

Birmingham East and North 
Primary Care Trust

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Primary Care Trust
Monthly Performance Report
January 2008

LATEST

D.O.T. = Direction Of Travel. An arrow pointing upwards indicates systemic improvement in achievement of target from previous report. Arrow pointing downwards indicates systemic deterioration in achievement of target.

A horizontal arrow indicates no apparent systemic change

being Achieved	Some Concerns but on track	Not being Achieved
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Highlighted targets match to national Operating Framework priority areas.

Strategic Objective	No.	Target	Reporting Period	BEN Plan @ Mar 08	BEN Actual	D.O.T.	Responsible Director	See Detailed Report
To be so responsive to the population we serve that no-one waits for the health care they need	1	Access to a GP (not including walk-in centres)	Q2 (YTD)	100%	94.9%	↑	JT	
	2	Access to a PCP (not including walk-in centres)	Q2 (YTD)	100%	78.5%	↓	JT	
	3	Ambulance: Category A calls meeting 8 minute target	Nov-07	75%	72.4%	↓	AD	*
	4	Ambulance: Category A calls meeting 19 minute target	Nov-07	95%	99.6%	↑	AD	
	5	Ambulance: Category B calls meeting 19 minute target	Nov-07	95%	92.9%	↓	AD	*
	6	Thrombolysis – 60 minutes call to needle time	Q2 (YTD)	68%	82.5%	↑	NB	
	7	Patients waiting longer than three months for revascularisation	Nov 07 (YTD)	0	0	↔	NB	
	8	Total time in A&E: 4 hours or less	Nov 07 (YTD)	98%	98.5%	↓	JT	
	9	Cancer waiting times – 2 weeks	Oct 07 (YTD)	0	1	↓		
	10	Cancer waiting times - 1 month	Oct 07 (YTD)	0	0	↔		
	11	Cancer waiting times - 2 months	Oct 07 (YTD)	0	3	↔	AD	
	12	Number of outpatients waiting longer than the standard	Oct-07	1144(ytd)	1,757	↑	JT	
	13	Waiting times for all diagnostic tests	Oct-07	747(ytd)	136	↑	AD	
	14	Number of inpatients waiting longer than the standard	Oct-07	475(ytd)	456	↑	JT	
	15	Delayed transfers of care	Q2 (YTD)	3.5%	3.74%	↑	LP	
	16	Access to genito-urinary medicine (GUM) clinics	Nov 07 (YTD)	95% (seen) 100% (offered)	78.5% (seen) 80.1% (offered)	↑	AD	(seen up & off down)
	17	Access to reproductive health services	Q2 (YTD)	15%	2.20%	↑	AD	*
That the health and well being of our population will have improved so much that people will enjoy 10 more years of quality life, wherever they live	18	Diabetic Retinopathy screening	Q2 (YTD)	80%	81.97%	↔	NB	
	19	Four week smoking quitters	Oct 07(YTD)	3,576	1,614	↑	NB	
	20	Practice Based Registers – Patients called for review	Nov-07	81%	90.03%	↑	NB	
	21	Blood Pressure	Nov-07	81%	82.33%	↑	NB	
	22	Cholesterol Levels	Nov-07	68%	73.2%	↑	NB	
	23	Practice-based registers	Nov 07 (YTD)	62	53	↔	NB	
	24	Smoking status aged 15-75 years	Q2 (YTD)	86%	63%	↓	NB	*
	25	Emergency Bed Days	Q2 (YTD)	259,131	121,055	↑	AD	
	26	GP recording of BMI status	Q2 (YTD)	54%	38%	↓	NB	*
	27	Infant mortality: breastfeeding initiation rates	Q2 (YTD)	60.0%	61.7%	↑	NB	
	28	Infant mortality: smoking during pregnancy	Q2 (YTD)	12.9%	16.3%	↓	NB	*
	29	Drug misusers sustained in treatment	Nov 07(YTD)	85%	82%	↑	AD	
	30	Number of drug misusers in treatment	Nov 07(YTD)	7000	6028	↑	AD	
	31	Number of very high intensity users	Q2	2,481	2418	↑	LP	
Our communities will be the most involved, informed and empowered in the country	32	MRSA infections (acute trusts)	Nov 07 (YTD)	64 (ytd)	68	↑	DW	*
	33	CDiff Infections (acute trusts)	Nov 07 (YTD)	640 (ytd)	636	↑	DW	*
	34	Convenience and choice: PCT booking	Nov 07 (YTD)	90%	39%	↓	AD	*
	35	Convenience and choice: facilities to support choice	Jul-07	80%/80%	34%/20%	↓	AD	*
	36	Community Equipment	Nov-07	100%	97.5%	↔	LP	
	37	Community Matrons	Q2	23	23.00	↑	LP	
	38	Percentage of population served by practices achieving 80% or more QOF points (LAA)	Q4	95%	97.51%	↔	JT	yearly collection
	39	Number of pts completing Expert Patient Programme per 10,000 adults with long term limiting illness (LAA)	Q4 06 07	5.8 (wmid average)	19.3	↑	NB	
	40	% Complaints resolved w/in 25 days (w/out exclusions)	Q2 (YTD)	100%	83.0%	↑	DW	
That people regard us as the first choice organisation to work with and for	41	Healthcare Commission Core and Developmental Standards Achievement	Q2	100%	65%	↔	ALL	*
	42	Commissioning of crisis resolution/home treatment services	Q2 (YTD)	945 (EOY)	487	↑	AD	
	43	Commissioning of Early Intervention Services for Psychosis	Q2 (YTD)	71 (EOY)	33	↑	AD	
	44	CPA 7-day follow-up	Q2 (YTD)	100%	100.0%	↔	AD	
	45	Older People's Mental Health: assessment of needs and services	Q4	compliant	compliant	↔	AD	

