

Caring at its best

Quality and Performance

Trust Board

Thursday 5th May 2011

March 2011

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 arrow pointing to the right indicates an improvement in performance and an arrow pointing to the left indicates a deterioration in performance.

UHL at a Glance - Month 12 - 2010/11

PATIENT SAFETY	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
MRSA Bacteraemias	9	Mar-11	1	12	12	
CDT Isolates in Patients (UHL - All Ages)	212	Mar-11	14	200	200	
% of all adults who have had VTE risk assessment on adm to hosp ***	90%	Mar-11	79%	61%		
Reduction of hospital acquired venous thrombosis ***						
Incidents of Patient Falls ***	2569	Mar-11	114	2036	2036	
In Hospital Falls resulting in Hip Fracture ***	TBC	Mar-11	2	13		
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%	Feb-11	95.7%	93.3%	93.5%	
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	93%	Feb-11	95.5%	95.9%	95.5%	
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	96%	Feb-11	96.6%	97.0%	97.0%	
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	98%	Feb-11	100.0%	100.0%	100.0%	
31-Day Wait For Second Or Subsequent Treatment: Surgery	94%	Feb-11	96.3%	95.1%	95.0%	
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	94%	Feb-11	100.0%	99.6%	99.5%	
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	85%	Feb-11	87.2%	86.3%	86.0%	
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	90%	Feb-11	85.1%	90.9%	91.0%	
62-Day Wait For First Treatment From Consultant Upgrade	100%	Feb-11	100.0%	100.0%	100.0%	
Emergency 30 Day Readmissions (Following Elective Admission)	TBC	Feb-11	4.7%	5.1%		
Mortality (UHL Data) - Elective		Mar-11	0.1%	0.1%		
Mortality (CHKS - Risk Adjusted) - Elective		Feb-11	63.1			
Mortality (UHL Data) - Non Elective		Mar-11	2.5%	2.5%		
Mortality (CHKS - Risk Adjusted) - Non Elective		Feb-11	74.4			
Primary PCI Call to Balloon <150 Mins	75.0%	Mar-11	86.4%	87.0%	87.0%	
Pressure Ulcers (Grade 3 and 4) ***	TBC	Mar-11	20	215		

*** Trust Priorities

Data Quality Key : Process & Procedure Fully Documented

Patient Level

Audit

Director Sign Off

UHL at a Glance - Month 12 - 2010/11

PATIENT EXPERIENCE	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
Inpatient Polling - treated with respect and dignity ***	95.0	Mar-11	95.0			
Inpatient Polling - rating the care you receive ***	91.0	Mar-11	83.8			
% Beds Providing Same Sex Accommodation -Wards ***	100%	Mar-11	100.0%	100.0%	100.0%	
% Beds Providing Same Sex Accommodation - Intensivist ***	100%	Mar-11	100.0%	100.0%	100.0%	
ED Waits - Leics	95%	Mar-11	93.8%	96.1%	96.1%	
ED Waits - UHL (Type 1 and 2)	95%	Mar-11	90.4%	93.8%		
ED Unplanned Re-attendance Rate (From Qtr 2 2011/12)	<5%	Mar-11	5.8%	6.0%		
ED Time in Department - 95th centile Type 1+2 (From Qtr 2 2011/12)	<4Hrs	Mar-11	343	277		
ED Left Without Being Seen % (From Qtr 2 2011/12)	<5%	Mar-11	2.5%	2.4%		
ED Time to Initial Assessment - 95th centile (From Qtr 2 2011/12)	<15 mins	Mar-11				
ED Time to Treatment - Median (From Qtr 2 2011/12)	<60 mins	Mar-11	66	62		
RTT 18 week - Admitted	90%	Mar-11	91.8%	91.8%		
RTT 18 week - Non admitted	95%	Mar-11	97.1%	97.1%		
RTT Admitted Median Wait (Weeks)	<=11.1	Mar-11	9.1	9.7		
RTT Admitted 95th Percentile (Weeks)	<=27.7	Mar-11	24.1	20.6		
RTT Non-Admitted Median Wait (Weeks)	<=6.6	Mar-11	5.4	6.2		
RTT Non-Admitted 95th Percentile (Weeks)	<=18.3	Mar-11	16.8	16.8		
RTT Incomplete Median Wait (Weeks)	<=7.2	Mar-11	5.5	5.5		
RTT Incomplete 95th Percentile (Weeks)	<=36.0	Mar-11	21.8	21.8		
STAFF EXPERIENCE / WORKFORCE	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
Headcount Reduction	433.4	Mar-11	-13.0	437.8		
Sickness absence	3.0%	Mar-11	4.0%	3.7%		
Appraisals	100%	Mar-11	90.3%	90.3%		
VALUE FOR MONEY	Standard	Current Data Month	Month Actual	YTD	Annual Forecast	Data Quality
Income (£000's)	692,280	Mar-11	64,835	703,718	703,718	
Operating Cost (£000's)	648,417	Mar-11	58,922	659,611	659,611	
Surplus / Deficit (as EBIDTA) (£000's)	43,863	Mar-11	5,913	44,107	44,107	
CIP (£000's)	30,479	Mar-11	3,270	30,975	30,975	
Cash Flow (£000's)	10,250	Mar-11	10,306	10,306	10,306	
Financial Risk Rating	2	Mar-11	2	2	2	
Pay - Locums (£ 000s)		Mar-11	335	4,066		
Pay - Agency (£ 000s)		Mar-11	1,990	10,211		
Pay - Bank (£ 000s)		Mar-11	504	5,501		
Pay - Overtime (£ 000s)		Mar-11	447	3,098		
Total Pay Bill (£ millions)		Mar-11	38.1	435.0		
Cost per Bed Day (£)		Mar-11	172	172		

*** Trust Priorities

Data Quality Key : Process & Procedure Fully Documented



Patient Level

Audit

Director Sign Off

QUALITY and PERFORMANCE REPORT - Month 12 - 2010/11

QUARTERLY FOUNDATION TRUST COMPLIANCE FRAMEWORK

	QTR THRESHOLD	WEIGHTING	QTR 1		QTR 2		QTR 3		QTR 4	
			Actual	Score	Actual	Score	Actual	Score	Actual / Forecast	Score
Acute Targets - National Requirements										
CDIFF	53	1.0	68	1.0	37	0.0	48	0.0	47	0.0
MRSA	2	1.0	6	1.0	1	0.0	1	0.0	4	1.0
31 day cancer :-										
subsequent surgery	94%	1.0	94.2%	0.0	94.5%	0.0	96.2%	0.0	95.5%	0.0
subsequent anti cancer drug treatments	98%		100.0%	0.0	100.0%	0.0	100.0%	0.0	100.0%	0.0
subsequent radiotherapy (from 1 Jan 2011)	94%		99.3%	0.0	99.8%	0.0	99.5%	0.0	99.4%	0.0
62 day cancer :-										
from urgent GP referral to treatment	85%	1.0	86.1%	0.0	86.3%	0.0	86.6%	0.0	86.0%	0.0
from consultant screening service referral	90%		91.6%	0.0	90.3%	0.0	92.8%	0.0	91.7%	0.0
Acute Targets - Minimum Targets										
31-day cancer wait from diagnosis to first treatment	96%	1.0	96.6%	0.0	97.2%	0.0	97.4%	0.0	96.4%	0.0
Cancer: two week wait										
all cancers	93%	0.5	93.7%	0.0	93.8%	0.0	93.0%	0.0	93.2%	0.0
for symptomatic breast patients (cancer not initially suspected)	93%		94.1%	0.0	96.9%	0.0	96.8%	0.0	95.9%	0.0
Screening all elective in-patients for MRSA	100%	0.5	100.0%	0.0	100.0%	0.0	100.0%	0.0	100.0%	0.0
LLR ED 4hr wait	95%	0.5	97.8%	0.0	98.0%	0.0	94.9%	0.5	93.6%	0.5
People suffering heart attack to receive thrombolysis within 60 mins of call	68%	0.5	100.0%	0.0	84.2%	0.0	80.0%	0.0	----	0.0
Performance Governance rating				2.0	0.0	0.5			1.5	

Performance governance rating : 0-0.9 green, 1-1.9 amber-green, 2-2.9 amber-red, 3 or above red.

QUALITY and PERFORMANCE REPORT - Month 12 - 2010/11

CQC SERVICE PERFORMANCE

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

Quality of service Performance Indicator	Thresholds			2010/11 performance		2010/11 score		
	Performing	Under-performing	Weighting for PF	Qtr 1 and Qtr 2	Qtr 1 to Qtr 3	Qtr 1 and Qtr 2	Qtr 1 to Qtr 3	Full Year Forecast
LLR Four-hour maximum wait in A&E	95%	94%	1	97.90%	96.90%	3	3	3
Cancelled ops - breaches of 28 days readmission guarantee	5.0%	15.0%	1	8.50%	9.20%	1	1	1
MRSA	0	>1SD	1	7	8	0	0	0
C Diff	0	>1SD	1	105	153	3	3	3
RTT - admitted - median	<=11.1		0.50	9.7	9.8	1.5	1.5	1.5
RTT - admitted - 95th percentile	<=27.7		0.50	19.8	22.1	1.5	1.5	1.5
RTT - non-admitted including audiology (DAA) - median	<=6.6		0.50	6.3	6.3	1.5	1.5	1.5
RTT - non-admitted including audiology (DAA) - 95th percentile	<=18.3		0.50	17.1	17.1	1.5	1.5	1.5
RTT - incomplete - median	<=7.2		0.50	6.1	6.8	1.5	1.5	1.5
RTT - incomplete - 95th percentile	<=36		0.50	18.3	20.9	1.5	1.5	1.5
2 week GP referral to 1st outpatient	93%	88%	0.5	93.8%	93.5%	1.5	1.5	1.5
2 week GP referral to 1st outpatient - breast symptoms	93%	88%	0.5	95.4%	95.8%	1.5	1.5	1.5
31 day second or subsequent treatment - surgery	94%	89%	0.33	94.4%	95.1%	1	1	1
31 day second or subsequent treatment - drug	98%	93%	0.33	100.0%	100.0%	1	1	1
31 day diagnosis to treatment for all cancers	96%	91%	0.33	96.9%	97.1%	1	1	1
31 day second or subsequent treatment - radiotherapy Q4	94%	89%	0.25	99.5%	99.5%	n/a	n/a	0.75
62 day referral to treatment from screening	90%	85%	0.33	90.9%	91.5%	1	1	1
62 day referral to treatment from hospital specialist	85%	80%	0.33	100.0%	100.0%	1	1	1
62 days urgent GP referral to treatment of all cancers	85%	80%	0.33	86.2%	86.3%	1	1	1
Reperfusion : Primary Angioplasty (PPCI)^	75.0%	60.0%	0.5	83.3%	85.4%	1.5	1.5	1.5
Reperfusion : Thrombolysis^	68.0%	48.0%	0.5	91.7%	88.2%	1.5	1.5	1.5
2 week RACP	98%	95%	1	99.8%	99.8%	3	3	3
Patients that have spent more than 90% of their stay in hospital on a stroke unit	60%	30%	1	08/09 Sentinal	08/09 Sentinal	3	3	3
48 hours GUM access	98%	95%	1	100%	100%	3	3	3
Delayed transfers of care	3.5%	5.0%	1	1.4%	1.3%	3	3	3
Overall performance score threshold						2.67	2.80	2.67

Scoring values

Underperforming:	0
Performance under review:	1
Performing:	3

Overall performance score threshold

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

HISTORY / TREND OVERVIEW - Month 12 - 2010/11

PATIENT SAFETY

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status	Page No
MRSA Bacteraemias	1	3	2	1	0	0	1	0	1	0	1	2	1	12	9		11
CDT Isolates in Patients (UHL - All Ages)	24	24	25	19	14	13	10	16	20	12	17	16	14	200	212		11
% of all adults who have had VTE risk assessment on adm to hosp				40%	49%	51%	57%	61%	65%	64%	69%	75%	79%	61%	90%		
Reduction of hospital acquired venous thrombosis															TBC		
Incidents of Patient Falls	202	225	219	212	118	175	205	211	148	127	123	159	114	2036	2569		14
In Hospital Falls resulting in Hip Fracture	0	0	3	0	0	0	1	0	0	3	2	2	2	13			

CLINICAL EFFECTIVENESS

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status	Page No
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	94.0%	93.2%	94.6%	93.3%	93.5%	94.8%	93.3%	93.0%	94.5%	91.3%	88.5%	95.7%		93.3%	93%		19
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	96.5%	95.4%	93.4%	93.5%	93.4%	98.3%	98.3%	97.7%	94.9%	98.4%	98.0%	95.5%		95.9%	93%		19
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	97.2%	97.6%	96.0%	96.3%	98.2%	96.4%	97.0%	96.7%	97.3%	98.3%	96.6%	96.6%		97.0%	96%		19
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%	98%		19
31-Day Wait For Second Or Subsequent Treatment: Surgery	97.3%	100.0%	92.1%	94.0%	94.0%	91.4%	97.9%	97.8%	95.5%	95.3%	94.7%	96.3%		95.1%	94%		19
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	100.0%	100.0%	98.7%	99.3%	99.2%	100.0%	100.0%	100.0%	99.4%	99.3%	99.3%	100.0%		99.6%	94%		19
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	87.5%	85.9%	85.0%	87.1%	89.0%	82.8%	87.3%	85.5%	86.4%	88.1%	85.2%	87.2%		86.3%	85%		19
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	96.0%	92.9%	87.2%	93.2%	91.4%	87.9%	91.5%	87.2%	91.1%	98.2%	90.5%	85.1%		90.9%	90%		19
62-Day Wait For First Treatment From Consultant Upgrade			-----	-----	-----	100%	-----	100%	100%	100%	100%	100%		100%	100%		19

HISTORY / TREND OVERVIEW - Month 12 - 2010/11

CLINICAL EFFECTIVENESS (Continued)

