Caring at its best

# Quality and Performance

**Trust Board** 

Thursday 7th April 2011

February 2011

One team shared values

# **QUALITY and PERFORMANCE REPORT**

# Index

	Executive Scorecards
Pages 3 and 4	"UHL at a Glance"
Page 5	Quarterly Foundation Trust Compliance Framework
Page 6	CQC Service Performance
Pages 7 to 10	History / Trend Overview
	Analysis and Commentary
Page 11	Infection Prevention
Page 12	Mortality
Page 13	Readmissions
Page 14	Falls and Pressure Ulcers
Page 15	Patient Experience
Page 16	Emergency Department
Page 17	Referral to Treatment
Page 18	Primary PCI and Same Sex Accommodation
Page 19	Cancer Treatment
Page 20	Human Resources
Page 21	Value for Money - Executive Summary
Page 22	Income and Expenditure
Page 23	Forecast Report
Page 24	Income and Expenditure - Divisional Position
Page 25	Cost Improvement Programme
Page 26	Balance Sheet

Cash Flow

Capital Budget

#### **Thresholds**

Pages 29 and 30

Page 27

Page 28

Where available indicators are measured against national thresholds and targets, locally agreed commissioner targets and standards set by the Trust.

Measures, Targets and Thresholds

In addition to a performance being measured against a target the status are designed to give an indication of the underlying trends. An arrow pointing to the right indicates an improvement in performance and an arrow pointing to the left indicates a deterioration in performance.

# UHL at a Glance - Month 11 - 2010/11

PATIENT SAFETY	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Qualit
MRSA Bacteraemias	9	Feb-11	2	11	12	<b></b>
CDT Isolates in Patients (UHL - All Ages)	212	Feb-11	16	186	205	
% of all adults who have had VTE risk assessment on adm to hosp ***	90%	Feb-11	75%	59%		
Reduction of hospital acquired venous thrombosis ***						
Incidents of Patient Falls ***	2569	Feb-11	132	1895	2130	<b></b>
In Hospital Falls resulting in Hip Fracture ***	TBC	Feb-11	2	11		•
CLINICAL EFFECTIVENESS	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Qualit
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	93%	Jan-11	88.5%	93.1%	93.5%	
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	93%	Jan-11	98.0%	95.9%	95.5%	
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	96%	Jan-11	96.6%	97.0%	97.0%	
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	98%	Jan-11	100.0%	100.0%	100.0%	
31-Day Wait For Second Or Subsequent Treatment: Surgery	94%	Jan-11	94.7%	95.0%	95.0%	
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	94%	Jan-11	99.3%	99.5%	99.5%	
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	85%	Jan-11	85.2%	86.2%	86.0%	
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	90%	Jan-11	90.5%	91.4%	91.0%	
62-Day Wait For First Treatment From Consultant Upgrade	100%	Jan-11	100.0%	100.0%	100.0%	
Emergency 30 Day Readmissions (Following Elective Admission)	твс	Jan-11	5.2%	5.1%		
Mortality (UHL Data) - Elective		Feb-11	0.1%	0.1%		
Mortality (CHKS - Risk Adjusted) - Elective		Feb-11	63.1			
Mortality (UHL Data) - Non Elective		Feb-11	2.5%	2.5%		
Mortality (CHKS - Risk Adjusted) - Non Elective		Feb-11	74.4			
Primary PCI Call to Balloon <150 Mins	75.0%	Feb-11	88.9%	87.1%	87.0%	<b></b>
Pressure Ulcers (Grade 3 and 4) ***	TBC	Feb-11	9	122		*
Trust Priorities  Data Quality Key : Process & Procedure Fully Documented	tient Level	·	Audit 👉	Dir	ector Sign Off	$\bigoplus$

QP - FEBRUARY 2011 Page 3

Patient Polling - rating the care you receive   Patient Polling   Patient Po	PATIENT EXPERIENCE	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quali
Beds Providing Same Sex Accommodation - Wards   100%   Feb-11   100.0%	npatient Polling - treated with respect and dignity ***	95.0	Feb-11	95.2			lack
Beds Providing Same Sex Accommodation - Intensivist   100%   Feb-11   100.0%   100	npatient Polling - rating the care you receive ***	91.0	Feb-11	86.1			lack
District   District	6 Beds Providing Same Sex Accommodation -Wards ***	100%	Feb-11	100.0%	100.0%	100.0%	<b></b>
District   Continue   Standard   Standard	6 Beds Providing Same Sex Accommodation - Intensivist ***	100%	Feb-11	100.0%	100.0%	100.0%	<b></b>
Duplanned Re-attendance Rate	D Waits - Leics	95%	Feb-11	94.1%	96.4%	96.1%	
Common   Department - 95th centile Type 1+2   C4Hrs   Feb-11   331   270	D Waits - UHL (Type 1 and 2)	95%	Feb-11	91.1%	94.1%		
Company	D Unplanned Re-attendance Rate	<5%	Feb-11	6.1%	6.0%		
Company	D Time in Department - 95th centile Type 1+2	<4Hrs	Feb-11	331	270		
Common   C	D Left Without Being Seen %	<5%	Feb-11	2.2%	2.4%		
Common   C	D Time to Initial Assessment - 95th centile		Feb-11				
TT 18 week - Non admitted	D Time to Treatment - Median			57	61		
TT 18 week - Non admitted	TT 18 week - Admitted	90%	Fah-11	91.1%	91 1%		
Complete   Complete						•	*
Comparison   Com						•	<b>*</b>
Come (£000's)   Come (£000's						•	*
Common   C							× ×
CT   Incomplete Median Wait (Weeks)   C=7.2   Feb-11   5.2   5.2							X
Come (£000's)   Come (£000's							
TAFF EXPERIENCE / WORKFORCE         Standard         Current Data Month Actual Month							X
Annual Forecast   Data du							
Standard   Standard			Month			Annual Forecast	Data Qua
Department   Standard   Standard   Standard   Month Actual   Mon							
Standard   Current Data   Month Actual   YTD   Annual Forecast   Data Questing Cost (£000's)   633,060   Feb-11   58,759   638,883   700,394     Deterating Cost (£000's)   593,810   Feb-11   55,770   600,690   656,253     Implus / Deficit (as EBIDTA) (£000's)   39,250   Feb-11   2,989   38,193   44,141     P (£000's)   27,328   Feb-11   2,798   27,705   30,911     Sash Flow (£000's)   14,455   Feb-11   18,358   18,358   10,250     Implus / Deficit (as EBIDTA) (£000's)   14,455   Feb-11   2   2   2     Implus / Deficit (as EBIDTA) (£000's)   27,328   Feb-11   2,798   27,705   30,911     Sash Flow (£000's)   14,455   Feb-11   2   2   2     Implus / Deficit (as EBIDTA) (£000's)   27,328   Feb-11   2,798   27,705   30,911     Sash Flow (£000's)   14,455   Feb-11   2   2   2     Implus / Deficit (as EBIDTA) (£000's)   27,328   Feb-11   2,798   27,705   30,911     Sash Flow (£000's)   14,455   Feb-11   2   2   2     Implus / Deficit (as EBIDTA) (£000's)   27,328   Feb-11   2,798   27,705   30,911     Sash Flow (£000's)   27,328   Feb-11   2   2   2     Implus / Deficit (as EBIDTA) (£000's)   27,328   Feb-11   2,798   27,705   30,911     Sash Flow (£000's)   27,328   70,912   27,705   30,911     Sash Flow (£000's)   27,328   70,705   30,911     Sash Flow (£000's)   27,328   70,705   30,911     Sash Flow (£000's)   27,328   70,705   30,911     Sash Flow (£000'	ickness absence						
Standard   Month Actual   Y1D   Annual Forecast   Data Qui	ppraisals	100%	Feb-11	90.1%	90.1%		
berating Cost (£000's)       593,810       Feb-11       55,770       600,690       656,253         burplus / Deficit (as EBIDTA) (£000's)       39,250       Feb-11       2,989       38,193       44,141         P (£000's)       27,328       Feb-11       2,798       27,705       30,911         ash Flow (£000's)       14,455       Feb-11       18,358       10,250         nancial Risk Rating       2       Feb-11       2       2         ay - Locums (£ 000s)       Feb-11       443       3,731         ay - Agency (£ 000s)       Feb-11       1,540       8,221         ay - Bank (£ 000s)       Feb-11       478       4,997         ay - Overtime (£ 000s)       Feb-11       37.5       396.9	/ALUE FOR MONEY	Standard		Month Actual	YTD	Annual Forecast	Data Qua
surplus / Deficit (as EBIDTA) (£000's)     39,250     Feb-11     2,989     38,193     44,141       P (£000's)     27,328     Feb-11     2,798     27,705     30,911       ash Flow (£000's)     14,455     Feb-11     18,358     18,358     10,250       nancial Risk Rating     2     Feb-11     2     2     2       nay - Locums (£ 000s)     Feb-11     443     3,731       nay - Agency (£ 000s)     Feb-11     1,540     8,221       nay - Bank (£ 000s)     Feb-11     478     4,997       nay - Overtime (£ 000s)     Feb-11     37.5     396.9	ncome (£000's)	633,060	Feb-11	,	638,883		
P (£000's)       27,328       Feb-11       2,798       27,705       30,911         ash Flow (£000's)       14,455       Feb-11       18,358       18,358       10,250         nancial Risk Rating       2       Feb-11       2       2       2         ny - Locums (£ 000s)       Feb-11       443       3,731 <td></td> <td></td> <td></td> <td></td> <td></td> <td>·</td> <td></td>						·	
ash Flow (£000's)     14,455     Feb-11     18,358     18,358     10,250       anancial Risk Rating     2     Feb-11     2     2     2       ay - Locums (£ 000s)     Feb-11     443     3,731       ay - Agency (£ 000s)     Feb-11     1,540     8,221       ay - Bank (£ 000s)     Feb-11     478     4,997       ay - Overtime (£ 000s)     Feb-11     378     2,651       btal Pay Bill (£ millions)     Feb-11     37.5     396.9							
nancial Risk Rating       2       Feb-11       2       2         ny - Locums (£ 000s)       Feb-11       443       3,731         ny - Agency (£ 000s)       Feb-11       1,540       8,221         ny - Bank (£ 000s)       Feb-11       478       4,997         ny - Overtime (£ 000s)       Feb-11       378       2,651         ntal Pay Bill (£ millions)       Feb-11       37.5       396.9							
Ay - Locums (£ 000s)       Feb-11       443       3,731         Ay - Agency (£ 000s)       Feb-11       1,540       8,221         Ay - Bank (£ 000s)       Feb-11       478       4,997         Ay - Overtime (£ 000s)       Feb-11       378       2,651         Stal Pay Bill (£ millions)       Feb-11       37.5       396.9				_			
ay - Agency (£ 000s)       Feb-11       1,540       8,221         ay - Bank (£ 000s)       Feb-11       478       4,997         ay - Overtime (£ 000s)       Feb-11       378       2,651         atal Pay Bill (£ millions)       Feb-11       37.5       396.9							
y - Bank (£ 000s)  Feb-11 478 4,997  y - Overtime (£ 000s)  Feb-11 378 2,651  ytal Pay Bill (£ millions)  Feb-11 37.5 396.9							
y - Overtime (£ 000s) Feb-11 378 2,651 tal Pay Bill (£ millions) Feb-11 37.5 396.9							
otal Pay Bill (£ millions) Feb-11 37.5 396.9							
	ost per Bed Day (£)		Feb-11	183	183		

