

Annual health check 2007/08 - Performance of North West London Hospitals NHS Trust

Summary







Based on our assessment for 2007/08, North West London Hospitals NHS Trust provided an adequate quality of service to patients but failed to maintain the good standard of performance it achieved the previous year. For 2005/06 the trust provided an adequate standard of performance. It has continued to be weak at managing its finances over the last three years.

The trust was one of several to receive an inspection over the summer, as part of our core standards assessment process. The visit focused on five standards, including a standard concerned with safety. As a result of the visit, no amendments were made to the trust's original core standards declaration.










In a recent survey of trusts in England, patients rated this organisation as 'poor' in terms of their overall experience.

Overall performance

The overall performance rating is made up of two parts: 'use of resources', which looks at how effectively a trust manages its financial resources; and 'quality of services', which is an aggregated score of performance against national standards and targets. The below tables summarise the three years of the annual health check.

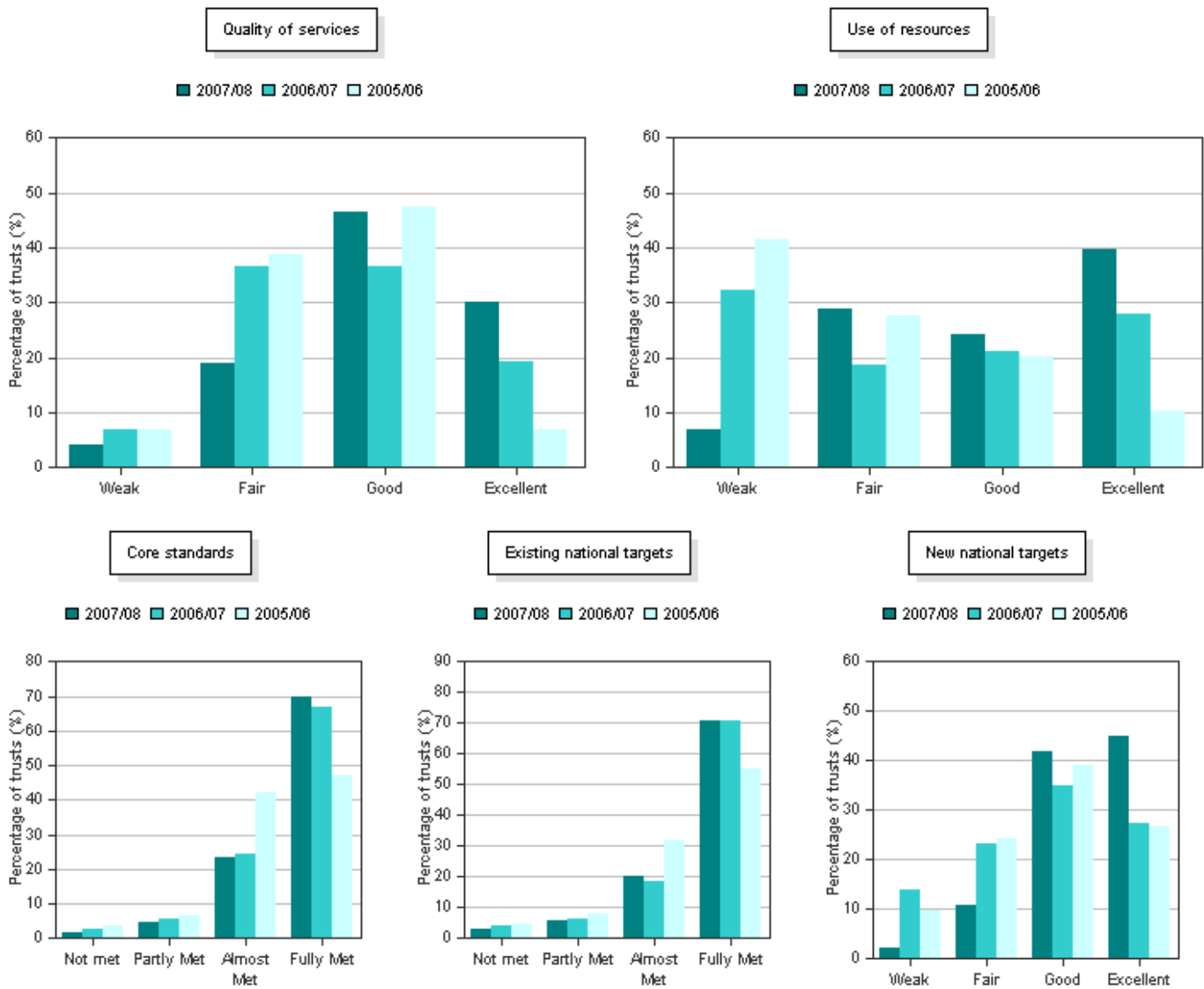
	2007/08	2006/07	2005/06
Quality of services			
Use of resources			

Components of quality of services

	2007/08	2006/07	2005/06
Core standards			
Existing national targets			
New national targets			

Overall performance of acute trusts

The graphs below show the overall performance of all acute and specialist trusts for the two parts of the overall performance ratings, as well as for the three components of quality of services, over the three years of the annual health check.



