

**AGENDA ITEM NO:****UNIVERSITY HOSPITAL BIRMINGHAM NHS FOUNDATION TRUST  
BOARD OF GOVERNORS  
THURSDAY 5 JUNE 2008**

<b>Title:</b>	<b>PERFORMANCE INDICATORS REPORT</b>
<b>Responsible Director:</b>	DIRECTOR OF PLANNING AND PERFORMANCE
<b>Contact:</b>	Harvir Atkar, Divisional Planning Manager, ext 6887 Daniel Ray, Head of Health Informatics, ext 8530

<b>Purpose:</b>	To update the Board of Governors on performance against a range of key indicators.
<b>Confidentiality Level &amp; Reason:</b>	
<b>Medium Term Plan Ref:</b>	Affects all strategic aims.
<b>Key Issues Summary:</b>	To provide an overview of key risks to performance.
<b>Recommendations:</b>	The Board of Governors is requested to: <b>ACCEPT</b> the report on progress made towards achieving performance targets and associated actions.

<b>Signed:</b>	<b>Date:</b> 27 May 2008
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**UNIVERSITY HOSPITAL BIRMINGHAM NHS FOUNDATION TRUST  
BOARD OF GOVERNORS  
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**PERFORMANCE INDICATORS REPORT**

**PRESENTED BY THE DIRECTOR OF PLANNING AND  
PERFORMANCE**

**1. Purpose**

To present a final summary of 2007/08 performance against a range of key indicators.

The Trust Board of Directors monitors some 60 performance indicators on a monthly basis.

Where an indicator shows year-to-date performance as red or where, despite satisfactory year-to-date performance, the risk of not hitting a target is judged to be high, further detail is provided in section 2 of this report.

To avoid duplication of information, where issues raised in section 2 of this report are dealt with in other papers to the Board, the section now only refers to the relevant Board report.

## 2. Healthcare Commission Framework

### 2.1 Risk Assessment of Performance against National Targets 2008/09

Indicator	Performance for 2007/08	Risk Description	Risk Assessment	Action Plan
MRSA	TARGET WAS MISSED FOR 2007/08	2 cases in April 2008 against a monthly target of 4. There have been 4 cases reported as at 23 May 2008.	HIGH	Please refer to Chief Nurse Infection Control Report.
C. difficile	TARGET MET FOR 2007/08	692 cases from January 2007 to March 2008 for over 65s.  Internal annual target agreed for a 25% reduction. This translates to 49.4 cases per month. In April 2008, 75 cases were reported. There have been 47 cases reported as at 22 May 2008.	HIGH	Please refer to Chief Nurse Infection Control Report.
18 Week referral to Treatment	TARGET MET FOR 2007/08	The March 2008 targets are 85% of admitted patients seen within 18 weeks and 90% for non-admitted. 86.6% of admitted patients and 91.3% of non-admitted patients seen within 18 weeks as at March 2008.  Performance for April 2008 is at 88.9% for admitted patients and 91.2% for non-admitted patients. These figures are yet to be validated and the data completeness methodology remains a risk for the Trust.	MEDIUM	<u>Completion of Minimum Data Set by Referring Organisations:</u> There remains a risk associated with completion of MDS information on referral. Currently, if the Trust does not receive the mandated form that should accompany any referral made by another acute provider, UHBFT assumes that a new clock should start at the date when the referral was received at UHBFT. If other Trust's improve their usage of these forms it will mean that UHBFT will inherit patients who are much further down the pathway than we are currently recording therefore increasing the likelihood of a breach. The PCT and SHA have advised trusts to provide patient level information of all referrals made without a complete MDS.  <u>Breaches Attributed to Provider:</u> Breaches continue to be attributed to the end provider, however, as the rate of MDS completion is low this issue has not significantly impacted on the Trust. A local breach sharing process has been proposed and is to be implemented.

