

	County Durham PCT				Darlington PCT				Period	Frequency	Source	Latest Reported Performance				CQC
	Target	Previous	Latest	Movement	Target	Previous	Latest	Movement				SHA	Period	National	Period	

Vital Signs Tier 1

Cleanliness and healthcare associated infections

VSA1	Incidence of MRSA (Provider - CDDFT)	14	4	6	↑	14	4	6	↑	Nov-09 YTD	Monthly	MESS	51	Nov-09 YTD	1255	Nov-09 YTD	Y
VSA3	Incidence of Clostridium difficile (Provider - CDDFT)	124	60	66	↑	124	60	66	↑	Nov-09 YTD	Monthly	MESS	640	Oct-09 YTD	7697	Oct-09 YTD	Y
VSA3	Incidence of Clostridium difficile (Commissioner)	278	222	245	↑	38	33	35	↑	Nov-09 YTD	Monthly	MESS	1140	Oct-09 YTD	15350	Oct-09 YTD	Y

Access to personalised and effective care

VSA4a	18 weeks admitted, adjusted	90.0%	94.9%	94.2%	↓	90.0%	96.7%	95.2%	↓	Nov-09	Monthly	Unify2	94.1%	Sep-09	93.3%	Sep-09	Y
VSA4b	18 weeks non admitted	95.0%	97.7%	97.9%	↑	95.0%	99.1%	99.0%	↓	Nov-09	Monthly	Unify2	97.6%	Sep-09	97.6%	Sep-09	Y
VSA4c	18 weeks Direct Access Audiology	95.0%	100.0%	99.7%	↓	95.0%	100.0%	100.0%	→	Nov-09	Monthly	Unify2	99.6%	Oct-09	99.30%	Oct-09	Y
VSA4d	>6 weeks 15 key diagnostic tests	0	18	29	↑	0	0	0	→	Nov-09	Monthly	Unify2	52	Oct-09	2548	Oct-09	N
VSA7	Practices offering extended opening	50.7%	93.0%	93.0%	→	54.5%	100.0%	100.0%	→	Oct-09	Quarterly	Unify2	79.6%	Dec-08	69.2%	Dec-08	N
VSA8	Breast Symptom Two week wait	93%	31.3%	50.0%	↑	93%	46.9%	80.8%	↑	Oct-09	Monthly	CWT Shadow Monitoring	56.9	Oct-09	57.3	Oct-09	Y
VSA11a	Cancer: 31 Day Subsequent Treatments Target Drugs	98%	98.1%	100.0%	↑	98%	100.0%	100.0%	→	Oct-09	Monthly	CWT	99.8%	Oct-09	99.5%	Oct-09	Y
VSA11b	Cancer: 31 Day Subsequent Treatments Target Surgery	94%	100.0%	100.0%	→	94%	100.0%	100.0%	→	Oct-09	Monthly	CWT	98.5%	Oct-09	97.0%	Oct-09	Y
VSA12	Cancer: 31 Day Subsequent Treatments Target (Radiotherapy)	94%	94.0%	96.4%	↑	94%	100.0%	100.0%	→	Oct-09	Monthly	CWT Shadow Monitoring	92.8%	Oct-09	91.5%	Oct-09	Y
VSA13a	Extended 62 Day Cancer Treatment Targets- Consultant Upgrade	NA	66.7%	100.0%	↑	NA	100.0%	100%	→	Oct-09	Monthly	CWT	93.3%	Oct-09	93.4%	Oct-09	Y
VSA13b	Extended 62 Day Cancer Treatment Targets - Screening Services	90%	100.0%	91.3%	↓	90%	100.0%	100%	→	Oct-09	Monthly	CWT	95.8%	Oct-09	92.9%	Oct-09	Y

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VSA14a	Proportion of people who spend at least 90% of their time on a stroke unit	70%	37.7%	45.6%	↑	70%	15.2%	37.7%	↑	Qtr 2 2009/10	Quarterly	VSMr					Y
VSA14b	Proportion of people who have a TIA who are scanned and treated within 2 hours	45%	66.7%	66.7%	→	45%	0.0%	0.0%	→	Qtr 2 2009/10	Quarterly	VSMr					Y

