

| GOVERNING BOARD | | | |
|---|--|-----------------------|----------|
| Date of Meeting | 15 May 2013 | Agenda Item No | 6 |
| Title | Performance Report | | |
| Purpose of Paper | To inform the Governing Board of the performance position | | |
| Recommendations/ Actions requested | The Governing Board is requested to accept the contents in this report | | |
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| Sponsoring member | Jo Gooch – CFO | | |
| Date of Paper | 3 May 2013 | | |

NHS PORTSMOUTH CCG
GOVERNING BOARD MEETING

Performance Report

May 2013

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Executive Summary

The May Performance Report for Portsmouth CCG covers the period April 2012 to February 2013. Where more up-to-date data is available it has been used.

Key areas of focus:

A&E 4 hour wait

- System pressures remain a challenge for the achievement of the national A&E 4 hour wait standard. QTD performance as at 28/4/13 was 88.4% against the target of 95%.

Referral to Treatment Times

- Both PHT and the CCG (PCT) have consistently achieved the 3 aggregated national targets. All the targets were achieved at specialty level with the exception of General Medicine (Incomplete) where PHT achieved 91.8% against the target of 92%.

HCAI

- PHT recorded 6 MRSA breaches during the 12/13 financial year against a threshold of 4. All the breaches were investigated and mitigation actions taken where appropriate. Commissioners are seeking further assurances from PHT that they have an improved plan to meet the standard required for 13/14.

Long Waiters (52+ weeks)

- 1 CCG (PCT) patient has waited over 52 weeks at UHSFT for neurology. Zero over 52 weeks waiter at PHT.

Performance overview

The table below sets out the key deliverables at PCT level, showing the year to date (YTD) performance at Month 11 of Portsmouth benchmarked against the other PCT's within Hampshire

Cluster Focused Key Deliverables

| Area | Metric | Data Period | Target | YTD position - Month 11 | | | |
|------------------|--|-------------|--------------|-------------------------|--------|---------|--------|
| | | | | NHS S | NHS H | NHS loW | NHS P |
| Unscheduled care | A&E % ≤4 hrs (QTD) | Feb-13 | ≥95% | 90.9% | 91.2% | 94.7% | 88.5% |
| | Stroke: % spending 90%+ time on stroke unit | Feb-13 | 80% | 84.9% | 88.5% | 87.3% | 87.5% |
| | % of people who have a TIA scanned and treated within 24 hours | Feb-13 | 60% | 87.3% | 77.2% | 73.9% | 67.1% |
| | Delayed Transfers acute and non-acute: Rate per 100,000 pop aged 18+ | Q3 | PCT specific | 0.1 | 0.1 | 1.0 | 2.5 |
| Planned care | RTT:% of admitted patients who waited 18 weeks or less | Feb-13 | 90% | 96.8% | 93.6% | 92.8% | 94.5% |
| | RTT: % of non-admitted patients who waited 18 weeks or less | Feb-13 | 95% | 97.9% | 97.5% | 97.2% | 97.6% |
| | RTT: % of incomplete patients who waited 18 weeks or less | Feb-13 | 92% | 95.0% | 94.5% | 95.1% | 95.8% |
| | % Patients waiting more than 6 weeks for diagnostic | Feb-13 | <1% | 0.1% | 1.6% | 0.2% | 0.5% |
| | Breast Cancer Referrals Seen <2 weeks | Jan-13 | 93% | 97.4% | 96.3% | 94.8% | 98.0% |
| | Cancer Patients receiving subsequent Chemo/Drug <31 days | Jan-13 | 98% | 99.6% | 100.0% | 99.6% | 100.0% |
| | Cancer Patients receiving subsequent surgery <31 days | Jan-13 | 94% | 98.0% | 97.4% | 95.1% | 96.2% |
| | Cancer Patients receiving subsequent radiotherapy <31 days | Jan-13 | 94% | 98.4% | 97.8% | 97.6% | 98.5% |
| | Cancer Patients treated after screening referral <62 days | Jan-13 | 90% | 93.9% | 96.2% | 100.0% | 97.7% |
| | Cancer Patients treated after consultant upgrade <62 days | Jan-13 | 86% | 92.3% | 94.2% | 100.0% | 94.8% |
| | Cancer diagnosis to treatment <31 days | Jan-13 | 96% | 98.2% | 98.3% | 98.3% | 97.6% |
| | Cancer urgent referral to treatment <62 days | Jan-13 | 85% | 89.7% | 90.5% | 90.1% | 87.3% |
| | Cancer patients seen <14 days after urgent GP referral | Jan-13 | 93% | 95.3% | 96.3% | 93.1% | 97.0% |
| Other | HCAI: Clostridium Difficile (C. Diff.) Infection rates | Feb-13 | PCT specific | 59 | 266 | 29 | 35 |
| | HCAI: Incidence of MRSA - Comm | Feb-13 | PCT specific | 6 | 12 | 2 | 3 |
| | Mixed Sex accomodation (breaches) | Feb-13 | 0 | 10 | 32 | 14 | 0 |

Performance Commentary (1)

