#### Attachment 2

### **Director for Partnerships**

Report revised on October 2011

Finance & Growth

Deliver a surplus to clear our deficit

Efficiency

Ensure economy and efficiency

Quality & Patient Satisfaction

Deliver safe, high quality care that patients feel meets their needs

Workforce

Attract, retain and motivate an appropriately trained workforce

April May June July Aug Sept Oct Nov Dec Jan Feb Mar

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## Finance and Activity

Data available in Finance report to board

# Efficiency

Data Quality: (H) = High (M) = Medium (L) = Low

	Watford	Data Quality	St Albans	Data Quality	CHKS Peer Group	Data Quality
Elective length of stay	3.4 days	(H)	2.2 days	(H)	3.2 days	(M)
Non elective length of stay (including zero lengths of stay)	4.1 days	(M)			5 days	(M)
Zero length of stay for emergency	25%	(H)			31%	(M)
Pre-operative bed days	116	(H)	14	(H)		
Bed occupancy	91%	(M)	58%	(M)		
ICU occupancy	88%	(M)				
Theatre utilisation (% session time used)	78%	(M)	83%	(M)		
Day case rate (basket of 25) Tru	ıst	74.7%	(H)	Target: 8	0%	

NHS Indicators scorecard – Q3 2010-11 (latest available)	National rank (out of 167)	king	Q2 to Q3	Productivity opportur	nity
Length of stay	19	(H)	3	£1.3 million	(M)
First to follow-up ratio	129	(H)	7	£ 2.4 million	(M)
Reducing pre-op bed days - elective	82	(H)	7	£ 68,662	(M)
Outpatient Appointment DNA	59	(H)	Ä	£ 221,992	(M)

Trend graphs: •Appendix 2

Further information in Trust Board Papers:

### **Quality and Patient Satisfaction**

External reporting	Month	Assessment scale			
Dept of Health Perf. Framework Assessment	Self assessed as 2.3	<2.1 2.1-2.4 >2.4	Underperforming Under review Performing		
NHS EOE Governance Rating *  * Based upon Monitor Compliance Framework for FTs in 2010-11	Self assessed as 2.0	>2.9 2-2.9 1-1.9 <1	Red Amber/Red Amber/Green Green		

Patient focus	Annual Plan 10/11	CHKS SMR	Data Quality	CHKS 2011 Peer Group	Data Quality	Dr Foster*	Data Quality
Hospital SMR (May 11 – Oct 11)	Less than 90	67	(M)	77	(M)		
Hospital SMR (Oct 09 – Sep 10)	Less than 100					101	(M)
Emerg. readmit within 30 days (Oct 11)			(M)	5.8%	(M)		

<sup>\*</sup> Dr Foster Real Time Monitor figures rebased and supplied by SHA, reflecting overall Trust mortality rates over a full year.

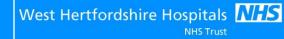
Patient focus	Annual Plan 11/12	Month actual	Data Quality	Year to date	Data Quality
Number of Serious Incidents (Oct)		2	(H)	23	(H)
Emergency readmissions of elective patients within 30 days (Oct)		2.3%	(H)	2.1%	(H)
Same day cancellation of elective surgery	<0.8%	21 = 1%	(H)	109 = 0.8%	(H)
Cancelled operations treated within 28 days	100%	97%	(H)	92.%	(H)
Number of complaints received (Oct)		52	(H)	274	(H)
% of complaints responded to in-month within agreed deadline (Jul)	80%	75%	(H)	64%	(H)

Trend graphs:

Further information in Trust Board Papers:

Appendix 3

•Monthly NHS EoE Governance return, Monthly performance report, Monthly infection control report, Annual Picker survey report (and follow up reports)



## Workforce

	Annual Plan 11/12	Month actual	Data Quality
Total head count (Whole time equivalent)		3506	(H)
Turnover % (Whole time equivalent)		11.9%	(H)
Vacancy rate %		5.2%	(M)
Sickness rates %	Less than 4.0%	3.7%	(H)
Total pay bill		£13.88m	(H)
Bank as a % of pay bill		5.5%	(H)
Agency as a % of pay bill	3%	5.5%	(H)
Overtime as a % of pay bill		0.2%	(H)
Consultant appraisal rate	100%	90%	(M)
Workforce overall appraisal rate	90%	76%	(M)
Mandatory training (Mar11)		57%	(M)

