SOMERSET PRIMARY CARE TRUST

CORPORATE SCORECARD

APPENDIX 11

		Measure summary	Links to Performance Frameworks	Links to SFBH	Links to Corporate Objectives	30-Apr-09	31-May-09	30-Jun-09	31-Jul-09	31-Aug-09	30-Sep-09	Current Required Standard	Comments
Access	Improve access to dentistry	Number of patients receiving primary dental services located within the primary care trust area within a 24 month period	AHC, VS	C18, C19 and C22a	1, 3	317,243			316,853			331,688	Standard to be achieved by 31 March 2010 (as at 30 June 2009 target was 321,428)
	Practice Opening Times	Percentage of GP practices offering extended opening	VS	C18, C19 and C22a	1, 3	72%	73%	76%	76%	76%	81%	51%	As at 31/9/09 61 practices (81%) are offering extended opening hours
	18 Week referral to treatment pathway	Percentage of admitted patients with a referral to treatment pathway of 18 weeks or less	AHC, VS	C18, C19 and C22a	1, 3	93%	93%	93%	92%	93%	91%	90%	Reported performance based on a commissioner level and not just in respect of Somerset providers.
		Percentage of non-admitted patients with a referral to treatment pathway of 18 weeks or less	AHC, VS	C18, C19 and C22a	1, 3	98%	98%	98%	98%	98%	98%	95%	Reported performance based on a commissioner level and not just in respect of Somerset providers.
	13 Week referral to treatment pathway	Percentage of admitted patients with a referral to treatment pathway of 13 weeks or less	Local	C18, C19 and C22a	1, 3	83%	80%	78%	78%	78%	74%	90%	Reported performance based on a commissioner level and not just in respect of Somerset providers.
		Percentage of non-admitted patients with a referral to treatment pathway of 13 weeks or less	Local	C18, C19 and C22a	1, 3	96%	95%	93%	94%	94%	93%	95%	Reported performance based on a commissioner level and not just in respect of Somerset providers.
	10 Week referral to treatment pathway	Percentage of admitted patients with a referral to treatment pathway of 10 weeks or less	Local	C18, C19 and C22a	1, 3	71%	67%	64%	66%	65%	63%	90%	Reported performance based on a commissioner level and not just in respect of Somerset providers.
		Percentage of non-admitted patients with a referral to treatment pathway of 10 weeks or less	Local	C18, C19 and C22a	1, 3	90%	89%	85%	87%	86%	82%	95%	Reported performance based on a commissioner level and not just in respect of Somerset providers.
	Inpatient Waiting Times	Number of Somerset Patients Waiting >=20 weeks	Local	C18, C19 and C22a	1, 3	4	2	0	0	2	3	0	2 patients waiting at University Hospitals Bristol NHS Foundation Trust, 2 patients waiting at Taunton & Somerset NHS Foundation Trust.
	Outpatient Waiting Times	Number of Somerset Patients Waiting >=11 weeks	Local	C18, C19 and C22a	1, 3	1	0	0	0	2	3	0	1 patient waiting at Taunton & Somerset NHS Foundation Trust, 1 patient waiting at Weston Area Health Trust, 1 patient waiting at University College Hospital London.
	Reduce Diagnostic waiting times	Number of Somerset Patients Waiting >=6 weeks	VS	C18, C19 and C22a	1, 3	4	23	31	6	5	7	0	7 patients were waiting at University Hospitals Bristol NHS Foundation Trust. Six of the 7 patients were treated during September, and 1 patient declined their appointment.
Patient Choice	Choose and Book	Percentage of all General Practitioner Referrals made via the Choose and Book System (National Calculation)		C18, C19 and C22a	1, 3	92%	95%	90%	86%	85%	81%	90%	
	Slot Unavailability	Slot unavailability at Taunton and Somerset NHS Foundation Trust, where patients are having difficulty with directly their appointments on Choose and Book.		C18, C19 and C22a	1, 3	12.4%	14.8%	19.7%	13.7%		8.9%	4%	
		Slot unavailability at Yeovil District Hospital NHS Foundation Trust, where patients are having difficulty with directly their appointments on Choose and Book.		C18, C19 and C22a	1, 3	10.7%	15.8%	18.4%	16.6%	17.4%	11.34%	4%	
Control of Infection	MRSA rates	Cumulative Number of MRSA Bacteraemias at Taunton and Somerset NHS Trust and Yeovil District Hospital NHS Foundation Trust	VS	C4a, C22a	1, 3, 4	0	1	3	4	5	6	6	Annual requirement is no more than 9 at Taunton and Somerset NHS Trust, and no more than 6 at Yeovil District Hospital NHS Foundation Trust.
	Clostridium Difficile rates	Cumulative Number of CDAD at Somerset Primary Care Community Hospitals, Taunton and Somerset NHS Trust and Yeovil District Hospital NHS Foundation Trust	AHC, VS	C4a, C22a	1, 3, 4	10	12	19	32	35	42	59	25 cases at Taunton and Somerset NHS Foundation Trust and 17 cases at Yeovil District Hospital NHS Foundation Trust.
		Cumulative Number of CDAD at Somerset Primary Care Trust commissioner level	AHC, VS	C4a, C22a	1, 3, 4	26	39	67	95	120	26	154	
Emergency Care	Reduce waits in accident and emergency	Percentage of patients to spend no more than 4 hours from arrival to admission, transfer or discharge	AHC	C18, C19 and C22a	1, 3	98.5%	98.7%	98.5%	98.8%	98.8%	98.2%	98%	Cumulative combined rate for Taunton and Somerset NHS Trust and Yeovil District Hospital NHS Foundation Trust
	Reduce Emergency Admissions	Number of emergency admissions (year to date - Somerset Primary Care Trust as a commissioner)	VS	C18, C19 and C22a	1, 3	4,151	8,269	12,476	16,651	20,459	24,613	24,791	The annual growth in emergency admission levels needs to be no more than 1%. Cumulative Year to Date figures shown. The current rate is 0.9% less than last year.
Ambulance Service	Ambulance Response Times	Percentage of Category A calls (defined as urgent and life-threatening) meeting the eight minute target	AHC	C18, C19 and C22a	1, 3	79.5%	80.2%	80.2%	79.5%	79.4%	79.4%	75%	The reported percentages are based upon the cumulative Year to Date SWAST Trust-wide position. Somerset : 77.39%
		Percentage of Category A calls (defined as urgent and life-threatening) meeting the nineteen minute target	AHC	C18, C19 and C22a	1, 3	96.8%	96.8%	96.7%	96.7%	96.7%	96.7%	95%	The reported percentages are based upon the cumulative Year to Date SWAST Trust-wide position. Somerset : 96.62%
		Percentage of Category B calls (defined as urgent but not immediately life-threatening) meeting the nineteen minute target	AHC	C18, C19 and C22a	1, 3	96.6%	96.3%	96.2%	96.1%	96.0%	96.1%	95%	The reported percentages are based upon the cumulative Year to Date SWAST Trust-wide position. Somerset : 96.26%

