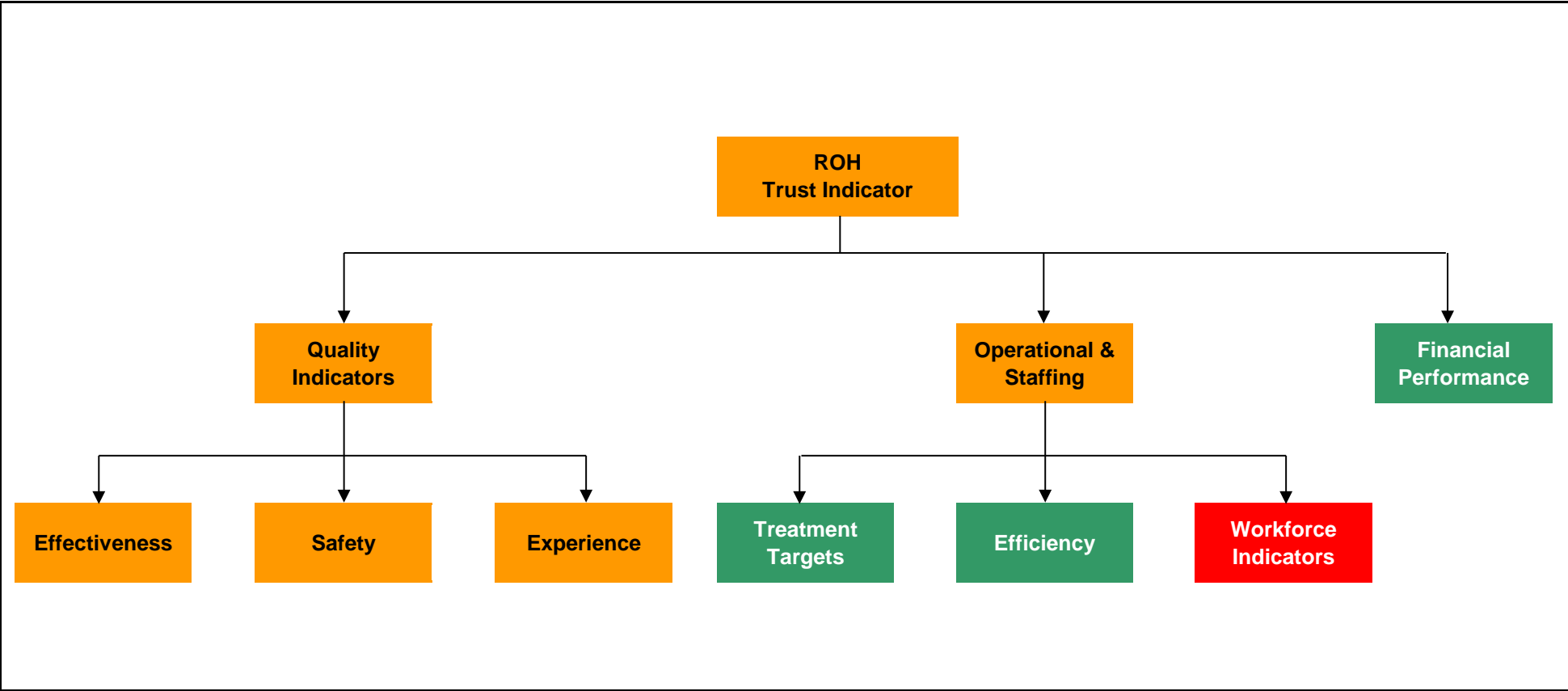





Royal Orthopaedic Hospital NHS Foundation Trust
Corporate Performance Report
For the Quarter Ending June 12



Quarterly Detailed Report
Executive Summary as at June 12

Headlines

-  All admitted patient care targets were achieved for June, with 62 additional patient spells discharged
-  There were 2 SIRIs and 1 reportable case of Cdiff in June
-  The Trust posted a year to date surplus of £396,000 for Quarter 1, £116,000 ahead of plan

Trust Summary

At the end of Quarter 1, the Trust has achieved compliance with all existing targets included in Monitor's Compliance Framework, including the achievement of the new 92% RTT target relating to incomplete pathways. This was flagged as a risk to Monitor in our Quarter 1 declaration.
















The Trust exceeded its admitted patient target by 62 spells in June, which contributed towards an in month surplus of £193,000 against a planned monthly surplus of £38,000. This has increased the year to date position to £396,000, which is £116,000 ahead of the planned position. The Trust has therefore achieved its planned Monitor Financial Risk Rating of 4 for Quarter 1.

The first reportable case of CDiff in 2012/13 was picked up in June, however the Trust remains below the year to date trajectory based on our annual ceiling of 6 cases. There was a second CDiff case in the Trust in June, however this does not meet the criteria to be reported against our annual target.

Sickness continues to be of concern, standing at 4.7% in June which is 1% ahead of targeted levels. A verbal update will be given to the board on actions being put in place to address this.

Sickness levels have contributed to a further overspend against pay budgets in June, with increases in bank expenditure, particularly on the wards. This combines with the ongoing pressures from junior doctor locums and agency theatre staffing, which remain well above their expenditure plan. Recruitment to posts within theatres is expected to have a significant impact on theatre agency staffing by the end of Quarter 2.




Despite increases in activity in June, the Trust ends the quarter £460,000 behind planned income levels. There are particularly concerns around activity levels in spinal surgery in Quarter 1, which raises strategic risks as this activity is now commissioned more centrally through the Midlands and East Specialist Commissioning Group. Further details can be found on the Financial Performance summary on page 10 and the Income and Expenditure summary on Page 14.

Key Executive Targets		June 12			Detail Page
		Target	Actual	Trend	
Efficiency & Workforce	Incomplete Pathway 92% Target	92%	93.0%		6
	Theatre Utilisation	81%	78.9%		8
	Unused Theatre Sessions	<23	50		8
	Additional Sessions	38	37		11
	Anaesthetic Additional Hours Payments	£0	£25,000		11
	Sickness	3.7%	4.7		9
Safety, Experience & Effectiveness	SIRIs	0	2		3
	Complaints	<=12	17		4
	CQUINS	100%	100%		11
	Total Hospital Related Deaths	0	0		5
	CDIFF	6 (full year)	1 (YTD)		5
Financial	Surplus	£280,000	£396,000		10
	CIP	£2,717,000	£2,745,000		10
	Agency Expenditure	£79,000	£127,000		11
	Locum Doctor Expenditure	£39,000	£98,000		11

Quarterly Detailed Report

Quality Indicators as at June 12

Headlines

-  There were 2 SIRIs in June. Further details are provided in the Patient Safety Report
-  There were 2 cases of Cliff identified in June, although only 1 is reportable against the Trust's local target of 6 for the full year
-  There were only 8 drug errors reported in June, the lowest monthly total in the last 12 months

	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position	
Safety	Never Events	1	1	0	0	0	0	0	0	0	0	0	0	0	
	Total SIRIs	8	4	5	4	4	1	1	5	1	2	0	2		
	SIRI per 1000 bed days	2.32	1.20	1.46	1.20	1.22	0.29	0.37	0.35	1.52	0.30	0.69	0.00	0.65	
	Total Incidents	126	107	136	109	122	118	83	87	115	114	102	96	132	
	Incidents per 1000 bed days	36.61	32.19	39.63	32.72	37.21	34.14	30.49	30.11	34.88	33.71	35.09	29.23	42.68	
	Incidents - Inpatients											39	36	41	
	Incidents - Outpatients / Specialised Services											27	19	30	
	Incidents - Theatres / Anaesthetics											16	20	27	
	Incidents - Support Services											16	16	22	
	Incidents Other	2	4	1	0	7	6	1	2	0	4	4	5	12	
	Incidents CSU A	34	36	36	32	32	34	18	27	34	30				
	Incidents CSU B	41	28	36	32	31	30	21	17	32	29				
	Incidents CSSU	40	34	59	36	45	45	35	38	39	49				
	Incidents NCSU	9	5	4	9	7	3	8	3	10	2				
	Total Drug Errors	9	9	14	13	9	8	10	17	10	11	13	15	8	
	Drug Errors per 1000 bed days	2.61	2.71	4.08	3.90	2.74	2.31	3.67	5.88	3.03	3.25	4.47	4.57	2.59	
	Total Medicine Reconciliation Errors	0	0	0	0	1	0	0	0	0	0	0	0	0	
	Medicine Rec Errors per 1000 bed days	0.00	0.00	0.00	0.00	0.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Mixed Sex Occurrences	0	0	0	0	1	0	0	0	0	0	0	0	0	
	% Patients Assessed for Risk of VTE	93.19%	90.37%	93.91%	93.37%	95.73%	91.22%	90.07%	90.02%	90.45%	92.00%	90.89%	91.34%	*	
	Incidence of Hospital Related VTE	1	1	4	2	1	2	0	0	0	0	0	0	0	
	Total Patient Falls	2	5	9	7	6	13	8	4	5	5	13	3	8	
	Patient Falls - Inpatients											11	3	4	
	Patient Falls - Outpatients / Specialised Services											2	0	4	
	Patient Falls - Theatres / Anaesthetics											0	0	0	
	Patient Falls - Support Services											0	0	0	
	Patient Falls Other	0	1	0	0	0	0	0	0	0	0	0	0	0	
	Patient Falls CSU A	2	4	4	6	5	5	5	4	3	2				
	Patient Falls CSU B	0	5	5	1	1	6	3	0	2	3				
	Patient Falls CSSU	0	0	0	0	0	2	0	0	0	0				
Patient Falls per 1000 bed days	0.58	1.50	2.62	2.10	1.83	3.76	2.94	1.38	1.52	1.48	4.47	0.91	2.59		
% Harm Free Care											80%	94%	*		

Safety Commentary

Serious Incidents requiring investigation (SIRI)

There were 2 SIRIs in month one in anaesthetics, the other in relation to a potential delay in diagnosis.

