

PERFORMANCE DASHBOARD REPORT

Month: September 2008



	Ratings	Annual I	nealth check	Risk Ratings		
External		Use of Resources	Quality of Service	Financial	Non-Financial	
Assessments	Current	Good	Good	3.40	Amber	
	Predicted	Good	Good	3.00	Green	

Clinical Quality			
Current Period	G		
Forecast Outturn	G		
Adverse Incidents	G		
Never Events			
Overall Mortality Rate	G		
Avoidable Mortality	G		
Readmission Rate	G		

Patient Experience			
Current Period	G		
Forecast Outturn	G		
Net Promoter Score	G		
Patients Survey Scores	G		
Complaints	G		
Hospital Cancellations	G		
Cleanliness	G		
Click here for Domain Summary			

Access and Targets			
Current Period	A		
Forecast Outturn	G		
National Targets - Monitor/Prov Agency	Α		
National Targets - Other	G		
18 week Referral to Treatment (RTT)	G		
Hospital Acquired Infections - MRSA	R		
Hospital Acquired Infections - C. diff	G		

Strategy				
Day Treatment Centre				
Additional activity against plan	G			
Strategic Redevelopment Projects				
% Target progress to date				
Market Share				
First Outpatient Activity	G			
Non-Elective Activity	G			
Day Case Surgery	G			
Maternity Deliveries	G			
Click here for Domain Summary				

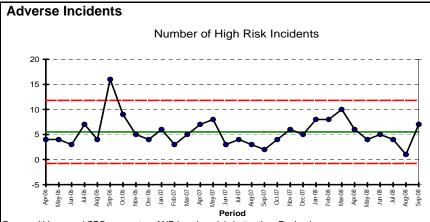
Current Period	G
Forecast Outturn	A
Length of Stay	G
DNA Rate	Α
Surgical DC % Rate	G
Theatre utilisation	А
OP Follow Up Ratio	А
Sickness Absence Rate	Α
Turnover Rate	G
Vacancy Rate	G

Finance				
Year to date Period			G	
Forecast Outturn			G	
updated to October 2008				
	,	YTD	FC	
Risk rating		G	G	
I&E variance from plan		G	G	
Actual I&E surplus/deficit		G	G	
Performance against SLA		G	G	
Cost Improvement Plan		G	G	
Cash position against plan		G	G	
Click here for Domain Sui	mmary			

Clinical Quality

Period: September 2008

note: all Dr Fosters data refreshed to July 2008



Green: within normal SPC parameters AND benchmark is better than England Amber: within normal SPC parameterAND benchmark is not above England Red: aupper control limit breach or run of 8 points above centre line (average)

source: Safeguard

Target under consideration

Never Events

to follow methodology to be agreed

Overall Mortality Rate

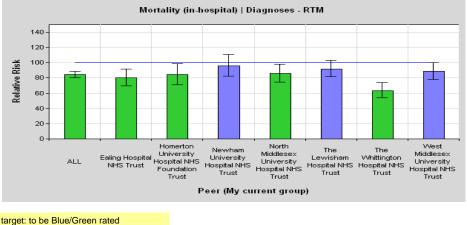
Benchmark (Dr Fosters Intelligence. Stardardised Mortality Rate, England, Annual)

Standardised on total England data = 100

April - July 2008 data, benchmark year = 2007/08

Trust	1 year SMR	Trust	1 year SMR
Royal Free Hospital	74	74 Newham University Hospital	
St George's Healthcare	80	Barking Havering & Redbridge Hospitals	100
Homerton University Hospital	81	W hipps Cross University Hospital	101
Guy's & St Thomas'	82	Queen Elizabeth Hospital Woolwich	104
The Whittington Hospital	84	Dartford & Gravesham	104
Bromley Hospitals	88	W est Middlesex University Hospital	105
Cheslsea & Westminster	88	Epsom & St Helier Univeristy 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
Target to be less than 100		•	

