

Performance Dashboard

Trust Board - 23rd October 2012

Code	Integrated Performance Measure		Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Criteria for Traffic Lighting (Trajectory position)			Final Required Position	Year to Date		
1. QUALITY: HEADLINE MEASURES																					
HQU01	MRSA Bacteraemia (Attributed to Trust)		0	0	0	0	0	0							0	>0	>1	0	0		
HQU02	Clostridium Difficile Infections (Attributed to Trust)		1	2	3	6	3	3							<=3	>3	>=5	<=40	18		
HQU04	Patient Experience Survey		Annual Survey																		
HQU08	Mixed Sex Accommodation Breaches		4	9	9	7	2	0							0	>0	>1	<=5	31		
	A&E Waiting Time: Total Time in A&E (% Trust)		95.4%	95.5%	96.9%	95.2%	97.7%	93.1%							>=95%	<95%	<80%	>=95%	95.6%		
	A&E Waiting Time: Total Time in A&E Quarterly (% Trust)		95.9%			95.3%									>=95%	<95%	<80%	>=95%	95.6%		
HQU09	A&E Clinical Quality: Unplanned Re-attendance Rate		CIC	5.3%	5.2%	5.3%	5.9%	5.9%	6.0%						<=3%	>3%	>=5%	<=3%	5.6%		
			WCH	5.3%	5.9%	6.5%	6.0%	5.3%	6.0%							<=3%	>3%	>=5%	<=3%	5.8%	
HQU10	A & E Clinical Quality: Total Time in the A&E Dept	Adm 95th Percentile	CIC	07:17	07:01	06:17	06:39	04:53	08:16						<=4	>4	>=6	<=4	06:43		
		Adm Median Wait		03:10	03:21	02:57	03:12	02:45	03:34							<=3	>3	>4	<=3	03:00	
		Adm Single Longest Wait		11:31	11:23	11:34	11:42	11:49	11:53								<=6	>6	>10	<=6	11:53
		Non -Adm 95th Percentile		03:27	03:36	03:21	03:41	03:21	03:48								<=4	>4	>6	<=4	03:32
		Non-Adm Median Wait		01:15	01:13	01:13	01:22	01:25	01:27								<=3	>3	>4	<=3	01:17
		Non-Adm Single Longest Wait		10:41	10:19	09:08	10:59	08:45	09:55								<=6	>6	>10	<=6	10:59
		Adm 95th Percentile	WCH	03:59	03:57	03:54	04:37	04:01	04:16								<=4	>4	>6	<=4	04:07
		Adm Median Wait		02:04	02:04	02:03	02:14	02:00	02:14								<=3	>3	>4	<=3	02:06
		Adm Single Longest Wait		09:26	10:40	07:10	10:22	07:04	11:54								<=6	>6	>10	<=6	11:54
		Non-Adm 95th Percentile		02:51	02:50	02:48	03:00	02:35	02:54								<=4	>4	>=6	<=4	02:49
Non-Adm Median Wait	00:56	00:59		00:53	00:59	00:50	00:57								<=3	>3	>4	<=3	00:57		
Non-Adm Single Longest Wait	11:15	06:38		09:18	07:38	06:50	11:14								<=6	>6	>10	<=6	11:15		
HQU11	A&E Clinical Quality: Left Without Being Seen Rate		CIC	1.8%	2.0%	2.3%	2.4%	1.8%	3.0%						<=3%	>3%	>=5%	<=3%	2.2%		
			WCH	0.9%	1.7%	1.7%	1.6%	1.2%	2.1%							<=3%	>3%	>=5%	<=3%	1.5%	
HQU12	A & E Clinical Quality: Time to Initial Assessment (for patients arriving by emergency ambulance)	95th Percentile	CIC	00:31	00:34	00:32	00:33	00:29	00:38						<=00:15	>00:15	>00:20	<=00:15	00:32		
		Median Wait		00:09	00:09	00:08	00:10	00:08	00:09							<=00:08	>00:08	>00:11	<=00:08	00:08	
		Single Longest Wait		06:59	02:04	01:31	01:35	02:01	04:39								<=00:20	>00:20	>00:30	<=00:20	06:59
		95th Percentile	WCH	00:23	00:26	00:27	00:26	00:21	00:31								<=00:15	>00:15	>00:20	<=00:15	00:25
Median Wait	00:05	00:06		00:06	00:05	00:05	00:05								<=00:08	>00:08	>00:11	<=00:08	00:05		
Single Longest Wait	01:57	01:28		01:06	01:28	01:27	01:45								<=00:20	>00:20	>00:30	<=00:20	01:57		
HQU13	A & E Clinical Quality: Time to Treatment	Median Wait	CIC	00:21	00:22	00:20	00:25	00:25	00:29						<=01:00	>01:00	>01:30	<=01:00	00:23		
		95th Percentile		05:05	02:43	03:15	09:14	03:20	08:46							<=01:54	>01:54	>02:51	<=01:54	09:23	
		Single Longest Wait		67:49	105:47	92:41	171:54	142:34	213:21								Snapshot			213:21	
		Median Wait	WCH	00:17	00:18	00:17	00:19	00:14	00:19							<=01:00	>01:00	>01:30	<=01:00	00:17	
		95th Percentile		01:23	01:33	01:22	01:36	01:07	01:25							<=01:54	>01:54	>02:51	<=01:54	01:29	
		Single Longest Wait		43:28	61:43	50:59	62:51	06:40	151:20						Snapshot			151:20			

