

Caring at its best

Quality and Performance

Trust Board

Monday 28th May 2012

April 2012

One team shared values

QUALITY and PERFORMANCE REPORT

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Thresholds

Where available indicators are measured against national thresholds and targets, locally agreed commissioner targets and standards set by the Trust.

In addition to a performance being measured against a target the status is designed to give an indication of the underlying trends. An upward pointing arrow indicates an improvement in performance and an arrow pointing downwards indicates a deterioration in performance.

UHL at a Glance - Month 1 - 2012/13

PATIENT SAFETY					
	Standard	Current Data Month	Month Actual	YTD	Data Quality
MRSA Bacteraemias	6	Apr-12	0	0	
CDT Isolates in Patients (UHL - All Ages)	113	Apr-12	14	14	
% of all adults who have had VTE risk assessment on adm to hosp ***	90%	Apr-12	95.5%	95.5%	
Reduction of hospital acquired venous thrombosis ***	0.175	Qtr 3 11/12	0.22		
Incidents of Patient Falls	TBC	Mar-12	234	2901	
Falls Resulting in Severe Injury or Death	12	Apr-12	1	1	
CLINICAL EFFECTIVENESS					
	Standard	Current Data Month	Month Actual	YTD	Data Quality
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	93%	Mar-12	93.1%	94.0%	
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	93%	Mar-12	94.8%	95.9%	
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	96%	Mar-12	97.0%	97.4%	
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	98%	Mar-12	100.0%	99.9%	
31-Day Wait For Second Or Subsequent Treatment: Surgery	94%	Mar-12	91.2%	94.5%	
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	94%	Mar-12	100.0%	99.0%	
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	85%	Mar-12	85.7%	83.8%	
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	90%	Mar-12	91.3%	93.8%	
62-Day Wait For First Treatment From Consultant Upgrade	85%	Mar-12	100.0%	87.5%	
Emergency 30 Day Readmissions (Following Elective Admission)	1.6%	Mar-12	4.7%	5.1%	
Emergency 30 Day Readmissions (Following Emergency Admission)	8.0%	Mar-12	10.1%	9.6%	
Mortality (CHKS Risk Adjusted) - OVERALL	85	Mar-12	81.4	81.0	
Primary PCI Call to Balloon <150 Mins	75.0%	Apr-12	93.0%	93.0%	
Pressure Ulcers (Grade 3 and 4)	197	Mar-12	22	138	

*** Trust Priorities

Data Quality Key : Process & Procedure Fully Documented



Patient Level



Audit



Director Sign Off



UHL at a Glance - Month 1 - 2012/13

PATIENT EXPERIENCE	Standard	Current Data Month	Month Actual	YTD	Data Quality
Net Promoter Score	95.0	Apr-12	51.0	51.0	
Net Promoter - Coverage	10.0%	Apr-12	12.7%	12.7%	
Inpatient Polling - treated with respect and dignity ***	95.0	Apr-12	95.9	95.9	
Outpatient Polling - treated with respect and dignity ***	95.0	Apr-12	95.0	95.0	
Outpatient Polling - rating the care you receive ***	85.0	Apr-12	90.0	90.0	
% Beds Providing Same Sex Accommodation - Wards ***	100%	Apr-12	100.0%	100.0%	
% Beds Providing Same Sex Accommodation - Intensivist ***	100%	Apr-12	100.0%	100.0%	
ED Waits (2011/12 - Type 1 and 2 plus Urgent Care Centre)	95%	Apr-12	92.3%	92.3%	
ED Waits - UHL (Type 1 and 2)	95%	Apr-12	90.5%	90.5%	
ED Unplanned Re-attendance Rate (From Qtr 2 2011/12)	<5%	Apr-12	6.2%		
ED Left Without Being Seen % (From Qtr 2 2011/12)	<5%	Apr-12	2.8%		
ED Time in Department - 95th centile Type 1+2 (From Qtr 2 2011/12)	<4Hrs	Apr-12	320		
ED Time to Initial Assessment - 95th centile (From Qtr 2 2011/12)	<15 mins	Apr-12	34		
ED Time to Treatment - Median (From Qtr 2 2011/12)	<60 mins	Apr-12	45		
RTT 18 week - Admitted	90%	Apr-12	93.7%		
RTT 18 week - Non admitted	95%	Apr-12	97.1%		
RTT - Incomplete 92% in 18 Weeks	92%	Apr-12	94.9%		
RTT 18 Weeks Waiting times - Delivery in All Specialties	0	Apr-12	1		
6 Week - Diagnostic Test Waiting Times	<1%	Apr-12	1.2%		
STAFF EXPERIENCE / WORKFORCE	Standard	Current Data Month	Month Actual	YTD	Data Quality
Sickness absence	3.0%	Apr-12	3.9%	3.5%	
Appraisals	100%	Apr-12	93.7%	93.7%	
VALUE FOR MONEY	Standard	Current Data Month	Month Actual	YTD	Data Quality
Income (£000's)	718,977	Apr-12	58,616	58,616	
Operating Cost (£000's)	676,453	Apr-12	56,498	56,498	
Surplus / Deficit (as EBIDTA) (£000's)	42,524	Apr-12	2,118	2,118	
CIP (£000's)	32,000	Apr-12	1,581	1,581	
Cash Flow (£000's)	18,000	Apr-12	22,519	22,519	
Financial Risk Rating	3	Apr-12	2	2	
Pay - Locums (£ 000s)		Apr-12	311	311	
Pay - Agency (£ 000s)		Apr-12	805	805	
Pay - Bank (£ 000s)		Apr-12	513	513	
Pay - Overtime (£ 000s)		Apr-12	290	290	
Total Pay Bill (£ millions)	435.9	Apr-12	37.0	37.0	
Cost per Bed Day (£)		Apr-12	157	157	

*** Trust Priorities

Data Quality Key Process & Procedure Fully Documented



Patient Level

Audit

Director Sign Off

HISTORY / TREND OVERVIEW - Month 1 - 2012/13

PATIENT SAFETY

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target	Status	Page No
MRSA Bacteraemias	2	0	0	1	1	0	0	1	1	1	0	0	0	0	6		9
CDT Isolates in Patients (UHL - All Ages)	9	15	7	8	10	8	13	11	6	4	6	11	14	14	113		9
% of all adults who have had VTE risk assessment on adm to hosp	92.7%	93.5%	93.5%	94.5%	93.8%	93.8%	93.8%	94.5%	94.3%	94.1%	93.8%	93.7%	95.5%	95.5%	90%		
Reduction of hospital acquired venous thrombosis	Qtr 1 - 0.15			Qtr 2 - 0.18			Qtr 3 - 0.22								0.175		
Incidents of Patient Falls	265	269	245	261	247	232	263	222	222	203	238	234		2901	TBC		12
Falls Resulting in Severe Injury or Death	2	0	1	0	0	1	0	0	0	1	0	1	1	1	12		

CLINICAL EFFECTIVENESS

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target	Status	Page No
Two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	96.3%	93.7%	93.4%	94.0%	95.3%	93.1%	94.3%	94.4%	93.2%	94.4%	93.4%	93.1%		94.0%	93%		17
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	97.2%	93.8%	98.3%	97.7%	96.5%	97.3%	95.8%	95.4%	93.3%	93.2%	95.7%	94.8%		95.9%	93%		17
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	97.0%	98.7%	96.8%	97.7%	97.3%	96.8%	98.4%	97.9%	97.2%	97.6%	96.1%	97.0%		97.4%	96%		17
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	100.0%	99.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		99.9%	98%		17
31-Day Wait For Second Or Subsequent Treatment: Surgery	97.1%	95.5%	94.1%	96.9%	94.0%	95.6%	94.1%	98.8%	92.1%	87.6%	95.4%	91.2%		94.5%	94%		17
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	99.1%	99.4%	100.0%	99.3%	97.8%	99.3%	99.2%	98.7%	98.3%	97.0%	100.0%	100.0%		99.0%	94%		17
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	87.3%	85.4%	84.1%	81.8%	83.2%	81.1%	79.4%	81.3%	84.9%	86.3%	85.4%	85.7%		83.8%	85%		17
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	97.1%	94.9%	93.5%	92.5%	87.9%	91.8%	95.2%	98.3%	91.8%	94.7%	100.0%	91.3%		93.8%	90%		17
62-Day Wait For First Treatment From Consultant Upgrade	100.0%	-----	100.0%	-----	100.0%	80.0%	100.0%	-----	0.0%	-----	-----	100.0%		87.5%	85%		17

HISTORY / TREND OVERVIEW - Month 1 - 2012/13

CLINICAL EFFECTIVENESS (Continued)

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target	Status	Page No
Emergency 30 Day Readmissions (Following Elective Admission)	4.9%	4.8%	5.3%	4.9%	5.1%	4.8%	5.3%	4.7%	5.7%	5.4%	5.3%	4.7%		5.1%	1.6%	▲	11
Emergency 30 Day Readmissions (Following Emergency Admission)	9.4%	9.2%	10.0%	9.6%	9.7%	9.7%	9.0%	9.1%	9.5%	9.6%	9.9%	10.1%		9.6%	8.0%	▼	11
Mortality (CHKS - Risk Adjusted) - OVERALL	84.8	85.9	74.8	80.7	80.1	87.1	78.5	74.9	74.1	82.1	90.1	81.4		81.0	85	▲	
Stroke - 90% of Stay on a Stroke Unit	85%	87%	89%	88%	88%	75%	82%	91%	90%	82%	69%	80%		84%	80%	▲	
Primary PCI Call to Balloon <150 Mins	85.0%	81.8%	96.0%	82.6%	94.4%	72.2%	84.8%	90.0%	88.5%	86.4%	83.3%	93.3%	93.0%	93.0%	75%	▼	16
Pressure Ulcers (Grade 3 and 4)	15	12	17	17	8	5	10	6	6	12	8	22		138	197	▼	12

HISTORY / TREND OVERVIEW - Month 1 - 2012/13

PATIENT EXPERIENCE

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target	Status	Page No
Net Promoter Score	COMMENCED APRIL 2012												51.0	51.0			13
Net Promoter - Coverage	COMMENCED APRIL 2012												12.7%	12.7%	10%		13
Inpatient Polling - treated with respect and dignity	96.6	96.3	96.5	95.7	96.0	95.3	96.1	96.0	96.1	96.2	95.6	95.6	95.9	95.9	95.0	▲	13
Inpatient Polling - rating the care you receive	88.4	87.2	87.6	87.0	85.4	85.0	86.8	86.3	87.7	86.6	87.8	87.0	88.9	88.9	91.0	▲	13
Outpatient Polling - treated with respect and dignity		96.7	93.5	84.0		91.0	94.3	98.0	92.0	92.0	99.0	88.0	95.0	95.0	95.0	▲	
Outpatient Polling - rating the care you receive		87.0	85.1	72.6		82.5	85.7	84.0	91.0	86.0	92.0	86.0	90.0	90.0	85.0	▲	
% Beds Providing Same Sex Accommodation -Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶	16
% Beds Providing Same Sex Accommodation - Intensivist	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	◀▶	16
A&E Waits - Leics (10/11) - UHL Incl UCC (11/12)	93.4%	93.7%	95.8%	97.2%	93.8%	92.0%	92.0%	94.4%	97.0%	95.5%	91.6%	90.4%	92.3%	92.3%	95%	▲	14
A&E Waits - UHL (Type 1 and 2)	91.5%	92.1%	94.7%	96.4%	92.1%	89.9%	89.8%	92.9%	96.3%	94.4%	89.5%	88.0%	90.5%	90.5%	95%	▲	14
Unplanned 7 Day Re-attendance Rate (From Qtr 2 11/12)	6.6%	5.6%	5.2%	5.9%	6.7%	5.5%	6.0%	5.7%	5.4%	6.1%	6.1%	6.6%	6.2%		<5%	▲	14
Left Without Being Seen % (From Qtr 2 11/12)	2.5%	2.2%	2.0%	2.1%	2.8%	2.4%	2.9%	2.0%	2.3%	2.1%	2.4%	3.6%	2.8%		<5%	▲	14
ED Time in Department - 95th centile Type 1+2 (From Qtr 2 11/12)	306	307	257	239	304	338	341	288	240	264	331	331	320		<240 Mins	▲	14
Time to Initial Assessment - 95th centile (From Qtr 2 11/12)	70	56	41	39	48	48	61	48	42	32	34	40	34		<15 Mins	▲	14
Time to Treatment - Median (From Qtr 2 11/12)	59	54	50	34	34	39	44	43	42	42	54	61	45		<60 mins	▲	14
RTT 18 week - Admitted	91.7%	90.0%	85.0%	91.4%	92.0%	90.8%	90.9%	88.5%	87.6%	84.6%	82.8%	83.5%	93.7%		90%	▲	15
RTT 18 week - Non admitted	97.3%	97.2%	97.0%	97.2%	96.8%	96.6%	96.4%	96.2%	96.6%	95.5%	96.1%	95.9%	97.1%		95%	▲	15
RTT - Incomplete 92% in 18 Weeks	NEW OPERATING FRAMEWORK INDICATOR APRIL 2012												94.9%	92%		15	
RTT 18 Weeks Waiting times - Delivery in All Specialties	NEW OPERATING FRAMEWORK INDICATOR APRIL 2012												1	0		15	
6 Week - Diagnostic Test Waiting Times	NEW OPERATING FRAMEWORK INDICATOR APRIL 2012												1.2%	<1%		15	

