

West Hertfordshire Hospitals 
NHS Trust

To: Trust Board
From: Director of Planning
Subject: Performance Report

Executive Summary

1. Background

Emergency admissions for the full year were 7.6% above plan. The trust has struggled to cope with this level of demand, which has contributed to problems in both emergency care targets and a higher level of cancelled operations than we would have liked.

2. Performance successes

At the end of the year the inpatient and outpatient waiting targets were achieved, and the total waiting list and number of 13-week outpatient waiters were well below profile. The 6-month inpatient waiters are also well below profile, which gives the trust a good start to achieving "choice" in 2004-05.

In March all urgent cancer referrals were seen within 2 weeks. Compared with last year's overall figure of 76%, and the recent low of 65% back in July 2003, this is a major turn-around.

Booking targets for the end of the year were also achieved, or nearly so. The target for outpatient booking was 67%, and in March the trust achieved this. For day cases the target was 100%, and the trust achieved 99%, which is very near miss.

3. Areas Requiring Improvement

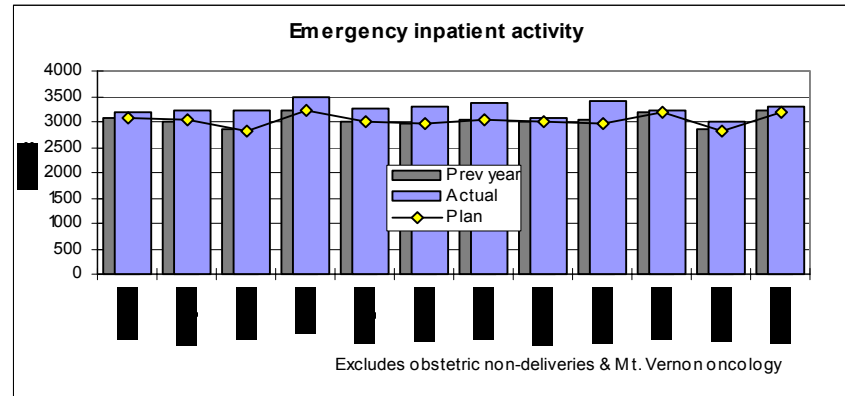
March performance against the 4-hour total wait target in Accident and Emergency deteriorated slightly to 82% across the Trust (down from 83% in February) compared to the target of 90%. (April 2004 weekly figures are now starting to show performance close to 90%.)

Cancelled operations peaked at the 135 in January, but over the complete year the 815 cancelled operations represented 1.9% of elective admissions, compared with a national target of 1% or less.

4. Activity levels

4.1 Emergency care

For the full year, Finished Consultant Episodes (FCEs) were 7.6% above plan.



By specialty the biggest increases compared to plan were: -

- Care of the elderly +833 (+14%)
- Gastro-enterology +374 (+28%)
- Cardiology +310 (+25%)

There were also some decreases, most notably:-

- General medicine -730 (-8%)
- Gynaecology -186 (-12%)
- Trauma & orthopaedics -108 (-4%)

This unplanned activity has impacted upon the Trust's ability to undertake elective care.

4.2 Elective care

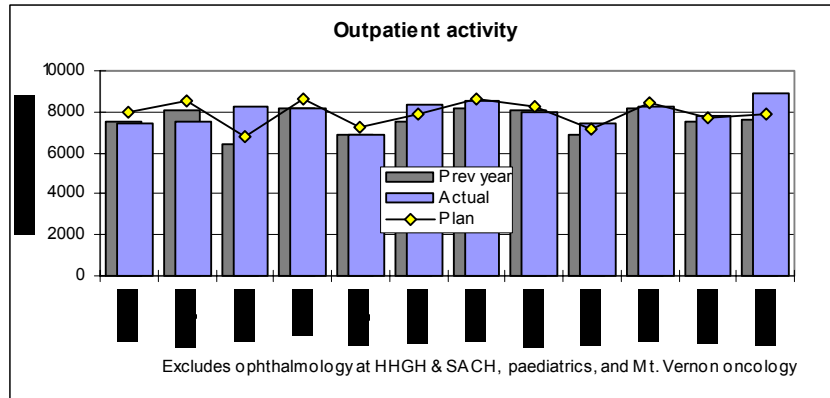
Partly as a result of the continuing higher levels of emergency activity elective inpatient FCEs were 5.0% below plan for the year.