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status	Page No
Emergency 30 Day Readmissions (Following Elective Admission)	5.2%	5.0%	5.1%	4.9%	5.2%	5.3%	5.1%	5.2%	5.2%	5.4%	5.2%	4.7%		5.1%	TBC		13
Emergency 30 Day Readmissions (Following Emergency Admission)	11.7%	11.6%	10.9%	11.1%	10.7%	11.7%	10.5%	10.5%	10.1%	10.1%	11.0%	11.2%		10.8%	TBC		13
Mortality (UHL Data) - Elective	0.1%	0.2%	0.2%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	TBC		12
Mortality (CHKS - Risk Adjusted) - Elective	93.3	95.9	112.6	95.9	72.3	101.7	93.3	104.8	86.0	78.9	61.7	63.1			TBC		12
Mortality (UHL Data) - Emergency	2.2%	2.2%	2.5%	2.5%	2.1%	2.0%	2.4%	2.6%	2.1%	3.1%	3.0%	2.5%	2.5%	2.5%	TBC		12
Mortality (CHKS - Risk Adjusted) - Emergency	70.0	69.6	78.4	74.4	70.6	69.4	76.5	81.8	67.9	88.0	78.3	74.4			TBC		12
Primary PCI Call to Balloon <150 Mins	81.8%	62.5%	95.5%	82.6%	73.3%	86.7%	94.1%	83.3%	95.7%	86.7%	96.3%	88.9%	86.4%	87.0%	75%	▼	18
Pressure Ulcers (Grade 3 and 4)		11	15	17	20	17	19	11	12	26	33	14	20	215	TBC		14

HISTORY / TREND OVERVIEW - Month 12 - 2010/11

PATIENT EXPERIENCE

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status	Page No
Inpatient Polling - treated with respect and dignity			95.3		95.8	94.4	94.9	95.5	94.6	96.2	95.2	95.2	95.0		95.0	▼	15
Inpatient Polling - rating the care you receive			85.8		86.6	83.8	85.9	82.5	85.5	85.8	86.7	86.1	83.8		91.0	▼	15
% Beds Providing Same Sex Accommodation -Wards	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%	◀▶	18
% Beds Providing Same Sex Accommodation - Intensivist	87.0%	87.0%	87.0%	87.0%	87.0%	87.0%	86.0%	86.0%	89.0%	93.0%	95.0%	100.0%	100.0%	100.0%	100%	◀▶	18
A&E Waits - Leics	97.5%	98.6%	97.6%	97.0%	98.4%	98.1%	97.3%	96.9%	94.9%	93.1%	92.9%	94.1%	93.8%	96.1%	95%	▼	16
A&E Waits - UHL (Type 1 and 2)	97.6%	97.8%	96.3%	95.3%	97.4%	96.7%	95.7%	94.8%	92.0%	89.2%	88.6%	91.1%	90.4%	93.8%	95%	▼	16
Unplanned 7 Day Re-attendance Rate (From Qtr 2 11/12)	5.9%	6.0%	6.1%	6.1%	5.9%	6.5%	6.2%	6.0%	5.5%	5.9%	6.0%	6.1%	5.8%	6.0%	<5%	▲	16
ED Time in Department - 95th centile Type 1+2 (From Qtr 2 11/12)	239	238	240	240	239	240	240	251	303	349	382	331	343	277	<240 Mins	▼	16
Left Without Being Seen % (From Qtr 2 11/12)	2.2%	2.3%	2.5%	2.5%	2.4%	2.1%	2.5%	2.2%	2.5%	2.7%	2.1%	2.2%	2.5%	2.4%	<5%	▼	16
Time to Initial Assessment - 95th centile (From Qtr 2 11/12)															<15 Mins		16
Time to Treatment - Median (From Qtr 2 11/12)	66	63	66	59	59	56	62	63	69	65	55	57	67	62	<60 mins		16
RTT 18 week - Admitted	95.3%	94.0%	94.3%	94.2%	94.2%	93.4%	91.5%	92.6%	92.1%	91.6%	91.5%	91.1%	91.8%	91.8%	90%	▲	17
RTT 18 week - Non admitted	97.8%	98.3%	98.3%	98.3%	98.0%	97.4%	96.4%	97.1%	98.3%	97.0%	96.9%	97.3%	97.1%	97.1%	95%	▼	17
RTT Admitted Median Wait (Weeks)		9.0	9.3	9.5	9.7	9.5	9.8	10.2	9.8	9.4	10.3	10.4	9.1	9.7	<=11.1	▲	17
RTT Admitted 95th Percentile (Weeks)		19.2	18.8	18.7	18.8	19.5	21.4	21.3	21.9	23.1	23.7	23.2	24.1	20.6	<=27.7	▼	17
RTT Non-Admitted Median Wait (Weeks)		5.6	6.0	5.7	6.1	6.2	6.9	6.7	6.2	6.1	7.0	5.5	5.4	6.2	<=6.6	▲	17
RTT Non-Admitted 95th Percentile (Weeks)		16.1	16.2	16.3	16.7	16.9	17.4	17.2	17.0	16.9	17.1	16.8	16.8	16.8	<=18.3	◀▶	17
RTT Incomplete Median Wait (Weeks)		5.3	5.2	5.6	5.8	6.1	6.1	6.0	6.1	6.8	6.7	5.2	5.5	5.5	<=7.2	▼	17
RTT Incomplete 95th Percentile (Weeks)		15.8	16.3	16.7	17.6	17.9	18.3	19.1	19.8	20.9	21.9	19.1	21.8	21.8	<=36.0	▼	17

HISTORY / TREND OVERVIEW - Month 12 - 2010/11

STAFF EXPERIENCE / WORKFORCE

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status	Page No
Headcount Reduction		138.4	54.4	82.6	49.7	70.4	20.9	23.7	4.6	0.7	-0.2	5.7	-13.0	437.8	433.4	▼	20
Sickness absence	3.7%	3.2%	3.2%	3.3%	3.4%	3.2%	3.5%	3.8%	3.7%	4.7%	4.2%	3.8%	4.0%	3.7%	3.0%	▼	20
Appraisals	84.9%	81.4%	73.2%	68.5%	72.7%	76.3%	81.4%	86.1%	90.1%	93.2%	91.3%	90.1%	90.3%	90.3%	100%	▲	20

VALUE FOR MONEY

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD
Income (£000's)										58,569	59,015	58,759	64,835	703,718
Operating Cost (£000's)										54,865	55,342	55,770	58,922	659,611
Surplus / Deficit (as EBIDTA) (£000's)										3,704	3,673	2,989	5,913	44,107
CIP (£000's)										3,048	3,073	2,798	3,270	30,975
Cash Flow (£000's)										9752	12,491	18,358	10,306	10,306
Financial Risk Rating										2	2	2	2	2

HR Pay Analysis

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD
	£	£	£	£	£	£	£	£	£	£	£	£	£	£
Locums (£ 000s)	409	445	303	314	391	369	404	365	401	279	421	443	335	4,066
Agency (£ 000s)	844	429	588	547	510	524	758	746	879	1,175	1,283	1,540	1,990	10,211
Bank (£ 000s)	520	464	468	453	516	481	518	560	523	514	540	478	504	5,501
Overtime (£ 000s)	370	319	246	138	224	212	248	254	276	300	304	378	447	3,098
Total Pay Bill (£ millions)	36.0	36.0	36.0	35.7	35.6	35.0	35.9	35.9	36.4	36.1	36.7	37.5	38.1	435.0

Average Cost per Bed Day

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
	£	£	£	£	£	£	£	£	£	£	£	£	£
Cost per Bed Day (£)		153	143	150	158	150	155	151	164	162	143	183	172

INFECTION PREVENTION

Performance Overview

MRSA – The single case in March brings the total for the year to 12. An appeal is to be forwarded relating to 2 recent cases due to the multi-pathology and the treatment of the patients concerned.
The number of C Difficile cases in March was 14 with a year end figure of 200.

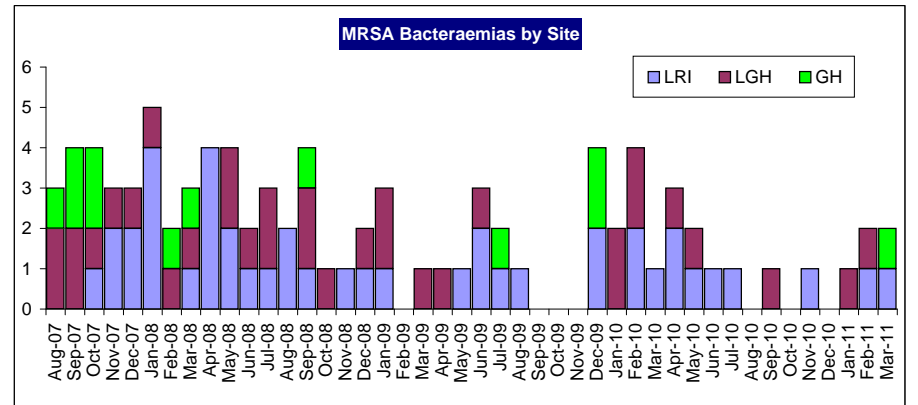
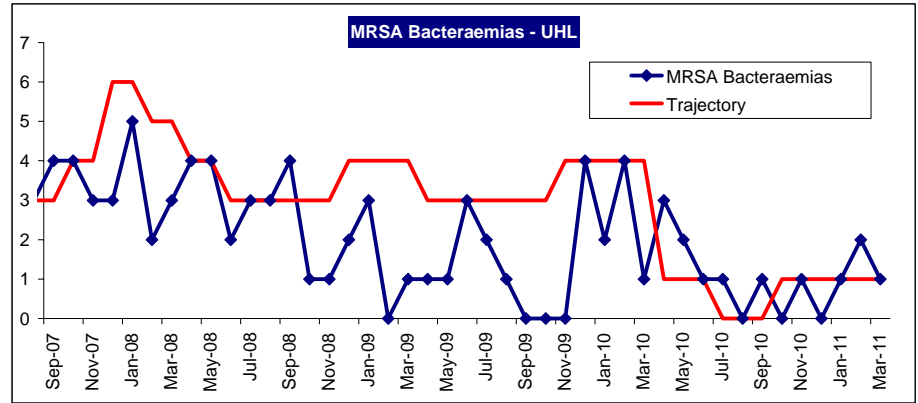
Key Actions

- All divisions continue to respond to the MRSA/CDIFF action plan and training is progressing as part of Chlorprep introduction.
- Mandatory reporting has now commenced in relation to MSSA with E-coli to follow in April 2011.
- Reporting for Non-elective MRSA screening has commenced and changes to testing methodology for C Difficile is now in place.
- Blood Culture 'grab bags' are to be introduced with immediate effect.

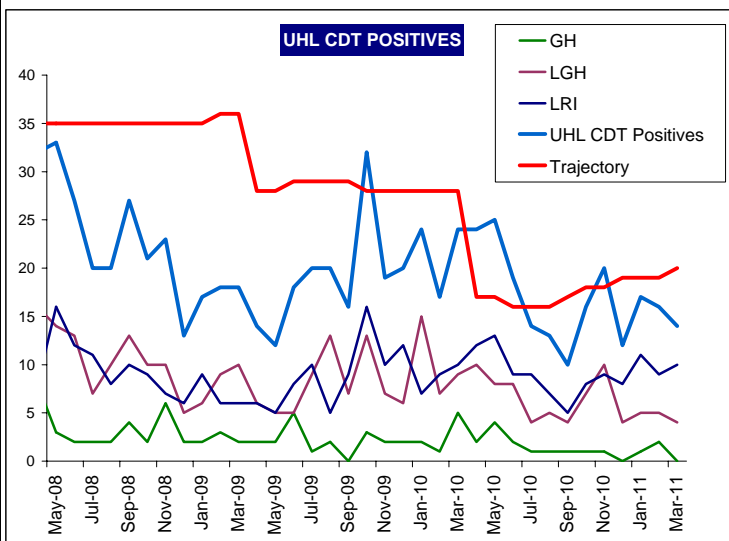
Year End

MRSA unachieved though with 8% reduction from 2009/10. CDiff achieved with 6% reduction from 2010/11 target.

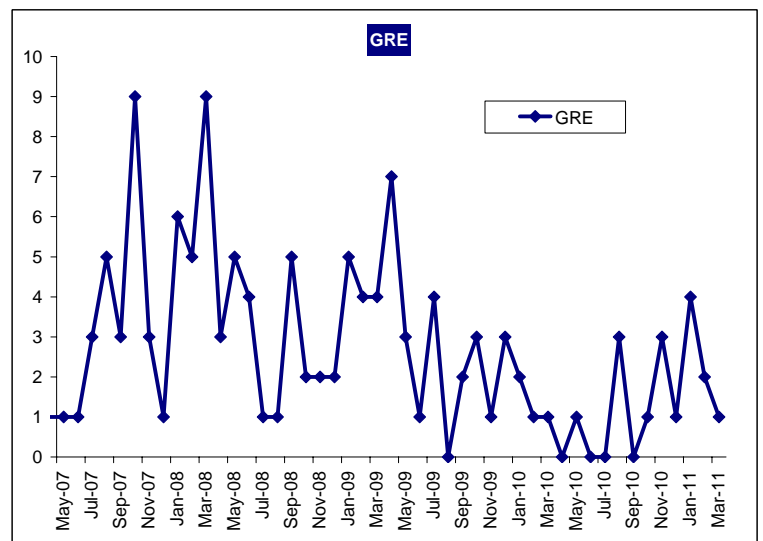
MRSA BACTERAEMIA



CLOSTRIDIUM DIFFICILE - UHL CDT POSITIVES



GLYCOPEPTIDE RESISTANT ENTEROCOCCUS (GRE)



TARGET / STANDARD

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status
MRSA	1	3	2	1	0	0	1	0	1	0	1	2	1	12	9	▲
C. Diff.	24	24	25	19	14	13	10	16	20	12	17	16	14	200	212	▲
Rate / 1000 Adm's	2.6	2.9	3.0	2.3	1.6	1.6	1.2	1.9	2.4	1.4	2.1	2.1	1.6	2.0		
GRE	1	0	1	0	0	3	0	1	3	1	3	2	1	15	TBC	
MSSA															TBC	
E-Coli															TBC	

MORTALITY

Performance Overview

CHKS RISK ADJUSTED MORTALITY

UHL's overall risk adjusted mortality index (RAMI) is 'lower than expected' for this financial year.

