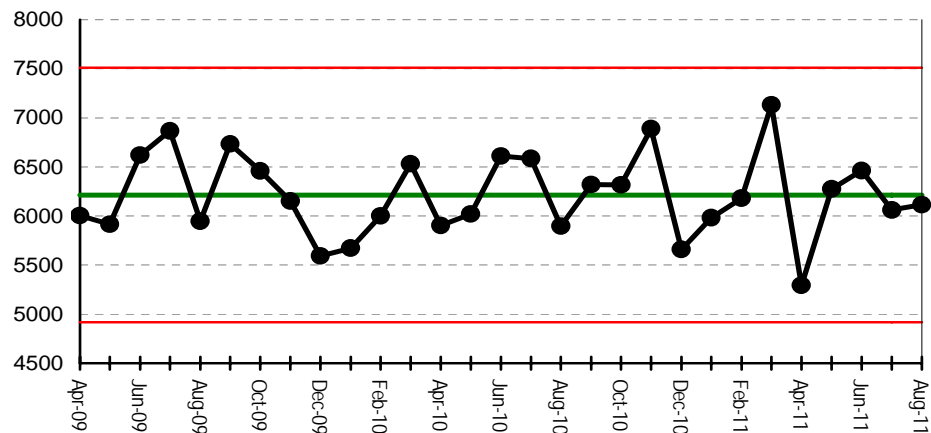


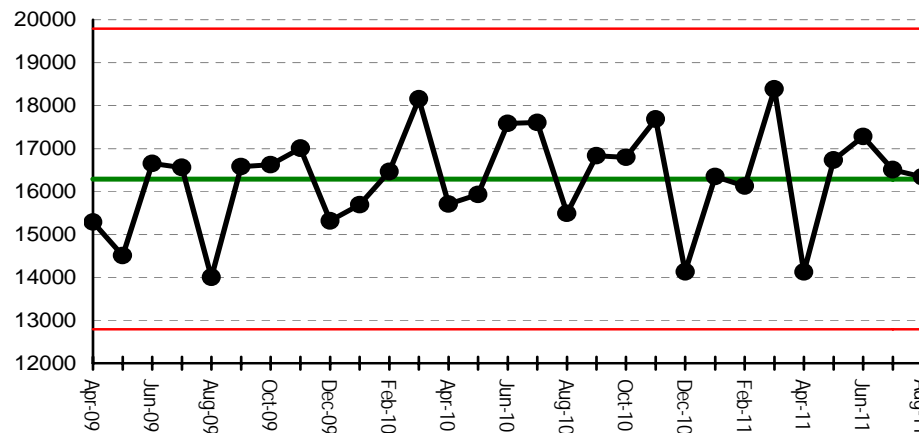
Outpatient Indicators

Activity - Acute Clinics

OP First attendances

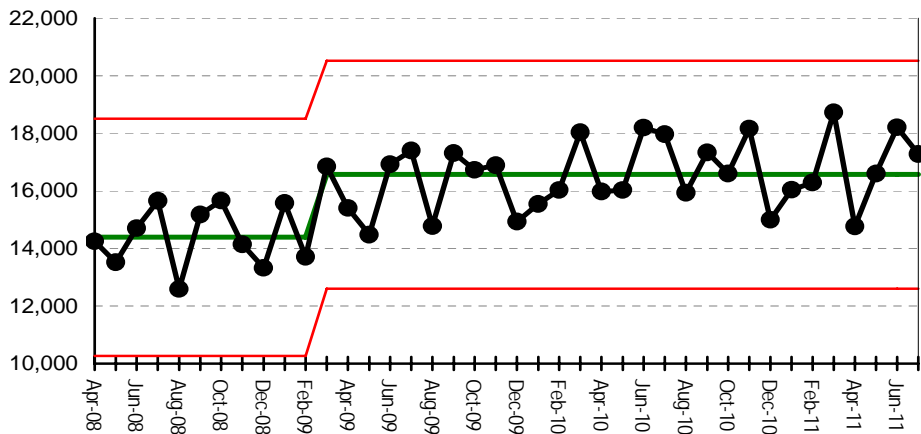


OP Follow-up attendances

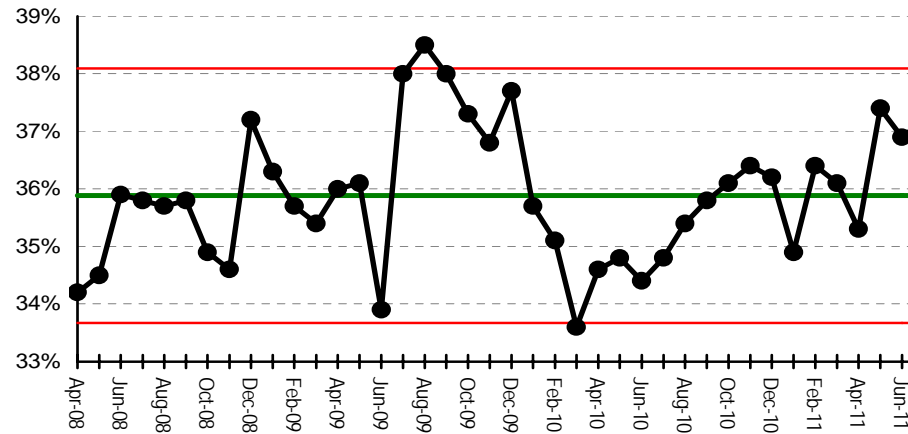


Source: OP attendance data - PAS

Market Volume



Market Share



Source: Dr Foster (data available to May 11)

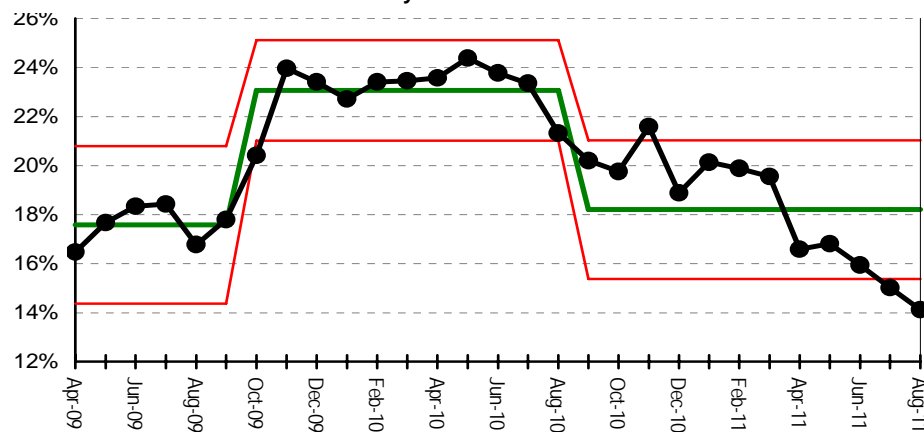
Market volume and share are for Islington and Haringey PCT patients to acute services first appointments

