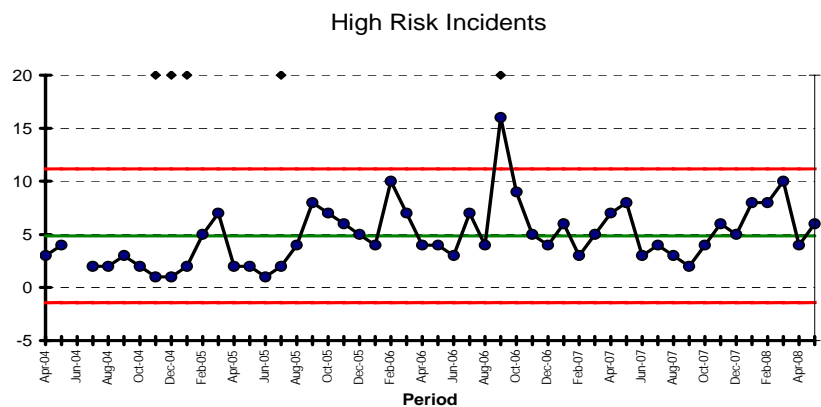


Clinical Quality

Period: May 2008

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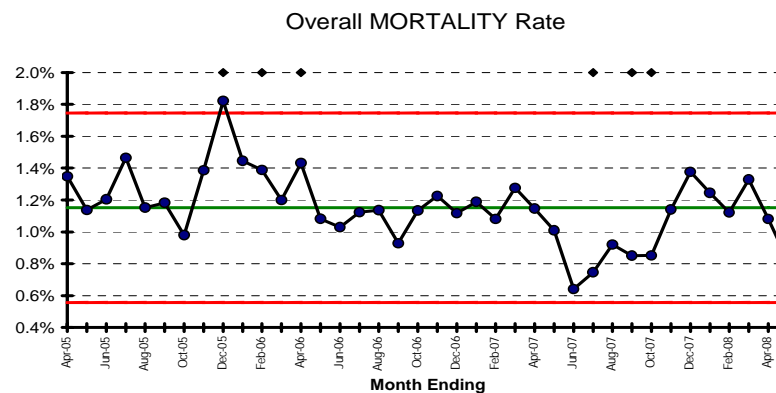
Adverse Incidents



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



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

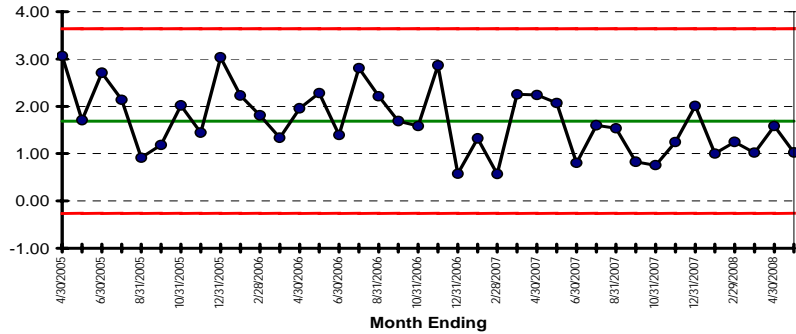
Readmissions

Clinical Quality

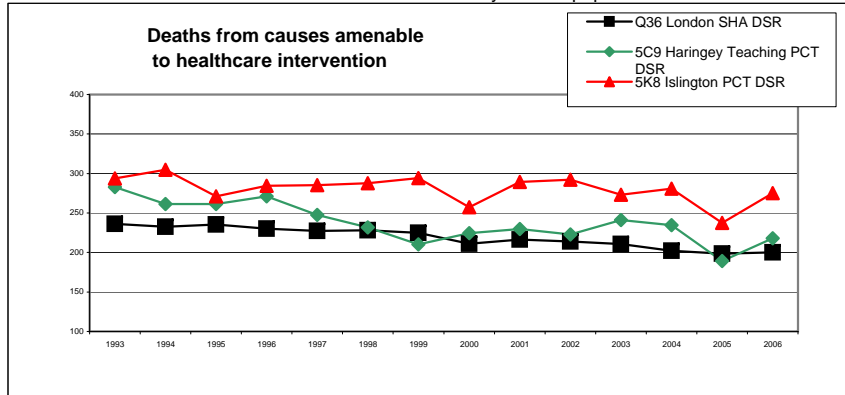
Period: May 2008

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



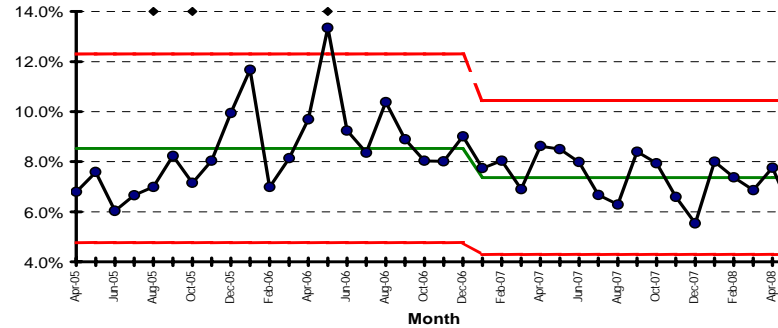
From Clinical and Health Outcomes Knowledge Base

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](#)

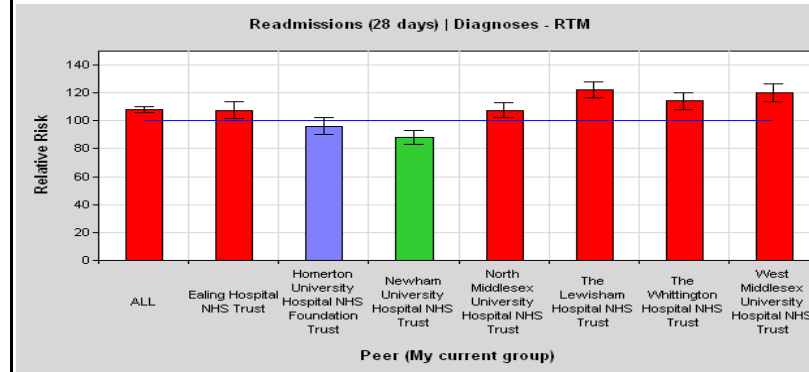
source: PAS. Related Condition = same HRG chapter. Benchmark = mean over the period

Related Condition 28-day Redmission rate



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

Benchmark



source: Dr Foster Intelligence. Relative Risk = index. Benchmark Year=2007/08

Note: uses a different methodology - ALL readmissions irrespective of whether related or not