Day case FCEs were relatively unaffected, and were in fact 1.5% above plan. Combining these figures means that overall elective FCEs were 0.5% below plan.

This also brought the day case percentage up to 71% compared to the planned 69%, and in the last 3 months of the year it was averaging 73%.

4.3 Outpatient

In total for the year outpatient first attendances were marginally (0.3%) over plan, helped considerably by figures for March, which were 13% above plan.



The graph shows that activity was about 3% below plan for the first 5 months, and near enough on plan for the following 6 months.

By specialty, the main areas of over-performance against plan were:-

- Ophthalmology +444 (+6%)
- Thoracic medicine +168 (+9%)

(Apparent increases in obstetric and cardiology outpatient activity are due to better recording, and do not reflect a change in actual performance.)

On the other hand we had:-

- Gynaecology -576 (-6%)
- Oral surgery -342 (-11%)
- Urology -293 (-8%)
- Oncology -295 (-5%)

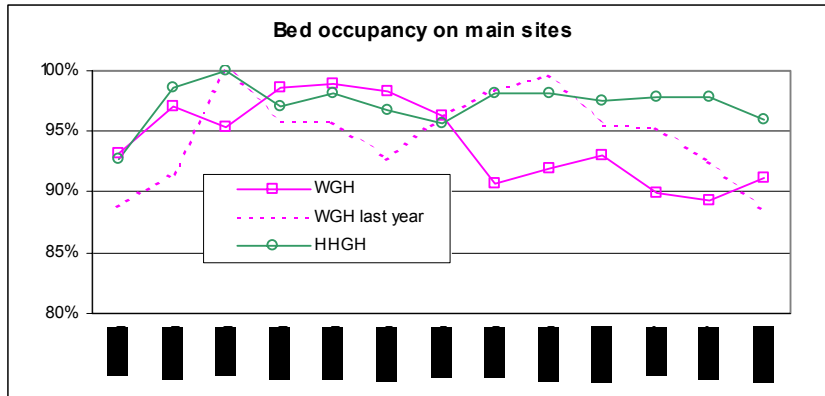
4.4 Cancer fractions

Cancer fraction activity for March was 11% above plan, taking the full year activity to 3.2% above plan.

5. Bed usage

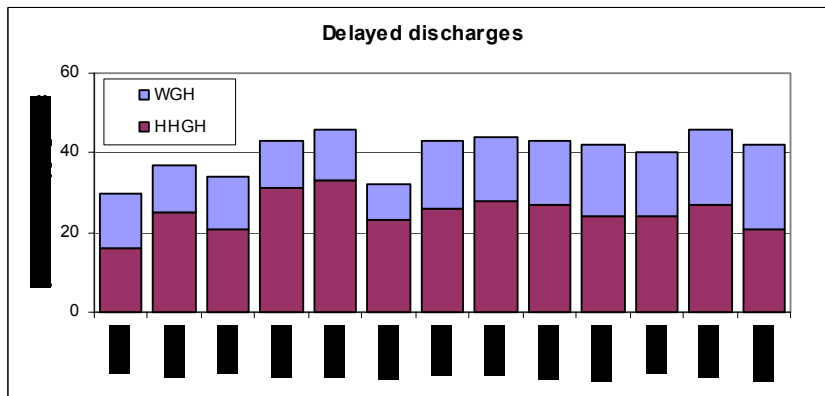
Average bed occupancy for March across all sites decreased from 89% last month, to 86% (still above the National Bed Inquiry norm of 82%), the main change being at Watford, which is probably linked with an easing of emergency admissions.

For 5 of the last 6 weeks, bed occupancy at Watford has been lower than in the corresponding weeks last year.

