

CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST

DEPARTMENT OF PERFORMANCE MANAGEMENT

BOARD OF GOVERNORS

MAY 2005

PERFORMANCE REPORT

INTRODUCTION

This paper updates Governors on the end of year performance in relation to waiting lists and the national performance assessment – ‘Star Ratings’. It should be noted that although the assessment criteria has now been released for all performance indicators, the information and scores outlined in this report and Appendix 1 are predictions at this moment in time. This is due to the fact that the Healthcare Commission will not release the scoring system until the actual publication of results, which is expected in late July.

2004/05 STAR RATING INDICATORS

The calculation of Star Ratings is based on performance against a number of indicators, which are categorised into:

- Key Targets, the most significant areas of performance in the NHS Plan
- Balanced Scorecard, a range of indicators comparing performance against other Trusts

Key Targets

The Healthcare Commission has released the Key Targets for 2004/05. **Appendix 1 – Table 1** highlights the year-end performance against the targets and Governors are asked to note the following:

- The Trust did not achieve ‘Financial Balance’, recognising that the previous I&E break even target no longer applies to Foundation Trusts. The Healthcare Commission will use the ‘MONITOR’ risk rating given to all Foundation Trusts to assess the Trusts performance against this target. The current risk rating for the Trust is ‘2’, on a scale of 1-5 (1 = poor, 5 = excellent). If the Healthcare Commission categorise the Trusts current risk rating as significantly under-achieving on this Key Target, the Trust will automatically lose its 3 Star status.
- During January-March 2005, 99.2% of patients went through A&E in less than 4 hours. This consistent high level of performance has ensured the Trust achieved and surpassed the national target of 98%. City Hospitals was one of the highest performing A&E departments in the country.

- The Trust ensured that all patients referred from their GP with suspected cancer were seen within 14 days.

Balanced Scorecard

Appendix 1 – Table 2 highlights the Trust's year-end performance against the 2004/05 Balanced Scorecard. During March and April the Healthcare Commission released further clarity in terms of the construction of certain indicators for the Balanced Scorecard for 2004/05. The main points to note are:

- MRSA. This indicator will measure the MRSA rate for 2004/05 compared to 2002/03 and 2003/04. Although, the exact details of this indicator are yet to be released it is encouraging to note the Trusts MRSA rate has decreased over the past 2 years. This indicator will also take into account the availability of near-patient alcohol gel on wards.
- Child protection. This indicator is a self-assessment which measures the percentage of 'yes' answers to the 15 questions listed in a collection tool, available on the Healthcare Commission website. The questions relate to Lord Laming's inquiry into the death of Victoria Climbié which stated that within the NHS, the organisational systems were not in place to ensure continuity of care or adequate consultant supervision. The Trust has recently completed the self-assessment exercise, answering 'Yes' to 14 of the 15 questions.

Governors will note that the Trust is currently demonstrating excellent performance in a number of areas on the Balanced Scorecard. However there are also areas of concern, which the Trust will focus upon during 2005/06.

WAITING LIST

At March 31st, there were 5,695 patients on the inpatient waiting list, 1705 below the year-end target of 7,400. This excellent year-end position ensured the Trust achieved and surpassed the year-end Strategic Health Authority LDP target. Overall, the division of Surgery was 1,900 below plan, with the majority of surgical specialties achieving their year-end target.

It should be noted that T&O were 644 below the year-end target of 2,200. This position has improved significantly over the past 3 months due to large amounts of additional activity being undertaken.

Inpatient Waiting List Nine & Six Month Position

As at March 31st the Trust had no patients waiting >9 months and only 46 patients were waiting >6 months, this was a decrease of 231 on the previous month's position. This much improved position was achieved in conjunction with Sunderland TPCT, with the directorate over-performing on the elective contract and treating patients at BUPA (contracted by the TPCT). The directorate now aims to achieve a 0 >6 month position by the end of May/June.