Patient Experience

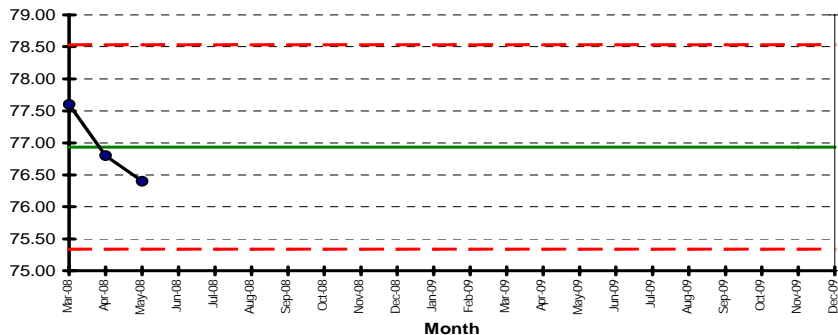
Period: May 2008

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Patient Survey

A summary scores has been calculated for the Whittington Promises

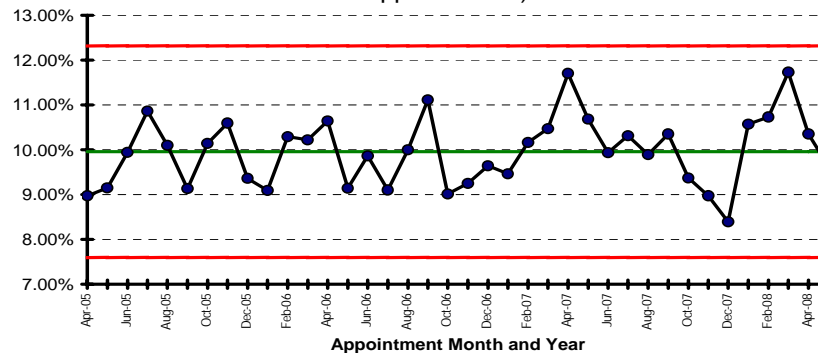
Combined Whittington Promise Score (all 5 questions)



Green = score >= 80%
 Amber = score between 75 and 79.9%
 Red = score below 75%
 Note: Scores transposed to a scale of 0 - 100

Hospital Cancellations

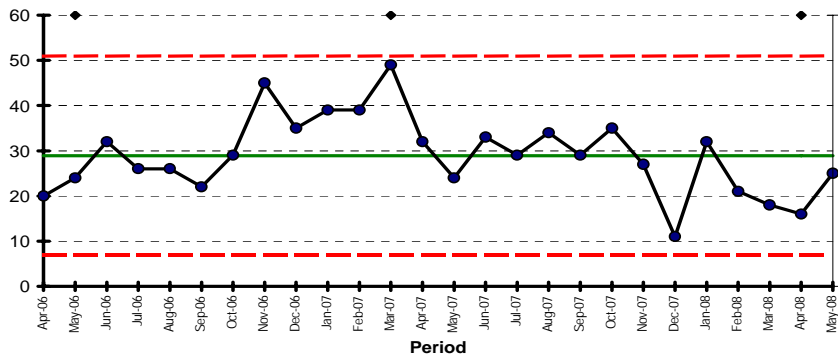
Cancellation Rate by Hospital (Total Outpatient Appointments)



Green: within normal SPC parameter or positive test AND progress to target (if specified)
 Amber: within normal SPC parameter or positive test AND no progress to target (if specified)
 Red: adverse SPC statistical tests met

Complaints - numbers

Formal Complaints Received

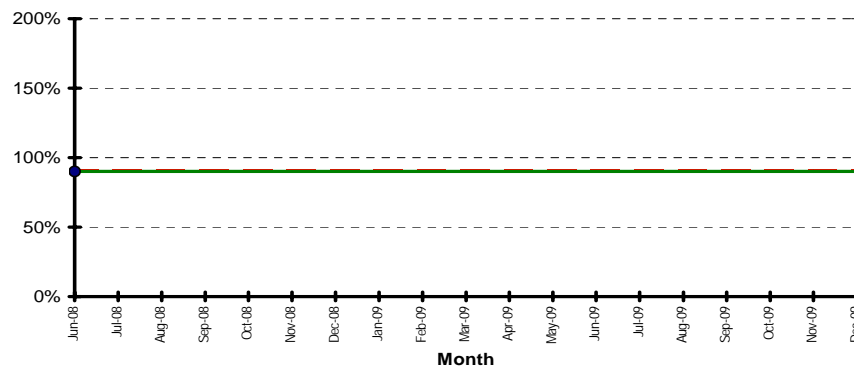


Green: within normal SPC parameter or positive test AND progress to target (if specified)
 Amber: within normal SPC parameter or positive test AND no progress to target (if specified)
 Red: adverse SPC statistical tests met

Ward Cleanliness

target = 90%

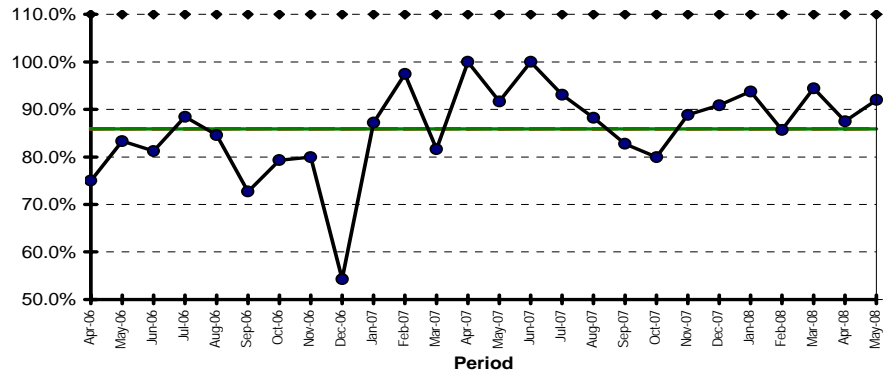
Ward Cleanliness Score



Note: New measurement methodology - no historic data for comparison purposes
 Green = target achieved and no adverse SPC tests met

Complaints - Response with 25 days

Formal Complaints Responded to Within the Standard



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

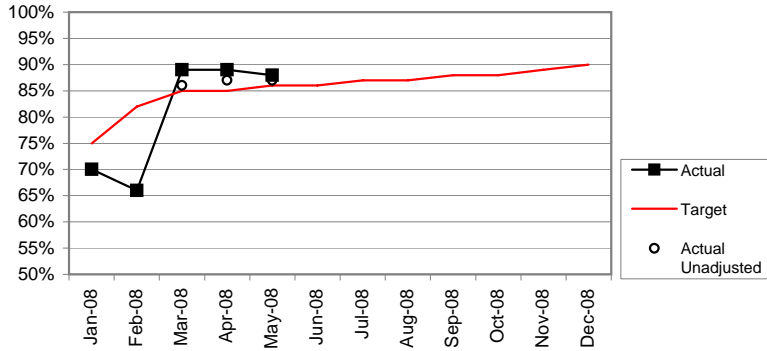
[Click here to return the Dashboard Report](#)

Priority Targets

18 weeks Referral to Treatment (RTT)

