

Trust Board Paper E

	TRUST BOARD								
From:	Suzanne Hinchliffe Andrew Seddon Kevin Harris Kate Bradley								
Date:	5th APRIL 2012								
CQC regulation	All								
Title:	Quality & Performance Report								
Author/Responsible Director: S.Hinchliffe, Chief Operating Officer/Chief Nurse A. Seddon, Director of Finance K. Harris, Medical Director K. Bradley, HR Director									
Purpose of the Report: To provide members with an overview of UHL financial position, performance and quality against national, regional and local indicators for the month of February 2012.									
The Report is provided to the Board for: <table border="1" data-bbox="300 907 1173 1079"> <tr> <td>Decision</td><td></td> <td>Discussion</td><td>√</td> </tr> <tr> <td>Assurance</td><td>√</td> <td>Endorsement</td><td></td> </tr> </table>		Decision		Discussion	√	Assurance	√	Endorsement	
Decision		Discussion	√						
Assurance	√	Endorsement							
Summary / Key Points: <u>Financial Position</u> <ul style="list-style-type: none"> ❖ The Trust achieved a surplus in-month of £3m, thereby reducing the cumulative deficit to £5.1m (£5.5m adverse to Plan). ❖ Year to date patient care income is £13.7m (2.6%) ahead of plan. ❖ Expenditure is £24.4m over Plan year to date. This reflects a shortfall on the cost improvement programme of £12.3m and the use of significant premium agency staff in the first four months of the year. <u>Performance Position:</u> <ul style="list-style-type: none"> ❖ Performance for February Type 1, 2 is 89.5%%, and 91.6% including the Urgent Care Centre (UCC). The year to date performance for ED (UHL+UCC) is 94.2%. ❖ Admitted performance in February stands at 82.8% in accordance with the planned reduction agreed with commissioners. The non-admitted target has been achieved at 96.1%. ❖ The percentage of eligible patients with acute myocardial infarction who received Primary PCI within 150 minutes of calling professional help in February was 83.3%. ❖ Eight out of the nine cancer targets are delivering against performance thresholds for January, including the 62 day from referral to treatment target. ❖ The provisional reported sickness rate for February 4.5%. The 12 month rolling sickness rate is 3.5%. ❖ February maintained January's appraisal rate of 96.1%. 									

Quality

- ❖ MRSA – no cases of MRSA were reported during February with a year to date position of 7. One case following root cause analysis is suitable for appeal.
- ❖ CDifficile – a positive month 11 report with 6 cases identified. The year to date position is 97 and ahead of target to date (165 end of year).
- ❖ For the last eleven months, all UHL wards and intensivists areas continue to offer Same Sex Accommodation (SSA) in line with the UHL SSA Matrix guidance.
- ❖ Pressure ulcers - There were 12 reported hospital acquired grade 3 and 4 pressure ulcers in January 2012 – 9 avoidable.
- ❖ The 'overall respect and dignity' score remains green across the Trust. The 'overall how would you rate the care whilst in hospital' score remains amber across the Trust
- ❖ Mortality - UHL's mortality rate for February has risen slightly for 'overall crude mortality'. Review of UHL's mortality data for the past 5 years' suggests that this is in line with normal seasonal variation. Further analysis is being undertaken for review by the GRMC later this month
- ❖ CQUIN Following submission of further information to the Commissioners, UHL was considered to have fully or almost met the Quarter 3 thresholds for 51 of the 64 CQUIN indicators. The financial penalty for Quarter 3 is just under £140,000.
- ❖ Fractured Neck of Femur 'Time to Theatre' - January and February have seen a deterioration in number/% of patients being taken to theatre with 36 hours of arrival. Half the January breaches were due to patients not being fit for theatre.
- ❖ VTE - Performance with VTE risk assessment has been maintained and the national CQUIN threshold of 90% met both January and February.
- ❖ The readmission rate in January dropped from December but remained high. The Trust remains at the Emergency Care Network plan of 10% reduction.

Recommendations: Members to note and receive the report	
Strategic Risk Register	Performance KPIs year to date ALE/CQC
Resource Implications (eg Financial, HR) N/A	
Assurance Implications Underachieved targets will impact on the Provider Management Regime and the FT application	
Patient and Public Involvement (PPI) Implications Underachievement of targets potentially has a negative impact on patient experience and Trust reputation	
Equality Impact N/A	
Information exempt from Disclosure N/A	
Requirement for further review? Monthly review	

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

DATE: 5th APRIL 2012

**REPORT BY: SUZANNE HINCHLIFFE, CHIEF OPERATING OFFICER/CHIEF NURSE
KEVIN HARRIS, MEDICAL DIRECTOR
KATE BRADLEY, DIRECTOR OF HUMAN RESOURCES
ANDREW SEDDON, DIRECTOR OF FINANCE**

SUBJECT: MONTH ELEVEN PERFORMANCE SUMMARY REPORT

1.0 Introduction

The following paper provides an overview of the Quality & Performance month 11 report highlighting key performance metrics and areas of escalation where required.

2.0 February 2012 Operational Performance

2.1 Infection Prevention

MRSA – no cases of MRSA were reported during February with a year to date position of 7. One case following root cause analysis is suitable for appeal.

CDifficile – a positive month 11 report with 6 cases identified. The year to date position is 97 and ahead of target to date (165 end of year).

MRSA elective and non-elective screening has been achieved at 100% respectively

2.2 RTT

Admitted performance in February stands at 82.8% in accordance with the planned reduction agreed with commissioners. The non-admitted target has been achieved at 96.1%.

Admitted pathways are those that end in an admission to hospital (either inpatient or day case) for treatment. The Trust agreed a plan with the commissioners to increase activity in Quarter 3 and Quarter 4 to reduce the number of patients on an 18 week backlog and 26 week backlog.

The level of additional activity carried out to the end of February is detailed below:-

UHL activity – mix of inpatients and day cases

ENT – 117

General Surgery – 277

Max Fax – 138

Orthopaedics – 95

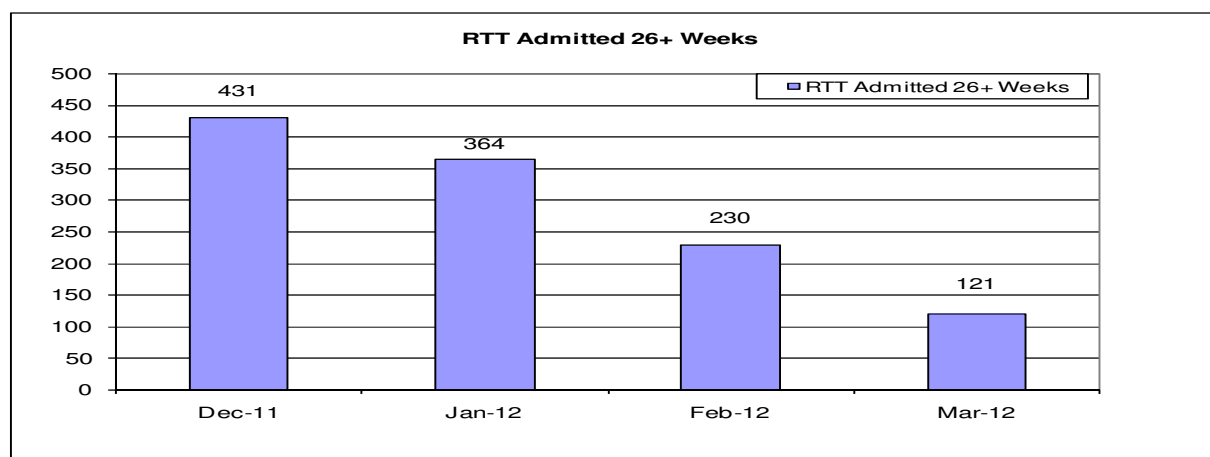
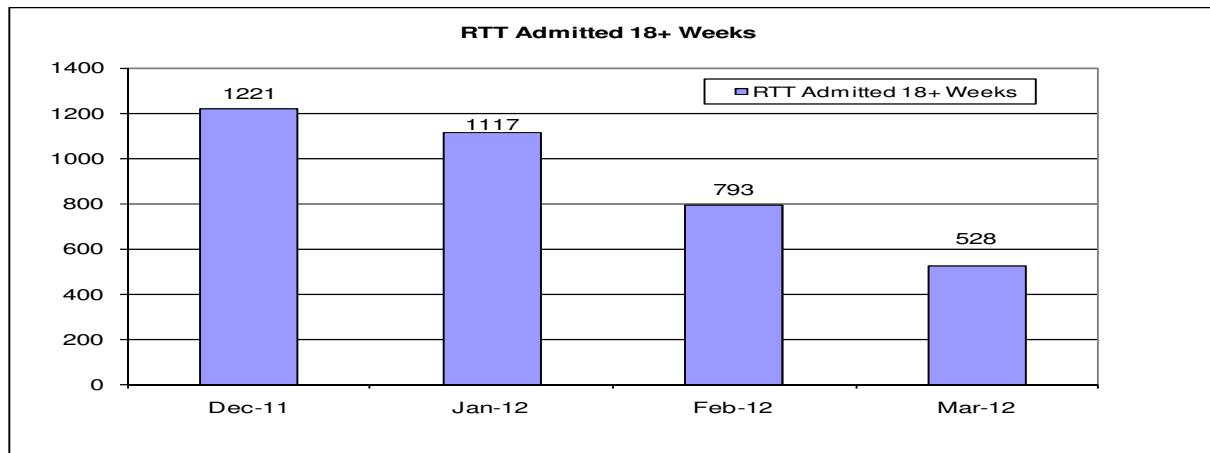
Ophthalmology – 132
Independent Sector

General Surgery – 140

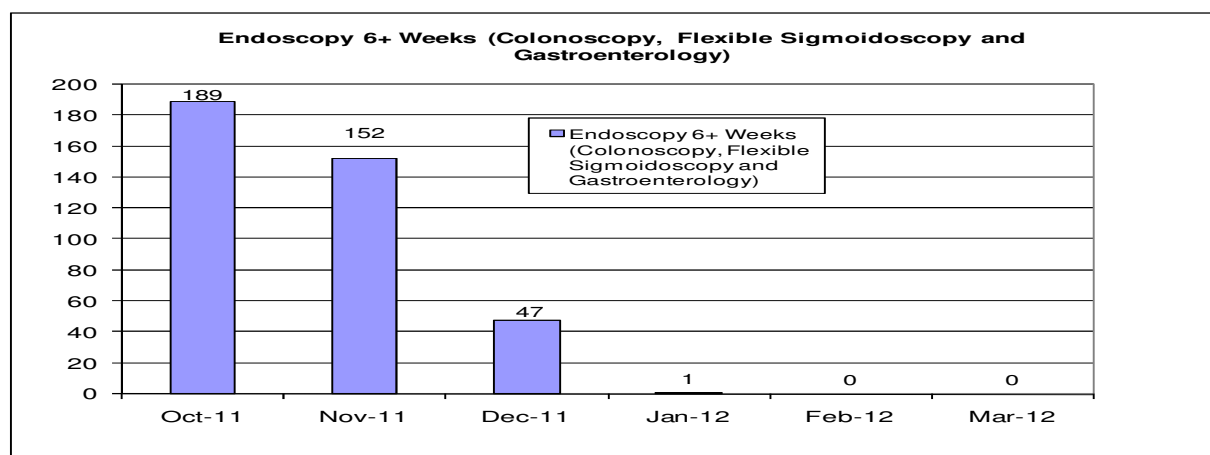
Medinet

Gastroenterology - 1058

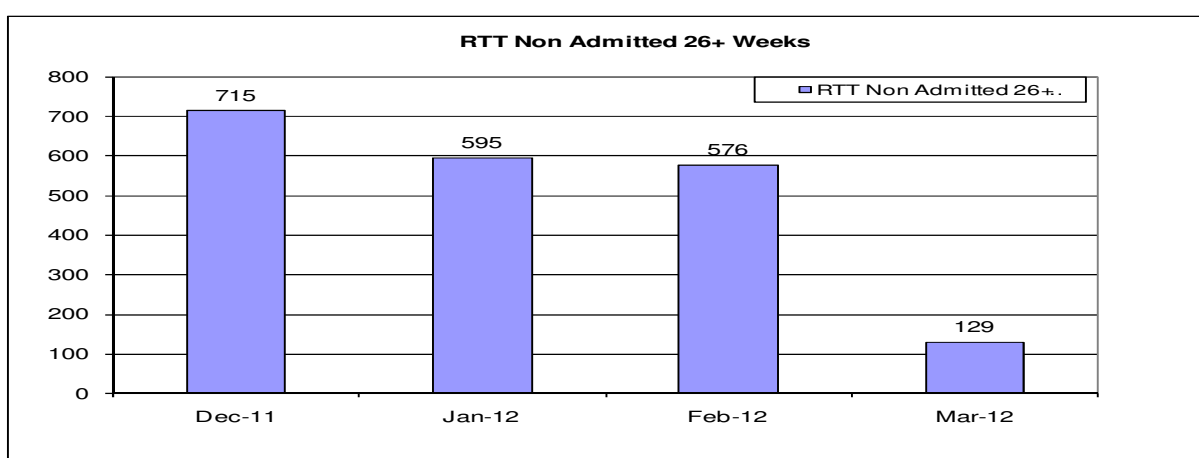
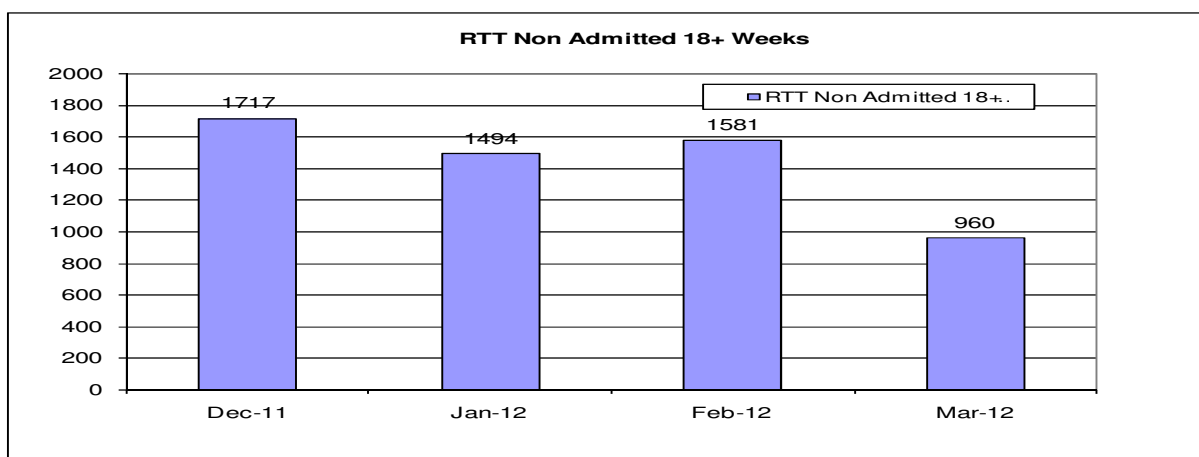
Progress in backlog reduction is shown in the following graphs:



The admitted 26 week backlog includes 65 patients that chose to wait.



Non-admitted pathways are those that end in treatment that did not require admission to hospital or where no treatment is required. Additional focus has been placed on validating patients that are waiting over 18+ weeks and 26+. Progress is shown below:



The non admitted 26 week backlogs include 74 patients that chose to wait.

Trusts received correspondence from the Department of Health in November regarding expected performance on 'long waiters' i.e. patients on a pathway for more than a year. Following a full review and validation, the number of patients waiting more than a year in the Trust reduced from 166 at the end of October to 0 at the end of February. Nationally at the end of January (latest report period) there are 5,850 patients waiting 52+ weeks.

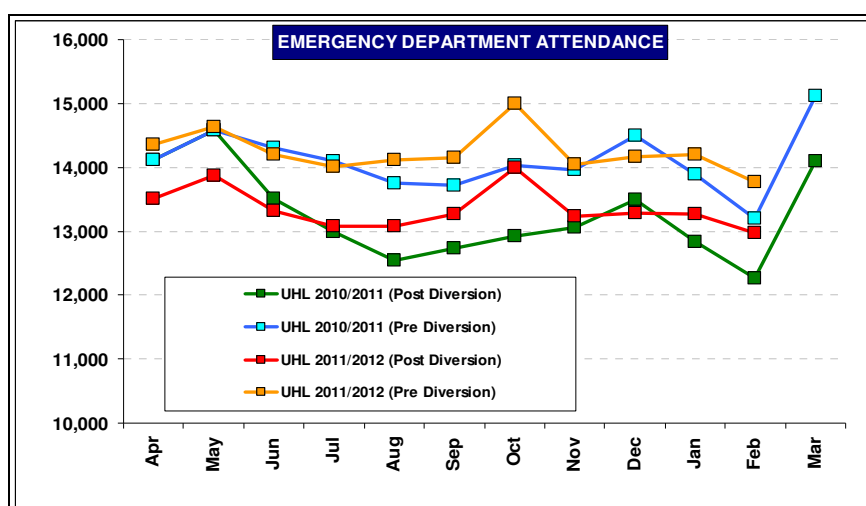
The 2012/13 Operating Framework confirms that the operational standards of 90% for admitted and 95% for non-admitted completed waits as set out in the NHS Constitution remain. In order to sustain the delivery of these standards, the framework notes trusts will need to ensure that 92% of patients on an incomplete pathway (i.e. patients waiting for a decision to treat or treatment) should have been waiting no more than 18 weeks. As at the 26th March the % of incompletes < 18 week was 95.6%. Nationally at the end of January (latest report period) 92.3% of incomplete pathways were < 18 weeks.

2.3 ED

2.3.1 ED Activity

Performance for February Type 1, 2 is 89.5%%, and 91.6% including the Urgent Care

Centre (UCC). The year to date performance for ED (UHL+UCC) is 94.2%.



EMERGENCY DEPARTMENT ATTENDANCE					
	UHL 2010/2011 (Post Diversion)	UHL 2010/2011 (Pre Diversion)	UHL 2011/2012 (Post Diversion)	UHL 2011/2012 (Pre Diversion)	Overall % Change 11/12 vs 10/11
Apr	14,117	14,117	13,507	14,358	1.7%
May	14,574	14,574	13,871	14,636	0.4%
Jun	13,509	14,298	13,318	14,197	-0.7%
Jul	12,983	14,100	13,075	14,014	-0.6%
Aug	12,544	13,757	13,086	14,109	2.6%
Sep	12,726	13,720	13,270	14,142	3.1%
Oct	12,918	14,022	14,002	15,000	7.0%
Nov	13,057	13,963	13,226	14,051	0.6%
Dec	13,500	14,488	13,291	14,162	-2.3%
Jan	12,830	13,893	13,260	14,196	2.2%
Feb	12,263	13,202	12,980	13,764	4.3%
Mar	14,100	15,119			
Sum:	159,121	169,253	146,886	156,629	

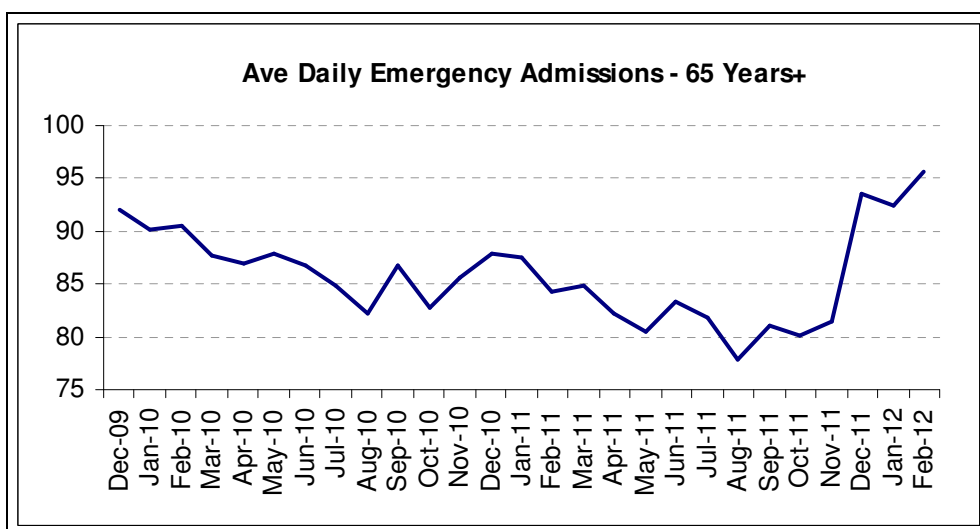
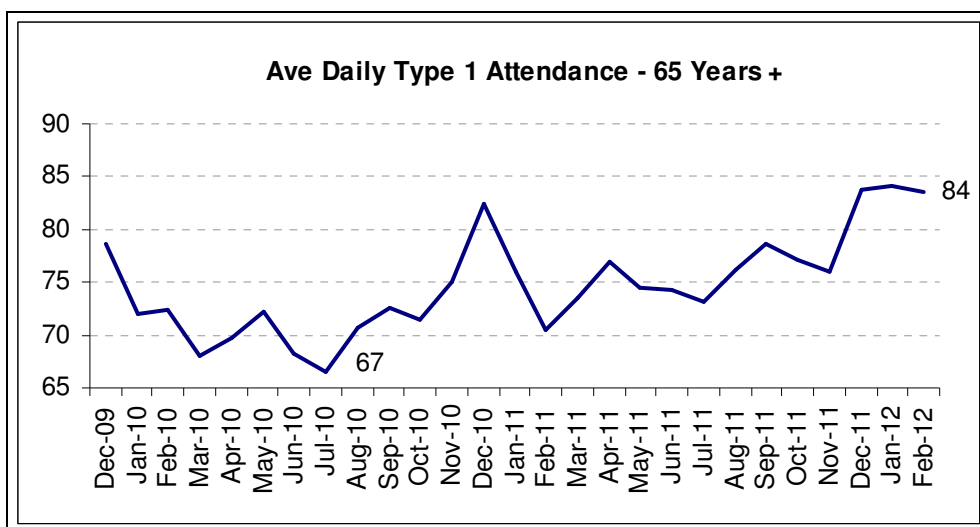
Attendance levels for February are 4.3% above 2010/2011 with patient presentation continuing to be during the latter part of the day and into the evening/night.

Type 1 Arrival Patterns

EMERGENCY DEPARTMENT - TYPE 1 INFLOW

	Threshold between 11pm and 9am -15 attendances and Over														Threshold between 9am and 11pm - 25 attendances and Over														Total
	00:00 - 01:00		02:00 - 03:00		04:00 - 05:00		06:00 - 07:00		08:00 - 09:00		10:00 - 11:00		12:00 - 13:00		14:00 - 15:00		16:00 - 17:00		18:00 - 19:00		20:00 - 21:00		22:00 - 23:00						
	00:59	01:59	02:59	03:59	04:59	05:59	06:59	07:59	08:59	09:59	10:59	11:59	12:59	13:59	14:59	15:59	16:59	17:59	18:59	19:59	20:59	21:59	22:59	23:59					
01/02/2012 (Wed)	11	11	5	10	5	6	5	2	7	17	22	26	30	20	22	25	18	20	28	25	21	19	18	18	391				
02/02/2012 (Thu)	13	6		3	5	4	3	2	7	20	13	23	21	23	21	20	25	21	38	29	26	24	22	21	390				
03/02/2012 (Fri)	15	8	10	8	5	6	4	3	8	17	13	23	15	21	14	16	22	24	26	23	23	17	12	13	346				
04/02/2012 (Sat)	13	7	8	5	9	8	7	8	11	19	20	17	18	26	17	19	18	16	24	15	11	13	18	13	340				
05/02/2012 (Sun)	14	11	7	6	4	7	8	6	17	14	19	27	26	31	27	33	17	17	24	20	17	16	13	14	395				
06/02/2012 (Mon)	9	9	6	8	9	4	10	2	9	24	25	28	22	24	20	22	25	28	24	38	25	17	20	10	418				
07/02/2012 (Tue)	15	9	4	4	3	5	3	7	8	21	29	27	24	21	21	18	22	21	27	24	23	21	19	16	392				
08/02/2012 (Wed)	14	6	5	10	8	5	5	1	15	26	22	25	30	21	18	12	24	25	21	30	24	23	21	14	405				
09/02/2012 (Thu)	12	10	8	7	6	2	4	7	11	25	14	27	15	21	18	18	25	20	22	19	13	16	7	7	334				
10/02/2012 (Fri)	7	11	4	4	8	2	4	4	11	19	18	17	19	18	18	13	17	20	23	19	22	17	23	13	331				
11/02/2012 (Sat)	12	7	8	7	7	12	6	10	11	15	19	28	21	25	20	26	23	26	26	22	26	18	16	9	400				
12/02/2012 (Sun)	19	12	17	9	7	10	10	11	13	18	19	17	23	19	31	17	21	29	26	20	16	29	18	14	425				
13/02/2012 (Mon)	11	12	5	3	4	5	3	8	10	12	17	19	20	18	23	23	16	23	20	27	21	24	18	20	362				
14/02/2012 (Tue)	15	11	7	4	3	5	3	9	8	17	22	17	24	19	16	19	16	13	21	26	20	20	26	10	351				
15/02/2012 (Wed)	10	13	9	5	8	5	8	10	13	19	12	20	17	21	29	18	23	22	25	15	27	21	16	22	388				
16/02/2012 (Thu)	16	12	6	8	8	4	1	4	12	17	14	17	21	17	26	24	19	19	27	22	17	22	20	18	371				
17/02/2012 (Fri)	15	15	6	4	5	7	7	5	15	25	25	30	21	17	20	20	22	27	20	30	26	25	26	13	426				
18/02/2012 (Sat)	16	14	7	9	2	8	9	7	8	16	16	20	25	24	35	22	25	21	30	17	22	14	21	15	403				
19/02/2012 (Sun)	21	19	12	9	9	6	6	5	8	21	17	27	24	38	27	16	24	27	32	31	18	20	18	15	450				
20/02/2012 (Mon)	12	2	6	5	4	9	6	5	15	22	22	26	21	26	24	17	24	24	28	13	28	25	19	17	400				
21/02/2012 (Tue)	9	7	6	7	9	5	5	7	12	17	21	29	18	18	26	21	28	15	26	31	30	20	16	15	398				
22/02/2012 (Wed)	6	15	8	5	5	5	9	10	9	21	22	20	22	24	23	20	23	28	25	22	27	28	19	14	410				
23/02/2012 (Thu)	7	11	7	4	8	7	5	2	16	23	16	33	30	20	33	27	26	23	22	23	21	23	28	25	440				
24/02/2012 (Fri)	13	15	5	6	7	4	7	7	13	23	21	21	21	23	19	21	18	28	24	30	22	22	23	13	406				
25/02/2012 (Sat)	11	10	7	2	8	9	7	8	9	19	20	21	28	22	23	29	26	21	28	21	21	23	23	15	411				
26/02/2012 (Sun)	9	13	7	10	13	9	11	9	16	18	28	38	38	37	30	25	33	31	13	26	21	22	20	15	492				
27/02/2012 (Mon)	13	9	10	6	6	2	10	10	14	22	31	29	23	32	20	20	28	33	26	34	29	18	18	17	460				
28/02/2012 (Tue)	13	11	4	6	9	3	3	7	17	18	14	18	19	27	26	22	27	32	24	25	26	18	17	14	400				
29/02/2012 (Wed)	8	13	5	6	6	4	5	6	15	20	24	23	26	22	21	12	24	23	35	24	21	16	17	13	389				

Significant increases both attendances and admissions are most noticeable in the 65+ age group.



2.3.2 Breach Data

The following table shows the breakdown of breach data by reason. Over the course of the year, improvements have been seen in the number of breaches directly related to bed capacity and greater focus within the ED with the most significant around patient flow.

Delay Reason	29/01/2012 (Sun)	05/02/2012 (Sun)	12/02/2012 (Sun)	19/02/2012 (Sun)	26/02/2012 (Sun)	04/03/2012 (Sun)	11/03/2012 (Sun)	18/03/2012 (Sun)	Sum :	Cumulative %
Bed Breach	19	34	29	84	27	60	35	26	314	14%
ED Process	6	20	26	55	35	85	69	50	346	15%
ED Capacity (Cubicle Space)	2	1	31	20	34	92	27	49	256	11%
ED Capacity (Inflow)	32	38	121	65	73	65	142	71	607	27%
ED Capacity (Workforce)				1					1	0%
Clinical Reasons	35	27	46	57	62	56	41	56	380	17%
Specialist Assessment	13	13	5	7	11	15	11	5	80	4%
Specialist Decision			1		2	4	1	1	9	0%
Investigation (Imaging & Pathology)	7	10	7	9	16	12	18	11	90	4%
Transport	3	7	12	8	14	17	19	21	101	4%
Treatment	8	6	10	2	11	17	9	14	77	3%
Sum:	125	156	288	308	285	423	372	304	2261	100%

2.3.3 Performance Standards

2.3.3.1 National Quality ED Standards - with thresholds set by the DoH, ED clinical indicators for February are as follows:

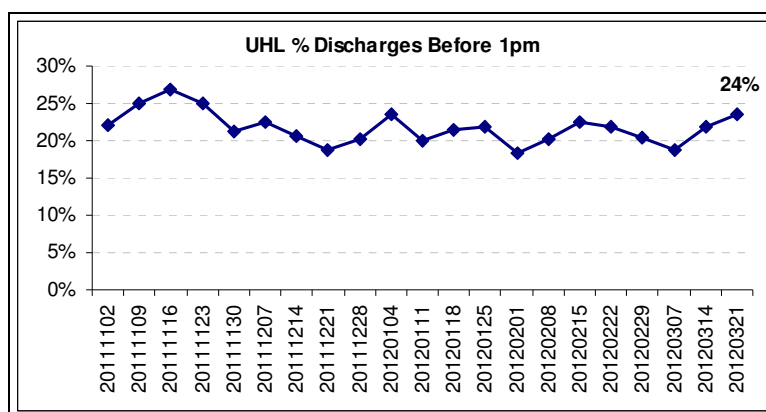
CLINICAL QUALITY INDICATORS									
PATIENT IMPACT									
	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	TARGET
Left without being seen %	2.1%	2.8%	2.4%	2.9%	2.0%	2.3%	2.1%	2.4%	<=5%
Unplanned Re-attendance %	5.9%	6.7%	5.5%	6.0%	5.7%	5.4%	6.1%	6.1%	< 5%
TIMELINESS									
	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	TARGET
Time in Dept (95th centile)	239	304	338	341	288	240	264	331	< 240 Minutes
Time to initial assessment (95th)	39	48	48	61	48	42	32	34	<= 15 Minutes
Time to treatment (Median)	34	34	39	44	43	42	42	54	<= 60 Minutes

Amendments to EDIS are currently being made to enable more robust capture of data in particular relating to the Time to Initial Assessment.

2.3.3.2 UHL Emergency Care Network Targets

Further to the establishment of the LLR ECN – agencies were apportioned a series of targets with thresholds for delivery. For UHL, a number of these were also part of the Trust CQUIN/Quality Schedule. The following graphs present an overview of the current position reported:

a) UHL 1pm Discharges w/e 2nd Oct 2011 to 21st Mar 2012 (target 20%)



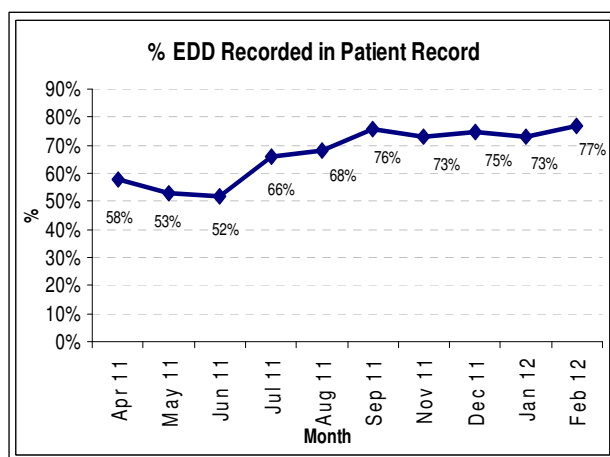
	Dec	Jan	Feb
Acute Care	22%	22%	20%
Planned Care	20%	18%	22%
Women's and Children's	20%	21%	24%

	Dec	Jan	Feb
Cardiac/Renal/C. Care	25%	25%	22%
Medicine	20%	20%	21%
Respiratory	21%	22%	17%

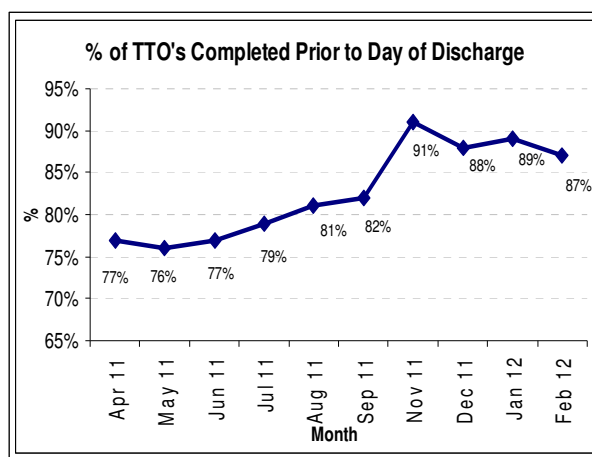
b) Ward / Board Rounds – Quarter 4 Results 2011/12

Discipline	% Attendance
Cons/Reg	90.6
Any Medical	92
Nurse	100
Occ Therapy	98.2
Physiotherapy	98.7
Board Round Frequency	97.5

c) EDD



d) TTO



2.3.4 Data Coverage

Confirmation has been received from the DoH that the data coverage issue reported in the October and December Trust Board papers, has been resolved from Quarter 2 as expected. The UCC are now in a position to submit patient level data sets as well as aggregate submissions.

2.3.5 ED Audit and Patient Experience

Attached to this report is the UHL Emergency Department Patient Report for February 2012. Key findings include:

- The number of patients who have contacted their GP before coming to ED has remained steady at 23%, though more patients attending ED have not tried to contact their GP.
- Most patients only wait for “a few hours” before coming to ED
- Most of the patients surveyed in ED are aware of the UCC.
- Feedback in most areas remained positive, but there was a decrease in the number of positive responses in regards to waiting times (February saw an increase in the number of patients waiting 4 hours or more which appear to have an impact on the patient survey results).
- 100% responses in regards to information received, and dignity and respect were positive.

2.3.6 Key Actions Relating to ED Performance

Further to continued deterioration of meeting the 95% emergency target and despite the involvement of the Intensive Support Team during the past year and the LLR Emergency Care Network, it is clear that greater intervention is required. To this extent, the following actions are to take place:

- Clinically led external review to be undertaken initiated by the CEO – anticipated deadline May 2012
- Move to Consultant Leadership by 1st November 2012
- Linked review of ED processes by 30th June 2012
- Internal Wait System (linked to existing Trust Internal Wait programme led by Andrew Furlong)
- Reduction in dependency on training grades thus improving the distribution and quality of training
- Implement the emergency floor concept
- Expand Right Place, Right Time process to AMU by 1st July

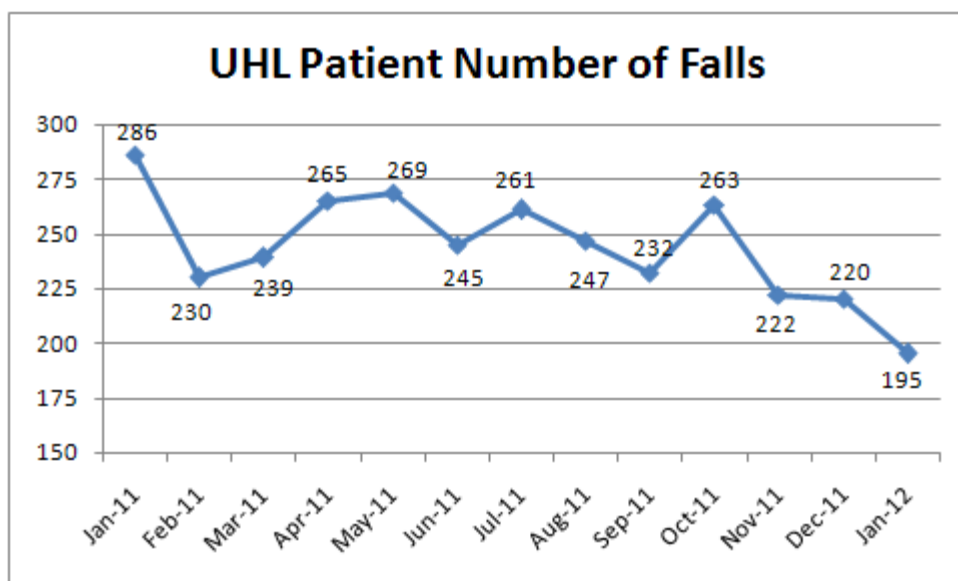
2.4 Cancer Targets

Eight out of the nine cancer targets are delivering against performance thresholds for January, including the 62 day from referral to treatment target. Although the position will improve as validation concludes, confirmation has been received that all nine cancer targets have been achieved.