Core standards performance

Every NHS trust in England is responsible for ensuring that it is complying with the Department of Health's core standards. As part of the annual health check, we ask all trusts to assess their performance against the core standards and to publicly declare the information. The tables below present North West London Hospitals NHS Trust's performance in the seven key areas of health and healthcare over the three years of the annual health check.

Safety

	2007/08	2006/07	2005/06
C01a - incidents - reporting and learning	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C01b - safety alerts	● ● ● COMPLIANT	● COMPLIANT	○ INSUFFICIENT ASSURANCE
C02 - safeguarding children	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C03 - NICE interventional procedures	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C04a - infection control	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C04b - safe use of medical devices	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C04c - decontamination	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C04d - medicines management	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C04e - clinical waste	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT

Clinical and cost effectiveness

	2007/08	2006/07	2005/06
C05a - NICE technology appraisals	● ● ● COMPLIANT	● NOT MET	○ INSUFFICIENT ASSURANCE
C05b - clinical supervision	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C05c - updating clinical skills	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C05d - clinical audit and review	● ● ● COMPLIANT	● COMPLIANT	○ INSUFFICIENT ASSURANCE
C06 - partnership	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT

Governance

	2007/08	2006/07	2005/06
C07a and c - governance	● ● ● COMPLIANT	● COMPLIANT	● NOT MET
C07b - honesty, probity	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C07e - discrimination	● ● ● COMPLIANT	● COMPLIANT	○ INSUFFICIENT ASSURANCE
C08a - whistle-blowing	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C08b - personal development	● ● ● NOT MET	● NOT MET	● COMPLIANT
C09 - records management	● ● ● NOT MET	● COMPLIANT	○ INSUFFICIENT ASSURANCE
C10a - employment checks	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C10b - professional codes of conduct	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C11a - recruitment and training	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C11b - mandatory training	● ● ● NOT MET	● COMPLIANT	● COMPLIANT
C11c - professional development	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C12 - research governance	● ● ● COMPLIANT	● COMPLIANT	● NOT MET

Patient focus

	2007/08	2006/07	2005/06
C13a - dignity and respect	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C13b - consent	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C13c - confidentiality of information	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C14a - complaints procedure	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C14b - complainants discrimination	● ● ● COMPLIANT	● COMPLIANT	○ INSUFFICIENT ASSURANCE
C14c - complaints response	● ● ● COMPLIANT	● COMPLIANT	● NOT MET
C15a - food provision	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C15b - food needs	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT
C16 - accessible information	● ● ● COMPLIANT	● COMPLIANT	● COMPLIANT

Accessible and responsive care

	2007/08	2006/07	2005/06
C17 - patient and public involvement	COMPLIANT	COMPLIANT	COMPLIANT
C18 - equity, choice	COMPLIANT	COMPLIANT	COMPLIANT

Care environment and amenities

	2007/08	2006/07	2005/06
C20a - safe, secure environment	COMPLIANT	COMPLIANT	COMPLIANT
C20b - privacy and confidentiality	COMPLIANT	COMPLIANT	COMPLIANT
C21 - clean, well designed environment	COMPLIANT	COMPLIANT	COMPLIANT

Public health

	2007/08	2006/07	2005/06
C22a and c - public health partnerships	COMPLIANT	COMPLIANT	COMPLIANT
C22b - local health needs	NOT APPLICABLE	COMPLIANT	NOT MET
C23 - public health cycle	COMPLIANT	COMPLIANT	COMPLIANT
C24 - emergency preparedness	COMPLIANT	COMPLIANT	COMPLIANT

Existing national targets performance by indicator

Our assessment of existing national targets looks at whether this trust is maintaining the levels of service set through the Department of Health's 2003-2006 planning round. We use sets of performance indicators to measure the targets. In the 2007/08 annual health check we used a total of 36 indicators across the different trust types to measure performance against existing national targets. Most of those targets are measured by one performance indicator, with the remainder being measured by two indicators.

The levels of performance against the indicators for this trust are detailed below.

