLOG	1035	1029	1035	695	1035	759	690	632	99.4%	67.1%
RXK02	CITY HOSPITAL - RXK02	D16 - (Female)	301 - GASTROENTEROLOG	340 - RESPIRATORY MEDIC	1035	822	1035	730	1035	713	690	598	79.4%	70.5%
RXK02	CITY HOSPITAL - RXK02	D19 - Paediatric Medicine	420 - PAEDIATRICS	120 - ENT	744	744	372	288	682	682	0	0	100.0%	77.4%
RXK02	CITY HOSPITAL - RXK02	D26 - Female Older Adult	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1035	1035	1035	1029	1035	1035	690	701	100.0%	99.4%
RXK02	CITY HOSPITAL - RXK02	D27 - City Surgical Unit (CSU	101 - UROLOGY	120 - ENT	1736	1667	966	971	1230	1184	713	690	96.0%	100.5%
RXK02	CITY HOSPITAL - RXK02	D43 - Community RTG	318 - INTERMEDIATE CARE	430 - GERIATRIC MEDICINE	1426	1219	1383	1374	1069	1058	1069	1046	85.5%	99.3%
RXK02	CITY HOSPITAL - RXK02	D47 - Geriatric MEDICAL	430 - GERIATRIC MEDICINE		724	764	1426	1380	713	678	713	713	105.5%	96.8%
RXK02	CITY HOSPITAL - RXK02	D17 (Gynae Ward)	502 - GYNAECOLOGY		579	552	411	354	744	744	372	372	95.3%	86.1%
RXK02	CITY HOSPITAL - RXK02	Labour Ward - City	501 - OBSTETRICS		3921	3193	713	569	3921	3013	713	586	81.4%	79.8%
RXK02	CITY HOSPITAL - RXK02	City Maternity - M1	501 - OBSTETRICS	424 - WELL BABIES	1069	1046	663	661	1069	920	356	333	97.8%	99.7%
RXK02	CITY HOSPITAL - RXK02	City Maternity - M2	501 - OBSTETRICS	424 - WELL BABIES	1069	908	663	701	1069	816	356	356	84.9%	105.7%
RXK02	CITY HOSPITAL - RXK02	AMU 1 - City	300 - GENERAL MEDICINE	320 - CARDIOLOGY	4140	3990	1725	1719	4140	3852	1725	1782	96.4%	99.7%
RXK02	CITY HOSPITAL - RXK02	Neonatal	422 - NEONATOLOGY		2495	2876	713	419	2495	2289	743	467	115.3%	58.8%
RXK02	CITY HOSPITAL - RXK02	Serenity Birth Centre - City	501 - OBSTETRICS		1069	1132	713	373	1069	1104	356	598	105.9%	52.3%
RXK03	IINGHAM MIDLAND EYE CENTRE (BMEC) - I	Ophthalmology Main Ward - C	130 - OPHTHALMOLOGY	180 - ACCIDENT & EMERGE	281	277	217	206	536	499	0	37	98.6%	94.9%
RXK10	ROWLEY REGIS HOSPITAL - RXK10	Eliza Tinsley Ward - Commun	318 - INTERMEDIATE CARE	300 - GENERAL MEDICINE	1069	914	1426	1328	713	724	1069	1058	85.5%	93.1%
RXK10	ROWLEY REGIS HOSPITAL - RXK10	Henderson	318 - INTERMEDIATE CARE		1069	971	1552	1408	713	690	1069	1023	90.8%	90.7%
RXK10	ROWLEY REGIS HOSPITAL - RXK10	Leasowes	318 - INTERMEDIATE CARE		1116	1104	1248	1242	744	744	744	744	98.9%	99.5%
RXK10	ROWLEY REGIS HOSPITAL - RXK10	MCCarthy	318 - INTERMEDIATE CARE		713	707	1069	1063	713	701	713	690	99.2%	99.4%
		Total			59771	56704	36410	34159	53786	51083	28009	28364		

