

## **Quarter 1: 2010/2011**

**Gateway reference number: 15137**

**Welcome to the thirteenth edition of the quarter  
– an update from David Flory, Deputy NHS Chief  
Executive**

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## Introduction

This report for the first quarter of 2010/11, and the first for the new Coalition Government, shows that the NHS continues to perform well, with many areas showing improvements against the operational standards. There remains, however, significant variation between organisations – the ‘levelling up’ of variation is not happening quickly enough.

This publication reflects the Revision to the Operating Framework for the NHS in England 2010/11, published on 21 June 2010. Some process targets have been removed or changed, but the NHS should continue to deliver improvements in standards and quality, deliver better value for money and improve health outcomes. It is essential that current performance is maintained or improved during a critical time of transition.

Last month, the Spending Review announced that overall NHS spending will increase by 0.4 percent (0.1 percent per year) in real terms over the spending review period (2011/12 to 2014/15). Within this, total revenue will increase by 1.3 percent real and capital decrease by 17.4 percent real.

In recognition of the pressures on the social care system in a challenging fiscal climate, the NHS will transfer some funding from the health capital budget to health revenue, to be spent on measures that support social care, which also benefits health. This funding will be up to £1 billion in 2014/15 and includes £300 million per annum funding for re-ablement services.

PCT allocations will be announced in detail in December alongside the Operating Framework for 2011/12, which will set out the financial parameters for the service for next year, including use of surplus and financial risk management, in order to maintain strong financial discipline whilst managing the transition to the new system envisaged in *Equity and Excellence: Liberating the NHS*.

On the NHS Performance Framework, from Q1 2010/11 onwards trusts are now rated on Finance and Quality separately. Using these two measures, we can observe that the majority of Acute and Ambulance trusts continue to perform well in both areas, with only a small number under review or underperforming. While some trusts have improved since the last quarter, pockets of underperformance must be addressed.

Looking at individual areas of performance:

- the NHS is continuing to perform very well against all of the cancer waits standards at national level, although variations remain locally
- the A&E operational standard has been revised and performance levels maintained
- it is welcome to see that ambulance response times have improved despite increased demand
- this period saw the highest ever numbers accessing the NHS Stop Smoking Services and quitting.

On the other hand:

- screening for diabetic retinopathy is not consistent across the country, with some PCTs still not offering screening to all people with diabetes, at a time when the number of people with diabetes is rising

- stroke and transient ischaemic attack (TIA) performance varies between SHAs, with some already exceeding the thresholds set for March 2011 and others with some way to go. Variations at PCT level are greater.

While central performance management of the 18-weeks waiting times target has ceased, standards and quality should be maintained. The NHS Constitution right to start treatment within 18 weeks remains in place, and commissioners should ensure that this is met. The focus has shifted to median referral to treatment waiting times and organisations with exceptionally long waiters. Performance is stable overall but there is significant local variation.

## 1. Finance

The returns for the first quarter of 2010/11 show that SHAs and PCTs are forecasting an overall surplus of £1,345 million, which is 1.4 percent of total revenue resources and is in line with the revised Operating Framework. Additionally, this is the first year that SHAs must ensure that there is at least two percent non-recurrent expenditure from PCT recurrent resources at regional level.

The overall surplus, together with the non-recurrent expenditure and the spending review announcement of real growth, put the NHS in a strong position to invest in the improvement of quality and productivity going forward in the delivery of the strategy and reforms outlined in *Equity and Excellence: Liberating the NHS*.

NHS trusts (excluding foundation trusts) are forecasting an overall operating surplus of £186 million at Q1 for 2010/11.

**Figure 1 - NHS Financial Performance by SHA area - SHA & PCT sector**

	2007/08		2008/09		2009/10		2010/11 Quarter 1 Forecast Outturn	
	£m	% Resource Limit	£m	% Resource Limit	£m	% Resource Limit	£m	% Resource Limit
North East	96	2.2%	109	2.3%	80	1.6%	69	1.3%
North West	273	2.3%	295	2.4%	185	1.4%	185	1.3%
Yorkshire & The Humber	243	3.0%	216	2.5%	185	2.0%	143	1.5%
East Midlands	94	2.1%	107	1.6%	83	1.2%	85	1.1%
West Midlands	102	2.3%	101	1.2%	80	0.8%	70	0.7%
East of England	59	1.3%	139	1.7%	137	1.5%	100	1.0%
London	238	5.4%	327	2.3%	382	2.4%	456	2.7%
South East Coast	51	1.2%	62	1.0%	50	0.7%	74	1.0%
South Central	37	0.8%	44	0.8%	60	0.9%	58	0.9%
South West	101	2.3%	104	1.3%	95	1.1%	105	1.2%
<b>Total</b>	<b>1,294</b>	<b>1.7%</b>	<b>1,504</b>	<b>1.8%</b>	<b>1,337</b>	<b>1.5%</b>	<b>1,345</b>	<b>1.4%</b>

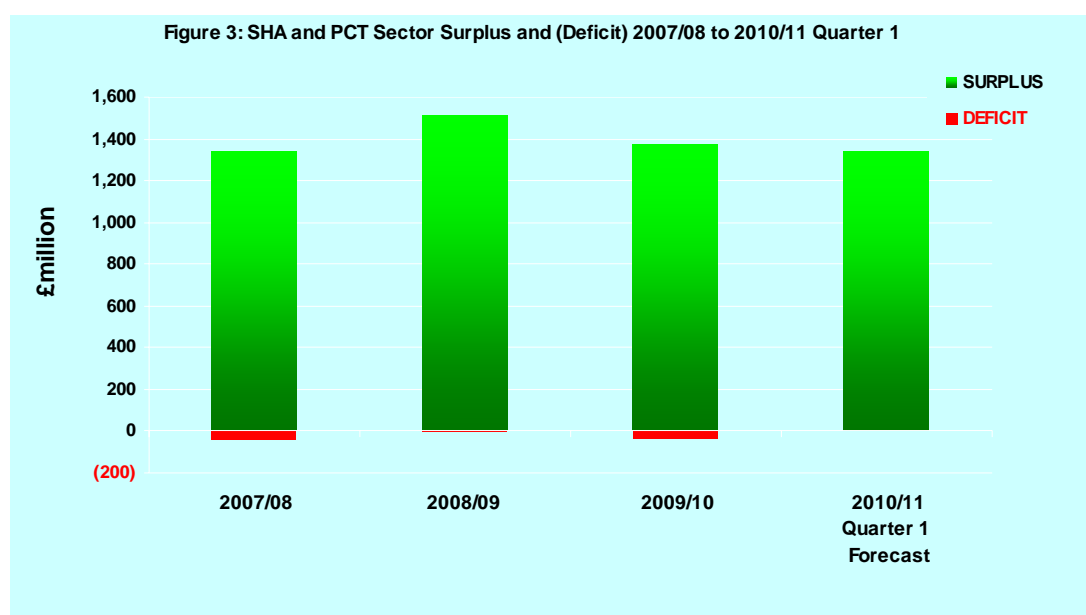
**Figure 2 - NHS Financial Performance by SHA area - Trust sector**

	2007/08		2008/09		2009/10		2010/11 Quarter 1 Forecast Outturn	
	£m	% Turnover	£m	% Turnover	£m	% Turnover	£m	% Turnover
North East	33	2.9%	17	0.3%	10	3.0%	3	3.1%
North West	44	3.9%	(15)	(0.1%)	15	0.5%	17	0.6%
Yorkshire & The Humber	16	1.4%	44	0.4%	14	0.6%	7	0.3%
East Midlands	36	3.2%	22	0.2%	18	0.7%	20	0.7%
West Midlands	51	4.5%	48	0.4%	53	1.6%	29	0.9%
East of England	26	2.3%	40	0.4%	30	1.4%	26	1.2%
London	47	4.1%	(21)	(0.1%)	(3)	(0.0%)	14	0.2%
South East Coast	34	3.0%	49	0.5%	37	1.5%	27	1.1%
South Central	38	3.3%	18	0.2%	(7)	(0.3%)	10	0.4%
South West	48	4.2%	33	0.3%	28	1.3%	33	1.6%
<b>Total</b>	<b>373</b>	<b>1.1%</b>	<b>235</b>	<b>0.8%</b>	<b>195</b>	<b>0.7%</b>	<b>186</b>	<b>0.7%</b>

There are no PCTs forecasting a deficit in Q1, which compares to four PCTs reporting a gross deficit of £39 million in their 2009/10 final accounts.

There are two NHS trusts forecasting a gross operating deficit of £55 million<sup>1</sup> in Q1, which compares with six NHS trusts reporting a gross operating deficit of £98 million in their 2009/10 final accounts. The two NHS trusts forecasting a gross operating deficit at Q1 are South London Healthcare NHS Trust (£36 million) and Barking, Havering & Redbridge Hospitals NHS Trust (£19 million). Both of these NHS trusts also reported a gross operating deficit in 2009/10.

The Department will continue to work with the SHA to ensure that, during 2010/11, the two organisations that are forecasting a deficit have plans in place to return to financial balance, whilst at the same time maintaining and improving services to patients.

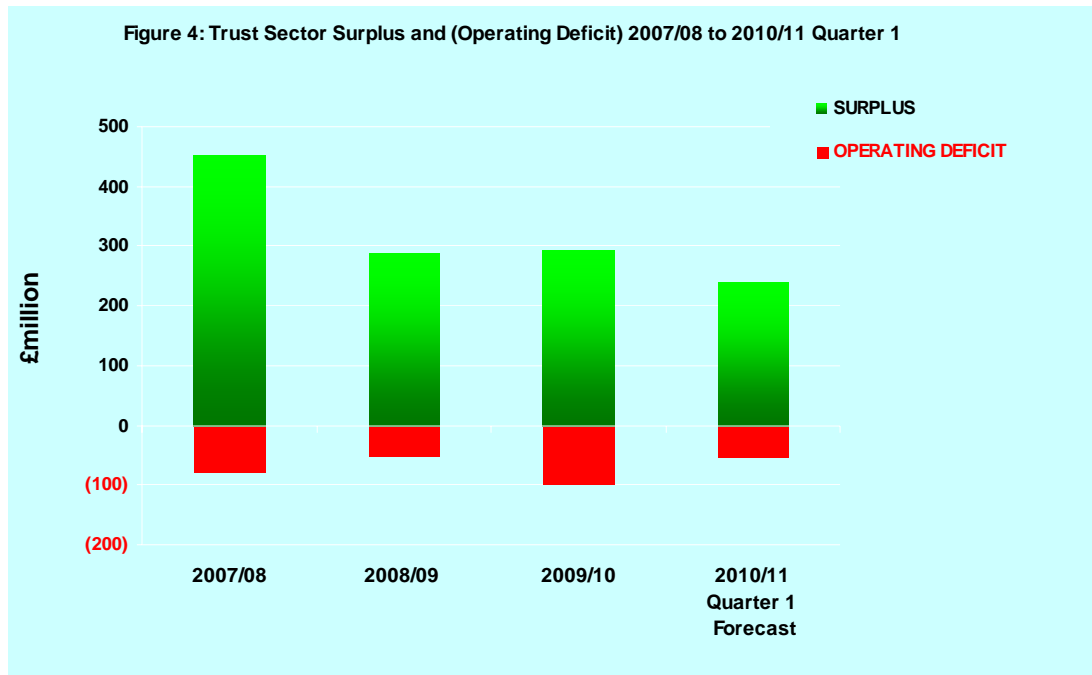


<sup>1</sup> In addition to the gross operating deficit, there is a gross technical deficit of £297 million in thirty one NHS Trusts (two of these organisations also have an operating deficit).

A technical deficit is a deficit arising due to one or both of the following:

a) **Impairments to Fixed Assets** – 2009/10 was the final year for organisations to revalue their assets to a Modern Equivalent Asset (MEA) basis of valuation. An impairment charge is not considered part of the organisation's operating position.

b) **The revenue cost of bringing PFI assets onto the balance sheet** (due to the introduction of International Financial Reporting Standards (IFRS) accounting in 2009/10) - NHS Trusts' financial performance measurement needs to be aligned with the guidance issued by HM Treasury measuring Departmental expenditure. Therefore, the incremental revenue expenditure resulting from the application of IFRS to PFI, which has no cash impact and is not chargeable for overall budgeting purposes, should be reported as technical.



## 2. NHS Performance Framework

The results of the 2010/11 Q1 Frameworks are the first to illustrate the recent revision to the Performance Framework. Updated guidance is available. Organisations will now be given two separate, equally-weighted performance ratings: one for Finance, and one for Quality of Services (comprised of Standards & Vital Signs, CQC Registration Status, and User Experience).