QP - FEBRUARY 2011 Page 4

# QUALITY and PERFORMANCE REPORT - Month 11 - 2010/11

# QUARTERLY FOUNDATION TRUST COMPLIANCE FRAMEWORK

	QTR THRESHOLD	WEIGHTING	QT	R 1	QT	R 2	QT	TR 3	QTR 4 F	orecast	
			Actual	Score	Actual	Score	Actual	Score	Forecast	Score	İ
Acute Targets - National Requirements											
CDIFF	53	1.0	68	1.0	37	0.0	48	0.0	48	0.0	
MRSA	2	1.0	6	1.0	1	0.0	1	0.0	4	1.0	
31 day cancer :-											_
subsequent surgery	94%		94.2%		94.5%		96.2%		95.0%		
subsequent anti cancer drug treatments	98%	1.0	100.0%	0.0	100.0%	0.0	100.0%	0.0	100.0%	0.0	
subsequent radiotherapy (from 1 Jan 2011)	94%		99.3%		99.8%		99.5%		99.5%		
62 day cancer :-											
from urgent GP referral to treatment	85%	_	86.1%		86.3%		86.6%		86.0%		
from consultant screening service referral	90%	1.0	91.6%	0.0	90.3%	0.0	92.8%	0.0	90.5%	0.0	
Acute Targets - Minimum Targets											
31-day cancer wait from diagnosis to first treatment	96%	1.0	96.6%	0.0	97.2%	0.0	97.4%	0.0	96.6%	0.0	
Cancer: two week wait											
all cancers	93%		93.7%		93.8%		93.0%		93.2%		
for symptomatic breast patients (cancer not initially suspected)	93%	0.5	94.1%	0.0	96.9%	0.0	96.8%	0.0	97.5%	0.0	l
Screening all elective in-patients for MRSA	100%	0.5	100.0%	0.0	100.0%	0.0	100.0%	0.0	100.0%	0.0	
LLR ED 4hr wait	95%	0.5	97.8%	0.0	98.0%	0.0	94.9%	0.5	93.5%	0.5	<u> </u>
People suffering heart attack to receive thrombolysis within 60 mins of call	68%	0.5	100.0%	0.0	84.2%	0.0	80.0%	0.0	80.0%	0.0	
Performance Governance rating				2.0		0.0		0.5		1.5	

# QUALITY and PERFORMANCE REPORT - Month 11 - 2010/11

# CQC SERVICE PERFORMANCE

# CQC Service Performance - Indicators, weighting and scoring for Q2 2010/11 onwards

Quality of service	Thres	sholds		2010/11 pe	erformance		2010/11 score	!
Performance Indicator	Performing	Under- performing	Weighting for PF	Qtr 1 and Qtr 2	Qtr 1 to Qtr 3	Qtr 1 and Qtr 2	Qtr 1 to Qtr 3	Full Year Forecast
LLR Four-hour maximum wait in A&E	95%	94%	1	97.90%	96.90%	3	3	3
Cancelled ops - breaches of 28 days readmission guarantee	5.0%	15.0%	1	8.50%	9.20%	1	1	1
MRSA	0	>1SD*	1	7	8	0	0	0
C Diff	0	>1SD	1	105	153	3	3	3
RTT - admitted - median <sup>®</sup>	<=11.1		0.50	9.7	9.8	1.5	1.5	1.5
RTT - admitted - 95th percentile <sup>®</sup>	<=27.7		0.50	19.8	22.1	1.5	1.5	1.5
RTT - non-admitted including audiology (DAA) - median <sup>®</sup>	<=6.6		0.50	6.3	6.3	1.5	1.5	1.5
RTT - non-admitted including audiology (DAA) - 95th percentile <sup>@</sup>	<=18.3		0.50	17.1	17.1	1.5	1.5	1.5
RTT - incomplete - median	<=7.2		0.50	6.1	6.8	1.5	1.5	1.5
RTT - incomplete - 95th percentile	<=36		0.50	18.3	20.9	1.5	1.5	1.5
2 week GP referral to 1st outpatient	93%	88%	0.5	93.8%	93.5%	1.5	1.5	1.5
2 week GP referral to 1st outpatient - breast symptoms	93%	88%	0.5	95.4%	95.8%	1.5	1.5	1.5
31 day second or subsequent treatment - surgery	94%	89%	0.33	94.4%	95.1%	1	1	1
31 day second or subsequent treatment - drug	98%	93%	0.33	100.0%	100.0%	1	1	1
31 day diagnosis to treatment for all cancers	96%	91%	0.33	96.9%	97.1%	1	1	1
31 day second or subsequent treatment - radiotherapy Q4	94%	89%	0.25	99.5%	99.5%	n/a	n/a	0.75
62 day referral to treatment from screening	90%	85%	0.33	90.9%	91.5%	1	1	1
62 day referral to treatment from hospital specialist	85%	80%	0.33	100.0%	100.0%	1	1	1
62 days urgent GP referral to treatment of all cancers	85%	80%	0.33	86.2%	86.3%	1	1	1
Reperfusion : Primary Angioplasty (PPCI)^	75.0%	60.0%	0.5	83.3%	85.4%	1.5	1.5	1.5
Reperfusion : Thrombolysis^	68.0%	48.0%	0.5	91.7%	88.2%	1.5	1.5	1.5
2 week RACP	98%	95%	1	99.8%	99.8%	3	3	3
Patients that have spent more than 90% of their stay in hospital on a stroke unit	60%	30%	1	08/09 Sentinal	08/09 Sentinal	3	3	3
48 hours GUM access	98%	95%	1	100%	100%	3	3	3
Delayed transfers of care	3.5%	5.0%	1	1.4%	1.3%	3	3	3
Overall performance score threshold	7					2.67	2.67	2.67

#### Scoring values

Underperforming:	0
Performance under review:	1
Performing:	3

### Overall performance score threshold

Underperforming if less than	2.1
between	2.1 and 2.4
Performing if	2.4+

QP - FEBRUARY 2011 Page 6

# HISTORY / TREND OVERVIEW - Month 11 - 2010/11

# **PATIENT SAFETY**

Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target	Status	Page No
1	3	2	1	0	0	1	0	1	0	1	2	11	9	<b>V</b>	11
24	24	25	19	14	13	10	16	20	12	17	16	186	212	<b>^</b>	11
			40%	49%	51%	57%	61%	65%	64%	69%	75%		90%	<b>^</b>	
													ТВС		
202	225	219	212	118	175	205	211	148	127	123	132	1895	2569	•	14
0	0	3	0	0	0	1	0	0	3	2	2	11			
		24 24	24 24 25	24 24 25 19 40% 202 225 219 212	24 24 25 19 14 40% 49% 202 225 219 212 118	24     24     25     19     14     13       40%     49%     51%       202     225     219     212     118     175	24     24     25     19     14     13     10       40%     49%     51%     57%       202     225     219     212     118     175     205	24     24     25     19     14     13     10     16       40%     49%     51%     57%     61%       202     225     219     212     118     175     205     211	24     24     25     19     14     13     10     16     20       40%     49%     51%     57%     61%     65%       202     225     219     212     118     175     205     211     148	24     24     25     19     14     13     10     16     20     12       40%     49%     51%     57%     61%     65%     64%       202     225     219     212     118     175     205     211     148     127	24     24     25     19     14     13     10     16     20     12     17       40%     49%     51%     57%     61%     65%     64%     69%       202     225     219     212     118     175     205     211     148     127     123	24     24     25     19     14     13     10     16     20     12     17     16       40%     49%     51%     57%     61%     65%     64%     69%     75%       202     225     219     212     118     175     205     211     148     127     123     132	24     24     25     19     14     13     10     16     20     12     17     16     186       40%     49%     51%     57%     61%     65%     64%     69%     75%       202     225     219     212     118     175     205     211     148     127     123     132     1895	24     24     25     19     14     13     10     16     20     12     17     16     186     212       40%     49%     51%     57%     61%     65%     64%     69%     75%     90%       TBC       202     225     219     212     118     175     205     211     148     127     123     132     1895     2569	24     24     25     19     14     13     10     16     20     12     17     16     186     212       40%     49%     51%     57%     61%     65%     64%     69%     75%     90%       TBC       202     225     219     212     118     175     205     211     148     127     123     132     1895     2569     ▼

# **CLINICAL EFFECTIVENESS**

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target	Status	Page No
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	94.9%	94.0%	93.2%	94.6%	93.3%	93.5%	94.8%	93.3%	93.0%	94.5%	91.3%	88.5%		93.1%	93%	▼	19
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	96.8%	96.5%	95.4%	93.4%	93.5%	93.4%	98.3%	98.3%	97.7%	94.9%	98.4%	98.0%		95.9%	93%	▼	19
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	98.6%	97.2%	97.6%	96.0%	96.3%	98.2%	96.4%	97.0%	96.7%	97.3%	98.3%	96.6%		97.0%	96%	▼	19
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%	98%	<b>◆▶</b>	19
31-Day Wait For Second Or Subsequent Treatment: Surgery	96.4%	97.3%	100.0%	92.1%	94.0%	94.0%	91.4%	97.9%	97.8%	95.5%	95.3%	94.7%		95.0%	94%	▼	19
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	100.0%	100.0%	100.0%	98.7%	99.3%	99.2%	100.0%	100.0%	100.0%	99.4%	99.3%	99.3%		99.5%	94%	<b>◆▶</b>	19
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	85.8%	87.5%	85.9%	85.0%	87.1%	89.0%	82.8%	87.3%	85.5%	86.4%	88.1%	85.2%		86.2%	85%	▼	19
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	94.7%	96.0%	92.9%	87.2%	93.2%	91.4%	87.9%	91.5%	87.2%	91.1%	98.2%	90.5%		91.4%	90%	▼	19
62-Day Wait For First Treatment From Consultant Upgrade							100%		100%	100%	100%	100%		100%	100%		19

# HISTORY / TREND OVERVIEW - Month 11 - 2010/11

# CLINICAL EFFECTIVENESS (Continued)

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target	Status Page No
Emergency 30 Day Readmissions (Following Elective Admission)	5.0%	5.2%	5.0%	5.1%	4.9%	5.2%	5.3%	5.1%	5.2%	5.2%	5.4%	5.2%		5.1%	твс	13
Emergency 30 Day Readmissions (Following Emergency Admission)	11.4%	11.7%	11.6%	10.9%	11.1%	10.7%	11.7%	10.5%	10.5%	10.1%	10.1%	11.0%		10.8%	твс	13
Mortality (UHL Data) - Elective	0.1%	0.1%	0.2%	0.2%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	твс	12
Mortality (CHKS - Risk Adjusted) - Elective	68.8	93.3	95.9	112.6	95.9	72.3	101.7	93.3	104.8	86.0	78.9	61.7	63.1		твс	12
Mortality (UHL Data) - Emergency	2.5%	2.2%	2.2%	2.5%	2.5%	2.1%	2.0%	2.4%	2.6%	2.1%	3.1%	3.0%	2.5%	2.5%	твс	12
Mortality (CHKS - Risk Adjusted) - Emergency	76.6	70.0	69.6	78.4	74.4	70.6	69.4	76.5	81.8	67.9	88.0	78.3	74.4		ТВС	12
Primary PCI Call to Balloon <150 Mins	73.7%	81.8%	62.5%	95.5%	82.6%	73.3%	86.7%	94.1%	83.3%	95.7%	86.7%	96.3%	88.9%	87.1%	75%	▼ 18
Pressure Ulcers (Grade 3 and 4)							17	18	10	13	24	31	9	122	ТВС	14