Vital Signs Tier 2

Health Improvement & Reducing Health Inequalities

VSB1a	All age all cause mortality (AACM) rate for males	742	742.5	780.53	↑	791	737.4	769.0	↓	2008	Annually	NCHOD	779.15	2008	679.88	2008	Y
VSB1b	All age all cause mortality (AACM) rate for females	554	557.3	570.5	↑	556	561.6	543.2	↓	2008	Annually	NCHOD	555.67	2008	486.72	2008	Y
VSB2	Reduction in CVD mortality	88.75	83.4	86.6	↑	97.2	88.1	84.48	↓	2008	Annually	NCHOD	81.07	2008	71.02	2008	Y
VSB3	Reduction in Cancer mortality	125.7	131.4	126.6	↓	114.4	113.3	122.3	↑	2008	Annually	NCHOD	132.84	2008	112.27	2008	Y
VSB4	Reduction in mortality from suicide & injury of undetermined intent	0	8.3	11.0	↑	0	4.6	9.7	↑	2008	Annually	NCHOD	8.76	2008	7.98	2008	N
VSB5	Smoking Quitters	2202	1185	2405	↑	328	265	470	↑	Qtr 2 2009/10	Quarterly	LDPr Practice Systems	5658	Qtr 1 2009/10	79351	Qtr 1 2009/10	Y
VSB6	Early access to Maternity Services	80%	84.0%	84.3%	↑	80%	83.0%	83.3%	↑	Qtr 2 2009/10	Quarterly	Acute VSMr	N/A	N/A	N/A	N/A	Y
VSB8	Under 18 conception rate	35.8	46.1	49.9	↑	39.6	51.2	55.2	↑	2007	Annually	PH/ONS	52.9	2007	41.7	2007	Y
VSB9a	Children in Reception with height and weight recorded who are obese	11.0%	9.6%	9.4%	↓	12.0%	10.0%	8.9%	↓	2008/09	Annually	NCMP	10.2%	2008/09	9.6%	2008/09	Y
VSB9b	Children in Reception with height and weight recorded	94.0%	90%	97.2%	↑	85.0%	99%	93.4%	↓	2008/09	Annually	NCMP	95%	2008/09	91%	2008/09	Y
VSB9c	Children in Year 6 with height and weight recorded who are obese	21.0%	20.9%	20.3%	↓	22%	20%	19.9%	↓	2008/09	Annually	NCMP	20.4%	2008/09	18.3%	2008/09	Y
VSB9d	Children in Year 6 with height and weight recorded	91.0%	92%	96.8%	↑	85.0%	98%	94.8%	↓	2008/09	Annually	NCMP	94%	2008/09	89%	2008/09	Y
VSB10a	Immunisation rate for children aged 1 for Dtap/IPV/Hib	95.0%	97.0%	97.7%	↑	95.0%	95.4%	95.4%	↓	Qtr 1 2009/10	Quarterly	HPA	95.2%	Qtr 1 2009/10	91.9%	Qtr 1 2009/10	Y
VSB10b	Immunisation rate for children aged 2 for PCV	95.0%	90.0%	90.7%	↑	95.0%	88.0%	87.5%	↓	Qtr 1 2009/10	Quarterly	HPA	90%	Qtr 1 2009/10	85.8%	Qtr 1 2009/10	Y
VSB10c	Immunisation rate for children aged 2 for HibMenC	95.0%	92.0%	93.6%	↑	95.0%	92.0%	93.4%	↑	Qtr 1 2009/10	Quarterly	HPA	93.7%	Qtr 1 2009/10	88.4%	Qtr 1 2009/10	Y
VSB10d	Immunisation rate for children aged 2 for MMR	95.0%	91.0%	91.4%	↑	95.0%	90.0%	90.6%	↑	Qtr 1 2009/10	Quarterly	HPA	89.9%	Qtr 1 2009/10	86%	Qtr 1 2009/10	Y