Although there was an increase in the Elective RAMI during Quarter 1, predominantly due to errors in activity coding, this has significantly improved since December.

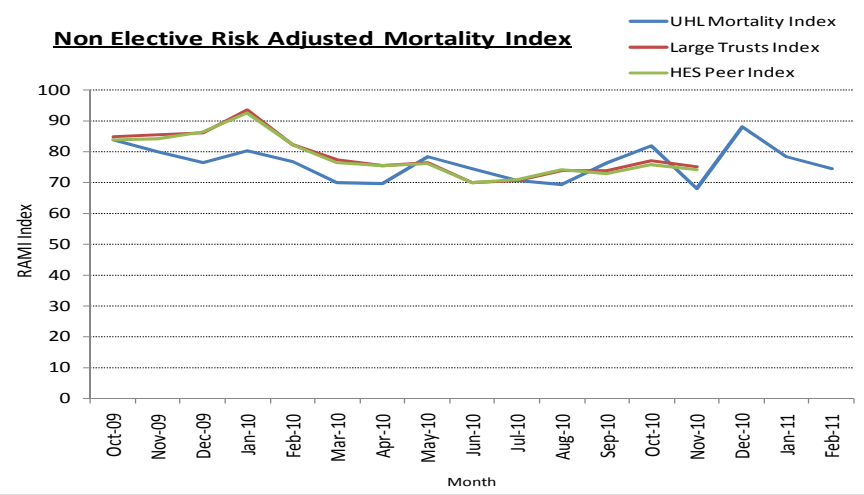
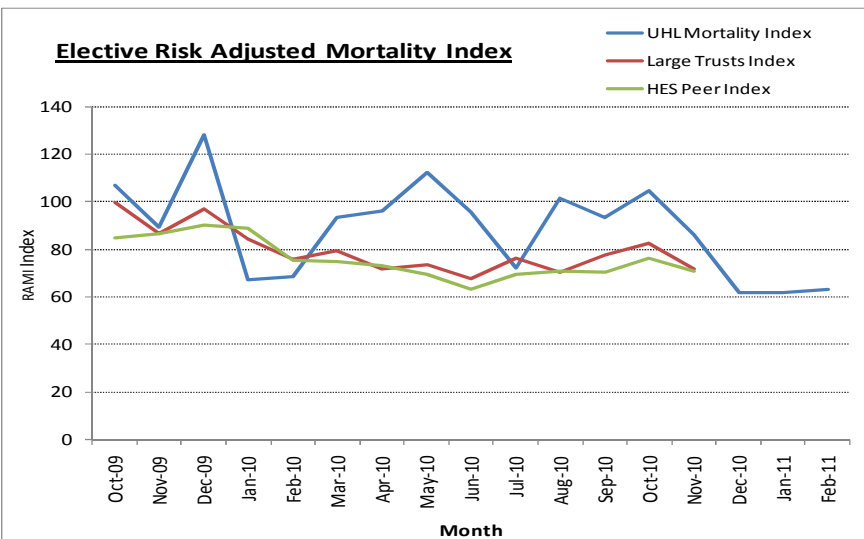
There was also an increase in the Trust's Non Elective RAMI during December and January. A summary of the review carried out by the Medicine and Respiratory CBU Medical Leads, was reported to the March Clinical Effectiveness Committee. Key findings were that an increased number of elderly, frail patients with several co-morbidities were admitted during those months, many with pneumonia which has a recognised high mortality rate.

The adjacent charts show UHL's risk adjusted mortality compared against 'large trusts' and also against all trusts in England. However, benchmarked data will always be 3 months in arrears.

Key Actions

The UHL Mortality & Morbidity Policy has been approved and is being implemented within each of the CBUs and Specialties. A process for providing a central report of all deaths and complications via Sharepoint is in development.

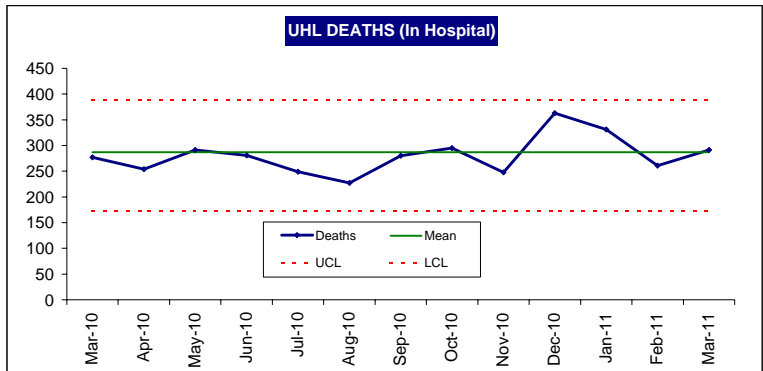
The national Summary Hospital Mortality Indicator (SHMI) has not yet been published and so UHL will continue to monitor its risk adjusted mortality using the CHKS tool.



CHKS - RISK ADJUSTED MORTALITY

	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	YTD
Total Spells (CHKS)	18,298	18,101	20,550	18,387	18,448	18,929	18,925	18,049	18,669	18,307	18,984	18,312	17,810	17,483	202,303
Observed Deaths	313	251	251	230	259	246	214	198	248	265	211	325	293	230	2719
RAMI	79.9	76.4	70.7	70.5	79.9	75.3	70.7	70.6	77.1	82.6	68.5	87.3	78.0	74.1	76.2

Clinical Business Unit	CURRENT MONTH		
	Spells	Deaths	%
Specialist Surgery	1925	1	0.1%
GI Medicine, Surgery and Urology	3636	27	0.7%
Cancer, Haematology and Oncology	1880	13	0.7%
Musculo-Skeletal	985	7	0.7%
Medicine	2540	129	5.1%
Respiratory	1097	43	3.9%
Cardiac, Renal & Critical Care	1397	53	3.8%
Emergency Department	679	5	0.7%
Women's	4383	11	0.3%
Children's	1820	1	0.1%
Anaesthesia and Theatres	351	1	0.3%
Therapy, Phlebotomy and Central Outpatients	1		
Imaging	12		
Sum:	20706	291	1.4%



UHL CRUDE DATA TOTAL SPELLS

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target
UHL Crude Data - TOTAL Spells	21391	19173	19277	19784	19860	18974	19627	19254	19894	19261	18665	18295	20706	232770	TBC
UHL Crude Data - TOTAL Deaths	277	254	291	281	249	227	280	295	248	363	331	261	291	3371	TBC
Percent	1.3%	1.3%	1.5%	1.4%	1.3%	1.2%	1.4%	1.5%	1.2%	1.9%	1.8%	1.4%	1.4%	1.4%	TBC

UHL CRUDE DATA ELECTIVE SPELLS

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target
UHL Crude Data - ELECTIVE Spells	9500	8181	8214	8792	8678	8178	8602	8449	8794	7744	7784	8069	9390	100875	TBC
UHL Crude Data - ELECTIVE Deaths	11	13	12	10	10	8	10	11	9	6	6	6	9	110	TBC
Percent	0.1%	0.2%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	TBC

UHL CRUDE DATA NON ELECTIVE SPELLS

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target
UHL Crude Data - NON ELECTIVE Spells	11891	10992	11063	10992	11182	10796	11025	10805	11100	11517	10881	10226	11316	131895	TBC
UHL Crude Data - NON ELECTIVE Deaths	266	241	279	271	239	219	270	284	239	357	325	255	282	3261	TBC
Percent	2.2%	2.2%	2.5%	2.5%	2.1%	2.0%	2.4%	2.6%	2.2%	3.1%	3.0%	2.5%	2.5%	2.5%	TBC

EMERGENCY READMISSIONS

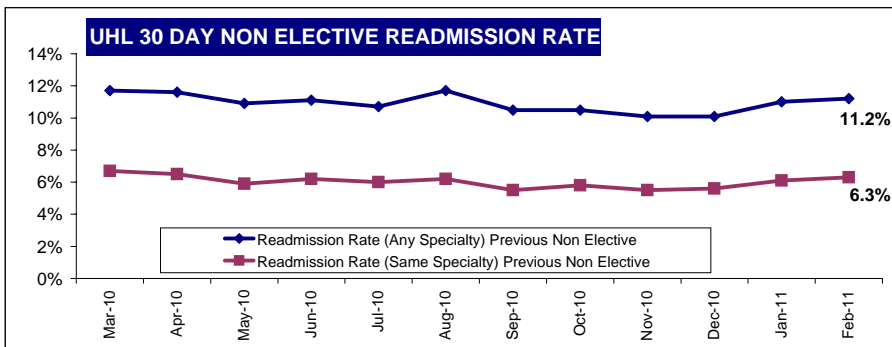
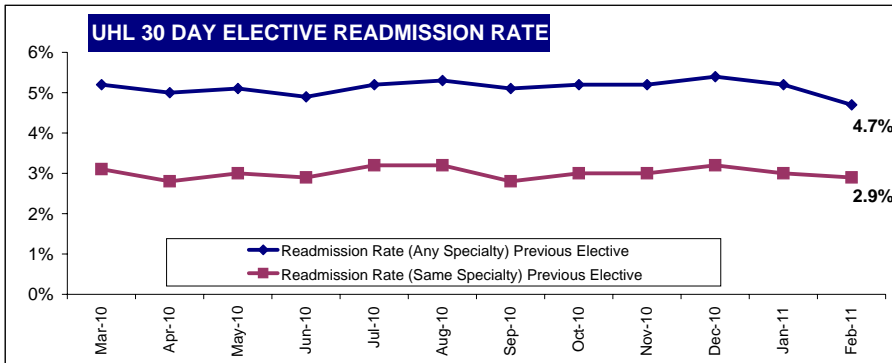
Performance Overview

UHL will not receive payment for any emergency readmissions within 30 days of discharge from an elective admission (with some exclusions) and the trust is therefore committed to eliminating all such readmissions.

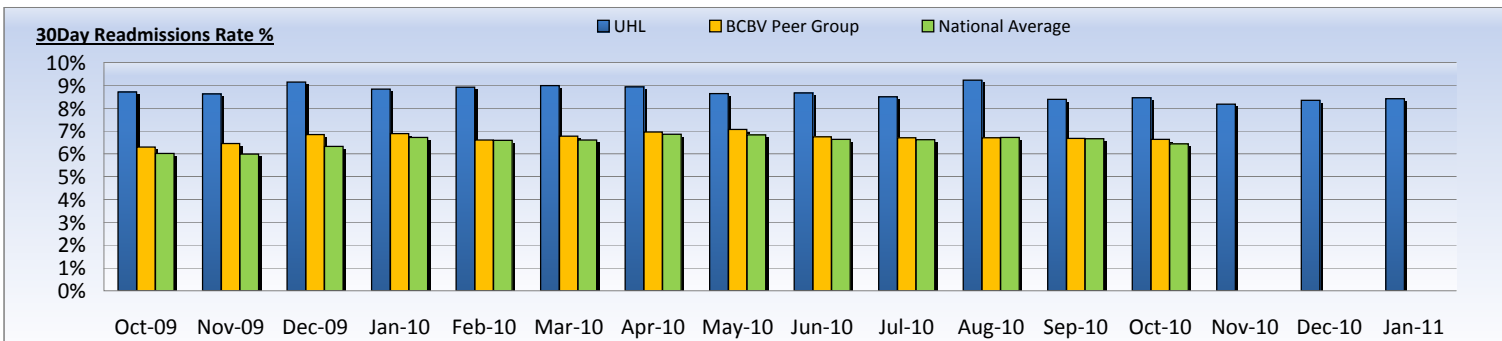
There will also be a financial penalty for emergency readmissions within 30 days of discharge from an emergency admission in that UHL is committed to delivering a 25% reduction in readmission rates from 2010/11.

Key Actions

1. CBUs are completing a review of the patient pathways and re-emphasising the importance of communication at discharge, ensuring all patients are given full explanation at the time of discharge.
2. Clinically appropriate Surgical and Medical bed bureau patients are now offered urgent outpatient appointments resulting in reduced admissions.
3. Clinical appropriate bed bureau patients are triaged, prior to admission
4. Closing date passed for SRO Readmissions Project Officer and interviews being scheduled.



CHKS Benchmarking - All 30 Day Emergency Readmission Rates - UHL, Peer Group of Similar Trusts and the National Average



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

ALL READMISSIONS													YTD	Target
	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11		
Discharges	21,391	19,173	19,277	19,784	19,860	18,974	19,627	19,254	19,894	19,261	18,665	18,295	212,064	TBC
30 Day Emerg. Readmissions (Any Spec)	1890	1680	1,623	1,655	1,648	1,702	1,594	1,574	1,576	1,576	1,599	1,528	17,755	TBC
Readmission Rate (Any Specialty)	8.8%	8.8%	8.4%	8.4%	8.3%	9.0%	8.1%	8.2%	7.9%	8.2%	8.6%	8.4%	8.4%	TBC
30 Day Emerg. Readmissions (Same Spec)	1081	948	903	931	944	927	850	876	873	901	897	880	9,930	TBC
Readmission Rate (Same Specialty)	5.1%	4.9%	4.7%	4.7%	4.8%	4.9%	4.3%	4.5%	4.4%	4.7%	4.8%	4.8%	4.7%	TBC
Redmissions - Previous Spell = Elective													YTD	Target
	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11		
Discharges	9,500	8,181	8,214	8,792	8,678	8,178	8,602	8,449	8,794	7,744	7,784	8,069	91,485	TBC
30 Day Emerg. Readmissions (Any Spec) Previous Elective	496	408	416	433	455	434	438	436	453	415	407	382	4,677	TBC
Readmission Rate (Any Specialty) Previous Elective	5.2%	5.0%	5.1%	4.9%	5.2%	5.3%	5.1%	5.2%	5.2%	5.4%	5.2%	4.7%	5.1%	TBC
30 Day Emerg. Readmissions (Same Spec) Previous Elective	290	229	247	252	277	261	244	250	262	251	237	231	2,741	TBC
Readmission Rate (Same Specialty) Previous Elective	3.1%	2.8%	3.0%	2.9%	3.2%	3.2%	2.8%	3.0%	3.0%	3.2%	3.0%	2.9%	3.0%	TBC
Redmissions - Previous Spell = Non Elective													YTD	Target
	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11		
Discharges	11,891	10,992	11,063	10,992	11,182	10,796	11,025	10,805	11,100	11,517	10,881	10,226	120,579	TBC
30 Day Emerg. Readmissions (Any Spec) Previous Non Elective	1,394	1,272	1,207	1,222	1,193	1,268	1,156	1,138	1,123	1,161	1,192	1,146	13,078	TBC
Readmission Rate (Any Specialty) Previous Non Elective	11.7%	11.6%	10.9%	11.1%	10.7%	11.7%	10.5%	10.5%	10.1%	10.1%	11.0%	11.2%	10.8%	TBC
30 Day Emerg. Readmissions (Same Spec) Previous Non Elective	791	719	656	679	667	666	606	626	611	650	660	649	7,189	TBC
Readmission Rate (Same Specialty) Previous Non Elective	6.7%	6.5%	5.9%	6.2%	6.0%	6.2%	5.5%	5.8%	5.5%	5.6%	6.1%	6.3%	6.0%	TBC

FALLS

Performance Overview

Over the last 12 months the number of patient falls has shown a decline. There has been further improvement this month with a further reduction in falls.