In addition, from Q1 onwards, the A&E four hour response time upper threshold will be 95 percent.

The Q1 Finance results reveal that nationally, there are 76 trusts 'Performing' (65 acute trusts and 11 ambulance trusts), five trusts 'Performance under review' (All acute trusts), and seven trusts 'Underperforming' (All acute trusts).

The Q1 Quality of Service results reveal that there are 68 trusts 'Performing' (60 acute trusts and eight ambulance trusts), seven trusts with 'Performance under review' (All acute trusts) and 13 trusts 'Underperforming' (10 acute trusts and three ambulance trusts). Of these 13 trusts, 11 trusts (nine acute trusts and two ambulance trusts) were escalated to 'Underperforming' having been 'Performance under review' for three consecutive quarters.

Of the seven trusts 'Underperforming' on Finance, six have been escalated to 'Challenged' due to having been 'Underperforming' for three consecutive quarters. While a number of these trusts have achieved adequate scores in the latest set of results, they have still been escalated to 'Challenged' either due to outstanding concerns regarding their underlying financial health, or due to having outstanding debt with the Department with no plans for repayment.

The six trusts 'Challenged' on Finance are:

- Barking, Havering and Redbridge University Hospitals NHS Trust
- Portsmouth Hospitals NHS Trust
- North West London Hospitals NHS Trust
- South London Healthcare NHS Trust
- Trafford Healthcare NHS Trust
- West Middlesex University Hospital NHS Trust.

### 3. Experience, satisfaction and engagement

#### Eliminating mixed sex accommodation

At the end of June 2010, five trusts had not declared compliance with the requirement of the original Operating Framework (November 2009) that they had virtually eliminated mixed-sex accommodation (MSA). Others have subsequently reported breaches, some on a significant scale.

Against the background of the revised Operating Framework (June 2010), the Secretary of State announced robust new steps to ensure that from January 2011, NHS organisations routinely report breaches of same sex accommodation guidance. These reports will use a consistent definition – that MSA will be eliminated, except in circumstances where the alternative is clearly in the overall best interests of the patient, or reflects their personal choice. This approach provides renewed focus on organisations being held to account for managing beds and facilities to eliminate MSA. The associated data will be published.

Also, commissioners will be expected to apply sanctions to NHS organisations that breach the guidance. The existing regime of sanctions will be strengthened.

#### Patient Environment Action Teams (PEAT)

PEAT annually assess a range of patient services. This enables the National Patient Safety Agency (NPSA) to give hospitals ratings (excellent, good, acceptable, poor or unacceptable), relating to: cleanliness (environment), food, and privacy and dignity. Assessment teams consist of staff, patients, patient representatives and/or members of the public.

At the national level, the 2010 data (published July 2010) show:

- **86 percent** of NHS sites across England (1,068) have been rated 'excellent' or 'good' for their environment.
- **95 percent** of NHS sites (1,180) achieved an 'excellent' or 'good' rating for the quality, choice and availability of food for patients. This figure has remained unchanged from last year.
- **96 percent** of NHS sites achieved an 'excellent' or 'good' rating for the provision of privacy and dignity. This advance is the largest single-year improvement ever measured and mirrors the findings of the 2009 CQC in-patient survey, which recorded the best-ever patient experience in both cleaning, and privacy and dignity.
- There were 40 sites which scored 'excellent' on all three PEAT categories – an increase of eight compared to last year.

The Department is considering how best the PEAT data can contribute to the 'information revolution' – facilitating patients to make more informed choices about their healthcare. More information about this year's PEAT scores can be found at: [www.nrls.npsa.nhs.uk/patient-safety-data/peat](http://www.nrls.npsa.nhs.uk/patient-safety-data/peat)



## GP patient survey

The GP patient survey has been running since 2006/07 asking patients about their experiences of their GP surgery. Between July 2009 and June 2010 the survey asked a different sample of 1.4 million adult patients registered with a GP in England to participate each quarter. Although the results show a slight decline, patients are still showing high levels of satisfaction with services provided by their GP.

- 90 percent of patients reported that they were either very satisfied or fairly satisfied with the overall care they receive at their surgery.
- 81 percent of patients responded that they were either very satisfied or fairly satisfied with their GP surgery's opening hours.
- 79 percent of patients who tried to get a quick appointment with a GP said they were able to do so within 48 hours.
- 75 percent of patients who wanted to book an appointment with a particular doctor at their GP surgery said they were able to do so all of the time or a lot of the time.
- 71 percent of patients who wanted to book ahead for an appointment with a GP reported that they were able to do so.
- 68 percent of patients reported that they were satisfied with their ability to get through to their doctor's surgery on the phone.
- 84 percent of people with a long-standing health problem, disability, or infirmity have had a discussion with a doctor or nurse about how best to deal with their health problem.
- Of those who have had discussions about how best to deal with their health problem, 88 percent felt that the doctor or nurse took notice of their views about dealing with their health problem, and 87 percent say they were given information on the things they might do to deal with their problem. 84 percent agreed with the doctor or nurse about how best to manage their health problem.

## Patient experience

Patient self-reported experiences of services are a vital source of information that will help the NHS to embed quality as its guiding principle. As the ongoing public consultation *Transparency in outcomes – a framework for the NHS*<sup>2</sup> also makes clear, patient experience remains a key way of measuring service quality both locally and nationally. Improving the experiences of patients therefore remains a key priority in the 2010/11 NHS Operating Framework, and it is important that the NHS continues to improve the quality of care delivered. There are a number of ways that the Department currently records and measures these experiences, which are published periodically throughout the year – and many of which have been covered in recent editions of The Quarter. While recent surveys indicate that most patients report a

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<sup>2</sup> [www.dh.gov.uk/en/Consultations/Liveconsultations/DH\\_117583](http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_117583)

positive experience of care overall, this is little consolation for patients who are treated in organisations that have not kept pace with the best.

### [NHS National Patient Survey Programme](#)

To date, two surveys have been published as part of the 2009/10 survey programme, which is coordinated by the CQC. Detailed results of the outpatient and adult inpatient surveys are available on the CQC website<sup>3</sup>, and they have also been summarised in previous editions of The Quarter<sup>4</sup>.

In September 2010, CQC published the results of a patient survey covering community mental health services, and the results of a patient survey on maternity services are expected to be published by CQC in December.

### [Overall Measure of Patient Experience](#)

Results from the NHS national patient survey are also used by the Department to construct an Overall Measure of Patient Experience in England for several settings in the NHS. The figures are calculated the same way for each update, so it is possible to compare results over time. Updates were made in February and May 2010 to take account of scores derived from the latest outpatient and adult inpatient surveys<sup>5</sup>. The main findings were:

- Outpatients: the overall score for 2009/10 is 78.6 (out of 100), which is 1.9 points higher than the score of 76.7 in 2004/05. The results also include scores against five domains of patient care, and scores across all five domains were higher than in 2004/05.
- Adult inpatients: the overall score for 2009/10 is 75.6 (out of 100), which is 0.4 points lower than the score of 76.0 in 2008/09. Scores in four out of the five domains were lower than 2008/09.

### [NHS Performance Framework](#)

In line with recent implementation guidance<sup>6</sup>, results from the adult inpatient survey and community mental health services surveys will be used to assess individual trust performance. Organisations are encouraged to review their position and consider what action they need to take to improve patient experience.

Under the NHS Performance Framework, local organisations can submit evidence to their SHA of improved patient experience and request an in-year re-assessment of their performance under the User Experience domain of the Framework. Further details on this process will be available soon.

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<sup>3</sup> [www.cqc.org.uk/aboutcqc/howwedoit/involvingpeoplewhouseservices/patientsurveys.cfm](http://www.cqc.org.uk/aboutcqc/howwedoit/involvingpeoplewhouseservices/patientsurveys.cfm)

<sup>4</sup> [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsStatistics/DH\\_087335](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsStatistics/DH_087335)

<sup>5</sup> [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsStatistics/DH\\_115996](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsStatistics/DH_115996)

<sup>6</sup> [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_115035](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_115035)

## 4. Better access to care

### Referral to treatment consultant-led waiting times

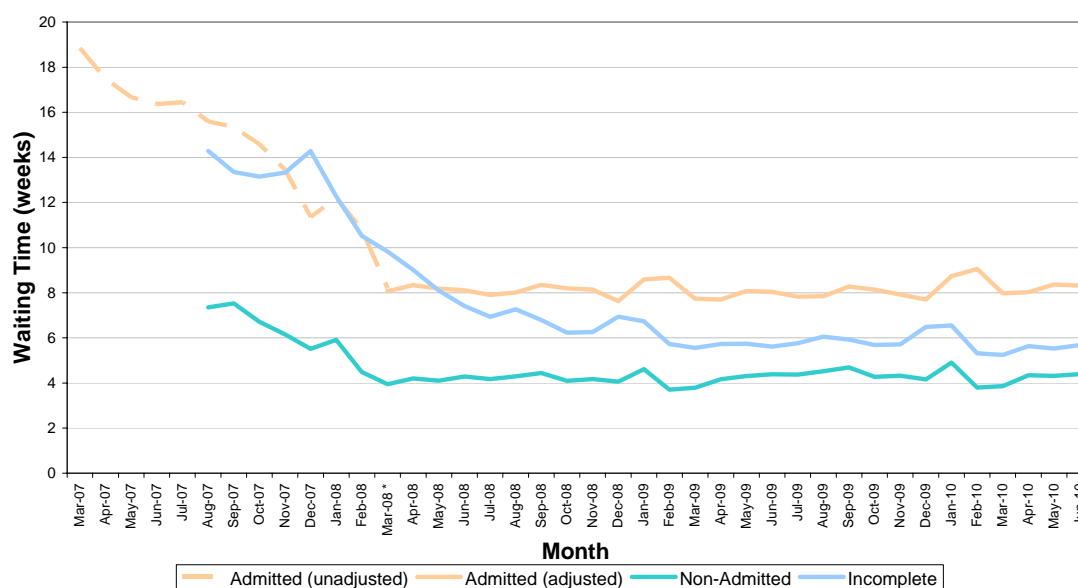
Central performance management of the previous 18-week waiting time target has ceased, but standards and quality should be maintained.

As set out in the Revision to the Operating Framework on 21 June, performance management of the 18-week waiting time target by the DH has ceased. However, commissioners must, as a minimum, maintain the contractual position and ensure that any flexibility to improve access reflects local clinical priorities. Referral to treatment (RTT) consultant-led waiting times data continue to be published and now include information on the median wait and 95<sup>th</sup> percentile waiting times as additional measures for local performance management. Standards and quality must continue to be improved; long waits are unacceptable to patients, and average waiting times must be further reduced.

The average (median) time waited for patients completing an RTT pathway in June 2010 was 8.3 weeks for admitted patients and 4.4 weeks for non-admitted patients. The 95th percentile time waited for patients completing an RTT pathway in June 2010 was 20.0 weeks for admitted patients and 14.9 weeks for non-admitted patients. For patients still waiting for treatment (incomplete pathways) in June 2010, the median waiting time was 5.7 weeks and the 95th percentile was 22.8 weeks.

These data show that the NHS was broadly maintaining waiting times on completed pathways, although there is variation in performance across the country. The median waiting time for incomplete pathways also remained broadly stable, but the number of incomplete pathways increased. Action must be put in place to ensure that average waiting times improve and to reduce RTT waiting times in organisations where patients experience exceptionally long waits. In June 2010, 63 acute trusts had above average waits.

Figure 5: Average (Median) RTT Waiting Times, England



## Cancer waits

<b>Performance status: Maintained</b>
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Q1 (April to June 2010) figures for two-week, 31-day and 62-day outpatient services and first definitive treatments show that waiting times are as follows:

- Two week wait – 95.5 percent of people seen by a specialist within two weeks of an urgent GP referral for suspected cancer – (95.6 percent in Q4 2009/10).
- 31-day wait – 98.4 percent of people treated within 31 days from diagnosis to first treatment for all cancers – (unchanged from Q4 2009/10).
- 62-day wait – 87.5 percent of people treated within 62 days from urgent referral for suspected cancer to first treatment, for all cancers – (86.7 percent in Q4 2009/10).

All of these levels of performance were above the specified operational standards.