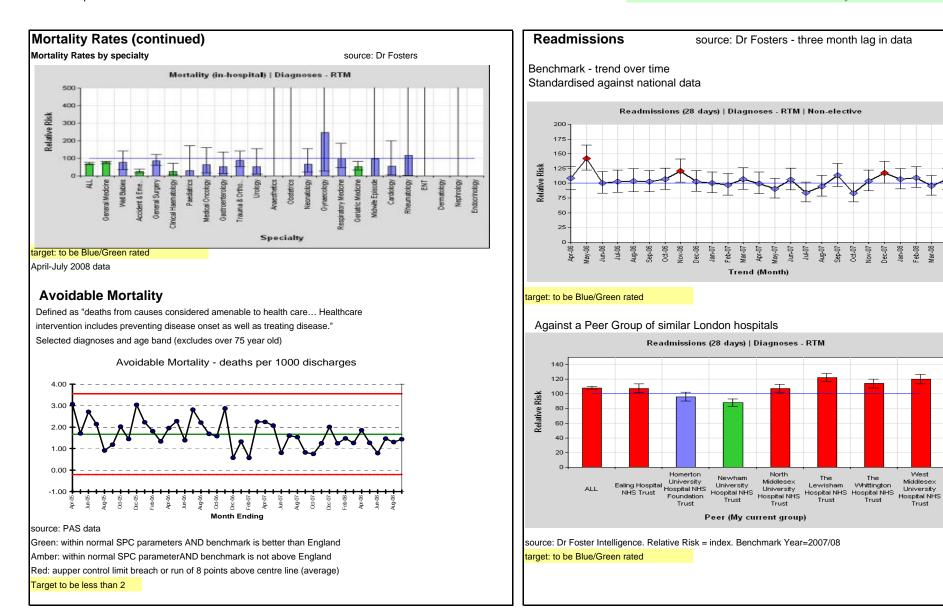
Against a Peer Group of similar London hospitals



Clinical Quality

Period: September 2008

note: all Dr Fosters data refreshed to July 2008

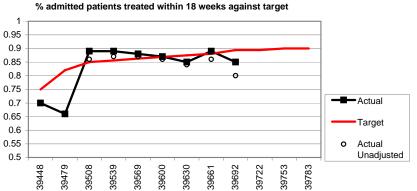


Access and Targets

Priority Targets

18 weeks Referral to Treatment (RTT)

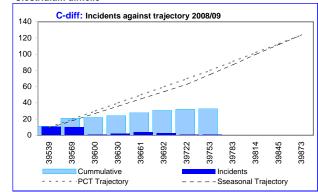
Admitted patients



Healthcare Acquired Infections

source: weekly Infection Control flash report

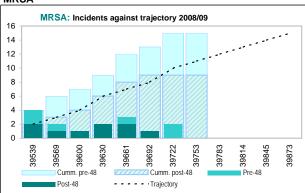
Clostridium difficile



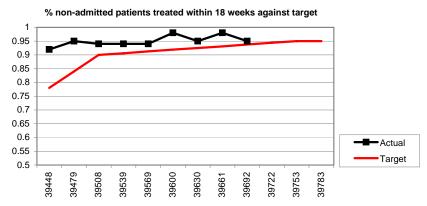
Click here to return the Dashboard Report

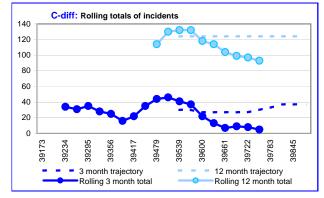
note: refreshed to first week of Novemebr

