

AGENDA

Trust Board – Public Session

Venue Churchvale/Hollyoak Rooms, Sandwell Hospital **Date** 28 April 2011; 1430h - 1630h

Members

Mrs S Davis (SD) [Chair]
 Mr R Trotman (RT)
 Dr S Sahota (SS)
 Mrs G Hunjan (GH)
 Prof D Alderson (DA)
 Mr G Clarke (GC)
 Mrs O Dutton (OD)
 Mr J Adler (JA)
 Mr D O'Donoghue (DO'D)
 Mr R Kirby (RK)
 Mr R White (RW)
 Miss R Overfield (RO)

In Attendance

Mr G Seager (GS)
 Miss K Dhami (KD)
 Mrs J Kinghorn (JK)
 Mrs C Rickards (CR)
 Mr J Cash (JC) [Sandwell LINKs]

Secretariat

Mr S Grainger-Payne (SGP) [Secretariat]

Item	Title		Lead
1	Apologies	Verbal	SGP
2	Declaration of interests <i>To declare any interests members may have in connection with the agenda and any further interests acquired since the previous meeting</i>	Verbal	All
3	Chair's opening comments	Verbal	Chair
4	Minutes of the previous meeting <i>To approve the minutes of the meeting held on 31 March 2011 as true and accurate records of discussions</i>	SWBTB (3/11) 072	Chair
5	Update on actions arising from previous meetings	SWBTB (3/11) 072 (a)	Chair
6	Questions from members of the public	Verbal	Public
MATTERS FOR APPROVAL			
7	Quality and Safety strategy 2011 – 16	SWBTB (4/11) 095 SWBTB (4/11) 095 (a)	KD
MATTERS FOR INFORMATION/NOTING			
8	Safety, Quality and Governance		
8.1	Nursing quality report	SWBTB (4/11) 088 SWBTB (4/11) 088 (a) - SWBTB (4/11) 088 (d)	RO
8.2	Board safety walkabouts	SWBTB (4/11) 083 SWBTB (4/11) 083 (a)	RO
8.3	Safeguarding update	SWBTB (4/11) 085 SWBTB (4/11) 085 (a)	RO

8.4	Staff survey results and action plan	SWBTB (4/11) 076 SWBTB (4/11) 076 (a) - SWBTB (4/11) 076 (d)	RO
8.5	COC quality and risk profile	SWBTB (4/11) 087 SWBTB (4/11) 087 (a)	KD
8.6	Update on complaints handling	To follow	KD
8.7	Information Governance toolkit – end of year report	SWBTB (4/11) 074 SWBTB (4/11) 074 (a)	RK
8.8	Register of seals	SWBTB (4/11) 084 SWBTB (4/11) 084 (a)	SG-P
9	Strategy and Development		
9.1	'Right Care, Right Here' programme: progress report	SWBTB (4/11) 094 SWBTB (4/11) 094 (a)	MS
9.2	Foundation Trust application: progress update	SWBTB (4/11) 081 SWBTB (4/11) 081 (a)	MS
9.3	Midland Metropolitan Hospital project: progress report	Verbal	GS
10	Performance Management		
10.1	Monthly finance report	SWBTB (4/11) 093 SWBTB (4/11) 093 (a)	RW
10.2	Monthly performance monitoring report	SWBTB (4/11) 086 SWBTB (4/11) 086 (a)	RW
10.3	NHS Performance Framework monitoring report	SWBTB (4/11) 077 SWBTB (4/11) 077 (a)	RW
10.4	Corporate objectives progress report: Quarter 4	SWBTB (4/11) 075 SWBTB (4/11) 075 (a)	MS
11	Operational Management		
11.1	Sustainability update	SWBTB (4/11) 082 SWBTB (4/11) 082 (a)	GS
12	Update from the Board Committees		
12.1	Finance and Performance Management Committee		
▶	Draft minutes from meeting held 21 April 2011	To follow	RT
12.2	Governance and Risk Management Committee		
▶	Minutes from meeting held 20 January 2011	SWBGR (1/11) 009	DA
12.3	Charitable Funds Committee		
▶	Draft minutes from meeting held 3 February 2011	SWBCF (2/11) 004	SS
13	Any other business	Verbal	All
14	Details of next meeting <i>The next public Trust Board will be held on 26 May 2011 at 1430h in the Anne Gibson Boardroom, City Hospital</i>	Verbal	Chair
15	Exclusion of the press and public <i>To resolve that representatives of the Press and other members of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest (Section 1(2) Public Bodies (Admission to Meetings) Act 1960).</i>	Verbal	Chair

Sandwell and West Birmingham Hospitals



NHS Trust

TRUST BOARD

DOCUMENT TITLE:	Monthly Performance Monitoring Report
SPONSORING DIRECTOR:	Robert White, Director of Finance and Performance Mgt
AUTHOR:	Mike Harding, Head of planning & Performance Management
DATE OF MEETING:	28 April 2011

SUMMARY OF KEY POINTS:

The report is designed to inform the Trust Board of the summary performance of the Trust for the period April 2010 – March 2011.

PURPOSE OF THE REPORT *(Indicate with 'x' the purpose that applies):*

Approval	Receipt and Noting	Discussion
	x	

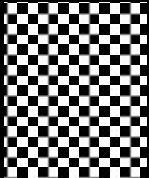
ACTIONS REQUIRED, INCLUDING RECOMMENDATION:

The Trust Board is asked to NOTE the report and its associated commentary.

ALIGNMENT TO OBJECTIVES AND INSPECTION CRITERIA:

Strategic objectives	Accessible and Responsive Care, High Quality Care and Good Use of Resources
Annual priorities	National targets and Infection Control
NHS LA standards	
CQC Essential Standards Quality and Safety	
Auditors' Local Evaluation	Internal Control and Value for Money

IMPACT ASSESSMENT (Indicate with 'x' all those that apply in the second column):

Financial	x	
Business and market share	x	
Clinical	x	
Workforce	x	
Environmental	x	
Legal & Policy	x	
Equality and Diversity		
Patient Experience	x	
Communications & Media		
Risks		

PREVIOUS CONSIDERATION:

Financial Management Board and Trust Management Board on 19 April 2011 and Finance and Performance Management Committee and 21 April 2011.
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EXECUTIVE SUMMARY