An additional challenge that is being faced is the availability of critical care capacity. As a result, and following a meeting with the intensivists an additional bed will be created on a temporary basis to respond to this.

2.5 Falls

Early data for January 2012 is suggestive of a reduction of 25 falls from December 2011 (one month in arrears) and is now at its lowest point for the last 12 months.



A weekly review of the falls data by the Head of Nursing and Lead Nurses is enabling actions to be focused on specific wards. The most significant reduction is being seen in the Acute Division, where the number of inpatient falls is the highest.

An update paper on the progress in the falls work in the Trust is to be submitted to the GRMC at the end of March.

2.6 Pressure Ulcers

There were 12 reported hospital acquired grade 3 and 4 pressure ulcers in January 2012 (7 Acute and 5 Planned).

Nine of the pressure ulcers were classed as avoidable and two were unavoidable. One ulcer is still being investigated by the tissue viability team.

Although there has been an increase in the number of ulcers from December, overall incidence continues to reduce when comparing data from January 2011 when 33 ulcers were reported. Nevertheless, all ward sisters and charge nurses from the wards where ulcers have been reported from January 2012 are meeting with the Assistant Director of Nursing to review individual incidences and actions required.

For the month of December the six reported hospital acquired pressure ulcers have been reviewed using the unavoidable checklist where four were found not attributable to the trust.

2.7 Patient Polling

The "Patient Experience Survey" for February 2012 resulted in 1,291 surveys being returned, a Trust return rate of 89.4% an increase by 0.7%.

The 'overall respect and dignity' score remains green across the Trust. The 'overall how would you rate the care whilst in hospital' score remains amber across the Trust but has increased by 1.2 points.

A pilot to provide additional ward support volunteers to underperforming wards to see how this improves patients experience and perception of their overall care, finished at the end of February 2012. Trends in satisfaction scores for the pilot areas were analysed using December's results as a comparison to January/February's results. Unfortunately no consistent improvements were noted in scores for any of the patient experience survey questions, however a bespoke volunteer survey was completed at the same time by patients and carers that specifically asked about the impact that volunteers have on the overall patient experience. Feedback reflected the great value patients place on volunteer support specifically; someone to talk to, listen, be helpful, be interested and make patients smile. A full separate report outlining all outcome measures from the pilot is to be circulated shortly

The outpatients Patient Experience survey questions 'Overall, how would you rate the care you received in this area?' score remains green with an increase in satisfaction by six points and the 'overall respect and dignity' score has improved remarkably by seven points to a 99.0 satisfaction, one point away from the ideal and now rated green.

2.8 Same Sex Accommodation

For the last eleven months, all UHL wards and intensivists areas continue to offer Same Sex Accommodation (SSA) in line with the UHL SSA Matrix guidance.

2.9 Primary PCI

The percentage of eligible patients with acute myocardial infarction who received Primary PCI within 150 minutes of calling professional help in February was 83.3%.

3.0 Medical Director's Report – Kevin Harris

3.1 Mortality Rates

UHL's mortality rate for February has risen slightly for 'overall crude mortality'. It is anticipated there will be a similar increase in the trust's risk adjusted mortality when this is available.

Review of UHL's mortality data for the past 5 years' suggests that this is in line with normal seasonal variation. Further analysis is being undertaken for review by the GRMC later this month.

3.2 UHL Quality Schedule /CQUIN

Following submission of further information to the Commissioners, UHL was considered to have fully or almost met the Quarter 3 thresholds for 51 of the 64 CQUIN indicators.

5 indicators were partially met (Discharge planning – EDD and Involving Rels/Carers; Falls risk assessment/care planning and Reduction in Urinary Catheter infections).

Commissioners withheld full payment for 'Urgent CT for stroke patients within 1 hour of arrival' as there had not been any improvement since Quarter 2.

The financial penalty for Quarter 3 is just under £140,000.

3.3 Fractured Neck of Femur 'Time to Theatre'

January and February have seen a deterioration in number/% of patients being taken to theatre with 36 hours of arrival. Half the January breaches were due to patients not being fit for theatre. February's data has not been finalized.

An audit has been undertaken to look at reasons for delays which has identified a need for additional routine theatre capacity in order to cope with the increased demand and the impact of spinal admissions on theatre slots.

3.4 Venous Thrombo-embolism (VTE) Risk Assessment

Performance with VTE risk assessment has been maintained and the national CQUIN threshold of 90% met both January and February.

Q3 saw an increase in the UHL HAT rate from 0.18 to 0.22. Not all cases have been reviewed and confirmed or excluded. However, review of previous year's data shows

a similar increase during Quarter 3 which then falls again in Quarter 4, as we are starting to see in 2012 (January's rate is 0.19).

3.5 Readmissions

The readmission rate in January dropped from December but remained high. It has followed a similar pattern to that seen within the general increase in emergency admissions.

The Trust remains at the Emergency Care Network plan of 10% reduction. Performance continues to be better than other local UK University Teaching hospitals as is the trend.

Agreement has been reached with commissioners on a holding threshold for the penalisation of readmissions for 2012/13. The threshold is 20%. This will lead to a reduction in the baseline readmissions penalty of £5.2m in 2012/13 from 2011/12. As per the Operating Framework, a further joint commissioner and Trust clinical review of readmissions will be undertaken to establish the final level of penalty, but it is not likely to be higher than 20%. This clinical review will also refocus the direction of readmission reduction.

The improvement programme continues to work in 4 key areas, in partnership with primary and community care:

- 1) Coding & Commissioning – now resolved for 2011/12 as described above.
- 2) A discharge improvement group is now established in the Acute Division and this has defined a discharge and communication process for patients based on best practice which is to be piloted for medical patients from March. A risk stratification model is being analysed that if workable will be able to identify patients most at risk of readmission and then a pathway will be developed to ensure they are supported in the community post-discharge.
- 3) Specialty Priorities – work continues in the priority specialties and are beginning to be implemented. This includes the development of a new catheter pathway for implementation in March, the implementation of the COPD care bundle in February, a new chest pain pathway, a new process for senior review of potential readmissions within ED, along with redesign work being undertaken for patients with non-specific abdominal pain.
- 4) Community work streams - some of the readmissions penalty has been diverted into expansion of community health and social care reablement services. The majority of these services are now operational and it is key that they are used to full capacity.

3.6 Patient Safety

Overall safety indicators and feedback for February appear to be positive with some sustained improvements around Never Events, medication errors and patient accidents. These internal data are supported by the latest NPSA information on UHL safety performance. However, there remains significant feedback within the trust to suggest that the quality of care within the emergency and general medical pathways is variable. The complaints and incidents received indicate capacity and staffing pressures which directly impact on safety and quality, particularly on the AMUs / CDU and the extra capacity wards. These concerns are being carefully tracked and monitored, executive safety walkabouts have increased in these areas and this issue is reported on at GRMC.

4.0 Human Resources – Kate Bradley

4.1 Appraisals

February maintained January's appraisal rate of 96.1%, which was the fourth consecutive month that the reporting month's rate is the highest since we started using ESR to record appraisals.

Human Resources continue to work closely with Divisions and Directorates in implementing targeted actions to continue to improve appraisal performance.

4.2 Sickness

The reported sickness rate is 4.5%. This sickness rate is higher than the previous 11 months but may fall after the absence periods have been closed down. The 12 month rolling sickness rate is 3.5%

Human Resources are currently working with Divisions to performance manage areas with the highest sickness

5.0 Financial Performance – Andrew Seddon

5.1 I&E summary – February and year to date

The Trust achieved a surplus in-month of £3m, thereby reducing the cumulative deficit to £5.1m (£5.5m adverse to Plan). This may be summarised in the following table:

Table 1 – I&E summary

	2011/12 Annual Plan £m	February			April - February 2012		
		Plan £m	Actual £m	Var £m	Plan £m	Actual £m	Var £m
Income							
Patient income	595.8	48.9	53.9	5.0	545.1	558.8	13.7
Teaching, R&D	66.9	5.6	6.0	0.4	61.3	65.0	3.7
Other operating Income	19.0	1.6	1.9	0.3	17.4	19.0	1.6
Total Income	681.8	56.1	61.8	5.7	623.8	642.8	18.9
Operating expenditure							
Pay	420.5	35.0	35.6	(0.6)	385.4	397.7	(12.4)
Non-pay	215.2	17.6	19.5	(1.9)	196.9	208.9	(12.0)
Total Operating Expenditure	635.7	52.5	55.1	(2.5)	582.3	606.7	(24.4)
EBITDA	46.1	3.6	6.8	3.2	41.5	36.1	(5.5)
Net interest	(0.5)	(0.0)	(0.0)	(0.0)	(0.5)	(0.5)	(0.0)
Depreciation	(31.1)	(2.6)	(2.6)	(0.0)	(28.4)	(28.4)	(0.0)
PDC dividend payable	(13.2)	(1.1)	(1.1)	(0.0)	(12.1)	(12.2)	(0.1)
Net deficit	1.3	(0.1)	3.0	3.1	0.5	(5.1)	(5.6)
Planned phasing adjustment		0.1	-	(0.1)	(0.1)	-	0.1
Reported net deficit	1.3	0.0	3.0	3.0	0.4	(5.1)	(5.5)
EBITDA %	6.76%		10.98%			5.61%	

Table 2 – Financial Risk Ratings

		February	Year To Date	
	Weighting	Result	Result	Score
EBITDA achieved (% of plan)	10.0%	189.4%	86.9%	3
EBITDA margin (%)	25.0%	11.0%	5.6%	3
Return on assets (%)	20.0%	1.0%	1.8%	2
I&E surplus (%)	20.0%	4.9%	-0.8%	2
Liquidity ratio (days)	25.0%	17	18	3
Overall Financial Risk Rating				2

The reasons for the **year to date financial position** are as follows:

5.2 Income

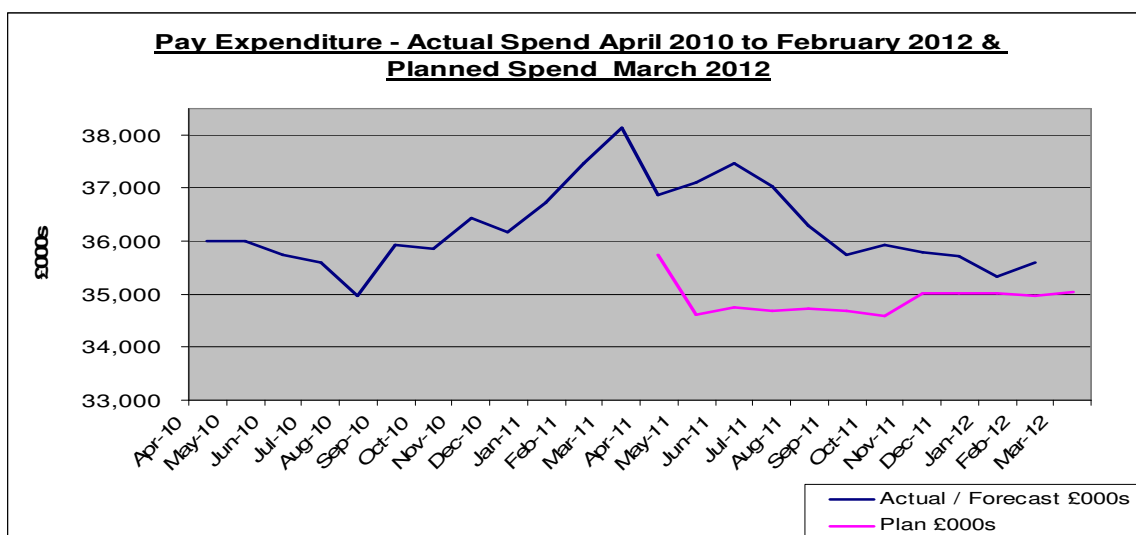
5.2.1 Year to date patient care income is £13.7m (2.6%) ahead of Plan. This reflects an over-performance on day cases of £2.3m, elective inpatients of £1.8m and outpatients of £2.8m. Whilst the emergencies are £4.9m above plan, this does reflect £6m year to date of the additional monies secured from the PCTs regarding re-admissions. Actual activity is 3,583 spells (3.3%) below Plan.

5.2.2 The £3.7m favourable position against the Teaching, R&D line relates to £3.2m of the £6m of the Corporate accruals as agreed in the “Stabilisation and Transformational” Trust Board paper.

5.3 Expenditure

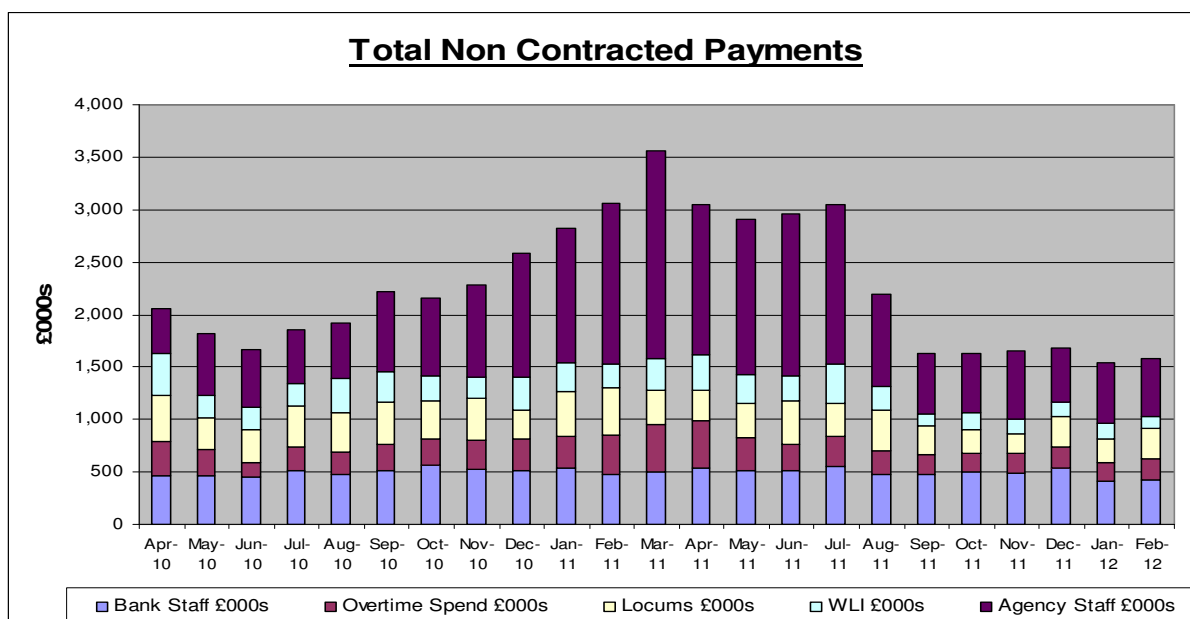
5.3.1 Expenditure is £24.4m over Plan year to date. This reflects a shortfall on the cost improvement programme of £12.3m and the use of significant premium agency staff in the first four months of the year. Chart 1 clearly shows the pay trend for the year. There has been a small increase in the spend in February due to the payment of the Christmas and New Year shift enhancements, £0.3m above the normal monthly enhancement level.

Chart 1: total per expenditure, April 2010 to March 2012



5.3.2 Premium payments, whilst becoming stable over the last six months, are still 50% below the levels of April to July 2011 and are approximately £1.5m lower per month than the same period in 2010/11.

Chart 2: non-contracted pay, April 2010 to February 2012



5.3.3 The table below summarises the Divisional year to date positions:

	Total Year to Date				Month 10 Variance (Adv) / Fav £m
	Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m	
Acute Care	52.6	47.4	37.7	(9.7)	(9.8)
Clinical Support	(94.9)	(87.2)	(89.4)	(2.1)	(2.6)
Planned Care	72.4	65.8	63.3	(2.5)	(2.4)
Women's and Children's	37.6	34.2	31.2	(3.0)	(3.1)
Corporate Directorates	(89.7)	(82.0)	(80.1)	1.9	1.6
Sub-Total Divisions	(21.9)	(21.9)	(37.3)	(15.4)	(16.3)
Central Income	70.0	65.1	73.8	8.7	6.4
Central Expenditure	(46.7)	(42.8)	(41.6)	1.2	1.3
Grand Total	1.3	0.4	(5.1)	(5.5)	(8.6)

5.4 Financial position – In-month results compared to forecast

5.4.1 In February, the Trust achieved a £3.0m surplus, £2.0m favourable to forecast and reflecting the following significant factors:

- Total income was £1.9m favourable, predominately due to an improvement in patient care income;

- £0.5m “Flory” funding for supporting winter and RTT access targets.
- £0.4m increased income to support ED capital equipment and Cystic Fibrosis service.
- £1.0m favourable across the Divisions regarding increased activity levels.
 - £0.4m in Acute Care mainly around emergency activity – 214 spells, £0.5m above forecast
 - £0.1m in Clinical Support in pain management day cases and direct access Pathology
 - Planned Care division was in line with forecast. This reflects an underperformance on daycases of £0.5m offset by favourable movements in inpatients and emergencies of £0.2m and £0.3m respectively.
 - Women’s & Children’s £0.3m fav, including £0.1m for the re-coding of Paediatric Diabetes activity to the best practice tariff, and over-performance in both Gynaecology and Genito-Urinary Medicine.
- Pay costs showed an adverse position against forecast of £0.1m
- Non pay costs were £0.2m favourable reflecting:
 - A £0.2m adverse movement in W&C division as a consequence of increased HIV drugs – this is offset by additional patient care income
 - £0.2m favourable position in Clinical Services Division mainly as a consequence of a the successful resolution of invoice queries
 - £0.1m favourable in both Acute Care and Corporate

5.4.2 The following table summarises the month 11 variance against forecast:

Division	Month 11 Variance against FOT £Ms
Acute	1.6
Clinical Support	0.5
Planned	(0.1)
Women’s & Children’s	0.2
Corporate & Central	(0.2)
TOTAL	2.0

5.5 Financial position – year end forecast

5.5.1 The month 11 re-forecast now shows a potential year end deficit of £1.33m, £2.62m adverse to the planned £1.29m surplus. The year-end forecast is summarised in the table below:

	Month 10			Month 11			
CBU	Plan £000s	FOT £000s	Variance £000s	Plan £000s	FOT £000s	Variance £000s	Move M10 to M11 £000s
Acute Divisional	52,592	41,037	(11,555)	52,592	41,965	(10,627)	928
Planned Divisional	72,441	71,146	(1,296)	72,441	71,077	(1,364)	(69)
CSD Divisional	(94,911)	(97,434)	(2,523)	(94,911)	(97,145)	(2,234)	289
W&C Divisional	37,598	34,284	(3,314)	37,598	34,777	(2,821)	493
Divisional Total	67,720	49,033	(18,687)	67,720	50,674	(17,046)	1,641
Corporate & Central	(66,431)	(53,232)	13,198	(66,431)	(53,007)	13,424	226
Trust TOTAL	1,289	(4,199)	(5,488)	1,289	(2,333)	(3,622)	1,866
Corporate accruals	above the line			above the line			
Readmissions / Deflection Income	above the line			above the line			
Winter flexibility	above the line			above the line			
VSS Deferral	above the line			above the line			
Coding & Counting	500			above the line			(500)
Salary - tax	1,000			1,000			0
Year End Forecast	1,289	(2,699)	(3,988)	1,289	(1,333)	(2,622)	1,366

5.5.2 This has improved by £1.4m from the month 10 forecast due to the following factors:

- An improvement in the clinical divisions' forecasts of £1.6m which is as a result of:
 - £0.6m "Flory" income, as noted above
 - £0.4m funding for ED and Cystic Fibrosis
 - £1.2m favourable movement on patient care income in the Women's & Children's and Acute Care divisions. (£0.5m previously expected).
 - The above favourable income movements have been partially offset by £0.5m deterioration in pay costs in the Acute Care and Clinical Support divisions. This is due to the additional capacity which has remained open to meet the high level of emergency winter activity demand still being experienced.
- Corporate & Central has improved by £0.2m largely due to lower utilities charges.

5.5.3 The focus for CBUs/Divisions in the last few weeks of the financial year is to ensure:

- Delivery of the referral to treat (RTT) access targets
- safe delivery of the cancer access targets
- prudent control of discretionary expenditure
- closure of delivery from any residual CIP schemes

5.5.4 Over the last few days we have become aware of the outcome of commissioners assessments of our delivery against Q4 transformation targets. As a result, we now expect to incur a shortfall of £1.4 million against our £12m total of 2011/12 transformation bids.

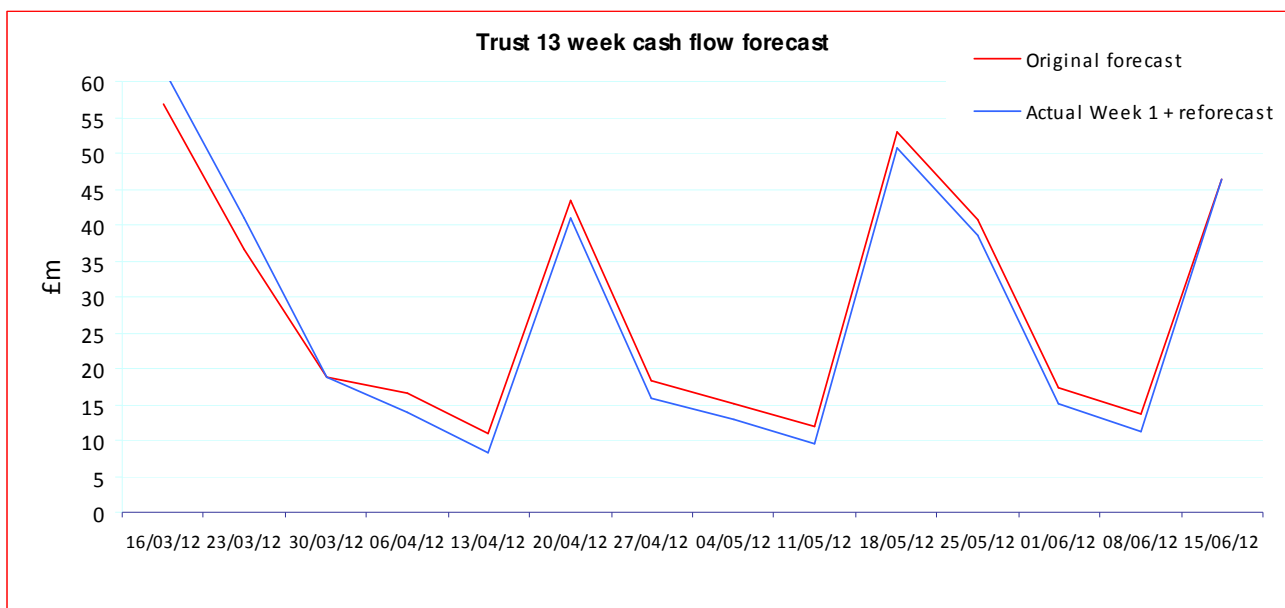
5.5.5 In response to this challenging position, we have accelerated a number of additional schemes. In addition, we now have the results of our asset revaluation exercise and therefore expect to be able to recognise the part year benefit of a reduction in our PDC dividend of £0.9m.

5.5.6 Combined additional impact of the initiative summarised in para 5.5.5 is to revise our year-end forecast to a breakeven position. The final position is, of course, subject to the outcome of trading in March as well as the above factors.

5.6 Working capital and net cash

5.6.1 The Trust's month end cash position increased by £8.1m to £29.9m at 29 February 2012. The £29.9m month end value includes £16.6m payment in advance of the SLA from the Leicester Cluster.

5.6.2 Cash continues to be monitored on a daily basis and to date we have maintained monthly balances in excess of £2m.



Emergency Department
Patient Survey

Emergency Department *Front Door Audit March 11 - February 12*

University Hospitals of Leicester NHS Trust

Caring at its best

Data Source: Front Door Audit Completed by Patient	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	12 months
Number of patients interviewed	84	119	78	100	100	100	98	100	99	100	100	100	1078
1. Why Have you come into A&E today?													
Minor illness.	11%	22% ▲	36% ▲	15% ▼	11% ▼	10% ▼	10% —	19% ▲	16% ▼	27% ▲	15% ▼	15% —	17%
Chronic pain.	7%	6% ▼	5% ▼	19% ▲	23% ▲	10% ▼	2% ▼	7% ▲	1% ▼	4% ▲	9% ▲	0% ▼	8%
Minor injury.	55%	49% ▼	42% ▼	46% ▲	33% ▼	38% ▲	63% ▲	45% ▼	59% ▲	55% ▼	61% ▲	63% ▲	50%
Breathing problems.	0%	2% ▲	1% ▼	4% ▲	1% ▼	3% ▲	3% —	2% ▼	1% ▼	2% ▲	0% ▼	3% ▲	2%
Renewal of Medication.	0%	0% —	0% —	0% —	0% —	0% —	1% ▲	0% ▼	0% —	0% —	0% —	0% —	0%
Other.	25%	18% ▼	12% ▼	15% ▲	26% ▲	29% ▲	18% ▼	26% ▲	20% ▼	12% ▼	11% ▼	19% ▲	19%
No response.	2%	3% ▲	4% ▲	1% ▼	6% ▲	10% ▲	2% ▼	1% ▼	3% ▲	0% ▼	4% ▲	0% ▼	3%
2. How long has this problem been going on for?													
Few hours.	44%	43% ▼	35% ▼	46% ▲	44% ▼	40% ▼	47% ▲	42% ▼	47% ▲	41% ▼	45% ▲	43% ▼	43%
1 day.	25%	24% ▼	13% ▼	12% ▼	16% ▲	19% ▲	19% —	22% ▲	26% ▲	18% ▼	23% ▲	22% ▼	20%
2 days.	4%	6% ▲	19% ▲	12% ▼	12% —	9% ▼	7% ▼	10% ▲	6% ▼	6% —	6% —	11% ▲	9%
3 days.	7%	3% ▼	6% ▲	7% ▲	2% ▼	7% ▲	2% ▼	3% ▲	4% ▲	7% ▲	8% ▲	3% ▼	5%
4 - 6 days.	1%	5% ▲	9% ▲	6% ▼	8% ▲	4% ▼	3% ▼	8% ▲	3% ▼	8% ▲	7% ▼	7% —	6%
1 week.	8%	4% ▼	4% —	3% ▼	5% ▲	3% ▼	3% —	3% —	3% —	6% ▲	1% ▼	0% ▼	4%
More than a week.	6%	12% ▲	10% ▼	7% ▼	11% ▲	2% ▼	4% ▲	9% ▲	6% ▼	5% ▼	9% ▲	4% ▼	7%
No response.	5%	3% ▼	4% ▲	7% ▲	2% ▼	16% ▲	14% ▼	3% ▼	4% ▲	9% ▲	1% ▼	10% ▲	6%
3. Patients registered with a GP													
Patients registered with a GP.	83%	83% —	86% ▲	83% ▼	85% ▲	87% ▲	79% ▼	88% ▲	90% ▲	89% ▼	92% ▲	89% ▼	86%
Patients not registered with a GP.	5%	17% ▲	12% ▼	4% ▼	15% ▲	2% ▼	15% ▲	12% ▼	10% ▼	11% ▲	6% ▼	9% ▲	10%
No response.	12%	0% ▼	3% ▲	13% ▲	0% ▼	11% ▲	6% ▼	0% ▼	0% —	0% —	2% ▲	2% —	4%
4. Have you tried to see your GP before coming in?													
Yes.	17%	20% ▲	38% ▲	6% ▼	25% ▲	23% ▼	18% ▼	31% ▲	24% ▼	22% ▼	23% ▲	23% —	23%
No.	71%	71% —	45% ▼	64% ▲	53% ▼	63% ▲	45% ▼	55% ▲	60% ▲	48% ▼	55% ▲	64% ▲	57%
No response.	12%	8% ▼	17% ▲	30% ▲	22% ▼	14% ▼	37% ▲	14% ▼	16% ▲	30% ▲	22% ▼	13% ▼	20%

Emergency Department
Patient Survey

Emergency Department *Front Door Audit March 11 - February 12*

University Hospitals of Leicester NHS Trust

Caring at its best

Data Source: Front Door Audit Completed by Patient	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	12 months
Number of patients interviewed	84	119	78	100	100	100	98	100	99	100	100	100	1078
5. If yes, how many times have you tried in last week?													
Once.	79%	38% ▼	67% ▲	50% ▼	56% ▲	43% ▼	72% ▲	74% ▲	67% ▼	64% ▼	52% ▼	48% ▼	60%
Twice.	0%	13% ▲	10% ▼	17% ▲	8% ▼	9% ▲	0% ▼	10% ▲	17% ▲	9% ▼	13% ▲	0% ▼	9%
Three times.	0%	8% ▲	0% ▼	0% —	4% ▲	0% ▼	0% —	0% —	0% —	5% ▲	0% ▼	0% —	2%
Four times.	7%	0% ▼	0% —	0% —	0% —	0% —	0% —	0% —	0% —	0% —	0% —	4% ▲	1%
More than four occasions.	7%	0% ▼	7% ▲	0% ▼	8% ▲	4% ▼	0% ▼	3% ▲	0% ▼	0% —	9% ▲	4% ▼	3%
No response.	7%	42% ▲	17% ▼	33% ▲	24% ▼	43% ▲	28% ▼	13% ▼	17% ▲	23% ▲	26% ▲	43% ▲	25%
6. If no, why not?													
My GP is always too busy.	0%	0% —	0% —	0% —	0% —	0% —	1% ▲	0% ▼	0% —	0% —	5% ▲	0% ▼	1%
I couldn't get an appointment until...%.	0%	0% —	3% ▲	0% ▼	0% —	0% —	1% ▲	3% ▲	3% —	1% ▼	0% ▼	3% ▲	1%
I thought this problem needs a hospital doctor.	73%	3% ▼	9% ▲	24% ▲	32% ▲	47% ▲	53% ▲	45% ▼	43% ▼	49% ▲	56% ▲	64% ▲	39%
It's easier for me to come to A&E.	7%	38% ▲	38% —	47% ▲	27% ▼	19% ▼	4% ▼	6% ▲	19% ▲	16% ▼	9% ▼	8% ▼	21%
My GP advised me to come to A&E.	16%	1% ▼	23% ▲	7% ▼	8% ▲	9% ▲	18% ▲	3% ▼	14% ▲	14% —	22% —	21% ▼	12%
The ambulance took me in.	0%	1% ▲	1% —	1% —	1% —	0% ▼	0% —	0% —	0% —	0% —	0% —	0% —	0%
NHS direct advised me to come to A&E.	3%	5% ▲	0% ▼	12% ▲	5% ▼	4% ▼	1% ▼	1% —	3% ▲	5% ▲	1% ▼	1% —	4%
My friend took me here.	1%	16% ▲	1% ▼	2% ▲	12% ▲	4% ▼	5% ▲	14% ▲	4% ▼	14% ▲	6% ▼	1% ▼	7%
The police took me here.	0%	2% ▲	0% ▼	0% —	1% ▲	0% ▼	0% —	1% ▲	0% ▼	0% —	1% ▲	3% ▲	1%
Other.	0%	0% —	0% —	0% —	3% ▲	3% —	4% ▲	0% ▼	13% ▲	0% ▼	0% —	0% —	2%
No response.	0%	34% ▲	24% ▼	6% ▼	11% ▲	14% ▲	14% —	26% ▲	0% ▼	0% —	0% —	0% —	12%
7. NEW: Were you aware of the urgent care centre?													
Aware	-	42%	51% ▲	33% ▼	42% ▲	29% ▼	33% ▲	32% ▼	31% ▼	41% ▲	48% ▲	45% ▼	38%
Not aware	-	38%	47% ▲	34% ▼	52% ▲	55% ▲	56% ▲	56% —	49% ▼	39% ▼	45% ▲	48% ▲	47%
No response	-	20%	1% ▼	33% ▲	6% ▼	16% ▲	11% ▼	12% ▲	19% ▲	20% ▲	7% ▼	7% —	15%

Emergency Department
Patient Survey

Emergency Department *Patient Experience March 11 - February 12*

University Hospitals of Leicester NHS Trust

Caring at its best

Data Source: Front Door Audit Completed by Patient

	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	12 months
Number of patients participating	73	96	99	100	91	100	100	100	94	75	67	97	1092
Which area of ED is the patient in?													
Majors	71%	82% ▲	74% ▼	70% ▼	66% ▼	67% ▲	65% ▼	52% ▼	55% ▲	65% ▲	60% ▼	53% ▼	65%
Minors	12%	16% ▲	3% ▼	12% ▲	10% ▼	11% ▲	9% ▼	9% —	10% ▲	23% ▲	6% ▼	32% ▲	13%
EDU	4%	0% ▼	12% ▲	3% ▼	1% ▼	5% ▲	14% ▲	22% ▲	11% ▼	4% ▼	0% ▼	5% ▲	7%
Paeds	3%	0% ▼	2% ▲	9% ▲	3% ▼	3% —	6% ▲	5% ▼	4% ▼	1% ▼	0% ▼	1% ▲	3%
Resus	1%	0% ▼	5% ▲	3% ▼	4% ▲	8% ▲	6% ▼	0% ▼	4% ▲	0% ▼	3% ▲	3% —	3%
Not stated	8%	2% ▼	4% ▲	3% ▼	15% ▲	6% ▼	0% ▼	12% ▲	16% —	7% ▼	31% ▲	6% ▼	7%
Gender													
Male	47%	57% ▲	62% ▲	42% ▼	51% ▲	49% ▼	39% ▼	47% ▲	43% ▼	43% —	45% ▲	47% ▲	48%
Female	53%	42% ▼	36% ▼	55% ▲	45% ▼	51% ▲	45% ▼	52% ▲	56% ▲	56% —	52% ▼	53% ▲	49%
Not stated	0%	1% ▲	2% ▲	3% ▲	4% ▲	0% ▼	16% ▲	1% ▼	1% —	1% —	3% ▲	0% ▼	3%
Age													
17 yrs or younger	5%	1% ▼	6% ▲	12% ▲	4% ▼	4% —	7% ▲	0% ▼	0% —	0% —	0% —	2% ▲	4%
18-25			12%	5% ▼	11% ▲	12% ▲	10% ▼	8% ▼	10% ▲	17% ▲	10% ▼	11% ▲	11%
26-35			11%	18% ▲	12% ▼	16% ▲	6% ▼	7% ▲	14% ▲	8% ▼	12% ▲	10% ▼	11%
36-50			18%	15% ▼	23% ▲	14% ▼	8% ▼	20% ▲	20% —	19% ▼	16% ▼	15% ▼	17%
51-64			12%	11% ▼	18% ▲	17% ▼	12% ▼	14% ▲	13% ▼	12% ▼	13% ▲	16% ▲	14%
18-64	53%	54% ▲	54% —	49% ▼	64% ▲	59% ▼	36% ▼	49% ▲	56% ▲	56% —	52% ▼	54% ▲	53%
65-74			8%	16% ▲	8% ▼	14% ▲	14% —	13% ▼	11% ▼	9% ▼	18% ▲	10% ▼	11%
75-84			14%	14% —	12% ▼	12% —	19% ▲	16% ▼	21% ▲	19% ▼	10% ▼	21% ▲	16%
85 yrs or older			16%	6% ▼	8% ▲	11% ▲	10% ▼	16% ▲	5% ▼	11% ▲	16% ▲	12% ▼	11%
65 yrs or older	40%	44% ▲	38% ▼	36% ▼	27% ▼	37% ▲	43% ▲	45% ▲	37% ▼	39% ▲	45% ▲	43% ▼	39%
Not stated	1%	1% —	2% ▲	3% ▲	4% ▲	0% ▼	14% ▲	6% ▼	6% —	5% ▼	3% ▼	1% ▼	4%
Ethnicity													
White	78%	89% ▲	79% ▼	74% ▼	73% ▼	72% ▼	66% ▼	86% ▲	86% —	68% ▼	81% ▲	79% ▼	77%
Mixed	0%	2% ▲	1% ▼	3% ▲	0% ▼	0% —	4% ▲	3% ▼	5% ▲	4% ▼	0% ▼	2% ▲	2%
Asian or Asian British	12%	5% ▼	11% ▲	14% ▲	15% ▲	17% ▲	10% ▼	8% ▼	6% ▼	11% ▲	10% ▼	10% —	11%
Black or Black British	3%	1% ▼	2% ▲	1% ▼	3% ▲	1% ▼	0% ▼	0% —	1% ▲	3% ▲	4% ▲	1% ▼	1%
Chinese	0%	0% —	1% ▲	0% ▼	0% —	1% ▲	0% ▼	0% —	0% —	0% —	0% —	0% —	0%
Other	1%	1% —	5% ▲	0% ▼	3% ▲	4% ▲	1% ▼	3% ▲	0% ▼	4% ▲	0% ▼	0% —	2%
Not stated	5%	0% ▼	1% ▲	8% ▲	5% ▼	5% —	19% ▲	0% ▼	1% ▲	11% ▲	4% ▼	7% ▲	6%