Outpatient indicators

Acute Clinics		Consultant to consultant activity			Outpatient follow-up ratio		
		Target	Month	Q2	Target	Month	Q2
Medicine	Cardiology	36%	18%	17%	1.43	2.09	2.33
	Diabetic Medicine	30%	67%	53%	5.96	18.93	18.87
	Elderly Care	48%	23%	30%	2.16	3.68	3.15
	Endocrinology	20%	23%	22%	2.96	2.57	3.24
	Gastroenterology	24%	17%	17%	1.79	2.38	2.43
	General Medicine	40%	28%	25%	2.66	6.93	7.30
	Haematology	35%	16%	18%	6.46	7.18	7.10
	Nephrology	29%	31%	25%	5.82	3.41	3.44
	Neurology	28%	11%	12%	1.20	0.78	0.89
	Pain	37%	30%	29%	1.82	5.00	4.02
	Rheumatology	17%	19%	19%	3.75	5.18	4.90
Thoracic Medicine	37%	47%	48%	2.23	2.54	2.25	
Surgery	Dermatology	9%	3%	3%	1.89	1.64	1.73
	ENT	18%	9%	9%	1.07	1.18	1.20
	General Surgery	23%	18%	17%	1.63	1.26	1.51
	Oncology		50%	56%	4.50	11.43	10.06
	Ophthalmology	24%	18%	16%	2.61	2.65	2.62
	Plastic Surgery	41%	75%	65%	1.53	0.00	0.05
	Trauma & Orthopaedics	51%	9%	9%	1.68	1.91	1.86
	Urology	25%	17%	20%	2.09	1.85	2.16
Women & Children	Gynaecology	27%	11%	9%	1.17	1.52	1.44
	Maternity	6%	6%	6%	2.47	3.37	3.30
	Paediatrics	29%	17%	22%	1.34	1.44	1.65

down to target is good

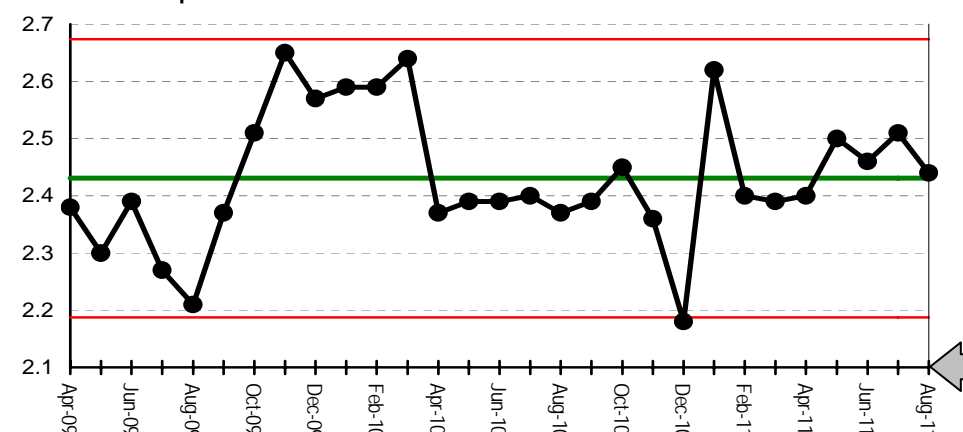
Overall consultant to consultant activity



Source: PAS data

Standard: The SLA target in 2011-12 is the London median per specialty.

Overall follow-up ratio



Source: PAS data

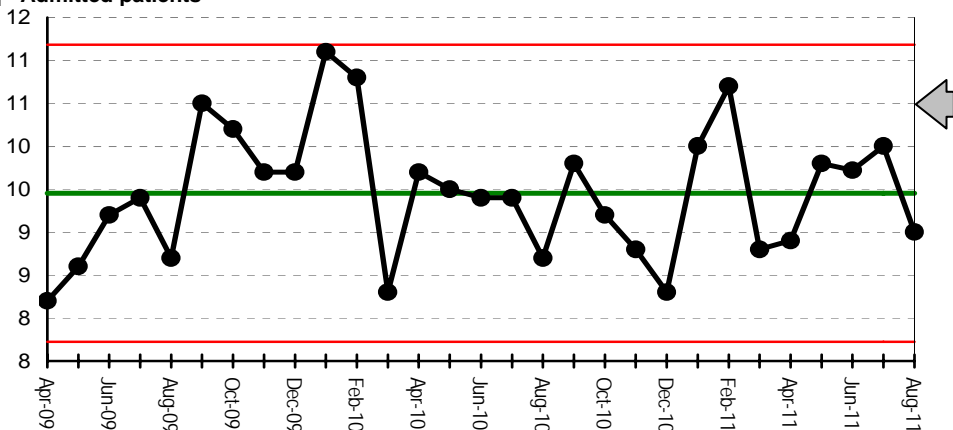
Standard: SLA target 2011-12 is the London median per specialty. Overall internal target 2:1

18 weeks Referral to Treatment (RTT) indicators

low is good for all 18 weeks measures

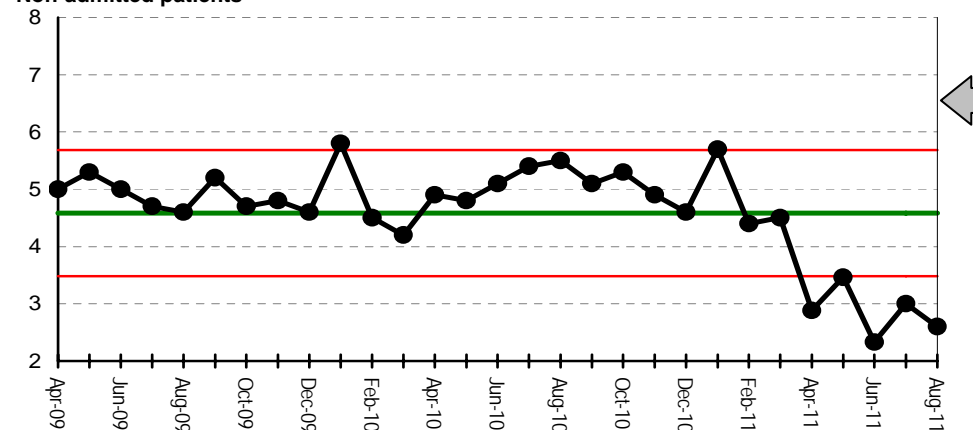
Median Wait for treatment (weeks)

