NHS
Oxford University Hospitals
NHS Foundation Trust

Cover Sheet

Trust Board Meeting in Public: Wednesday 14 May 2025

TB2025.46

Title: **Urgent and Emergency Care Oxfordshire System Dashboard**

Status: **For Discussion**

History: **N/A**

Board Lead: **Chief Operating Officer**

Author: **Lisa Glynn, Director of Clinical Services and Louise Johnson, Deputy Director of Urgent Care**

Confidential: **No**

Key Purpose: Assurance and Performance

Summary

- The Urgent and Emergency Care (UEC) Oxfordshire System Dashboard illustrates, in a consolidated format, the relative performance of 75 indicators relating to Urgent and Emergency Care across the areas of:
  - Admissions avoidance schemes
  - Ambulance arrivals and turnaround times
  - In-hospital performance
  - Discharges performance
  - Emergency Department (ED) performance

- The formatting of the report uses a heat map-based approach to highlight performance for each month relative to performance within the time series. For example, ED performance that is red will be at a level when it is lower than average, and green when above average, within the time period. The heat-map methodology, therefore, does not indicate whether any indicator is achieving target or at a level that meets expectations with respect to quality, efficiency or productivity. The purpose is to highlight visually how clusters of indicators change (improving or deteriorating) relative to other indicators. From this view the dashboard shows the relative importance of the following indicators on ED performance:

  - Referrals into the Urgent Community Response (UCR)
  - Minor Injuries Unit (MIU) and First Aid Units (FAU) referrals
  - Acute Same Day Emergency care (SDEC)
  - Community SDEC
  - Medically Optimised For Discharge (MOFD) total and Average Length of Stay (ALOS)
  - Total discharges from OUH Inpatient wards on pathway 0-3
  - Discharge to Assess (D2A) pathways

- The above list does not highlight statistical significance but may be used to direct further attention to some of the more detailed reports for each area within the accompanying productivity report, as well as other reports produced within the UEC system covering these areas.

- Information is now available for the Primary Care indicators and this is included. Additionally, further forms of analysis using this dashboard are being considered, including statistical significance tests for changes, as well as setting targets for each indicator.

- The report will be updated monthly and shared at the Oxfordshire UEC Board as well as in other performance forums. Following the meeting held in October, it has been agreed that the dashboard will now form part of the UEC Sitrep pack presented and discussed at the Oxfordshire UEC Board.

Current Status and Trends:

- Utilisation of admission avoidance pathways has increased in March across all providers.
- The overall number of patients delayed in OUH has remained broadly the same however significant increases typically seen in the winter months were not at the same levels this winter when compared to previous winter 2023/24.
- There has however been a gradual reduction in the average length of stay of medically optimised patients over the last two years.
- There has been a noticeable increase in the percentage of patients discharged on Pathway 0 and 1 over the last 12 months, almost reaching the national target of 95% in March.
- The introduction of data validation of patients discharge on Pathway 3 has led to more accurate reporting.
- Attendances in ED have increased, comparatively to last year.
- Cross system winter planning has contributed to a more stable OPEL position.

Key Focus Areas:

- Emphasis on addressing the root causes of increased ED attendances and improving admission avoidance strategies.
- Further development of SPA, to include access to SCAS 'stack' for Category 3 and 4 calls.

Recommendations

- The Integrated Assurance Committee is asked to:
    - Review the UEC Performance Dashboard and, noting that this will continue to be developed, and that this will be used to provide assurance on system performance in connection with other detailed reports produced or with accompanying narrative.
    - Note that the Oxfordshire UEC Board review the dashboard monthly as part of the system sitrep report.