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HQU14	Cancer: 2 Week Waits	All Cancers	94.8%			93.9%	95.4%	93.9%							>=93%	<93%	<88%	>=93%	94.6%		
		Breast Symptomatic	94.5%			96.9%	94.8%	97.9%								>=93%	<93%	<88%	>=93%	95.5%	
HQU15	Cancer: 62 Day Waits	All Cancers: 2 month Urgent Referral to Treatment	89.8%			81.8%	87.1%	88.9%							>=85%	<85%	<80%	>=85%	87.5%		
		62 Day Wait For First Treatment - Screening	87.5%			83.3%	100.0%	100.0%								>=90%	<90%	<85%	>=90%	91.3%	
		62 Day Wait For First Treatment - Cons Upgrade	100.0%			nad	nad	nad								>=85%	<85%	<80%	>=85%	100.0%	
HQU16	Emergency Re-admissions (within 30 days)		5.8%	5.3%	6.5%	5.6%	6.6%	nad							<=6%	>6%	>8%	<=6%	6.0%		
2. RESOURCES: HEADLINE MEASURES (Financial performance data in Section 4 of Performance Report)																					
HRS05_01	Acute G&A Bed Capacity - Average No of Available Daycase Beds		96	94	98	94	94								For Trending Purposes				↔		
HRS05_02	Acute G&A Bed Capacity - Average No of Available Inpatient Beds		552	554	552	564	548														↓
HRS05_03	Acute G&A Bed Capacity - Total Available Beds		648	649	649	658	642														↓
HRS06	Non Elective G&A FFCE's		2264	2458	2349	2342	2505	2451													↔
HRS07	Referral to Treatment: Number of incomplete Pathways		13899	14235	14199	14061	14370	14019													
3. QUALITY: SUPPORTING MEASURES																					
SQU01	VTE Risk Assessment		90.1%	90.6%	90.2%	92.1%	91.7%	nad							>=90%	<90%	<85%	>=90%	91.0%		
SQU04_01	A&E Clinical Quality: (Comp A)	Cellulitis	CIC	19.7%		23.8%													21.7%		
				DVT	25.0%		66.7%														45.8%
		Ambulatory Care	Cellulitis		WCH	15.8%		8.4%													12.1%
				DVT		14.3%		42.9%													
	A&E Clinical Quality: (Comp B)	Cellulitis	CIC		23.813		Quarterly Assessment														23.813
				DVT	2.977		Quarterly Assessment														
		Ambulatory Care	Cellulitis		WCH	12.205		Quarterly Assessment													
				DVT		2.872		Quarterly Assessment													
SQU04_02	A&E Clinical Quality: Consultant Sign Off		CIC		6 Monthly Audit (October and March)																
			WCH	6 Monthly Audit (October and March)																	
SQU05	Cancer: 31 Day Waits	One month Wait For First Definitive Treatment		97.4%			97.3%	99.1%	97.4%						>= 96%	< 96%	<91%	>=96%	97.6%		
		31 Day Wait for Subsequent Treatment - Surgery		89.4%			100.0%	100.0%	100.0%							>= 94%	< 94%	<89%	>=94%	94.4%	
		31 Day Wait for Subsequent Treatment - Drugs		99.0%			100%	100.0%	100.0%							>= 98%	< 98%	<93%	>=98%	99.4%	
		31 Day Wait for Subsequent Treatment - Palliative		100.0%			100%	nad	nad							>= 94%	< 94%	<89%	>=94%	100.0%	
		31 Day Wait for Subsequent Treatment - R'therapy		96.0%			92.1%	94.0%	94.6%							>=94%	<94%	<89%	>=94%	94.8%	
SQU06	Strokes: Patients with 90% of their admission on a Stroke Ward		70.6%	71.9%	81.6%	78.8%	81.6%	81.0%							>=80%	<80%	<80%	>=80%	81.0%		
	Strokes: TIA Referrals Assessed & treated within 24 Hours		71.4%	75.0%	66.7%	nad	nad	nad								>=60%	<60%	<60%	>=60%	70.6%	
SQU10	Staff Engagement		Annual survey																		
SQU11	Patient Reported Outcome Scores (PROMS)	Elective Hip Replacements		Available data to March 2011 only																	
		Groin Surgery		Available data to March 2011 only																	
		Hernia Surgery		Available data to March 2011 only																	
		Varicose Vein Surgery		Available data to March 2011 only																	
SQU17	Low Value Procedures		Under Development (nationally)																		