Emergency Department
Patient Survey

Emergency Department *Patient Experience March 11 - February 12*

University Hospitals of Leicester NHS Trust

Caring at its best

Data Source: Front Door Audit Completed by Patient	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	12 months
Number of comments received	157	197	495	500	454	499	499	500	469	500	500	500	5270
Overall													
Positive	70%	59% ▼	93% ▲	93% —	95% ▲	90% ▼	94% ▲	93% ▼	94% ▲	97% ▲	97% —	97% —	89%
Neutral	10%	18% ▲	5% ▼	4% ▼	1% ▼	9% ▲	3% ▼	4% ▲	4% —	2% ▼	2% —	2% —	6%
Negative	20%	23% ▲	2% ▼	3% ▲	4% ▲	1% ▼	3% ▲	3% —	2% ▼	1% ▼	1% —	1% —	6%
Care Received													
Positive	84%	69% ▼	88% ▲	89% ▲	100% ▲	94% ▼	92% ▼	92% —	94% ▲	93% ▼	96% ▲	91% ▼	90%
Neutral	8%	28% ▲	9% ▼	7% ▼	0% ▼	6% ▲	5% ▼	5% —	4% ▼	5% ▲	3% ▼	8% ▲	8%
Negative	8%	3% ▼	3% —	4% ▲	0% ▼	0% —	3% ▲	3% —	2% ▼	1% ▼	1% —	1% —	3%
Information Received													
Positive	80%	43% ▼	92% ▲	99% ▲	96% ▼	96% —	99% ▲	100% ▲	99% ▼	99% —	100% ▲	100% —	88%
Neutral	0%	14% ▲	6% ▼	1% ▼	0% ▼	4% ▲	1% ▼	0% ▼	1% ▲	1% —	0% ▼	0% —	4%
Negative	20%	43% ▲	2% ▼	0% ▼	4% ▲	0% ▼	0% —	0% —	0% —	0% —	0% —	0% —	8%
Waiting Times													
Positive	21%	36% ▲	88% ▲	92% ▲	90% ▼	78% ▼	86% ▲	84% ▼	91% ▲	97% ▲	91% ▼	88% ▼	77%
Neutral	24%	7% ▼	8% ▲	4% ▼	2% ▼	20% ▲	8% ▼	9% ▲	5% ▼	3% ▼	4% ▲	5% ▲	9%
Negative	56%	57% ▲	4% ▼	4% —	8% ▲	2% ▼	6% ▲	7% ▲	3% ▼	0% ▼	4% ▲	7% ▲	14%
NEW - Privacy													
Positive			99%	97% ▼	99% ▲	92% ▼	95% ▲	100% ▲	98% ▼	97% ▼	99% ▲	99% —	97%
Neutral			0%	2% ▲	0% ▼	8% ▲	1% ▼	0% ▼	2% ▲	0% ▼	0% —	1% ▲	2%
Negative			1%	1% —	1% —	0% ▼	3% ▲	0% ▼	0% —	3% ▲	1% ▼	0% ▼	1%
NEW - Dignity and Respect													
Positive			99%	99% —	96% ▼	96% —	99% ▲	100% ▲	99% ▼	99% —	100% ▲	100% —	98%
Neutral			1%	1% —	0% ▼	4% ▲	1% ▼	0% ▼	1% ▲	1% —	0% ▼	0% —	1%
Negative			0%	0% —	4% ▲	0% ▼	0% —	0% —	0% —	0% —	0% —	0% —	0%

Caring at its best

Quality and Performance

Trust Board

Thursday 5th April 2012

February 2012

One team shared values

QUALITY and PERFORMANCE REPORT

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Thresholds

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

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

UHL at a Glance - Month 11 - 2011/12

PATIENT SAFETY	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
MRSA Bacteraemias	9	Feb-12	0	7	7	
CDT Isolates in Patients (UHL - All Ages)	165	Feb-12	6	97	110	
% of all adults who have had VTE risk assessment on adm to hosp ***	90%	Feb-12	93.8%	93.9%	93.5%	
Reduction of hospital acquired venous thrombosis ***	0.175	Qtr 2 11/12	0.18		0.175	
Incidents of Patient Falls	TBC	Jan-12	195	2419		
In Hospital Falls resulting in Hip Fracture ***	12	Feb-12	0	3	6	
CLINICAL EFFECTIVENESS	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	93%	Jan-12	94.4%	94.2%	94.2%	
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	93%	Jan-12	93.2%	96.0%	96.0%	
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	96%	Jan-12	97.6%	97.5%	97.5%	
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	98%	Jan-12	100.0%	99.9%	99.9%	
31-Day Wait For Second Or Subsequent Treatment: Surgery	94%	Jan-12	88.6%	94.9%	94.9%	
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	94%	Jan-12	97.0%	98.8%	98.8%	
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	85%	Jan-12	86.3%	83.4%	84.0%	
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	90%	Jan-12	94.7%	93.6%	93.6%	
62-Day Wait For First Treatment From Consultant Upgrade	85%	Jan-12	-----	85.7%	85.7%	
Emergency 30 Day Readmissions (Following Elective Admission)	1.6%	Jan-12	5.4%	5.1%	5.0%	
Emergency 30 Day Readmissions (Following Emergency Admission)	8.0%	Jan-12	9.6%	9.5%	9.0%	
Mortality (CHKS Risk Adjusted) - OVERALL	85	Jan-12	82.5	82.0		
Primary PCI Call to Balloon <150 Mins	75.0%	Feb-12	83.3%	86.0%	86.0%	
Pressure Ulcers (Grade 3 and 4)	197	Jan-12	12	108	140	

*** Trust Priorities

Data Quality Key : Process & Procedure Fully Documented



Patient Level



Audit



Director Sign Off



UHL at a Glance - Month 11 - 2011/12

PATIENT EXPERIENCE	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
Inpatient Polling - treated with respect and dignity ***	95.0	Feb-12	95.6	96.1		
Inpatient Polling - rating the care you receive ***	91.0	Feb-12	87.8	86.9		
Outpatient Polling - treated with respect and dignity ***	95.0	Feb-12	99.0	93.4		
Outpatient Polling - rating the care you receive ***	85.0	Feb-12	92.0	85.1		
% Beds Providing Same Sex Accommodation - Wards ***	100%	Feb-12	100.0%	100.0%	100.0%	
% Beds Providing Same Sex Accommodation - Intensivist ***	100%	Feb-12	100.0%	100.0%	100.0%	
ED Waits (2011/12 - Type 1 and 2 plus Urgent Care Centre)	95%	Feb-12	91.6%	94.2%	94.0%	
ED Waits - UHL (Type 1 and 2)	95%	Feb-12	89.5%	92.7%	93.0%	
ED Unplanned Re-attendance Rate (From Qtr 2 2011/12)	<5%	Feb-12	6.1%		5.5%	
ED Left Without Being Seen % (From Qtr 2 2011/12)	<5%	Feb-12	2.4%		2.4%	
ED Time in Department - 95th centile Type 1+2 (From Qtr 2 2011/12)	<4Hrs	Feb-12	331		300	
ED Time to Initial Assessment - 95th centile (From Qtr 2 2011/12)	<15 mins	Feb-12	34		30	
ED Time to Treatment - Median (From Qtr 2 2011/12)	<60 mins	Feb-12	54		40	
RTT 18 week - Admitted	90%	Feb-12	82.8%		80.0%	
RTT 18 week - Non admitted	95%	Feb-12	96.1%		96.5%	
RTT Admitted Median Wait (Weeks)	<=11.1	Feb-12	10.8		9.0	
RTT Admitted 95th Percentile (Weeks)	<=23.0	Feb-12	27.7		27.0	
RTT Non-Admitted Median Wait (Weeks)	<=6.6	Feb-12	5.9		6.1	
RTT Non-Admitted 95th Percentile (Weeks)	<=18.3	Feb-12	17.6		17.0	
RTT Incomplete Median Wait (Weeks)	<=7.2	Feb-12	5.8		6.5	
RTT Incomplete 95th Percentile (Weeks)	<=28.0	Feb-12	20.8		21.0	
STAFF EXPERIENCE / WORKFORCE	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
Sickness absence	3.0%	Feb-12	4.5%	3.5%		
Appraisals	100%	Feb-12	96.1%	96.1%		
VALUE FOR MONEY	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
Income (£000's)	681,756	Feb-12	61,844	642,760	685,783	
Operating Cost (£000's)	635,693	Feb-12	55,053	606,671	645,665	
Surplus / Deficit (as EBIDTA) (£000's)	46,063	Feb-12	6,791	36,089	40,118	
CIP (£000's)	38,245	Feb-12	2,807	22,231	25,591	
Cash Flow (£000's)	18,200	Feb-12	29,924	29,924	3,623	
Financial Risk Rating	3	Feb-12	2	2	2	
Pay - Locums (£ 000s)		Feb-12	288	3,255		
Pay - Agency (£ 000s)		Feb-12	554	10,253		
Pay - Bank (£ 000s)		Feb-12	430	5,447		
Pay - Overtime (£ 000s)		Feb-12	193	2,626		
Total Pay Bill (£ millions)	420,410	Feb-12	35.6	399	424,464	
Cost per Bed Day (£)		Feb-12	157	157		

*** Trust Priorities

Data Quality Key : Process & Procedure Fully Documented



Patient Level

Audit

Director Sign Off

QUALITY and PERFORMANCE REPORT

DoH SERVICE PERFORMANCE 2011/12

Service Performance - Indicators, weighting and scoring

Quality of service

Performance Indicator	Thresholds		Weighting for PF
	Performing	Under-performing	
Four-hour maximum wait in A&E	95%	94%	1
A&E HES data coverage against SITREPS -	90-110%	<80 or > 110%	1
Unplanned reattendance rate 7 days	5%		1
Left with out being seen rate	5%		
Time to initial assessment 95th centile	15mins		
Time to treatment median	60mins		
Cancelled ops - breaches of 28 days readmission guarantee	5.0%	15.0%	1
MRSA	0	>1SD	1
C Diff	0	>1SD	1
RTT - admitted - 95th percentile	<=23	>27.7	0.50
RTT - non-admitted including audiology (DAA) - 95th percentile	<=18.3		0.50
RTT - incomplete - 95th percentile	<=28	>36	0.50
RTT - admitted 18 weeks	90%	85%	0.75
RTT - non-admitted 18weeks	95%	90%	0.75
2 week GP referral to 1st outpatient	93%	88%	0.5
2 week GP referral to 1st outpatient - breast symptoms	93%	88%	0.5
31 day second or subsequent treatment - surgery	94%	91%	0.25
31 day second or subsequent treatment - drug	98%	93%	0.25
31 day diagnosis to treatment for all cancers	96%	91%	0.25
31 day second or subsequent treatment - radiotherapy	94%	89%	0.25
62 day referral to treatment from screening	90%	85%	0.50
62 days urgent GP referral to treatment of all cancers	85%	80%	0.50
Patients that have spent more than 90% of their stay in hospital on a stroke unit	80%	60%	1
Delayed transfers of care	3.5%	5.0%	1

Overall performance score threshold

2010/11 score		
Qtr 1 and Qtr 2	Qtr 1 to Qtr 3	Qtr 1 to Qtr 4
3	3	3
n/a	n/a	n/a
n/a	n/a	n/a
n/a	n/a	n/a
n/a	n/a	n/a
1	1	1
0	0	0
3	3	3
1.5	1.5	1.5
1.5	1.5	1.5
1.5	1.5	1.5
n/a	n/a	n/a
n/a	n/a	n/a
1.5	1.5	1.5
1.5	1.5	1.5
1	1	1
1	1	1
1	1	1
n/a	n/a	0.75
1	1	1
1	1	1
3	3	3
3	3	3

2.67 2.67 2.63

2011/12	
Qtr 1	Qtr2
1	0
3	0
3	0
1	3
3	1
3	3
1.5	1.5
1.5	1.5
1.5	1.5
0.75	2.25
2.25	2.25
1.5	1.5
1.5	1.5
0.75	0.75
0.75	0.75
0.75	0.75
1.5	1.5
1.5	0.5
1	1
3	3

2.65 2.15

Although both ED clinical quality indicators were delivered scored 0 due to data coverage issues relating to the UCC submissions. This issue was raised with DoH by the Chief Executive in December.

RTT Admitted performance as expected due to agreed backlog reduction in Quarter 1

Scoring values

Underperforming	0
Performance under review:	1
Performing:	3

Overall performance score threshold

Underperforming if less than	2.1
Performance under review	2.1 and 2.4
Performing if	2.4+

HISTORY / TREND OVERVIEW - Month 11 - 2011/12

PATIENT SAFETY

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	#	YTD	Target	Status	Page No
MRSA Bacteraemias	2	1	2	0	0	1	1	0	0	1	1	1	0	7	9	9	▲	10
CDT Isolates in Patients (UHL - All Ages)	16	14	9	15	7	8	10	8	13	11	6	4	6	97	165	165	▼	10
% of all adults who have had VTE risk assessment on adm to hosp	75%	79%	92.7%	93.5%	93.5%	94.5%	93.8%	93.8%	93.8%	94.5%	94.3%	94.1%	93.8%	93.9%	90%	90%	▼	
Reduction of hospital acquired venous thrombosis	Qtr 4 - 0.12		Qtr 1 - 0.15			Qtr 2 - 0.18										0.175		
Incidents of Patient Falls	230	239	265	269	245	261	247	232	263	222	220	195		2419	TBC			13
In Hospital Falls resulting in Hip Fracture	2	2	2	0	0	0	0	0	0	0	0	1	0	3	12	12	▲	

CLINICAL EFFECTIVENESS

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status	Page No
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	95.7%	94.5%	96.3%	93.7%	93.4%	94.0%	95.3%	93.1%	94.3%	94.4%	93.2%	94.4%		94.2%	93%	▲	19
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	95.5%	95.4%	97.2%	93.8%	98.3%	97.7%	96.5%	97.3%	95.8%	95.4%	93.3%	93.2%		96.0%	93%	▼	19
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	96.6%	96.8%	97.0%	98.7%	96.8%	97.7%	97.3%	96.8%	98.4%	97.9%	97.2%	97.6%		97.5%	96%	▲	19
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	100.0%	100.0%	100.0%	99.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		99.9%	98%	◀▶	19
31-Day Wait For Second Or Subsequent Treatment: Surgery	96.3%	95.8%	97.1%	95.5%	94.1%	96.9%	94.0%	95.6%	94.1%	98.8%	92.1%	88.6%		94.9%	94%	▼	19
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	100.0%	98.8%	99.1%	99.4%	100.0%	99.3%	97.8%	99.3%	99.2%	98.7%	98.3%	97.0%		98.8%	94%	▼	19
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	87.2%	85.9%	87.3%	85.4%	84.1%	81.8%	83.2%	81.1%	79.4%	81.3%	84.9%	86.3%		83.4%	85%	▲	19
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	87.0%	100.0%	97.1%	94.9%	93.5%	92.5%	87.9%	91.8%	95.2%	98.3%	91.8%	94.7%		93.6%	90%	▲	19
62-Day Wait For First Treatment From Consultant Upgrade	100.0%	100.0%	100.0%	-----	100.0%	n/a	100.0%	80.0%	100.0%	-----	0.0%	-----		85.7%	85%	▼	19

HISTORY / TREND OVERVIEW - Month 11 - 2011/12

CLINICAL EFFECTIVENESS (Continued)

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status	Page No
Emergency 30 Day Readmissions (Following Elective Admission)	4.8%	5.0%	4.9%	4.8%	5.3%	4.9%	5.1%	4.8%	5.3%	4.7%	5.7%	5.4%		5.1%	1.6%	▲	12
Emergency 30 Day Readmissions (Following Emergency Admission)	11.2%	10.8%	9.4%	9.2%	10.0%	9.6%	9.7%	9.7%	9.0%	9.1%	9.5%	9.6%		9.5%	8.0%	▼	12
Mortality (CHKS - Risk Adjusted) - OVERALL	82.4	86.8	84.8	85.9	74.8	80.7	80.1	87.1	78.5	74.9	74.3	82.5		82.0	85	▼	
Stroke - 90% of Stay on a Stroke Unit	56%	80%	85%	87%	89%	88%	88%	75%	82%	91%	90%	81%		86%	80%	▼	
Primary PCI Call to Balloon <150 Mins	88.9%	86.4%	85.0%	81.8%	96.0%	82.6%	94.4%	72.2%	84.8%	90.0%	88.5%	86.4%	83.3%	86.0%	75%	▼	18
Pressure Ulcers (Grade 3 and 4)	14	20	15	12	17	17	8	5	10	6	6	12		108	197	▼	13

HISTORY / TREND OVERVIEW - Month 11 - 2011/12

PATIENT EXPERIENCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status	Page No
Inpatient Polling - treated with respect and dignity	95.2	95.0	96.6	96.3	96.5	95.7	96.0	95.3	96.1	96.0	96.1	96.2	95.6	96.1	95.0	▼	15
Inpatient Polling - rating the care you receive	86.1	83.8	88.4	87.2	87.6	87.0	85.4	85.0	86.8	86.3	87.7	86.6	87.8	86.9	91.0	▲	15
Outpatient Polling - treated with respect and dignity				96.7	93.5	84.0		91.0	94.3	98.0	92.0	92.0	99.0	93.4	95.0	▲	
Outpatient Polling - rating the care you receive				87.0	85.1	72.6		82.5	85.7	84.0	91.0	86.0	92.0	85.1	85.0	▲	
% Beds Providing Same Sex Accommodation -Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶	18
% Beds Providing Same Sex Accommodation - Intensivist	100%	98%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶	18
A&E Waits - Leics (10/11) - UHL Incl UCC (11/12)	94.1%	93.8%	93.4%	93.7%	95.8%	97.2%	93.8%	92.0%	92.0%	94.4%	97.0%	95.5%	91.6%	94.2%	95%	▼	16
A&E Waits - UHL (Type 1 and 2)	91.1%	90.4%	91.5%	92.1%	94.7%	96.4%	92.1%	89.9%	89.8%	92.9%	96.3%	94.4%	89.5%	92.7%	95%	▼	16
Unplanned 7 Day Re-attendance Rate (From Qtr 2 11/12)	6.5%	6.3%	6.6%	5.6%	5.2%	5.9%	6.7%	5.5%	6.0%	5.7%	5.4%	6.1%	6.1%		<5%	◀▶	16
Left Without Being Seen % (From Qtr 2 11/12)	2.2%	2.5%	2.5%	2.2%	2.0%	2.1%	2.8%	2.4%	2.9%	2.0%	2.3%	2.1%	2.4%		<5%	▼	16
ED Time in Department - 95th centile Type 1+2 (From Qtr 2 11/12)	331	343	306	307	256	239	304	338	341	288	240	264	331		<240 Mins	▼	16
Time to Initial Assessment - 95th centile (From Qtr 2 11/12)	49	63	70	56	41	39	48	48	61	48	42	32	34		<15 Mins	▼	16
Time to Treatment - Median (From Qtr 2 11/12)	50	58	59	54	50	34	34	39	44	43	42	42	54		<60 mins	▼	16
RTT 18 week - Admitted	91.0%	91.8%	91.7%	90.0%	85.0%	91.4%	92.0%	90.8%	90.9%	88.5%	87.6%	84.6%	82.8%		90%	▼	17
RTT 18 week - Non admitted	97.1%	97.1%	97.3%	97.2%	97.0%	97.2%	96.8%	96.6%	96.4%	96.2%	96.6%	95.5%	96.1%		95%	▲	17
RTT Admitted Median Wait (Weeks)	10.4	9.1	8.5	9.5	10.2	8.5	8.8	8.9	9.0	8.4	9.2	10.1	10.8		<=11.1	▼	17
RTT Admitted 95th Percentile (Weeks)	23.2	24.1	23.5	25.1	25.2	21.2	21.1	22.9	22.5	25.3	25.8	26.9	27.7		<=23.0	▼	17
RTT Non-Admitted Median Wait (Weeks)	5.5	5.4	5.3	6.4	6.2	6.0	6.5	6.8	6.3	6.1	5.8	6.9	5.9		<=6.6	▲	17
RTT Non-Admitted 95th Percentile (Weeks)	16.8	16.8	16.4	16.8	17.1	17.0	17.2	17.4	17.6	17.7	17.4	17.8	17.6		<=18.3	▲	17
RTT Incomplete Median Wait (Weeks)	5.2	5.5	6.3	6.4	5.8	6.3	6.3	6.4	5.9	6.0	6.8	6.6	5.8		<=7.2	▲	17
RTT Incomplete 95th Percentile (Weeks)	19.1	21.8	21.3	19.4	19.6	21.1	21.1	22.5	22.6	21.9	22.5	21.4	20.8		<=28.0	▲	17

HISTORY / TREND OVERVIEW - Month 11 - 2011/12

STAFF EXPERIENCE / WORKFORCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status	Page No
Sickness absence	3.4%	3.4%	3.2%	3.0%	3.4%	3.4%	3.1%	3.2%	3.4%	3.8%	3.8%	3.7%	4.5%	3.5%	3.0%	▼	20
Appraisals	90.1%	90.3%	90.4%	88.8%	86.8%	85.9%	87.7%	88.7%	93.5%	93.9%	95.0%	96.1%	96.1%	96.1%	100%	◀▶	20

VALUE FOR MONEY

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD
Income (£000's)	58,759	64,835	56,760	55,861	56,745	56,772	56,977	58,516	58,722	58,984	61,037	60,542	61,844	642,760
Operating Cost (£000's)	55,770	58,922	55,260	55,886	55,534	55,943	54,884	54,768	55,416	54,797	55,297	53,833	55,053	606,671
Surplus / Deficit (as EBIDTA) (£000's)	2,989	5,913	1,500	-25	1,211	829	2,093	3,748	3,306	4,187	5,740	6,709	6,791	36,089
CIP (£000's)	2,798	3,270	1,012	912	1,422	1,508	1,650	2,243	2,486	2,652	2,772	2,767	2,807	22,231
Cash Flow (£000's)	18,358	10,306	14,465	9,778	4,425	8,296	21,003	15,384	20,927	16,563	16,872	21,818	29,924	29,924
Financial Risk Rating	2	2	2	1	1	1	1	1	1	1	2	2	2	2

HR Pay Analysis

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD
	£	£	£	£	£									
Locums (£ 000s)	443	335	283	328	417	315	392	281	231	199	293	229	288	3,255
Agency (£ 000s)	1,540	1,990	1,427	1,475	1,526	1,522	866	576	569	656	515	567	554	10,253
Bank (£ 000s)	478	504	540	509	509	554	477	480	504	490	543	413	430	5,447
Overtime (£ 000s)	378	447	453	317	256	282	224	181	168	181	196	173	193	2,626
Total Pay Bill (£ millions)	37.5	38.1	36.9	37.1	37.5	37.0	36.3	35.7	35.9	35.8	35.7	35.3	35.6	399

Average Cost per Bed Day

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12
	£	£	£	£	£	£	£	£	£	£	£	£	£
Cost per Bed Day (£)	183	172	169	165	165	166	161	157	159	161	157	143	157

INFECTION PREVENTION

Performance Overview

MRSA – no cases of MRSA were reported during February with a year to date position of 7. One case following root cause analysis is suitable for appeal.

CDifficile – a positive month 11 report with 6 cases identified. The year to date position is 97 and ahead of target to date (165 end of year).

MRSA elective and non-elective screening has been achieved at 100% respectively

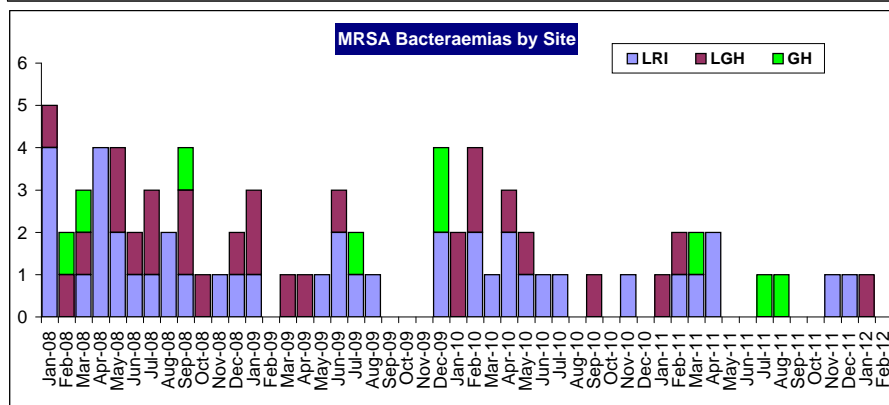
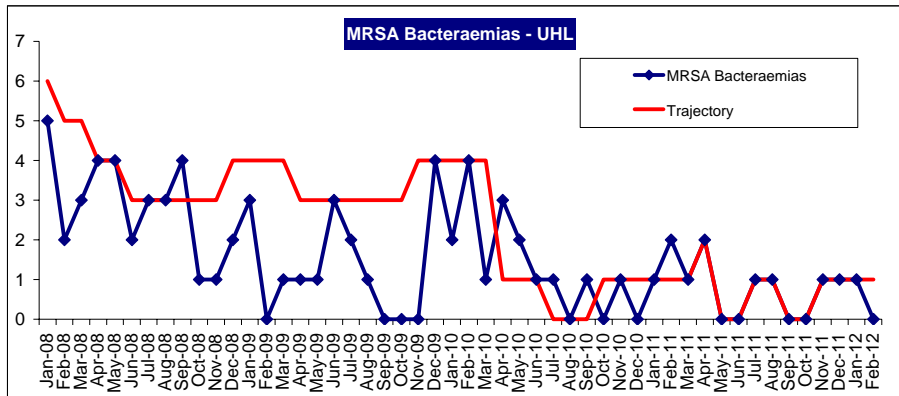
Key Actions

Correspondence has been forwarded to all clinicians regarding expectations and compliance with recommended infection prevention procedures.

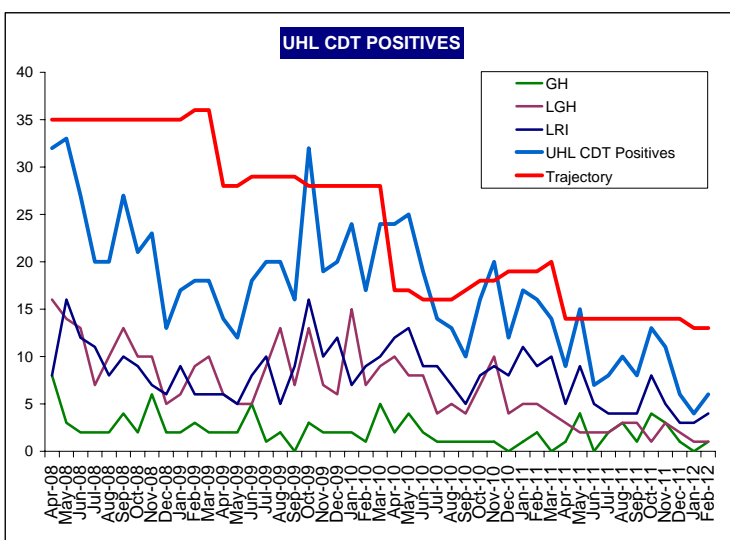
Full Year Forecast

MRSA - 7 (target 9)
CDiff - 110 (target 165)

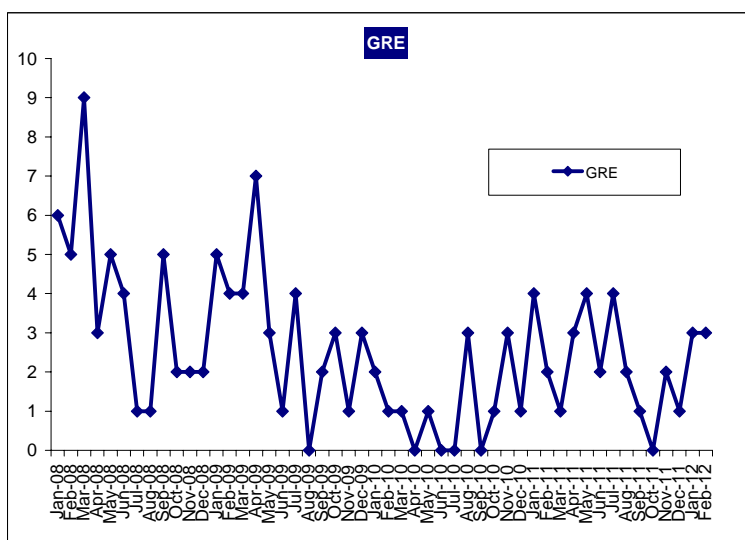
MRSA BACTERAEMIA



CLOSTRIDIUM DIFFICILE - UHL CDT POSITIVES



GLYCOPEPTIDE RESISTANT ENTEROCOCCUS (GRE)



TARGET / STANDARD

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
MRSA	2	1	2	0	0	1	1	0	0	1	1	1	0	7	9	▲
C. Diff.	16	14	9	15	7	8	10	8	13	11	6	4	6	97	165	▼
Rate / 1000 Adm's	2.1	1.6	1.2	2.0	0.9	1.0	1.3	1.1	1.8	1.4	0.8	0.5	0.8	1.2		

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
GRE	2	1	3	4	2	4	2	1	0	2	1	3	3	25	TBC	
MSSA			1	4	2	5	2	6	4	3	2	0	5	34	No National Target	
E-Coli					38	39	42	39	41	45	38	37	35	354	No National Target	

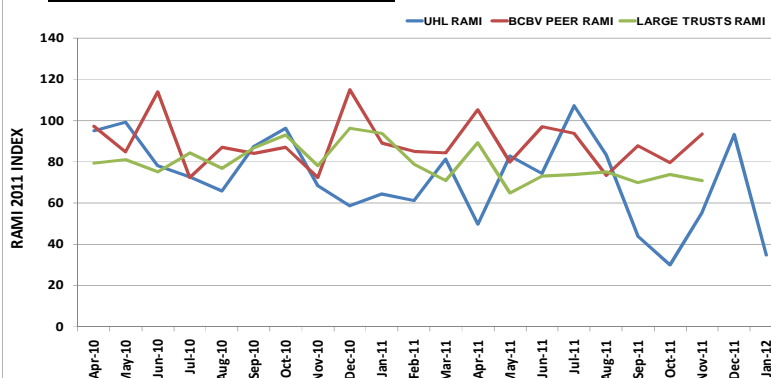
MORTALITY

Performance Overview

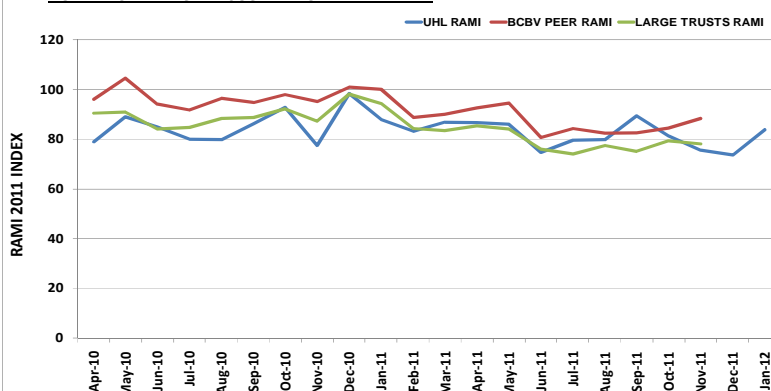
UHL's mortality rate for February has risen slightly for 'overall crude mortality'. It is anticipated there will be a similar increase in the trust's risk adjusted mortality when this is available.

Review of UHL's mortality data for the past 5 years' suggests that this is in line with normal seasonal variation. Further analysis is being undertaken for review by the GRMC later this month.

