# Mid Essex PCT / CCG

# High Risk Dashboard & Performance Scorecards

2012/13

### Notes for 2012/13 scorecards

- RAG ratings will be applied against performance where there are known trajectories and thresholds
- We are aiming to get more timely data for as many indicators as possible and will indicate whether it is raw or proxy data

				CHUFT	Perform	ance Da	shboard								
	2012/13 Target	2011/12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	YTD Performance
MRSA	1	0	0	0	0	0	0	0	0	0					0
Clostridium Difficile	25	28	4	1	3	1	2	2	1	5					19
18 week RTT - Admitted	90%	91.0%	91.5%	92.9%	90.2%	96.1%	95.6%	95.0%	94.6%	94.0%					93.8%
18 week RTT - Non-Admitted	95%	97.2%	97.9%	98.0%	97.9%	98.3%	98.3%	98.1%	98.2%	98.5%					98.2%
18 week RTT - Incomplete	92%	97.6%	97.9%	98.0%	98.5%	98.5%	98.1%	98.0%	98.3%	98.1%					
Cancer Plan: 62 Day Standard	85%	82.3%	79.5%	73.5%	91.4%	92.8%	85.8%	85.2%	92.3%	85.2%					85.8%
Cancer: 62 Day Screening Standard	90%	89.9%	87.5%	93.9%	88.9%	83.3%	88.9%	100.0%	100.0%	97.8%					93.4%
Cancer: 62 Day Upgrade Standard	No Target	95.1%	50.0%	100.0%	86.7%	No patients treated	100.0%	75.0%	100.0%	81.8%					88.2%
Cancer: 31 Day First Treatment	96%	98.4%	98.0%	97.1%	97.1%	98.9%	99.3%	98.7%	99.5%	97.5%					98.3%
Cancer: 31 Day Subsequent Treatment - Surgery	94%	96.8%	96.1%	100.0%	97.5%	100.0%	96.7%	100.0%	97.1%	100.0%					98.3%
Cancer: 31 Day Subsequent Treatment - Drug Treatments	98%	99.8%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	98.9%	100.0%					99.8%
Cancer: 31 Day Subsequent Treatment - Radiotherapy	94%	98.6%	97.3%	98.4%	99.3%	98.5%	97.3%	94.9%	97.4%	100.0%					97.9%
Cancer: Two Week Wait	93%	94.5%	96.7%	95.6%	97.6%	97.8%	97.0%	96.3%	96.1%	95.4%					96.6%
Cancer: Breast Symptom Two Week Wait	93%	95.2%	99.0%	98.4%	99.2%	98.5%	96.0%	97.4%	95.4%	98.7%					97.8%
% of all adult inpatients who have had a VTE risk assessment	90%	94.8%	98.5%	92.8%	92.4%	93.6%	94.8%	89.6%	89.6%						93.0%
% waiting 6 weeks or more for diagnostic tests	<1%	0.2%	0.0%	0.03%	0.0%	0.0%	0.1%	0.5%	0.03%	0.0%					
MSA: Numbers of unjustified breaches	0	0	0	0	0	0	0	0	0	0					0
Stroke: % of people spending 90% of their time on a stroke unit	80%	81.6%	90.0%	84.5%	81.1%	87.5%	93.6%	93.3%	87.8%	85.0%	88.9%				87.7%
Stroke - High Risk TIA: Seen and treated within 24 hours	60%	83.6%	36.4%	52.9%	57.1%	73.7%	73.3%	85.7%	78.6%	75.0%	50.0%				64.1%
Number of Delayed Transfers of Care	Reduction	1	3	2	6	4	6	1	2	2					
Total number of urgent operations cancelled		0	0	0	0	0	5	3	0	1					9
	2012/13 Target	2011/12	14/10/2012	21/10/2012	28/10/2012	04/11/2012	11/11/2012	18/11/2012	25/11/2012	02/12/2012	09/12/2012	16/12/2012	23/12/2012	30/12/2012	YTD
A&E: Patients seen within 4 hours	95%	96.7%	94.4%	97.7%	96.2%	96.9%	94.0%	98.1%	98.3%	98.4%	97.1%	91.5%	97.9%	97.7%	96.6%
					Quarter 1			Quarter 2	-		Quarter 3			Quarter 4	YTD
Type 1 A&E Attendances	72.020	71,684			18.992	<u> </u>		19,237			18,053			Quarter 4	56.282
Total A&E Attendances	72,020	71,684			18,992						18,053				56,282
	No plans				,			19,237			16,053				50,262
Acute Bed Capacity: G&A available beds	required	667			667										