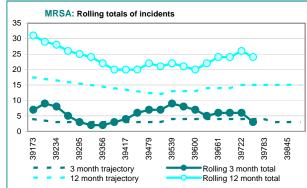
MRSA



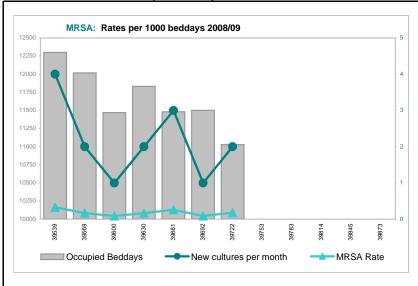
Non Admitted patients

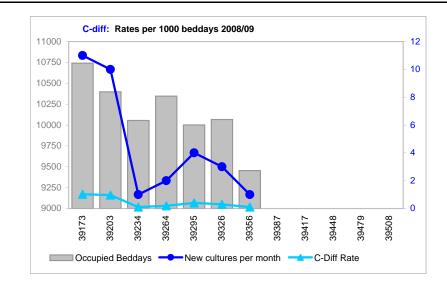






Infection Control: Cases per bed day





Source

Beddays: PAS via the WIS inpatient universe

New cultures: Infection Control team

Notes

Beddays are calculated based on patients in hospital during the reporting month

Only patients with an overnight stay are included (ie DC and patients with 0 LoS have been excluded)

C-Diff beddays also exclude any patients aged 2 and under as per national metric

Infection Control: Screening

% of emergency admitted patients

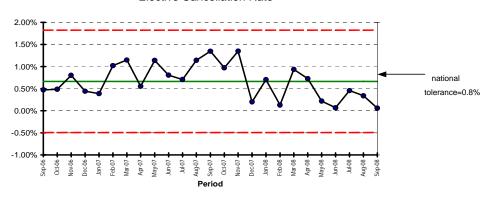
% of elective in-patients

% of day case patients

To follow

Cancelled Operations for non-clinical reasons

Elective Cancellation Rate



Other national targets

Wait from GP Referral until Seen in RACP Clinic

Each national core standard

source: PAS data

National Target Indicators - reviewed by Monitor & Healthcare Commission Standard Criteria Sep-08 Target YTD Forecast Reducing Mortality from Cancer Wait from GP Referral until Seen 98% 100% 100.0% 100.0% % seen within 14 days 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% 97.8% 98.0% 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% 0.06% 0.30% 0.40% 95% Offers of new binding date % within 28 days 100% 100.00% 100% Delayed transfers of care 133 2.034 Number of delayed bed-days 1017 % delayed patients as a % of all patients <=3.5% 1.6% 2.3% <3% Reducing Mortality from Heart Disease

% seen within 14 days

number of standards failed

100%

100%

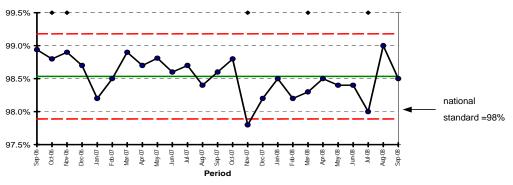
100%

100%

0

ED attendances: % treated within 4 hours

ED Waits - % Admit, Discharge or Transfer Within 4 Hours



source: EDIS data

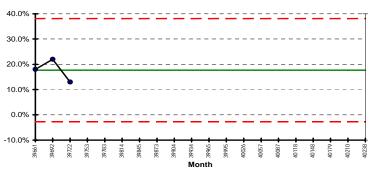
Standard	Criteria	Target	Sep-08	YTD	Forecas
Supporting patient choice and booking					
Choice of dates offered for Outpatient Appointments	% of new referrals	100%	100%	100%	100%
Choice of dates offered for Elective Admission	% of decisions to treat	100%	100%	100%	100%
Emergency bed-days					
Number of emergency bed-days		7500	7,103	37,693	-
% Drop from last year	5% Reduction by 2008 (2009	5 baseline)	-5%	-4%	-
Drug misusers: information, screening and referra	Meeting 5 requirements	100%	100%		100%
Reducing inequalities in Infant Mortality					
Smoking in pregnancy at time of delivery	% of deliveries	<17%	10.0%	8.6%	<10%
Rate of Breastfeeding at birth	% of deliveries	78%	88.4%	88.6%	90.0%
Obesity: compliance with NICE guidance 43			100%		100%
Participation in audits			n/a		
Stroke Care	new indicator-to be confirme	d			
Data quality: ethnic coding	new indicator-to be confirme	d			
Data Quality: maternity data	new indicator-to be confirme	d			
Diagnostic	Overall			Green	
Diagnostic Waits (non audiology)	% waiting within 13 weeks	100%	100%		
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	-	100.0%		