Incident reporting

There has been an increase in reported incidents in month with a decrease in medicines incidents

Quarterly Detailed Report
Quality Indicators as at June 12

	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position
Experience	Compliments to Complaints Ratio	1:11	1:6	1:8	1:10	1:15	1:10	1:25	1:10	1:13	1:24	1:11	1:17	1:16
	Total Complaints	8	6	20	11	11	22	10	16	14	10	13	9	17
	Complaints reverted to informal <48 hrs	6	0	2	0	0	1	1	1	1	0	0	0	3
	Formal	2	6	18	11	11	21	9	15	13	10	13	9	14
	Complaints per 1000 bed days	2.32	1.81	5.83	3.30	3.35	6.37	3.67	5.54	4.25	2.96	4.47	2.74	5.50
	Complaints - Inpatients											2	4	4
	Complaints - Outpatients / Specialised Services											4	3	7
	Complaints - Theatres / Anaesthetics											2	0	1
	Complaints - Support Services											5	2	2
	Complaints Other	0	1	3	0	0	0	0	0	1	0	0	0	0
	Complaints CSU A	0	2	5	6	2	6	2	5	4	2			
	Complaints CSU B	2	2	6	3	6	9	6	7	6	7			
	Complaints CSSU	0	1	4	2	3	6	1	3	2	0			
	Complaints NCSU	0	0	0	0	0	0	0	0	0	1			
	% Complaints responded to in agreed timescale											70%	85%	43%
	Total PAL Contacts	41	46	56	48	56	68	45	49	44	66	54	58	60
	PALS Contacts per 1000 bed days	11.91	13.84	16.32	14.41	17.08	19.68	16.53	16.96	13.35	19.52	18.58	17.66	19.40
	Total Compliments	87	35	150	108	165	216	248	163	188	235	146	157	275
	Compliments per 1000 bed days	25.28	10.53	43.71	32.42	50.32	62.50	91.11	56.42	57.02	69.49	50.22	47.81	88.91
	Food - Real Time Patient Survey	66.00%	54.96%	71.40%	59.87%	76.62%	76.65%	67.61%	65.56%	72.73%	66.67%	58.55%	65.88%	71.05%
Friends and Family Net Promoter Score											76.02%	77.29%	79.73%	

Experience Commentary

Complaints/PALS

There was an increase in formal complaints from 9 to 14 in month in particular within the outpatient directorate. The overall themes for June's complaints were:

- Clinical Treatment/Outcome x 3
- Clinical Pathway x 4
- Nursing Care x 2
- Organisation/Communications/Administration x 5

Of the 7 complaints requiring a response in June, only 43% (3/7) were responded to in the agreed timescale.

Quarterly Detailed Report
Quality Indicators as at June 12

		Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position
Effectiveness	Total Hospital Deaths	1	0	1	1	0	0	0	1	0	0	1	0	0	
	Hospital Deaths per 1000 bed days	0.29	0.00	0.29	0.30	0.00	0.00	0.00	0.35	0.00	0.00	0.34	0.00	0.00	
	Unexpected Hospital Deaths (Total)	1	0	1	1	0	0	0	0	0	0	0	0	0	
	Total ROH Reportable MRSA	0	0	0	0	0	0	0	0	0	0	0	0	0	
	ROH Reportable MRSA per 1000 beds	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	
	Total Non Reportable MRSA (previously "Other")	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Non Reportable MRSA per 1000 beds	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	
	MRSA Number of Patients Screened	1089	1136	1092	1305	1212	1188	980	1154	1140	1190	956	1145	883	
	MRSA Number of Elective Admissions to be Screened	1051	1089	1103	1156	1110	1050	917	1036	1102	1171	932	1090	*	
	MRSA % Screened	103.6%	104.3%	99.0%	112.9%	109.2%	113.1%	106.9%	111.4%	103.4%	101.6%	102.6%	105.0%	*	
	Total ROH Reportable CDIF	1	0	0	1	0	0	0	1	1	0	0	0	0	1
	ROH Reportable CDIF per 1000 bed days	0.29	0.00	0.00	0.30	0.00	0.00	0.00	0.35	0.30	0.00	0.00	0.00	0.00	0.32
	Total Non Reportable CDIF Cases (previously "Other")	0	0	0	0	0	0	0	0	0	0	0	0	0	1
	Non Reportable CDIF per 1000 bed days	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	0.32
	Total ROH Reportable MSSA	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	ROH Reportable MSSA per 1000 bed days	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	0.00
	Total Non Reportable MSSA Cases (previously "Other")	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Non Reportable MSSA per 1000 bed days	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	0.00
	Total ROH Reportable E-Coli	0	0	0	1	0	0	0	1	0	0	0	0	0	0
	ROH Reportable E-Coli per 1000 bed days	0.00	0.00	0.00	0.30	0.00	0.00	0.00	0.35	0.00	0.00	0.00	0.00	0.00	0.00
	Total Non Reportable E-Coli Cases (previously "Other")	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Non Reportable E-Coli per 1000 bed days	0.00	0.00	0.00	0.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Total Pressure Ulcers	8	3	7	4	3	2	2	4	4	5	4	2	1		
Pressure Ulcers per 1000 bed days	2.32	0.90	2.04	1.20	0.91	0.58	0.73	1.38	1.21	1.48	1.38	0.61	0.32		
Total Hospital Readmissions	30	26	36	28	33	14	34	16	22						
Total Readmissions per 1000 bed days	8.72	7.82	10.49	8.41	10.06	4.05	12.49	5.54	6.67						

Effectiveness Commentary



C Diff

There were 2 cases of *clostridium difficile* in month. In line with the new DH testing methodology for this year only one case is reportable and will count against the local target of 6.

Further detail on all of the above is presented in the Patient Safety report

Quarterly Detailed Report
Quality Indicators as at June 12

Headlines

-  All 18 week and cancer waiting time targets have been met for Quarter 1
-  There was a slight rise in the admitted backlog in June, with a corresponding deduction in the non admitted total