Birmingham East and North PCT January 2008 Performance Report

1.0 Introduction

This report sets out the performance of Birmingham East and North PCT against targets allocated to its Strategic Objectives. These targets are drawn from a set of national and local indicators, identified for their relevance to the health of the PCT's population.

The overall performance of each target is summarised in the balanced scorecard and where there are areas of concern that are new this month, or are of serious ongoing concern, these are discussed in more detail in the main body of the report (indicated with * on the summary).

Data used to compile this report is as up-to-date as possible at the time of writing and it should be noted that some data is captured on a quarterly basis and will, therefore, not show any changes until next month (February 2008) when Quarter 3 data should be available. Also from next month a forecast of the year-end position regarding any gaps in performance versus target will be included, so that opportunities for remedial action in the final quarter may be considered.

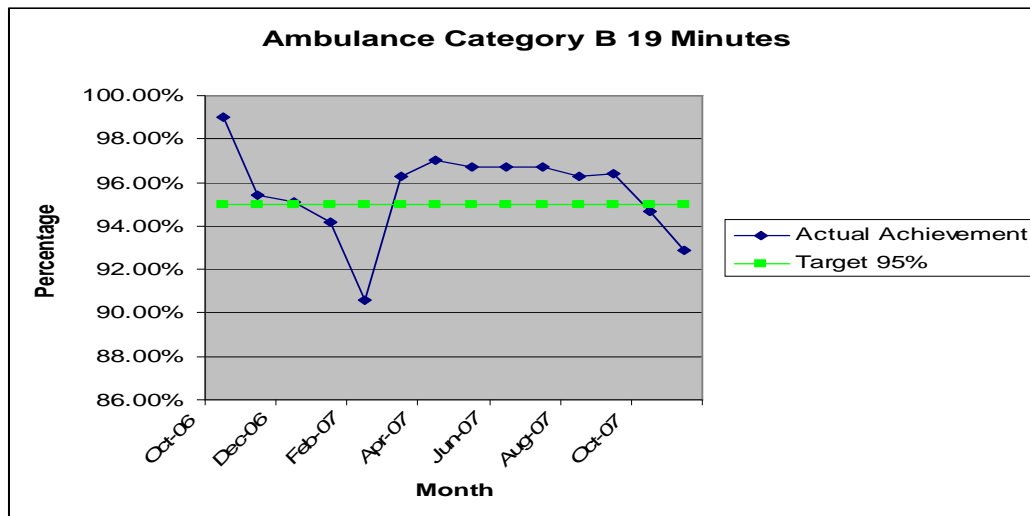
Where discussion has already taken place regarding a performance indicator reported on a quarterly basis, this is not rehearsed again as part of this report.