Figures by cancer or treatment type (for first and subsequent treatments) and for non-cancer two-week wait activity are as follows:

- Breast symptom two-week wait – **94.3 percent** of people urgently referred for breast symptoms (where cancer was not initially suspected) were seen within two weeks of referral (92 percent in Q4 2009/10).
- 31-day wait – **99 percent** of people treated within 31 days from diagnosis to first treatment for breast cancer (99.3 percent in Q4 2009/10).
- 62-day wait – **97.7 percent** of people treated within 62 days from urgent referral for suspected cancer to first treatment for breast cancer (97.6 percent in Q4 2009/10).
- 31-day wait – **97.6 percent** of people treated within 31 days where subsequent treatment is surgery (97 percent in Q4 2009/10).
- 31-day wait – **99.7 percent** of people treated within 31 days where subsequent treatment is an anti-cancer drug regimen (99.5 percent in Q4 2009/10).
- 62-day wait – **94.1 percent** of people first treated within 62 days following a consultant's decision to upgrade a patient's priority, for all cancers (93.7 percent in Q4 2009/10).
- 62-day wait – **94.5 percent** of people first treated for cancer within 62 days following referral from an NHS screening service, for all cancers (93.9 percent in Q4 2009/10).

All of these levels of performance were also above the specified operational standards.

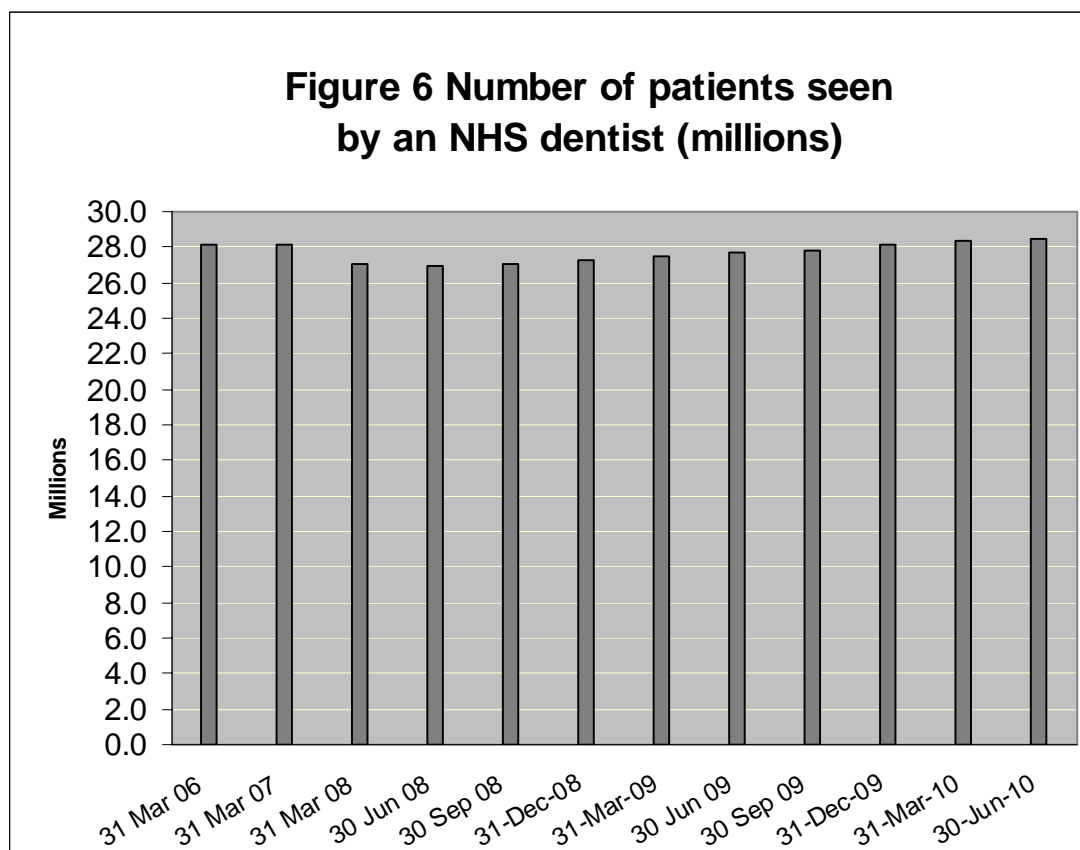
## Dentistry

**Performance status: Improved**

Access continues to grow quarter on quarter.

The latest data shows that the number of patients accessing NHS dentistry has grown for the eighth consecutive quarter. Over the last two years (from the 24 months ending June 2008 to the 24 months ending June 2010) around 1.59 million more patients have accessed NHS dental services.

Access overall is 376,000 up when compared to the 24 months ending March 2006. However, access for children is still 90,000 lower than in March 2006 and access as a percentage of the population is 55.1 percent now compared to 55.8 percent in March 2006.



## A&E

**Performance status: Maintained**

The Operational Standard has been revised from 98 percent to 95 percent.

Across all A&E types, 98.4 percent<sup>7</sup> of patients spent four hours or less from arrival to admission, transfer or discharge. This compares to 97.9 percent in the previous quarter (Q4 2009/10) and 98.6 percent for the same quarter last year (Q1 2009/10). In Q1 there were 5.5 million attendances at all types of A&E departments, a 3.9 percent increase from the same quarter last year (Q1 2009/10) and a 11.9 percent increase from the previous quarter (Q4 2009/10).

For major A&E (type 1s) there was a 1.1 percent increase in attendances over the same quarter last year (Q1 2009/10) and a 11.2 percent increase from the previous quarter (Q4 2009/10).

Of the 3.6 million patients who attended major A&E departments (type 1s), 23.9 percent or 0.9 million needed to be admitted to hospital. Of these, 98.3 percent were placed in a bed in a ward within four hours of a decision to admit. This compares to 98.6 percent in the same quarter last year (Q1 2009/10).

## Ambulances

**Performance status: Improved**

Provisional unverified data is available in-year for year to date Q1 performance and this indicates that ambulance services nationally achieved against the Category A, 8-minute response time target and made improvements against the Category B, 19-minute response time targets when compared with the same quarter in the previous year.

The ambulance service continues to deal with more calls than ever before with 16,741 more Category A (immediately life threatening) and B (serious, but not immediately life threatening) calls being dealt with in Q1 2010/11, compared with the same quarter in the previous year.

Despite increased levels of demand, the ambulance service nationally have responded to 76.5 percent of category A calls within 8 minutes (compared to 76 percent for Q1 in 2009/10) and 92.9 percent of category B calls within 19 minutes (compared to 91.7 percent for Q1 in 2009/10).

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<sup>7</sup> It should be noted that the calculation of A&E figures has changed from Q1 2010-11 onwards. Prior to 2010-11 the calculation has identified the proportion of breaches with respect to all A&E attendances, irrespective of whether the time spent in A&E was known. The new calculation shows the breaches as a proportion of total attendances *for which the time spent in A&E is known*. Any attendances for which the time spent in A&E is unknown are excluded from the total attendances for the purpose of the calculation.

## **5. Healthcare-associated infections**

### **MRSA number of infections and rates of *Clostridium Difficile***

**Performance status: Improved**

The number of MRSA bacteraemia and *C. difficile* infections was reduced in Q1 2010/11, compared with the previous quarter.

In April-June 2010, 419 MRSA bloodstream infections were reported, which is 13 percent fewer than the previous quarter.

In April-June 2010, 5,983 *C. difficile* infections were reported, which is six percent fewer than the previous quarter.

Weekly, hospital-level data on these infections is now available on [www.data.gov.uk](http://www.data.gov.uk). This means that patients have access to a comprehensive range of data to support them in understanding how well their hospital is doing in tackling these infections.

## 6. Keeping adults and children well

### NHS Health Checks programme

The data collected on NHS Health Checks has changed, so that it now includes the number of eligible people offered and receiving an NHS Health Check, in order that uptake rates can be worked out. Data will be published when PCTs have had time to adapt to the changes.

### Diabetic Retinopathy

**Performance status: Deteriorated**

The English National Screening Programme for Diabetic Retinopathy has been working with local programmes to improve the quality of the retinal screening programme offered across England. In some cases programmes have temporarily reduced the number of people screened to allow changes to processes to increase the quality of care. Nationally this has had an impact on the total number of people offered screening.

At Q1, 95.1 percent of people known to have diabetes were offered screening for diabetic retinopathy in the previous twelve months.

More people with diabetes are being offered screening for retinopathy than ever before and to higher standards. However, the speed of progress is variable across the country and some PCTs are still not offering screening to all people with diabetes.

### Smoking cessation

**Performance status: Improved**

A continued focus on treatment effectiveness and the quality of services is needed to ensure that motivated smokers are given the best possible chance of success.

Q4 2009/10 statistics on numbers using NHS Stop Smoking Services were published in August 2010. Between April 2009 and March 2010, 757,537 people set a quit date through NHS Stop Smoking Services, an increase of 13 percent (86,278) on the final figure for the same period in 2008/09 (671,259).

The figures on the NHS Services show a significant increase in the numbers of smokers accessing and successfully stopping through these services – the highest numbers accessing and quitting since the services began.

NHS Stop Smoking Services account for about 8 per cent of all quit dates set, but a quarter of all successful quitters.

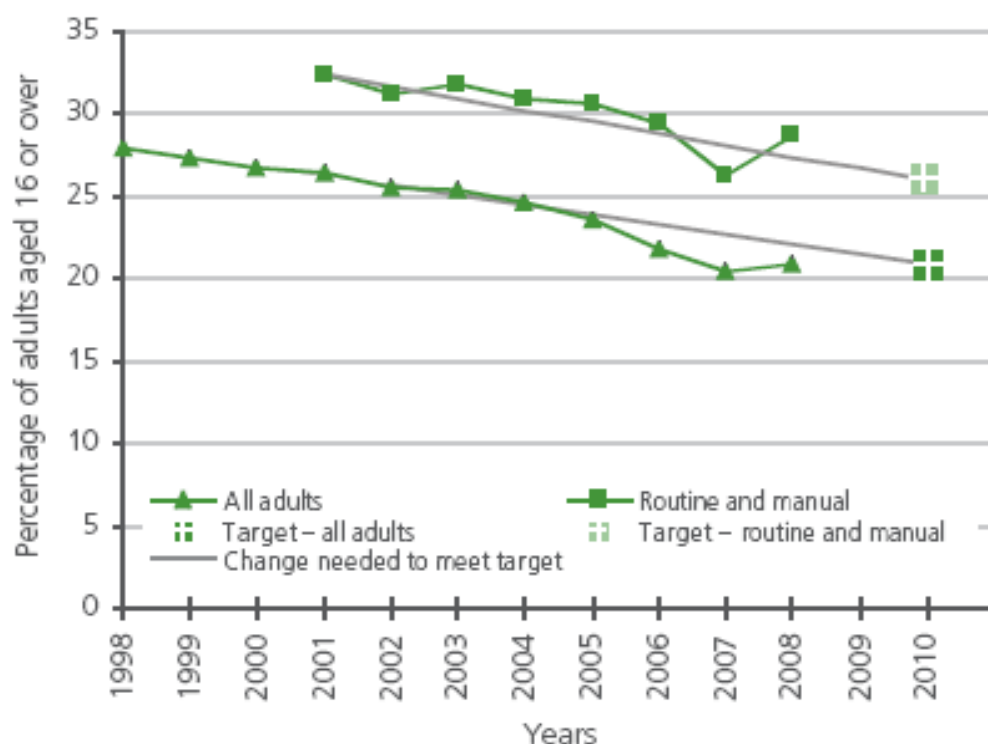


757,537 people set a quit date through the services between April 2009 and March 2010, and 49 percent were still quit at 4 weeks post their planned quit date.

Item	Number	Proportional change from 2008/09
Number setting a quit date	757,537	13 percent increase
Number quit at 4 weeks	373,954	11 percent increase

69 percent of successful quitters had their results confirmed by carbon monoxide (CO) validation, a year on year increase since 2006/07 which demonstrates an improvement in the quality of service provided.

Figure 7: Cigarette smoking prevalence among adults aged 16 and over, by socioeconomic status in England



## Stroke and TIA

**Performance status: TIA - Maintained**

**Performance status: Stroke – Improved**

At the hearing of the Committee of Public Accounts in February 2010, Sir David Nicholson, NHS Chief Executive and Professor Roger Boyle, National Director for Heart and Stroke, committed to develop an accelerated stroke improvement programme to deliver more rapid improvements across the care pathway during the

current financial year. This Vital Sign covers three of the nine areas identified to achieve that ambition.