System area	Indicator	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
A&E Performance	A&E 4hr performance (all attendance types)	64.7%	70.6%	70.3%	66.9%	68.5%	69.1%	63.7%	61.7%	57.9%	59.8%	63.7%	65.0%	72.2%	71.4%	74.9%	74.0%	78.7%	76.1%	73.1%	69.0%	68.8%	66.7%	72.7%	70.8%	68.4%
	A&E 4hr performance - Type 1	57.7%	64.8%	64.9%	61.0%	62.5%	63.0%	57.5%	55.0%	50.8%	53.2%	57.1%	58.7%	67.3%	66.1%	67.1%	66.6%	72.1%	69.1%	65.3%	59.9%	59.6%	57.0%	63.9%	61.9%	59.8%
	A&E 4hr performance - Day (8am to 5pm)	67.1%	73.8%	75.0%	72.3%	73.4%	72.7%	69.3%	66.5%	62.8%	63.2%	68.5%	70.3%	76.3%	76.3%	79.1%	79.0%	81.6%	80.2%	76.8%	73.2%	72.3%	69.9%	74.2%	72.9%	71.1%
	A&E 4hr performance - Night (5pm to 8am)	52.2%	59.1%	58.2%	53.9%	55.3%	57.3%	49.3%	47.4%	42.1%	47.3%	49.4%	50.6%	61.2%	58.9%	58.8%	57.7%	65.3%	60.9%	56.5%	49.9%	49.7%	47.6%	56.2%	53.3%	50.9%
	A&E 4hr performance - Weekdays	58.8%	64.9%	66.0%	63.2%	61.3%	62.9%	57.7%	56.6%	50.8%	52.7%	57.3%	58.7%	65.8%	66.5%	67.6%	66.1%	71.7%	69.3%	64.9%	60.1%	59.3%	59.7%	63.9%	61.7%	59.8%
	A&E 4hr performance - Weekends	62.4%	69.5%	67.6%	60.6%	70.2%	69.9%	62.9%	57.2%	56.8%	60.3%	63.6%	64.8%	75.4%	69.7%	71.1%	71.8%	77.3%	72.3%	70.8%	65.4%	65.6%	55.8%	69.5%	67.0%	64.3%
	A&E 12hr performance (all attendance types)	93.6%	96.8%	97.0%	96.6%	97.0%	96.4%	95.0%	94.2%	93.0%	92.7%	93.2%	93.7%	95.0%	95.8%	96.2%	96.7%	97.2%	95.7%	95.8%	95.3%	94.6%	94.2%	94.5%	95.1%	96.0%
	A&E 12hr trolley waits (DTA to admission)	0	4	0	0	0	0	0	0	0	3	0	1	1	0	1	0	0	0	0	0	0	2	0	0	3
Primary care	GP: Number of face-to-face GP appointments (Oxfordshire)	236,927	188,803	215,357	221,596	204,375	208,766	230,364	275,333	242,564	192,010	246,721	231,534	225,726	228,351	228,052	211,312	230,380	203,888	225,115	314,516	246,551	211,441	250,236	221,129	
	GP: Number of telephone GP appointments (Oxfordshire)	162,653	122,420	137,464	144,433	134,177	132,445	131,136	142,552	142,689	118,213	149,143	138,079	133,200	131,294	129,877	121,373	125,913	114,537	119,303	130,906	122,131	114,433	135,162	121,958	
	GP: Total number of GP appointments (Oxfordshire)	403,211	314,276	357,468	374,948	349,052	352,090	373,285	431,775	400,313	322,554	414,614	385,540	375,839	376,346	374,314	348,223	373,198	334,449	363,531	469,188	390,389	347,049	412,446	365,905	
	GP: Number of GP hours at red DoS capacity status (Oxfordshire)		119:35	15:11	138:52	0:00	0:00	0:00	0:00	11:46	39:39	18:41	40:53	13:01	9:23	2:57	19:49	86:02	398:58	601:01	793:24	1181:12	1423:47	1322:35	1292:12	
Admission avoidance	Hospital @ Home - new admissions	576	344	357	315	248	312	350	352	346	507	620	454	389	422	437	448	446	384	419	445	344	417	412	361	377
	Hospital @ Home - beddays consumed	3124	1821	2029	2093	1806	1768	1848	2519	2275	3577	3748	2802	2732	2251	2583	3450	2861	2834	2933	3040	2508	2605	2910	2706	2643
	CARe (crisis care) team - Community pickups	61	86	126	137	93	104	126	140	121	133	133	126	113	91	123	111	92	105	104	114	112	119	141	114	119
	CARe (crisis care) team - Bed based pickups	77	54	32	30	26	22	13	19	29	32	32	57	47	50	49	36	42	49	18	26	30	35	37	23	20
	Set ups for Reablement from community referrals by Home First	42	50	46	60	46	47	44	57	41	58	46	56	67	52	55	63	61	65	72	94	76	75	113	93	93