Safe Staffing Return Summary

Month	Site Code	Site Name	Day – Registered midwives/nurses – Total monthly planned staff hours	Day – Registered midwives/nurses – Total monthly actual staff hours	Day – Care Staff – Total monthly planned staff hours	Day – Care Staff – Total monthly actual staff hours	Night – Registered midwives/nurses – Total monthly planned staff hours	Night – Registered midwives/nurses – Total monthly actual staff hours	Night – Care Staff – Total monthly planned staff hours	Night – Care Staff – Total monthly actual staff hours	Day – Average fill rate - registered nurses/midwives	Day – Average fill rate - care staff (%	Night – Average fill rate - registered nurses/midwives	Night – Average fill rate - care staff (%	Care Hours Per Patient Day (CHPPD) – Cumulative count over the month of patients at 23:59 each day	CHPPD – Registered midwives/ nurses	CHPPD – Care Staff	CHPPD – Overall
Jul-14	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2138	2330	526	527	414	500	0	18	109.0%	100.2%	120.8%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	25676	27032	15249	16705	14064	17337	6905	8503	105.3%	109.5%	123.3%	123.1%				
	RXK10	ROWLEY REGIS HOSPITAL	2826	3265	4417	4556	1243	1985	1788	2085	115.5%	103.2%	159.7%	116.6%				
	RXK01	SANDWELL GENERAL HOSPITAL	30666	32776	19123	22015	15612	18588	8817	13232	106.9%	115.1%	119.1%	150.1%				
	Total		61305	65403	39314	43803	31332	38409	17510	23837	106.7%	111.4%	122.6%	136.1%				
Aug-14	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	1839	1807	497	475	472	560	0	28	98.3%	95.6%	118.7%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	24155	24753	13808	14687	13967	16362	6858	8233	102.5%	106.4%	117.2%	120.0%				
	RXK10	ROWLEY REGIS HOSPITAL	2964	3200	3816	3937	1176	1794	1553	1860	107.9%	103.2%	152.6%	119.8%				
	RXK01	SANDWELL GENERAL HOSPITAL	28245	29172	16759	19191	14679	16520	7932	11384	103.3%	114.5%	112.5%	143.5%				
	Total		57202	58932	34879	38290	30293	35236	16343	21505	103.0%	109.8%	116.3%	131.6%				
Sep-14	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2137	2080	454	475	472	532	0	119	97.3%	104.5%	112.8%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	24208	27604	14308	17278	13993	20283	6794	10406	114.0%	120.8%	144.9%	153.2%				
	RXK10	ROWLEY REGIS HOSPITAL	1274	1472	1216	1382	403	1185	587	756	115.5%	113.6%	294.4%	128.9%				
	RXK01	SANDWELL GENERAL HOSPITAL	27883	32528	16822	23743	14654	20124	7392	15185	116.7%	141.1%	137.3%	205.4%				
	Total		55501	63684	32800	42877	29521	42124	14773	26466	114.7%	130.7%	142.7%	179.2%				
Oct-14	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2199	2139.92	546.75	548.5	434.75	519	0	28	97.3%	100.3%	119.4%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	25273	27384.5	14779.5	15814.4	14038.5	16711.1	6797	8913.5	108.4%	107.0%	119.0%	131.1%				
	RXK10	ROWLEY REGIS HOSPITAL	3308	3480.07	3886.5	4283.25	1230	1876.5	1590	2006	105.2%	110.2%	152.6%	126.2%				
	RXK01	SANDWELL GENERAL HOSPITAL	31768.25	33296.8	19265.2	21818.3	16182.5	19034.3	8175	11998.8	104.8%	113.3%	117.6%	146.8%				
	Total		62548	66301	38478	42464	31886	38141	16562	22946	106.0%	110.4%	119.6%	138.5%				
Nov-14	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2082.5	2122.17	569.75	590.917	490.25	499.75	0	55.75	101.9%	103.7%	101.9%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	26188.75	26959.6	15119	15017.5	14937	16194.5	6939	8142	102.9%	99.3%	108.4%	117.3%				
	RXK10	ROWLEY REGIS HOSPITAL	3040.5	2955.25	3894	3722.75	1306.5	1463	1511.5	1800	97.2%	95.6%	112.0%	119.1%				
	RXK01	SANDWELL GENERAL HOSPITAL	29371	30796.6	18168.5	19839.6	15566	17377.8	7733	11116.5	104.9%	109.2%	111.6%	143.8%				
	Total		60683	62834	37751	39171	32300	35535	16184	21114	103.5%	103.8%	110.0%	130.5%				
Dec-14	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	1963.75	1844.17	554	471.5	518	465.5	0	139.25	93.9%	85.1%	89.9%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	26367.75	26839.5	15860.5	15872.1	15638.5	16717.7	7044	7930	101.8%	100.1%	106.9%	112.6%				
	RXK10	ROWLEY REGIS HOSPITAL	3280	3003	3634.5	3553.5	1262.5	1255.5	1501.5	1622.5	91.6%	97.8%	99.4%	108.1%				
	RXK01	SANDWELL GENERAL HOSPITAL	30676	30848.8	17822	19391.1	16710.5	17467	8177.02	10390.1	100.6%	108.8%	104.5%	127.1%				
	Total		62288	62535	37871	39288	34130	35906	16723	20082	100.4%	103.7%	105.2%	120.1%				
Jan-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2123.25	2227.33	505.5	492.25	582.75	555	129.5	157.5	104.9%	97.4%	95.2%	121.6%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	30328.5	30574.6	15962.5	15937.8	18989.5	20653.4	7731	8767.25	100.8%	99.8%	108.8%	113.4%				
	RXK10	ROWLEY REGIS HOSPITAL	2919	3183.5	3472.5	3411.5	1333	1558.5	1429	1542.25	109.1%	98.2%	116.9%	107.9%				
	RXK01	SANDWELL GENERAL HOSPITAL	29286.5	30702.1	17609.5	19883.4	16561.5	18341	8455	11660.3	104.8%	112.9%	110.7%	137.9%				
			64657	66688	37550	39725	37467	41108	17745	22127	103.1%	105.8%	109.7%	124.7%				
Feb-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	1867.25	2053.5	464.5	462	490.25	518	129.5	101.75	110.0%	99.5%	105.7%	78.6%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	27390.25	27677.8	14544.5	14620.5	17409.5	18193.9	6915.5	7414.25	101.0%	100.5%	104.5%	107.2%				
	RXK10	ROWLEY REGIS HOSPITAL	2542	2743.25	3000.5	3185.5	1194.5	1192	1457.5	1407	107.9%	106.2%	99.8%	96.5%				
	RXK01	SANDWELL GENERAL HOSPITAL	25298.5	27136.1	14521.5	16240.8	14720	16798	7292	9867.25	107.3%	111.8%	114.1%	135.3%				
			57098	59611	32531	34509	33814	36702	15795	18790	104.4%	106.1%	108.5%	119.0%				
Mar-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2353.25	2352.42	501.5	447	573.5	565.25	148	139.5	100.0%	89.1%	98.6%	94.3%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	29823.73	30744.2	16727.5	15515.3	18670	21136.2	7507.5	7752	103.1%	92.8%	113.2%	103.3%				
	RXK10	ROWLEY REGIS HOSPITAL	2702.5	3084.9	3546.75	3896.58	1211.5	1717.75	1670.5	2067	114.1%	109.9%	141.8%	123.7%				
	RXK01	SANDWELL GENERAL HOSPITAL	28133.5	30365.3	15989.5	17373.3	15995	20147.1	7760.52	10975	107.9%	108.7%	126.0%	141.4%				
