

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST**PATIENT CARE PERFORMANCE****1. INTRODUCTION**

This report shows performance against a range of patient care and experience indicators for the 2008/09 financial year, structured around four dashboards. Indicators marked with an "arrow" highlight movement in performance from the previous report, even if this is marginal.

2. KEY ISSUES

The key points from each dashboard are as follows:

Dashboard 1: Healthcare Commission Annual Health Check Targets

Existing National Targets continue to be met. The 2 week, 31 day and 62 day cancer waiting times were all achieved in February 2008 and the March position is currently being validated with the expectation that all targets will be met.

Year-end A&E performance is 98.8%, surpassing the 98% target. Following improvements to patient pathways and a heightened awareness of problems encountered in A&E, the Trust has made significant improvements and reduced the number of breaches since January 2008 with a resulting improved performance.

Year-end performance for last-minute cancelled operations as a percentage of elective activity was 0.5%, well within the 0.8% target. Furthermore, the Trust also surpassed targets for the number of 28 day readmission as a percentage of all cancelled operations, with a performance of 3.5% against a target of 5%. Last-minute cancelled operations during the year increased by 9% (47) in comparison to 06/07. The main reason for this growth in cancellations was an increase in cancellations due to theatre lists over-running, with 210 this year in comparison to 139 in 06/07.

The Trust surpassed the thrombolysis call to needle performance target of 68% target in 2007/08 with a fourth quarter performance of 75%. It is noteworthy that not all data is validated, however, the Trust is confident of its performance for the full year.

The Trust met both the admitted and non-admitted 18 week targets for the 2007/08 financial year with 87% of those admitted treated within 18 weeks, whilst 94% of non-admitted patients were treated within 18 weeks.

The stage of treatment milestones are tracked as part of the 18 week project. At the end of March the number of patients waiting in excess of 11 weeks for inpatient and day case treatment continued to fall from 1291 patient to 1081 (210 patients, decrease of 16%). There was an increase of 18% (989 patients) waiting in excess of 5 weeks for Outpatient assessment, to 6521, with the greatest increase in Ophthalmology.

Work has been ongoing during the past few months to streamline patient access to diagnostic services. Despite this work, the Trust narrowly missed this new national target of zero, with 5 patients waiting over 6 weeks for diagnostic tests at the end of March 2008. This included 3 patients awaiting MRI and 2 patients waiting non-obstetric ultrasounds.

Dashboard 2: Activity and Business Critical Local Targets

The productivity metrics show little variation on previous months with non-achievement against the local targets in all indicators with the exception of pre-operative length of stay.

The spell based LOS targets have been the subject of a separate review and the Board will be provided with a separate summary report advising of findings.

Activity monitoring shows performance against the SDS and Annual Plan (phased for seasonality). Activity against the annual plan shows over-performance for elective spells as well as new and review outpatient activity. However, non-elective spells are less than the outcome projected in the Annual plan by 3% and by 1% against the SDS projections.

Dashboard 3: Patient Experience and Quality

The total number of reported incidents for the period 01/04/07 - 31/03/08 are 6574 which is a very similar number of reports to the same period for the previous year (6613). Incidents related to patient falls represents the greatest number of reports and this has remained consistent throughout the year.

The number of formal and informal complaints received by the Trust in the last year is 570, which is very similar to the previous year. Issues relating to clinical treatment continues to raise the greatest number of issues. There have been nine requests for second stage reviews by the Healthcare Commission. Several Directorates continue to miss the target for complaints response times, although there has been improvement when compared to 2006/07 response times.

Patient satisfaction ratings with hip and knee replacements and procedures demonstrate that greater than 70% of patients who participated in the survey are very satisfied with the procedure.

The February 2008 results of the endoscopy patient satisfaction survey demonstrate a well maintained level of satisfaction with the service in all elements apart from equality of access and equality of provision. The Directorate are planning to use focus groups of users to address this deficit.

The Trust has 2356 active policies, to date 61 such policies are awaiting renewal beyond six months. All policy authors have been contacted to request review and update as necessary. The Board will be kept updated on matters relating to compliance with policies at subsequent meetings.

Dashboard 4: MRSA Bacteraemia

During the month of March 2008, five cases of MRSA Bacteraemia were identified of which four were classified as avoidable by the Consultant Microbiologist. The position at the 31/03/08 was that 59 cases in total had been identified for the year.