2.0 Areas of Concern

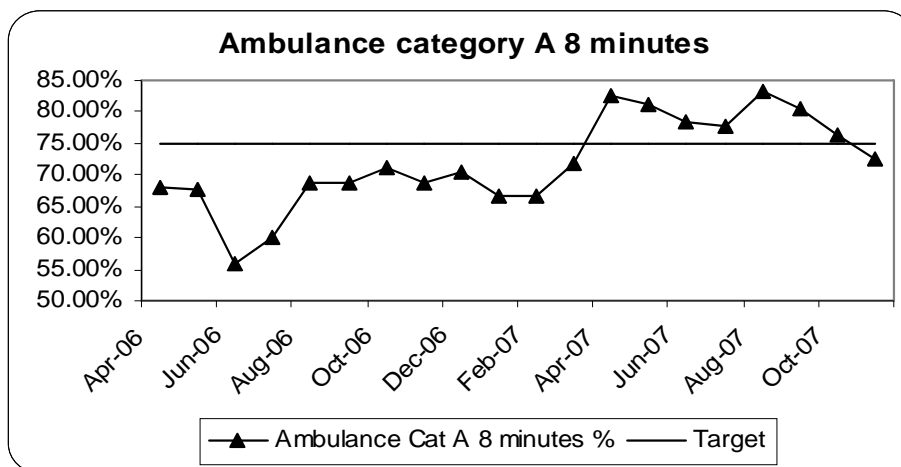
2.1 Ambulance : Category A Calls meeting 8 minute target and Category B Calls meeting 19 minutes

The target for West Midlands Ambulance Service is to respond to 95% of Category B calls within 19 minutes. Category B calls are defined as "urgent but not immediately life threatening".

For the first time since March 2007, performance against this indicator dipped slightly at 94.7% in October 2007 and has dipped further in November to 92.9%. This is also lower than for Nov 06.



Similarly, for the first time since March 2007, performance against responding to Category A calls within 8 minutes has dipped below the target. The November 2007 performance is 72.4% against a target of 75%.



At this stage both targets are amber and only for noting. However, this target tends to be linked to emergency pressures and winter-associated pressures within the system and usually directly correlates to ambulance turnaround time issues at A & E departments. As resources are tied up, unable to offload patients in A & E departments, the ambulance service has fewer resources to deal with requests and consequently Category B calls will be dealt with after the immediately life threatening Category A calls.

The ambulance service has been invited to participate in weekly health economy wide teleconferences to discuss “winter pressures” and the PCT will keep a close eye on the maintenance of this target over the next quarter.

2.2 Access to Reproductive Health Services

This section is unchanged since the last report as the performance is collected on a quarterly basis and we are expecting Quarter 3 performance late January. The Trust Board have, however, asked for a forecast for year end.

This target is currently red for the number of Chlamydia screens undertaken in 15% of the 16 – 24 year old population of the PCT. Whilst the Terence Higgins Trust has been commissioned to undertake additional Chlamydia screens up to the end of March, it is anticipated that the number of screenings will increase significantly on the Quarter 2 level of 2.2%, however it is not anticipated that this will deliver the required 15%. Therefore it is forecasted that the PCT will not achieve this target at the end of March 2008.

2.4 Smoking status aged 15-75 years

This section is unchanged since the last report as the performance is collected on a quarterly basis and we are expecting Quarter 3 performance late January. The Trust Board have, however, asked for a forecast for year end.