			63013	66547	36765	37232	36450	43566	17087	20934	105.6%	101.3%	119.5%	122.5%				
Apr-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	1502	1941	305.5	396.25	444	536.5	92.5	101.75	129.2%	129.7%	120.8%	110.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	30171.5	31776.3	16684	15468.3	18810.5	20221.8	7285.5	8325	105.3%	92.7%	107.5%	114.3%				
	RXK10	ROWLEY REGIS HOSPITAL	2614	2568.5	3772	3448.07	1116.5	1351.5	1763	1778	98.3%	91.4%	121.0%	100.9%				
	RXK01	SANDWELL GENERAL HOSPITAL	27100	29153.3	15850.3	17460.4	16443.5	18445.3	7508	10431.5	107.6%	110.2%	112.2%	138.9%				
			61388	65439	36612	36773	36815	40555	16649	20636	106.6%	100.4%	110.2%	123.9%				
May-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2034.5	1941	434	402.25	573.5	527.25	138.75	138.75	95.4%	92.7%	91.9%	100.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	32094.5	32675.3	16822.3	16256	19465	21176.3	7493	8437	101.8%	96.6%	108.8%	112.6%				
	RXK10	ROWLEY REGIS HOSPITAL	2645.5	2576.07	3508.5	3169.08	1083.5	1475.07	1842.5	2033	97.4%	90.3%	136.1%	110.3%				
	RXK01	SANDWELL GENERAL HOSPITAL	26561	27802.2	15591.5	17242.2	16839	17383.2	8199.5	10655	104.7%	110.6%	103.2%	129.9%				
			63336	64995	36356	37070	37961	40562	17674	21264	102.6%	102.0%	106.9%	120.3%				
Jun-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	2276.25	2172.17	419	426	555	527.25	166.5	184.75	95.4%	101.7%	95.0%	111.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	28309.5	29468.2	15410.2	14755.3	18281	19637.8	6748.5	7504.32	104.1%	95.8%	107.4%	111.2%				
	RXK10	ROWLEY REGIS HOSPITAL	2442	2374.75	3676.5	3263	1302.5	1494	1587	1916.5	97.2%	88.8%	114.7%	120.8%				
	RXK01	SANDWELL GENERAL HOSPITAL	26826	28578.1	15516.5	17366.3	15139.5	17222.8	8432.5	10183	106.5%	111.9%	113.8%	120.8%				
			59854	62593	35022	35811	35278	38882	16935	19789	104.6%	102.3%	110.2%	116.9%				
Jul-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	930	1951.58	465	512.75	589	555	0	166.5	209.8%	110.3%	94.2%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	32069.5	27187.6	13190.5	13134.5	27450.5	19260	8199.5	7613.27	84.8%	99.6%	70.2%	92.9%				
	RXK10	ROWLEY REGIS HOSPITAL	3208	2495	3565	2970.67	2139	1486.75	2495.5	1923	77.8%	83.3%	69.5%	77.1%				
	RXK01	SANDWELL GENERAL HOSPITAL	30178.5	26279.7	15686	15236	23885.5	17973.3	11764.5	11337.3	87.1%	97.1%	75.2%	96.4%				
			66386	57914	32907	31854	54064	39275	22460	21040	87.2%	96.8%	72.6%	93.7%				
Aug-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	930	806	465	370.75	573	518.25	0	171	86.7%	79.7%	90.4%	0.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	31861.5	24502	13158.3	11459.8	27419.5	18006.2	7843	7162.52	76.9%	87.1%	65.7%	91.3%				
	RXK10	ROWLEY REGIS HOSPITAL	3208.5	2431.5	3565	3108.12	2139	1589.75	2495.5	2150.5	75.8%	87.2%	74.3%	86.2%				
	RXK01	SANDWELL GENERAL HOSPITAL	29192	24223	14735.5	15146	22765.5	17481.1	11251	11176.8	83.0%	102.8%	76.8%	99.3%				
			65192	51963	31924	30085	52897	37595	21590	20661	79.7%	94.2%	71.1%	95.7%				
Sep-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	900	935	450	378.5	555	472	166.5	194.75	103.9%	84.1%	85.0%	117.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	28394	26595.9	11679	13003.8	24495	20277.5	7651	7903	93.7%	111.3%	82.8%	103.3%				
	RXK10	ROWLEY REGIS HOSPITAL	3105	2663	3450	3364.5	2070	1881.25	2415	2336	85.8%	97.5%	90.9%	96.7%				
	RXK01	SANDWELL GENERAL HOSPITAL	27587	25604	14651	16277.8	21016	18495	11561.5	11814.5	92.8%	111.1%	88.0%	102.2%				
			59986	55798	30230	33025	48136	41126	21794	22248	93.0%	109.2%	85.4%	102.1%				
Oct-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	930	969.333	465	344.75	573.5	536.75	157.25	178.25	104.2%	74.1%	93.6%	113.4%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	30986	34295.3	13485.5	16855.1	26737.5	28120.5	8215	10881.3	110.7%	125.0%	105.2%	132.5%				
	RXK10	ROWLEY REGIS HOSPITAL	3208.5	3267.67	3565	3678	2139	2590.25	2495.5	2913.5	101.8%	103.2%	121.1%	116.8%				
	RXK01	SANDWELL GENERAL HOSPITAL	27183.5	30355.6	15523.5	21546.8	21761	24224.5	10848	16673.5	111.7%	138.8%	111.3%	153.7%				
			62308	68888	33039	42425	51211	55472	21716	30647	110.6%	128.4%	108.3%	141.1%				
Nov-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	435	435	217	191	536	536	157	138	104.2%	74.1%	93.6%	113.4%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	24755	23194	9789	9919	22694	21079	7217	7434	110.7%	125.0%	105.2%	132.5%				
	RXK10	ROWLEY REGIS HOSPITAL	2738	2309	1738	1837	1826	1871	1493	1446	101.8%	103.2%	121.1%	116.8%				
	RXK01	SANDWELL GENERAL HOSPITAL	24276	23016	12497	12096	20417	19181	10173	9660	111.7%	138.8%	111.3%	153.7%				
			52204	48954	24241	24043	45473	42667	19040	18678	93.8%	99.2%	93.8%	98.1%				
Dec-15	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	465	450	232	195	573	545	185	148	96.8%	84.1%	95.1%	80.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	28783	27400	12089	11327	27170	24752	9454	8471	95.2%	93.7%	91.1%	89.6%				
	RXK10	ROWLEY REGIS HOSPITAL	3044	2561	1975	2027	2030	2007	1689	1586	84.1%	102.6%	98.9%	93.9%				
	RXK01	SANDWELL GENERAL HOSPITAL	26109	24203	13225	12669	21872	20396	10342	10095	92.7%	95.8%	93.3%	97.6%				
			58401	54614	27521	26218	51645	47700	21670	20300	93.5%	95.3%	92.4%	93.7%				
Jan-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	465	465	232	198	573	564	148	148	100.0%	85.3%	98.4%	100.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	26001	24220	10586	9949	24291	23361	8611	7795	93.2%	94.0%	96.2%	90.5%				
	RXK10	ROWLEY REGIS HOSPITAL	2867	2417	1798	1775	1912	1888	1235	1223	84.3%	98.7%	98.7%	99.0%				
	RXK01	SANDWELL GENERAL HOSPITAL	25861	24488	12914	12728	21731	20994	10454	10439	94.7%	98.6%	96.6%	99.9%				
			55194	51590	25530	24650	48507	46807	20448	19605	93.5%	96.6%	96.5%	95.9%				
Feb-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	420	420	210	195	518	518	148	148	100.0%	92.9%	100.0%	100.0%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	27047	25992	11249	10768	25705	24916	8501	8412	96.1%	95.7%	96.9%	99.0%				
