



External Assessments	Ratings	Annual health check		Risk Ratings	
		Use of Resources	Quality of Service	Financial	Non-Financial
Current	Good	Good	Good	3	Amber
Predicted	Good	Good	Good		

Clinical Quality

Current Period	G
Forecast Outturn	G

Adverse Incidents	G
Overall Mortality Rate	G
Avoidable Mortality	G
Readmission Rate	G

Patient Experience

Current Period	A
Forecast Outturn	A

Patients Survey	A
Complaints	G
Hospital Cancellations	A
Cleanliness	R

Access and Targets

Current Period	A
Forecast Outturn	A

National Targets - Monitor/Prov Agency	A
National Targets - Other	G
18 week Referral to Treatment (RTT)	G
Hospital Acquired Infections (MRSA/C.diff)	R

Strategy

Day Treatment Centre	
Additional activity against plan	n/a

Strategic Redevelopment Projects	
% Target progress to date	G

Market Share	
First Outpatient Activity	G
Non-Elective Activity	G
Day Case Surgery	A
Maternity Deliveries	G

Workforce & Efficiency

Current Period	A
Forecast Outturn	A

Length of Stay	G
DNA Rate	A
Surgical DC % Rate	A
Productivity Index/Activity per WTE	G
Theatre utilisation	A
OP Follow Up Ratio	G
Sickness Absence Rate	A
Turnover Rate	G
Vacancy Rate	A

Finance

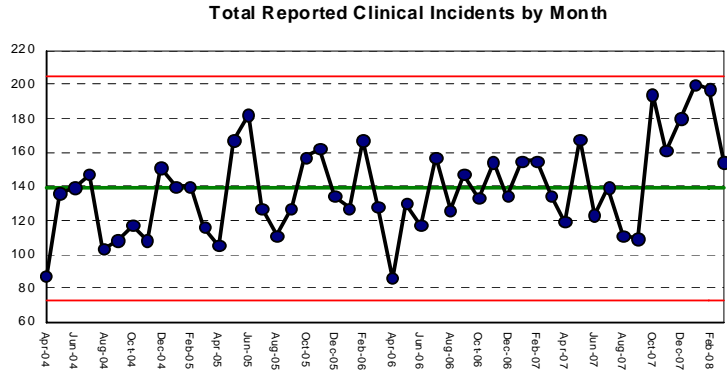
Current Period	G
Forecast Outturn	G

Risk rating	G
Overall Income & Expenditure	G
Performance against SLA	G
Cost Improvement Plan	G
Cash position against plan	G
Order Book	G

Clinical Quality

[Click here to return to Dashboard](#)

Adverse Incidents

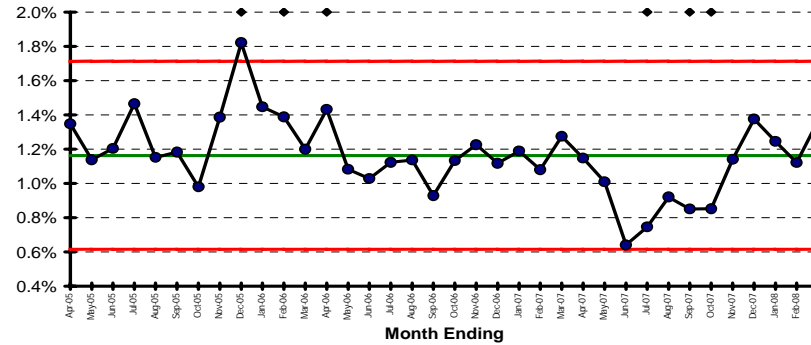


Benchmark information - not currently available

Green: within normal SPC parameter or positive test AND benchmark is better than England
 Amber: within normal SPC parameter or positive test AND benchmark is above England
 Red: adverse SPC statistical tests met

Overall Mortality Rate

Total MORTALITY Rate (% of all discharges)



Benchmark (Dr Fosters Intelligence. Standardised Mortality Rate, England, Annual)
 Standardised on total England data = 100

Trust	1 year SMR	Trust	1 year SMR
Royal Free Hospital	74	Newham University Hospital	100
St George's Healthcare	80	Barking Havering & Redbridge Hospitals	100
Homerton University Hospital	81	Whipps Cross University Hospital	101
Guy's & St Thomas'	82	Queen Elizabeth Hospital Woolwich	104
The Whittington Hospital	84	Dartford & Gravesham	104
Bromley Hospitals	88	West Middlesex University Hospital	105
Chelsea & Westminster	88	Epsom & St Helier University Hospital	105
Barts & The London	89	Barnet & Chase Farm Hospitals	106
North West London Hospitals	91	Ealing Hospital	107
University College London Hospital	92	Kingston Hospital	114
Hillingdon Hospital	93	Queen Mary's Sidcup	116
Kings College Hospital	94	North Middlesex University Hospital	123
Lewisham University Hospital	96	Basildon & Thurrock	126
Mayday Healthcare	97	Imperial Healthcare	n/a

Green: within normal SPC parameter or positive test AND benchmark is better than England
 Amber: within normal SPC parameter or positive test AND benchmark is above England
 Red: adverse SPC statistical tests met