The Trust target for the year was 37 cases therefore the end of year position is 22 MRSA Bacteraemia cases over trajectory.

The number of reported cases of Clostridium difficile in the over 65 years was 26 for the month of March 2008. This demonstrates a position of 118 cases below trajectory at the end of year.

Of the total cases of MRSA Bacteraemia reported between 01/04/07 and 31/03/08 Internal Medicine, Elderly Care, Surgery and Cardio are the Directorates with the highest number of cases. It is worth noting that the Elderly Care Directorate has not reported a case in the last three months and that generally the incidence of bacteraemia in the over 65 years has reduced

3. ADDITIONAL PRESSURES

The Board will recall being advised that from April 2008 new Department of Health deadlines in relation to Payment by Results (PbR) will be in operation. Details of the Trust's current position regarding clinical coding position were reported last month and at the end of March 2008, the position remains unchanged with all Finished Consultant Episodes (FCE's) being coded within 7-14 days of patient discharge.

4. RECOMMENDATIONS

To i) receive the report and ii) note the excellent year-end performance.

Dot Kyle
Patient Services Manager

Diane Palmer
Assistant Director - Quality

17th April 2008

Business Critical Local Targets/Productivity Metrics

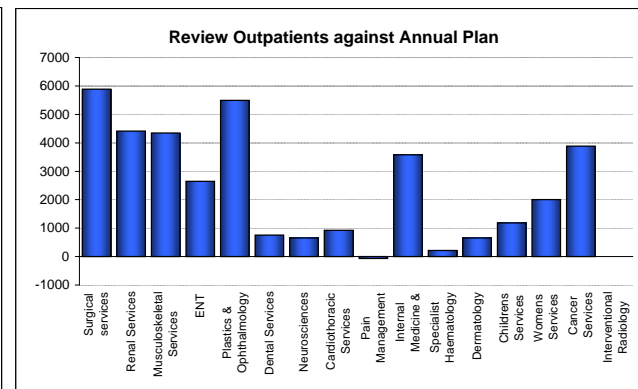
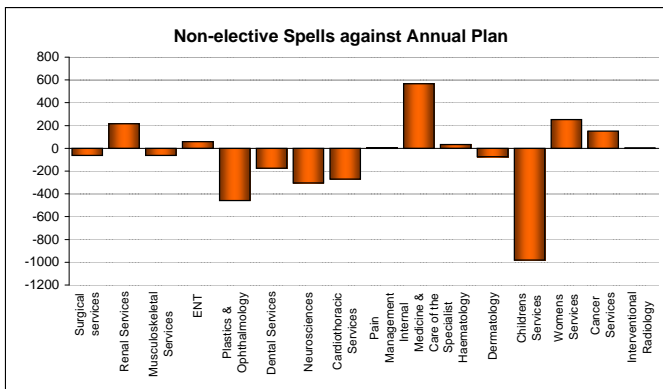
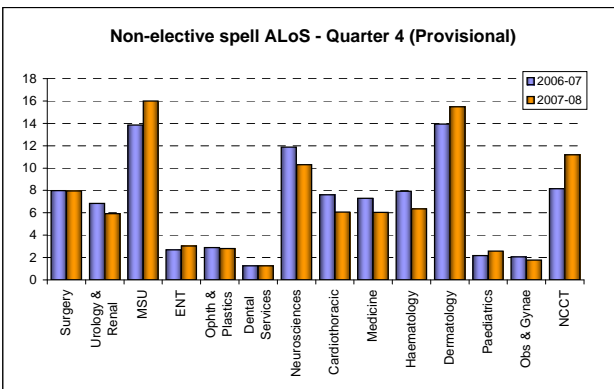
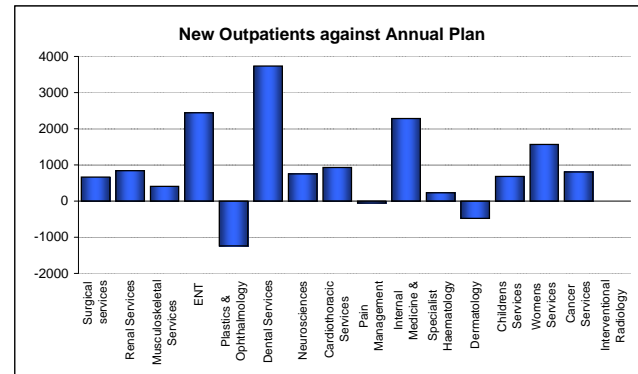
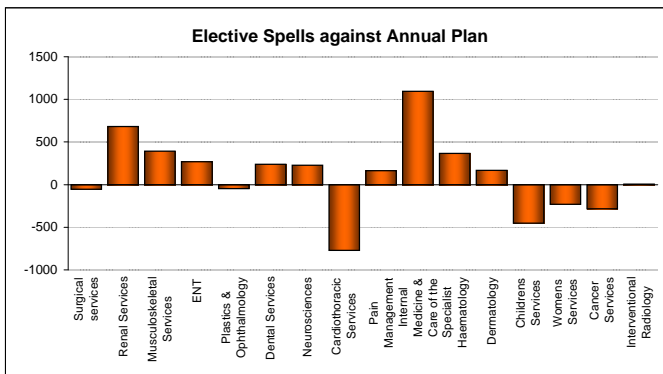
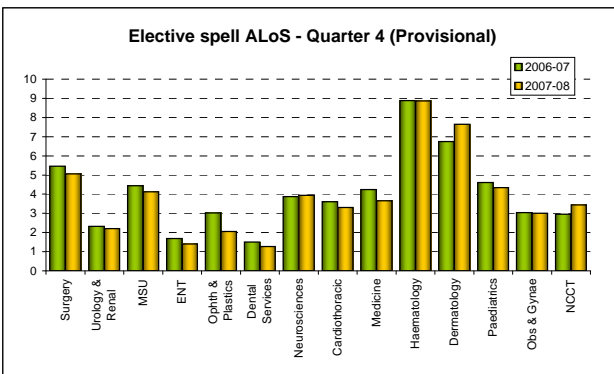
Indicator	Target	Actual to date	Variance
Spell based LOS target 2009/10			
Elective	3.12	3.55	0.43
Non Elective	4.72	5.55	0.83
Combined	4.15	4.80	0.65
Day case rate - overall	> 68%	66.8%	-1.2%
Audit Commission basket (Feb 08)	75%	73.0%	-2.0%
Pre-operative LOS (Q2)	<25%	22.7%	-2.3%
OPD New:Review ratio (Trust)	2.5	2.7	0.2
OPD New:Review ratio (NoT)	2.5	2.5	0
DNA rates - New patients	6%	7.4%	1.4%
DNA rates - Review patients	8%	10.2%	2.2%
Data quality on wards	100%	97.2%	-2.8%
Waiting list suspensions	5%	11.0%	6.0%