Note	Comments																																														
An additional column has been added to the report which is intended to indicate the magnitude of improvement required to deliver the various National & Local Priority and CQUIN targets. The assessment is based upon recent performance, performance to date and end target.																																															
	<p>SHA Winter Targets - 3 performance indicators effective for the period October 2010 - March 2011 inclusive have been identified by the SHA. Each indicator, A/E 4-hour waits, Delayed Transfers of Care and Ambulance Turnaround Time have specific targets, the achievement of which generates additional income for the Trust. Performance to date is summarised in the table below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Area</th> <th rowspan="2"></th> <th colspan="4">March</th> <th colspan="2">Year to Date (since October)</th> </tr> <tr> <th>Target</th> <th>Actual</th> <th>Available £s</th> <th>Achieved £s</th> <th>Available £s</th> <th>Achieved £s</th> </tr> </thead> <tbody> <tr> <td>A/E 4-hour waits</td> <td>%</td> <td>=>96.00</td> <td>95.10</td> <td>50485</td> <td>0</td> <td>302910</td> <td>201940</td> </tr> <tr> <td>Delayed Transfers of Care</td> <td>%</td> <td><4.00</td> <td>5.60</td> <td>50485</td> <td>0</td> <td>302910</td> <td>0</td> </tr> <tr> <td>Ambulance Turnaround (<30 mins)</td> <td>%</td> <td>=>81.00</td> <td>73.00</td> <td>67314</td> <td>0</td> <td>403884</td> <td>0</td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td></td> <td>168284</td> <td>0</td> <td>1009704</td> <td>201940</td> </tr> </tbody> </table>	Area		March				Year to Date (since October)		Target	Actual	Available £s	Achieved £s	Available £s	Achieved £s	A/E 4-hour waits	%	=>96.00	95.10	50485	0	302910	201940	Delayed Transfers of Care	%	<4.00	5.60	50485	0	302910	0	Ambulance Turnaround (<30 mins)	%	=>81.00	73.00	67314	0	403884	0	Total				168284	0	1009704	201940
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a	The overall percentage of Cancelled Operations across the Trust during March increased to 0.8%, the highest numbers were in Gynaecology. Across the Trust the proportion of Late Starts in theatre (20%) for the month of March remained stable, with 3 theatre units; City (MainSpine), BTC and BMEC all achieving less than 20%.																																														
b	Delayed Transfers of Care - the proportion of delays increased to 5.6% overall during the month of March. Performance for the year is 4.6%.																																														
c	Stroke Care - provisional data for the month of March indicates a slight decline in the percentage of patients who spent at least 90% of their hospital stay on a Stroke Unit to 76.9% (national target 60%). TIA performance (percentage of high risk patients treated within 24 hours) is differentiated by reporting of performance from the initial patient presentation to the medical profession and reporting performance from the Trust's receipt of the patient referral from the requesting source.																																														
d	Accident & Emergency 4-hour waits - performance during the month of March reduced to 95.1% overall. Performance for 2010 / 2011 is 96.99%, comprising City Main unit 95.0%, Sandwell Main unit 98.4% and BMEC 99.5%.																																														
e	The overall number of cases of C Diff reported across the Trust during the month of March remained low (4). There were no cases of MRSA Bacteraemia reported during the month. The total number of C Diff cases for the year is within both the External (DoH) and Internal trajectories for the period. The total number of cases of MRSA Bacteraemia reported for the year is 5 against a trajectory of 6. Targets for 2011 / 2012 for C diff and MRSA Bacteraemia are 109 and 6 respectively.																																														
f	Overall Referral to Treatment Time data for the month of March was not available for inclusion within the report.																																														
g	Sickness Absence during March reduced further to 4.03% overall. Absence during the last quarter has averaged 4.33% compared with 4.81% for the corresponding period last year.																																														
h	A total of 4635 staff are reported as receiving a PDR during the year. Mandatory Training compliance for the month of March was 86.8%.																																														
i	<p>CQUIN:</p> <p>Overall scheme financial values are included within the main body of the report.</p> <p>VTE (Venous Thromboembolism) Risk Assessment - Performance for the month of March is reported as 92.3%, with performance for Quarter 4 reported as 90.88%.</p> <p>Breast Feeding - Breastfeeding status at time of Guthrie Test (usually day 6 or 7) (or discharge from midwifery care). Q1 Baseline data 62.3%, was used to set the target of 72.3% (baseline plus 10%). Final assessment is an audit of Q4 performance. Performance during Quarter 4 was 81.8%.</p> <p>Tissue Viability (Pressure Ulcers) - Comprises 3 components; Assessment on admission, Decrease in number of acute hospital acquired grade 2, 3 and 4 ulcerations and Table Top Reviews on all ulcerations of grade 3 or 4.</p> <ul style="list-style-type: none"> • The Q3 audit indicated 92% of patients were assessed on admission (target 75%). • The number of Hospital Acquired Pressure Sores (Grades 2, 3 and 4) for the first 11 months is 40.4% less than the baseline (target 10% less). • Table Top Reviews for Grade 3 and 4 Pressure Sores are all up to date. 																																														

Note	Comments				SWBTB (4/11) 086 (a)				
i (cont'd)	<p>Inpatient Falls - the target comprises 3 components. An assessment of risk for in-patients, with a target of 75%, a 10% reduction in the number of inpatient falls and Table Top Reviews on all falls with fracture.</p> <ul style="list-style-type: none"> • Most recent performance for November indicated 93.6% of patients were assessed (target 75%). • The number of inpatient falls reported for the period April - January inclusive is 17.9% less than the baseline (target 10% less). • Table Top Reviews on falls with fracture are all up to date. 								
	<p>Brain Imaging for Emergency Stroke Admissions (within 24 hours admission) - provisional data for March indicates performance of 85.7% and 90.4% for Quarter 4, compared with a target 90.0%.</p>								
	<p>Hip Fracture Operations within 24-hours of admission - the percentage of patients receiving an operation with 24 hours of admission during March increased to 88.9%, although performance for Quarter 4 was 64.7% (target 70.0%). There were 2 main reasons for 'breaches' during the quarter; patients who were unwell / not fit for surgery within the 'target time' and lack of theatre time, due either to overall demand or clinical priority.</p>								
	<p>Smoking (Brief Intervention in Outpatients) - a total of 2041 (target 2000) interventions have been made to smoking cessation services during the year.</p>								
	<p>Safer Prescribing of Warfarin - Number of patients prescribed warfarin with INR (International Normalised Ratio) within the target range. The baseline audit at 2 months identified 65.13% compliance, compared with a final target of 65% by March 2011. A compliance of 70.2% was achieved during March.</p>								
	<p>Patient Experience - Composite of response to 5 inpatient survey questions. Goal to improve responsiveness to personal needs of patients. The survey was conducted between October and January, for patients who had an inpatient episode between July and August. The target 66.4%, is an improvement (increase) of 2 percentage points on 2009 / 10 baseline (64.4%), with performance for 2010 / 2011 now confirmed as 67.2%.</p>								
	<p>Think Glucose - target relates to Inpatients with a secondary diagnosis of Diabetes. Final indicator value is evidence of participation in NHS Institute Think Glucose Programme. Internal self -assessment against the required criteria identified compliance. External validation is awaited.</p>								
	<p>Parent's Consultation with Senior Clinician - parents able to discuss care of their baby with senior clinician within 24 hours of admission onto neonatal unit. A target of 81% has been set by the Specialised Commissioners. Q4 CQUIN payments for the Neonatal schemes will be based upon Q3 and Q4 performance combined, performance during this period was 81%.</p>								
	<p>Neonates Offered Breast Milk - to maximise the number of babies admitted to the neonatal unit who will be offered some breast milk (from mother) during the inpatient episode. A target of 79% has been set by the Specialised Commissioners. Q4 CQUIN payments for the Neonatal schemes will be based upon Q3 and Q4 performance combined, performance during this period was 93%.</p>								
	<p>Herceptin Home Delivery - the original target, set by the Specialised Commissioners, has been revised from 90%, with Trust's now required to aim for 50%. This has been met since September, with most recent performance for March of 65%.</p>								
j	Detailed analysis of Financial Performance is contained within a separate paper to this meeting.								
k	The reporting of Same-Sex Accommodation Breaches is now aligned to the return which the Trust submits to the Department of Health. Data since December is included in the report and identifies total breaches and breaches in the assessment units.								
l	Contact Centre performance - the Average Length of Queue (waiting time to be answered) for patients telephoning the contact centre has remained less than 1 minute for 4 of the most recent 5 months. The maximum length of the queue (wait) also reduced significantly during March.								
m	Total Referrals during February (14045) were similar numerically to those received in January (13816). GP Referrals during February were 9911, compared with 9472 in January. Provisional data for March indicates a total of c.15200 referrals.								
n	Activity (trust-wide) to date is compared with the contracted activity plan for 2010 / 2011 - Month and Year to Date.								
		Month				Year to Date			
		Actual	Plan	Variance	%	Actual	Plan	Variance	%
	IP Elective	1109	1024	85	8.3	11748	12641	-893	-7.1
	Day case	4987	3706	1281	34.6	53959	45747	8212	18.0
	IPE plus DC	6096	4730	1366	28.9	65707	58388	7319	12.5
	IP Non-Elective	4950	4915	35	0.7	59000	62214	-3214	-5.2
	OP New	14901	12619	2282	18.1	163493	155792	7701	4.9
	OP Review	39733	32174	7559	23.5	440812	397213	43599	11.0
	OP Review:New	2.67	2.55	0.12	4.7	2.70	2.55	0.15	5.9
AE Type I	15576	14580	996	6.8	181494	191845	-10351	-5.4	
AE Type II	3278	2670	608	22.8	36756	35133	1623	4.6	
Activity to date is compared with 2009 / 10 for the corresponding period									
	2009 / 10	2010 / 11	Variance	%	Overall Elective, Non-Elective (see comment below) and Outpatient activity contracts for the 2010 / 2011 were met. The Follow Up to New Outpatient activity ratio for the year was 2.77 (target from contracted activity plans 2.55).				
IP Elective	13722	11748	-1974	-14.4					
Day case	52729	53959	1230	2.3					
IPE plus DC	66451	65707	-744	-1.1					
IP Non-Elective	64117	59000	-5117	-8.0					
OP New	166082	163493	-2589	-1.6					
OP Review	425850	440812	14962	3.5					
OP Review:New	2.56	2.70	0.14	5.5					
AE Type I	190254	181494	-8760	-4.6					
AE Type II	34836	36756	1920	5.5					
Please Note: The impact of the in-year revision to the recording of HRG N12 activity within maternity is reflected below. Essentially the annual activity plan for Non-Elective activity is reduced by 4000, with a corresponding increase in the Outpatient Review plan for the year. Actual activity remains unaltered.									
	Month				Year to Date				
	Actual	Plan	Variance	%	Actual	Plan	Variance	%	
IP Non-Elective	4950	4599	351	7.6	59000	58214	786	1.4	
OP Review	39733	32490	7243	22.3	440812	401213	39599	9.9	
o	West Midlands Ambulance Service data indicates an increase in the proportion of ambulances with a turnaround time in excess of 30 minutes to 27.0% during the month of March. During the same period the overall number of delays in excess of 60 minutes increased to 54, influenced by increased numbers on the City site.								

