

# **NHS Birmingham East and North**

## **Monthly Performance Report June 2009**

**June 2009**  
**Monthly Performance Targets 2008/09**

| Targets | No.       | TARGET   | 08/09 EOY plan | DOT | Apr-08  | May-08  | Jun-08  | Jul-08  | Aug-08  | Sep-08  | Oct-08  | Nov-08  | Dec-08  | Jan-09  | Feb-09  | Mar-09  | Director Lead     | Commentary Lead   |     |
|---------|-----------|--|----------------|-----|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|-------------------|-------------------|-----|
|         | VSA01     | MRSA infections (health economy-cumulative)                            | 54             | ↑   | 5       | 8       | 15      | 17      | 19      | 22      | 25      | 25      | 32      | 36      | 40      | 41      | Doug Wulff        | Karen Deeny       |     |
| HCC     | VSA03     | CDiff infections (PCT target - cumulative)                             | 514            | ↓   | 40      | 83      | 116     | 153     | 175     | 201     | 222     | 238     | 267     | 284     | 295     | 314     | Doug Wulff        | Karen Deeny       |     |
| HCC     | VSA04-ad  | % of admitted patients seen within 18 weeks adjusted (snapshot)        | 90.00%         | ↓   | 85.76%  | 87.01%  | 86.19%  | 87.93%  | 89.12%  | 90.42%  | 90.96%  | 89.99%  | 91.34%  | 92.32%  | 92.94%  | 92.72%  | Andrew Donald     | Jenny Belza       |     |
| HCC     | VSA04-non | % of non admitted patients seen within 18 weeks (snapshot)             | 95.00%         | ↓   | 91.60%  | 93.57%  | 93.60%  | 93.06%  | 93.64%  | 94.62%  | 94.93%  | 95.39%  | 95.23%  | 95.51%  | 96.50%  | 96.08%  | Andrew Donald     | Jenny Belza       |     |
| HCC     | VSA04-aud | % of audiology patients treated within 18 weeks (snapshot)             | 95.00%         | ↑   | 98.27%  | 98.82%  | 99.13%  | 99.33%  | 98.87%  | 99.03%  | 100.00% | 98.64%  | 100.00% | 99.77%  | 99.74%  | 100.00% | Andrew Donald     | Jenny Belza       |     |
| HCC     | EC12      | Ambulance: Cat A 8 min target % (snapshot)                             | 75.00%         | ↑   | 74.30%  | 72.10%  | 72.70%  | 73.20%  | 72.20%  | 73.10%  | 70.10%  | 65.60%  | 58.40%  | 72.90%  | 72.90%  | 73.70%  | Andrew Donald     | Caroline Nolan    | 2.1 |
| HCC     | EC13a     | Ambulance: Cat A 19 min target % (snapshot)                            | 95.00%         | ↓   | 99.50%  | 99.50%  | 99.80%  | 99.90%  | 99.50%  | 99.60%  | 98.60%  | 98.20%  | 97.70%  | 99.20%  | 99.10%  | 98.90%  | Andrew Donald     | Caroline Nolan    |     |
| HCC     | EC13b     | Ambulance: Cat B 19 min target % (snapshot)                            | 95.00%         | ↑   | 96.40%  | 97.30%  | 95.60%  | 96.40%  | 96.20%  | 94.40%  | 93.50%  | 91.60%  | 88.00%  | 95.30%  | 95.20%  | 96.10%  | Andrew Donald     | Caroline Nolan    |     |
| HCC     | EC01      | Total time in A&E: 4 hours or less (in month)                          | 98.00%         | ↑   | 98.50%  | 99.07%  | 98.11%  | 98.20%  | 97.51%  | 97.54%  | 97.62%  | 97.54%  | 95.78%  | 95.59%  | 97.42%  | 98.73%  | Jonathan Tringham | Caroline Nolan    |     |
|         | EC06      | Patients waiting longer than 3 months for revascularisation (snapshot) | 0.00%          | ↔   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | Andrew Donald     | Jenny Belza       |     |
| HCC     | EC14      | % cancer patients seen within 2 week target (snapshot)                 | 97.00%         | ↓   | 100.00% | 100.00% | 100.00% | 100.00% | 99.96%  | 99.97%  | 99.97%  | 99.97%  | 99.97%  |         |         | 100.00% | Andrew Donald     | Jenny Belza       |     |
| HCC     | EC15      | % cancer patients seen within 1 month target (snapshot)                | 95.00%         | ↓   | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 99.82%  |         |         | 98.67%  | Andrew Donald     | Jenny Belza       |     |
| HCC     | EC16      | % cancer patients seen within 2 month target (cumulative)              | 92.00%         | ↓   | 98.21%  | 99.22%  | 99.47%  | 99.59%  | 99.66%  | 99.71%  | 99.50%  | 99.56%  | 99.41%  |         |         | 97.44%  | Andrew Donald     | Jenny Belza       |     |
|         | HCC03     | Outpatients waiting longer than 5 weeks (snapshot)                     | 0.00%          | ↓   | 211     | 293     | 315     | 335     | 363     | 401     | 369     | 341     | 449     | 296     | 259     | 292     | Jonathan Tringham | Jenny Belza       | 2.2 |
| HCC     | EC04      | Percentage of outpatients waiting longer than 13 weeks (snapshot)      | 0.00%          | ↑   | 0.00%   | 0.02%   | 0.08%   | 0.15%   | 0.11%   | 0.02%   | 0.05%   | 0.01%   | 0.13%   | 0.06%   | 0.05%   |         | Jonathan Tringham | Jenny Belza       |     |