ELECTIVE RISK ADJUSTED MORTALITY INDEX



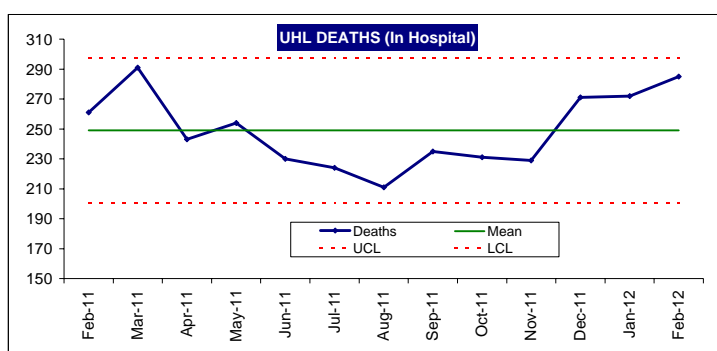
NON ELECTIVE RISK ADJUSTED MORTALITY INDEX



CHKS - RISK ADJUSTED MORTALITY

	Jan-11	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	YTD
Observed Deaths	293	231	252	173	211	197	205	187	198	196	197	233	238	2,035
RAMI	87.4	82.4	86.8	84.8	85.9	74.8	80.7	80.1	87.1	78.5	74.9	74.3	82.5	82.0

Clinical Business Unit	CURRENT MONTH (Feb)		
	Spells	Deaths	%
Specialist Surgery	1628	5	0.3%
GI Medicine, Surgery and Urology	4016	43	1.1%
Cancer, Haematology and Oncology	1994	21	1.1%
Musculo-Skeletal	896	9	1.0%
Medicine	2118	96	4.5%
Respiratory	1193	51	4.3%
Cardiac, Renal & Critical Care	1342	52	3.9%
Emergency Department	6	3	50.0%
Women's	4199	4	0.1%
Children's	873	1	0.1%
Anaesthesia and Theatres	373		
Imaging	9		
Sum:	18647	285	1.5%



UHL CRUDE DATA TOTAL SPELLS

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12
UHL Crude Data - TOTAL Spells	18300	20761	16896	17539	18897	18387	18184	18005	17953	18540	18381	19139	18647
UHL Crude Data - TOTAL Deaths	261	291	243	254	230	224	211	235	231	229	271	272	285
Percent	1.4%	1.4%	1.4%	1.4%	1.2%	1.2%	1.2%	1.3%	1.3%	1.2%	1.5%	1.4%	1.5%

YTD	Target
200568	
2685	TBC
1.3%	TBC

UHL CRUDE DATA ELECTIVE SPELLS

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12
UHL Crude Data - ELECTIVE Spells	8073	9406	7761	8098	9238	8570	8810	8761	8690	9251	8451	8909	9154
UHL Crude Data - ELECTIVE Deaths	6	8		5	7	11	5	4	6	12	4	5	
Percent	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.0%	0.1%	0.1%	0.0%	0.1%	

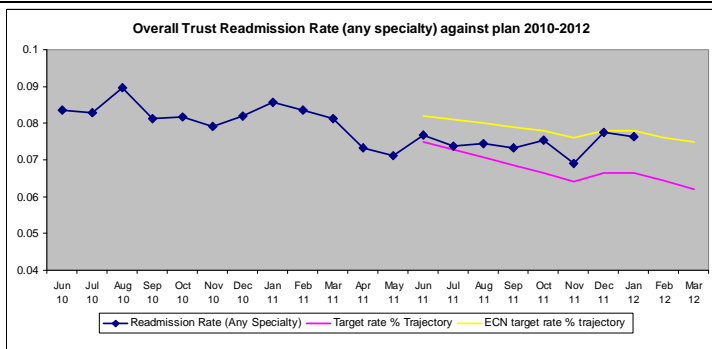
YTD	Target
95693	
74	TBC
0.1%	TBC

UHL CRUDE DATA NON ELECTIVE SPELLS

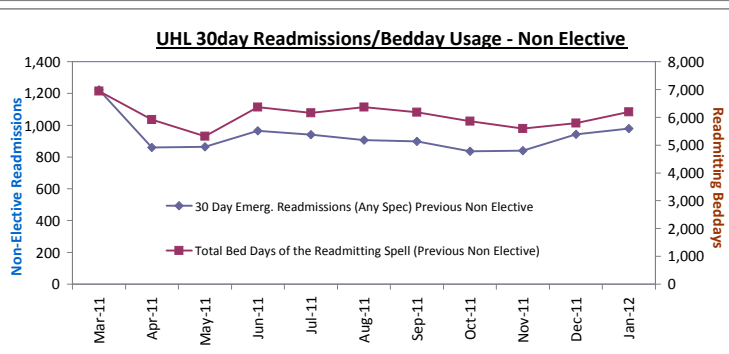
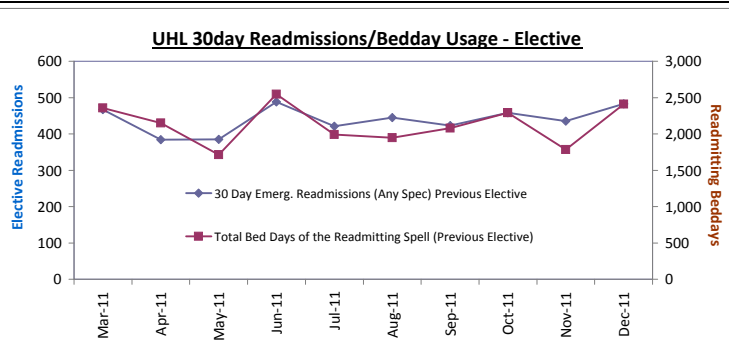
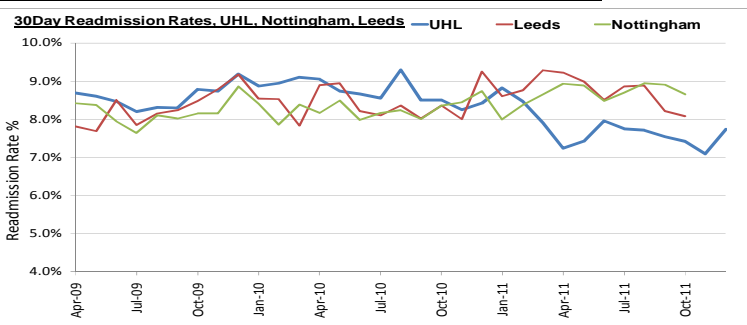
	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12
UHL Crude Data - NON ELECTIVE Spells	10227	11355	9135	9441	9659	9817	9374	9244	9263	9289	9930	10230	9493
UHL Crude Data - NON ELECTIVE Deaths	255	283	239	249	223	213	200	230	227	223	259	268	280
Percent	2.5%	2.5%	2.6%	2.6%	2.3%	2.2%	2.1%	2.5%	2.5%	2.4%	2.6%	2.6%	2.9%

YTD	Target
104875	
2611	TBC
2.5%	TBC

EMERGENCY READMISSIONS



CHKS Benchmarking - 30 Day Emergency Read Rates - UHL, Notts and Leeds



ALL READMISSIONS

	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	YTD	Target
Discharges	20761	16896	17539	18897	18387	18184	18005	17953	18540	18381	19139	181,921	
30 Day Emerg. Readmissions (Any Spec)	1,689	1,245	1,250	1,452	1,361	1,351	1,321	1,293	1,276	1,425	1,460	13,434	
Readmission Rate (Any Speciality)	8.10%	7.40%	7.10%	7.70%	7.40%	7.40%	7.30%	7.20%	6.90%	7.80%	7.60%	7.4%	6.1%
30 Day Emerg. Readmissions (Same Spec)	980	766	768	906	837	813	804	789	747	870	881	8,181	
Readmission Rate (Same Speciality)	4.70%	4.50%	4.40%	4.80%	4.60%	4.50%	4.50%	4.40%	4.00%	4.70%	4.60%	4.5%	
Improvement trajectory (Any Speciality)													
Total Bed Days of Readmitting Spells	9,296	8,066	7,030	8,908	8,146	8,311	8,261	8,148	7,381	8,194	8,452	80,897	

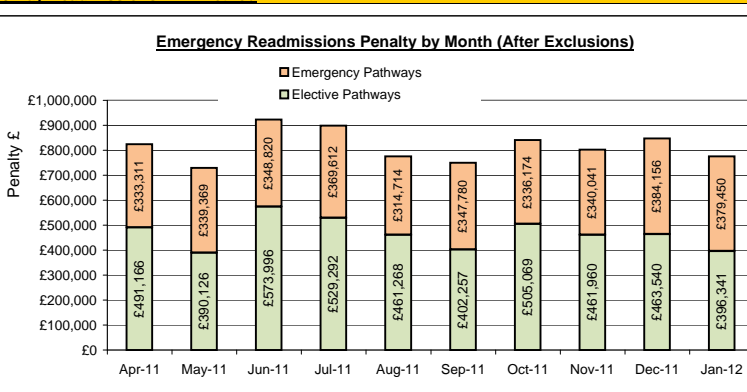
Readmissions - Previous Spell = Elective

	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	YTD
Discharges	9406	7761	8098	9238	8570	8810	8761	8690	9251	8451	8909	86,539
30 Day Emerg. Readmissions (Any Spec) Previous Elective	467	384	385	488	421	445	423	458	435	483	481	4,403
Readmission Rate (Any Speciality) Previous Elective	5.00%	4.90%	4.80%	5.30%	4.90%	5.10%	4.80%	5.30%	4.70%	5.70%	5.40%	5.1%
Total Bed Days of the Readmitting Spell (Previous Elective)	2,358	2,151	1,713	2,548	1,990	1,946	2,079	2,289	1,786	2,408	2,261	21,171

Readmissions - Previous Spell = Non Elective

	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	YTD
Discharges	11,355	9,135	9,441	9,659	9,817	9,374	9,244	9,263	9,289	9,930	10,230	95,382
30 Day Emerg. Readmissions (Any Spec) Previous Non Elective	1,222	861	865	964	940	906	898	835	841	942	979	9,031
Readmission Rate (Any Speciality) Previous Non Elective	10.8%	9.4%	9.2%	10.0%	9.6%	9.7%	9.7%	9.0%	9.1%	9.5%	9.6%	9.5%
Total Bed Days of the Readmitting Spell (Previous Non Elective)	6,938	5,915	5,317	6,360	6,156	6,365	6,182	5,859	5,595	5,786	6,191	59,726

30 Day Readmissions PBR Method



Performance Overview

The readmission rate in January dropped from December but remained high. It has followed a similar pattern to that seen within the general increase in emergency admissions.

The Trust remains at the Emergency Care Network plan of 10% reduction. Performance continues to be better than other local UK University Teaching hospitals as is the trend.

Agreement has been reached with commissioners on a holding threshold for the penalisation of readmissions for 2012/13. The threshold is 20%. This will lead to a reduction in the baseline readmissions penalty of £5.2m in 2012/13 from 2011/12. As per the Operating Framework, a further joint commissioner and Trust clinical review of readmissions will be undertaken to establish the final level of penalty, but it is not likely to be higher than 20%. This clinical review will also refocus the direction of readmission reduction.

The improvement programme continues to work in 4 key areas, in partnership with primary and community care:

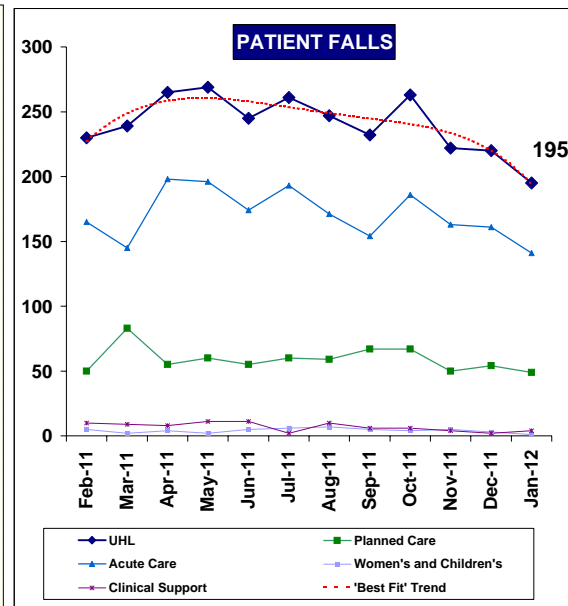
- 1) Coding & Commissioning – now resolved for 2011/12 as described above.
- 2) A discharge improvement group is now established in the Acute Division and this has defined a discharge and communication process for patients based on best practice which is to be piloted for medical patients from March. A risk stratification model is being analysed that if workable will be able to identify patients most at risk of readmission and then a pathway will be developed to ensure they are supported in the community post-discharge.
- 3) Specialty Priorities – work continues in the priority specialties and are beginning to be implemented. This includes the development of a new catheter pathway for implementation in March, the implementation of the COPD care bundle in February, a new chest pain pathway, a new process for senior review of potential readmissions within ED, along with redesign work being undertaken for patients with non-specific abdominal pain.
- 4) Community work streams - some of the readmissions penalty has been diverted into expansion of community health

FALLS

Performance Overview

The data for January '12 highlights that the number of in patient falls within 1 month is now at its lowest point for the last 12 months. A weekly review of the falls data by the Head of Nursing and Lead Nurses is enabling actions to be focused on specific wards. The most significant reduction is being seen in the Acute Division, where the number of in patient falls are highest.

An update paper on the progress in the falls work in the Trust is to be submitted to the GRMC at the end of March.



TARGET / STANDARD

Incidents of Patient Falls	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target
UHL	230	239	265	269	245	261	247	232	263	222	220	195		2419	TBC
Planned Care	50	83	55	60	55	60	59	67	67	50	54	49		576	TBC
Acute Care	165	145	198	196	174	193	171	154	186	163	161	141		1737	TBC
Women's and Children's	5	2	4	2	5	6	7	5	4	5	3	1		42	TBC
Clinical Support	10	9	8	11	11	2	10	6	6	4	2	4		64	TBC
In Hospital Falls resulting in Hip Fracture	2	2	2	0	0	0	0	0	0	0	0	1	0	3	12

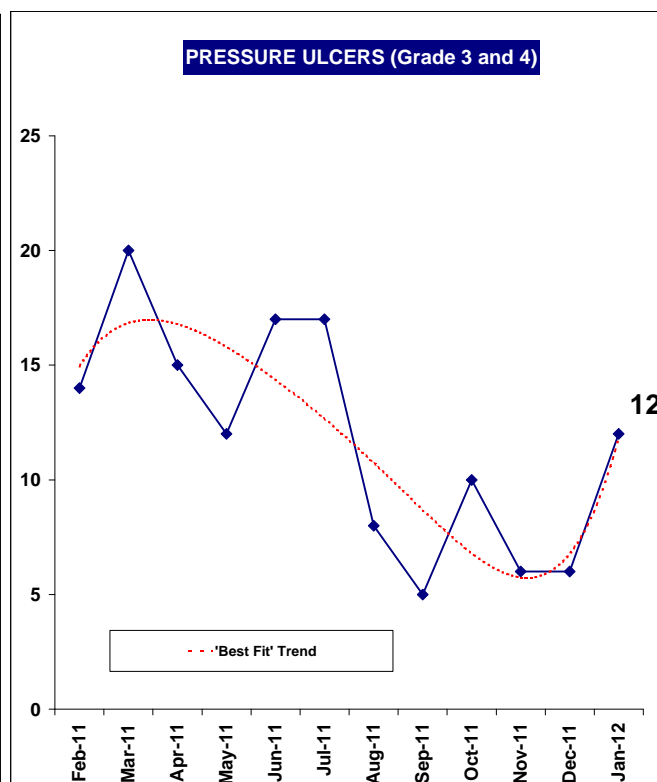
PRESSURE ULCERS (Grade 3 and 4)

Performance Overview

There were 12 reported hospital acquired grade 3 and 4 pressure ulcers in January 2012. 7 for Acute Care and 5 for Planned Care.

Nine of the pressure ulcers were classed as avoidable and two were unavoidable. One ulcer is still being investigated by the tissue viability team.

Although there has been an increase in the number of ulcers from December, overall incidence continues to reduce when comparing data from January 2011 when 33 ulcers were reported. Nevertheless, all ward sisters and charge nurses from the wards where ulcers have been reported from January '12 are meeting with the Assistant Director of Nursing to review individual incidences and actions required.



TARGET / STANDARD

REPORTED ONE MONTH IN ARREARS														October and January - each have 1 case to be classified		YTD	Target
Pressure Ulcers (Grade 3 and 4)	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12			108	197
Attributable to Trust	14	20	15	12	17	17	8	5	10	6	6	12		6	6	23	
Not Attributable to Trust														3	0	9	

PATIENT EXPERIENCE

Performance Overview

The "Patient Experience Survey" for February 2012 resulted in 1,291 surveys being returned, a Trust return rate of 89.4% an increase by 0.7%.

The 'overall respect and dignity' score remains green across the Trust. The 'overall how would you rate the care whilst in hospital' score remains amber across the Trust but has increased by 1.2 points.

A pilot to provide additional ward support volunteers to underperforming wards to see how this improves patients experience and perception of their overall care, finished at the end of February 2012. Trends in satisfaction scores for the pilot areas were analysed using December's results as a comparison to January/February's results. Unfortunately no consistent improvements were noted in scores for any of the patient experience survey questions, however a bespoke volunteer survey was completed at the same time by patients and carers that specifically asked about the impact that volunteers have on the overall patient experience. Feedback reflected the great value patients place on volunteer support specifically; someone to talk to, listen, be helpful, be interested and make patients smile. A full separate report outlining all outcome measures from the pilot is now available.

When comparing the trust scores minus the underperforming wards in Medicine all twelve trust wide 'Caring at its Best' project question scores are now rated green.

The outpatients Patient Experience survey questions 'Overall, how would you rate the care you received in this area?' score remains green with an increase in satisfaction by six points and the 'overall respect and dignity' score has improved remarkably by seven points to a 99.0 satisfaction, one point away from the ideal and now rated green.

Return Rates - February 2012

Division	Surveys Returned	Target	% Achieved
Acute Care	661	735	97.0%
Planned Care	459	630	77.2%
Women's and Children's	171	170	101.7%
UHL	1,291	1,535	89.4%

Trust Scores in February 2012 minus underperforming Wards in Medicine

DIVISIONAL PROJECTS

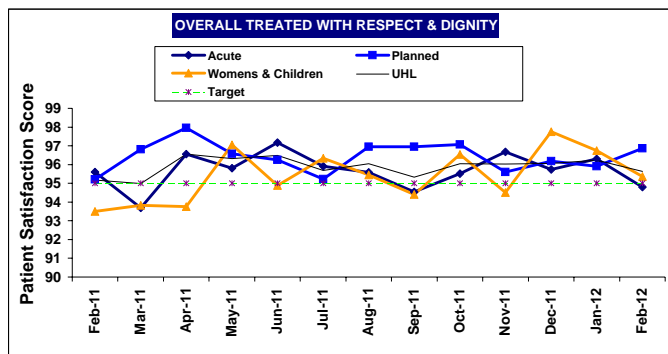
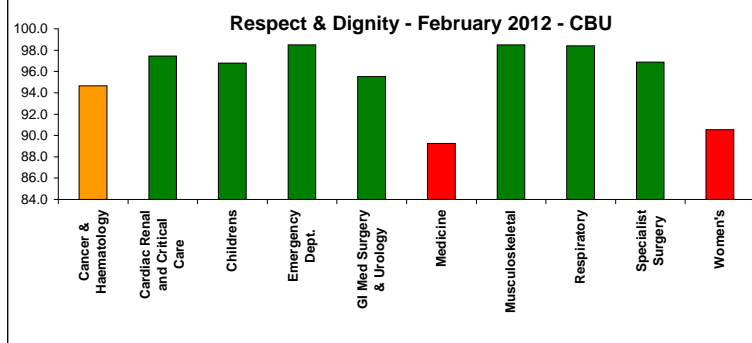
Area for Development	Lead Division	PES Question	Mar-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Feb-12
Noise at Night	Acute Care	Q10a – Were you ever bothered by noise at night from other patients?	65.0	70.6	67.2	73.3	66.9	67.0	66.2	69.4	73.1
		Q10b – Were you ever bothered by noise at night from hospital staff?	84.2	85.2	85.4	89.0	86.2	87.3	87.0	85.9	87.2
Staff Attitudes and Behaviours	Women's and Children's	Q13a – When you had important questions to ask the doctors did you get answers that you could understand?	88.2	89.3	87.5	88.9	88.9	89.1	89.6	90.2	91.6
	Children's	Q14a – Did any of the doctors talk in front of you as if you were not there?	88.9	89.6	87.9	88.0	88.9	89.4	89.4	89.6	91.4
		Q16 – Were you involved as much as you wanted to be in decisions about your care and treatment? CQUIN (National CQUIN Target = 71.0)	77.3	76.6	77.7	78.8	79.2	76.9	79.0	78.3	79.6
		Q17 – Did you find someone on the hospital staff to discuss your worries and fears? CQUIN (National CQUIN Target = 61.0)	79.5	81.0	79.0	80.8	80.5	79.7	81.4	81.6	84.3
Providing Information	Clinical Support	Q15 – Sometimes in hospital a member of staff will say one thing and another say something quite different. Did this happen to you?	84.7	85.4	82.6	85.8	85.2	85.8	85.4	86.3	87.5
		Q18b – Were you given enough privacy when discussing your condition or treatment? CQUIN (National CQUIN Target = 84.0)	92.3	94.9	94.2	94.3	94.1	94.9	95.6	95.7	96.3
		Q24 – Has a member of staff told you about medication side effects to watch for when you went home? CQUIN (National CQUIN Target = 48.0)	73.4	75.2	73.4	74.7	72.6	76.6	76.3	78.7	80.1
		Q26 – Has a member of staff told you who to contact if you are worried about your condition or treatment after you leave hospital? CQUIN (National CQUIN Target = 78.0)	69.8	76.5	73.5	75.2	78.2	77.8	75.8	79.5	81.8
Pain	Planned Care	Q19 – Do you think the hospital staff did everything they could to help control your pain?	90.5	90.7	91.7	92.8	90.2	91.1	91.7	91.8	93.2
		Q28 – Overall, how would you rate the care you received?	83.8	85.4	85.0	86.8	86.3	87.7	86.6	87.8	89.7

PATIENT EXPERIENCE

TARGET / STANDARD

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

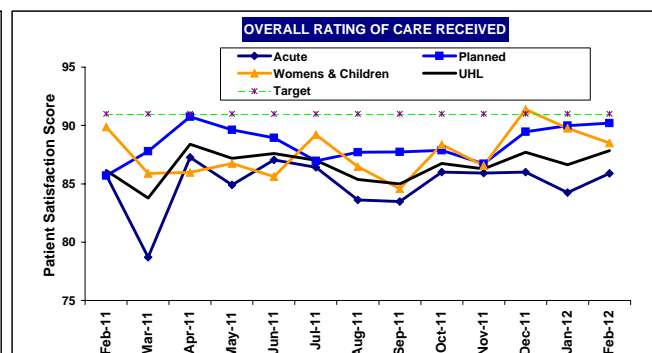
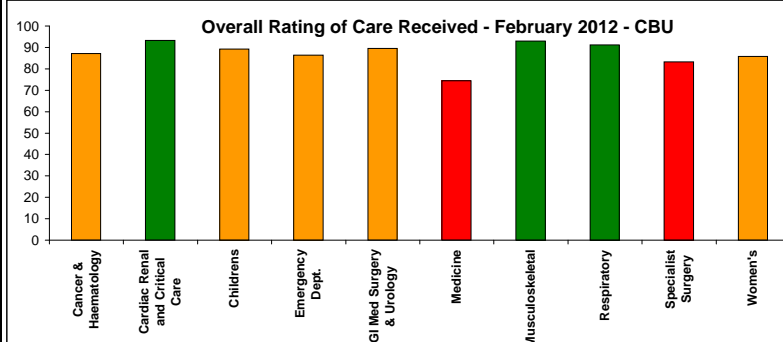
	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Status
Division														
Acute	95.6	93.7	96.6	95.8	97.2	95.9	95.6	94.5	95.5	96.7	95.7	96.3	94.8	▼
Planned	95.2	96.8	98.0	96.6	96.2	95.2	97.0	97.0	97.1	95.6	96.2	95.9	96.9	▲
Womens & Children	93.5	93.8	93.8	97.1	94.9	96.3	95.5	94.4	96.5	94.5	97.8	96.7	95.4	▼
UHL	95.2	95.0	96.6	96.3	96.5	95.7	96.0	95.3	96.1	96.0	96.1	96.2	95.6	▼



TARGET / STANDARD

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

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Status
Division														
Acute	85.8	78.7	87.3	84.9	87.0	86.4	83.6	83.5	86.0	85.9	86.0	84.2	85.9	▲
Planned	85.7	87.8	90.8	89.6	88.9	87.0	87.7	87.7	87.9	86.7	89.5	90.0	90.2	▲
Womens & Children	89.9	85.9	86.0	86.8	85.6	89.2	86.5	84.6	88.3	86.5	91.4	89.7	88.5	▼
UHL	86.1	83.8	88.4	87.2	87.6	87.0	85.4	85.0	86.8	86.3	87.7	86.6	87.8	▲



EMERGENCY DEPARTMENT

Performance Overview

Performance for February Type 1, 2 is 89.5%, and 91.6% including the Urgent Care Centre (UCC). The year to date performance for ED (UHL+UCC) is 94.2%.

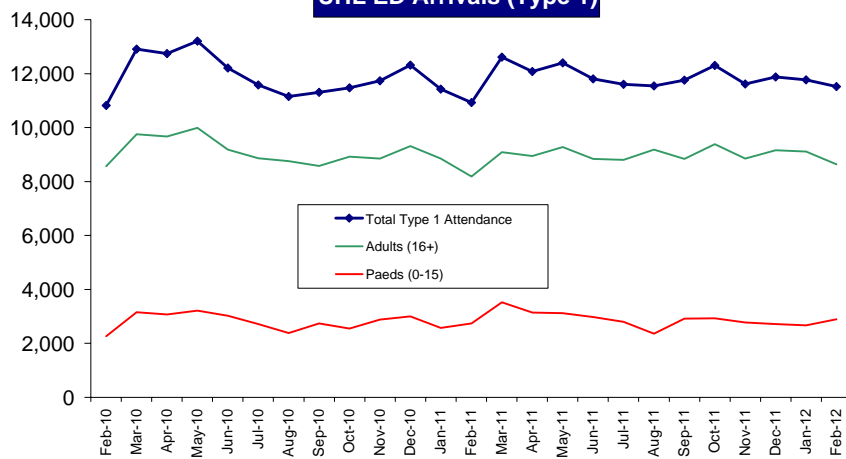
Key Actions

Confirmation has been received from the DoH that the data coverage issue reported in the October and December Trust Board papers, has been resolved from Quarter 2 as expected. The UCC are now in a position to submit patient level data sets as well as aggregate submissions.

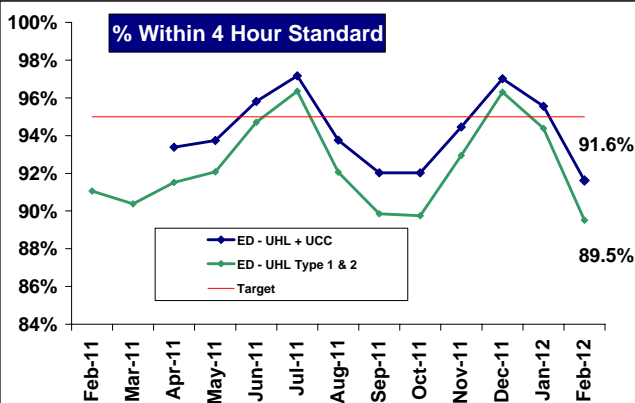
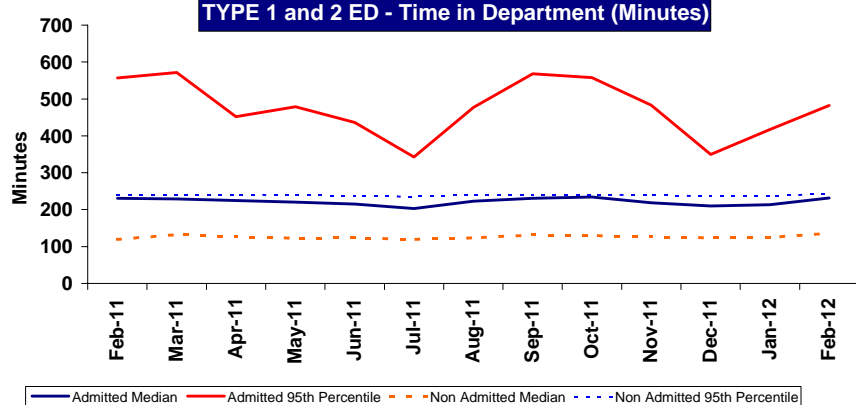
Full Year Forecast

ED + UCC 4 hr performance - 94.0%

UHL ED Arrivals (Type 1)



TYPE 1 and 2 ED - Time in Department (Minutes)



Total Time in the Department

February 2012 - ED Type 1 and 2

	Admitted	Not Admitted	Total
0-2 Hours	199	4366	4565
3-4 Hours	1623	5292	6915
5-6 Hours	482	380	862
7-8 Hours	229	96	325
9-10 Hours	85	20	105
11-12 Hours	41	9	50
12 Hours+	9	5	14
Sum:	2668	10168	12836

CLINICAL QUALITY INDICATORS

PATIENT IMPACT

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	TARGET
Left without being seen %	2.2%	2.5%	2.5%	2.2%	2.0%	2.1%	2.8%	2.4%	2.9%	2.0%	2.3%	2.1%	2.4%	<=5%
Unplanned Re-attendance %	6.5%	6.3%	6.6%	5.6%	5.2%	5.9%	6.7%	5.5%	6.0%	5.7%	5.4%	6.1%	6.1%	< 5%

TIMELINESS

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	TARGET
Time in Dept (95th centile)	331	343	306	307	256	239	304	338	341	288	240	264	331	< 240 Minutes
Time to initial assessment (95th)	49	63	70	56	41	39	48	48	61	48	42	32	34	<= 15 Minutes
Time to treatment (Median)	50	58	59	54	50	34	34	39	44	43	42	42	54	<= 60 Minutes

4 HOUR STANDARD

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	95.0%	
ED - (UHL + UCC)			93.4%	93.7%	95.8%	97.2%	93.8%	92.0%	92.0%	94.4%	97.0%	95.5%	91.6%	94.2%	95.0%	▼
ED - UHL Type 1 and 2	91.1%	90.4%	91.5%	92.1%	94.7%	96.4%	92.1%	89.9%	89.8%	92.9%	96.3%	94.4%	89.5%	92.7%	95.0%	▼
ED Waits - Type 1	90.0%	89.3%	90.6%	91.3%	94.1%	95.9%	91.0%	88.7%	88.5%	92.1%	96.0%	93.7%	88.3%	91.8%	95.0%	▼

18 WEEK REFERRAL TO TREATMENT

Performance Overview

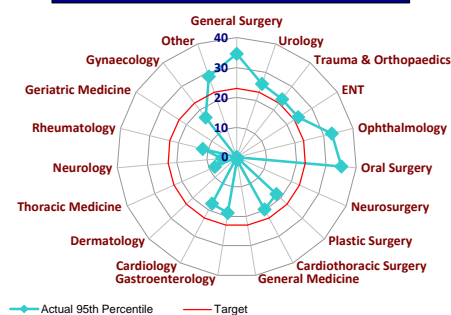
Admitted performance in February stands at 82.8% in accordance with the planned reduction agreed with commissioners. The non-admitted target has been achieved at 96.1%.

Key Actions

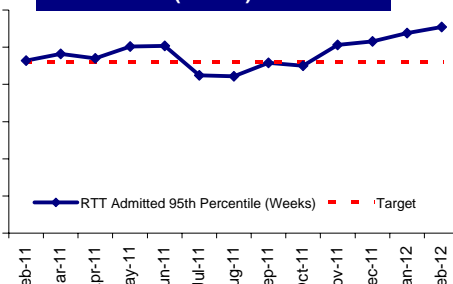
Admitted pathways are those that end in an admission to hospital (either inpatient or day case) for treatment. The Trust agreed a plan with the commissioners to increase activity in Quarter 3 and Quarter 4 to reduce the number of patients on an 18 week backlog and 26 week backlog.

Non-admitted pathways are those that end in treatment that did not require admission to hospital or where no treatment is required. Additional focus has been placed on validating patients that are waiting over 18+ weeks and 26+.

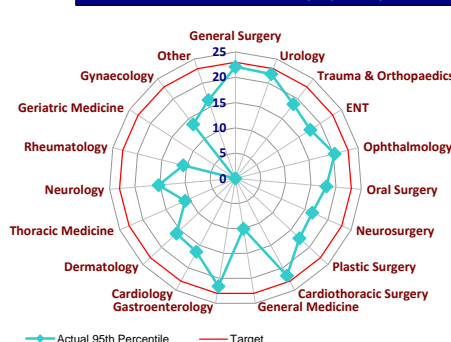
Admitted 95th Percentile by Specialty - Feb 2012



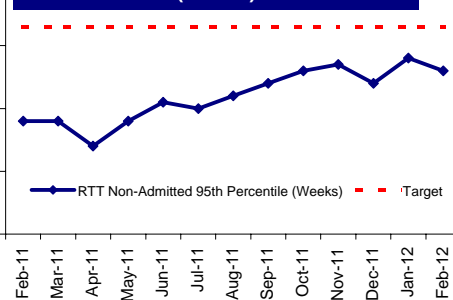
RTT - Admitted 95th Percentile Wait (Weeks)



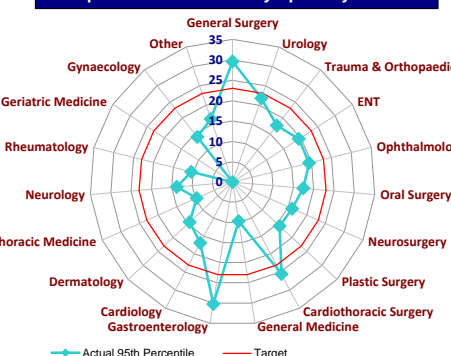
Non-Admitted 95th Percentile by Specialty - Feb 2012



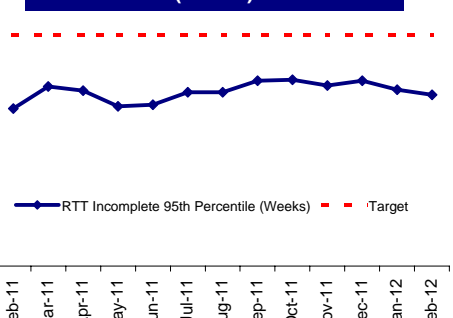
RTT - Non-Admitted 95th Percentile Wait (Weeks)



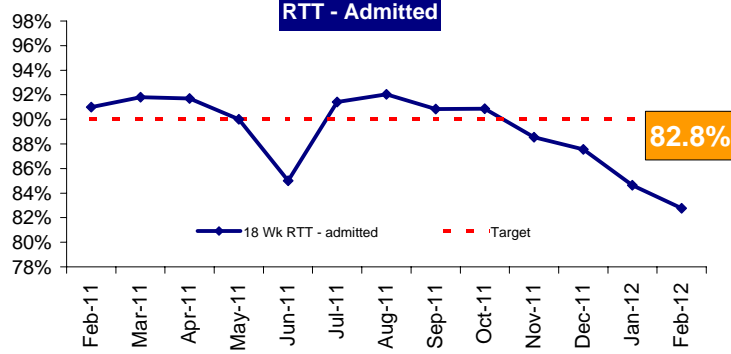
Incomplete 95th Percentile by Specialty - Feb 2012



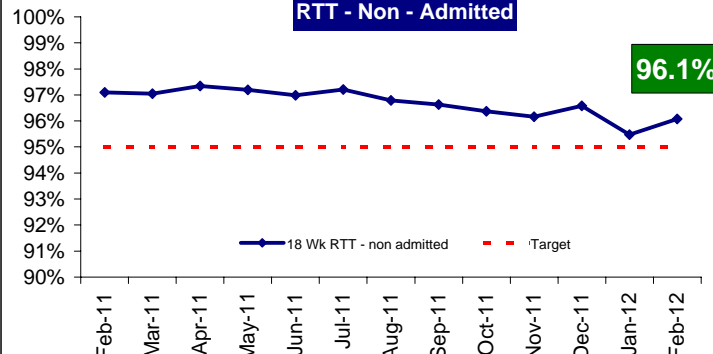
RTT - Incomplete 95th Percentile Wait (Weeks)



RTT - Admitted



RTT - Non - Admitted



TARGET / STANDARD

RTT	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12
18 Wk - admitted (%)	91.0	91.8	91.7	90.0	85.0	91.4	92.0	90.8	90.9	88.5	87.6	84.6	82.8
18 Wk - non admitted (%)	97.1	97.1	97.3	97.2	97.0	97.2	96.8	96.6	96.4	96.2	96.6	95.5	96.1

Target	Status
90%	▲
95%	▲

	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12
RTT Admitted Median Wait (Weeks)	10.2	8.5	8.8	8.9	9.0	8.4	9.2	10.1	10.8
RTT Admitted 95th Percentile (Weeks)	25.2	21.2	21.1	22.9	22.5	25.3	25.8	26.9	27.7
RTT Non-Admitted Median Wait (Weeks)	6.2	6.0	6.5	6.8	6.3	6.1	5.8	6.9	5.9
RTT Non-Admitted 95th Percentile (Weeks)	17.1	17.0	17.2	17.4	17.6	17.7	17.4	17.8	17.6
RTT Incomplete Median Wait (Weeks)	5.8	6.3	6.3	6.4	5.9	6.0	6.8	6.6	5.8
RTT Incomplete 95th Percentile (Weeks)	19.6	21.1	21.1	22.5	22.6	21.9	22.5	21.4	20.8

Target 11/12
<=11.1
<=23.0
<=6.6
<=18.3
<=7.2
<=28.0

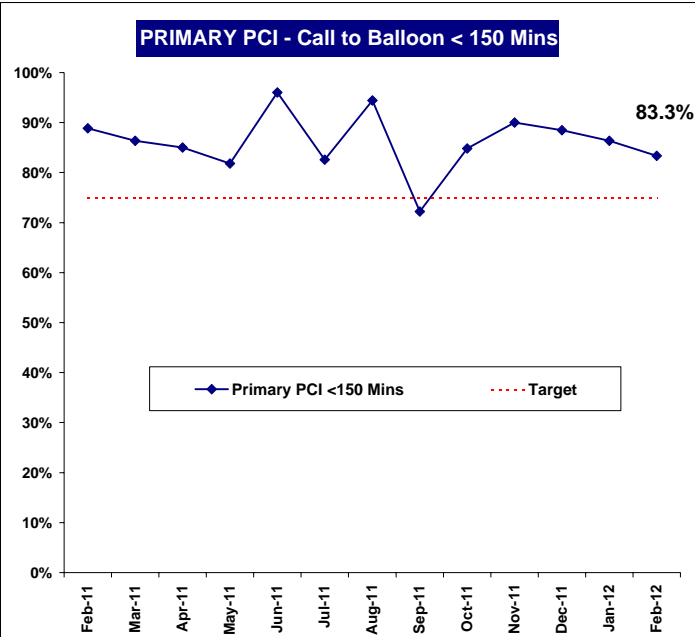
PRIMARY PCI

Performance Overview

The percentage of eligible patients with acute myocardial infarction who received Primary PCI within 150 minutes of calling professional help in February was 83.3% (25 of 30 patients) Year to Date achievement is 86% 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.



