



Doncaster and Bassetlaw
Teaching Hospitals
NHS Foundation Trust



Update from DBTH

Rich Parker

Richard Parker OBE

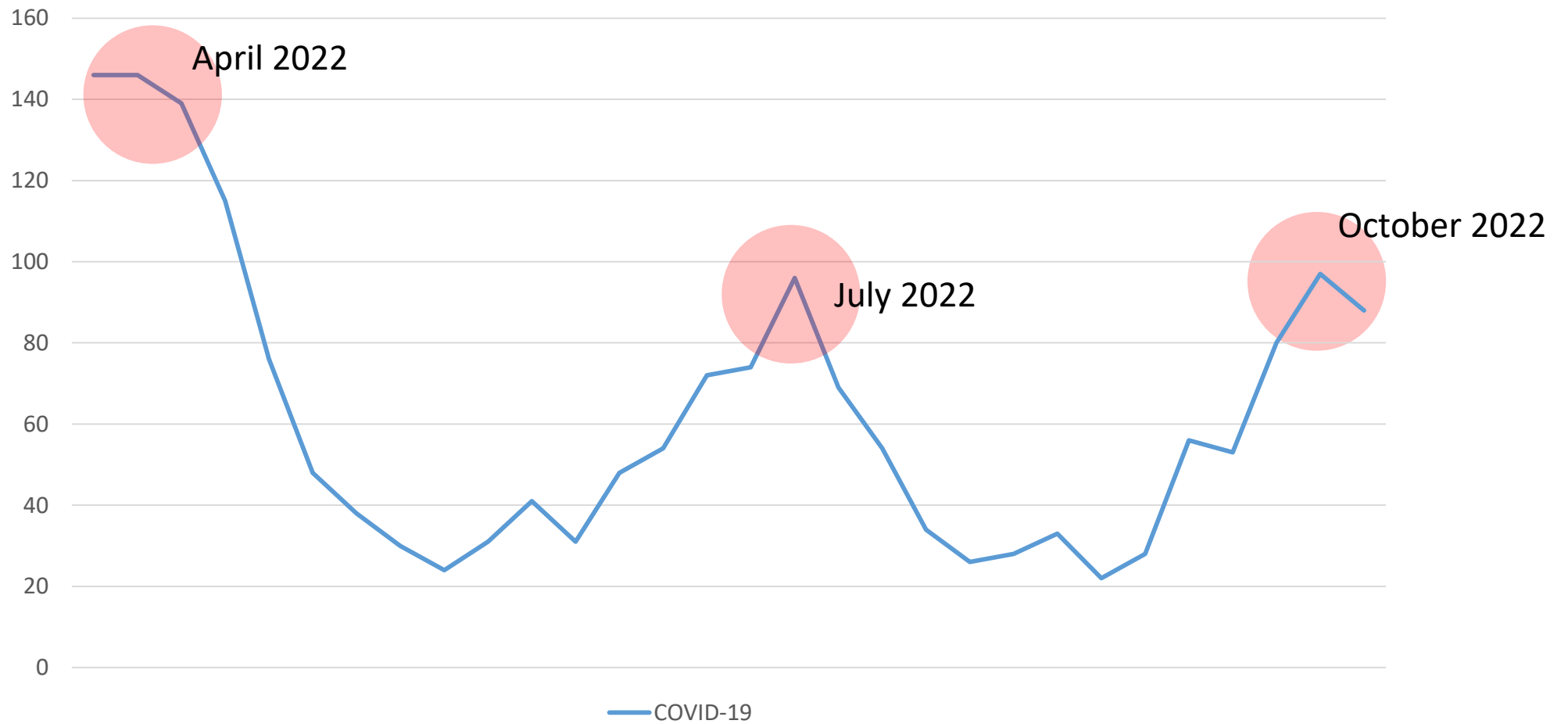
Chief Executive



Urgent and emergency care

- **General activity:** From August to October, we cared for 47,985 people. This represents a 7.3% increase on the same period in 2021.
- **COVID-19:** As the next slide shows, we have been particularly affected by increasing rates of COVID-19 in late September/October, which affect performance.
- **Care provided:** Of the 32,947 attendances cared for at DRI during September and October an average of 54% required care/treatment for minor illness/injury and an average of 5.12% left without treatment.
- **Waits under four hours:** Stood at 67.4% in September – higher than the national average of 57% but still not where we would want to be.