			Admitted Path	ways - Target =	= 90% (latest 6 r	months data)				Non-Admitted	Pathways - Targ	get = 95% (lates	st 6 months dat	a)	
18 week specialty compliance		Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12		Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	
General Surgery		91.2%	90.6%	92.5%	90.6%	90.4%	90.4%		97.5%	96.2%	96.5%	96.6%	96.3%	97.7%	
Urology Trauma & Orthopaedics		74.4% 79.4%	90.1% 95.0%	92.1% 92.2%	92.3% 93.0%	90.6%	90.4% 92.3%		86.8% 95.8%	95.9% 96.8%	95.4% 97.3%	97.0% 97.8%	95.1% 97.4%	95.1% 97.1%	
Ear, Nose & Throat (ENT)		97.7%	98.9%	93.8%	97.9%	96.2%	97.4%		98.5%	97.1%	97.9%	96.8%	96.0%	98.5%	
Ophthalmology Oral Surgery		99.5% 99.1%	99.2%	100.0% 99.3%	99.1% 98.2%	98.8% 93.5%	99.2% 95.7%		98.7%	98.8%	98.3% 99.1%	98.0% 99.1%	99.7% 96.5%	99.5% 98.0%	
Neurosurgery		No patients	No patients	No patients	No patients	No patients	No patients		No patients	No patients	No patients	No patients	No patients	No patients	
Plastic Surgery		No patients	No patients	No patients	No patients	No patients	No patients		No patients	No patients	No patients	No patients	No patients	No patients	
Cardiothoracic Surgery General Medicine		No patients No patients	No patients	No patients 100.0%	No patients No patients	No patients No patients	No patients No patients		No patients 100.0%	No patients 100.0%	No patients 100.0%	No patients No patients	No patients No patients	No patients No patients	
Gastroenterology		No patients	100.0%	No patients	100.0%	No patients	No patients		99.5%	97.0%	98.6%	98.1%	98.2%	98.2%	
Cardiology		100.0% 100.0%	100.0% 97.6%	95.0% 98.4%	100.0% 93.4%	100.0% 94.2%	100.0% 88.9%		99.2% 98.2%	99.7% 98.8%	98.3% 98.7%	99.6% 96.5%	99.4% 99.1%	100.0% 98.3%	
Dermatology Thoracic Medicine		100.0%	100.0%	100.0%	100.0%	94.2% No patients	100.0%		98.2%	98.8%	98.7%	96.5%	99.1%	98.3%	
Neurology		No patients	100.0%	No patients	No patients	No patients	No patients		98.5%	100.0%	98.9%	100.0%	99.2%	98.1%	
Rheumatology Geriatric Medicine		No patients 100.0%	No patients 100.0%	No patients No patients	No patients 100.0%	No patients No patients	100.0% No patients		97.4% 100.0%	97.1% 99.3%	95.1% 100.0%	97.7% 100.0%	97.9% 100.0%	95.6% 100.0%	
Gynaecology		99.2%	99.4%	98.0%	97.6%	97.3%	95.9%		99.6%	99.3%	99.5%	98.7%	98.2%	99.0%	
Other		100.0%	98.9%	98.4%	98.6%	96.4%	97.0%		99.6%	99.7%	99.5%	99.2%	99.0%	99.6%	
Total		90.2%	96.1%	95.6%	95.0%	94.6%	94.0%		97.9%	98.3%	98.3%	98.1%	98.2%	98.5%	

MEHT Performance Dashboard															
	2012/13 Target	2011/12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	YTD Performance
MRSA	1	0	0	0	0	0	0	0	0	0	1				1
Clostridium Difficile	22	20	1	2	2	0	4	1	0	3	3				16
18 week RTT - Admitted	90%	90.1%	93.9%	94.4%	93.1%	93.5%	93.4%	93.6%	93.9%	93.7%					93.7%
18 week RTT - Non-Admitted	95%	97.3%	98.3%	98.5%	98.7%	98.7%	98.7%	98.5%	98.4%	98.5%					98.5%
18 week RTT - Incomplete	92%	96.8%	97.1%	97.7%	97.5%	97.5%	97.4%	96.7%	96.7%	97.4%					
Cancer Plan: 62 Day Standard	85%	89.4%	85.0%	89.0%	90.4%	91.7%	77.1%	85.4%	87.7%	86.8%					86.2%
Cancer: 62 Day Screening Standard	90%	95.2%	100.0%	100.0%	100.0%	100.0%	83.3%	100.0%	100.0%	100.0%					98.7%