|         | VSA04-07  | 15 key diagnostic tests waiting over 6 weeks (snapshot)                | 0              | ↓   | 5       | 1       | 0       | 2       | 6       | 1       | 1       | 1       | 1       | 3       | 2       | 3       | Jonathan Tringham | Jenny Belza       | 2.3 |
|         | HCC02     | Inpatients waiting over 11 weeks (snapshot)                            | 0              | ↑   | 94      | 101     | 90      | 80      | 152     | 130     | 129     | 111     | 113     | 145     | 148     | 99      | Jonathan Tringham | Jenny Belza       | 2.4 |
| HCC     | EC05      | Percentage of inpatients waiting longer than 26 weeks (snapshot)       | 0.00%          | ↔   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | 0.00%   | Jonathan Tringham | Jenny Belza       |     |
| HCC     | PSA11b    | GUM % offered an appointment within 48 hours (snapshot)                | 100.00%        | ↔   | 98.11%  | 99.49%  | 99.23%  | 98.05%  | 99.69%  | 100.00% | 100.00% | 99.85%  | 100.00% | 100.00% | 100.00% | 100.00% | Andrew Donald     | David Walker      |     |
| HCC     | VSB05     | Smoking 4 week quitters (cumulative)                                   | 3,641          | ↑   | 150     | 249     | 455     | 673     | 884     | 1,036   | 1,201   | 1,496   | 1,758   | 2,063   | 2,454   |         | Nicola Bengé      | Catherine Tomaney |     |
| HCC     | VSB14     | Number of drug misusers in treatment                                   | 5,600          | ↑   | 6,109   | 6,105   | 6,150   | 6,210   | 6,216   | 6,241   | 6,302   | 6,461   | 6,517   |         |         |         | Andrew Donald     | David Walker      |     |
|         | CAB01     | Convenience and booking: PCT booking rates (snapshot)                  | 90.00%         | ↓   | 63.66%  | 62.57%  | 65.29%  | 43.85%  | 46.01%  | 48.36%  | 50.05%  | 41.86%  | 45.53%  | 51.48%  | 57.72%  | 50.89%  | Andrew Donald     | Jenny Belza       | 2.5 |
|         | VSA05-01  | GP referrals (cumulative)  | 64,434         | ↓   | 4,223   | 8,033   | 11,881  | 18,438  | 23,893  | 29,477  | 35,237  | 41,259  | 46,051  | 51,791  | 57,229  | 63,886  | Andrew Donald     | Jenny Belza       |     |
|         | VSA05-02  | Other referrals (cumulative)   | 111,461        | ↓   | 10,532  | 20,868  | 30,679  | 38,758  | 45,210  | 52,817  | 60,933  | 67,845  | 74,344  | 81,529  | 88,135  | 95,337  | Andrew Donald     | Jenny Belza       |     |
|         | VSA05-03  | Number of 1st attendances following GP referral (cumulative)           | 64,438         | ↓   | 5,390   | 10,369  | 15,558  | 21,001  | 25,608  | 30,975  | 36,598  | 42,096  | 47,525  | 52,858  | 58,135  | 64,456  | Jonathan Tringham | Rob Pickup        |     |
|         | VSA05-04  | Number of 1st attendances following all referrals (cumulative)         | 138,959        | ↓   | 11,359  | 21,721  | 32,687  | 44,568  | 54,199  | 65,527  | 77,127  | 88,292  | 98,845  | 110,530 | 122,089 | 135,367 | Jonathan Tringham | Rob Pickup        |     |
|         | VSA05-05  | Elective daycases and inpatients (cumulative)                          | 32,779         | ↓   | 4,810   | 7,645   | 10,595  | 13,690  | 16,236  | 19,226  | 22,249  | 25,100  | 27,668  | 30,474  | 32,924  | 36,213  | Jonathan Tringham | Rob Pickup        | 2.6 |
|         | VSA05-06  | Planned daycases and inpatients (cumulative)                           | 18,378         | ↓   | 1,613   | 3,109   | 4,751   | 6,460   | 8,025   | 9,699   | 11,520  | 13,107  | 14,624  | 16,289  | 17,906  | 19,650  | Jonathan Tringham | Rob Pickup        | 2.7 |
|         | VSA05-09  | Non elective FFCEs (cumulative)  | 40,467         | ↓   | 3,488   | 6,969   | 10,307  | 13,783  | 17,008  | 20,508  | 24,067  | 27,661  | 31,539  | 35,007  | 38,172  | 41,926  | Jonathan Tringham | Rob Pickup        | 2.8 |
|         | VSA05-10  | 15 key tests activity (cumulative)                                     | 100,221        | ↑   | 8,656   | 16,526  | 23,672  | 30,813  | 37,327  | 44,263  | 51,756  | 58,714  | 65,252  | 73,065  | 80,080  | 88,126  | Jonathan Tringham | Rob Pickup        | 2.9 |
|         | VSC27     | % of people with current HbA1c <= 7.5 (snapshot)                       | 65.00%         | ↑   | 34.66%  | 40.69%  | 46.18%  | 50.12%  | 53.25%  | 56.51%  | 59.69%  | 61.81%  | 63.10%  | 64.68%  | 65.32%  | 66.13%  | Nicola Bengé      | Saj Kahrod        |     |
|         | VSA07     | % of practices offering extended opening hours (snapshot)              | 50.00%         | ↔   | 4.88%   | 20.73%  | 26.83%  | 31.71%  | 39.02%  | 47.56%  | 57.32%  | 62.20%  | 63.41%  | 67.07%  | 68.29%  | 68.29%  | Jonathan Tringham | Donna MacArthur   |     |