HISTORY / TREND OVERVIEW - Month 1 - 2012/13

STAFF EXPERIENCE / WORKFORCE

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target	Status	Page No
Sickness absence	3.2%	3.0%	3.4%	3.3%	3.1%	3.1%	3.4%	3.7%	3.8%	3.6%	3.8%	3.7%	3.9%	3.5%	3.0%	▼	18
Appraisals	90.4%	88.8%	86.8%	85.9%	87.7%	88.7%	93.5%	93.9%	95.0%	96.1%	96.1%	94.4%	93.7%	93.7%	100%	▼	18

VALUE FOR MONEY

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD
Income (£000's)	56,760	55,861	56,745	56,772	56,977	58,516	58,722	58,984	61,037	60,542	61,844	68,316	58,616	58,616
Operating Cost (£000's)	55,260	55,886	55,534	55,943	54,884	54,768	55,416	54,797	55,297	53,833	55,053	61,152	56,498	56,498
Surplus / Deficit (as EBIDTA) (£000's)	1,500	-25	1,211	829	2,093	3,748	3,306	4,187	5,740	6,709	6,791	7,164	2,118	2,118
CIP (£000's)	1,012	912	1,422	1,508	1,650	2,243	2,486	2,652	2,772	2,767	2,807	2,995	1,581	1,581
Cash Flow (£000's)	14,465	9,778	4,425	8,296	21,003	15,384	20,927	16,563	16,872	21,818	29,924	18,369	22,519	22,519
Financial Risk Rating	2	1	1	1	1	1	1	1	2	2	2	3	2	2

HR Pay Analysis

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD
	£	£	£	£	£	£	£	£	£	£	£	£	£	
Locums (£ 000s)	283	328	417	315	392	281	231	199	293	229	288	277	311	311
Agency (£ 000s)	1,427	1,475	1,526	1,522	866	576	569	656	515	567	554	923	805	805
Bank (£ 000s)	540	509	509	554	477	480	504	490	543	413	430	556	513	513
Overtime (£ 000s)	453	317	256	282	224	181	168	181	196	173	193	252	290	290
Total Pay Bill (£ millions)	36.9	37.1	37.5	37.0	36.3	35.7	35.9	35.8	35.7	35.3	35.6	37.1	37.0	37.0

Average Cost per Bed Day

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12
	£	£	£	£	£	£	£	£	£	£	£	£	£
Cost per Bed Day (£)	169	165	165	166	161	157	159	161	157	143	157	147	157

INFECTION PREVENTION

Performance Overview

MRSA – a positive month with 0 MRSA cases reported for April for the third consecutive month. The target for 2012/13 is 6 cases.

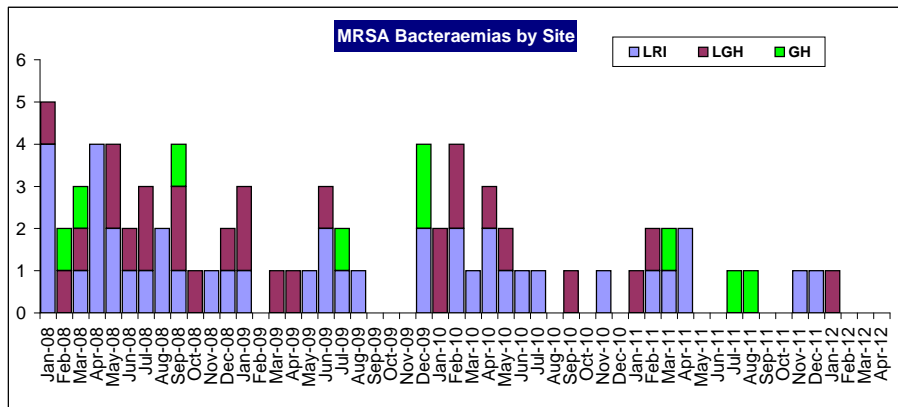
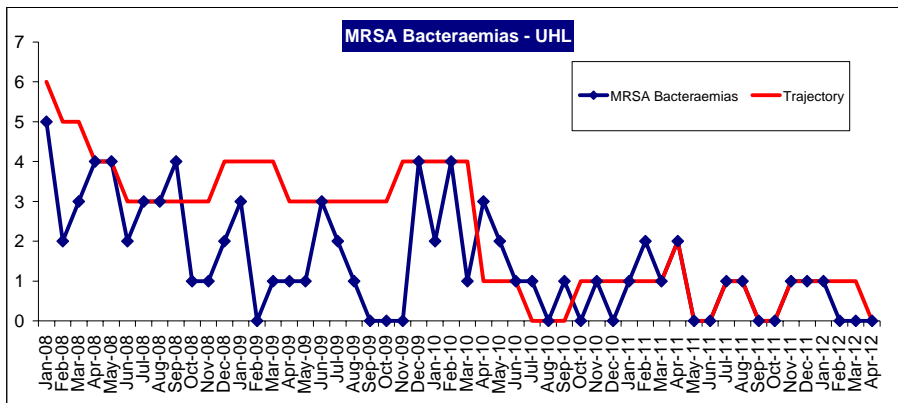
CDifficile – April is above trajectory with 14 cases reported and an annual target for 2012/13 of 113 cases. May data to date is below trajectory.

MRSA elective and non-elective screening has continued to be achieved at 100% respectively.

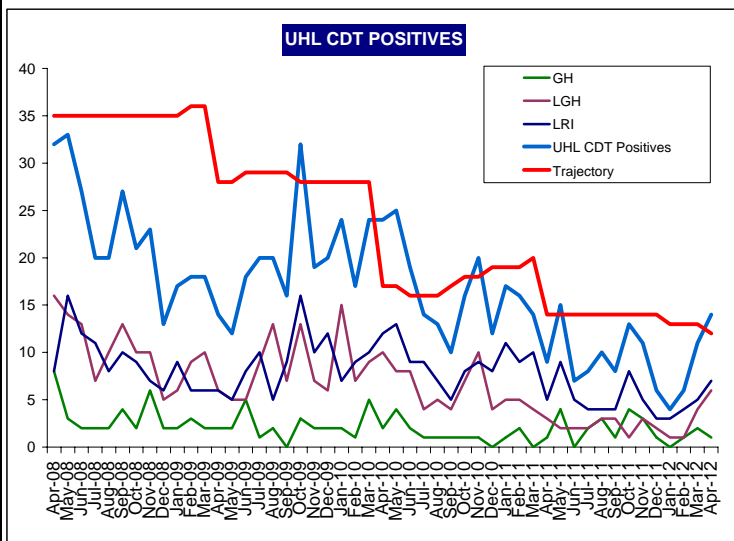
Key Actions

Correspondence has been forwarded to all clinicians regarding expectations and compliance with recommended infection prevention procedures.

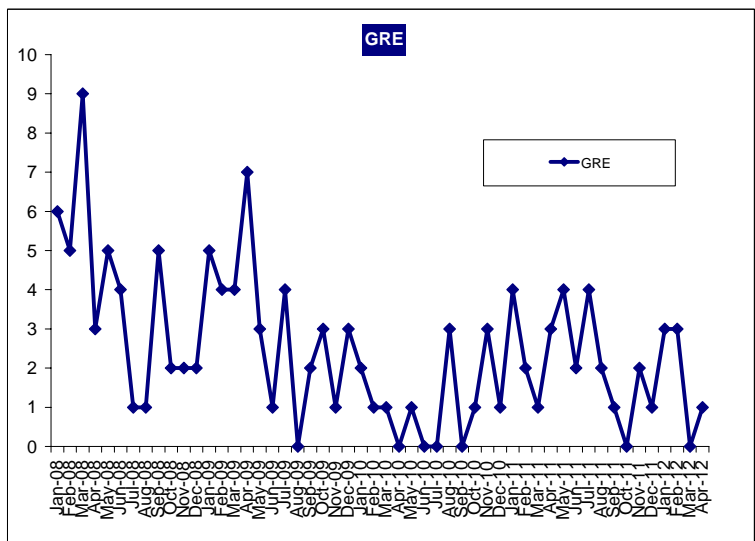
MRSA BACTERAEMIA



CLOSTRIDIUM DIFFICILE - UHL CDT POSITIVES



GLYCOPEPTIDE RESISTANT ENTEROCOCCUS (GRE)



TARGET / STANDARD

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target	Status	
MRSA	2	0	0	1	1	0	0	1	1	1	0	0	0	0	6	6	🟢
C. Diff.	9	15	7	8	10	8	13	11	6	4	6	11	14	14	113	113	🔴
Rate / 1000 Adm's	1.2	2.0	0.9	1.0	1.3	1.1	1.8	1.4	0.8	0.5	0.8	1.3	1.9	1.9			
GRE	3	4	2	4	2	1	0	2	1	3	3	1	1	27	TBC		
MSSA	1	4	2	5	2	6	4	3	2	0	5	5	2	41	No National Target		
E-Coli			38	39	42	39	41	45	38	37	35	46		400	No National Target		

MORTALITY

Performance Overview

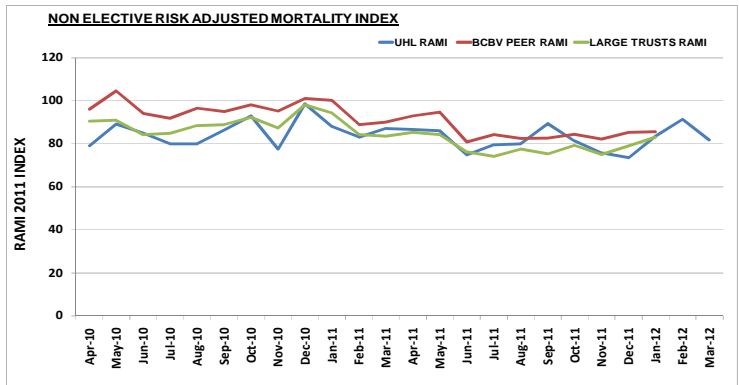
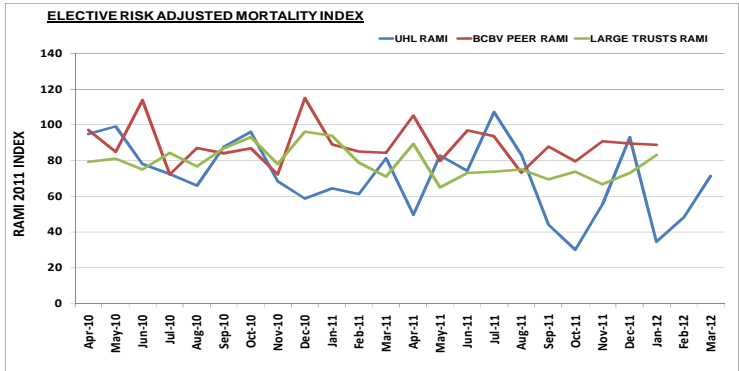
Although the number of 'in-hospital deaths' in April was slightly less than in the previous 2 months, the rate has increased due to the reduced activity (.2,500 pts less than in March).

UHL's risk adjusted mortality for 11/12, using the CHKS RAMI, remains below the trust's set threshold. Benchmarked data is not yet complete for the financial year. UHL's RAMI for the 12 months up to March 12 is 81 using the 2012 RAMI.

The trust now has access to the Dr Fosters Intelligence (DFI) clinical benchmarking system which uses the 'Hospital Standardised Mortality Rate' (HSMR). This mortality indicator appears to more closely correlate with the new national SHMI.

UHL's SHMI for 11/12 won't be published until September 12 at the earliest.

UHL's HSMR for the 12 months March 11 to Feb 12 is 93.2 which is better than expected when compared with the 'Better Care Better Value' Peers. However, all trusts' HSMRs will go up following the annual 'rebasings' at the end of the financial year.