	Referrals into Urgent Community Response																					627	681	716	665	839
	D2A referrals from bed-based settings (Home First)	229	190	237	214	224	248	190	200	227	226	573	360	337	348	466	389	369	415	339	469	395	447	475	411	428
	Social work referrals from bed-based settings	231	191	200	208	188	180	166	175	202	223	500	447	414	421	442	357	460	431	433	409	338	405	462	369	396
	Fiennes UCC attendances	3849	1608	1332	1625	1555	1501	1568	1659	1720	1628	1542	1419	1728	1896	1824	1501	1682	1421	1524	1964	1983	2043	2065	1807	1659
	City UCC referrals	706	552	836	867	840	750	1018	1305	1117	1139	1340	1337	1360	1229	1259	1335	1622	1230	1289	1683	1882	1588	1486	1340	1314
	MIU and FAU referrals: Total	4133	3999	4868	5172	4644	4523	4709	4500	4208	3672	3969	3973	4645	4389	5137	4407	4817	4647	4627	4517	4184	3726	3979	3733	4865
	MIU referrals: Abingdon	1851	1766	2147	2330	2111	2000	2181	2105	1912	1630	1784	1828	2067	1954	2278	1938	2180	1997	2115	2129	1936	1632	1787	1758	2190
	MIU referrals: Henley	842	792	946	1035	968	938	875	969	870	743	830	748	958	894	1040	924	997	1024	967	903	827	797	792	701	1005
	MIU referrals: Witney	1351	1279	1612	1614	1417	1469	1516	1325	1318	1229	1267	1288	1490	1395	1612	1375	1517	1458	1416	1341	1326	1187	1292	1180	1534
	FAU referrals: Bicester	89	162	163	193	148	116	137	101	108	70	88	109	130	146	207	170	123	168	129	144	95	110	108	94	136
	Acute SDEC: total	2910	2733	3216	3060	3030	3194	3286	3381	3364	3164	3418	3215	3336	3245	3520	3228	3388	3170	3293	3724	3232	3274	3454	3045	3511
	Acute SDEC: H-WD Rowan AU	426	355	490	430	414	416	448	444	452	419	470	452	493	496	548	472	516	449	470	578	512	485	522	493	531
	Acute SDEC: J-WD AAU	1605	1347	1580	1449	1455	1508	1610	1707	1765	1650	1739	1597	1656	1624	1712	1604	1618	1583	1603	1808	1559	1634	1671	1514	1666
	Acute SDEC: J-WD SEU triage	879	783	886	929	885	981	951	937	875	833	940	907	921	861	961	895	971	897	953	1011	895	885	968	780	986
	Acute SDEC: J-WD Child CDU		248	260	252	276	289	277	293	272	262	269	259	266	264	299	257	283	241	267	327	266	270	293	258	328
	Acute SDEC Specialty: C-WD OncHTriage	206	196	228	216	209	233	220	232	240	220	246	206	212	192	208	213	232	235	199	233	229	228	237	215	233
	Acute SDEC Specialty: C-WD UrolTriage	206	184	232	187	214	217	252	240	226	193	226	189	215	211	229	205	237	277	203	233	256	239	265	246	280
	Acute SDEC Specialty: C-WD GPRU	110	112	101	93	79	76	98	85	78	88	87	87	85	103	76	89	84	99	78	81	110	93	97	88	82
	Acute SDEC Specialty: J-WD Gyn Triage	356	314	306	303	344	325	307	325	316	320	359	326	386	344	320	312	380	336	326	296	266	266	347	254	282
	Acute SDEC Specialty: J-WD Maty AU	369	352	337	387	408	396	370	453	355	371	366	374	392	357	400	371	369	353	388	431	378	422	414	384	431
	Community SDEC: total					218	255	252	272	274	259	311	323	286	303	217	263	277	234	237	289	328	328	311	253	313
	Community SDEC: Abingdon EMU					81	104	113	114	118	107	140	128	124	108	87	90	123	89	98	110	119	130	116	91	131
	Community SDEC: Witney EMU					84	98	80	95	86	97	103	122	109	128	87	107	97	51	84	101	140	131	124	102	124
	Community SDEC: RACU					53	53	59	63	70	55	68	73	53	67	43	66	57	94	55	78	69	67	71	60	58

