

TRUST BOARD SUMMARY SHEET	
Title:	Performance Report
Submitted by:	Christine Allen, Director of Operations
Date of meeting:	28 th April 2010
Corporate Objectives Addressed:	
SUMMARY OF CRITICAL POINTS:	
<p>This report sets out the key areas of performance for Northampton General Hospital NHS Trust for Month 12 (March 2010) and a summary of the annual performance for 2009/10.</p> <p>During 2009/10 the Trust achieved the following standards:</p> <ul style="list-style-type: none"> • A&E performance - year end position was 98.2%. • 18 weeks - the Trust achieved the admitted and non admitted standard for each speciality for every month during 2009/10. • All of the cancer standards were met for each quarter and the year end. • There were 3 diagnostic 6 week breaches during the year. • The MRSA bacteraemia standard was met; there were 9 reported cases against a trajectory of 10. 	
PATIENT IMPACT:	
N/A.	
STAFF IMPACT:	
N/A.	
FINANCIAL IMPACT:	
N/A.	
RISK ASSESSMENT:	
N/A.	
EQUALITY & DIVERSITY IMPACT ASSESSMENT:	
RECOMMENDATION:	
The Trust Board are asked to note the contents of this report.	

PERFORMANCE REPORT – APRIL 2010

1. Introduction

This report sets out key areas of performance for Northampton General Hospital NHS Trust for **Month 12 (March 2010)** and the year-end position for 2009/10. The report is based on the Monitor Scorecard and the new NHS Performance Framework.

More detailed performance is reported by exception i.e. where performance is below standard, where there are specific pressures that present a risk to the ongoing achievement of any of the standards or where there are high profile issues e.g. new targets.

2. Service Performance

2.1 Performance Against National Targets

NORTHAMPTON GENERAL HOSPITAL NHS TRUST Monitor Scorecard Indicators 2009-10												
Monitor Scorecard Indicators 2009-10	Thresholds	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Year End	
Clostridium difficile year on year reduction (to fit the trajectory for the year as agreed with PCT – assumed a 15% reduction if no level agreed in a contract)	Trajectory (152 Full Year)											
MRSA – maintaining the annual number of MRSA bloodstream infections at less than half the 2003/04 level (assumed target is 50% of 2003/04 if no level agreed in a contract)	Trajectory (10 Full Year)											
Maximum waiting time of 31 days for subsequent treatments for all cancers	Surgery – 94% Drug – 98%											
Maximum two month wait from referral to treatment or all cancers	85%											
For admitted patients, maximum time of 18 weeks from point of referral to treatment	90%											
For non-admitted patients, maximum time of 18 weeks from point of referral to treatment	95%											
Maximum waiting time of four hours in A&E from arrival to admission, transfer or discharge	98%											
People suffering heart attack to receive thrombolytic within 60 minutes of call (where this is the preferred local treatment for heart attack)	68%											
Maximum waiting time of two weeks from urgent GP referral to date first seen for all urgent suspect cancer referrals	93%											
Maximum waiting time of 31 days from diagnosis to treatment for all cancers	96%											
Screening all elective in-patients for MRSA	100%											
Each national core standard	0											

2.2 A&E Performance

In March, the Trust achieved 98.4%, which was an improvement of 1.4% from February. Significant improvements were made in March and the year end position is 98.20%.

The Trust continues to implement the action plan to improve performance and review daily forecast modelling to ensure the progress made in March is sustained and the standard achieved for each month throughout 2010/11.

2.3 18 Weeks

In March, the Trust achieved the 18-week standards for admitted and non-admitted patients for each specialty. This was achieved for every month during 2009/10.

Directorates are currently in the process of reviewing capacity to ensure that as part of the NHS Constitution all patients will be treated within 18 weeks.

2.4 MRSA Bacteraemia

There have been no episodes of MRSA bacteraemia this month, the year to date total is 9 (6 pre 48 hours and 3 post 48 hours) against a trajectory of 10. The year-end target has therefore been achieved.

2.5 Cancer Waiting Times

During March, the Trust achieved all of the cancer standards. These have been achieved for every quarter and exceeded for the year.

Standard	Year end
2 week wait (93%)	95.9%
2ww all breast referrals (93%)	96.8%*
62 days from referral to treatment (85%)	88.7%
31 days from decision to treat to start of treatment (96%)	99.3%
31 days from decision to treat to start of subsequent treatment-surgery (94%)	97.6%
31 days from decision to treat to start of treatment –drug therapy (98%)	98.9%
31 days from decision to treat to start of treatment-radiotherapy (94%)	98.1%
62 days from referral from screening to start of treatment (90%)	97.6%

*Monitored for quarter 4 only

2.6 Ethnic Screening

In March, the Trust coded 87.5% of finished consultant episodes for ethnicity against the target of 85%. This is an improvement from 84.8% in February.

2.7 Diagnostic Waiting Times

During March, there were no diagnostic breaches and throughout the year there were 3 breaches of the 6 week wait time target. Processes were reviewed to ensure all patients are seen within the local standard of a maximum wait of 4 weeks.

3.0. Recommendations

The Trust Board are asked to discuss and debate any issues arising from this report.