Indicators

	2007/08	2006/07	2005/06
Total time in A&E: four hours or less	UNDER ACHIEVED	DATA NOT RETURNED	ACHIEVED
All cancers: two week wait	UNDER ACHIEVED	ACHIEVED	ACHIEVED
Rapid access chest pain clinic: two week wait	ACHIEVED	ACHIEVED	ACHIEVED
Revascularisation: three month wait	ACHIEVED	NOT APPLICABLE	NOT APPLICABLE
Cancelled operations and those not admitted within 28 days	ACHIEVED	UNDER ACHIEVED	FAILED
Thrombolysis - 60 minute call to needle time	DATA NOT AVAILABLE	DATA NOT AVAILABLE	UNDER ACHIEVED
Information in place to support choice	UNDER ACHIEVED	UNDER ACHIEVED	ACHIEVED
All cancers: one month diagnosis to treatment	ACHIEVED	ACHIEVED	ACHIEVED
All cancers: two month GP urgent referral to treatment	ACHIEVED	ACHIEVED	ACHIEVED
Inpatients waiting longer than 26 weeks	ACHIEVED	ACHIEVED	ACHIEVED
Outpatients waiting longer than 13 weeks	ACHIEVED	ACHIEVED	ACHIEVED

Note: Data from the last three years has been presented in the table above. However, annual amendments to indicator constructions and scoring thresholds have sometimes taken place.

New national targets performance by indicator

Our new national targets assessment looks at the targets outlined in *National Standards, Local Action: Health and Social Care Standards and Planning Framework 2005/06 - 2007/08*. As for existing national targets we use sets of indicators to measure performance against the targets. In the 2007/08 annual health check we used a total of 59 indicators to measure performance against the new national targets. Some new national targets are measured by one performance indicator, with others being measured by up to four indicators.

Indicator level performance for this trust is detailed below.

Indicators

	2007/08	2006/07	2005/06
Participation in audits	UNDER ACHIEVED	ACHIEVED	ACHIEVED
Smoking during pregnancy and breastfeeding initiation	ACHIEVED	ACHIEVED	FAILED
Access to genito-urinary medicine clinics within 48 hours	ACHIEVED	ACHIEVED	ACHIEVED
Experience of patients	POOR	BELOW AVERAGE	SATISFACTORY
Emergency bed days	ACHIEVED	ACHIEVED	UNDER ACHIEVED
Waiting times for diagnostic tests	ACHIEVED	FAILED	ACHIEVED
Clostridium difficile data quality	ACHIEVED	NOT APPLICABLE	NOT APPLICABLE
MRSA bacteraemia	UNDER ACHIEVED	UNDER ACHIEVED	UNDER ACHIEVED
Data quality on ethnic group	ACHIEVED	ACHIEVED	ACHIEVED
Compliance with guidelines concerning self harm	UNDER ACHIEVED	ACHIEVED	ACHIEVED
Information, screening and referral for drug misusers	ACHIEVED	ACHIEVED	ACHIEVED
Referral to treatment time milestones	UNDER ACHIEVED	NOT APPLICABLE	NOT APPLICABLE
Compliance with guidelines concerning obesity	UNDER ACHIEVED	NOT APPLICABLE	NOT APPLICABLE

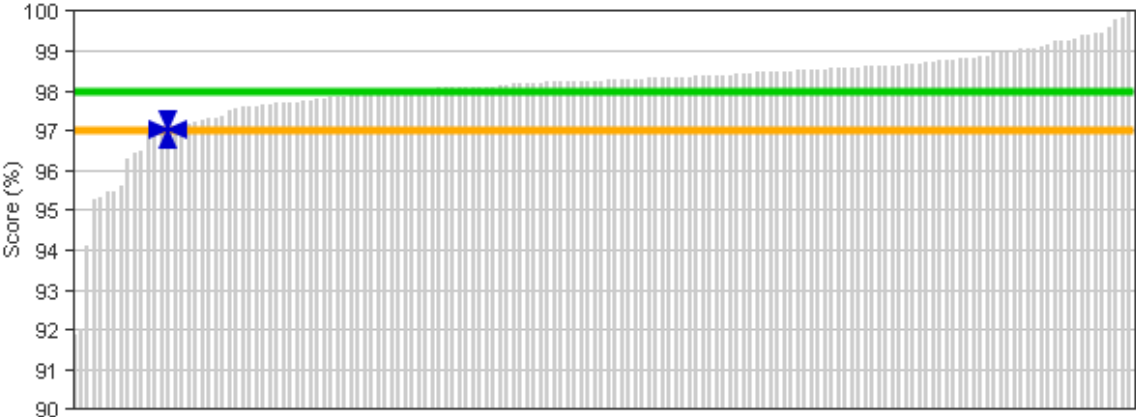
Note: Data from the last three years has been presented in the table above. However, annual amendments to indicator constructions and scoring thresholds have sometimes taken place.

Focus on selected target indicator

The graph below shows how North West London Hospitals NHS Trust has performed in comparison with all other acute trusts for the selected target indicator in 2007/08.

Total time in A&E: four hours or less

- All Scores
- Achieved threshold
- Underachieved threshold
- Your Score - Underachieved



Summarised performance of other annual health check assessments

The following assessments have also been carried out during the first three years of the annual health check. Our reviews and studies look at whether NHS trusts are delivering high quality care and treatment, and achieving value for money.