SUMMARY

There is a significant risk that the Trust may not retain its 3 Star status. This is due to the Trusts performance against the 'Financial Management' indicator and this will depend on how the Healthcare Commission categorise the Trusts current risk rating of 2 from MONITOR.

All Balanced Scorecard indicators are now released, with a number of outline assessment criteria's published during March and April. The Trust has demonstrated excellent performance in a number of areas. However there are also areas of concern, in particular against clinical indicators, which could also result in loss of a star in the current rating system.

The Trust continues to maintain a maximum wait of 9 months for T&O inpatients and a maximum 6-month waiting time for all other specialties. T&O significantly reduced the number of patients waiting >6 months during March, with only 46 patients waiting >6 months at the year-end.

Governors are asked to note the contents of this report and comment accordingly.

Ian Tarbit
Assistant Chief Executive

2004/05 STAR RATING INDICATORS

Table 1. Key Targets			
2004/05 Key Targets	2004/05 Target	2004/05 Performance	Achieving
Inpatients waiting longer than the standard	0 >9 month waits all 2004/05	3	-
Outpatients waiting longer than the standard	0 >17 week waits all 2004/05	0	✓
Outpatient & Elective Inpatient Booking*	Inpatient – 100%	99.0%	✓
	Outpatient – 100%	85.5%	✓
A&E emergency admission waits - >12 hours	0	0	✓
Total time in A&E - 4 Hours	Work towards 98% from Jan'05	99.2%	✓
Two week cancer waits	100%	100%	✓
Hospital Cleanliness	PEAT Score 4 or above	Achieving	✓
Financial Management	Financial Balance	Not achieving	X

Table 2. Balanced Scorecard Indicators - Predicted		
Indicators	Lead	Performance
Clinical Risk Management	CSR	NEW
Death within 30 days of selected non-elective surgical procedures	DH	2
Emergency readmission to hospital following discharge (28 days) for adults	DH	1 (10.6%)
Emergency readmission following treatment for a fractured hip	DH	3 (9.5%)
MRSA	LHB	3/4
Stroke Care – <i>Results of the sentinel stroke audit</i>	CSR	2/3
Child Protection – <i>Compliance to recommended systems and procedures</i>	CH	5 (14 of 15)
Participation in audits – <i>Extent of participation in selected clinical audits</i>	DH	5 (100%)
Thrombolysis – <i>Call to needle time & Door to needle</i>	CSR	4 (76.3%)
Six month inpatient waits – <i>percentage waiting less than 6 months</i>	PS	4 (99.2%)
Thirteen week outpatient waits – <i>percentage seen in less than 13 weeks</i>	PS	5 (99.9%)
A&E emergency admission waits – <i>number of 4 hour trolley waits</i>	CSR	5 (0)
RACPC Waiting Times	PS	5 (100%)
Cancelled operations	PS	4 (0.41%)
Breast cancer treatment – <i>1 month diagnosis to treatment</i>	BK	5 (100%)
Breast cancer treatment – <i>2 month GP urgent referral to treatment</i>	BK	5 (100%)
Delayed transfers of care (delayed discharges)	CSR	4 (1.12%)
OP & Emergency patient survey - Better information, more choice	MG	3/4
OP & Emergency patient survey - Clean, comfortable, friendly place to be	MG	3/4
OP & Emergency patient survey - Building relationships	MG	3/4
OP & Emergency patient survey - Safe, high quality, co-ordinated care	MG	3/4
OP & Emergency patient survey - Access & Waiting	MG	3/4
% of written complaints locally resolved < 4 weeks	MG	3 (69%)
Better hospital food	GH	3
Data quality on ethnic group	PS	4
Staff opinion survey – <i>Health, safety and incidents</i>	KG	N/A
Staff opinion survey – <i>human resource management</i>	KG	
Staff opinion survey – <i>staff attitudes</i>	KG	
Workforce Indicator – <i>Sickness absence rate & Junior Doctor Hours</i>	KG	NEW
Information Governance	LHB	4 (72%)