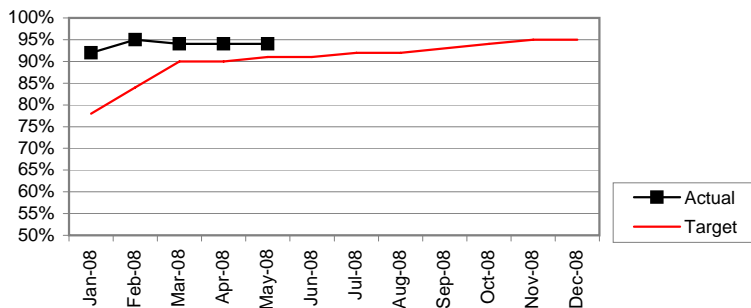
Admitted patients

% admitted patients treated within 18 weeks against target



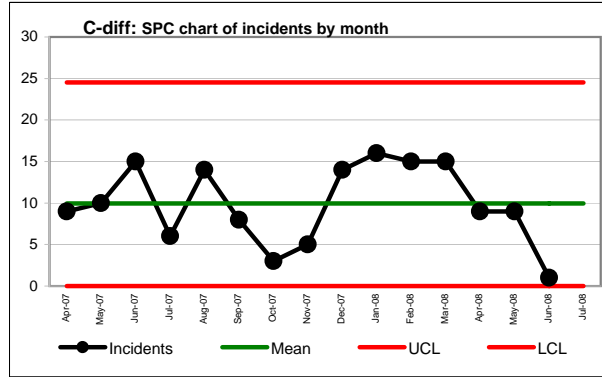
Non Admitted patients

% non-admitted patients treated within 18 weeks against target

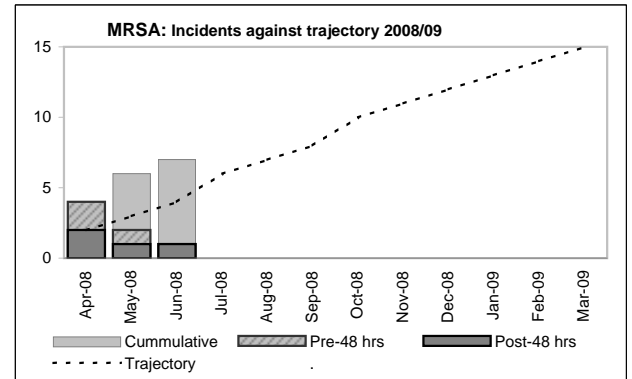
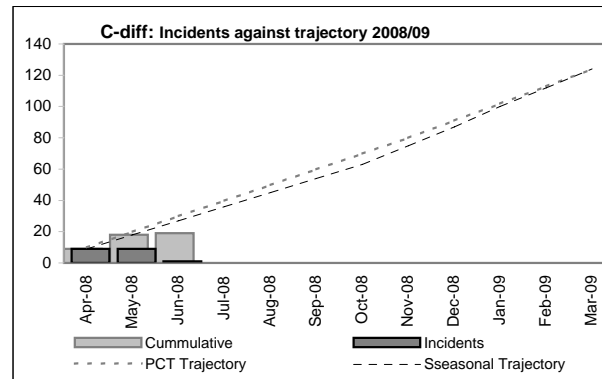
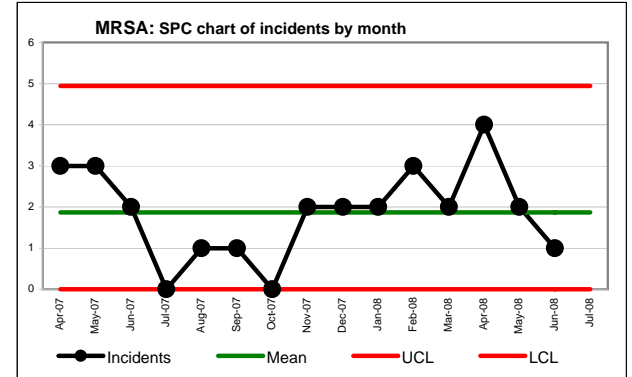