A 5% reduction in falls on 2010/11 outturn has been set for 2011/12

Key Actions

The UHL Falls Risk Assessment document and associated care plans are now in place.

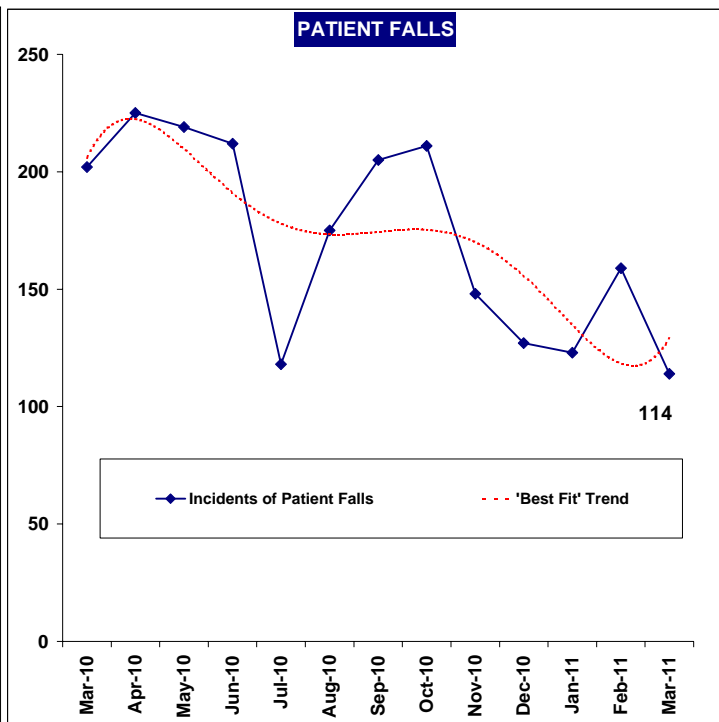
Nursing Metrics now includes falls assessment.

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

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

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

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



TARGET / STANDARD

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target
Incidents of Patient Falls	202	225	219	212	118	175	205	211	148	127	123	159	114	2036	2569
In Hospital Falls resulting in Hip Fracture		0	3	0	0	0	1	0	0	3	2	2	2	13	

PRESSURE ULCERS (Grade 3 and 4)

Performance Overview

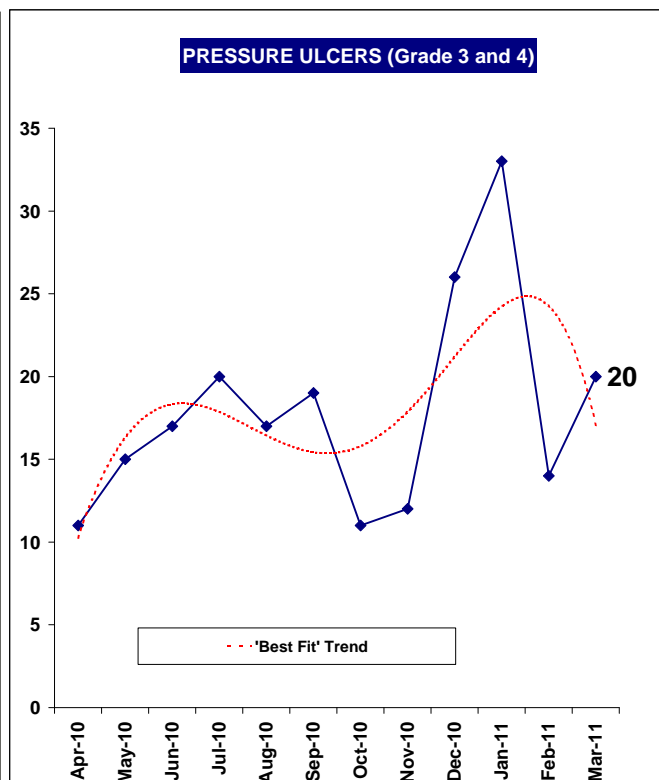
UHL has seen a decrease in hospital acquired pressure ulcers grade 3&4 over quarter 3 and 4 when compared with the same quarters in year 2009-10

A 5% reduction in Press Ulcers (Grade 3 and 4) on 2010/11 outturn has been set for 2011/12.

Key Actions

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

- Confirmation of the themes of all grade 3 and 4 HAPUs that have occurred on each ward from April 2010 - March 2011
 - Seek assurance from ward managers that all action plans have been fully implemented with evidence of sustained improvements
 - Agree thresholds and timescales for reductions of grade 3 and 4 HAPUs for every ward for 2011/12 (in line with the CQUIN)
- Progress with improvement thresholds will be monitored on a monthly basis by the ADNS and Head of Nursing



TARGET / STANDARD

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target
Pressure Ulcers (Grade 3 and 4)		11	15	17	20	17	19	11	12	26	33	14	20	215	TBC

PATIENT EXPERIENCE

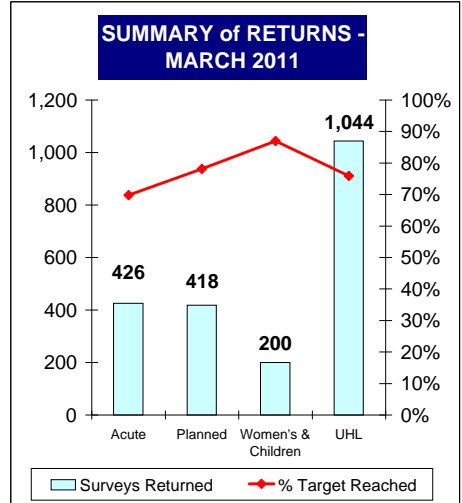
Performance Overview

The "Patient Experience Survey" has been running continuously now for 9 months. Overall the number of survey returns has increased, with Acute and Planned Divisions maintaining survey returns. Women's and Children have doubled their return rate, a great achievement, largely due to the Children's areas now being included in their results. Divisions continue to emphasise the importance of gathering surveys in each CBU, this will be supported by the Patient Experience Team.

Respect and Dignity scores have shown slight fluctuations from green to amber, whilst Women's has moved to green the overall division score is reduced by Children's, having reviewed the surveys there is a misconception amongst children of same sex accommodation, for this reason next month this question will be removed for Children's. The introduction of hourly nursing rounds to be rolled out across the Acute division will improve dignity and respect for all patients especially our elderly frail patients. Musculoskeletal have moved from amber to green and the Emergency Department score has improved from red to green a fantastic achievement for all the areas. All areas continue to be engaged in discussions about future patient experience workstreams. The Divisional patient experience projects are now in place and focus directly on areas that affect the answer to the overall care question.

The Respiratory CBU survey forms are not included in this months report due to a delay in the forms reaching the analysis process, these will be added to next months report. This has impacted on the Acute Division overall care score now red and the overall UHL score, also turning red.

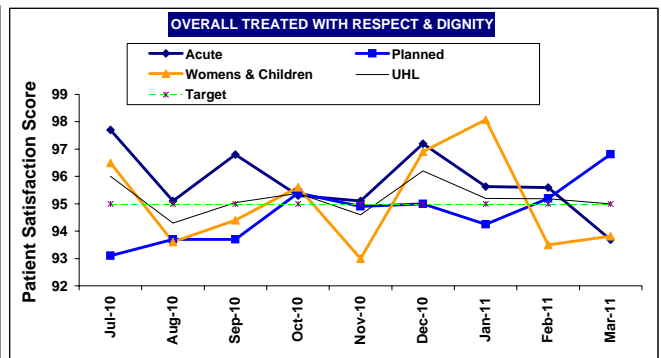
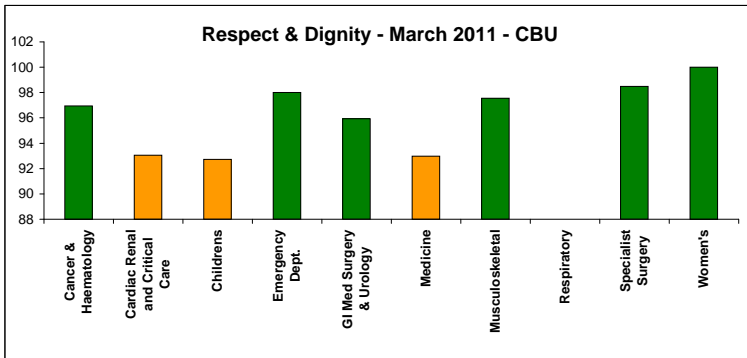
The results continue to be accessible for frontline staff via a one click link on INsite. The site has shown a dramatic rise in staff accessing this site with up to 800 staff now viewing their results every month. (NB The targets/thresholds for the results have been set by the NPS national results with adjustments made to align this to UHL results as best as possible)



TARGET / STANDARD

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

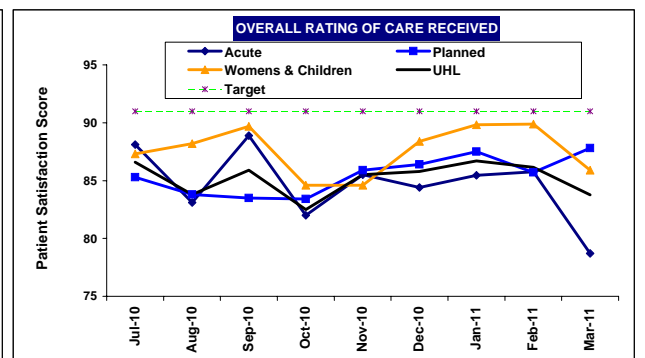
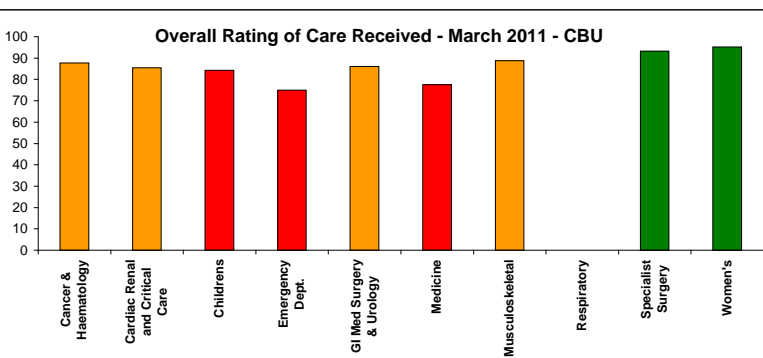
Division	Sep-09	May-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Acute	93.9	95.4	97.7	95.1	96.8	95.3	95.1	97.2	95.6	95.6	93.7
Planned	94.3	95.0	93.1	93.7	93.7	95.4	94.9	95.0	94.3	95.2	96.8
Womens & Children	94.5	96.1	96.5	93.6	94.4	95.6	93.0	96.9	98.1	93.5	93.8
UHL	94.1	95.4	96.0	94.3	95.0	95.4	94.6	96.2	95.2	95.2	95.0



TARGET / STANDARD

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

Division	Sep-09	May-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Acute	84.2	85.6	88.1	83.1	88.9	82.0	85.5	84.4	85.5	85.8	78.7
Planned	85.4	84.8	85.3	83.8	83.5	83.4	85.9	86.4	87.5	85.7	87.8
Womens & Children	89.0	89.5	87.3	88.2	89.7	84.6	84.6	88.4	89.8	89.9	85.9
UHL	85.8	85.6	87.0	84.0	86.5	82.9	85.5	85.8	86.7	86.1	83.8