Activity Monitoring

Activity Type	Actual to date*	SDS	Variance
Elective Spells	104021	100407	4%
Non-elective Spells	55916	55950	0%
New Outpatients	192894	173916	11%
Review Outpatients	526797	462726	14%

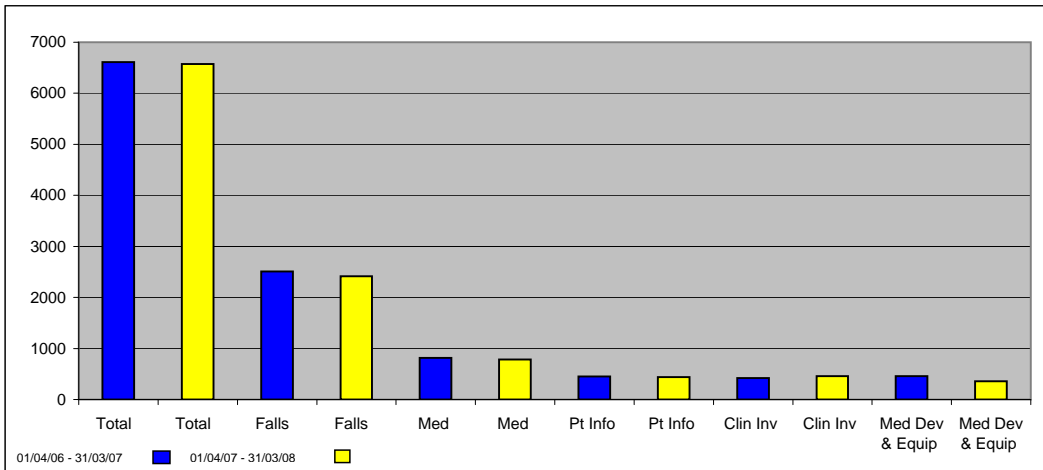
Activity Type	Actual to date *	Annual plan	Variance
Elective Spells	104021	102248	2%
Non-elective Spells	55916	57019	-2%
New Outpatients	192894	179319	8%
Review Outpatients	526797	490231	7%