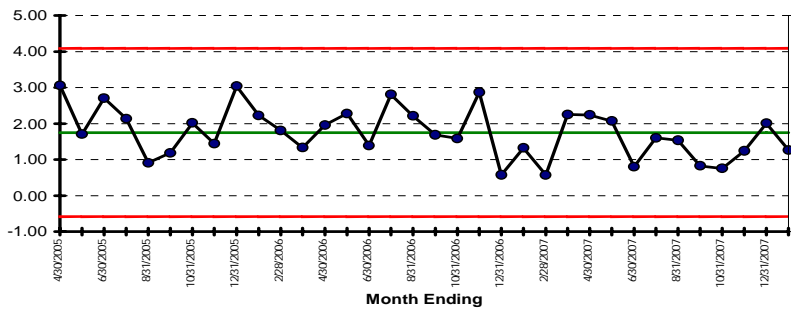
Avoidable Mortality

Readmissions

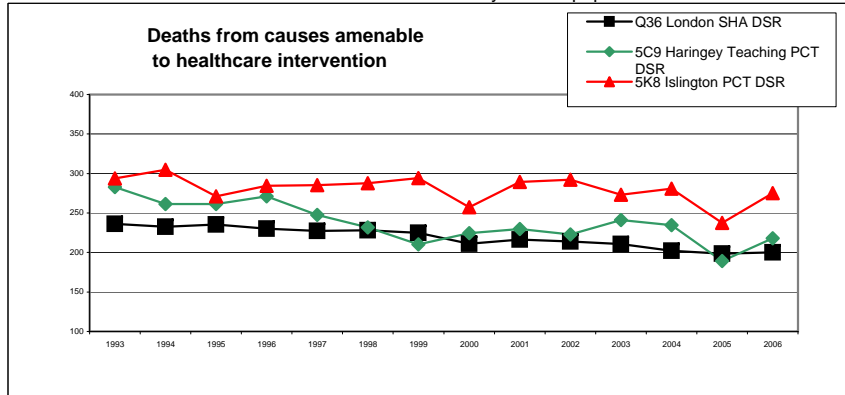
Clinical Quality

Defined as "deaths from causes considered amenable to health care... Healthcare intervention includes preventing disease onset as well as treating disease."

Avoidable Mortality - deaths per 1000 discharges



Benchmark - information is not available at Trust level - only PCT or population based



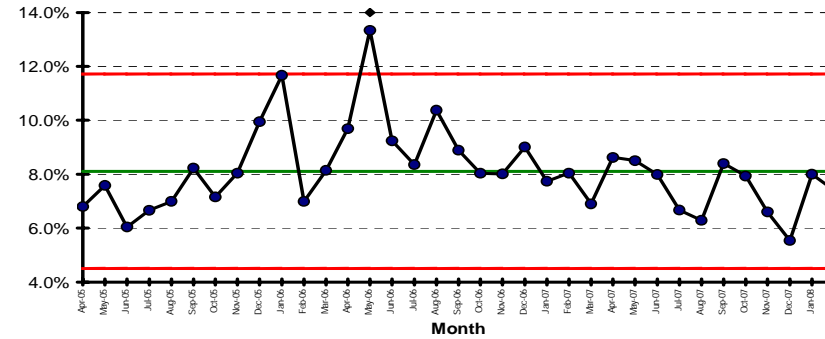
From Clinical and Health Outcomes Knowledge Base

Green: within normal SPC parameter or positive test AND benchmark is better than England
 Amber: within normal SPC parameter or positive test AND benchmark is above England
 Red: adverse SPC statistical tests met

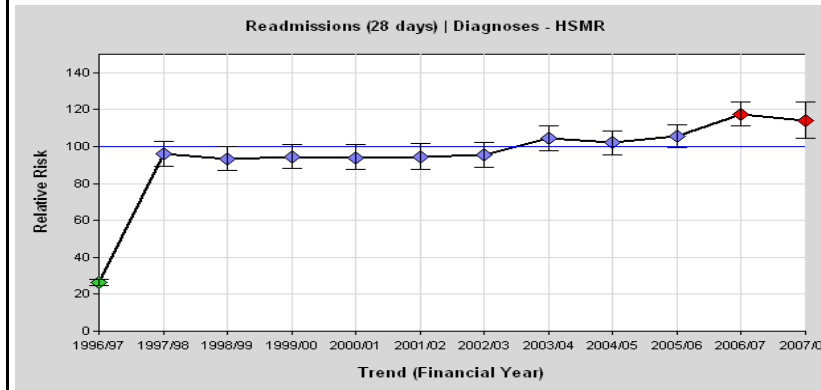
[Click here to return to Dashboard](#)

source: PAS. Related Condition = same HRG chapter. Benchmark = mean over the period

Related Condition 28-day Redmission rate



Benchmark



source: Dr Foster Intelligence. Relative Risk = index. Benchmark Year=1997/98, England data

Green: within normal SPC parameter or positive test AND benchmark is better than England
 Amber: within normal SPC parameter or positive test AND benchmark is above England
 Red: adverse SPC statistical tests met

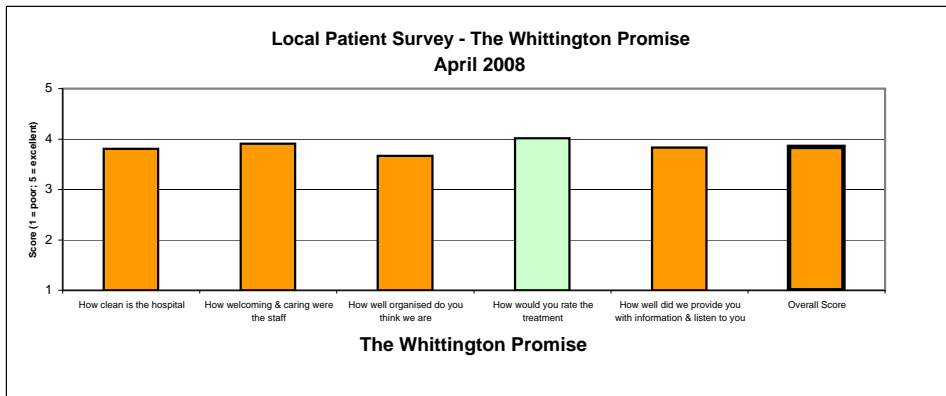
Patient Experience

Period: January 2008

[Click to return to Dashboard Report](#)