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Mental Health	Commissioning of crisis resolution/home treatment services	Number of separate episodes of home treatment provided by crisis resolution teams to people for which the Primary Care Trust has Commissioning responsibility	AHC	C18, C19 and C22a	1, 3	229			208			800	Target from Local Delivery Plan trajectories to be achieved by 31 March 2010
	Commissioning of early intervention in psychosis	Number of people with newly diagnosed cases of first episode psychosis receiving early intervention in psychosis services	AHC	C18, C19 and C22a	1, 3	27			16			57	Target from Local Delivery Plan trajectories to be achieved by 31 March 2010
Cancer	Reduce waiting times for cancer services	Year to date percentage of patients seen within 2 weeks following an urgent GP or GDP for suspected cancer	AHC, VS	C18, C19 and C22a	1, 3	96.2%	96.0%	95.8%	95.7%	95.6%	Data awaited	93%	
		Year to date percentage of patients seen within 2 weeks with breast symptoms	AHC, VS			31.8%	46.4%	55.9%	60.3%	64.8%	Data awaited	93%	
		First Treatment - Year to date percentage of patients seen within 31 days from decision to treat to first definitive treatment	AHC, VS			99.2%	98.0%	97.4%	97.2%	96.8%	Data awaited	96%	
		Subsequent Treatment - Year to date percentage of patients seen within 31 days from decision to treat to first definitive treatment	AHC, VS			94.4%	94.5%	94.3%	94.5%	95.0%	Data awaited	96%	
		Year to date percentage of patients seen within 62 days of urgent referral to first definitive treatment	AHC, VS			91.4%	92.0%	92.1%	91.4%	90.6%	Data awaited	85%	
		Year to date percentage of patients seen within 62 days of referral from NHS Cancer Screening Programmes to first definitive treatment	AHC, VS			92.9%	93.1%	88.4%	89.3%	88.4%	Data awaited	90%	
		Year to date percentage of patients seen within 62 days of referral from Consultant Upgarde to first definitive treatment	AHC, VS			75.0%	87.5%	88.2%	85.2%	85.7%	Data awaited	90%	
	Improve Screening Rates	Coverage rate for Breast Screening: women aged 50-64 screened every three years	AHC, VS	C18, C19 C22a, and C23	1, 3, 6	76.3%			76.4%			75%	Age ranges are different to the Vital Signs
		Coverage rate for Breast Screening: women aged 65-70 screened every five years	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	80.5%			80.8%			70%	Age ranges are different to the Vital Signs
Reducing Health Inequalities	Smoking Cessation	Number of those attending smoking cessation services who are still not smoking 4 weeks later (cumulative from 1 April 2008)	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	282	500	726	936	1130	Data awaited	1,127	
Childhood Immunisations	Improve Uptake Rates	Immunisation rate for children aged 1 who have been immunised for diphtheria, tetanus, polio, pertussis, haemophilus influenza type B	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	93.2%			Data Awaited			94.0%	
		Immunisation rate for children aged 2 who have been immunised for pneumococcal infection	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	87.5%			Data Awaited			88.5%	
		Immunisation rate for children aged 2 who have been immunised for haemophilus influenza type B and meningitis type C	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	87.8%			Data Awaited			94.8%	
		Immunisation rate for children aged 2 who have been immunised for measles, mumps and rubella	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	86.6%			Data Awaited			88.9%	
		Immunisation rate for children aged 5 who have been immunised for diphtheria, tetanus, polio and pertussis	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	97.3%			Data Awaited			88.0%	
		Immunisation rate for children aged 5 who have been immunised for measles, mumps and rubella	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	92.8%			Data Awaited			89.1%	
Sexual Health	Genito-Urinary Medicine	Percentage of GUM service first attendances whose first offer was within 2 normal working days	AHC	C18, C19 and C22a, C23	1, 3, 6	100%	100%	100%	100%	100%	100%	100%	
		Percentage of GUM service first attendances seen within 2 normal working days	AHC	C18, C19 and C22a, C23	1, 3, 6	91.9%	82.3%	93.3%	94.0%	92.0%	94.8%	95%	Taunton & Somerset NHS foundation trust achieved 98.6% and Yeovil District Hospital NHS foundation Trust achieved 97.0%.
	Chlamydia Screening	Cumulative number of 15-24 year old persons screened or tested for chlamydia	AHC, VS	C18, C19 and C22a, C23	1, 3, 6	601	1,312	2,998	3,565	4,016	5,960	7871	