* March estimated



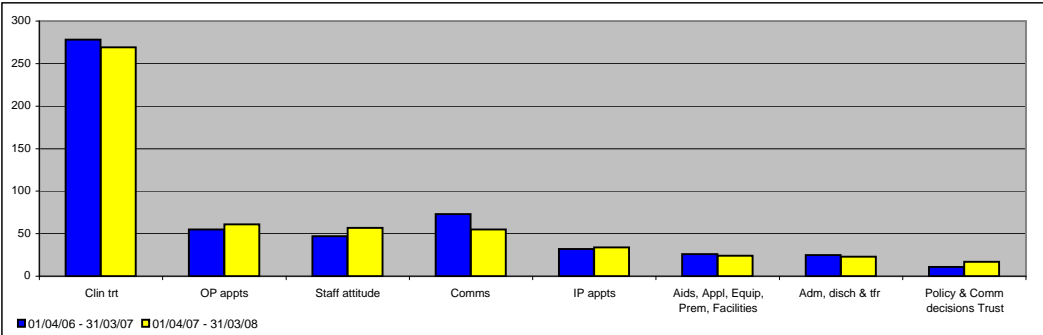
The Newcastle upon Tyne Hospitals NHS Foundation Trust
Patient Experience & Quality

Reported Patient Incidents by Type: financial years 2006/07 and 2007/08



6574 patient incidents were reported during the period 1st April 2007 to 31st March 2008, as compared to 6613 in the same period 2006/2007, a decrease of 0.6%. No serious incident were reported to the SHA during March 2008.

Complaints received during the financial periods 2006/07 and 2007/08 by subject (Top 8 based on 2007/08 data)

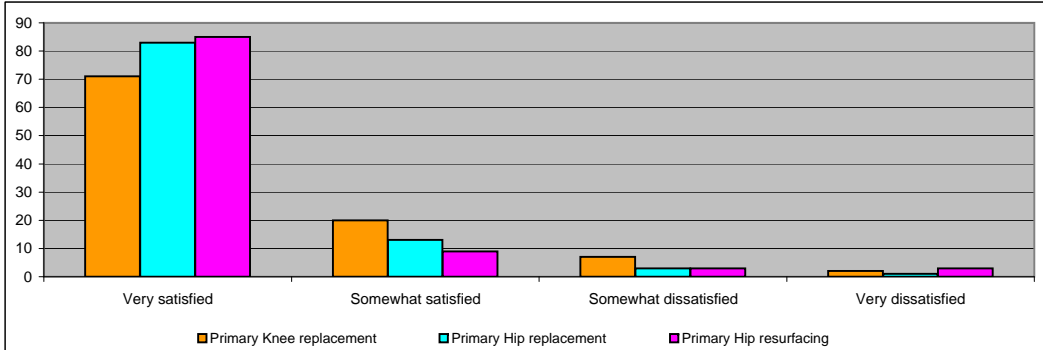


There were 570 complaints received during the period 01/04/07 to 31/03/08 as compared to 585 in the same period 2006/07 (-2.6%). Requests for HCC second stage review - Surgical Services (2), Internal Medicine (4), Cardiothoracic Services (1), Urology (1) and Operational Services (1).

Musculoskeletal Services - Freeman Joint Registry - extracts from Summary Report February 2008

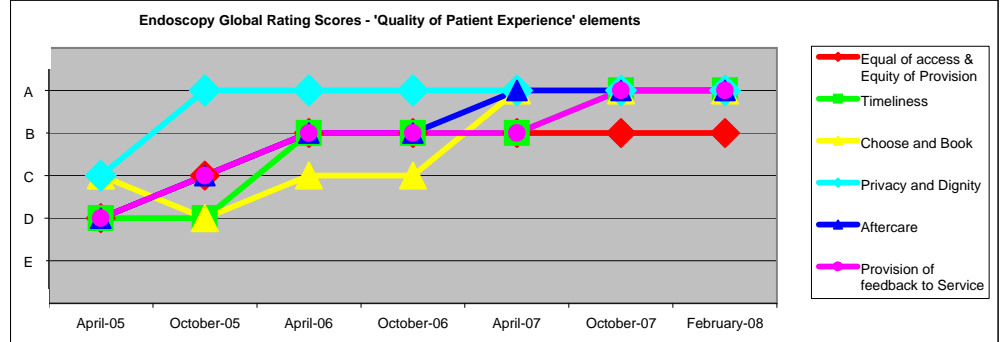
Patient data is currently collected on all hip, knee and ankle replacement patients. A summary report is generated each year and circulated to the MDT working with these patients. A patient newsletter summarizes this information in 'lay language'. 850 patients returned a one-year questionnaire based on their experience of a Primary Knee replacement, 612 for Primary Hip replacement and 133 for a Primary Hip resurfacing procedure.

