

TO: West Gloucestershire Primary Care Trust Board

FROM: Nicki Millin, Assistant Director of Service Development

DATE: 20th January 2005

SUBJECT: PERFORMANCE REPORT

1.0 PURPOSE:

To provide the Board with activity and key performance information for the period of April to December 2004.

2.0 SUMMARY OF KEY ISSUES

- 2.1 By December 2004 there was a requirement that '100% of practices will be able to offer an appointment with a GP within 48 hours and an appointment with a Primary Care Professional within 24 hours'. This has been achieved.
- 2.2 At the end of November there was one patient waiting over 9 months for an inpatient procedure with a Welsh Provider (an alternative has been offered but the patient has chosen to remain waiting in Wales).
- 2.3 There were five patients waiting over 17 weeks for an outpatient appointment. These are all with Welsh providers and have been offered an alternative provider.
- 2.4 There were eight delayed transfers of care in an acute bed as at the 6th January 2005.
- 2.5 Gloucestershire Ambulance Services NHS Trust did not meet its Category A Calls target; performance in December was 67.01% against the standard of 75%. The Trust remains on weekly reporting to the Strategic Health Authority.

3.0 BALANCED SCORE CARD

Greater detail about the key performance indicators below is included within the paper.

	West Gloucestershire PCT	Gloucestershire Hospitals NHS Foundation Trust	North Bristol NHST	UBHT	Oxford Radcliffe NHST	Swindon & Marlborough	Others	Partnership Trust	Glos. Ambulance Trust
Total Inpatient List Size		↑	↑	↑	↑	→	↑		
INPATIENT >6 months		↑	↓	→	↑	↓	→		
INPATIENT >3 months		↑	↑	↓	↑	↑	→		
OUTPATIENTS 13 < weeks		↑	↑	↑	zero	zero	↓	↑	
Delayed Transfers of care (WG patients)	→								
Emergency Activity		↑	↓	↓	↑	↑	↑		
Inpatient Day Care Activity		↑	↑	↓	↑	↑	↑		
Ambulance Category A calls (ans. Within 8 mins)									↓
GP Referrals		↓	↑	↑	→	→	→	↑	
Other Referrals		↓	↓	↑	→	→	→	↑	
Year to date position against profile									
<p>↑ Increase in performance against previous month</p> <p>↓ Decrease in performance against previous month</p> <p>→ Performance remained static</p>									

4.0 ACTIVITY LEVELS – GLOUCESTERSHIRE HOSPITALS NHS FOUNDATION TRUST

Figs 1 through to **7** show the PCT's performance against the Gloucestershire Hospitals NHS Foundation Trust Service Level Agreement (SLA). It should be noted that the LDP provides a £2.1m savings target associated with managing demand into secondary care. Expenditure against plan needs to be considered against the target to reduce expenditure by £2.1m by year end.

Figs 1 and **2** show the non-elective (emergency or unplanned) and elective activity, which, at this stage, remains below the planned levels commissioned from GHT.

Fig 1 West Gloucestershire PCT – GHT Non Elective Activity

Non Elective (HRG Spells)				
	Profile	Actual	Variance	%
April	1660	1553	-107	-6%
May	1701	1615	-86	-5%
June	1660	1710	50	3%
July	1802	1726	-76	-4%
August	1600	1649	49	3%
September	1660	1658	-2	0%
October	1741	1748	7	0%
November	1620	1720	100	6%
YTD Total	13444	13379	-65	0%

Fig 2 West Gloucestershire PCT – GHT Elective Activity

Elective Activity (HRG Spells)				
	Profile	Actual	Variance	%
April	1874	1809	-65	-3.47%
May	1781	1787	6	0.34%
June	2038	1897	-141	-6.92%
July	2109	1874	-235	-11.14%
August	1921	1789	-132	-6.87%
September	2062	1939	-123	-5.97%
October	2015	1940	-75	-3.72%
November	2109	2133	24	1.14%
YTD Total	15909	15168	-741	-4.66%

Fig 3 provides a financial summary of elective and non elective activity.