This is a data collection target requiring the PCT to measure the smoking status for 86% of its population in GP practices. We are currently recording 63%. Based upon performance last year, when performance improved significantly in Quarter 4, and given that we are implementing a variety of initiatives between now and the end of the year, we remain optimistic that the same Q.4 jump in improvement will occur and that this target will be achieved.

2.5 GP Recording of BMI Status

This section is unchanged since the last report as the performance is collected on a quarterly basis and we are expecting Quarter 3 performance late January. The Trust Board have, however, asked for a forecast for year end.

Similarly, this target is a data collection target requiring the PCT to ensure at least 54% of people over the age of 16 on a GP register have had their BMI recorded during the last 15 months.

Recording against this target again improved in Quarter 4 last year. We achieved 41% by Quarter 3 and 51.2% by the end of Quarter 4. At present, Quarter 2 is reporting 37.1% against a target of 54%. Given that we are implementing a variety of initiatives including amended "About You" cards and the over 40 male screening programme, we are hopeful of achieving this target.

2.6 Infant mortality: smoking during pregnancy

This section is unchanged since the last report as the performance is collected on a quarterly basis and we are expecting Quarter 3 performance late January. The Trust Board have, however, asked for a forecast for year end.

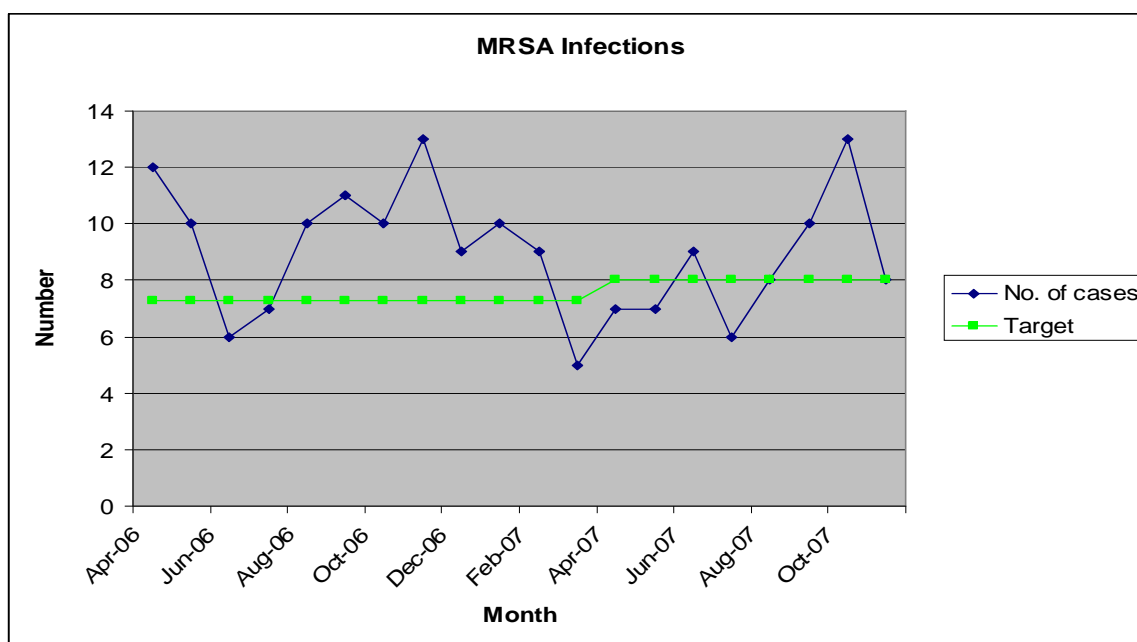
This target measures the percentage of mothers known to be smokers at the time of delivery. The target is 12.9%, however, there is doubt that the Trust will have the

ability to achieve the target by the end of the year. This is due to an unrealistic baseline being set in the first instance. Also the data collection issues discussed in earlier months have happened and the number of mothers now required *not* to be smoking is more than we know is realistic for the remainder of the year.