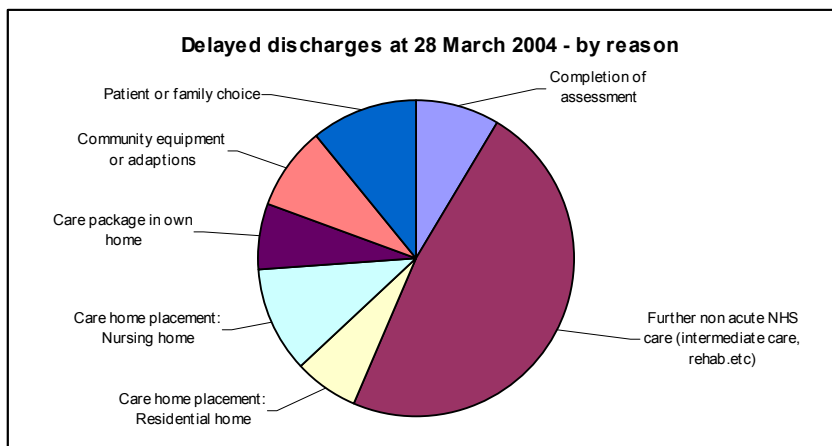


(The other sites have much lower occupancy with Mount Vernon and St Albans averaging 61% and 41% respectively.)

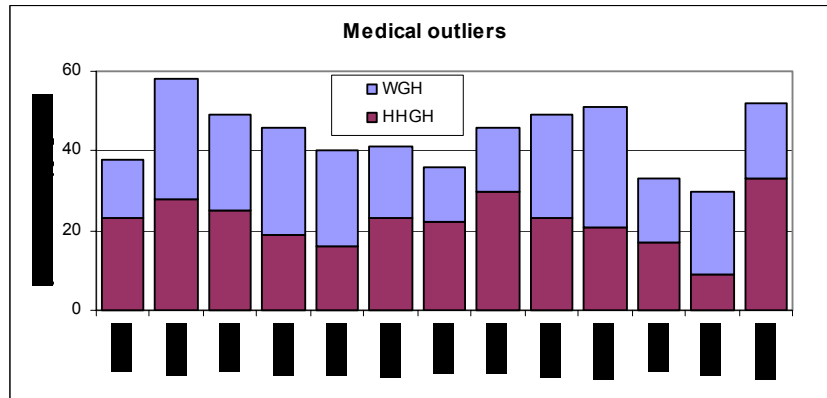
Delayed discharges were at a fairly constant level over the last 7 weeks of 2003-04. The actual peak was on 18 March (27 at Hemel and 19 at Watford) creating pressure on bed availability. These 46 delayed transfers represented 7% of the total beds available on these two sites.



Almost half of the delayed discharges were waiting for further non-acute NHS care, such as intermediate care or rehabilitation. (In Hemel Hempstead these accounted for almost 2/3 of delayed discharges.)



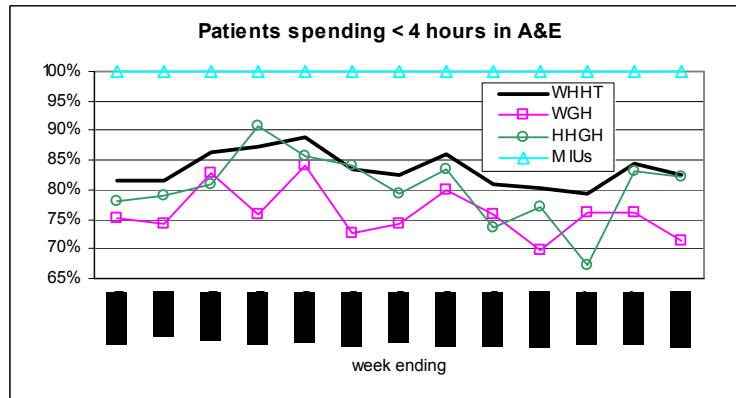
Medical outliers continue to occupy an average 40 surgical beds.



6. Accident & emergency

Over the month of March, performance against the 4-hour target averaged at 82% across the Trust, a further slight decrease on February's average of 83%.

(Trust figures are improved by the fact that at Minor Injury Units at St Albans and Mount Vernon, no patients wait more than 4 hours.)