Admitted patients



Standard: Maximum threshold of 11.1 weeks for admitted patients

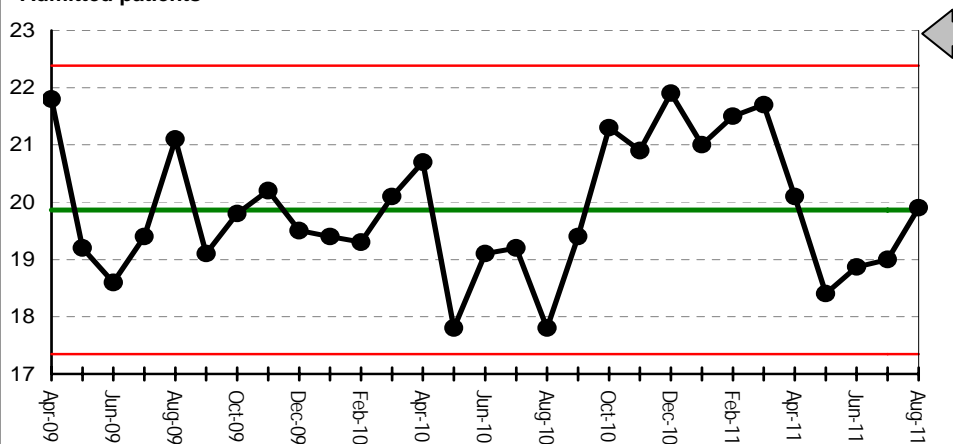
Non-admitted patients



Standard: Maximum threshold of 6.6 weeks for non-admitted patients

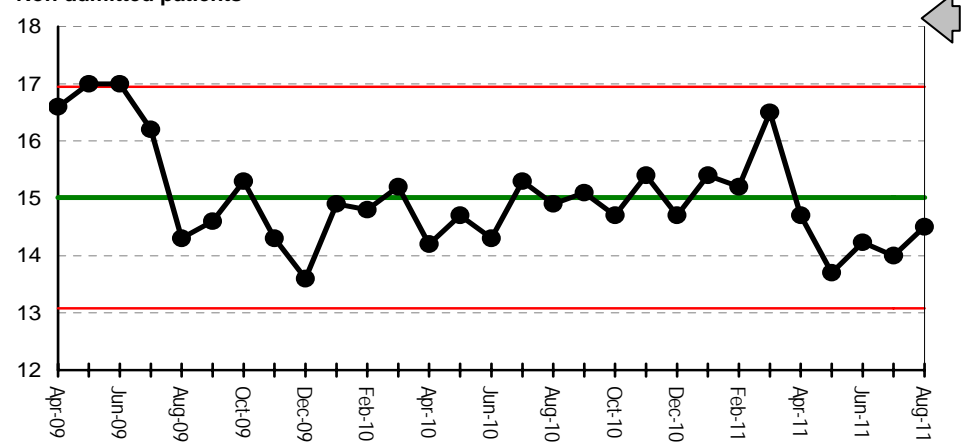
95th Percentile Wait for Treatment (weeks)

Admitted patients



Standard: Maximum threshold of 23 weeks for admitted patients

Non-admitted patients



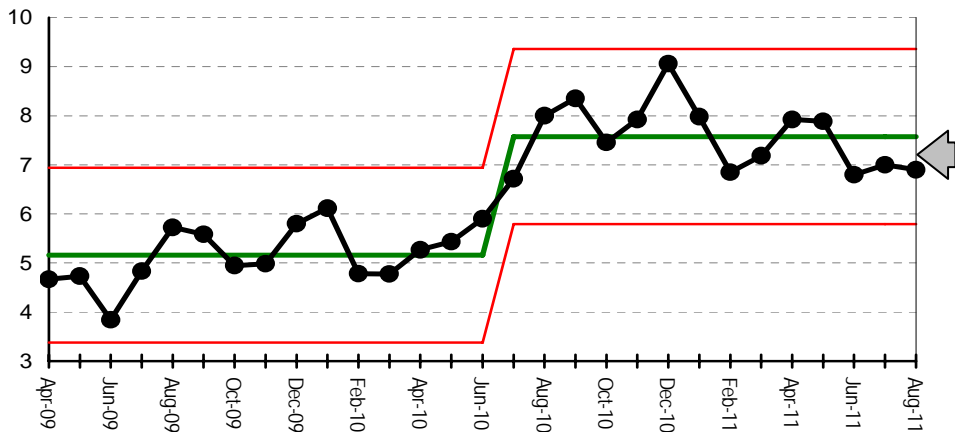
Standard: Maximum threshold of 18.3 weeks for non-admitted patients

Source: 18 week monthly report for all median and 95th percentile waits

18 weeks Referral to Treatment (RTT) indicators

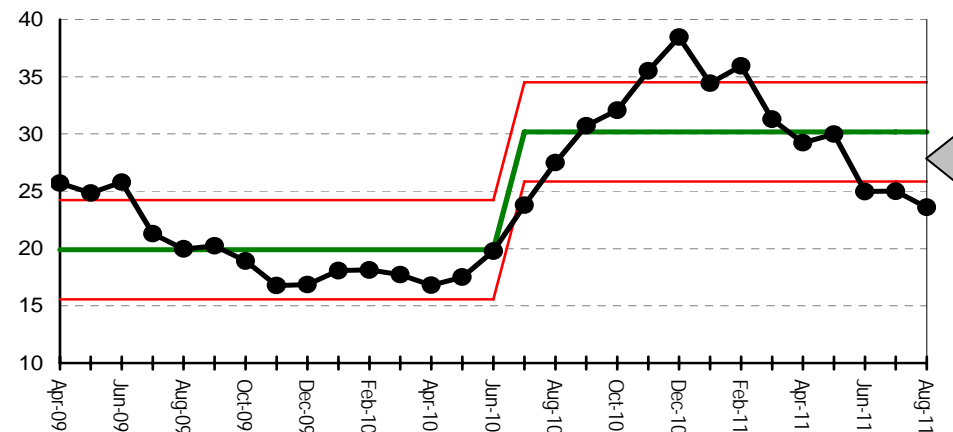
low is good for all 18 weeks measures

Median wait for all untreated patients (weeks)