# Elective and Non Elective Emergency Readmissions

#### YTD October 2011/12

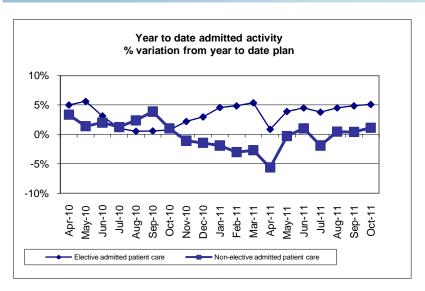
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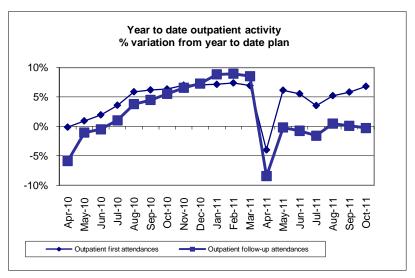
GroupBy	Original Admission Type													
Description	ActivityType	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
	Readmissions	70	73	69	71	72	62	78	0	a	q	o	0	495
	Qualifying Discharges	2574	2833	3147	2880	2876	2911	2812	0	a	o	o	0	20033
	Readmission Rate %	2.70%	2.60%	2.20%	2.50%	2.50%	2.10%	2.80%	0.00%	0.00%	0.00%	0.00%	0.00%	2.47%
Elective	Excluded Discharges	436	437	521	419	436	402	449	0	q	o	0	0	3100
	Readmissions	210	228	244	224	236	266	242	0	a	o	0	0	1650
	Qualifying Discharges	2007	2192	2219	2036	2181	2187	2380	0	a	O	0	0	15202
	Readmission Rate %	10.50%	10.40%	11.00%	11.00%	10.80%	12.20%	10.20%	0.00%	0.00%	0.00%	0.00%	0.00%	10.85%
NonElective	Excluded Discharges	1428	1611	1540	1688	1422	1527	1593	0	0	0	0	0	11072
	Readmissions	280	301	313	295	308	328	320	0	0	0	o	0	2232
	Qualifying Discharges	4581	5025	5366	4916	5057	5098	5192	0	a	o	0	0	37017
	Readmission Rate %	6.10%	6.00%	5.80%	6.00%	6.10%	6.40%	6.20%	0.00%	0.00%	0.00%	0.00%	0.00%	6.03%
Total	Excluded Discharges	1864	2048	2061	2107	1858	1929	2042	0	Q	0	0	0	14172

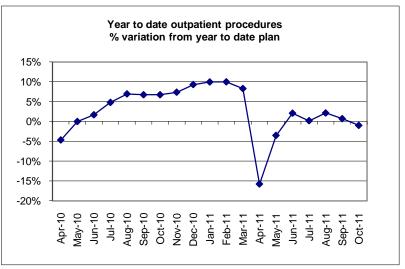
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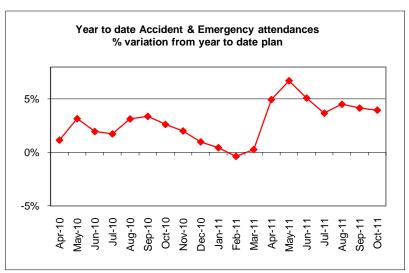
Month Non Elec Readmission Target	171	176.7	171	176.7	176.7	171	176.7	171	176.7	176.7	159.6	176.7	2080.5
Monthly Variance	39	51.3	73	47.3	59.3	95	65.3						

