

2006 HEALTHCARE COMMISSION ANNUAL HEALTH CHECK

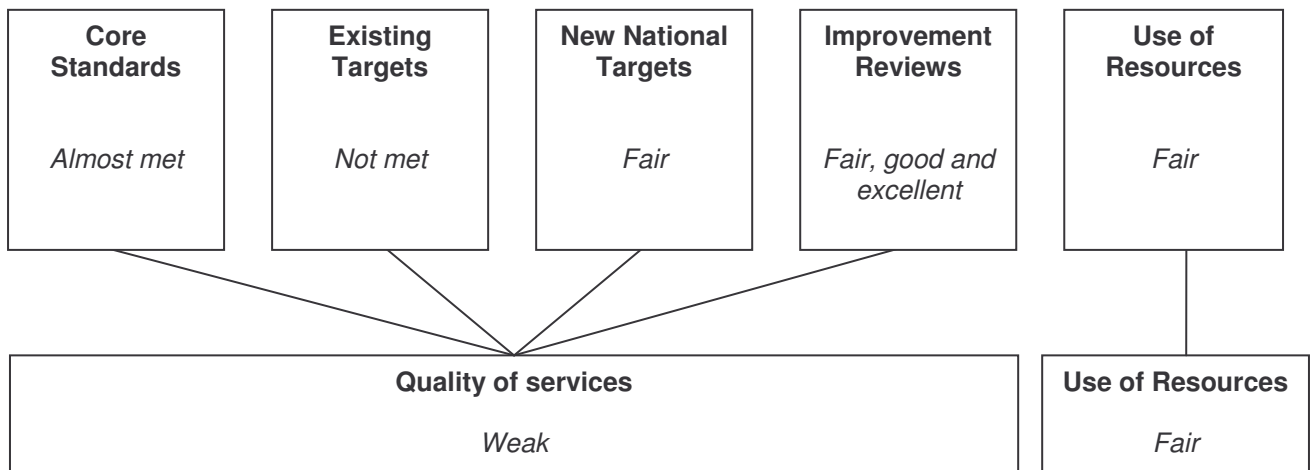
Executive summary

The Commission found that the Trust is operating on a solid platform, as evidenced by a strong performance in the core standards.

Although a great deal of progress has been made during the year on reducing waiting times, more needs to be done in a small number of key target areas. The Trust has already made inroads on these in the first half of this financial year.

The Trust continues to operate a sound financial management regime.

The table below summarises overall performance in the categories which make up the Annual Health Check rating:



What the Annual Health Check measures

Under the new system NHS trusts are required to make a detailed declaration against a set of 'Core Standards' covering:

- Safety
- Clinical and cost effectiveness
- Governance
- Patient focus
- Accessible and responsive care
- Care environment and amenities

- Public health

This self declaration is supported by a comprehensive evidence base supplied by Trusts to the Healthcare Commission.

In addition to the Core Standards, NHS organisations are measured on:

- Performance against existing national targets
- Progress towards new national targets
- Improvement reviews (detailed reviews of specific areas of services, eg diagnostic services)
- Use of resources

The new assessment covers a 12 month period up to March 31 2006.

What the Annual Health Check does not measure

The Healthcare Commission plans to develop the assessment process over the next few years.

At present it does not incorporate a specific appraisal of the clinical quality – as measured by patient outcomes, mortality rates etc.

The most authoritative independent measure of clinical quality remains the annual Dr Foster Good Hospital Guide.

According to the latest Dr Foster report, the Trust is the 12th best performing nationally in terms of low mortality rates.

The Annual Health Check scoring system

The Healthcare Commission will give every NHS organisation an overall rating of EXCELLENT, GOOD, FAIR or WEAK in two main categories – **Quality of Services** and **Use of Resources**

The Quality of Services rating is dependent on performance against:

- The 24 core standards (eg governance, patient focus)
- Existing national targets (eg outpatient/inpatient waiting times)
- New national targets (eg delayed discharges, reductions in emergency bed days)
- Improvement reviews (eg review of diagnostic services)

Failure to meet the existing national targets automatically results in an overall rating of WEAK.