Cancer: 62 Day Upgrade Standard	No Target	99.0%	100.0%	No patients treated	No patients treated	No patients treated	100.0%	100.0%	No patients treated	No patients treated					100.0%
Cancer: 31 Day First Treatment	96%	99.2%	99.1%	99.0%	99.0%	98.4%	99.2%	100.0%	99.2%	100.0%					99.3%
Cancer: 31 Day Subsequent Treatment - Surgery	94%	98.8%	100.0%	100.0%	100.0%	100.0%	97.5%	100.0%	100.0%	94.6%					98.8%
Cancer: 31 Day Subsequent Treatment - Drug Treatments	98%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%					100.0%
Cancer: 31 Day Subsequent Treatment - Radiotherapy	94%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A					N/A
Cancer: Two Week Wait	93%	95.0%	93.1%	99.0%	97.2%	96.5%	96.6%	98.6%	98.3%	97.6%					97.1%
Cancer: Breast Symptom Two Week Wait	93%	98.2%	98.5%	99.5%	94.3%	94.5%	94.1%	98.1%	97.9%	98.0%					97.0%
% of all adult inpatients who have had a VTE risk assessment	90%	95.2%	96.3%	96.0%	95.4%	97.2%	97.2%	96.3%	96.8%						96.5%
% waiting 6 weeks or more for diagnostic tests	<1%	0.2%	0.1%	0.2%	0.1%	0.4%	0.4%	0.1%	0.1%	0.2%					
MSA: Numbers of unjustified breaches	0	4	0	0	0	0	0	0	0	0					0
Stroke: % of people spending 90% of their time on a stroke unit	80%	67.0%	95.0%	87.5%	86.2%	85.2%	90.3%	88.9%	87.9%	77.3%	100.0%				88.6%
Stroke - High Risk TIA: Seen and treated within 24 hours	60%	64.5%	40.0%	68.4%	93.3%	80.0%	75.0%	61.1%	68.8%	63.0%	75.0%				69.4%
Number of Delayed Transfers of Care	Reduction	30	19	22	27	21	17	34	33	28					
Total number of urgent operations cancelled		97	0	31	22	6	5	0	0	19					83
Ambulance Turnaround- % of patients handed over in 15 minutes (figures from Ambulance SITREP)	85%		19.3%	23.4%	29.6%	42.7%	53.7%	53.9%	57.0%	58.0%	43.7%				43.0%
	2012/13 Target	2011/12	14/10/2012	21/10/2012	28/10/2012	04/11/2012	11/11/2012	18/11/2012	25/11/2012	02/12/2012	09/12/2012	16/12/2012	23/12/2012	30/12/2012	YTD
A&E: Patients seen within 4 hours	95%	95.9%	97.6%	93.2%	95.7%	99.0%	97.3%	96.4%	97.5%	95.8%	92.9%	93.6%	93.1%	96.6%	96.1%
	· — — — — — — — — — — — — — — — — — — —				0			0	1		0			0	VTD
Type 1 A&E Attendances	75,540	74,241			Quarter 1 19,845			Quarter 2 19,970			Quarter 3 18,873			Quarter 4	YTD 58,688
															,
Total A&E Attendances	77,804 No plans	76,115			20,233			20,310			19,437				59,980
Acute Bed Capacity: G&A available beds	required	558			558			558							
				nways - Target =	•	•					Pathways - Targ				
18 week specialty compliance		Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12		Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	
General Surgery Urology		94.8%	93.8%	90.9%	91.6% 92.2%	93.2% 91.7%	94.0% 93.9%		99.0% 97.3%	98.6% 99.5%	98.1% 97.9%	98.7% 95.9%	96.7% 98.4%	97.3% 98.3%	
Trauma & Orthopaedics		93.7%	93.6%	90.9%	92.4%	94.4%	90.6%		90.8%	93.4%	96.8%	95.3%	95.1%	95.9%	
Ear, Nose & Throat (ENT) Ophthalmology		95.4% 93.8%	93.4% 95.5%	94.1% 97.6%	95.5% 98.7%	93.6% 96.5%	95.7% 91.4%		99.6% 96.5%	97.9% 96.5%	99.3% 96.5%	98.3% 99.3%	97.7% 99.5%	98.0% 99.5%	
Oral Surgery		93.8%	94.0%	94.6%	98.7%	97.4%	94.3%		98.0%	96.6%	98.4%	98.2%	99.5%	98.4%	
Neurosurgery		No patients	No patients	No patients	No patients	No patients	No patients		100.0%	100.0%	No patients	100.0%	100.0%	100.0%	