A&E <4 hour wait

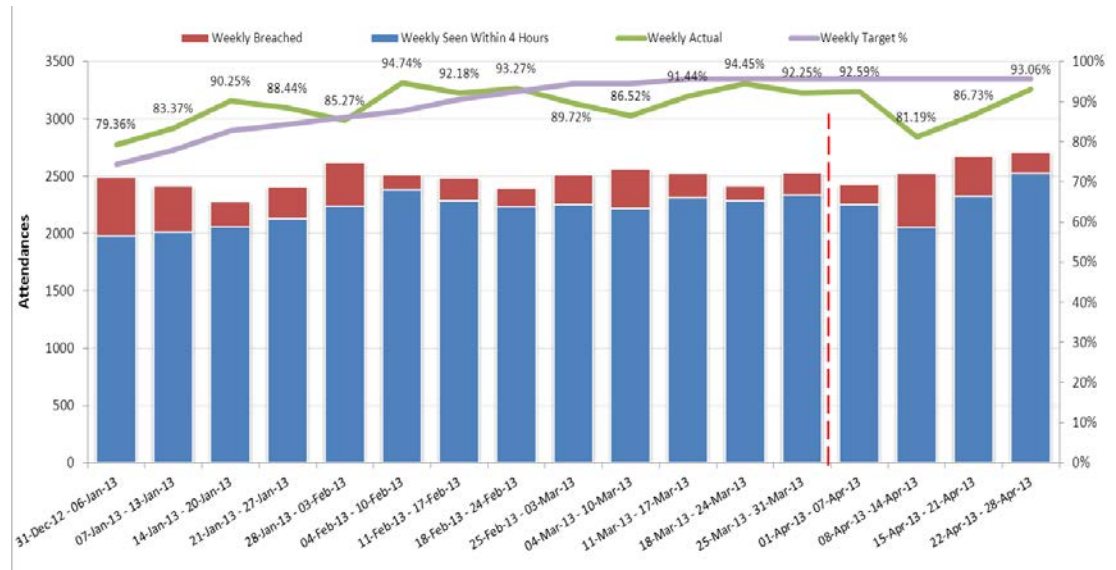
The delivery of the A&E 4 hour wait standard remains a challenge. System pressures continue to mitigate efforts to deliver the 95% national standard. QTD performance as at end of 28/4/13 was 88.4%. The actual performance for the week was 93% (an improvement on the previous week). The chart below show the weekly performance trend thus far.

Analysis of breaches and performance against pathway standards shows that the majority of breaches occur during Out of Hours periods and /or are linked to backlogs created by high volumes of demand in the evenings and at weekends. There is an agreed system wide recovery plan in place to improve performance. The plan includes a comprehensive emergency flow action plan developed with support from the NHS Emergency Care Intensive Support Team [ECIST], to address the major internal factors impacting on performance and to support the delivery of agreed system-wide emergency care priorities. Additionally, commissioners are working to identify solutions to the pressures in ED and are currently half way through a series of 4 stakeholder workshops to identify the appropriate whole system actions that can be taken. These work programmes are outlined in the commissioners QIPP for the 13/14 financial year.

Other actions being taken

In addition to the above the following work continues:

- A CCG led review and redesign of the front door of ED to enable a primary care led urgent care service to be developed
- Increased senior medical cover in Out of Hours periods, to improve clinical decision making and reduce first assessment breaches.
- Continued strengthening of community 'pull' discharge arrangements
- Further improvements in ambulance non conveyance.
- The establishment of system-wide and internal 'gold command' structures to support an early identification and discharge of medically stable patients.



The purple and green lines are plotted against the right axis and the bar chart is plotted against the left axis

Referral to Treatment Times

- Both PHT and the PCT have consistently achieved the 3 aggregated national targets . PHT also achieved all the targets at specialty level with the exception of General Medicine (incomplete) where it achieved 91.8% against the target of 92%. March Urology (admitted) did not meet target with performance of 77.1% the 90% target.

HCAI

- MRSA – Another MRSA breach at PHT in March has taken the year end tally to 6 against the whole year envelope of 4. Of the 6 breaches at PHT 3 were Portsmouth CCG's (PCT) patients. All the breaches were investigated and mitigation actions put in place where necessary.
- C. Diff – Both PHT and NHS Portsmouth CCG are performing well within their threshold.

Long Waiters (52+ weeks)

- 1 CCG (PCT) patient has waited over 52 weeks at UHSFT for neurology due to capacity issues. The UHSFT Director of Performance is working with Divisions to review plans to improve performance. Zero over 52 weeks waiter at PHT.

Access to Data Issues

- Following the abolition of PCTs, issues regarding CCGs and CSUs access to some national data have arisen. To date, the CSUs access to SUS data has been resolved. However, the CSUs' access to Cancer Waits Data for 2013/14 is still being discussed. It is not clear at this stage a resolution is expected to be achieved.

System Performance - PHT

The table below shows Portsmouth Hospitals performance against key metrics in order to provide a system wide context.

PROVIDER: PHT (Trust-wide data)