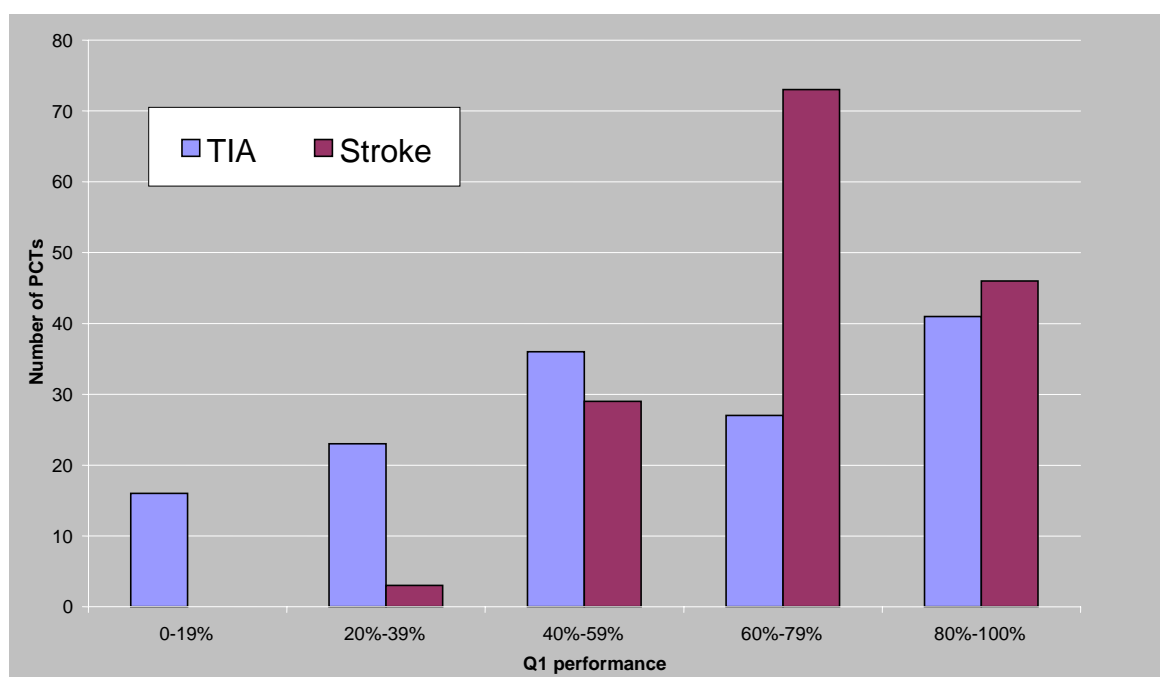
Nationally, 68.1 percent (61.5 percent in Q4) of patients admitted with a stroke spent 90 percent of their time on a stroke unit. The March 2011 threshold is for 80 percent of patients to be on a stroke unit for 90 percent of their time. Forty six PCTs have reached the March 2011 threshold in Q1.

For TIA nationally, 56.2 percent of those patients with a high risk of stroke presenting in an outpatient setting were investigated and treated within 24 hours. The position at Q4 2009/10 was the same at 56.2 percent. The March 2011 threshold is for 60 percent of patients to be treated within 24 hours. Sixty eight PCTs had reached the March 2011 threshold in Q1.

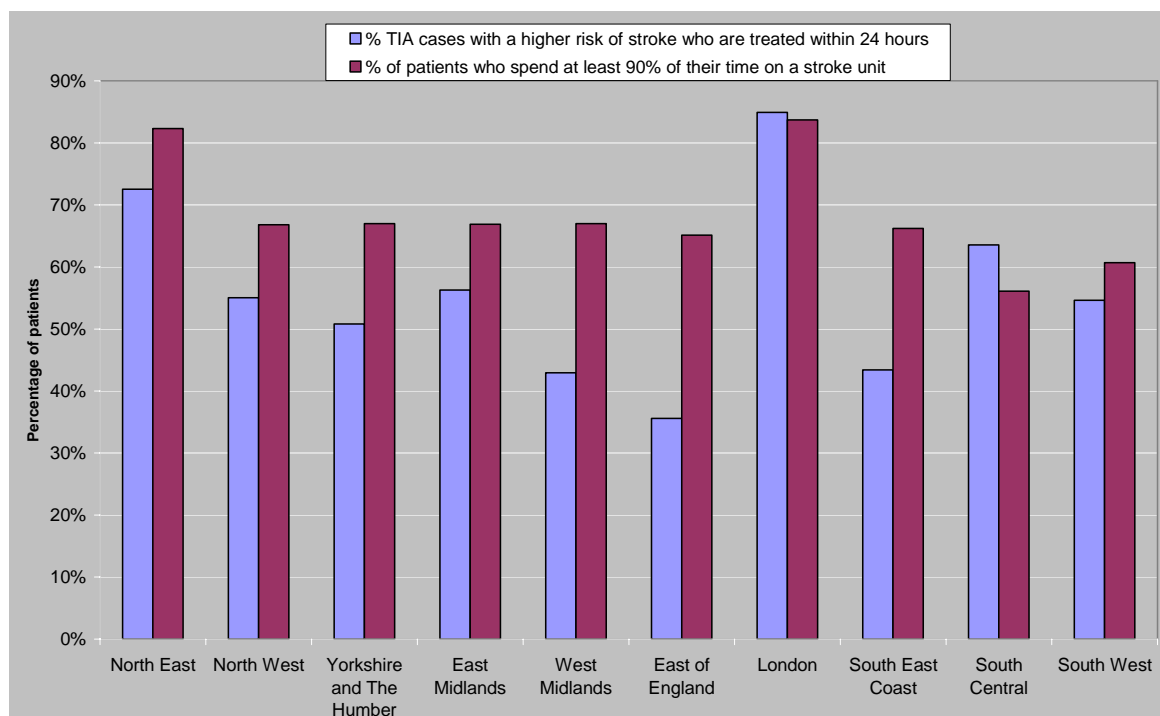
The SHA chart below shows that performance varies between SHAs with some already exceeding the thresholds and others with some way to go to do so. Variations at PCT level are greater.

Department of Health Performance Management colleagues are working with the Stroke Improvement Networks and the NHS to help to deliver the changes necessary to deliver improved outcomes for people who have a stroke or experience a TIA.

Figure 8: The Q1 2010/11 stroke and TIA performance by PCT



**Figure 9: The percentage of patients who are treated within the stroke and TIA vital sign indicator broken down by SHA**



## Children and Adolescent Mental Health Services (CAMHS)

**Performance status: Improved**

There was a patchy performance on the four proxy measures for delivering comprehensive CAMHS, with improvements reported on two, a maintained performance on one, and a slight deterioration on one.

Progress towards delivering comprehensive CAMHS is being measured via four proxy measures: learning disability services, age-appropriate services for 16/17 year olds, 24-hour cover and early intervention support services. Access to these services is reported on a scale of one to four; one representing the lowest access and four the highest.

After Q4's significant improvement there was a patchy performance in Q1. There were no PCTs scoring a one on any of the proxy measures and only four scores of two. Over the four proxies there were 15 instances of PCTs moving from a score of three to a score of four, but four instances of PCTs moving in the opposite direction and one PCT moved from a score of three to a score of two. The number of PCTs scoring four for all four proxies increased from 67 to 75.

**Figure 10: Access to CAMHS Q1 2010/11**

Rate	CAMHS for children and young people with learning disabilities	Age appropriate services for 16 and 17 year olds	24-hour cover	Full range of early intervention services commissioned by the local authority and PCT in partnership
1	0	0	0	0
2	1	0	1	2
3	42	21	13	53
4	108	130	137	96

### Bed days for under 18 years old on adult psychiatric wards

**Performance status: Maintained**

No under 16s on adult psychiatric wards this quarter, which is the third successive quarter that this has been achieved.

The latest bed day figures for the period April-June 2010 show no under 16s on adult psychiatric wards. The bed day figures for 16/17 year olds on adult psychiatric wards of 1,466 was down on the previous quarter. 97.1 per cent of bed days for under 18s were on CAMHS wards.

Since 1 April 2010, hospital managers have a legislative duty to ensure that patients aged under 18 are treated in an environment in hospital that is suitable, having regard to their age and subject to their needs.

A number of best practice products have been produced to support local areas on this issue and these are at [www.nmhdu.org.uk/nmhdu/tags/?tag=children](http://www.nmhdu.org.uk/nmhdu/tags/?tag=children)

### Breast screening

**Performance status: Improved**

Five pilot sites have successfully rolled out breast screening to women aged 47 to 73. Performance on the three-year interval between screening rounds, which local programmes have been working on in preparation for the age extension, has improved, with over 90 percent of women now invited within the three-year standard. As per the NHS Operating Framework 2010/11, all local screening programmes are expected to begin the age extension in 2010/11.

## Bowel screening

**Performance status: Improved**

As from 23 August 2010, all 153 PCTs in England are offering bowel cancer screening to people in the 60 to 69 years age range who are registered with a GP. This completes the initial roll out of the Bowel Cancer Screening Programme across England.

As at August 2010, over 4.2 million men and women had been screened and over 6,000 cancers detected. Five pilot sites have successfully rolled out the age extension to men and women aged 70 to 75, and the NHS Operating Framework 2010/11 said that all PCTs that have completed their first two-year screening round should implement the age extension in 2010. The remaining PCTs should plan to extend their programmes on completion of their first two-year screening round. 26 out of 58 centres have now extended their programmes.

## Chlamydia

**Performance status: Maintained**

Most areas are off trajectory for the first quarter of 2010/11.

Q1 data for the National Chlamydia Screening Programme shows that 5.3 percent of 15-24 year olds were tested in that period. 15 PCTs reached or exceeded their planned trajectory for the first quarter.

The same quarter last year saw 4.3 percent of the target population tested. While this indicates steady progress, most areas are off trajectory for the planned testing volumes in this quarter. A steady acceleration of sustainable growth in the programme is therefore needed. This should be focused on increasing testing levels in core health services, such as community contraception and sexual health services, general practice, community pharmacy and termination of pregnancy services, where there are already encouraging signs of growth. This demonstrates value for money and enables wider preventative messages around contraception, condom use and safer sex to take place.

## Maternity and newborn

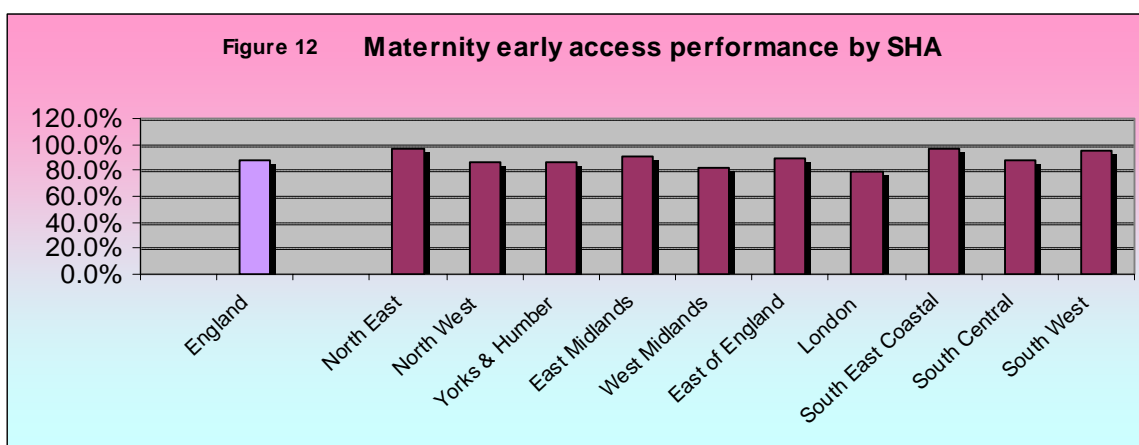
**Performance status: Maintained**

Latest data indicates the percentage of women being assessed by 12 weeks and six days remains stable.

PCT performance in providing access to maternity services is measured by the 'maternity early access' indicator: the percentage of women who have seen a

midwife or a maternity healthcare professional, for an assessment of health and social care needs, risks and choices by 12 completed weeks of pregnancy. The latest data submitted indicates performance is being maintained with 87.3 per cent of women in England assessed by 12 completed weeks in Q3, 2009/10 - the same percentage of women assessed in Q2 2009/10.