| KEY   |   | HCC   |                               |
|---|---|---|-------------------------------|
| <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | =national Vital Signs target                        | <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | =Healthcare Commission target |
| <span style="background-color: #f4cccc; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | =national Vital Signs target with local flexibility | <span style="background-color: #f4cccc; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | = WCC Metric                  |
| <span style="background-color: #fce4d6; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | =local Vital Signs target                           |   |                               |

**June 2009**  
**Monthly Performance Targets 2009/10**

| Targets | No.        | TARGET   | NEXT DATA DUE | 09/10 EOY plan | Apr-09 | May-09 | Jun-09 | Jul-09 | Aug-09 | Sep-09 | Oct-09 | Nov-09 | Dec-09 | Jan-10 | Feb-10 | Mar-10 | Director Lead     | Commentary Lead   |     |
|---------|------------|--|---------------|----------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------------------|-------------------|-----|
|         | VSA01      | MRSA infections (health economy-cumulative)                            | 12/06/09      | 46             | 3      |        |        |        |        |        |        |        |        |        |        |        | Doug Wulff        | Karen Deeny       |     |
|         | VSA03local | CDiff infections (local stretch target - cumulative)                   | 12/06/09      | 271            | 18     |        |        |        |        |        |        |        |        |        |        |        | Doug Wulff        | Karen Deeny       |     |
| CQC     | VSA03CQC   | CDiff infections (CQC target - cumulative)                             | 12/06/09      | 317            | 18     |        |        |        |        |        |        |        |        |        |        |        | Doug Wulff        | Karen Deeny       |     |
| CQC     | VSA04-ad   | % of admitted patients seen within 18 weeks adjusted (snapshot)        | 01/07/09      | 90.00%         | 94.23% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
| CQC     | VSA04-non  | % of non admitted patients seen within 18 weeks (snapshot)             | 01/07/09      | 95.00%         | 96.24% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
| CQC     | VSA04-aud  | % of audiology patients treated within 18 weeks (snapshot)             | 01/07/09      | 95.00%         | 99.34% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
| CQC     | EC12       | Ambulance: Cat A 8 min target % (snapshot)                             | 19/06/09      | 75.00%         | 73.90% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Caroline Nolan    |     |
| CQC     | EC13a      | Ambulance: Cat A 19 min target % (snapshot)                            | 19/06/09      | 95.00%         | 99.50% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Caroline Nolan    |     |
| CQC     | EC13b      | Ambulance: Cat B 19 min target % (snapshot)                            | 19/06/09      | 95.00%         | 95.00% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Caroline Nolan    |     |
| CQC     | EC01       | Total time in A&E: 4 hours or less (in month)                          | 15/07/09      | 98.00%         | 98.44% | 97.83% |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Caroline Nolan    | 2.1 |
|         | EC06       | Patients waiting longer than 3 months for revascularisation (snapshot) | 06/07/09      | 0.00%          | 0.00%  |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
| CQC     | EC14       | % cancer patients seen within 2 week target (cumulative)               | 15/06/09      | 95.00%         |        |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
| CQC     | EC15       | % cancer patients seen within 1 month target (cumulative)              | 15/06/09      | 95.00%         |        |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
| CQC     | EC16       | % cancer patients seen within 2 month target (cumulative)              | 15/06/09      | 92.00%         |        |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
|         | HCC03      | Outpatients waiting longer than 5 weeks (snapshot)                     | 01/07/09      | 0.00%          | 534    |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Jenny Belza       | 2.2 |
| CQC     | EC04       | Percentage of outpatients waiting longer than 13 weeks (snapshot)      | 06/07/09      | 0.00%          | 0.03%  |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Jenny Belza       |     |
|         | VSA04-07   | 15 key diagnostic tests waiting over 6 weeks (snapshot)                | 01/07/09      | 0              | 3      |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Jenny Belza       | 2.3 |
|         | HCC02      | Inpatients waiting over 11 weeks (snapshot)                            | 01/07/09      | 0              | 147    |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Jenny Belza       | 2.4 |
| CQC     | EC05       | Percentage of inpatients waiting longer than 26 weeks (snapshot)       | 06/07/09      | 0.00%          | 0.00%  |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Jenny Belza       |     |
| CQC     | PSA11b     | GUM % offered an appointment within 48 hours (snapshot)                | 25/06/09      | 100.00%        | 98.13% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | David Walker      |     |
| CQC     | VSB05      | Smoking 4 week quitters (cumulative)                                   | 17/06/09      | 3,147          |        |        |        |        |        |        |        |        |        |        |        |        | Nicola Bengé      | Catherine Tomaney |     |
| CQC     | VSB14      | Number of drug misusers in treatment                                   | 13/08/09      | 5,600          |        |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | David Walker      |     |
|         | CAB01      | Convenience and booking: PCT booking rates (snapshot)                  | 14/07/09      | 90.00%         | 54.18% |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       | 2.5 |
|         | VSA05-01   | GP referrals (cumulative)  | 14/07/09      | 61,857         | 5,922  |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
|         | VSA05-02   | Other referrals (cumulative)   | 14/07/09      | 78,700         | 7,232  |        |        |        |        |        |        |        |        |        |        |        | Andrew Donald     | Jenny Belza       |     |
|         | VSA05-03   | Number of 1st attendances following GP referral (cumulative)           | 14/07/09      | 63078          | 5,888  |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Rob Pickup        |     |
|         | VSA05-04   | Number of 1st attendances following all referrals (cumulative)         | 14/07/09      | 108499         | 12,105 |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Rob Pickup        |     |
|         | VSA05-05   | Elective daycases and inpatients (cumulative)                          | 14/07/09      | 27719          | 2,777  |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Rob Pickup        |     |
|         | VSA05-06   | Planned daycases and inpatients (cumulative)                           | 14/07/09      | 17379          | 1,598  |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Rob Pickup        |     |
|         | VSA05-09   | Non elective FFCEs (cumulative)  | 14/07/09      | 41632          | 3,444  |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Rob Pickup        |     |
|         | VSA05-10   | 15 key tests activity (cumulative)                                     | 14/07/09      | 90610          | 7,553  |        |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Rob Pickup        |     |
|         | VSC27      | % of people with current HbA1c <= 7.0 (snapshot)                       | 10/07/09      | 62.00%         |        |        |        |        |        |        |        |        |        |        |        |        | Nicola Bengé      | Saj Kahrod        |     |
|         | VSA07      | % of practices offering extended opening hours (snapshot)              | 01/07/09      | 50.00%         | 72.15% | 74.68% |        |        |        |        |        |        |        |        |        |        | Jonathan Tringham | Donna MacArthur   |     |

|            |  |   |   |  |  |
|------------|--|---|---|--|--|
| <b>KEY</b> | <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> =national Vital Signs target | <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> =national Vital Signs target with local flexibility | <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> =local Vital Signs target | <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> CQC target | <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> = WCC Metric |
|------------|--|---|---|--|--|