Monthly Reporting

| Area | Metric | Period | Target | Previous Period | Current Period | Variance Against Target | Mov't on Previous Period | 12/13 YTD Target | 12/13 YTD Actual | Variance against target |
|------------------|--|--------|--------|-----------------|----------------|-------------------------|--------------------------|------------------|------------------|-------------------------|
| Unscheduled care | Unplanned re-attendance rate at A&E within 7 days of original attendance | Feb-13 | <5% | 9.3% | 7.3% | 2.3% | ↑ | <5% | 7.3% | 2.3% |
| | Total time spent in A&E department - 95th percentile | Feb-13 | <240m | 461 | 330 | 90 | ↑ | <240m | 335 | 95 |
| | Left department without being seen rate | Feb-13 | <5% | 3.1% | 2.0% | -3.0% | ↑ | <5% | 2.8% | -2.2% |
| | Time to initial assessment - 95th centile | Feb-13 | <15m | 53 | 28 | 13 | ↑ | <15m | 36 | 21 |
| | Time to treatment in department - median | Feb-13 | <60m | 47 | 45 | -15 | ↑ | <60m | 49 | -11 |
| | A&E % <4 hrs (End Q4 for Cumulative) | Mar-13 | 95% | 91.27% | 90.84% | -4.2% | ↓ | 95% | 92.6% | -2.4% |
| | Stroke: % spending 90%+ time on stroke unit | Feb-13 | 80% | 93.8% | 89.2% | 9.2% | ↓ | 80% | 85.4% | 5.4% |
| | % of people who have a TIA who are scanned and treated within 24 hours | Feb-13 | 60% | 55.2% | 68.1% | 8.1% | ↑ | 60% | 71.4% | 11.4% |
| Planned care | RTT:% of admitted patients who waited 18 weeks or less | Feb-13 | 90% | 92.8% | 93.3% | 3.3% | ↑ | 90% | 92.4% | 2.4% |
| | RTT: % of non-admitted patients who waited 18 weeks or less | Feb-13 | 95% | 97.4% | 97.5% | 2.5% | ↑ | 95% | 97.2% | 2.2% |
| | RTT % of incomplete pathways within 18 weeks | Feb-13 | 92% | 96.0% | 96.2% | 4.2% | ↑ | 92% | 95.5% | 3.5% |
| | No. Patients waiting > 6 weeks for diagnostic | Mar-13 | 0 | 21 | 40 | 40 | ↓ | 0 | 310 | 310 |
| | %. Patients waiting > 6 weeks for diagnostic | Mar-13 | <1% | 0.40% | 0.78% | -0.22% | ↓ | 1.00% | 0.53% | -0.47% |
| | Breast Cancer Referrals Seen <2 weeks | Jan-13 | 93% | 97.7% | 97.0% | 4.0% | ↓ | 93% | 97.8% | 4.8% |
| | Cancer Patients receiving subsequent Chemo/Drug <31 days | Jan-13 | 98% | 100.0% | 100.0% | 2.0% | → | 98% | 100.0% | 2.0% |
| | Cancer Patients receiving subsequent surgery <31 days | Jan-13 | 94% | 98.2% | 94.7% | 0.7% | ↓ | 94% | 95.5% | 1.5% |
| | Cancer Patients receiving subsequent radiotherapy <31 days | Jan-13 | 94% | 98.2% | 94.6% | 0.6% | ↓ | 94% | 96.1% | 2.1% |
| | Cancer Patients treated after screening referral <62 days | Jan-13 | 90% | 100.0% | 94.4% | 4.4% | ↓ | 90% | 92.3% | 2.3% |
| | Cancer Patients treated after consultant upgrade <62 days | Jan-13 | 86% | 88.6% | 94.7% | 8.7% | ↑ | 86% | 94.9% | 8.9% |
| | Cancer diagnosis to treatment <31 days | Jan-13 | 96% | 99.1% | 98.2% | 2.2% | ↓ | 96% | 97.4% | 1.4% |
| | Cancer urgent referral to treatment <62 days | Jan-13 | 85% | 93.6% | 90.0% | 5.0% | ↓ | 85% | 88.2% | 3.2% |
| | Cancer patients seen <14 days after urgent GP referral | Jan-13 | 93% | 95.5% | 93.3% | 0.3% | ↓ | 93% | 96.8% | 3.8% |
| Other | HCAI: Clostridium Difficile (C. Diff.) Infection rates | Mar-13 | 4 | 1 | 6 | 2 | ↓ | 67 | 40 | -27 |
| | HCAI: Incidence of MRSA - Comm | Mar-13 | 0 | 1 | 1 | 1 | → | 4 | 6 | 2 |
| | Mixed Sex accomodation (Breaches) | Mar-13 | 0 | 0 | 0 | 0 | → | 0 | 0 | 0 |

Note A&E Figure is QTD

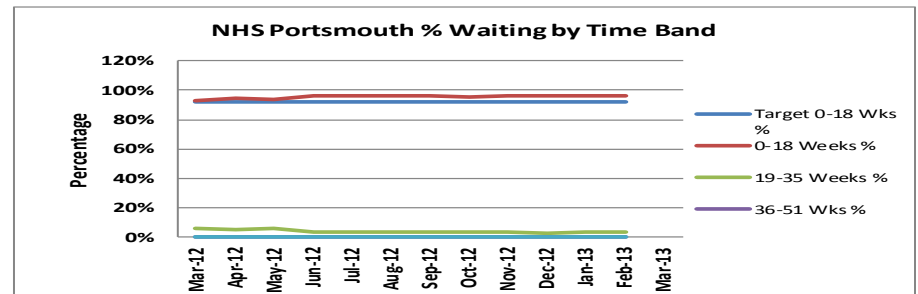
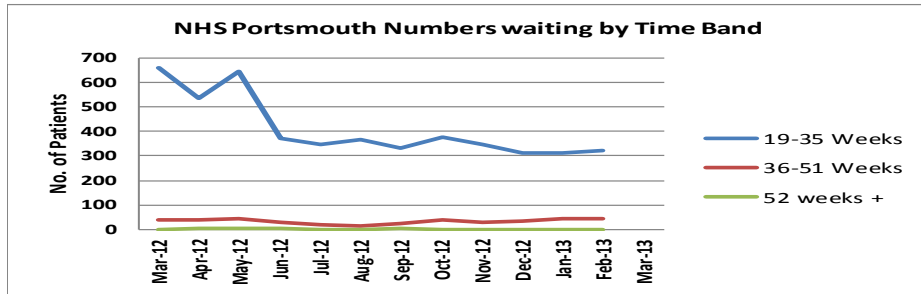
1 CCG (PCT) patient has waited over 52 weeks at UHSFT for neurology for February (0 in the previous month) due to capacity issues. The UHSFT Director of Performance is working with Divisions to review plans to improve performance. There were no patients waiting over 52 weeks waiter at PHT in February (the same as the previous month).

There were 46 (42 in the previous month) CCG (PCT) patients waiting between 35 and 51 weeks. For PHT there were 124 (99 in January) waiters as at the end of February.

NHS Portsmouth – Waiting List Shape

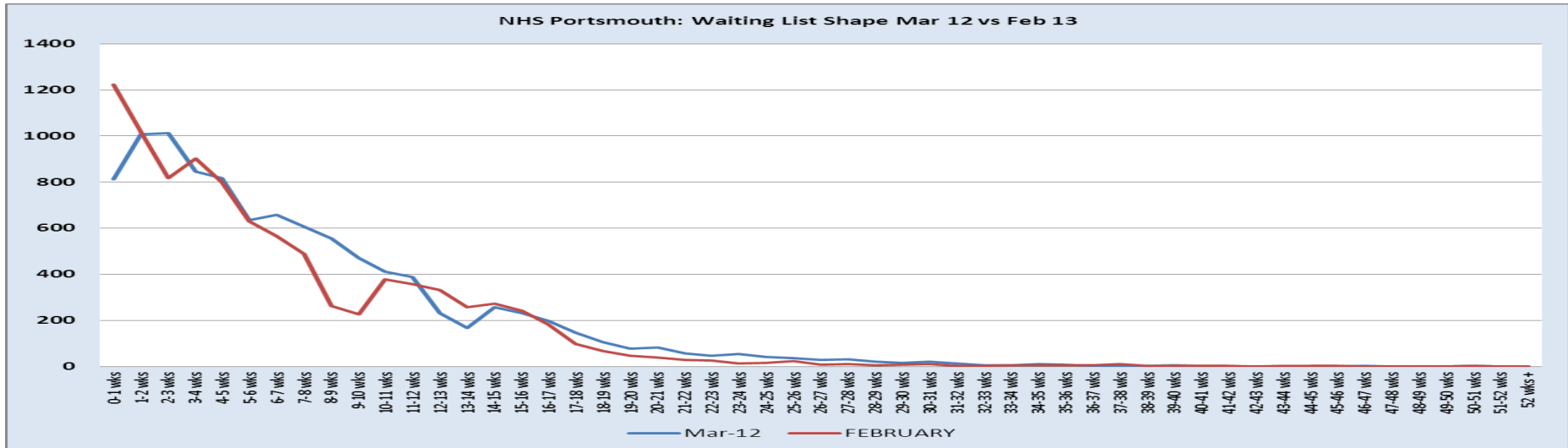
NHS Portsmouth Numbers waiting by Time Band