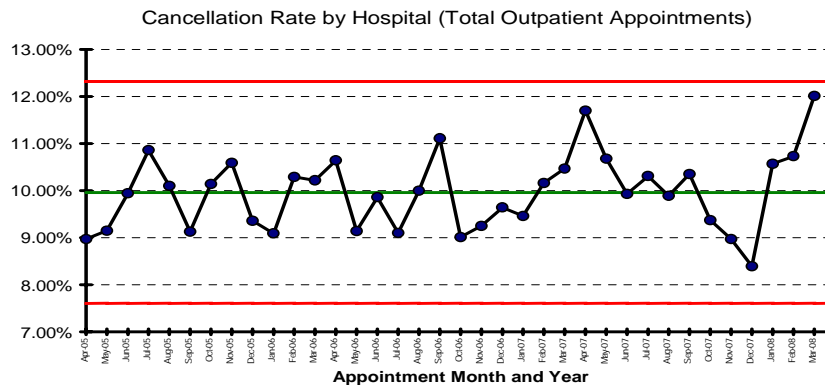
Patient Survey

A summary scores has been calculated for each of the Whittington Promises



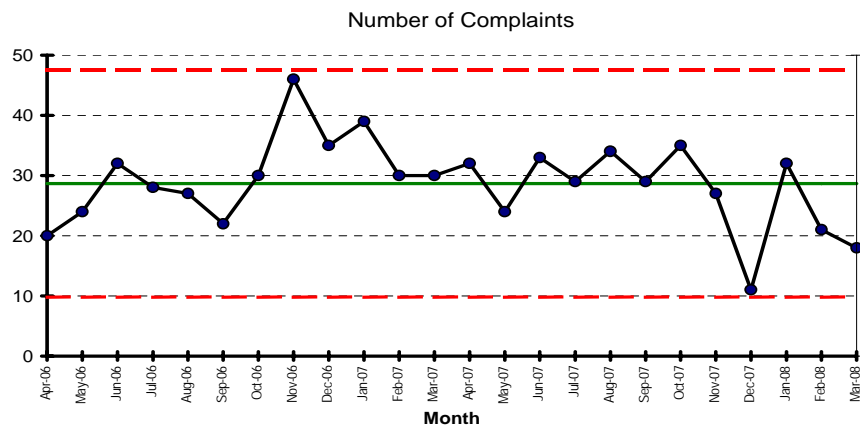
Green = score between 4 and 5
 Amber = score between 3.5 and 4
 Red = score below 3.5

Hospital Cancellations



Green: within normal SPC parameter or positive test AND progress to target (if specified)
 Amber: within normal SPC parameter or positive test ANDno progress to target (if specified)
 Red: adverse SPC statistical tests met

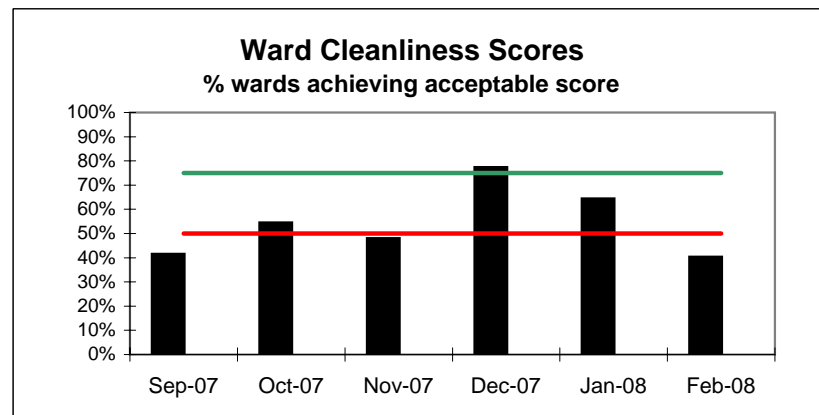
Complaints - numbers



Green: within normal SPC parameter or positive test AND progress to target (if specified)
 Amber: within normal SPC parameter or positive test ANDno progress to target (if specified)
 Red: adverse SPC statistical tests met

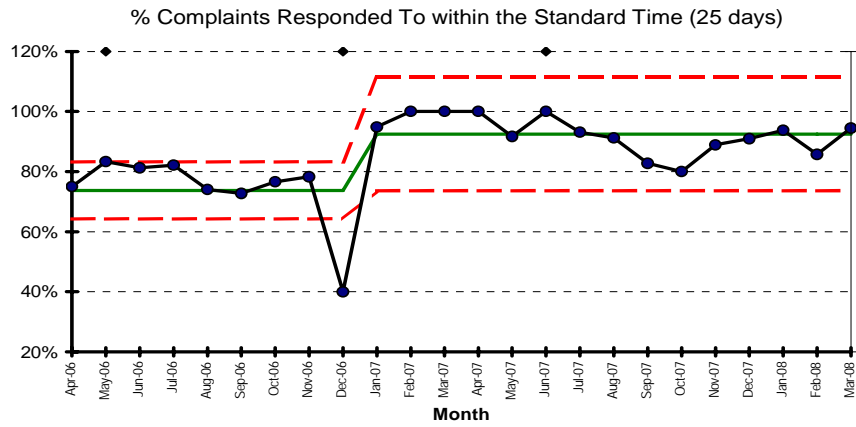
Cleanliness

Acceptable = achieving at least 80% on the monthly scoring of ward cleanliness



Green line = threshold between Green and Amber (75%)
 Green line = threshold between Green and Amber (75%)
 Red line = threshold between Red and Amber (50%)

Complaints - Response Times



Complaints - Dissatisfied

Escalation of Complaints	2004/05	2005/06	2006/07	2007/08
% Dissatisfied Complainants	17%	14%	8%	11%
No of complaints referred to Healthcare Commission	2	11	13	1
No of complaints referred to Ombudsman	0	1	0	0

Access and Targets

Detail for the Access & Targets Domain

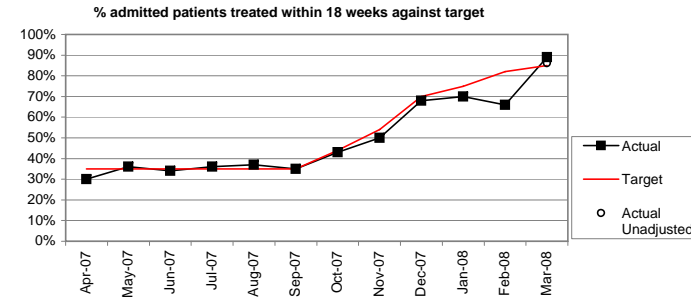
[Click here to return the Dashboard Report](#)