Patient Experience

Period: October 2008

Net Promoter Score

Net Promoter Score



source: internal Whittington surveys

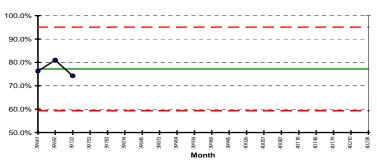
Green: within normal SPC parameter AND progress to target - to be agreed at Dec Trust Board

Amber: within normal SPC parameters and no progress to target

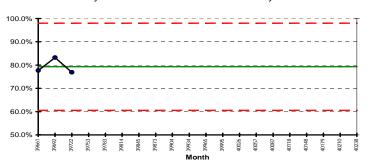
Red: lower control limit breach or run of 8 point below the centre line

Patient Survey

Overall how would you rate the care you received?



Were you involved in the decisions about your care?



Ward Cleanliness

source: internal Whittington surveys

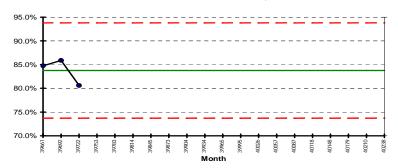
Green: within normal SPC parameter AND progress to target (90%)

Amber: within normal SPC parameters and no progress to target

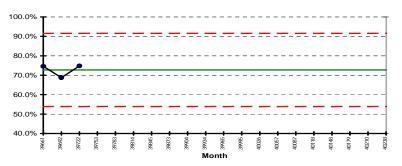
Red: lower control limit breach or run of 8 point below the centre line

Did you feel you were treated with dignity & respect?

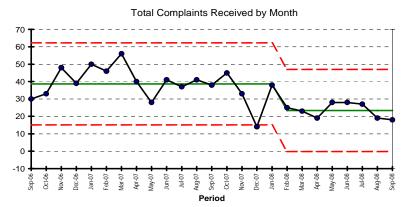
Month



How clean was the hospital, room or ward you were in?



Complaints - numbers



source: Safeguard

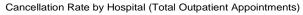
Green: within normal SPC parameter AND progress to downward step change

Amber: within normal SPC parameters and no progress to step change

Red: lower control limit breach or run of 8 point above the centre line

Hospital Cancellations

see Workforce & Efficiency section for DNA rates





source: PAS data

Green: within normal SPC parameter AND progress to target (9.5%)

Amber: within normal SPC parameters and no progress to target Red: lower control limit breach or run of 8 point above the centre line

Complaints - Dissatisfied

Escalation of Complaints	2004/05	2005/06	2006/07	2007/08	2008/09
% Dissatisfied Complainants	17%	14%	8%	11%	4%
No of complaints referred to Healthcare Commission	2	11	13	1	2
No of complaints referred to Ombudsman	0	1	0	0	0

Single sex accommodation

Breaches in single sex accommodation Data archive under development
Target underdevelopment
Report to follow

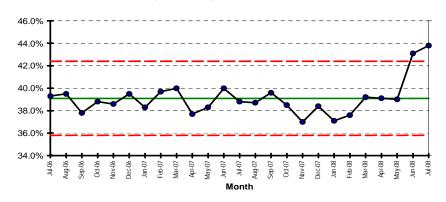
Strategy

Dr Fosters data refreshed to July 2008

MARKET SHARE

First Outpatient Attendances

Whittington: Islington First OP Attendances



Performance Thresholds

Green: within normal SPC parameter AND progress to target

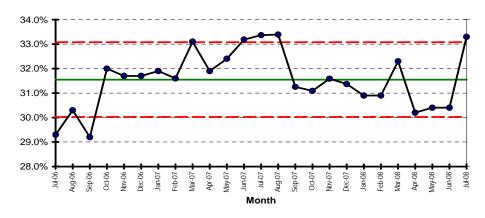
Amber: within normal SPC parameters and no progress to a target