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SQU24	Referral to Treatment: Admitted Patients Median Wait	7.57	8.86	8.00	8.42	7.71	9.00							<=11.1	>11.1	>12.21	<= 11.1	9.00
SQU25	Referral to Treatment: Non-Admitted Patients Median Wait	4.86	5.00	5.00	5.14	5.14	5.57							<=6.6	>6.6	>7.26	<= 6.6	5.57
SQU26	Referral to Treatment: Incomplete Pathway Median Wait	5.71	5.00	6.00	5.71	6.00	6.00							<=7.2	>7.2	>7.92	<= 7.2	6.00

4. RESOURCES: SUPPORTING MEASURES (Some HR measures covered in Section 3 of the Performance Report)

SRS08	Length of Stay for Acute G&A Spells	4.9	5.0	4.9	4.8	4.7	4.7							<=3.8	>3.8	>5.0	<=3.8	4.8
SRS09	Daycase Rate (G&A)	80.8%	81.4%	81.0%	81.3%	82.2%	80.1%							>=80%	<80%	<70%	>=80%	81.1%
SRS10	Delayed Transfers of Care	8.1%	8.0%	8.8%	8.8%	8.8%	7.6%							<=3.5%	>3.5%	>5.0%	<=3.5%	8.4%
SRS11	GP Written Referrals to Hospital (G&A)	4786	5394	4460	4174	4913	4682							For Trending Purposes				
SRS12	Other Referrals For a First OP Appointment (G&A)	1194	1264	1030	1338	1241	1158											
SRS13	First OP Attendances Following GP Referral (G&A)	3846	4524	3590	4271	4098	3878											
SRS14	All First OP Attendances (G&A)	5527	6620	5349	6351	5904	5756											
SRS15	Elective FFCE's (G&A)	3064	3569	3055	3350	3152	3292											
SRS16	A&E Attendances	CIC	3611	3836	3521	3879	3664	3774										
		WCH	2575	2750	2680	2762	2558	2623										
SRS19	Staff Absences (Sickness absence rate)	4.7%	4.6%	4.4%	4.9%	4.8%	4.6%							<=3.5%	>3.5%	>5%	<=3.5%	4.7%
SRS20	Temporary Staffing Costs (Including agency costs)	5.1%	6.7%	6.2%	6.9%	6.5%	6.4%							<=2%	>2%	>4%	<=2%	6.3%