Access Targets				
Standard	Criteria	Target	Mar-08	YTD
National Target Indicators - reviewed by Monitor/Provider Agency				
Reducing Mortality from Cancer				
Wait from GP Referral until Seen	% seen within 14 days	98%	100%	99.9%
Wait from Decision to Treat until Treatment	% treated within 31 days	98%	100%	100%
Wait from GP Urgent Referral until Treatment	% treated within 62 days	95%	100%	97.2%
Inpatients waiting over 26 weeks		0	0	0
GP referred Outpatient waiting over 13 weeks		0	0	0
Reducing Infections (mandatory surveillance items)				
MRSA Bacteraemia Rates (1000 bed days)	London Benchmark	0.22	0.16	0.14
Number of MRSA Infections	60% Reduction from 06/07	12	2	21
Supporting patient choice and booking				
Choice of dates offered for Outpatient Appointments	% of new referrals	100%	100%	100%
Choice of dates offered for Elective Admission	% of decisions to treat	100%	100%	100%
ED Time :- Total treatment time in ED	% within 4 hours	98%	98.3%	98.5%
Ensuring patient right of redress following cancelled operations				
Operations cancelled for non-clinical reasons	% of elective admissions	<0.8%	0.93%	0.72%
Offers of new binding date	% within 28 days	95%	100%	99.20%
Delayed transfers of care				
Number of delayed bed-days			186	2461
% delayed patients as a % of all patients			2.0%	2.2%
Reducing Mortality from Heart Disease				
Wait from GP Referral until Seen in RACP Clinic	% seen within 14 days	100%	100%	100%
Each national core standard	number of standards failed	0		

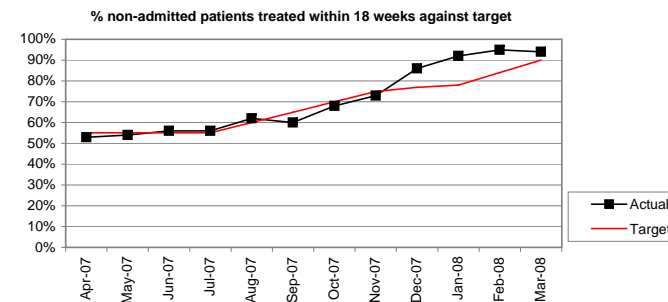
Access Targets				
Standard	Criteria	Target	Mar-08	YTD
Other National Target Indicators - included within the Annual Health Check				
Clostridium Difficile	Meeting 4 DQ requirements	100%	-	
Admitted Patients Ethnic Code	% of FCEs	95%	-	
Drug misusers: information, screening and referral	Meeting 5 requirements	100%	100%	
Emergency bed-days				
Number of emergency bed-days			8,286	89,534
% Drop from last year	5% Reduction by 2008		32%	42%
Patient Experience				
	Patient Surveys			
Reducing inequalities in Infant Mortality				
Smoking in pregnancy at time of delivery	% of deliveries	<17%	7.3%	11.0%
Rate of Breastfeeding at birth	% of deliveries	78%	88.6%	88.9%
Obesity: compliance with NICE guidance 43			100%	
Participation in audits			n/a	
Referral to treatment times milestones for 18 weeks	see separate section			
Diagnostic Waits	see separate section			

Waiting Targets				
Standard	Criteria	Target	Mar-08	YTD
Referral to treatment times milestones for 18 weeks				
Admitted Care 18 week RTT				
		Overall		Green
% Admitted Patients < 18 wks	85% for March 2008	85%	88%	
Non Admitted Care 18 week RTT				
		Overall		Green
% Non Admitted Patients < 18 wks	90% for March 2008	90%	94%	
Inpatient				
		Overall		Green
% Inpatient admissions < 11 wks			80.0%	
% Inpatient admissions < 20 wks		97%	98.9%	
26 week Breaches		0	0	0
Outpatient				
		Overall		Green
% 1st GP Outpatients waits < 5 wks				
% 1st GP Outpatients waits < 11 wks		97%		
13 weeks Breaches		0	1	1
Diagnostic				
		Overall		Green
Diagnostic Waits (non audiology)	% waiting within 13 weeks	100%	100%	
13 weeks Breaches		0	0	
Total diagnostic tests	% waiting within 6 weeks	-	100%	
Wait for MRI Scan appointment	% waiting within 6 weeks	-	100%	
Wait for CT Scan appointment	% waiting within 6 weeks	-	100%	
Wait for Ultrasound appointment (non-obstetric)	% waiting within 6 weeks	-	100%	
All other diagnostic tests (non audiology)	% waiting within 6 weeks	-	99.9%	

Admitted patients



Non-admitted patients (Outpatients)



Strategy

MARKET SHARE

Source of data: Dr Fosters - March data not yet available

First Outpatient Attendances

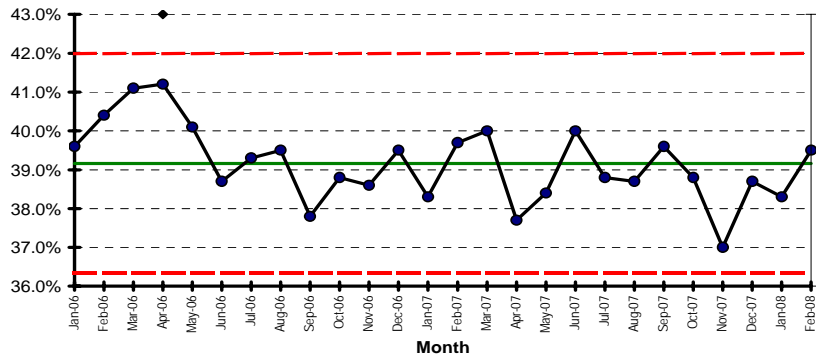
Performance Thresholds

Green: within normal SPC parameter or positive test AND progress to target (if specified)

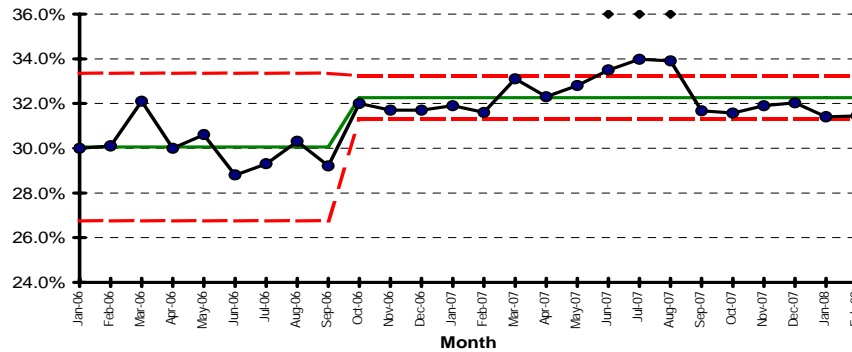
Amber: within normal SPC parameters and no progress to a target (if specified)