Healthcare Acquired Infections

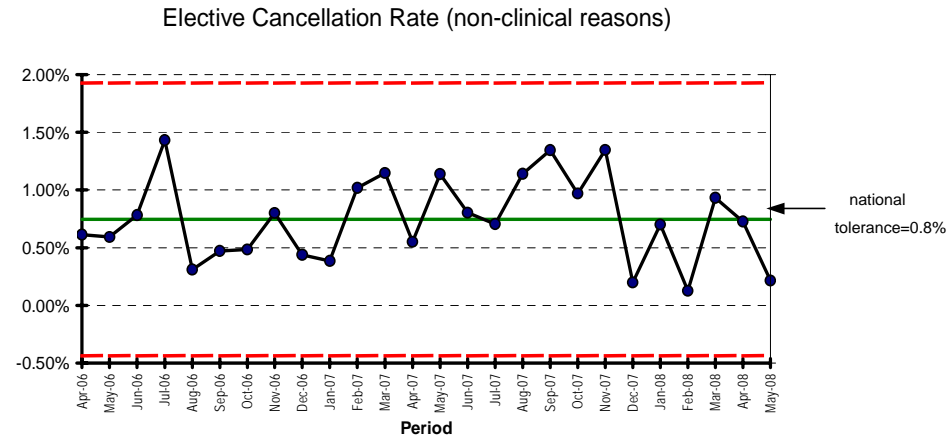
Clostridium difficile



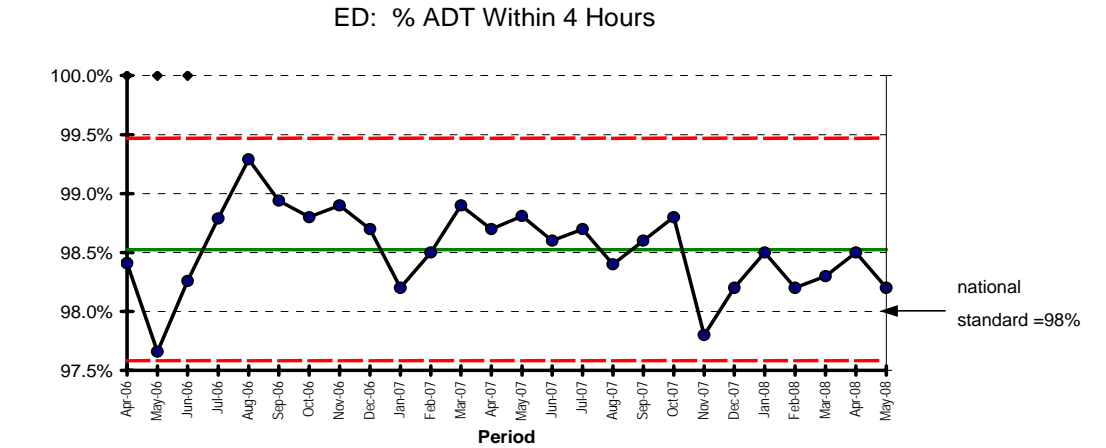
MRSA



Cancelled Operations for non-clinical reasons



ED attendances: % treated within 4 hours



Other national targets

National Target Indicators - reviewed by Monitor & Healthcare Commission					
Standard	Criteria	Target	May-08	YTD	Forecast
Reducing Mortality from Cancer					
Wait from GP Referral until Seen	% seen within 14 days	98%	100%	100.0%	100.0%
Wait from Decision to Treat until Treatment	% treated within 31 days	98%	100%	100.0%	100.0%
Wait from GP Urgent Referral until Treatment	% treated within 62 days	95%	100%	96.2%	97.0%
Inpatients waiting over 26 weeks		0	0	0	0
GP referred Outpatient waiting over 13 weeks		0	0	0	0
Ensuring patient right of redress following cancelled operations					
Operations cancelled for non-clinical reasons	% of elective admissions	<0.8%	0.21%	0.47%	0.50%
Offers of new binding date	% within 28 days	95%	100%	100.00%	100%
Delayed transfers of care					
Number of delayed bed-days			275	460	100%
% delayed patients as a % of all patients		<=3.5%	3.6%	3.0%	3%
Reducing Mortality from Heart Disease					
Wait from GP Referral until Seen in RACP Clinic	% seen within 14 days	100%	100%	100%	100%
Each national core standard	number of standards failed	0			

National Target Indicators - reviewed by the Healthcare Commission only (annual health check)					
Standard	Criteria	Target	May-08	YTD	Forecast
Supporting patient choice and booking					
Choice of dates offered for Outpatient Appointments	% of new referrals	100%	100%	100%	100%
Choice of dates offered for Elective Admission	% of decisions to treat	100%	100%	100%	100%
Emergency bed-days					
Number of emergency bed-days		8074	8,323	16,566	-
% Drop from last year	5% Reduction by 2008		-3%	2%	-
Drug misusers: information, screening and referral	Meeting 5 requirements	100%	100%		100%
Reducing inequalities in Infant Mortality					
Smoking in pregnancy at time of delivery	% of deliveries	<17%	9.7%	10.1%	10%
Rate of Breastfeeding at birth	% of deliveries	78%	89.7%	89.5%	89.50%
Obesity: compliance with NICE guidance 43		100%			100%
Participation in audits			n/a		
Stroke Care	new indicator-to be confirmed				
Data quality: ethnic coding	new indicator-to be confirmed				
Data Quality: maternity data	new indicator-to be confirmed				
Diagnostic			Overall		Green
Diagnostic Waits (non audiology)	% waiting within 13 weeks	100%	99%		
13 weeks Breaches		0	0	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	-	98.5%		

Strategy

MARKET SHARE

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)

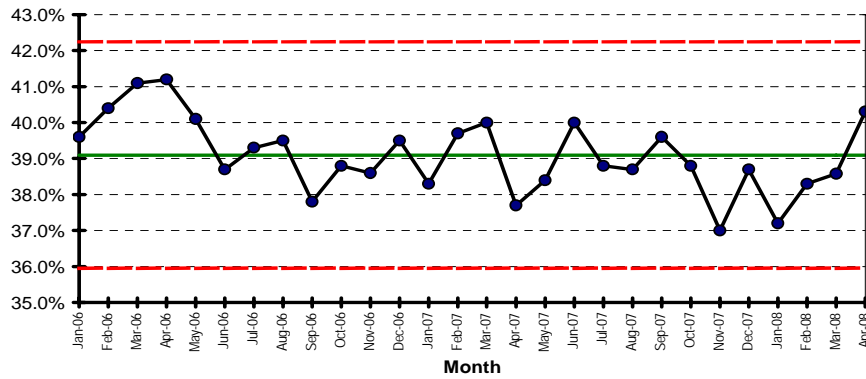
Red: adverse SPC statistical tests met

TARGET

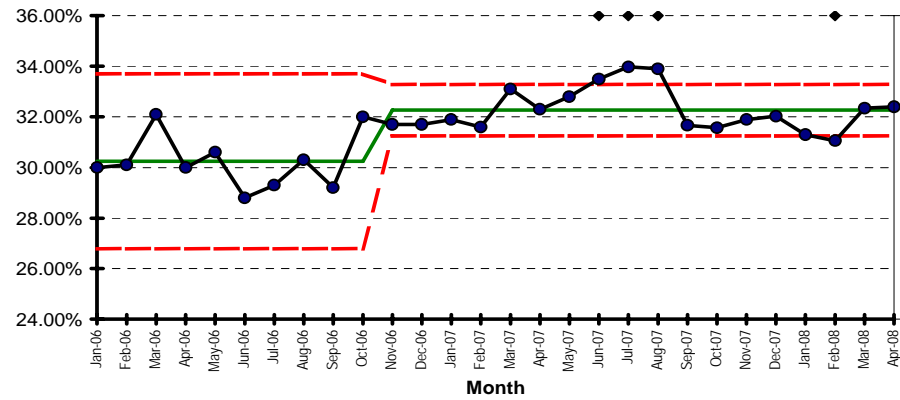
1% increase in Market Share for all Activity Types by March 2009