	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position
Treatment Targets	Referral to treatment average of non admitted %	95.49%	95.21%	95.08%	95.03%	95.16%	95.00%	95.00%	95.09%	95.15%	95.10%	95.34%	96.15%	97.02%
	Non admitted 18wk performance 95th Percentile (National Target)	17.88	17.95	17.97	17.99	17.93	18.00	18.00	17.98	17.98	17.98	17.93	17.72	17.49
	Non admitted 18wk performance 3 Month Rolling Median Wait (Local Target)	8.24	8.41	8.38	8.32	8.19	7.29	7.80	8.06	8.64	8.43	8.37	8.35	8.61
	Non admitted 18wk performance - CSU A %	97.99%	95.40%	94.43%	94.83%	95.55%	97.31%	95.10%	97.42%	95.73%	95.24%	93.41%	97.02%	97.77%
	Non admitted 18wk performance - CSU B %	90.24%	92.96%	93.85%	93.32%	92.20%	90.91%	93.30%	91.67%	92.56%	93.46%	95.48%	93.95%	94.38%
	Referral to treatment average of admitted %	90.84%	90.59%	90.21%	90.29%	90.02%	90.75%	90.21%	90.04%	90.20%	***91.14%	90.80%	90.90%	90.54%
	Admitted 18wk performance 95th Percentile (National Target)	22.62	22.27	22.44	22.88	22.77	22.86	22.90	22.04	21.52	22.07	22.76	22.99	22.91
	Admitted 18wk performance 3 Month Rolling Median Wait (Local Target)	9.10	9.02	8.70	8.46	8.78	8.91	9.12	9.26	9.64	9.61	9.32	8.95	8.65
	Admitted 18wk performance - CSU A %	93.97%	92.03%	90.87%	91.59%	91.35%	90.32%	91.55%	91.16%	91.54%	91.70%	91.92%	91.21%	89.00%
	Admitted 18wk performance - CSU B %	85.84%	87.69%	89.66%	88.14%	88.17%	86.97%	88.45%	88.29%	87.58%	90.31%	88.89%	90.12%	92.23%
	Incomplete Pathway - 18wk 92% Target (National Target)	91.27%	90.74%	90.47%	90.73%	90.51%	91.31%	90.72%	91.06%	91.02%	91.30%	92.01%	92.88%	92.96%
	Incomplete Backlog - 18wk performance 95th Percentile (National Target)	24.07	24.43	24.74	24.46	23.66	22.74	23.64	23.63	23.22	22.81	22.31	20.76	21.05
	Non admitted Backlog - Pathways waiting >18 wks(End of Month)	279	267	265	253	281	228	194	185	193	162	136	123	111
	Admitted Backlog - Pathways waiting >18 wks(End of Month)	322	360	392	377	362	357	401	401	396	388	373	341	344
	Total Backlog - 18 week pathways waiting >18 wks(End of Month)	601	627	657	630	643	585	595	586	589	550	509	464	455
	Arthroplasty 18 week pathways waiting >18 wks(End of Month)	29	19	28	34	27	18	15	19	16	25	11	10	12
	Arthroscopy 18 week pathways waiting >18 wks(End of Month)	65	93	104	89	109	117	141	141	154	137	131	123	108
	Feet - 18 week pathways waiting >18 wks(End of Month)	51	33	34	33	35	40	31	42	54	60	43	28	35
	Hands 18 week pathways waiting >18 wks(End of Month)	58	66	79	63	71	67	53	53	48	44	54	49	31
	Medicine 18 week pathways waiting >18 wks(End of Month)	3	7	15	16	15	6	11	2	3	3	4	5	0
	Oncology 18 week pathways waiting >18 wks(End of Month)	1	0	2	1	2	1	2	2	3	1	4	3	0
	Pain 18 week pathways waiting >18 wks(End of Month)	0	12	11	12	5	0	0	0	1	0	0	0	5
	Spinal 18 week pathways waiting >18 wks(End of Month)	154	178	179	191	196	173	181	176	158	129	117	109	110
	Spinal Deformity 18 week pathways waiting >18 wks(End of Month)	150	118	104	96	109	100	98	99	103	98	103	106	115
	Paeds-Adults 18 week pathways waiting >18 wks(End of Month)	90	99	100	90	71	61	60	50	48	46	36	30	32
	Cancer 2 Week Wait **	100.0%	100.0%	100.0%	96.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%**
	31 Days diagnosis to first treatment **	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%**
	31 Days diagnosis to subsequent treatment **	100.0%	100.0%	100.0%	100.0%	92.9%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%**
	62 day GP urgent referral to treatment **	100.0%	83.3%	75.0%	100.0%	100.0%	75.0%	100.0%	100.0%	90.0%	100.0%	75.0%	100.0%	100%**
	Delayed transfers of care - No of Patients Discharged in Month	17	13	9	16	12	10	10	10	12	7	9	8	10
	Delayed transfers of care - Total Days in Month	119	48	98	117	92	73	42	78	72	52	28	147	88
	Cancelled Ops Not Admitted within 28 days	0	0	0	0	0	0	0	0	0	0	0	0	0
	Data Quality on Ethnic Group	95.23%	95.02%	95.10%	95.35%	96.58%	95.02%	95.29%	95.87%	95.64%	98.48%	96.16%	95.13%	95.2%

* Currently unavailable

** Oncology final figures are submitted to Open Exeter 25 working days after month end




*** RTT data resubmitted

Executive Summary of Treatment Targets

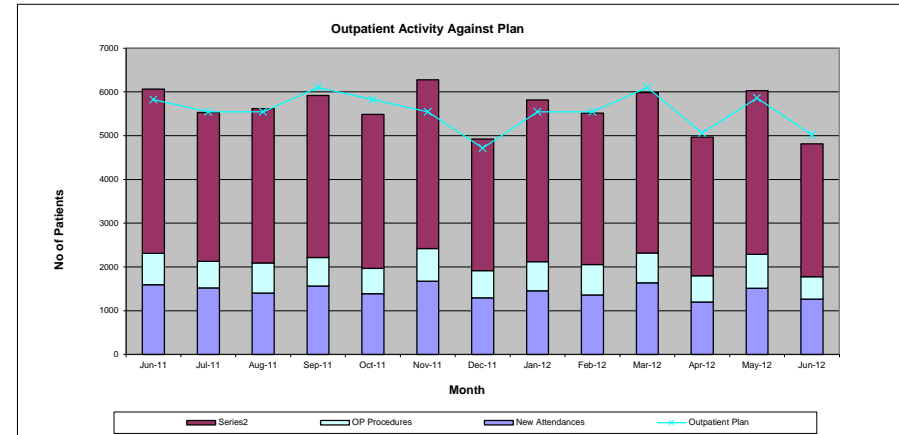
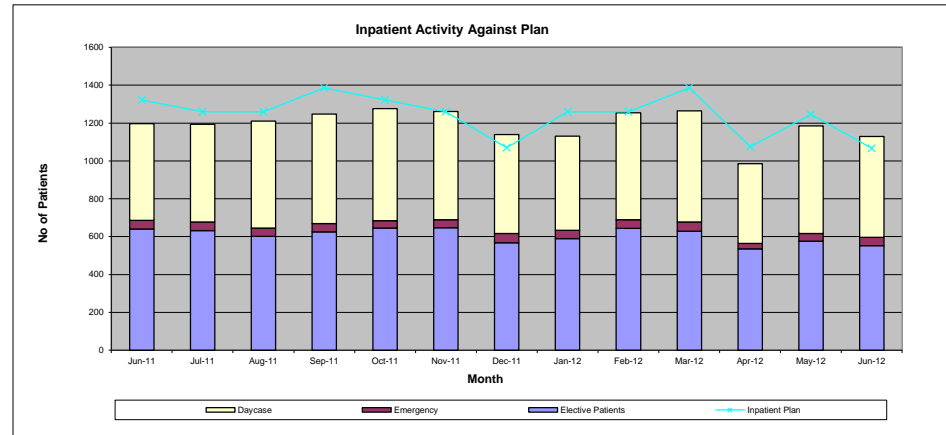
All KPIs for 18 weeks were achieved in month with the only adverse indicator being the admitted backlog which has increased by 3 patients and now sits at 344 patients (+44 against a target of 300). The limited progress in this area indicates that there is a need to address more complex issues relating to cross cover of clinical sessions and changes to ways of working. The implementation of SLM will support these required changes in practice.

Quarterly Detailed Report
Efficiency Indicators as at June 12

Headlines

-  Admitted patient care activity exceeded planned levels in June by 6%, with an additional 62 spells completed in the month
-  The new to review outpatient ratio for T&O patients showed further improvement in June, with the contractual target being achieved for the first time since March
-  Bed Occupancy remained reasonably stable, with an adjusted occupancy of 77.7%

	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position
Efficiency	Total Discharged Elective Patients	641	632	601	626	645	647	590	644	629	535	576	553	
	Total Discharged Non Elective Patients	45	45	44	43	39	42	50	46	49	30	41	43	
	Total Discharged Day Cases	511	517	566	578	593	572	523	498	564	587	420	568	533
	Total New Outpatients	1593	1522	1400	1562	1387	1671	1292	1452	1358	1640	1195	1511	1267
	Total Follow Up Outpatients	3758	3400	3528	3698	3522	3854	3008	3699	3466	3661	3165	3741	3041
	Outpatient Procedures	715	607	689	656	576	752	624	667	694	680	605	776	507
	Elective as % Against Plan	95.8%	99.2%	94.3%	89.3%	96.4%	101.5%	104.7%	92.6%	101.0%	89.7%	98.9%	92.0%	103.1%
	Non Elective as % Against Plan	98.7%	103.6%	101.3%	90.0%	85.5%	96.7%	135.4%	99.0%	105.9%	102.6%	82.2%	97.0%	118.8%
	Day Cases as % Against Plan	84.1%	89.4%	97.8%	90.8%	97.6%	98.9%	106.3%	86.1%	97.5%	92.2%	84.3%	98.5%	107.9%
	% New Outpatients Against Plan	106.2%	106.5%	98.0%	99.4%	92.5%	117.0%	106.4%	101.6%	95.1%	104.4%	92.1%	100.6%	98.5%
	% Follow Up Outpatients Against Plan	105.4%	100.1%	103.9%	99.0%	98.8%	113.5%	104.2%	108.9%	102.1%	98.0%	102.1%	104.2%	98.9%
	% Outpatient Procedures Against Plan	94.2%	84.0%	95.4%	82.5%	75.9%	104.1%	101.6%	92.3%	96.1%	85.6%	90.9%	100.7%	76.8%
	Total T&O New to Review Ratio	2.42	2.43	2.71	2.71	2.71	2.59	2.65	2.81	2.71	2.50	2.99	2.76	2.52
	Arthroplasty / Oncology New to Review Ratio	2.76	3.25	3.06	3.72	3.69	3.38	3.00	3.55	3.64	2.95	3.57	3.84	3.42
	Arthroscopy New to Review Ratio	2.33	2.07	2.38	2.41	2.17	2.30	2.45	2.37	2.27	2.33	2.65	2.59	2.06
	Feet New to Review Ratio	1.92	1.62	4.03	2.26	2.84	2.51	2.47	3.18	2.10	1.97	2.91	2.08	2.79
	Hands New to Review Ratio	2.58	3.45	4.17	3.62	3.12	2.85	3.89	4.15	3.54	3.21	3.19	3.12	2.88
	Paeds New to Review Ratio	2.41	2.94	4.03	3.26	3.95	2.75	3.76	2.71	3.31	3.58	3.02	3.21	3.02
	Spinal New to Review Ratio	1.78	1.42	1.61	1.91	1.38	1.52	1.17	1.27	1.41	1.46	1.68	1.30	1.30
	Spinal Deformity New to Review Ratio	2.84	2.47	1.71	1.99	3.42	2.54	2.49	3.41	3.28	2.80	2.85	2.62	3.28
Pain New to Review Ratio	6.29	2.48	2.84	2.56	3.19	2.68	3.31	3.43	4.51	2.43	3.04	1.55	3.93	
Bed Occupancy	72.61%	68.09%	69.41%	69.00%	65.65%	72.29%	55.77%	60.24%	74.95%	71.84%	71.79%	76.43%	75.58%	
Bed Occupancy (Adjusted)	78.35%	74.63%	78.55%	77.82%	74.43%	80.60%	70.39%	71.17%	84.21%	80.94%	74.10%	78.51%	77.69%	
Bed Occupancy HDU (Adjusted)	92.68%	85.31%	87.64%	88.95%	88.67%	89.00%	92.50%	93.33%	93.40%	95.87%	90.05%	89.95%	95.61%	
Bed Occupancy Paediatrics (Adjusted)	50.00%	69.62%	44.09%	38.33%	33.87%	44.17%	39.66%	31.39%	53.16%	47.31%	58.61%	54.30%	59.17%	
AVLOS for APC (excl day cases)	5.08	4.39	4.62	4.77	4.23	5.34	5.16	4.24	4.42	4.86	5.25	4.49	4.94	