5. LOCAL MONITORING

	Data Quality on Ethnic Groups: Completeness of Trust IP Coding	93.8%	93.6%	93.7%	93.3%	93.2%	93.1%							>=85%	<85%	<60%	>=85%	93.5%
	Thrombolysis: 60 minute call to needle time	58.3%	66.7%	25.0%	100.0%	100.0%	33.0%							>=68%	<68%	<48%	>=68%	57.6%
	Referral to Treatment	Percentage admitted patients treated within 18 weeks	85.1%	82.3%	85.1%	92.7%	93.1%	92.1%						>=90%	<90%	<85%	>=90%	88.4%
		Percentage non-adm patients treated within 18 weeks	96.6%	97.0%	96.7%	97.5%	97.2%	97.6%						>=95%	<95%	<90%	>=95%	97.1%
		Percentage incomplete pathways treated within 18 weeks	92.2%	93.2%	92.9%	92.0%	92.0%	92.0%						>=92%	<92%	<87%	>=92%	92.4%
	Cancelled operations	% Cancelled	1.4%	1.0%	1.4%	0.8%	0.51%	1.0%						<=0.8%	>0.8%	>1.5%	<=0.8%	1.0%
		28 day rule	2.3%	0.0%	2.3%	4.0%	6.3%	6.3%						<=5%	> 5%	> 15%	<=5%	3.1%
	Infant Health: Breastfeeding Initiation	66.8%	69.8%	64.6%	66.5%	62.3%	65.3%							>=68%	<68%	<63%	>=68%	65.9%
	Infant Health: Smoking at Delivery	17.8%	13.5%	14.1%	14.9%	14.1%	14.2%							<=18.95%	>18.95%	>19.95%	<=18.95%	14.8%
	No of patients waiting longer than 6 weeks for diagnostic tests	0	1	0	2	1	0							0	>0	>2	<=25	4
	Choose and Book slot availability	87.1%	83.0%	85.0%	92.0%	90.8%	90.9%							>=85%	< 85%	<7 0%	>=85%	88.1%

6. LOCAL PRODUCTIVITY METRICS

	Reduce inpatient length of stay (elective)	2.5	2.5	2.7	3.0	2.4	nad							<=3.1	>3.1	>3.6	<=3.1	2.6
	Reduce inpatient length of stay (non-elective)	4.8	5.0	4.8	4.7	4.6	nad							<=4.2	>4.2	>4.8	<=4.2	4.8
	Day Case rate for Basket of 25 procedures	83.2%	82.5%	78.1%	83.8%	79.9%	nad							>=80%	<80%	<70%	>=80%	81.5%
	Pre-operative bed days (elective)	6.7%	5.2%	5.3%	7.2%	6.4%	nad							<=6%	>6%	>11%	<=6%	6.2%
	Outpatient Follow-up to New (FU:N) Ratio	2.1	2.1	2.1	2.2	2.2	nad							<=2	>2	>6	<=2	2.1
	Outpatient Did Not Attend (DNA) rate	6.4%	6.1%	5.9%	5.8%	5.4%	nad							<=7%	>7%	>10%	<=7%	5.9%