Exec Lead	NATIONAL AND LOCAL PRIORITY INDICATORS		November	December	January	February			March			To Date (*=most recent month)	TARGET		Exec Summary Note	THRESHOLDS			10 / 11 Forward Projection	08/09 Outturn	09/10 Outturn			
			Trust	Trust	Trust	S'well	City	Trust	S'well	City	Trust	YTD	10/11											
RW	Net Income & Expenditure (Surplus / Deficit (-))		£000s	91 ▼	341 ▲	332 ▼	→		→		→		1748 (M11)	1581	2038		0%	0 - 1%	>1%		2535	2279		
RK	Cancer	2 weeks	%	93.8 ▼	95.0 ▲	94.6 ▼	→		→		→		94.3	=>93	=>93		No variation		Any variation		98.6	93.9		
		2 weeks (Breast Symptomatic)	%	97.7 ▲	95.7 ▼	95.1 ▼	→		→		→		94.8	=>93	=>93		No variation		Any variation		n/a	93.6 (Q4 only)		
		31 Days	%	99.4 ▲	99.4 ■	100 ▲	→		→		→		99.7	=>96	=>96		No variation		Any variation		100	99.7		
		62 Days	%	92.4 ■	93.3 ▲	87.6 ▼	→		→		→		88.2	=>85	=>85		No variation		Any variation		98.6	89.1		
RK	Cancelled Operations	Elective Admissions Cancelled at last minute for non-clinical reasons	%	0.7 ■	1.0 ■	1.1 ■	0.2 ■	0.8 ■	0.6 ■	0.5 ▼	0.9 ▼	0.8 ■	0.8	<0.8	<0.8	a	<0.8	0.8 - 1.0	>1.0		1.0	0.8		
		28 day breaches	No.	0 ■	0 ■	0 ■	→		→		→		0	0	0		3 or less	4 - 6	>6		0	0		
	Delayed Transfers of Care	Total	%	5.0 ▼	4.5 ▲	4.7 ▼	4.0 ■	6.0 ▲	5.0 ▼	5.2 ■	6.0 ■	5.6 ▼	4.6	<3.0	<3.0	b	<3.0	3.0 - 4.0	>4.0		3.1	3.0		
		Cardiology	Primary Angioplasty (<150 mins)		91 ▼	80 ▼								90.4	=>80	=>80		=>80	75-79	<75		83.6	86.2	
DO'D	Stroke Care	>90% stay - EXTERNAL (DH) TARGET	%	73.1 ▲	77.8 ▲	70.8 ▼	→		→		→		76.9 ▼	72.3	60	60	c	=>60	31-59	=<30		36.5	62.0	
		>90% stay - INTERNAL TARGET	%	73.1 ▲	77.8 ■	70.8 ■	→		→		→		76.9 ■	76.9*	80	80		No Variation	0 - 2% Variation	>2% Variation		36.5	62.0	
		TIA Treatment <24 hours from initial presentation	%	5.3 ▲	0.0 ▼	33.3 ▲	→		→		→		46.2 ■	46.2*	60	60		No Variation	0 - 2% Variation	>2% Variation				
		TIA Treatment <24 hours referral rec'd by Trust	%	15.8 ▲	20.0 ▲	58.3 ▲	→		→		→		61.5 ▼	61.5*	60	60								
RK	A/E 4 Hour Waits	%	97.2 ▲	93.3 ■	97.1 ■	98.7 ▲	97.2 ▲	97.8 ▲	97.1 ▼	93.9 ■	95.1 ■	96.99	98	98	d	=>96	95 - 96	<95		98.16	98.55			
RK	GUM 48 Hours	Patients seen within 48 hours	%	86.0 ▼	84.4 ▼	86.1 ▲	→		→		→		77.7 ■	84.5	=>90	=>90	e	=>90	80-89	<80		81.0	86.8	
		Patients offered app't within 48 hrs	%	100 ■	100 ■	100 ■	→		→		→		100 ■	100	=>98	=>98		=>98	95-98	<95		98.3	99.8	
R0	Infection Control	C. Diff - EXTERNAL (DH) TARGET	No.	6 ▲	7 ▼	3 ▲	3 ▼	1 ▲	4 ▼	1 ▲	3 ▼	4 ■	120	243	243	e	No variation		Any variation		163	158		
		C. Diff - INTERNAL TARGET	No.	6 ▲	7 ▼	3 ▲	3 ▼	1 ▲	4 ▼	1 ▲	3 ▼	4 ■	120	158	158		No variation		Any variation		163	158		
		MRSA - EXTERNAL (DH) TARGET	No.	0 ■	0 ■	1 ▼	0 ▲	0 ■	0 ▲	0 ■	0 ■	0 ■	0 ■	5	6		6	No variation		Any variation		15	14	
RK	Data Quality	Valid Coding for Ethnic Category (FCEs)	%	95 ■	94 ▼	95 ▲	→		→		→		95 ■	94.5	90	90	f	>=90	89.0-89.9	<89		87.0	95.5	
		Maternity HES	%	5.5 ▼	5.5 ■	5.3 ▲	→		→		→		6.1 ▼	5.4	<15	<15		=<15	16-30	>30		n/a	5.8	
RO	Infant Health & Inequalities	Maternal Smoking Status Data Complete	%	→	99.8 ▲	→	→		→		→		99.58	=>98.0	=>98.0	g	=>98	95-98	<95		99.9	99.3		
		Breast Feeding Status Data Complete	%	→	100.0 ■	→	→		→		→		99.98	=>98.0	=>98.0		=>98	95-98	<95		97.8	99.3		
		Maternal Smoking Rates	%	→	12.6 ■	→	→		→		→		12.44	<11.5	<11.5		<11.5	11.5 - 12.5	>12.5		12.6	11.6		
		Breast Feeding Initiation Rates	%	→	64.6 ■	→	→		→		→		63.34	>63.0	>63.0		>63.0	61-63	<61.0		54.2	63.1		
RK	RTT Milestones	Admitted Care (RTT <18 weeks)	%	92.6 ▲	92.4 ▼	91.5 ▼	→		→		→		91.0 ▼	91.0*	=>90.0	=>90.0	f	=>90.0	85-90	<85.0		98.6	93.4	
		Admitted Care RTT -Specialties <90%	No.	4 ▼	2 ▲	2 ■	→		→		→		2	2*	0	0		0		>0				
		Admitted Care RTT -Backlog	No.	691	736	844	→		→		→		548	548*	No. Only	No. Only								
		Non-Admitted Care (RTT <18 weeks)	%	97.8 ▲	97.9 ▲	97.5 ▼	→		→		→		97.9 ▲	97.9*	=>95.0	=>95.0		=>95.0	90 - 95	=<90.0		98.8	97.6	
		Non-Admitted Care RTT -Specialties <95%	No.	0 ■	0 ■	1 ■	→		→		→		0	0*	0	0		0		>0				
		Non-Admitted Care RTT -Backlog	No.	146	176	120	→		→		→		117	117*	No. Only	No. Only								
DO'D	Mortality in Hospital	Hospital Standardised Mortality Rate	HSMR	82.1 Aug '10	95.3 Sep '10	100.8 Oct '10	→		→		→		99.8 Dec '10	97.0	< Lower Confidence Limit	h	< Lower Confidence Limit		> Upper Confidence Limit		105.1	93.0		
		Peer (SHA) HSMR	HSMR	96.5	91.9	94.7	→		→		→		93.2	97.0								103.9	93.5	
RK	Readmission Rates within 28 days of discharge	Readmission to any specialty	%	8.7	9.3	9.1	8.3	9.6	9.0				9.1	No. Only	No. Only	g					11.6	11.4		
		Readmission to same specialty	%	4.0	4.1	3.9	4.7	4.5	4.6				4.1	No. Only	No. Only							4.6	5.7	
	Readmission Rates within 14 days of discharge	Readmission to any specialty	%	6.6	6.9	7.0	5.8	7.4	6.7				6.9	No. Only	No. Only							7.3	8.8	
		Readmission to same specialty	%	3.2	3.2	3.1	3.3	3.7	3.5				3.2	No. Only	No. Only							3.4	4.6	
RO	Sickness Absence	Long Term	%	3.27 ▲	3.95 ▼	3.57 ▲	→		→		→		3.01 ■	3.27 (Q4 to date)	<2.80	<2.80	g	<2.80	2.80-3.10	>3.10		3.16	3.10	
		Short Term	%	1.18 ▲	1.44 ■	1.16 ■	→		→		→		1.02 ▼	1.06 (Q4 to date)	<1.20	<1.20		<1.20	1.20-1.35	>1.35		1.22	1.31	
		Total	%	4.45 ▲	5.39 ■	4.73 ▲	→		→		→		4.03 ▲	4.33 (Q4 to date)	<4.00	<4.00		<4.00	4.00-4.45	>4.45		4.38	4.41	
Learning & Development	PDRs (includes Junior Med staff)	No.	363 ▼	250 ■	354 ■	→		→		→		242 ▼	4635	5341	5341	h	0-15% variation	15 - 25% variation	>25% variation		4518	4748		
	Mandatory Training Compliance	%	84.3 ▲	84.4 ▲	84.9 ▲	→		→		→		86.8 ▼	86.8	100	100		=>80	50 - 79	<50		4044 (No.)	71.1		