Red: adverse SPC statistical tests met

Whittington: Market Share Islington First OP Attendances

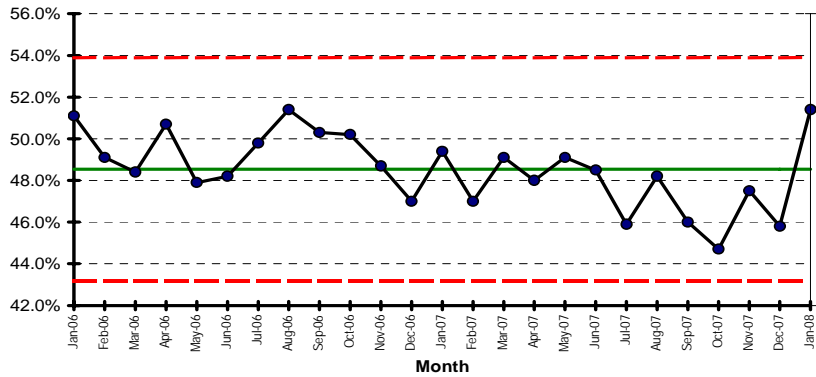


Whittington: Market Share Haringey First OP Attendances

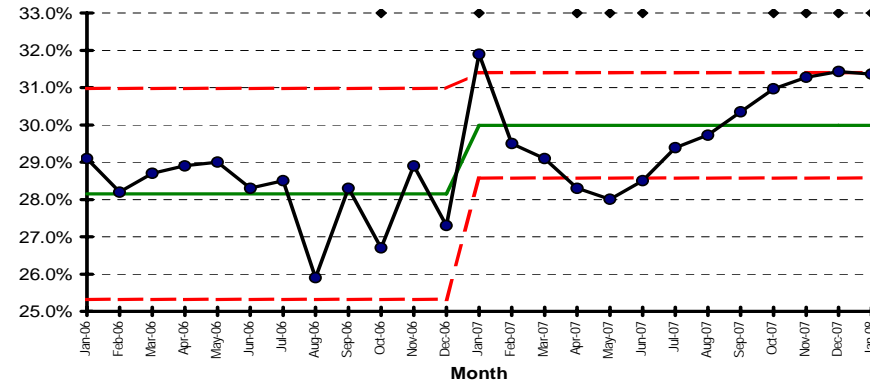


Non-Elective Admissions

Whittington: Market Share for Islington Non Elective Admissions



Whittington: Market Share for Haringey Non Elective Admissions

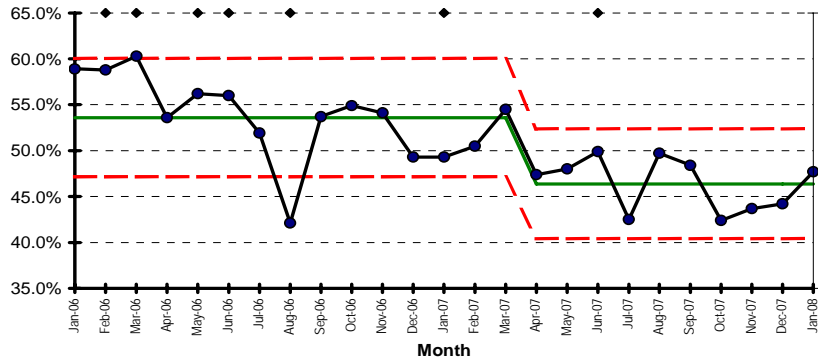


Strategy

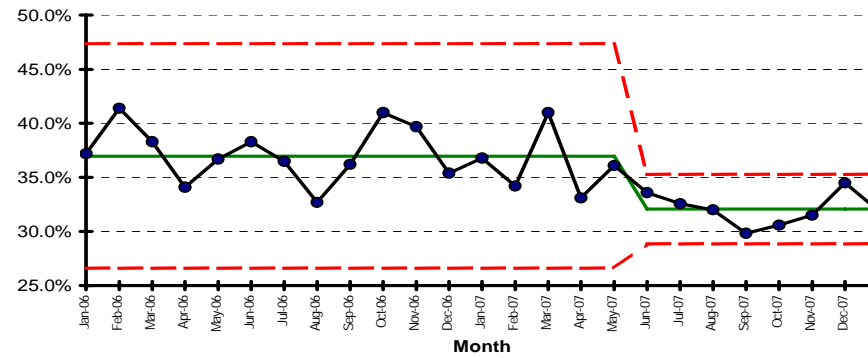
Day Case Surgery

(General Surgery, Orthopaedics, Urology, ENT, Gynaecology, Pain Management, Gastroenterology only)

Whittington: Market Share for Islington Day Case Surgery



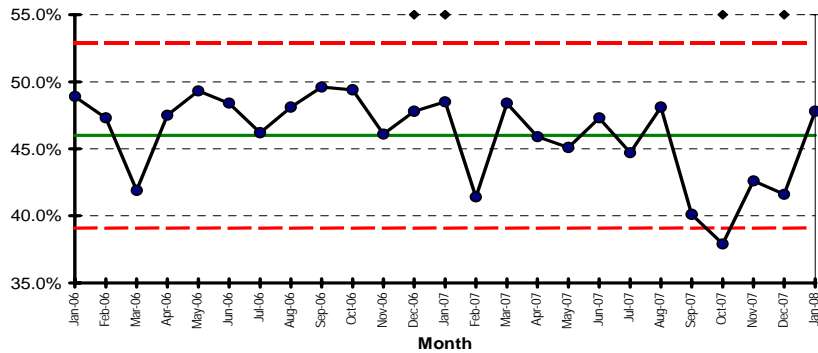
Whittington: Market Share for Haringey Day Case Surgery



