

CQUIN

Commissioning for Quality & Innovation

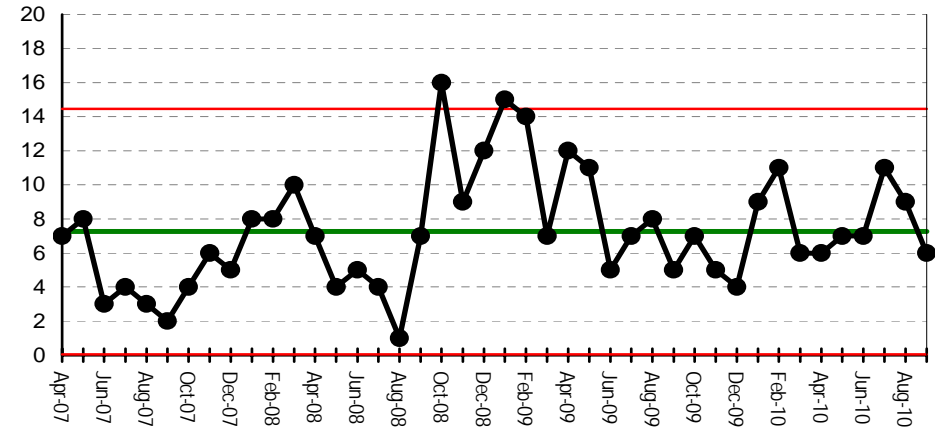
The 2010/11 Service Level Agreement has a number CQUIN schemes.

A summary and assessment of the schemes is provided below. A number of schemes are measured in Quarter 4 only (e.g. national IP patient survey) so have no YTD assessment (= grayed)

CQUIN	Ref	YTD	Forecast	Comment
VTE Assessment	N1			March 2011 target = 90%
Patient Experience	N2			National Survey started; high uncertainty
Global Trigger Tool	R1a			
ERP	R1b			
Improving Discharge Information	R2a			
Improving OP Information	R2c			Redesign of individual consultant OP letters?
Improved Discharging	R2b			
Dementia Pathway	R3			
Improved Care for LTC Patients	R4			Readmissions; requires pathway redesign
Hospital SMR	L1a			
Reduce Deaths in LRC	L1b			
SSISS	L1c			Additional resources planned
Nutritional Assessment	L2			
Choose and Book	L3			March 2011 target = 98% slot availability

- ERP = Enhanced recovery programme
- LTC = Long-term condition
- LRC = Low-risk condition
- SMR = Standardised mortality ratio
- SSISS = Surgical site infection surveillance service

Adverse Incidents



Green: within normal SPC parameters AND benchmark is within national upper quartile
 Amber: within normal SPC parameter AND benchmark is not above England
 Red: lower control limit breach or run of 8 points below centre line (average)
 source: pre-July 09: Safeguard, July 09 onwards: Datix

Target is to increase incident reporting to be in the top quartile of national benchmark performance

Never Events

The Trust has had no Never Events to date this year

Source Risk Management Department

- Never Events are :
- Wrong site surgery
- Retained instruments post surgery
- Wrong route chemotherapy
- Misplaced nasogastric or orogastric tube not detected prior to use
- Inpatient death from post-partum haemorrhage after elective caesarean section
- Intravenous administration of potassium chloride

source: NPSA

Overall Mortality Rate

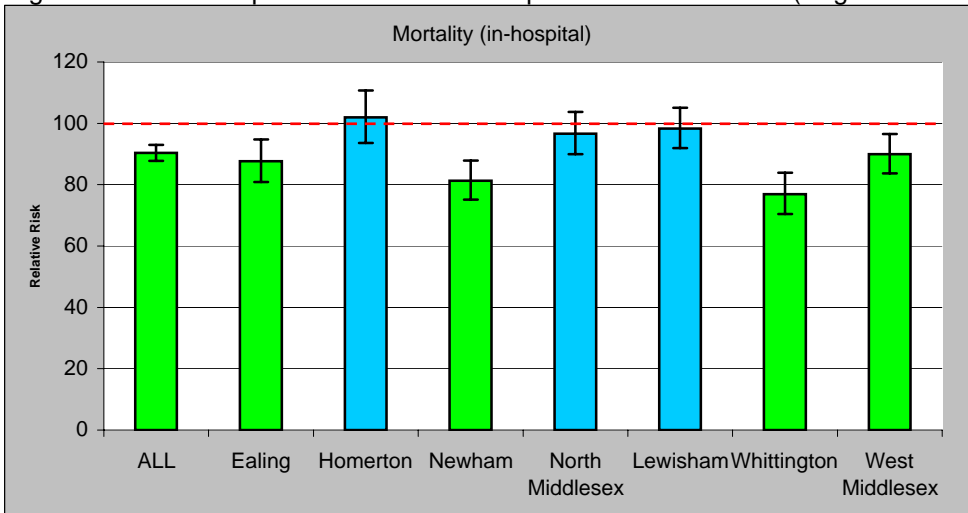
Benchmark (Dr Fosters Intelligence/NHS Choices. Standardised Mortality Rate, England)