Standard: Maximum threshold of 7.2 weeks for untreated patients

95th Percentile Wait for all untreated patients (weeks)



Standard: Maximum threshold of 28 weeks for untreated patients

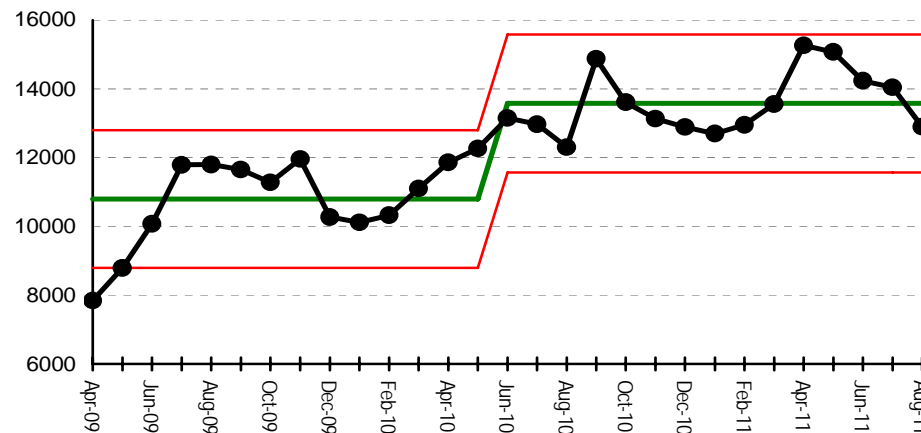
Diagnostic Waits

Patients waiting from referral until seen

% within	Aug-11	YTD
6 weeks	99.7%	99.2%

Source: DM01 monthly central return

Number of untreated patients

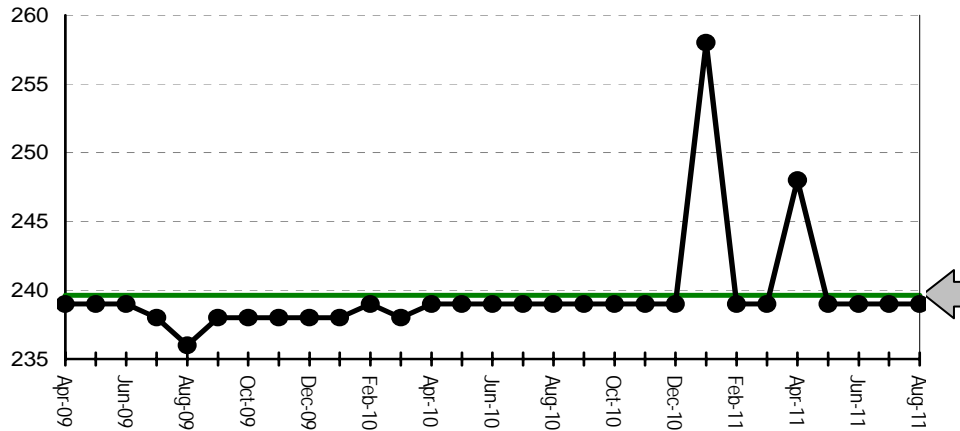


Source: 18 week monthly report for all 18 week data.

Urgent Care Indicators

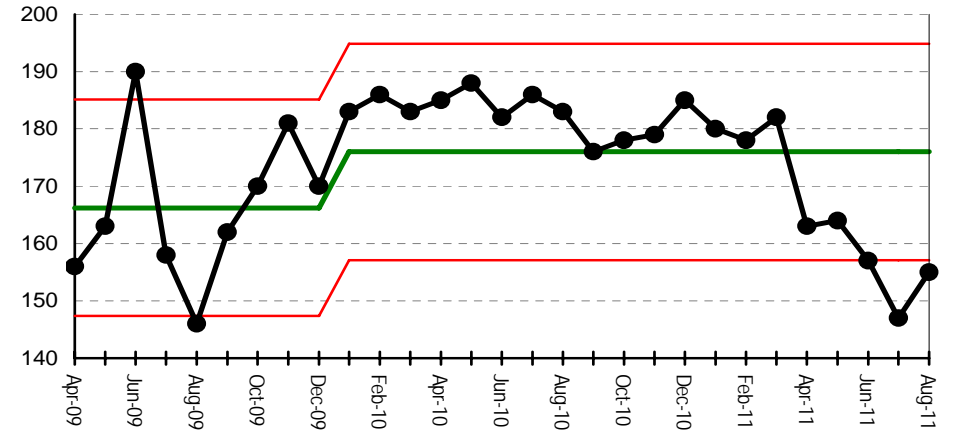
low is good for all measures

Total time in ED - 95th percentile wait



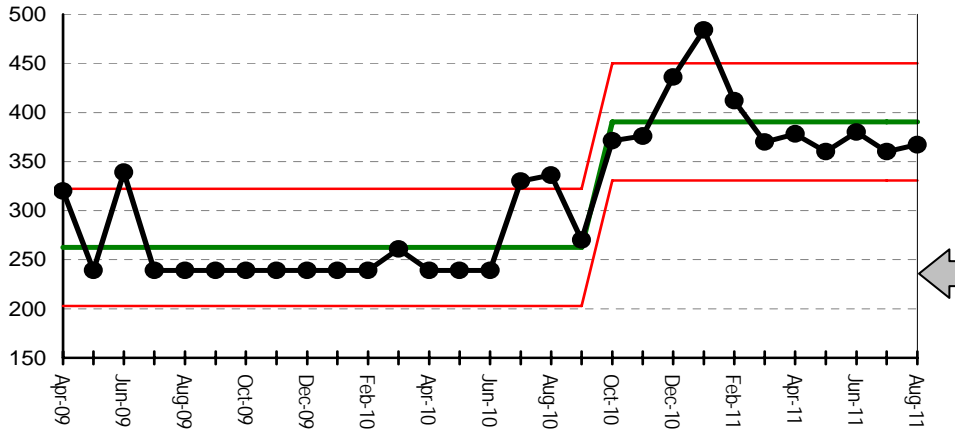
Source: EDIS data
 Standard: 95th percentile wait under 240 minutes (A&E clinical quality indicators headline measure)
 NB upper and lower quartile red lines are at 239 mins.