Plastic Surgery		90.9%	90.2%	91.1%	90.1%	91.0%	91.5%		99.8%	99.5%	98.7%	97.4%	98.3%	97.9%	
Cardiothoracic Surgery General Medicine		No patients 100.0%	No patients 100.0%	No patients 100.0%	No patients 100.0%	No patients 100.0%	No patients 100.0%		No patients 99.1%	No patients 99.4%	No patients 98.2%	No patients 100.0%	No patients 99.3%	No patients 96.8%	
Gastroenterology		No patients	100.0%	100.0%	100.0%	100.0%	No patients		100.0%	96.4%	95.4%	100.0%	95.2%	95.7%	
Cardiology		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		98.9%	98.9%	99.4%	97.9%	98.2%	98.5% 95.5%	
Dermatology Thoracic Medicine		No patients No patients	No patients No patients	No patients No patients	No patients No patients	No patients 100.0%	No patients 100.0%		98.6%	98.8% 100.0%	98.1%	96.9% 100.0%	97.6% 100.0%	95.5%	
Neurology		100.0%	100.0%	85.7%	100.0%	100.0%	100.0%		98.7%	100.0%	100.0%	100.0%	100.0%	100.0%	
Rheumatology		100.0%	100.0%	100.0%	100.0%	No patients	100.0%		100.0%	100.0%	99.1%	100.0%	99.3%	100.0%	
Geriatric Medicine Gynaecology		No patients 95.6%	No patients 96.9%	No patients 98.2%	No patients 98.6%	No patients 98.2%	No patients 100.0%		100.0% 99.5%	100.0% 99.8%	100.0% 100.0%	100.0% 99.5%	100.0% 99.8%	96.3% 100.0%	
Other		92.9%	96.7%	96.5%	97.1%	96.9%	98.3%		99.5%	99.2%	99.3%	99.2%	98.8%	99.0%	
Total		93.1%	93.5%	93.4%	93.6%	93.9%	93.7%		98.7%	98.7%	98.7%	98.5%	98.4%	98.5%	

								Mid I	Essex I	PCT / C	CG								
						P	erform	ance a	against	Natior	nal Indi	cators							
Monthly I	ndicators	2012/13 Target	Data Source	Freq	2011/12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Year to Date	Comments
PHQ01	Ambulance quality: Cat A response within 8 mins	75%	Unify2	М	75.4%	75.3%	74.6%	74.4%	77.0%	77.0%	72.7%	73.9%						75.0%	Contract hosted by
PHQ02	Ambulance quality: Cat A response within 19 mins	95%	Unify2	М	94.8%	95.1%	94.4%	94.2%	95.1%	94.8%	92.8%	93.5%						94.3%	Bedsfordshire
PHQ03	Cancer Plan: 62 Day Standard	85%	Open Exeter	м	87.3%	84.1%	87.0%	87.2%	90.4%	70.2%	87.3%	83.9%	78.2%					83.5%	
PHQ04	Cancer: 62 Day Screening Standard	90%	Open Exeter	М	92.3%	92.3%	100.0%	83.3%	100.0%	100.0%	100.0%	100.0%	100.0%					97.4%	
PHQ05	Cancer: 62 Day Upgrade Standard	No Target	Open Exeter	М	97.8%	66.7%	100.0%	100.0%	No patients treated	100.0%	100.0%	100.0%	No patients treated					88.9%	
PHQ06	Cancer: 31 Day First Treatment	96%	Open Exeter	М	99.4%	98.4%	100.0%	97.0%	99.2%	99.2%	98.5%	97.8%	99.1%					98.6%	
PHQ07	Cancer: 31 Day Subsequent Treatment - Surgery	94%	Open Exeter	М	98.5%	100.0%	100.0%	96.2%	100.0%	93.8%	100.0%	100.0%	92.3%					97.5%	
PHQ08	Cancer: 31 Day Subsequent Treatment - Drug Treatments	98%	Open Exeter	М	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%					100.0%	
PHQ09	Cancer: 31 Day Subsequent Treatment - Radiotherapy	94%	Open Exeter	М	97.8%	95.7%	100.0%	98.5%	98.2%	100.0%	93.8%	94.5%	100.0%					97.8%	
PHQ24	Cancer: Two Week Wait	93%	Open Exeter	М	94.9%	93.7%	98.7%	97.7%	96.5%	96.8%	97.7%	98.0%	98.2%					97.2%	
PHQ25	Cancer: Breast Symptom Two Week Wait	93%	Open Exeter	М	97.8%	98.7%	99.4%	94.5%	95.2%	93.9%	98.7%	98.4%	99.0%					97.4%	