Fig 3 GHT Financial Contract to November 2004 (Elective and Non-Elective)

	Elective		Non Elective	
	Spells	£000	Spells	£000
Plan	15909	17932	13444	24328
Actual *	15168	16577	13379	24633
Variance	-741	-1355	-65	305

* actual includes an estimate for uncoded episodes

Outpatients

Within Payment by Results we are currently required to commission certain specialties on a single 'episode' basis (i.e. a single fee is paid regardless of the number of times a patient attends for follow-up with a single speciality), instead of on an individual cost basis for both new and follow up appointments. Fig 4 details the activity within these episode based specialties and at this time activity is 3.10% above the profiled position.

Fig 4 West Gloucestershire PCT – GHT Episode Based Outpatients

Episode Based		Actual Activity Episodes	Planned YTD Activity Episodes	Variance	
				Actual	%
100	General Surgery			0	
101	Urology Outpatients	1324	1193	131	10.98%
103	Breast Surgery	749	759	-10	-1.32%
107	Vascular Surgery	948	1010	-62	-6.14%
110	Trauma and Orthopaedics	5926	5620	306	5.44%
120	ENT	2520	2565	-45	-1.75%
330	Dermatology Outpatients	2416	2292	124	5.41%
502	Gynaecology Outpatients	1739	1714	25	1.46%
TOTAL EPISODE BASED		15622	15153	469	3.10%

The remaining specialties are costed on a new and follow up basis and this activity is shown in Fig 5. Current activity levels remain within the commissioned levels. The national Payment by Results mechanism provides funding for both consultant led and consultant responsible clinics. However, since consultant responsible activity is being reported for the first time this year by GHT due to previous data recording issues, all consultant responsible activity has been included in a block arrangement this year. The reporting included within this paper provides only consultant led activity, but we continue to monitor all activity streams to ensure we have an overall picture of demand. We anticipate that consultant responsible activity will be charged at national tariff in future.

**Figure 5 West Gloucestershire PCT – Gloucestershire Hospitals NHS Foundation Trust
Outpatient Activity (April to November 2004) for Non Episode Based Outpatient
Attendances**

Attendance Based	Actual Activity	Actual Activity	Planned YTD Activity	Planned YTD Activity	Variance			
	First	Follow up	First	Follow up	First		Follow up	
					Actual	%	Actual	%
Surgical Specialties	7525	22191	7429	26811	96	1%	-4620	-17%
Medical Specialties	6210	14928	4601	16043	1609	35%	-1115	-7%
Other	2683	4477	2651	4587	32	1%	-110	-2%
TOTAL ATTENDANCE BASED	16418	41596	14681	47441	1737	12%	-5845	-12%

For further detail see Appendix 1, which provides detail down to individual speciality level.

Fig 6 provides a financial summary of episode based outpatients.

Fig 6 GHT Financial Contract to November 2004 (Outpatients)

	Outpatients	
	Episode and Attendance Based Outpatients	£000
Plan	77,277	11,015
Actual	73,636	10,770
Variance	-3,641	-246

4.1 Pathology

Currently pathology is outside of Payment by Results and therefore the PCT have a cost and volume contract for this service. **Fig 7** below shows the year to date position (as at the end of November) which is 12.8% above contract. This equates to a year to date overspend of £65,473.

Fig 7 Pathology Activity

Service	Actual Requests YTD	Planned Requests YTD	Variance (%)	> 1% variance at 50% cost
Haematology	81074	71151	13.9	£ 26,804.01
Chemical Pathology	79077	69003	14.6	£ 25,806.00
Histology	1304	1111	17.4	£ 3,015.74
Non-Gynae Cytology	106	85	24.7	£ 311.40
Microbiology				
- Urines	14001	13343	4.9	£ 1,632.75
- Bacteriology	12416	11814	5.1	£ 2,521.64
- Serology	4516	4133	9.3	£ 4,668.30
- Others	189	136	39.0	£ 712.92
Total	192683	170776	12.8	£ 65,472.76

4.2 Overall Performance

As at November 2004, the Gloucestershire Hospitals NHS Foundation Trust contract was showing an under performance of approximately £1,231,000. As previously reported the PCT is on track for achieving a £1.6m underspend against the GHT SLA, this level of prediction includes the additional activity required to meet the orthopaedic targets.