**June 2009**  
**Quarterly Performance Targets 2008/09**

| Targets | No.      | TARGET   | 08/09 EOY plan | Apr-08 | May-08 | Jun-08        | Jul-08  | Aug-08 | Sep-08        | Oct-08  | Nov-08 | Dec-08        | Jan-09  | Feb-09 | Mar-09               | Director Lead     | Commentary Lead    |      |
|---------|----------|--|----------------|--------|--------|---------------|---------|--------|---------------|---------|--------|---------------|---------|--------|----------------------|-------------------|--------------------|------|
|         | VSA04-08 | Other diagnostic tests waiting over 6 weeks (snapshot - HoEFT only)                            | 0.00%          |        |        | 19            |         |        | 6             |         |        | 0             |         |        |                      | Andrew Donald     | Jenny Belza        |      |
|         | EC03a3   | % GP appointments within 48 hours 3rd appointment (snapshot)                                   | 0.00%          |        |        |               | 96.93%  |        |               | 96.98%  |        |               | 96.22%  |        |                      | Andrew Donald     | Donna MacArthur    |      |
| HCC     | EC03a4   | % PCP appointments within 24 hours 3rd appointment (snapshot)                                  | 0.00%          |        |        |               | 100.00% |        |               | 100.00% |        |               | 100.00% |        |                      | Jonathan Tringham | Donna MacArthur    |      |
| HCC     | EC03a2   | % patients able to book more than 2 days in advance  | 0.00%          |        |        |               | 96.84%  |        |               | 96.47%  |        |               | 94.19%  |        |                      | Jonathan Tringham | Donna MacArthur    |      |
| HCC     | EC08     | Thrombolysis - 60 min call to needle time (cumulative)   | 68.00%         |        |        | 100.00%       |         |        | 94.40%        |         |        | 82.76%        |         |        |                      | Andrew Donald     | Adrian Reedman     |      |
| HCC     | VSC10    | Delayed transfers of care per 100,000 population aged 18+                                      | 9.09           |        |        | 14.81         |         |        | 22.22         |         |        | 14.81         |         |        | 18.18                | Andrew Donald     | Shirley Mallon     |      |
| HCC     | EC21     | Chlamydia screening (cumulative)   | 17.00%         |        |        | 1.60%         |         |        | 1.70%         |         |        | 7.80%         |         |        |                      | Andrew Donald     | David Walker       |      |
| HCC     | EC17     | % offered diabetic retinopathy screening (snapshot)  | 100.00%        |        |        | 100.00%       |         |        | 100.00%       |         |        | 100.00%       |         |        | 100.00%              | Nicola Benge      | Saj Kahrod         |      |
|         | VSC20    | Number of emergency bed days (cumulative)  | 170,013        |        |        | 45,771        |         |        | 89,129        |         |        | 136,185       |         |        |                      | Andrew Donald     | Richard Mendelsohn |      |
|         | VSC16-01 | Convenience, booking: patients awareness of choice (snapshot)                                  | 50.00%         |        | 50.00% |               | 49.00%  |        | 47.00%        |         |        | 56.00%        |         |        |                      | Andrew Donald     | Jenny Belza        |      |
|         | VSC16-02 | Convenience, booking: patient able to go to chosen provider (snapshot)                         | 90.00%         |        | 66.00% |               | 69.00%  |        | 71.00%        |         |        | 69.00%        |         |        |                      | Andrew Donald     | Jenny Belza        |      |
| HCC     | HCC01    | HCC Standards Achievement (snapshot)   | 100.00%        |        |        | 92.86%        |         |        | 92.86%        |         |        | 100.00%       |         |        | 100.00%              | Louise Pritchard  | Rosey Monaghan     |      |
| HCC     | VS10-03  | % 1 year olds immunised for DTaP/IPV/Hib (cumulative)  | 88.00%         |        |        | 89.60%        |         |        | 88.00%        |         |        | 87.90%        |         |        |                      | Nicola Benge      | Yvonne Green       |      |
| HCC     | VS10-08  | % 2 year olds immunised for PCV (cumulative)   | 88.00%         |        |        | 89.20%        |         |        | 95.40%        |         |        | 95.10%        |         |        |                      | Nicola Benge      | Yvonne Green       |      |
| HCC     | VS10-09  | % 2 year olds immunised for Hib/MenC (cumulative)  | 88.00%         |        |        | 84.30%        |         |        | 85.80%        |         |        | 85.40%        |         |        |                      | Nicola Benge      | Yvonne Green       |      |
| HCC     | VS10-10  | % 2 year olds immunised for MMR (cumulative)   | 88.00%         |        |        | 90.00%        |         |        | 89.70%        |         |        | 88.50%        |         |        |                      | Nicola Benge      | Yvonne Green       |      |
| HCC     | VS10-14  | % 5 year olds immunised for DTaP/IPV (cumulative)  | 88.00%         |        |        | 80.40%        |         |        | 81.00%        |         |        | 81.30%        |         |        |                      | Nicola Benge      | Yvonne Green       |      |
| HCC     | VS10-15  | % 5 year olds immunised for MMR (cumulative)   | 92.00%         |        |        | 77.50%        |         |        | 75.30%        |         |        | 77.10%        |         |        |                      | Nicola Benge      | Yvonne Green       |      |
| HCC     | VS10-18  | % 12-13 yr old girls immunised for HPV (cumulative)  | 51.00%         |        |        |               |         |        |               |         |        | 0.00%         |         |        |                      | Nicola Benge      | Yvonne Green       |      |
| HCC     | VS11-06  | % breastfeeding status at 6-8 weeks (snapshot)   | 85.00%         |        |        | 61.22%        |         |        | 74.13%        |         |        | 72.94%        |         |        | 74.39%               | Nicola Benge      | Jewant Singh       | 2.10 |
| HCC     | VS11-05  | Prevalence of breastfeeding (snapshot)   | 34.90%         |        |        | 27.16%        |         |        | 25.81%        |         |        | 23.31%        |         |        | 31.78%               | Nicola Benge      | Jewant Singh       |      |
|         | VSC21    | Rate of admissions for ACS conditions (snapshot)   | 1,560.00       |        |        | 1,515.49      |         |        | 1,558.22      |         |        | 1,621.69      |         |        |                      | Andrew Donald     |                    |      |
| HCC     | VS12-01  | CAMHS - arrangements to ensure 24 hour cover: level 1-4 (snapshot)                             | 3              |        |        | 3             |         |        | 3             |         |        | 3             |         |        | 3                    | Andrew Donald     | Dawn Jenner        |      |
| HCC     | VS12-02  | Full range of CAMHS services for learning disabilities: level 1-4 (snapshot)                   | 3              |        |        | 3             |         |        | 3             |         |        | 3             |         |        | 3                    | Andrew Donald     | Dawn Jenner        |      |
| HCC     | VS12-03  | Access for CAMHS for 16-17 year olds: level 1-4 (snapshot)                                     | 4              |        |        | 4             |         |        | 4             |         |        | 3             |         |        | 3                    | Andrew Donald     | Dawn Jenner        | 2.11 |
| HCC     | VS12-04  | Full range of CAMHS early intervention services (snapshot)                                     | 3              |        |        | 3             |         |        | 3             |         |        | 3             |         |        | 3                    | Andrew Donald     | Dawn Jenner        |      |
| HCC     | VSA14-03 | Proportion of stroke patients who spend at least 90% of their time on a stroke unit (snapshot) | 70.00%         |        |        | 23.23%        |         |        | 35.21%        |         |        | 41.91%        |         |        | 35.66%               | Andrew Donald     | Melanie Young      |      |
|         | VSA14-06 | Proportion of people who have a TIA who are scanned and treated within 24 hours (snapshot)     | 26.00%         |        |        | Not available |         |        | Not available |         |        | Not available |         |        | Change in definition | Andrew Donald     | Melanie Young      |      |
| HCC     | VS10-06  | Percentage of women assessed by 12 weeks of pregnancy (snapshot)                               | 72.00%         |        |        | Not available |         |        | Not available |         |        | Not available |         |        | 90.26%               | Andrew Donald     |                    |      |
|         | VSC26    | Rate of hospital admissions for alcohol related harm per 100,000 population                    | 1,596.45       |        |        | 396.15        |         |        | 803.41        |         |        | 1,212.92      |         |        |                      | Andrew Donald     | David Walker       |      |
| HCC     | EC18     | New cases of psychosis served by early intervention teams per year                             | 100.00%        |        |        | 9.86%         |         |        | 25.35%        |         |        | 53.52%        |         |        | 100.00%              | Andrew Donald     | Jane Collier       |      |

|            |  |   |   |   |  |
|------------|--|---|---|---|--|
| <b>KEY</b> | <span style="background-color: #d9ead3; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> =national Vital Signs target | <span style="background-color: #f4cccc; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> =national Vital Signs target with local flexibility | <span style="background-color: #fce4d6; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> =local Vital Signs target | <span style="background-color: #fff2cc; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> =Healthcare Commission target | <span style="background-color: #f4cccc; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> = WCC Metric |
|------------|--|---|---|---|--|

## 1.0 Introduction

This report documents the performance of NHS Birmingham East & North against targets aligned with the PCT's Strategic Objectives. These targets are drawn from a set of national and local indicators. Some are mandatory and others are selected for their relevance to the health of the PCT's population.

The Board is asked to note that 'amber' indicates that the target has not been met but it is not far away from the target. An explanatory text will be included in the body of the report as will any indicators marked as red or an amber indicator has been in place for 3 months or more.

