



Hospital of Choice				Clinical Quality				Education and Training			
	ytd		fye		ytd		fye		ytd		fye
National Patient Surveys	tbd			Annual Healthcheck (2005/2006)				Staff Appraisals and PDPs	A	↔	G
				Quality of Services	G	↑	A	Mandatory Training - percentage compliance	R	↓	G
Market Share				Use of Resources	A	↑	A	Fire Safety	R	↓	G
GP Referrals	G	↔	G	Hospital Environment (PEAT)	A		G	Moving and Handling	R	↓	G
Tertiary Referrals	G	↔	G	Hospital Food (PEAT)	G		G	Infection Control	R	↓	G
Other Referrals	G	↔	G	Privacy and Dignity (PEAT)	G		G	Basic Life Support	R	↓	G
Conversion Rates	G	↔	G	Single Sex Accommodation (Qrtly)				Medical Equipment Training	R	↓	G
				Serious Untoward Incidents	tbd			Child Protection	R	↓	G
				response times	tbd			Induction	R	↓	G
				by severity	tbd			Education Plans	G	↔	G
				by theme	tbd			External Accrediation Visits	G	↔	G
				Claims Report	tbd			Effective use of Education Budgets			
				number	tbd			SIFT	G	↑	G
				by theme	tbd			WDD	G	↑	G
				Pressure Ulcer Prevalence	tbd			Internal	G	↔	G
								Evaluation of Clinical Placements	G	↔	G
Citizen Experience				Financial Position				Clinical Research and Development			
	ytd		fye		ytd		fye		ytd		fye
Foundation Trust Status	tbd			ALE (annual Auditors Local Evaluation)	tbd			Research Funding			
Public Engagement (as required - service change)	tbd			SLA Income	tbd			Transition Funding	G	↔	G
Trust Board (PPI representation and involvement)	tbd			Efficiency Savings	tbd			Service Support Costs	G		G
				Stranded Costs	tbd			Commercial Income	A	↔	G
				Contribution Analysis	tbd			Grant Income	A	↔	G
				Historic Debt	tbd			Project and Programme Grants	A	↔	A
				Working Capital	tbd			Technology and Platform Funding	G	↑	G
				Capital Programme	tbd			R&D Annual Report	G	↔	G
				Market Share	tbd			Wellcome Trust Annual Report	G	↑	G
				New Partnerships	tbd			Research Governance			
Staff Surveys	tbd							MHRA	G	↑	G
Diversity (quarterly)	tbd										
Key											
On target	G			To be developed	tbd			On the Corporate Risk Register	(r)		
Of concern	A			Year to date	ytd			Improving / no change / deteriorating performance	↑	↔	↓
Action required	R			Forecast year end prediction	fye						

Tolerances		
On target	Of concern	Action required
G	A	R
>98%		<98%
>98%	97 – 98%	<98%
98%	95-<98%	<95%
>94.5%	90-94.4%	<92%
<4 ytd, 0 in month	=>5 ytd, >0 in month	>5 ytd, >0 in month
<3 ytd, 0 in month	=>4 ytd, >0 in month	>4 ytd, >0 in month
98%		<98%
<1 in yr	=>1	>1
68%	38 – 67%	<38%
<0.8%	0.8-1.5%	>1.5%
<5%	5-10%	>10%
<30 pw	30 - 35	>35

		Performance		
		Target	Year to date	Predicted year end
<b>Hospital of Choice - Existing National Targets</b>				
A&E access	% patients spending less than 4 hours in A&E	98%	97.30%	R R
Cancer access	Urgent GP referrals seen in 2 weeks	100%	99.87%	G G
	Cancer treatments started within 31 days of decision to treat	98%	99.18%	G G
	Cancer treatments started within 62 days of urgent GP referral	95%	97.62%	G G
Inpatient and Outpatient access	Outpatients waiting >13 weeks (GP/GDP refd only)	0	0	G G
	Inpatients waiting >26 weeks	0	2	G G
Cardiac access	%seen within 2 weeks for rapid access chest pain	100%	100%	G G
	Patients waiting >13 weeks for revascularisation	0	0	G G
	Call to needle time for thrombolysis - % <60 mins.	68%	56-67%	A A
Cancelled operations	%elective operations cancelled on day of admission	<0.8%	1.13%	A A
	% cancellations not readmitted within 28 days	<5%	9.85%	A A
DToC	Delayed transfers of care – weekly average	<30	tbc	