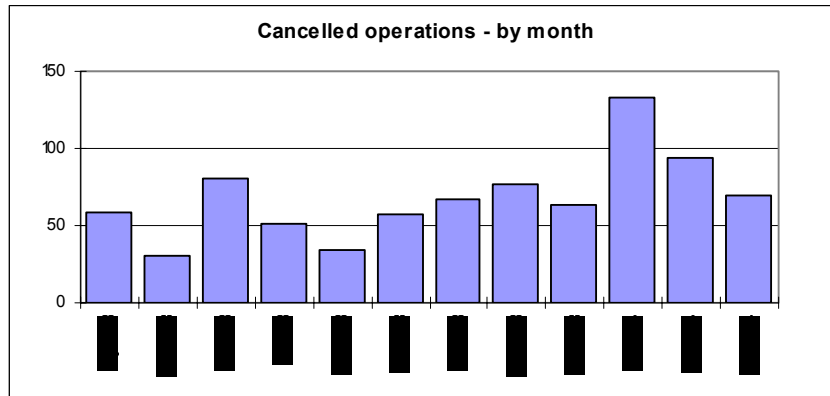


In March, no patients waited longer than 12 hours in the any of the Accident and Emergency Departments.

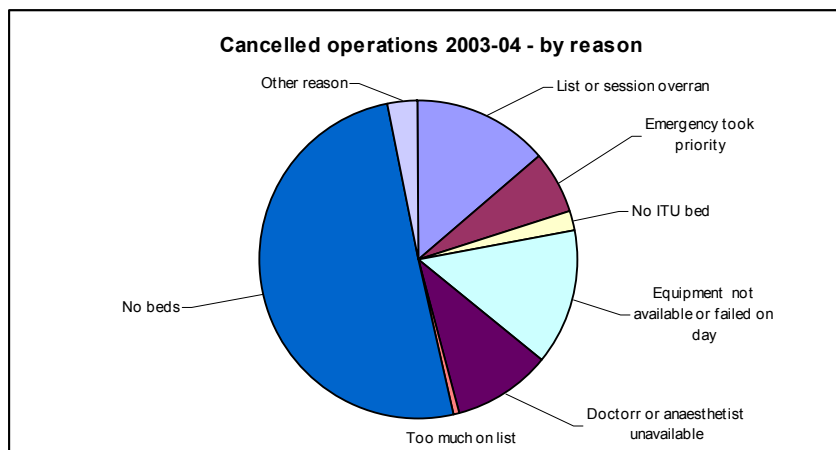
7. Waiting times

Inpatient and day case waiting

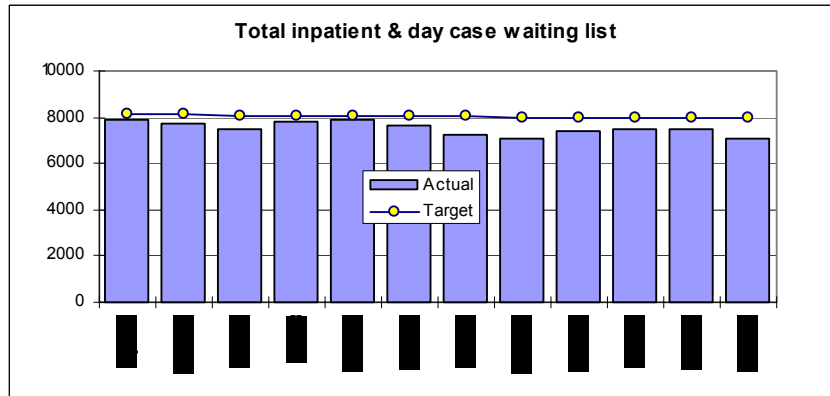
The Trust had to cancel 70 routine operations during March. This is a significant improvement on the previous two months, but it still represents 1.9% of elective admissions, compared to the national target of 1% or less.



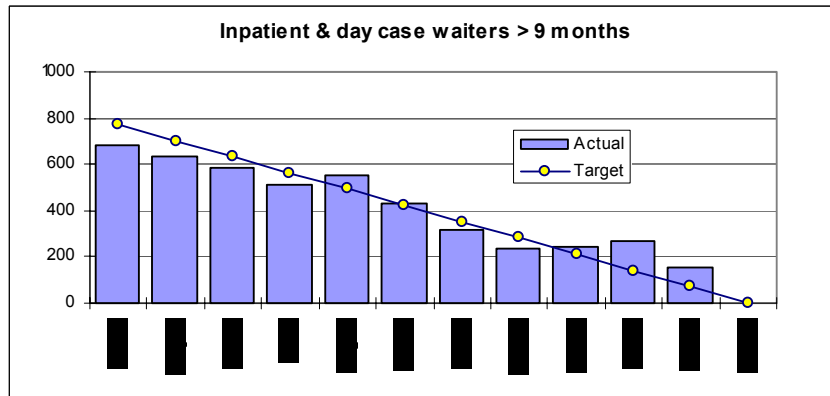
Over the course of the year the trust cancelled 815 operations, just over half of which were due to the lack of beds.