Overall patient satisfaction rating with procedure (shown as a percentage of patients who returned a questionnaire)



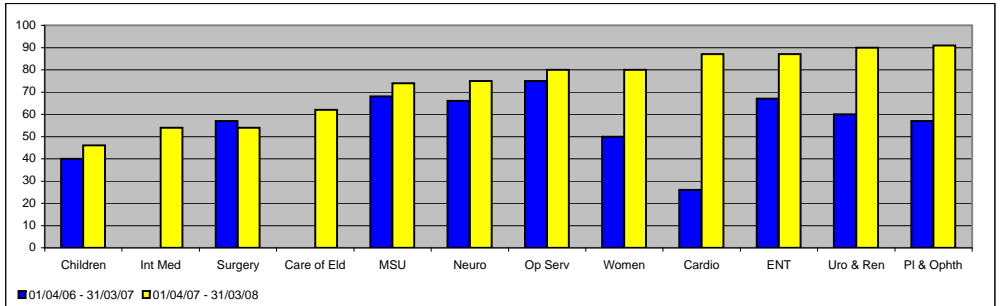
Endoscopy Global Rating Scores (GRS) February 2008

A report was made to the Endoscopy Users Group in February 2008 to demonstrate the NUTH GRS scores achieved since the introduction of the system nationally in April 05. With the exception of 'Equality of Access and Equity of Provision', which achieved a 'B' rating, all other elements in the 'Quality of Patient Experience' section had achieved a rating of 'A' by February 08. It was stated in the Action Plan for 'Equality of Access and Equity of Provision' that 'Trust policy is not to have information in other languages but we have a contract with a translation company to provide translation within an agreed time scale'. It was also noted in this section of the Action Plan that Focus Groups will be set up to include Minority Groups.



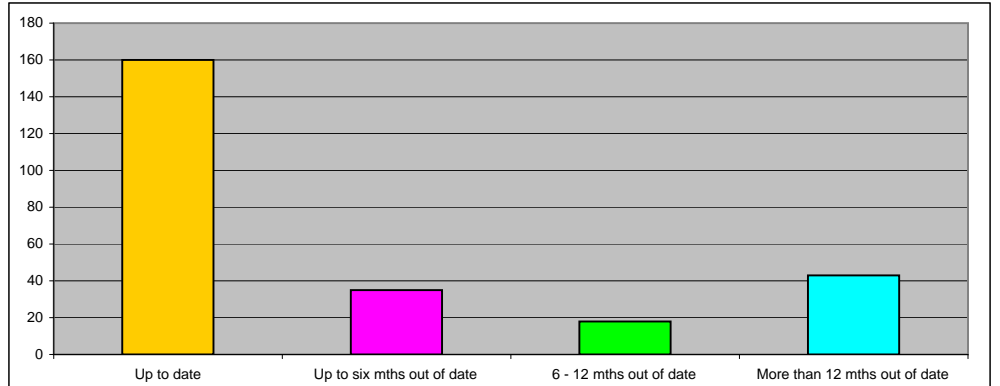
Endoscopy Services have undertaken a number of Patient Satisfaction Surveys throughout 2007, both by questionnaire and by telephone. The surveys invited patient views on transport, appointment delays, staff attitude, patient information, quality of facilities, discharge procedures and privacy and dignity. Action Plans based on the results of the surveys were formulated.