EMERGENCY DEPARTMENT

Performance Overview

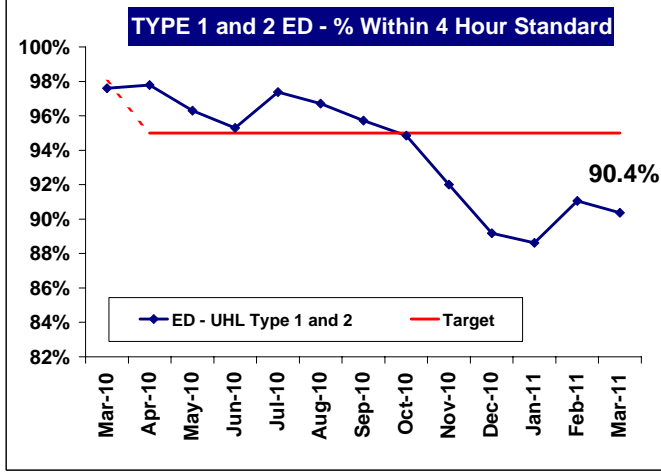
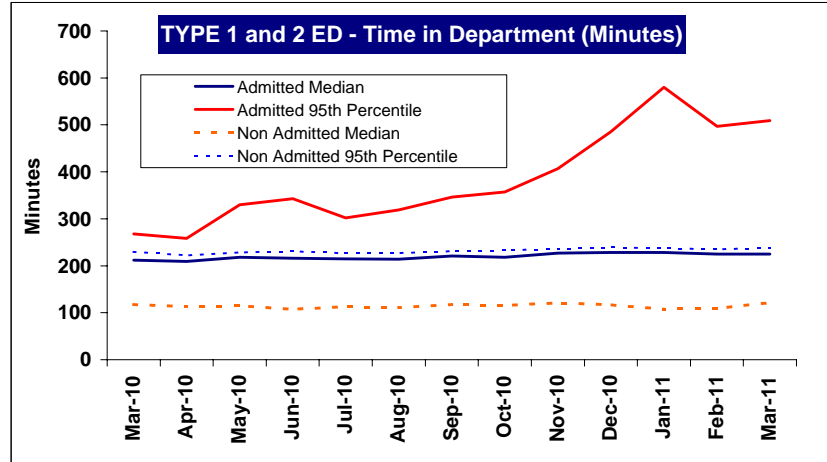
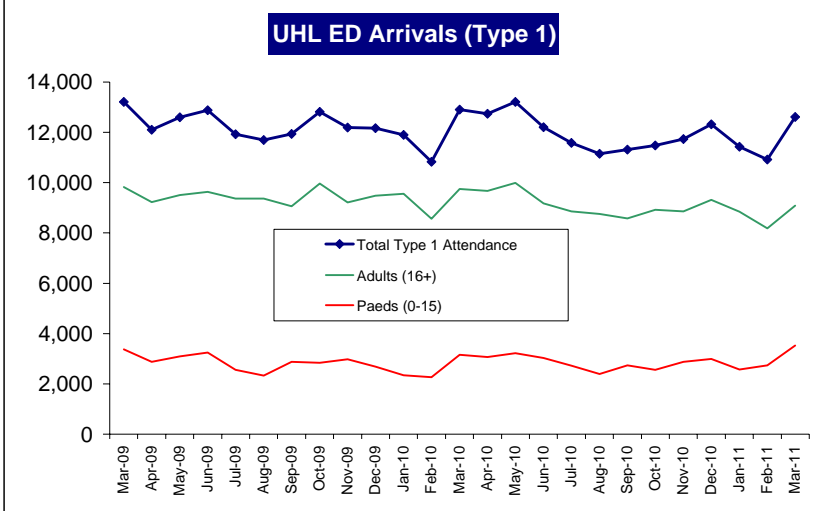
Performance for ED and Eye Casualty for March is 90.4%, with the year end figure for ED and Eye Casualty at 93.8%. The end of year performance for LLR is 96.1%.

New A&E clinical quality indicators are being introduced in Quarter 2 2011/12 to replace the 4 hour A&E operational standard. The purpose of the new set of indicators is to provide a balanced and comprehensive view of the quality of care, including outcomes, clinical effectiveness, safety and experience, as well as timeliness, and to remove the isolated focus on faster care. The indicators are:-

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

Key Actions

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



Total Time in the Department

March 2011 - ED Type 1 and 2

	Admitted	Not Admitted	Total
0-2 Hours	374	4843	5217
3-4 Hours	2730	4639	7369
5-6 Hours	489	261	750
7-8 Hours	254	79	333
9-10 Hours	128	8	136
11-12 Hours	68	11	79
12 Hours+	46	12	58
Sum:	4089	9853	13942

4 HOUR STANDARD

	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status
ED - Leics	97.5%	98.6%	97.6%	97.0%	98.4%	98.1%	97.3%	96.9%	94.9%	93.1%	92.9%	94.1%	93.8%	96.1%	95.0%	▼
ED - UHL Type 1 and 2	97.6%	97.8%	96.3%	95.3%	97.4%	96.7%	95.7%	94.8%	92.0%	89.2%	88.6%	91.1%	90.4%	93.8%	95.0%	▼
ED Waits - Type 1	97.4%	97.6%	96.0%	94.8%	97.1%	96.3%	95.3%	94.3%	91.1%	88.2%	87.2%	90.0%	89.3%	93.1%	95.0%	▼

A&E Clinical Quality Indicators (ED and Eye Casualty) - 95th Percentile commences Qtr 1 11/12. All other indicators commence Qtr 2 11/12.

Headline Measures	Score	Qtr1	Qtr2	Qtr3	Qtr4	Target
95th Percentile overall time in A&E Dept	0.5	239	240	306	351	<=4hrs (240 mins)
Unplanned reattendance at A&E with 7 days	0.5	6.1%	6.2%	5.8%	5.9%	>5%
95th Percentile to initial assessment (ambulance arrivals)	0.5	56	41	52	61	>15mins
Time for arrival to treatment - median waiting time	1	63	59	65	59	>60mins
Left without being seen	1	2.4%	2.3%	2.5%	2.3%	>5%

18 WEEK REFERRAL TO TREATMENT

Performance Overview

In March 91.8% was achieved for admitted patients (target of 90%) and 97.1% (target of 95%) for non-admitted patients.

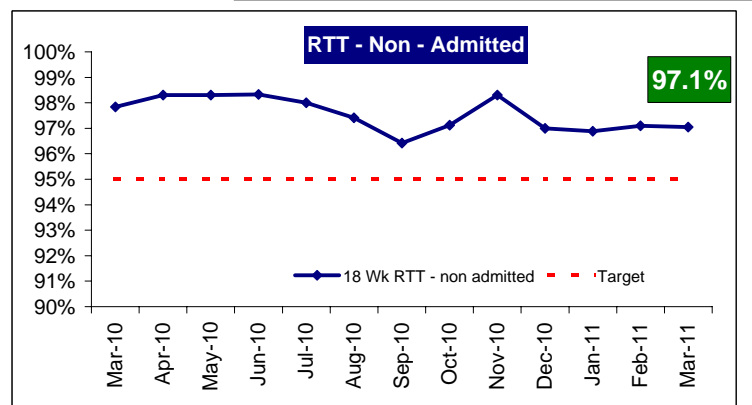
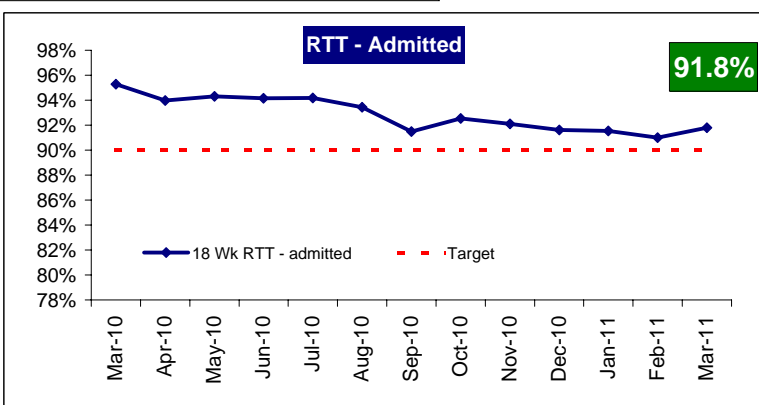
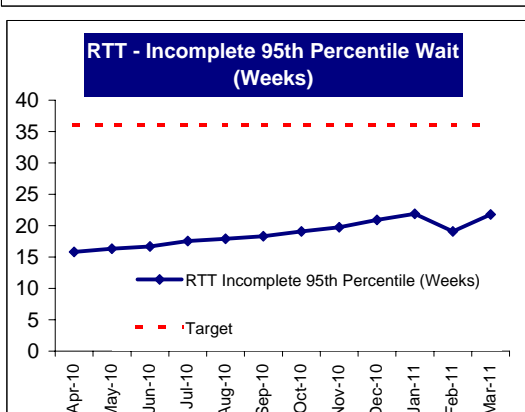
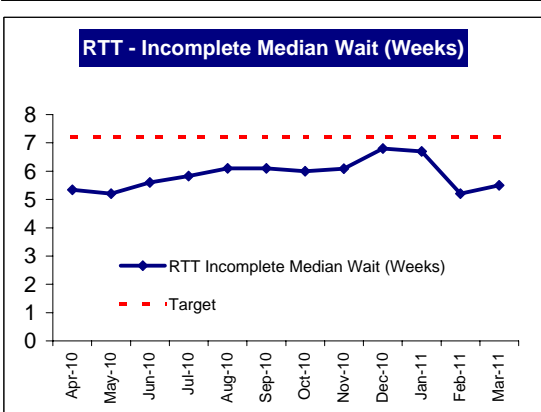
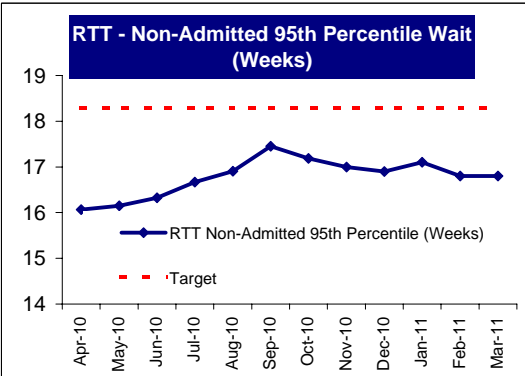
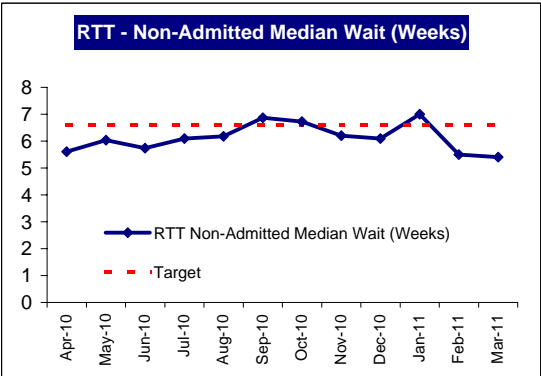
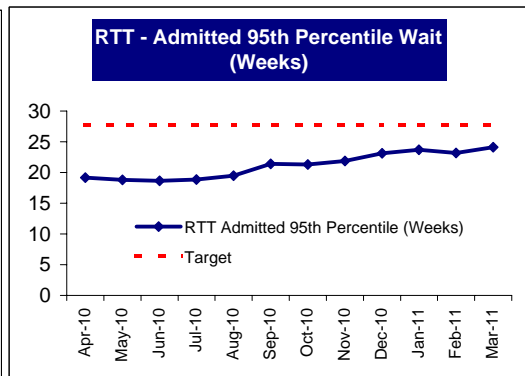
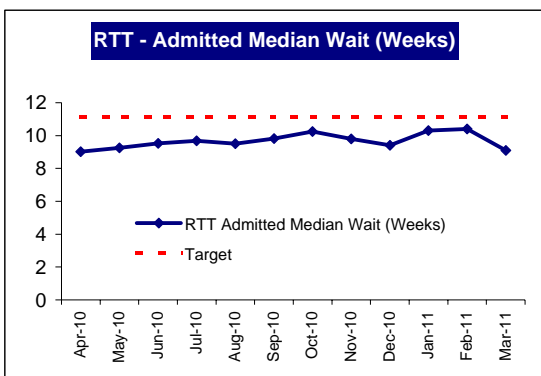
The Department of Health have introduced revised statistical measures. The median and 95th percentile RTT waiting times are being published every month to enable a fuller package of measures for the NHS, patients and the public to monitor waiting times for NHS treatment.

Early application shows achievement of the new measures in 2010/11 and Divisional plans have been implemented to maintain this position.

From April 2011 the admitted 95th percentile threshold reduces from less than or equal to 27.7 weeks to less than 23 weeks.

Key Actions

Updated 18 week action plans have been implemented by Planned Care Division to improve the activity position in Qtr 4 in a number of specialties to respond to a number of competing pressures. These are being reviewed in line with the revised statistical measures and thresholds to ensure performance is achieved.



TARGET / STANDARD

RTT	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target	Status
18 Wk - admitted (%)	95.29	94.0	94.3	94.2	94.2	93.4	91.5	92.6	92.1	91.6	91.5	91.0	91.8	91.8	90.0%	▲
18 Wk - non admitted (%)	97.8	98.3	98.3	98.3	98.0	97.4	96.4	97.1	98.3	97.0	96.9	97.1	97.1	97.1	95.0%	▲
RTT Admitted Median Wait (Weeks)		9.7	9.5	9.8	10.2	9.8	9.4	10.3	10.4	9.1	9.7	11.1	9.1	9.7	<=11.1	▲
RTT Admitted 95th Percentile (Weeks)		18.8	19.5	21.4	21.3	21.9	23.1	23.7	23.2	24.1	20.6	27.7	24.1	20.6	<=27.7	▲
RTT Non-Admitted Median Wait (Weeks)		6.1	6.2	6.9	6.7	6.2	6.1	7.0	5.5	5.4	6.2	6.6	5.4	6.2	<=6.6	▲
RTT Non-Admitted 95th Percentile (Weeks)		16.7	16.9	17.4	17.2	17.0	16.9	17.1	16.8	16.8	16.8	18.3	16.8	16.8	<=18.3	▲
RTT Incomplete Median Wait (Weeks)		5.8	6.1	6.1	6.0	6.1	6.8	6.7	5.2	5.5	5.5	7.2	5.5	5.5	<=7.2	▲
RTT Incomplete 95th Percentile (Weeks)		17.6	17.9	18.3	19.1	19.8	20.9	21.9	19.1	21.8	21.8	36.0	21.8	21.8	<=36.0	▲