	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target
Primary PCI <150 Mins	88.9%	86.4%	85.0%	81.8%	96.0%	82.6%	94.4%	72.2%	84.8%	90.0%	88.5%	86.4%	83.3%	86.0%	75.0%

SAME SEX ACCOMMODATION

Performance Overview

All UHL wards and intensivist areas continue to offer Same Sex Accommodation (SSA) in line with the UHL SSA Matrix guidance.

In February 2012 UHL national breach data declared zero unjustified SSA breaches.

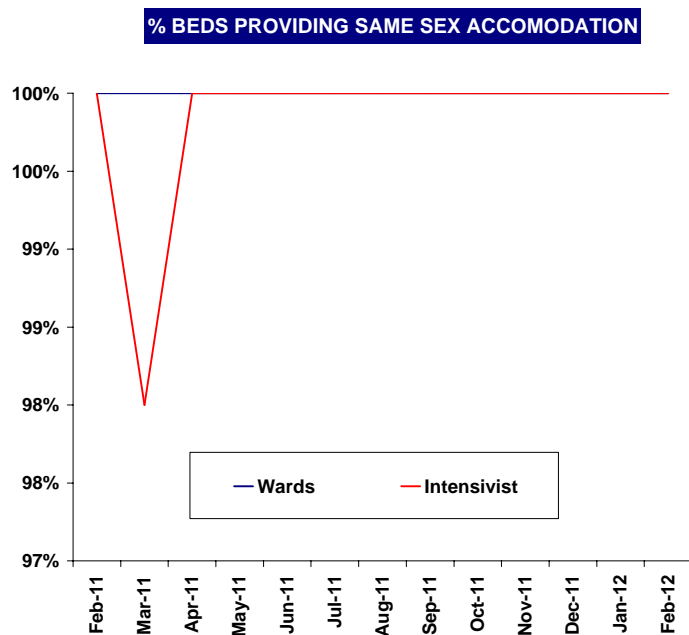
The Trust has published annual declaration of Same Sex Accommodation compliance.

During 2012-13 we will continue to monitor SSA, record and report any clinically justified and unjustified breaches using the SSA Decision Matrix for the trust.

Key Actions

A SSA monitoring plan for 2012-13 has been developed to include quarterly estates walkabouts to:

- access and promote the ongoing culture of same-sex accommodation
- review toilet and bathroom signage and facilities to ensure they are available to patients close to their bed area
- raise staff awareness around privacy and dignity and the importance of providing same-sex accommodation and bathroom facilities for patients

**TARGET / STANDARD**

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target
Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Intensivist	100%	98%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

CANCER TREATMENT

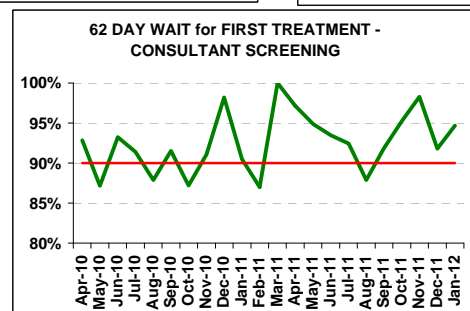
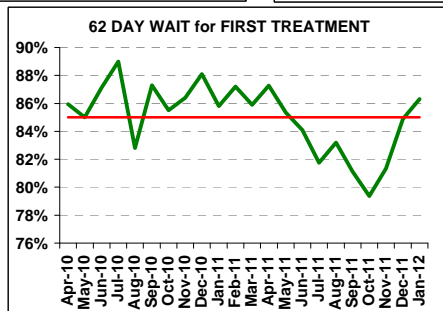
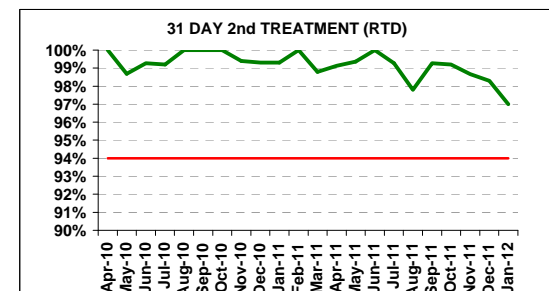
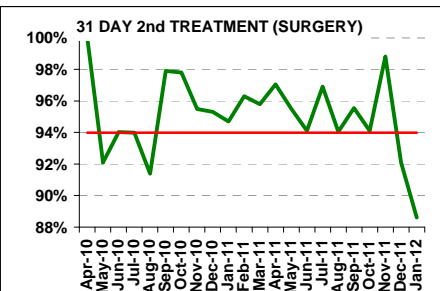
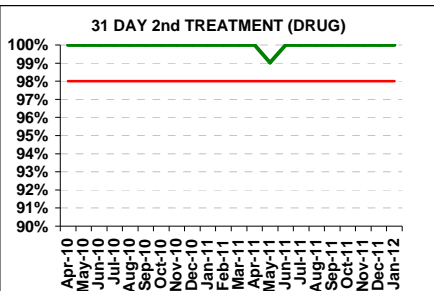
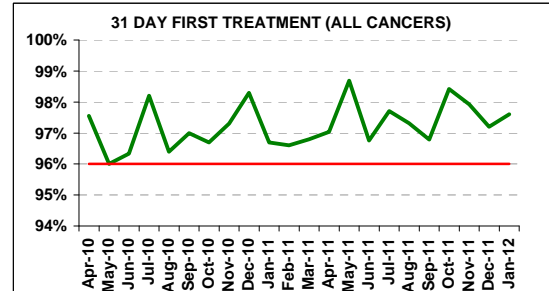
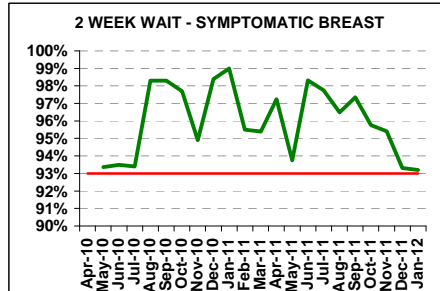
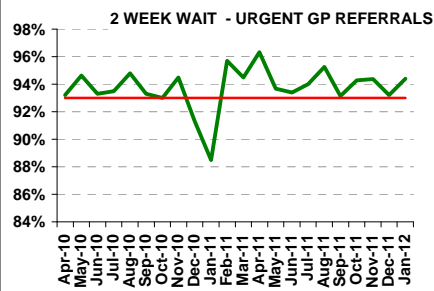
Performance Overview

Eight out of the nine cancer targets are delivering against performance thresholds for January, including the 62 day from referral to treatment target. Although the position will improve as validation concludes, confirmation has been received that the February 62 day cancer target will also be achieved.

Key Actions

A challenge that is being faced is the availability of critical care capacity. As a result, and following a meeting with the intensivists, an additional bed will be created on a temporary basis to respond to this.

Commitment	Threshold	Qtr 1	Qtr 2	Qtr 3	Jan-12	YTD
Maximum two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	93.0%	94.4%	94.2%	93.9%	94.4%	94.2%
Two week wait for symptomatic breast patients (Cancer not initially suspected)	93.0%	96.7%	97.2%	94.8%	93.2%	96.0%
31-day (Diagnosis To Treatment) wait for first treatment: all cancers	96.0%	97.5%	97.3%	97.9%	97.6%	97.5%
31-day wait for second or subsequent treatment: anti cancer drug treatments	98.0%	99.6%	100.0%	100.0%	100.0%	99.9%
31-day wait for second or subsequent treatment: surgery	94.0%	95.9%	95.6%	95.3%	88.6%	94.9%
31-day wait for second or subsequent treatment: radiotherapy treatments	94.0%	99.5%	98.8%	98.7%	97.0%	98.8%
62-day (urgent GP referral to treatment) wait for first treatment: all cancers	85.0%	85.5%	82.1%	82.0%	86.3%	83.4%
62-day wait for first treatment from consultant screening service referral: all cancers	90.0%	95.0%	90.5%	95.3%	94.7%	93.6%
62-day wait for first treatment from consultant upgrade	85.0%	100.0%	85.7%	66.7%	-----	85.7%



STAFF EXPERIENCE / WORKFORCE

Performance Overview**Appraisal**

February maintained January's appraisal rate of 96.1% which was the fourth consecutive month that the reporting month's rate is the highest since we started using ESR to record appraisals.

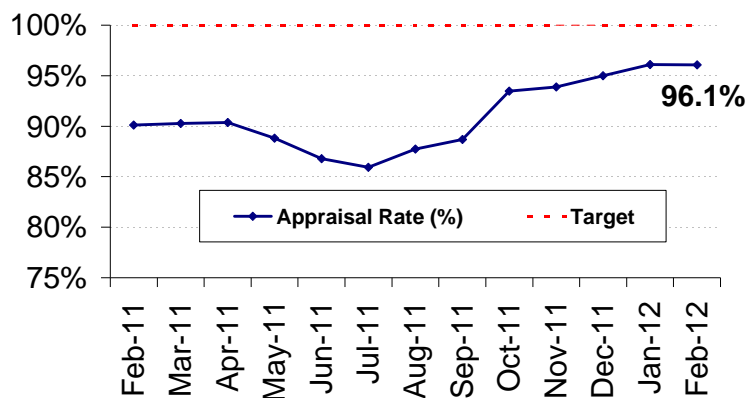
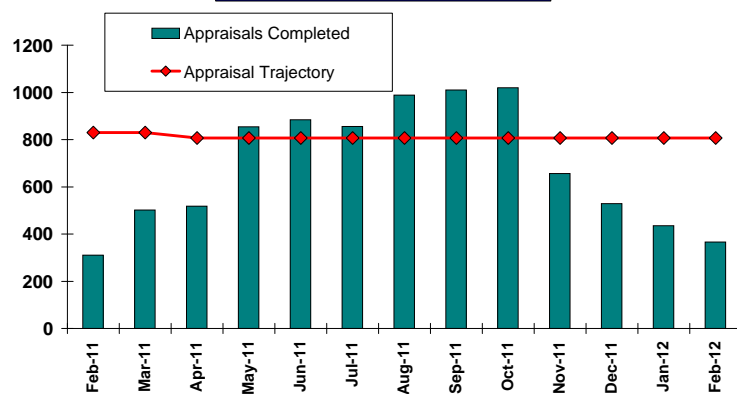
Human Resources continue to work closely with Divisions and Directorates in implementing targeted actions to continue to improve appraisal performance.

Sickness

The reported sickness rate is 4.5%. The actual rate is likely to be around 0.5% lower as absence periods are closed.

This sickness rate is higher than the previous 11 months but may fall after the absence periods have been closed down. The 12 month rolling sickness is currently 3.5%.

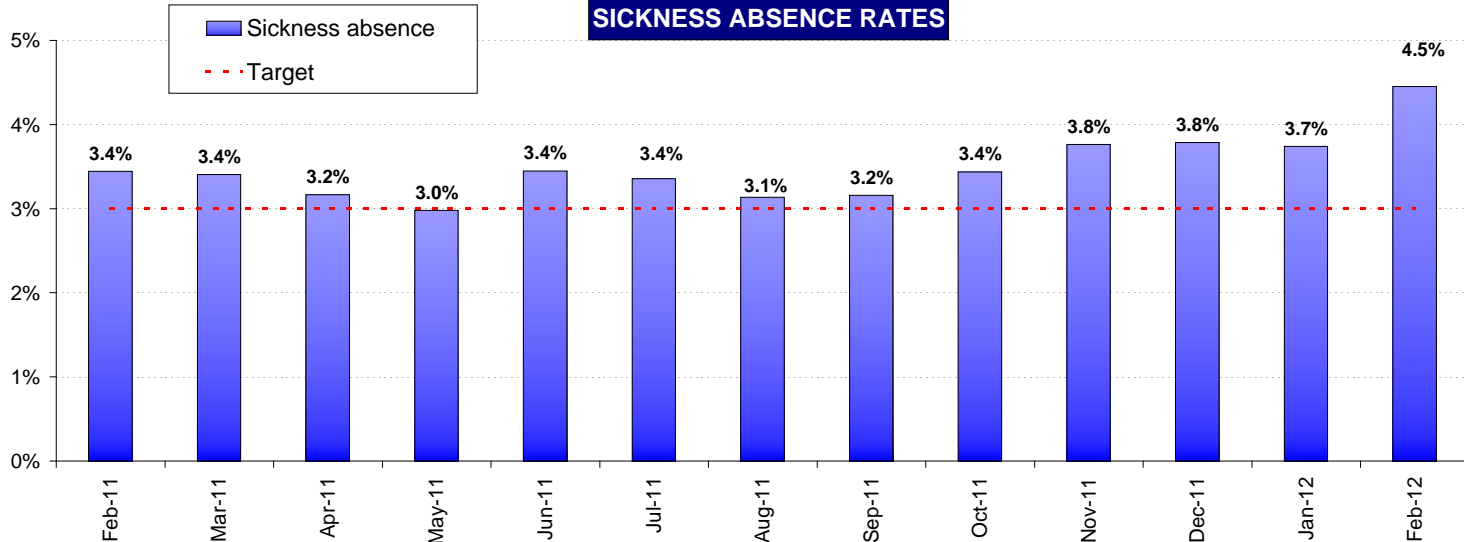
Human Resources are currently working with Divisions to performance manage areas with the highest sickness rates

APPRAISAL RATES**APPRAISALS COMPLETED**

Appraisal Trajectory assumes that appraisals are evenly distributed across the year

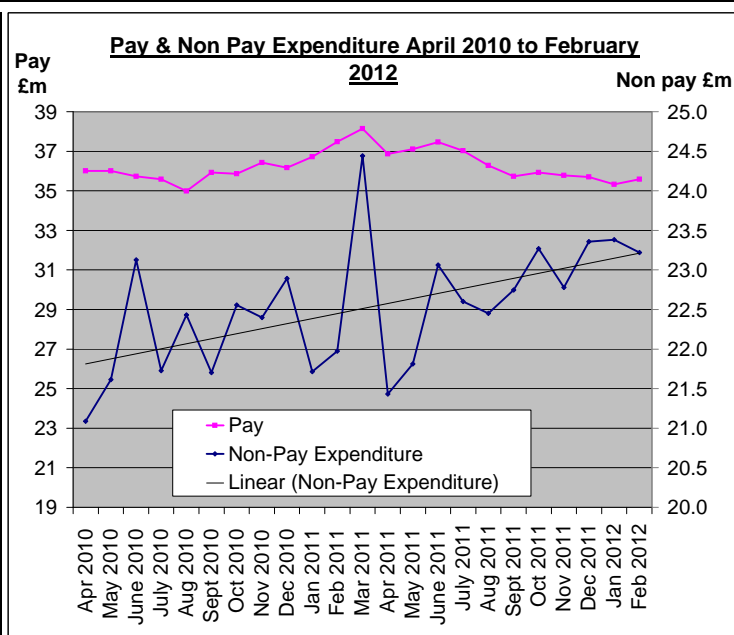
	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12
Appraisals	90.1%	90.3%	90.4%	88.8%	86.8%	85.9%	87.7%	88.7%	93.5%	93.9%	95.0%	96.1%	96.1%

YTD	Target	Status
96.1%	100%	⬅➡

SICKNESS ABSENCE RATES

VALUE FOR MONEY - EXECUTIVE SUMMARY

Issues	Comments
Actual Income & Expenditure Year to Date	Cumulative income at Month 11 of £642.8 million is £18.9 million (3.0%) favourable to Plan. Cumulative expenditure of £647.9 million is £24.4 million adverse to Plan. The actual deficit of £5.1 million is £5.5 million adverse against Plan.
Activity/Income	Year to date patient care income is £13.7m (2.6%) ahead of Plan. This reflects an over-performance on day cases of £2.3m, elective inpatients of £1.8m and outpatients of £2.8m. Whilst the emergencies are £4.9m above plan, this does reflect £6m year to date of the additional monies secured from the PCTs regarding re-admissions. Actual activity is 3,583 spells (3.3%) below Plan.
BPPC	The Trust achieved an overall 30 day payment performance of 88% for value and 87% for volume for trade creditors in February 2012.
Cost Improvement Programme	At Month 11 Divisions have reported £22.2 million of savings, short of the £34.6 million target by £12.4 million.
Balance Sheet	The year to date increase in the cash balance reflects £16.6 million received in advance from the Cluster.
Cash Flow	The year to date increase in cash of £19.6 million reflects the £16.6 million Cluster prepayment. Cash continues to be actively managed, and a positive balance is forecast to year end.
Capital	The Trust is forecasting the delivery of the refreshed Plan (£5 million below the original Plan) to support the cash position. Additional slippage has reduced forecast expenditure by another £1 million.
Risks	The Chief Operating Officer and Director of Finance and Procurement will update the Board on the financial position and associated risks, and actions being taken to ensure delivery of the planned surplus.



Financial Metrics

	Weighting	January	Year to Date	
		Result	Result	Score
EBITDA achieved (% of plan)	10.0%	189.4%	86.9%	3
EBITDA margin (%)	25.0%	11.0%	5.6%	3
Return on assets (%)	20.0%	1.0%	1.8%	2
I&E surplus (%)	20.0%	4.9%	-0.8%	2
Liquidity ratio (days)	25.0%	17	18	3
Overall Financial Risk Rating				2

Risk Ratings Table

	5	4	3	2	1
EBITDA achieved (% of plan)	100%	85%	70%	50%	<50%
EBITDA margin (%)	11%	9%	5%	1%	<1%
Return on assets (%)	6%	5%	3%	-2%	<-2%
I&E surplus (%)	3%	2%	1%	-2%	<-2%
Liquidity ratio (days)	60	25	15	10	<10

VALUE FOR MONEY - INCOME and EXPENDITURE ACCOUNT

Income and Expenditure Account for the Period Ended 29 February

	2011/12 Annual Plan £000	February			April 2011 - February 2012		
		Plan £ 000	Actual £ 000	Variance (Adv) / Fav £ 000	Plan £ 000	Actual £ 000	Variance (Adv) / Fav £ 000
Elective	67,968	5,687	6,205	518	62,011	63,785	1,774
Day Case	56,368	4,536	4,371	(165)	51,247	53,537	2,290
Emergency	177,574	14,257	17,359	3,102	162,033	166,899	4,866
Outpatient	82,700	6,896	7,103	207	75,467	78,277	2,810
Other	204,595	16,943	18,222	1,279	188,301	190,343	2,041
Patient Care Income	589,205	48,319	53,260	4,941	539,059	552,841	13,782
Teaching, Research & Development	66,877	5,570	5,998	428	61,305	64,978	3,673
Non NHS Patient Care	6,638	598	659	61	6,040	5,929	(111)
Other operating Income	19,036	1,616	1,927	311	17,419	19,011	1,592
Total Income	681,756	56,103	61,844	5,741	623,823	642,759	18,936
Medical & Dental	133,739	11,154	11,290	(136)	122,572	123,175	(603)
Nursing & Midwifery	158,250	13,277	13,712	(435)	144,966	147,349	(2,383)
Other Clinical	56,185	4,683	4,569	114	51,493	50,921	572
Agency	1,582	112	389	(277)	1,485	11,538	(10,053)
Non Clinical	70,715	5,741	5,628	113	64,867	64,754	113
Pay Expenditure	420,471	34,967	35,588	(621)	385,383	397,737	(12,354)
Drugs	57,748	4,676	4,684	(8)	52,794	51,622	1,172
Recharges	(612)	(71)	122	(193)	(600)	(10)	(590)
Clinical supplies and services	73,922	6,303	7,039	(736)	70,581	76,558	(5,977)
Other	82,350	6,614	7,602	(988)	73,803	80,573	(6,770)
Central Funds	1,466	0	0	0	0	0	0
Provision for Liabilities & Charges	348	29	18	11	319	191	128
Non Pay Expenditure	215,222	17,551	19,465	(1,914)	196,897	208,934	(12,037)
Total Operating Expenditure	635,693	52,518	55,053	(2,535)	582,280	606,671	(24,391)
EBITDA	46,063	3,585	6,791	3,206	41,543	36,088	(5,455)
Interest Receivable	84	7	6	(1)	77	55	(22)
Interest Payable	(565)	(48)	(50)	(2)	(527)	(544)	(17)
Depreciation & Amortisation	(31,057)	(2,554)	(2,599)	(45)	(28,435)	(28,446)	(11)
Surplus / (Deficit) Before Dividend and Disposal of Fixed Assets	14,525	990	4,148	3,158	12,658	7,153	(5,505)
Profit / (Loss) on Disposal of Fixed Assets	0	0	0	0	0	(6)	(6)
Dividend Payable on PDC	(13,236)	(1,103)	(1,113)	(10)	(12,133)	(12,243)	(110)
Net Surplus / (Deficit)	1,289	(113)	3,035	3,148	525	(5,096)	(5,621)
EBITDA MARGIN	6.76%		10.98%			5.61%	
Plan Phasing Adjustment		119	0	119	(77)	0	(77)
Net Surplus / (Deficit)	1,289	6	3,035	3,029	448	(5,096)	(5,544)
Impairment				0		0	0
Net Surplus / (Deficit) after impairment	1,289	6	3,035	3,029	448	(5,096)	(5,544)

VALUE FOR MONEY - CONTRACT PERFORMANCE

Summary by Point of Delivery of Patient Related Income - February 2012

Casemix	Annual Plan (Activity)	Plan to Date (Activity)	Total YTD (Activity)	Variance YTD (Activity)	Annual Plan (£000)	Plan to Date (£000)	Total YTD (£000)	Variance YTD (£000)
Day Case	80,541	73,482	74,354	872	56,368	51,247	53,537	2,290
Elective Inpatient	23,191	21,158	20,499	(659)	67,968	62,011	63,785	1,774
Emergency / Non-elective Inpatient	118,539	108,194	104,611	(3,583)	177,574	162,033	166,899	4,866
Outpatient	751,698	685,882	699,962	14,080	82,700	75,467	78,277	2,810
Emergency Department	159,130	145,652	145,443	(209)	14,242	13,036	13,758	722
Other	6,559,842	6,012,487	5,954,284	(58,203)	190,354	175,265	176,585	1,319
Grand Total	7,692,942	7,046,855	6,999,153	(47,702)	589,205	539,059	552,841	13,782

Average tariff	Annual Plan £ / episode	Plan to Date £ / episode	Total YTD £ / episode	Variance YTD £ / episode	Variance YTD %
Day Case	£700	£697	£720	£23	3.2%
Elective Inpatient	£2,931	£2,931	£3,112	£181	6.2%
Emergency / Non-elective Inpatient	£1,498	£1,498	£1,595	£98	6.5%
Outpatient	£110	£110	£112	£2	1.6%
Emergency Department	£89	£89	£95	£5	5.7%
Other	£29	£29	£30	£1	1.7%
Grand Total	£77	£76	£79	£2	3.3%

VALUE FOR MONEY - INCOME and EXPENDITURE - DIVISIONAL POSITION
Income and Expenditure Position for the Period Ended 29 February 2012

	Income				Expenditure								Total Year to Date				Month 10 Variance (Adv) / Fav £m
					Pay				Non Pay								
	Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m	Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m	Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m	Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m	
Acute Care	261.9	239.1	241.9	2.9	132.7	121.6	131.5	(9.9)	76.6	70.1	72.8	(2.7)	52.6	47.4	37.7	(9.7)	(9.8)
Clinical Support	27.3	25.0	25.4	0.4	106.9	98.0	98.9	(0.9)	15.3	14.2	15.9	(1.7)	(94.9)	(87.2)	(89.4)	(2.1)	(2.6)
Planned Care	194.2	177.3	184.0	6.7	78.7	72.2	76.4	(4.2)	43.1	39.3	44.3	(5.0)	72.4	65.8	63.3	(2.5)	(2.4)
Women's and Children's	116.7	106.6	105.5	(1.1)	62.5	57.2	57.0	0.2	16.6	15.2	17.3	(2.1)	37.6	34.2	31.2	(3.0)	(3.1)
Corporate Directorates	11.7	10.7	12.2	1.5	39.8	36.4	35.5	0.9	61.6	56.4	56.8	(0.4)	(89.7)	(82.0)	(80.1)	1.9	1.6
Sub-Total Divisions	611.8	558.7	569.0	10.3	420.5	385.4	399.2	(13.8)	213.2	195.2	207.1	(11.9)	(21.9)	(21.9)	(37.3)	(15.4)	(16.3)
Central Income	70.0	65.1	73.8	8.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	70.0	65.1	73.8	8.7	6.4
Central Expenditure	0.0	0.0	0.0	0.0	(0.1)	(0.0)	(1.5)	1.5	46.8	42.8	43.1	(0.3)	(46.7)	(42.8)	(41.6)	1.2	1.3
Grand Total	681.8	623.8	642.8	18.9	420.5	385.4	397.7	(12.3)	260.0	238.0	250.1	(12.1)	1.3	0.4	(5.1)	(5.5)	(8.6)

VALUE FOR MONEY - COST IMPROVEMENT PROGRAMME

Cost Improvement Programme as at February 2012

Division	Plan £000	Forecast £000	Variance £000	YTD Plan £000	YTD Achieved £000	YTD % of Plan	Recurrent Forecast £000	Non Rec Forecast £000	YTD Achieved £000	RISK RATING OF FORECAST CIPS			Forecast £000
										HIGH	MEDIUM	LOW	
Acute Care	13,383	9,035	(4,348)	12,233	7,782	63.6%	8,781	254	7,782	448	191	614	9,035
Clinical Support	6,218	4,725	(1,493)	5,640	4,295	76.1%	3,593	1,132	4,295	73	108	249	4,725
Planned Care	8,685	4,974	(3,711)	7,834	4,475	57.1%	4,580	395	4,475	213	62	224	4,974
Women's and Children's	2,916	1,650	(1,266)	2,574	1,482	57.6%	1,514	136	1,482	8	59	101	1,650
Clinical Divisions	31,202	20,384	(10,818)	28,281	18,034	63.8%	18,467	1,916	18,034	742	420	1,188	20,384
Corporate	3,571	4,772	1,201	3,212	4,197	130.7%	2,550	2,222	4,197	0	133	442	4,772
Central	3,471	0	(3,471)	3,085	0		0	0	0		0	0	0
Total	38,244	25,156	(13,088)	34,579	22,231	64.3%	21,018	4,138	22,231	742	553	1,630	25,156

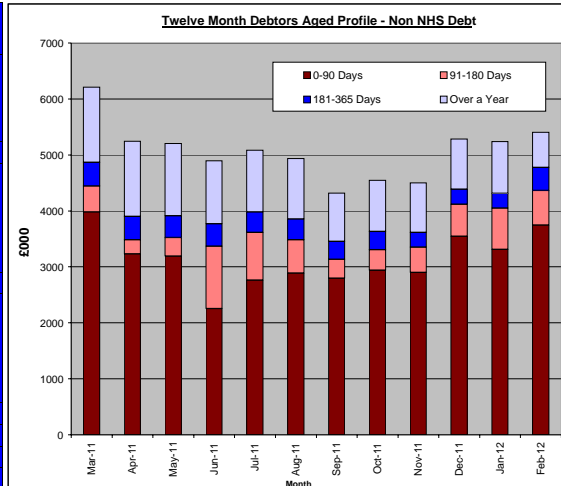
Category	Plan £000	Forecast £000	Variance £000	YTD Plan £000	YTD Achieved £000	YTD % of Plan	Recurrent Forecast £000	Non Rec Forecast £000
Income	4,532	5,333	801	4,095	4,750	116.0%	4,722	610
Non Pay	10,955	6,956	(3,999)	9,917	6,267	63.2%	6,098	859
Pay	22,757	12,867	(9,890)	20,567	11,213	54.5%	10,198	2,669
Total	38,244	25,156	(13,088)	34,579	22,231	64.3%	21,018	4,138

Commentary

There is a year to date under performance on delivery of cost improvement of £12.3 million and a year end forecast under-delivery of £13.1 million (reflecting shortfalls in Clinical Divisions of £10.8 million.)

VALUE FOR MONEY - BALANCE SHEET

BALANCE SHEET	Mar-11 £000's Actual	Apr-11 £000's Actual	May-11 £000's Actual	Jun-11 £000's Actual	Jul-11 £000's Actual	Aug-11 £000's Actual	Sep-11 £000's Actual	Oct-11 £000's Actual	Nov-11 £000's Actual	Dec-11 £000's Actual	Jan-12 £000's Actual	Feb-12 £000's Actual
Non Current Assets												
Intangible assets	5,119	4,993	4,863	4,732	4,601	4,471	4,561	4,427	4,293	4,332	4,194	4,056
Property, plant and equipment	417,069	415,444	414,445	412,914	413,174	412,998	411,956	411,774	411,065	411,030	410,879	410,752
Trade and other receivables	1,878	1,864	1,866	1,848	1,916	2,050	2,188	2,197	2,285	2,255	2,276	2,258
TOTAL NON CURRENT ASSETS	424,066	422,301	421,174	419,494	419,691	419,519	418,705	418,398	417,643	417,617	417,349	417,066
Current Assets												
Inventories	11,923	12,711	12,282	11,904	12,575	12,414	12,099	11,913	11,832	12,673	11,825	11,423
Trade and other receivables	22,722	21,221	25,862	26,426	22,757	25,585	24,381	28,929	30,089	36,170	36,212	40,950
Other Assets	0	0	185	257	318	76	0	0	286	348	366	384
Cash and cash equivalents	10,306	14,465	9,778	4,425	8,296	21,003	15,384	20,927	16,563	16,872	21,818	29,924
TOTAL CURRENT ASSETS	44,951	48,397	48,107	43,012	43,946	59,078	51,864	61,769	58,770	66,063	70,221	82,681
Current Liabilities												
Trade and other payables	(59,556)	(62,010)	(61,877)	(57,626)	(59,126)	(73,592)	(70,946)	(79,572)	(72,350)	(77,862)	(77,632)	(80,572)
Dividend payable	0	(1,113)	(2,226)	(3,339)	(4,452)	(5,565)	0	(1,113)	(2,226)	(3,339)	(4,452)	(5,565)
Borrowings	(3,649)	(3,649)	(3,593)	(3,649)	(3,649)	(3,649)	(1,511)	(1,511)	(1,511)	(1,511)	(1,511)	(1,511)
Provisions for liabilities and charges	(667)	(667)	(667)	(657)	(667)	(667)	(667)	(667)	(667)	(667)	(667)	(667)
TOTAL CURRENT LIABILITIES	(63,872)	(67,439)	(68,363)	(65,271)	(67,894)	(83,473)	(73,124)	(82,863)	(76,754)	(83,379)	(84,262)	(88,315)
NET CURRENT ASSETS (LIABILITIES)	(18,921)	(19,042)	(20,256)	(22,259)	(23,948)	(24,395)	(21,260)	(21,094)	(17,984)	(17,316)	(14,041)	(5,634)
TOTAL ASSETS LESS CURRENT LIABILITIES	405,145	403,259	400,918	397,235	395,743	395,124	397,445	397,304	399,659	400,301	403,308	411,432
Non Current Liabilities												
Borrowings	(3,237)	(3,491)	(4,872)	(3,805)	(4,131)	(5,271)	(7,630)	(7,955)	(9,907)	(8,623)	(8,950)	(10,114)
Other Liabilities	0	0	0	0	0	0	0	0	0	0	0	0
Provisions for liabilities and charges	(2,232)	(2,255)	(2,217)	(2,143)	(2,195)	(2,202)	(2,128)	(2,133)	(2,115)	(2,068)	(1,817)	(2,158)
TOTAL NON CURRENT LIABILITIES	(5,469)	(5,746)	(7,089)	(5,948)	(6,326)	(7,473)	(9,758)	(10,088)	(12,022)	(10,691)	(10,767)	(12,272)
TOTAL ASSETS EMPLOYED	399,676	397,513	393,829	391,287	389,417	387,651	387,687	387,216	387,637	389,610	392,541	399,160
Public dividend capital	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,903	273,903	277,487
Revaluation reserve	108,489	108,683	108,683	108,651	101,001	101,001	101,001	101,001	101,001	101,001	101,001	101,001
Retained earnings	17,284	14,927	11,243	8,733	14,513	12,747	12,783	12,312	12,733	14,706	17,637	20,672
TOTAL TAXPAYERS EQUITY	399,676	397,513	393,829	391,287	389,417	387,651	387,687	387,216	387,637	389,610	392,541	399,160



Type of Debtors	0-90 days £000s	91-180 days £000s	181-365 days £000s	365+ Days £000s	TOTAL £000s
NHS Sales ledger	11,376	9,686	-74	53	21,041
Non NHS sales ledger by division:					
Corporate Division	877	260	126	422	1,685
Planned Care Division	367	137	114	102	720
Clinical Support Division	346	38	13	9	406
Women's and Children's Division	126	28	33	19	206
Acute Care Division	2,028	155	126	81	2,390
Total Non-NHS sales ledger	3,744	618	412	633	5,407
Total Sales Ledger	15,120	10,304	338	686	26,448
Other Debtors					
WIP					3,948
SLA Phasing & Performance					2,625
Bad debt provision					(1,274)
VAT - net					867
Other receivables and assets					8,720
TOTAL					41,334

Commentary

The year to date increase in the cash balance reflects £16.6 million received in advance from the Cluster. The level of trade and other receivables reflects the outstanding invoices relating to the re-admissions income and the Frail and Older Peoples Advise and Liaison (FOPAL) service agreed with the PCTs, which has been received in March, as well as other performance related debt.