PHQ19	18 week RTT - admitted % within 18 weeks	90%	Unify2	М	92.8%	95.8%	94.5%	94.3%	95.1%	95.1%	95.2%	95.0%	95.2%					95.0%	
PHQ20	18 week RTT - non-admitted % within 18 weeks	95%	Unify2	М	97.6%	98.2%	98.4%	98.6%	98.6%	98.6%	98.6%	98.5%	98.5%					98.5%	
PHQ21	18 week RTT - incomplete % within 18 weeks	92%	Unify2	М	97.0%	97.3%	98.0%	98.0%	97.9%	97.7%	97.3%	97.2%	97.8%						
PHS16	18 week RTT: Total numbers waiting at the end of the month on an incomplete RTT pathway	16,762	Unify2	М	16,286	17,000	17,661	18,635	18,643	18,404	16,710	16,830	17,074						
PHQ22	% waiting 6 weeks or more for diagnostic tests	<1%	Unify2	М	0.7%	0.5%	0.8%	1.5%	0.4%	0.3%	0.1%	0.1%	0.3%						
PHS14	4 x Endoscopy-based tests	10,438	Unify2	М	10,511	803	891	666	815	881	648	824	836					6,364	Tests above plan, review of referrals including
PHS15	11 x Non-endoscopy based tests	83,094	Unify2	М	84,214	7,136	8,000	7,062	8,430	7,825	7,654	8,714	8,481					63,302	'direct'
PHQ26	MSA: Numbers of unjustified breaches	0	Unify2	М	14	0	1	0	1	0	0	0	1					3	
PHQ27	MRSA bacteraemia - PCT	2	HPA	м	0	0	0	1	0	1	0		0	1				5	See Quality report
PHQ28	Clostridium Difficile - PCT	61			77	4	6	10	3	10	7	8	8	5				61	
PHQ30	Smoking quitters	2,994	Community Provider	М	2,906	294	265	195	222	185	201	222						1,584	On trajectory
PHS13	Number of urgent and emergency journeys via ambulance.	452,997	Unify2	М	440,494	35,828	37,176	36,205	37,856	37,005	35,682	37,947						257,699	
PHF07	Bookings to services where named consultant led team was available (even if not selected)	70%	Choose & Book system	М	80.8%	94.8%	92.7%	94.9%	94.9%	95.7%	92.8%	93.5%	94.1%					94.2%	
PHF08	Proportion of GP referrals to first outpatient appointments booked using Choose and Book	60%	Choose & Book system	М	63.5%	63.4%	67.4%	63.2%	55.8%	54.8%	43.1%	62.7%	59.7%					58.8%	
PHF09	Trend in value/volume of patients being treated at non-NHS hospitals	No target	Choose & Book system	М	16.1%	19.7%	21.6%	19.2%	17.0%	16.6%	13.6%	20.3%	20.1%					18.6%	

Existing r	monthly indicators from 2011/12	2012/13 Target	Data Source	Freq	2011/12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Year to Date	Comments
SQU06	Stroke: Proportion of people who have had a stroke who spend at least 90% of their time in hospital on a stroke unit	80%	Unify2	М	69.7%	95.7%	88.6%	83.9%	84.0%	90.3%	95.5%	88.6%	78.3%	100.0%				89.4%	November & December
SQU06	Stroke: Proportion of people at high risk of Stroke who experience a TIA are assessed and treated within 24 hours	60%	Unify2	М	68.9%	38.5%	61.1%	92.3%	80.0%	66.7%	52.9%	66.7%	60.0%	75.0%				64.8%	figures are provisional
SRS10	Number of Delayed Transfers of Care - NEPFT	Reduction	Unify2	М	3	10	10	6	2	2	5	9	11						
Quarterly	Indicators	2012/13 Target	Data Source	Freq	2011/12			Quarter 1			Quarter 2			Quarter 3			Quarter 4	Year to Date	Comments
PHQ10	Mental Health: The number of new cases of psychosis served by early intervention teams year to date	No plans required	Unify2	Q	85			8			19								
PHQ11	Mental Health: % of inpatient admissions that have been gatekept by CR/HT	95.0%	Unify2	Q	99.8%			99.2%			99.2%								