First Outpatient Attendances

Whittington: Islington First OP Attendances

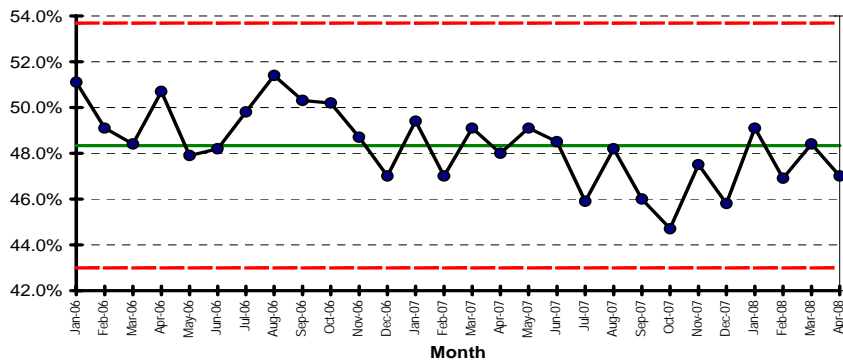


Whittington: Haringey First OP Attendances

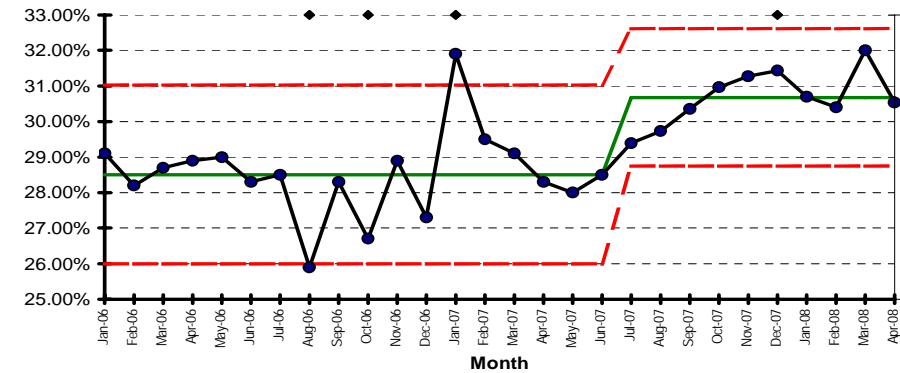


Non-Elective Admissions

Whittington: Market Share for Islington Non Elective Admissions



Whittington: Market Share for Haringey Non Elective Admissions

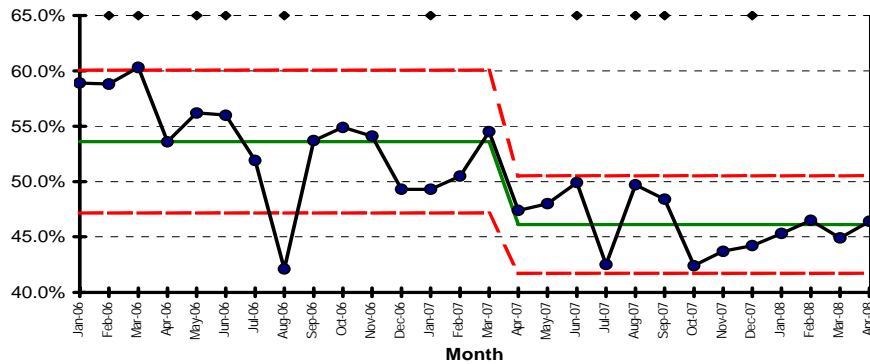


Strategy

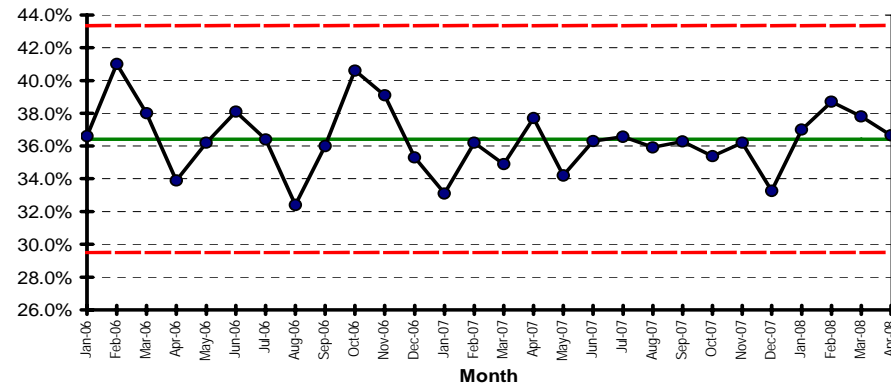
Day Case Surgery

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

Whittington: Market Share for Islington Day Case Surgery



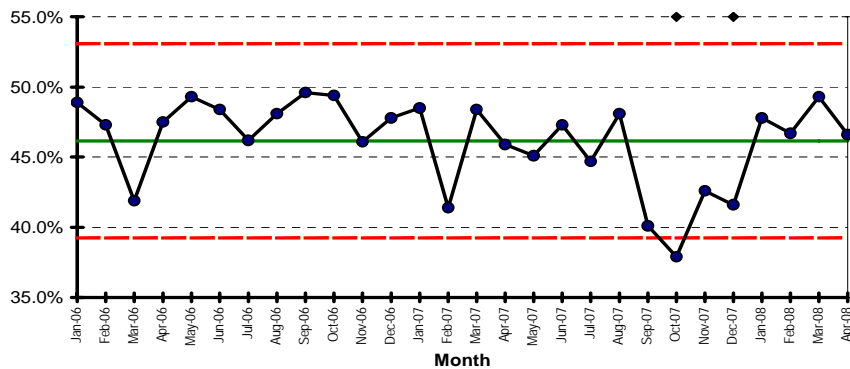
Whittington: Market Share for Haringey Day Case Surgery



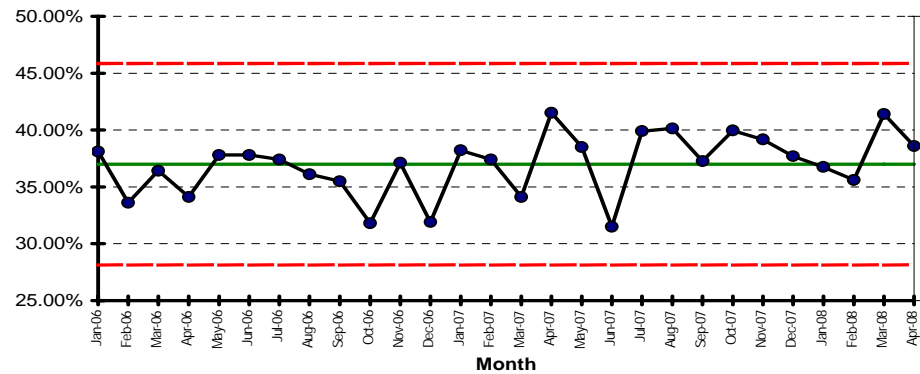
Note: Market distorted by University College Hospital and the Royal Free Hospital converting significant numbers of their Elective IP to Day Cases