Accounts receivable metrics:

Invoice cycle time			Non-NHS days sales outstanding (DSO)		
	Feb - 11 Days	Jan - 11 Days		Feb - 11 YTD Days	Jan - 11 YTD Days
Req date to invoice raised	13.3	13.1	DSO (all debt)	93.0	94.2
Service to invoice raised	31.7	31.7	DSO (In year debt)	13.7	15.0

VALUE FOR MONEY - CASH FLOW

CASH FLOW for the PERIOD ENDED 29 FEBRUARY 2012

Commentary

The Trust's cash position compared to plan reflects:

- (£4.8 million) adverse variance in the EBITDA YTD position
- £15.7 million increase in trade and other payables
- (£13.2 million) increase in trade and other receivables
- £3.5 million underspend on capital

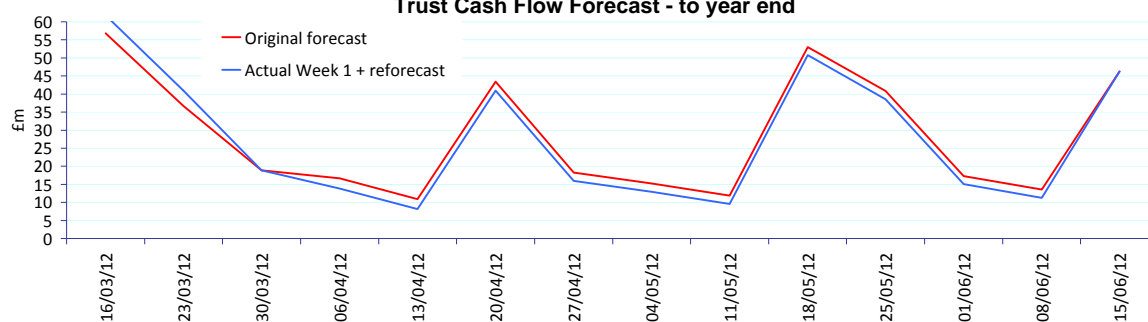
The cash forecast is based on the February performance. Action will be taken to ensure that the balance remains above £2 million at all times and that the year end target balance of £18.2 million is achieved.

	2011/12 April - February Plan £ 000	2011/12 April - February Actual £ 000	Variance April - February £ 000
CASH FLOWS FROM OPERATING ACTIVITIES			
Operating surplus before Depreciation and Amortisation	40,864	36,088	(4,776)
Transfers from donated / government granted reserves	-	-	-
Impairments and reversals	-	-	-
Movements in Working Capital:			
- Inventories (Inc)/Dec	1,837	500	(1,337)
- Trade and Other Receivables (Inc)/Dec	(2,564)	(18,608)	(16,044)
- Trade and Other Payables Inc/(Dec)	7,530	26,581	19,051
- Provisions Inc/(Dec)	(53)	(74)	(21)
PDC Dividends paid	(6,677)	(6,678)	(1)
Interest paid	(452)	(402)	50
Other non-cash movements	459	606	147
Net Cash Inflow / (Outflow) from Operating Activities	40,944	38,013	(2,931)
CASH FLOWS FROM INVESTING ACTIVITIES			
Interest Received	77	56	(21)
Payments for Property, Plant and Equipment	(19,311)	(16,282)	3,029
Capital element of finance leases	(3,333)	(2,169)	1,164
Net Cash Inflow / (Outflow) from Investing Activities	(22,567)	(18,395)	4,172
Net Cash Inflow / (Outflow) from Financing	-	-	-
Opening cash	10,306	10,306	-
Increase / (Decrease) in Cash	18,377	19,618	1,241
Closing cash	28,683	29,924	1,241

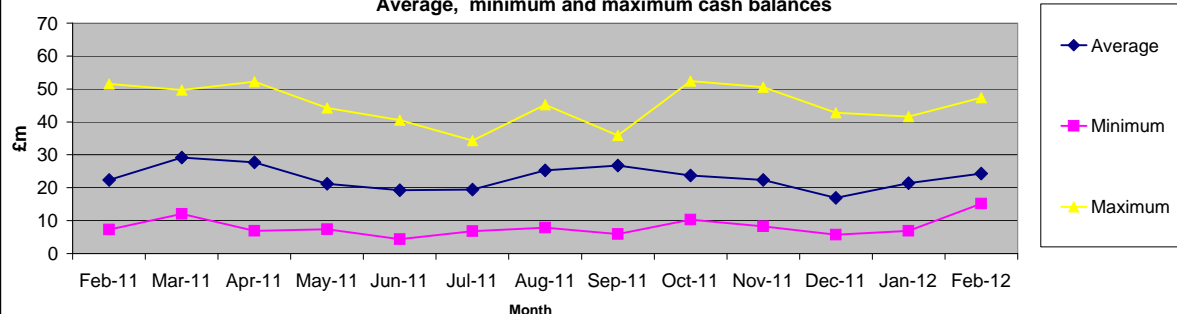
Cash movements to 31st March 2012

	£'000
Cash balance as at 01/02/2012	29,924
<i>Cash to be received</i>	
Contract Income	43,059
Other debtor receipts	8,436
	51,495
<i>Cash to be paid out</i>	
Creditor payment runs	20,885
Payroll (including tax, NI and Pensions)	35,003
PDC dividends	6,678
	62,566
Year-end cash	18,853

Trust Cash Flow Forecast - to year end



Average, minimum and maximum cash balances



VALUE FOR MONEY - CAPITAL BUDGET

Capital Expenditure Report for the Period 1st April 2011 to 29th February 2012

	Revised Plan £000's	Actual Apr-Jan 11/12 £000's	Feb 11/12 £000's	YTD Spend 11/12 £000's	Mar £000's	Out Turn £000's	Planned Variance £'000's
FUNDING							
Depreciation as per CCE	27,194	23,103	2,354	25,457	2,354	27,811	-617
Transformational Capital	1,289	0	0	0	693	693	596
Land Swap Disposals	19,800	19,779	0	19,779	0	19,779	21
Donations	800	528	22	550	250	800	0
Less cash for liquidity	-9,789	-7,733	-1,017	-8,750	-1,039	-9,789	0
Total Funding	39,294	35,678	1,359	37,036	2,258	39,294	-0
EXPENDITURE							
Backlog Maintenance							
IM&T	2,030	1,350	194	1,544	486	2,030	0
Medical Equipment	4,022	3,248	86	3,334	688	4,022	0
LRI Estates	2,050	1,287	310	1,597	578	2,175	-125
LGH Estates	1,650	1,045	212	1,257	493	1,750	-100
GGH Estates	1,300	563	265	828	372	1,200	100
Total Backlog Maintenance	11,052	7,492	1,068	8,560	2,617	11,177	-125
Essential Developments							
Carbon Management	200	14	36	50	150	200	0
Diabetes R&D Funding	550	436	81	516	34	550	0
GGH CDU Phase II	900	105	125	230	505	735	165
Gwendolen House / PPD	350	7	0	7	3	10	340
MES Installation Costs	500	-22	1	-21	121	100	400
Congenital Heart Surgery	800	228	57	285	265	550	250
MacMillan Oncology Centre	300	41	21	61	141	202	98
ED Interim Improvements	1,100	22	5	27	6	33	1,067
LGH Theatre & Ward Refurbs	2,050	1,956	29	1,985	165	2,150	-100
Cancer Trials Unit, LRI	100	16	96	112	-12	100	0
Decontamination	1,114	972	5	977	70	1,047	67
Land Swap	19,801	19,802	0	19,802	0	19,802	-1
Other IM&T	131	137	23	160	24	184	-53
Other Facilities	0	38	0	39	30	69	-69
Residual on 10/11 Schemes	209	-188	145	-43	252	209	0
Ward 8 Fire	0	500	22	522	40	562	-562
Maternity & Gynae Reconfiguration	0	6	27	34	293	327	-327
Capital CIP	-363	0	0	0	-309	-309	-54
Donations	500	528	22	550	48	598	-98
Total Essential Development	28,242	24,598	693	25,291	1,826	27,117	1125
Total Capital Programme	39,294	32,090	1,761	33,851	4,443	38,294	1000
Original Plan		37,335	2,774	40,109	4,185	44,294	
Forecast Over/(Under) Spend		-5,245	-1,013	-6,258	258	-6,000	

INDICATORS, THRESHOLDS and TARGETS

QUALITY and PERFORMANCE REPORT

PATIENT SAFETY

	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	165	>= 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			TBC			
Incidents of Patient Falls	Cumulative	Local Target	2569			
In Hospital Falls resulting in Hip Fracture ***	Cumulative	Local Target				

CLINICAL EFFECTIVENESS

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	85.0%	<80%	80-85%	>=85%
Emergency 30 Day Readmissions (Following Elective Admission)	Current	Local Target	TBC			
Mortality (CHKS - Risk Adjusted) - Overall	Current	Local Target	85	>100	85-100	<85
Stroke - 90% of Stay on a Stroke Unit	Current	National Target	80.0%	<50%	50-80%	>=80%
Primary PCI Door to Balloon <150 Mins	Cumulative		75.0%	<60%	60-75%	>=75%
Pressure Ulcers (Grade 3 and 4)	Cumulative	Local Target	197			

INDICATORS, THRESHOLDS and TARGETS
QUALITY and PERFORMANCE REPORT
PATIENT EXPERIENCE

	YTD : Cumulative or Current?	Target : Local or National?	Target		Thresholds	
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%	<80	>80 and < 100	100.0%
A&E Waits - UHL + UCC	Cumulative	National Target	95.0%	<94%	94-95%	>=95%
A&E Waits - UHL (Type1 and 2)	Cumulative	Local Target	95.0%	<94%	94-95%	>=95%
Unplanned Re-attendance %	Cumulative	National Target	<=5%		>5%	<=5%
Left without being seen %	Cumulative	National Target	< 5%		>= 5%	< 5%
Time in Dept (95th Percentile)	Cumulative	National Target	< 240 Mins		>= 240 Mins	< 240 Mins
Time to initial assessment (95th Percentile)	Cumulative	National Target	<= 15 Mins		> 15 Mins	<= 15 Mins
Time to treatment (Median)	Cumulative	National Target	<= 60 Mins		> 60 Mins	<= 60 Mins
RTT Admitted Median Wait (Weeks)	Cumulative	National Target	<=11.1			
RTT Admitted 95th Percentile (Weeks)	Cumulative	National Target	<=23			
RTT Non-Admitted Median Wait (Weeks)	Cumulative	National Target	<=6.6			
RTT Non-Admitted 95th Percentile (Weeks)	Cumulative	National Target	<=18.3			
RTT Incomplete Median Wait (Weeks)	Cumulative	National Target	<=7.2			
RTT Incomplete 95th Percentile (Weeks)	Cumulative	National Target	<=28			

STAFF EXPERIENCE / WORKFORCE

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	681,756			
Operating Cost (£000's)	Cumulative	Local Target	635,693			
Surplus / Deficit (as EBIDTA) (£000's)	Cumulative	Local Target	46,063			
CIP (£000's)	Cumulative	Local Target	38,245			
Cash Flow (£000's)	Current Month	Local Target	18,200			
Financial Risk Rating	Cumulative	Local Target	3			

Caring at its best

Divisional Heatmap

Trust Board

Thursday 5th April 2012

February 2012

One team shared values

DIVISIONAL HEAT MAP - Month 11 - 2011/12

QUALITY STANDARDS

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
Infection Prevention																
MRSA Bacteraemias	2	1	2	0	0	1	1	0	0	1	1	1	0	7	9	▲
CDT Isolates in Patients (UHL - All Ages)	16	14	9	15	7	8	10	8	13	11	6	4	6	97	165	▼
E Coli (from June 1st 2011)	NO NATIONAL TARGET				38	39	42	39	41	45	38	37	35	354	----	
MSSA (from May 1st 2011)	NO NATIONAL TARGET		1	4	2	5	2	6	4	3	2	0	5	34	----	
MRSA Elective Screening (Patient Matched)	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%	◀▶
MRSA Elective Screening (Patient Not Matched)	132.9%	133.2%	127.7%	112.5%	110.5%	132.4%	122.7%	133.2%	132.9%	136.0%	135.9%	130.2%	134.2%	127.8%	100%	▲
MRSA Non-Elective Screening (Patient Matched)	98.6%	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%	◀▶
MRSA Non-Elective Screening (Patient Not Matched)	164.1%	168.3%	165.3%	146.9%	152.7%	168.0%	168.0%	169.4%	165.6%	163.2%	171.4%	171.8%	185.0%	166.0%	100%	▲
Patient Safety																
10X Medication Errors	3	1	0	0	1	0	0	0	1	2	1	0	0	5	0	◀▶
Never Events	0	0	0	1	0	0	1	0	0	0	0	0	0	2	0	◀▶
Patient Falls	230	239	265	269	245	261	247	232	263	222	220	195		2419	TBC	
Complaints Re-Opened	17	22	17	18	24	17	26	29	29	30	22	13	18	243	210	▼
SUIs (Relating to Deteriorating Patients)	1	1	1	0	1	1	1	0	0	2	1	0	0	7	0	◀▶
RIDDOR	7	12	1	4	2	10	4	8	4	5	6	2	4	50	56	▼
In-hospital fall resulting in hip fracture	2	2	2	0	0	0	0	0	0	0	0	1	0	3	12	▲
No of Staffing Level Issues Reported as Incidents	34	67	34	62	54	91	82	73	107	122	86	64	122	897	1035	▼
Outlying (daily average)	15	24	12	8	9	2	10	16	5						5	▲
Pressure Ulcers (Grade 3 and 4)	14	20	15	12	17	17	8	5	10	6	6	12		108	197	▼
ALL Complaints Regarding Attitude of Staff	36	58	42	44	41	37	44	40	42	37	33	32	24	416	366	▲
ALL Complaints Regarding Discharge	35	39	22	29	39	20	27	32	24	18	31	17	23	282	220	▼
Bed Occupancy (inc short stay admissions)	92%	90%	89%	91%	91%	91%	90%	91%	93%	94%	92%	94%	92%	91%	90%	▼
Bed Occupancy (excl short stay admissions)	86%	85%	83%	84%	84%	85%	84%	85%	87%	87%	86%	88%	86%	85%	86%	▼
Compliance with Blood Traceability	98.0%	98.7%	99.1%	98.8%	98.7%	94.8%	92.4%	93.5%	96.1%	96.3%	96.1%	97.3%		96.3%	100%	▲

DIVISIONAL HEAT MAP - Month 11 - 2011/12

QUALITY STANDARDS Continued

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
Clinical Effectiveness																
Emergency 30 Day Readmissions (Previous Elective)	4.8%	5.0%	4.9%	4.8%	5.3%	4.9%	5.1%	4.8%	5.3%	4.7%	5.7%	5.4%		5.1%	1.6%	▲
Emergency 30 Day Readmissions (Previous Emergency)	11.2%	10.8%	9.4%	9.2%	10.0%	9.6%	9.7%	9.7%	9.0%	9.1%	9.5%	9.6%		9.5%	8.0%	▼
Mortality (CHKS Risk Adjusted - Overall)	82.4	86.8	84.8	85.9	74.8	80.7	80.1	87.1	78.5	74.9	74.3	82.5		82.0	85	▼
Discharge summaries to GP within 24hrs (Quarterly Audit)		97%			99%			98%			99%				100%	▲
Participation in Monthly Discharge Letter Audit (Quarterly Audit)		73%			92%			82%			75%				100%	▼
Stroke - 90% of Stay on a Stroke Unit	56.0%	79.8%	85.1%	86.8%	89.2%	88.2%	88.4%	74.7%	82.3%	90.7%	89.8%	81.1%		85.5%	80%	▼
Stroke - TIA Clinic within 24 Hours	65.4%	76.7%	67.9%	64.7%	80.8%	77.8%	56.5%	63.9%	60.7%	57.1%	64.7%	65.4%	39.3%	63.8%	60%	▼
No. of # Neck of femurs operated on < 36hrs	72%	72%	72%	53%	71%	73%	70%	56%	53%	75%	65%	60%		65%	70%	▼
Maternity - Breast Feeding < 48 Hours	75.0%	76.3%	73.8%	72.9%	74.4%	74.9%	74.7%	73.3%	73.2%	74.5%	75.0%	72.6%	74.1%	74.0%	67.0%	▲
Maternity - % Smoking at Time of Delivery	11.8%	11.1%	12.4%	9.2%	10.1%	9.7%	10.9%	11.0%	11.1%	11.0%	11.7%	13.0%	13.9%	11.2%	18.1%	▼
Cytology Screening 7 day target	99.98%	99.97%	99.87%	99.98%	99.98%	99.98%	100.00%	100.00%	99.98%	100.00%	97.7%	100.0%	100.0%	99.8%	98%	◀▶

DIVISIONAL HEAT MAP - Month 11 - 2011/12

QUALITY STANDARDS Continued

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

Feb-11 Mar-11 Apr-11 May-11 Jun-11 Jul-11 Aug-11 Sep-11 Oct-11 Nov-11 Dec-11 Jan-12 Feb-12 YTD Target Status

Nursing Metrics

Patient Observation	91%	94%	95%	93%	96%	97%	96%	96%	95%	96%	96%	98%	95%	98.0%	▼
Pain Management	88%	90%	92%	93%	97%	96%	96%	94%	91%	94%	97%	98%	96%	98.0%	▼
Falls Assessment	85%	85%	94%	91%	95%	94%	94%	93%	90%	94%	93%	96%	92%	98.0%	▼
Pressure Area Care	89%	91%	96%	93%	97%	95%	95%	95%	93%	97%	95%	97%	96%	98.0%	▼
Nutritional Assessment	85%	90%	95%	93%	93%	95%	93%	92%	90%	95%	95%	98%	92%	98.0%	▼
Medicine Prescribing and Assessment	98%	99%	99%	98%	99%	100%	99%	99%	95%	97%	97%	98%	97%	98.0%	▼
Hand Hygiene	98%	98%	95%	97%	92%	94%	95%	95%	97%	98%	95%	96%	96%	98.0%	◀▶
Resuscitation Equipment	84%	83%	87%	91%	90%	85%	82%	81%	70%	84%	80%	88%	78%	98.0%	▼
Controlled Medicines	100%	100%	98%	99%	99%	100%	99%	100%	97%	100%	100%	100%	100%	98.0%	◀▶
VTE	75%	79%	80%	80%	78%	81%	85%	84%	86%	89%	89%	88%	88%	98.0%	◀▶
Patient Dignity	96%	99%	96%	98%	98%	98%	99%	99%	95%	96%	97%	96%	95%	98.0%	▼
Infection Prevention and Control	96%	94%	96%	93%	96%	97%	97%	99%	96%	97%	99%	99%	97%	98.0%	▼
Discharge	50%	60%	75%	68%	77%	78%	80%	80%	71%	80%	82%	82%	84%	98.0%	▲
Continence	91%	90%	97%	95%	97%	98%	98%	96%	95%	98%	99%	99%	97%	98.0%	▼

Patient Experience

Inpatient Polling - treated with respect and dignity	95.2	95.0	96.6	96.3	96.5	95.7	96.0	95.3	96.1	96.0	96.1	96.2	95.6	96.1	95.0	▼
Inpatient Polling - rating the care you receive	86.1	83.8	88.4	87.2	87.6	87.0	85.4	85.0	86.8	86.3	87.7	86.6	87.8	86.9	91.0	▲
Outpatient Polling - treated with respect and dignity				96.7	93.5	84.0		91.0	94.3	98.0	92.0	92.0	99.0	93.4	95.0	▲
Outpatient Polling - rating the care you receive				87.0	85.1	72.6		82.5	85.7	84.0	91.0	86.0	92.0	85.1	85.0	▲
% Beds Providing Same Sex Accommodation -Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶
% Beds Providing Same Sex Accommodation - Intensivist	100%	98%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶

DIVISIONAL HEAT MAP - Month 11 - 2011/12

OPERATIONAL STANDARDS

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
--	--------	--------	--------	--------	--------	--------	--------	--------	--------	--------	--------	--------	--------	-----	--------	--------

Emergency Department

ED 4 Hour Waits - Leics (10/11) - UHL Incl UCC (11/12)	94.1%	93.8%	93.4%	93.7%	95.8%	97.2%	93.8%	92.0%	92.02%	94.4%	97.0%	95.5%	91.6%	94.2%	95%	▼
ED 4 Hour Waits - UHL (Type 1 and 2)	91.1%	90.4%	91.5%	92.1%	94.7%	96.4%	92.1%	89.9%	89.8%	92.9%	96.3%	94.4%	89.5%	92.7%	95%	▼
ED Maximum Wait (Mins) (From Qtr 2 11/12)	993	927	836	969	921	735	957	1,503	983	958	737	823	997		360	
Admitted Median Wait (Mins) -Type1+2 (From Qtr 2 11/12)	231	229	225	220	215	203	223	231	234	219	210	213	232		205	▼
Admitted 95th Percentile Wait (Mins) - Type 1+2 (From Qtr 2 11/12)	557	572	452	479	436	343	477	568	558	483	350	417	482		350	▼
Non-Admitted Median Wait (Mins) - Type 1+2	120	133	127	123	124	120	124	132	130	127	124	125	136		105	▼
Non-Admitted 95th Percentile Wait (Mins) Type 1+2 (From Qtr 2 11/12)	239	240	240	239	237	235	240	240	240	239	236	237	243		235	▼
Time to Initial Assessment - 95th centile (From Qtr 2 11/12)	49	63	70	56	41	39	48	48	61	48	42	32	34		<15 Mins	▼
Time to Treatment - Median (From Qtr 2 11/12)	50	58	59	54	50	34	34	39	44	43	42	42	54		<60 mins	▼
Left Without Being Seen % (From Qtr 2 11/12)	2.2%	2.5%	2.5%	2.2%	2.0%	2.1%	2.8%	2.4%	2.9%	2.0%	2.3%	2.1%	2.4%		<5%	▼
Unplanned 7 Day Re-attendance Rate (From Qtr 2 11/12)	6.5%	6.3%	6.6%	5.6%	5.2%	5.9%	6.7%	5.5%	6.0%	5.7%	5.4%	6.1%	6.1%		<5%	◀▶

Coronary Heart Disease

Maintain a maximum 13 week wait for revascularisation (CABG/PTCA)	93.1%	95.3%	94.5%	95.7%	100.0%	100.0%	99.5%	98.3%	99.4%	98.8%	98.3%	97.1%	98.1%	98.1%	99.0%	▲
Primary PCI Call to Balloon <150 Mins	88.9%	86.4%	85.0%	81.8%	96.0%	82.6%	94.4%	72.2%	84.8%	90.0%	88.5%	86.4%	83.3%	86.0%	75.0%	▼
Rapid Access Chest Pain Clinics - % in 2 Weeks	100.0%	100.0%	99.5%	100.0%	99.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	98.0%	◀▶

DIVISIONAL HEAT MAP - Month 11 - 2011/12

OPERATIONAL STANDARDS (continued)

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
Cancer Treatment																
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	95.7%	94.5%	96.3%	93.7%	93.4%	94.0%	95.3%	93.1%	94.3%	94.4%	93.2%	94.4%		94.2%	93%	▲
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	95.5%	95.4%	97.2%	93.8%	98.3%	97.7%	96.5%	97.3%	95.8%	95.4%	93.3%	93.2%		96.0%	93%	▼
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	96.6%	96.8%	97.0%	98.7%	96.8%	97.7%	97.3%	96.8%	98.4%	97.9%	97.2%	97.6%		97.5%	96%	▲
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	100.0%	100.0%	100.0%	99.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		99.9%	98%	◀▶
31-Day Wait For Second Or Subsequent Treatment: Surgery	96.3%	95.8%	97.1%	95.5%	94.1%	96.9%	94.0%	95.6%	94.1%	98.8%	92.1%	88.6%		94.9%	94%	▼
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	100.0%	98.8%	99.1%	99.4%	100.0%	99.3%	97.8%	99.3%	99.2%	98.7%	98.3%	97.0%		98.8%	94%	▼
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	87.2%	85.9%	87.3%	85.4%	84.1%	81.8%	83.2%	81.1%	79.4%	81.3%	84.9%	86.3%		83.4%	85%	▲
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	87.0%	100.0%	97.1%	94.9%	93.5%	92.5%	87.9%	91.8%	95.2%	98.3%	91.8%	94.7%		93.6%	90%	▼
62-Day Wait For First Treatment From Consultant Upgrade	100.0%	100.0%	100.0%	-----	100.0%	n/a	100.0%	80.0%	100.0%	-----	0.0%	-----		85.7%	85%	▼

DIVISIONAL HEAT MAP - Month 11 - 2011/12

OPERATIONAL STANDARDS (continued)

UNIVERSITY HOSPITALS of LEICESTER NHS TRUST		Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
	Referral to Treatment																
	18 week referral to treatment - admitted	91.0%	91.8%	91.7%	90.0%	85.0%	91.4%	92.0%	90.8%	90.9%	88.5%	87.6%	84.6%	82.8%		90%	⬇️
	18 week referral to treatment - non admitted	97.1%	97.1%	97.3%	97.2%	97.0%	97.2%	96.8%	96.6%	96.4%	96.2%	96.6%	95.5%	96.1%		95%	⬆️
	18 week Admitted Backlog	881	838	905	809	669	879	956	1057	1104	1118	1222	1117	793			
	23 week Admitted Backlog	549	482	514	451	218	318	474	551	564	598	643	556	396			
	18 week Non Admitted Backlog	1481	1737	1461	1376	1538	1896	1750	1781	1637	1558	1717	1494	1581			
	RTT Admitted Median Wait (Weeks)	10.4	9.1	8.5	9.5	10.2	8.5	8.8	8.9	9.0	8.4	9.2	10.1	10.8		<=11.1	⬇️
	RTT Admitted 95th Percentile (Weeks)	23.2	24.1	23.5	25.1	25.2	21.2	21.1	22.9	22.5	25.3	25.8	26.9	27.7		<=23.0	⬇️
	RTT Non-Admitted Median Wait (Weeks)	5.5	5.4	5.3	6.4	6.2	6.0	6.5	6.8	6.3	6.1	5.8	6.9	5.9		<=6.6	⬆️
	RTT Non-Admitted 95th Percentile (Weeks)	16.8	16.8	16.4	16.8	17.1	17.0	17.2	17.4	17.6	17.7	17.4	17.8	17.6		<=18.3	⬆️
	RTT Incomplete Median Wait (Weeks)	5.2	5.5	6.3	6.4	5.8	6.3	6.3	6.4	5.9	6.0	6.8	6.6	5.8		<=7.2	⬆️
	RTT Incomplete 95th Percentile (Weeks)	19.1	21.8	21.3	19.4	19.6	21.1	21.1	22.5	22.6	21.9	22.5	21.4	20.8		<=28.0	⬆️

DIVISIONAL HEAT MAP - Month 11 - 2011/12

OPERATIONAL STANDARDS (continued)

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

Feb-11 Mar-11 Apr-11 May-11 Jun-11 Jul-11 Aug-11 Sep-11 Oct-11 Nov-11 Dec-11 Jan-12 Feb-12 YTD Target Status

Efficiency - Outpatients and Inpatient Length of Stay

Outpatient DNA Rates (%)	8.6%	9.0%	9.2%	9.6%	9.0%	9.1%	9.5%	9.0%	9.4%	8.9%	9.4%	9.3%	9.0%	9.2%	9.0%	▲
Outpatient Appts % Cancelled by Hospital	10.9%	10.5%	11.4%	11.6%	10.4%	10.9%	11.1%	11.0%	10.3%	10.0%	10.6%	10.6%	11.2%	10.8%	10.5%	▼
Outpatient Appts % Cancelled by Patient	9.7%	9.7%	9.6%	9.9%	10.2%	10.8%	10.5%	10.4%	10.2%	9.6%	10.7%	9.6%	10.0%	10.1%	10.0%	▼
Outpatient F/Up Ratio	2.2	2.2	1.9	2.0	2.0	2.0	2.0	2.0	2.0	2.0	1.9	1.9	1.9	2.0	2.1	◀▶
Ave Length of Stay (Nights) - Emergency	5.0	5.3	5.9	6.1	6.1	5.5	5.6	5.6	5.5	5.8	5.5	5.6	5.4	5.7	5.0	▲
Ave Length of Stay (Nights) - Elective	3.4	3.3	3.6	3.4	3.1	3.6	3.5	3.8	3.6	3.4	3.6	3.1	3.1	3.4	3.8	◀▶
Delayed transfers per 10,000 admissions	2.0%	1.8%	1.5%	1.5%	1.5%	1.6%	1.5%	1.5%	1.7%	1.5%	1.5%	1.2%	1.2%	1.5%	3.5%	◀▶
% of Electives admitted on day of procedure	83.9%	83.2%	82.9%	82.1%	83.0%	81.6%	81.9%	80.8%	81.3%	83.2%	81.7%	82.8%	84.6%	82.3%	90%	▲

Theatres and Cancelled Operations

Day Case Rate (Basket of 25)	75.3%	77.2%	77.7%	76.2%	75.9%	79.2%	81.1%	77.8%	77.0%	74.2%	76.2%	76.2%	72.0%	76.6%	75.0%	▼
Inpatient Theatre Utilisation Rate (%)	82.9%	82.1%	79.6%	79.3%	80.2%	81.3%	84.1%	82.6%	81.0%	81.2%	80.2%	81.9%	78.7%	81.0%	86.0%	▼
Day case Theatre Utilisation Rate (%)	90.4%	91.9%	74.6%	74.5%	74.9%	73.4%	78.8%	78.2%	75.1%	79.8%	75.8%	77.3%	80.1%	76.6%	86.0%	▲
Operations cancelled for non-clinical reasons on or after the day of admission	1.7%	1.7%	1.3%	1.6%	1.3%	0.9%	1.3%	1.6%	1.5%	1.7%	1.1%	1.2%	1.7%	1.4%	0.8%	▼
Cancelled patients offered a date within 28 days of the cancellations	86.0%	88.5%	82.5%	92.4%	94.0%	96.3%	95.6%	97.1%	92.3%	93.6%	84.3%	86.1%	89.5%	91.5%	95.0%	▲

DIVISIONAL HEAT MAP - Month 11 - 2011/12

HUMAN RESOURCES

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
Staffing																
Contracted staff in post (substantive FTE)	10146.7	10170.9	10146.0	10103.3	10125.0	10101.3	10183.9	10138.2	10186.7	10188.3	10137.9	10077.8	10076.7	10076.7		
Bank hours paid (FTE)	242.7	257.3	279.7	260.4	256.4	281.7	243.1	241.7	254.8	237.9	256.7	195.5	219.3	219.3		
Overtime hours paid (FTE)	102.8	84.7	89.6	82.2	80.0	88.2	74.8	63.3	57.2	62.5	67.2	57.4	58.8	58.8		
Total FTE worked	10492.2	10512.9	10515.3	10445.9	10461.3	10471.2	10501.8	10443.2	10498.6	10488.6	10461.7	10330.7	10354.8	10354.8		
Pay bill - directly employed staff (£ m)	35.8	36.2	35.4	35.6	35.9	35.5	35.4	35.2	35.5	35.1	35.2	34.8	35.0	388.7		
Planned CIP reduction this month	-0.2	0.0														
Actual CIP reduction this month	5.7	-13.0														

Workforce HR Indicators																
Sickness absence	3.44%	3.41%	3.17%	2.98%	3.45%	3.35%	3.14%	3.16%	3.44%	3.76%	3.79%	3.74%	4.45%	3.48%	3.0%	▼
Appraisals	90.1%	90.3%	90.4%	88.8%	86.8%	85.9%	87.7%	88.7%	93.5%	93.9%	95.0%	96.1%	96.1%	96.1%	100%	◀▶
Turnover	8.3%	8.0%	8.7%	8.6%	8.6%	8.6%	8.5%	8.1%	8.0%	7.9%	8.2%	8.2%	8.2%	8.2%	10.0%	◀▶
Formal action under absence policy - Warnings issued	22	25	22	27	26	21	27	17	32	29	17	33	23	274		
Formal action under absence policy – Dismissals	0	3	0	4	6	5	6	3	3	3	4	4	4	42		
% Corporate Induction attendance	93.0%	96.0%	93.0%	86.0%	91.0%	89.0%	80.0%	96.0%	86.0%	94.0%	100.0%	95.0%	96.0%	91.0%	95.0%	▲

DIVISIONAL HEAT MAP - Month 11 2011/12

PLANNED CARE - DIVISIONAL PERFORMANCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
INFECTION PREVENTION																
MRSA Bacteraemias	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	◀▶
CDT Positives (UHL)	6	6	5	5	3	2	4	1	3	3	2	2	0	30	45	▲
SAME SEX ACCOMMODATION																
% Beds Providing Same Sex Accommodation - Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶
% Beds Providing Same Sex Accommodation - Intensivist	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶
MORTALITY and READMISSIONS																
30 Day Readmissions (UHL) - Any Specialty	7.2%	7.0%	7.6%	7.0%	7.8%	7.5%	7.7%	7.8%	7.7%	6.8%	8.2%	8.1%		7.6%	6.5%	▲
30 Day Readmissions (UHL) - Same Specialty	4.3%	4.4%	4.7%	4.6%	5.2%	5.1%	5.1%	4.9%	4.8%	4.3%	5.3%	5.0%		4.9%	4.0%	▲
30 Day Readmission Rate (CHKS)	6.9%	6.9%	7.4%	7.2%	7.8%	7.6%	7.6%	7.7%	7.7%	6.8%	7.9%			7.4%	6.5%	▼
Mortality (UHL Data)	0.7%	0.6%	0.9%	0.8%	0.7%	0.6%	0.7%	0.7%	0.6%	0.7%	0.9%	0.7%	0.9%	0.7%	0.9%	▼
Mortality (CHKS - Risk Adjusted - Peers to be Confirmed)	76.1	76.7	82.5	90.3	76.5	79.8	83.5	85.7	75.9	84.5	96.3	95.6		85.0	90.0	▲
PATIENT SAFETY																
10X Medication Errors	1	0	0	0	0	0	0	0	1	0	0	0	0	1	0	◀▶
Never Events	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	◀▶
Patient Falls	50	83	55	60	55	60	59	67	67	50	54	49		576	TBC	
Complaints Re-Opened	11	7	9	6	13	7	15	15	14	15	11	8	10	123	95	▼
SUIs (Relating to Deteriorating Patients)	0	1	1	0	1	1	1	0	0	0	1	0	0	5	0	◀▶
RIDDOR	1	2	0	0	0	0	1	3	1	1	2	0	0	8	6	◀▶
In-hospital fall resulting in hip fracture	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	◀▶
No of Staffing Level Issues Reported as Incidents	7	4	6	2	6	3	7	9	24	15	12	13	27	124	95	▼
Outlying (daily average)	6	2	3	3	1	0	3	4	3						2	▲
Pressure Ulcers (Grade 3 and 4)	6	9	3	3	1	5	5	0	2	3	4	5		31	75	▼
ALL Complaints Regarding Attitude of Staff	11	17	10	12	15	19	17	8	11	18	15	16	10	151	122	▲
ALL Complaints Regarding Discharge	8	11	6	7	17	8	8	11	8	4	7	3	5	84	80	▼
Bed Occupancy (inc short stay admissions)	92%	88%	89%	92%	90%	93%	91%	92%	95%	95%	88%	95%	91%	92%	90%	▲
Bed Occupancy (excl short stay admissions)	85%	83%	84%	86%	85%	89%	88%	89%	91%	90%	84%	90%	85%	87%	86%	▼
Staffing : Nurses per Bed																