	RXK10	ROWLEY REGIS HOSPITAL	3906	3279	3664	3960	2604	2557	2779	3098	83.9%	108.1%	98.2%	111.5%				
	RXK01	SANDWELL GENERAL HOSPITAL	25483	23052	12166	12244	21532	19958	9856	9788	90.5%	100.6%	92.7%	99.3%				
			56856	52743	27289	27167	50359	47949	21284	21446	92.8%	99.6%	95.2%	100.8%				
Mar-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	555	465	277	221	462	573	157	194	83.8%	79.8%	124.0%	123.6%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	24357	27553	10043	11106	22770	26280	7890	8653	113.1%	110.6%	115.4%	109.7%				
	RXK10	ROWLEY REGIS HOSPITAL	3936	3194	4367	4836	2625	2530	3224	3693	81.1%	110.7%	96.4%	114.5%				
	RXK01	SANDWELL GENERAL HOSPITAL	28158	25581	13813	13543	23643	21025	10958	10617	90.8%	98.0%	88.9%	96.9%				
			57006	56793	28500	29706	49500	50408	22229	23157	99.6%	104.2%	101.8%	104.2%				
Apr-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	450	457	225	206	555	555	148	175	101.6%	91.6%	100.0%	118.2%				
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	28863	27928	11830	10759	27267	25879	9244	8557	96.8%	90.9%	94.9%	92.6%				
	RXK10	ROWLEY REGIS HOSPITAL	4185	3631	4702	5260	2790	2754	3417	3881	86.8%	111.9%	98.7%	113.6%				
	RXK01	SANDWELL GENERAL HOSPITAL	27066	24907	13360	13080	21663	20686	10532	10611	92.0%	97.9%	95.5%	100.8%				
			60564	56923	30117	29305	52275	49874	23341	23224	94.0%	97.3%	95.4%	99.5%				
May-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	435	435	217	195	536	536	166	185	100.0%	89.9%	100.0%	111.4%	192	5.1	2.0	7.0
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	29134	29287	11975	11748	27549	27239	9115	8696	100.5%	98.1%	98.9%	95.4%	8856	6.4	2.3	8.7
	RXK10	ROWLEY REGIS HOSPITAL	4323	3879	4858	5417	2883	2871	3605	4005	89.7%	111.5%	99.6%	111.1%	2624	2.6	3.6	6.2
	RXK01	SANDWELL GENERAL HOSPITAL	28077	26369	14260	13294	22336	21643	10737	10506	93.9%	93.2%	96.9%	97.8%	9535	5.0	2.5	7.5
			61969	59970	31310	30654	53304	52289	23623	23392	96.8%	97.9%	98.1%	99.0%	21207.00	5.3	2.5	7.8
Jun-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	450	453	225	198	555	555	166	138	100.7%	88.0%	100.0%	83.1%	135	7.5	2.5	10.0
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	28741	27744	12036	11512	27323	25997	9142	8558	96.5%	95.6%	95.1%	93.6%	8704	6.2	2.3	8.5
	RXK10	ROWLEY REGIS HOSPITAL	4144	3873	4656	4953	2790	2801	3495	3805	93.5%	106.4%	100.4%	108.9%	2222	3.0	3.9	6.9
	RXK01	SANDWELL GENERAL HOSPITAL	26756	25382	13609	13418	21064	20441	10916	10982	94.9%	98.6%	97.0%	100.6%	9235	5.0	2.6	7.6
			60091	57452	30526	30081	51732	49794	23719	23483	95.6%	98.5%	96.3%	99.0%	20296			
Jul-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	465	465	232	232	573	573	148	148	100.0%	100.0%	100.0%	100.0%	228	4.6	1.7	6.2
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	29688	29249	12664	12068	28090	27187	9242	8886	98.5%	95.3%	96.8%	96.1%	9155	6.2	2.3	8.5
	RXK10	ROWLEY REGIS HOSPITAL	4242	3762	5170	5197	3500	3465	3455	3540	88.7%	100.5%	99.0%	102.5%	2178	3.3	4.0	7.3
	RXK01	SANDWELL GENERAL HOSPITAL	27279	25652	14225	14196	21640	20847	11353	11587	94.0%	99.8%	96.3%	102.1%	9872	4.7	2.6	7.3
			61674	59128	32291	31693	53803	52072	24198	24161	95.9%	98.1%	96.8%	99.8%	21433	19	11	29
Aug-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	465	465	232	221	573	573	175	175	100.0%	95.3%	100.0%	100.0%	228	4.6	1.7	6.3
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	29313	27693	12062	12037	27582	25849	8198	8735	94.5%	99.8%	93.7%	106.6%	9155	5.8	2.3	8.1
	RXK10	ROWLEY REGIS HOSPITAL	3967	3395	4972	4965	3439	3310	3067	3079	85.6%	99.9%	96.2%	100.4%	2178	3.1	3.7	6.8
	RXK01	SANDWELL GENERAL HOSPITAL	25853	25600	20636	14598	21640	20464	11640	12846	99.0%	70.7%	94.6%	110.4%	9872	4.7	2.8	7.4
			59598	57153	37902	31821	53234	50196	23080	24835	95.9%	84.0%	94.3%	107.6%	21433	18	10	29
Sep-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	450	476	225	195	555	555	157	222	105.8%	86.7%	100.0%	141.4%	174	5.9	2.4	8.3
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	29457	28063	12304	12574	27112	25549	8197	8677	95.3%	102.2%	94.2%	105.9%	9026	5.9	2.4	8.3
	RXK10	ROWLEY REGIS HOSPITAL	3028	2638	3851	3963	2773	2726	2426	2426	87.1%	102.9%	98.3%	100.0%	1852	2.9	3.4	6.3
	RXK01	SANDWELL GENERAL HOSPITAL	26309	25107	13815	14727	20919	19649	11129	12282	95.4%	106.6%	93.9%	110.4%	9236	4.8	2.9	7.8
			59244	56284	30195	31459	51359	48479	21909	23607	95.0%	104.2%	94.4%	107.8%	20288	20	11	31
Oct-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	465	446	232	217	573	573	157	120	95.9%	93.5%	100.0%	76.4%	144	7.1	2.3	9.4
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	32594	31145	15120	15025	28558	26663	9885	10501	95.6%	99.4%	93.4%	106.2%	9327	6.2	2.7	8.9
	RXK10	ROWLEY REGIS HOSPITAL	2219	2103	2656	2717	2744	1844	2560	2536	94.8%	102.3%	67.2%	99.1%	2262	1.7	2.3	4.1
	RXK01	SANDWELL GENERAL HOSPITAL	28494	27372	14486	16860	22514	21304	12135	13988	96.1%	116.4%	94.6%	115.3%	10266	4.7	3.0	7.7
			63772	61066	32494	34819	54389	50384	24737	27145	95.8%	107.2%	92.6%	109.7%	21999	20	10	30
Nov-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	450	442	225	210	555	545	166	148	98.2%	93.3%	98.2%	89.2%	557	1.8	0.6	2.4
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	31002	30282	13483	13765	27240	25886	8953	9971	97.7%	102.1%	95.0%	111.4%	8630	6.5	2.8	9.3
	RXK10	ROWLEY REGIS HOSPITAL	3382	3220	4072	4197	3874	3257	2981	2957	95.2%	103.1%	84.1%	99.2%	808	8.0	8.9	16.9
	RXK01	SANDWELL GENERAL HOSPITAL	27689	27013	14098	15959	21701	21057	11727	13140	97.6%	113.2%	97.0%	112.0%	7341	6.5	4.0	10.5
			62523	60957	31878	34131	53370	50745	23827	26216	97.5%	107.1%	95.1%	110.0%	17336	23	16	39
Dec-16	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	465	465	232	202	573	573	157	138	100.0%	87.1%	100.0%	87.9%	188	5.5	1.8	7.3
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	31106	30016	13528	12482	27055	26094	8854	8909	96.5%	92.3%	96.4%	100.6%	8615	6.5	2.5	9.0
	RXK10	ROWLEY REGIS HOSPITAL	3242	3102	3941	4041	3456	2845	2830	2890	95.7%	102.5%	82.3%	102.1%	2679	2.2	2.6	4.8