Maternity Deliveries

Whittington: Market Share for Islington Maternity Deliveries



Whittington: Market Share for Haringey Maternity Deliveries

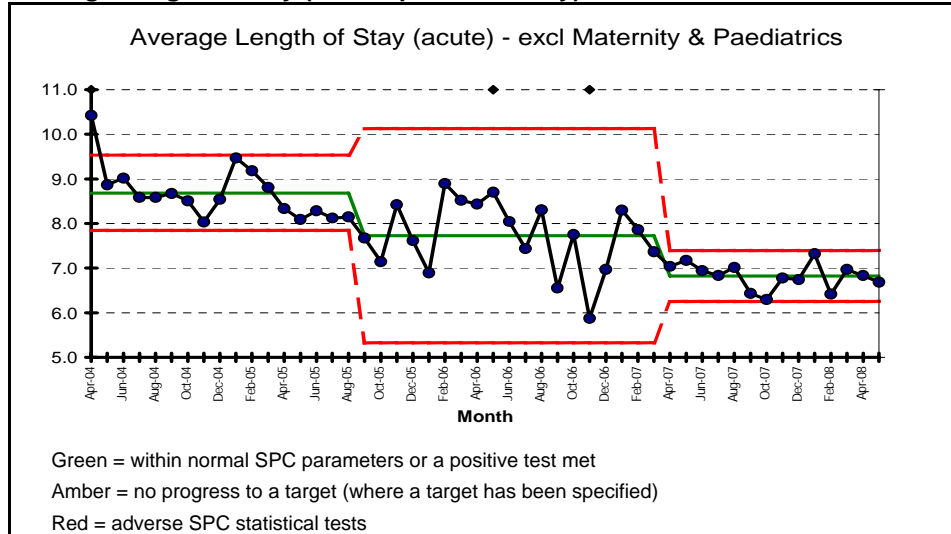


Workforce & Efficiency

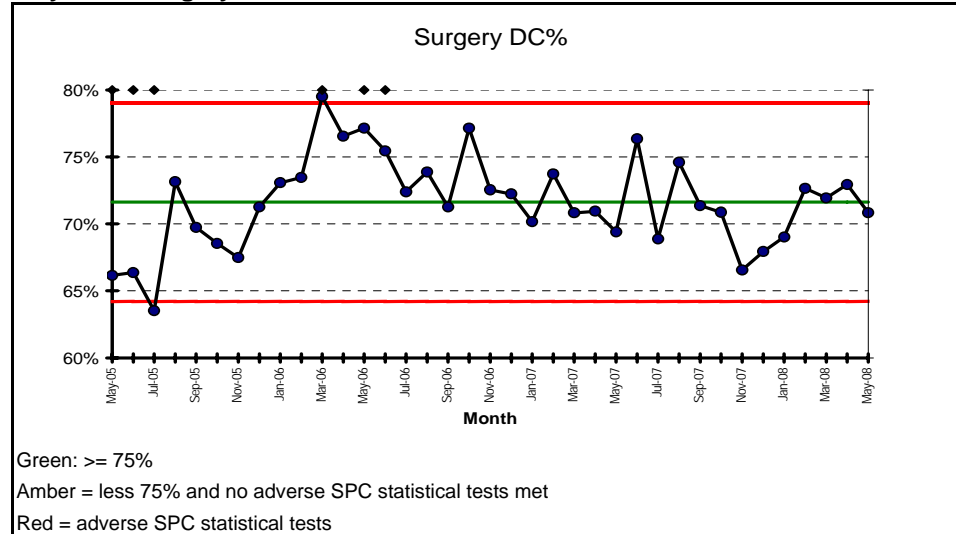
Period: May 2008

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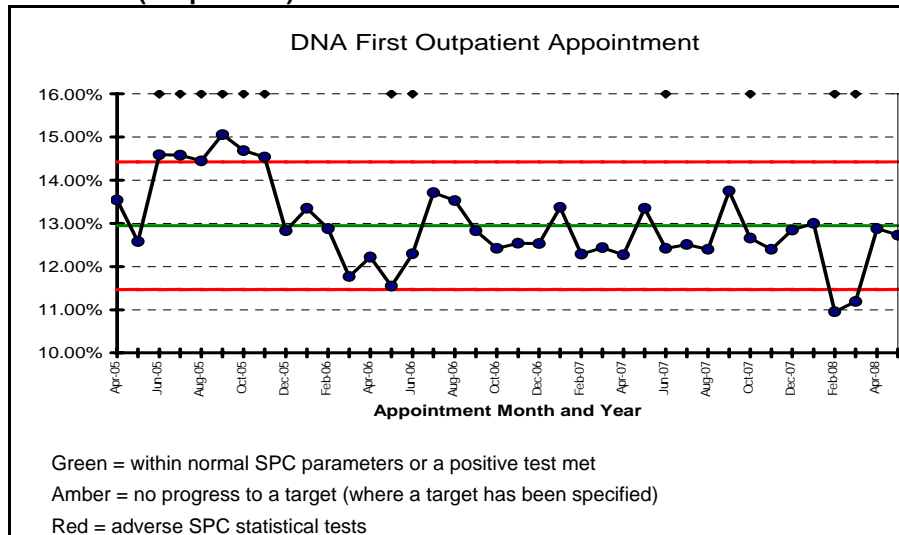
Average Length of Stay (acute specialties only)



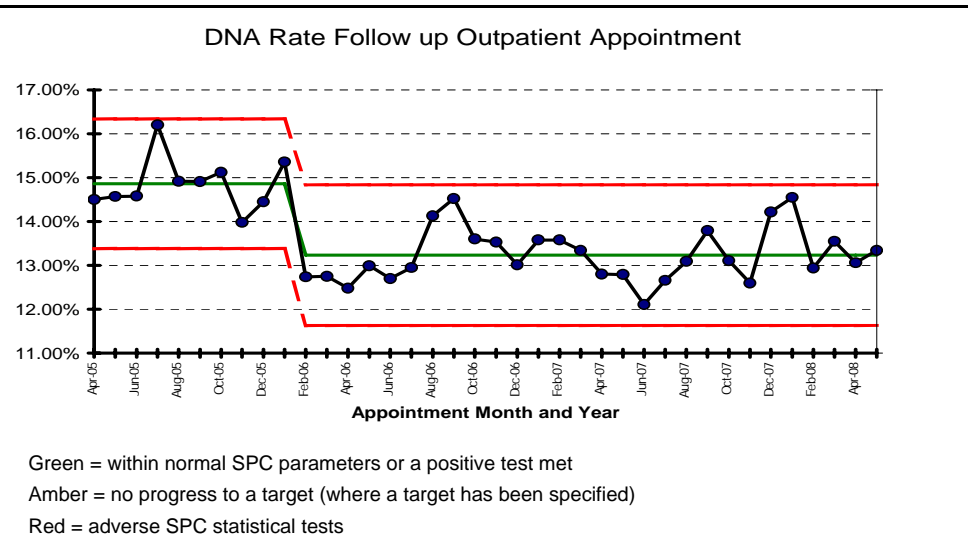
Day Case Surgery Rate



DNA Rate (Outpatients)