The table below shows a breakdown of the contract within service areas.

Service Area	Under/Over spend
Elective inpatient	-1,355
Non Elective	305
Outpatients	-246
Pathology	65
TOTAL	-1,231

5.0 WAITING LIST

5.1 Outpatient Waiting List

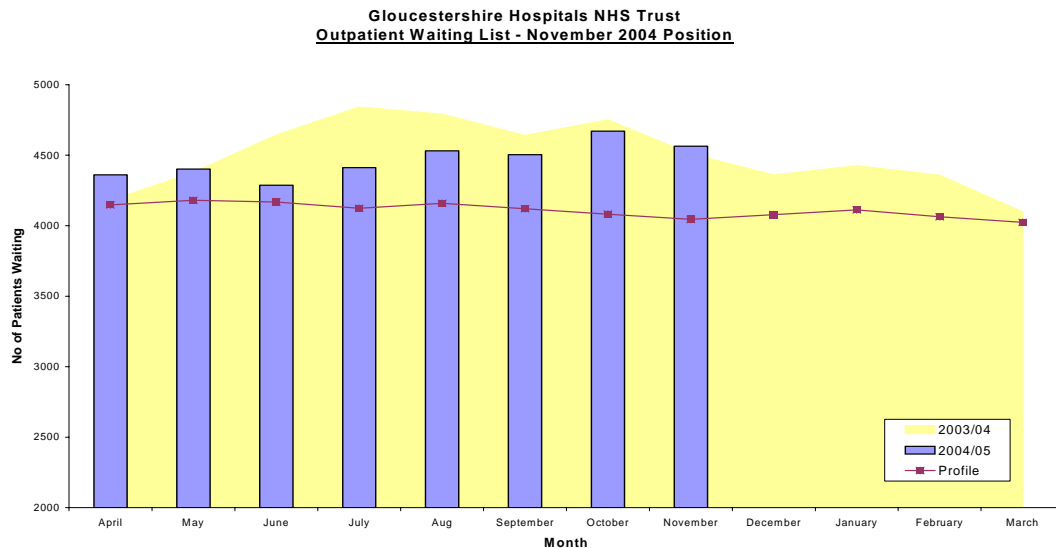
National Standard 2004/05 - To maintain a maximum wait for an outpatient appointment of 4 months (17 weeks).

5.1.1 Gloucestershire Hospitals NHS Foundation Trust

Fig 8 shows the PCT position for outpatient waiting lists with Gloucestershire Hospitals NHS Foundation Trust. During the reporting period there were no reported breaches against the national target. The number of patients waiting in excess of 13 weeks has decreased to 18 from the October position of 46.

The Trust has been in excess of their agreed profile position throughout this financial year. The differential against the outpatient waiting list is mainly seen within Trauma & Orthopaedic although the Trust are experiencing pressures maintaining a 13 week wait within other specialities. We are working with the Trust to understand this position and whether waiting times standards are sustainable long term within the current numbers on the waiting list.

Fig 8 West Gloucestershire Outpatient Waiting List Position compared to profile – GHT



5.1.2 All Providers

The waiting list for outpatients with all Trusts (Fig 9) shows West Gloucestershire PCT above the agreed profile position, for the overall number of patients on the waiting list. This relates to the Gloucestershire Hospitals NHS Foundation Trust position previously reported.

Fig 9 West Gloucestershire Outpatient Waiting List Position – All Trusts

Outpatient Waiting List as at November 2004	Total 0 - 13 weeks	Profile 0 - 13 wks	Var	% Var	Total 13 -17 weeks	Profile 13 17 weeks	Var	% Var
Gloucestershire Hospitals Trust	4426	4025	401	10.0%	18	20	-2	-10.0%
Partnership Trust	41	53	-12	-22.6%	5	8	-3	-37.5%
North Bristol NHS Trust	41	61	-20	-32.8%		2	-2	-100.0%
UBHT	36	33	3	10.5%	2	5	-3	-63.1%
Swindon & Marlborough NHS Trust								
Others	21	135	-114	-84.4%		56	-56	-100.0%
Total	4565	4307	258	6.0%	25	91	-66	-72.7%

During November, 5 patients waited in excess of 17 weeks for an outpatients appointment with a Welsh Provider. All patients have been contacted and asked if they wish to remain waiting with their current provider.