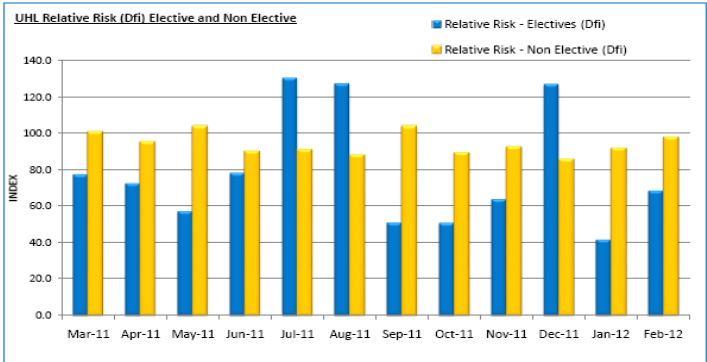
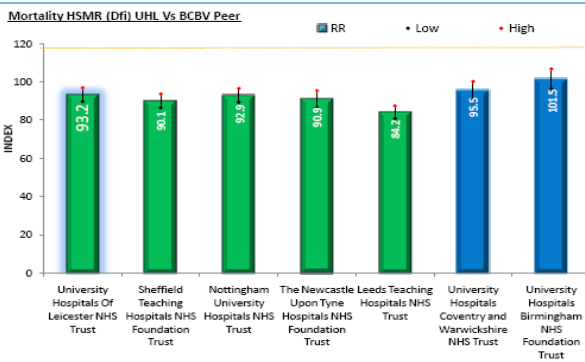


CHKS - RISK ADJUSTED MORTALITY

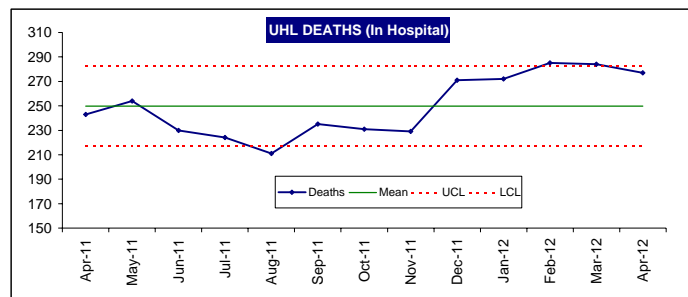
Observed Deaths	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	YTD
RAMI	252	173	211	197	205	187	198	196	197	233	238	253	250	2,538
RAMI	86.8	84.8	85.9	74.8	80.7	80.1	87.1	78.5	74.9	74.1	82.1	90.1	81.4	81.0

HSMR and RELATIVE RISK March 2011 - Feb 2012

HSMR (Dfi)	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	YTD
HSMR (Dfi)	100.9	92.4	101.5	91.5	96.9	90.8	98.1	89.8	85.6	82.6	89.1	99.5	93.2



Clinical Business Unit	CURRENT MONTH (Apr)		
	Spells	Deaths	%
Specialist Surgery	1338	1	0.1%
GI Medicine, Surgery and Urology	3578	39	1.1%
Cancer, Haematology and Oncology	1909	15	0.8%
Musculo-Skeletal	792	3	0.4%
Medicine	2136	128	6.0%
Respiratory	1186	32	2.7%
Cardiac, Renal & Critical Care	1243	44	3.5%
Emergency Department	8	1	12.5%
Women's	4012	12	0.3%
Children's	823	2	0.2%
Anaesthesia and Theatres	306		
Imaging	13		
Sum:	17344	277	1.6%



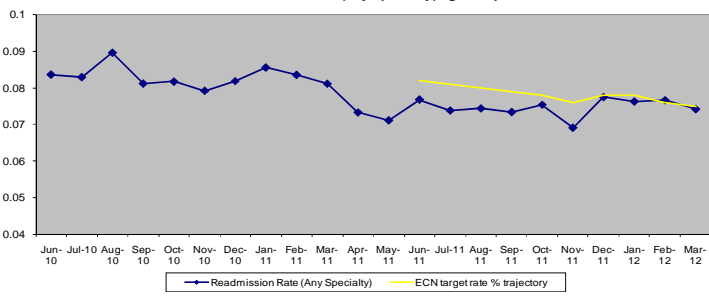
UHL CRUDE DATA TOTAL SPELLS	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target
UHL Crude Data - TOTAL Spells	16896	17539	18897	18386	18184	18005	17954	18540	18381	19145	18654	19894	17344	17344	Target
UHL Crude Data - TOTAL Deaths	243	254	230	224	211	235	231	229	271	272	285	284	277	277	TBC
Percent	1.4%	1.4%	1.2%	1.2%	1.2%	1.3%	1.3%	1.2%	1.5%	1.4%	1.5%	1.4%	1.6%	1.6%	TBC

UHL CRUDE DATA ELECTIVE SPELLS	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target
UHL Crude Data - ELECTIVE Spells	7761	8098	9238	8570	8810	8761	8691	9251	8450	8915	9153	9829	7855	7855	Target
UHL Crude Data - ELECTIVE Deaths	4	5	7	11	11	5	4	6	12	4	5	8	5	5	TBC
Percent	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.0%	0.1%	0.1%	0.0%	0.1%	0.1%	0.1%	0.1%	TBC

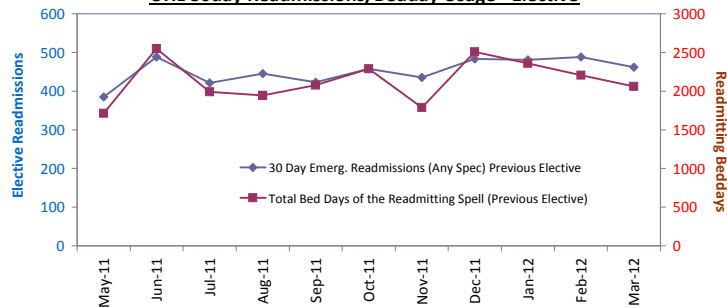
UHL CRUDE DATA NON ELECTIVE SPELLS	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target
UHL Crude Data - NON ELECTIVE Spells	9135	9441	9659	9816	9374	9244	9263	9289	9931	10230	9501	10065	9489	9489	Target
UHL Crude Data - NON ELECTIVE Deaths	239	249	223	213	200	230	227	223	259	268	280	276	272	272	TBC
Percent	2.6%	2.6%	2.3%	2.2%	2.1%	2.5%	2.5%	2.4%	2.6%	2.6%	2.9%	2.7%	2.9%	2.9%	TBC

EMERGENCY READMISSIONS

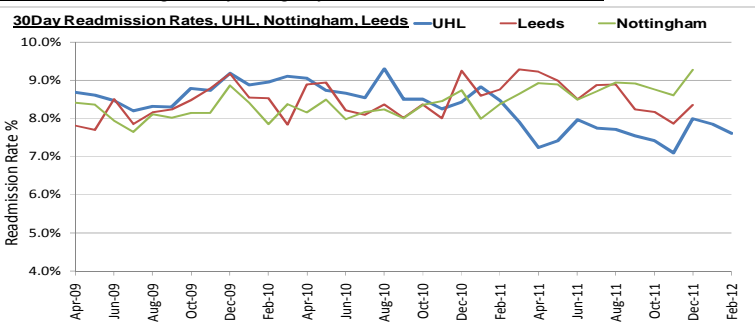
Overall Trust Readmission Rate (any speciality) against plan 2010-2012



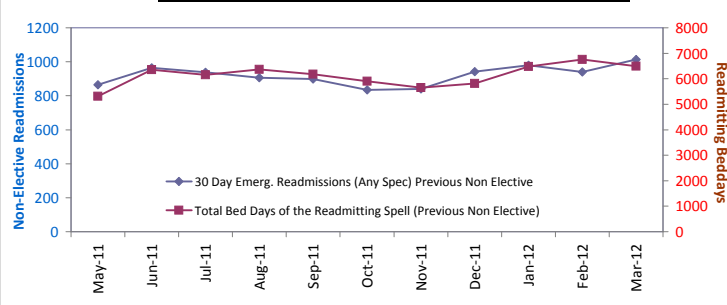
UHL 30day Readmissions/Bedday Usage - Elective



CHKS Benchmarking - 30 Day Emergency Read Rates - UHL, Notts and Leeds



UHL 30day Readmissions/Bedday Usage - Non Elective



ALL READMISSIONS

	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	YTD	Target
Discharges	17539	18897	18386	18184	18005	17954	18540	18381	19145	18654	19895	203,580	Target
30 Day Emerg. Readmissions (Any Spec)	1,250	1,452	1,360	1,351	1,321	1,293	1,276	1,425	1,460	1,428	1,475	15,091	
Readmission Rate (Any Speciality)	7.10%	7.70%	7.40%	7.40%	7.30%	7.20%	6.90%	7.80%	7.60%	7.70%	7.40%	7.4%	6.1%
30 Day Emerg. Readmissions (Same Spec)	768	902	833	811	800	788	746	868	879	846	841	9,082	
Readmission Rate (Same Speciality)	4.40%	4.80%	4.50%	4.50%	4.40%	4.40%	4.00%	4.70%	4.60%	4.50%	4.20%	4.5%	
Improvement trajectory (Any Speciality)													
Total Bed Days of Readmitting Spells	7,030	8,908	8,145	8,311	8,261	8,187	7,437	8,326	8,844	8,969	8,552	90,970	

Readmissions - Previous Spell = Elective

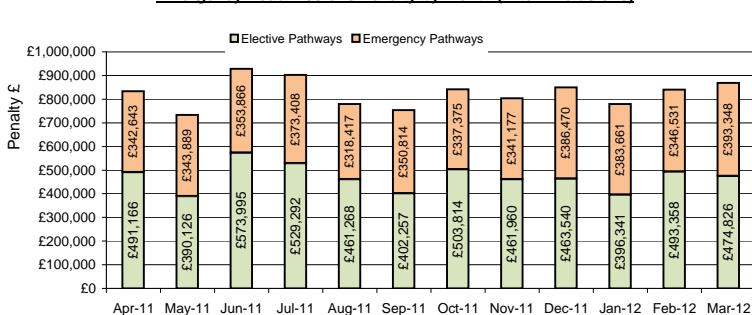
	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	YTD
Discharges	8098	9238	8570	8810	8761	8691	9251	8450	8915	9153	9829	97,766
30 Day Emerg. Readmissions (Any Spec) Previous Elective	385	488	421	445	423	458	435	483	481	488	462	4,969
Readmission Rate (Any Speciality) Previous Elective	4.80%	5.30%	4.90%	5.10%	4.80%	5.30%	4.70%	5.70%	5.40%	5.30%	4.70%	5.1%
Total Bed Days of the Readmitting Spell (Previous Elective)	1,713	2,548	1,990	1,946	2,079	2,289	1,786	2,507	2,360	2,207	2,061	23,486

Readmissions - Previous Spell = Non Elective

	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	YTD
Discharges	9,441	9,659	9,816	9,374	9,244	9,263	9,289	9,931	10,230	9,501	10,066	105,814
30 Day Emerg. Readmissions (Any Spec) Previous Non Elective	865	964	939	906	898	835	841	942	979	940	1,013	10,122
Readmission Rate (Any Speciality) Previous Non Elective	9.2%	10.0%	9.6%	9.7%	9.7%	9.0%	9.1%	9.5%	9.6%	9.9%	10.1%	9.6%
Total Bed Days of the Readmitting Spell (Previous Non Elective)	5,317	6,360	6,155	6,365	6,182	5,898	5,651	5,819	6,484	6,762	6,491	67,484

30 Day Readmissions PBR Method

Emergency Readmissions Penalty by Month (After Exclusions)



Performance Overview

The proportion of readmissions and therefore the rate in March continue to fall against December/January as expected. It fell back below the 10% ECN reduction target and achieved the reduction goal of the ECN. However, this was mainly due to the proportional change in readmissions i.e. in the wider context of increases in admissions rather than a reduction in the number of readmissions, which still needs to remain a priority.

The standard to achieve for 2012/13 is a further 5% reduction in the readmission rate.

As previously reported, agreement has been reached with commissioners on a holding threshold for the penalisation of readmissions for 2012/13. The threshold is 20%. This will lead to a reduction in the baseline readmissions penalty of £5.2m in 2012/13 from 2011/12. The clinical review, led by the University, commences on 19th May and is due to report in early July. The review of over 700 cases will not only validate the threshold for penalty, but will also identify avoidable groups where investment in the penalty can then be focussed by commissioners as per the operating policy.

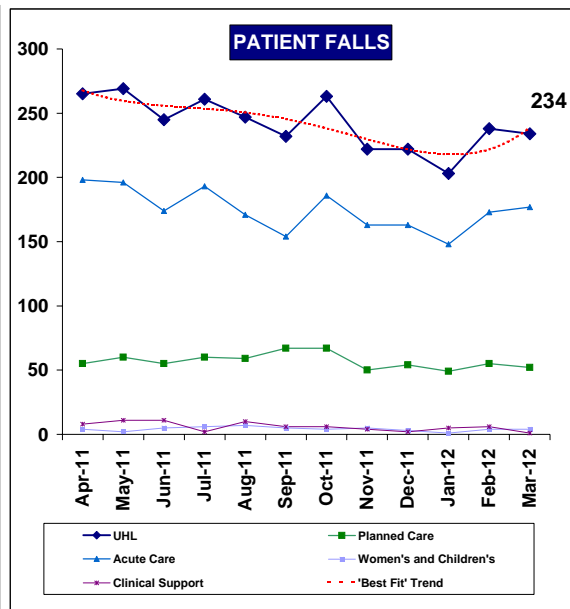
The clinical review, focus and agreement on the investment of the penalty and the finalisation of the actions outstanding in the project plan are now the key focus for early 2012/13.