# HISTORY / TREND OVERVIEW - Month 11 - 2010/11

# PATIENT EXPERIENCE

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target	Status	Page No
Inpatient Polling - treated with respect and dignity				95.3		95.8	94.4	94.9	95.5	94.6	96.2	95.2	95.2		95.0	<b>◆▶</b>	15
Inpatient Polling - rating the care you receive				85.8		86.6	83.8	85.9	82.5	85.5	85.8	86.7	86.1		91.0	lacksquare	15
% Beds Providing Same Sex Accommodation -Wards	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%	<b>4</b>	18
% Beds Providing Same Sex Accommodation - Intensivist	87.0%	87.0%	87.0%	87.0%	87.0%	87.0%	87.0%	86.0%	86.0%	89.0%	93.0%	95.0%	100.0%	100.0%	100%	<b>A</b>	18
A&E Waits - Leics	98.2%	97.5%	98.6%	97.6%	97.0%	98.4%	98.1%	97.3%	96.9%	94.9%	93.1%	92.9%	94.1%	96.4%	95%	<u> </u>	16
A&E Waits - UHL (Type 1 and 2)	95.9%	97.6%	97.8%	96.3%	95.3%	97.4%	96.7%	95.7%	94.8%	92.0%	89.2%	88.6%	91.1%	94.1%	95%		16
Unplanned 7 Day Re-attendance Rate	6.1%	5.9%	6.0%	6.1%	6.1%	5.9%	6.5%	6.2%	6.0%	5.5%	5.9%	6.0%	6.1%	6.0%	<5%	lacktriangledown	16
ED Time in Department - 95th centile Type 1+2	240	239	238	240	240	239	240	240	251	303	349	382	331	270	<240 Mins	lacktriangledown	16
Left Without Being Seen %	2.6%	2.2%	2.3%	2.5%	2.5%	2.4%	2.1%	2.5%	2.2%	2.5%	2.7%	2.1%	2.2%	2.4%	<5%	lacktriangledown	16
Time to Initial Assessment - 95th centile															<15 Mins		16
Time to Treatment - Median	62	66	63	66	59	59	56	62	63	69	65	55	57	61	<60 mins		16
RTT 18 week - Admitted	94.3%	95.3%	94.0%	94.3%	94.2%	94.2%	93.4%	91.5%	92.6%	92.1%	91.6%	91.5%	91.1%	91.1%	90%	▼	17
RTT 18 week - Non admitted	97.8%	97.8%	98.3%	98.3%	98.3%	98.0%	97.4%	96.4%	97.1%	98.3%	97.0%	96.9%	97.3%	97.3%	95%	<b>A</b>	17
RTT Admitted Median Wait (Weeks)			9.0	9.3	9.5	9.7	9.5	9.8	10.2	9.8	9.4	10.3	10.4	9.7	<=11.1	▼	17
RTT Admitted 95th Percentile (Weeks)			19.2	18.8	18.7	18.8	19.5	21.4	21.3	21.9	23.1	23.7	23.2	20.6	<=27.7	<b>A</b>	17
RTT Non-Admitted Median Wait (Weeks)			5.6	6.0	5.7	6.1	6.2	6.9	6.7	6.2	6.1	7.0	5.5	6.2	<=6.6	<b>A</b>	17
RTT Non-Admitted 95th Percentile (Weeks)			16.1	16.2	16.3	16.7	16.9	17.4	17.2	17.0	16.9	17.1	16.8	16.8	<=18.3	<b>A</b>	17
RTT Incomplete Median Wait (Weeks)			5.3	5.2	5.6	5.8	6.1	6.1	6.0	6.1	6.8	6.7	5.2	5.2	<=7.2	<b>A</b>	17
RTT Incomplete 95th Percentile (Weeks)			15.8	16.3	16.7	17.6	17.9	18.3	19.1	19.8	20.9	21.9	19.1	19.1	<=36.0		17

STAFF EXPERIENCE / WORKFOR	CE																
	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target	Status	Page
leadcount Reduction			138.4	54.4	82.6	49.7	70.4	20.9	23.7	4.6	0.7	-0.2	-4.3	440.9		$\blacksquare$	20
Sickness absence	3.8%	3.7%	3.2%	3.2%	3.3%	3.4%	3.2%	3.5%	3.8%	3.8%	4.8%	4.3%	4.1%	3.7%	3.0%		20
ppraisals	86.1%	84.9%	81.4%	73.2%	68.5%	72.7%	76.3%	81.4%	86.1%	90.1%	93.2%	91.3%	90.1%	90.1%	100%	$\overline{igcup}$	20
VALUE FOR MONEY																	
	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD			
ncome (£000's)											58,569	59,015	58,759	638,883			
Operating Cost (£000's)											54,865	55,342	55,770	600,690			
Surplus / Deficit (as EBIDTA) (£000's)											3,704	3,673	2,989	38,193			
CIP (£000's)											3,048	3,073	2,798	27,705			
Cash Flow (£000's)											9752	12,491	18,358	18,358			
Financial Risk Rating											2	2	2	2			
HR Pay Analysis																	
	Feb-10 £	Mar-10 £	Apr-10 £	May-10 £	Jun-10 £	Jul-10 £	Aug-10 £	Sep-10 £	Oct-10 £	Nov-10 £	Dec-10 £	Jan-11 £	Feb-11 £	YTD			
ocums (£ 000s)	423	409	445	303	314	391	369	404	365	401	279	421	443	3,731			
gency (£ 000s)	804	844	429	588	547	510	524	758	746	879	1,175	1,283	1,540	8,221			
ank (£ 000s)	446	520	464	468	453	516	481	518	560	523	514	540	478	4,997			
vertime (£ 000s)	362	370	319	246	138	224	212	248	254	276	300	304	378	2,651			
otal Pay Bill (£ millions)	36.4	36.0	36.0	36.0	35.7	35.6	35.0	35.9	35.9	36.4	36.1	36.7	37.5	396.9			
Average Cost per Bed Day																	

Cost per Bed Day (£)

#### INFECTION PREVENTION

#### **Performance Overview**

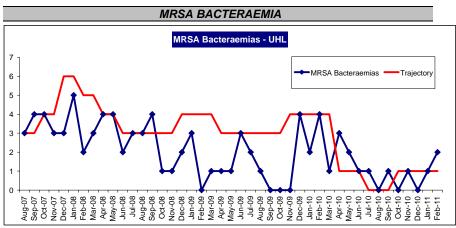
MRSA – The 2 cases reported for the month of February both relate to the same patient. The total for the year stands at 11. The number of C Difficile cases in February was 16 with a year to date figure of 186.

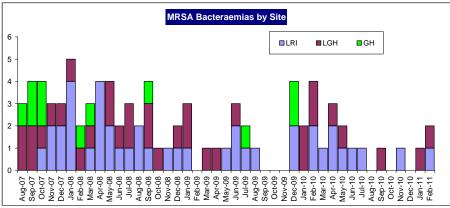
#### **Key Actions**

- All divisions continue to respond to the MRSA/CDIFF action plan and training is progressing as part of Chlorprep introduction.
- 2. Mandatory reporting has now commenced in relation to MSSA with E-coli to follow in April 2011.
- 3. Reporting for Non-elective MRSA screening has commenced and changes to testing methodology for C Difficile is now in place.

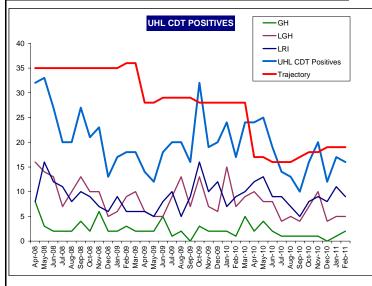
#### **Forecast**

MRSA forecast 12 cases against target of 9 CDIff forecast 205 case against target of 212

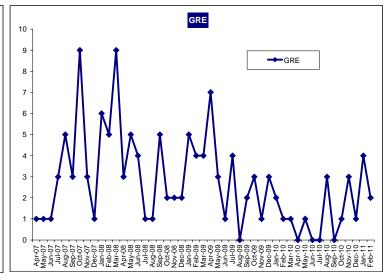




#### **CLOSTRIDIUM DIFFICILE - UHL CDT POSITIVES**



#### GLYCOPEPTIDE RESISTANT ENTEROCOCCUS (GRE)



TARGET / STANDARD	

OLI / OI ANDAND	<b>4</b>												
	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
MRSA	4	1	3	2	1	0	0	1	0	1	0	1	2
C. Diff.	17	24	24	25	19	14	13	10	16	20	12	17	16
Rate / 1000 Adm's	2.1	2.6	2.9	3.0	2.3	1.6	1.6	1.2	1.9	2.4	1.4	2.1	2.1

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
GRE	1	1	0	1	0	0	3	0	1	3	1	3	2
MSSA													
E-Coli													

#### **MORTALITY**

#### Performance Overview

#### **CHKS RISK ADJUSTED MORTALITY**

UHL's 'overall' standardised mortality rate continues to as expected. However, further analysis of data has identified an increase in 'elective mortality' during Q1 and therefore 'elective' and 'non elective' mortality rates are presented on this month's scorecard.

#### **Key Actions**

Following review of 'adjusted mortality' for elective admissions by the Clinical Effectiveness Committee, using both the dr Foster and CHKS tools, patient level details have been sent to all CBU Medical Leads to ask them to confirm accuracy of 'activity coding' as some diagnoses / procedures appear to be more in line with emergency activity.

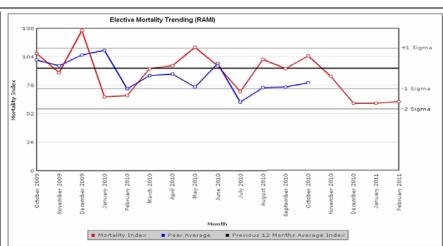
Where deaths are confirmed as 'elective admissions' the CEC have requested review of the patients' health record and any findings of 'M&M reviews' where these have taken place to be reported to the December CEC meeting.

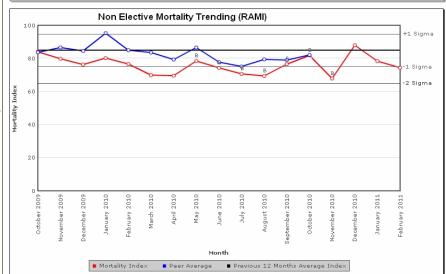
The CQC have confirmed that they have reviewed the information submitted regarding perinatal mortality (and neonatal admissions) and have confirmed that they do not need to undertake additional enquiries at this time.

The method for calculating and using hospital mortality ratios across the NHS in England will change in April 2011 following a national review. The new method, published by the NHS National Quality Board, is called the Summary Hospital-level Mortality Indicator (SHMIs). The indicator will be used by hospitals to help them better understand trends associated with patient deaths.

#### The SHMI indicator will:

- \* help ensure patient safety by providing an early trigger to probe potential problems;
- \* cover deaths relating to all admitted patients that occur in all settings including those occurring in hospital and those occurring 30 days post-discharge;
- \* apply to all NHS acute trusts except specialist hospitals, and
- \* adjust as far as possible for factors outside of a hospital's control that might impact on hospital mortality rates.





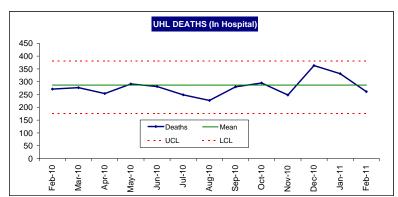
Peers used = Nottingham, Sheffield, Birmingham, Newcastle and Leeds

### CHKS - RISK ADJUSTED MORTALITY

	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
CHKS ELECTIVE Spells	8,950	8,682	8,097	8,214	8,240	9,500	8,188	8,226	8,799	8684	8186	8610	8458	8798	7740	7784	8067
CHKS ELECTIVE Deaths	13	9	15	7	7	11	11	16	13	10	11	11	12	9	8	5	6
CHKS ELECTIVE RAMI	107.1	89.5	128.1	67.4	68.8	93.3	95.9	112.6	95.9	72.3	101.7	93.3	104.8	86.0	78.9	61.7	63.1

	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
CHKS NON ELECTIVE Spells	10,492	10,178	10,574	10,084	9,861	11,050	10,199	10,222	10,130	10241	9863	10059	9849	10186	10572	10026	9416
CHKS NON ELECTIVE Deaths	243	231	252	306	244	240	219	243	233	204	187	237	253	202	319	288	224
CHKS NON ELECTIVE RAMI	84.0	79.8	76.3	80.2	76.6	70.0	69.6	78.4	74.4	70.6	69.4	76.5	81.8	67.9	88.0	78.3	74.4

· ·	CURRENT MO		
Clinical Business Unit	Spells	Deaths	%
Specialist Surgery	1618	5	0.3%
GI Medicine, Surgery and Urology	3262	34	1.0%
Cancer, Haematology and Oncology	1650	10	0.6%
Musculo-Skeletal	904	2	0.2%
Medicine	2113	120	5.7%
Respiratory	992	34	3.4%
Cardiac, Renal & Critical Care	1225	36	2.9%
Emergency Department	653	4	0.6%
Women's	4020	10	0.2%
Children's	1538	2	0.1%
Anaesthesia and Theatres	312	4	1.3%
Therapy, Phlebotomy and Central Outpatients	4		
Imaging	5		
Sum:	18296	261	1.4%



