

West Hertfordshire Hospitals

NHS Trust

Review of Cumulative Performance against Service Level Agreements November 2008

1. Executive Summary

1.1 This paper provides a review of the Trust's delivery against commissioned levels of activity to date.

2. Background

2.1 The Trust had been commissioned to deliver £171.7m of activity from nine commissioners. However, as previously reported a further £1.2m has been included within the income budget to reflect perceived under-commissioning, and a further £1.8m of income from other PCTs who do not have contracts with the Trust.

2.2 The various types of activity are phased across the year on an appropriate basis as outlined in detail previously.

3. Current Position

3.1 Appendix 1 details performance by type of activity.

The table below analyses the financial position by commissioner:

Commissioner	Annual Plan £000	Plan to Nov £000	Actual £000	Variance £000	Variance Prior Month £000
West Herts	162,242	108,583	110,250	1,667	1,708
East & North Herts	449	298	551	253	224
Total Herts	162,691	108,881	110,801	1,920	1,932
Barnet	715	476	432	-44	-28
Bedfordshire	497	332	495	164	149
Brent	261	174	167	-7	-7
Buckinghamshire	565	379	438	60	45
Harrow	2,078	1,385	1,686	301	265
Hillingdon	4,191	2,805	2,796	-9	-3
Luton	635	424	554	130	93
NCA, etc	1,838	1,213	1,202	-11	-23
Budgeted Overperformance	1,192	801	1,098	297	376
Total	174,663	116,869	119,670	2,801	2,800

3.2 The above value for actual activity assumes that the 2,980 spells not coded on 2nd December when the data was extracted are coded within the required national timescale.

3.3 By the end of March 2009 the National Contract requires the Trust to have 95% of its spells coded by the fifth working day of the following month. Current performance is that almost 64% of spells are coded within the month of discharge.

3.4 As previously reported the PCTs do not pay when planned procedures are not carried out due to Trust operational issues. The total for April to October is 182. This amendment is always one month behind, because of the need to investigate why the planned procedure was not carried out.

4.0 West Herts PCT

4.1 This Contract represents 93% of our planned SLA income and 95% of our contracted income. As can be seen above, the Trust is £1,667k above planned financial levels. This is a decrease in the month of £41k.

4.2 Emergency and Non-elective activity is 1,611 spells below plan of which 1,146 relates to Obstetrics. As previously reported attendances of less than 4 hours, not resulting in an admission can no longer be treated as such, only as a ward attendance. The recent software enhancement allows the patients to be re-allocated correctly for charging purposes. The volume of such short stay attendances out of hours has been found to be greater than first thought (although this is partially due to better recording of the patients) and was therefore not reflected in the SLA plan.

4.3 Elderly Care and General Medicine had been under-performing in each month so far this year and they account for most of the balance of 465 spells. As previously reported, the PCT commissioned more activity than the Trust thought was actually required and hence the variance is greater.

4.4 Elective work under-performed the plan by 86 spells in November, compared with an under-performance of 72 in October. Unlike previous months, all of the main surgical specialties under-performed. Orthopaedics had been meeting plan but in the last two months has slipped back. Cardiology for the first time this year exceeded plan by 10 spells in October but then fell back by 19 spells in November resulting in a cumulative shortfall to date of 78 spells.

4.5 First outpatient attendances are 14,043 above plan. This represents an increase over October of 1,355 attendances. Outpatient follow-up attendances are 6,904 above plan up from 4,384 in October. The position has been improved by the recent DoH guidance that Pre-Operative clinics can be charged, providing they are not on the day of operation. This has added some 2,600 chargeable attendances. The Trust has recorded 7,226 outpatient procedures at a value of £1.554m that attract a higher tariff than a follow up which is how they had been previously recorded. There has been a change in

month with the re-classification of dermatology procedures from follow up outpatients.

4.6 The Trust is reporting 2,544 A & E and MIU attendances fewer than planned in November. However the activity of the Urgent Care Centre that opened on 1st October has not been included for November due to continued difficulties in extracting the data in a form recognisable as a clinical data set. Work is continuing to resolve this but as reported above an accrual has been included of £70k.

4.7 Adult critical care has 191 fewer bed days than the plan, compared with 139 short fall in October. As reported above, an accrual has been made for ICU days linked to patients who have not yet been discharged.

Neo-natal critical care consumed 146 fewer bed days than planned although there remains an over-performance of 571 cot days.

4.8 There is a shortfall in Pathology income of £637k to date. This is attributable to data errors that have subsequently come to light resulting in an over-statement of expected activity and therefore income. The under-performance is expected to continue at a similar rate through the rest of the year.

4.9 The PCT commissioned high cost drugs at outturn together with a 10% acquisition allowance. However, as at the end of November there was a shortfall of £334k compared with £455k at the end of October.

5.0 Hillingdon

5.1 The SLA is the Trust's second largest. At the end of November there was an under-performance of £9k, an under-performance of £7k in the month.

5.2 The value of Emergency and Non Elective activity over-performed the Plan by £13k. Elective activity performed to the plan in the month and is now cumulatively £57k below plan. Only Cardiology, Oral Surgery and Gynaecology are consistently performing above plan.