FALLS

Performance Overview

The number of inpatient falls has reduced slightly from February '12. Recent scrutiny of the data by ward shows some significant reductions where there have been focused action plans. There has been an overall reduction across the year and through the Trust wide strategies being employed it is anticipated that this will continue to reduce over the remainder of the year.

The recent introduction of the SHA Safety Thermometer across the Trust will provide benchmark data and further focus to the falls reduction programme.



TARGET / STANDARD

Incidents of Patient Falls	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target
UHL	265	269	245	261	247	232	263	222	222	203	238	234		2901	TBC
Planned Care	55	60	55	60	59	67	67	50	54	49	55	52		683	TBC
Acute Care	198	196	174	193	171	154	186	163	163	148	173	177		2096	TBC
Women's and Children's	4	2	5	6	7	5	4	5	3	1	4	4		50	TBC
Clinical Support	8	11	11	2	10	6	6	4	2	5	6	1		72	TBC
Falls Resulting in Severe Injury or Death	2	0	1	0	0	1	0	0	0	1	0	1	1	1	12

PRESSURE ULCERS (Grade 3 and 4)

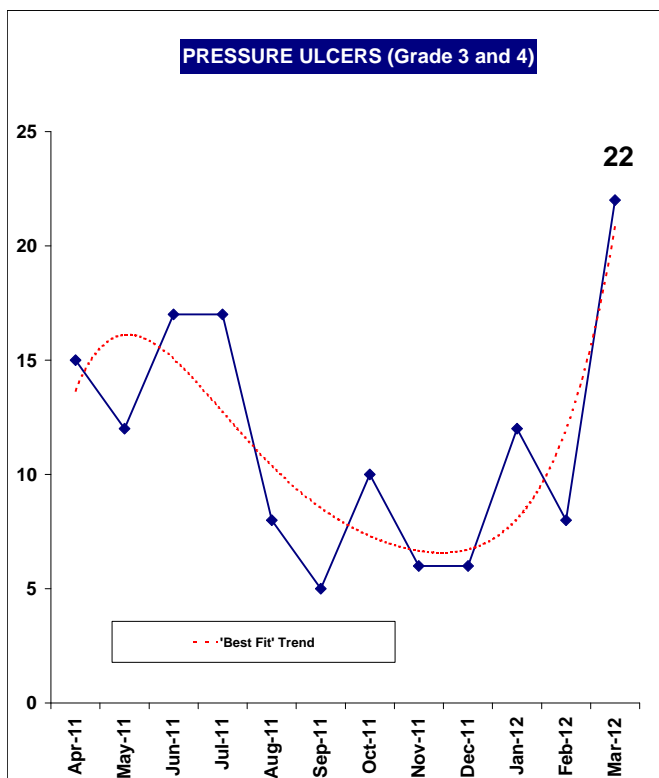
Performance Overview

There were twenty two grade 3 and 4 ulcers reported in March 2012 which is a significant increase compared to previous months. Fifteen ulcers were reported in Acute Care and seven ulcers for Planned Care.

To date, ten pressure ulcers have been classified as avoidable and four were unavoidable but these decisions still need to be ratified by the commissioners. There are eight complex cases still awaiting review by the Tissue Viability Team. Full RCAs will now need to be completed for the majority of the incidents so it would be inappropriate to assume the reasons for the sudden increase. However, it was evident that this was period of high intensity for the Trust with additional capacity putting a considerable strain on resources, particularly staffing and bed availability.

As part of the SHA Ambition to eliminate all avoidable pressure ulcers by December 2012, an Intensive Pressure Ulcer Support Team will be visiting the Trust on the 31st May. The team, consisting of senior nurses and Tissue Viability Nurse Specialists, will review the systems and processes to eliminate pressure ulcers and highlight good practice.

An annual review of pressure ulcers for 2011/12 is being presented at the next GRMC.



TARGET / STANDARD

REPORTED ONE MONTH IN ARREARS	October - 1 case to be classified with 8 in March 2012													YTD	Target
	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12		
Pressure Ulcers (Grade 3 and 4)	15	12	17	17	8	5	10	6	6	12	8	22		138	197
Attributable to Trust							6	6	2	10	4	10		38	
Not Attributable to Trust							3	0	4	2	4	4		17	

PATIENT EXPERIENCE

Performance Overview

In April 2012, 1,854 Patient Experience Surveys were returned which is the largest number of surveys the Trust has ever received in one month and exceeds the target by 319 (21%).

April's return rate is a result of the response to the newly revised Patient Experience Surveys and marketing & promotion of the new Friends and Family Test - "How likely is it that you would recommend this service to friends and family?". There are 6 possible responses to this question - Extremely likely (promoter), Likely (passive), Neither likely nor unlikely, Unlikely, Not at all, Don't Know (detractors). The percentage of detractors is subtracted from the percentage of promoters to obtain the overall NET Promoter score.

The NET Promoter is a regional CQUIN, 25% of payment was dependent on the Trust establishing a baseline NET promoter score for 10% of adult inpatients discharged in April, this target has been achieved. Total number of NET promoter responses: 1,225

Number of Promoters:	743
Number of passives:	364
Number of detractors:	118
Overall NET promoter score:	51.02

NET promoter scores will be benchmarked across the region to define a top quartile standard. The SHA will then set each trusts target which will either be a 10 point improvement or achieving / maintaining top quartile performance for the year. This target will be applied by the end of May 2012

The Trust overall Respect & Dignity score has improved for April and remains RAG rated Green.

The Outpatient Patient Experience Survey illustrates improvements in both overall care & respect and dignity scores - both scores are now RAG rated as Green.

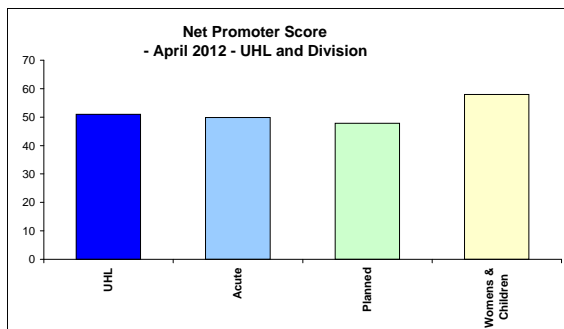
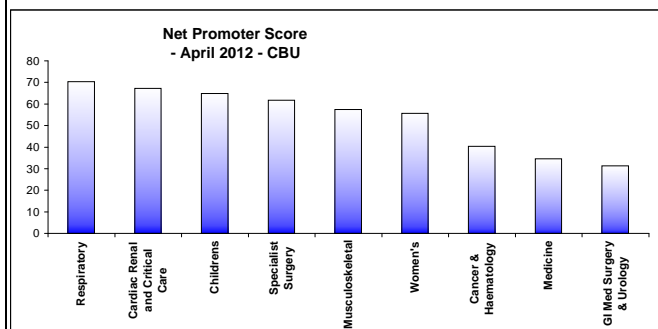
Friends & Families Test - the Net Promoter - APRIL 2012

Number of Responses 1225 Coverage 12.7% Net Promoter Score 51.02

Apr-11 May-11 Jun-11 Jul-11 Aug-11 Sep-11 Oct-11 Nov-11 Dec-11 Jan-12 Feb-12 Mar-12 Apr-12

Division	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12
COMMENCED APRIL 2012													
Acute													49.9
Planned													47.8
Womens & Children													58.0

UHL	COMMENCED APRIL 2012												51.0
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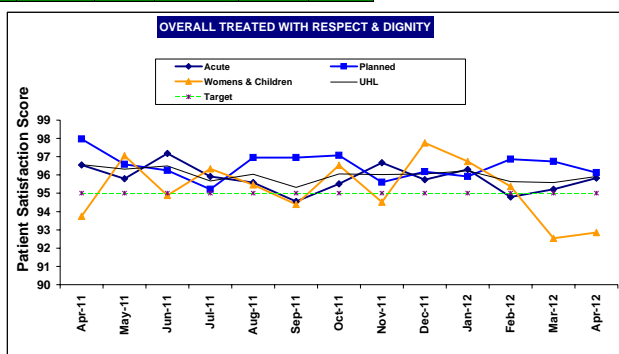
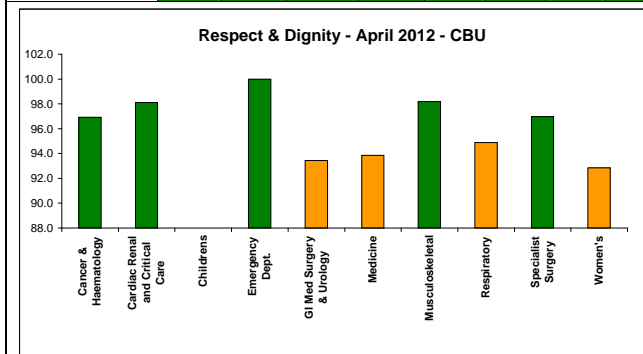
Patient Experience Surveys

Return Rates - April 2012

Division	Returned	Target	% Achieved
Acute Care	950	735	129.3%
Planned Care	755	630	119.8%
Women's and Children's	149	170	87.6%
UHL	1,854	1,535	120.8%

Overall, did you feel you were treated with respect and dignity while you were in the hospital? (Paper surveys only)

Division	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	Status
Acute	96.6	95.8	97.2	95.9	95.6	94.5	95.5	96.7	95.7	96.3	94.8	95.2	95.8	▲
Planned	98.0	96.6	96.2	95.2	97.0	97.0	97.1	95.6	96.2	95.9	96.9	96.7	96.1	▼
Womens & Children	93.8	97.1	94.9	96.3	95.5	94.4	96.5	94.5	97.8	96.7	95.4	92.5	92.9	▲
UHL	96.6	96.3	96.5	95.7	96.0	95.3	96.1	96.0	96.1	96.2	95.6	95.6	95.9	▲



EMERGENCY DEPARTMENT

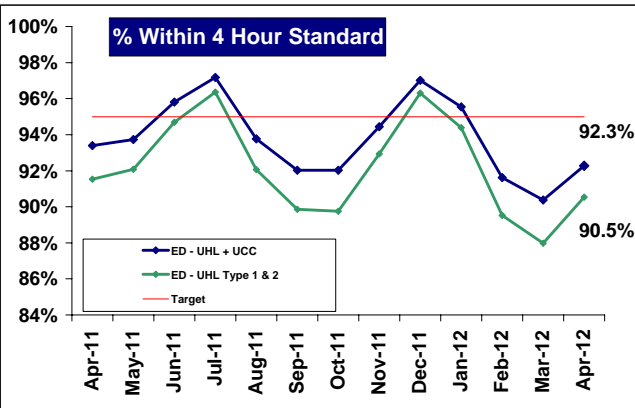
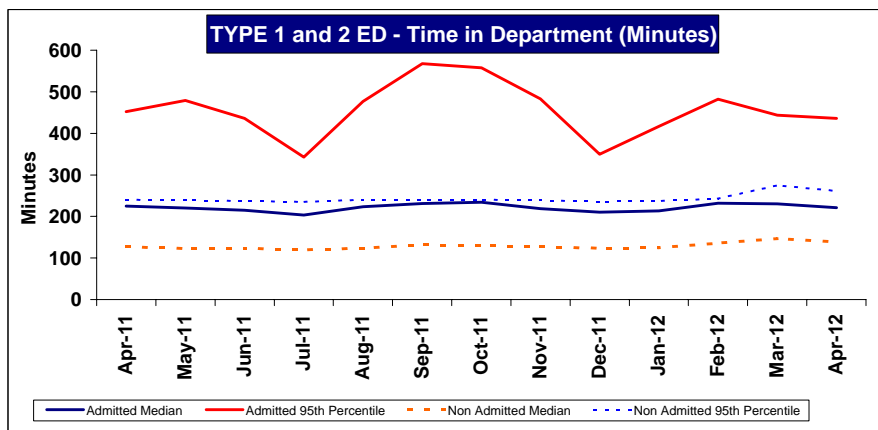
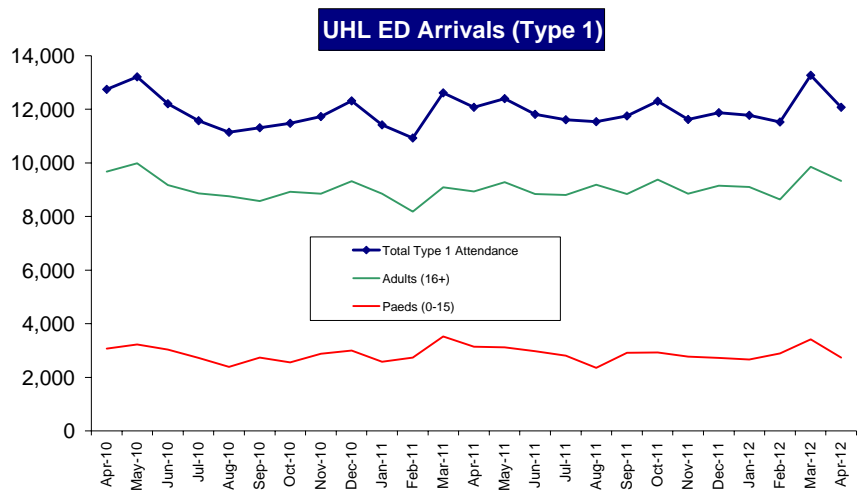
Performance Overview

Performance for April Type 1 & 2 is 90.5% and 92.3% including the Urgent Care Centre (UCC). Whilst this meets the April trajectory set in the remedial plan, performance remains erratic.