| | Mar-12 | Apr-12 | May-12 | Jun-12 | Jul-12 | Aug-12 | Sep-12 | Oct-12 | Nov-12 | Dec-12 | Jan-13 | Feb-13 | Mar-13 |
|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 0-18 Weeks | 9457 | 10040 | 10453 | 9613 | 10015 | 9981 | 9678 | 9432 | 9298 | 9327 | 8730 | 9056 | |
| 19-35 Weeks | 661 | 535 | 645 | 374 | 348 | 369 | 334 | 379 | 345 | 310 | 310 | 323 | |
| 36-51 Weeks | 37 | 39 | 42 | 30 | 21 | 16 | 25 | 40 | 29 | 35 | 42 | 46 | |
| 52 weeks + | 1 | 3 | 5 | 3 | 1 | 1 | 2 | 0 | 0 | 0 | 0 | 1 | |



NHS Portsmouth % waiting by Time Band

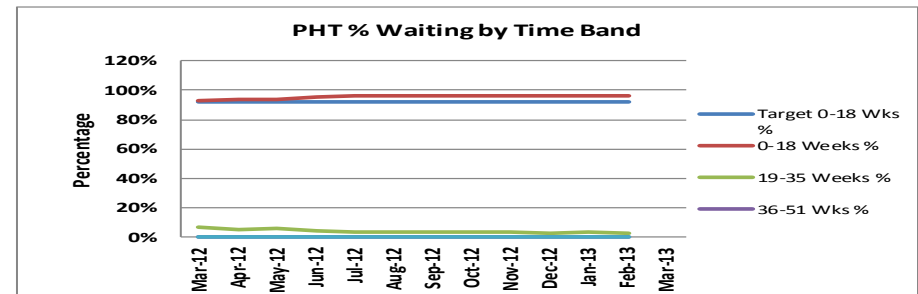
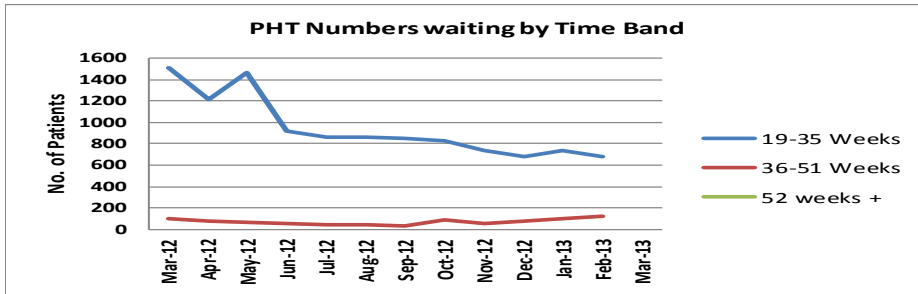
| | Mar-12 | Apr-12 | May-12 | Jun-12 | Jul-12 | Aug-12 | Sep-12 | Oct-12 | Nov-12 | Dec-12 | Jan-13 | Feb-13 | Mar-13 |
|-----------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target 0-18 Wks | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | |
| 0-18 Weeks % | 93.1% | 94.6% | 93.8% | 95.9% | 96.4% | 96.3% | 96.4% | 95.7% | 96.1% | 96.4% | 96.1% | 96.1% | |
| 19-35 Weeks % | 6.5% | 5.0% | 5.8% | 3.7% | 3.4% | 3.6% | 3.3% | 3.8% | 3.6% | 3.2% | 3.4% | 3.4% | |
| 36-51 Wks % | 0.4% | 0.4% | 0.4% | 0.3% | 0.2% | 0.2% | 0.2% | 0.4% | 0.3% | 0.4% | 0.5% | 0.5% | |
| 52+ Weeks % | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | |



PHT – Waiting List Shape

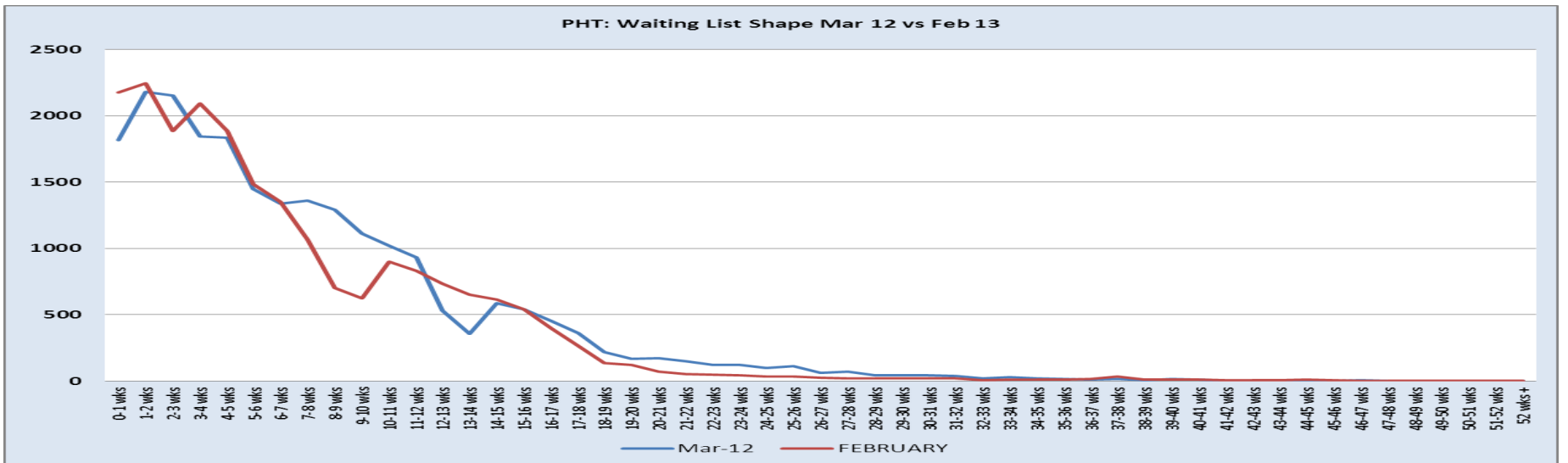
PHT Numbers waiting by Time Band

| | Mar-12 | Apr-12 | May-12 | Jun-12 | Jul-12 | Aug-12 | Sep-12 | Oct-12 | Nov-12 | Dec-12 | Jan-13 | Feb-13 | Mar-13 |
|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 0-18 Weeks | 21134 | 20693 | 21448 | 20942 | 21132 | 20915 | 20660 | 21112 | 20767 | 20887 | 19840 | 20425 | |
| 19-35 Weeks | 1513 | 1209 | 1461 | 921 | 857 | 860 | 848 | 831 | 731 | 682 | 731 | 685 | |
| 36-51 Weeks | 95 | 81 | 68 | 49 | 40 | 40 | 36 | 87 | 58 | 73 | 99 | 124 | |
| 52 weeks + | 1 | 2 | 2 | 2 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | |



PHT % waiting by Time Band

| | Mar-12 | Apr-12 | May-12 | Jun-12 | Jul-12 | Aug-12 | Sep-12 | Oct-12 | Nov-12 | Dec-12 | Jan-13 | Feb-13 | Mar-13 |
|-----------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target 0-18 Wks | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | |
| 0-18 Weeks % | 92.9% | 94.1% | 93.3% | 95.6% | 95.9% | 95.9% | 95.9% | 95.8% | 96.3% | 96.5% | 96.0% | 96.2% | |
| 19-35 Weeks % | 6.7% | 5.5% | 6.4% | 4.2% | 3.9% | 3.9% | 3.9% | 3.8% | 3.4% | 3.2% | 3.5% | 3.2% | |
| 36-51 Wks % | 0.4% | 0.4% | 0.3% | 0.2% | 0.2% | 0.2% | 0.2% | 0.4% | 0.3% | 0.3% | 0.5% | 0.6% | |
| 52+ Weeks % | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | |



Activity Commentary – NHS Portsmouth

Other Referrals

Other referrals are showing a slight over performance, both against the year to date plan for 12/13 (3.0% over) and 2.9% above the same position in 11/12. The actual number of other referrals for February alone went down by 2.2% against current plan.

Daycases

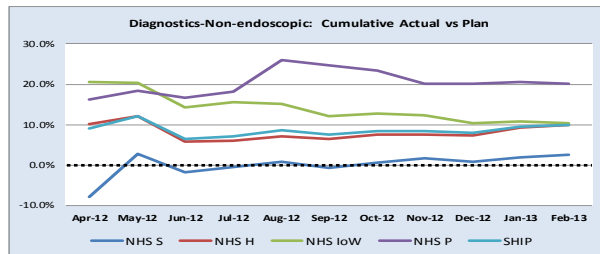
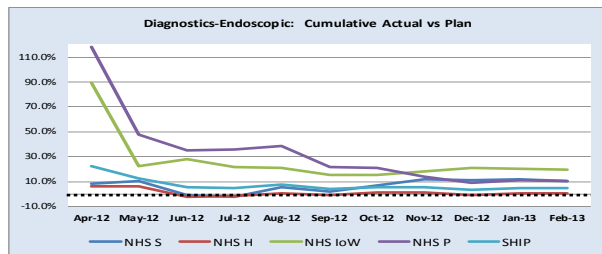
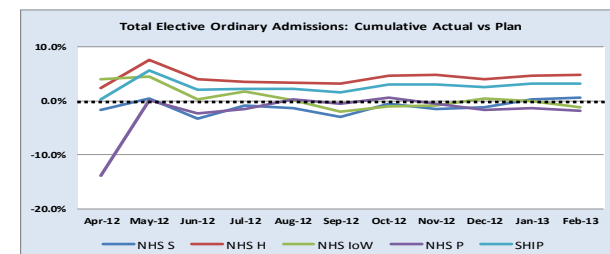
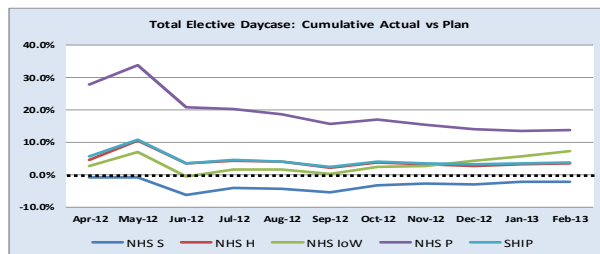
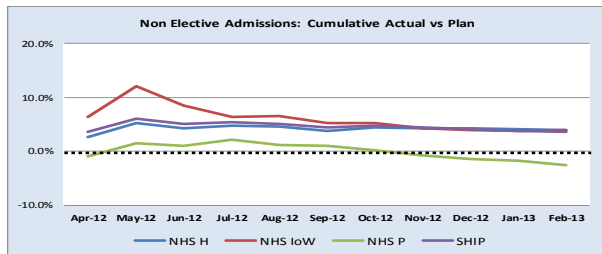
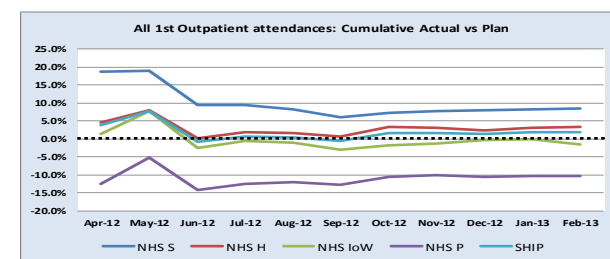
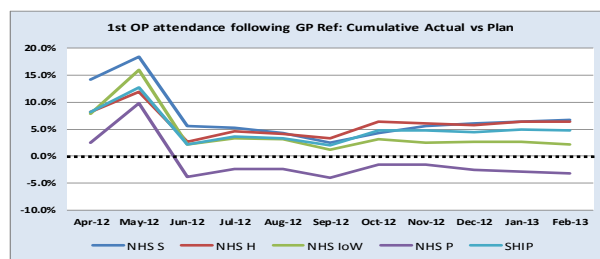
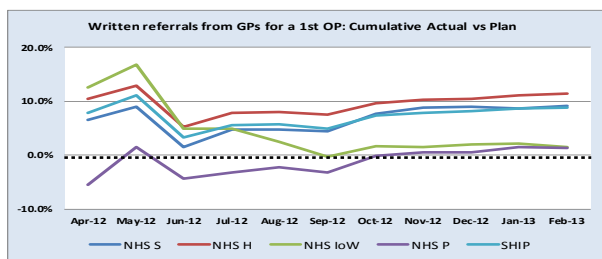
Daycases are showing over performance of 13.8% against the year to date plan for 12/13 and also 9.5% more than the same position in 11/12. The actual February position was 17.2% above plan and 4.7% less than the same period in 11/12. A significant amount of the over-activity has been mainly due to backlog clearance at PHT as well as a move of some activity from Ordinary EL to Day Cases.