<b>Figure 11: PSA Indicator 19.4 Percentage of women seen by midwife or healthcare professional full health and social care assessment of needs, risks and choices by 12 weeks and six days of pregnancy by SHA in Q3 2009/10</b>	
<b>England</b>	<b>87.3%</b>
North East	96.5%
North West	87.0%
Yorks & Humber	86.8%
East Midlands	90.9%
West Midlands	81.3%
East of England	89.9%
London	79.1%
South East Coastal	95.9%
South Central	87.2%
South West	94.5%



## Breastfeeding

**Performance status: Maintained**

In England, the prevalence of breastfeeding at 6-8 weeks at 2010/11 Q1 is 44.4 percent of all infants due a 6-8 week check. This remains largely unchanged from the figure of 44.6 percent recorded in 2009/10 Q1.

## Under-18 conception rates

**Performance status: Improved**

Under-18 conception rates continue to fall but progress should be improved.

Rates of under-18 conceptions have decreased in recent years and are now at their lowest level for twenty years. However, with a rate of 40.5 per thousand women aged under 18 for England for 2008, the rate is still high when compared to other Western European countries.

The overall decrease in the conception rate masks considerable variation at local level and in some areas the rate is rising. Progress needs to be maintained and improved in order to tackle the poor outcomes that teenage pregnancy can bring. The key contribution that the NHS can make is to provide young people with accessible and user-friendly contraception services, which can deliver better outcomes for young people and which can also lead to cost savings for the NHS through avoiding additional spending on maternity and termination of pregnancy services.

The latest provisional figures from the Office for National Statistics – for Q2 of 2009, broken down by local authority area – can be accessed at [www.statistics.gov.uk/statbase/product.asp?vlnk=15055](http://www.statistics.gov.uk/statbase/product.asp?vlnk=15055)

## Other existing commitments

### **100 percent of people with diabetes to be offered screening for the early detection (and treatment if needed) of diabetic retinopathy**

The number of people with diabetes is rising. Latest figures for Q1 show that 2.097 million people were offered screening and the number of people with diabetes stands at 2.36 million. When the screening programme was introduced in 2003, the number of people with diabetes stood at 1.3 million.

### **Guaranteed access to a Genito Urinary Medicine (GUM) clinic within 48 hours of contacting a service**

Delivery of the 48-hour access target for genito-urinary medicine clinics. The position in June 2010 is that 99.9 percent of patients were offered an appointment to be seen within 48 hours.

### **A maximum two-week standard for Rapid Chest Pain Clinics (RACPC)**

At Q1, 99.9 percent of patients referred to a RACPC were seen within two weeks of referral by a GP, which demonstrates that the NHS is providing a fast and effective service.

### **Thrombolysis 'call to needle' of at least 68 percent within 60 minutes, where Thrombolysis is the preferred local treatment for heart attack**

At Q1, the percentage of heart attack patients treated with Thrombolysis within 60 minutes of calling for help was 69 percent. This compares with 67 percent at Q4.

Thrombolysis is no longer the main treatment for heart attack in England. Primary angioplasty services are now available for about two thirds of the population. The remaining third continues to receive thrombolysis but, typically, this is in more rural areas where ambulance journey times to patients take longer. These patients will have longer delays to treatment because of geography and this is reflected in the below target performance.

### **All patients who have operations cancelled for non-clinical reasons to be offered another binding date within 28 days, or the patient's treatment to be funded at the time and hospital of the patient's choice**

The NHS met the operational standard for cancelled operations at Q1 by offering 97 percent of patients whose operations were cancelled for non-clinical reasons another binding date within 28 days.

### **Deliver 7,500 new cases of psychosis served by early intervention teams per year**

At the end of Q1, 2,551 new cases of psychosis were being treated. These represent 34 percent of the full year plans – 7,500 – an improvement over the same period last year (30 percent of plans).

### **All patients who need them to have access to crisis services, with delivery of 100,000 new crisis resolution home treatment episodes per year**

At the end of Q1, 33,028 home treatment episodes were carried out to 29,250 patients who would otherwise have been admitted to hospitals. This represents 33 percent of the yearly plans - 100,000 home treatment episodes - similar to the same quarter last year (32 percent).



FINANCIAL ANNEXES

ANNEX 1: NORTH EAST SHA

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
COUNTY DURHAM PCT	981	918	1,020	1,000	995,614	0.1%
DARLINGTON PCT	101	301	301	300	182,795	0.2%
GATESHEAD PCT	297	146	504	237	389,354	0.1%
HARTLEPOOL PCT	212	126	125	100	182,571	0.1%
MIDDLESBROUGH PCT	341	633	278	250	296,689	0.1%
NEWCASTLE PCT	1,082	4,616	945	1,500	529,277	0.3%
NORTH EAST SHA	85,826	99,407	72,036	63,077	351,924	17.9%
NORTH TYNESIDE PCT	178	563	475	250	382,134	0.1%
NORTHUMBERLAND CARE PCT	373	443	220	250	555,082	0.0%
REDCAR AND CLEVELAND PCT	1,352	380	513	500	263,865	0.2%
SOUTH TYNESIDE PCT	719	592	1,819	50	309,084	0.0%
STOCKTON-ON-TEES TEACHING PCT	3,311	156	424	400	327,967	0.1%
SUNDERLAND TEACHING PCT	1,190	388	845	752	548,021	0.1%
<b>NORTH EAST TOTAL SHA/ PCT SECTOR</b>	<b>95,963</b>	<b>108,669</b>	<b>79,505</b>	<b>68,666</b>	<b>5,314,377</b>	<b>1.3%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
NORTH EAST AMBULANCE SERVICE NHS TRUST	350	2,249	4,736	3,334	106,804	3.1%
NORTH TEES AND HARTLEPOOL NHS TRUST (1)	10,061	n/a	n/a	n/a	n/a	n/a
NORTHUMBERLAND, TYNE AND WEAR NHS TRUST (2)	3,498	3,852	5,296	n/a	n/a	n/a
SOUTH TEES HOSPITALS NHS TRUST (3)	17,280	10,445	131	n/a	n/a	n/a
TEES, ESK AND WEAR VALLEYS NHS TRUST (4)	2,104	483	n/a	n/a	n/a	n/a
<b>NORTH EAST TOTAL TRUST SECTOR</b>	<b>33,293</b>	<b>17,029</b>	<b>10,163</b>	<b>3,334</b>	<b>106,804</b>	<b>3.1%</b>

For FTs the forecast position is only for the time when the organisation was an NHS trust

- 1 North Tees and Hartlepool NHS Trust achieved Foundation Trust status on 1st December 2007.
- 2 Northumberland, Tyne and Wear NHS Trust achieved Foundation Trust status on 1st December 2009
- 3 South Tees Hospitals NHS Trust achieved Foundation Trust status on 1st May 2009.
- 4 Tees, Esk and Wear Valleys NHS Trust achieved Foundation Trust status on 1st July 2008.

Note: SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

## ANNEX 2: NORTH WEST SHA

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
ASHTON, LEIGH AND WIGAN PCT	1,641	2,495	640	2,700	571,621	0.5%
BLACKBURN WITH DARWEN TEACHING CARE TRUST (1)	4,753	2,048	717	1,364	287,428	0.5%
BLACKPOOL PCT	2,703	3,193	2,532	1,391	302,507	0.5%
BOLTON PCT	988	992	996	1,000	485,395	0.2%
BURY PCT	98	41	413	250	313,590	0.1%
CENTRAL AND EASTERN CHESHIRE PCT	1,007	336	1,007	1,007	702,185	0.1%
CENTRAL LANCASHIRE PCT	6,172	8,558	3,030	3,630	773,854	0.5%
CUMBRIA TEACHING PCT	530	233	229	1,000	845,753	0.1%
EAST LANCASHIRE TEACHING PCT	9,901	2,464	1,021	3,320	695,969	0.5%
HALTON AND ST HELENS PCT	167	420	295	500	617,343	0.1%
HEYWOOD, MIDDLETON AND ROCHDALE PCT	4,845	3,051	579	1,891	399,144	0.5%
KNOWSLEY PCT	1,726	4,819	576	1,603	337,296	0.5%
LIVERPOOL PCT	10,644	6,429	5,287	4,768	1,024,367	0.5%
MANCHESTER PCT	1,147	687	481	347	1,042,311	0.0%
NORTH LANCASHIRE TEACHING PCT	418	2,051	1,565	2,200	570,550	0.4%
NORTH WEST SHA	206,829	245,142	157,339	143,465	857,544	16.7%
OLDHAM PCT	1,441	1,528	1,381	1,994	424,348	0.5%
SALFORD PCT	973	1,991	993	2,246	480,330	0.5%
SEFTON PCT	605	287	498	2,500	527,396	0.5%
STOCKPORT PCT	1,735	238	231	74	470,066	0.0%
TAMESIDE AND GLOSSOP PCT	1,931	1,980	980	1,000	426,907	0.2%
TRAFFORD PCT	1,054	133	534	3,750	377,394	1.0%
WARRINGTON PCT	1,603	557	222	0	323,057	0.0%
WESTERN CHESHIRE PCT	900	1,598	1,279	1,000	424,881	0.2%
WIRRAL PCT	9,670	3,310	2,047	2,000	624,749	0.3%
<b>NORTH WEST TOTAL SHA/PCT SECTOR</b>	<b>273,481</b>	<b>294,581</b>	<b>184,872</b>	<b>185,000</b>	<b>13,905,985</b>	<b>1.3%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
5 BOROUGH PARTNERSHIP NHS TRUST (2)	958	1,482	2,210	n/a	n/a	n/a
BLACKPOOL, FYLDE AND WYRE HOSPITALS NHS TRUST (3)	3,828	n/a	n/a	n/a	n/a	n/a
BOLTON HOSPITALS NHS TRUST (4)	1,735	(2,351)	n/a	n/a	n/a	n/a
BOLTON, SALFORD AND TRAFFORD MENTAL HEALTH NHS TRUST (5)	200	n/a	n/a	n/a	n/a	n/a
CALDERSTONES NHS TRUST (6)	185	1,520	n/a	n/a	n/a	n/a
CENTRAL MANCHESTER AND MANCHESTER CHILDREN'S UNIVERSITY HOSPITALS NHS TRUST (7)	336	4,715	n/a	n/a	n/a	n/a
CHESHIRE AND WIRRAL PARTNERSHIP NHS TRUST (8)	129	n/a	n/a	n/a	n/a	n/a
EAST CHESHIRE NHS TRUST	885	522	3,926	251	111,522	0.2%
EAST LANCASHIRE HOSPITALS NHS TRUST	223	133	287	300	336,218	0.1%
LANCASHIRE CARE NHS TRUST (9)	1,187	n/a	n/a	n/a	n/a	n/a
LIVERPOOL HEART AND CHEST HOSPITAL NHS TRUST (10)	27	4,337	1,827	n/a	n/a	n/a
MANCHESTER MENTAL HEALTH AND SOCIAL CARE NHS TRUST	455	521	532	502	98,483	0.5%
MERSEY CARE NHS TRUST	500	500	3,000	3,027	196,123	1.5%
NORTH CHESHIRE HOSPITALS NHS TRUST (11)	6,991	1,060	n/a	n/a	n/a	n/a
NORTH CUMBRIA MENTAL HEALTH AND LEARNING DISABILITIES NHS TRUST (12)	1,562	n/a	n/a	n/a	n/a	n/a
NORTH CUMBRIA UNIVERSITY HOSPITALS NHS TRUST	51	993	327	1,482	214,974	0.7%
NORTH WEST AMBULANCE SERVICE NHS TRUST	111	840	1,041	1,250	250,535	0.5%
PENNINE ACUTE HOSPITALS NHS TRUST	9,472	48	620	2,953	560,131	0.5%
PENNINE CARE NHS TRUST (13)	612	388	n/a	n/a	n/a	n/a
ROYAL LIVERPOOL BROADGREEN UNIVERSITY HOSPITALS NHS TRUST	1,813	2,781	4,021	3,119	402,297	0.8%
ROYAL LIVERPOOL CHILDREN'S NHS TRUST (14)	296	301	n/a	n/a	n/a	n/a
SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST	2,823	802	500	803	148,935	0.5%
ST HELENS AND KNOWSLEY TEACHING HOSPITALS NHS TRUST	219	(2,687)	225	120	248,178	0.0%
TAMESIDE AND GLOSSOP ACUTE SERVICES NHS TRUST (15)	758	n/a	n/a	n/a	n/a	n/a
THE MID CHESHIRE HOSPITALS NHS TRUST (16)	2,258	n/a	n/a	n/a	n/a	n/a
TRAFFORD HEALTHCARE NHS TRUST	524	(2,186)	(6,048)	1,276	94,113	1.4%
UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS TRUST	2,884	1,889	2,126	1,788	249,340	0.7%
WALTON CENTRE FOR NEUROLOGY AND NEUROSURGERY NHS TRUST (17)	500	2,812	424	n/a	n/a	n/a
WIRRAL HOSPITAL NHS TRUST (18)	48	n/a	n/a	n/a	n/a	n/a
WRIGHTINGTON, WIGAN AND LEIGH NHS TRUST (19)	2,235	(13,002)	n/a	n/a	n/a	n/a
<b>NORTH WEST TOTAL TRUST SECTOR</b>	<b>43,805</b>	<b>(14,582)</b>	<b>15,018</b>	<b>16,871</b>	<b>2,910,849</b>	<b>0.6%</b>