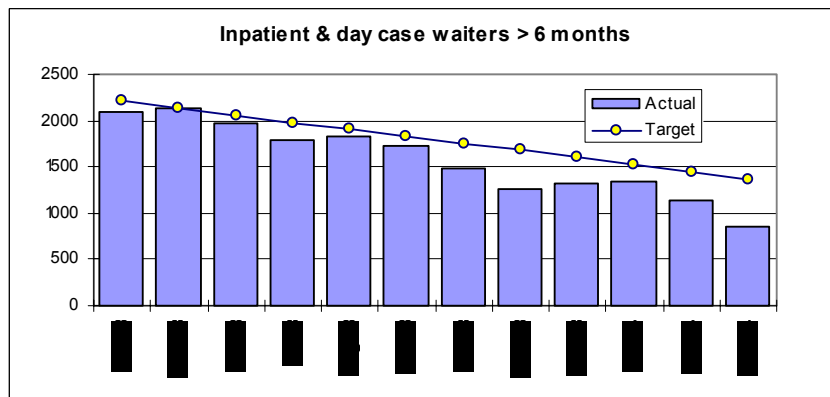
Despite this, the total waiting list has shown a further decrease, and at the end of March was 850 below profile.



The trust achieved the national target of a maximum 9-month wait by the end of March 2004.

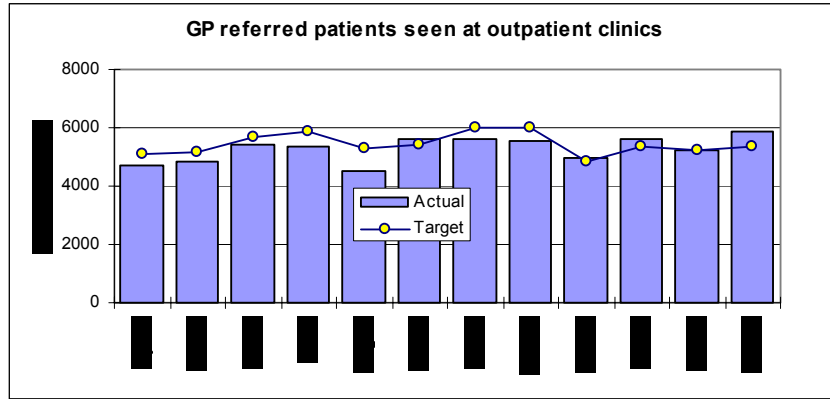


The number of 6-month waiters at the end of March was also well below our profiled figure, which gives the trust a good starting point for achieving choice in 2004-05.