5.3 First outpatients are 103 attendances above plan, a positive movement of 24 attendances in the month with a cumulative value of £20k. Due to the move of Ophthalmology elective work to St Albans, referrals from the Hillingdon GPs have reduced significantly resulting in a shortfall against plan of 109 to date. This has also impacted on follow up attendances with a shortfall to date of 301. Orthodontics and Dermatology are significantly over-performing but overall the follow-up attendance activity is 162 less.

5.4 In respect of ITU, the pattern in October and September was repeated in November. The PCT had been 24 days below plan at the end of August, in September the shortfall was reduced to only 1 day and in October the Trust

showed an over-performance of 27 bed days and £26k. This has further improved to 30 days with a cumulative value of £28k.

5.5 The PCT exceeded its monthly plan for high costs drugs by £3k and is now some £13k above budgeted levels.

6.0 Harrow

6.1 Overall the SLA has over-performed by £301k at the end of November, an increase of £36k from October. Emergency and Non-elective activity is cumulatively £52k above plan, of which £47k is attributable to Obstetrics, where the Trust believes the PCT under-commissioned. This is unchanged from October. Elective spells performed to plan and are 48 more than budgeted, with a cumulative over-performance of £69k, although the financial value was £8k less than expected.

6.2 Outpatients were also commissioned at a reduced level and as a result the Trust has seen 724 more first outpatients than planned, an increase in month of 85. Most of this is for Obstetrics and is due to the change in the recording of short-stay admissions, referred to above.

6.3 Critical Care bed days are 9 more than planned, a movement of one since May. NICU bed days are only 4 below plan, compared with 32 below at the end of October.

7.0 Buckinghamshire

7.1 The contract has over-performed by £60k, up from £45k in October. This is attributable to emergency spells within Orthopaedics and Medicine.

8.0 Barnet

8.1 There is an under-performance of £44k for the year to date. Whilst non-elective activity is below plan by £60k, with Obstetrics accounting for £88k of this, Orthopaedics is £19k above a plan of £18k. Outpatient activity is £28k above plan mainly due to short-stay Obstetrics being re-classified as ward attenders.

8.2 The PCT has not required the expected number of adult critical care bed days and is now some £40k below plan. However, there have been more neonatal critical care cot days than planned resulting in £26k over-performance.

9.0 Luton

9.1 Present performance is £130k above plan, an increase in the month of £38k. Over-performance is mainly within elective Orthopaedics (£60k) and non-elective activity is £38k above plan, across most specialties. To date Luton has not used any SCBU bed days resulting in a £10k shortfall. There has been 108 more A and E attendances than planned equating to a financial over-performance of £8k.

10.0 East & North Herts

10.1 The SLA is £253k over plan (up from £224k in October). Emergency activity is 29 spells more than planned but with a value of £101k due to a more complex case mix for emergency medicine than originally forecast. Elective work is £23k ahead of plan and is mostly attributable to Orthopaedics (£39k). Clinical Haematology and Gynaecology are together £16k below expected levels.

10.2 Outpatient first and follow-up attendances are 218 and 187 respectively above plan with a combined cumulative over-performance of £52k. Most specialties are ahead of plan. However, Endocrinology and Diabetes follow up attendances are 108 below a plan of 132 resulting in a shortfall of £9k.

10.3 The PCT commissioned 20 adult critical care bed days but to date has used 54 resulting in a financial over-performance of £67k.

11.0 Bedfordshire

11.1 This PCT covers that part of the county that falls outside of the Luton Unitary Authority. The SLA value for the year was set at £497k but by month 8 the value of work done is £495k, resulting in an over-performance of £164k.

11.2 Emergency and Non-elective accounts for £64k of the over-performance, mainly in Orthopaedics (£24k). Elective work broke even during the month leaving a cumulative over-performance of £94k, mainly within General Surgery, Orthopaedics & Gynaecology.

11.3 With the de-hosting of A and E services within Eastern Region, the PCT now pays for its residents using the Trust's A and E services and this has resulted in 132 more attendances than planned with a financial over-performance of £10k. However, whilst commissioning adult and paediatric critical there has been little activity to date resulting in an under-performance of £27k.

12.0 Brent

12.1 This SLA is comparatively small and is under-performing by £7k on a year to date plan of £152k. This is unchanged from October. To date there have been 199 fewer Obstetric follow up attendances than planned, giving rise to a financial shortfall of £13k. However, the PCT has used 26 more NICU/SCBU bed days than planned resulting in over-performance of £11k.

13.0 Non-Commissioned Activity

13.1 The budget was derived from looking at last year's activity although this is not always a very reliable guide. By the end of November there was an under-performance of £11k, a positive movement in the month of £12k.

14.0 Forecast Outturn

14.1 The Finance Report provides a forecast outturn in respect of income and expenditure. It is no surprise that Harrow is over-performing. The over-performance for West Herts is due to the better identification of chargeable activity, coupled with an increase in referrals that due to shorter waiting times impact much sooner. The shortfall in Pathology is likely to continue at the current rate.

15.0 Conclusion

15.1 The Trust Board is asked to note the contents of this Report.

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