PRIMARY PCI

Performance Overview

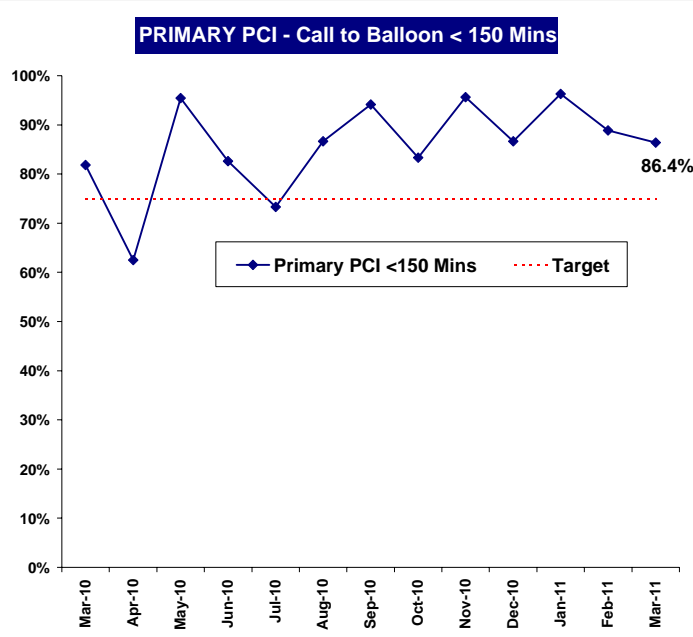
Two key standards are presented by the Operating Framework for 2011/2012:
 1. The percentage of eligible patients with acute myocardial infarction who receive Primary PCI within 150 minutes of calling professional help
 2. The number of patients who receive thrombolysis where this is deemed to be the most effective treatment

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

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

Key Actions

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



Primary PCI <150 Mins	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD	Target
	81.8%	62.5%	95.5%	82.6%	73.3%	86.7%	94.1%	83.3%	95.7%	86.7%	96.3%	88.9%	86.4%	87.0%	75.0%

SAME SEX ACCOMMODATION

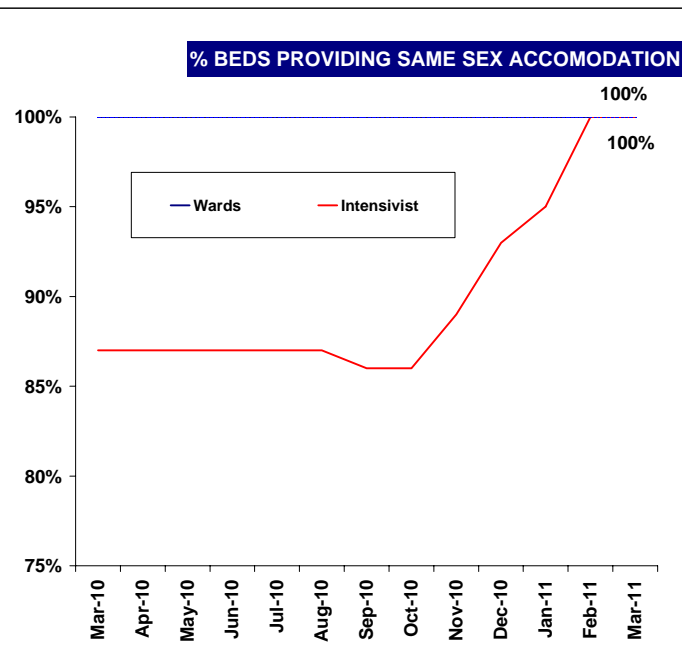
Performance Overview

UHL wards and intensivist areas now offer Same Sex Accommodation (SSA) in line with the UHL SSA Matrix guidance. This guidance has been jointly agreed with our commissioners.
 During March 2011 UHL declared full SSA compliance as part of the annual declaration.

A financial penalty will be applied from April 2011 for any clinically unjustified breaches of the SSA guidance.
 The Brain Injury Unit, LGH, will continue to report clinically justified breaches locally and will remain on long term Divisional plans.

Key Actions

March 2011 UHL national breach data declared on Unify reported zero unjustified SSA breaches. This is a fantastic achievement for all the UHL teams who have worked hard to deliver this important patient agenda.
 All areas now have access to the SSA Matrix for future guidance.
 The SSA Matrix is an integral part of the UHL bed management policy.
 Facilities for patients will be monitored by quarterly CBU visits, as part of the SSA estates plan agreed with our commissioners.



TARGET / STANDARD

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

CANCER TREATMENT

Performance Overview

All cancer targets are delivering against performance thresholds in February with the exception of the 62 day screening where a small number of patients impacted on delivery.

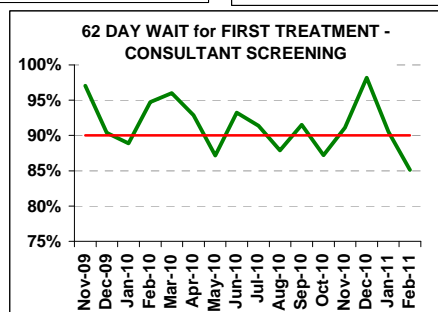
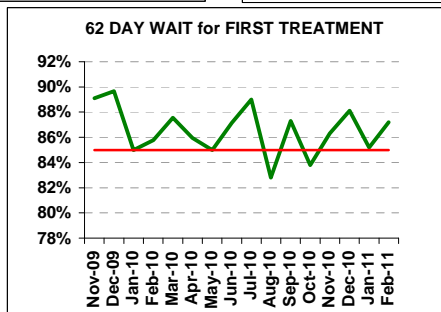
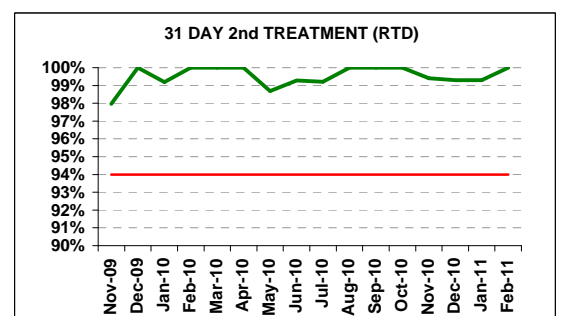
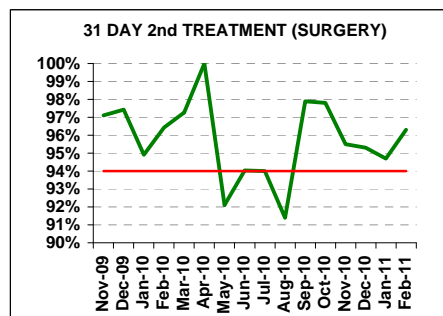
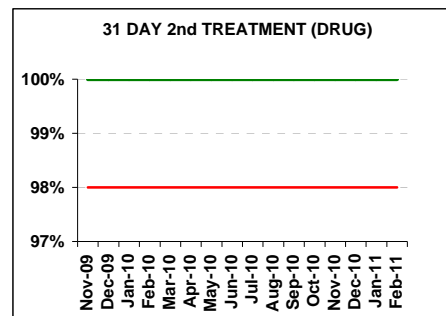
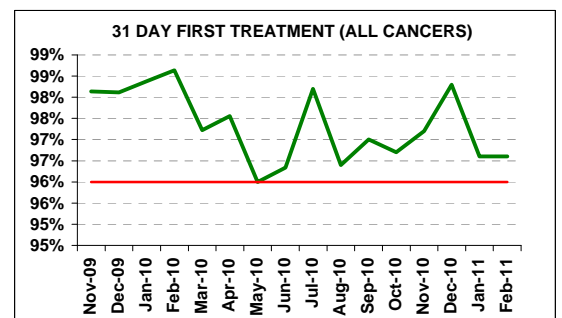
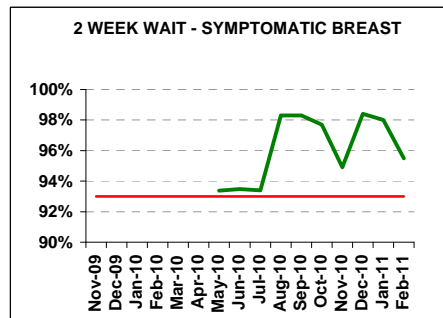
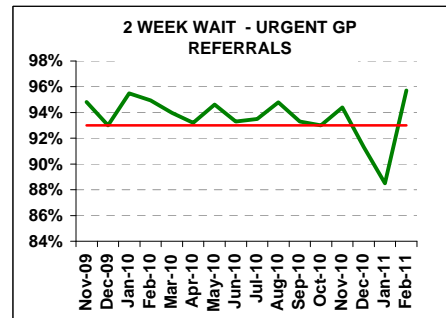
Key Actions

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

Forecast

All cancer targets will be delivered for March, Qtr 4 and Year to Date.

Commitment	Threshold	Qtr1 2010	Qtr2 2010	Qtr 3 2010	Jan & Feb 2011
Maximum two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	93.0%	93.7%	93.8%	93.0%	92.3%
Two week wait for symptomatic breast patients (Cancer not initially suspected)	93.0%	94.1%	96.9%	96.8%	96.4%
31-day (Diagnosis To Treatment) wait for first treatment: all cancers	96.0%	96.6%	97.2%	97.4%	96.6%
31-day wait for second or subsequent treatment: anti cancer drug treatments	98.0%	100%	100%	100%	100%
31-day wait for second or subsequent treatment: surgery	94.0%	94.1%	94.5%	96.2%	95.5%
31-day wait for second or subsequent treatment: radiotherapy treatments	94.0%	99.3%	99.8%	99.5%	99.7%
62-day (urgent GP referral to treatment) wait for first treatment: all cancers	85.0%	86.1%	86.3%	86.6%	86.1%
62-day wait for first treatment from consultant screening service referral: all cancers	90.0%	91.6%	90.3%	92.8%	87.6%
62-day wait for first treatment from consultant upgrade	100%	---	100%	100%	100%



STAFF EXPERIENCE / WORKFORCE

Performance Overview

Appraisals

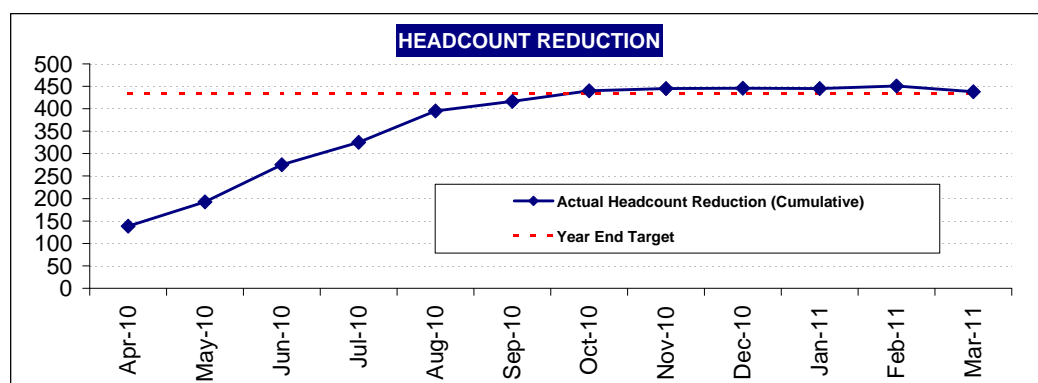
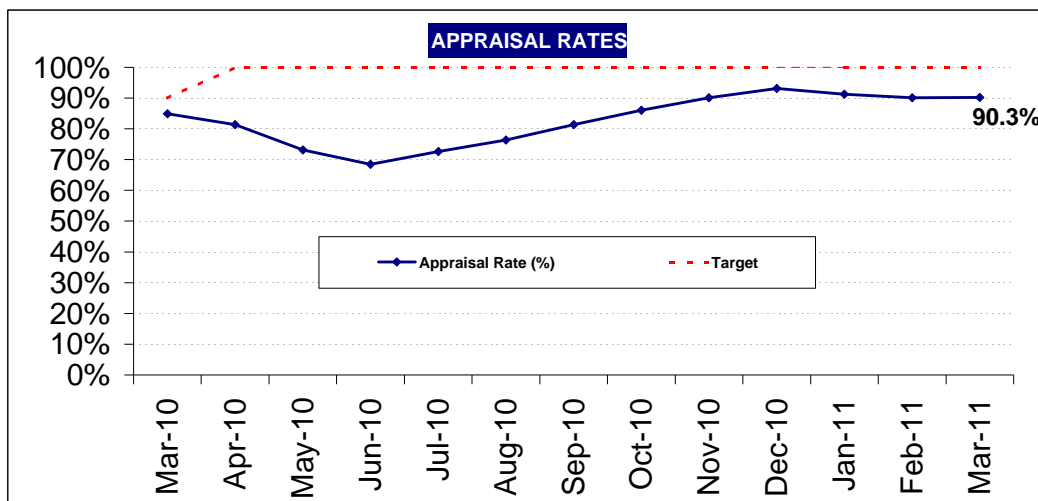
Whilst appraisal rates have increased significantly over the last 6 months from 68.5% in June 2010 the current overall rate is still almost 10% under the Trust target of 100%.

Sickness

The current level of sickness at the date of reporting is 4.0% although the figure may actually reduce as earlier reporting appears to be adding about 0.4 % to the rate.

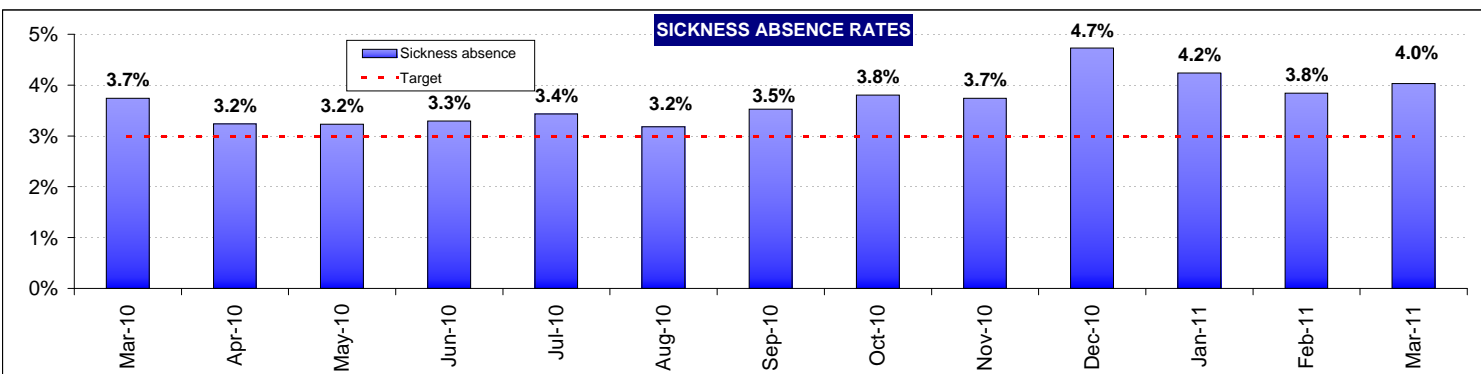
Headcount Reduction

At year end, headcount reduction delivered 437.8 against a plan of 433.4 WTE delivering a 4.4 WTE surplus.