Standardised on total England data = 100, Aug 2009 - Jul 2010)

Trust	RR	Trust	RR
Royal Free Hampstead	69	Ealing	88
University College London	70	Guy's and St Thomas'	89
Imperial College Healthcare	72	Hillingdon	90
Whittington	77	West Middlesex	90
St George's Healthcare	80	King's College	90
Barnet and Chase Farm	81	Whipps Cross	96
Newham	81	North Middlesex	97
Epsom and St Heliers	82	Lewisham	98
Barts and the London	85	South London Healthcare	99
North West London	86	Homerton	102
Kingston	86	Mayday Healthcare	106
Chelsea and Westminster	86	Barking, Havering and Redbridge	109

Target to be less than 100

Against a Peer Group of similar London hospitals - last 12 months (Aug 09 - Jul 10)

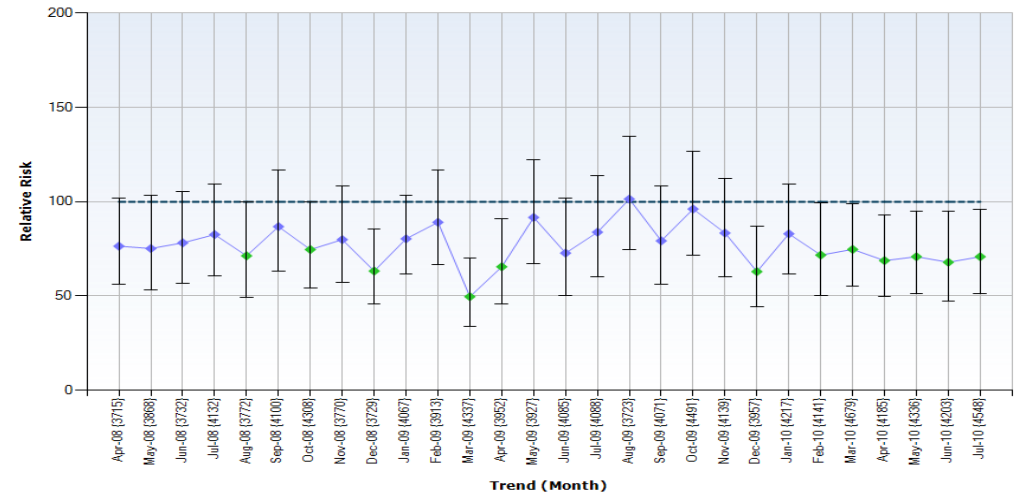


target: to be Blue/Green rated

source: Dr Foster

note: refresh of Dr Fosters available for July 2010. Trust data refreshed to September 2010

Mortality Rates over time



target: to be Blue/Green rated

Deaths in low risk conditions

The construction of this indicator is still under discussion between Dr Foster and the Care Quality Commission

The current Dr Foster patient safety indicator is shown below

In the 12 months to	Volume of cases	rate per 1000 admissions	National rate per 1000 admissions
Apr-10	8	0.37	0.98
May-10	6	0.27	0.98
Jun-10	Not available		
Jul-10	5	0.23	0.84

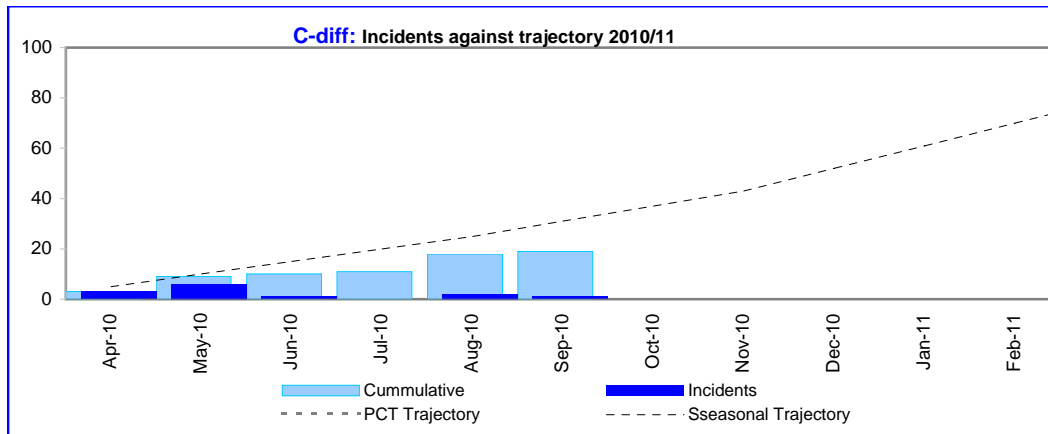
Notes

1. Calculated on a rolling 12 months basis (2 months in arrears)
2. All cases are investigated by a senior clinician
3. Trend data not currently available