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 lag time between end of a period and validation of the data can be considerable and out of the control of the PCT. At the last Integrated Governance & Performance Committee the most up to date data was screened using the PCT performance reporting tool, Performance Accelerator. Whilst it was considered to be very reassuring that this tool was being used, it was felt that having an 'on the day scorecard' which was tabled to flag up any information that has arrived with the PCT more recently than the report was written, which was a week before the IG&P committee.

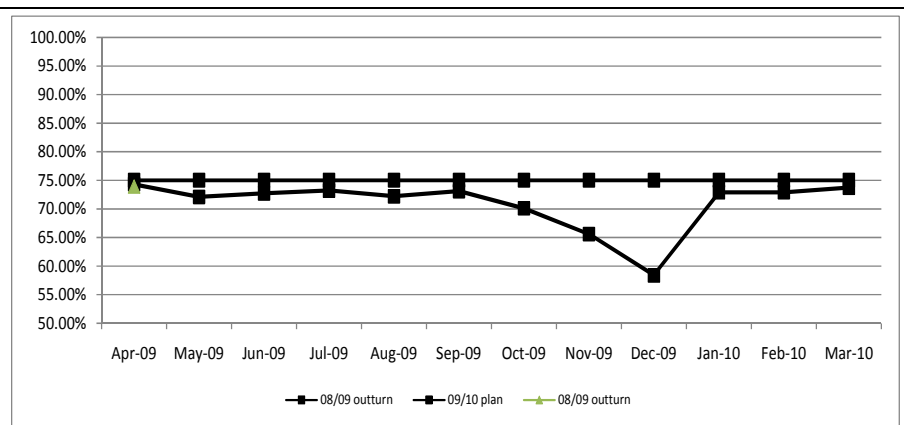
## 2.0 New areas of concern & serious ongoing concern

| 2.           | Ambulance : Category A 8 minute target % |        |        |        |        |        | Green  | >=75.00% | Amber  | <75.00% | Red    | <70.00% |
|--------------|--|--------|--------|--------|--------|--------|--------|----------|--------|---------|--------|---------|
| EC12         | Apr 09                                   | May 09 | Jun 09 | Jul 09 | Aug 09 | Sep 09 | Oct 09 | Nov 09   | Dec 09 | Jan 10  | Feb 10 | Mar 10  |
| Actual 08/09 | 74.30%                                   | 72.10% | 72.70% | 73.20% | 72.20% | 73.10% | 70.10% | 65.60%   | 58.40% | 72.90%  | 72.90% | 73.70%  |
| Actual 09/10 | 73.90%                                   |        |        |        |        |        |        |          |        |         |        |         |
| Plan 09/10   | 75.00%                                   | 75.00% | 75.00% | 75.00% | 75.00% | 75.00% | 75.00% | 75.00%   | 75.00% | 75.00%  | 75.00% | 75.00%  |

The target for all Category A Ambulance attendances being responded to in 8 minutes has not been achieved since April 2008, however performance continues to steadily improve.

West Midlands Ambulance Service has tackled under-performance through redeployment and by increasing the number of staff and ambulance cars available in the area and the appointment of a second Hospital Ambulance Liaison Officer (HALO) covering Good Hope Hospital. Commissioners are continuing to work with WMAS and Heart of England Foundation Trust to support improvement.

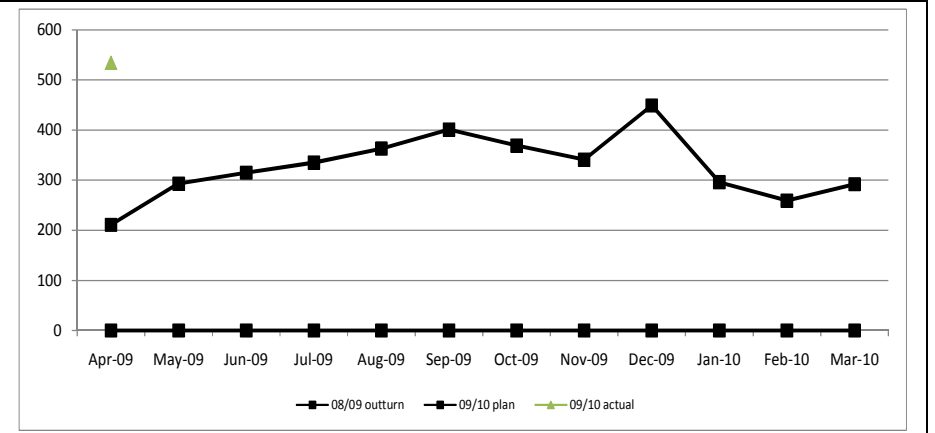
There is a review of WMAS currently taking place between April and July 2009 with the PCT taking an active role in a further attempt to improve performance and services across the Birmingham East and North area.



|              |  |        |        |        |        |        |        |        |        |        |        |        |
|--------------|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 2.           | Outpatients waiting longer than 5 weeks (snapshot) |        |        |        |        |        | Green  | 0      | Amber  | 1-50   | Red    | >50    |
| VSA04-07     | Apr 09   | May 09 | Jun 09 | Jul 09 | Aug 09 | Sep 09 | Oct 09 | Nov 09 | Dec 09 | Jan 10 | Feb 10 | Mar 10 |
| Actual 08/09 | 211  | 293    | 315    | 335    | 363    | 401    | 369    | 341    | 449    | 296    | 259    | 292    |
| Actual 09/10 | 534  |        |        |        |        |        |        |        |        |        |        |        |
| Plan 09/10   | 0  | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |

The numbers of patients waiting over 5 weeks has increased considerably compared with last month.

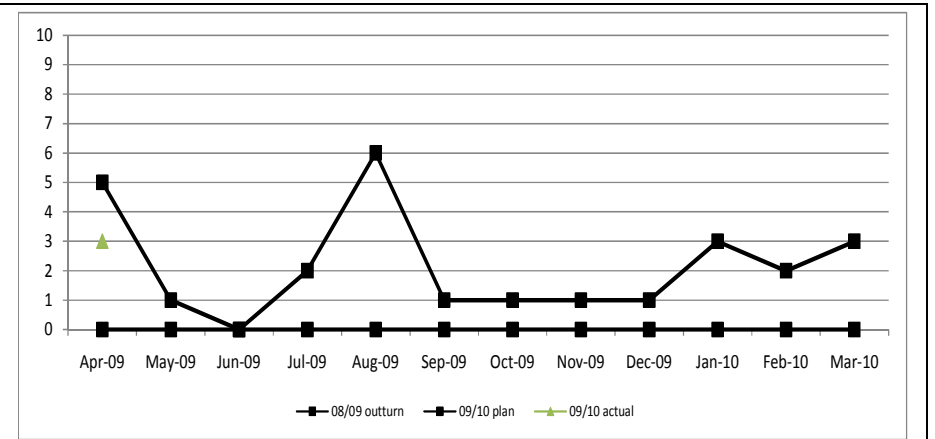
As reported over previous monthly reports, certain specialties have greater problems such as Trauma and Orthopaedics and Ophthalmology. HoEFT has redesigned the musculoskeletal services with the launch of the integrated knee service which began in January 2009. For ophthalmology services, additional capacity has been commissioned in the independent sector. Pilot dermatology and urology clinics have also been established in the community.