Executive Summary of Efficiency Targets

All admitted patient care activity targets were achieved in June, with performance against plan increasing from 95% of planned activity in May to 106% of planned activity in June. A key focus on activity levels remains in place for Quarter 2 to enable activity shortfalls in April and May to be clawed back. Outpatient activity was slightly below plan, with a more significant shortfall in outpatient procedures.

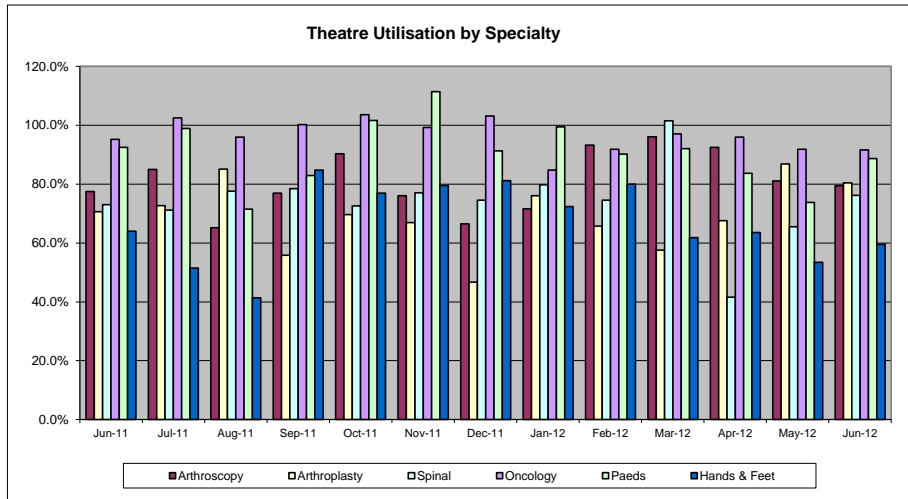
The Trust's contracted first to follow-up ratio for T&O outpatients was achieved in June for the first time in this financial year, with Arthroscopy and Hands showing good improvements since April.

Quarterly Detailed Report
Efficiency Indicators as at June 12

Headlines

- Theatre utilisation increased to 79% in June, but remains below the trustwide target of 81%
- Cancelled operations on the day of surgery equated to 1.4% of all patients treated in the hospital in June

	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position
Theatre Efficiency	Theatre Utilisation - All Specialties	77.6%	79.6%	80.0%	78.9%	84.3%	82.1%	75.4%	78.8%	81.6%	84.8%	72.6%	74.9%	78.9%
	Theatre Utilisation - Arthroscopy	77.5%	85.1%	65.3%	76.9%	90.4%	76.1%	66.5%	71.7%	93.3%	96.1%	92.5%	81.1%	79.5%
	Theatre Utilisation - Arthroplasty	70.6%	72.7%	85.1%	55.8%	69.7%	66.9%	46.7%	76.1%	65.7%	57.6%	67.7%	86.9%	80.5%
	Theatre Utilisation - Spinal	73.0%	71.1%	77.6%	78.5%	72.6%	77.0%	74.6%	79.8%	74.5%	101.6%	41.6%	65.6%	76.3%
	Theatre Utilisation - Oncology	95.3%	102.5%	96.0%	100.2%	103.6%	99.3%	103.2%	84.8%	91.9%	97.1%	96.0%	91.8%	91.7%
	Theatre Utilisation - Paeds	92.6%	98.9%	71.5%	83.0%	101.6%	111.5%	91.3%	99.5%	90.3%	92.0%	83.7%	73.8%	88.7%
	Theatre Utilisation - Hands & Feet	64.0%	51.5%	41.4%	84.8%	76.9%	79.5%	81.2%	72.4%	80.0%	61.8%	63.6%	53.5%	59.6%
	Theatre Session Usage	86.0%	89.4%	87.3%	84.9%	92.5%	89.5%	84.7%	91.40%	93.20%	91.01%	80.83%	83.16%	87.83%
	Theatre Session Usage CSU A	78.8%	81.6%	70.2%	76.8%	86.7%	79.2%	69.6%	83.7%	89.9%	81.3%	83.3%	83.3%	85.0%
	Theatre Session Usage CSU B	94.4%	98.5%	93.2%	94.3%	99.5%	101.9%	101.6%	101.0%	97.0%	102.4%	78.4%	82.8%	90.7%
	In Session Usage	90.3%	89.0%	91.6%	93.0%	91.2%	91.8%	89.1%	86.2%	87.5%	93.2%	89.79%	90.02%	89.88%
	In Session Usage CSU A	90.6%	88.3%	94.3%	92.9%	91.4%	92.9%	91.1%	87.9%	88.4%	90.5%	89.9%	88.7%	86.6%
	In Session Usage CSU B	90.0%	89.8%	89.1%	93.1%	90.9%	90.4%	87.5%	84.4%	86.5%	95.8%	89.7%	91.4%	92.9%
	Unused Theatre Sessions											68	81	50
	Total Cancelled Operations (On Day or Day Before)	96	43	85	119	112	105	82	97	112	70	72	74	88
	Total Cancelled Operations by Hospital (On Day)	8	2	4	15	13	11	13	8	13	8	3	15	13
	Cancelled by CSU A (On Day)	0	1	1	4	7	4	3	4	2	1	1	1	3
	Cancelled by CSU B (On Day)	1	0	1	2	3	4	6	4	5	2	1	11	9
	Cancelled by Theatres (On Day)	7	1	2	9	3	3	4	0	6	5	1	3	1
	% Cancelled Operations by Hospital	0.7%	0.2%	0.4%	1.2%	1.1%	1.0%	1.3%	0.8%	1.2%	0.8%	0.3%	1.4%	1.4%
No of Additions to National Joint Register - Hips	125	118	144	111	114	*	79	104	118	107	102	130	105	
No of Additions to National Joint Register - Knees	87	109	105	92	76	*	65	73	93	111	74	82	81	





Executive Summary of Treatment Targets

Theatre utilisation increased to 78.9% in June, but remains below the target of 81%. The increase related in improvements in the theatre sessional usage to 88%, whilst in-session usage remained stable at 90%. Most sub-specialties achieved, or were close to, their targeted utilisation with the exception of Hands & Feet, where utilisation was below 60% for the second successive month.

There were 13 cancelled operations on the planned day of surgery in June, which equated to 1.4% of all operations. This is in line with cancellations in May, but slightly higher than the average for 11/12.