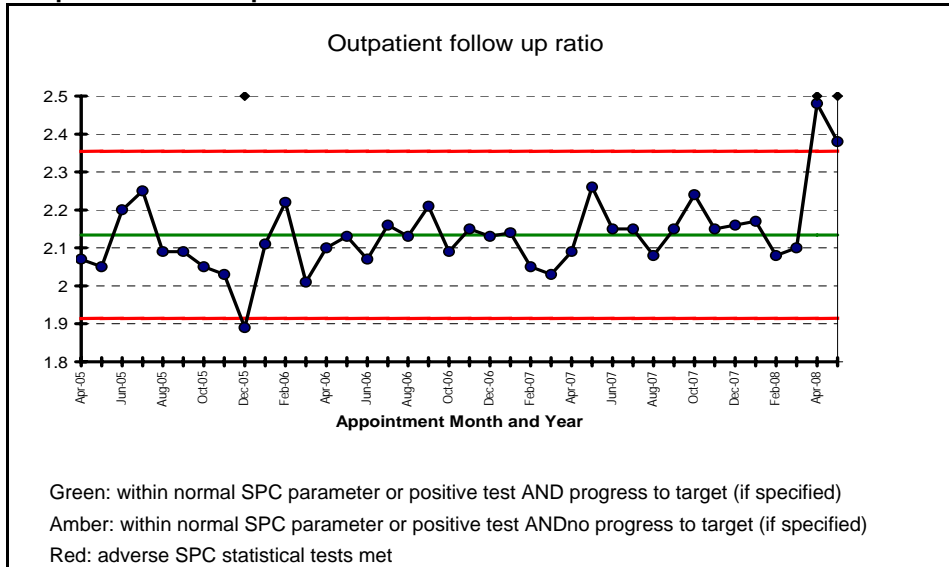


DNA Rate Follow up Outpatient Appointment

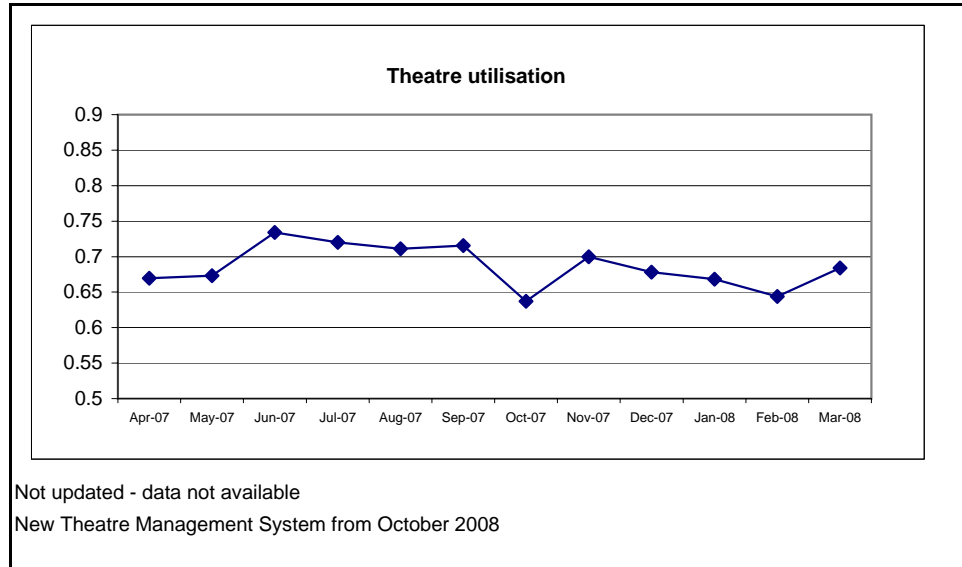


Workforce & Efficiency

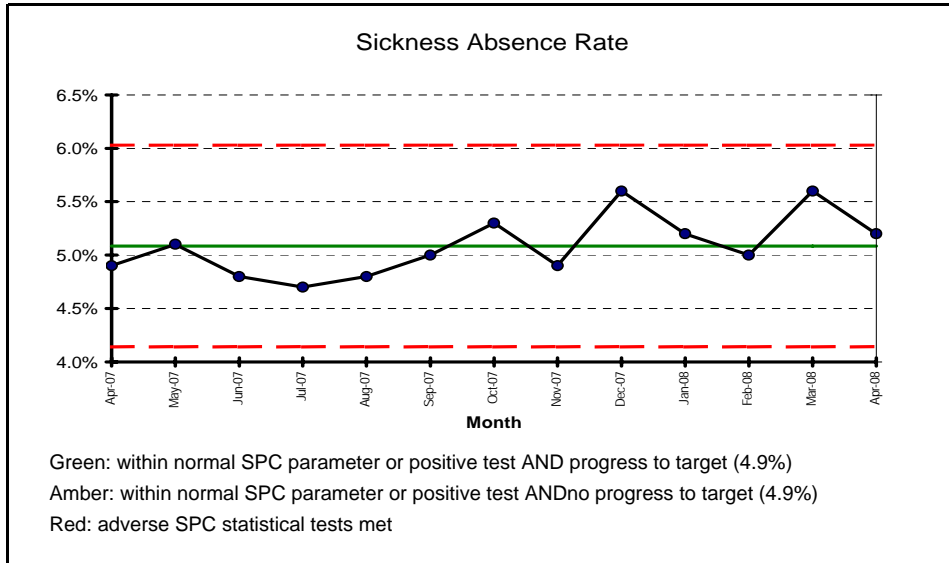
Outpatient Follow Up ratio



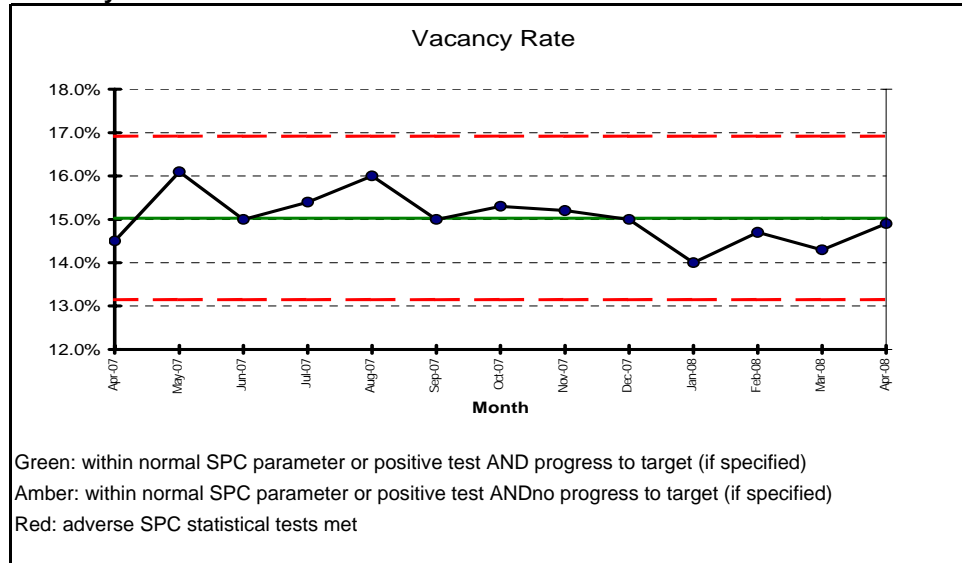
Theatre Utilisation



Sickness Absence Rate



Vacancy Rate



Finance

Period: June 2008

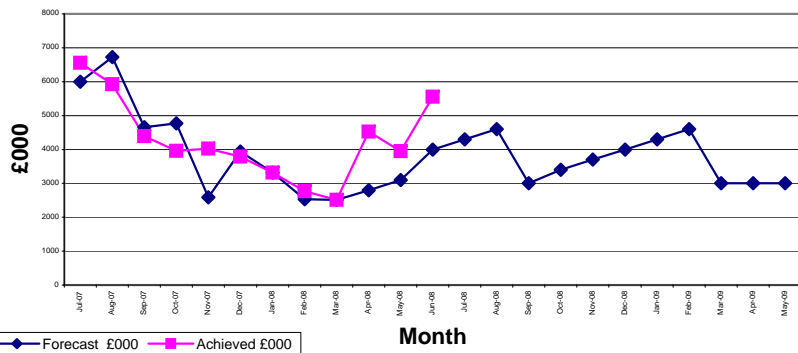
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Risk Rating