Complaints received during the financial years 2006/07 and 2007/08 - Directorate response performance percentages for those Directorates not achieving a 100% response performance during 2007/08



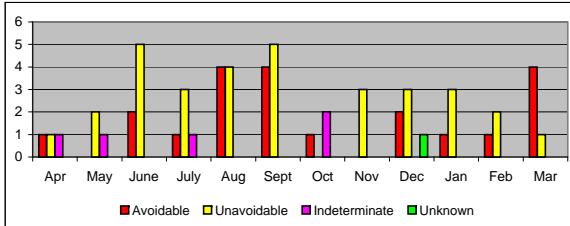
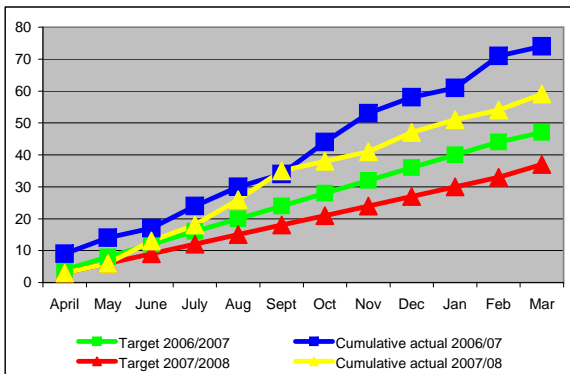
Note: Care of the Elderly Directorate Response percentage 2007/08 = 62% (no comparative available for 2006/07). Internal Medicine Directorate Response percentage 2007/08 = 54% (2006/07 including Care of the Elderly = 67%). All other Directorates not detailed in the chart above achieved a 100% response during both periods.

Trust Policies Database statistics as at 10/04/08 - 35 of the 256 (13.7%) full policies on the Trust Policies Database are up to 6 months out of date, 18 (7.0%) are between 6 and 12 months out of date and 43 (16.8%) are more than 12 months out of date.



One of the 256 full policies has been audited - Illegal Drugs, audited 10/03/08. 250 of the 256 (97.7%) full policies are due to be audited in the next twelve months, audit is now over due for 44 of these.

MRSA Bacteraemia - Performance against Trajectory (April 2007 to March 2008) inclusive)



Avoid	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
Surgery				1	1	1						2	5
Care of Eld			1		1	1			1				4
Cardio	1								1		1		3
Neuro					1	1							2
Children's			1							1			2
Plastics						1						1	2
Peri-op					1								1
Uro & Renal								1					1
Int Med												1	1
Total	1	0	2	1	4	4	1	0	2	1	1	4	21

Unavoid	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
Int Med			1	1	2	2		1		1			8
A&E			1	1		1							3
Peri-op			2						1				3
Care of Eld			1			2							3
Surgery	1			1					1				3
NCCT									1		1		2
Cardio					1					1			2
Children's					1								2
MSU		1								1			2
Uro & Renal		1										1	2
Plastics								1					1
Neuro								1					1
Total	1	2	5	3	4	5	0	3	3	3	2	1	32

Indeterminate (5)
Internal Medicine (2) May 07 and Oct 07, Cardiothoracic (1) Oct 07, Care of the Elderly (2) April 07 and July 07

MRSA Bacteraemia				
07 08	Actual	Cumulative		
		Actual	Traj	Actual over Traj
April	3	3	3	0
May	3	6	6	0
June	7	13	9	4
July	5	18	12	6
Aug	8	26	15	11
Sept	9	35	18	17
Oct	3	38	21	17
Nov	3	41	24	17
Dec	6	47	27	20
Jan	4	51	30	21
Feb	3	54	33	21
Mar	5	59	37	22

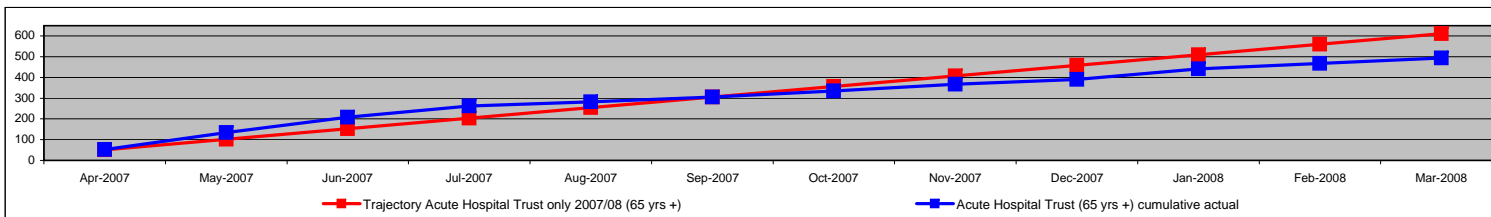
Unknown (1)
Care of the Elderly (1) Dec 07 - mitigating Jan 08 as blood culture from PCT ward inpatient at NGH and not known to NUTH