Although Quarter 3 is not officially known, we estimate it to be approximately 15%. The number of births per month is fairly consistent and to achieve an accumulative target at the end of March 2008 of 12.9%, no more than 61 women out of an approximate 1528 (4.9%) would have to be smokers in this final quarter. We know that this figure is unrealistic and therefore we forecast that we will not achieve this target.

2.7 MRSA infections

Heart of England Foundation Trust should have no more than 8 cases of MRSA bacteraemia per month (8x12 for the full year). This target changed recently from green to amber due to the year to date actual (68) versus target (64). The number of cases have been over 8 per month for the last 3 months. However, during November, the actual number of cases has fallen to match the target of 8, and we are hopeful of this becoming a downward trend.



A lot of work is being undertaken by HEFT and the PCT to avoid infection and a joint local health economy commissioning meeting will be held each month from January, reporting to this committee on a quarterly basis.

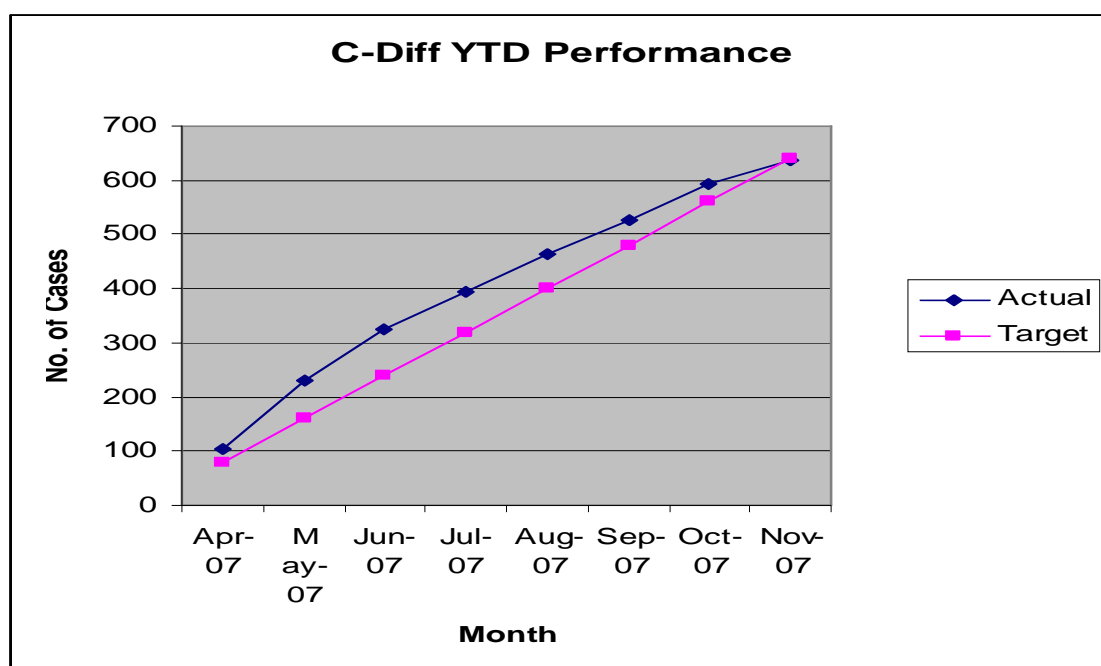
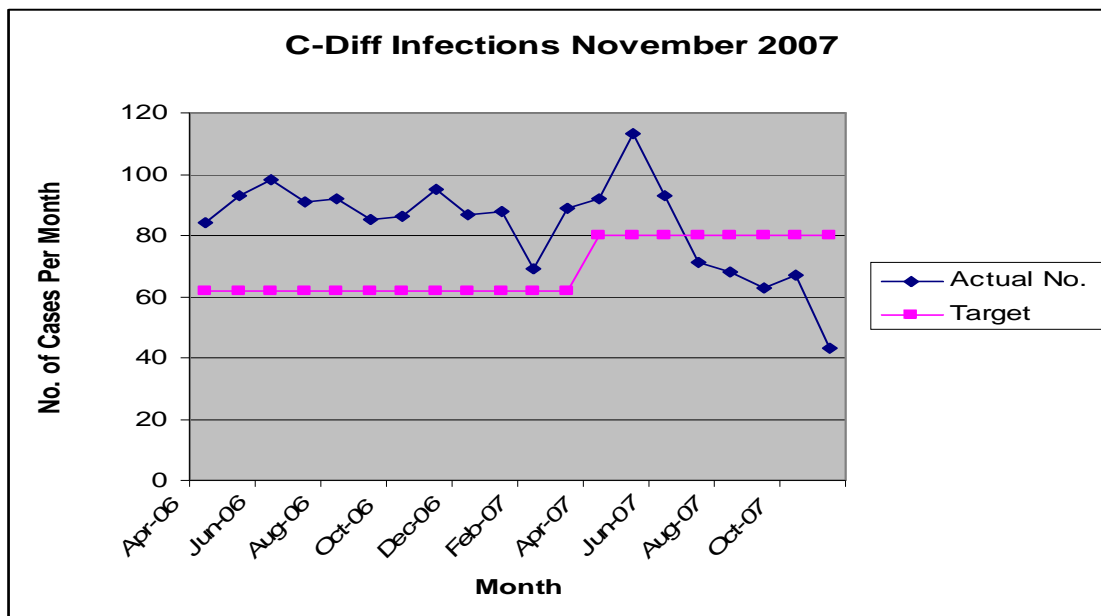
It is forecasted that this target will be achieved by the end of March 2008.