Exec Lead	NATIONAL AND LOCAL PRIORITY INDICATORS (Cont'd)		Value £000s		November	December	January	February			March			To Date (*=most recent month)	TARGET		Exec Summary Note	THRESHOLDS			10 / 11 Forward Projection	08/09 Outturn	09/10 Outturn	
					Trust	Trust	Trust	S'well	City	Trust	S'well	City	Trust		YTD	10/11								
DO'D	CQUIN	VTE Risk Assessment (Adult IP)	454	%	71.7 ▲	82.0 ▲	88.5 ▲	→		91.8 ■	→		92.3 ▲	90.88 (Q4)	90	90	i	=>90		<90		n/a	n/a	
RO		Breast Feeding (At D'charge from M/wife)	420	%	63.0 ■			→				→		81.8 ■	81.8 (Q4)	72.3		72.3	No variation		Any variation		n/a	n/a
RO		Tissue Viability - assessment <12hrs	210	%	→	92.0 ▲		→				→		92.0 (Q3)	75	75		=>75		<75		n/a	n/a	
RO		Tissue Viability - Hosp Acq'd Grade 2/3/4	84	%	-66.0 ▲	-61.0 ▼	-43.7 ▼	→		-48.4 ▲		→		-40.4	Base - 10%	Base - 10%		=>-10.0%		<-10.0%		n/a	n/a	
RO		Tissue Viability - TTR of Grade 3/4	126	%	100 ■	100 ■	100 ■	→				→		100	100	100		100	100		<100		n/a	n/a
RO		Inpatient Falls Assessment	420	%	93.6 ▲			→				→		93.6*	75	75		=>75		<75		n/a	n/a	
RO		Inpatient Falls reduction		%	-33.6 ▲	-46.7 ▲	-34.6 ▼	→					→		-17.9	Base - 10%		Base - 10%	=>-10.0%		<-10.0%		n/a	n/a
RO		Inpatient Falls - TTR of all Fractures		%	100.0 ■	100.0 ■		→					→		100	100		100	100	100		<100		n/a
DO'D		Brain Imaging for Em. Stroke Admissions	420	%	88.2 ■	86.5 ■	94.3 ■	→		88.9 ■		→		90.4 (Q4)	90.0	90.0		No Variation	0 - 2% Variation	>2% Variation		72.0	81.8	
RK		Hip Fracture Op's <24 hours of admission	420	%	64.3 ■	73.7 ▲	60.0 ■	→		50.0 ▼		→		64.7 (Q4)	70.0	70.0		No Variation	0 - 2% Variation	>2% Variation		n/a	55.0	
DO'D		Smoking - Brief Intervention in OP	420	No.	172 ▼	164 ■	146 ■	→		162 ■		→		2041	2000	2000		=>167	per month	<167		7	1164	
RK		Safer Prescribing of Warfarin	420	%	→	69.4 ▼	→	→		→		→		70.2 (M12)	65.0	65.0		=>65		<65		n/a	n/a	
RO		Patient Experience	454	%	→	→	→	Composite of 5 Qs - Survey October			Composite of 5 Qs - Survey October			67.3	66.4	66.4						n/a	n/a	
DO'D		Think Glucose	420		→	→	→	Participation in Think Glucose Programme			Participation in Think Glucose Programme											n/a	n/a	
RK	CQUIN (Specialised Commissioners)	Parent's consultation with senior clinician	51	%	73 ▲	85 ■	84 ▼	→		83 ▼		→		81 (Q3 & Q4)	81	81	No variation		Any variation		n/a	n/a		
		Neonates Offered Breast Milk	51	%	100 ■	100 ■	90 ▼	→		94 ▲		→		93 (Q3 & Q4)	79	79	No variation		Any variation		n/a	n/a		
		Herceptin Home Delivery	85	%	52 ▼	55 ▲	58 ▲	→		58 ■		→		65*	50.0	50.0	=>50		<50		n/a	n/a		

CLINICAL QUALITY

R0	Infection Control	Savings Lives Compliance	%	100 ■	100 ■	99 ▼	→		100 ▲		→		100*	>95	>95
		MRSA Screening (Elective)	No.	3121 ▲	2529 ▼	3116 ▲	Numerator = 2857	Denominator = 2430	2857 ▼	Numerator = 3278	Denominator = 2460	3278 ▲	33404	30000	30000
		MRSA Screening (Non-Elective)	No.	1611 ▼	1228 ▼	1635 ▼	Numerator = 1569	Denominator = 2430	1569 ▼	Numerator = 1777	Denominator = 2370	1777 ■	23514	30000	30000
DO'D	Obstetrics	Post Partum Haemorrhage (>2000 ml)	No.	1 ▼	0 ▲	1 ▼	→		0 ▲		→		9	48	48
		Admissions to Neonatal ICU	%		3.2 ■	→	→		8.9 ▼		→		8.9*	<=10	<=10
		Adjusted Perinatal Mortality Rate	/1000	9.9 ■	8.8 ▲	→	→		8.9 ▼		→		8.9*	<8.0	<8.0
		Caesarean Section Rate	%	24.0 ▼	25.4 ■	21.1 ■	→		22.6 ▼		→		23.6	<25.0	<25.0

< YTD target		> YTD target
0-15%	16-30%	>30%
0-15%	16-30%	>30%
=<2	3 - 4	>4
=<10	10.0-12.0	>12.0
<8	8.1 - 10.0	>10
=<25.0	25-28	>28.0

99.0	99.0
6495	24710
n/a	18571
	10
	5.5
	10.9
27.0	23.3

FINANCE & FINANCIAL EFFICIENCY

RW	Gross Margin	£000s	1917 ▼	2168 ▲	2168 ▼	→		1847 ■		→		21697	21386	26711	
	CIP	£000s	1700 ▼	2148 ▲	1771 ▲	→		1766 ■		→		19030	19073	20840	
	In Year Monthly Run Rate	%	13.75 ▲	6.90 ▼	0.91 ▼	→		8.29 ▲		→		10.56	0	0	
RK	Income / WTE	£s	5018 ▼	5017 ▼	5109 ▲	→		5119 ▲		→		5093	5127	5127	
	Income / Open Bed	£s	33975 ▲	33270 ▼	34087 ▲	→		34983 ▲		→		34548	32697	32697	
	Income per Spell	Total Income	£s	2990 ▼	3280 ▲	3043 ▼	→		3301 ▲		→		3094	2908	2908
		Clinical Income	£s	2692 ▲	2932 ▲	2774 ▼	→		2980 ▲		→		2775	2580	2580
		Non-Clinical Income	£s	298 ■	348 ■	269 ■	→		321 ■		→		319	328	328
	Cost per Spell (* Excludes the cost of drugs which are recharged directly to PCTs)	Total Cost	£s	2978 ■	3242 ■	3008 ▲	→		3275 ▼		→		3097	2891	2891
		Total Pay Cost	£s	2060 ▲	2217 ▼	2096 ▲	→		2240 ▼		→		2081	1909	1909
		Medical Pay Cost	£s	583 ▲	631 ▼	587 ▲	→		628 ▼		→		594	555	555
		Nursing Pay Cost (including Bank)	£s	627 ▼	666 ■	620 ■	→		679 ■		→		623	660	660
	Non-Pay Cost	£s	918 ■	1025 ■	912 ■	→		1035 ■		→		1016	982	982	
Mean Drug Cost* / IP Spell	£s	147 ■	156 ▼	142 ▲	→		150 ▼		→		138	124	124		
Mean Drug Cost* / Occupied Bed Day	£s	57 ■	55 ▲	52 ■	→		58 ■		→		54	49	49		