DIVISIONAL HEAT MAP - Month 11 2011/12

		Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
PLANNED CARE - DIVISIONAL PERFORMANCE	NURSING METRICS																
	Patient Observation	91%	95%	93%	93%	95%	95%	97%	96%	95%	97%	96%	99%	96%		98.0%	▼
	Pain Management	85%	89%	86%	94%	97%	96%	96%	94%	94%	94%	95%	99%	96%		98.0%	▼
	Falls Assessment	85%	72%	82%	89%	94%	92%	95%	88%	93%	94%	96%	96%	94%		98.0%	▼
	Pressure Area Care	86%	88%	91%	90%	94%	92%	95%	95%	95%	96%	98%	98%	96%		98.0%	▼
	Nutritional Assessment	86%	82%	94%	91%	90%	93%	96%	93%	96%	95%	97%	98%	95%		98.0%	▼
	Medicine Prescribing and Assessment	98%	96%	99%	99%	98%	98%	96%	95%	95%	96%	96%	96%	97%		98.0%	▲
	Hand Hygiene															98.0%	
	Resuscitation Equipment	74%	88%	91%	93%	75%	85%	75%	81%	78%	90%	91%	89%	68%		98.0%	▼
	Controlled Medicines	98%	97%	98%	96%	100%	98%	100%	100%	100%	98%	100%	100%	100%		98.0%	◀▶
	VTE	80%	86%	85%	89%	81%	89%	89%	90%	91%	91%	92%	89%	91%		98.0%	▲
	Patient Dignity	94%	99%	97%	95%	98%	96%	97%	98%	96%	96%	97%	95%	95%		98.0%	◀▶
	Infection Prevention and Control	94%	88%	86%	90%	94%	96%	96%	97%	95%	97%	96%	97%	97%		98.0%	◀▶
	Discharge			68%	64%	74%	81%	79%	80%	75%	85%	82%	81%	82%		98.0%	▲
	Continence	94%	89%	93%	96%	96%	97%	99%	96%	94%	98%	99%	98%	98%		98.0%	◀▶
	REFERRAL to TREATMENT																
	RTT - Admitted	89.7%	90.3%	90.3%	87.5%	81.4%	88.6%	89.5%	87.5%	87.6%	85.0%	83.7%	79.5%	77.3%		90.0%	▼
	RTT - Non Admitted	95.8%	95.6%	95.4%	95.6%	95.1%	95.4%	95.0%	94.6%	94.1%	93.5%	94.4%	92.4%	93.7%		95.0%	▲

DIVISIONAL HEAT MAP - Month 11 2011/12

PLANNED CARE - DIVISIONAL PERFORMANCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
OPERATIONAL PERFORMANCE																
Choose and Book Slot Unavailability	29.0%	22.0%	24.0%	22.0%	22.0%	19.0%	27.0%	24.0%	34.0%	29.0%	21.0%	18.0%	25.0%	24%	4.0%	▼
Elective LOS	3.1	3.1	3.4	3.1	2.8	3.2	3.3	3.6	3.3	3.1	3.4	2.9	2.9	3.2	3.0	◀▶
Non Elective LOS	5.8	6.0	6.2	6.1	6.3	5.6	6.0	5.8	6.3	6.2	5.2	5.8	5.4	5.9	5.8	▲
% of Electives Adm.on day of proc.	91.7%	91.4%	91.2%	90.9%	91.4%	91.3%	91.8%	90.9%	90.5%	91.9%	91.0%	90.8%	92.8%	91.3%	90.0%	▲
Day Case Rate (Basket of 25)	74.6%	76.1%	77.7%	75.8%	74.1%	77.2%	81.1%	78.4%	75.8%	72.9%	74.6%	74.9%	69.6%	75.5%	75.0%	▼
Day Case Rate (All Elective Care)	79.0%	80.1%	79.8%	80.1%	79.5%	79.1%	80.2%	80.4%	80.1%	80.2%	81.2%	81.8%	79.6%	80.2%	79.0%	▼
Inpatient Theatre Utilisation	82.3%	80.7%	78.3%	77.1%	79.8%	81.4%	83.4%	81.5%	79.3%	79.1%	79.4%	78.8%	76.8%	79.6%	86.0%	▼
Day Case Theatre Utilisation	88.5%	88.7%	66.1%	66.9%	70.4%	71.1%	74.1%	75.8%	73.4%	77.2%	74.0%	70.5%	72.8%	72.0%	86.0%	▲
Outpatient New : F/Up Ratio	2.5	2.4	2.6	2.5	2.5	2.5	2.5	2.7	2.5	2.5	2.4	2.5	2.5	2.5	2.3	◀▶
Outpatient DNA Rate	8.7%	9.0%	8.9%	9.1%	9.0%	8.7%	9.4%	8.9%	9.4%	8.7%	9.1%	9.1%	9.0%	9.0%	9.0%	▲
Outpatient Hosp Canc Rate	11.9%	10.8%	12.2%	12.2%	10.1%	11.1%	10.9%	10.7%	10.6%	9.6%	10.2%	10.7%	10.7%	10.8%	9.0%	◀▶
Outpatient Patient Canc Rate	9.2%	9.0%	9.3%	9.3%	9.7%	10.2%	9.8%	10.0%	9.7%	9.0%	10.3%	9.0%	9.5%	9.6%	9.0%	▼
SCREENING PROGRAMMES																
Diabetic Retinopathy - % Uptake	70.1%	56.0%	48.9%	38.7%	37.0%	35.3%	44.1%	35.5%	43.2%	83.0%	49.1%	43.8%	55.5%	45.2%	50.0%	▲
Diabetic Retinopathy - % Results in 3 Weeks	80.9%	82.3%	83.7%	75.1%	95.5%	76.9%	85.7%	86.7%	84.1%	87.8%	90.3%	98.0%	69.4%	85.1%	90.0%	▼
Diabetic Retinopathy - % Treatment in 4 Weeks	50.0%	-----	50.0%	50.0%	0.0%	0.0%	-----	-----	88.9%	83.3%	88.9%	45.8%	68.8%	62.9%		
Abdominal Aortic Aneurysm - % Eligible Offered Screening per Month	7.0%	7.1%	5.6%	6.3%	6.0%	5.3%	7.1%	8.6%	10.6%	14.0%	9.8%	13.1%	9.7%	96.1%	6.0%	▼
Abdominal Aortic Aneurysm - % Uptake	97.1%	96.2%	90.0%	97.8%	107.0%	96.5%	114.3%	111.9%	115.9%	105.7%	104.3%	118.2%	112.2%	106.5%	99.0%	▼
Abdominal Aortic Aneurysm - 30 Day post-operative Mortality	0.0%		0.0%	0.0%	0.0%	0.0%	9.1%	0.0%	0.0%		0.0%	0.0%	0.0%	1.7%	0.0%	◀▶
HR and FINANCE																
Staffing : Nurses per Bed																
Staffing : Cost per Bed																
Appraisals	94.5%	95.6%	94.8%	92.3%	91.8%	90.0%	90.4%	89.8%	91.1%	92.7%	98.0%	99.0%	98.8%	98.8%	100%	▼
Sickness Absence	3.1%	2.9%	2.7%	2.7%	3.0%	3.1%	2.9%	2.9%	3.4%	4.0%	3.9%	3.6%	4.2%	3.3%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	4.6	2.4	1.8	3.9	8.0	8.6	2.7	1.8	2.8	2.6	3.0	2.4	3.6			
Bank FTE	50.4	53.0	62.9	55.7	53.3	56.4	52.7	48.6	59.5	53.6	59.9	48.2	57.5			
Actual net FTE reduction this month	-10.9	-12.3	37.6	-37.4	2.4	35.2	7.4	-21.9	21.9	-10.5	0.2	-32.0	12.2	15.3		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

PLANNED CARE - Specialist Surgery

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	92.7%	93.4%	93.2%	90.9%	82.6%	94.0%	92.5%	90.4%	91.2%	87.6%	86.1%	82.3%	83.5%		90.0%	▲
RTT - Non Admitted	96.2%	96.6%	96.3%	96.8%	96.4%	96.3%	95.7%	94.7%	94.6%	95.7%	95.5%	92.7%	95.0%		95.0%	▲
OPERATIONAL PERFORMANCE																
Elective LOS	2.2	2.0	2.1	2.2	2.0	2.0	2.0	2.1	2.1	1.8	2.2	1.7	2.1	2.0	1.9	▼
Non Elective LOS	4.7	5.3	5.7	5.4	6.5	4.6	5.0	4.1	5.8	4.9	4.1	5.4	4.2	5.1	4.7	▲
% of Electives Adm.on day of proc.	85.4%	85.1%	86.4%	84.8%	85.3%	87.8%	88.2%	82.7%	84.9%	86.4%	83.8%	86.0%	86.9%	85.8%	85.0%	▲
Day Case Rate (Basket of 25)	87.0%	90.2%	88.0%	89.0%	87.8%	88.8%	88.7%	90.0%	89.3%	84.0%	84.3%	85.3%	86.1%	87.4%	75.0%	▲
Day Case Rate (All Elective Care)	71.0%	75.0%	70.9%	71.7%	73.3%	72.5%	71.0%	75.1%	71.6%	71.7%	72.8%	72.1%	75.2%	72.6%	70.0%	▲
30 Day Readmissions (UHL) - Any Specialty	3.1%	3.2%	3.5%	2.7%	3.2%	3.1%	3.3%	2.7%	3.7%	2.7%	3.5%	3.3%		3.2%	2.8%	▲
30 Day Readmissions (UHL) - Same Specialty	1.4%	1.5%	1.8%	1.5%	1.9%	1.6%	1.7%	1.3%	1.8%	1.3%	1.6%	1.3%		1.6%	1.3%	▲
Outpatient New : F/Up Ratio	2.1	2.0	2.1	2.1	2.0	2.0	2.0	2.2	2.3	2.2	2.0	2.1	2.0	2.1	1.9	▲
Outpatient DNA Rate	9.3%	9.5%	9.1%	9.4%	9.5%	9.2%	9.5%	9.2%	9.9%	9.2%	9.1%	9.4%	9.6%	9.4%	9.5%	▼
Outpatient Hosp Canc Rate	10.6%	10.9%	14.2%	13.3%	11.0%	12.4%	13.0%	13.3%	13.5%	11.2%	11.9%	11.3%	11.3%	12.4%	11.5%	◀▶
Outpatient Patient Canc Rate	10.1%	10.2%	10.2%	10.4%	10.7%	11.4%	10.9%	10.7%	10.4%	9.7%	11.4%	10.0%	10.8%	10.6%	10.0%	▼
Bed Utilisation (Incl short stay admissions)	93%	91%	92%	91%	86%	86%	100%	100%	100%	99%	94%	100%	90%	94%	90.0%	▼
HR and FINANCE																
Staffing : Nurses per Bed															1.1	
Staffing : Cost per Bed																
Sickness Absence	3.39%	3.97%	2.77%	2.68%	3.22%	2.44%	2.07%	2.01%	2.59%	3.06%	3.69%	3.39%	3.88%	3.0%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	1.2	1.4	1	0.7	1.7	1.1	0.7	0.2	0.6	0.5	0.9	0.4	1.1			
Bank FTE	19.0	17.8	26.0	18.2	18.2	17.5	15.7	16.3	23.0	16.7	18.1	13.8	17.6			
Actual net FTE reduction this month	5.1	-3.5	13.0	-14.6	2.9	13.7	9.5	-6.3	8.0	-6.2	0.5	-16.2	1.8	6.0		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

PLANNED CARE - GI Medicine / Surgery

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	84.5%	83.8%	83.6%	80.7%	73.6%	78.3%	83.8%	81.3%	80.9%	77.8%	77.0%	74.1%	70.9%		90.0%	▼
RTT - Non Admitted	95.7%	90.5%	89.9%	90.6%	86.9%	90.1%	90.9%	92.8%	87.9%	82.4%	87.9%	86.6%	87.1%		95.0%	▲
OPERATIONAL PERFORMANCE																
Elective LOS	3.7	3.5	3.7	3.5	3.1	3.6	3.9	4.9	4.0	3.4	3.6	3.2	3.4	3.6	3.5	▼
Non Elective LOS	4.9	5.4	5.4	5.2	5.5	5.4	5.8	5.3	5.9	5.7	4.7	5.3	4.9	5.4	5.3	▲
% of Electives Adm.on day of proc.	94.2%	94.4%	93.8%	91.2%	93.4%	91.9%	93.6%	92.5%	93.2%	94.6%	93.3%	92.0%	93.6%	93.0%	90.0%	▲
Day Case Rate (Basket of 25)	47.5%	48.1%	48.0%	50.5%	46.2%	50.2%	57.2%	58.6%	50.7%	46.0%	51.7%	54.8%	48.1%	50.8%	75.0%	▼
Day Case Rate (All Elective Care)	82.6%	82.2%	82.3%	82.3%	80.5%	81.5%	83.1%	82.2%	83.6%	83.2%	83.8%	85.1%	80.2%	82.5%	85.0%	▼
30 Day Readmissions (UHL) - Any Specialty	7.8%	7.1%	7.9%	7.4%	8.0%	8.0%	7.4%	7.7%	7.5%	6.6%	7.6%	7.4%		7.5%	7.0%	▲
30 Day Readmissions (UHL) - Same Specialty	4.3%	3.6%	3.9%	4.4%	4.5%	4.9%	4.1%	3.9%	3.7%	3.3%	3.8%	3.6%		4.0%	3.8%	▲
Outpatient New : F/Up Ratio	2.0	2.2	2.1	2.0	2.2	2.0	1.8	2.2	1.8	1.8	1.7	1.9	1.9	1.9	2.0	◀▶
Outpatient DNA Rate	8.1%	8.4%	8.5%	8.4%	7.5%	7.9%	8.3%	7.9%	8.9%	7.5%	8.4%	8.3%	8.2%	8.2%	8.2%	▲
Outpatient Hosp Canc Rate	19.3%	16.7%	14.2%	15.1%	15.4%	16.2%	15.3%	12.1%	11.7%	12.5%	13.1%	16.1%	16.7%	14.4%	14.0%	▼
Outpatient Patient Canc Rate	9.8%	9.7%	10.5%	10.4%	10.0%	10.9%	10.9%	12.3%	11.1%	9.4%	11.1%	9.2%	9.2%	10.4%	10.3%	◀▶
Bed Utilisation (Incl short stay admissions)	91%	87%	89%	96%	95%	94%	93%	100%	94%	94%	91%	95%	94%	94%	90.0%	▼
HR and FINANCE																
Staffing : Nurses per Bed															1.1	
Staffing : Cost per Bed																
Sickness Absence	2.5%	2.3%	2.8%	2.3%	2.9%	3.3%	2.7%	3.1%	3.8%	5.3%	5.2%	4.1%	4.5%	3.5%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	2.1	0.5	0.2	1.3	2.7	5.4	1.4	1.0	1.3	0.8	0.8	0.8	1.1			
Bank FTE	16.3	17.0	19.8	19.3	15.9	21.3	21.9	16.6	15.1	16.5	18.7	16.6	21.4			
Actual net FTE reduction this month	-9.4	-9.5	13.2	-4.1	-6.5	11.7	-5.2	-2.4	5.2	-3.0	1.3	-4.0	4.2	10.5		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

PLANNED CARE - Cancer and Haematology

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	--	--	--	--	--	--	--	100%	100%	--	--	100%	--		90.0%	◀▶
RTT - Non Admitted	97.8%	98.0%	97.0%	98.8%	100.0%	99.0%	99.2%	98.9%	99.0%	97.5%	99.1%	98.1%	97.9%		95.0%	▼
OPERATIONAL PERFORMANCE																
Elective LOS	6.5	8.5	8.8	5.9	7.1	9.9	6.7	9.2	8.1	7.0	8.8	9.5	6.9	8.0	7.0	▲
Non Elective LOS	6.1	5.5	5.7	6.2	5.7	4.9	5.6	5.4	4.5	5.9	4.6	4.9	5.1	5.3	5.7	▼
% of Electives Adm.on day of proc.	78.7%	70.2%	75.9%	78.4%	75.0%	72.7%	68.0%	78.2%	69.2%	77.4%	76.9%	63.8%	79.4%	73.9%	75.0%	▲
Day Case Rate (All Elective Care)	96.2%	96.9%	97.7%	97.1%	96.7%	96.9%	96.5%	96.4%	96.5%	96.1%	96.8%	97.0%	97.6%	96.8%	96.5%	▲
30 Day Readmissions (UHL) - Any Specialty	11.3%	11.8%	11.9%	11.0%	13.8%	11.9%	13.1%	12.9%	12.7%	11.9%	14.4%	14.2%		12.8%	11.0%	▲
30 Day Readmissions (UHL) - Same Specialty	9.0%	10.2%	10.2%	9.2%	11.8%	10.4%	11.1%	10.8%	10.9%	10.5%	12.5%	11.9%		11.0%	9.4%	▲
Outpatient New : F/Up Ratio	8.9	8.0	9.0	8.5	8.5	8.2	8.2	8.6	8.0	7.8	7.5	7.6	8.0	8.2	8.1	▼
Outpatient DNA Rate	7.3%	8.3%	9.2%	8.5%	8.1%	7.9%	8.7%	8.4%	8.3%	7.7%	8.2%	8.3%	7.7%	8.3%	7.4%	▲
Outpatient Hosp Canc Rate	7.2%	6.6%	7.2%	8.1%	5.6%	6.6%	5.7%	6.3%	4.8%	5.3%	5.6%	5.5%	5.5%	6.0%	7.3%	◀▶
Outpatient Patient Canc Rate	7.1%	6.4%	6.3%	6.2%	7.3%	6.8%	6.9%	6.8%	6.9%	6.6%	7.1%	6.9%	6.8%	6.8%	7.0%	▲
Bed Utilisation (Incl short stay admissions)	94%	91%	95%	94%	95%	95%	97%	99%	97%	97%	93%	97%	95%	96%	95.0%	▼
HR and FINANCE																
Staffing : Nurses per Bed															1.1	
Staffing : Cost per Bed																
Sickness Absence	3.1%	2.5%	2.2%	2.8%	2.9%	3.8%	3.8%	2.6%	2.4%	2.9%	2.4%	2.7%	3.2%	2.9%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	0.8	0.3	0.5	0.5	1.8	0.5	0.4	0.5	0.8	0.6	0.6	1.1	0.7			
Bank FTE	9.4	9.3	8.7	9.0	10.8	10.6	8.3	9.4	14.0	13.8	14.1	10.0	10.2			
Actual net FTE reduction this month	-2.6	-2.0	9.0	-9.7	-1.3	-0.7	-3.5	-8.5	4.0	-0.8	1.4	-6.9	-0.9	-18.0		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

PLANNED CARE - Musculo-Skeletal

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	90.8%	92.7%	94.1%	91.0%	90.0%	91.2%	91.6%	91.0%	91.0%	90.0%	90.0%	82.7%	76.0%		90.0%	▼
RTT - Non Admitted	94.4%	95.4%	96.8%	95.0%	96.5%	95.8%	95.0%	95.4%	96.9%	94.8%	95.5%	95.3%	93.8%		95.0%	▼
OPERATIONAL PERFORMANCE																
Elective LOS	3.1	3.2	4.0	3.2	2.8	3.1	3.5	2.6	2.8	3.4	3.4	2.9	2.4	3.1	3.3	▲
Non Elective LOS	9.6	9.5	10.1	9.6	10.0	8.3	7.7	9.2	9.7	9.6	8.4	9.5	8.6	9.1	9.6	▲
% of Electives Adm.on day of proc.	97.9%	97.5%	95.2%	98.6%	98.5%	96.4%	97.6%	98.3%	96.3%	97.2%	97.5%	98.5%	99.0%	97.5%	97.5%	▲
Day Case Rate (Basket of 25)	80.5%	77.3%	84.2%	80.4%	83.5%	84.2%	87.7%	77.8%	75.6%	80.3%	82.2%	78.9%	74.2%	80.9%	75.0%	▼
Day Case Rate (All Elective Care)	43.6%	47.1%	45.5%	48.4%	51.4%	46.8%	47.7%	41.8%	44.4%	47.0%	44.9%	45.8%	40.6%	45.9%	46.0%	▼
30 Day Readmissions (UHL) - Any Specialty	5.0%	5.1%	4.6%	5.0%	3.4%	4.4%	4.7%	5.5%	5.1%	3.7%	4.3%	4.8%		4.5%	4.0%	▼
30 Day Readmissions (UHL) - Same Specialty	1.2%	1.7%	1.9%	2.0%	1.0%	1.9%	1.6%	2.5%	1.6%	0.7%	1.0%	1.3%		1.5%	1.8%	▼
Outpatient New : F/Up Ratio	1.8	1.7	1.9	1.7	1.8	1.8	1.8	2.0	1.7	1.8	1.7	1.8	2.0	1.8	1.7	▼
Outpatient DNA Rate	8.9%	8.7%	8.6%	9.6%	9.8%	9.0%	10.7%	9.3%	9.7%	9.3%	10.9%	10.0%	9.3%	9.6%	9.0%	▲
Outpatient Hosp Canc Rate	13.5%	9.6%	10.7%	10.7%	7.8%	8.0%	7.2%	7.1%	7.9%	7.0%	7.7%	9.2%	8.9%	8.4%	10.5%	▲
Outpatient Patient Canc Rate	8.5%	8.2%	9.0%	8.7%	9.2%	10.3%	9.3%	9.4%	9.6%	9.0%	10.0%	8.0%	9.1%	9.2%	8.8%	▼
Bed Utilisation (Incl short stay admissions)	90%	88%	84%	86%	84%	84%	79%	73%	91%	93%	79%	85%	85%	84%	90.0%	◀▶
HR and FINANCE																
Staffing : Nurses per Bed															1.1	
Staffing : Cost per Bed																
Sickness Absence	3.5%	2.9%	3.0%	3.2%	3.0%	2.99%	3.2%	3.9%	4.8%	4.7%	3.9%	4.2%	5.3%	3.8%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	0.5	0.2	0.2	1.4	1.8	1.6	0.3	0.1	0.1	0.6	0.7	0.1	0.7			
Bank FTE	5.7	8.8	8.5	9.1	8.5	7.1	6.9	6.4	7.5	6.7	8.9	7.7	8.2			
Actual net FTE reduction this month	-4.0	2.7	2.5	-9.0	4.4	-2.6	6.6	-4.7	5.7	-2.5	-2.0	-4.9	6.0	-0.4		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

ACUTE CARE - DIVISIONAL PERFORMANCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
INFECTION PREVENTION																
MRSA Bacteraemias	2	1	2	0	0	1	1	0	0	1	0	1	0	6	6	▲
CDT Positives (UHL)	10	7	3	10	4	6	6	6	9	8	4	2	6	64	104	▼
SAME SEX ACCOMMODATION																
% Beds Providing Same Sex Accommodation - Wards	100%	98%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶
% Beds Providing Same Sex Accommodation - Intensivist	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶
MORTALITY and READMISSIONS																
30 Day Readmissions (UHL) - Any Specialty	12.2%	12.6%	11.1%	10.9%	11.9%	11.9%	11.7%	11.1%	11.2%	11.0%	11.9%	11.6%		11.5%	10.0%	▲
30 Day Readmissions (UHL) - Same Specialty	6.3%	6.3%	6.6%	5.9%	6.6%	6.4%	6.3%	6.2%	6.9%	5.6%	6.6%	6.3%		6.4%		
Mortality (UHL Data)	3.9%	4.0%	4.0%	4.0%	3.2%	3.6%	3.3%	3.7%	3.7%	3.5%	4.0%	4.2%	4.3%	3.8%	4.3%	▼
Mortality (CHKS - Risk Adjusted - Peers to be Confirmed)	83.8	89.1	86.0	85.5	74.4	81.5	78.9	88.0	79.8	73.3	70.0	80.1		79.0	85	▼
PATIENT SAFETY																
10X Medication Errors	2	0	0	0	1	0	0	0	0	1	0	0	0	2	0	◀▶
Never Events	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	◀▶
Patient Falls	165	145	198	196	174	193	171	154	186	163	161	141		1737	TBC	
Complaints Re-Opened	4	11	3	6	6	6	7	11	9	8	5	4	7	72	75	▼
SUIs (Relating to Deteriorating Patients)	0	0	0	0	0	0	0	0	0	2	0	0	0	2	0	◀▶
RIDDOR	5	4	1	3	1	2	2	0	1	1	2	0	3	16	12	▼
In-hospital fall resulting in hip fracture	2	2	1	0	0	0	0	0	0	0	0	1	0	2	6	▲
Staffing Level Issues Reported as Incidents	5	7	3	1	5	5	11	12	10	10	14	19	54	144	140	▼
Outlying (daily average)	9	22	9	5	8	2	7	12	2						10	▲
Pressure Ulcers (Grade 3 and 4)	7	11	11	9	15	12	3	5	8	3	2	7		75	118	▼
ALL Complaints Regarding Attitude of Staff	15	21	14	10	14	13	14	18	14	11	11	6	5	130	110	▲
ALL Complaints Regarding Discharge	19	27	13	20	17	10	17	16	11	13	21	13	15	166	120	▼
Bed Occupancy (inc short stay admissions)	94%	91%	90%	91%	92%	93%	93%	92%	94%	95%	94%	95%	93%	93%	90%	▼
Bed Occupancy (excl short stay admissions)	90%	88%	87%	87%	88%	89%	89%	89%	90%	91%	91%	92%	90%	89%	86%	▼
Staffing : Nurses per Bed																

DIVISIONAL HEAT MAP - Month 11 2011/12

ACUTE CARE - DIVISIONAL PERFORMANCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
NURSING METRICS																
Patient Observation	89%	87%	91%	96%	96%	97%	96%	96%	96%	95%	95%	96%	96%		98.0%	◀▶
Pain Management	90%	89%	91%	94%	97%	96%	96%	95%	92%	94%	97%	93%	91%		98.0%	▼
Falls Assessment	87%	82%	88%	93%	96%	95%	95%	94%	89%	94%	93%	95%	94%		98.0%	▼
Pressure Area Care	91%	91%	99%	95%	98%	96%	95%	95%	93%	96%	93%	95%	96%		98.0%	▲
Nutritional Assessment	87%	88%	87%	96%	95%	97%	93%	93%	91%	95%	94%	97%	92%		98.0%	▼
Medicine Prescribing and Assessment	98%	97%	95%	98%	98%	99%	99%	97%	95%	96%	96%	95%	97%		98.0%	▲
Hand Hygiene															98.0%	
Resuscitation Equipment	88%	75%	83%	94%	98%	88%	89%	89%	67%	56%	56%	87%	56%		98.0%	▼
Controlled Medicines	99%	100%	97%	100%	98%	99%	98%	99%	99%	100%	99%	98%	100%		98.0%	▲
VTE	68%	74%	70%	77%	73%	79%	79%	80%	89%	89%	88%	87%	91%		98.0%	▲
Patient Dignity	96%	96%	96%	98%	97%	97%	97%	98%	95%	96%	96%	94%	96%		98.0%	▲
Infection Prevention and Control	95%	91%	98%	95%	94%	96%	96%	99%	95%	97%	98%	98%	98%		98.0%	◀▶
Discharge			86%	78%	84%	80%	85%	86%	77%	85%	86%	86%	89%		98.0%	▲
Continence	86%	87%	91%	95%	89%	95%	94%	94%	96%	98%	97%	98%	98%		98.0%	◀▶
REFERRAL to TREATMENT																
RTT - Admitted	91.5%	94.4%	92.3%	93.5%	91.4%	98.8%	97.9%	98.1%	99.0%	95.7%	98.3%	97.1%	97.3%		90.0%	▲
RTT - Non Admitted	99.3%	99.0%	99.5%	99.5%	99.4%	99.6%	99.3%	99.5%	99.2%	99.3%	99.2%	99.0%	99.0%		95.0%	◀▶
OPERATIONAL PERFORMANCE																
Choose and Book Slot Unavailability	9.0%	8.0%	7.0%	7.0%	9.0%	11.0%	8.0%	6.0%	10.0%	13.0%	3.0%	1.0%	4.0%	7.2%	4.0%	▼
Elective LOS	5.2	4.6	5.2	5.7	4.5	5.3	5.0	5.3	4.6	4.9	4.8	4.3	4.4	4.9	5.0	▼
Non Elective LOS	6.0	6.4	6.9	7.1	7.1	6.4	6.4	6.9	6.3	6.8	6.5	6.5	6.5	6.7	6.0	◀▶
% of Electives Adm.on day of proc.	57.5%	55.1%	56.3%	50.5%	57.5%	51.9%	50.2%	51.0%	54.8%	53.7%	52.8%	58.1%	53.0%	53.6%	54.0%	▲
Day Case Rate (All Elective Care)	71.2%	71.8%	71.1%	73.6%	71.7%	71.9%	67.3%	70.9%	67.3%	71.4%	69.9%	70.4%	68.5%	70.4%	70.0%	▲
Inpatient Theatre Utilisation	90.9%	90.1%	87.4%	91.6%	85.3%	85.7%	92.5%	90.3%	88.2%	89.6%	85.3%	96.3%	87.6%	89.1%	86.0%	▼
Day Case Theatre Utilisation	64.5%	58.4%	86.5%	83.5%	67.3%	62.3%	68.1%	73.1%	79.0%	79.0%	---	62.9%	---	74.1%	86.0%	▼
Operations cancelled for non-clinical reasons																
Cancelled Operations - 28 Day Re-Books															100%	
Outpatient New : F/Up Ratio	2.4	2.4	1.7	1.9	1.9	1.8	1.9	1.8	2.0	1.8	1.8	1.9	1.8	1.8	2.0	▲
Outpatient DNA Rate	8.4%	8.9%	9.7%	10.0%	8.5%	9.1%	9.2%	9.1%	9.6%	9.0%	9.3%	9.5%	9.0%	9.3%	9.5%	▲
Outpatient Hosp Canc Rate	11.1%	11.9%	12.7%	13.3%	12.3%	12.5%	12.9%	12.2%	10.6%	11.9%	13.0%	11.6%	12.9%	12.3%	12.8%	▲
Outpatient Patient Canc Rate	10.4%	10.1%	10.1%	10.6%	10.7%	11.1%	11.1%	10.9%	10.6%	10.0%	11.1%	10.4%	10.4%	10.6%	10.5%	◀▶
Bed Utilisation																

DIVISIONAL HEAT MAP - Month 11 2011/12

		Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
ACUTE CARE - DIVISIONAL PERFORMANCE	HR and FINANCE																
	Staffing : Nurses per Bed																
	Staffing : Cost per Bed																
	Appraisals	79.4%	80.7%	81.6%	80.1%	77.7%	78.9%	85.5%	81.2%	90.5%	93.6%	93.5%	93.9%	93.8%	93.8%	100%	⚠
	Sickness Absence	4.3%	3.8%	3.4%	3.1%	3.8%	3.6%	3.5%	3.4%	3.4%	3.8%	4.0%	4.3%	5.6%	3.8%	3%	⚠
	Agency Costs (£000s)																
	Overtime FTE	36.7	24.1	20.9	23.3	23.9	28.1	23.5	17.2	14.9	16.5	17.5	14.2	14.4			
	Bank FTE	127.7	138.2	141.8	128.9	128.5	150.2	127.6	116.4	118.7	110.2	120.1	89.3	98.9			
	Actual net FTE reduction this month	0.0	34.3	-15.4	-10.6	2.7	15.0	4.8	-23.8	24.4	-10.3	-10.3	-53.5	7.7	-69.1		
	Planned FTE reduction this month	0.0	0.0														
	Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

		Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
ACUTE CARE - Medicine	REFERRAL to TREATMENT																
	RTT - Admitted	98.4%	98.9%	98.3%	100.0%	100.0%	100.0%	98.4%	97.7%	99.0%	98.9%	100.0%	100.0%	100.0%		90.0%	◀▶
	RTT - Non Admitted	99.7%	99.8%	99.8%	99.9%	99.8%	99.6%	99.5%	99.7%	99.2%	99.5%	99.8%	99.4%	99.6%		95.0%	▲
	OPERATIONAL PERFORMANCE																
	Elective LOS	9.0	5.3	7.2	15.8	1.7	5.4	5.8	9.6	7.5	17.3	6.3	10.4	2.2	7.9	7.5	▲
	Non Elective LOS	7.6	7.8	7.2	7.7	7.4	6.2	6.8	7.8	6.6	7.4	6.6	6.6	6.5	7.0	7.4	▲
	% of Electives Adm.on day of proc.	37.5%	12.5%	45.5%	50.0%	55.6%	57.1%	29.2%	42.9%	66.7%	44.4%	50.0%	66.7%	85.7%	50.4%	45.0%	▲
	Day Case Rate (All Elective Care)	95.9%	95.4%	96.5%	97.6%	98.0%	97.5%	93.9%	96.9%	95.8%	97.3%	97.5%	96.9%	96.7%	96.8%	94.0%	▼
	30 Day Readmissions (UHL) - Any Specialty	11.6%	12.4%	11.3%	10.8%	11.5%	11.5%	11.9%	10.2%	11.9%	11.1%	13.3%	11.2%		11.5%	11.0%	▲
	Outpatient New : F/Up Ratio	2.8	2.9	2.4	2.6	2.4	2.3	2.4	2.3	2.5	2.3	2.3	2.4	2.3	2.4	2.5	▲
	Outpatient DNA Rate	8.3%	8.5%	9.6%	9.6%	7.9%	9.0%	9.2%	9.0%	10.1%	9.0%	8.8%	9.3%	8.8%	9.1%	9.0%	▲
	Outpatient Hosp Canc Rate	9.8%	10.0%	10.6%	9.7%	10.4%	11.2%	10.5%	10.4%	9.2%	10.0%	10.7%	8.5%	11.2%	10.2%	10.5%	▼
	Outpatient Patient Canc Rate	10.4%	10.6%	10.2%	11.4%	11.0%	11.6%	12.0%	11.9%	11.5%	10.9%	12.2%	11.4%	11.0%	11.4%	11.0%	▲
	Bed Utilisation (Incl short stay admissions)	95%	90%	89%	91%	92%	96%	94%	93%	98%	97%	98%	98%	98%	95%	90.0%	◀▶
	HR and FINANCE																
	Staffing : Nurses per Bed																
	Staffing : Cost per Bed																
	Sickness Absence	4.7%	3.8%	3.7%	3.7%	4.5%	3.8%	3.6%	3.3%	3.3%	3.3%	4.3%	4.7%	6.9%	4.0%	3.0%	▼
	Agency Costs (£000s)																
	Overtime FTE	16.8	9.9	7.4	9.6	11.1	11.0	6.7	4.6	4.2	4.6	4.5	4.2	3.8			
	Bank FTE	65.9	73.4	76.7	66.2	66.4	74.6	63.1	55.3	60.0	54.6	54.5	36.2	45.5			
	Actual net FTE reduction this month	0.7	-21.5	2.3	-14.8	-24.9	-6.6	-4.8	-22.3	26.4	-1.8	-4.9	-29.3	-3.0	-83.8		
	Planned FTE reduction this month	0.0	0.0														
	Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

ACUTE CARE - Respiratory Med. & Thoracic Surgery

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	100%	100%	100%	98.0%	100%	100%	98%	100%	100%	100%	100%	100%	93%		90.0%	▼
RTT - Non Admitted	99.1%	95.7%	100%	100%	100%	100%	100%	99.2%	99.2%	99.3%	100.0%	99.5%	100.0%		95.0%	▲
OPERATIONAL PERFORMANCE																
Elective LOS	8.2	6.3	6.8	6.6	6.1	6.9	7.1	8.5	6.3	8.4	5.8	7.0	6.0	6.8	6.6	▲
Non Elective LOS	4.3	4.6	4.8	4.2	4.7	4.7	4.3	4.2	4.1	4.3	4.1	4.6	4.6	4.4	4.5	▶▶
% of Electives Adm.on day of proc.	47.1%	40.8%	53.8%	48.3%	51.6%	48.3%	44.8%	46.6%	47.6%	45.0%	53.6%	52.2%	42.4%	48.5%	50.0%	▶
Day Case Rate (All Elective Care)	63.6%	72.1%	64.2%	65.7%	63.4%	68.8%	65.0%	66.5%	67.6%	68.3%	68.0%	70.5%	64.1%	66.5%	68.7%	▶
30 Day Readmissions (UHL) - Any Specialty	13.4%	14.5%	12.4%	11.8%	14.4%	13.8%	14.4%	14.3%	14.0%	13.2%	12.4%	13.9%		13.5%	12.0%	▶
Outpatient New : F/Up Ratio	1.6	1.5	1.6	1.5	1.6	1.6	1.7	1.5	1.7	1.5	1.6	1.7	1.6	1.6	1.5	▶
Outpatient DNA Rate	8.4%	10.3%	11.2%	12.1%	10.7%	11.5%	10.1%	10.5%	11.5%	10.4%	11.2%	10.9%	9.9%	10.9%	11.3%	▲
Outpatient Hosp Canc Rate	10.4%	11.5%	9.4%	11.2%	8.9%	8.7%	11.1%	9.3%	7.3%	9.2%	15.9%	8.9%	11.1%	10.0%	11.0%	▶
Outpatient Patient Canc Rate	10.6%	11.3%	10.8%	10.1%	10.8%	12.0%	11.0%	10.7%	10.3%	9.5%	9.6%	9.3%	10.0%	10.4%	10.2%	▼
Bed Utilisation (Incl short stay admissions)	98%	100%	96%	95%	95%	94%	95%	94%	93%	95%	97%	95%	95%	95%	90.0%	◀▶
HR and FINANCE																
Staffing : Nurses per Bed																
Staffing : Cost per Bed																
Sickness Absence	3.3%	3.4%	2.4%	2.7%	2.5%	2.5%	2.8%	2.9%	3.3%	4.3%	4.3%	4.8%	5.2%	3.4%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	1.8	0.7	0.1	0.4	0.1	0.3	0.1	0.1	0.1	0.2	0.1	0.3	0.1			
Bank FTE	19.6	22.9	21.7	18.5	19.5	22.3	19.7	18.0	17.4	16.8	15.5	13.5	12.8			
Actual net FTE reduction this month	1.6	35.4	4.5	-1.5	33.3	3.9	3.3	-3.6	0.9	2.3	3.8	-4.5	4.1	46.4		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