Key Actions

Over the past few months, plans have been presented to commissioners, with the latest remedial action plan submitted in March which was shortly followed by an improvement notice as a result of continued underperformance. Despite updated plans being submitted and not accepted, these have been subsequently summarised at the Emergency Care Network and approved by UHL clinicians. Cross reference to related work streams regarding internal delays have also been made.

Progress against the plans was presented to the Executive Team on the 15th May.



Total Time in the Department

April 2012 - ED Type 1 and 2

	Admitted	Not Admitted	Total
0-2 Hours	287	4477	4764
3-4 Hours	1781	5512	7293
5-6 Hours	376	470	846
7-8 Hours	199	108	307
9-10 Hours	55	18	73
11-12 Hours	27	4	31
12 Hours+	17	4	21
Sum:	2742	10593	13335

CLINICAL QUALITY INDICATORS

PATIENT IMPACT

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	TARGET
Left without being seen %	2.5%	2.2%	2.0%	2.1%	2.8%	2.4%	2.9%	2.0%	2.3%	2.1%	2.4%	3.6%	2.8%	<=5%
Unplanned Re-attendance %	6.6%	5.6%	5.2%	5.9%	6.7%	5.5%	6.0%	5.7%	5.4%	6.1%	6.1%	6.6%	6.2%	< 5%

TIMELINESS

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	TARGET
Time in Dept (95th centile)	306	307	257	239	304	338	341	288	240	264	331	331	320	< 240 Minutes
Time to initial assessment (95th)	70	56	41	39	48	48	61	48	42	32	34	40	34	<= 15 Minutes
Time to treatment (Median)	59	54	50	34	34	39	44	43	42	42	54	61	45	<= 60 Minutes

4 HOUR STANDARD

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	95.0%	▲
ED - (UHL + UCC)	93.4%	93.7%	95.8%	97.2%	93.8%	92.0%	92.0%	94.4%	97.0%	95.5%	91.6%	90.4%	92.3%	92.3%	95.0%	▲
ED - UHL Type 1 and 2	91.5%	92.1%	94.7%	96.4%	92.1%	89.9%	89.8%	92.9%	96.3%	94.4%	89.5%	88.0%	90.5%	90.5%	95.0%	▲
ED Waits - Type 1	90.6%	91.3%	94.1%	95.9%	91.0%	88.7%	88.5%	92.1%	96.0%	93.7%	88.3%	86.6%	89.5%	89.5%	95.0%	▲

18 WEEK REFERRAL TO TREATMENT

Performance Overview

Admitted performance in April stands at 93.7%, with all specialties delivering above the 90% target as expected.

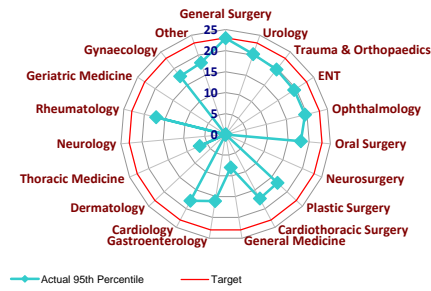
The non-admitted target has been achieved at 97.1%. All specialties with the exception of Ophthalmology have also achieved.

As part of an action plan to recover the Ophthalmology performance, additional outpatient activity is currently taking place which is anticipated to resume performance at the end of June.

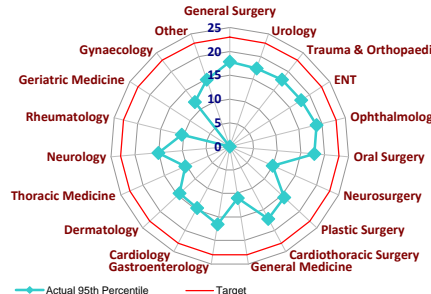
Key Actions

New standards from April 2012 include the requirement that 92% of patients on an incomplete pathway (i.e. patients waiting for a decision to treat or treatment) should have been waiting no more than 18 weeks. UHL performance for April is 95.5%. Nationally at the end of January (latest report period) 92.3% of incomplete pathways were shown to be < 18 weeks.

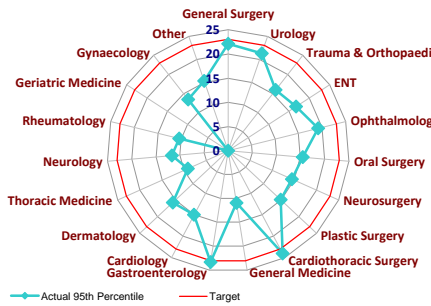
Admitted 95th Percentile by Specialty - April 2012



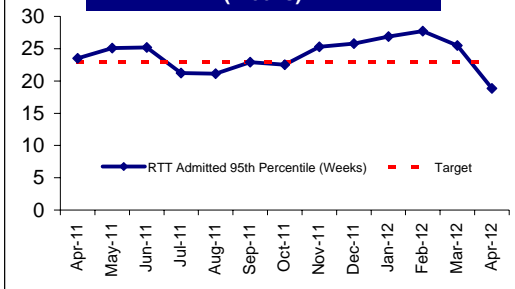
Non-Admitted 95th Percentile by Specialty - April 2012



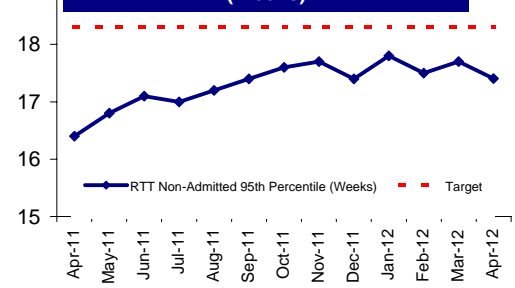
Incomplete 95th Percentile by Specialty - April 2012



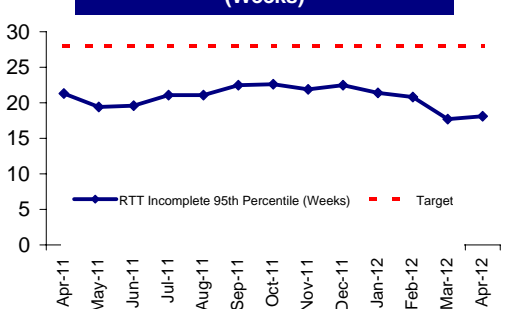
RTT - Admitted 95th Percentile Wait (Weeks)



RTT - Non-Admitted 95th Percentile Wait (Weeks)

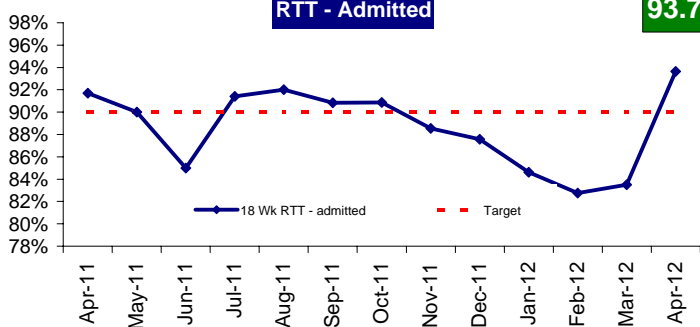


RTT - Incomplete 95th Percentile Wait (Weeks)



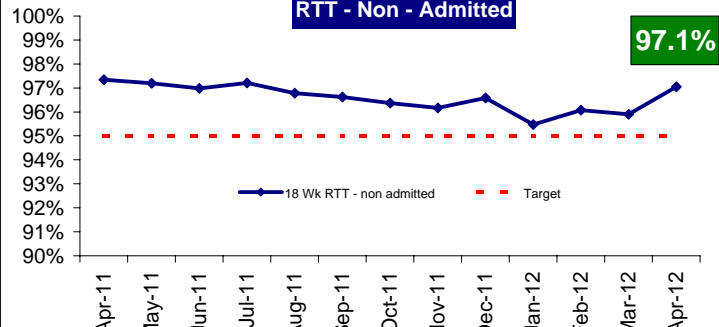
RTT - Admitted

93.7%



RTT - Non - Admitted

97.1%



TARGET / STANDARD

RTT	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12
18 Wk - admitted (%)	91.7	90.0	85.0	91.4	92.0	90.8	90.9	88.5	87.6	84.6	82.8	83.5	93.7
18 Wk - non admitted (%)	97.3	97.2	97.0	97.2	96.8	96.6	96.4	96.2	96.6	95.5	96.1	95.9	97.1

Target	Status
90%	▲
95%	▲

	NEW OPERATING FRAMEWORK INDICATOR APRIL 2012	Apr-12	Target
RTT - Incomplete 92% in 18 Weeks		94.9	92%
RTT 18 Weeks Waiting times - Delivery in All Specialties		1	0
6 Week - Diagnostic Test Waiting Times		1.2	<1%

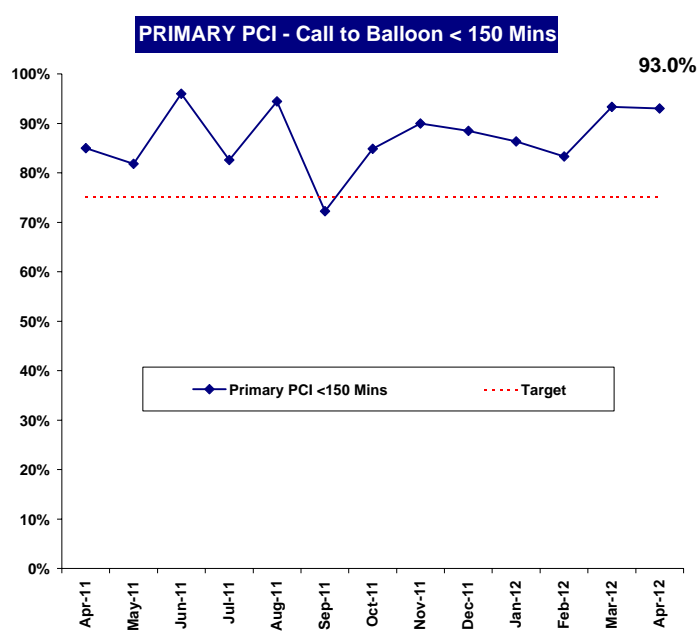
PRIMARY PCI

Performance Overview

The percentage of eligible patients with acute myocardial infarction who received Primary PCI within 150 minutes of calling professional help in April was 93.0% (40 of 43 patients)

Key Actions

Monthly clinical MINAP meetings, at which both EMAS and Commissioners are invited, are held to review individual cases and agree actions to improve quality and performance.



Primary PCI <150 Mins	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target
	85.0%	81.8%	96.0%	82.6%	94.4%	72.2%	84.8%	90.0%	88.5%	86.4%	83.3%	93.3%	93.0%	93.0%	75.0%

SAME SEX ACCOMMODATION

Performance Overview

All UHL wards and intensivists areas continue to offer Same Sex Accommodation (SSA) in line with the UHL SSA Matrix guidance.

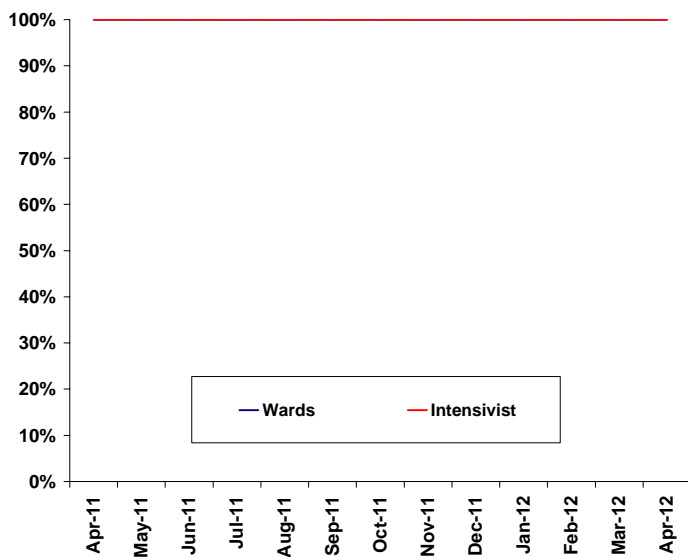
However in April 2012 UHL national breach data declared three unjustified SSA breaches. The breaches occurred on AMU.