Quarterly Detailed Report
Workforce Indicators as at June 12

Headlines

-  Sickness remains a concern, with the trustwide sickness rate sitting at 4.7% for June
-  Agency expenditure also remains well above budgeted levels, however positive steps have been taken to limit agency usage in theatres which will impact on the figures in Quarter 2

	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position
Workforce	Total WTE Employed	766.6	758.6	761.5	763.1	763.2	763.3	756.1	751.4	762.8	756.8	750.3	748.1	752.8
	Total WTE Employed as % of Establishment	86.95%	85.40%	85.10%	85.00%	84.58%	89.00%	84.69%	95.2%	96.1%	95.2%	96.6%	93.4%	91.9%
	Staff Turnover (%)	11.3%	11.8%	11.7%	11.7%	11.8%	11.6%	11.1%	11.2%	10.9%	10.8%	11.5%	11.4%	10.5%
	Staff Turnover (%) CSU A	8.8%	10.1%	11.3%	11.8%	12.0%	11.0%	10.9%	9.7%	11%	10.7%	10.1%	11.0%	10.7%
	Staff Turnover (%) CSU B	7.8%	7.9%	8.8%	10.4%	9.2%	9.5%	9.0%	9.3%	9.6%	12%	13.2%	11.9%	10.1%
	Staff Turnover (%) CSSU	12.8%	11.6%	10.5%	9.7%	9.5%	10.2%	9.9%	10.4%	9.8%	9.5%			
	Staff Turnover (%) CSU C											11.5%	11.3%	11.0%
	Staff Turnover (%) CSU D											9.3%	7.7%	8.4%
	Staff Turnover (%) Corporate	19.4%	25.6%	24.6%	21.8%	21.3%	20.1%	19.9%	20.6%	18.7%	17.6%	17.9%	19.3%	13.9%
	Staff Turnover (%) Estates	0.0%	0.0%	0.0%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	14.3%
	Staff Turnover (%) Facilities	7.6%	5.0%	6.6%	7.3%	8.4%	6.9%	7.0%	5.8%	3.8%	3.8%	7.4%	7.4%	7.4%
	Stability %	87.2%	88.5%	88.4%	88.7%	86.9%	87.2%	87.0%	86.3%	87.3%	87.3%	86.9%	87.1%	87.8%
	% of Sickness - Trustwide	3.90%	4.50%	2.50%	1.90%	4.9%	4.0%	5.7%	5.7%	5.3%	2.7%	4.3%	5.2%	4.7%
	% of Sickness - Short Term	47.3%	52.6%	46.5%	53.2%	45.8%	45.3%	46.1%	46%	56%	43%	50%	35%	37%
	% Sickness - CSU A	3.10%	3.90%	2.80%	1.30%	4.6%	4.0%	6.2%	5.2%	6.3%	3.8%	7.9%	8.9%	7.6%
	% Sickness - CSU B	2.30%	4.20%	2.20%	2.30%	3.2%	1.3%	2.7%	3.5%	4.1%	1.2%	3.6%	3.2%	3.8%
	% Sickness - CSSU	5.50%	5.10%	2.80%	2.30%	6.5%	6.0%	7.5%	7.8%	5.8%	2.7%			
	% Sickness - CSU C											4.1%	5.8%	5.3%
	% Sickness - CSU D											5.6%	4.9%	5.7%
	% Sickness - Corporate	2.90%	3.00%	0.00%	1.00%	3.1%	2.5%	3.7%	3.5%	2.7%	1.8%	2.6%	2.2%	0.5%
	% Sickness - Estates	0.40%	1.70%	0.50%	0.50%	0.3%	0.0%	0.0%	0.0%	0.7%	0.0%	6.9%	0.2%	0.0%
	% Sickness - Facilities	5.20%	7.40%	6.20%	6.60%	6.1%	3.4%	7.4%	6.9%	8.7%	5.6%	5.3%	5.9%	4.3%
	Agency % of Staff Cost	5.10%	6.30%	6.70%	7.30%	5.40%	6.00%	6.30%	5.2%	6.6%	11.3%	10.3%	6.0%	7.3%
% Staff received mandatory training last 12 months	60%	75%	67%	67%	71%	76%	80%	82%	83%	85%	87%	88%	82%	
Number of Live Disciplinary Cases					7	4	5	5	5	4	4	5	6	

Executive Summary for Workforce Issue

Sickness continues to be of concern in CSU A, CSU C and CSU D and a series of actions will be discussed at SMT and a verbal update given to the Board.

The increase in agency spend relates to Junior Doctors, Governance, Finance and Interpreters. Agency expenditure has decreased in Month 3 in Theatres and is expected to further reduce in September when 9 newly recruited staff take up post. The new staff, together with those recruited for ward vacancies are expected to improve the overall vacancy position.

Quarterly Detailed Report
Financial Performance as at June 12

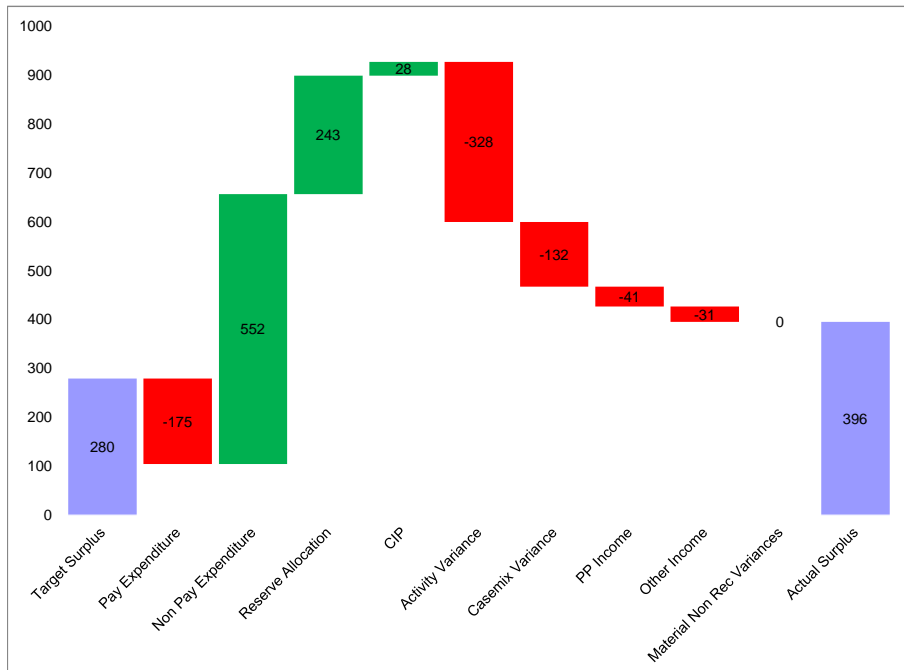
Headlines

- 🍃 The Trust made a surplus of £193,000 in June, increasing the year to date surplus to £396,000
- 🍃 Monitor targets relating to CIP delivery and a Financial Risk Rating of 4 have been achieved in Quarter 1
- 👉 Activity overperformance in June contributed an additional £135,000 of income, but the Trust remains significantly short of plan for Quarter 1

Trust Financial Metrics

	Year to Date		
	Actual	Plan	Risk Rating
EBITDA Margin	7.9%	7.1%	3
EBITDA Achieved (%)	106.3%		5
Net Return after Financing	2.8%	2.0%	4
I&E Margin	2.4%	1.6%	4
Liquidity Risk (Days)	88.4	83.8	5
Overall Risk Rating			4

Trust Performance Bridge Graph



Executive Financial Summary

The Trust made a surplus of £193,000 in June against a planned surplus of £38,000. This increased the year to date surplus to £396,000, which is £106,000 ahead of the Q1 target. The increased surplus for June ensured that the Trust has achieved its targeted Monitor Financial Risk Rating of 4 for the first Quarter of 2012/13.

The additional surplus achieved in June was made as a result of the overperformance on admitted patient care activity in the month. An additional 62 spells were completed in the month, which contributed to a £135,000 improvement in the year to date activity variance. Despite this overperformance, the Trust remains £460,000 behind plan on its PbR income, and continued focus is required in Quarter 2 to address this shortfall. Much of this shortfall is driven by lower than planned activity in spinal surgery, as demonstrated by the underperformance on the Midlands and East Specialist Commissioning contract shown on Page 14 and low theatre utilisation in the early part of the Quarter in particular. The Medical Director is working with the Clinical Director to review how these indicators link together and what steps will be taken to address the current shortfall.

Tight controls on non pay and reserves continue to support the achievement of the year to date financial position, and these controls will remain in place until increases in activity can contribute to the required surplus targets.




The Trust's payroll for Month 3 remained broadly in line with expenditure levels in April and May, with expenditure on agency staffing and medical locums continuing to exceed budgeted levels. Recruitment is taking place to a number of vacancies within theatres, which is expected to result in a significant reduction in the Trust's monthly spend on agency staffing. It is expected that current levels of agency spend will continue until these new staff are in post and inducted. Some savings will begin to filter through in the early part of Quarter 2, with the impact of new Band 6 posts making a more material impact by the end of the Quarter.

Performance against the 2012/13 Cost Improvement Plan remains ahead of target at the end of Quarter 1, with £2,745,000 of savings identified to date. Focus is currently split between the delivery of local schemes for 12/13, and planning work on key schemes for 2013/14 and 2014/15 including the "Getting it Right" project aimed at freeing capacity on site for further activity growth.