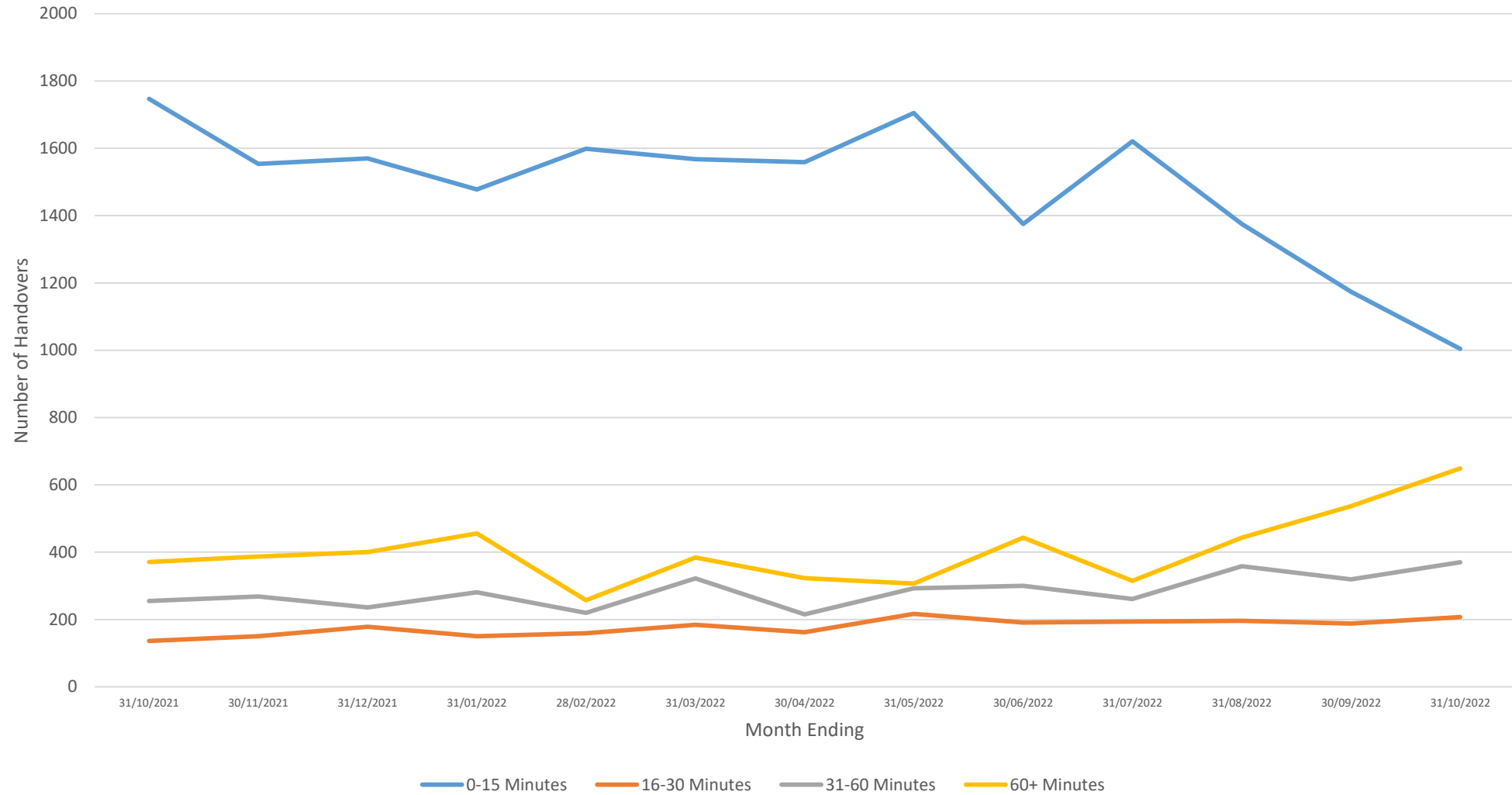


Ambulance data

We experienced significant pressures in September and October, which increased handover delays – we are working hard to reduce these as we tackle a return to autumn and winter pressures.

- **August:** 2,372 conveyances, of which 57% were handed over to our care within 15 minutes and 18% waited more than 60 minutes.
- **September:** 2,218 conveyances, of which 52% were handed over to our care within 15 minutes and 24% waited more than 60 minutes.
- **October:** 2,230 conveyances, of which 45% were handed over to our care within 15 minutes and 29% waited more than 60 minutes.