UHL CRUDE DATA TOTAL SPELLS
UHL Crude Data - TOTAL Spells
UHL Crude Data - TOTAL Deaths
Percent

UHL CRUDE DATA ELECTIVE SPELLS UHL Crude Data - ELECTIVE Spells UHL Crude Data - ELECTIVE Deaths
UHL Crude Data - ELECTIVE Spells
UHL Crude Data - ELECTIVE Deaths
Percent

UHL CRUDE DATA NON ELECTIVE SPELLS
UHL Crude Data - NON ELECTIVE Spells
UHL Crude Data - NON ELECTIOVE Deaths
Percent

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
ſ	18869	21391	19173	19277	19784	19860	18974	19627	19254	19895	19260	18665	18296
ſ	271	277	254	291	281	249	227	280	295	248	363	331	261
Ī	1.4%	1.3%	1.3%	1.5%	1.4%	1.3%	1.2%	1.4%	1.5%	1.2%	1.9%	1.8%	1.4%

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
	8240	9500	8181	8214	8792	8678	8178	8602	8449	8794	7743	7784	8067
	8	11	13	12	10	10	8	10	11	9	6	6	6
	0.1%	0.1%	0.2%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%
	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
Г	Feb-10 10629	Mar-10 11891	Apr-10 10992	May-10 11063	Jun-10 10992	Jul-10 11182	Aug-10 10796	Sep-10 11025	Oct-10 10805	Nov-10 11101	Dec-10 11517	Jan-11 10881	Feb-11 10229
				- /			3						

YTD	Target
212065	
3080	TBC
1.5%	TBC

YTD	Target
91482	
101	TBC
0.1%	TBC
	L
YTD	Target
120583	
2979	TBC

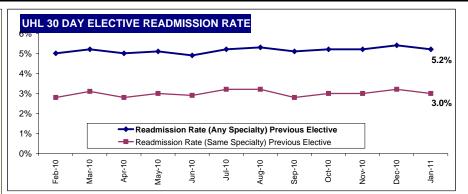
### **EMERGENCY READMISSIONS**

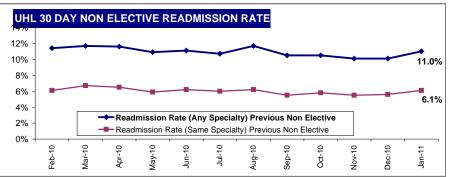
#### Performance Overview

The 2011-12 Operating Framework states that hospitals will not be reimbursed for emergency readmissions within 30 days of discharge following an elective admission, and all other readmissions within 30 days of discharge will be subject to locally agreed thresholds, set to deliver a 25% reduction, where possible.

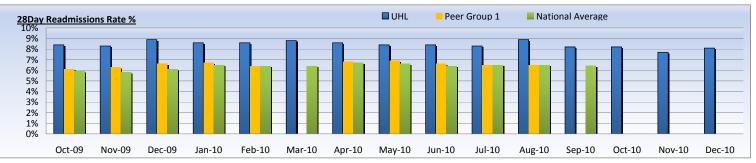
#### **Key Actions**

- 1. Discussion, analysis and review has commenced with commissioners to understand and implement the PbR guidance
- 2. Specialty based thresholds will be agreed as part of the 2011/12 contract negotiations with the commissioners.
- 3. CBUs are completing a review of the patient pathways and re-emphasising the importance of communication at discharge, ensuring all patients are given full explanation at the time of discharge.
- 4. Clinically appropriate Surgical and Medical bed bureau patients are now offered urgent outpatient appointments resulting in reduced admissions.
- 5. Project manager to be appointed in next few weeks.





CHKS Benchmarking - All 28 Day Emergency Readmission Rates - UHL, Peer Group of Similar Trusts and the National Average



# Peers used = Nottingham, Sheffield, Birmingham, Newcastle and Leeds - (HES data only available up until August 2010)

ALL READMISSIONS														
	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	YTD	Target
Discharges	18,869	21,391	19173	19,277	19,784	19,860	18,974	19,627	19,254	19,895	19,260	18,665	193,769	TBC
30 Day Emerg. Readmissions (Any Spec)	1625	1890	1680	1,623	1,655	1,648	1,702	1,594	1,574	1,576	1,576	1,599	16,227	TBC
Readmission Rate (Any Specialty)	8.6%	8.8%	8.8%	8.4%	8.4%	8.3%	9.0%	8.1%	8.2%	7.9%	8.2%	8.6%	8.4%	TBC
30 Day Emerg. Readmissions (Same Spec)	884	1081	948	903	931	944	927	850	875	873	901	897	9,050	TBC
Readmission Rate (Same Specialty)	4.7%	5.1%	4.9%	4.7%	4.7%	4.8%	4.9%	4.3%	4.5%	4.4%	4.7%	4.8%	4.7%	TBC
Redmissions - Previous Spell = El	<u>ective</u>													
	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	YTD	Target
Discharges	8,240	9,500	8,181	8,214	8,792	8,678	8,178	8,602	8,449	8,794	7,743	7,784	83,415	TBC
30 Day Emerg. Readmissions (Any Spec) Previous Elective	416	496	408	416	433	455	434	438	436	453	415	407	4,295	TBC
Readmission Rate (Any Specialty) Previous Elective	5.0%	5.2%	5.0%	5.1%	4.9%	5.2%	5.3%	5.1%	5.2%	5.2%	5.4%	5.2%	5.1%	TBC
30 Day Emerg. Readmissions (Same Spec) Previous Elective	233	290	229	247	252	277	261	244	250	262	251	237	2,510	TBC
Readmission Rate (Same Specialty) Previous Elective	2.8%	3.1%	2.8%	3.0%	2.9%	3.2%	3.2%	2.8%	3.0%	3.0%	3.2%	3.0%	3.0%	TBC
Redmissions - Previous Spell = No	n Electiv	e												
•	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	YTD	Target
Discharges	10,629	11,891	10,992	11,063	10,992	11,182	10,796	11,025	10,805	11,101	11,517	10,881	110,354	TBC
30 Day Emerg. Readmissions (Any Spec) Previous Elective	1,209	1,394	1,272	1,207	1,222	1,193	1,268	1,156	1,138	1,123	1,161	1,192	11,932	TBC
Readmission Rate (Any Specialty) Previous Non Elective	11.4%	11.7%	11.6%	10.9%	11.1%	10.7%	11.7%	10.5%	10.5%	10.1%	10.1%	11.0%	10.8%	TBC
30 Day Emerg. Readmissions (Same Spec) Previous Elective	651	791	719	656	679	667	666	606	626	611	650	660	6,540	TBC
Readmission Rate (Same Specialty)	C 40/	C 70/	C E0/	E 00/	C 20/	C 00/	C 20/	E E0/	E 00/	E E0/	E C0/	C 40/	F 00/	TDC

Previous Non Elective

#### **FALLS**

#### Performance Overview

Over the last 12 months the number of patient falls has shown a decline. There has been a slight increase in falls this month however the trajectory remains on target.

#### **Key Actions**

During the last year the UHL Falls Risk Assessment document and associated care plans have been designed and implemented.

Nursing Metrics now includes falls assessment.

Raised falls awareness in all staff groups has been achieved through training and development activities.

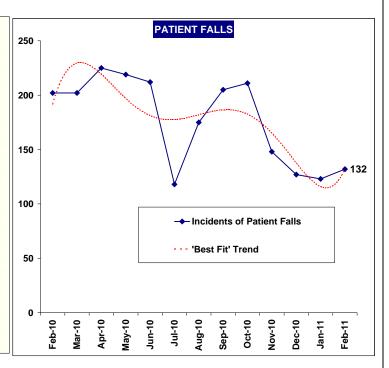
Plans continue to improve access to falls training via Divisional teams and via the planned "VITAL" initiative.

A strategic review of falls is currently in progress and will be linked to wider corporate performance management going forward.

#### Forecast

Based on 2010 patient falls data we are on track to achieve the end of year target. This months data supports this forcast.

Via the UHL Falls Group and Nursing Metrics there will continue to be heightened awareness in the prevention of patient falls.



#### TARGET / STANDARD

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target
Incidents of Patient Falls	202	202	225	219	212	118	175	205	211	148	127	123	132	1895	2569
In Hospital Falls resulting in Hip Fracture	0	0	0	3	0	0	0	1	0	0	3	2	2	11	

# PRESSURE ULCERS (Grade 3 and 4)

#### Performance Overview

The increase in December and January figures for 2010-11 corresponds to a rise in the same months in 2009-10. February shows a significant reduction. The Trust remains on course to see a decrease in hospital acquired pressure ulcers 3 and 4 for 2010-11.

#### Key Actions

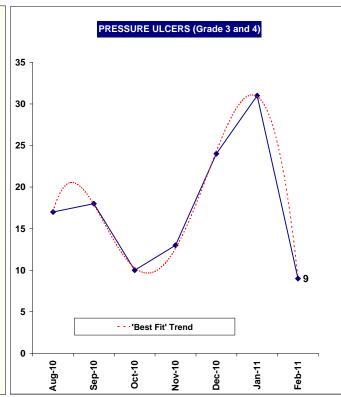
During April 2011, the Assistant Director of Nursing and Head of Nursing for Planned Care will be meeting ward managers from the Acute and Planned Divisions to discuss the following:-

- a) Confirmation of the themes of all grade 3 and 4 HAPUs that have occurred on each ward from April 2010 March 2011
- b) Seek assurance from ward managers that all action plans have been fully implemented with evidence of sustained improvements
- c) Agree thresholds and timescales for reductions of grade 3 and 4 HAPUs for every ward for 2011/12 (in line with the CQUIN)

Progress with improvement thresholds will be monitored on a monthly basis by the ADNS and Head of Nursing

#### Forecast

For the end of year data to demonstrate a sustained reduction in HAPUs



#### TARGET / STANDARD

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target
Pressure Ulcers (Grade 3							17	10	10	12	24	24	0	122	TBC
and 4)							17	10	10	13	24	31	9	122	160

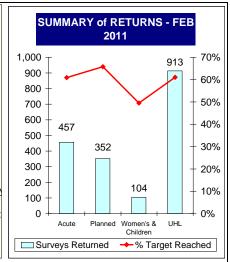
#### PATIENT EXPERIENCE

#### **Performance Overview**

The "Patient Experience Survey" has been running continuously now for 8 months

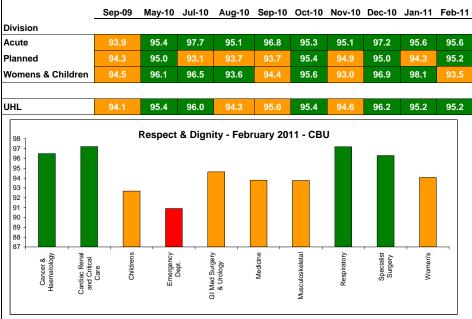
All Children's areas (inpatient) started to use the current survey format from 1st February 2011. Adult daycase areas started on 1st March 2011. The CBU Matron leads are supporting the areas to embed the new process. Overall the number of survey returns has increased this month, with Acute and Planned both improving their return rates. Divisions continue to emphasise the importance of gathering surveys in each CBU, this will be supported by the Patient Experience Team.