NOTE : Aug 07 avoidable MRSA Bacteraemia to mitigate (Freeman ward 15 Care of the Elderly), Sept 07 unavoidable MRSA Bacteraemia to mitigate - ongoing sepsis (Freeman ward 15 Care of the Elderly), Nov 07 unavoidable MRSA Bacteraemia mitigating Jan 08 (RVI ward 37 Plastics), Jan 08 unavoidable MRSA Bacteraemia to mitigate against (RVI ward 6, Children's Services)

C difficile - Performance against Trajectory (April 2007 to March 2008) inclusive)

NOTE the C difficile data presented in this report may be subject to change following recent Department of Health criteria, the purpose of which is to refine the system

2007 / 2008	Acute Hospital Trust			GP			Nursing / Res Home			Other			Total		
	< 65 yrs	65 yrs +	Total	< 65 yrs	65 yrs +	Total	< 65 yrs	65 yrs +	Total	< 65 yrs	65 yrs +	Total	< 65 yrs	65 yrs +	Total
April	19	53	72	3	13	16	0	6	6	3	0	3	25	72	97
May	30	82	112	1	17	18	0	3	3	0	3	3	31	105	136
June	41	73	114	1	14	15	0	7	7	1	1	2	43	95	138
July	18	54	72	1	10	11	0	1	1	0	5	5	19	70	89
August	9	20	29	0	6	6	0	2	2	0	6	6	9	34	43
September	14	24	38	0	1	1	0	3	3	0	1	1	14	29	43
October	10	29	39	0	1	1	0	6	6	0	1	1	10	37	47
November	12	32	44	2	1	3	0	1	1	1	2	3	15	36	51
December	7	24	31	1	2	3	0	4	4	0	0	0	8	30	38
January	19	50	69	0	9	9	0	8	8	1	0	1	20	67	87
February	12	27	39	0	5	5	0	4	4	0	1	1	12	37	49
March	11	26	37	1	5	6	0	4	4	0	0	0	12	35	47
Total	202	494	696	10	84	94	0	49	49	6	20	26	218	647	865



Figures have been extrapolated from data submitted via the HPA (MESS).

The trajectory represents Acute Hospital Trust patients only (65 years +). The blue line on the chart, which represents the cumulative total of Acute Hospital Trust patients identified with C difficile (65 years +), therefore provides the most comparative measure against trajectory.

C difficile (65 years +)				
07 08	Actual	Cumulative		
		Actual	Traj	Actual over Traj
April	53	53	51	2
May	82	135	102	33
June	73	208	153	55
July	54	262	204	58
Aug	20	282	255	27
Sept	24	306	306	0
Oct	29	335	357	-22
Nov	32	367	408	-41
Dec	24	391	459	-68
Jan	50	441	510	-69
Feb	27	468	561	-93
Mar	26	494	612	-118

The Newcastle upon Tyne Hospitals NHS Foundation Trust
Patient Experience & Quality

Reported MRSA Bacteraemia by Ward and Consultant - April 2007 to March 2008 inclusive