Monthly Trend					
April	May	June	July	August	September
97.50%	97.63%	97.39%	97.48%	97.07%	97.39%
99.75%	99.67%	99.80%	100%	100%	100%
98.51%	100%	98.36%	100%	98.68%	99.17%
98.96%	97.40%	97.47%	96.97%	97.16%	95.00%
0	0	0	0	0	0
0	0	0	0	0	0
100%	100%	100%	100%	100%	100%
0	0	0	0	0	0
Monitored quarterly					
1.60%	1.30%	tbc	0.89%	0.98%	1.23%
12.30%	26.90%	5.70%	2.17%	4.08%	3.39%
29	25	37	40	tbc	tbc

Quarterly Trend			
Qtr 1	Qtr 2	Qtr 3	Qtr 4
97.39%	97.30%		
99.74%	tbc		
99.01%	tbc		
98.30%	tbc		
0	0		
2	0		
100%	100%		
0	0		
56%	66.60%		
1.24%	1.03%		
15.47%	3.25%		
32	tbc		

<ytd trajectory	=>ytd trajectory	>ytd trajectory
<ytd trajectory	=>ytd trajectory	>ytd trajectory
<1 in mth	=>1	>1
>85%	80-84%	<80%
>5%	3 - 5%	<3%

		New National Targets		
18 week RTT milestones	% admitted patients within 18 weeks in month	36%	19.60%	R R / A
	% non-admitted patients within 18 weeks in month	64%	55.50%	R G
	Patients waiting >13 weeks for diagnostics	0	53	R R / G
Ethnic information	Ethnic coding of admitted patients	>85%	tbc	
Emergency beddays	Reduction in the number of emergency beddays	>5%	tbc	

11.1%	13.5%	tbc	13.40%	19.80%	19.60%
55.4%	60.3%	tbc	62.00%	64.10%	55.50%
18	15	5	2	7	6

12.50%	19.60%		
64.00%	55.50%		
40	15		

Local Targets		

		Local Targets		
Inpatients (15 weeks)				
Outpatients (11 weeks)				
Market Share	GP Referrals			G
	Tertiary Referrals			G
	Other Referrals			G
	Conversion Rates			G



Performance Scorecard for 2007/2008

Productivity

Tolerances		
On target	Of concern	Action required
G	A	R
≤4.2 days	4.2 to 5.0	>5.0 days
≤4.6 days	4.6 to 5.0	>5.0 days
≤0.5 days	0.5 to 0.6	>0.6 days
≥20%	15% to 20%	<15%
<10 beds	10 to 30	>30
0	1 to 5	>5
≥75%	65% to 75%	≤65%
≥75%	65% to 75%	≤65%
>50%	45% to 50%	<45%
≤ 2.0	2 to 2.5	>2.5
<7.6%		
≥90%	85% to 90%	<85%

Performance		
Target	Year to date	Predicted year end

Productivity					
Length of Stay	Elective	4.2 days	4.7	A	G
	Non-elective	4.6 days	4.7	A	G
	Pre-operative (elective)	0.5 days	0.60	A	G
Pre-11am Discharges		20%	12.3%	R	A
Additional Capacity Open		0	36	R	A
Closed Beds		0	5	A	G
Day Case Rates	Overall	75%	66.2	A	A
	Basket	75%	77.6	G	G
	Trolley	50%	63.9	G	G
New to Follow up Outpatient Rate		2.0	2.1	A	G
Outpatient DNA Rate		7.6%	8.7	A	G
Theatres	Percentage Utilisation	90%	89%	A	G
	Operations Performed (average per working day)		157		
Frequent Emergency Admissions (bed days)		tbd			