Median wait (minutes)



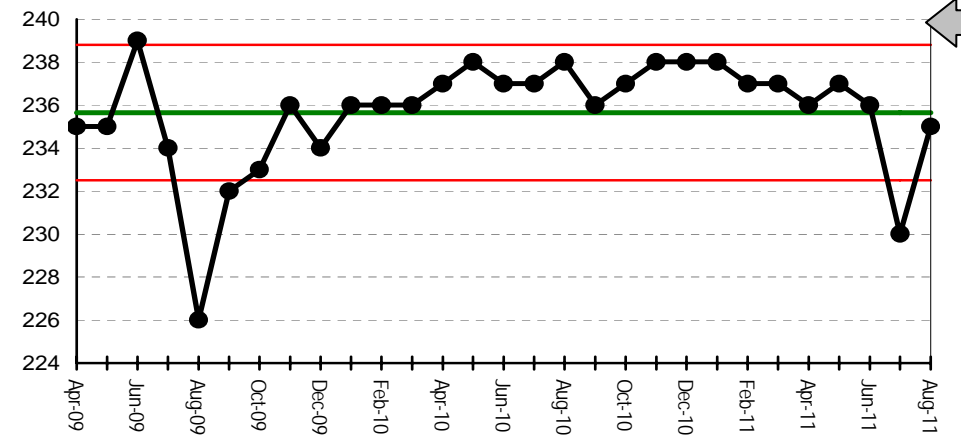
Source: EDIS data

Total time in ED - 95th percentile wait (admitted)



Source: EDIS data
 Standard: 95th percentile wait under 240 minutes

Total time in ED - 95th percentile wait (not-admitted)

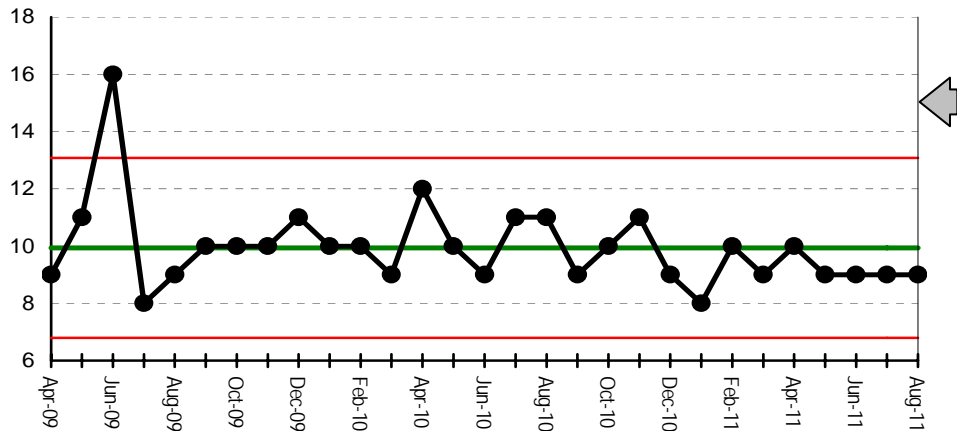


Source: EDIS data
 Standard: 95th percentile wait under 240 minutes

Urgent Care Indicators

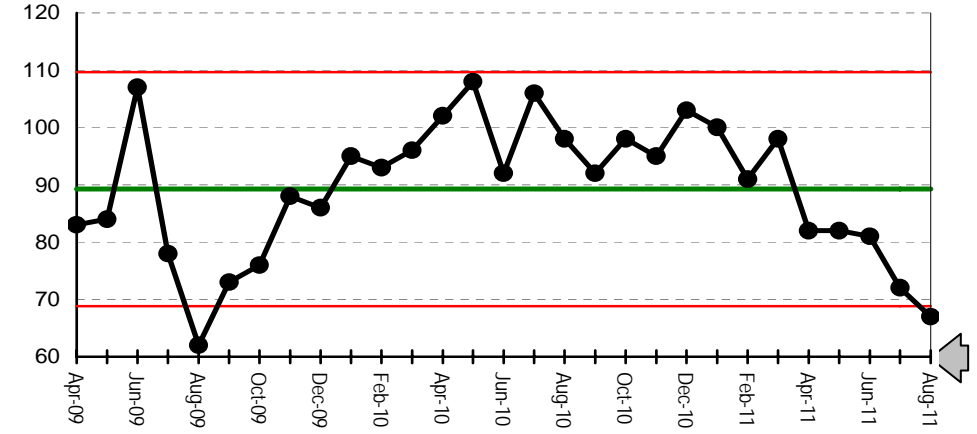
low is good for all measures

Wait for Assessment: 95th Percentile wait



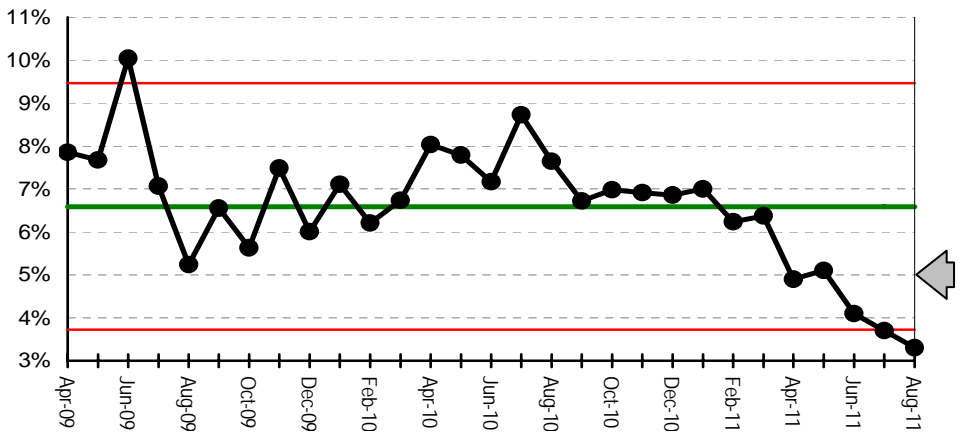
Source: EDIS data
Standard: 95th percentile wait under 15 mins from arrival to meaningful assessment (ambulance arrivals only)