Headcount Reduction

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	YTD
Planned	150.0	12.7	30.0	130.1	5.9	12.5	81.0	6.7	0.0	4.6	-0.2	0.0	433.4
Actual	138.4	54.4	82.6	49.7	70.4	20.9	23.7	4.6	0.7	-0.2	5.7	-13.0	437.8

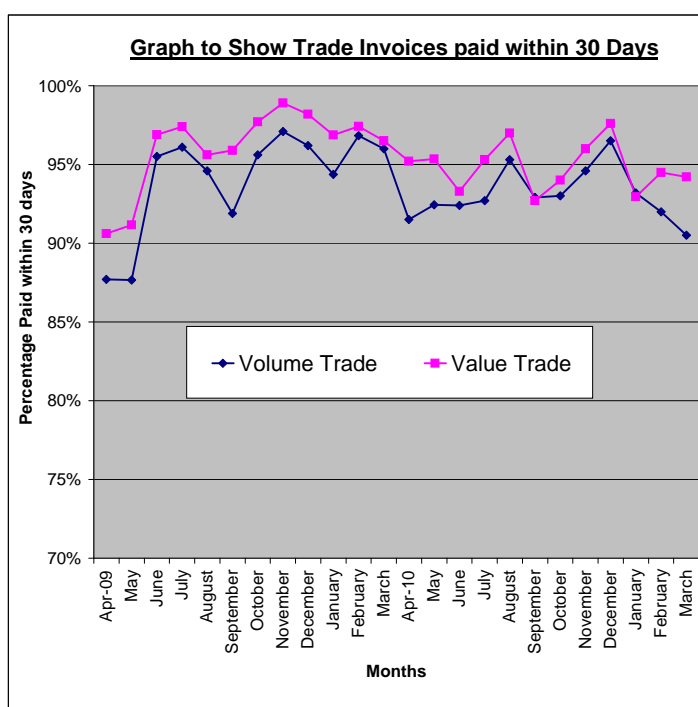


	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Mar-11
Appraisals	84.9%	81.4%	73.2%	68.5%	72.7%	76.3%	81.4%	86.1%	90.1%	93.2%	91.3%	90.3%

	YTD	Target	Status
Appraisals	90.3%	100%	▲

VALUE FOR MONEY - EXECUTIVE SUMMARY

Issues	Comments
Actual Income & Expenditure Year to Date	Cumulative income at Month 12 was £696.3 million (£4 million or 0.6% favourable to Plan). Cumulative expenditure (prior to impairment) was £695.3 million (£4 million adverse to plan). The actual net surplus of £1 million is in line with the planned £1 million year end surplus. This position reflects agreed annual accounts changes for research income and expenditure.
Actual Income & Expenditure Year End Forecast	The Trust has, subject to audit, delivered a year end £1.01 million surplus (prior to impairment).
Activity/Income	An over performance of £7.1 million is reported on patient care income against plan at the end of the 2010/11 financial year.
BPPC	The Trust achieved an overall 30 day payment performance of 94% for value and 91% for volume for trade creditors in March 2011. The cumulative position is 95% for value and 93% for volume.
Cost Improvement Programme	At Month 12 Divisions have reported £31 million of savings.
Balance Sheet	The Trusts balance sheet reflects the year end cash balance of £10.3 million
Cash Flow	The Trust has met its external financing limit, and achieved a year end cash balance of £10.3 million against a plan of £10.25 million.
Capital	The Trust has delivered the Capital Resource Limit, with an under spend of £1.3 million.
Risks	Agreement has been reached with LLR commissioners on 2010/11 patient care income. This agreement supported delivery of the £1 million year end surplus position.



Financial Metrics	Weighting	March	Year to Date	Score
		Result	Result	
EBITDA achieved (% of plan)	10.0%	128.2%	100.6%	5
EBITDA margin (%)	25.0%	9.1%	6.3%	3
Return on assets (%)	20.0%	0.8%	3.6%	3
I&E surplus (%)	20.0%	3.5%	0.1%	2
Liquidity ratio (days)	25.0%	10	11	2
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 31 March

	2010/11 Annual Plan £000	March			April - March 2011			Commentary
		Plan	Actual	Surplus / (Deficit)	Plan	Actual	Surplus / (Deficit)	
		£ 000	£ 000	£ 000	£ 000	£ 000	£ 000	
Service Income								<p>The overall cumulative Trust position (prior to impairment) is a year end surplus of £1.01 million, compared to a planned £1 million surplus, and reflects a £2.2 million surplus position in March (£1.2 million favourable variance to plan).</p> <p>This cumulative position reflects over performance on income of £4 million, offset by an overspend on expenditure of £4 million.</p>
NHS Patient Related	593,213	50,715	55,095	4,380	593,213	600,287	7,074	
Non NHS Patient Care	5,460	470	831	361	5,460	5,848	388	
Teaching, Research & Development	73,025	5,931	6,409	478	73,025	67,686	(5,339)	
Total Service Income	671,699	57,117	62,335	5,219	671,699	673,821	2,122	
Other operating Income	20,581	2,103	2,500	397	20,581	22,437	1,856	
Total Income	692,280	59,220	64,835	5,616	692,280	696,258	3,978	
Operating Expenditure								
Pay	430,588	36,469	38,147	(1,678)	430,588	435,040	(4,452)	
Non Pay	217,556	18,115	20,770	(2,655)	217,556	217,314	242	
Central Funds	-	-	-	-	-	-	-	
Provision for Liabilities & Charges	273	23	5	18	273	(204)	477	
Total Operating Expenditure	648,417	54,607	58,922	(4,315)	648,417	652,151	(3,734)	
EBITDA	43,863	4,613	5,914	1,301	43,863	44,107	244	
Interest Receivable	101	8	6	(2)	101	70	(31)	
Interest Payable	(588)	(51)	(39)	12	(588)	(456)	132	
Depreciation & Amortisation	(29,054)	(2,464)	(2,522)	(58)	(29,054)	(29,382)	(328)	
Surplus / (Deficit) Before Dividend and Disposal of Fixed Assets	14,322	2,106	3,359	1,253	14,322	14,339	17	
Profit / (Loss) on Disposal of Fixed Assets	-	-	(1)	(1)	-	(1)	(1)	
Dividend Payable on PDC	(13,322)	(1,106)	(1,110)	(4)	(13,322)	(13,325)	(3)	
Net Surplus / (Deficit)	1,000	1,000	2,248	1,248	1,000	1,013	13	
EBITDA MARGIN	6.34%		9.12%			6.33%		
Impairment	1,387	-	2,435	(2,435)	1,387	3,555	(2,168)	
Net Surplus / (Deficit) after impairment	(387)	1,000	(187)	(1,187)	(387)	(2,542)	(2,155)	

VALUE FOR MONEY - INCOME and EXPENDITURE - DIVISIONAL POSITION

Income and Expenditure Position for the Period Ended 31 March 2011

	Income			Expenditure			Total Year End			
	Annual Plan £ 000	Actual £ 000	Variance £ 000	Annual Plan £ 000	Actual £ 000	Variance £ 000	Annual Plan £ 000	Actual £ 000	Variance £ 000	
Acute Care	268,919	271,157	2,238	211,160	217,682	-6,522	57,759	53,475	-4,284	
Clinical Support	30,662	31,745	1,084	125,542	126,729	-1,187	-94,880	-94,984	-103	
Planned Care	209,052	207,413	-1,639	126,482	126,661	-179	82,570	80,752	-1,818	
Women's and Children's	114,022	116,963	2,940	77,168	78,484	-1,316	36,854	38,479	1,624	
Corporate Directorates	16,090	16,788	698	105,377	105,568	-191	-89,287	-88,780	507	
Sub-Total Divisions	638,745	644,066	5,321	645,729	655,124	-9,395	-6,984	-11,058	-4,074	
Central Income	53,535	52,192	-1,343	0	0	0	53,535	52,192	-1,343	
Central Expenditure	0	0	0	46,938	43,676	3,262	-46,938	-43,676	3,262	
Grand Total	692,280	696,258	3,978	692,667	698,800	-6,133	-387	-2,542	-2,155	
							Impairment	1,387	3,555	-2,168
							Surplus / (Deficit)			
							excluding impairment	1,000	1,013	13

VALUE FOR MONEY - COST IMPROVEMENT PROGRAMME

Cost Improvement Programme as at March 2011

Division	Plan £	Actual £	Variance £	% of Plan	Recurrent Actual £	Non Rec Actual £
Acute Care	9,316,053	9,174,964	(141,089)	98.5%	6,949,974	2,224,990
Clinical Support	6,618,115	6,626,812	8,697	100.1%	5,095,636	1,531,176
Planned Care	5,812,483	6,384,263	571,780	109.8%	4,123,816	2,260,447
Women's and Children's	2,438,258	2,474,277	36,019	101.5%	1,555,706	918,571
Clinical Divisions	24,184,909	24,660,316	475,407	102.0%	17,725,132	6,935,184
Corporate	6,294,211	6,314,585	20,374	100.3%	5,628,921	685,664
Total	30,479,120	30,974,901	495,781	101.6%	23,354,053	7,620,848

Category	Plan £	Actual £	Variance £	% of Plan	Recurrent Actual £	Non Rec Actual £
Income	1,097,769	1,642,638	544,869	149.6%	1,173,470	469,168
Non Pay	12,241,302	10,693,553	(1,547,749)	87.4%	9,150,692	1,542,861
Pay	17,140,049	18,638,710	1,498,661	108.7%	13,029,891	5,608,819
Total	30,479,120	30,974,901	495,781	101.6%	23,354,053	7,620,848

Division	Plan £	Additional Target £	Revised Target £	Actual £	Variance against Target £
Acute Care	9,316,053	2,067,323	11,383,376	9,174,964	(2,208,412)
Clinical Support	6,618,115	628,346	7,246,461	6,626,812	(619,649)
Corporate	6,294,211	585,000	6,879,211	6,314,585	(564,626)
Planned Care	5,812,483	1,278,117	7,090,600	6,384,263	(706,337)
Women's & Children's	2,438,258	441,214	2,879,472	2,474,277	(405,195)
Total	30,479,120	5,000,000	35,479,120	30,974,901	(4,504,219)

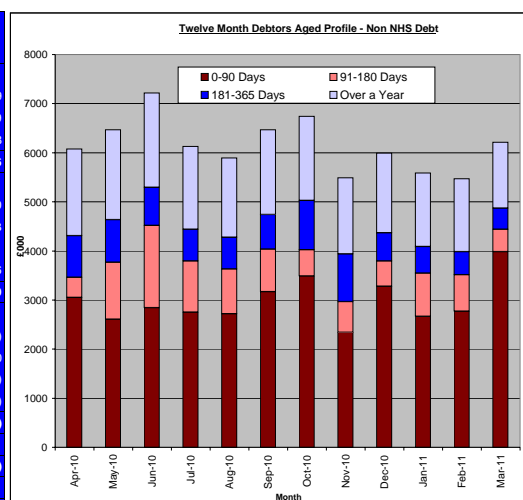
Commentary

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

Whilst the overall result is a £4.5 million shortfall against the £35.5 million revised target the Trust has delivered £31 million of cost savings in 2010/11.

VALUE FOR MONEY - BALANCE SHEET

BALANCE SHEET	Mar-10 £000's Actual	Jun-10 £000's Actual	Jul-10 £000's Actual	Aug-10 £000's Actual	Sep-10 £000's Actual	Oct-10 £000's Actual	Nov-10 £000's Actual	Dec-10 £000's Actual	Jan-11 £000's Actual	Feb-11 £000's Actual	Mar-11 £000's Actual
Non Current Assets											
Intangible assets	4,483	4,194	4,095	3,994	3,884	3,784	3,685	4,444	3,776	3,671	5,119
Property, plant and equipment	417,046	417,154	416,915	417,944	418,146	417,733	415,322	416,348	415,917	414,892	414,129
Trade and other receivables	4,685	3,902	4,336	4,353	4,807	4,870	4,874	4,959	4,937	4,802	4,818
TOTAL NON CURRENT ASSETS	426,214	425,250	425,346	426,291	426,837	426,387	423,881	425,751	424,630	423,365	424,066
Current Assets											
Inventories	12,213	11,795	12,034	11,677	11,580	11,514	11,672	13,491	12,635	12,672	11,920
Trade and other receivables	37,263	27,423	24,564	29,081	24,907	26,304	24,612	23,370	23,380	21,142	22,723
Other Assets	198	14	52	200	0	21	51	95	28	68	
Cash and cash equivalents	12,495	12,958	14,371	12,584	9,275	9,183	22,902	9,752	12,491	18,358	10,306
TOTAL CURRENT ASSETS	62,169	52,190	51,021	53,542	45,762	47,022	59,237	46,708	48,534	52,240	44,949
Current Liabilities											
Trade and other payables	(73,851)	(60,895)	(59,253)	(61,754)	(60,384)	(59,789)	(70,858)	(57,756)	(57,392)	(59,787)	(59,555)
Dividend payable	0	(3,331)	(4,440)	(5,551)	0	(1,110)	(2,220)	(3,331)	(4,441)	(5,551)	0
Borrowings	(1,203)	(717)	(717)	(827)	(894)	(894)	(894)	(951)	(1,009)	(1,009)	(1,009)
Provisions for liabilities and charges	(1,146)	(1,107)	(637)	(637)	(620)	(620)	(620)	(568)	(568)	(568)	(667)
TOTAL CURRENT LIABILITIES	(76,200)	(66,050)	(65,047)	(68,769)	(61,898)	(62,413)	(74,592)	(62,606)	(63,410)	(66,915)	(61,231)
NET CURRENT ASSETS (LIABILITIES)	(14,031)	(13,860)	(14,026)	(15,227)	(16,136)	(15,391)	(15,355)	(15,898)	(14,876)	(14,675)	(16,282)
TOTAL ASSETS LESS CURRENT LIABILITIES	412,183	411,390	411,320	411,064	410,701	410,996	408,526	409,853	409,754	408,690	407,784
Non Current Liabilities											
Borrowings	(6,442)	(6,456)	(6,490)	(6,416)	(6,349)	(6,419)	(6,455)	(6,433)	(6,401)	(6,442)	(5,676)
Other Liabilities	0	0	0	0	0	0	0	0	0	0	0
Provisions for liabilities and charges	(2,762)	(2,690)	(2,678)	(2,698)	(2,593)	(2,592)	(2,753)	(2,751)	(2,735)	(2,299)	(2,232)
TOTAL NON CURRENT LIABILITIES	(9,204)	(9,146)	(9,168)	(9,114)	(8,942)	(9,011)	(9,208)	(9,184)	(9,136)	(8,741)	(8,108)
TOTAL ASSETS EMPLOYED	402,979	402,244	402,152	401,950	401,759	401,985	399,318	400,669	400,618	399,949	399,676
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
Revaluation reserve	108,128	108,127	108,127	108,127	108,128	108,127	108,127	108,127	108,127	108,127	108,683
Donated Asset reserve	8,389	8,232	8,167	8,102	8,050	7,987	8,109	8,051	8,000	8,020	7,938
Government grant reserve	986	977	973	970	967	964	961	958	954	951	948
Other reserves	272	272	272	272	0	0	0	0	0	0	0
Retained earnings	11,301	10,733	10,710	10,576	10,711	11,004	8,218	9,630	9,634	8,947	8,204
TOTAL TAXPAYERS EQUITY	402,979	402,244	402,152	401,950	401,759	401,985	399,318	400,669	400,618	399,949	399,676