All 1st Outpatients

The reported position is showing underperformance for 'All 1st Outpatients'. The position shows significant underperformance both against the year to date plan for 12/13 (-10.3%) and against the same position in 11/12 at -8.5%. The underperformance is mainly due to the move of GUM services from PHT to Solent. Due to technical challenges, Solent's GUM's activity is currently not reflected in the MAR reporting and it is unlikely that Solent's reporting challenges will be resolved before the end of the financial year. For the 13/14 financial year GUM services will be commissioned by the National Commissioning Board.

Activity Plan: Variance from Plan (Benchmarked)

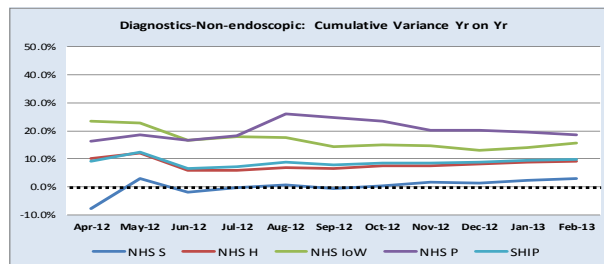
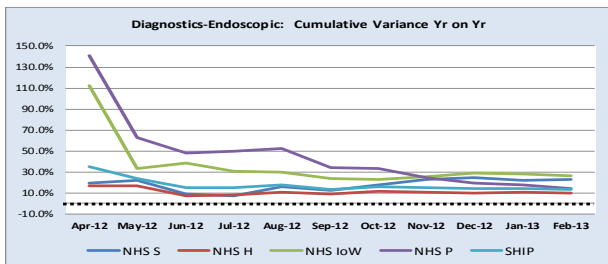
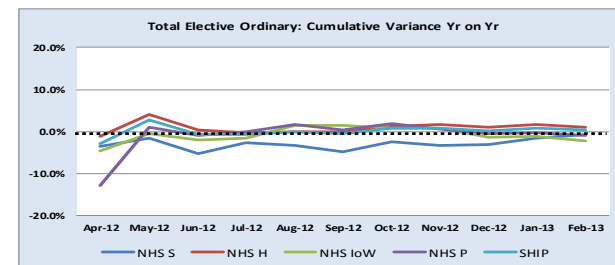
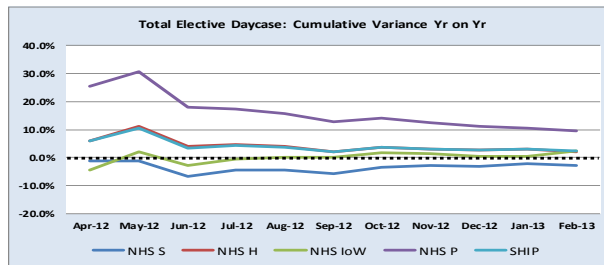
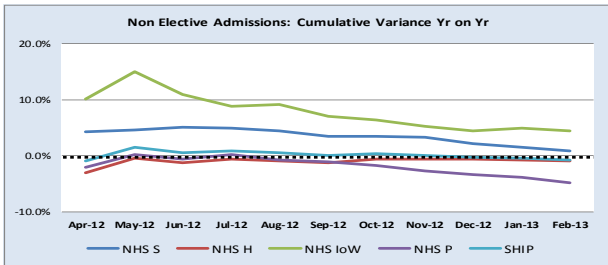
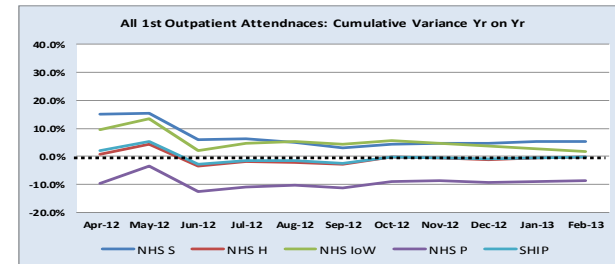
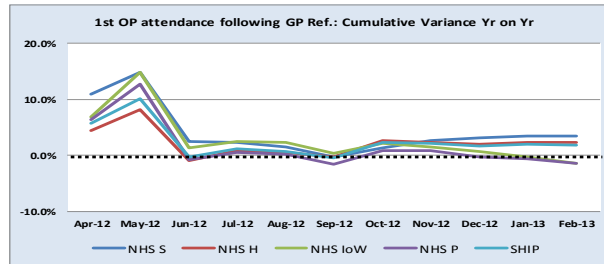
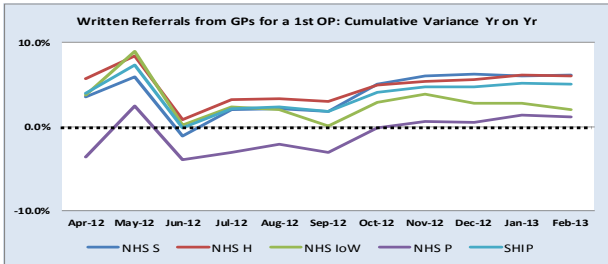
| Activity | SHIP Focus | | | NHS Southampton | | | NHS Hampshire | | | NHS Isle of Wight | | | NHS Portsmouth | | |
|--|------------------|--------------------|------|------------------|--------------------|-------|------------------|--------------------|-------|-------------------|--------------------|-------|------------------|--------------------|--------|
| | 2012/13 YTD Plan | 2012/13 YTD Actual | % | 2012/13 YTD Plan | 2012/13 YTD Actual | % | 2012/13 YTD Plan | 2012/13 YTD Actual | % | 2012/13 YTD Plan | 2012/13 YTD Actual | % | 2012/13 YTD Plan | 2012/13 YTD Actual | % |
| No. of written referrals from GPs for a 1st OP appointment | 318,787 | 347,144 | 8.9% | 42,592 | 46,491 | 9.2% | 204,044 | 227,449 | 11.5% | 28,930 | 29,356 | 1.5% | 43,221 | 43,848 | 1.5% |
| No. of other referrals for a 1st OP appointment | 188,430 | 197,672 | 4.9% | 27,439 | 29,596 | 7.9% | 124,825 | 132,275 | 6.0% | 19,946 | 19,095 | -4.3% | 16,220 | 16,706 | 3.0% |
| No. of 1st OP attendances (consultant led) following GP ref. | 272,483 | 285,633 | 4.8% | 35,415 | 37,807 | 6.8% | 179,644 | 191,057 | 6.4% | 22,115 | 22,588 | 2.1% | 35,309 | 34,181 | -3.2% |
| No. of all 1st OP attendances (consultant led) | 463,461 | 472,199 | 1.9% | 58,418 | 63,439 | 8.6% | 309,611 | 319,841 | 3.3% | 37,474 | 36,956 | -1.4% | 57,958 | 51,963 | -10.3% |
| Total elective G&A day case FFCes | 164,399 | 170,805 | 3.9% | 22,312 | 21,825 | -2.2% | 119,011 | 123,176 | 3.5% | 7,083 | 7,605 | 7.4% | 15,993 | 18,199 | 13.8% |
| Total elective G&A ordinary admission FFCes | 46,003 | 47,488 | 3.2% | 6,040 | 6,083 | 0.7% | 31,768 | 33,336 | 4.9% | 3,387 | 3,348 | -1.2% | 4,808 | 4,721 | -1.8% |
| Non-elective G&A FFCes, excluding well babies | 162,932 | 168,779 | 3.6% | 24,124 | 25,795 | 6.9% | 106,906 | 111,134 | 4.0% | 11,620 | 12,074 | 3.9% | 20,282 | 19,776 | -2.5% |
| Diagnostics: Endoscopic | 46,392 | 48,509 | 4.6% | 2,764 | 3,045 | 10.2% | 32,442 | 32,546 | 0.3% | 5,885 | 7,053 | 19.8% | 5,301 | 5,865 | 10.6% |
| Diagnostics: Non-endoscopic | 406,008 | 446,312 | 9.9% | 56,688 | 58,083 | 2.5% | 275,110 | 302,653 | 10.0% | 36,681 | 40,464 | 10.3% | 37,529 | 45,112 | 20.2% |