ACUTE CARE - Cardiac, Renal & Critical Care

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	89.6%	92.7%	90.6%	91.4%	88.8%	99.2%	97.9%	98.1%	99.0%	94.8%	97.8%	96.4%	97.2%		90.0%	▲
RTT - Non Admitted	97.8%	95.7%	98.4%	98.2%	97.8%	98.4%	98.4%	99.3%	99.2%	98.7%	97.2%	97.8%	96.8%		95.0%	▼
OPERATIONAL PERFORMANCE																
Elective LOS	4.4	4.2	4.7	5.0	4.3	5.0	4.5	4.6	4.2	3.7	4.6	3.6	4.2	4.4	4.7	▼
Non Elective LOS	10.4	10.6	9.8	9.9	10.4	9.7	8.5	9.1	8.9	8.4	9.5	9.4	9.4	9.4	10.4	◀▶
% of Electives Adm.on day of proc.	60.7%	59.7%	57.4%	51.0%	58.8%	52.5%	52.9%	52.2%	55.6%	55.7%	52.8%	58.7%	54.7%	54.7%	55.0%	▼
Day Case Rate (All Elective Care)	57.0%	53.2%	51.7%	57.6%	52.4%	51.7%	52.2%	52.3%	49.2%	54.1%	51.6%	53.3%	51.6%	52.5%	52.0%	▼
30 Day Readmissions (UHL) - Any Specialty	10.4%	9.2%	9.5%	10.3%	10.3%	11.0%	9.1%	9.9%	8.0%	9.4%	9.4%	10.1%		9.7%	9.0%	▼
Outpatient New : F/Up Ratio	2.4	2.5	2.3	2.6	2.6	2.6	2.6	2.6	2.8	2.6	2.6	2.7	2.6	2.6	2.4	▲
Outpatient DNA Rate	7.5%	8.0%	8.0%	8.6%	7.1%	7.4%	8.2%	7.6%	6.9%	7.7%	8.1%	8.3%	8.1%	7.8%	8.2%	▲
Outpatient Hosp Canc Rate	14.4%	16.4%	18.8%	21.6%	18.1%	17.2%	18.7%	17.3%	15.1%	17.2%	16.5%	19.4%	17.4%	18.0%	18.6%	▲
Outpatient Patient Canc Rate	10.3%	8.8%	9.3%	9.2%	9.8%	9.9%	9.4%	9.1%	9.0%	8.3%	9.8%	8.9%	9.4%	9.3%	9.3%	▼
Bed Utilisation (Incl short stay admissions)	90%	89%	90%	89%	92%	88%	89%	89%	88%	91%	89%	90%	87%	89%	90.0%	▼
HR and FINANCE																
Staffing : Nurses per Bed																
Staffing : Cost per Bed																
Sickness Absence	4.1%	3.7%	3.6%	2.9%	3.7%	3.8%	3.7%	3.6%	3.4%	3.9%	3.8%	3.8%	4.9%	3.7%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	15.1	9.6	9.3	9.4	8.4	11.2	9.9	8.8	7.1	7.7	8.0	7.0	7.3			
Bank FTE	29.8	29.6	31.8	30.9	31.4	40.1	30.6	31.8	30.0	29.1	38.3	30.7	29.8			
Actual net FTE reduction this month	2.8	19.7	-23.2	6.1	-39.0	6.7	-10.9	-3.1	-3.1	-4.8	-11.0	-12.3	-0.2	-94.8		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

		Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
ACUTE CARE - Emergency Dept.	OPERATIONAL PERFORMANCE																
	ED Waits - Type 1	90.0%	89.3%	90.6%	91.3%	94.1%	95.9%	91.0%	88.7%	88.5%	92.1%	96.0%	93.7%	88.3%	91.8%	95%	▼
	Admitted Median Wait (Mins) - Type 1	231	230	225	220	215	203	223	232	234	219	210	214	232		205	▼
	Admitted 95th Percentile Wait (Mins) - Type 1	557	573	453	479	436	343	478	569	558	484	350	417	482		350	▼
	Non-Admitted Median Wait (Mins) - Type 1	128	138	131	127	131	124	132	138	135	133	129	133	143		105	▼
	Non-Admitted 95th Percentile Wait (Mins) Type 1	240	255	240	240	238	236	240	255	253	240	236	238	256		235	▼
	Outpatient New : F/Up Ratio	0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	◀▶
	Outpatient DNA Rate	25.7%	25.1%	25.5%	24.4%	26.7%	23.0%	22.3%	27.6%	25.4%	21.3%	27.8%	24.4%	26.3%	25.0%	24.4%	▼
	Outpatient Hosp Canc Rate	0.6%	1.8%	3.1%	2.0%	1.3%	2.3%	2.1%	1.3%	2.7%	3.0%	4.3%	3.3%	3.3%	2.6%	2.5%	◀▶
	Outpatient Patient Canc Rate	10.4%	8.3%	14.1%	12.2%	14.8%	12.0%	12.6%	9.7%	11.7%	14.1%	9.7%	12.5%	10.5%	12.3%	10.0%	▲
	HR and FINANCE																
	Staffing : Nurses per Bed																
	Staffing : Cost per Bed																
	Sickness Absence	4.8%	4.5%	2.9%	2.3%	3.6%	4.2%	3.4%	2.9%	3.6%	4.5%	4.1%	4.2%	4.4%	3.7%	3.0%	▼
	Agency Costs (£000s)																
	Overtime FTE	3.0	3.9	4.2	3.7	4.3	5.6	6.8	3.7	3.5	3.9	4.9	2.7	3.1			
	Bank FTE	12.4	12.3	11.6	13.3	11.2	13.1	14.3	11.4	11.4	9.8	11.8	9.0	10.9			
	Actual net FTE reduction this month	-5.0	0.7	1.0	-0.4	1.5	8.4	19.9	-0.5	0.8	-4.3	2.0	-8.4	5.3	25.4		
	Planned FTE reduction this month	0.0	0.0														
	Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

WOMEN'S and CHILDREN'S - DIVISIONAL PERFORMANCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
INFECTION PREVENTION																
MRSA Bacteraemias	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	◀▶
CDT Positives (UHL)	0	1	1	0	0	0	0	1	1	0	0	0	0	3	6	◀▶
SAME SEX ACCOMODATION																
% Beds Providing Same Sex Accommodation - Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶
% Beds Providing Same Sex Accommodation - Intensivist	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶
MORTALITY and READMISSIONS																
30 Day Readmissions (UHL) - Any Specialty	6.8%	5.9%	4.0%	4.2%	4.1%	3.8%	3.9%	4.0%	3.2%	3.8%	3.7%	4.0%		3.9%	4.2%	▼
30 Day Readmissions (UHL) - Same Specialty	4.4%	4.1%	2.7%	2.9%	2.9%	2.5%	2.4%	2.6%	1.8%	2.3%	2.5%	2.9%		2.5%	2.8%	▼
30 Day Readmission Rate (CHKS)	7.8%	6.5%	4.7%	4.9%	4.8%	4.5%	4.4%	4.5%	3.6%	4.4%	4.1%			4.5%	5.0%	▲
Mortality (UHL Data)	0.2%	0.2%	0.1%	0.2%	0.3%	0.1%	0.1%	0.3%	0.2%	0.2%	0.2%	0.2%	0.1%	0.2%	0.2%	▲
Mortality (CHKS - Risk Adjusted - Peers to be Confirmed)	77.4	65.0	48.8	41.0	89.0	38.4	105.2	44.0	32.2	0.0	32.4	53.2		46.0	40.0	▼
PATIENT SAFETY																
10X Medication Errors	0	1	0	0	0	0	0	0	0	1	1	0	0	2	0	◀▶
Never Events	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	◀▶
Patient Falls	5	2	4	2	5	6	7	5	4	5	3	1		42	TBC	
Complaints Re-Opened	2	3	5	5	4	3	3	3	4	3	4	1	1	36	30	◀▶
SUIs (Relating to Deteriorating Patients)	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	◀▶
RIDDOR	0	2	0	0	0	1	0	1	0	1	1	0	1	5	10	▼
In-hospital fall resulting in hip fracture	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	◀▶
No of Staffing Level Issues Reported as Incidents	21	55	23	59	42	78	64	52	71	96	58	29	41	613	726	▼
Outlying (daily average)	0	0	0	0	0	0	0	0	0						0	◀▶
Pressure Ulcers (Grade 3 and 4)	1	0	1	0	1	0	0	0	0	0	0	0		2	4	◀▶
ALL Complaints Regarding Attitude of Staff	8	16	15	16	12	3	6	11	6	4	6	6	5	90	98	▲
ALL Complaints Regarding Discharge	4	0	2	2	3	1	0	4	4	0	3	0	2	21	20	▼
Bed Occupancy (inc short stay admissions)	86%	88%	83%	86%	87%	88%	82%	85%	85%	88%	90%	89%	90%	87%	90.0%	▲
Bed Occupancy (excl short stay admissions)	74%	77%	70%	69%	71%	71%	66%	70%	70%	73%	76%	75%	76%	72%	86.0%	▲
Staffing : Nurses per Bed																

DIVISIONAL HEAT MAP - Month 11 2011/12

WOMEN'S and CHILDREN'S - DIVISIONAL PERFORMANCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
NURSING METRICS																
Patient Observation	88%	90%	83%	83%	88%	88%	93%	80%	92%	97%	93%	97%	97%		98.0%	◀▶
Pain Management	100%	83%	92%	100%	92%	99%	96%	92%	100%	97%	97%	94%	100%		98.0%	▲
Falls Assessment	35%	42%	52%	100%	92%	90%	73%	100%	92%	100%	100%	100%	100%		98.0%	◀▶
Pressure Area Care	29%	100%	63%	100%	92%	90%	85%	100%	97%	100%	100%	100%	97%		98.0%	▼
Nutritional Assessment	34%	43%	59%	92%	85%	81%	69%	100%	94%	100%	100%	93%	100%		98.0%	▲
Medicine Prescribing and Assessment	100%	100%	100%	98%	100%	100%	98%	96%	100%	100%	100%	100%	100%		98.0%	◀▶
Hand Hygiene															98.0%	
Resuscitation Equipment	50%	50%	50%	100%	50%	50%	0%	100%	100%	100%	100%	100%	100%		98.0%	◀▶
Controlled Medicines	100%	100%	100%	100%	100%	100%	100%	50%	100%	100%	100%	100%	100%		98.0%	◀▶
VTE	67%	100%	86%	100%	92%	46%	56%	88%	79%	100%	100%	100%	83%		98.0%	▼
Patient Dignity	92%	90%	93%	100%	99%	98%	93%	100%	100%	100%	100%	100%	98%		98.0%	▼
Infection Prevention and Control	100%	70%	93%	89%	92%	83%	93%	100%	100%	100%	100%	98%	96%		98.0%	▼
Discharge			70%	88%	44%	60%	73%	64%	100%	89%	98%	98%	100%		98.0%	▲
Continence	100%	77%	100%	100%	93%	100%	98%	95%	100%	93%	100%	93%	100%		98.0%	▲

DIVISIONAL HEAT MAP - Month 11 2011/12

WOMEN'S and CHILDREN'S - DIVISIONAL PERFORMANCE

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	97.9%	97.1%	98.2%	97.8%	96.8%	97.9%	98.8%	99.3%	98.9%	97.9%	98.4%	97.5%	99.2%		90.0%	▲
RTT - Non Admitted	96.9%	97.3%	98.4%	97.3%	98.0%	98.8%	97.6%	96.8%	97.4%	98.4%	98.5%	98.9%	97.9%		95.0%	▼
OPERATIONAL PERFORMANCE																
Choose and Book Slot Unavailability	9.0%	12.0%	10.0%	3.0%	13.0%	10.0%	13.0%	9.0%	7.0%	6.0%	3.0%	3.0%	3.0%	7%	4.0%	◀▶
Elective LOS	2.3	2.2	2.4	2.2	2.3	2.7	2.1	2.3	3.5	2.5	2.6	2.5	2.4	2.5	2.3	▲
Non Elective LOS	2.1	2.2	2.8	3.0	2.7	2.7	3.1	2.7	2.5	3.0	3.4	3.3	2.7	2.9	2.1	▲
% of Electives Adm.on day of proc.	83.9%	83.4%	83.9%	86.3%	80.8%	80.3%	88.9%	83.1%	82.4%	85.6%	82.6%	80.7%	88.1%	84.0%	84.0%	
Day Case Rate (Basket of 25)	78.6%	81.9%	78.1%	77.7%	84.3%	88.6%	81.4%	76.8%	82.1%	79.5%	81.5%	81.8%	83.3%	81.4%	75.0%	▲
Day Case Rate (All Elective Care)	66.3%	71.3%	67.4%	67.7%	71.2%	68.2%	66.9%	67.4%	70.7%	68.2%	66.2%	69.6%	67.7%	68.3%	68.0%	▼
Inpatient Theatre Utilisation	74.9%	78.4%	76.0%	75.3%	73.8%	71.8%	73.5%	76.7%	81.5%	83.4%	77.8%	81.6%	79.7%	77.3%	86.0%	▼
Day Case Theatre Utilisation	80.9%	83.4%	76.5%	75.5%	70.5%	72.3%	74.4%	73.1%	67.8%	76.7%	70.3%	79.9%	77.5%	73.9%	86.0%	▼
Outpatient New : F/Up Ratio	1.5	1.4	1.1	1.2	1.2	1.2	1.3	1.3	1.2	1.2	1.1	1.1	1.1	1.2	1.2	◀▶
Outpatient DNA Rate	8.5%	9.0%	8.6%	10.2%	9.5%	9.9%	9.7%	8.9%	8.9%	8.9%	10.0%	9.6%	8.8%	9.4%	9.5%	▲
Outpatient Hosp Canc Rate	7.4%	7.2%	7.3%	7.3%	7.4%	7.4%	8.1%	7.3%	7.4%	6.1%	6.8%	7.3%	8.5%	7.4%	7.4%	▼
Outpatient Patient Canc Rate	9.1%	10.2%	8.7%	9.5%	10.3%	11.0%	10.8%	10.6%	10.3%	10.1%	10.7%	9.8%	10.7%	10.2%	10.0%	▼
HR and FINANCE																
Staffing : Nurses per Bed																
Staffing : Cost per Bed																
Appraisals	93.6%	93.2%	97.1%	95.7%	93.2%	90.9%	92.9%	92.5%	95.2%	93.9%	94.5%	95.7%	95.5%	95.7%	100%	▼
Sickness Absence	3.1%	3.5%	3.3%	3.1%	3.6%	3.4%	3.2%	3.3%	3.7%	3.7%	4.1%	3.7%	4.2%	3.6%	3%	▼
Agency Costs (£000s)																
Overtime FTE	8.7	7.0	7.4	9.3	7.4	6.3	5.6	3.1	3.3	4.3	6.4	4.8	3.9			
Bank FTE	14.7	15.9	17.7	18.8	17.5	23.4	18.7	18.0	15.8	18.9	16.9	15.0	10.6			
Actual net FTE reduction this month	-2.9	-5.6	-7.6	10.8	3.1	14.7	8.2	-4.0	21.0	23.2	-4.2	-9.9	-1.4	54.1		
Planned FTE reduction this month	-0.2	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

WOMEN'S and CHILDREN'S - Women's

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	97.6%	97.8%	98.6%	97.7%	97.9%	97.0%	99.1%	99.4%	99.0%	99.3%	99.5%	98.3%	99.5%		90.0%	▲
RTT - Non Admitted	95.3%	96.4%	97.6%	95.9%	96.9%	98.6%	96.4%	96.6%	96.8%	98.0%	97.9%	98.5%	97.3%		95.0%	▼
OPERATIONAL PERFORMANCE																
Elective LOS	2.5	2.1	2.3	2.4	2.4	2.6	2.3	2.4	2.3	2.2	2.3	2.2	2.2	2.3	2.4	◀▶
Non Elective LOS	2.7	2.7	2.3	2.9	2.6	2.3	2.4	2.4	1.9	2.5	2.2	2.2	2.4	2.4	2.7	▼
% of Electives Adm.on day of proc.	92.6%	93.1%	93.1%	90.6%	92.5%	90.3%	93.9%	94.8%	88.0%	91.9%	91.1%	89.0%	92.5%	91.6%	92.0%	▲
Day Case Rate (Basket of 25)	85.3%	88.1%	85.9%	82.4%	88.6%	90.8%	86.9%	78.7%	85.3%	78.7%	83.4%	83.8%	87.3%	84.7%	75.0%	▲
Day Case Rate (All Elective Care)	64.7%	69.2%	63.7%	65.1%	68.1%	64.3%	62.8%	65.7%	64.6%	63.1%	64.0%	67.3%	64.0%	64.8%	66.5%	▼
30 Day Readmissions (UHL) - Any Specialty	4.9%	4.4%	3.5%	3.9%	3.9%	3.7%	3.5%	3.6%	2.7%	3.4%	3.3%	3.0%		3.4%	3.8%	▲
30 Day Readmissions (UHL) - Same Specialty	2.2%	2.4%	2.3%	2.7%	2.5%	2.3%	2.0%	2.2%	1.4%	1.8%	2.0%	1.8%		2.1%	2.3%	▲
Outpatient New : F/Up Ratio	1.5	1.3	1.3	1.4	1.4	1.4	1.4	1.5	1.5	1.5	1.4	1.4	1.4	1.4	1.4	◀▶
Outpatient DNA Rate	7.9%	8.6%	7.7%	9.4%	8.8%	8.8%	8.5%	8.3%	8.5%	8.2%	9.1%	8.6%	7.7%	8.5%	8.5%	▲
Outpatient Hosp Canc Rate	7.4%	7.9%	7.5%	7.8%	8.7%	8.1%	8.5%	7.7%	8.0%	6.1%	7.4%	7.7%	9.6%	7.9%	7.8%	▼
Outpatient Patient Canc Rate	9.2%	10.3%	8.4%	9.1%	10.0%	10.2%	10.9%	10.3%	10.4%	10.5%	10.5%	9.7%	10.5%	10.0%	9.5%	▼
Bed Utilisation (Incl short stay admissions)	88%	86%	84%	87%	91%	93%	86%	88%	84%	87%	88%	88%	90%	88%	90.0%	▲
HR and FINANCE																
Staffing : Nurses per Bed																
Staffing : Cost per Bed																
Sickness Absence	3.4%	3.5%	3.1%	3.0%	3.6%	3.5%	3.3%	3.4%	4.0%	3.9%	3.9%	3.5%	4.0%	3.6%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	5.2	5.2	6.4	6.0	5.6	4.3	4.9	2.7	2.3	2.9	4.7	3.5	1.1			
Bank FTE	9.7	10.2	11.5	12.9	11.0	14.9	12.1	11.7	10.9	12.0	11.6	11.0	7.6			
Actual net FTE reduction this month	-1.8	4.7	0.1	2.6	3.3	16.8	9.8	-8.1	8.6	13.6	1.1	-5.6	-1.8	40.1		
Planned FTE reduction this month	0.0	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

WOMEN'S and CHILDREN'S - Children's

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
REFERRAL to TREATMENT																
RTT - Admitted	100.0%	91.5%	94.1%	98.4%	89.2%	100.0%	95.6%	98.4%	98.4%	86.0%	91.8%	89.8%	96.6%		90.0%	▲
RTT - Non Admitted	100.0%	99.2%	100.0%	100.0%	100.0%	99.8%	99.8%	97.3%	98.3%	99.3%	100.0%	99.8%	99.1%		95.0%	▼
OPERATIONAL PERFORMANCE																
Elective LOS	2.0	2.4	2.5	1.8	2.1	2.8	1.9	2.3	5.9	3.0	3.2	3.2	2.8	2.8	2.2	▲
Non Elective LOS	1.7	2.0	3.5	3.2	2.9	3.6	4.4	3.1	3.7	3.7	5.4	4.9	3.2	3.8	2.0	▲
% of Electives Adm.on day of proc.	71.8%	69.4%	67.4%	78.4%	61.2%	66.1%	80.9%	63.5%	70.5%	72.8%	67.7%	64.7%	79.3%	70.2%	71.9%	
Day Case Rate (Basket of 25)	62.2%	62.5%	61.7%	62.0%	70.4%	81.4%	62.8%	69.2%	72.9%	81.8%	76.7%	76.0%	70.2%	71.4%	75.0%	▼
Day Case Rate (All Elective Care)	68.2%	73.6%	72.1%	71.5%	75.2%	72.7%	71.9%	69.9%	78.2%	74.9%	69.3%	73.2%	72.9%	73.0%	69.7%	▼
30 Day Readmissions (UHL) - Any Specialty	11.8%	9.6%	6.5%	5.8%	5.4%	4.8%	5.6%	6.3%	5.5%	5.6%	5.7%	8.9%		6.0%	5.5%	▼
30 Day Readmissions (UHL) - Same Specialty	10.1%	8.0%	4.3%	4.0%	4.7%	3.6%	4.5%	4.7%	3.9%	4.7%	5.1%	7.9%		4.8%	4.0%	▼
Outpatient New : F/Up Ratio	1.4	1.5	0.8	1.0	0.9	1.0	1.0	1.0	0.9	0.8	0.7	0.7	0.7	0.8	1.2	◀▶
Outpatient DNA Rate	9.9%	10.2%	11.0%	12.3%	11.4%	12.6%	12.8%	10.4%	9.9%	10.8%	12.6%	12.5%	11.9%	11.6%	11.5%	▲
Outpatient Hosp Canc Rate	7.4%	5.5%	7.0%	5.7%	4.2%	5.6%	7.1%	6.3%	5.8%	6.1%	5.0%	6.1%	5.6%	5.9%	5.7%	▲
Outpatient Patient Canc Rate	8.7%	10.2%	9.6%	10.6%	11.0%	12.9%	10.5%	11.3%	9.9%	9.1%	11.0%	10.2%	11.4%	10.7%	10.0%	▲
Bed Utilisation (Incl short stay admissions)	83%	93%	81%	84%	79%	79%	73%	79%	87%	90%	95%	91%	88%	84%	90.0%	▲
HR and FINANCE																
Staffing : Nurses per Bed																
Staffing : Cost per Bed																
Sickness Absence	2.6%	3.5%	3.7%	3.4%	3.7%	3.0%	2.8%	3.0%	3.1%	3.1%	4.5%	4.2%	4.7%	3.5%	3.0%	▼
Agency Costs (£000s)																
Overtime FTE	3.6	1.8	1.0	3.3	1.8	2.0	0.7	0.5	0.9	1.5	1.8	1.3	2.8			
Bank FTE	5.0	5.7	6.2	5.9	6.5	8.5	6.6	6.3	4.9	6.9	5.4	4.1	3.0			
Actual net FTE reduction this month	-1.2	-10.3	-7.6	8.2	-0.1	-2.0	-1.6	-2.8	12.4	9.7	-5.3	-3.9	0.5	7.3		
Planned FTE reduction this month	-0.2	0.0														
Finance : CIP Delivery																

DIVISIONAL HEAT MAP - Month 11 2011/12

CLINICAL SUPPORT

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
PATIENT SAFETY																
10X Medication Errors	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	◀▶
Never Events	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	◀▶
Patient Falls	10	9	8	11	11	2	10	6	6	4	2	4		64	TBC	
Complaints Re-Opened	0	1	0	1	1	1	1	0	2	4	2	0	0	12	0	◀▶
SULs (Relating to Deteriorating Patients)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	◀▶
RIDDOR	1	3	0	0	1	5	1	3	1	1	0	0	0	12	12	◀▶
No of Staffing Level Issues Reported as Incidents	1	1	2	0	1	5	0	0	2	1	2	3	0	16	12	▲
ALL Complaints Regarding Attitude of Staff	2	4	3	6	0	2	7	3	11	4	1	4	4	45	36	▶▶
ALL Complaints Regarding Discharge	4	1	1	0	2	1	2	1	1	1	0	1	1	11	0	▶▶
ANAESTHETICS & THEATRES																
% Pain Mgmt Referrals Seen < 11 weeks	99.0%	98.2%	98.7%	98.5%	98.5%	98.3%	98.6%	96.2%	97.6%	97.0%	94.9%	95.1%	93.6%	97.0%	98.0%	▼
Outpatient New : F/Up Ratio	3.8	3.8	3.9	4.3	4.8	3.8	4.2	3.3	3.1	3.4	3.5	2.7	2.9	3.6	3.2	▼
Outpatient DNA Rate	11.3%	10.7%	11.3%	11.8%	13.0%	10.6%	13.4%	11.8%	11.7%	11.7%	11.8%	10.9%	10.9%	11.7%	11.5%	◀▶
Outpatient Hosp Canc Rate	8.8%	6.0%	5.1%	7.0%	10.6%	9.5%	10.1%	23.8%	18.7%	17.3%	15.5%	18.9%	16.6%	14.3%	8.0%	▲
Outpatient Patient Canc Rate	14.8%	15.0%	16.6%	15.5%	13.6%	17.0%	16.5%	13.2%	13.0%	13.1%	14.6%	12.9%	13.6%	14.4%	15.0%	▼
RTT - Admitted	96.3%	98.4%	100.0%	100.0%	95.2%	100.0%	100.0%	100.0%	97.9%	95.1%	100.0%	97.7%	98.2%		90.0%	▲
RTT - Non Admitted	99.5%	99.6%	99.1%	99.6%	99.1%	98.2%	99.2%	99.1%	99.6%	99.3%	99.5%	99.6%	100.0%		95.0%	▲
UHL Inpatient Theatre Utilisation Rate (%)	82.9%	82.1%	79.6%	79.3%	80.2%	81.3%	84.1%	82.6%	81.0%	81.2%	80.2%	81.9%	78.7%	81.0%	86.0%	▼
UHL Day case Theatre Utilisation Rate (%)	90.4%	91.9%	74.6%	74.5%	74.9%	73.4%	78.8%	78.2%	75.1%	79.8%	75.8%	77.3%	80.1%	76.6%	86.0%	▲
BOOKING CENTRE																
% calls responded to within 30 seconds	75.4%	81.5%	76.9%	60.9%	64.4%	71.3%	68.6%	76.5%	76.9%	79.9%	89.8%	74.7%	83.2%		65%	▲
NUTRITION AND DIETETICS																
% of adult inpatients seen within 2 days	96.3%	97.5%	97.4%	98.0%	97.2%	96.3%	97.2%	98.5%	97.9%	96.7%	97.7%	98.9%	96.0%		98%	▼
% of paed inpatients seen within 2 days	100%	100%	100%	100%	100.0%	100.0%	100.0%	98.2%	100.0%	96.7%	98.3%	100.0%	100.0%		98%	◀▶

DIVISIONAL HEAT MAP - Month 11 2011/12

CLINICAL SUPPORT

	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
OCCUPATIONAL THERAPY (Response times are reported one month in arrears)																
RTT Incompletes (% waiting <=8 weeks)	97.1%	94.2%	95.0%	95.1%	98.9%	97.3%	91.2%	88.9%	98.2%	100.0%	100.0%	100.0%	100.0%		95%	◀▶
RTT Completes (% waiting <=8 weeks)	99.2%	99.5%	99.1%	99.4%	99.1%	99.8%	99.8%	99.4%	99.8%	100.0%	100.0%	100.0%	100.0%		95%	◀▶
Inpatient Response Times - Emergency (45 mins)	100%	100%	100%	97%	98%	100%	80%	90%	100%	80%	100%	0%			98%	▼
Inpatient Response Times - Urgent (3 hours)	100%	100%	100%	95%	100%	95%	96%	100%	95%	90%	98%	100.0%			98%	▲
Inpatient Response Times - Routine (24 hours)	79%	79%	70%	71%	77%	80%	81%	86%	83%	85%	88%	85%			98%	▼
PHYSIOTHERAPY (Response times are reported one month in arrears)																
RTT Incompletes (% waiting <=8 weeks)	99.2%	98.8%	99.0%	96.6%	97.4%	97.2%	96.4%	96.5%	96.4%	97.2%	94.1%	95.0%	96.4%		95%	▲
RTT Completes (% waiting <=8 weeks)	96.2%	98.5%	97.8%	96.8%	95.6%	97.3%	96.5%	97.0%	97.6%	97.8%	97.7%	95.2%	96.2%		95%	▲
Inpatient Response Times - Emergency (45 mins)	100%	100%	100%	100%	100%	100%	96%	97%	100%	100%	100%	100%			98%	◀▶
Inpatient Response Times - Urgent (3 hours)	99%	100%	99.8%	99.6%	99.4%	99.2%	99.7%	98.2%	99.8%	99.4%	98.6%	98.1%			98%	▼
Inpatient Response Times - Routine (24 hours)	98.2%	98.6%	99.1%	99.6%	99.3%	99.5%	99.5%	99.7%	99.5%	99.5%	99.1%	99.3%			98%	▲
MEDICAL RECORDS																
Med Rec - % Missing Casenotes	0.46%	0.32%	0.31%	0.46%	0.44%	0.34%	0.35%	0.34%	0.30%	0.41%	0.35%	0.38%	0.35%		<0.5%	▲
DISCHARGE TEAM																
Delayed Discharges - County	2.3	2.4	2.3	2.5	2.6	2.6	2.7	2.8	2.8	2.7	2.7	2.7	2.7		1.6	◀▶
Delayed Discharges - City	3.8	3.8	4.9	4.9	4.3	4.1	4.1	4.3	4.3	4.4	4.3	4.2	4.1		3.8	▲
PSYCHOLOGY / NEURO-PSYCHOLOGY																
New referrals inpatients Medical Psychology	4	2	2	1	2	0	0	2	4	6	3	5	0	25		
New referrals outpatients Medical Psychology	54	63	33	66	61	52	34	64	35	53	54	60	50	562		
New referrals inpatients Neuropsychology	8	7	4	9	6	5	5	13	1	15	2	5	4	69		
New referrals outpatients Neuropsychology	3	9	2	10	8	9	5	16	7	8	9	14	2	90		

DIVISIONAL HEAT MAP - Month 11 2011/12

			Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
CLINICAL SUPPORT	CLINICAL SUPPORT																	
	SALT Wait Time in Weeks	4			2	2	2	2	2	3	3	2	3	3	3		4	◀▶
	Podiatry New IP Referrals	64	78		53	51	67	63	62	61	55	60	58	51	57	638		
	Pharmacy TTO Turnaround in 2 Hours	79.5%	87.4%		79.5%	83.4%	85.8%	81.0%	87.2%	79.3%	78.9%	80.3%	81.7%	80.5%	80.0%		80%	▼
	Pharmacy Dispensing Accuracy	100%	100%		98.4%	99.96%	99.98%	99.99%	99.99%	99.99%	99.99%	99.99%	99.99%	99.99%	99.99%		99.5%	◀▶
	IMAGING and MEDICAL PHYSICS																	
	CT Scan (% Waiting 3+ Weeks)	1.0%	2.3%		4.0%	1.0%	1.0%	0.2%	3.6%	1.5%	0.2%	1.7%	4.7%	1.2%	0.7%		5%	▲
	MRI Scan (% Waiting 3+ Weeks)	9.8%	10.2%		7.6%	4.9%	10.8%	5.5%	7.2%	3.3%	3.9%	5.0%	6.7%	3.5%	5.2%		5%	▼
	Non-Obstetric Ultrasound (% Waiting 3+ Weeks)	9.0%	12.2%		27.8%	8.2%	6.3%	4.9%	2.1%	0.1%	0.3%	4.2%	12.2%	4.9%	12.0%		5%	▼
	Equipment Utilisation	63.0%	72.0%		73.0%	77.5%	77.0%	75.0%	78.7%	73.0%	77.0%	78.0%	70.0%	79.0%			80%	▲
	ED Breach - Total %	0.0%	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%				1%	◀▶
	ED Breach - Plain Film %	0.0%	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%				1%	◀▶
	ED Breach - CT %	0.0%	0.0%		0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%				1%	◀▶
	CRIS and PACS																	
	PACS Uptime	99.6%	99.0%		97.0%	97.0%	100%	99%	99.6%	100%	97%	100%	100%	99%	100%		98%	▲
	CRIS Uptime	100%	100%		100%	97%	100%	100%	100%	100%	99.7%	100%	100%	97%	100%		98%	▲
	PATHOLOGY																	
	CDT 24 Hour TRT	91.8%	98.6%		96.3%	95.8%	96.6%	97.8%	96.6%	94.8%	96.0%	97.1%	98.5%	97.8%	95.5%		95%	▼
	MRSA 48 Hour TRT	99.7%	99.9%		99.07%	99.67%	99.72%	99.71%	99.73%	99.83%	99.59%	99.88%	99.50%	98.70%	99.52%		95%	▼
	Diagnostic Wait > 6 Weeks	0	0		0	0	0	0	0	0	0	0	0	0	0		0	◀▶
	Cytology Screening 7 Day Target	100.0%	100.0%		99.87%	99.98%	99.98%	99.98%	100%	100%	99.98%	100%	97.7%	100%	100%		98%	◀▶

DIVISIONAL HEAT MAP - Month 11 2011/12

CLINICAL SUPPORT		Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD	Target	Status
	HR and FINANCE																
	Appraisals	94.5%	93.3%	92.4%	90.9%	87.6%	86.2%	85.0%	93.2%	96.6%	94.2%	93.5%	95.9%	96.1%	95.9%	100%	▲
	Sickness Absence	3.3%	3.7%	3.4%	3.0%	3.4%	3.5%	3.1%	3.1%	3.4%	3.4%	3.3%	3.4%	3.7%	3.4%	3%	▼
	Agency Costs (£000s)																
	Overtime FTE	20.3	16.1	17.0	19.4	16.6	20.6	17.0	17.9	17.2	15.8	17.9	18.3	16.3			
	Bank FTE	30.5	29.1	29.7	28.8	27.2	21.0	20.1	21.0	17.6	23.0	23.1	16.9	23.2			
	Actual net FTE reduction this month	-30.9	-5.1	-5.6	-14.7	7.8	-50.7	15.2	-15.9	-8.9	-2.4	-8.8	-19.6	1.5	-102.0		
	Planned FTE reduction this month	0.0	0.0														
	Finance : CIP Delivery																

KEY to STATUS INDICATORS



Latest month achievement is "Green" and an improvement on previous month



Latest month achievement is "Amber" and an improvement on previous month



Latest month achievement is "Red" and an improvement on previous month



Latest month achievement is "Green" but a deterioration relative to previous month



Latest month achievement is "Amber" and a deterioration relative to previous month



Latest month achievement is "Red" and a deterioration relative to previous month



Latest month achievement is "Green" and performance unchanged from previous month



Latest month achievement is "Amber" and performance unchanged from previous month



Latest month achievement is "Red" and performance unchanged from previous month