Wait for Treatment: Median wait



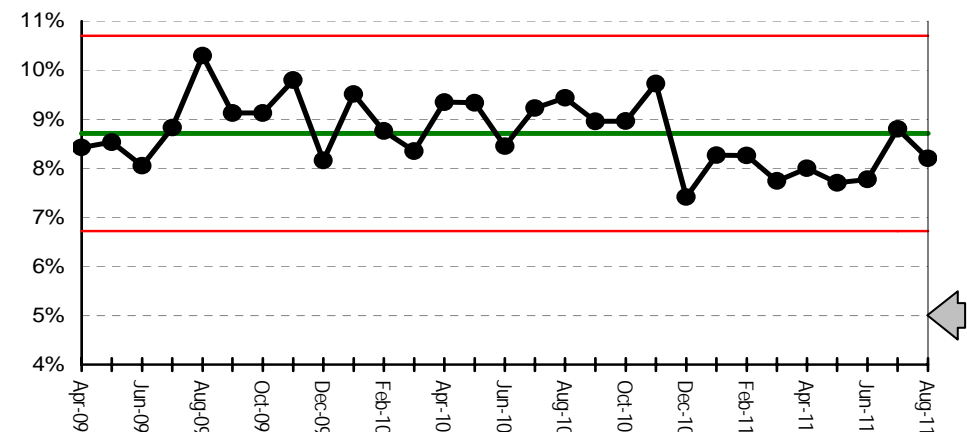
Source: EDIS data
Standard: Median wait under 60 minutes

Left without being seen Rate



Source: EDIS data
Standard: <5%

Re-attendance Rate

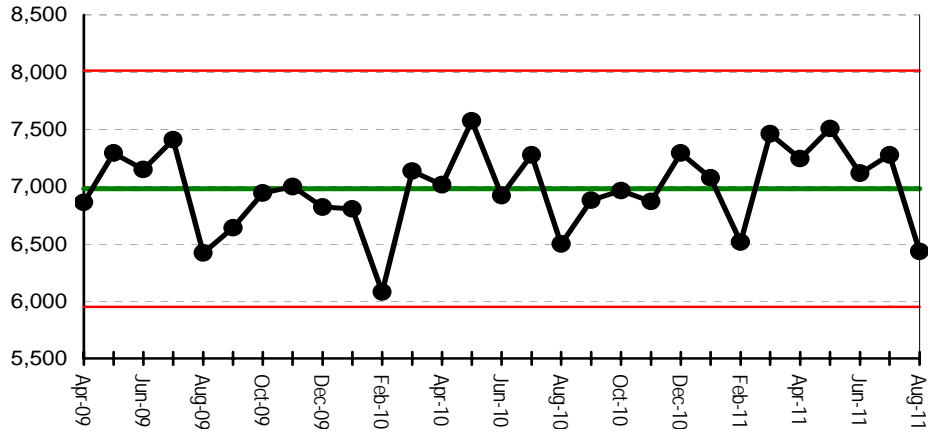


Source: EDIS data
Standard: Between 1% and 5%

Urgent Care Indicators

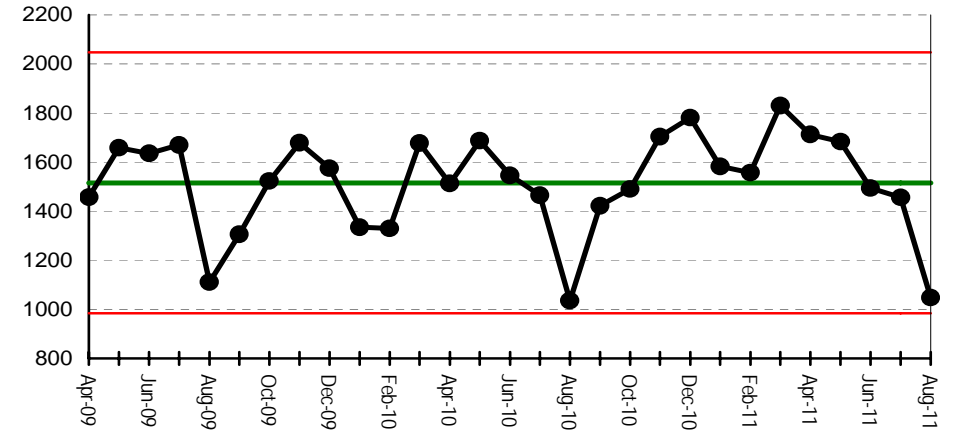
Activity

Emergency Department - total attendances including UCC



Source: EDIS data

Paediatric Emergency Department Attendances



Source: EDIS data

UCC Attendances

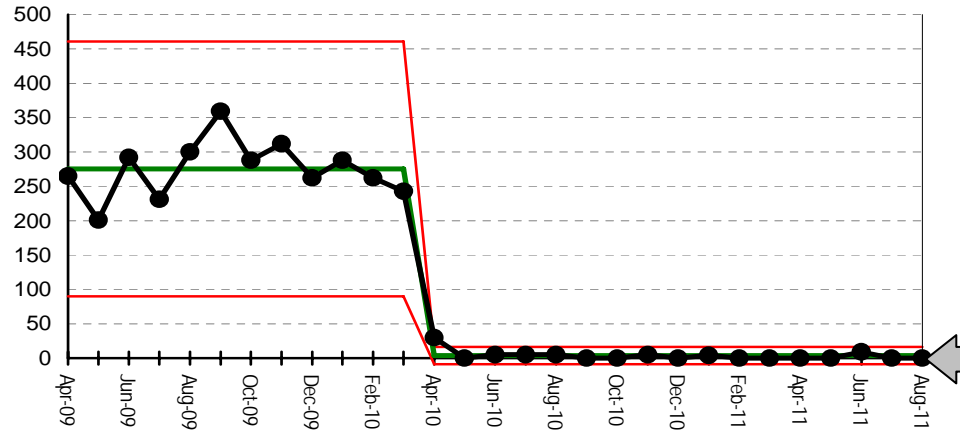
Month	Number	% ED activity
Apr-11	2973	41%
May-11	3433	46%
Jun-11	3496	49%
Jul-11	3459	48%
Aug-11	3098	48%
YTD	16459	46%

Source: EDIS data

Admitted Patient indicators

Single sex accommodation

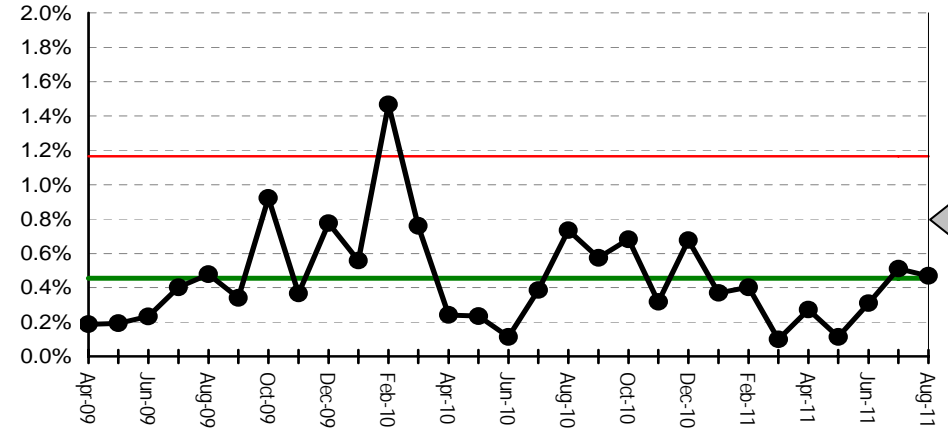
Total single sex breach days - trustwide