0%	0 - 1%	>1%
0 - 2.5%	2.5 - 7.5%	>7.5%
NO or a + variation	0 - 5% variation	>5% variation
No variation	0 - 5% variation	>5% variation
No variation	0 - 5% variation	>5% variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation
No Variation	0 - 4% Variation	>4% Variation

26436	30436
11084	15075
1.4	0.44
5014	5058
30498	32697
2701	2908
2400	2580
301	328
2682	2891
1785	1909
532	555
625	660
897	982
120	124
47	49

Exec Lead	PATIENT EXPERIENCE			November	December	January	February			March			To Date (=most recent month)	TARGET		Exec Summary Note	THRESHOLDS			08/09 Outturn	09/10 Outturn	
				Trust	Trust	Trust	S'well	City	Trust	S'well	City	Trust		YTD	10/11							
	Same Sex Accommodation Breaches	Total Number of Breaches	No.	→	332	339	64	163	227	34	132	166	1064	0	0	k	0		>0	n/a	n/a	
		Breaches in Assessment Units (inc in above)	No.	→	241	72	60	7	67	34	31	65	445	No. Only	No. Only					n/a	n/a	
KD	Complaints	Number Received	No.	→				→		→		398	No. Only	No. Only					789	875		
		Response within initial negotiated date	%	→				→		→		n/a	85	85		80%+	70 - 79%	<70%	81.1	70.6		
	Thank You Letters	No.	→				→		→		n/a	No. Only	No. Only						2912	2286		
RK	Elective Access Contact Centre	Number of Calls Received	No.	11328	11039	11052	→		9806	→		10827	137824	No. Only	No. Only	I				190434	incomplete data	
		Average Length of Queue	mins	0.41	1.09	0.37	→		0.45	→		0.21	0.21*	<1.0	<1.0		<1.0	1.0-2.0	>2.0	0.44		
		Maximum Length of Queue	mins	13.5	26.4	15.1	→		33.2	→		6.3	6.3*	<6.0	<6.0		<6.0	6.0-12.0	>12.0	17.4		
	Telephone Exchange	Number of Calls Received	No.	76256	79661	77520	→		69366	→		78392	909301	No. Only	No. Only				1559688	1100521		
		Calls Answered	%	91.7	88.6	89.6	→		92.0	→		90.8	90.5	No. Only	No. Only				82.3	83.6		
		Answered within 15 seconds	%	54.4	48.2	49.9	→		59.1	→		54.3	52.4	No. Only	No. Only				39.1	43.8		
		Answered within 30 seconds	%	71.0	63.9	65.6	→		75.3	→		70.7	68.4	No. Only	No. Only				55.5	58.8		
		Average Ring Time	Secs	21.8	26.8	25.6	→		18.5	→		21.2	21.2*	No. Only	No. Only				28.8	36.0		
Longest Ring Time	Secs	594	653	591	→		699	→		731	731*	No. Only	No. Only				695	646				
STRATEGY																						
RK	Referrals	Total	No.	15540	11846	13816	→		14045	→			166677	175330	192945	m	No Variation	0 - 2% Variation	>2% Variation	178070	192945	
		Total GP Referrals	No.	10595	7767	9472	→		9911	→			113237	115405	127001		No Variation	0 - 2% Variation	>2% Variation	120138	127001	
		Total Other Referrals	No.	4945	4079	4344	→		4134	→			53440	59925	65944		No Variation	0 - 2% Variation	>2% Variation	57932	65944	
		By PCT - Heart of B'ham	No.	4187	3066	3727	→		3748	→			44876	47803	52604		No Variation	0 - 2% Variation	>2% Variation	49859	52604	
		By PCT - Sandwell	No.	7937	6161	7172	→		7337	→			84258	87873	96699		No Variation	0 - 2% Variation	>2% Variation	87779	96699	
		By PCT - Other	No.	3416	2619	2917	→		2960	→			37220	39660	43642		No Variation	0 - 2% Variation	>2% Variation	40453	43642	
		Conversion (all referrals) to New OP Att'd	%	93.6	95.3	97.1	→		87.5	→			89.1	No. Only	No. Only					85.9	85.3	
		OP Source of Referral Information	%	1.38	1.58	1.47	→		1.33	→		1.23	1.22	=<5.0	=<5.0		No variation		Any variation	10.0	1.4	
ACTIVITY																						
RK	Spells	Elective IP	No.	973	884	913	→		944	→		1109	11748	12641	12641	n	No Variation	0 - 2% Variation	>2% Variation	13106	13722	
		Elective DC	No.	4711	3828	4554	→		4298	→		4987	53959	45747	45747		No Variation	0 - 2% Variation	>2% Variation	50873	52729	
		Total Elective	No.	5684	4712	5467	→		5242	→		6096	65707	58338	58338		No Variation	0 - 2% Variation	>2% Variation	63979	66451	
		Non-Elective - Short Stay	No.	1207	1125	1190	→		1143	→		1187	16460	15712	15712		No Variation	0 - 2% Variation	>2% Variation	12770	18769	
		Non-Elective - Other	No.	3665	3951	3716	→		3344	→		3763	42540	46502	46502		No Variation	0 - 2% Variation	>2% Variation	56226	47072	
		Total Non-Elective	No.	4872	5076	4906	→		4487	→		4950	59000	62214	62214		No Variation	0 - 2% Variation	>2% Variation	68996	65841	
	Outpatients	New	No.	14549	11284	13414	→		12290	→		14901	163493	155792	155792		No Variation	0 - 2% Variation	>2% Variation	152923	164358	
		Review	No.	38301	30768	35272	→		34437	→		39733	440812	397213	397213		No Variation	0 - 2% Variation	>2% Variation	374867	425850	
	A/E Attendances	Type I (Sandwell & City Main Units)	No.	14444	14721	14532	→	5976	7317	13293	6881	8695	15576	181494	191845		191845	No Variation	0 - 2% Variation	>2% Variation	191141	190254
	A/E Attendances	Type II (BMEC)	No.	3132	2426	2889	→		2800	→		3278	36756	35133	35133		No Variation	0 - 2% Variation	>2% Variation	30800	34836	