**For FTs the forecast position is only for the time when the organisation was an NHS trust**

- Blackburn with Darwen Teaching Care Trust Plus PCT was formerly Blackburn with Darwen PCT pre-April 2010.
- 5 Boroughs Partnership NHS Trust achieved Foundation Trust status on 1st March 2010.
- Blackpool, Fylde and Wyre Hospitals NHS Trust achieved Foundation Trust status on 1st December 2007.
- Bolton Hospitals NHS Trust achieved Foundation Trust status on 1st October 2008.
- Bolton, Salford and Trafford Mental Health NHS Trust achieved Foundation Trust status on 1st February 2008.
- Calderstones NHS Trust achieved Foundation Trust status on 1st April 2009.
- Central Manchester and Manchester Children's University Hospitals NHS Trust achieved Foundation Trust
- Cheshire and Wirral Partnership NHS Trust achieved Foundation Trust status on 1st July 2007.
- Lancashire Care NHS Trust achieved Foundation Trust status on 1st December 2007.
- Liverpool Heart and Chest Hospital NHS Trust achieved Foundation Trust status on 1st December 2009.
- North Cheshire Hospitals NHS Trust achieved Foundation Trust status on 1st December 2008.
- North Cumbria Mental Health and Learning Disabilities NHS Trust achieved Foundation Trust status on 1st October 2007.
- Pennine Care NHS Trust achieved Foundation Trust status on 1st July 2008.
- Royal Liverpool Children's NHS Trust achieved Foundation Trust status on 1st August 2008.
- Tameside and Glossop Acute Services NHS Trust achieved Foundation Trust status on 1st February 2008.
- The Mid Cheshire Hospitals NHS Trust achieved Foundation Trust status on 1st April 2008.
- Walton Centre for Neurology and Neurosurgery NHS Trust achieved Foundation Trust status on 1st August 2009.
- Wirral Hospital NHS Trust achieved Foundation Trust status on 1st July 2007.
- Wrightington, Wigan and Leigh NHS Trust achieved Foundation Trust status on 1st December 2008.

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period.

A technical deficit is a deficit arising due to:

- impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or
- incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

East Lancashire Hospitals NHS Trust (£10m)

Pennine Acute Hospitals NHS Trust (£7m)

St Helens and Knowsley Teaching Hospitals NHS Trust (£24m)

Note: SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BARNSELY PCT	2,650	2,510	3,461	3,400	469,192	0.7%
BRADFORD AND AIREDALE TEACHING PCT	2,875	3,457	7,550	6,800	907,720	0.7%
CALDERDALE PCT	1,338	2,000	2,679	6,800	343,894	2.0%
DONCASTER PCT	3,643	2,760	4,177	2,700	568,527	0.5%
EAST RIDING OF YORKSHIRE PCT	2,765	1,997	3,684	7,200	487,078	1.5%
HULL TEACHING PCT	8,339	6,548	3,820	3,800	514,462	0.7%
KIRKLEES PCT	4,405	2,787	2,928	9,900	671,873	1.5%
LEEDS PCT	3,312	5,150	5,002	20,100	1,319,483	1.5%
NORTH EAST LINCOLNSHIRE CARE TRUST PLUS (1)	1,052	1,146	2,222	2,200	288,010	0.8%
NORTH LINCOLNSHIRE PCT	1,196	1,107	1,249	3,900	264,643	1.5%
NORTH YORKSHIRE AND YORK PCT	(18,226)	2,401	317	2,010	1,201,278	0.2%
ROTHERHAM PCT	2,561	1,597	2,042	2,200	460,995	0.5%
SHEFFIELD PCT	1,660	1,712	4,479	0	984,760	0.0%
WAKEFIELD DISTRICT PCT	2,223	2,580	7,388	3,100	649,925	0.5%
YORKSHIRE AND THE HUMBER SHA	223,198	178,249	133,982	69,041	661,241	10.4%
<b>YORKSHIRE AND HUMBER TOTAL SHA/PCT SECTOR</b>	<b>242,991</b>	<b>216,001</b>	<b>184,980</b>	<b>143,151</b>	<b>9,793,081</b>	<b>1.5%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
AIREDALE NHS TRUST (2)	522	759	605	49	21,005	0.2%
BRADFORD DISTRICT CARE TRUST	550	546	103	100	123,023	0.1%
DONCASTER AND SOUTH HUMBER HEALTHCARE NHS TRUST (3)	418	n/a	n/a	n/a	n/a	n/a
HULL AND EAST YORKSHIRE HOSPITALS NHS TRUST	6,755	5,020	7,601	4,800	476,702	1.0%
HUMBER MENTAL HEALTH TEACHING NHS TRUST (4)	353	1,376	1,351	n/a	n/a	n/a
LEEDS MENTAL HEALTH TEACHING NHS TRUST (5)	541	n/a	n/a	n/a	n/a	n/a
LEEDS TEACHING HOSPITALS NHS TRUST	3,093	471	963	0	940,158	0.0%
MID YORKSHIRE HOSPITALS NHS TRUST	767	32,706	871	0	412,477	0.0%
NORTHERN LINCOLNSHIRE AND GOOLE HOSPITALS NHS TRUST (6)	69	n/a	n/a	n/a	n/a	n/a
SCARBOROUGH AND NORTH EAST YORKSHIRE HEALTHCARE NHS TRUST	98	1,873	1,914	1,900	119,483	1.6%
SHEFFIELD CARE TRUST (7)	388	80	n/a	n/a	n/a	n/a
SOUTH WEST YORKSHIRE MENTAL HEALTH NHS TRUST (8)	2,291	1,015	569	n/a	n/a	n/a
YORKSHIRE AMBULANCE SERVICE NHS TRUST	251	151	518	0	197,225	0.0%
<b>YORKSHIRE AND HUMBER TOTAL TRUST SECTOR</b>	<b>16,096</b>	<b>43,997</b>	<b>14,495</b>	<b>6,849</b>	<b>2,290,073</b>	<b>0.3%</b>

**For FTs the forecast position is only for the time when the organisation was an NHS trust**

- 1 North East Lincolnshire Care Trust Plus was formed following the dissolution of North East Lincolnshire PCT on 1st September 2007.
- 2 Airedale NHS Trust achieved Foundation Trust status on 1st June 2010.
- 3 Doncaster and South Humber Healthcare NHS Trust achieved Foundation Trust status on 1st July 2007.
- 4 Humber Mental Health Teaching NHS Trust achieved Foundation Trust status on 1st February 2010.
- 5 Leeds Mental Health Teaching NHS Trust achieved Foundation Trust status on 1st August 2007.
- 6 Northern Lincolnshire and Goole Hospitals NHS Trust achieved Foundation Trust status on 1st May 2007.
- 7 Sheffield Care Trust achieved Foundation Trust status on 1st July 2008.
- 8 South West Yorkshire Mental Health NHS Trust achieved Foundation Trust status on 1st May 2009.

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:

- a) impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or
- b) incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

Leeds Teaching Hospitals NHS Trust (£2m)

Mid Yorkshire Hospitals NHS Trust (£67m)

Scarborough and North East Yorkshire Healthcare NHS Trust (£1m)

**Note:** SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BASSETLAW PCT	2,663	2,689	1,434	1,874	191,688	1.0%
DERBY CITY PCT	2,032	2,303	650	4,483	447,993	1.0%
DERBYSHIRE COUNTY PCT	4,122	4,761	1,873	11,000	1,167,748	0.9%
EAST MIDLANDS SHA	55,151	69,833	59,092	16,855	430,199	3.9%
LEICESTER CITY PCT	2,206	2,244	241	5,155	553,746	0.9%
LEICESTERSHIRE COUNTY AND RUTLAND PCT	199	1,049	1,148	8,756	931,478	0.9%
LINCOLNSHIRE TEACHING PCT	6,998	7,011	7,264	11,277	1,185,426	1.0%
NORTHAMPTONSHIRE TEACHING PCT	4,159	4,387	4,642	10,526	1,036,046	1.0%
NOTTINGHAM CITY PCT	6,422	2,283	2,448	5,100	553,483	0.9%
NOTTINGHAMSHIRE COUNTY TEACHING PCT	9,820	10,003	4,514	9,974	1,061,375	0.9%
<b>EAST MIDLANDS TOTAL SHA/PCT SECTOR</b>	<b>93,772</b>	<b>106,563</b>	<b>83,306</b>	<b>85,000</b>	<b>7,559,182</b>	<b>1.1%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
DERBYSHIRE MENTAL HEALTH SERVICES NHS TRUST	518	990	1,014	1,100	107,026	1.0%
EAST MIDLANDS AMBULANCE SERVICE NHS TRUST	298	1,564	2,016	1,886	158,104	1.2%
KETTERING GENERAL HOSPITAL NHS TRUST (1)	2,705	3,444	n/a	n/a	n/a	n/a
LEICESTERSHIRE PARTNERSHIP NHS TRUST	303	683	1,732	1,731	135,467	1.3%
LINCOLNSHIRE PARTNERSHIP NHS TRUST (2)	922	n/a	n/a	n/a	n/a	n/a
NORTHAMPTON GENERAL HOSPITAL NHS TRUST	1,834	2,100	2,081	2,000	227,952	0.9%
NORTHAMPTONSHIRE HEALTHCARE NHS TRUST (3)	2,438	342	29	n/a	n/a	n/a
NOTTINGHAM UNIVERSITY HOSPITALS NHS TRUST	7,069	5,557	7,256	5,193	729,738	0.7%
NOTTINGHAMSHIRE HEALTHCARE NHS TRUST	7,458	3,905	2,387	6,301	299,987	2.1%
UNITED LINCOLNSHIRE HOSPITALS NHS TRUST	12,488	366	1,282	1,089	389,421	0.3%
UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST	577	3,018	51	1,000	690,261	0.1%
<b>EAST MIDLANDS TOTAL TRUST SECTOR</b>	<b>36,610</b>	<b>21,969</b>	<b>17,848</b>	<b>20,300</b>	<b>2,737,956</b>	<b>0.7%</b>

For FTs the forecast position is only for the time when the organisation was an NHS trust

1 Kettering General Hospital NHS Trust achieved Foundation Trust status on 1st November 2008.

2 Lincolnshire Partnership NHS Trust achieved Foundation Trust status on 1st October 2007.

3 Northamptonshire Healthcare NHS Trust achieved Foundation Trust status on 1st May 2009.

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:

- a) impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or  
b) incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

Derbyshire Mental Health Services NHS Trust (£2m)

Nottingham University Hospitals NHS Trust (£12m)

University Hospitals of Leicester NHS Trust (£0.4m)