Red: lower control limit breach or run of 8 point below the centre line

TARGET

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

Whittington: Haringey First OP Attendances



Non-Elective Admissions

Whittington: Market Share for Islington Non Elective Admissions

56.0%

54.0%

52.0%

50.0%

44.0%

44.0%

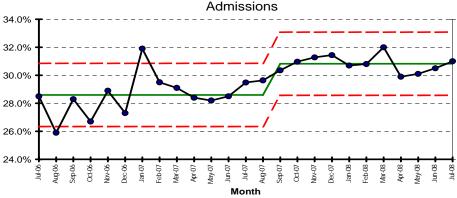
44.0%

44.0%

40.0%

Month

Whittington: Market Share for Haringey Non Elective

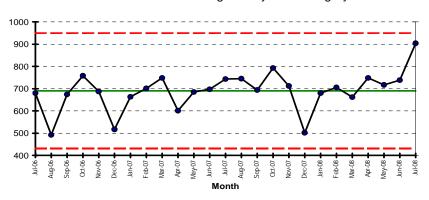


Strategy

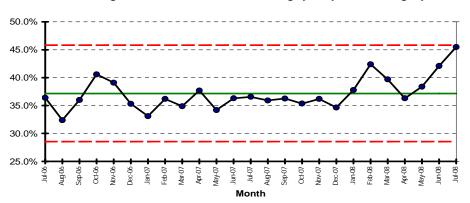
Day Case Surgery

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

Market Volume: Islington Day Case Surgery



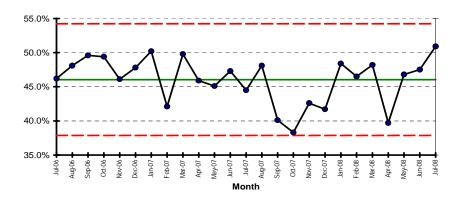
Whittington: Market Share for Haringey Day Case Surgery



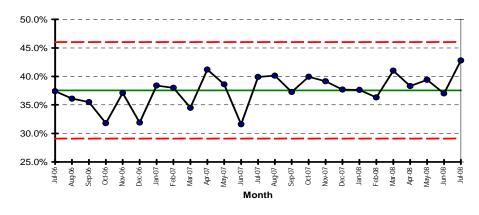
Note: Market distorted by University College Hospital and the Royal Free Hospital converting significant numbers of their Elective IP to Day Cases Note: Impact of the Day Treatment Centre starting to show