Key Actions

AMU have been asked to complete a Root Cause Analysis for all three breaches that occurred in April 2012.

The Brain Injury Unit, LGH, will continue to report clinically justified breaches locally. The Division is aiming to relocate the unit to the LRI in this financial year.

% BEDS PROVIDING SAME SEX ACCOMODATION



TARGET / STANDARD

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target
Wards	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Intensivist	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

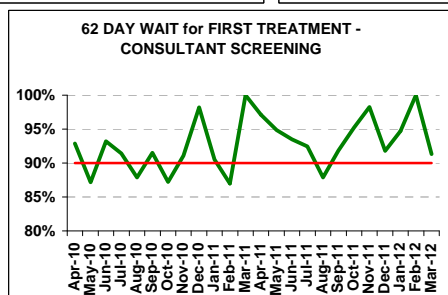
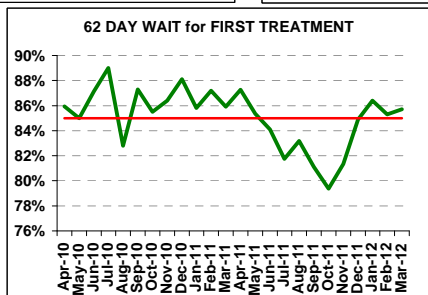
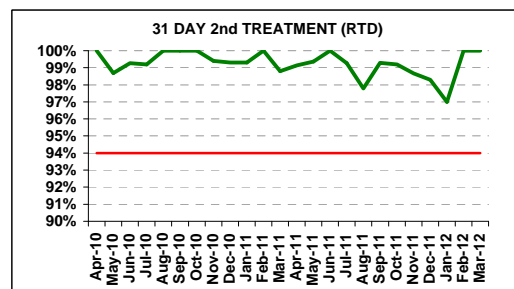
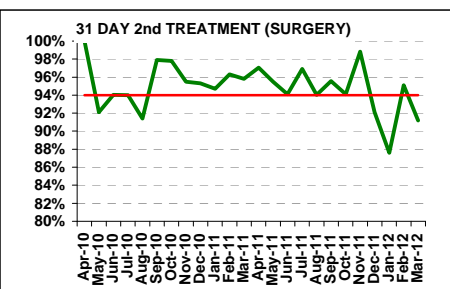
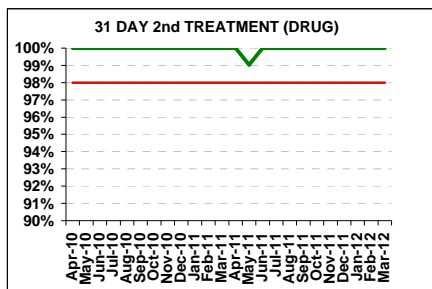
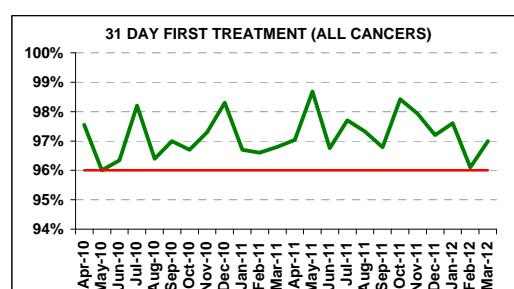
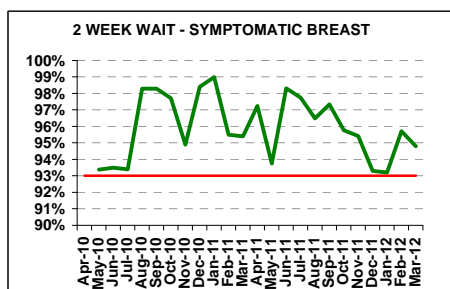
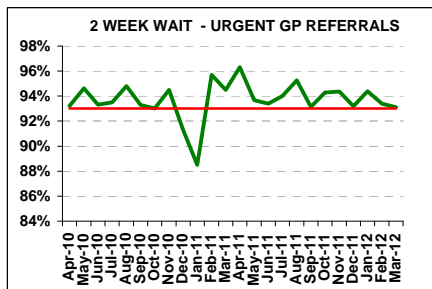
CANCER TREATMENT

Performance Overview

Eight of the cancer targets are delivering against performance thresholds for March (one month in arrears reporting), including the 62 day from referral to treatment target.

31 day subsequent target – this has not been achieved in March (one month in arrears) primarily due to the availability of critical care and high dependency availability. A proposal has been received by the Executive Team for interim arrangements (Phase 1) involving the temporary increase of critical care and high dependency capacity which has been supported. Further discussions are required with commissioners regarding any increases being sustained on a more permanent basis.

Commitment	Threshold	Qtr 1	Qtr 2	Qtr 3	Qtr 4	YTD
Maximum two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	93.0%	94.4%	94.2%	93.9%	93.6%	94.0%
Two week wait for symptomatic breast patients (Cancer not initially suspected)	93.0%	96.7%	97.2%	94.8%	94.7%	95.9%
31-day (Diagnosis To Treatment) wait for first treatment: all cancers	96.0%	97.5%	97.3%	97.9%	96.9%	97.4%
31-day wait for second or subsequent treatment: anti cancer drug treatments	98.0%	99.6%	100.0%	100.0%	100.0%	99.9%
31-day wait for second or subsequent treatment: surgery	94.0%	95.9%	95.6%	95.3%	91.7%	94.5%
31-day wait for second or subsequent treatment: radiotherapy treatments	94.0%	99.5%	98.8%	98.7%	98.9%	99.0%
62-day (urgent GP referral to treatment) wait for first treatment: all cancers	85.0%	85.5%	82.1%	82.0%	85.8%	83.8%
62-day wait for first treatment from consultant screening service referral: all cancers	90.0%	95.0%	90.5%	95.3%	95.0%	93.8%
62-day wait for first treatment from consultant upgrade	85.0%	100.0%	85.7%	66.7%	100.0%	87.5%



STAFF EXPERIENCE / WORKFORCE

Performance Overview

Appraisal

There was a decrease in the rolling twelve month average appraisal rate for April however the number of appraisals which took place during the month was the highest for four months.

Human Resources continue to work closely with Divisions and Directorates in implementing targeted actions to continue to improve appraisal performance.

Sickness

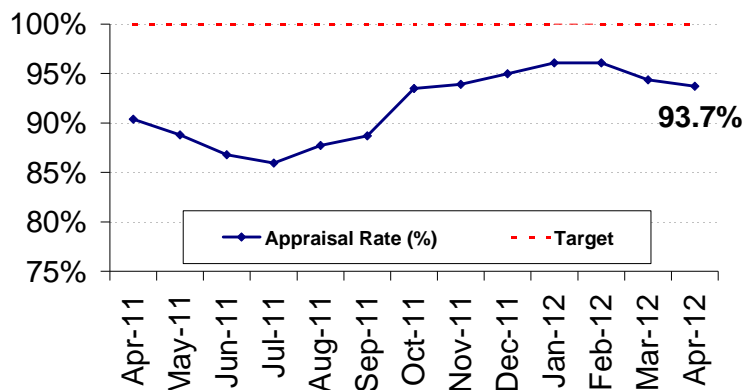
The reported sickness rate for April is 3.9%.

The actual rate is likely to be at around 0.5% lower as absence periods are closed. Currently therefore the sickness rate is higher than the previous 11 months but may fall after the absence periods have been closed down.

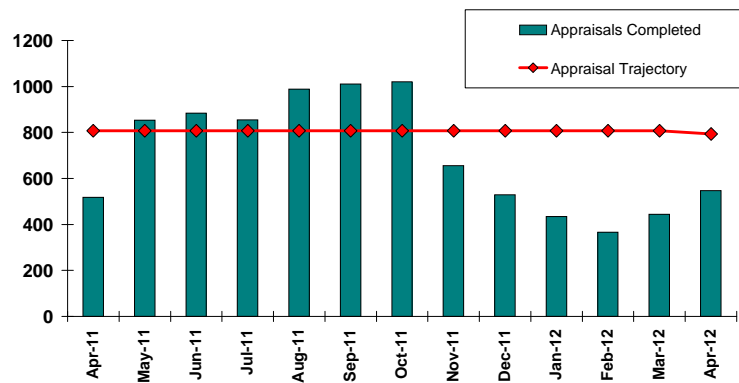
The 12 month rolling sickness has remained at 3.5%.

Human Resources are currently working with Divisions to performance manage areas with the highest sickness rates. The revised Sickness Absence Policy is being communicated and will be operational from 1st June.

APPRAISAL RATES



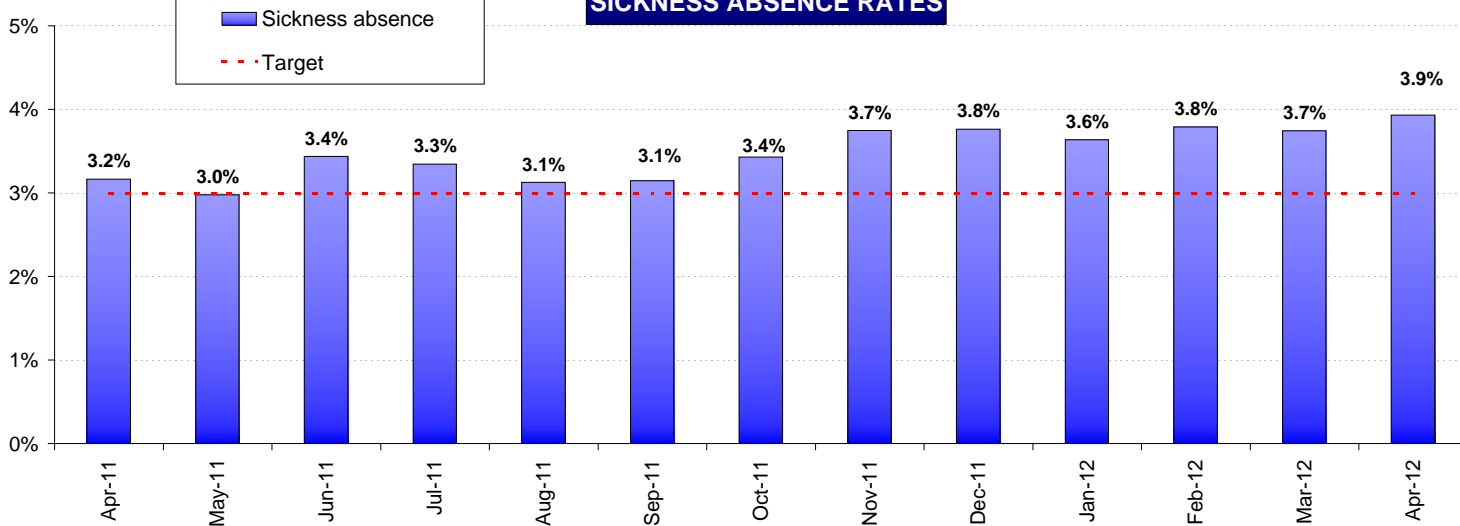
APPRAISALS COMPLETED



Appraisal Trajectory assumes that appraisals are evenly distributed across the year

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	YTD	Target	Status
Appraisals	90.4%	88.8%	86.8%	85.9%	87.7%	88.7%	93.5%	93.9%	95.0%	96.1%	96.1%	94.4%	93.7%	93.7%	100%	▼

SICKNESS ABSENCE RATES



VALUE FOR MONEY - EXECUTIVE SUMMARY

Issues	Comments
Actual Income & Expenditure Year to Date	Income at Month 1 of £58.6 million is £0.2 million (0.3%) adverse to Plan. Expenditure of £60.1 million is £0.3 million adverse to Plan. The actual deficit of £1.5 million is £0.4 million adverse against Plan.
Activity/Income	Year to date patient care income is £0.4m (1%) adverse to Plan. This reflects an under-performance on day cases of £0.1m, elective inpatients of £0.4m and ECMO / Bone Marrow Transplants of £0.3m. These adverse movements are offset to some extent by favourable variances for Emergencies £0.3m, and outpatients £0.1m
BPPC	The Trust achieved an overall 30 day payment performance of 86% for value and 83% for volume for trade creditors in April 2012.
Cost Improvement Programme	At Month 1 Divisions have reported £1.6 million of savings, short of the £1.8 million target by £0.2 million.
Balance Sheet	Cash has increased in line with a decrease in the value of trade and other receivables and a decrease in the value of trade and other payables.
Cash Flow	The year to date cash balance is £22.5 million, a £4.1million increase of the year end value. Cash continues to be actively managed, and £18 million balance is forecast to year end.
Capital	The Trust is has spent £0.7m (2% of the Plan) in April and is forecasting to spend the £32.1m plan by year end
Risks	The Chief Operating Officer and Director of Finance and Procurement will update the Board on the financial position and associated risks, and actions being taken to ensure delivery of the planned surplus. Key risks will be potential fines and penalties around targets; Readmissions; Operational metrics (eg N:FUp ratios); delivery of the CIPs and activity plans.