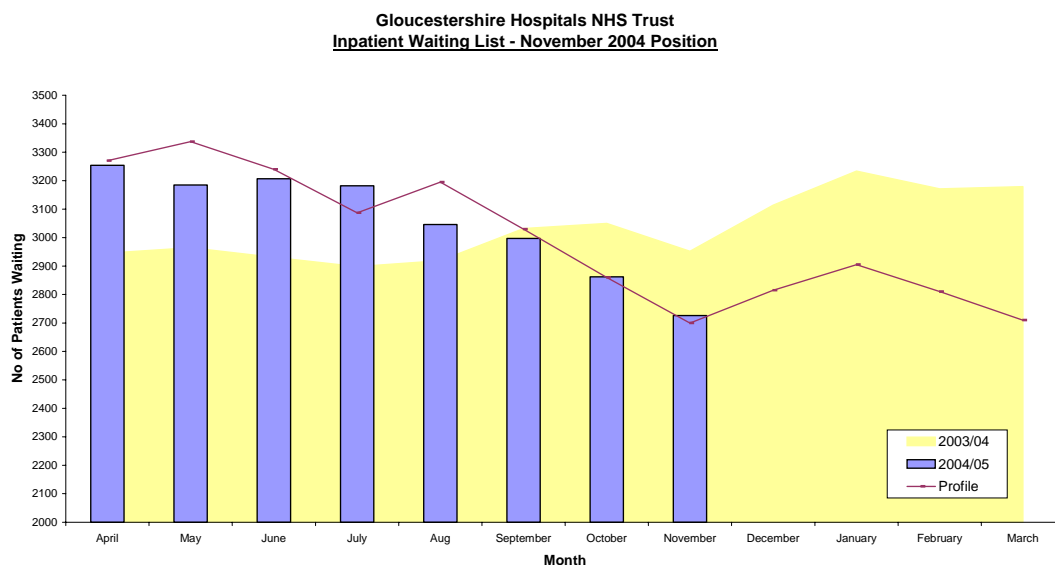
5.2 Elective Inpatient Waiting List

National Target 2004/05 – to continue to maintain a maximum wait for surgery of 9 months and a reduction of 80% by March 2005 in the number of over 6 month waiters from the March 2003 baseline.

5.2.1 Gloucestershire Hospitals NHS Foundation Trust

The current number of patients waiting for inpatient treatment is 2,726, which is slightly above the agreed profile of 2,700. Of those waiting, 91.7% are experiencing a wait of 6 months or less. The number of patients who are waiting over 6 months for treatment has remained static with 228 in October and 226 at the end of November. There are no patients waiting over 9 months.

Fig 10 West Gloucestershire Elective List Size compared to profile – GHT, November 2004



5.2.2 All Providers

The inpatient waiting list position for West Gloucestershire PCT is shown in **Fig 11**. The total number of patients waiting for treatment is 3,019 against a profile of 3,487.

Of those who were on the list at the end of November, 91.1% were waiting 6 months or less. There is 1 patient waiting in excess of 9 months for inpatient treatment with a Welsh Provider. The patient has been contacted, offered an alternative provider but has chosen to remain waiting with their current provider.

Fig 11 West Gloucestershire PCT – Inpatient Waiting List Position

Elective Inpatient Waiting List as at November 2004	Wait Bands					TOTAL
	0-3	3-6	6-9	9-12	12+	
Gloucestershire Hospitals Trust	1883	617	226			2726
North Bristol NHS Trust	73	48	31			152
UBHT	38	14	3			55
Swindon & Marlborough NHS Trust	1		1			2
Others	54	22	7	1		84
Total	2049	701	268	1		3019