Quarterly Detailed Report

CQUIN & Financial Efficiency Indicators as at June 12

Headlines

-  Evidence is still being gathered around Q1 compliance with CQUIN milestones, however indications to date suggest all targets will be achieved in full
-  The overall paybill remains slightly above budgeted levels, although substantive, bank and overtime payments are under plan for Quarter 1
-  Pay pressures remain on agency staffing and medical locums. Further information is provided on the Financial Performance by Clinical Service Unit report

		Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Projected Outturn Position
CQUINS	Dementia														
	Patient Experience														
	Safety Thermometer														
	VTE														
	Alcohol / Smoking / MECC														
	Pressure Ulcer Reduction														
	Appropriate VTE Prophylaxis														
	Safer Transfers of medicine														
	NET Promoter Question														
	FRP Audit														
Electronic Transfer of Outpatient Documentation															
Increasing number of patients on Enhanced Recovery															
Cost of Staffing	Total Paybill											£3,145,000	£2,993,000	£3,082,000	
	Substantive Pay Total											£2,609,000	£2,642,000	£2,660,000	
	Bank Pay	£161,000	£196,000	£223,000	£191,000	£152,000	£213,000	£219,000	£216,000	£199,000	£210,000	£199,000	£161,000	£182,000	
	Overtime Pay	£16,000	£18,000	£22,000	£18,000	£12,000	£10,000	£12,000	£15,000	£9,000	£9,000	£11,000	£12,000	£15,000	
	Agency Pay (excluding Medical Locums)											£218,000	£122,000	£127,000	
	Medical Locum Pay											£103,000	£56,000	£98,000	
	ADH Payments - Surgical	£22,000	£20,000	£11,000	£15,000	£14,000	£13,000	£15,000	£13,000	£12,000	£12,000	£24,000	£28,000	£33,000	
	ADH Payments - Clinics											£4,000	£5,000	£9,000	
	ADH Payments - Anaesthetics	£32,000	£20,000	£22,000	£20,000	£16,000	£24,000	£26,000	£28,000	£35,000	£47,000	£28,000	£11,000	£25,000	
	ADH Payments - Spot Work & Strategy	£1,000	£1,000	£3,000	£1,000	£1,000	£1,000	£1,000	£1,000	£19,000	£7,000	£2,000	£1,000	£1,000	
Income & Efficiency	Trust Surplus	£75,000	£155,000	£299,000	£551,000	£906,000	£1,026,000	£1,194,000	£1,383,000	£1,485,000	£1,245,000	-£170,000	£203,000	£396,000	
	Normalised Surplus	£75,000	£155,000	£299,000	£551,000	£906,000	£1,132,000	£841,000	£695,000	£1,020,000	£1,222,000	-£170,000	£203,000	£396,000	
	Total Income	£5,805,000	£5,500,000	£5,707,000	£5,923,000	£5,980,000	£6,934,000	£5,776,000	£4,879,000	£5,900,000	£6,336,000	£5,198,000	£5,837,000	£5,267,261	
	Disputed Income as % of Total	N/A at M3	N/A at M4	0.6%	2.4%	2.6%	3.0%	1.7%	0.5%	0.4%	0.4%	N/A at M1	N/A at M2	N/A at M3	
	CIP	£2,407,000	£2,421,000	£2,618,000	£3,187,000	£3,260,000	£3,375,000	£3,602,000	£3,672,000	£3,978,000	£4,100,000	£2,531,000	£2,640,000	£2,745,000	

Summary

Evidence is still being gathered around Q1 compliance with CQUIN milestones, however indications to date suggest all targets will be achieved in full.

Pay expenditure increased by £89,000 in June, with the main increases relating to payments to medical locums and an increase in bank expenditure in the ward areas.

The Trust is currently finalising payments for the final quarter of 2011/12 with our commissioners, and so no disputes and queries have been raised to date for 2012/13. The Trust expects to collect all income included in the 2011/12 final accounts position.

Quarterly Detailed Report
Financial Risks / Statement of Position as at June 12

Headlines

👉 The Trust held £21.7m of cash at the end of the first quarter, £1m ahead of plan. The key variances relate to the late receipt of material invoices totalling £1.1m

Commentary on Risks and Balance Sheet Movement

Balance Sheet Movement

The key movement on the Statement of Position relates to the increase in cash held to £21.7m against a plan of £20.7m. The increase of cash is due to late receipt of material invoices totalling £1.1m, including charges from BCH for Spinal Deformity Services and several major corporate charges. The timing of the weekly payment run, which fell on 1st July, also increased creditors at the end of the Quarter, as £650k of payments were cleared on the first day of Quarter 2.

Debtor balances are in line with the plan for quarter 1. There is an invoice of £500k outstanding relating to the payment of the Bone Tumour contract from London Strategic Health Authority for month 3, payment has been chased and this will be received by the end of July 2012.

The £785,000 balance in Creditors falling due after more than one year relates to the future liability on the lease for the new MRI scanner.

Debtor days: Debtor days currently stands at **27 days**
 Creditor days: Creditor days currently stands at **65 days**

Debtors > 90 days: Total debts over 90 days is £632k at a percentage of **13.36%** of the total debtor balance
 Creditors > 90 days: Total creditors over 90 days is £242k at a percentage of **2.18%** of the total creditor balance.

STATEMENT OF POSITION	Actual	Plan
	£000	£000
FIXED ASSETS:		
Intangible assets	115	103
Tangible assets	38,985	38,671
Investments	0	0
TOTAL FIXED ASSETS	39,100	38,774
CURRENT ASSETS:		
Stocks and work in progress	2,819	2,887
Debtors	4,726	4,493
Investments	0	0
Cash at bank and in hand	21,693	20,701
TOTAL CURRENT ASSETS	29,238	28,081
CREDITORS:		
Creditors falling due within one year	(11,293)	(9,952)
NET CURRENT ASSETS/(LIABILITIES)	17,945	18,129
TOTAL ASSETS LESS CURRENT LIABILITIES	57,045	56,903
CREDITORS:		
Creditors falling due after more than one year	(785)	(785)
Provisions for liabilities and charges	(417)	(395)
TOTAL ASSETS EMPLOYED	55,843	55,723
FINANCED BY		
TAXPAYER'S EQUITY		
Public dividend capital	38,905	38,905
Revaluation reserve	2,645	2,645
Donated asset reserve	0	0
Available for sale investments reserve	0	0
Other reserves	0	0
Income and expenditure reserve	14,293	14,173
TOTAL TAXPAYERS' EQUITY	55,843	55,723

Quarterly Detailed Report
Financial Cash Flow as at June 12

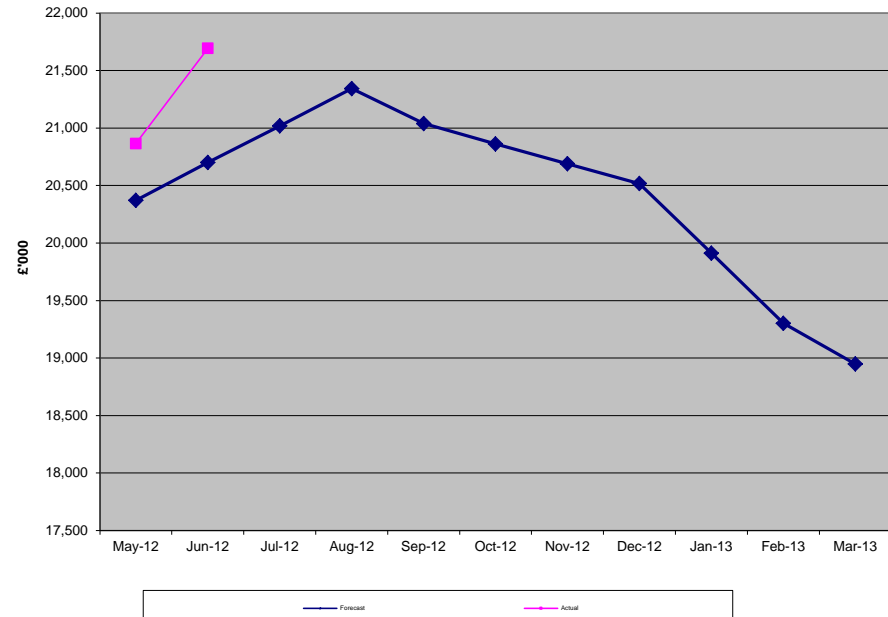
Headlines

👉 The Trust held £21.7m of cash at the end of quarter 1, £1m ahead of plan.