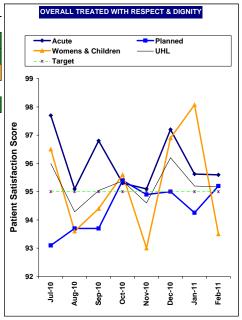
The overall care results have remained static this month with no real improvement in the overall UHL score. All areas continue to be engaged in discussions about future patient experience workstreams. The Divisional patient experience projects focus directly on areas that affect the answer to the overall care question. Respect and dignity scores remain green apart from Women's and Children's who have seen a slight decline.SSA perception responses in Womens around sharing facilities had a low score which affected the overall score. The area is all female so patient perception and the use of the SSA question will be reviewed by the Division.Cancer and Haematology have improved their score turning last months red back to green, this is a fantastic achievement. The Emergency Department score has deteriorated this month turning from green in Jan, to red in Feb, this has not impacted on Acute overall score. EDU now operates as EFU (Emergency Frailty Unit) due to the increase in elderly patients the CBU plan to increase the amount of surveys. HON and Matron ward rounds have been increased with a direct focus on privacy and dignity in the area. The results continue to be accessible for frontline staff via a one click link on INsite. (NB The targets/thresholds for the results have been set by the NPS national results with adjustments made to align this to UHL results as best as possible)



#### TARGET / STANDARD

Overall, did you feel you were treated with respect and dignity while you were in the hospital? (Paper surveys only)





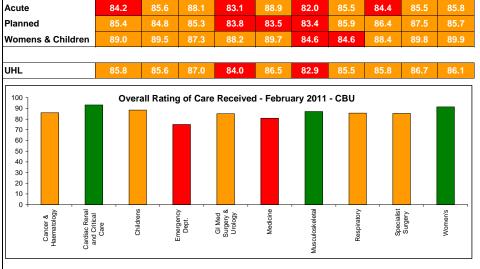
#### TARGET / STANDARD

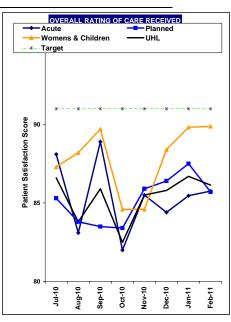
Division

Sep-09

Overall, how would you rate the care you received whilst in hospital? (Paper surveys only)

May-10 Jul-10 Aug-10 Sep-10 Oct-10 Nov-10 Dec-10 Jan-11 Feb-11





# **EMERGENCY DEPARTMENT**

#### Performance Overview

Performance for ED and Eye Casualty for February is 91.1%, with the year to date figure for ED and Eye Casualty at 94.1%. The year to date performance for LLR is 96.4%.

New A&E clinical quality indicators are being introduced in April 2011 to replace the 4 hour A&E operational standard. The purpose of the new set of indicators is to provide a balanced and comprehensive view of the quality of care, including outcomes, clinical effectiveness, safety and experience, as well as timeliness, and to remove the isolated focus on faster care. The indicators are:-

- 1) Ambulatory care (For cellulitis and DVT)
- 2) Unplanned 7 day re-attendance rate
- 3) Total time in the A&E department
- 4) Left without been seen rate
- 5) Service experience (Survey)
- 6) Time to initial assessment (Patients arriving by 999 ambulance)
- 7) Time to treatment
- 8) Consultant sign off (For certain high risk patient groups)

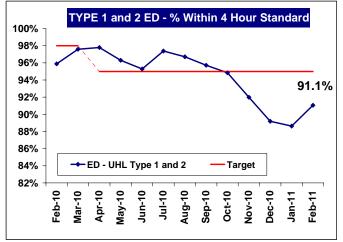
#### **Key Actions**

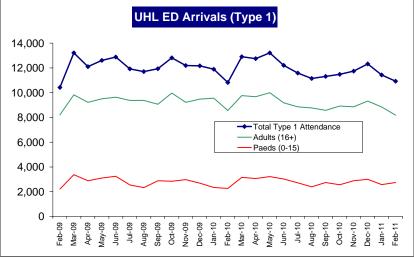
Actions are being progressed to deliver plans identified in the March Trust Board report.

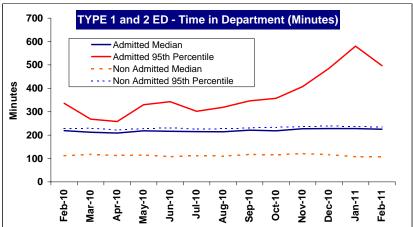
#### **Forecast**

LLR - Full year forecast based on latest performance 96.1%

N.B. LLR position is monitored on a quarterly basis by MONITOR and Year to Date by CQC







#### **Total Time in the Department**

#### February 2011 - ED Type 1 and 2

	Admitted	Not Admitted	Total
0-2 Hours	366	4735	5101
3-4 Hours	2468	3451	5919
5-6 Hours	428	189	617
7-8 Hours	216	42	258
9-10 Hours	108	9	117
11-12 Hours	57	5	62
12 Hours+	38	5	43
Sum:	3681	8436	12117

# 4 HOUR STANDARD

ED - Leics
ED - UHL Type 1 and 2
ED Waits - Type 1

Len-10	IVIAI-10	Api-10	May-10	Juli-10	Jul-10	Aug-10	3ep-10	OCI-10	INUV-1U	יט
98.2%	97.5%	98.6%	97.6%	97.0%	98.4%	98.1%	97.3%	96.9%	94.9%	93
95.9%	97.6%	97.8%	96.3%	95.3%	97.4%	96.7%	95.7%	94.8%	92.0%	89
95.5%	97.4%	97.6%	96.0%	94.8%	97.1%	96.3%	95.3%	94.3%	91.1%	88
•										

YTD	Target	Status
96.4%	95.0%	
94.1%	95.0%	
93.5%	95.0%	

90.0%

#### A&E Clinical Quality Indicators (ED and Eye Casualty)

	Score	Qtr1
Headline Measures		
95th Percentile overall time in A&E Dept	0.5	239
Unplanned reattendance at A&E with 7 days	0.5	6.1%
95th Percentile to initial assessment (ambulance arrivals)	0.5	56
Time for arrival to treatment - median waiting time	1	63
Left without being seen	1	2.4%

Qtr2	Qtr3	Qtr4
240	306	355
6.2%	5.8%	6.0%
41	52	54
59	65	57
2.3%	2.5%	2.2%

Target

# 18 WEEK REFERRAL TO TREATMENT

#### Performance Overview

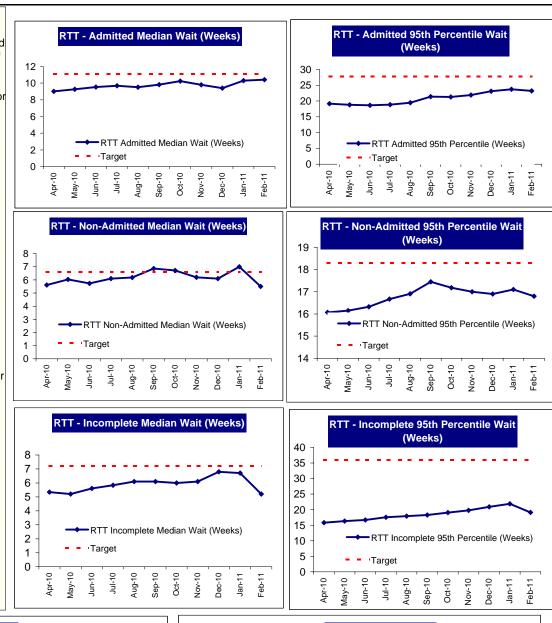
In February 91.1% was achieved for admitted patients (target of 90%) and 97.3% (target of 95%) for non-admitted patients.

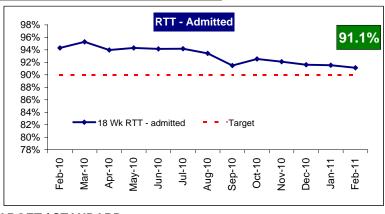
The 'Revision to the Operating Framework for the NHS in England 2010/11', published in June 2010, stated that performance management of the 18 weeks waiting time target by the Department of Health has ceased. New statistical measures, the median and 95th percentile RTT waiting times, are being published every month to enable a fuller package of measures for the NHS, patients and the public to monitor waiting times for NHS treatment.

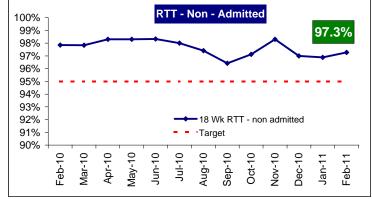
Early application shows achievement of the new measures and Divisional plans have been implemented to maintain this position.

#### **Key Actions**

Updated 18 week action plans are being implemented by Planned Care Division to improve the activity position in Qtr 4 in a number of specialties to respond to a number of competing pressures.







#### TARGET / STANDARD

KII	reb-10	Mai-10	Apr-10	May-10	Juli-10	Jui-10	Aug-10	Sep-10	Oct-10	1107-10	Dec-10	Jan-11	rep-11
18 Wk - admitted (%)	94.3	95.3	94.0	94.3	94.2	94.2	93.4	91.5	92.6	92.1	91.6	91.5	91.1
18 Wk - non admitted (%)	97.8	97.8	98.3	98.3	98.3	98.0	97.4	96.4	97.1	98.3	97.0	96.9	97.3
											-		
					Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11
RTT	Admitte	ed Medi	an Wai	t (Weeks)	9.5	9.7	9.5	9.8	10.2	9.8	9.4	10.3	10.4
								-					

19.5 23.2 RTT Non-Admitted Median Wait (Weeks) 5.7 6.1 5.5 6.1 6.2 6.2 **RTT Non-Admitted 95th Percentile (Weeks)** 16.7 16.9 17.4 17.0 16.9 17.1 16.8 6.0 6.1 6.8 5.2 **RTT Incomplete Median Wait (Weeks)** 5.6 5.8 6.1 6.1 6.7 RTT Incomplete 95th Percentile (Weeks) 17.6 17.9 18.3 19.1 19.8 20.9 19.1 16.7

YTD	Target
9.7	<=11.1
20.6	<=27.7
6.2	<=6.6
16.8	<=18.3
5.2	<=7.2
19.1	<=36.0

Target

90.0%

95.0%

Status

YTD

91.1

#### **PRIMARY PCI**

#### **Performance Overview**

Two key standards are presented by the Operating Framework for 2011/2012:

- 1. The percentage of eligible patients with acute myocardial infarction who receive Primary PCI within 150 minutes of calling professional help
- 2. The number of patients who receive thrombolysis where this is deemed to be the most effective treatment

Further to recent discussions between clinicians and EMAS, the chosen treatment for patients will focus on primary PCI and as such reporting of the thrombolysis target will cease.

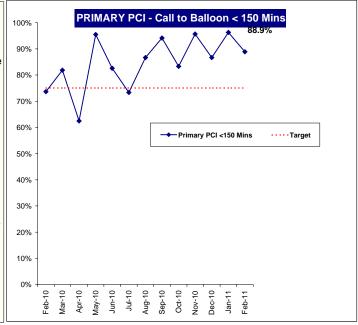
The percentage of eligible patients with acute myocardial infarction who received Primary PCI within 150 minutes of calling professional help in February was 88.9%% (16 out of 18 patients) against a target of 75%.

#### Key Actions

Monthly clinical MINAP meetings, at which both EMAS and Commissioners are invited, are held to review individual cases and agree actions to improve quality and performance.

#### **Forecast**

Primary PCI < 150 mins annual forecast of 87% against a target of 75%.



Feb-10 Mar-10 Apr-10 May-10 Jun-10 Jul-10 Aug-10 Sep-10 Oct-10 Nov-10 Dec-10 Jan-11 Feb-11

Primary PCI <150 N 73.7% 81.8% 62.5% 95.5% 82.6% 73.3% 86.7% 94.1% 83.3% 95.7% 86.7% 96.3% 88.9%

YTD Target

87.1% 75.0% ▼

#### SAME SEX ACCOMMODATION

#### **Performance Overview**

UHL wards and intensivist areas now offer Same Sex Accommodation (SSA) in line with the UHL SSA Matrix guidance. This guidance has been jointly agreed with our commissioners.

During March 2011 UHL declared full SSA compliance as part of the annual declaration.

### **Key Actions**

Endoscopy at the LRI are now able to fully deliver SSA following the completion of the

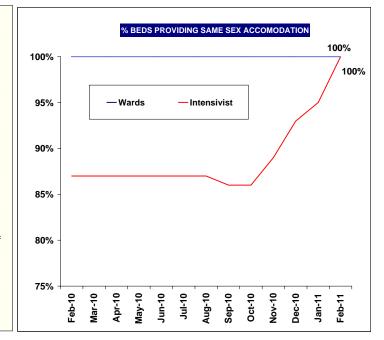
building works. SSA breaches ceased on the 18th of February 2011. All areas now have access to the SSA Matrix for future guidance. The SSA Matrix will be an integral part of the UHL bed management policy.