Financial Metrics	Weighting	April	Year to Date	Score
		Result	Result	
EBITDA achieved (% of plan)	10.0%	82.7%	82.7%	3
EBITDA margin (%)	25.0%	3.6%	3.6%	2
Return on assets (%)	20.0%	-0.1%	-0.1%	2
I&E surplus (%)	20.0%	-2.6%	-2.6%	1
Liquidity ratio (days)	25.0%	16	16	3
Overall Financial Risk Rating				2

	Risk Ratings Table				
	5	4	3	2	1
EBITDA achieved (% of plan)	100%	85%	70%	50%	<50%
EBITDA margin (%)	11%	9%	5%	1%	<1%
Return on assets (%)	6%	5%	3%	-2%	<-2%
I&E surplus (%)	3%	2%	1%	-2%	<-2%
Liquidity ratio (days)	60	25	15	10	<10

INCOME and EXPENDITURE ACCOUNT

Income and Expenditure Account for the Period Ended 30 April 2012				
	2012/13 Annual Plan £000	April 12		
		Plan £ 000	Actual £ 000	Variance (Adv) / Fav £ 000
Elective	72,179	5,461	5,071	(389)
Day Case	51,147	3,860	3,738	(122)
Emergency	176,747	14,620	14,940	319
Outpatient	87,585	6,736	6,846	110
Other	222,402	19,136	18,771	(365)
Patient Care Income	610,060	49,812	49,365	(447)
Teaching, Research & Development	75,517	6,193	6,209	16
Non NHS Patient Care	7,603	619	689	70
Other operating Income	27,197	2,144	2,353	209
Total Income	720,377	58,768	58,616	(152)
Medical & Dental	139,722	11,643	11,734	(91)
Nursing & Midwifery	164,860	13,638	13,611	27
Other Clinical	55,089	4,622	4,605	17
Agency	3,224	294	805	(511)
Non Clinical	72,079	6,245	6,195	50
Pay Expenditure	434,974	36,442	36,950	(508)
Drugs	58,844	4,758	4,764	(6)
Recharges	(420)	57	(15)	72
Clinical supplies and services	79,964	6,670	6,470	200
Other	96,185	8,262	8,302	(40)
Central Funds	8,098	0	0	0
Provision for Liabilities & Charges	209	17	27	(10)
Non Pay Expenditure	242,880	19,764	19,548	216
Total Operating Expenditure	677,854	56,206	56,498	(292)
EBITDA	42,523	2,562	2,118	(444)
Interest Receivable	65	5	7	2
Interest Payable	(68)	(6)	(5)	1
Depreciation & Amortisation	(31,197)	(2,633)	(2,633)	0
Surplus / (Deficit) Before Dividend and Disposal of Fixed Assets	11,323	(72)	(513)	(441)
Profit / (Loss) on Disposal of Fixed Assets	0	0	0	0
Dividend Payable on PDC	(11,277)	(1,004)	(1,004)	0
Net Surplus / (Deficit)	46	(1,076)	(1,517)	(441)
EBITDA MARGIN	5.90%		3.61%	

VALUE FOR MONEY - CONTRACT PERFORMANCE

Summary by Point of Delivery of Patient Related Income - April 2012

Casemix	Annual Plan (Activity)	Plan to Date (Activity)	Total YTD (Activity)	Variance YTD (Activity)	Annual Plan (£000)	Plan to Date (£000)	Total YTD (£000)	Variance YTD (£000)
Day Case	82,007	6,156	6,176	21	51,147	3,860	3,738	(122)
Elective Inpatient	23,388	1,798	1,643	(154)	72,179	5,461	5,071	(389)
Emergency / Non-elective Inpatient	111,459	9,238	9,540	300	176,747	14,620	14,940	319
Outpatient	773,865	59,240	59,593	226	87,585	6,736	6,846	110
Emergency Department	160,580	13,200	13,389	189	16,607	1,366	1,385	18
Other	6,833,148	568,723	560,021	(9,041)	205,795	17,770	17,386	(384)
Grand Total	7,984,447	658,355	650,362	(8,459)	610,060	49,812	49,365	(447)

Average tariff	Annual Plan £ / episode	Plan to Date £ / episode	Total YTD £ / episode	Variance YTD £ / episode	Variance YTD %
Day Case	£624	£627	£605	-£22	-3.5%
Elective Inpatient	£3,086	£3,037	£3,086	£50	1.6%
Emergency / Non-elective Inpatient	£1,586	£1,583	£1,566	-£17	-1.0%
Outpatient	£113	£114	£115	£1	1.0%
Emergency Department	£103	£104	£103	-£0	-0.1%
Other					
Grand Total	£76	£76	£76	£0	0.3%

VALUE FOR MONEY - INCOME and EXPENDITURE - DIVISIONAL POSITION

Income and Expenditure Position for the Period Ended 30 April 2012

	Income				Expenditure								Total Year to Date			
	Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m	Pay				Non Pay				Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m
					Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m	Annual Plan £m	Plan to Date £m	Actual £m	Variance (Adv) / Fav £m				
Acute Care	282.5	23.1	23.2	0.1	140.7	11.8	12.0	(0.2)	82.0	6.5	6.6	(0.1)	59.8	4.7	4.5	(0.2)
Clinical Support	31.0	2.5	2.5	(0.0)	106.2	8.7	9.0	(0.3)	16.9	1.6	1.3	0.3	(92.0)	(7.8)	(7.8)	(0.0)
Planned Care	207.8	16.3	16.0	(0.3)	83.9	7.0	7.1	(0.1)	46.3	4.1	4.2	(0.1)	77.6	5.3	4.7	(0.5)
Women's and Children's	112.9	9.3	9.1	(0.2)	64.2	5.3	5.3	(0.0)	26.7	2.2	2.2	0.0	22.0	1.8	1.6	(0.2)
Corporate Directorates	17.0	1.4	1.5	0.0	39.8	3.4	3.3	0.2	62.7	5.2	5.2	0.0	(85.4)	(7.2)	(7.0)	0.2
Sub-Total Divisions	651.2	52.6	52.3	(0.4)	434.7	36.2	36.7	(0.5)	234.5	19.6	19.5	0.2	(18.0)	(3.2)	(3.9)	(0.7)
Central Income	67.8	6.1	6.4	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	67.8	6.1	6.4	0.2
Central Expenditure	0.0	0.0	0.0	0.0	0.2	0.2	0.2	0.0	49.5	3.8	3.7	0.1	(49.7)	(4.0)	(4.0)	0.1
Grand Total	719.0	58.8	58.6	(0.1)	435.0	36.4	36.9	(0.5)	284.0	23.4	23.1	0.3	0.0	(1.1)	(1.5)	(0.4)

COST IMPROVEMENT PROGRAMME

Cost Improvement Programme as at April 2012

Division	Plan £000	Forecast £000	Variance £000	YTD Plan £000	Actual Achieved £000	YTD % of Plan	Recurrent Forecast £000	Non Rec Forecast £000	YTD Achieved £000	RISK RATING OF FORECAST CIPS			Forecast £000
										HIGH	MEDIUM	LOW	
Acute Care	12,279	11,929	(350)	923	883	95.6%	11,929	0	883	3,082	4,363	3,602	11,929
Clinical Support	4,960	4,879	(81)	213	132	61.7%	4,345	534	132	2,151	1,488	1,108	4,879
Planned Care	5,503	5,258	(245)	215	132	61.2%	5,258	0	132	2,283	1,781	1,063	5,258
Women's and Children's	1,397	1,389	(8)	102	94	91.9%	1,293	96	94	196	517	583	1,389
Clinical Divisions	24,140	23,456	(684)	1,454	1,240	85.3%	22,825	631	1,240	7,712	8,149	6,355	23,456
Corporate	6,433	5,704	(730)	359	341	95.0%	5,704	0	341	687	991	3,685	5,704
Central			0						0				0
Total	30,574	29,160	(1,414)	1,813	1,581	87.2%	28,529	631	1,581	8,399	9,140	10,040	29,160

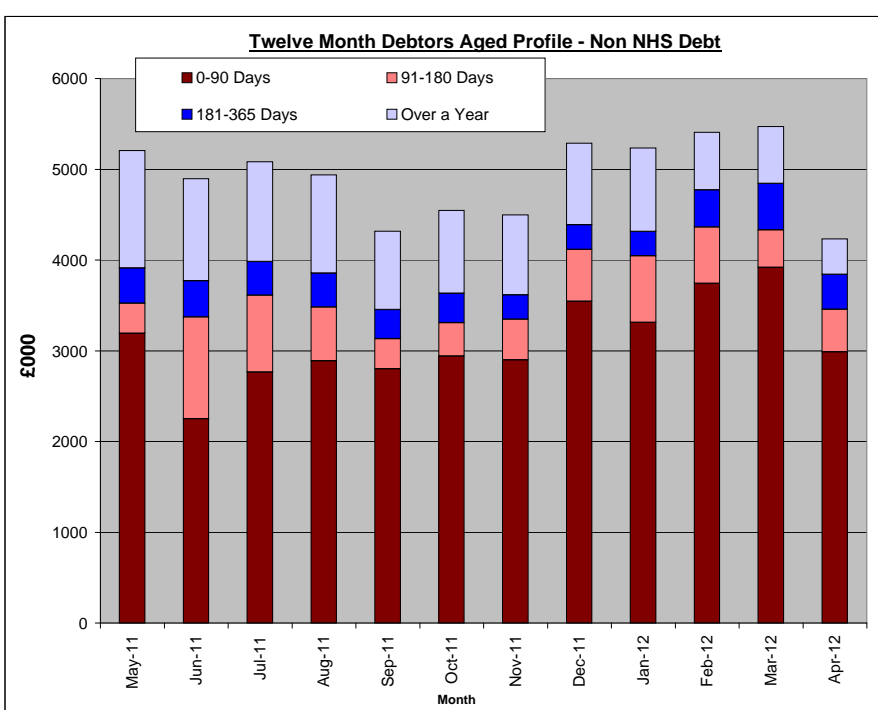
Category	Plan £000	Forecast £000	Variance £000	YTD Plan £000	YTD Achieved £000	YTD % of Plan	Recurrent Forecast £000	Non Rec Forecast £000
Unidentified	2,718	1,680	(1,038)	0	0		1,680	0
Income	5,835	5,787	(48)	278	254	91.4%	5,720	67
Non Pay	7,561	7,504	(57)	456	458	100.4%	7,504	0
Pay	14,460	14,189	(271)	1,079	869	80.5%	13,625	564
Total	30,574	29,160	(1,414)	1,813	1,581	87.2%	28,529	631

Commentary

There is a year to date under performance on delivery of cost improvement of £0.2 million and a year end forecast under-delivery of £1.4 million (including shortfalls in Clinical Divisions of £0.7 million.)

VALUE FOR MONEY - BALANCE SHEET

	Mar-12 £000's Actual	Apr-12 £000's Actual
BALANCE SHEET		
Non Current Assets		
Intangible assets	5,249	5,089
Property, plant and equipment	349,356	348,501
Trade and other receivables	2,188	2,369
TOTAL NON CURRENT ASSETS	356,793	355,959
Current Assets		
Inventories	12,262	12,208
Trade and other receivables	28,453	23,659
Other Assets	0	0
Cash and cash equivalents	18,369	22,519
TOTAL CURRENT ASSETS	59,084	58,386
Current Liabilities		
Trade and other payables	(61,605)	(60,841)
Dividend payable	0	259
Borrowings	(4,038)	(4,038)
Provisions for liabilities and charges	(789)	(789)
TOTAL CURRENT LIABILITIES	(66,432)	(65,409)
NET CURRENT ASSETS (LIABILITIES)	(7,348)	(7,023)
TOTAL ASSETS LESS CURRENT LIAB	349,445	348,936
Non Current Liabilities		
Borrowings	(1,427)	(2,339)
Other Liabilities	0	0
Provisions for liabilities and charges	(2,120)	(2,213)
TOTAL NON CURRENT LIABILITIES	(3,547)	(4,552)
TOTAL ASSETS EMPLOYED	345,898	344,384
Public dividend capital	277,487	277,487
Revaluation reserve	64,706	64,709
Retained earnings	3,705	2,188
TOTAL TAXPAYERS EQUITY	345,898	344,384



Type of Debtors	0-90 days	91-180 days	181-365 days	365+ Days	TOTAL
	£000s	£000s	£000s	£000s	£000s
NHS Sales ledger	12,817	(178)	(1,709)	(13)	10,917
Non NHS sales ledger by division:					
Corporate Division	626	20	130	195	971
Planned Care Division	322	90	113	97	622
Clinical Support Division	446	83	2	5	536
Women's and Children's Division	277	42	22	31	372
Acute Care Division	1,315	236	116	65	1,732
Total Non-NHS sales ledger	2,986	471	383	393	4,233
Total Sales Ledger	15,803	293	- 1,326	380	15,150
Other Debtors					
WIP					3,871
SLA Phasing & Performance					(1,626)
Bad debt provision					(1,363)
VAT - net					948
Other receivables and assets					6,679
TOTAL					23,659

Commentary

Cash has increased in line with a decrease in the value of trade and other receivables and a decrease in the value of trade and other payables.