Note: RAG rating thresholds for activity have been revised in line with new SHA thresholds ($\leq 2\%$ = Green, $>2\%$ - $<5\%$ = Amber, $\geq 5\%$ = Red)

Activity Plan: Performance vs Prior Year

| Month 11 : Yr on yr variance | SHIP Focus | | | NHS Southampton | | | NHS Hampshire | | | NHS Isle of Wight | | | NHS Portsmouth | | |
|---|--------------------|--------------------|-------|--------------------|--------------------|-------|--------------------|--------------------|-------|--------------------|--------------------|-------|--------------------|--------------------|-------|
| | 2011/12 YTD Actual | 2012/13 YTD Actual | % | 2011/12 YTD Actual | 2012/13 YTD Actual | % | 2011/12 YTD Actual | 2012/13 YTD Actual | % | 2011/12 YTD Actual | 2012/13 YTD Actual | % | 2011/12 YTD Actual | 2012/13 YTD Actual | % |
| Number of written referrals from GPs for a first outpatient appointment | 330,497 | 347,144 | 5.0% | 43,799 | 46,491 | 6.1% | 214,579 | 227,449 | 6.0% | 28,776 | 29,356 | 2.0% | 43,343 | 43,848 | 1.2% |
| Number of other referrals for a first outpatient appointment | 193,778 | 197,672 | 2.0% | 28,180 | 29,596 | 5.0% | 129,214 | 132,275 | 2.4% | 20,151 | 19,095 | -5.2% | 16,233 | 16,706 | 2.9% |
| Number of first outpatient attendances (consultant led) following GP referral | 280,630 | 285,633 | 1.8% | 36,528 | 37,807 | 3.5% | 186,546 | 191,057 | 2.4% | 22,893 | 22,588 | -1.3% | 34,663 | 34,181 | -1.4% |
| Number of all first outpatient attendances (consultant led) | 473,751 | 472,199 | -0.3% | 60,285 | 63,439 | 5.2% | 320,319 | 319,841 | -0.1% | 36,363 | 36,956 | 1.6% | 56,784 | 51,963 | -8.5% |
| Total elective G&A day case FFCes | 166,973 | 170,805 | 2.3% | 22,460 | 21,825 | -2.8% | 120,476 | 123,176 | 2.2% | 7,419 | 7,605 | 2.5% | 16,618 | 18,199 | 9.5% |
| Total elective G&A ordinary admission FFCes | 47,289 | 47,488 | 0.4% | 6,121 | 6,083 | -0.6% | 32,981 | 33,336 | 1.1% | 3,424 | 3,348 | -2.2% | 4,763 | 4,721 | -0.9% |
| Non-elective G&A FFCes, excluding well babies | 169,940 | 168,779 | -0.7% | 25,549 | 25,795 | 1.0% | 112,062 | 111,134 | -0.8% | 11,560 | 12,074 | 4.4% | 20,769 | 19,776 | -4.8% |
| Diagnostics: Endoscopic | 42,889 | 48,509 | 13.1% | 2,479 | 3,045 | 22.8% | 29,689 | 32,546 | 9.6% | 5,579 | 7,053 | 26.4% | 5,142 | 5,865 | 14.1% |
| Diagnostics: Non-endoscopic | 406,779 | 446,312 | 9.7% | 56,463 | 58,083 | 2.9% | 277,262 | 302,653 | 9.2% | 34,994 | 40,464 | 15.6% | 38,060 | 45,112 | 18.5% |