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7. LOCAL WORKFORCE METRICS																		
	Sickness \ Absence Cost (£000)	£411.8	£389.4	£358.2	£425.8	£401.0	£397.1							<=£286	>286	>£386	n/a	£2,383.3
	Turnover Rate (%)	1.19%	0.30%	0.45%	2.56%	0.43%	0.81%							<=1%	>1%	>1.5%	<=1%	0.96%
	KSF Development Reviews (Rolling Total)	60.6%	60.5%	59.2%	59.0%	58.4%	57.7%							>=80%	<80%	<50%	<=80%	57.7%
8. LOCAL QUALITY METRICS																		
	Risk Adjusted Mortality (CHKS data - Rolling Year)	103	101	98	96	93	nad							<=100	>100	>110	<100	93
	Hospital Standard Mortality Ratio (Dr Foster data Rolling Year)	119.1	118.3	116.9	114.5	nad	nad											114.5
	Summary Hospital Mortality Indicator (Dr Foster data Rolling Year)	112.9	nad	nad	110.9	nad	nad							>=88 and <=113		<88 and > 113		110.9
	Slips, Trips & Falls (inpatients)	99	105	60	76	90	90							<=100	>100	>110	<1200	520
	MSSA (Attributed to Trust)	0	2	1	0	0	1							<=1	>1	>2	<=11	4
9. ESTATE METRICS																		
	Planned Preventative Maintenance	CIC	99.59%	99.89%	100.00%	100.00%	100.00%	99.88%						>=80%	<80%	<70%	>=80%	99.89%
		WCH	96.37%	96.32%	96.66%	97.66%	96.89%	96.17%							>=80%	<80%	<70%	>=80%
	Maintenance Request Response Times	CIC	99.76%	99.69%	99.89%	99.50%	99.80%	99.48%						>=80%	<80%	<70%	>=80%	99.68%
		WCH	97.02%	99.84%	99.85%	100.00%	99.86%	99.18%							>=80%	<80%	<70%	>=80%
10. FACILITIES METRICS																		
	Catering: Waste Scores	CIC	5.02%	4.50%	4.78%	4.80%	5.25%	4.73%						<=6%	>6%	>9%	<=6.0%	4.85%
		WCH	5.47%	5.36%	4.74%	7.21%	6.84%	8.12%							<=6%	>6%	>9%	<=6.0%
	Domestic: Cleaning Audit (Quarterly Report)	CIC	96.5%			95.9%			Quarterly Assessment			>=95%	<95%	<90%	>=95%	96.1%		
		WCH	95.5%			95.7%			Quarterly Assessment			>=95%	<95%	<90%	>=95%	95.6%		
	Portering: Request Response	CIC	92.36%	91.91%	91.61%	92.75%	90.23%	88.73%						>=90%	<90%	<80%	>=90%	91.24%
		WCH	94.72%	95.94%	95.69%	95.48%	92.75%	95.02%							>=90%	<90%	<80%	>=90%