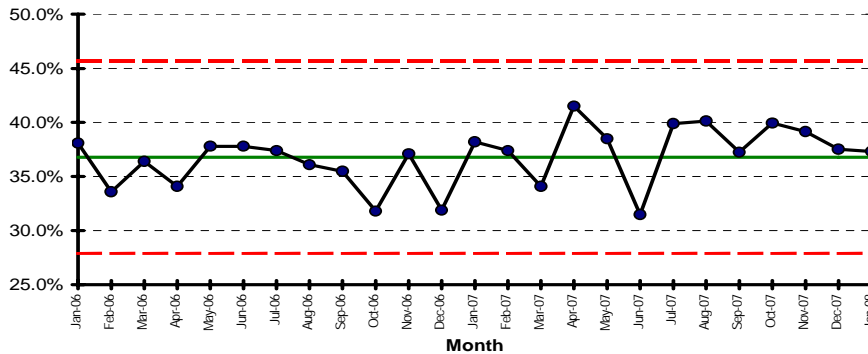
Note: Market distorted by University College Hospital and the Royal Free Hospital converting significant numbers of their Elective IP to Day Cases

Maternity Deliveries

Whittington: Market Share for Islington Maternity Deliveries



Whittington: Market Share for Haringey Maternity Deliveries

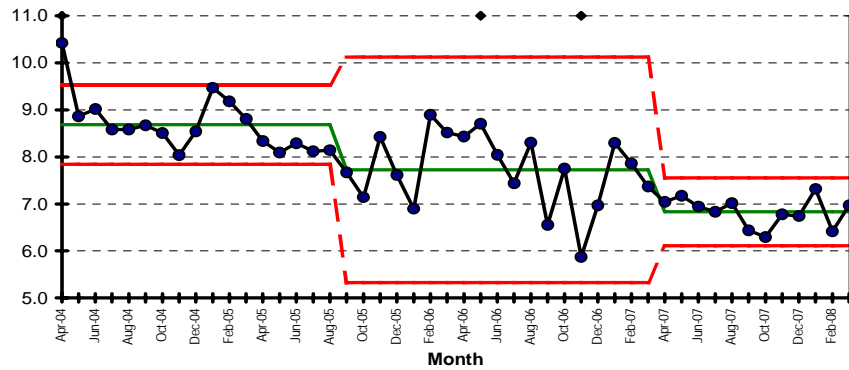


Workforce & Efficiency

[Click here to return to the Dashboard Report](#)

Average Length of Stay (acute specialties only)

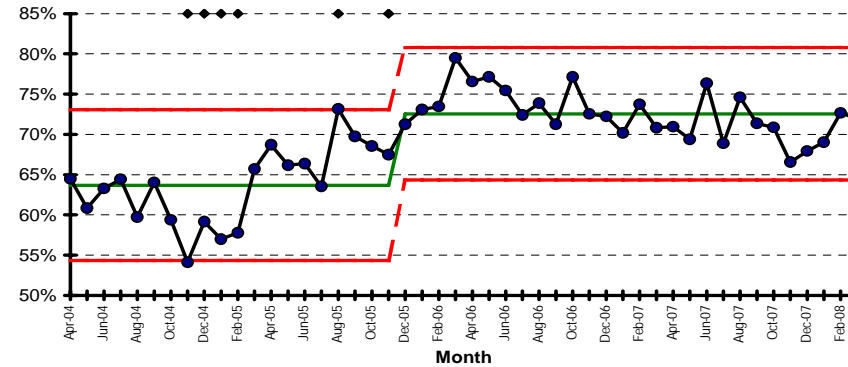
Average Length of Stay (acute)



Green = within normal SPC parameters or a positive test met
 Amber = no progress to a target (where a target has been specified)
 Red = adverse SPC statistical tests

Day Case Surgery Rate

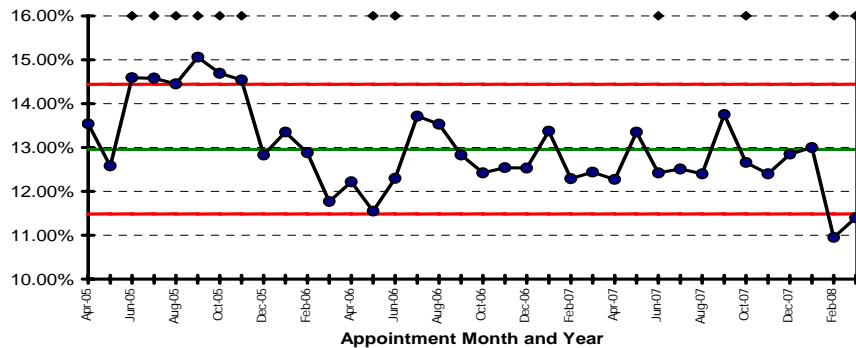
Surgery Day Case Rate



Green: $\geq 75\%$
 Amber = less 75% and no adverse SPC statistical tests met
 Red = adverse SPC statistical tests

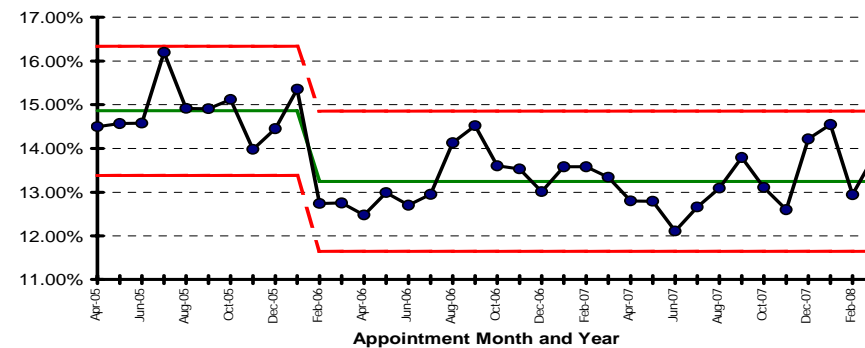
DNA Rate (Outpatients)

DNA First Outpatient Activity



Green = within normal SPC parameters or a positive test met
 Amber = no progress to a target (where a target has been specified)
 Red = adverse SPC statistical tests