|              |   |        |        |        |        |        |        |        |        |        |        |        |
|--------------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 2.           | 15 key diagnostic tests waiting longer than 6 weeks |        |        |        |        |        | Green  | 0      | Amber  | 1-5    | Red    | >5     |
| VSA04-07     | Apr 09  | May 09 | Jun 09 | Jul 09 | Aug 09 | Sep 09 | Oct 09 | Nov 09 | Dec 09 | Jan 10 | Feb 10 | Mar 10 |
| Actual 08/09 | 5   | 1      | 0      | 2      | 6      | 1      | 1      | 1      | 1      | 3      | 2      | 3      |
| Actual 09/10 | 3   |        |        |        |        |        |        |        |        |        |        |        |
| Plan 09/10   | 0   | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |

Waiting times for 15 key diagnostic tests continues to be sustained. Capacity for audiology assessments remain challenging and is the only area where patients continue to wait over six weeks, all of which have occurred at Sandwell and West Birmingham Hospitals NHS Trust.

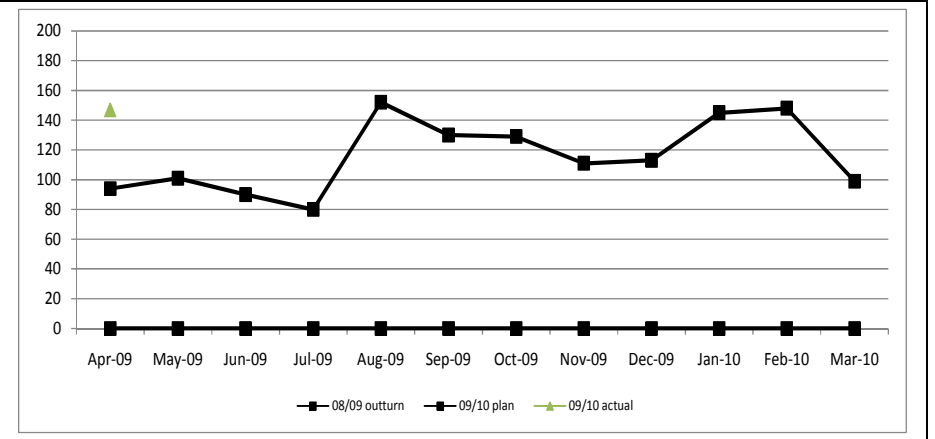
Discussions continue with the provider around patient choice and the capacity issues.



|              |   |        |        |        |        |        |        |        |        |        |        |        |
|--------------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 2.           | Inpatients waiting over 11 weeks (snapshot) |        |        |        |        |        | Green  | 0      | Amber  | 1-20   | Red    | >20    |
| VSA04-07     | Apr 09                                      | May 09 | Jun 09 | Jul 09 | Aug 09 | Sep 09 | Oct 09 | Nov 09 | Dec 09 | Jan 10 | Feb 10 | Mar 10 |
| Actual 08/09 | 94  | 101    | 90     | 80     | 152    | 130    | 129    | 111    | 113    | 145    | 148    | 99     |
| Actual 09/10 | 147   |        |        |        |        |        |        |        |        |        |        |        |
| Plan 09/10   | 0   | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      |

The number of patients waiting over 11 weeks has increased in April 2009.

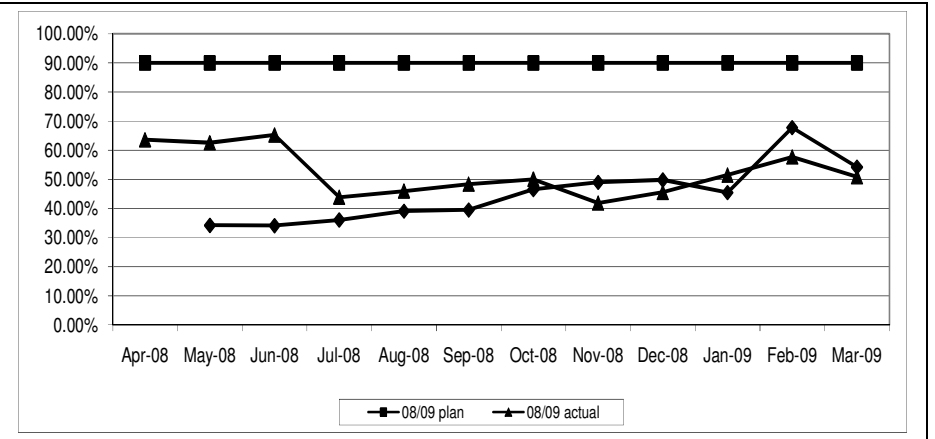
As reported over previous monthly reports, certain specialties have greater problems such as Trauma and Orthopaedics. HoEFT has commissioned additional capacity from the independent sector and the use of a mobile theatre on the Solihull site continues as does the weekend theatres for day cases.



|              |  |        |        |        |        |        |        |          |        |        |        |         |
|--------------|--|--------|--------|--------|--------|--------|--------|----------|--------|--------|--------|---------|
| 2.           | Convenience and booking : PCT booking rates (snapshot) |        |        |        |        |        | Green  | >=90.00% | Amber  | 80-89% | Red    | <80.00% |
| CAB01        | Apr 08   | May 08 | Jun 08 | Jul 08 | Aug 08 | Sep 08 | Oct 08 | Nov 08   | Dec 08 | Jan 09 | Feb 09 | Mar 09  |
| Actual 08/09 | 63.66%   | 62.57% | 65.29% | 43.85% | 46.01% | 48.36% | 50.05% | 41.86%   | 45.53% | 51.48% | 57.72% | 50.89%  |
| Plan 09/10   | 90.00%   | 90.00% | 90.00% | 90.00% | 90.00% | 90.00% | 90.00% | 90.00%   | 90.00% | 90.00% | 90.00% | 90.00%  |

Performance continues to remain around 50 per cent with a slight dip in performance during March 2009.

Lack of a direct booking system at HoEFT continues to be a significant factor. A performance notice was issued this year to HoEFT, however delays still exist in the introduction of the Direct Booking System (DBS) at Heart of England FT and is expected for delivery in Summer 2009.