	RXK01	SANDWELL GENERAL HOSPITAL	28559	27573	14815	15907	22509	21876	12260	13625	96.5%	107.4%	97.2%	111.1%	10387	4.8	2.8	7.6
			63372	61156	32516	32632	53593	51388	24101	25562	96.5%	100.4%	95.9%	106.1%	21869	19	10	29
Jan-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	322	356	217	210	536	536	37	37	110.6%	96.8%	100.0%	100.0%	180	5.0	1.4	6.3
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	31579	31020	13938	13564	27429	26766	8904	9225	98.2%	97.3%	97.6%	103.6%	9215	6.3	2.5	8.7
	RXK10	ROWLEY REGIS HOSPITAL	2924	3101	3578	4062	3168	2880	2614	2998	106.1%	113.5%	90.9%	114.7%	2607	2.3	2.7	5.0
	RXK01	SANDWELL GENERAL HOSPITAL	28919	27969	14877	17262	22491	22021	12307	14590	96.7%	116.0%	97.9%	118.6%	10304	4.9	3.1	7.9
			63744	62446	32610	35098	53624	52203	23862	26850	98.0%	107.6%	97.4%	112.5%	22306	18	10	28
Feb-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	270	315	210	191	518	481	0	46	116.7%	91.0%	92.9%	#DIV/0!	175	4.5	1.4	5.9
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	27838	27199	13363	13030	24460	23721	8831	9138	97.7%	97.5%	97.0%	103.5%	8319	6.1	2.7	8.8
	RXK10	ROWLEY REGIS HOSPITAL	2852	2816	3409	3694	3110	2722	2512	2655	98.7%	108.4%	87.5%	105.7%	2242	2.5	2.8	5.3
	RXK01	SANDWELL GENERAL HOSPITAL	26276	25767	13759	15260	19922	19628	12317	13527	98.1%	110.9%	98.5%	109.8%	9359	4.9	3.1	7.9
			57236	56097	30741	32175	48010	46552	23660	25366	98.0%	104.7%	97.0%	107.2%	20095	18	10	28
Mar-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	1361	1521	945	615	1642	1430	356	525	111.8%	65.1%	87.1%	147.5%	207	14.3	5.5	19.8
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	27241	26683	13748	13163	24777	23662	10047	9645	98.0%	95.7%	95.5%	96.0%	9536	5.3	2.4	7.7
	RXK10	ROWLEY REGIS HOSPITAL	3239	3038	3947	4107	3588	3072	3340	3328	93.8%	104.1%	85.6%	99.6%	2420	2.5	3.1	5.6
	RXK01	SANDWELL GENERAL HOSPITAL	23762	23020	13865	15342	18052	17437	12492	13552	96.9%	110.7%	96.6%	108.5%	9625	4.2	3.0	7.2
			55603	54262	32505	33227	48059	45601	26235	27050	97.6%	102.2%	94.9%	103.1%	21788	26	14	40
Apr-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	1335	1416	915	648	1590	1541	345	363	106.1%	70.8%	96.9%	105.2%	210	14.1	4.8	18.9
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	28695	27561	13723	13252	26964	24779	9890	9750	96.0%	96.6%	91.9%	98.6%	9329	5.6	2.5	8.1
	RXK10	ROWLEY REGIS HOSPITAL	3144	2958	3855	4022	2820	2460	3885	3897	94.1%	104.3%	87.2%	100.3%	2274	2.4	3.5	5.9
	RXK01	SANDWELL GENERAL HOSPITAL	23021	21873	13713	14464	17400	16747	12336	12769	95.0%	105.5%	96.2%	103.5%	9569	4.0	2.8	6.9
			56195	53808	32206	32386	48774	45527	26456	26779	95.8%	100.6%	93.3%	101.2%	21382	26	14	40
May-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	292	337	232	217	573	518	0	55	115.4%	93.5%	90.4%	#DIV/0!	238	3.6	1.1	4.7
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	30870	31048	14867	13613	28345	27360	10345	10004	100.6%	91.6%	96.5%	96.7%	9915	5.9	2.4	8.3
	RXK10	ROWLEY REGIS HOSPITAL	3254	3078	4397	4186	2914	2536	4014	3919	94.6%	95.2%	87.0%	97.6%	1536	3.7	5.3	8.9
	RXK01	SANDWELL GENERAL HOSPITAL	26141	25145	14245	14637	22440	22611	12412	12946	96.2%	102.8%	100.8%	104.3%	10047	4.8	2.7	7.5
			60557	59608	33741	32653	54272	53025	26771	26924	98.4%	96.8%	97.7%	100.6%	21736	18	12	29
Jun-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	0	0	0	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	328	0.0	0.0	0.0
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	32092	31476	15977	14308	29009	27747	11086	11521	98.1%	89.6%	95.6%	103.9%	9390	6.3	2.8	9.1
	RXK10	ROWLEY REGIS HOSPITAL	3157	2937	4381	3949	2825	2476	3890	3867	93.0%	90.1%	87.6%	99.4%	2282	2.4	3.4	5.8
	RXK01	SANDWELL GENERAL HOSPITAL	24642	24373	13973	14438	19970	19498	12336	13033	98.9%	103.3%	97.6%	105.7%	9303	4.7	3.0	7.7
			59891	58786	34331	32695	51804	49721	27312	28421	98.2%	95.2%	96.0%	104.1%	21303	13	9	23
Jul-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	300	345	225	180	555	555	0	0	115.0%	80.0%	100.0%	#DIV/0!	276	3.3	0.7	3.9
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	30894	29888	14741	13461	28584	26702	9817	10265	96.7%	91.3%	93.4%	104.6%	9579	5.9	2.5	8.4
	RXK10	ROWLEY REGIS HOSPITAL	3075	3000	4281	3966	2850	2490	3915	3879	97.6%	92.6%	87.4%	99.1%	2269	2.4	3.5	5.9
	RXK01	SANDWELL GENERAL HOSPITAL	25308	24971	14711	14847	22287	22588	13274	13555	98.7%	100.9%	101.4%	102.1%	9811	4.8	2.9	7.7
			59577	58204	33958	32454	54276	52335	27006	27699	97.7%	95.6%	96.4%	102.6%	21935	16	9	26
Aug-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	292	345	232	183	573	555	0	18	118.2%	78.9%	96.9%	#DIV/0!	249	3.6	0.8	4.4
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	29837	27218	14638	12947	27665	24649	9611	10160	91.2%	88.4%	89.1%	105.7%	9277	5.6	2.5	8.1
	RXK10	ROWLEY REGIS HOSPITAL	3567	3346	4843	4529	2923	2671	4011	3988	93.8%	93.5%	91.4%	99.4%	2571	2.3	3.3	5.7
	RXK01	SANDWELL GENERAL HOSPITAL	27288	24118	15703	14697	19737	22381	14390	13733	88.4%	93.6%	113.4%	95.4%	9906	4.7	2.9	7.6
			60984	55027	35416	32356	50898	50256	28012	27899	90.2%	91.4%	98.7%	99.6%	22003	16	9	26
Sep-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	292	341	225	210	555	555	0	9	116.8%	93.3%	100.0%	#DIV/0!	221	4.1	1.0	5.0
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	29975	29324	14254	13068	27601	25914	9786	9775	97.8%	91.7%	93.9%	99.9%	9578	5.8	2.4	8.2
	RXK10	ROWLEY REGIS HOSPITAL	4077	3925	5520	5029	2790	2790	3825	3802	96.3%	91.1%	100.0%	99.4%	2479	2.7	3.6	6.3
	RXK01	SANDWELL GENERAL HOSPITAL	23096	23380	14607	14929	22186	19522	13397	14684	101.2%	102.2%	88.0%	109.6%	9901	4.3	3.0	7.3
			57440	56970	34606	33236	53132	48781	27008	28270	99.2%	96.0%	91.8%	104.7%	22179	17	10	27
Oct-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	300	307	232	217	573	536	0	55	102.3%	93.5%	93.5%	#DIV/0!	174	4.8	1.6	6.4
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	30867	29794	14429	13236	28148	27059	9541	10173	96.5%	91.7%	96.1%	106.6%	10063	5.6	2.3	8.0
	RXK10	ROWLEY REGIS HOSPITAL	4215	4054	5695	5318	2883	2894	3951	3883	96.2%	93.4%	100.4%	98.3%	2613	2.7	3.5	6.2