Source: Daily monitoring by bed managers

Standard: Zero breaches in admitted patient areas other than clinically justified as per national definitions

Cancelled Operations for non-clinical reasons



% offers of new binding date within 28 days

Standard = 95%; August = 100%; YTD = 100%

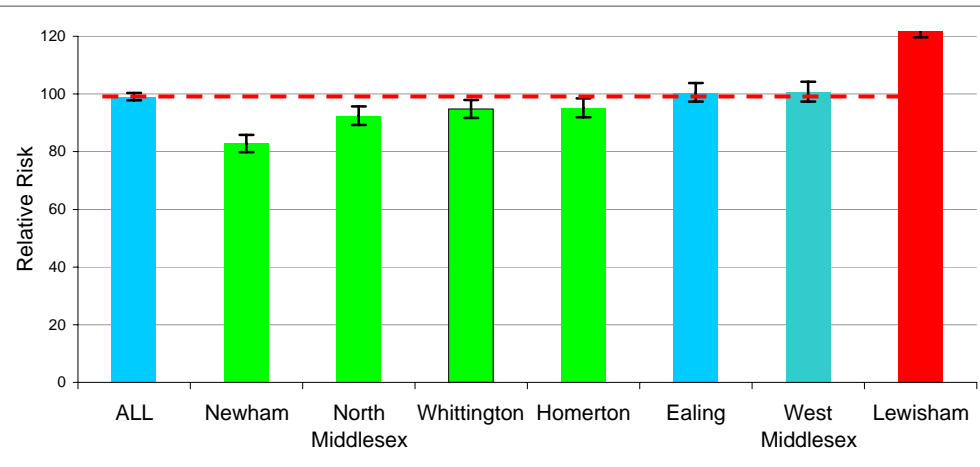
Source: PAS data

Standard: <0.8% of operations cancelled for non-clinical reasons (National tolerance)

Readmissions within 28 days (relative risk)

low is good in all measures

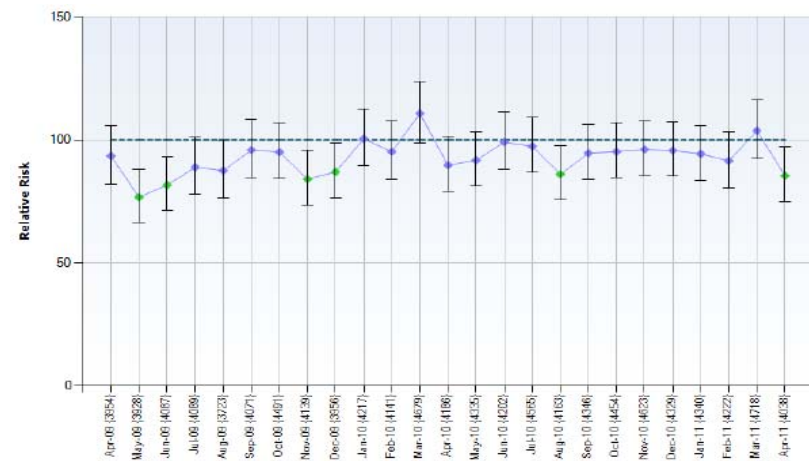
Against a Peer Group of similar London hospitals - last 12 months (Apr10-Apr11)



Source: Dr Foster's - four month lag in data

Standard: to be Blue/Green rated

Benchmark - trend over time (standardised against national data)



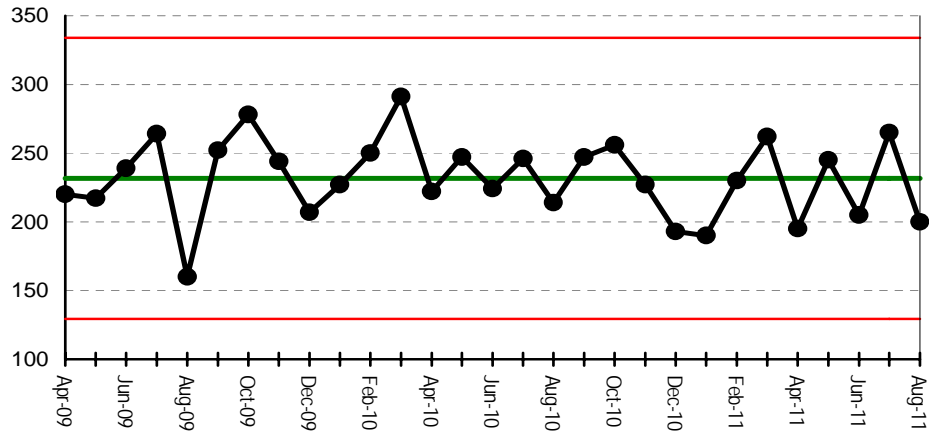
Source: Dr Foster Intelligence. Relative Risk = index. Benchmark Year=2009/10