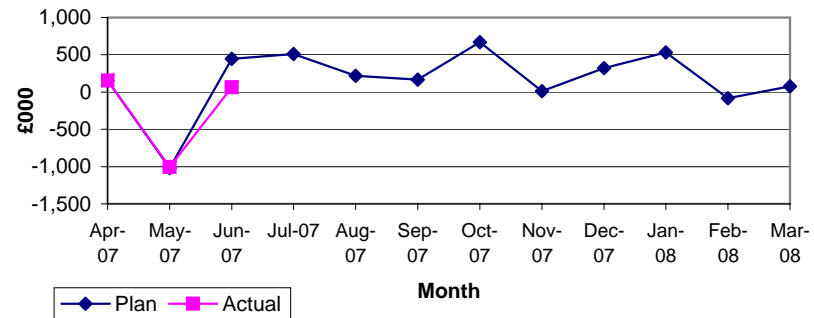
Weighting	Metric Description	Metric Value	Rating	Weighted Value
10%	EBITDA achieved (% of plan)	78.88	3	0.30
25%	EBITDA margin (%)	3.72	2	0.50
20%	Return on Assets (%)	-1.56	2	0.40
20%	I&E surplus margin (%)	-2.04	1	0.20
25%	Liquid ratio (days)	56.760	5	1.25
Overall rating				2.65

<3 = Red

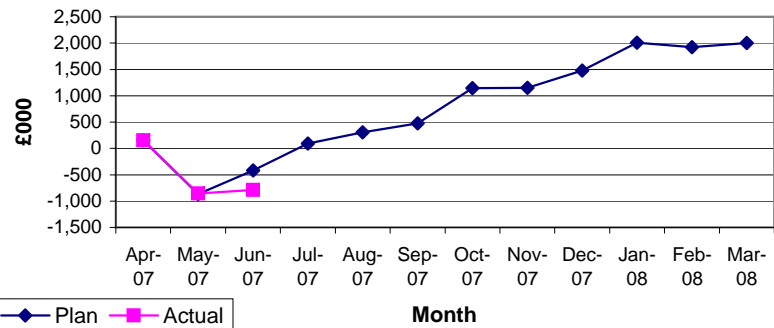
Rolling Cashflow Forecast



Overall I&E Plan - Monthly



Overall I&E Performance - Cumulative



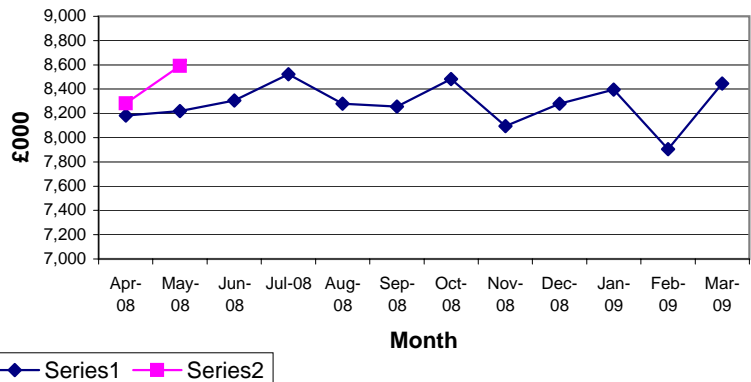
Forecast performance included here is a surplus of £800k against a planned surplus of £2m, the slippage is phased equally across the second half of the year, as some cost pressures do not impact in the early months

Finance

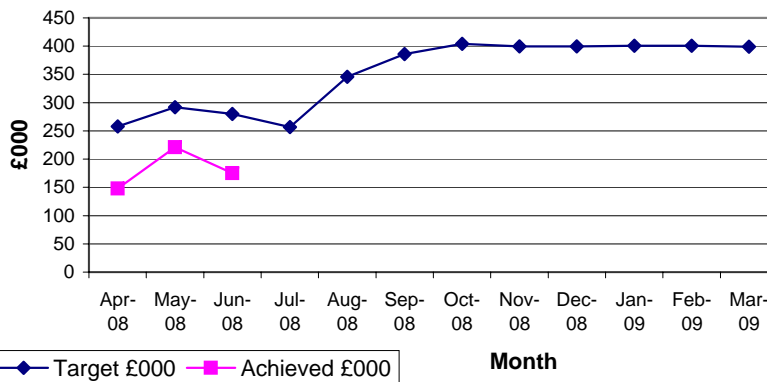
Period: June 2008

[Click here to return to Dashboard](#)

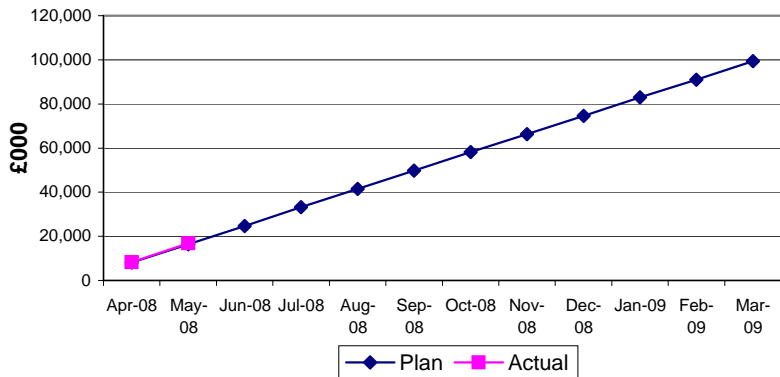
Performance against SLA - Monthly



Monthly CIP Performance

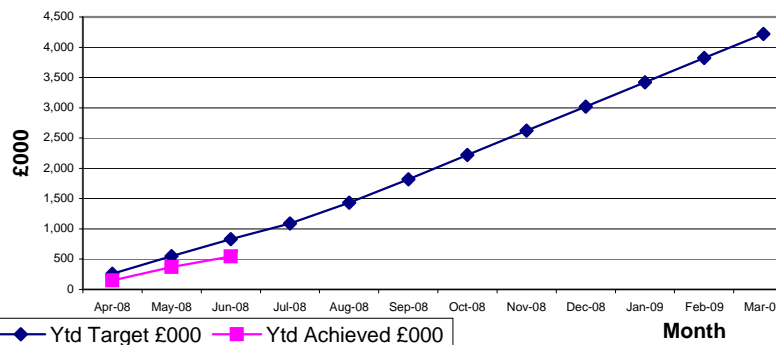


Cumulative performance against SLA



Activity was £473k above SLA targets after 2 months

Cumulative CIP Performance



cumulative performance is £286k below target at the end of June