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System area	Indicator	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
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	A&E 4hr performance - Type 1	57.7%	64.8%	64.9%	61.0%	62.5%	63.0%	57.5%	55.0%	50.8%	53.2%	57.1%	58.7%	67.3%	66.1%	67.1%	66.6%	72.1%	69.1%	65.3%	59.9%	59.6%	57.0%	63.9%	61.9%	59.8%
	A&E 4hr performance - Day (8am to 5pm)	67.1%	73.8%	75.0%	72.3%	73.4%	72.7%	69.3%	66.5%	62.8%	63.2%	68.5%	70.3%	76.3%	76.3%	79.1%	79.0%	81.6%	80.2%	76.8%	73.2%	72.3%	69.9%	74.2%	72.9%	71.1%
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	A&E 4hr performance - Weekdays	58.8%	64.9%	66.0%	63.2%	61.3%	62.9%	57.7%	56.6%	50.8%	52.7%	57.3%	58.7%	65.8%	66.5%	67.6%	66.1%	71.7%	69.3%	64.9%	60.1%	59.3%	59.7%	63.9%	61.7%	59.8%
	A&E 4hr performance - Weekends	62.4%	69.5%	67.6%	60.6%	70.2%	69.9%	62.9%	57.2%	56.8%	60.3%	63.6%	64.8%	75.4%	69.7%	71.1%	71.8%	77.3%	72.3%	70.8%	65.4%	65.6%	55.8%	69.5%	67.0%	64.3%
	A&E 12hr performance (all attendance types)	93.6%	96.8%	97.0%	96.6%	97.0%	96.4%	95.0%	94.2%	93.0%	92.7%	93.2%	93.7%	95.0%	95.8%	96.2%	96.7%	97.2%	95.7%	95.8%	95.3%	94.6%	94.2%	94.5%	95.1%	96.0%
	A&E 12hr trolley waits (DTA to admission)	0	4	0	0	0	0	0	0	0	3	0	1	1	0	1	0	0	0	0	0	2	0	0	0	3
Ambulance	OUH Percentage of ambulances with turnaround time >30 minutes	13.6%	5.1%	6.6%	5.5%	7.3%	9.2%	11.8%	13.6%	10.9%	11.6%	10.9%	10.9%	8.9%	7.8%	7.9%	7.39%	6.9%	8.5%	7.5%	10.7%	11.7%	10.5%	9.6%	8.3%	
	OUH Percentage of ambulances with turnaround time >60 minutes	2.3%	0.5%	0.4%	0.3%	0.5%	0.8%	0.7%	1.9%	1.1%	1.4%	1.0%	1.3%	0.7%	0.4%	0.8%	0.81%	0.5%	0.8%	0.5%	1.1%	1.3%	0.8%	0.5%	0.5%	
	OUH average ambulance handover time (h:mm:ss)		0:16:14	0:17:09	0:16:57	0:17:42	0:18:43	0:19:47	0:21:00	0:19:27	0:19:54	0:19:47	0:19:09	0:18:39	0:17:46	0:18:07	0:17:48	0:17:14	0:17:59	0:18:24	0:19:13	0:19:53	0:20:07	0:19:23	0:18:17	
In hospital	OUH G&A bed occupancy	96.5%	95.2%	95.6%	93.6%	93.0%	93.5%	94.7%	95.1%	96.5%	94.9%	95.7%	95.5%	95.7%	95.2%	92.7%	93.1%	93.95%	92.52%	93.39%	94.10%	94.68%	93.83%	94.95%	95.11%	94.00%
	OUH ALOS while Medically Fit for Discharge (MOFD)	6.7	5.9	6.4	6.4	6.0	6.6	6.8	6.3	6.1	5.9	7.1	8.2	6.7	6.7	6.7	6.3	7.0	5.7	5.8	6.4	6.1	5.4	5.7	6.5	5.5
	OUH Average number of MOFD patients per day	68	87	85	94	87	87	79	83	96	104	120	125	95	98	96	91	87	90	92	99	90	113	121	99	90
Discharge	Percentage of patients discharged before 12:00	17.6%	17.5%	17.7%	18.3%	18.3%	17.1%	16.8%	18.3%	17.7%	18.2%	18.3%	17.4%	16.4%	15.7%	17.4%	17.1%	17.00%	17.03%	15.76%	17.01%	16.71%	17.90%	18.70%	18.05%	17.31%
	Percentage of patients discharged before 17:00	59.9%	58.9%	59.2%	59.0%	61.4%	59.8%	59.5%	61.0%	60.3%	60.4%	60.9%	61.9%	60.5%	58.8%	59.6%	58.3%	60.38%	57.97%	56.79%	60.92%	59.56%	60.13%	60.72%	61.01%	60.85%