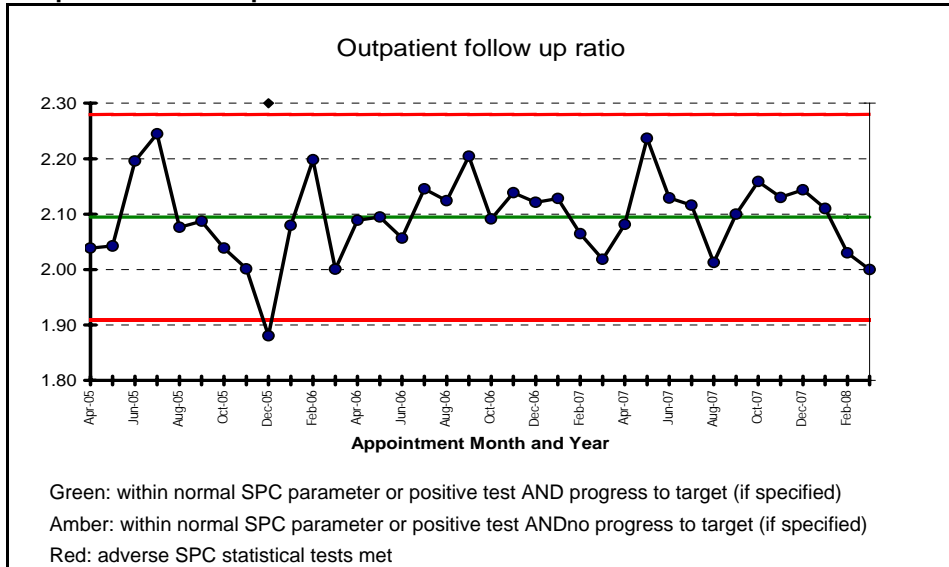
DNA Rate Follow up Outpatients



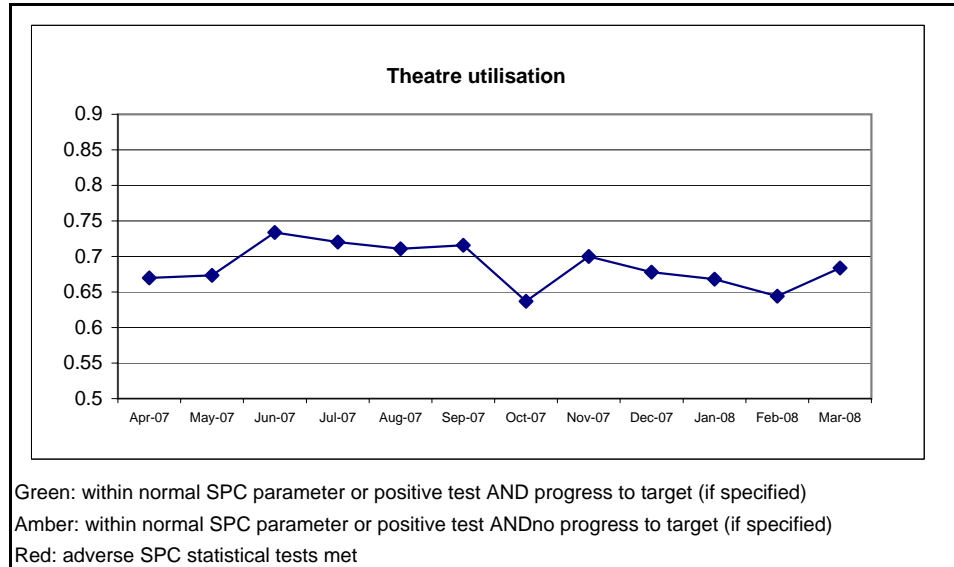
Green = within normal SPC parameters or a positive test met
 Amber = no progress to a target (where a target has been specified)
 Red = adverse SPC statistical tests