Ambulance handovers

www.dbth.nhs.uk

Transfer of care

- **Complex and specific discharge plans:** An average of 70 to 120 patients are recorded as medically fit, but due to complexities, have no discharge date identified (due to the need for specialist living arrangements and discharge support).
- **Average length of stay:** For complex patients sits at around 25 days.
- **General activity:** Our Discharge Team experienced an 80% increase in the number of referrals in late October, with the Discharge Lounge facilitating 35 discharges a day.
- **Care hubs:** We have worked with partners to implement Transfer of Care Hubs, which went live 7 November, additionally, we are looking to increase community Transfer of Care beds by 12.



We cared for around
9,496 inpatients
+744 compared with 9/2021



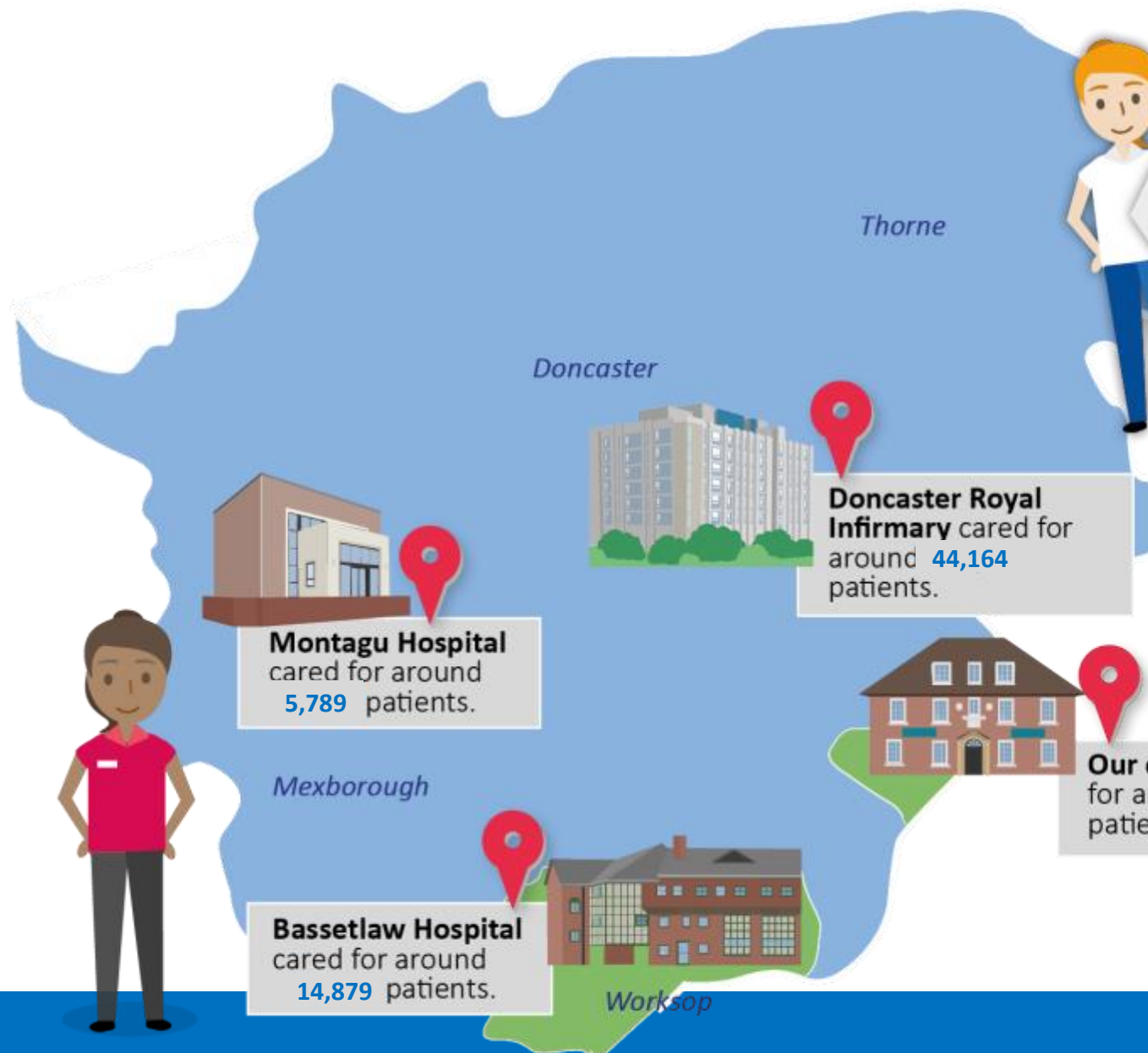
We cared for approximately
39,638 outpatients
+2,722 compared with 9/2021