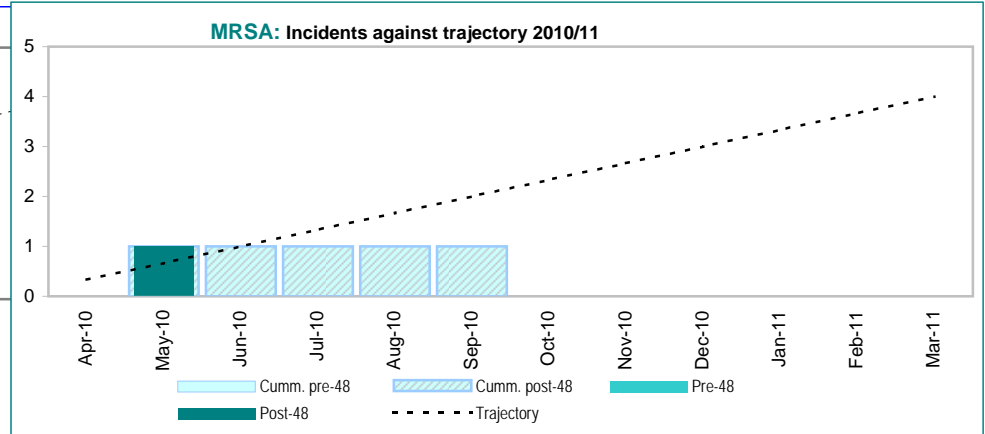
Healthcare Acquired Infections

Contains September data on a month to date basis

Clostridium difficile

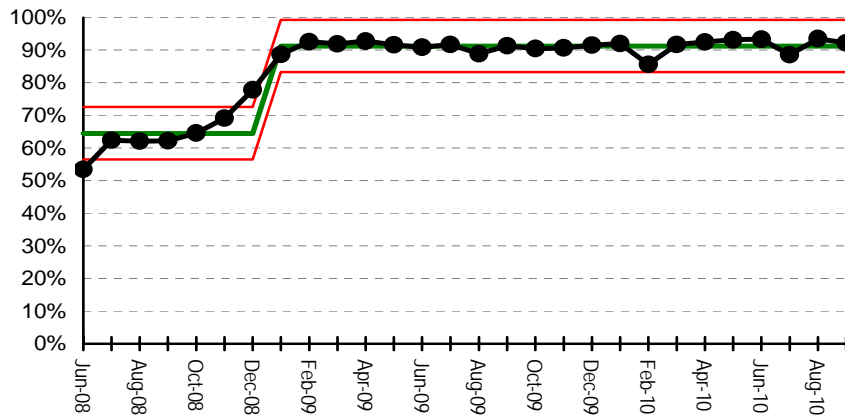


MRSA

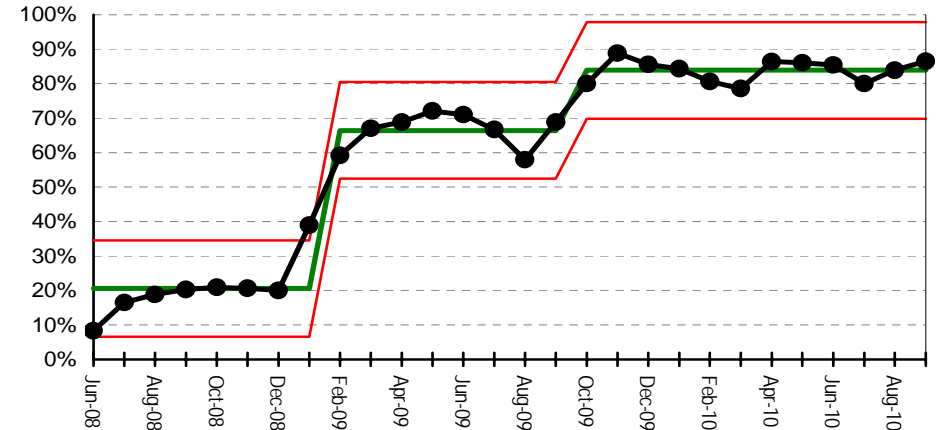


MRSA Screening compliance

Emergency Patients



Elective Patients



Source: PAS and Anglia ICE

Data now includes day case screening performance