Month	Specialty	Ward	Consultant	Avoidable / unavoidable	Sample taken by ICCU Personnel	
April	Care of the Elderly	FH 15 - Care of the Elderly	Davison	Indeterminate		
	Surgical Services	FH 7 - Vascular Unit	Lees	Unavoidable		
	Cardiothoracic	FH 9 - Cardiology	Ahmed	Avoidable		
May	Internal Medicine	RVI 48 - General Medicine	Mansfield	Indeterminate		
	Urology & Renal	FH 3 - Urology	Dorkin	Unavoidable		
	Musculoskeletal Services	NGH 21 - Orthopaedic Trauma	Weir	Unavoidable		
June	A&E	A&E Department	Louw	Unavoidable		
	Children's Services	PICU, NGH	Flood	Avoidable		
	Care of the Elderly	FH 14 - Acute Stroke Unit	Ford	Avoidable		
	Internal Medicine	EAU, RVI	Forrest	Unavoidable		
	Peri-op & Critical Care	ICCU, FH	Jones	Unavoidable	Yes	
	Care of the Elderly	FH 15 - Care of the Elderly	Wynn	Unavoidable		
	Peri-op & Critical Care	ICCU, FH	Jones	Unavoidable	Yes	
July	Surgical Services	FH 8 - Vascular Unit	White	Unavoidable		
	Internal Medicine	RVI 43 - EAU	McNeill	Unavoidable		
	Surgical Services	FH 5 - General Surgery	Hainesworth	Avoidable		
	Care of the Elderly	RVI 14 - Care of the Elderly	Noble	Indeterminate		
	A&E	A&E Department	Goode	Unavoidable		
August	Neurosciences	NGH 32 - Neurosurgery	Jenkins	Avoidable		
	Care of the Elderly	FH 15 - Care of the Elderly	Louw	Avoidable	see below (1)	
	Peri-op & Critical Care	ITU, RVI	Plusa	Avoidable	Yes	
	Children's Services	NGH 24 - Paediatrics	Jackson	Unavoidable		
	Internal Medicine	RVI 43 - EAU	Allcock	Unavoidable		
	Cardiothoracic	FH 26 - Cardio ITU	Barnard	Unavoidable	Yes	
	Internal Medicine	NGH 25 - Infectious Diseases	Schmid	Unavoidable		
	Surgical Services	FH 12 HDU Liver Unit	Hasan	Avoidable		
September	Internal Medicine	RVI 41 - Acute Med Admissions	Skinner	Unavoidable		
	Internal Medicine	RVI 23 - General Medicine	Schmid	Unavoidable		
	Care of the Elderly	WGH 2 - Care of the Elderly	Frearson	Avoidable		
	A&E	A&E Department	Jay	Unavoidable		
	Surgical Services	FH 12 Liver Unit	Jaques	Avoidable		
	Neurosciences	NGH 31 - Neurosurgery	Gerber	Avoidable		
	Care of the Elderly	FH 15 - Care of the Elderly	Frearson	Unavoidable		
	Care of the Elderly	FH 15 - Care of the Elderly	Louw	Unavoidable	see below (2)	
October	Cardiothoracic	FH 29 - Respiratory Medicine	Lordan	Indeterminate		
	Urology & Renal	FH 4 - Nephrology	Tapson	Avoidable		
	Internal Medicine	FH 16 - Medicine	Thompson	Indeterminate		
	November	Neurosciences	NGH 32 - Neurosurgery	Gerber	Unavoidable	
		Plastics	RVI 37 - Burns Unit	Pape	Unavoidable	Yes, see below (3)
		Internal Medicine	Emergency Admissions Suite, RVI	Louw	Unavoidable	
		December	NCCT	NCCT 38	Lucraft	Unavoidable
Care of the Elderly	FH 14 - Acute Stroke Unit		Dyker	Avoidable		
Surgical Services	FH 8 - Vascular Unit		Stansby	Unavoidable		
Cardiothoracic Services	FH 24a - Cardiology		MacGowan	Avoidable		
Peri-operative & Critical Care	ICU, RVI		Griffin	Unavoidable	Yes	
January	Care of the Elderly	Wallington Ward, NGH	Kerr	Unknown	see below (4)	
	Children's Services	RVI 6 - Haematology Day Unit	Hanley	Unavoidable	see below (5)	
	Cardiothoracic	FH 24a - Cardiology	Purcell	Unavoidable		
	Children's Services	NGH 26 - Paediatrics	Richards	Avoidable		
	Internal Medicine	RVI 22 - Diabetes	Woods	Unavoidable		
February	Cardiothoracic	FH 27 - Cardiothoracic Surgery	Lord	Avoidable		
	NCCT	NCCT 38	Pedley	Unavoidable		
	Musculoskeletal Services	NGH 35 - Adult Orthopaedic Trauma	Williams	Unavoidable		
March	Urology & Renal	RVI 30 - Renal	Torpey	Unavoidable		
	Surgical Services	FH 5 - General Surgery	Charnley	Avoidable		
	Plastics	RVI 37 - Burns Unit	Pape	Avoidable		
	Surgical Services	FH 8 - Vascular Unit	Clarke	Avoidable		
	Internal Medicine	RVI 22 - Diabetes	Leach	Avoidable		

(1) To mitigate

(2) To mitigate - ongoing sepsis

(3) Mitigating January 2008

(4) Mitigating January 2008 as blood culture from PCT ward inpatient at NGH and not known to NUTH

(5) To mitigate against

MRSA Bacteremia - year end statistics 2007/08