Note: SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BIRMINGHAM EAST AND NORTH PCT	3,245	1,922	2,453	2,000	735,761	0.3%
COVENTRY TEACHING PCT	3,894	4,983	4,644	5,747	587,204	1.0%
DUDLEY PCT	2,084	2,055	362	173	507,749	0.0%
HEART OF BIRMINGHAM TEACHING PCT	9,685	9,683	7,615	9,550	604,889	1.6%
HEREFORDSHIRE PCT	475	475	778	0	284,171	0.0%
NORTH STAFFORDSHIRE PCT	1,058	1,999	515	1,000	348,367	0.3%
SANDWELL PCT	1,516	7,020	89	0	588,552	0.0%
SHROPSHIRE COUNTY PCT	585	854	490	783	462,836	0.2%
SOLIHULL CARE TRUST	805	793	16	0	327,498	0.0%
SOUTH BIRMINGHAM PCT	6,500	6,505	4,700	1,600	647,437	0.2%
SOUTH STAFFORDSHIRE PCT	4,606	4,676	2,200	4,523	923,014	0.5%
STOKE ON TRENT PCT	1,934	4,304	2,588	2,500	516,579	0.5%
TELFORD AND WREKIN PCT	6,977	7,247	4,522	500	266,703	0.2%
WALSALL TEACHING PCT	8,963	11,602	6,022	5,000	479,285	1.0%
WARWICKSHIRE PCT	435	321	594	500	819,358	0.1%
WEST MIDLANDS SHA	33,500	6,497	19,732	26,467	536,154	4.9%
WOLVERHAMPTON CITY PCT	13,833	24,874	19,365	9,155	468,268	2.0%
WORCESTERSHIRE PCT	1,885	4,865	3,519	1,000	851,470	0.1%
<b>WEST MIDLANDS TOTAL SHA/PCT SECTOR</b>	<b>101,980</b>	<b>100,675</b>	<b>80,204</b>	<b>70,498</b>	<b>9,955,295</b>	<b>0.7%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
BIRMINGHAM AND SOLIHULL MENTAL HEALTH NHS TRUST (1)	3,900	1,206	n/a	n/a	n/a	n/a
BIRMINGHAM WOMEN'S HEALTH CARE NHS TRUST (2)	707	n/a	n/a	n/a	n/a	n/a
BURTON HOSPITALS NHS TRUST (3)	40	2,666	n/a	n/a	n/a	n/a
COVENTRY AND WARWICKSHIRE PARTNERSHIP NHS TRUST (4)	264	1,863	3,690	451	144,721	0.3%
DUDLEY AND WALSALL MENTAL HEALTH PARTNERSHIP NHS TRUST	n/a	202	376	350	66,373	0.5%
DUDLEY GROUP OF HOSPITALS NHS TRUST (5)	10,524	3,886	n/a	n/a	n/a	n/a
GEORGE ELIOT HOSPITAL NHS TRUST	1,382	964	1,164	1,202	107,034	1.1%
HEREFORD HOSPITALS NHS TRUST	1,126	544	1,165	0	119,469	0.0%
MID STAFFORDSHIRE GENERAL HOSPITALS NHS TRUST (6)	253	n/a	n/a	n/a	n/a	n/a
NORTH STAFFORDSHIRE COMBINED HEALTHCARE NHS TRUST	214	256	449	1,030	85,241	1.2%
ROBERT JONES AND AGNES HUNT ORTHOPAEDIC HOSPITAL NHS TRUST	1,146	999	2,054	1,300	79,154	1.6%
ROYAL WOLVERHAMPTON HOSPITALS NHS TRUST	8,335	6,913	8,035	5,893	291,157	2.0%
SANDWELL & WEST BIRMINGHAM HOSPITALS NHS TRUST	6,524	2,547	7,260	2,038	382,623	0.5%
SANDWELL MENTAL HEALTH NHS AND SOCIAL CARE TRUST (7)	58	60	n/a	n/a	n/a	n/a
SHREWSBURY AND TELFORD HOSPITAL NHS TRUST	4,102	4,127	712	2,567	266,968	1.0%
SOUTH WARWICKSHIRE GENERAL HOSPITALS NHS TRUST (8)	2,412	6,842	5,581	n/a	n/a	n/a
UNIVERSITY HOSPITAL OF NORTH STAFFORDSHIRE NHS TRUST	3,990	3,008	5,644	4,100	399,883	1.0%
UNIVERSITY HOSPITALS COVENTRY AND WARWICKSHIRE NHS TRUST	201	4,825	10,234	6,538	465,294	1.4%
WALSALL HOSPITALS NHS TRUST	644	353	1,998	250	171,335	0.1%
WEST MIDLANDS AMBULANCE SERVICE NHS TRUST	235	156	255	35	185,202	0.0%
WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST	5,193	5,833	3,135	2,376	310,560	0.8%
WORCESTERSHIRE MENTAL HEALTH PARTNERSHIP NHS TRUST	61	2	700	700	71,875	1.0%
<b>WEST MIDLANDS TOTAL TRUST SECTOR</b>	<b>51,311</b>	<b>47,252</b>	<b>52,452</b>	<b>28,830</b>	<b>3,146,889</b>	<b>0.9%</b>

For FTs the forecast position is only for the time when the organisation was an NHS trust

- 1 Birmingham and Solihull Mental Health NHS Trust achieved Foundation Trust status on 1st July 2008.
- 2 Birmingham Women's Health Care NHS Trust achieved Foundation Trust status on 1st February 2008.
- 3 Burton Hospitals NHS Trust achieved Foundation Trust status on 1st November 2008.
- 4 Coventry and Warwickshire Partnership NHS Trust was formed from the Mental Health elements of Rugby PCT, Coventry Teaching PCT, North Warwickshire PCT and South Warwickshire PCT.
- 5 Dudley Group of Hospitals NHS Trust achieved Foundation Trust status on 1st October 2008.
- 6 Mid Staffordshire General Hospitals NHS Trust achieved Foundation Trust status on 1st February 2008.
- 7 Sandwell Mental Health and Social Care NHS Trust achieved Foundation Trust status on 1st February 2009.
- 8 South Warwickshire General Hospitals NHS Trust achieved Foundation Trust status on 1st March 2010.

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:

- a) impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or
- b) incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

Coventry and Warwickshire Partnership NHS Trust (£4m)

North Staffordshire Combined Healthcare NHS Trust (£2m)

Sandwell & West Birmingham Hospitals NHS Trust (£2m)

Walsall Hospitals NHS Trust (£17m)

Worcestershire Mental Health Partnership NHS Trust (£0.2m)

Note: SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BEDFORDSHIRE PCT	133	330	236	500	613,379	0.1%
CAMBRIDGESHIRE PCT	752	760	501	500	860,854	0.1%
EAST AND NORTH HERTFORDSHIRE PCT	n/a	n/a	n/a	n/a	n/a	n/a
EAST OF ENGLAND SHA	32,683	124,757	135,389	89,550	694,776	12.9%
GREAT YARMOUTH AND WAVENEY PCT	2,408	230	352	1,500	403,512	0.4%
HERTFORDSHIRE PCT (1)	57	2,259	1,611	0	1,695,585	0.0%
LUTON PCT	3	492	400	500	313,789	0.2%
MID ESSEX PCT	2,803	940	1,007	1,000	521,412	0.2%
NORFOLK PCT	227	1,079	695	900	1,196,639	0.1%
NORTH EAST ESSEX PCT	189	1,348	2,993	1,000	548,211	0.2%
PETERBOROUGH PCT	9	2,896	(12,832)	500	283,003	0.2%
SOUTH EAST ESSEX PCT	25	852	2,014	850	551,140	0.2%
SOUTH WEST ESSEX PCT	19,351	688	1,614	200	664,958	0.0%
SUFFOLK PCT	49	1,315	2,578	1,500	906,161	0.2%
WEST ESSEX PCT	255	1,448	815	1,500	432,367	0.3%
WEST HERTFORDSHIRE PCT	n/a	n/a	n/a	n/a	n/a	n/a
<b>EAST OF ENGLAND TOTAL SHA/PCT SECTOR</b>	<b>58,944</b>	<b>139,394</b>	<b>137,373</b>	<b>100,000</b>	<b>9,685,786</b>	<b>1.0%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
BEDFORD HOSPITALS NHS TRUST	2,234	2,118	612	0	135,219	0.0%
BEDFORDSHIRE AND LUTON MENTAL HEALTH AND SOCIAL CARE PARTNERSHIP NHS TRUST	130	751	463	n/a	n/a	n/a
CAMBRIDGESHIRE AND PETERBOROUGH MENTAL HEALTH PARTNERSHIP NHS TRUST (2)	154	71	n/a	n/a	n/a	n/a
CAMBRIDGESHIRE COMMUNITY SERVICES NHS TRUST (3)	n/a	n/a	n/a	551	101,837	n/a
EAST AND NORTH HERTFORDSHIRE NHS TRUST	2,003	2,070	2,499	3,300	328,036	1.0%
EAST OF ENGLAND AMBULANCE SERVICE NHS TRUST	104	283	757	1,967	223,621	0.9%
ESSEX RIVERS HEALTHCARE NHS TRUST (4)	2,939	875	n/a	n/a	n/a	n/a
HERTFORDSHIRE PARTNERSHIP NHS TRUST (5)	(1,522)	n/a	n/a	n/a	n/a	n/a
HINCHINGBROOKE HEALTH CARE NHS TRUST	(16,037)	98	598	0	98,850	0.0%
MID ESSEX HOSPITAL SERVICES NHS TRUST	8,983	7,316	2,551	1,000	239,035	0.4%
NORFOLK AND NORWICH UNIVERSITY HOSPITALS NHS TRUST (6)	3,901	2,409	n/a	n/a	n/a	n/a
NORFOLK AND WAVENEY MENTAL HEALTH PARTNERSHIP NHS TRUST (7)	2,627	n/a	n/a	n/a	n/a	n/a
NORTH ESSEX MENTAL HEALTH PARTNERSHIP NHS TRUST (8)	510	n/a	n/a	n/a	n/a	n/a
SUFFOLK MENTAL HEALTH PARTNERSHIP NHS TRUST	1,264	1,504	1,513	792	85,421	0.9%
THE IPSWICH HOSPITAL NHS TRUST	5,037	4,580	3,351	3,672	227,902	1.6%
THE PRINCESS ALEXANDRA HOSPITAL NHS TRUST	4,534	3,222	511	500	182,069	0.3%
THE QUEEN ELIZABETH HOSPITAL KINGS LYNN NHS TRUST	4,565	6,158	4,510	2,672	165,091	1.6%
WEST HERTFORDSHIRE HOSPITALS NHS TRUST	2,495	4,405	5,699	8,100	254,594	3.2%
WEST SUFFOLK HOSPITALS NHS TRUST	2,588	4,600	6,273	3,603	149,800	2.4%
<b>EAST OF ENGLAND TOTAL TRUST SECTOR</b>	<b>26,509</b>	<b>40,460</b>	<b>29,337</b>	<b>26,157</b>	<b>2,191,475</b>	<b>1.2%</b>

**For FTs the forecast position is only for the time when the organisation was an NHS trust**

- Hertfordshire PCT was formed by the merger of East and North Hertfordshire (5P3) and West Hertfordshire PCT (5P4) on 1st April 2010.
- Cambridgeshire and Peterborough Mental Health Partnership NHS Trust achieved Foundation Trust status on 1st June 2008.
- Cambridgeshire Community Services NHS Trust is a new trust formed on 1st April 2010.
- Essex Rivers Healthcare NHS Trust achieved Foundation Trust status on 1st May 2008.
- Hertfordshire Partnership NHS Trust achieved Foundation Trust status on 1st August 2007.
- Norfolk and Norwich University Hospitals NHS Trust achieved Foundation Trust status on 1st May 2008.
- Norfolk and Waveney Mental Health Partnership NHS Trust achieved Foundation Trust status on 1st February 2008.
- North Essex Mental Health Partnership NHS Trust achieved Foundation Trust status on 1st October 2007.