	RXK01	SANDWELL GENERAL HOSPITAL	27170	26684	16362	16357	21864	22266	14852	16136	98.2%	100.0%	101.8%	108.6%	11129	4.4	2.9	7.3
			62552	60839	36718	35128	53468	52755	28344	30247	97.3%	95.7%	98.7%	106.7%	23979	18	10	28
Nov-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	285	315	225	210	555	527	0	27	110.5%	93.3%	95.0%	#DIV/0!	142	5.9	1.7	7.6
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	29837	29413	14421	13001	27261	26670	9670	9875	98.6%	90.2%	97.8%	102.1%	9713	5.8	2.4	8.1
	RXK10	ROWLEY REGIS HOSPITAL	3951	3772	5319	5175	2698	2686	3687	3675	95.5%	97.3%	99.6%	99.7%	2495	2.6	3.5	6.1
	RXK01	SANDWELL GENERAL HOSPITAL	26841	25880	16620	16475	21943	21656	15566	16284	96.4%	99.1%	98.7%	104.6%	11132	4.3	2.9	7.2
			60914	59380	36585	34861	52457	51539	28923	29861	97.5%	95.3%	98.2%	103.2%	23482	19	11	29
Dec-17	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	322	367	232	210	573	545	0	27	114.0%	90.5%	95.1%	#DIV/0!	167	5.5	1.4	6.9
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0			
	RXK02	CITY HOSPITAL	30881	29460	14839	13013	28229	27029	10254	9650	95.4%	87.7%	95.7%	94.1%	9260	6.1	2.4	8.5
	RXK10	ROWLEY REGIS HOSPITAL	4203	3700	5700	5371	2883	2859	3951	3849	88.0%	94.2%	99.2%	97.4%	2419	2.7	3.8	6.5
	RXK01	SANDWELL GENERAL HOSPITAL	28278	26344	17809	16640	26185	22192	17449	16449	93.2%	93.4%	84.8%	94.3%	11549	4.2	2.9	7.1
			63684	59871	38580	35234	57870	52625	31654	29975	94.0%	91.3%	90.9%	94.7%	23395	18	11	29
Jan-18	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	300	311	232	221	573	555	0	74	103.7%	95.3%	96.9%	#DIV/0!	165	5.2	1.8	7.0
	RXKTC	BIRMINGHAM TREATMENT CENTRE									0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	30895	30238	14915	13260	28552	27494	10692	10035	97.9%	88.9%	96.3%	93.9%	10277	5.6	2.3	7.9
	RXK10	ROWLEY REGIS HOSPITAL	4227	4001	5712	5171	2883	2715	3951	3853	94.7%	90.5%	94.2%	97.5%	2650	2.5	3.4	5.9
	RXK01	SANDWELL GENERAL HOSPITAL	29135	26317	17925	16718	26417	23255	16420	16457	90.3%	93.3%	88.0%	100.2%	11747	4.2	2.8	7.0
			64557	60867	38784	35370	58425	54019	31063	30419	94.3%	91.2%	92.5%	97.9%	24839	18	10	28
Feb-18	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	225	225	180	165	592	573	0	18	100.0%	91.7%	96.8%	#DIV/0!	170	4.7	1.1	5.8
	RXKTC	BIRMINGHAM TREATMENT CENTRE									0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	27868	25883	13546	11808	25716	23199	9717	9792	92.9%	87.2%	90.2%	100.8%	8985	5.5	2.4	7.9
	RXK10	ROWLEY REGIS HOSPITAL	3603	3389	4879	4446	2466	2431	3363	3144	94.1%	91.1%	98.6%	93.5%	2338	2.5	3.2	5.7
	RXK01	SANDWELL GENERAL HOSPITAL	25796	23207	15639	14543	24006	20510	14461	14598	90.0%	93.0%	85.4%	100.9%	10576	4.1	2.8	6.9
			57492	52704	34244	30962	52780	46713	27541	27552	91.7%	90.4%	88.5%	100.0%	22069	17	9	26
Mar-18	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	300	281	232	225	573	527	0	46	93.7%	97.0%	92.0%	#DIV/0!		#DIV/0!	#DIV/0!	#DIV/0!
	RXKTC	BIRMINGHAM TREATMENT CENTRE									0.0%	0.0%	0.0%	0.0%	149			
	RXK02	CITY HOSPITAL	31338	29058	15335	13194	28885	26543	10861	10538	92.7%	86.0%	91.9%	97.0%	9280	6.0	2.6	8.5
	RXK10	ROWLEY REGIS HOSPITAL	4215	3635	5700	5300	2883	2790	3951	3699	86.2%	93.0%	96.8%	93.6%	2603	2.5	3.5	5.9
	RXK01	SANDWELL GENERAL HOSPITAL	29113	25874	17819	16602	26534	23680	16075	16282	88.9%	93.2%	89.2%	101.3%	11855	4.2	2.8	7.0
			64966	58848	39086	35321	58875	53540	30887	30565	90.6%	90.4%	90.9%	99.0%	23887	#DIV/0!	#DIV/0!	#DIV/0!
Apr-18	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	292	232	225	206	555	545	0	9	79.5%	91.6%	98.2%	#DIV/0!	176	4.4	1.2	5.6
	RXKTC	BIRMINGHAM TREATMENT CENTRE									0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	29632	28013	14945	13181	27329	26065	10001	9903	94.5%	88.2%	95.4%	99.0%	8846	6.1	2.6	8.7
	RXK10	ROWLEY REGIS HOSPITAL	4125	3665	5496	5074	2790	2790	3825	3732	88.8%	92.3%	100.0%	97.6%	2420	2.7	3.6	6.3
	RXK01	SANDWELL GENERAL HOSPITAL	26303	25117	16403	15701	22312	22639	15063	15301	95.5%	95.7%	101.5%	101.6%	10958	4.4	2.8	7.2
			60352	57027	37069	34162	52986	52039	28889	28945	94.5%	92.2%	98.2%	100.2%	22400	18	10	28
May-18	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	292	232	232	217	573	573	0	0	79.5%	93.5%	100.0%	#DIV/0!	123	6.5	1.8	8.3
	RXKTC	BIRMINGHAM TREATMENT CENTRE									0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	30067	28969	15277	13480	27965	27200	10451	10478	96.3%	88.2%	97.3%	100.3%	9034	6.2	2.7	8.9
	RXK10	ROWLEY REGIS HOSPITAL	4197	3788	5537	5024	2883	2860	3825	3537	90.3%	90.7%	99.2%	92.5%	2273	2.9	3.8	6.7
	RXK01	SANDWELL GENERAL HOSPITAL	26750	25578	16785	16464	23413	23658	15294	15961	95.6%	98.1%	101.0%	104.4%	11100	4.4	2.9	7.4
			61306	58567	37831	35185	54834	54291	29570	29976	95.5%	93.0%	99.0%	101.4%	22530	20	11	31
Jun-18	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	281	277	217	206	536	499	0	37	98.6%	94.9%	93.1%	#DIV/0!	166	4.7	1.5	6.1
	RXKTC	BIRMINGHAM TREATMENT CENTRE									0.0%	0.0%	0.0%	0.0%				
	RXK02	CITY HOSPITAL	29538	28114	14950	13329	27829	25111	9876	9759	95.2%	89.2%	90.2%	98.8%	8843	6.0	2.6	8.6
	RXK10	ROWLEY REGIS HOSPITAL	3967	3696	5295	5041	2883	2859	3595	3515	93.2%	95.2%	99.2%	97.8%	2370	2.8	3.6	6.4
	RXK01	SANDWELL GENERAL HOSPITAL	25985	24617	15948	15583	22538	22614	14538	15053	94.7%	97.7%	100.3%	103.5%	10472	4.5	2.9	7.4
			59771	56704	36410	34159	53786	51083	28009	28364	94.9%	93.8%	95.0%	101.3%	21851	18	11	29
3-month Avges	RXK03	BIRMINGHAM MIDLAND EYE CENTRE (BMEC)	288	247	225	210	555	539	0	15	85.7%	93.3%	97.2%	#DIV/0!	155	5.1	1.5	6.5
	RXKTC	BIRMINGHAM TREATMENT CENTRE	0	0	0	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0	#DIV/0!	#DIV/0!	#DIV/0!
	RXK02	CITY HOSPITAL	29746	28365	15057	13330	27708	26125	10109	10047	95.4%	88.5%	94.3%	99.4%	8908	6.1	2.6	8.7
	RXK10	ROWLEY REGIS HOSPITAL	4096	3716	5443	5046	2852	2836	3748	3595	90.7%	92.7%	99.5%	95.9%	2354	2.8	3.7	6.5
	RXK01	SANDWELL GENERAL HOSPITAL	26346	25104	16379	15916	22754	22970	14965	15438	95.3%	97.2%	100.9%	103.2%	10843	4.4	2.9	7.3
	Total	*Latest 3 month average====>*	60476	57433	37103	34502	53869	52471	28823	29095	95.0%	93.0%	97.4%	100.9%	22260	4.9	2.9	7.8