2.8 Clostridium Difficile infections

This target has changed from red to amber this month as the year to date performance has improved. The year to date target is 640 cases and actual is 636 cases, now ahead of target for the first time. The gap between the YTD target and performance is closing as the number of infections across both hospital sites has

been better than target, month-on-month since July. The target is still being aggressively pursued through the Acute Performance Monitoring Group and Tripartite meetings, as well as the Health Economy Infection Control Group Meeting.

It is therefore forecasted that this target will be achieved by the end of March 2008

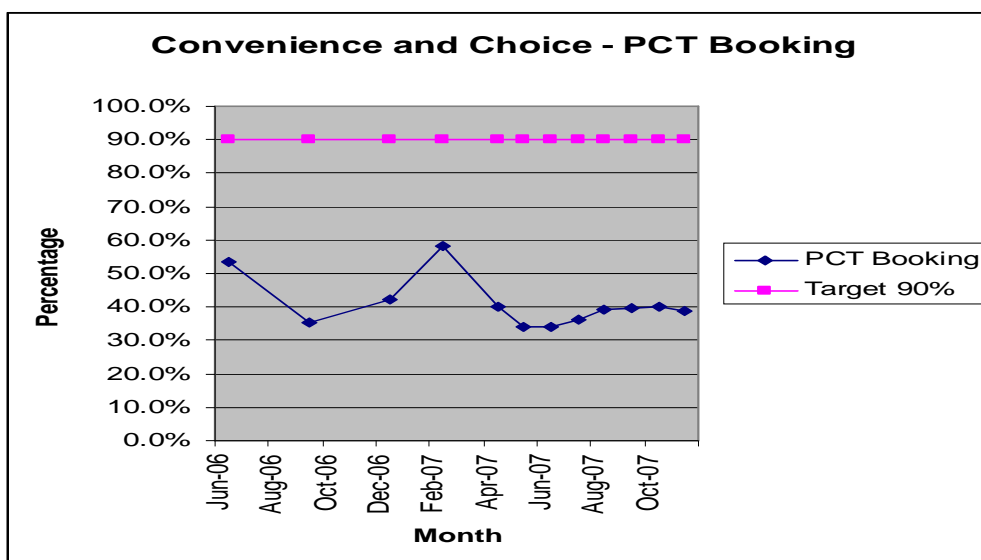


2.9 Convenience and Choice: PCT Booking

At 39% for November, performance continues at less than half the level required by the target which is 90% of referrals. This is a position reflected across the country. There are also issues with the denominator for this target in that it does not include referrals such as “2 week wait” referrals or Orthopaedic Triage referrals which account for a significant proportion of the PCT’s referrals.