CASHFLOW STATEMENT
As at 30th September 2010

	Actual £'000	Plan £'000	Variance £'000
Earnings Before Interest Taxation & Depreciation	1,247	1,100	147
Movement in Working Capital			
(Increase) / Decrease in Stock	108	40	68
(Increase) / Decrease in Debtors	(233)	0	(233)
Increase / (Decrease) in Creditors	1,644	303	1,341
Increase / (Decrease) in Provisions and Liabilities	0	(22)	22
Total Movement in Working Capital	1,519	321	1,198
Cashflow from Operations	2,766	1,421	1,345
Capital Payments	(477)	(151)	(326)
Cashflow before Financing	2,289	1,270	1,019
Financing			
Interest Received	14	41	(27)
Interest Paid			
Public Dividend Capital Received			
Public Dividend Capital Repaid			
Dividend Paid	(321)	(321)	0
Loans Received			
Loans Paid			
Grants Received			
Grants Paid			
Total Financing	(307)	(280)	(27)
Net Cash Inflow / Outflow	1,982	990	992
Opening Cash Balance	19,711	19,711	0
Closing Cash Balance	21,693	20,701	992

Cash Flow Forecast



Quarterly Detailed Report
Income and Expenditure Statement as at June 12

Headlines

- 📈 The Trust's surplus is £116,000 ahead of plan at the end of Quarter 1, with a shortfall in income offset by non pay savings
- 👉 Performance against PCT contracts is broadly in line with plan, with small shortfalls on the local BSOL contract offset by overperformance in areas such as Dudley and South Staffordshire
- 📉 The contract for Specialist Spinal Surgery with Midlands and East Specialised Commissioning Group is £495,000 behind plan at the end of Quarter 1

	Current Quarter			YTD			FY
	Act	Plan	Var	Act	Plan	Var	Plan
Income	16,782	17,261	(479)	16,782	17,261	(479)	70,542
Pay Costs	(9,465)	(9,352)	(113)	(9,465)	(9,352)	(113)	(37,372)
Drug Costs	(347)	(414)	67	(347)	(414)	67	(1,718)
Other Costs	(5,689)	(6,274)	585	(5,689)	(6,274)	585	(26,243)
EBITDA	1,281	1,221	60	1,281	1,221	60	5,209
Depreciation	(577)	(661)	84	(577)	(661)	84	(2,653)
Net interest	13	41	(28)	13	41	(28)	165
Other	(321)	(321)	0	(321)	(321)	0	(721)
	396	280	116	396	280	116	2,000
Exceptional Items	0			0			0
Net surplus / (Deficit)	396	280	116	396	280	116	2,000
EBITDA %	7.63%	7.07%		7.63%	7.07%		7.38%
CIP	2,745	2,717	28	2,745	2,717	28	

Income and Expenditure Commentary

The Income and Expenditure report for Quarter 1 shows a similar position to the financial performance bridge chart, with lower than planned activity leading to a shortfall of income against plan and corresponding underspends on direct clinical expenditure including drugs. Pay costs are £113,000 over plan at the end of Quarter 1.

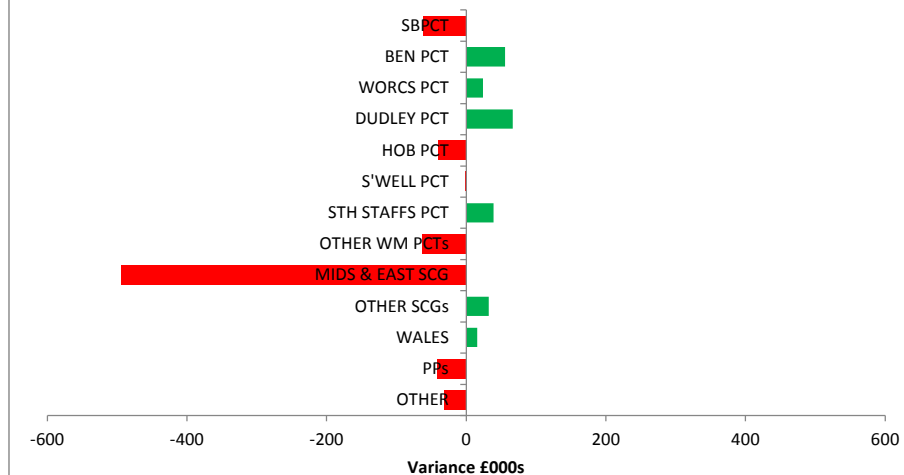
From 1st April 2012, the commissioning of specialist spinal services has been transferred from PCTs to Specialist Commissioning Groups. £9.6 million of work previously funded by West Midlands PCTs has now transferred to a contract held by Midlands and East Specialist Commissioning Group.

This contract is current underperforming by £495,000 at the end of Quarter 1, which equates to a 22% shortfall on activity. This performance links back to the low theatre utilisation within the Spinal Directorate in the early part of this financial year, which stood at 54% for April and May.

Local performance against the Birmingham and Solihull Cluster contract shows a underperformance of £98,000 in the first Quarter, largely relating to the South Birmingham and Solihull areas. This underperformance equates to a 1% shortfall against plan.

The main contract overperformance to date relates to Dudley PCT, which is £67,000 (9%) ahead of plan at the end of Quarter 1, driven by overperformance on non-elective arthroplasty work.

Income against Plan (April - June 2012)



Quarterly Detailed Report

Financial Performance by Clinical Service Unit as at June 12

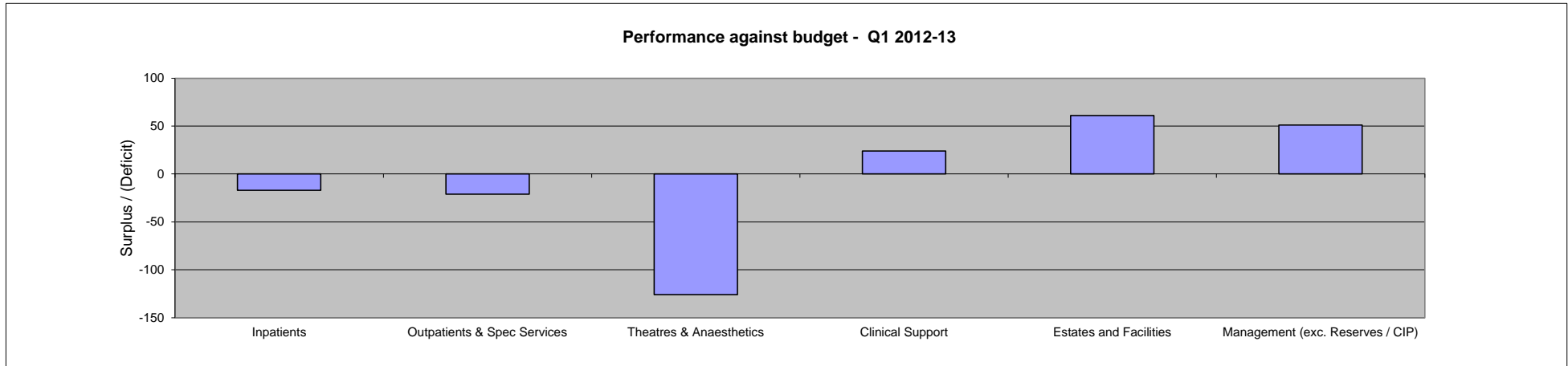
Headlines



Pay pressures on the wards, in theatres and on locum medical staffing are leading to overspends in 3 Clinical Directorates



Clinical Support, and the non Clinical support services, are showing underspends at the end of Quarter 1



Financial Performance Commentary

The Inpatients and Outpatients / Specialised Services Directorates both show minor overspends in Quarter 1, although the Directorate positions mask some material staffing overspends.

The Inpatients Directorate have significant pay pressures on their wards, with a combined overspend of £45,000 on their inpatient wards, partly offset by savings from the closure of the private patient ward. The Outpatients / Specialised Services Directorate has significant cost pressures relating to junior medical staffing cover, however the overall financial position of the Directorate is supported by an £80,000 underspend on Oncology implants as a result of lower than planned activity in Quarter 1.

Clinical Service Unit C is £126,000 overspent at the end of Quarter 1, driven by 3 key pressures

- Theatre Pay - £169k overspent relating to the use of agency staffing to cover qualified vacancies. Recruitment is ongoing for these posts, and agency usage is planned to dramatically reduce by the end of Quarter 2.
- HDU - £27k overspent, again relating to use of agency and back staff
- Anaesthetics - £27k overspent relating to ADH payments. Work will take place with the new CD and Operational Manager to review the medical staffing structure in Anaesthetics to identify a recurrent solution to this long-standing cost pressure

The other 3 service areas are all underspent, largely linked to the tight control of non-clinical non pay during Quarter 1