ANNEX E

Sandwell and West Birmingham Hospitals NHS
NHS Trust

DIGITAL MAJOR PROJECTS AUTHORITY

Terms of Reference

1. CONSTITUTION

1.1 The Board hereby resolves to establish a Committee of the Board to be known as the Digital Major Projects Authority (The Committee). The Committee has no executive powers, other than those specifically delegated in these Terms of Reference. Its terms of reference are set out below and can only be amended with the approval of the Trust Board.

2. AUTHORITY

2.1 The Committee is authorised by the Board to investigate any activity within its Terms of Reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

2.2 The Committee is authorised by the Board to instruct professional advisors and request the attendance of individuals and authorities from outside of the Trust with relevant experience and expertise if it considers this necessary or expedient to carrying out its functions.

2.3 The Committee is authorised to obtain such internal information as is necessary and expedient to the fulfilment of its functions.

3. PURPOSE

3.1 The purpose of the Committee is to provide the Board with assurance over the IT turnaround project (the recovery of the Trust's IT Infrastructure) and implementation and delivery of the electronic patient record system (Unity) and broader digital programme.

3.2 The committee does not exist to manage the IT function of the Trust, which remains operationally accountable as is routine. However, the committee will take an interest in the department, its development and future structures. It is recognized that the Board will consider in 2018 proposals to change both immediately and over time the balance of in-house and in-sourced provision.

4. MEMBERSHIP

4.1 The Committee membership will comprise of:

- Not less than two Non-Executive Directors
- Chief Executive

- Chief Operating Officer
- Director of Governance
- Director of People and OD

4.2 The meeting will be attended by the chief informatics officer and the deputy chief informatics officer, as well as sufficient relevant members of the department to ensure a rapid flow of information between the IT SMT and the functions of the committee.

4.3 The committee shall also be attended by *up to five* representatives of the organisation's key staff to be organized as follows: A senior doctor and senior nurse drawn from the triumvirate leadership of the clinical groups, alongside a senior doctor recommended by the chair of the medical staff committee and LNCC. Two clinical sponsors drawn from inside the clinical IT community will be added. The aim of such involvement is to tackle confidence among employees in the IT recovery.

4.4 The Chair of the Committee will be a Non-Executive Director and will be appointed by the Trust Chair. If the Chair is absent from the meeting then another Non-Executive Director shall preside.

4.5 A quorum will be 3 members, of which there must be at least one Non-Executive Director and one Executive Director.

4.6 Members should make every effort to attend all meetings of the Committee and are mandated to attend 80% as a minimum annually.

5 ATTENDANCE

5.1 All other Non-Executive Directors shall be welcome to attend and all members of the Trust Board will receive papers to be considered by the Committee.

5.2 Other Executive Directors or any other individuals deemed appropriate by the Committee may be invited to attend for specific items for which they have responsibility.

5.3 The Head of Corporate Governance shall be secretary to the Committee and will provide administrative support and advice. The duties of the Head of Corporate Governance in this regard are:

- Agreement of the agenda with the Chair of the Committee and attendees with the collation of connected papers
- Taking the minutes and keeping a record of matters arising and issues to be carried forward
- Advising the Committee as appropriate

6 FREQUENCY OF MEETINGS

6.1 Meetings will be held monthly on the third Friday commencing at 10.00 am and will last for 90 minutes, with additional meetings where necessary.

7 REPORTING AND ESCALATION

7.1 Following each committee meeting, the minutes shall be drawn up and submitted to the Chair of the committee in draft format. The draft minutes will then be presented at the next Committee meeting where the person presiding at it will sign them. The approved minutes will be presented to the next immediate public Trust Board meeting for information.

7.2 The Chair of the Committee will provide an oral report to the next Trust Board after each Committee meeting, highlighting the matters on which future focus will be directed.

7.3 The Chair of the Committee shall draw to the attention of the Trust Board and issues that require disclosure to the full Board or require Executive action.

7.4 In the event that the Committee is not assured about the delivery of the work plan within its domain, it may choose to escalate or seek further assurance in one of five ways:

(i) insisting on an additional special meeting;
(ii) escalating a matter directly to the full Board;
(iii) requesting a chair's meeting with the Chief Executive and Chairman;
(iv) attending the relevant Executive committee to challenge progress directly;
(v) asking the Audit Committee to direct internal, clinical or external audit to review the position

8 REVIEW

8.1 The terms of reference should be reviewed by the Committee and approved by the Trust Board as required.

9 DUTIES

9.1 The Committee shall draw on standing data set within the integrated performance report that relates to long term goals, Trust objectives, the annual corporate & financial plans and national requirements to seek assurance through:

9.1.1 The receipt of reports at each meeting outlining progress with the long term delivery plan appropriate to the domain in which the Committee is providing assurance, paying attention to the depth and breadth of delivery in the Trust, principally through Group level performance within its domain.