#### **Forecast**

Facilities for patients will be monitored by quarterly CBU vists, as part of the SSA estates plan agreed with our commissioners.

A financial penalty will be applied from April 2011 for any clinically unjustified breaches of the SSA guidance.

The Brain Injury Unit, LGH, will continue to report clinically justified breaches locally and will remain on long term Divisional plans.



#### TARGET / STANDARD

	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD	Target
Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Intensivist	87%	87%	87%	87%	87%	87%	87%	86%	86%	89%	93%	95%	100%	100%	100%

# CANCER TREATMENT

# **Performance Overview**

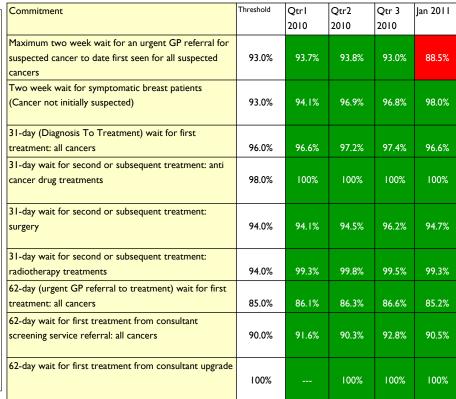
All cancer targets are delivering against performance thresholds in January with the exception of the 2 week wait standard, where patients choice in attending appointments and endoscopy capacity contributed significantly to the in month performance change.

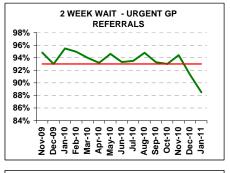
#### **Key Actions**

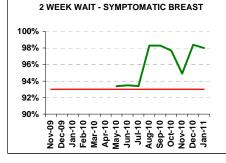
- 1. Actions to respond to patient cancellations during December and January are being addressed in conjunction with GPs through the development of patient information to emphasise to patients the importance of attending appointments.
- 2. Plans to increase Endoscopy capacity have been implemented.

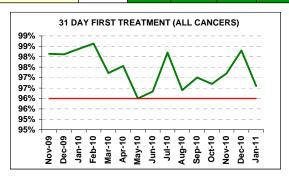
# **Forecast**

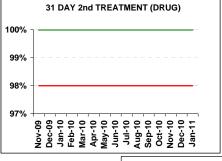
All cancer targets will be delivered for Qtr 4.

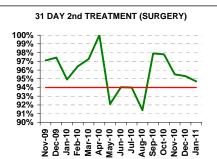


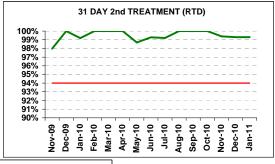


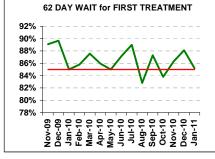


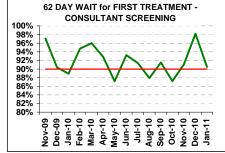












# STAFF EXPERIENCE / WORKFORCE

#### Performance Overview

#### **Appraisals**

Appraisal rates have increased significantly over the last 6 months from 68.5% in June 2010 to 93.2% in December. The rate for February is 90.1%, however, this slight reduction may be due to the fact that we are now reporting appraisals earlier.

#### Sickness

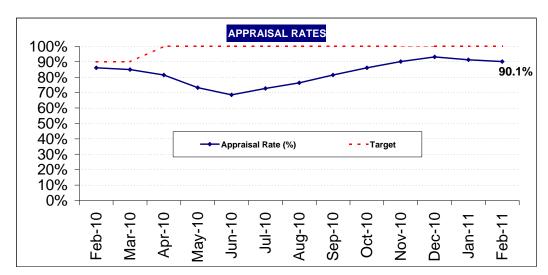
The current level of sickness at the date of reporting is 4.1% although the figure may actually reduce as earlier reporting appears to be adding about 0.4 % to the rate. A rate of 3.7% is in line with last year's sickness rate and is significantly higher than the Trust Target of 3%.

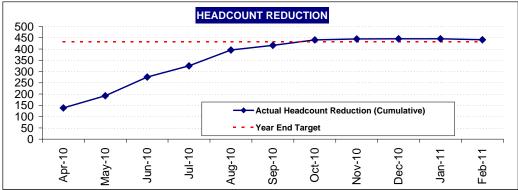
In December we reported a significant rise in the sickness level to 4.8% from 3.8% in the previous month We were hoping to benchmark our December increase against other Trusts in the East Midlands, unfortunately, this data is still not yet available from them.

It is worth noting that Pathology sickness rate is currently 1.95% having decreased from 2.27% in January - well below the Trust Target.

#### **Headcount Reduction**

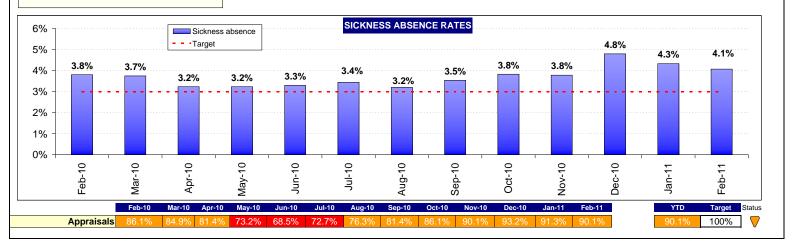
Progress continues in achieving and exceeding the headcount reduction with the planned reduction of 433.3 WTE delivering 440.9 realising a 7.6 WTE surplus.





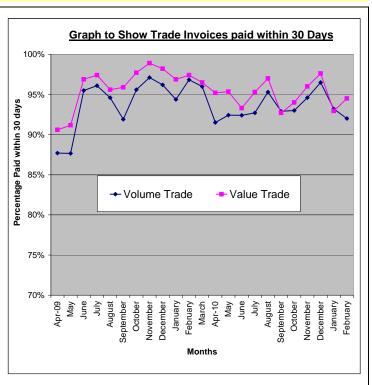
#### **Headcount Reduction**

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD
Planned	150.0	12.7	30.0	130.1	5.9	12.5	81.0	6.7	0.0	4.6	-0.3	433.3
Actual	138.4	54.4	82.6	49.7	70.4	20.9	23.7	4.6	0.7	-0.2	-4.3	440.9



# **VALUE FOR MONEY - EXECUTIVE SUMMARY**

Issues	Comments
Actual Income & Expenditure Year to Date	Cumulative income at Month 11 was £638.9 million (£5.8 million or 0.9% favourable to Plan). Cumulative expenditure (prior to impairment) was £640.1 million (£7.1 million adverse to plan). The actual net deficit of £1.2 million is £1.2 million adverse to the planned breakeven position. (£0.5 million at the end of January 2011)
Actual Income & Expenditure Year End Forecast	The Trust is currently forecasting a year end £1 million surplus (prior to impairment), in line with the planned £1 million surplus, subject to the risks described below.
Activity/Income	An over performance of £2.7 million is reported on patient care income against plan at the end of February 2011.
BPPC	The Trust achieved an overall 30 day payment performance of 95% for value and 92% for volume for trade creditors in February 2011. The cumulative position is 95% for value and 94% for volume.
Cost Improvement Programme	At Month 11, Divisions have reported £27.7 million of savings against the target of £27.3 million. The Divisions are currently forecasting delivery of £30.9 million at the year end.
Balance Sheet	Cash has increased but there are no other material changes to the balance sheet
Cash Flow	Cash balances are £4 million above plan due to the receipt of £8.5 million in advance from Leicester City PCT. This offsets the non payment of over activity invoices from LLR Commissioners.
Capital	The Trust continues to forecast delivery of the Capital Resource Limit.
Risks	Agreement has been reached with LLR commissioners on 2010/11 patient care income. This agreement supports delivery of the £1 million year end surplus position. However, this is now predicated on the Divisions delivering their month 12 forecast positions.



Financial Metrics		February	Year to	Date
	Weighting	Result	Result	Score
EBITDA achieved (% of plan)	10.0%	83.6%	97.3%	4
EBITDA margin (%)	25.0%	5.1%	6.0%	3
Return on assets (%)	20.0%	0.1%	2.7%	3
I&E surplus (%)	20.0%	-1.2%	-0.2%	2
Liquidity ratio (days)	25.0%	11	13	2
Overall Financial Risk Rating				2

EBITDA achieved (% of plan)
EBITDA margin (%)
Return on assets (%)
I&E surplus (%)
Liquidity ratio (days)

Risk Ratings Table									
5	4	3	2	1					
100%	85%	70%	50%	<50%					
11%	9%	5%	1%	<1%					
6%	5%	3%	-2%	<-2%					
3%	2%	1%	-2%	<-2%					
60	25	15	10	<10					

# **VALUE FOR MONEY - INCOME and EXPENDITURE ACCOUNT**

# Income and Expenditure Account for the Period Ended 28 February

	2010/11		February		Apri	I - February	2011	Commentary
	Annual	Plan	Actual	Surplus /	Plan	Actual	Surplus /	The overall cumula
	Plan £000	£ 000	£ 000	(Deficit) £ 000	£ 000	£ 000	(Deficit) £ 000	position (prior to im
Service Income	2000	2 000	2 000	2 000	2 000	2 000	2 000	actual deficit of £1.
NHS Patient Related	593,213	49,057	50,390	1,333	542,498	545,192	2,694	compared to a plar
Non NHS Patient Care	5,460	462	378	(84)	4,990	5,017	27	breakeven, and ref
Teaching, Research & Development	73,025	6,090	6,408	318	67,094	68,737	1,643	deficit position in F million adverse var
·		·					· ·	Illimorradverse var
Total Service Income	671,698	55,609	57,176	1,567	614,582	618,946	4,364	
Other operating Income	20,589	1,685	1,583	(102)	18,478	19,937	1,459	This cumulative po over performance of
Total Income	692,287	57,294	58,759	1,465	633,060	638,883	5,823	£5.8 million, offset
Operating Expenditure								overspend on expe
Pay	430,932	35,693	37,473	(1,780)	394,119	396,894	(2,775)	£7.1million.
,	-100,002	55,055		(1,700)	554,119		(2,110)	Non pay expenditu
Non Pay	217,226	18,005	18,719	(714)	199,441	204,005	(4,564)	cumulatively over s
Nonray	217,220	10,003	10,719	(714)	133,441	204,003	(4,304)	million. This reflect
								performance on CI
Central Funds	-	-		-			-	£1.4 million, oversp NICE/HCT budgets
Provision for Liabilities & Charges	273	22	(422)	444	250	(209)	459	, overspends on no
Total Operating Expenditure	648,431	53,720	55,770	(2,050)	593,810	600,690	(6,880)	there is an over red operating income /
								£0.7 million, and a
EBITDA	43,856	3,574	2,989	(585)	39,250	38,193	(1,057)	pressures / margin
Interest Receivable	101	9	5	(4)	93	64	(29)	additional activity,
Interest Payable	(581)	(52)	(48)	4	(537)	(417)	120	
Depreciation & Amortisation	(29,054)	(2,421)	(2,522)	(101)	(26,590)	(26,860)	(270)	
· ·	(20,004)	(2,721)	(2,522)	(101)	(20,030)	(20,000)	(270)	
Surplus / (Deficit) Before Dividend and Disposal of Fixed								
Assets	14,322	1,110	424	(686)	12,216	10,980	(1,236)	
Profit / (Loss) on Disposal of								
Fixed Assets	-	-		-			-	
Dividend Payable on PDC	(13,322)	(1,110)	(1,110)	-	(12,216)	(12,215)	1	
Net Surplus / (Deficit)	1,000	-	(686)	(686)	-	(1,235)	(1,235)	
EBITDA MARGIN	6.33%		5.09%		-	5.98%		
Impairment	1,387	-		-				
Net Surplus / (Deficit) after					1,387	1,119	268	
impairment	(387)	-	(686)	(686)	(1,387)	(2,354)	(967)	

lative Trust mpairment) is an I.2 million, anned eflects a £0.7m February (£0.7 ariance to plan).

osition reflects on income of t by an enditure of

ure is spent by £4.6 cts under CIP delivery of spends on ts of £0.9 million non pay where ecovery on / R&D income, additional cost nal cost of £1.6 million.