	2007/08	2006/07	2005/06
Admissions management			● ● ● ● FAIR
Diagnostic services			● ● ● ● FAIR
Medicines management			● ● ● ● FAIR
Services for children in hospital			● ● ● ● FAIR
Maternity		● ● ● ● FAIR PERFORMING	

Useful links and glossary

The documents below provide further information on the annual health check:

- [Performance ratings 2007/08 - including links to national overview report and regional summaries](#)
- [More information on core standards](#)
- [More information on existing national targets](#)
- [More information on new national targets](#)
- [Annual health check 2007/08 frequently asked questions](#)
- [Information on NHS patient surveys](#)

Glossary of terms:

Core standards

Fully met: This score means that a trust met all of the core standards set by Government by the end of the assessment year. A trust can only receive this score if it declares no more than four failings during the year. These failings must have been corrected by the end of the year.

Almost met: This score means that a trust met almost all of the core standards set by Government.

Partly met: This score means that a trust met many of the core standards set by Government. However, it was not able to demonstrate that it had met a number of standards.

Not met: This score means that a trust did not meet several of the core standards set by Government.

Compliant: This score means that a trust's board determined that it had met a standard during the assessment year, without any significant lapses.

Insufficient assurance: This score means that a trust's board was unclear as to whether there had been one or more significant lapses during the assessment year in relation to a standard.

Not met: This score means that a trust's board was clear that there had been one or more significant lapses in relation to a standard during the assessment year.

Declaration adjusted / Qualification: This score means that a trust received a follow up inspection at the end of the assessment year and had its declared compliance level adjusted, or qualified, based on the findings of our inspection.

Existing and new national targets

Fully met: This score means that a trust performed consistently well for the existing national targets assessment.

Almost met: This score means that a trust performed well for many aspects of the existing national targets assessment.

Partly met: This score means that a trust performed poorly for some aspects of the existing national targets assessment.

Not met: This score means that a trust generally performed poorly for the existing national targets assessment.

Excellent: This score means that a trust performed well beyond the minimum requirements and the reasonable expectations for the new national targets assessment.

Good: This score means that a trust performed above the minimum requirements and the reasonable expectations for the new national targets assessment.

Fair: This score means that a trust performed in line with the minimum requirements and the reasonable expectations for the new national targets assessment.

Weak: This score means that a trust performed below the minimum requirements and the reasonable expectations for the new national targets assessment.

Achieved: This score means that a trust performed to a high level for this aspect of the targets assessment.

Underachieved: This score means that a trust performed below the required level for this aspect of the targets assessment.

Failed: This score means that a trust performed poorly for this aspect of the targets assessment.

Not applicable: This score means that this aspect of the targets assessment did not apply to this trust. As a result, this trust was not assessed against it.

Data not available: This score means that this aspect of the targets assessment did apply to this trust, but the relevant data were not available. This was not the fault of the trust, so it was not assessed against it.

Data not returned: This score means that this aspect of the targets assessment did apply to this trust, but the relevant data were either not returned or were of insufficient quality for the purpose of this assessment. As a result, this trust was awarded the lowest score, equivalent to a fail.

Target: This is an expectation of the NHS set by Government, which is to be achieved by a specific date.

Indicator: This is what we use to measure performance against a target. Often this will be a one-to-one relationship (in other words, one target is measured by one indicator), but sometimes we use more than one indicator to assess performance against a target.

Indicator construction: This is the detailed information that we publish about an indicator, which outlines the data and the method we will use to assess performance.

Scoring threshold: This is what we use to determine the required level of performance for an indicator. For each indicator, we use thresholds of performance to decide whether an organisation has 'achieved', 'underachieved' or 'failed'.

Quality of services assessment

Excellent: This score means that a trust received the highest score of either 'fully met' or 'excellent' for all applicable assessments that contribute to the overall quality of services score.

Good: This score means that a trust received at least the second highest score of either 'almost met' or 'good' for all applicable assessments that contribute to the overall quality of services score.

Fair: This score means that a trust has performed adequately, in that it has not received the lowest score of 'not met' for either core standards or existing national targets. However, it has not performed sufficiently well across the applicable assessments that contribute to the overall quality of services score to score any higher.

Weak: This score means that a trust received the lowest score of 'not met' for either core standards or existing national targets.

Use of resources assessment

Excellent: This score means that a trust performed very well. Management arrangements operated effectively, and financial targets were met for at least the last two years.

Good: This score means that a trust performed well in regard to its financial arrangements, and met its financial targets for at least the last two years.

Fair: This score means that a trust performed adequately in regard to its financial arrangements.

Weak: This score means that a trust performed poorly in regard to its financial arrangements.