PHQ12	mental nearth: The proportion of people under adult mental illness specialties on CPA who were followed up within 7 days of discharge from psychiatric in-patient care during the quarter (OA)	95.0%	Unify2	Q	98.9%			99.2%			99.2%								
PHQ13	IAPT: Proportion of people with depression/anxiety disorders who receive psychological therapy	9.8%	Omnibus	Q	8.9%			2.2%			2.0%								IAPT slightly below trajectory due to staff shortage due to maternity leave
	IAPT: Proportion of people who complete therapy who are moving to recovery	50.5%			47.0%			49.5%			52.0%								
PHQ31	Number of eligible people who have been offered an NHS Health Check	23,613	LES	Q	14,498			1,644			6,096								Public Health have actions in place to
111451	Number of eligible people who have received an NHS Health Check	17,708	220	•	9,313			1,438			5,155								improve performance
PHQ14	% of people with LTCs who said they had had enough support from local services/orgs	No plans required	GP Patient Survey	Bi-A	86.4%						86.5%								
PHQ18	Patient experience survey: Outliers identified using NHS PF approach + narrative & results of local surveys	твс	cqc	A															
Existing	quarterly indicators from 2011/12	2012/13	Data Source	Frea	2011/12			Quarter 1			Quarter 2			Quarter 3			Quarter 4	Year to Date	Comments
SQU02	% deaths at home (inc care homes) : No reg deaths at home/no. registered deaths	No plans required	ERPHO	Q	40.2%			43.8%			41.7%								
SQU06	Stroke: Proportion of people who have had a stroke who spend at least 90% of their time in hospital on a stroke unit	80%	Unify2	Q	69.7%			90.2%			89.7%								
SQU06	Stroke: Proportion of people at high risk of Stroke who experience a TIA are assessed and treated within 24 hours	60%	Unify2	Q	68.9%			63.6%			66.0%								

# Mid Essex PCT / CCG

## Performance against Stroke Indicators (the data for November & December is early and will change)

Monthly Indicator	s	2012/13 Target	Data Source	Freq	2011/12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Year to Date	Comments
ASI Metric 3 SHA Metric4	Proportion of people who spend at least 90% of their time on a stroke unit	80%	IPMR	М	69.7%	95.7%	88.6%	83.9%	84.0%	90.3%	95.5%	88.6%	78.3%	100.0%				89.4%	
ASI Metric 5 SHA Metric5a	Proportion of people who have a TIA who are scanned and treated within 24 hours but not admitted	60%	IPMR	м	68.9%	38.5%	61.1%	92.3%	80.0%	66.7%	52.9%	66.7%	60.0%	75.0%				64.8%	
SHA Metric5b	Proportion of people who have a TIA who are scanned and treated within 24 hours	60%	Cardiac & Stroke Network	М	51.9%	45.5%	65.4%	91.3%	77.3%	63.6%	69.2%	75.0%	67.6%	77.8%				69.7%	
ASI Metric 4i SHA Metric6a	Suspected Stroke: % patients with access to a brain scan within 60 minutes (all patients)	50%	Cardiac & Stroke Network	М	40.8%	53.7%	56.1%	65.6%	50.0%	61.5%	66.7%	59.5%	58.3%	68.8%				59.2%	
SHA Metric6b	Suspected Stroke: % patients with access to a brain scan within 60 minutes (eligible patients)	60%	Cardiac & Stroke Network	М	93.3%	87.5%	83.3%	92.9%	100.0%	100.0%	82.4%	84.0%	77.8%	100.0%				88.2%	
ASI Metric 4ii	Access to Brain Imaging within 24 hours	100%	Cardiac & Stroke Network	М	90.8%	97.7%	97.6%	100.0%	100.0%	100.0%	92.0%	100.0%	100.0%	100.0%				98.6%	