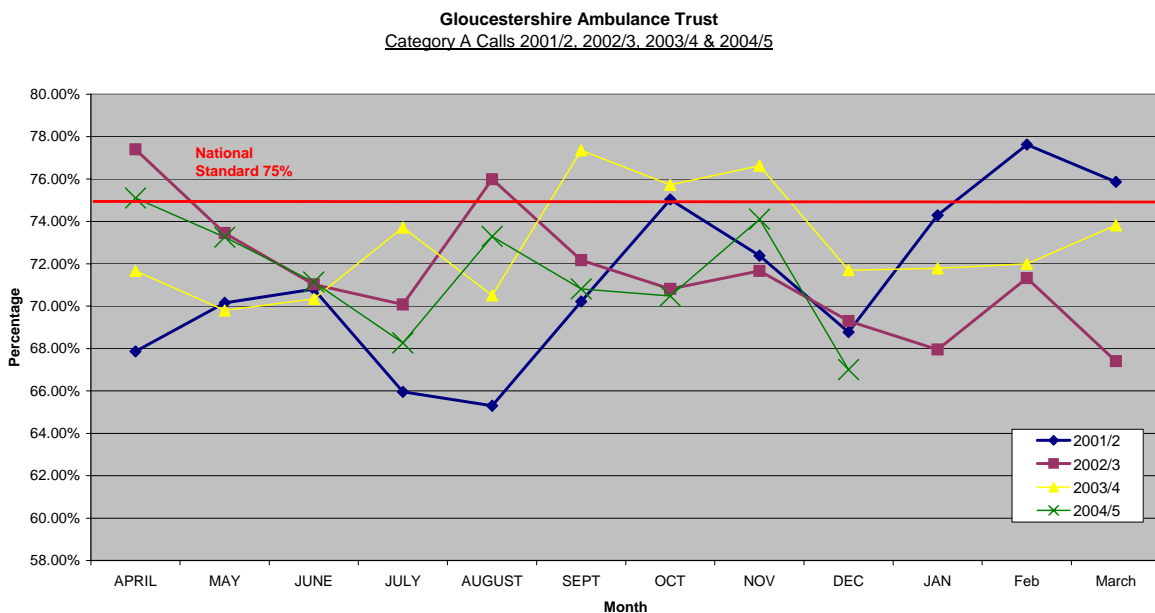
6.0 EMERGENCY PRESSURES

6.1 Ambulance Response to Category A Calls

2004/5 Target:

Ambulance Trusts to meet the target to respond to 75% of Category A calls within 8 minutes.

Fig 12 Gloucestershire Ambulance Service NHS Trust Category A performance 2001/2 to 2004/5.



In December the Ambulance Trust performance against the Category A (life threatening calls) 8 minute target of 75% was 67.01%, compared to 74.11% in November. This represents a significant reduction in performance for the Trust.

The Trust has a second Category A target to monitor and that is Category A (life threatening calls) 19 minutes. The definition for this is that a fully equipped and appropriately staffed ambulance must reach the patient within 19 minutes from the call in 95% of all occasions. The Trusts current performance against this target is 93.15%.

Performance against Category B calls (95% of all calls answered in 19 minutes) has remained fairly constant.

	July	August	September	October	November	December
Category B	93.92%	92.61%	93.36%	92.44%	93.06%	93.15%

The Trust were required to provide a report detailing the problems which had led to the poor performance against targets in December. The following issues were identified

- Unprecedented level of calls; 15% higher than the same period in the previous year (equates to 450 calls).
- Operational problems at the Gloucestershire Hospitals Trust led to ambulances being detained when handing over patients thereby leading to lost unit hours.
- Problems dispatching staff from Staverton and particular problems related to shift change over times (this period has been identified as the time when most calls fail to be seen within targets).

The Ambulance Trust and Cheltenham and Tewkesbury PCT met with the Strategic Health Authority on the 7th January to discuss their current problems and it was agreed that they would produce a new action plan to deal with the key operational problems. These have been agreed with the SHA as