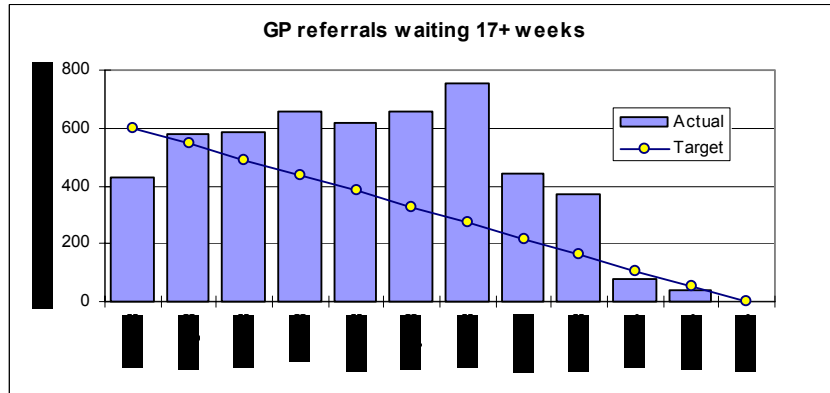


8. Outpatient waiting

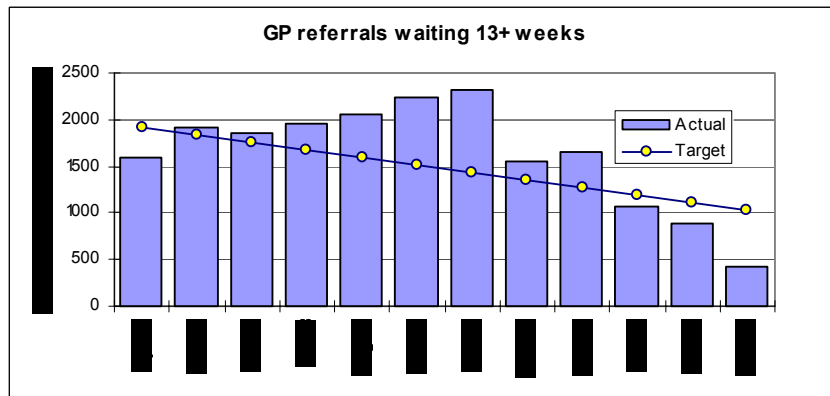
The number of GP referrals seen in March was 10% above profile, which has brought the annual figure to 5.5% above plan.



With this late surge in activity, the trust was able to achieve the national target of a maximum 17-week wait by the end of March 2004.



The trust also managed to bring the number of 13-week waiters well down under target for the end of March.

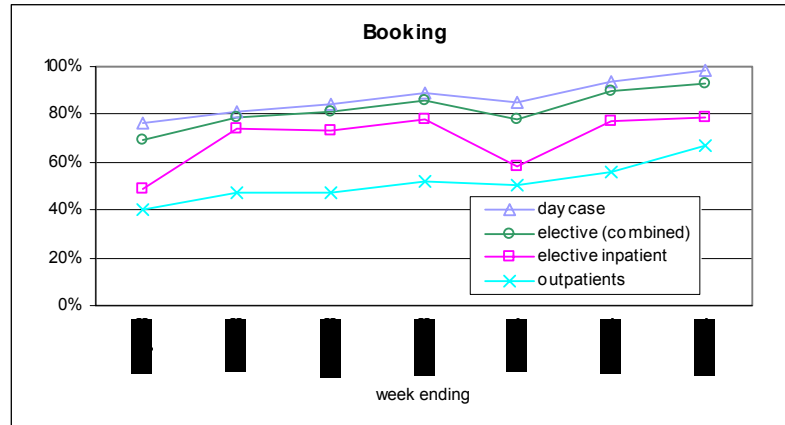


9. Booking

The national booking targets for March 2004 were to achieve:-

- Day cases 100%
- Elective patients 67% (day cases + elective inpatients)
- GP outpatient referrals 67%

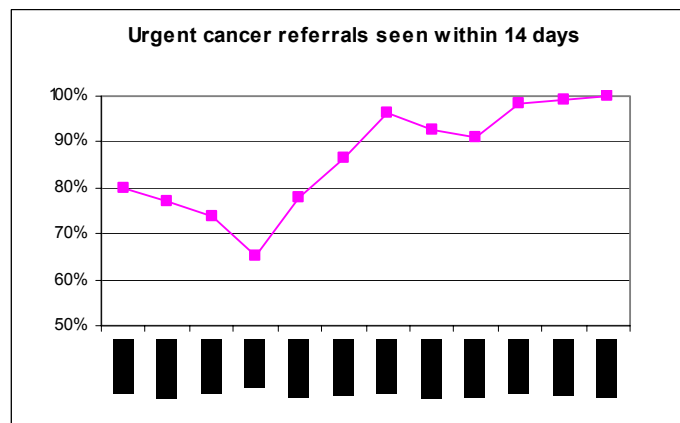
For day cases the trust achieved 99% in March, for elective patients 93%, and for outpatients 67%.



10. Cancer waiting

For urgent cancer referrals in March, all were seen within 2 weeks. This is the first time that the trust has achieved this.

This year, performance steadily increased each month from July's low of 65% to October's high of 96%, and although it did decrease slightly during November and December, has since continued to improve, reaching 100% in March.



By cancer site, in total over the year, breast cancer performance reached 90%, lung cancer 88%, gastro-intestinal cancer 71%, gynaecological cancer 98% and skin cancer 94%.