Monthly Trend					
April	May	June	July	August	September

4.7	5.0	4.8	4.6	4.7	4.5
4.7	4.7	4.9	4.9	4.8	4.4
0.68	0.61	0.57	0.61	0.58	0.54
11.2%	9.4%	10.2%	11.1%	15.1%	16.5%
26	43	41	50	45	10
4	13	3	4	3	1
65.6	67.4	67.7	64.7	65.6	66.1
76.7	78.4	78.7	77.6	76.0	78.2
65.6	60.6	62.7	64.9	66.7	62.7
2.1	2.1	2.1	2.1	2.0	2.0
8.5	8.4	9.3	8.5	9.0	8.7
90%	90%	89%	87%	91%	88%
164	167	155	155	148	151

Quarterly Trend			
Qtr 1	Qtr 2	Qtr 3	Qtr 4


Tolerances		
On target	Of concern	Action required
G	A	R
<1.5%	1.5% to 2.5%	>2.5%
<8.5%	8.5% to 9.5%	>9.5%
<ytd trajectory	=>ytd trajectory	>ytd trajectory
<ytd trajectory	=>ytd trajectory	>ytd trajectory
<ytd trajectory	=>ytd trajectory	>ytd trajectory

Performance		
Target	Year to date	Predicted year end

Monthly Trend					
April	May	June	July	August	September

Quarterly Trend			
Qtr 1	Qtr 2	Qtr 3	Qtr 4

**Clinical Quality - Monthly**

Mortality Rate		1.7	A	A	1.9	1.7	1.5	1.9	1.6	1.7				
Peri-operative Mortality Rate														
Re-admission Rate		8.7	A	A	8.8	8.5	8.8	9.1	8.3					
Hospital Acquired Infection	MRSA bacteraemia reduction (to 25 for 2007/08)	13	19	R	G	3	1	2	3	6	4	6	13	
	Clostridium difficile reduction (internal trajectory)	339	342	R	G	61	61	53	64	61	42	175	167	
Complaints	Total Complaints		64	G	G		80	70	66	64				
	Complaints Response Times		75%	A	G		62%	64.7%	66.6%	59%				
	Referred to Healthcare Commission		0	3	A	G		0	0	1	3			
	Referred back for Local Resolution		0	0	G	G		1	1	0	0			
Serious Untoward Incidents														
Patient Experience (monthly)														

**Clinical Quality - Annual**

Excellent or Good	Fair	Weak
Excellent or Good	Acceptable	Unacceptable
Excellent or Good	Acceptable	Unacceptable
Excellent or Good	Acceptable	Unacceptable

Annual Healthcheck	Quality of Services	G	Good	G	G									
	Use of Resources	G	Fair	A	A									
Core Standards Compliance	Assessment													
	Areas of Concern													
Developmental Standards Compliance	Assessment													
	Areas of Concern													
Serious Untoward Incidents	response times													
	by severity													
	by theme													
Claims Report	number													
	by theme													
	value													
Pressure Ulcer Prevalence														
National Patient Surveys (annual)														
Hospital Environment (Annual PEAT)	Countess Mountbatten House	G	Acceptable	A	G									
	Princess Anne Hospital	G	Good	G	G									
	Royal South Hants Hospital	G	Acceptable	A	G									
	Southampton General Hospital	G	Acceptable	A	G									
Hospital Food (Annual PEAT)	Countess Mountbatten House	G	Excellent	G	G									
	Princess Anne Hospital	G	Good	G	G									
	Royal South Hants Hospital	G	not assessed											
	Southampton General Hospital	G	Good	G	G									
Privacy and Dignity (Annual PEAT)	Countess Mountbatten House	G	Excellent	G	G									
	Princess Anne Hospital	G	Good	G	G									
	Royal South Hants Hospital	G	Excellent	G	G									
	Southampton General Hospital	G	Good	G	G									
Single Sex Accommodation (Quarterly)														