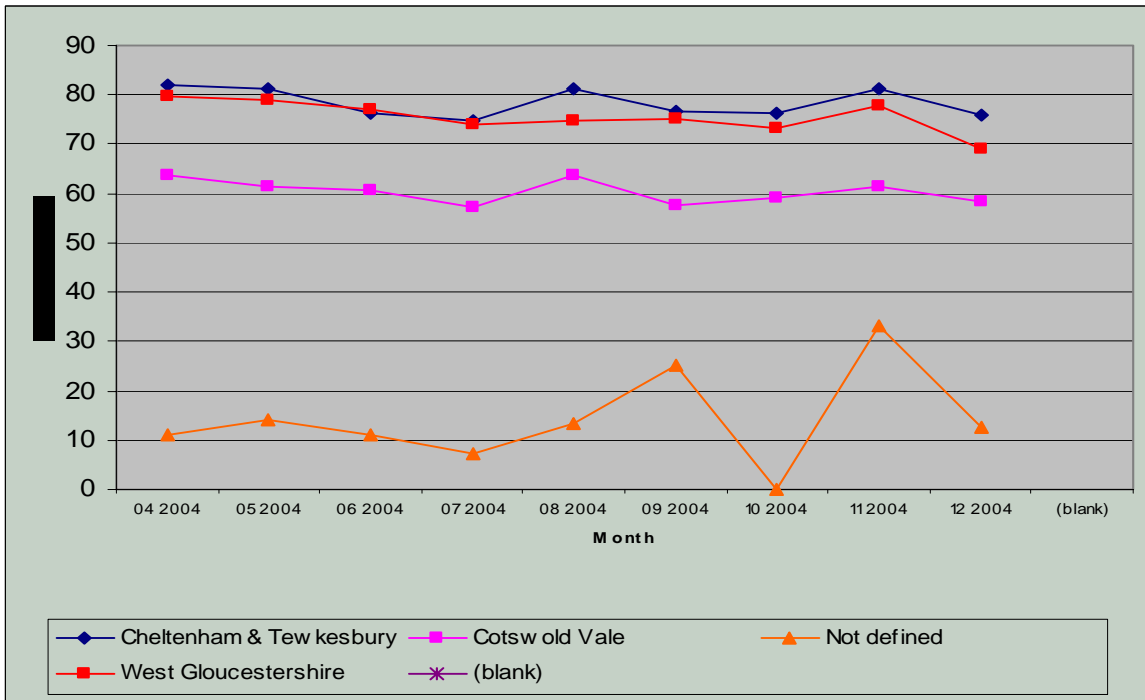
- Management of the control room and current staffing levels
- Computer Aided Dispatch (CAD) system is out of date and needs replacing
- Shift change over patterns and the ability to respond to calls.

The Trust have yet to complete their new action plan, but actions that are already instigated are as follows

- The Trust have a new post out to advert, for a control manager
- They have commenced a tendering process for a new CAD system
- They are looking at new shift patterns that will stagger the change over times for crews.

Figure 13 shows the performance of the Ambulance Trust against the Category A standard by PCT area. From this it can be seen that standards are usually met for the residents of West Gloucestershire and Cheltenham and Tewkesbury PCTs, but that the Trust struggle to meet the standard in Cotswold and Vale PCT where issues of rurality and distance cause difficulties in achieving targets.