Maternity Deliveries

Whittington: Market Share for Islington Maternity Deliveries



Whittington: Market Share for Haringey Maternity Deliveries

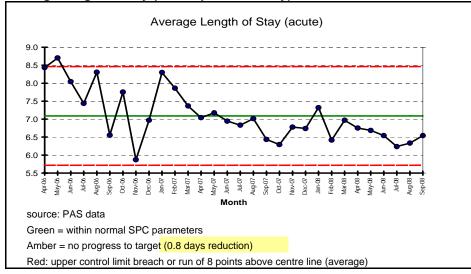


Strategy		
Competitor Analysis		
to follow		
Market Volume/size		
to follow		

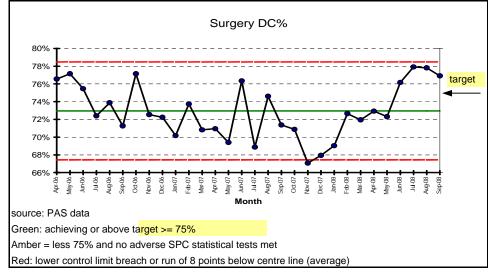
Workforce & Efficiency

Period: September 2008

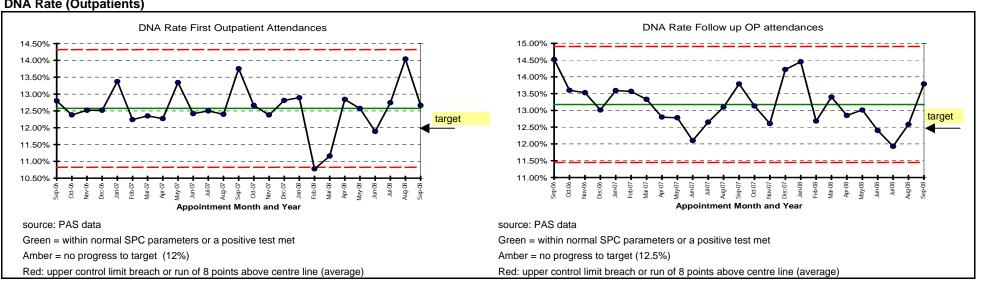
Average Length of Stay (acute specialties only)



Day Case Surgery Rate

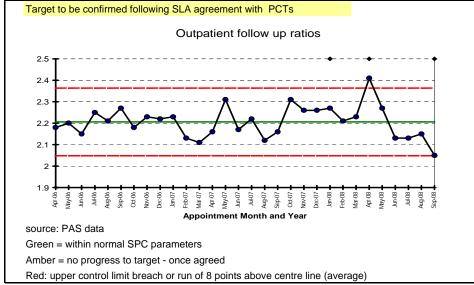


DNA Rate (Outpatients)



Workforce & Efficiency

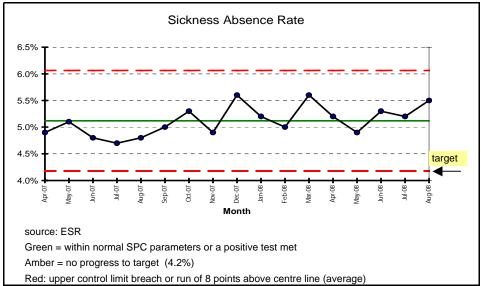
Outpatient Follow Up ratio



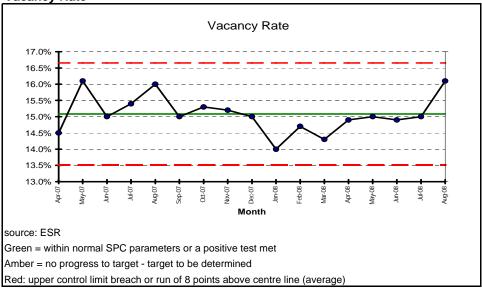
Theatre Utilisation

Not updated - data not available
New Theatre Management System from January 2009

Sickness Absence Rate



Vacancy Rate



Finance Charts detailing information included in dashboard

Risk rating

The rating is based on the Monitor methodology

A working capital facility of £11m is assumed for the liquidity calculation

TDA achieved (% of plan) TDA margin (%) Irn on Assets (%)	97.49 6.52	5 3	0.40 0.75
			0.75
irn on Assets (%)	0.07		
0.17 100010 (70)	-0.67	2	0.40
surplus margin (%)	1.55	3	0.60
id ratio (days)	40.90	5	1.25
	surplus margin (%) id ratio (days)	id ratio (days) 40.90	id ratio (days) 40.90 5

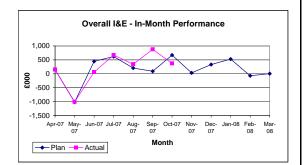
This is shown as GREEN in the dashboard as it is >= :

Year To Date Performance

This is shown as GREEN in the dashboard as it is >= :

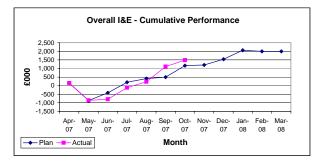
N/A

Forecast performance included here is a surplus of £2.08m, slightly above



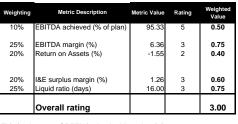
An in-month I&E surplus of £376k against a planned surplus of £671k giving an adverse variance of £295k in the month primarily due to high targets for CIP and income in Month 7 that weren't fully met.