Performance Scorecard for 2007/2008

Research and Development

Tolerances			Performance			Monthly Trend						Quarterly Trend			
On target	Of concern	Action required	Target	Year to date	Predicted year end	April	May	June	July	August	September	Qtr 1	Qtr 2	Qtr 3	Qtr 4
G	A	R													
<b>Research and Development</b>															
					tbd							tbd	n/a		
					A	G	A	A	A	G	A	A	A		
					G	G				G	G	tbd	G		
					A	G	A	A	A	G	A	A	A		
					G	G	G	G	G	G	G	G	G		
					G						G	tbd	G		
					A	G	A	A	A	G	A	A	A		
					A	G	A	A	A	G	A	A	A		
					A	A	A	A	A	A	A	A	A		
					G	G	A	A	A	G	G	A	G		
					G	G	G	G	G	G	G	G	G		
					G	G	A	A	A	G	G	A	G		
					G	G	A	A	A	G	G	A	G		
					G	G	A	A	A	G	G	A	G		
					G	G	A	A	A	G	G	A	G		
					G	G	A	A	A	G	G	A	G		

Performance Scorecard for 2007/2008

Education and Training

Tolerances		
On target	Of concern	Action required
G	A	R
75% to 100%	50% to 74%	<50%
75% to 100%	50% to 74%	<50%

Education and Training		Performance			Quarterly Trend			
		Target	Year to Date	Predicted year end	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Staff Appraisals and PDPs		100%	A	G	A	A		
Mandatory Training - percentage compliance	Fire Safety	100%	R	G	A	R		
	Moving and Handling	100%	R	G	A	R		
	Infection Control	100%	R	G	A	R		
	Basic Life Support	100%	R	G	A	R		
	Equipment Training	100%	R	G	A	R		
	Child Protection	100%	R	G	A	R		
	Induction	100%	R	G	A	R		
Education Plans		100%	G	G	G	G		
External Accreditation Visits		Good	G	G	G	G		
Effective use of Education Budgets	SIFT	Good	G	G	G	G		
	NESC (NHS Education South Central)	Good	G	G	A	G		
	Internal	Good	G	G	G	G		
Evaluation of Clinical Placements		Good	G	G	G	G		

Performance Scorecard for 2007/2008

Finance

Tolerances		
On target	Of concern	Action required
G	A	R
<= 0%	<=+10%	>+10%
< = 0%	<=+3%	>+3%
<= 0%	<=+10%	>+10%
> 0%	< 0% <-10%	>-10%
> 0%	< 0% <-3%	>-3%
> 0%	< 0% <-4%	>-4%
> 0%	< 0% <-3%	>-3%
> 0%	< 0% <-3%	>-3%

Performance		
Target	Year to date	Predicted year end

Monthly Trend					
April	May	June	July	August	September

Quarterly Trend			
Qtr 1	Qtr 2	Qtr 3	Qtr 4

Finance		<i>Foundation Trust Indicators on separate sheet</i>				
Income and Expenditure (£000)		-8,088	-8,350	-3.2%	G	G
Paybill (£000)		124,532	126,137	1.3%	A	A
Performance Improvement Plan (£000)		8,043	7,658	4.8%	A	A
SLA Activity (to Month 5)	A&E Attendances	40,196	43,910	9.2%	G	G
	Spell Activity	45,696	46,784	2.4%	G	G
	Outpatient Activity	142,382	150,669	5.8%	G	G
	ICU and HDU Bed Day Usage	13,850	16,274	17.5%	G	G
	Income (£000)	119,777	129,576	8.2%	G	G
ALE (annual Auditors Local Evaluation)						
Stranded Costs						
Contribution Analysis						
Historic Debt						
Working Capital						
Capital Programme						

		38.3%	15.9%	6.9%	-3.2%
		2.4%	2.1%	1.9%	1.3%
		8.4%	9.0%	7.2%	4.8%
	7.5%	6.7%	8.6%	9.2%	
	-0.7%	0.6%	3.8%	2.4%	
	1.7%	2.2%	6.5%	5.8%	
	9.1%	15.9%	13.2%	17.5%	
	4.7%	5.8%	7.6%	8.2%	