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11. REFERRAL TO TREATMENT ANALYSIS BY SPECIALTY																		
	Admitted Patient Care: Percentage treated within 18 weeks													>=90%	<90%	<85%	>=90%	
	Surgery	95.0%	90.1%	90.6%	90.2%	91.8%	90.7%							>=90%	<90%	<85%	>=90%	91.4%
	Urology	90.7%	93.4%	89.2%	93.4%	90.3%	95.4%							>=90%	<90%	<85%	>=90%	92.1%
	Orthopaedics	90.1%	90.1%	90.2%	90.9%	90.4%	90.0%							>=90%	<90%	<85%	>=90%	90.3%
	ENT	90.4%	92.0%	92.5%	94.4%	94.4%	90.5%							>=90%	<90%	<85%	>=90%	92.5%
	Ophthalmology	34.9%	27.9%	43.2%	90.4%	90.4%	90.4%							>=90%	<90%	<85%	>=90%	63.7%
	Oral Surgery	88.9%	92.6%	97.4%	97.5%	91.1%	95.8%							>=90%	<90%	<85%	>=90%	94.4%
	General Medicine	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%							>=90%	<90%	<85%	>=90%	100.0%
	Gastroenterology	97.9%	99.1%	98.5%	97.7%	99.6%	96.3%							>=90%	<90%	<85%	>=90%	98.2%
	Cardiology	95.0%	100.0%	93.1%	100.0%	91.7%	91.8%							>=90%	<90%	<85%	>=90%	95.1%
	Dermatology	91.0%	92.9%	95.5%	95.1%	96.0%	93.7%							>=90%	<90%	<85%	>=90%	94.0%
	Respiratory Medicine	100.0%	100.0%	nad	100.0%	nad	nad							>=90%	<90%	<85%	>=90%	100.0%
	Rheumatology	nad	nad	nad	nad	nad	100.0%							>=90%	<90%	<85%	>=90%	100.0%
	Elderly Care	nad	nad	nad	100.0%	nad	100.0%							>=90%	<90%	<85%	>=90%	100.0%
	Gynaecology	79.1%	82.7%	90.2%	91.6%	88.6%	90.4%							>=90%	<90%	<85%	>=90%	87.3%
	Other	100.0%	98.1%	100.0%	98.1%	97.7%	100.0%							>=90%	<90%	<85%	>=90%	98.9%
	Non-admitted Patient Care: Percentage treated within 18 weeks													>=95%	<95%	<90%	>=95%	
	Surgery	96.1%	96.8%	95.5%	96.7%	97.9%	97.6%							>=95%	<95%	<90%	>=95%	96.8%
	Urology	96.4%	95.1%	98.2%	96.4%	95.8%	96.2%							>=95%	<95%	<90%	>=95%	96.3%
	Orthopaedics	95.3%	96.5%	97.0%	95.3%	95.2%	95.3%							>=95%	<95%	<90%	>=95%	95.8%
	ENT	99.2%	99.3%	98.8%	99.0%	98.9%	98.6%							>=95%	<95%	<90%	>=95%	99.0%
	Ophthalmology	95.9%	95.6%	95.1%	97.6%	95.3%	97.0%							>=95%	<95%	<90%	>=95%	96.1%
	Oral Surgery	90.2%	89.8%	86.2%	95.2%	95.1%	95.4%							>=95%	<95%	<90%	>=95%	91.9%
	General Medicine	100.0%	100.0%	100.0%	98.3%	100.0%	100.0%							>=95%	<95%	<90%	>=95%	99.6%
	Gastroenterology	95.7%	96.4%	97.3%	97.0%	100.0%	98.4%							>=95%	<95%	<90%	>=95%	97.3%
	Cardiology	96.9%	99.4%	99.4%	98.5%	97.6%	100.0%							>=95%	<95%	<90%	>=95%	98.7%
	Dermatology	95.7%	98.4%	96.2%	99.0%	97.0%	98.4%							>=95%	<95%	<90%	>=95%	97.5%
	Respiratory Medicine	100.0%	100.0%	98.2%	95.7%	100.0%	96.6%							>=95%	<95%	<90%	>=95%	98.6%
	Rheumatology	99.3%	100.0%	100.0%	100.0%	99.2%	98.1%							>=95%	<95%	<90%	>=95%	99.5%
	Elderly Care	100.0%	100.0%	100.0%	98.3%	100.0%	100.0%							>=95%	<95%	<90%	>=95%	99.7%
	Gynaecology	97.5%	97.4%	99.2%	98.5%	96.2%	98.3%							>=95%	<95%	<90%	>=95%	97.9%
	Other	99.7%	99.7%	98.9%	99.7%	100.0%	99.7%							>=95%	<95%	<90%	>=95%	99.6%