9.1.2 The receipt of reports on compliance with key national and local targets relevant to the remit of the Committee

9.1.3 The receipt of reports which focus on improvement or recovery to address areas of material deviation from the long term delivery plan or areas where poor performance against national or local targets is identified

9.2 To receive all external reports on the Trust that are deemed to fall within the remit of the Committee, seeking assurance that actions are being taken to address recommendations and other issues identified and that learning is promulgated and acted upon.

9.3 To seek assurance that the Trust is complying with relevant policies and statutory guidance that falls within the remit of the Committee.

9.4 To receive reports on key risks to the Trust which fall within the remit of the Committee and seek assurance that sufficiently robust mitigating actions are in place to manage these.

9.5 To seek assurance on the robustness of the mechanism for escalation of risks to the Corporate Risk Register as they arise to ensure successful delivery of the project and reconfigurations.

9.6 To seek assurance that the relationships with key stakeholders are well managed to maintain positive support Projects and reconfigurations, including consultation where necessary.

9.7 To seek assurance on any additional matter referred to the Committee from the Board

August 2018

ANNEX F

Sandwell and West Birmingham Hospitals NHS
NHS Trust

ESTATE MAJOR PROJECTS AUTHORITY

Terms of Reference

1. CONSTITUTION

1.1 The Board hereby resolves to establish a Committee of the Board to be known as the Estate Major Projects Authority (The Committee). The Committee has no executive powers, other than those specifically delegated in these Terms of Reference. Its terms of reference are set out below and can only be amended with the approval of the Trust Board.

2. AUTHORITY

2.1 The Committee is authorised by the Board to investigate any activity within its Terms of Reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

2.2 The Committee is authorised by the Board to instruct professional advisors and request the attendance of individuals and authorities from outside of the Trust with relevant experience and expertise if it considers this necessary or expedient to carrying out its functions.

2.3 The Committee is authorised to obtain such internal information as is necessary and expedient to the fulfilment of its functions.

3. PURPOSE

3.1 The purpose of the Committee is to provide the Board with assurance concerning the delivery of the project to establish the Midland Metropolitan Hospital (MMH) and that the programme of interim reconfigurations is consistent with the long term direction towards the new hospital.

4. MEMBERSHIP

4.1 The Committee membership will comprise of:

- Not less than two Non-Executive Directors
- Chief Executive
- Director of Finance

4.2 The meeting will be attended by the director of estates and new hospitals and the director of procurement. When the interim reconfiguration options are discussed the executive clinical triumvirate will be invited to attend.

4.3 The Chair of the Committee will be a Non-Executive Director and will be appointed by the Trust Chair. If the Chair is absent from the meeting then another Non-Executive Director shall preside.

4.4 A quorum will be 3 members, of which there must be at least one Non-Executive Director and one Executive Director.

4.5 Members should make every effort to attend all meetings of the Committee and are mandated to attend 80% as a minimum annually.

5 ATTENDANCE

5.1 All other Non-Executive Directors shall be welcome to attend and all members of the Trust Board will receive papers to be considered by the Committee.

5.2 Other Executive Directors or any other individuals deemed appropriate by the Committee may be invited to attend for specific items for which they have responsibility.

5.3 The Head of Corporate Governance shall be secretary to the Committee and will provide administrative support and advice. The duties of the Head of Corporate Governance in this regard are:

- Agreement of the agenda with the Chair of the Committee and attendees with the collation of connected papers
- Taking the minutes and keeping a record of matters arising and issues to be carried forward
- Advising the Committee as appropriate

6 FREQUENCY OF MEETINGS

6.1 Meetings will be held bi-monthly (day to be agreed) commencing at 10.00 am and will last for 90 minutes, with additional meetings where necessary.

7 REPORTING AND ESCALATION

7.1 Following each committee meeting, the minutes shall be drawn up and submitted to the Chair of the committee in draft format. The draft minutes will then be presented at the next Committee meeting where the person presiding at it will sign them. The approved minutes will be presented to the next immediate public Trust Board meeting for information.

7.2 The Chair of the Committee will provide an oral report to the next Trust Board after each Committee meeting, highlighting the matters on which future focus will be directed.

7.3 The Chair of the Committee shall draw to the attention of the Trust Board and issues that require disclosure to the full Board or require Executive action.

7.4 In the event that the Committee is not assured about the delivery of the work plan within its domain, it may choose to escalate or seek further assurance in one of five ways:

(i) insisting on an additional special meeting;
(ii) escalating a matter directly to the full Board;
(iii) requesting a chair's meeting with the Chief Executive and Chairman;
(iv) attending the relevant Executive committee to challenge progress directly;
(v) asking the Audit Committee to direct internal, clinical or external audit to review the position

8 REVIEW

8.1 The terms of reference should be reviewed by the Committee and approved by the Trust Board as required.

9 DUTIES

9.1 The Committee shall draw on standing data set within the integrated performance report that relates to long term goals, Trust objectives, the annual corporate & financial plans and national requirements to seek assurance through:

9.1.1 The receipt of reports at each meeting outlining progress with the long term delivery plan appropriate to the domain in which the Committee is providing assurance, paying attention to the depth and breadth of delivery in the Trust, principally through Group level performance within its domain.

9.1.2 The receipt of reports on compliance with key national and local targets relevant to the remit of the Committee

9.1.3 The receipt of reports which focus on improvement or recovery to address areas of material deviation from the long term delivery plan or areas where poor performance against national or local targets is identified

9.2 To receive all external reports on the Trust that are deemed to fall within the remit of the Committee, seeking assurance that actions are being taken to address recommendations and other issues identified and that learning is promulgated and acted upon.

9.3 To seek assurance that the Trust is complying with relevant policies and statutory guidance that falls within the remit of the Committee.

9.4 To receive reports on key risks to the Trust which fall within the remit of the Committee and seek assurance that sufficiently robust mitigating actions are in place to manage these.

9.5 To seek assurance on the development of the long term financial model (LTFM) and business case to facilitate Trust Board sign off prior to submission for approval at each stage.

9.6 To seek assurance on the adequacy of preparation for the Competitive Dialogue (CD) process ensuring that best practice will be carried out in line with EU regulations.

9.7 To facilitate Trust Board approval of MMH project procurement documents by providing robust assurance and guidance as required.

9.8 To seek assurance on the robustness of the approval process for the MMH and reconfiguration project plans and the arrangements for monitoring progress against plan.

9.9 To seek assurance on the robustness of the approval process for the MMH and reconfiguration project budgets and monitor expenditure against plan.

9.10 To seek an awareness of how the broader political, economic and policy context may affect the MMH project and reconfigurations to ensure continuing alignment.

9.11 To seek assurance that a continuous review of performance against the agreed activity and capacity model is in place and that the clinical service model that underpins the MMH business case in order to provide assurance to the Trust that progress is in line with expected trajectories.

9.12 To seek assurance on the robustness of the mechanism for escalation of risks to the Corporate Risk Register as they arise to ensure successful delivery of the project and reconfigurations.

9.13 To seek assurance that the relationships with key stakeholders are well managed to maintain positive support Projects and reconfigurations, including consultation where necessary.

9.14 To seek assurance on any additional matter referred to the Committee from the Board.

August 2018