We cared for approximately
15,659 emergencies
-830 compared with 9/2021



We delivered approximately
368 babies
-37 compared with 9/2021



Our activity in September

Elective, Cancer and Diagnostics

- **Elective Backlog:** Has increased by 83% since March 2020. We are working hard to bring this down.
- **Elective work:** We are expanding our capacity to deal with elective backlog work – however, this is often impacted by spikes in activity. A business case has been developed to secure funding to create an Elective Orthopaedic Centre at Montagu Hospital.
- **Cancer and diagnostics:** Our Referral to Treatment rate sits at 66.2% - slightly ahead of the regional average of 62.2%. To help in general cancer work, we have implemented the Faster Diagnostic Framework, which contains numerous projects, as well as continue to secure funding for the Community Diagnostic Centre at Montagu Hospital, which will soon enter phase two.



Finance in month Five

- The **Trust finished month five £1m** adverse to our plan with an overall deficit of £7.9m (adverse to plan by £1.4m). **The break down is as follows:**
 - As the NHS has now returned to more normal financial arrangements the position at month five is challenging
 - £4.7m overspend on temporary staff usage as a result of vacancies, sickness and activity pressures. As the annual leave reduces and newly qualified colleagues join the teams it is anticipated that expenditure will reduce towards normal levels.
 - We have seen some underspend against elective recovery £2.4m as a result of lower than planned activity.
 - We have also received £1m from insurance relating to the flood damage in the Women's and Children's Hospital.



Winter planning

- **General plans:** This is an ongoing process – we are focused on implementing national guidance and best practice, developing rapid response services, alternatives to hospital admissions including virtual wards, vaccination programmes and other schemes and initiatives to help with pressures.
- **COVID-19:** Remains a clear and present danger for the Trust as we head further into winter with concern that we may face a significant challenge from Influenza and Norovirus. Many restrictions remain in place, and we continue to ask colleagues and the public to wear masks, alongside other IPC measures.
- **Partnership Working:** We will continue to work with our local and regional partners to ensure we deliver the very best care, as well as supporting during times of acute activity.



Health and wellbeing

- **Health and wellbeing:** Is more important than ever – we have an extensive offer available to colleagues – if individuals are struggling, we ask colleagues and leaders to signpost them to the support we have available.
- **Financial wellbeing:** Similar, this winter may be tough for many people. We have financial resources available on our internal website, as well as tools such as WageStream, VIVUP, and the Transave.
- **Reward and recognition** – We have a rolling programme to ensure we are recognising the efforts of colleagues – going the extra mile to offer team building sessions, prize giveaways and other bits of recognition.

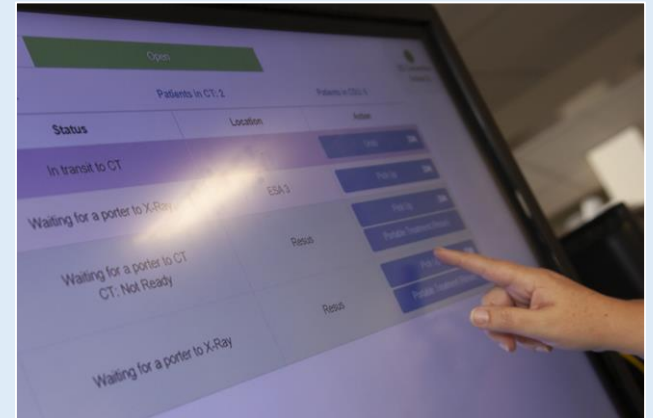


Estates and infrastructure

General capital expenditure last financial year was £35.5 million, this included:

- Women's and Children's critical incident - £11.6m
- Targeted Investment Fund for Estates and Technology - £5.3m
- Fire Safety - £4.8m
- Building backlog maintenance - £4.1m

The site's backlog maintenance and age mean that we must spend a significant amount to stay in place, and unforeseen events such as the critical incident within the Women's and Children's Hospital are the types of risks we see as we continue to use facilities which, in some cases, are reaching almost 100 years old.





Any questions/comments?