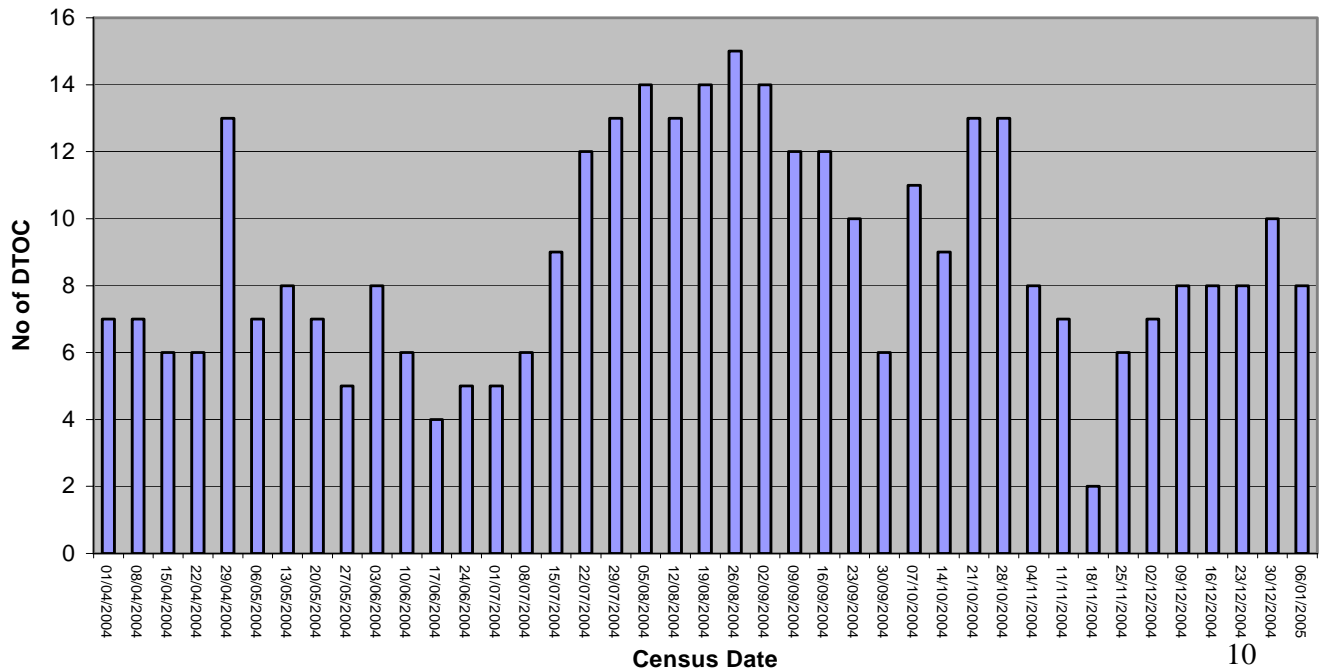
Fig 13 Gloucestershire Ambulance Service NHS Trust Category A performance by PCT



7.0 DELAYED TRANSFERS OF CARE

Target - the number of acute delayed transfers of care attributable to West Gloucestershire PCT is zero.

Figure 14 Delayed transfers of care February 2004 to January 2005.



8.1 West Gloucestershire PCT Delayed Transfers of Care

Fig 14 Shows the total number of delayed transfers of care in acute hospital beds for West Gloucestershire PCT patients for the period 1st April 2004 to 6th January 2005.

The number of delayed transfers of care as at the 6th January is 8, against a target of 0. Of those waiting

- 2 patients/families are exercising choice. Of these one was offered, but refused Great Western Court as an interim placement.
- 3 patients are waiting for a care package at home. Of these 2 have discharge dates and the remaining person is waiting for carers to be identified to fulfil their identified needs.
- 3 patients are waiting for a residential home placement. Of these one is already discharged and the remaining 2 have yet to identify a suitable placement.

8.2 Gloucestershire Health Community Delayed Transfers of Care

Target 2004/5- The number of acute delayed transfers of care across the County should be zero

The total number of Gloucestershire residents who have had delayed transfers of care in acute hospital beds is 19 as at the 6th January 2005, 11 within Gloucestershire Hospitals NHS Foundation Trust beds and 8 within Cotswold & Vale PCT beds.

9.0 PRIMARY CARE ACCESS

National Target: By December 2004, 100% of practices will be able to offer an appointment with a GP within 48 hours and an appointment with a Primary Care Professional within 24 hours.