Within this, income is £26k above plan, expenditure is £355k above plan and depreciation is £45k below plan this month

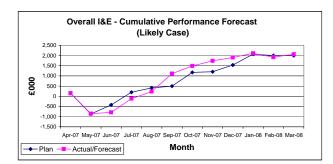


Cumulative performance is a surplus of £1,482k against a planned surplus of £1,170k giving a favourable variance of £312k.

Within this, income is £1,109k above plan, expenditure is £1,270k above plan, and depreciation is £456k below plan to date



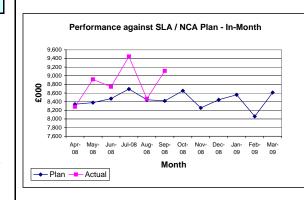
Full Year Forecast Performance

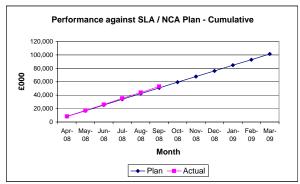


I&E forecast of £2.06m surplus, based on likely case. This is based on an updated 'bottom-up' Month 7 forecast and is primarily due to a number of non-recurrent items such as depreciation savings and income from PCTs for maternity and reducing

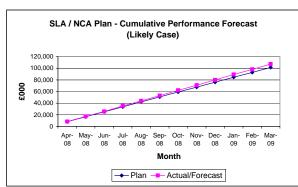
Performance against SLA - 1 month lag

September was a strong month, in line with the Month 6 forecast based on uncoded activity. Overperformance of £690k in-month is before taking into account additional income targets, e.g. for DTC activity.



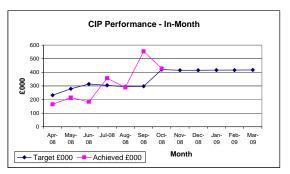


Activity was £2,215k above SLA plans (excluding additional targets such as DTC activity) after 6 months

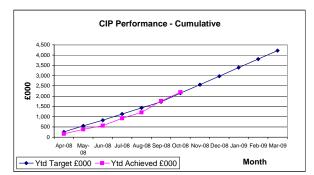


Forecast overperformance of around £6m at year-end, primarily due to increasing DTC activity. However, it is likely that this will reduce by around £1.6m due to non-payment for follow-up outpatient activity above target ratios agreed in the SLA.

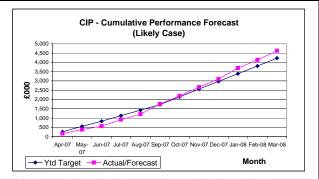
Cost Improvement Plan



CIP performance in October was on target. This was partially due to counting dditional income from Reckitt and Eddington wards towards the CIP figure, offsetting the CIP for closing these wards.



Cumulative performance was on target at the end of October.

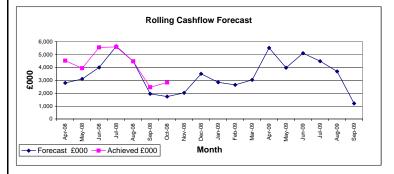


CIP is forecast to be £0.4m above plan at year-end, primarily due to including for the first time additional income due to Reckitt and Eddington wards being open for the winter. Recurrent CIP is forecast to be £150k below plan.

plan

In Month position for Month 7 (October 2008)

The closing Balance at the end of September was £2.8m which is higher than previously forecast due to unexpected payment of 2007/08 Market Forces Factor from the Department of Health.



Overachievement of forecast in October is primarily due to unexpected payment of a number of items relating to 07/08.