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Delayed transfers of care	Treating patients in the most appropriate location	Delayed Discharges as a proportion of the total number of Somerset patients occupying an acute bed in all providers (all ages)	AHC	C18	1, 3	**41**			**44**			**<50**	The CQC assessment is based on VSMR reported delays. The numerator is the number of delays reported, the denominator is the registered population of practice registers 18+. During 2009/2010 CQC calculated average delays totaled 53 and score achieved was 13.139 as the calculation was expressed the number of delays per 100,000 population rather than a percentage. To monitor 2009/2010 have set standard at a quarterly number of 50 to ensure that total number is below last calculated average.
Data Quality	Data Quality on Ethnic Group Coding	Cumulative percentage of Finished Consultant Episodes for the PCT (commissioner) on Hospital Episode Statistics (HES) data with valid 2001 census coding for ethnic category (excluding 'not stated' and 'not known')	AHC	C7e	1	**87.9%**	**88.4%**	**87.9%**	**88.0%**	**86.5%**	**85.9%**	**80%**	
Workforce	Appraisal	Percentage of Eligible Staff Receiving an Appraisal for the year to date	UOR	C8b, C11a	1, 4, 5, 9, 11	**71%**		**62%**	**60%**	**62%**	**data not available**	**95%**	
	Staff turnover	Staff Turnover Rate	NPM, UOR	C8b	9	**11.1%**	**11.0%**	**11.2%**	**11.1%**	**10.4%**	**10.7%**	**15%**	Rolling annualised rate.
	Staff Absence	Staff Absence Rate	NPM, UOR	C8b	9	**4.2%**	**4.2%**	**4.1%**	**4.1%**	**4.0%**	**4.1%**	**4%**	Rolling annualised rate.
Financial Balance	Achieve financial balance	Forecast year end income and expenditure position: Surplus / (Deficit) [£000]	UOR	C7d	3, 10, 11	**5,751**	**5,751**	**5,751**	**5,751**	**5,751**	**5,751**	**5,751**	
Estates	Estates Management	Value of Estates Maintenance Backlog (£000)	UOR	C20a, C20b, C21	4, 11	**1,363**	**1,363**	**1,363**	**1,363**	**1,363**	**1,363**	**1,363**	

Key:

AHC	Annual Health Check
VS	Vital Signs
SFBH	Standards for Better Health
NPM	National Productivity Metrics
Local	Locally agreed standard, more challenging that the national equivalent
UOR	Use of Resources