A full action plan has been devised including focus and support for low performing practices; a clinical review of the directory of services; a promotional campaign and the development of direct booking services at HoEFT (due to commence in March).

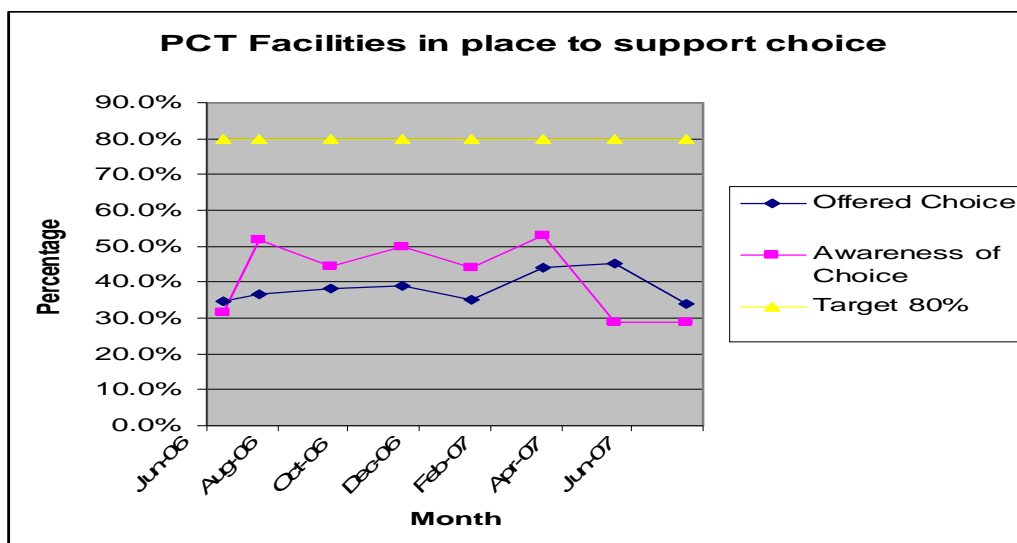
Additionally, the service level agreement for the Choose and Book Directly Enhanced Service (DES) has been sent out to practices to incentivise them for achievement against this target, with a sign-up of all but 4 practices.



Despite all this remedial action, it is forecasted that this target will not be achieved by the end of March 2008, with a likely performance of around 45% against the 90% target. The only consolation is that this might be one of the best performances in the country.

Facilities in place to support choice

This is measured nationally on a bi-monthly basis by MORI on those patients who were referred by their GP. Patients are asked about their experience of the Choose and Book system and patients currently appear to be largely satisfied with their choose and book experience, however respondents to the survey indicated that more information about it at the GP's surgery would be helpful. A new local patient information leaflet is therefore being developed which will be distributed to all practices across the PCT and which should bring the awareness of facilities in place to support choice and reverse the recent dip in performance against this target.



It is forecast that the PCT will not achieve this target. However, this is mirrored nationally due to issues with the way in which this target is measured, and the PCT may end the year comparing favourably with PCTs.

2.10 Achievement of Healthcare Commission Core and Developmental Standards

The PCT is obviously interested in maintaining the “Excellent” rating for Quality of Services awarded in October 2006. The position against this target is in the process of being reviewed for Quarter 3 and will be the subject of a separate report to the February Integrated Governance and Performance Committee.

Improvements have been made since Quarter 2 in respect of the PCT having a comprehensive clinical governance programme in place for independent contractors. The Professional Services Directorate have been working hard to put a variety of measures in place described in previous reports. The issue in determining whether we feel confident to assess ourselves as ‘compliant’ against all of the core standards is one of being able to provide evidence that we are actually doing something with the information that we will have collected. For some areas, this will not be possible by the end of March 2008.

Therefore, at this stage, the forecast for year end is that we will be compliant on all but a couple of the standards.