Indicator	Performance for 2007/08	Risk Description	Risk Assessment	Action Plan
		The December 2008 target is 90% within 18 weeks (admitted patients) and 95% (non-admitted).		<p><u>Data Quality:</u> Audits and action plans are developed on a weekly basis to continue to improve performance. The correct use of referrals on Lorenzo is an ongoing issue which is difficult to monitor. Currently 3.0 WTE are employed to investigate the correct outcomes for patients who are appearing to breach and subsequently correct PAS records. This personnel requirement is likely to be necessary for the next year.</p> <p>The Trust has plans in place to improve internal capacity. This involves reviewing patient pathways to remove delays, reducing diagnostic waits to 2 weeks, implementing LEAN in theatres, increasing capacity in Neurosciences and reducing outpatient follow ups in some specialties to create additional capacity.</p>
Thrombolysis	TARGET MET FOR 2007/08	The Trust achieved 69.6% for the full year against a target of 68%. 100% performance against target in April 2008, however, the risk remains high.	HIGH	There have been 3 cases in April 2008 and 1 case on 11 May 2008, all of which met the target. However, the risk around meeting this target remains due to the Trust's heavy reliance on the performance of the Ambulance service. As the numbers of patients included in the measure remain small (making the target susceptible to significant swings) there is a risk of missing the target going forward.

The traffic light colours on Appendix A assigned to indicators is based on year to date performance. Risk assessment in the table above is assigned based on predicted achievement of target by year end.

## 2.2 Core Standards Assurance Process

The Trust's declaration of compliance was submitted within the deadline and will be published on the Trust website as per HC guidance. The Trust declared full compliance against all standards.

The Trust **will** receive a hygiene code compliance visit and **may** receive a broader standards compliance visit.

## 3. **Internal Key Performance Indicators**

Issues of exception for Trustwide performance are listed below.

### 3.1 Business Processes

3.1.1 Performance has improved from December onwards for elective pre-op length of stay. There has been a 3% increase in the number of elective admissions having a procedure compared to the same period in 2006/07 while showing a 5% reduction in elective pre-op LOS against a target of 18%. The 18% reduction target was met for the month of March 2008.

3.1.2 Outpatient appointment cancellations are at 5.3% for new patients and 9.8% for follow up patients in April 2008 (5.3% for new and 11% for follow-up in March 2008). Divisional plans are in place to ensure further reductions are made.

### 3.2 Customer Focus and Clinical Quality

3.2.1 The Healthcare Commission has still not provided full detail on the construction of their indicator. This issue will be taken up with the head of their targets team.

### 3.3 Finance and Activity

3.3.1 Trustwide inpatient activity was 0.5% below plan and income was 1.9% above plan at month 12. Activity was 3.2% lower compared to 2006/07. Activity was 2.2% higher than the same period in 2006/07 once the effect of SWBH directly commissioning daycase radiotherapy activity from July 2007 onwards has been taken into account.

3.3.2 Trustwide outpatient activity was 8.9% above plan and income was 3.3% above plan at month 12. Activity rose by 10.7% compared to 2006/07.

3.3.3 Overall income was 2.2% above plan at month 12.

### 3.4 Human Resource and Organisational Development

3.4.1 The Trustwide overall sickness rate was 4.26% from April 2007 to March 2008. This was lower than the 2006/07 average of 4.38%.

3.4.2 Agency spend as a percentage of pay spend was 1.75% as at March 2008 (2006/07 average was 1.49%).

## 4. **2008/09 Annual Health Check**

High level details of the 2008/09 Annual Health Check have been published and full target construction details are due from June 2008 onwards. Once this detailed information is available, the KPI grid and backing sheets will be revised to reflect the new performance framework.

## 5. **Recommendations**

The Board of Governors is requested to:

**ACCEPT** the report on progress made towards achieving performance targets and associated actions.

Mike Sharon  
Director of Planning and Performance  
27 May 2008