Performance Dashboard

Trust Board - 23rd October 2012

Code	Integrated Performance Measure	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Criteria for Traffic Lighting (Trajectory position)	Final Required Position	Year to Date		
11. REFERRAL TO TREATMENT ANALYSIS BY SPECIALTY (Cont)																		
	Admitted Patient Care: Median Wait (Weeks)													<=11.1	>11.1	>12.21	<=11.1	5.57
	Surgery	5.86	6.14	6.00	5.86	5.57	5.57							<=11.1	>11.1	>12.21	<=11.1	5.57
	Urology	8.00	9.00	7.14	7.86	11.86	8.71							<=11.1	>11.1	>12.21	<=11.1	8.71
	Orthopaedics	13.14	11.86	13.00	12.43	13.43	11.43							<=11.1	>11.1	>12.21	<=11.1	11.43
	ENT	8.29	8.86	8.43	9.00	8.86	9.14							<=11.1	>11.1	>12.21	<=11.1	9.14
	Ophthalmology	23.57	24.14	19.71	16.43	16.86	15.29							<=11.1	>11.1	>12.21	<=11.1	15.29
	Oral Surgery	7.43	11.29	10.71	9.43	8.86	10.00							<=11.1	>11.1	>12.21	<=11.1	10.00
	General Medicine	5.29	3.57	4.86	3.86	2.71	3.57							<=11.1	>11.1	>12.21	<=11.1	3.57
	Gastroenterology	5.57	4.43	5.29	3.86	4.29	5.00							<=11.1	>11.1	>12.21	<=11.1	5.00
	Cardiology	5.57	5.43	7.14	6.00	8.71	8.71							<=11.1	>11.1	>12.21	<=11.1	8.71
	Dermatology	15.00	11.86	13.57	8.14	11.43	14.14							<=11.1	>11.1	>12.21	<=11.1	14.14
	Respiratory Medicine	1.14	1.43	nad	2.57	nad	nad							<=11.1	>11.1	>12.21	<=11.1	nad
	Rheumatology	nad	nad	nad	nad	nad	0.00							<=11.1	>11.1	>12.21	<=11.1	0.00
	Elderly Care	nad	nad	nad	0.86	nad	5.29							<=11.1	>11.1	>12.21	<=11.1	5.29
	Gynaecology	5.86	4.71	4.86	4.43	5.00	5.00							<=11.1	>11.1	>12.21	<=11.1	5.00
	Other	9.00	8.86	7.71	7.00	5.71	4.57							<=11.1	>11.1	>12.21	<=11.1	4.57
	Non Admitted Patient Care: Median Wait (Weeks)													<=6.6	>6.6	>7.26	<=6.6	2.00
	Surgery	2.29	1.86	1.86	2.00	2.00	2.00							<=6.6	>6.6	>7.26	<=6.6	2.00
	Urology	6.29	5.86	5.14	4.71	6.71	6.86							<=6.6	>6.6	>7.26	<=6.6	6.86
	Orthopaedics	4.71	4.29	4.57	4.00	4.00	3.71							<=6.6	>6.6	>7.26	<=6.6	3.71
	ENT	4.00	4.14	5.00	7.06	7.29	7.29							<=6.6	>6.6	>7.26	<=6.6	7.29
	Ophthalmology	5.43	6.29	5.29	6.00	6.14	6.71							<=6.6	>6.6	>7.26	<=6.6	6.71
	Oral Surgery	10.29	9.57	10.00	9.86	9.14	8.28							<=6.6	>6.6	>7.26	<=6.6	8.28
	General Medicine	7.86	7.43	7.29	6.43	6.00	7.57							<=6.6	>6.6	>7.26	<=6.6	7.57
	Gastroenterology	7.57	8.57	6.00	6.29	6.29	7.86							<=6.6	>6.6	>7.26	<=6.6	7.86
	Cardiology	7.86	7.00	7.00	7.14	7.00	6.71							<=6.6	>6.6	>7.26	<=6.6	6.71
	Dermatology	7.14	6.29	7.43	9.43	8.71	8.29							<=6.6	>6.6	>7.26	<=6.6	8.29
	Respiratory Medicine	4.57	5.00	5.00	4.43	4.57	6.14							<=6.6	>6.6	>7.26	<=6.6	6.14
	Rheumatology	5.86	5.86	6.14	5.86	5.00	6.00							<=6.6	>6.6	>7.26	<=6.6	6.00
	Elderly Care	4.14	2.71	4.00	3.86	3.71	3.29							<=6.6	>6.6	>7.26	<=6.6	3.29
	Gynaecology	4.00	5.14	4.14	2.57	4.00	4.57							<=6.6	>6.6	>7.26	<=6.6	4.57
	Other	4.14	4.14	3.71	4.29	3.00	4.14							<=6.6	>6.6	>7.26	<=6.6	4.14