SHA Metric7a	% non-haemorrhagic stroke patients receiving Thrombolysis within 3 hours of onset	12%	Cardiac & Stroke Network	М	14.2%	5.7%	13.2%	21.4%	5.3%	3.6%	4.2%	6.5%	14.3%	30.8%					High priority and being focused on as part of stroke work programme, a streamlining of processes has affected an improvement since the beginning of November
SHA Metric7b	% Stroke patients receiving Thrombolysis	No target	Cardiac & Stroke Network	М	18.3%	8.6%	23.7%	25.0%	5.3%	7.1%	4.2%	9.7%	23.8%	30.8%				14.8%	1
SHA Metric8a	% low risk TIA patients with access to MRI or carotid scans within 7days from onset	65%	Cardiac & Stroke Network	м	53.9%	47.1%	63.6%	64.3%	70.0%	55.9%	48.3%	66.7%	73.0%	55.6%				61.7%	support from Primary care in ensuring early identification of the symptoms of stroke as this target is measured from onset. Detailed analysis for those patients who did not achieve the target, indicated referral outside of the the 7
SHA Metric8b	% low risk TIA patients with access to MRI or carotid scans within 7days from presentation	65%	Cardiac & Stroke Network	М	79.6%	94.1%	86.4%	85.7%	90.0%	85.3%	79.3%	91.7%	91.9%	77.8%				87.4%	1
SHA Metric9	Proportion of patients admitted to an acute stroke unit within 4 hours of hospital arrival	95%	Cardiac & Stroke Network	м	26.0%	63.2%	58.5%	72.7%	72.0%	64.5%	87.0%	55.6%						67.5%	High Priority and dedicated workshop is being held on 14th Feb 2013 to implement new process
ASI Metric 1	Proportion of patients with AF presenting with stroke anti-coagulated on discharge	60%	Cardiac & Stroke Network	М	49.5%	50.0%	88.9%	77.8%	66.7%	71.4%	50.0%	66.7%	66.7%	100.0%				70.2%	
ASI Metric 2	Proportion Admitted to Stroke Unit Directly and Within 4 Hours	90%	Cardiac & Stroke Network	М	25.5%	63.2%	56.1%	69.7%	72.0%	61.3%	83.3%	68.6%	58.3%	75.0%				66.3%	High Priority and dedicated workshop is being held on 14th Feb 2013 to implement new process
ASI Metric 6	Proportion of patients who have received psychological support for mood, behaviour or cognitive disturbance by six months after stroke.	40%	Cardiac & Stroke Network	М	0.0%	0.0%	0.0%	9.5%	15.8%	20.8%	19.4%	4.2%	24.2%	17.6%				11.7%	A review of the psychological support needed for the stroke unit is ongoing with MEHT
ASI Metric 7	Proportion of patients and carers with joint care plans on discharge from hospital to final place of residence	85%	Cardiac & Stroke Network	М	27.7%	50.0%	83.3%	80.0%	0.0%	100.0%	100.0%	100.0%	100.0%					82.0%	
ASI Metric 8	Proportion of stroke patients that are reviewed at six months after leaving hospital	95%	Cardiac & Stroke Network	М	0.9%	0.0%	0.0%	0.0%	2.9%	6.5%	18.4%	9.5%	2.9%	0.0%				4.9%	Early data for November, position will change
ASI Metric 9i	Presence of a stroke skilled Early Supported Discharge team			М															

ASI Metric 9ii Proportion of patients supported by a stroke skilled Early Supported Discharge team (by Acute Trust - MEHT)  Cardiac & Stroke Network  M 7.9%  27.8%  27.3%  33.3%  21.7%  39.1%	20.8% 20.6% 21.7% 14.3%		Data validation is currently being undertaken as reported data does not match service activity reports
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