Exec Lead	PATIENT ACCESS & EFFICIENCY			November	December	January	February			March			To Date (=most recent month)	TARGET		Exec Summary Note	THRESHOLDS			08/09 Outturn	09/10 Outturn	
				Trust	Trust	Trust	S'well	City	Trust	S'well	City	Trust		YTD	10/11							
RK	Waiting Times	Diagnostic Waits greater than 6 weeks	No.	22 ▼	45 ▼	32 ▲	→			→			24*	0	0	b	0		>0	26	3	
	Length of Stay	Average Length of Stay	Days	4.6 ▼	4.5 ▲	4.4 ▲	4.6 ▲	4.1 ▼	4.3 ▲				4.3	5.0	5.0		No Variation	0 - 5% Variation	>5% Variation	5.0	4.4	
		All Patients with LOS > 14 days	No.	320	342	327	201	149	350	181	146	327	327	No. Only	No. Only					312	356	
		All Patients with LOS > 28 days	No.	178	182	187	106	81	187	108	86	194	194	No. Only	No. Only					152	195	
		Min. Stay Rate (Electives (IP/DC) <2 days)	%	93.4 ▲	92.9 ▼	93.8 ▲	95.2 ▼	90.6 ▼	92.5 ▼	96.0 ▲	91.3 ▲	93.2 ▲	93.1	92.0	92.0		No Variation	0 - 5% Variation	>5% Variation	91.6	92.3	
	Admissions	Day of Surgery (IP Elective Surgery)	%	91.0 ▲	90.2 ▼	90.6 ▲	91.3 ▲	89.4 ▼	90.0 ▼	92.3 ▲	90.4 ▲	91.0 ▲	88.7	82.0	82.0		No Variation	0 - 5% Variation	>5% Variation	79.4	85.5	
		Day of Surgery (IP Non-Elective Surgery)	%	75.0	77.5	72.4	71.2	77.1	75.8	74.9	73.9	74.2	73.4	No. Only	No. Only					70.2	69.7	
		With no Procedure (Elective Surgery)	%	9.1	8.5	7.9	9.8	7.7	8.4				8.2	No. Only	No. Only					10.6	9.7	
		Per Bed (Elective)	No.	5.52 ■	5.43 ▼	5.43 ■	4.73 ▲	6.46 ▲	5.60 ■	5.84 ■	8.45 ▲	7.16 ■	5.81	5.90	5.90		No Variation	0 - 5% Variation	>5% Variation	5.33	5.49	
	Discharges	Pt's Social Care Delay	No.	32 ▼	20 ■	28 ■	14 ■	8 ■	22 ▲	9 ■	14 ■	23 ▼	23*	<18	<18		No Variation	0 - 10% Variation	>10% Variation			
		Pt.'s NHS & NHS plus S.C. Delay	No.	13 ▲	8 ■	15 ■	7 ■	12 ■	19 ▼	10 ■	12 ■	22 ▼	22*	<10	<10		No Variation	0 - 10% Variation	>10% Variation			
	Beds	Occupied Bed Days	No.	26747 ▼	27602 ▼	28252 ▼	11863 ■	13023 ▲	24886 ▲	12608 ▲	14678 ■	27286 ▼	319212	331946	331946		No Variation	0 - 5% Variation	>5% Variation	342793	331946	
		Occupancy Rate	%	87.2 ■	84.9 ■	87.0 ■	90.0 ■	83.5 ■	86.7 ■	88.5 ■	87.2 ■	87.8 ■	86.6	86.5-89.5	86.5-89.5		86.5 - 89.5	85.5-86.4 or 86.5-89.5	<85.5 or >89.5	90.3	86.0	
		Open at month end (exc Obstetrics)	No.	929 ■	965 ■	926 ▲	455	463	918 ▲	458	471	929 ■	929*	920	920		No Variation	0 - 2% Variation	>2% Variation	975	989	
	Day Case Rates	All Procedures	%	81.9 ▲	80.6 ▼	82.0 ▲	85.6 ▲	78.1 ▼	81.2 ▼	85.9 ▲	77.2 ▼	80.7 ▼	81.5	80.0	80.0		No Variation	0 - 5% Variation	>5% Variation	79.0	79.4	
		BMEC Procedures	%	82.3 ▼	83.4 ▲	86.4 ▲	→			80.9 ▼	80.9 ▼	→		81.3 ▲	81.3 ▲		80.0	80.0	No Variation	0 - 5% Variation	>5% Variation	79.7
	Non-Admitted Care	New : Review Rate	Ratio	2.63 ▼	2.71 ▼	2.63 ▲	2.99 ▼	2.72 ▼	2.80 ▼	2.77 ▲	2.62 ▲	2.67 ▲	2.70	2.30	2.30		No Variation	0 - 5% Variation	>5% Variation	2.45	2.59	
		DNA Rate - New Referrals	%	13.1 ▲	15.0 ▼	13.7 ▲	11.1 ■	12.2 ▲	11.8 ■	10.5 ▲	13.0 ▼	12.2 ■	13.1	<8.0	<8.0		<8%	8 - 12%	>12%	12.0	13.5	
		DNA Rate - Reviews	%	11.6 ■	13.2 ■	13.3 ▼	9.8 ■	10.4 ■	10.2 ■	11.4 ▼	11.7 ▼	11.6 ▼	11.9	<8.0	<8.0		<8%	8 - 12%	>12%	13.5	12.3	
		OP Cancs / Rescheduled - Trust Initiated	No.	9464	11650	15247	→			10749	→			12165	134113		No. Only	No. Only				
		OP Cancs / Rescheduled - Patient Initiated	No.	8438	9148	8520	→			7454	→			8160	93162		No. Only	No. Only				
		OP Cancs (<14 days) - Trust & Patient	No.	9935	10732	10988	→			8818	→			9158	110607		No. Only	No. Only				
		OP Cancs (>2 since last app't) - Trust & Pt	No.	2300	2382	3417	→			2659	→			3169	27704		No. Only	No. Only				
	OP App'ts Booked (>14 days notice)	%	60.6	60.6	63.3	→			57.8	→			60.4	60.1	No. Only		No. Only					
	Diagnostic Report Turnaround	Cervical Cytology Turnaround	Days	<9 days ■	<9 days ■	<9 days ■	→			<9 days ■	→			<9 days ■	<9 days		<9 days	<9 days	9-12 days	>12 days		
	Ambulance Turnaround	In Excess of 30 minutes	%	25.1 ▲	30.5 ▼	27.2 ▲	24.7 ▲	23.6 ▲	24.1 ▲	27.3 ▼	26.6 ▼	27.0 ▼	27.0*	<10.0	<10.0		<10	10 - 12.5	>12.5	19.0	23.9	
		(West Midlands average)	%	32.7	36.9	32.1	→			30.2	→			27.7	No. Only		No. Only			21.0	25.5	
In Excess of 60 minutes		No.	32 ▲	134 ▼	78 ▲	19 ▲	10 ▲	29 ▲	14 ▲	40 ▼	54 ▼	54*	0	0	0	1 - 5	>5		46			
THEATRE UTILISATION																						
RK	Sitrep Declared Late Cancellations by Speciality	General Surgery	No.	1 ■	5 ▼	5 ■	0	1	1 ▲	5	4	9 ■	67	60	60	a	0-5% variation	5 - 15% variation	>15% variation	104	81	
		Urology	No.	2 ■	10 ■	22 ▼	1	1	2 ■	5	3	8 ■	93	48	48		0-5% variation	5 - 15% variation	>15% variation	102	48	
		Vascular Surgery	No.	0 ■	0 ■	0 ■	0	1	1 ■	0	0	0 ■	8	3	3		0-5% variation	5 - 15% variation	>15% variation	7	8	
		Trauma & Orthopaedics	No.	6 ▼	5 ▲	2 ▲	0	0	0 ▲	0	6	6 ▼	55	72	72		0-5% variation	5 - 15% variation	>15% variation	75	66	
		ENT	No.	2 ■	2 ■	1 ■	0	2	2 ■	0	1	1 ■	18	12	12		0-5% variation	5 - 15% variation	>15% variation	23	23	
		Ophthalmology	No.	20 ■	10 ■	14 ■	0	12	12 ■	1	6	7 ■	138	108	108		0-5% variation	5 - 15% variation	>15% variation	153	139	
		Oral Surgery	No.	2 ■	3 ▼	1 ■	0	1	1 ■	0	4	4 ■	14	8	8		0-5% variation	5 - 15% variation	>15% variation	19	24	
		Cardiology	No.	2 ▼	0 ▲	1 ▼	0	0	0 ▲	0	2	2 ■	16	21	21		0-5% variation	5 - 15% variation	>15% variation	31	7	
		Gynaecology / Gynae-Oncology	No.	2 ■	11 ■	4 ■	2	4	6 ■	2	9	11 ▼	69	54	54		0-5% variation	5 - 15% variation	>15% variation	71	63	
		Plastic Surgery	No.	2 ■	1 ■	0 ▲	0	0	0 ■	1	0	1 ▼	9	12	12		0-5% variation	5 - 15% variation	>15% variation	21	11	
		Dermatology	No.	0 ■	0 ■	0 ■	0	0	0 ■	0	0	0 ■	13	24	24		0-5% variation	5 - 15% variation	>15% variation	24	27	
		TOTAL	No.	39 ■	47 ■	50 ▼	3	22	25 ■	14	35	49 ■	500	422	422		0-5% variation	5 - 15% variation	>15% variation	630	497	

