



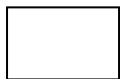
Report of the Head of Scrutiny and Member Development

Scrutiny Board (Health)

Date: 20 January 2009

Subject: Performance Report (NHS Leeds)

Electoral Wards Affected:



Ward Members consulted
(referred to in report)

Specific Implications For:

Equality and Diversity

Community Cohesion

Narrowing the Gap

1.0 INTRODUCTION

- 1.1 At its meeting on 17 June 2008, the Scrutiny Board (Health) received an outline of the key priorities and targets for NHS Leeds (formerly Leeds Primary Care Trust (PCT)), Leeds Teaching Hospitals NHS Trust (LTHT) and the Leeds Partnership Foundation Trust (LPFT).
- 1.2 As part of the discussion, the Scrutiny Board outlined a desire to be kept apprised of progress throughout the year, agreeing to consider the performance report presented to the NHS Leeds Board on a regular basis. Performance was last reported to the Scrutiny Board (Health) in October 2008.

2.0 PERFORMANCE MATTERS

- 2.1 Attached at Appendix 1 is the performance report presented and discussed at the NHS Leeds Board meeting on 11 December 2008.

Priority Areas

- 2.2 The attached report provides a summary update on progress against the six priority areas identified by NHS Leeds, using specific indicators as follows:

18 weeks standards

- 18 week referral to treatment waits; admitted and non-admitted
- Diagnostic waits less than 6 weeks
- Maximum wait time of 13 weeks for an outpatient appointment

- Maximum wait time of 26 weeks for an inpatient appointment
- Choose & Book rates

Cancer wait times

- Maximum wait time of 14 days from urgent GP referral to first outpatient for suspected cancer
- Maximum wait time of 31 days from diagnosis to treatment for all cancers
- Maximum wait time of 62 days from urgent GP referral to treatment for all cancers
- Breast cancer screening for women aged 53 to 70 years

Health care associated infections standards

- MRSA levels sustained, with local stretch targets beyond the national targets
- C.Difficile reduction of 30% at national level, with local targets now agreed

Primary care access standards

- Guaranteed access to a primary care professional within 24 hrs
- Guaranteed access to a GP within 48 hrs
- Number of GP practices offering extended opening hours

Sexual health programme standards

- Chlamydia screening programme standard
- Access to a GUM service within 48 hrs

Urgent care

- 4 hr A&E standard
- Ambulance response times: Cat A 8 min standard
- Ambulance response times: Cat B 19 min standard

2.3 An executive summary of performance is provided. In respect of the priority areas the following issues are highlighted:

Positive performance	Weaker performance
Cancer wait times: <ul style="list-style-type: none"> • 14 day waits from urgent referral to first outpatient • 31 days from diagnosis to commencement of treatment • Breast screening coverage 	18 weeks standards: <ul style="list-style-type: none"> • 13 weeks for an outpatient appointment • 26 weeks for an inpatient appointment
Sexual health programme standards: <ul style="list-style-type: none"> • Access to a GUM service within 48 hr 	Health care associated infections standards: <ul style="list-style-type: none"> • MRSA levels

2.4 The report also provides details of progress towards securing 100% usage of the Choose & Book system for onward referrals by Oct 2009. The take-up and use of the Choose and Book services fall within the overall 18 week standards priority area. In November 2008, performance in this area remained below 30% and was the subject of a separate report presented to the NHS Leeds Board on 18 December 2008.

2.5 The report presented to the NHS Leeds Board included a report produced by Atos Consulting following an independent review of the uptake of Choose and Book in Leeds. The report states that the current uptake of all Choose and Book services

puts the Leeds health economy at the bottom of the Choose and Book performance tables across the Yorkshire and the Humber Strategic Health Authority (SHA) and in the bottom 5% of trusts nationally. The recommendation of the review was to initiate a programme to deliver Paperless Patient Referrals across the Leeds health economy.

- 2.6 The report presented to the NHS Leeds Board states that for 'Paperless Patient Referrals' to be successfully implemented, the full range of issues across the referral pathway will need to be tackled, including choice, access and demand. The full report presented to the NHS Leeds Board is available on request.

Other Areas

- 2.7 As previously agreed, the report also highlights other indicators (i.e. outside the six priority areas) where exceptions or non-delivery has occurred. In this respect, the following areas are highlighted as areas where performance is weaker than planned:

- Childhood immunisation programme
- Early intervention service

- 2.8 The Director of Performance, Improvement and Delivery from NHS Leeds will attend the meeting to present the key issues highlighted by the attached report and to address any specific questions identified by the Scrutiny Board.

3.0 RECOMMENDATIONS

- 3.1 The Board is requested to consider the information provided in this report and the attached report from NHS Leeds and determine any matters that require any further scrutiny.

4.0 BACKGROUND PAPERS

- Performance Report (NHS Leeds) – Scrutiny Board (Health), 21 October 2008
- Review of the Utilisation of Choose and Book in Leeds – NHS Leeds Board meeting, 18 December 2008