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VSB10e	Immunisation rate for children aged 5 for DTaP/IPV	95.0%	91.0%	72.9%	↓	95.0%	93%	83%	↓	Qtr 1 2009/10	Quarterly	HPA	85.7%	Qtr 1 2009/10	83.4%	Qtr 1 2009/10	Y
VSB10f	Immunisation rate for children aged 5 for MMR	95.0%	88.0%	70.9%	↓	95.0%	90.0%	80.3%	↓	Qtr 1 2009/10	Quarterly	HPA	83.6%	Qtr 1 2009/10	81.1%	Qtr 1 2009/10	Y
VSB10g	Immunisation rate for girls aged 12-13 for HPV	90.0%	N/A	64.9%	↑	90.0%	N/A	83.4%	↑	2008/09	Annually	HPA	82.40%	2008/09	80.10%	2008/09	Y
VSB11a	Prevalence of Breastfeeding at 6-8 weeks	27.0%	26.6%	30.3%	↑	31.0%	33.6%	39.9%	↑	Qtr 2 2009/10	Quarterly	VSMr					Y
VSB11b	Coverage - Breastfeeding status (6-8 wk) recorded as % of all due 6-8 wk check	87.1%	95.7%	96.7%	→	87.3%	93.7%	99.4%	↓	Qtr 2 2009/10	Quarterly	VSMr					Y
VSB12a	Has a full range of CAMHs for LD been commissioned for the council area?	3	3	4	↑	3	3	4	↑	Qtr 3 2009/10	Quarterly	VSMr	NA		3	2008/09	Y
VSB12b	Do 16 and 17 year olds who require MH services have age appropriate access?	4	4	4	→	4	4	4	→	Qtr 3 2009/10	Quarterly	VSMr	NA		3	2008/09	Y
VSB12c	24hr cover for urgent MH needs of CYP and a MH Assess. to be undertaken within 24 hours?	3	3	3	→	3	3	3	→	Qtr 3 2009/10	Quarterly	VSMr	NA		3	2008/09	Y
VSB12d	Is a full range of EI services for children experiencing MH problems	4	4	4	→	4	4	4	→	Qtr 3 2009/10	Quarterly	VSMr	NA		3	2008/09	Y
VSB13	Chlamydia Screening	12%	4.9%	8.7%	↑	12%	4.4%	8.0%	↑	Qtr 2 2009/10	Quarterly	HPA	8.1%	Qtr 2 2009/10	8.6%	Qtr 2 2009/10	Y
VSB14	Number of drug users recorded as being in effective treatment	1567	N/A	1434	↑	441	N/A	428	↑	2008/09	Annually	NDTMS	10933	2008/09	163127	2008/09	Y

Improving Access

VSB18	Dental Services	274812	276816	279041	↑	65312	64569	64111	↓	Qtr 2 2009/10	Quarterly	IC					Y
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CQC Indicators

CQC1	Access to GUM clinics	100%	100%	100.0%	→	100%	100%	100%	→	Nov-09	Monthly	GUMAMM / HPA	99.8%	Oct-09	99.90%	Oct-09	Y
CQC2	Category A calls meeting 19 minute standard	95.0%	98.6%	98.5%	↓	95.0%	99.3%	99.3%	→	Nov-09	Monthly	NEAS	99.0%	Nov-09	N/A	N/A	Y
CQC3	Category A calls meeting 8 minute standard	75.0%	65.1%	64.9%	↓	75.0%	83.0%	83.2%	↑	Nov-09	Monthly	NEAS	76.1%	Nov-09	N/A	N/A	Y
CQC4	Category B calls meeting 19 minute standard	95.0%	92.2%	92.1%	↓	95.0%	93.6%	93.6%	→	Nov-09	Monthly	NEAS	94.7%	Nov-09	N/A	N/A	Y