Note: RAG rating thresholds for activity have been revised in line with new SHA thresholds ($\leq 2\%$ = Green, $>2\% - <5\%$ = Amber, $\geq 5\%$ = Red)

St. Mary's Treatment Centre

Summary

The overall performance as at month 11 (February) was above plan by 7.8% (£352K). The YE cost is forecasted to be above plan by 9.4% (£465K).

Elective

The over activity was mainly driven by Elective activity which was above plan by 26.3% (592).

Outpatients 1st Attend & Follow Up

Outpatients first attends were up by 9.5% and follow up went down by 4.5%

A&E

The Minor Injuries Unit is performing below plan by 9.3% (1835)

Other Activity

Other activity was also above plan by 7.4% (1693)

Performance

SMTC achieved 100% against all RTT targets.

No over 6 weeks waits for diagnostics and 100% against the 4 hours ED target

St. Mary's Treatment Centre

MONTH 11 - February 2012

CARE UK ST MARYS ISTC

5FE - NHS PORTSMOUTH

| | Activity | | | | | | | | Finance £000's | | | | | | | |
|---------------------|---------------|---------------|---------------|--------------|-------------|--------------|---------------|---------------|----------------|---------------|--------------|-------------|--------------|------------|--|--|
| | Annual Plan | Plan M11 | Actual M11 | Variance M11 | % | Variance M10 | Movement | Annual Plan | Plan M11 | Actual M11 | Variance M11 | % | Variance M10 | Movement | | |
| EL | 2,889 | 2,648 | 3,345 | 697 | 26.3% | 592 | 104 | £1,969 | £1,805 | £2,243 | £438 | 24.3% | £376 | £62 | | |
| EL XBD | | 0 | 0 | 0 | 0.0% | 0 | 0 | | £0 | £0 | £0 | 0.0% | £0 | £0 | | |
| NEL | | 0 | 0 | 0 | 0.0% | 0 | 0 | | £0 | £0 | £0 | 0.0% | £0 | £0 | | |
| NEL XBD | | 0 | 0 | 0 | 0.0% | 0 | 0 | | £0 | £0 | £0 | 0.0% | £0 | £0 | | |
| OPFA | 2,885 | 2,645 | 2,895 | 250 | 9.5% | 256 | -5 | £507 | £465 | £536 | £71 | 15.3% | £69 | £2 | | |
| OPFU | 1,819 | 1,667 | 1,592 | -75 | -4.5% | 18 | -93 | £158 | £145 | £139 | £-5 | -3.5% | £3 | £-8 | | |
| OPPROC | | 0 | 0 | 0 | 0.0% | 0 | 0 | | £0 | £0 | £0 | 0.0% | £0 | £0 | | |
| A&E | 21,592 | 19,792 | 17,957 | -1,835 | -9.3% | -1,040 | -796 | £1,270 | £1,164 | £958 | £-206 | -17.7% | £-167 | £-39 | | |
| Critical Care | | 0 | 0 | 0 | 0.0% | 0 | 0 | | £0 | £0 | £0 | 0.0% | £0 | £0 | | |
| Excl Drugs, Devices | | 0 | 0 | 0 | 0.0% | 0 | 0 | | £0 | £0 | £0 | 0.0% | £0 | £0 | | |
| Other ¹ | 24,987 | 22,905 | 24,598 | 1,693 | 7.4% | 1,987 | -294 | £1,024 | £938 | £993 | £54 | 5.8% | £56 | £-2 | | |
| Total | 54,172 | 49,658 | 50,387 | 729 | 1.5% | 1,813 | -1,084 | £4,928 | £4,517 | £4,869 | £352 | 7.8% | £337 | £15 | | |

¹Other = Direct Access, excluded Procedures, Radiotherapy Fractions, Rehab Bed Days and the Individually Priced Procedures (no activity data, £ only).

| | | | | | | |
|--|---------------|---------------|---------------|-------------|-------------|-------------|
| Reporting Adjustments Recognised by provider | £0 | £0 | £0 | £0 | £0 | £0 |
| Reporting Adjustments NOT Recognised by provider | £0 | £0 | £0 | £0 | £0 | £0 |
| Plan to Month 11 (using PCT profile) | £4,928 | £4,517 | £4,869 | £352 | 7.8% | £337 |
| M12, Extrapolation | £4,928 | £4,928 | £5,312 | £384 | | £371 |
| M12, Reporting Forecast Adjustment | £0 | £0 | £0 | £0 | | £0 |
| Forecast M12, using PCT profile as per Ledger | £4,928 | £4,928 | £5,312 | £384 | 7.8% | £371 |
| M12, Extrapolation | £4,928 | £4,928 | £5,312 | £384 | | £405 |
| M12, Reporting Forecast Adjustment | £0 | £0 | £81 | £81 | | £69 |
| Year-end Forecast Outturn | £4,928 | £4,928 | £5,393 | £465 | 9.4% | £474 |

Out of Hours & Guildhall Walk-in Centre

Out of Hours

As it is the first year of the contract, commissioners are paying 1/12 of the annual contract value per month

- Portsmouth's monthly cost £107k/month
- YTD (month 6) is £642K.

Guildhall Walk

The Guildhall Walk in centre continues to show significant overheat. The estimated year end position is £401,471 above plan. The finance lead is currently undertaking the year end reconciliation to establish the actual year end position.

It is worth noting that a significant number of the unregistered walk-ins have a GP in Portsmouth