Exec Lead	WORKFORCE			November	December	January	February			March			To Date (*=most recent month)	TARGET		Exec Summary Note	THRESHOLDS			08/09 Outturn	09/10 Outturn
				Trust	Trust	Trust	S'well	City	Trust	S'well	City	Trust		YTD	10/11						
RK	WTE in Post	Total	No.	6289 ▼	6306 ▼	6178 ▲	→		6274 ▼	→		6274*	6420	6107	No Variation	0 - 1% Variation	>1% Variation	6042	6539		
		Medical and Dental	No.	752 ▼	752 ▲	746 ▲	→		752 ▼	→		752*	786	790	No Variation	0 - 1% Variation	>1% Variation	755	825		
		M'ment, Admin. & HCAs	No.	2518 ▼	2533 ▼	2512 ▲	→		2522 ▼	→		2522*	2751	2492	No Variation	0 - 1% Variation	>1% Variation	1852	2046		
		Nursing & Midwifery (excluding Bank)	No.	1770 ▲	1764 ▲	1744 ▲	→		1761 ▼	→		1761*	1832	1822	No Variation	0 - 1% Variation	>1% Variation	2259	2385		
		Scientific and Technical	No.	980 ▲	985 ▼	984 ▲	→		981 ▲	→		981*	1052	1003	No Variation	0 - 1% Variation	>1% Variation	913	1002		
		Bank Staff	No.	269	303	192	→		258	→		258*	No. Only	No. Only	No Variation	0 - 1% Variation	>1% Variation	260	281		
		Gross Salary Bill	£000s	21749 ■	21697 ▼	21737 ▼	→		21796 ■	→		236590	236299	250319	No Variation	0 - 1% Variation	>1% Variation	238674	252557		
RK	Bank & Agency	Nurse Bank Fill Rate	%	87.2	77.2	82.0	→		86.9	→		86.2	No. Only	No. Only	0 - 2.5% Variation	2.5 - 5.0% Variation	>5.0% Variation	81.8	85.1		
		Nurse Bank Shifts covered	No.	4750 ▲	4325 ▲	4569 ▼	→		4470 ▲	→		5405 ■	54952	61621	61621	0 - 5% Variation	5 - 10% Variation	>10% Variation	69675	61621	
		Nurse Agency Shifts covered	No.	449 ▲	538 ▼	590 ▼	→		357 ■	→		350 ▲	4550	4765	4765	0 - 2.5% Variation	2.5 - 5.0% Variation	>5.0% Variation	4765	5388	
		Nurse Bank AND Agency Shifts covered	No.	5049 ▲	4863 ▲	5159 ▼	→		4827 ▲	→		5755 ■	59502	66386	66386	0 - 2.5% Variation	2.5 - 5.0% Variation	>5.0% Variation	74440	67009	
		Nurse Bank Costs	£000s	474 ▲	534 ▼	331 ▲	→		489 ▼	→		5013	5870	6404	0 - 2.5% Variation	2.5 - 5.0% Variation	>5.0% Variation	6844	6263		
		Nurse Agency Costs	£000s	127 ▼	96 ▲	110 ▼	→		116 ▼	→		873	909	992	0 - 5% Variation	5 - 10% Variation	>10% Variation	832	1268		
KD		Medical Agency Costs	£000s	228 ▲	253 ▼	269 ▼	→		294 ▼	→		2709	1093	1192	0 - 5% Variation	5 - 10% Variation	>10% Variation	2026	2384		
		Medical Locum Costs	£000s	161 ▲	223 ■	231 ▼	→		194 ■	→		2609	2062	2250	0 - 2.5% Variation	2.5 - 5.0% Variation	>5.0% Variation	2747	2896		
		Med Ag./Loc Costs as % Total Med Costs	%	6.1	7.4	7.9	→		7.6	→		7.6	No. Only	No. Only	No Variation	0 - 1% Variation	>1% Variation	6.6	7.0		
		Med Staff Exp variance from Budget	%	3.7 ▲	4.1 ▼	4.4 ▼	→		4.8 ▼	→		4.02	0	0	No Variation	0 - 1% Variation	>1% Variation	2.86	3.24		
RK		Other Agency Costs	£000s	242 ▼	214 ▲	204 ▲	→		188 ▲	→		2362	1292	1410	0 - 5% Variation	5 - 10% Variation	>10% Variation	3759	2600		
RK/KD		Agency Spend cf. Total Pay Spend	%	2.74 ▲	2.59 ▲	2.49 ▲	→		2.74 ▼	→		2.51	<2.00	<2.00	<2	2 - 2.5	>2.5	2.77	2.47		
RO	Recruitment & Retention	Permission to Recruit	wte	30	57	62	→		40	→		109	783	No. Only	No. Only	=>80	50 - 79	<50	1124	813	
		New Starters	wte	79	61	47	→		81	→		59	962	No. Only	No. Only				1066	1017	
		Leavers	wte	47	52	48	→		73	→		68	959	No. Only	No. Only				999	928	
		Corporate Inductions	%	88 ▲	76 ■	47 ■	→		55 ■	→		55*	100	100				896	805		

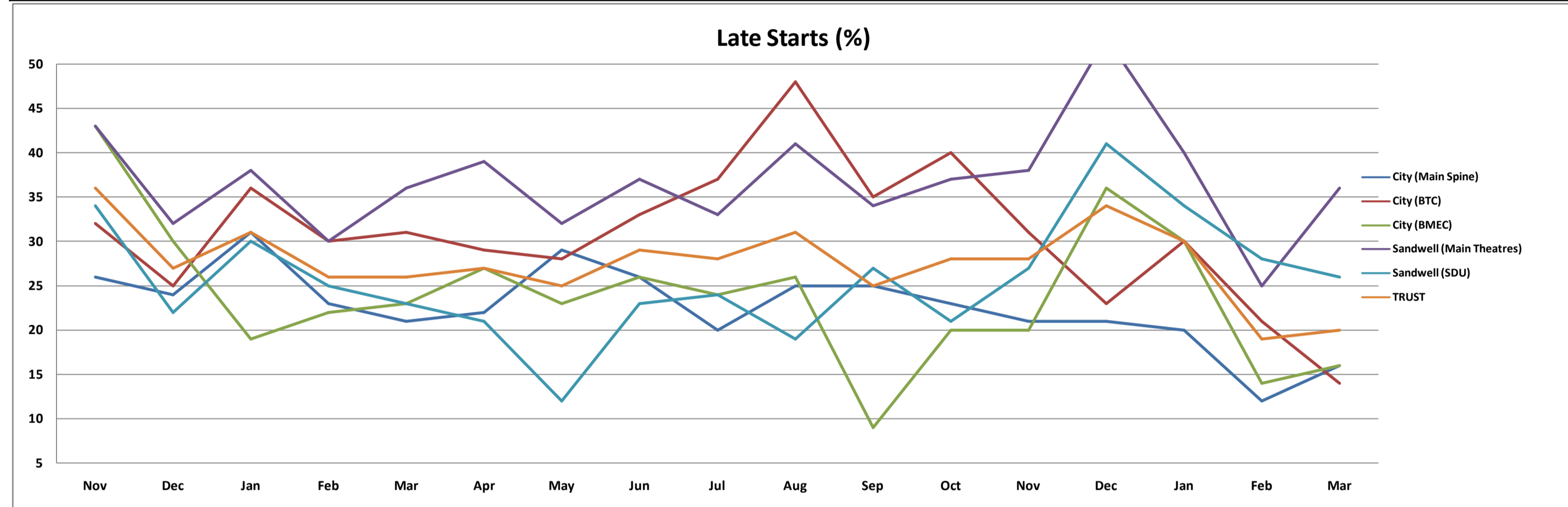
KEY TO PERFORMANCE ASSESSMENT SYMBOLS	
▲	Fully Met - Performance continues to improve
■	Fully Met - Performance Maintained
▼	Met, but performance has deteriorated
▲	Not quite met - performance has improved
■	Not quite met
▼	Not quite met - performance has deteriorated
▲	Not met - performance has improved
■	Not met - performance showing no sign of improvement
▼	Not met - performance shows further deterioration
Please note: Although actual performance within the period may have improved, this may not always be reflected by a symbol which reflects this, if the distance from trajectory has worsened	

KEY TO FORWARD PROJECTION ASSESSMENT	
●	Maintain (at least), existing performance to meet target
●	Improvement in performance required to meet target
●●	Moderate Improvement in performance required to meet target
●●●	Significant Improvement in performance required to meet target