The Use of Resources rating is dependent on performance in:

- Financial reporting
- Financial management
- Financial standing
- Internal control
- Value for money

Failure to achieve year-end financial balance automatically results in an overall rating of WEAK.

Our 2005/06 rating

The Trust's Quality of Services rating has automatically been assessed as **WEAK** because of a failure to meet three of the existing national targets

The Trust's Use of Resources rating has been assessed as **FAIR**, reflecting sound financial management.

Quality of services

Core standards – The Trust was compliant with 40 of the 44 elements within the Core Standards, including those covering patient safety, clinical and cost effectiveness, patient focus and public health.

Non compliance was declared in:

- Decontamination of medical devices
- Managing medical records
- Participation in mandatory training
- Physical assets/estates

Plans are already in place to meet these standards in 2006/07.

Existing national targets – The Trust failed to meet three of the 12 existing targets:

- Two month cancer waits – *only 59 per cent of all Trusts met this target*
- Number of cancelled operations – *only 37 per cent of all Trusts met this target*
- Increasing the proportion of heart attack patients who receive thrombolysis within 60 minutes – *the Trust is piloting a new thrombolysis protocol which has skewed this measure*

Detailed action plans are already being implemented to improve performance in these areas.

New national targets – The Trust has made good progress towards the 11 new national targets but failed the target aimed at increasing the number of patients coded by ethnic group.

Further work is necessary in helping to reduce smoking and obesity levels in the population and shortening waiting times for MRI scans.

Improvement reviews – The Trust compared well with its peers in detailed reviews into:

- Diagnostics - *Good*
- Medicines management - *Excellent*
- Admissions management – *Fair*
- Children’s services - *Fair*

Use of resources

The Trust has a history of sound financial management and last year achieved financial balance for the sixth year in succession.

Internal control mechanisms, financial management and value for money were found to be broadly in line with our peers.

Progress since 2005 NHS performance rating

Although direct comparisons are difficult because of the difference in assessment processes, the Trust has made excellent progress in reducing waiting times for patients since the Healthcare Commission’s 2005 performance rating.

In addition to treating more than 10,000 extra patients:

- The number of patients waiting more than six months for elective inpatient or day case treatment fell from 1,225 to six
- The number of patients seen by a consultant within 13 weeks of a GP referral increased from 71 per cent to 81 per cent
- The number of patients admitted from an inpatient waiting list within three months rose from 77 per cent to 81 per cent
- The number of cancer patients seen within 14 days of an urgent GP referral rose from 95 per cent to 99 per cent

A number of other notable developments designed to improve the overall patient experience have also taken place during the year including:

- Delivering the Department of Health target of a 20 per cent reduction in positive MRSA cases

- Maintaining scores of Excellent or Good in all of the Patient Environment Action Team (PEAT) inspections of estates, facilities and patient catering services
- Continued good progress on the £220 million Cancer Centre at St James's Hospital, which remains on course for completion by December 2007
- Developing new electronic booking services which allow more appointments to be made on a date and time that is convenient for patients
- Laying the foundations for a major consultation on the Making Leeds Better programme, which aims to deliver a new Children's and Maternity hospital in 2012/13

Progress to date in 2006/07

Since the declaration in the spring, the Trust has continued to make significant improvements in key target areas.

Improvements have been made in cancer services, with the national one month target from diagnosis to treatment met for the first time in July and August

The number of patients whose operations were cancelled at the last minute for non clinical reasons has fallen by 28 per cent during the year to August 2006.

The Trust has successfully piloted a new treatment protocol for heart attack patients which is likely to become nationally accepted best practice.

Detailed action plans have been drawn up to:

- Streamline theatre scheduling and increase the amount of surgery carried out as day cases, further reducing waiting times and cancelled operations
- Bring the Trust into line with the national cancer target of 62 days between urgent GP referral and treatment
- Deliver the maximum 18 week waiting target for all patients by December 2008

More information

The comprehensive data set which makes up the Annual Health Check can be accessed via the Healthcare Commission website at www.healthcarecommission.org.uk or the Leeds Teaching Hospitals website www.leedsth.nhs.uk