Type of Debtors	0-90 days £000s	91-180 days £000s	181-365 days £000s	365+ Days £000s	TOTAL £000s
NHS Sales ledger	1,606	842	136	45	2,629
Non NHS sales ledger by division:					
Corporate Division	1,212	97	192	548	2,049
Planned Care Division	527	78	75	241	921
Clinical Support Division	484	58	24	50	616
Women's and Children's Division	96	48	69	101	314
Acute Care Division	1,662	180	66	404	2,312
Total Non-NHS sales ledger	3,981	461	426	1,344	6,212
Total Sales Ledger	5,587	1,303	562	1,399	8,841
Other Debtors					
WIP (HRG4adjusted)					3,948
SLA Phasing & Performance					(1,628)
Bad debt provision					1,211
VAT - net					10,351
Other receivables and assets					22,723
TOTAL					22,723

Commentary

Cash has reduced from the prior month where the Trust had received £8.5 million in advance.

Accounts receivable metrics:

Invoice cycle time	Non-NHS days sales outstanding (DSO)			
	Mar-11 Days	Prior month Days	Mar-11 YTD Days	Prior month YTD Days
Requisition date to invoice raised	12		DSO (all debt)	97
Service to invoice raised	36		DSO (2010/11 debt)	66

VALUE FOR MONEY - CASH FLOW

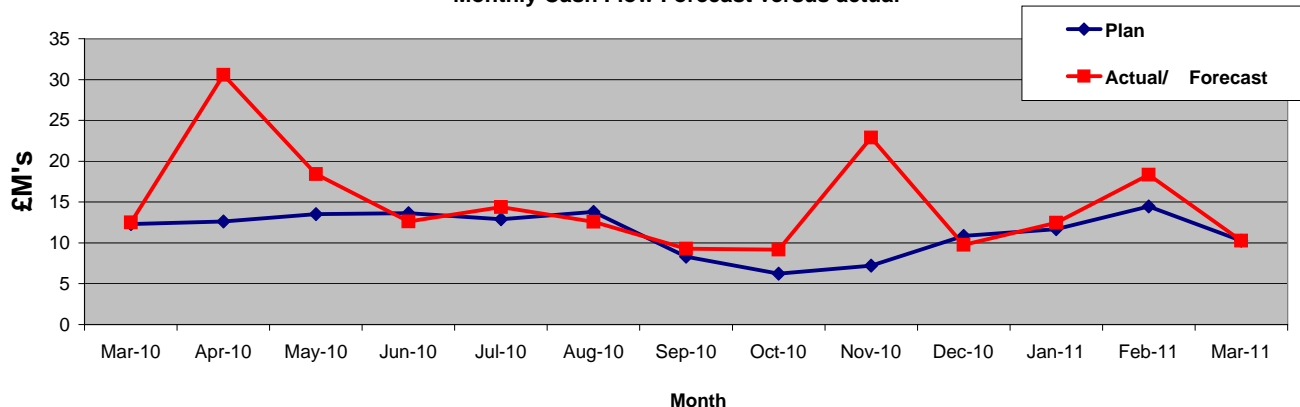
CASH FLOW for the PERIOD ENDED 31 MARCH 2011

Commentary

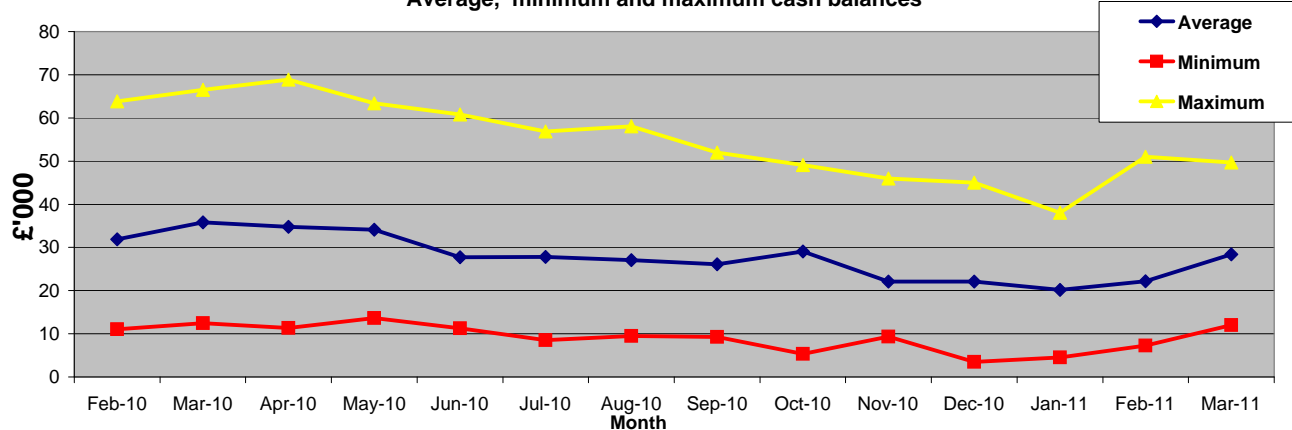
The Trust has met its external financing limit, and achieved a year end cash balance of £10.3 million against a plan of £10.25 million.

	2010/11 April - March 2011 Actual £ 000
CASH FLOWS FROM OPERATING ACTIVITIES	
Operating surplus before Depreciation and Amortisation	44,107
Impairments and reversals	(3,555)
Movements in Working Capital:	
- Inventories (Inc)/Dec	(459)
- Trade and Other Receivables (Inc)/Dec	16,134
- Trade and Other Payables Inc/(Dec)	(14,258)
- Provisions Inc/(Dec)	(578)
PDC Dividends paid	(13,325)
Interest paid	(451)
Other non-cash movements	(533)
Net Cash Inflow / (Outflow) from Operating Activities	27,082
CASH FLOWS FROM INVESTING ACTIVITIES	
Interest Received	68
Payments for Property, Plant and Equipment	(29,339)
Net Cash Inflow / (Outflow) from Investing Activities	(29,271)
Increase / (Decrease) in Cash	(2,189)

Monthly Cash Flow Forecast versus actual



Average, minimum and maximum cash balances



VALUE FOR MONEY - CAPITAL BUDGET

Capital Budget 2010/11 for the Period 1st April 2010 to 31st March 2011

	Opening Plan £000's	Movement £000's	Revised Plan £000's	Actual Spend Apr-Feb £000's	Mar £000's	YTD Spend 10/11 £000's	Actual	
							Variance to	
							Outturn £000's	Plan £000's
FUNDING								
Depreciation as per CCE	26,008		26,008					
Retained Funding	3,000		3,000					
Total Capital Resource Limit Funding	29,008	0	29,008	26,319	2,689	29,008	29,008	0
Disposals		19,059	19,059	0	0	1	1	19,058
Donations	150	200	350	320	167	486	486	-136
Total Other Funding	150	19,259	19,409	320	167	487	487	18,922
Total Funding	29,158	19,259	48,417	26,639	2,856	29,495	29,495	18,922
EXPENDITURE								
IM&T Schemes								
Sub Group Schemes	1,500	750	2,250	1,668	650	2,318	2,318	-68
Total IM&T Schemes	1,500	750	2,250	1,668	650	2,318	2,318	-68
Medical Equipment Schemes								
Sub Group Schemes	1,500	750	2,250	1,893	505	2,398	2,398	-148
Total Medical Equipment	1,500	750	2,250	1,893	505	2,398	2,398	-148
Estates Schemes								
LRI Estates	2,500	-500	2,000	1,828	483	2,311	2,311	-311
LGH Estates	1,000		1,000	909	115	1,024	1,024	-24
GGH Estates	1,000	-93	907	466	242	707	707	200
Land Swap		19,616	19,616	3	-0	3	3	19,613
Total Estates Schemes	4,500	19,023	23,523	3,205	840	4,045	4,045	19,478
Directly Funded Schemes								
Decontamination	1,700	-300	1,400	328	267	595	595	805
BRU	1,000	-186	814	854	425	1,279	1,279	-465
NIHR MRI Scanner	2,205	95	2,300	1,729	508	2,238	2,238	62
Replacement Linear Accelerators	3,581		3,581	1,838	1,615	3,453	3,453	128
Neonatal Expansion	4,689		4,689	4,439	-30	4,408	4,408	281
MSK Theatres	4,826	-483	4,343	4,242	91	4,332	4,332	11
MES Refurbishments	600	-100	500	370	99	470	470	30
Stroke Relocation	1,000	-250	750	657	-74	584	584	166
GGH CDU Phase II	580	-480	100	15	45	59	59	41
Other IT Schemes	355	174	529	202	278	479	479	50
Other Medical Equipment Schemes	600	-29	571	585	20	604	604	-33
Other Facilities Schemes	372	95	467	305	142	447	447	20
Donated Buildings & Equipment	150	200	350	320	167	486	486	-136
Total Directly Funded Schemes	21,658	-1,264	20,394	15,883	3,552	19,435	19,435	959
Total Capital Programme	29,158	19,259	48,417	22,650	5,546	28,196	28,196	20,221
Forecast Over/(Under) Spend	0	(0)	(0)	(3,989)	2,690	(1,299)	(1,299)	1,299

Commentary

The Trust is reporting a £1.3 million underspend on the Capital Programme, due to slippage on a number of schemes e.g. Decontamination. This slippage will be managed within the 2011/12 Programme.

INDICATORS, THRESHOLDS and TARGETS

QUALITY and PERFORMANCE REPORT

PATIENT SAFETY

	YTD : Cumulative or Current?	Target : Local or National?	Target	Thresholds		
MRSA Bacteraemias	Cumulative	CQUIN	9	>= 1		0
CDT Isolates in Patients (UHL - All Ages)	Cumulative	CQUIN	212	>= Monthly Target+3	Monthly Target+2	<= Monthly Target
% of all adults who have had VTE risk assessment on adm to hosp			90%			
Reduction of hospital acquired venous thrombosis			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	100.0%	<97%	97-100%	=100%
Emergency 30 Day Readmissions (Following Elective Admission)	Current	Local Target	TBC			
Mortality (UHL Data) - Elective	Current	Local Target	TBC			
Mortality (CHKS - Risk Adjusted) - Elective	Current	Local Target	TBC			
Mortality (UHL Data) - Non Elective	Current	Local Target	TBC			
Mortality (CHKS - Risk Adjusted) - Non Elective	Current	Local Target	TBC			
Primary PCI Door to Balloon <150 Mins	Cumulative		75.0%	<60%	60-75%	>=75%
Pressure Ulcers (Grade 3 and 4)	Cumulative	Local Target	TBC			

INDICATORS, THRESHOLDS and TARGETS

QUALITY and PERFORMANCE REPORT

PATIENT EXPERIENCE

	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	100.0%	<80	>80 and < 100	100.0%
A&E Waits - Leics	Cumulative	National Target	95.0%	<94%	94-95%	>=95%
A&E Waits - UHL (Type1 and 2)	Cumulative	Local Target	95.0%	<97%	94-95%	>=95%
RTT Admitted Median Wait (Weeks)	Cumulative		<=11.1			
RTT Admitted 95th Percentile (Weeks)	Cumulative		<=27.7			
RTT Non-Admitted Median Wait (Weeks)	Cumulative		<=6.6			
RTT Non-Admitted 95th Percentile (Weeks)	Cumulative		<=18.3			
RTT Incomplete Median Wait (Weeks)	Cumulative		<=7.2			
RTT Incomplete 95th Percentile (Weeks)	Cumulative		<=36.0			

STAFF EXPERIENCE / WORKFORCE

Planned CIP reduction this month	Cumulative	Local Target	-433.5			
Sickness absence	Current Month	Local Target	3%	>4%	>3%<=4%	<=3%
Appraisals	Current Month	Local Target	100%	<90%	>=90%<100%	100%

VALUE FOR MONEY

Income (£000's)	Cumulative	Local Target				
Operating Cost (£000's)	Cumulative	Local Target				
Surplus / Deficit (as EBIDTA) (£000's)	Cumulative	Local Target				
CIP (£000's)	Cumulative	Local Target				
Cash Flow (£000's)	Current Month	Local Target				
Financial Risk Rating	Cumulative	Local Target				