Accounts receivable metrics:

Invoice cycle time	Apr - 12 Days	Mar - 12 Days	Non-NHS days sales outstanding (DSO)	
			Apr - 12 YTD Days	Mar - 12 YTD Days
Req date to invoice raised	13.7	13.7	DSO (all debt)	58.5 90.5
Service to invoice raised	32.3	32.4	DSO (In year debt)	31.2 70.6

VALUE FOR MONEY - CASH FLOW

CASH FLOW for the PERIOD ENDED 30 APRIL 2012

Commentary

The Trust's cash position compared to plan reflects:

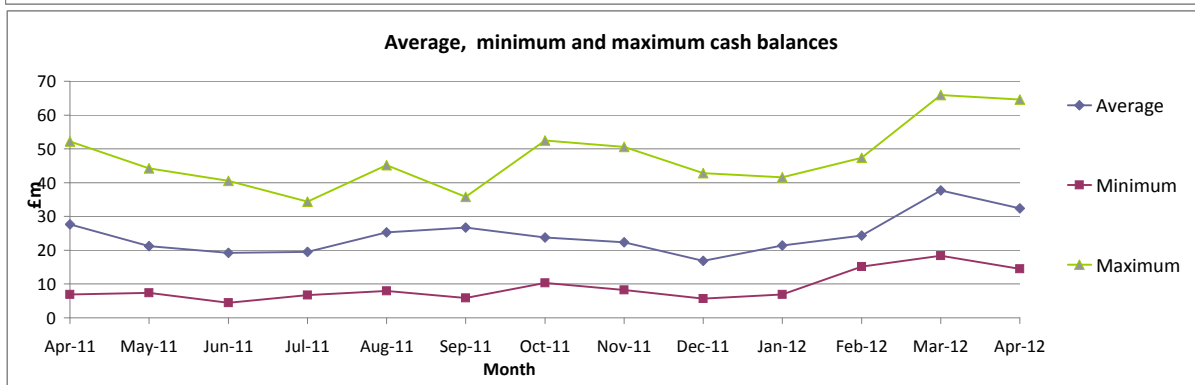
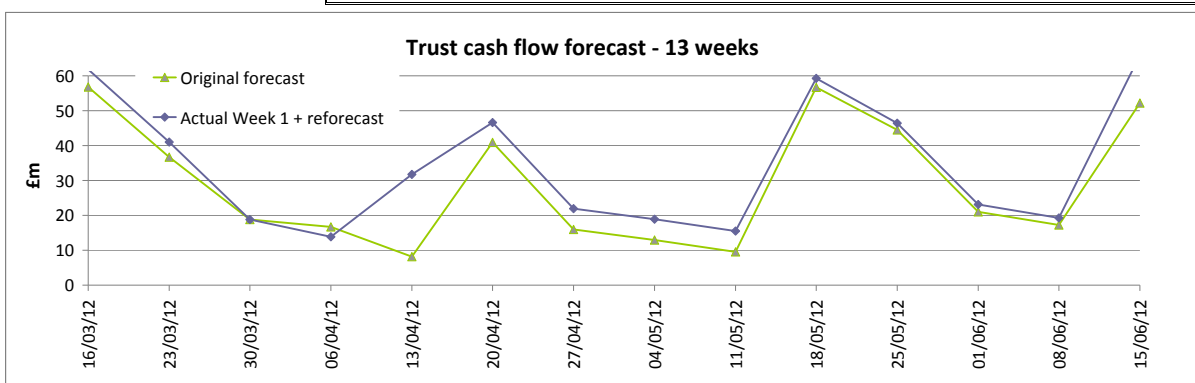
- (£0.4 million) adverse variance in the EBITDA YTD position
- (£3.1 million) increase in trade and other payables
- £4.6 million decrease in trade and other receivables
- £0.8 million underspend on capital

The cash forecast is based on the April performance. The cash balance is kept above £2 million at all times and the year end target balance is £18 million.

	2012/13 April Plan £ 000	2012/13 April Actual £ 000	Variance April £ 000
CASH FLOWS FROM OPERATING ACTIVITIES			
Operating surplus before Depreciation and Amortisation	2,508	2,118	(390)
Impairments and reversals	-	-	-
Movements in Working Capital:			
- Inventories (Inc)/Dec	-	54	54
- Trade and Other Receivables (Inc)/Dec	-	4,613	4,613
- Trade and Other Payables Inc/(Dec)	2,319	(764)	(3,083)
- Provisions Inc/(Dec)	-	93	93
PDC Dividends paid	-	-	-
Interest paid	-	(50)	(50)
Other non-cash movements	(120)	(42)	78
Net Cash Inflow / (Outflow) from Operating Activities	4,707	6,022	1,315
CASH FLOWS FROM INVESTING ACTIVITIES			
Interest Received	7	56	49
Payments for Property, Plant and Equipment	(2,625)	(1,797)	828
Capital element of finance leases	(386)	(131)	255
Net Cash Inflow / (Outflow) from Investing Activities	(3,004)	(1,872)	1,132
Net Cash Inflow / (Outflow) from Financing	-	-	-
Opening cash	18,200	18,369	169
Increase / (Decrease) in Cash	1,703	4,150	2,447
Closing cash	19,903	22,519	2,616

Cash movements to 31st May 2012

	£'000
Cash balance as at 01/05/2012	22,519
<i>Cash to be received</i>	
Contract Income	52,957
Other debtor receipts	11,076
	64,033
<i>Cash to be paid out</i>	
Creditor payment runs	27,473
Payroll (including tax, NI and Pensions)	34,772
PDC dividends	0
	62,245
Month-end cash	24,307



VALUE FOR MONEY - CAPITAL BUDGET

Capital Expenditure Report for the Period 1st April 2012 to 30th April 2012

	Capital Plan	YTD Spend	Forecast	
	2012/13	12/13	Out Turn	Variance
	£000's	£000's	£000's	£000's
Sub Group Budgets				
IM&T	4,000	58	4,000	0
Medical Equipment	4,600	84	4,600	0
LRI Estates	4,000	-13	4,000	0
LGH Estates	2,000	-4	2,000	0
GGH Estates	2,000	132	2,000	0
Total Sub Group Budgets	16,600	258	16,600	0
Individual Schemes				
ED Redevelopment	1,000	50	1,000	0
MES Installation Costs	1,500	15	1,500	0
Childrens Heart Surgery	1,000	18	1,000	0
Maternity & Gynae Recon.	2,773	16	2,773	0
Theatre Assessment Area (TAA)	1,250		1,250	0
Aseptic Suite	750	0	750	0
Brachytherapy	420		420	0
Office Moves	850		850	0
Feasibility Studies	100	9	100	0
Nutrition BRU Enabling	150		150	0
PPD Building	250		250	0
BRU: Respiratory	2,201		2,201	0
BRU: Nutrition, Diet & Lifestyle	1,383	-0	1,383	0
Divisional Spend: Acute		284	284	-284
Divisional Spend: Planned Care		-1	50	-50
Divisional Spend: Womens & Children		1	50	-50
Divisional Spend: CSSD			50	-50
Divisional Spend: Corporate		3	473	-473
Unallocated Funding	1,273		366	907
MacMillan Information Centre		64	64	-64
Donations	600	7	536	64
Total Individual Schemes	15,500	467	15,500	0
Total Capital Programme	32,100	725	32,100	0

INDICATORS, THRESHOLDS and TARGETS

QUALITY and PERFORMANCE REPORT

PATIENT SAFETY

	YTD : Cumulative or Current?	Target : Local or National?	Target			
MRSA Bacteraemias	Cumulative	CQUIN	9	>= 1		0
CDT Isolates in Patients (UHL - All Ages)	Cumulative	CQUIN	165	>= Monthly Target+3	Monthly Target+2	<= Monthly Target
% of all adults who have had VTE risk assessment on adm to hosp			90%			
Reduction of hospital acquired venous thrombosis			TBC			
Incidents of Patient Falls	Cumulative	Local Target	2569			
In Hospital Falls resulting in Hip Fracture ***	Cumulative	Local Target				

CLINICAL EFFECTIVENESS

Maximum two week wait for an urgent GP referral for suspected cancer to date first seen for all suspected cancers	Cumulative	National Target	93.0%	<90%	90-93%	>=93%
Two Week Wait for Symptomatic Breast Patients (Cancer Not initially Suspected)	Cumulative	National (With Effect 31st Dec 2009)	93.0%	-----	<93%	>=93%
31-Day (Diagnosis To Treatment) Wait For First Treatment: All Cancers	Cumulative	National Target	96.0%	<93%	93-96%	>=96%
31-Day Wait For Second Or Subsequent Treatment: Anti Cancer Drug Treatments	Cumulative	National Target	98.0%	<95%	95-98%	>=98%
31-Day Wait For Second Or Subsequent Treatment: Surgery	Cumulative	National Target	94.0%	<91%	91-94%	>=94%
31-Day Wait For Second Or Subsequent Treatment: Radiotherapy Treatments	Cumulative	National Target	94.0%	<91%	91-94%	>=94%
62-Day (Urgent GP Referral To Treatment) Wait For First Treatment: All Cancers	Cumulative	National Target	85.0%	<80%	80-85%	>=85%
62-Day Wait For First Treatment From Consultant Screening Service Referral: All Cancers	Cumulative	National Target	90.0%	<87%	87-90%	>=90%
62-Day Wait For First Treatment From Consultant Upgrade	Cumulative	National Target	85.0%	<80%	80-85%	>=85%
Emergency 30 Day Readmissions (Following Elective Admission)	Current	Local Target	TBC			
Mortality (CHKS - Risk Adjusted) - Overall	Current	Local Target	85	>100	85-100	<85
Stroke - 90% of Stay on a Stroke Unit	Current	National Target	80.0%	<50%	50-80%	>=80%
Primary PCI Door to Balloon <150 Mins	Cumulative		75.0%	<60%	60-75%	>=75%
Pressure Ulcers (Grade 3 and 4)	Cumulative	Local Target	197			

INDICATORS, THRESHOLDS and TARGETS

QUALITY and PERFORMANCE REPORT

PATIENT EXPERIENCE

Thresholds

	YTD : Cumulative or Current?	Target : Local or National?	Target			
Inpatient Polling - treated with respect and dignity	Current Month		95			>=95
Inpatient Polling - rating the care you receive	Current Month		91			>=91
% Beds Providing Same Sex Accommodation - Wards	Current Month	National Target	100%	<80	>80 and < 100	100.0%
% Beds Providing Same Sex Accommodation - Intensivist	Current Month	National Target	100%	<80	>80 and < 100	100.0%
A&E Waits - UHL + UCC	Cumulative	National Target	95.0%	<94%	94-95%	>=95%
A&E Waits - UHL (Type1 and 2)	Cumulative	Local Target	95.0%	<94%	94-95%	>=95%
Unplanned Re-attendance %	Cumulative	National Target	<=5%		>5%	<=5%
Left without being seen %	Cumulative	National Target	< 5%		>= 5%	< 5%
Time in Dept (95th Percentile)	Cumulative	National Target	< 240 Mins		>= 240 Mins	< 240 Mins
Time to initial assessment (95th Percentile)	Cumulative	National Target	<= 15 Mins		> 15 Mins	<= 15 Mins
Time to treatment (Median)	Cumulative	National Target	<= 60 Mins		> 60 Mins	<= 60 Mins
RTT Admitted Median Wait (Weeks)	Cumulative	National Target	<=11.1			
RTT Admitted 95th Percentile (Weeks)	Cumulative	National Target	<=23			
RTT Non-Admitted Median Wait (Weeks)	Cumulative	National Target	<=6.6			
RTT Non-Admitted 95th Percentile (Weeks)	Cumulative	National Target	<=18.3			
RTT Incomplete Median Wait (Weeks)	Cumulative	National Target	<=7.2			
RTT Incomplete 95th Percentile (Weeks)	Cumulative	National Target	<=28			

STAFF EXPERIENCE / WORKFORCE

Sickness absence	Current Month	Local Target	3%	>4%	>3%<=4%	<=3%
Appraisals	Current Month	Local Target	100%	<90%	>=90%<100%	100%

VALUE FOR MONEY

Income (£000's)	Cumulative	Local Target	681,756			
Operating Cost (£000's)	Cumulative	Local Target	635,693			
Surplus / Deficit (as EBIDTA) (£000's)	Cumulative	Local Target	46,063			
CIP (£000's)	Cumulative	Local Target	38,245			
Cash Flow (£000's)	Current Month	Local Target	18,200			
Financial Risk Rating	Cumulative	Local Target	3			