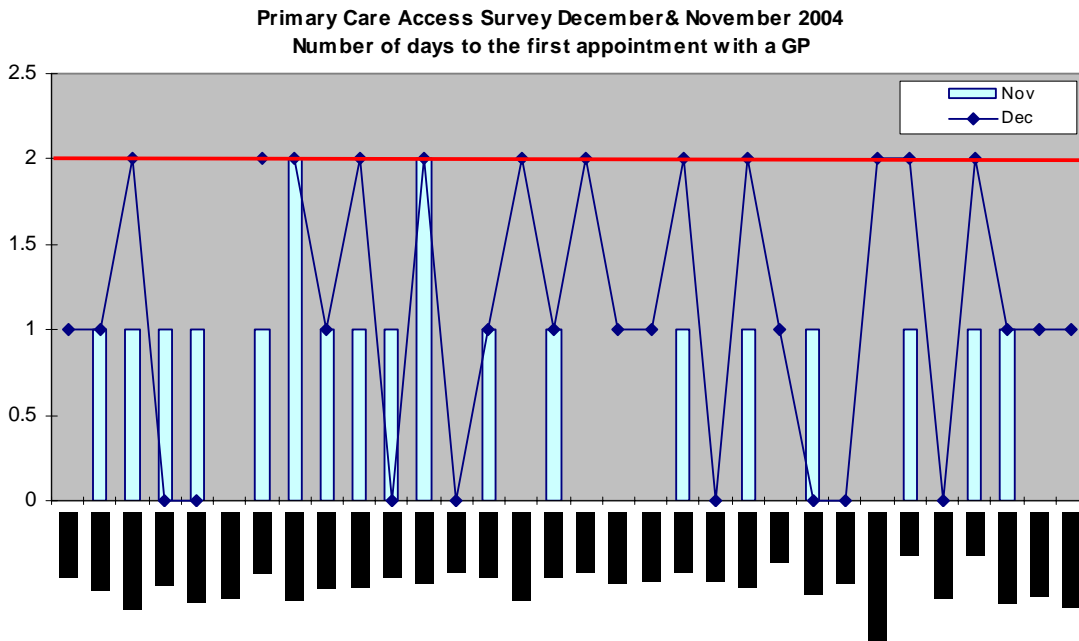
The survey carried out in December 2004 shows that 100% of practices were able to offer an appointment within 48 hours for a GP and 100% of practices were able to offer an appointment within 24 hours for a Primary Care Professional (PCP). It should be noted that if a practice is not able to offer an appointment with a PCP within 24 hours but can offer an appointment with a GP, under national definitions, this is recorded as achievement against both targets.

The results of the Primary Care Access Survey (December 2004) are shown below (**Fig 15 & 16**): -

Fig 15 Number of days to the first appointment with a Primary Care Professional



Fig 16 Number of days to the first appointment with a GP



10.0 RECOMMENDATIONS

Members are asked to note the contents of this report and the actions that are being taken to maintain and improve performance.

Appendix 1
Agenda Item 12i

West Gloucestershire PCT – Gloucestershire Hospitals NHS Foundation Trust Outpatient Activity (April and November 2004) for non episode based outpatient attendances.

Attendance Based		Actual Activity		Planned YTD Activity		Variance			
		First	Follow up	First	Follow up	First		Follow up	
						Actual	%	Actual	%
104	Colorectal Surgery	1118	1637	1118	2041	0	0%	-404	-20%
106	Upper Gastrointestinal Surgery	573	1061	514	1340	59	11%	-279	-21%
130	Ophthalmology Outpatients	3960	12653	4039	14868	-79	-2%	-2215	-15%
140	Oral Surgery	1140	2235	907	2022	233	26%	213	11%
143	Orthodontics	265	3755	390	4433	-125	-32%	-678	-15%
160	Plastic Surgery		3	1	1	-1	-100%	2	200%
171	Paediatric Surgery	57	100	59	137	-2	-3%	-37	-27%
191	Pain Management	412	747	401	1969	11	3%	-1222	-62%
300	General Medicine	773	1197	605	1477	168	28%	-280	-19%
301	Gastroenterology	1027	1296	1032	1436	-5	0%	-140	-10%
302	Endocrinology	441	1287	277	1965	164	59%	-678	-35%
303	Haematology [Clinical]	126	1537	94	1148	32	34%	389	34%
320	Cardiology Outpatients	1028	1769	654	1952	374	57%	-183	-9%
340	Thoracic Medicine	542	1790	577	2150	-35	-6%	-360	-17%
360	Genito-Urinary Medicine								
370	Medical Oncology	19	32	11	26	8	73%	6	23%
410	Rheumatology Outpatients	411	1693	390	1768	21	5%	-75	-4%
420	Paediatrics	1843	4327	961	4121	882	92%	206	5%
501	Obstetrics using Bed or Delivery	2193	1689	2100	1812	93	4%	-123	-7%
800	Clinical Oncology	466	2748	523	2728	-57	-11%	20	1%
830	Immunology	24	40	28	47	-4	-14%	-7	-15%
TOTAL ATTENDANCE BASED		16418	41596	14681	47441	1737	12%	-5845	-12%