Standard: to be Blue/Green rated

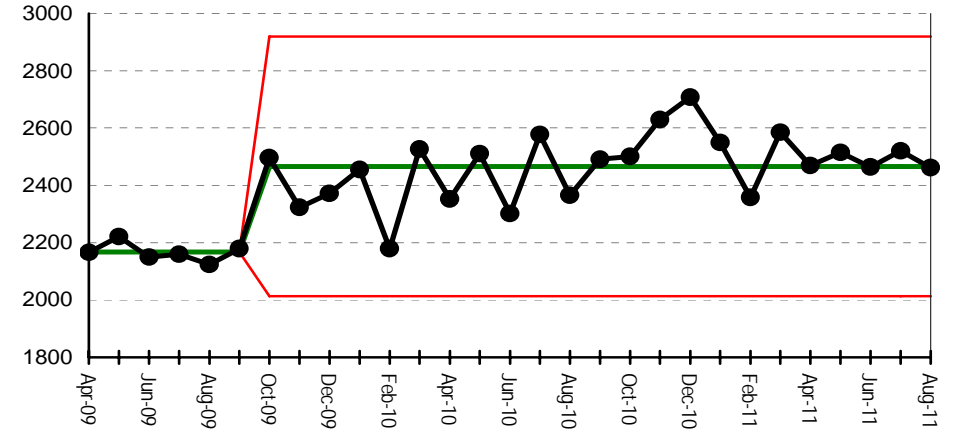
Admitted Patient Indicators

Activity - Acute Wards

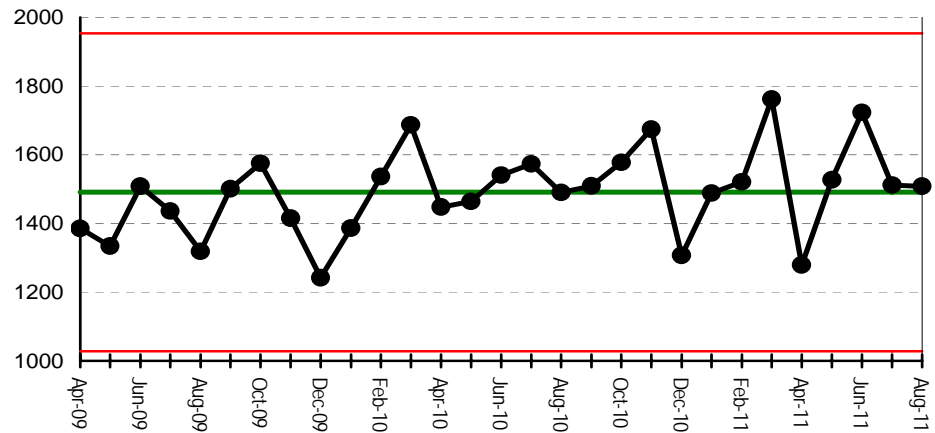
Elective Inpatients



Non-Elective Inpatients



Daycases

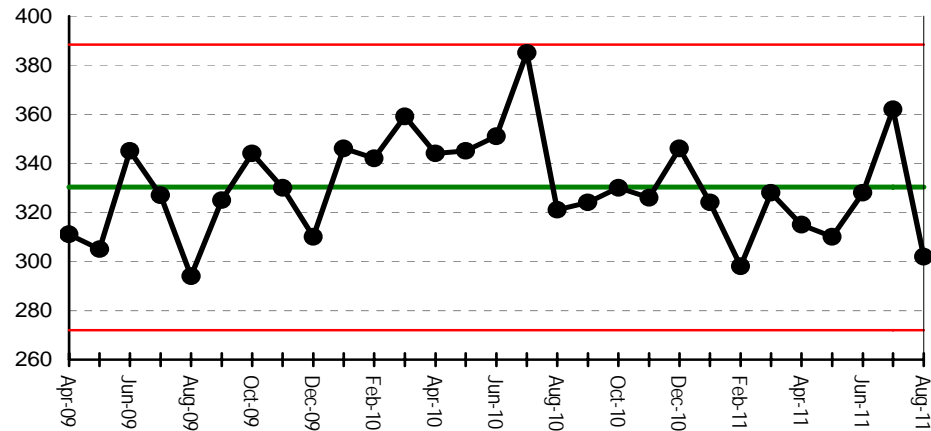


Women & Children Indicators

	Criteria	Standard	Period	YTD	Forecast	
Maternity indicators			Aug-11			Data Source: <i>Maternity Matters Assurance Reporting</i>
Maternity bookings within 12 weeks 6 days	% bookings	90%	88.7%	89.6%		For referrals received within 12 weeks only.
1:1 midwifery care in established labour (bi-monthly)		TBA	100%	100%		*1:1 care data collected in bi-monthly staff audits, most recent Jul 11
Reducing inequalities in Infant Mortality						Data source: <i>PAS/Badger data</i>
Smoking in pregnancy at time of delivery	% deliveries	<17%	12%	8%		
Rate of Breastfeeding at birth	% deliveries	78%	92%	87%		
Community Indicators			Q1 11-12	11-12		
Prevalence of breastfeeding at 6-8wks - Islington Community Services			72%	72%		Breast feeding data for Q2 2011/12 is due in Nov
Child immunisation take-up						<i>Indicator in development</i>

Activity

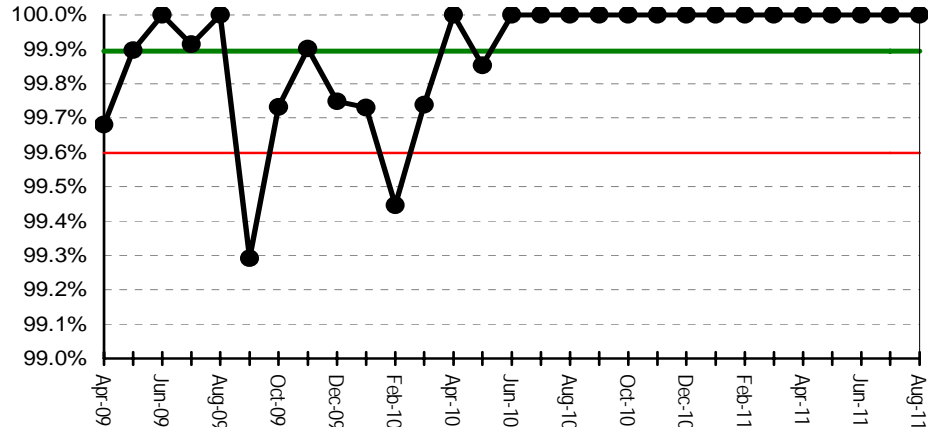
Maternity Deliveries



GUM

Percentage of patients offered an appointment within 2 working days

Haringey Community Services



Source: Lillie

Standard: 100% offered within 2 days

Cancer Waits Indicators

	Criteria	Standard	Month	YTD	Forecast
Reducing Mortality from Cancer					
Data source: CWT dataset					
Wait from urg GP referral until seen	14 days	93%	95.6%	95.0%	
Wait from symptomatic breast referral until seen	14 days	93%	96.7%	94.1%	
14 day all		93%	95.9%	94.7%	
Wait from Decision to Treat until 1st Treatment	31 days	96%	100%	100%	
Wait from Decision to treat until 2nd Treatment	31 days		100%	100%	
31 day all			100%	100%	
Wait from GP Urgent Referral until Treatment	62 days	85%	92.7%	85.6%	
Wait from Consultant upgrade until Treatment	62 days		80%	85.0%	
Wait from Screening Referral until Treatment	62 days	90%	n/a	100%	
62 day all		86%	91.3%	86.4%	