Workforce & Efficiency

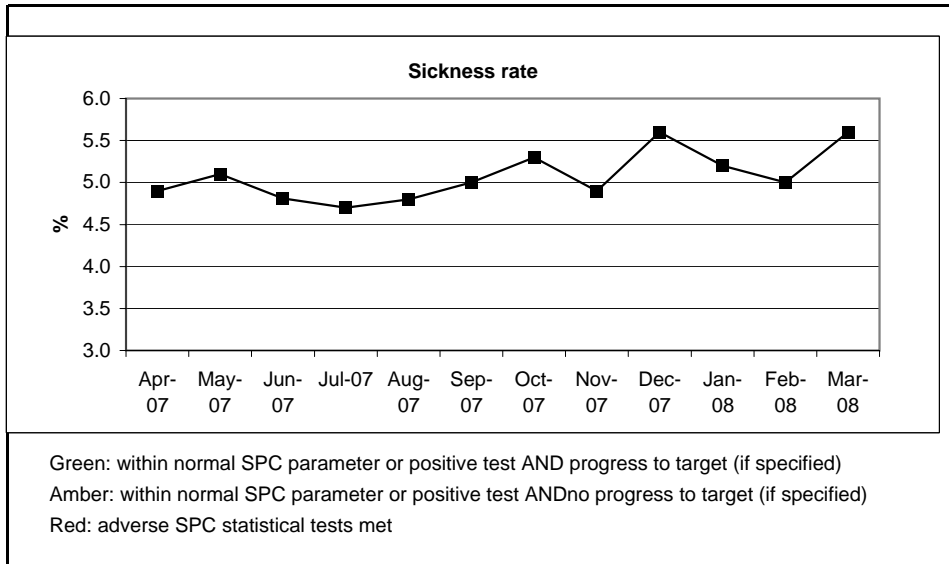
Outpatient Follow Up ratio



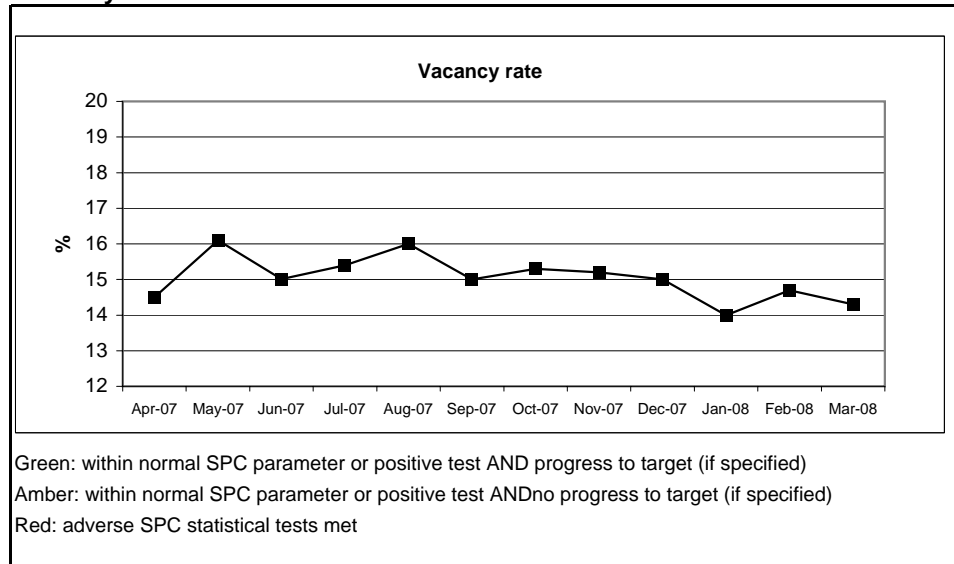
Theatre Utilisation



Sickness Absence Rate



Vacancy Rate



Workforce & Efficiency

[Click here to return to the Dashboard Report](#)

Workforce & Efficiency				
Standard	Criteria	Target	Mar-08	YTD
Length of Stay	LOS Project	6.8	7.0	6.8
Surgical DC % Rate	Trust Benchmark	75%	72.0%	72.5%
DNA Rate				
Elective Admission (IP/DC)	London Average	4.20%	n/a	n/a
First OP	London Average	12.00%	11.4%	12.5%
Follow Up OP	London Average	14.26%	13.9%	13.2%
Productivity Index/Activity per WTE against Plan				
Achievement against Plan (100)	achievement of IBP			110
Theatre Utilisation	Trust Benchmark	75%	68%	70%
Outpatient Follow up Ratios	Trust Benchmark	2.70	2.00	2.11
Sickness Absence Rate	Trust Benchmark	4.90%	5.6%	5.8%
Vacancy Rate	Trust Benchmark	n/a	14.3%	15.0%
Turnover Rate	Trust Benchmark	14%	12.5%	12.8%

Bed day Use - see HMB paper: Service Improvement (LOS)

DNA Rates: see Finance & Performance paper on Productivity measures

Surgical DC Rates: see Finance & Performance paper on Productivity measures

Productivity Index/Activity per WTE: see [no report currently available]

Theatre Utilisation: see Theatre User Group reports

Sickness Absence Rates: see HMB Paper - HR indicators

Vacancy Rates: see HMB Paper - HR indicators

Turnover Rates: see HMB Paper - HR indicators

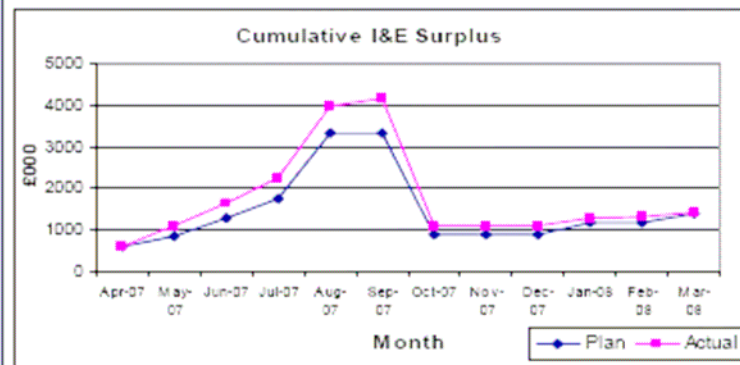
Finance

Period: Month 12 (March 2008)

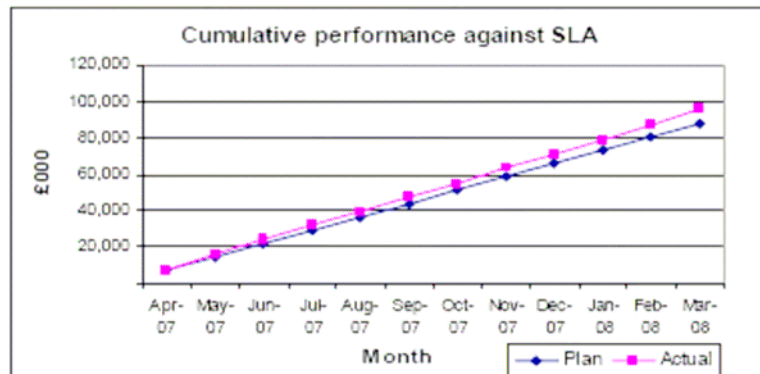
Risk Rating - Monitor Methodology

Weighting	Metric Description	Metric Value	Rating	Weighted Value
10%	EBITDA achieved (% of plan)	111.12	5	0.50
25%	EBITDA margin (%)	6.47	3	0.75
20%	Return on Assets (%)	4.58	3	0.60
20%	I&E surplus margin (%)	0.93	2	0.40
25%	Liquid ratio (days)	18.074	3	0.75
Overall rating				3.00

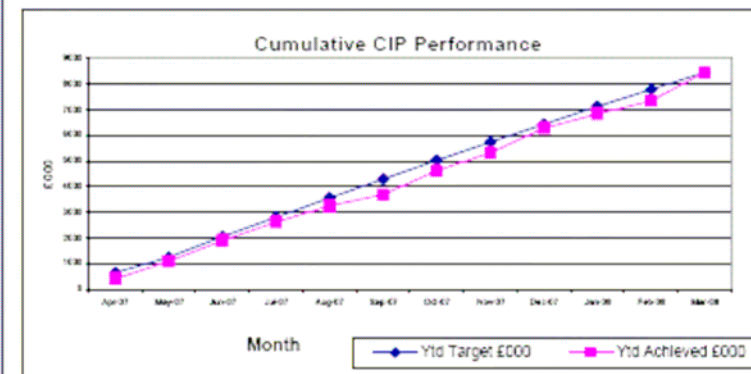
Green = > 3 rating



Green = better than plan



Green = better than plan



Green = better than plan

Amber = adverse variation of £100,000 against plan and Year End forecast on plan
 Red = adverse variation of £100,000 against plan and Year End forecast not on plan

Finance

Period: Month 12 (March 2008)

Finance

Period: Month 12 (March 2008)