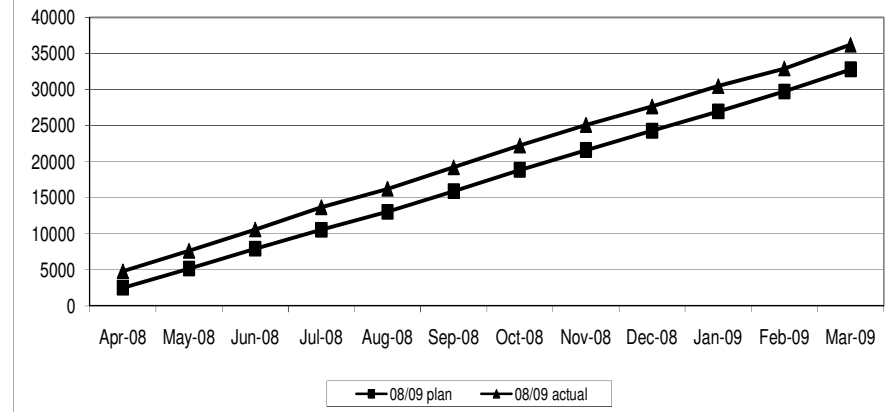
|              |   |        |        |        |        |        |        |         |        |         |        |         |
|--------------|---|--------|--------|--------|--------|--------|--------|---------|--------|---------|--------|---------|
| 2.           | Elective daycases and inpatients (cumulative) |        |        |        |        |        | Green  | Not set | Amber  | Not set | Red    | Not set |
| VSA05-05     | Apr 08  | May 08 | Jun 08 | Jul 08 | Aug 08 | Sep 08 | Oct 08 | Nov 08  | Dec 08 | Jan 09  | Feb 09 | Mar 09  |
| Actual 08/09 | 4810  | 7645   | 10595  | 13690  | 16236  | 19226  | 22249  | 25100   | 27668  | 30474   | 32924  | 36213   |
| Plan 08/09   | 2527  | 5183   | 7925   | 10559  | 13045  | 15911  | 18859  | 21597   | 24281  | 26982   | 29732  | 32779   |

Total elective rates have been higher than trajectory all year as a joint result of increased GP referrals and pressure to hit the 18 week target.

Elective activity remains higher than plan, with 10% overrun in March, resulting in a 15% overspend the highest level since October 2007.

First referrals from Consultants also showed a 20% increase on February and 8% on the quarter, with increased activity in Trauma & Orthopaedics (42%), General Medicine (68%) & Endocrinology (52%)\*

\*CBSA March Report

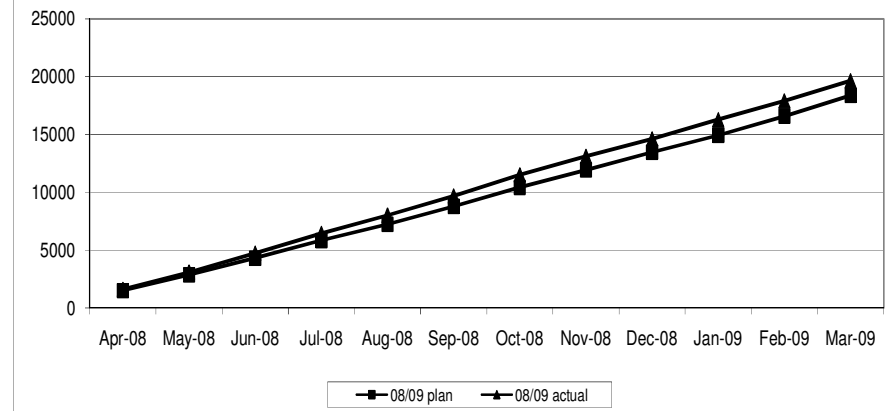


|              |  |        |        |        |        |        |        |         |        |         |        |         |
|--------------|--|--------|--------|--------|--------|--------|--------|---------|--------|---------|--------|---------|
| 2.           | Planned daycases and inpatients (cumulative) |        |        |        |        |        | Green  | Not set | Amber  | Not set | Red    | Not set |
| VSA05-06     | Apr 08                                       | May 08 | Jun 08 | Jul 08 | Aug 08 | Sep 08 | Oct 08 | Nov 08  | Dec 08 | Jan 09  | Feb 09 | Mar 09  |
| Actual 08/09 | 1613   | 3109   | 4751   | 6460   | 8025   | 9699   | 11520  | 13107   | 14624  | 16289   | 17906  | 19650   |
| Plan 08/09   | 1509   | 2876   | 4321   | 5843   | 7246   | 8796   | 10426  | 11947   | 13468  | 14938   | 16577  | 18378   |

Planned elective rates have been higher than trajectory all year as a joint result of increased GP referrals and pressure to hit the 18 week target.

Increased activity over prior month was primarily seen in the following areas\*: Trauma & Orthopaedics (49%), Gynaecology (35%), Ophthalmology (32%), Endocrinology (91%), General Medicine (56%), Pain Management (56%), Geriatric Medicine (131%)

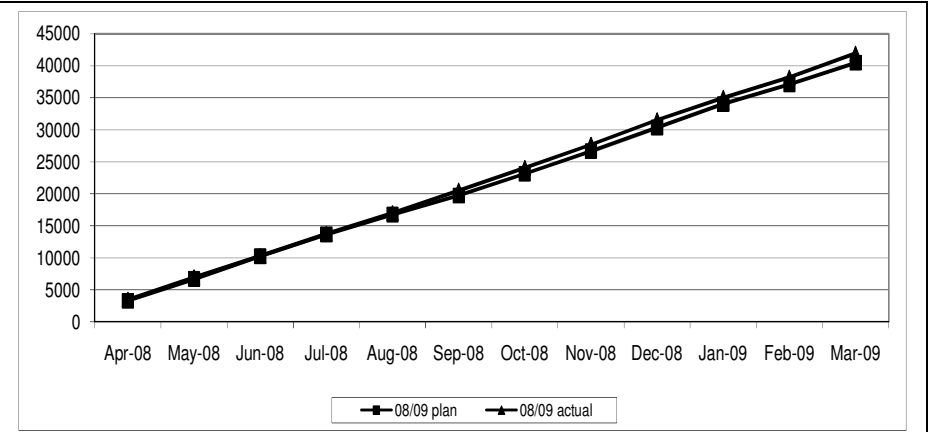
\*CBSA March Report



|              |                                 |        |        |        |        |        |        |         |        |         |        |         |
|--------------|---------------------------------|--------|--------|--------|--------|--------|--------|---------|--------|---------|--------|---------|
| 2.           | Non elective FFCWs (cumulative) |        |        |        |        |        | Green  | Not set | Amber  | Not set | Red    | Not set |
| VSA05-09     | Apr 08                          | May 08 | Jun 08 | Jul 08 | Aug 08 | Sep 08 | Oct 08 | Nov 08  | Dec 08 | Jan 09  | Feb 09 | Mar 09  |
| Actual 08/09 | 3488                            | 6969   | 10307  | 13783  | 17008  | 20508  | 24067  | 27661   | 31539  | 35007   | 38172  | 41962   |
| Plan 08/09   | 3298                            | 6704   | 10267  | 13668  | 16757  | 19744  | 23139  | 26691   | 30360  | 34027   | 37083  | 40467   |

Non-elective admissions have remained relatively constant over the year and nationally this has seen an increase compared to the previous year.