### Appendix 1 – Finance and growth trend graphs

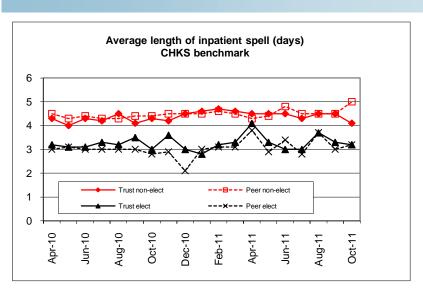


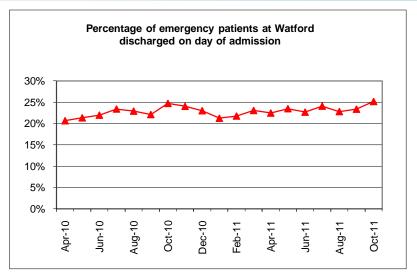


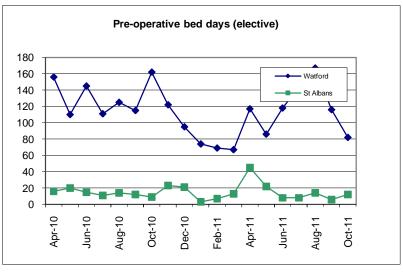


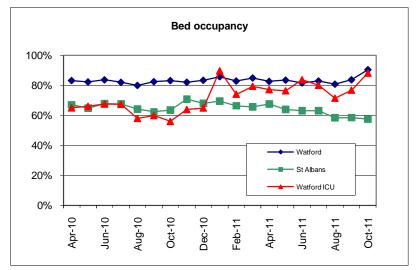


### Appendix 2 – Efficiency trend graphs

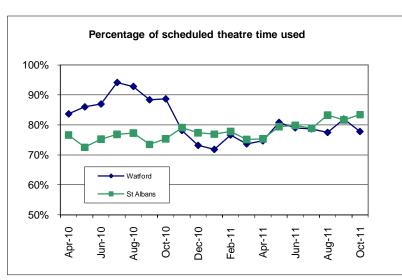


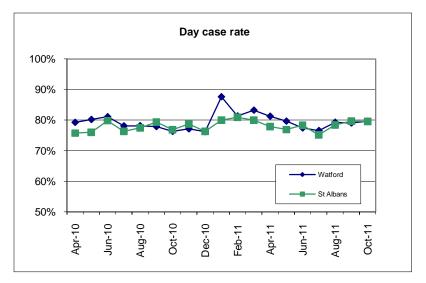


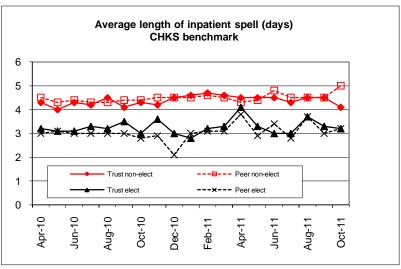




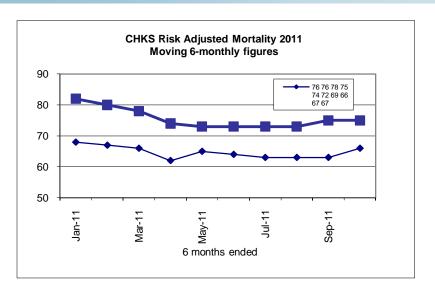
## Appendix 2 – Efficiency trend graphs - continued

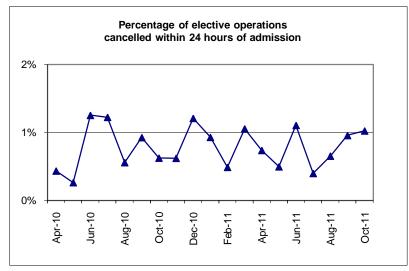


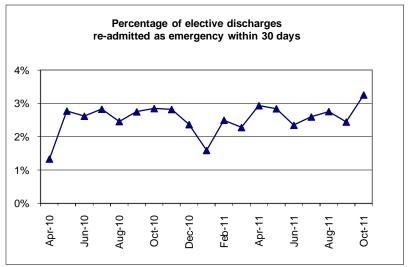




### Appendix 3 – Quality and Patient Satisfaction trend graphs







### Appendix 4 – Workforce trend graphs