Foundation Trust KPI's and risk rating calculation and modelling based on Month 6 (September) CMR results

**Section A - Financial Risk Rating (before the application of over riding rules)**

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>
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<b>F</b>	<b>G</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>K</b>
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Metric/ KPI	Criteria	Actual	Rating	RAG
EBITDA margin	Underlying Performance	9.9%	4	G
EBITDA, % achieved	Achievement of Plan	98%	4	G
ROA	Financial Efficiency	10%	5	G
I&E surplus margin	Financial Efficiency	3.9%	5	G
Liquid ratio (Days)	Liquidity	6.0	1	R

Weight	Risk Ratings (where 5 = lowest risk):				
	5	4	3	2	1
25%	11%	9%	5%	1%	<1%
10%	100%	85%	70%	50%	<50%
20%	6%	5%	3%	-2%	< -2%
20%	3%	2%	1%	-2%	< -2%
25%	35	25	15	10	<10

<b>Weighted Average Rating</b>	<b>3.65</b>	<b>A</b>
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**Financial Criteria**

Underlying Performance	4
Achievement of Plan	4
Financial Efficiency	5
Liquidity	1

**Section B - Overriding rules**

Lowest ranked metric a '1'?	YES	2
One financial criteria '1' or '2'	YES	3
Two financial criteria '1' or '2'	NO	
Two financial criteria at '1'	NO	
PBC breached	NO	
Less than 1 year as an FT	YES	4

Rating Table (Max rating if overriding rule is triggered)

2
3
2
1
2
4

<b>Overriding rules rating</b>	<b>2</b>
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<b>Overall Rating</b>	<b>2</b>
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Tolerances			Performance				Monthly Trend						Quarterly Trend			
On target	Of concern	Action required	Target	Year to date	Predicted year end		April	May	June	July	August	September	Qtr 1	Qtr 2	Qtr 3	Qtr 4
G	A	R														
3%	6%	9%														
3%	6%	9%														
5%	10%	15%														
5%	10%	15%														
5%	10%	15%														
5%	10%	15%														
<b>Excellent Employer</b>																
Staff in Post (WTE)	6588	6271	A	G			6170	6180	6189	6243	6274	6271				
Staff in Post (percentage fill rate)	97.90%	94.54%	A	G			97.70%	97.10%	97.20%	95.23%	95.23%	94.54%				
Vacancy	6.10%	5.46%	G	G			2.30%	2.90%	2.80%	4.66%	4.78%	5.46%				
Turnover	21%	20.50%	G	G			19.90%	19.60%	19.40%	19.40%	19.40%	20.50%				
Sickness Absence	4.50%	4.70%	G	G			3.90%	4.20%	4.19%	3.66%	4.10%	4.70%				
Agency Expenditure	£411,342	£5,514,703	R	R			£659,000	£873,000	£1,124,000	£1,082,000	£912,000	£864,703				
Overtime/Excess Hours Expenditure	£1,916,667	£2,038,699	G	A			£333,577	£279,321	£298,520	£387,247	£366,292	£373,742				
Staff Surveys (annual)	<b>annual</b>															
Diversity (quarterly)	<b>quarterly</b>															
Bank (NHSP) WTE	116.00	103.14	G	A						152.74	95.00	103.14				
Agency WTE	123.00	188.27	R	R					154.95	155.78	175.49	188.27				
Overtime/Excess Hours Expenditure WTE	120.00	132.44	A	A					130.00	132.00	129.29	132.44				

Tolerances		
On target	Of concern	Action required
G	A	R

Performance		
Target	Year to date	Predicted year end

Monthly Trend					
April	May	June	July	August	September

Quarterly Trend			
Qtr 1	Qtr 2	Qtr 3	Qtr 4

**Citizen Experience**

Foundation Trust Status				
Public Engagement (as required - service change)				
Trust Board (PPI representation and involvement)				