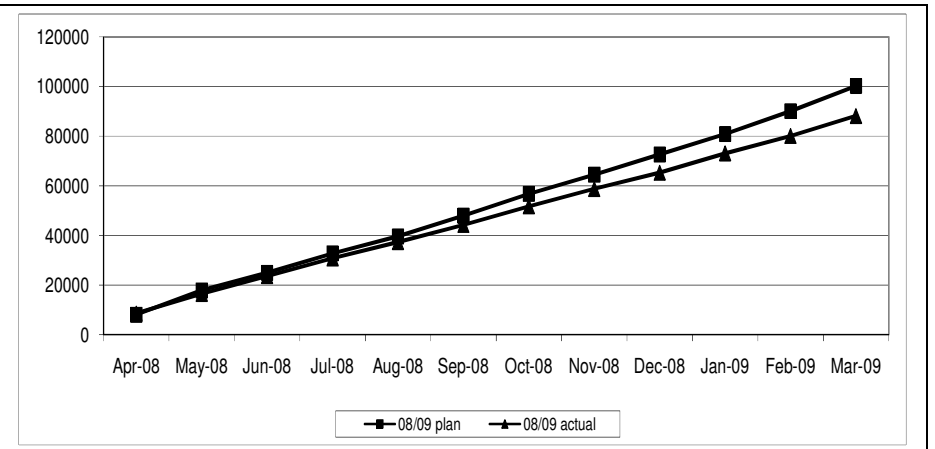
Through discussions on over-performance at HoEFT, plans are being put in place to reduce non-elective admissions through a revised End of Life delivery plan, using ACM to prevent admissions and A&E diversions through the new insight module



|              |                                    |        |        |        |        |        |        |         |        |         |        |         |
|--------------|------------------------------------|--------|--------|--------|--------|--------|--------|---------|--------|---------|--------|---------|
| 2.           | 15 key tests activity (cumulative) |        |        |        |        |        | Green  | Not set | Amber  | Not set | Red    | Not set |
| VSA05-10     | Apr 08                             | May 08 | Jun 08 | Jul 08 | Aug 08 | Sep 08 | Oct 08 | Nov 08  | Dec 08 | Jan 09  | Feb 09 | Mar 09  |
| Actual 08/09 | 8656                               | 16526  | 23672  | 30813  | 37327  | 44263  | 51756  | 58714   | 65252  | 73065   | 80080  | 88126   |
| Plan 08/09   | 8160                               | 17902  | 25000  | 32804  | 39634  | 46024  | 56805  | 64521   | 72648  | 80817   | 90059  | 100221  |

There has been an under performance of the 15 key diagnostic tests through the year.

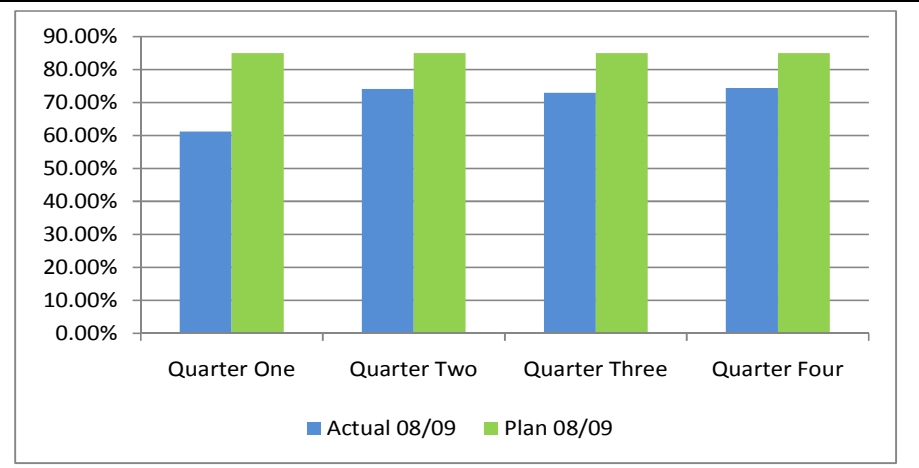
This target was to ensure that diagnostic tests were not a blockage for the achievement of the 18 weeks target. To date the number of diagnostic tests has not provided a barrier to 18 weeks and the capacity remains to do this work.



|              |  |             |               |              |       |         |       |         |     |         |
|--------------|--|-------------|---------------|--------------|-------|---------|-------|---------|-----|---------|
| 2.           | % breastfeeding status at 6-8 weeks (snapshot) |             |               |              | Green | Not set | Amber | Not set | Red | Not set |
| VSB11-06     | Quarter One                                    | Quarter Two | Quarter Three | Quarter Four |       |         |       |         |     |         |
| Actual 08/09 | 61.22%   | 74.13%      | 72.94%        | 74.39%       |       |         |       |         |     |         |
| Plan 08/09   | 85.00%   | 85.00%      | 85.00%        | 85.00%       |       |         |       |         |     |         |

The collection of breastfeeding status for babies aged 6-8 weeks continues to improve, however despite systems being in place, quarter four data did not demonstrate the expected outcome to meet the end of year target of 85%.

Workforce capacity issues within the Health Visiting teams may have impacted on the outcome and a number of measures have been put in place to ensure that the target improves in 2009/10. Health Visitor Clerical Officers have been reminded of the procedure for inputting 6-8 week feeding status on the Child Health System. Health Visitor Managers were supplied with a list of babies whose breastfeeding status had not been recorded at 6-8 weeks in an effort for the mothers to be contacted to ascertain the method of feeding.



|              |  |             |               |              |       |   |       |     |     |    |
|--------------|--|-------------|---------------|--------------|-------|---|-------|-----|-----|----|
| 2.           | Access to CAMHS for 16-17 year olds : level 1-4 (snapshot) |             |               |              | Green | 4 | Amber | N/A | Red | <4 |
| VSB11-06     | Quarter One  | Quarter Two | Quarter Three | Quarter Four |       |   |       |     |     |    |
| Actual 08/09 | 4  | 4           | 3             | 3            |       |   |       |     |     |    |
| Plan 08/09   | 4  | 4           | 4             | 4            |       |   |       |     |     |    |

The PCT has previous reported Access to Child and Adolescent Mental Health Services (CAMHS) for 16-17 year olds at level 4. During quarter 3 it was noted that the PCT had only been measuring the service for children in paediatric wards and that the PCT had not been aware that children were being admitted onto adult wards.

It could have been argued that these children in adult wards were not in children's services, however they should have been and therefore should have received access to the same quality services. On this basis the score was reduced to level 3 until arrangements could be made to ensure all children are only admitted onto paediatric wards and not onto adult wards as an overflow.

Current strategy for CAHMS is being developed and this includes an intention to ensure sufficient capacity of paediatric beds is made available.