# **VALUE FOR MONEY - FORECAST REPORT**

	20010/11	April	- February 2	011	Mai	ch	April '	10 to March	2011
	Annual Plan	Plan	Actual	Surplus / (Deficit)	Plan	Forecast	Plan	Forecast	Surplus / (Deficit)
	£000	£ 000	£ 000	£ 000	£ 000	£ 000	£ 000	£ 000	£ 000
Service Income									
NHS Patient Related	593,213	542,498	545,192	2,694	50,715	52,312	593,213	597,504	4,29
Non NHS Patient Care	5,460	4,990	5,017	27	470	649	5,460	5,666	20
Teaching, Research and Development and Levies	73,025	67,094	68,737	1,643	5,931	6,675	73,025	75,412	2,38
Total Service Income	671,698	614,582	618,946	4,364	57,116	59,636	671,698	678,582	6,88
Other operating Income	20,589	18,478	19,937	1,459	2,111	1,875	20,589	21,812	1,22
Total Income	692,287	633,060	638,883	5,823	59,227	61,511	692,287	700,394	8,10
Pay	430,932	394,119	396,894	(2,775)	36,813	36,815	430,932	433,709	(2,77
Non Pay	217,226	199,441	204,005	(4,564)	17,785	18,781	217,226	222,786	(5,56
Central Funds	-	-	-	-	-		-	-	
Provision for Liabilities & Charges	273	250	(209)	459	23	5	273	(204)	47
Interest Receivable	(101)	(93)	(64)	(29)	(8)	(5)	(101)	(69)	(3:
Interest Payable	581	537	417	120	44	48	581	465	110
Depreciation & Amortisation	29,054	26,590	26,860	(270)	2,464	2,522	29,054	29,382	(32
Profit / (Loss) on Disposal of Fixed Assets	-	-	-	-	-		-	-	
Dividend Payable on PDC	13,322	12,216	12,215	1	1,106	1,110	13,322	13,325	(
Total Expenditure	691,287	633,060	640,118	(7,058)	58,227	59,276	691,287	699,394	(8,10
mpairment	1,387	1,387	1,119	268	-	5,000	1,387	6,119	(4,73
Net Surplus / (Deficit) after npairment	(387)	(1,387)	(2,354)	(967)	1,000	(2,765)	(387)	(5,119)	(4,73
					Impairment		1,387	6,119	(4,73
					Surplus / (Deexcluding im		1,000	1,000	

# **VALUE FOR MONEY - INCOME and EXPENDITURE - DIVISIONAL POSITION**

Income and Expenditure Po	osition for the P	eriod Ende	d 28 Feb	ruary 20	<u>11</u>								
	Inc	Income Year to Date			Expenditure Year to Date			Total Year to Date			Year End Forecast		
	Plan to Date £ 000	Actual to Date £ 000	Variance £ 000	Plan to Date £ 000	Actual to Date £ 000	Variance £	Plan to Date	Actual to Date £ 000	Variance £ 000	Annual Plan £ 000	Forecast £ 000	Variance £	
Acute Care	245,210	245,452	242	193,327	197,830	-4,503	51,883	47,622	-4,261	57,759	53,774	-3,985	
Clinical Support	28,063	28,880	817	114,652	115,382	-730	-86,589	-86,502	87	-94,380	-94,380	0	
Planned Care	189,902	187,766	-2,136	115,332	115,938	-606	74,570	71,828	-2,742	82,570	80,491	-2,079	
Women's and Children's	104,015	105,818	1,803	70,696	71,674	-978	33,319	34,144	825	36,854	37,460	606	
Corporate Directorates	14,769	15,549	780	96,519	96,800	-281	-81,750	-81,251	499	-89,282	-89,194	88	
Sub-Total Divisions	581,959	583,465	1,506	590,526	597,624	-7,098	-8,567	-14,159	-5,592	-6,479	-11,849	-5,370	
Central Income	51,101	55,418	4,317	0	0	0	51,101	55,418	4,317	53,537	59,445	5,908	
Central Expenditure	0	0	0	42,534	42,494	40	-42,534	-42,494	40	-47,445	-52,715	-5,270	
Grand Total	633,060	638,883	5,823	633,060	640,118	-7,058	0	-1,235	-1,235	-387			
							Impairme	nt		1,387	6,119		
							Surplus / impairme		xcluding	1,000	1,000	q	

# Commentary

The key Divisional issues for Month 11 centre around the Acute Care Division, which is forecasting a deficit of £3.99 million and the Planned Care Division with a deficit of £2.08 million.

# **VALUE FOR MONEY - COST IMPROVEMENT PROGRAMME**

# Cost Improvement Programme as at February 2011

										RISK RAT	ING OF FOREC	AST CIPS	
Division	Plan £	Forecast £	Variance £	YTD Plan £	YTD Achieved £	YTD % of Plan	Recurrent Forecast £	Non Rec Forecast £	YTD Achieved £	HIGH	MEDIUM	LOW	Forecast £
Acute Care	9,316,053	9,196,301	(119,752)	8,339,428	8,296,889	99.5%	6,974,310	2,221,991	8,296,889	41,974	261,714	595,724	9,196,301
Clinical Support	6,618,115	6,567,294	(50,821)	5,976,857	5,943,145	99.4%	5,095,636	1,471,658	5,943,145	112,942	291,846	219,361	6,567,294
Planned Care	5,812,483	6,393,431	580,948	5,175,761	5,605,872	108.3%	4,132,984	2,260,447	5,605,872	99,957	276,691	410,911	6,393,431
Women's and Children's	2,438,258	2,449,164	10,906	2,201,888	2,210,630	100.4%	1,554,249	894,915	2,210,630	45,027	40,515	152,992	2,449,164
Clinical Divisions	24,184,909	24,606,190	421,281	21,693,934	22,056,536	101.7%	17,757,179	6,849,011	22,056,536	299,900	870,766	1,378,988	24,606,190
Corporate	6,294,211	6,304,325	10,114	5,633,609	5,648,106	100.3%	5,628,134	676,191	5,648,106	129,854	116,821	409,544	6,304,325
Total	30,479,120	30,910,515	431,395	27,327,543	27,704,642	101.4%	23,385,313	7,525,202	27,704,642	429,754	987,587	1,788,532	30,910,515

Category	Plan £	Forecast £	Variance £	YTD Plan £	YTD Achieved £	YTD % of Plan	Recurrent Forecast £	Non Rec Forecast £
Income	1,097,769	1,581,522	483,753	981,390	1,459,807	148.7%	1,171,872	409,650
Non Pay	12,241,302	10,727,262	(1,514,040)	10,964,471	9,589,625	87.5%	9,193,875	1,533,387
Pay	17,140,049	18,601,731	1,461,682	15,381,682	16,655,210	108.3%	13,019,565	5,582,166
Total	30,479,120	30,910,515	431,395	27,327,543	27,704,642	101.4%	23,385,313	7,525,202

Division	Plan £	Additional Target £	Revised Target £	Forecast £	Variance against Target £
Acute Care	9,316,053	2,067,323	11,383,376	9,196,301	(2,187,075)
Clinical Support	6,618,115	628,346	7,246,461	6,567,294	(679,167)
Corporate	6,294,211	585,000	6,879,211	6,304,325	(574,886)
Planned Care	5,812,483	1,278,117	7,090,600	6,393,431	(697,169)
Women's & Children's	2,438,258	441,214	2,879,472	2,449,164	(430,308)
Total	30,479,120	5,000,000	35,479,120	30,910,515	(4,568,605)

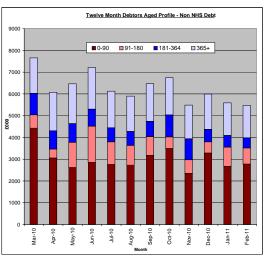
# Commentary

The opening plan (Corporate and Pay) has been adjusted by £2.3 million for the management restructure savings, as this shortfall was recognised in the Trusts opening income and expenditure plan, and has no impact on the actual and forecast position.

The forecast CIP position has deteriorated from the previous month by £0.3 million. The overall result is a £4.6 million shortfall. It remains vital that the Divisions deliver additional savings to ensure the delivery of the £1 million surplus.

# **VALUE FOR MONEY - BALANCE SHEET**

BALANCE SHEET	Mar-10 £000's Actual	Jun-10 £000's Actual	Jul-10 £000's Actual	Aug-10 £000's Actual	Sep-10 £000's Actual	Oct-10 £000's Actual	Nov-10 £000's Actual	Dec-10 £000's Actual	Jan-11 £000's Actual	Feb-11 £000's Actual	Mar-11 £000's Actual
Non Current Assets											
Intangible assets	4,483	4,194	4,095	3,994	3,884	3,784	3,685	4,444	3,776	3,671	4,498
Property, plant and equipment	417,046	417,154	416,915	417,944	418,146	417,733	415,322	416,348	415,917	414,892	415,295
Trade and other receivables	4,685	3,902	4,336	4,353	4,807	4,870	4,874	4,959	4,937	4,802	4,707
TOTAL NON CURRENT ASSETS	426,214	425,250	425,346	426,291	426,837	426,387	423,881	425,751	424,630	423,365	424,500
Current Assets											
Inventories	12,213	11,795	12,034	11,677	11,580	11,514	11,672	13,491	12,635	12,672	11,800
Trade and other receivables	37,263	27,423	24,564	29,081	24,907	26,304	24,612	23,370	23,380	21,142	24,168
Other Assets	198	14	52	200	0	21	51	95	28	68	198
Cash and cash equivalents	12,495	12,958	14,371	12,584	9,275	9,183	22,902	9,752	12,491	18,358	10,250
TOTAL CURRENT ASSETS	62,169	52,190	51,021	53,542	45,762	47,022	59,237	46,708	48,534	52,240	46,416
Current Liabilities											
Trade and other payables	(73,851)	(60,895)	(59,253)	(61,754)	(60,384)	(59,789)	(70,858)	(57,756)	(57,392)	(59,787)	(62,927
Dividend payable	0	(3,331)	(4,440)	(5,551)	0	(1,110)	(2,220)	(3,331)	(4,441)	(5,551)	(
Borrowings	(1,203)	(717)	(717)	(827)	(894)	(894)	(894)	(951)	(1,009)	(1,009)	(1,009
Provisions for liabilities and charges	(1,146)	(1,107)	(637)	(637)	(620)	(620)	(620)	(568)	(568)	(568)	(568
TOTAL CURRENT LIABILITIES	(76,200)	(66,050)	(65,047)	(68,769)	(61,898)	(62,413)	(74,592)	(62,606)	(63,410)	(66,915)	(64,504)
											1
NET CURRENT ASSETS (LIABILITIES	(14,031)	(13,860)	(14,026)	(15,227)	(16,136)	(15,391)	(15,355)	(15,898)	(14,876)	(14,675)	(18,088
											1
TOTAL ASSETS LESS CURRENT LIA	412,183	411,390	411,320	411,064	410,701	410,996	408,526	409,853	409,754	408,690	406,412
Non Current Liabilities											ii
Borrowings	(6,442)	(6,456)	(6,490)	(6,416)	(6,349)	(6,419)	(6,455)	(6,433)	(6,401)	(6,442)	(6,480
Other Liabilities	0	0	0	0	0	0	0	0	0	0	(
Provisions for liabilities and charges	(2,762)	(2,690)	(2,678)	(2,698)	(2,593)	(2,592)	(2,753)	(2,751)	(2,735)	(2,299)	(2,626
TOTAL NON CURRENT LIABILITIES	(9,204)	(9,146)	(9,168)	(9,114)	(8,942)	(9,011)	(9,208)	(9,184)	(9,136)	(8,741)	(9,106
TOTAL ASSETS EMPLOYED	402,979	402,244	402,152	401,950	401,759	401,985	399,318	400,669	400,618	399,949	397,306
Public dividend capital	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,90
Revaluation reserve	108,128	108,127	108,127	108,127	108,128	108,127	108,127	108,127	108,127	108,127	108,12
Donated Asset reserve	8,389	8,232	8,167	8,102	8,050	7,987	8,109	8,051	8,000	8,020	8,145
Government grant reserve	986	977	973	970	967	964	961	958	954	951	94
Other reserves	272	272	272	272	0	0	0	0	0	0	,
Retained earnings	11,301	10,733	10,710	10,576	10,711	11,004	8,218	9,630	9,634	8,947	6,182
TOTAL TAXPAYERS EQUITY	402,979	402,244	402,152	401,950	401,759	401,985	399,318	400,669	400,618	399,949	397,306



Type of Debtors	0-90 days	91-180 days	181-365 days	365+ Days	TOTAL
	£000s	£000s	£000s	£000s	£000s
NHS Sales ledger	8,444	2,736	-499	31	10,712
Non NHS sales ledger by division:					
Corporate Division	925	220	151	522	1,818
Planned Care Division	383	54	84	252	773
Clinical Support Division	337	48	58	48	491
Women's and Children's Division	144	65	61	164	434
Acute Care Division	981	358	112	503	1,954
Total Non-NHS sales ledger	2,770	745	466	1,489	5,470
Total Sales Ledger	11,214	3,481	-33	1,520	16,182
Other Debtors					
WIP (HRG4adjusted)					4,014
M11 SLA Phasing & Performance					2,808
Bad debt provision VAT - net					(2,049 1,059
Other receivables and assets					-804
				TOTAL	21,210

Invoice cycle time			Non-NHS days s (DSO)	ales outsta	nding
-	Feb-11 Days	Prior month Days	-	Feb-11 YTD Days	Prior month YTD
Requisition date to invoice raised	12	7	DSO (all debt)	97	100
Service to invoice raised	36	38	DSO (2010/11 debt)	66	74

### Commentary

Cash balances have increased by £5.9 million primarily due to the receipt of £8.5 million in advance from Leicester City PCT.