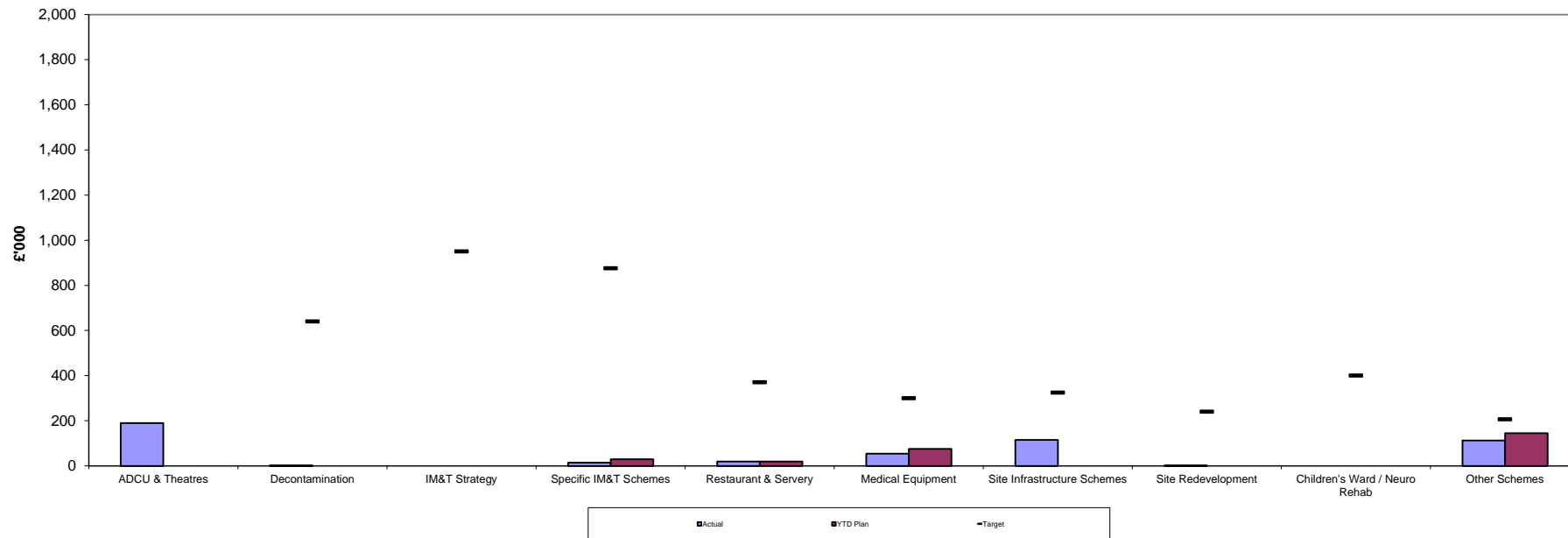
Quarterly Detailed Report
Capital Programme Update as at June 2012

Headlines



Capital expenditure is ahead of plan by £240,000 at the end of Quarter 1 due to advance payments on the ADCU and Private Ward schemes

Scheme Analysis






Capital Commentary

Capital expenditure is £240,000 ahead of plan at the end of Quarter 1, largely relating to £185,000 of spend on the ADCU project and £86,000 of spend on the private patient ward refurbishment, both of which were forecast to be settled in Quarter 2. The majority of other schemes are broadly in line with planned levels at the end of June.

Although capital spend is ahead of plan at the end of Quarter 1, a number of the major schemes for 2012/13 are scheduled to be completed in the second half of the financial year. Only 7.5% of the annual capital budget has been spent to date.

Headlines

-  Analysis of activity and referral figures for Quarter 1 in 2011/12 and 2012/13 show a 4% reduction in elective admissions and an 8% reduction in referrals. The overall trend for GP referrals over the past 15 months is slightly downwards, although non GP referrals have remained static.
-  The Trust has completed the expansion of its Pain service into Worcestershire, however notice has been given from BMI Droitwich to cease the provision of services to support the Care Closer to Home service for Arthroscopy.
-  The Trust is meeting with Sandwell CCG to discuss the impact of service reconfigurations for T&S services, which commissioners feel may result in a further 200-300 cases being referred to the ROH.

Benchmarking - DOH Hospital Activity Statistics Quarter 1

The following tables illustrate the change in activity between Q1 in 2011/12 and 2012/13 reported against the national picture from the DOH Hospital Activity Statistics recently published.

Table 1 - Comparison of Elective Admissions

Admission Type	Quarter 1				DOH Reported
	11/12	12/13	Variance	%	
Elective Admissions	1,763	1,664	-99	-6%	3.6% 2011-12 Elective admissions
Day Case	1,562	1,521	-41	-3%	
Grand Total	3,325	3,185	-140	-4%	

Table 2 - Comparison of GP Referrals

GP Referrals	Quarter 1				DOH Reported
	11/12	12/13	Variance	%	
No of GP Referrals	4,523	4,177	-346	-8%	-1% 2011-12

Table 3 - Comparison of Outpatient Attendances

Outpatient Type	Quarter 1				DOH Reported
	11/12	12/13	Variance	%	
New	4,071	3,973	-98	-2%	0.5% 2011-12
Follow Up	10,525	9,947	-578	-5%	
Grand Total	14,596	13,920	-676	-5%	

Table 4 - Market Share Analysis

The table below shows the 'Top 10' GP Practices referring to the Trusts' Services
Quarter 3

Rank	GP Practice	2011-12			2012-13
		Q2	Q3	Q4	Q1
1	LORDSWOOD HOUSE GROUP MEDICAL PRACTICE	156	155	147	149
2	HOLLYMOOR MEDICAL CENTRE	79	51	51	96
3	HALL GREEN HEALTH	66	85	89	84
4	WYCHALL LANE SURGERY	86	75	86	81
5	M M P SOUTH BIRMINGHAM	65	74	73	73
6	NORTHFIELD HEALTH CENTRE F	73	83	72	69
7	MILLENNIUM MEDICAL CENTRE	59	73	65	66
8	COFTON MEDICAL CENTRE	55	37	43	63
9	LEACH HEATH MEDICAL CENTRE	55	49	61	62
10	BARTLEY GREEN MEDICAL PRACTICE	46	53	58	60

Please note that the latest quarter referral figures will be lower due to data currently being added to the system

Business Opportunities

Droitwich Care Closer to Home

The Trust has received notice from BMI Droitwich that they wish to terminate the arrangement with the Trust for the provision of outpatient and day case surgery facilities at Droitwich Spa Private Hospital. This service has been running since November 2009, however it has suffered a number of setbacks due to the Hand and Foot service ceasing, the introduction of the ICATS service restricting GP direct referral to the services and not least the expansion of the BMI Group extended choice network, the conflict of interest with the latter being the stated reason for BMI terminating the contract with the Trust. This is not expected to have a material effect on Trust income, as the turnover of the scheme was only £36,000 for 2011/12.

Solihull Care Closer to Home

Attendances averaged 21 per month for the period April to June 2012.

Redditch & Bromsgrove Pain Clinics

The Trust has now completed the expansion of the Pain service in this CCG by opening an additional clinic in Bromsgrove, based on the new Parkside Health Centre premises. This has now resulted in the Trust providing a weekly clinic in the CCG, with the other clinic located in the Assura Vertis Centre in Redditch. This additional clinic has capacity for over 540 OPA with an income stream of £60,000 at 75% utilisation however it is a new scheme and will take time to develop to this level.

Spinal Deformity Services to Gibraltar

The Trust has carried out the first clinic, where 27 patients were reviewed. The outcome was one patient that is likely to require complex deformity surgery at BCH and a second patient that will need to be reviewed by the surgeon that provided the previous treatment in London. The Trust will be advising the Gibraltar HA that Gibraltar patients will be added to the waiting list and treated in clinical priority order. Although it may be possible for Gibraltar to fund additional capacity at the ROH, it will not be possible to do this where treatment is required at BCH. The Gibraltar HA have advised the Trust that they may only require an annual clinic.

Commissioning Issues

With the exception of the Welsh Specialised Services and the MOD, the Trust has agreed contracts with all commissioners. The Trust is awaiting a contract variation from West Midlands SCG to disaggregate the non specialist activity from the minimum take specialised spinal surgery contract. This will result in approximately £2.4m having to be collected on a cost per case non-contracted activity basis.

The Trust has been notified that from September 2012, the commissioning / payment of MOD non-Aeromed referrals will transfer to the NHS responsible PCT.

The Trust has commenced work towards the Service Development and Improvement Project for Advice and Guidance. This will be piloted by the Foot and Ankle service.

The Trust has been advised by BSOL Cluster that a revised POLCV policy is to be implemented via a contract notification. The Trust is not aware of any changes to the commissioning policies that dictate where POLCV applies.

The Commissioners have agreed to fund the new Dupuytren's Injections service for a pilot period.

The Trust has had an opportunity to brief the West Midlands SCG on the Spinal Deformity Service. The SCG have agreed to work with the Trust to consider options to increase capacity for this service.

Spot Work

The Trust has been advised by SWBH that from September 2012 they will be relocating their elective orthopaedic inpatient service from City Hospital to Sandwell DGH. They have estimated that 100-150 patients from the City Hospital catchment area may choose to be referred to the ROH in 2012-13. The Trust is to meet with the Sandwell CCG chair.

The Trust has advised the local Directors of Commissioning in the BSOL and Sandwell Clusters of the Trust's capacity to treat additional orthopaedic cases. However to date, there have not been any notable responses.

Marketing Opportunities

There have not been any further developments in "Extending Patient Choice of Provider" through the "Any Qualified Provider" (AQP) initiative for MSK Back Pain Triage and Podiatry community based services. The Trust continues to monitor the AQP portal for any local opportunities.

The Trust has been approached by a local ICATS service to provide secondary care surgical consultations for Hip and Knee referrals. This is currently being worked up in collaboration with the relevant service CDs.

The Trust is aware there may be future opportunities resulting from service reconfigurations in Sandwell and Worcestershire and will be assessing this potential increase in demand over the coming months.

Referrals