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CQC5	Commissioning of crisis resolution/home treatment services	99	155	138	↓	17	34	33	↓	Nov-09	Monthly	VSMr/MH Trusts	8969	Nov-09	73491	Dec-07	Y
CQC6	Commissioning of early intervention in psychosis services	62	84	107	↑	10	16	19	↑	Nov-09 (YTD)	Monthly	VSMr/MH Trusts	457	Nov-09 (YTD)	5887	Dec-07	Y
CQC7	Data Quality on Ethnic Group	80%	88.49%	88.64%	↑	80%	82.34%	84.74%	↑	2008/09	Annually	MHMDS and SUS			87.30%	2007/08	Y
CQC8	Delayed transfers of care	<=3.5%	0.18%	1.0%	↑	<=3.5%	0%	0.0%	→	Jun-08	Monthly	VSMR					Y
CQC9	Diabetic Retinopathy Screening	100.0%	100.0%	100.0%	→	100.0%	100.0%	100.0%	→	Q2 2009/10	Quarterly	VSMR/Screening service	94.40%	Sep-08	90.30%	Sep-08	Y
CQC10	Inpatients waiting longer than the 26 week standard	0	0	0	→	0	0	0	→	Nov-09 (YTD)	Monthly	Online Reports					Y
CQC11	Outpatients waiting longer than the 13 week standard	0	0	0	→	0	2	2	→	Nov-09 (YTD)	Monthly	Online Reports					Y
CQC12	Patients waiting longer than 3 months for revascularisation	0	0	0	→	0	0	0	→	Nov-09 (YTD)	Monthly	Online Reports					Y
CQC13	Time to reperfusion for patients who have had a heart attack	Not applicable - numbers are too low to be statistically valid and assessed				Not applicable - numbers are too low to be statistically valid and assessed				Y/E 2008/09	Annually	MINAP					Y
CQC14	Total time in A & E - CDDFT only	98.0%	99.3%	99.2%	↓	98.0%	99.3%	99.2%	↓	20/12/09 (YTD)	Weekly	CDDFT S/Sheet	98.7%	Oct-09	98.0%	Oct-09	Y
CQC17	Percentage of women eligible for breast screening 53-64 who have been screened	65%	78.4%	79.1%	↑	65%	77.8%	78.1%	↑	2007/08	Annually	KC63	79.4%	2006/07	76.0%	2006/07	Y
CQC18	Percentage of women eligible for breast screening 65-70 who have been screened	N/A	57.8%	75.2%	↑	N/A	74.6%	76.6%	↑	2007/08	Annually	KC63					Y
CQC19	All Cancer 2 Week Waits	93%	98.0%	98.5%	↑	93%	99.4%	99.3%	↓	Oct-09	Monthly	CWT	96.3%	Oct-09	95.1%	Oct-09	Y
CQC20	All Cancers: 31 day wait - diagnosis to 1st treatment	96%	99.1%	99.5%	↑	96%	97.4%	100.0%	↑	Oct-09	Monthly	CWT	98.7%	Oct-09	98.2%	Oct-09	Y
CQC21	All Cancers: 62 day wait - urgent GP referral to 1st treatment	85%	84.5%	84.3%	↓	85%	80.0%	79.0%	↓	Oct-09	Monthly	CWT	87.2%	Oct-09	85.1%	Oct-09	Y

Other Priority Indicators

O2	Percentage of patients booked through Choose & Book against plan	90.0%	59.0%	58.0%	↓	90.0%	68.0%	66.0%	↓	Nov-09	Monthly	C&B DH Report	62.0%	Nov-09	55.0%	Nov-09	N
O3	Choose and Book Slot Issues - CDDFT only	<4%	12.0%	13.0%	↓	<4%	12.0%	13.0%	↓	Nov-09	Monthly	C&B DH Report	9.0%	Nov-09	12.0%	Nov-09	N
O4	18 weeks admitted specialty non-compliance		2	3	↑		1	1	→	Nov-09	Monthly	Unify2					N
O5	18 weeks non-admitted specialty non-compliance		1	3	↑		1	1	→	Nov-09	Monthly	Unify2					N

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