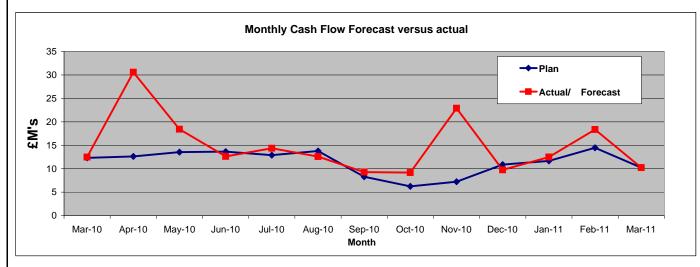
# **VALUE FOR MONEY - CASH FLOW**

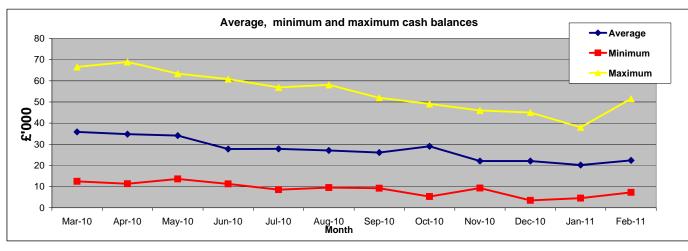
# CASH FLOW for the PERIOD ENDED 28 FEBRUARY 2011

#### Commentary

Cash balances are £4 million above plan due to the receipt of £8.5 million in advance from Leicester City PCT. This offsets the non payment of over activity invoices from Leicester City and County PCT's. The increase in the maximum cash balance reflects the timing of the SLA receipts and payment runs. There is no underlying change to cash balances.

	2010/11 April - February 2011 Actual £ 000
CASH FLOWS FROM OPERATING ACTIVITIES	
Operating surplus before Depreciation and Amortisation	38,193
Impairments and reversals	(1,119)
Movements in Working Capital:	
- Inventories (Inc)/Dec	(459)
- Trade and Other Receivables (Inc)/Dec	16,134
<ul> <li>Trade and Other Payables Inc/(Dec)</li> </ul>	(14,258)
- Provisions Inc/(Dec)	(578)
PDC Dividends paid	(6,664)
Interest paid	(400)
Other non-cash movements	272
Net Cash Inflow / (Outflow) from Operating Activities	31,121
CASH FLOWS FROM INVESTING ACTIVITIES	
Interest Received	68
Payments for Property, Plant and Equipment	(25,326)
Net Cash Inflow / (Outflow) from Investing Activities	(25,258)
Increase / (Decrease) in Cash	5,863





# **VALUE FOR MONEY - CAPITAL BUDGET**

# Capital Budget 2010/11 for the Period 1st April 2010 to 28th February 2011

				Actual		YTD	Forecast		
	Opening	Movement	Revised	Exp		Spend		Forecast	Variance to
	Plan £000's	£000's	Plan £000's	Apr-Jan £000's	Feb £000's	10/11 £000's	March £000's	Out Turn £000's	Revised Plan £'000's
FUNDING	2000 5	2000 5	£000 S	£000 S	2000 5	2000 S	2000 5	2000 S	£ 000 S
Depreciation as per CCE	26,008		26,008						
·	3,000		3,000						
Retained Funding	3,000		3,000						
Total Capital Resource Limit Funding	29,008	0	29,008	25,001	1,318	26,319	2,689	29,008	(
Disposals		19,059	19,059	0	0	0	35	35	19,024
Donations	150	200	350	239	81	320	180	500	-150
Total Other Funding	150	19.259	19,409	239	81	320	215	535	18,874
Total Funding	29,158	19,259	48,417	25,240	1,399	26,639	2,904	29,543	18,874
	-,	-,	- ,	-, -	,		,	-,	-,-
EXPENDITURE									
IM&T Schemes									
Sub Group Schemes	1,500	750	2,250	1,338	331	1,668	582	2,250	(
Total IM&T Schemes	1,500	750	2,250	1,338	331	1,668	582	2,250	(
Medical Equipment Schemes									
Sub Group Schemes	1,500	750	2,250	1,705	188	1,893	357	2,250	(
Total Medical Equipment	1,500	750	2,250	1,705	188	1,893	357	2,250	(
Total modical Equipment	.,		_,	1,100		1,000		_,	
Estates Schemes									
LRI Estates	2,500	-500	2,000	1,746	82	1,828	672	2,500	-500
LGH Estates	1,000		1,000	778	131	909	172	1,080	-80
GGH Estates	1,000	-93	907	380	86	466	385	851	56
Land Swap		19,616	19,616	3	0	3	3	5	19,611
Total Estates Schemes	4,500	19,023	23,523	2,907	298	3,205	1,231	4,437	19,086
Directly Funded Schemes									
Decontamination	1,700	-300	1,400	252	76	328	609	937	463
BRU	1,000	-186	814	859	-5	854	436	1,290	-476
NIHR MRI Scanner	2,205	95	2,300	1,717	13	1,729	571	2,300	(
Replacement Linear Accelerators	3,581		3,581	1,696	142	1,838	1,743	3,581	(
Neonatal Expansion	4,689		4,689	4,497	-59	4,439	250	4,689	(
MSK Theatres	4,826	-483	4,343	4,252	-11	4,242	58	4,300	43
MES Refurbishments	600	-100	500	368	3	370	280	650	-150
Stroke Relocation	1,000	-250	750	657	0	657	103	760	-10
GGH CDU Phase II	580	-480	100	0	15	15	45	60	40
Other IT Schemes	355	174	529	202	0	202	235	437	92
Other Medical Equipment Schemes	600	-29	571	585	0	585	0	585	-14
Other Facilities Schemes	372	95	467	303	2	305	212	517	-50
Donated Buildings & Equipment	150	200	350	239	81	320	180	500	-150
Total Directly Funded Schemes	21,658	-1,264	20,394	15,627	256	15,883	4,722	20,606	-212
Total Capital Programme	29,158	19,259	48,417	21,577	1,074	22,650	6,892	29,542	18,875
		,	,	,	.,	,	0,002	,	,

# Commentary

The Trust continues to forecast delivery of the Capital Resource Limit

# QUALITY and PERFORMANCE REPORT

PATIENT SAFETY					Thresholds	
	YTD : Cumulative or Current?	Target : Local or National?	Target			
MRSA Bacteraemias	Cumulative	CQUIN	9	>= 1		0
CDT Isolates in Patients (UHL - All Ages)	Cumulative	CQUIN	212	>= Monthly Target+3	Monthly Target+2	<= Monthly Target
% of all adults who have had VTE risk assessment on adm to hosp			90%			
Reduction of hospital acquired venous thrombosis			ТВС			
Incidents of Patient Falls In Hospital Falls resulting in Hip Fracture ***	Cumulative Cumulative	Local Target Local Target	2569			
CLINICAL EFFECTIVENESS					Thresholds	
Maximum two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	Cumulative	National Target	93.0%	<90%	90-93%	>=93%
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	Cumulative	National (With Effect 31st Dec 2009)	93.0%		<93%	>=93%
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	Cumulative	National Target	96.0%	<93%	93-96%	>=96%
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	Cumulative	National Target	98.0%	<95%	95-98%	>=98%
31-Day Wait For Second Or Subsequent Treatment: Surgery	Cumulative	National Target	94.0%	<91%	91-94%	>=94%
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	Cumulative	National Target	94.0%	<91%	91-94%	>=94%
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	Cumulative	National Target	85.0%	<80%	80-85%	>=85%
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	Cumulative	National Target	90.0%	<87%	87-90%	>=90%
62-Day Wait For First Treatment From Consultant Upgrade	Cumulative	National Target	100.0%	<97%	97-100%	=100%
Emergency 30 Day Readmissions (Following Elective Admission)	Current	Local Target	TBC			
Mortality (UHL Data) - Elective	Current	Local Target	TBC			
Mortality (CHKS - Risk Adjusted) - Elective  Mortality (UHL Data) - Non Elective	Current Current	Local Target Local Target	TBC TBC			
Mortality (CHKS - Risk Adjusted) - Non Elective	Current	Local Target	TBC			
Primary PCI Door to Balloon <150 Mins	Cumulative		75.0%	<60%	60-75%	>=75%
Pressure Ulcers (Grade 3 and 4)	Cumulative	Local Target	TBC			

# **INDICATORS, THRESHOLDS and TARGETS**

# **QUALITY and PERFORMANCE REPORT**

PATIENT EXPERIENCE		Thresholds				
	YTD : Cumulative or Current?	Target : Local or National?	Target			
Inpatient Polling - treated with respect and dignity	Current Month		95			>=95
Inpatient Polling - rating the care you receive	Current Month		91			>=91
% Beds Providing Same Sex Accommodation - Wards	Current Month	National Target	100%	<80	>80 and < 100	100.0%
% Beds Providing Same Sex Accommodation - Intensivist	Current Month	National Target	100.0%	<80	>80 and < 100	100.0%
A&E Waits - Leics	Cumulative	National Target	95.0%	<94%	94-95%	>=95%
A&E Waits - UHL (Type1 and 2)	Cumulative	Local Target	95.0%	<97%	94-95%	>=95%
RTT Admitted Median Wait (Weeks)	Cumulative		<=11.1			
RTT Admitted 95th Percentile (Weeks)	Cumulative		<=27.7			
RTT Non-Admitted Median Wait (Weeks)	Cumulative		<=6.6			
RTT Non-Admitted 95th Percentile (Weeks)	Cumulative		<=18.3			
RTT Incomplete Median Wait (Weeks)	Cumulative		<=7.2			
RTT Incomplete 95th Percentile (Weeks)	Cumulative		<=36.0			
STAFF EXPERIENCE / WORKFORCE	Ē					
Planned CIP reduction this month	Cumulative	Local Target	-433.5			
Sickness absence	Current Month	Local Target	3%	>4%	>3%<=4%	<=3%
Appraisals	Current Month	Local Target	100%	<90%	>=90%<100%	100%
VALUE FOR MONEY						
Income (£000's)	Cumulative	Local Target				
Operating Cost (£000's)	Cumulative	Local Target				
Surplus / Deficit (as EBIDTA) (£000's)	Cumulative	Local Target				
CIP (£000's)	Cumulative	Local Target				
Cash Flow (£000's)	Current Month	Local Target				
Financial Risk Rating	Cumulative	Local Target				