	Total discharges from OUH inpatient wards: Pathway 0	4968	4768	5184	5114	4982	4962	5029	5003	5130	4930	4628	4260	4743	4425	4811	4726	4916	4839	4690	5048	5009	4666	4652	4131	4802
	Total discharges from OUH inpatient wards: Pathway 1	291	257	280	295	272	262	238	286	328	298	333	237	293	273	278	254	259	291	246	299	267	265	314	252	297
	Total discharges from OUH inpatient wards: Pathway 2	240	235	222	244	233	244	216	216	230	225	214	215	217	186	226	212	207	199	195	223	192	213	228	220	234
	Total discharges from OUH inpatient wards: Pathway 3	196	181	149	191	177	160	142	156	155	159	166	169	168	174	138	123	108	95	130	123	97	84	29	32	28
	Percentage of OUH patients aged 18+ discharged on pathway 0 or 1	89.8%	89.5%	91.3%	89.6%	90.1%	90.7%	91.5%	91.1%	91.0%	90.7%	90.7%	90.4%	90.8%	91.1%	91.4%	92.0%	92.90%	93.30%	92.03%	92.36%	93.51%	92.48%	92.67%	92.81%	93.55%
	% reablement outcomes: reaching independence	72.2%	71.6%	77.4%	77.7%	86.8%	83.2%	80.0%	79.8%	79.5%	82.2%	77.3%	75.0%	66.1%	69.2%	72.0%	69.4%	71.73%	71.50%	72.40%	74.00%	81.94%	71.98%	76.97%	73.00%	76.00%
	% reablement outcomes: reduction in care needs	88.2%	92.2%	90.8%	88.6%	96.2%	90.4%	92.2%	92.1%	93.0%	92.1%	85.9%	86.0%	83.5%	86.4%	85.4%	83.1%	78.53%	87.85%	84.90%	84.68%	91.63%	83.19%	86.84%	87.78%	85.27%
	JR: Days at OPEL 1	2	9	11	9	12	13	5	7	0	3	0	3	2	10	7	10	11	8	3	2	2	3	3	3	4
	JR: Days at OPEL 2	5	8	10	14	14	15	13	6	12	4	0	6	11	6	14	12	9	13	9	9	5	8	10	10	18
	JR: Days at OPEL 3	24	13	10	6	5	3	10	17	16	21	21	20	18	14	10	8	11	10	18	20	23	20	18	15	9
	JR: Days at OPEL 4	0	0	0	1	0	0	2	1	2	3	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	HH: Days at OPEL 1	3	9	14	9	12	15	11	8	2	4	6	12	13	10	24	24	24	28	24	22	19	9	14	16	19
	HH: Days at OPEL 2	8	7	12	16	9	8	10	6	10	4	7	4	8	7	5	5	4	3	5	7	7	9	11	6	9
	HH: Days at OPEL 3	19	14	5	10	10	8	9	15	15	19	9	13	10	13	2	1	3	0	1	2	4	13	5	6	3
	HH: Days at OPEL 4	1	0	0	1	0	0	0	2	3	4	9	0	0	0	0	0	0	0	0	0	0	0	1	0	0

The formatting of the report uses a heat map-based approach to highlight performance for each month relative to performance within the time series. For example, ED performance that is red will be at a level when it is lower than average, and green when above average, within the time period. The heat-map methodology, therefore, does not indicate whether any indicator is achieving target or at a level that meets expectations with respect to quality, efficiency or productivity. The purpose is to highlight visually how clusters of indicators change (improving or deteriorating) relative to other indicators. From this view the dashboard shows the relative importance of the indicators on ED performance. We are committed to ensuring that everyone can access this document as part of the Accessible Information Standard. If you have any difficulty accessing the information in this report, please contact us.