SUPPLEMENTARY DATA THEATRE UTILISATION

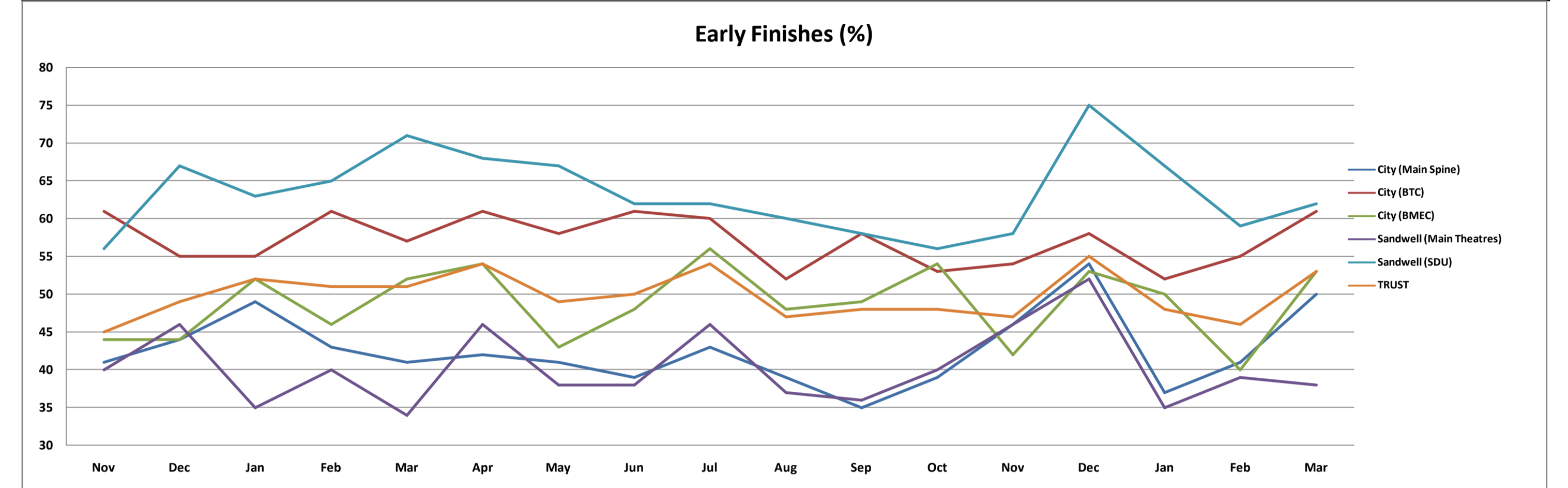
Theatre Location	2009 / 2010					2010 / 2011											
	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
City (Main Spine)	26	24	31	23	21	22	29	26	20	25	25	23	21	21	20	12	16
City (BTC)	32	25	36	30	31	29	28	33	37	48	35	40	31	23	30	21	14
City (BMEC)	43	30	19	22	23	27	23	26	24	26	9	20	20	36	30	14	16
Sandwell (Main Theatres)	43	32	38	30	36	39	32	37	33	41	34	37	38	53	40	25	36
Sandwell (SDU)	34	22	30	25	23	21	12	23	24	19	27	21	27	41	34	28	26
TRUST	36	27	31	26	26	27	25	29	28	31	25	28	28	34	30	19	20

KEY: GREEN = <5.1% deviation from target, AMBER = 5.1 - 15.0% deviation, RED = >15.0% deviation



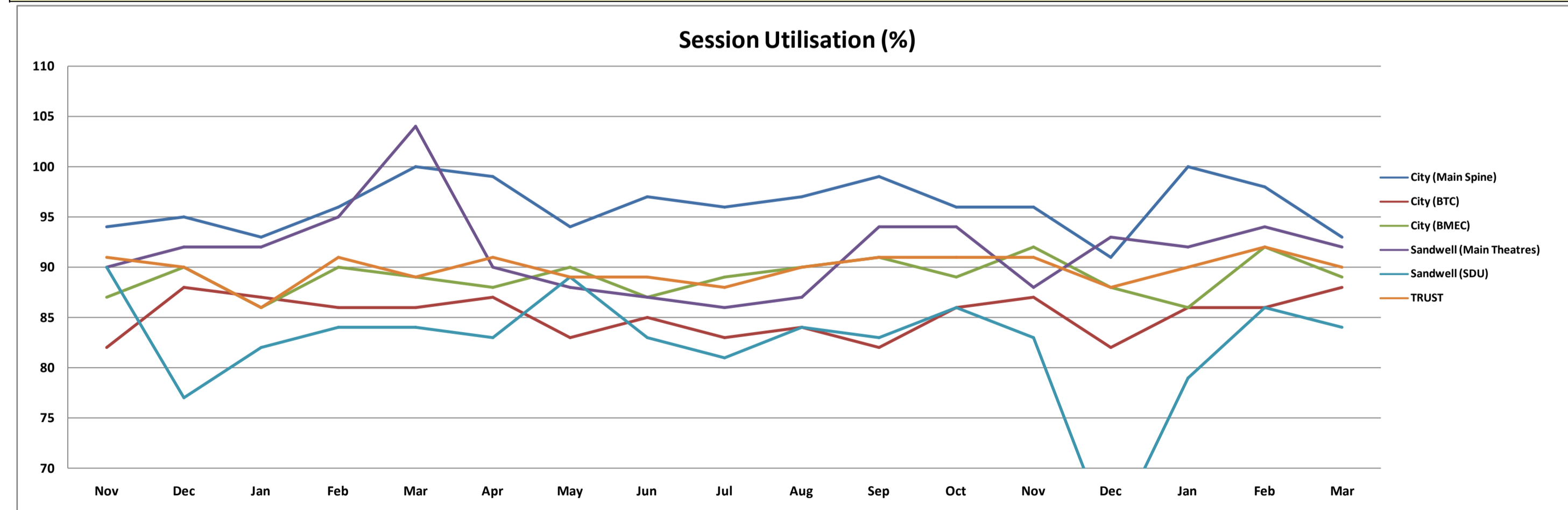
Theatre Location	2009 / 2010					2010 / 2011											
	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
City (Main Spine)	41	44	49	43	41	42	41	39	43	39	35	39	46	54	37	41	50
City (BTC)	61	55	55	61	57	61	58	61	60	52	58	53	54	58	52	55	61
City (BMEC)	44	44	52	46	52	54	43	48	56	48	49	54	42	53	50	40	53
Sandwell (Main Theatres)	40	46	35	40	34	46	38	38	46	37	36	40	46	52	35	39	38
Sandwell (SDU)	56	67	63	65	71	68	67	62	62	60	58	56	58	75	67	59	62
TRUST	45	49	52	51	51	54	49	50	54	47	48	48	47	55	48	46	53

KEY: GREEN = <5.1% deviation from target, AMBER = 5.1 - 15.0% deviation, RED = >15.0% deviation



Theatre Location	2009 / 2010					2010 / 2011											
	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
City (Main Spine)	94	95	93	96	100	99	94	97	96	97	99	96	96	91	100	98	93
City (BTC)	82	88	87	86	86	87	83	85	83	84	82	86	87	82	86	86	88
City (BMEC)	87	90	86	90	89	88	90	87	89	90	91	89	92	88	86	92	89
Sandwell (Main Theatres)	90	92	92	95	104	90	88	87	86	87	94	94	88	93	92	94	92
Sandwell (SDU)	90	77	82	84	84	83	89	83	81	84	83	86	83	63	79	86	84
TRUST	91	90	86	91	89	91	89	89	88	90	91	91	91	88	90	92	90

KEY: GREEN = <5.1% deviation from target, AMBER = 5.1 - 15.0% deviation, RED = >15.0% deviation



Theatre Location	2009 / 2010					2010 / 2011											
	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
City (Main Spine)	1.5	1.6	1.6	1.8	1.8	1.8	1.8	1.7	1.8	1.9	1.8	1.8	1.8	1.8	1.8	1.8	1.8
City (BTC)	3.2	3.4	3.6	3.7	3.5	3.4	3.4	3.5	3.2	3.2	3.2	3.4	4.2	3.9	4.2	3.7	3.7
City (BMEC)	3.5	3.5	3.7	3.7	3.6	4.0	3.7	3.6	3.5	3.6	3.7	3.7	4.1	3.6	3.8	3.7	3.5
Sandwell (Main Theatres)	2.3	2.3	2.4	2.5	2.5	2.4	2.4	2.3	2.3	2.3	2.4	2.6	3.3	2.8	2.4	2.4	2.3
Sandwell (SDU)	4.3	4.4	4.9	4.7	4.6	4.6	4.6	5.0	4.6	4.8	4.7	4.9	4.7	4.1	4.3	4.7	4.3
TRUST	2.5	2.5	2.9	3.1	3.0	3.0	3.0	3.0	2.9	2.9	3.0	3.0	3.2	2.9	3.1	3.1	2.9

KEY: GREEN = <5.1% deviation from target, AMBER = 5.1 - 15.0% deviation, RED = >15.0% deviation