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:

- impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or
- incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

East and North Hertfordshire NHS Trust (£0.1m)  
Mid Essex Hospital Services NHS Trust (£46m)

Note: SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

## ANNEX 7: LONDON SHA

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BARKING AND DAGENHAM PCT	20,753	18,439	3,377	6,184	337,005	1.8%
BARNET PCT	3,031	5,860	139	0	599,926	0.0%
BEXLEY CARE PCT	52	130	51	1,509	343,832	0.4%
BRENT TEACHING PCT	1,698	12,584	16,334	17,226	552,782	3.1%
BROMLEY PCT	49	188	249	4,902	502,423	1.0%
CAMDEN PCT	3,445	4,340	12	11,823	517,891	2.3%
CITY AND HACKNEY TEACHING PCT	9,339	100	9,346	5,235	519,155	1.0%
CROYDON PCT	2,600	6,000	3,412	5,535	594,738	0.9%
EALING PCT	4,164	4,686	3	0	602,777	0.0%
ENFIELD PCT	(13,308)	20	(10,491)	0	488,664	0.0%
GREENWICH TEACHING PCT	1,480	1,531	608	4,764	476,235	1.0%
HAMMERSMITH AND FULHAM PCT	9,878	18,617	10,538	3,513	363,695	1.0%
HARINGEY TEACHING PCT	539	1,983	29	0	461,342	0.0%
HARROW PCT	172	1,432	126	0	344,464	0.0%
HAVERING PCT	285	748	1,528	500	413,633	0.1%
HILLINGDON PCT	0	2	19,380	4,000	404,546	1.0%
HOUNSLOW PCT	(1,940)	48	40	0	407,062	0.0%
ISLINGTON PCT	32	6,617	1,121	11,720	472,127	2.5%
KENSINGTON AND CHELSEA PCT	6,174	8,760	3,985	5,052	363,405	1.4%
KINGSTON PCT	3,546	117	103	2,623	268,616	1.0%
LAMBETH PCT	1,064	2,907	988	6,220	648,759	1.0%
LEWISHAM PCT	92	339	90	5,172	524,837	1.0%
LONDON SHA	146,196	187,527	288,675	326,744	2,086,169	15.7%
NEWHAM PCT	3,407	6,665	1,107	5,370	561,015	1.0%
REDBRIDGE PCT	18,664	9,893	6,232	7,000	412,663	1.7%
RICHMOND AND TWICKENHAM PCT	150	708	112	2,812	286,625	1.0%
SOUTHWARK PCT	478	218	628	1,295	537,705	0.2%
SUTTON AND MERTON PCT	58	76	(2,286)	0	609,814	0.0%
TOWER HAMLETS PCT	396	6,881	6,753	4,908	495,623	1.0%
WALTHAM FOREST PCT	102	201	0	0	423,087	0.0%
WANDSWORTH PCT	3,390	3,930	4,386	5,439	573,814	0.9%
WESTMINSTER PCT	11,875	15,534	15,010	6,179	524,092	1.2%
<b>LONDON TOTAL SHA/PCT SECTOR</b>	<b>237,861</b>	<b>327,081</b>	<b>381,585</b>	<b>455,725</b>	<b>16,718,521</b>	<b>2.7%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
BARKING, HAVERING AND REDBRIDGE HOSPITALS NHS TRUST	(35,621)	(35,674)	(22,309)	(19,436)	395,152	(4.9%)
BARNET AND CHASE FARM HOSPITALS NHS TRUST	2,611	155	5,069	8,000	338,771	2.4%
BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST	2,014	(5,451)	239	0	174,292	0.0%
BARTS AND THE LONDON NHS TRUST	16,416	7,532	11,423	6,000	665,561	0.9%
BROMLEY HOSPITALS NHS TRUST	(17,920)	(4,858)	n/a	n/a	n/a	n/a
CAMDEN AND ISLINGTON MENTAL HEALTH SOCIAL CARE NHS TRUST (1)	2,595	n/a	n/a	n/a	n/a	n/a
CENTRAL AND NORTH WEST LONDON MENTAL HEALTH NHS TRUST (2)	850	n/a	n/a	n/a	n/a	n/a
EALING HOSPITAL NHS TRUST	1,135	2,125	36	0	128,980	0.0%
EAST LONDON AND THE CITY MENTAL HEALTH NHS TRUST (3)	10,428	n/a	n/a	n/a	n/a	n/a
EPSOM AND ST HELIER UNIVERSITY HOSPITALS NHS TRUST	827	4,902	2,877	3,332	327,279	1.0%
GREAT ORMOND STREET HOSPITAL FOR CHILDREN NHS TRUST	6,956	1,348	7,368	7,227	327,795	2.2%
IMPERIAL COLLEGE HEALTHCARE NHS TRUST (4)	12,750	12,025	9,102	9,150	901,338	1.0%
KINGSTON HOSPITAL NHS TRUST	2,713	807	2,412	2,470	196,701	1.3%
LONDON AMBULANCE SERVICE NHS TRUST	398	725	1,425	288	281,167	0.1%
MAYDAY HEALTHCARE NHS TRUST	5,044	2,149	1,106	1,900	195,771	1.0%
NEWHAM UNIVERSITY HOSPITAL NHS TRUST	(2,269)	201	55	2,800	168,290	1.7%
NORTH EAST LONDON MENTAL HEALTH NHS TRUST (5)	2,136	379	n/a	n/a	n/a	n/a
NORTH MIDDLESEX UNIVERSITY HOSPITALS NHS TRUST	3,019	5,031	6,044	3,000	175,209	1.7%
NORTH WEST LONDON HOSPITALS NHS TRUST	1,030	117	(8,025)	0	356,193	0.0%
QUEEN ELIZABETH HOSPITAL NHS TRUST	(3,125)	(5,481)	n/a	n/a	n/a	n/a
QUEEN MARY'S SIDCUP NHS TRUST	(2,877)	(10,991)	n/a	n/a	n/a	n/a
ROYAL BROMPTON AND HAREFIELD NHS TRUST (6)	3,566	3,173	547	n/a	n/a	n/a
ROYAL FREE HAMPSTEAD NHS TRUST	10,724	3,791	2,035	5,501	541,363	1.0%
SOUTH LONDON HEALTHCARE NHS TRUST (7)	0	n/a	(42,067)	(35,992)	438,353	(8.2%)
SOUTH WEST LONDON AND ST GEORGE'S MENTAL HEALTH NHS TRUST	1,738	(3,246)	2,286	1,789	176,193	1.0%
ST GEORGE'S HEALTHCARE NHS TRUST	5,972	1,718	12,933	11,947	502,134	2.4%
THE HILLINGDON HOSPITAL NHS TRUST	6,263	2,196	258	307	182,010	0.2%
THE LEWISHAM HOSPITAL NHS TRUST	3,771	(3,929)	6,753	1,853	185,387	1.0%
THE ROYAL NATIONAL ORTHOPAEDIC HOSPITAL NHS TRUST	1,109	483	1,026	1,618	99,783	1.6%
WEST LONDON MENTAL HEALTH NHS TRUST	2,279	352	1,167	2,541	254,045	1.0%
WEST MIDDLESEX UNIVERSITY HOSPITAL NHS TRUST	19	(3,534)	(4,996)	0	146,865	0.0%
WHIPPS CROSS UNIVERSITY HOSPITALS NHS TRUST	828	810	229	0	228,613	0.0%
WHITTINGTON HOSPITAL NHS TRUST	1,421	1,938	139	0	176,858	0.0%
<b>LONDON TOTAL TRUST SECTOR</b>	<b>46,800</b>	<b>(21,207)</b>	<b>(2,868)</b>	<b>14,295</b>	<b>7,564,103</b>	<b>0.2%</b>

## For FTs the forecast position is only for the time when the organisation was an NHS trust

- 1 Camden and Islington Mental Health and Social Care NHS Trust achieved Foundation Trust status on 1st March 2008.
- 2 Central and North West London Mental Health NHS Trust achieved Foundation Trust status on 1st May 2007.
- 3 East London and the City Mental Health NHS Trust achieved Foundation Trust status on 1st November 2007.
- 4 Imperial College Healthcare NHS Trust was formed from St Mary's NHS Trust and Hammersmith Hospitals NHS Trust.
- 5 North East London Mental Health NHS Trust achieved Foundation Trust status on 1st June 2008.
- 6 Royal Brompton and Harefield NHS Trust achieved Foundation Trust status on 1st June 2009.
- 7 South London Healthcare Trust was formed from the merger of Queen Elizabeth Hospital NHS Trust (RG2), Bromley Hospitals NHS Trust (RG3), and Queen Mary's Sidcup NHS Trust (RGZ).

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:  
a) impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or  
b) incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

Barking, Havering and Redbridge Hospitals NHS Trust (£0.4m)  
North Middlesex University Hospitals NHS Trust (£67m)  
North West London Hospital Nhs Trust (£1m)  
South London Healthcare NHS Trust (£5m)  
The Hillingdon Hospital NHS Trust (£0.6m)  
West Middlesex University NHS Trust (£0.2m)  
Whittington Hospital NHS Trust (£0.5m)

**Note: SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.**



SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BRIGHTON AND HOVE CITY TEACHING PCT	3,018	124	1,071	4,615	480,284	1.0%
EAST SUSSEX DOWNS AND WEALD PCT	376	2,440	1,230	5,642	563,397	1.0%
EASTERN AND COASTAL KENT PCT	3,960	5,046	6,130	12,000	1,262,953	1.0%
HASTINGS AND ROTHER PCT	3,562	3,631	3,841	3,352	341,407	1.0%
MEDWAY PCT	3,211	5,059	3,689	4,315	440,022	1.0%
SOUTH EAST COAST SHA	36,142	39,976	44,586	32,000	347,264	9.2%
SURREY PCT	425	225	(13,622)	1,000	1,703,213	0.1%
WEST KENT PCT	193	4,397	2,013	9,994	1,015,099	1.0%
WEST SUSSEX PCT	238	728	725	725	1,260,278	0.1%
<b>SOUTH EAST COAST TOTAL SHA/PCT SECTOR</b>	<b>51,125</b>	<b>61,626</b>	<b>49,663</b>	<b>73,643</b>	<b>7,413,917</b>	<b>1.0%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
ASHFORD AND ST PETER'S HOSPITALS NHS TRUST	2,450	5,513	6,275	3,300	227,197	1.5%
BRIGHTON AND SUSSEX UNIVERSITY HOSPITALS NHS TRUST	106	9,925	10,227	4,960	406,920	1.2%
DARTFORD AND GRAVESHAM NHS TRUST	578	4,015	115	200	148,200	0.1%
EAST KENT HOSPITALS UNIVERSITY NHS TRUST (1)	7,654	13,087	n/a	n/a	n/a	n/a
EAST SUSSEX HOSPITALS NHS TRUST	3,448	1,017	350	1,500	296,301	0.5%
KENT AND MEDWAY NHS AND SOCIAL CARE PARTNERSHIP TRUST	431	1,384	1,524	2,404	179,322	1.3%
MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST	131	143	189	1,598	315,252	0.5%
MEDWAY NHS TRUST (2)	597	n/a	n/a	n/a	n/a	n/a
ROYAL SURREY COUNTY HOSPITAL NHS TRUST (3)	2,517	2,930	4,554	n/a	n/a	n/a
SOUTH DOWNS HEALTH NHS TRUST	77	92	649	665	63,710	1.0%
SOUTH EAST COAST AMBULANCE SERVICE NHS TRUST	641	658	1,130	2,168	164,667	1.3%
SURREY AND BORDERS PARTNERSHIP NHS TRUST (4)	182	(307)	n/a	n/a	n/a	n/a
SURREY AND SUSSEX HEALTHCARE NHS TRUST	27	7,048	7,755	4,800	193,348	2.5%
SUSSEX PARTNERSHIP NHS TRUST (5)	4,763	1,698	n/a	n/a	n/a	n/a
THE ROYAL WEST SUSSEX NHS TRUST	10,466	1,758	n/a	n/a	n/a	n/a
WESTERN SUSSEX HOSPITALS NHS TRUST (6)	0	n/a	4,138	5,209	347,206	1.5%
WORTHING AND SOUTHLANDS HOSPITALS NHS TRUST	170	408	n/a	n/a	n/a	n/a
<b>SOUTH EAST COAST TOTAL TRUST SECTOR</b>	<b>34,238</b>	<b>49,369</b>	<b>36,906</b>	<b>26,804</b>	<b>2,342,123</b>	<b>1.1%</b>

**For FTs the forecast position is only for the time when the organisation was an NHS trust**

- 1 East Kent Hospitals University NHS Trust achieved Foundation Trust status on 1st March 2009.
- 2 Medway NHS Trust achieved Foundation Trust status on 1st April 2008.
- 3 Royal Surrey County Hospital NHS Trust achieved Foundation Trust status on 1st December 2009.
- 4 Surrey and Borders Partnership NHS Trust achieved Foundation Trust status on 1st May 2008. It was forecasting a technical deficit relating to a phasing issue in the month before it became a Foundation Trust.
- 5 Sussex Partnership NHS Trust achieved Foundation Trust status on 1st August 2008.
- 6 Western Sussex Hospitals NHS Trust was formed from the merger of The Royal West Sussex NHS Trust (RPR) and Worthing & Southlands Hospitals NHS Trust (RPL).

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:

- a) impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or
- b) incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

Dartford and Gravesham NHS Trust (£1m)  
Maidstone and Tunbridge Wells NHS Trust (£10m)  
South Downs Health NHS Trust (£0.4m)

**Note: SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.**

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BERKSHIRE EAST PCT	107	80	101	2,663	580,462	0.5%
BERKSHIRE WEST PCT	284	1,287	1,449	1,569	659,670	0.2%
BUCKINGHAMSHIRE PCT	(11,574)	(7,459)	1,368	0	720,784	0.0%
HAMPSHIRE PCT	469	258	486	0	1,872,949	0.0%
ISLE OF WIGHT NHS PCT	1,272	1,246	2,382	2,459	264,494	0.9%
MILTON KEYNES PCT	3,327	1,100	605	1,500	358,292	0.4%
OXFORDSHIRE PCT	5,799	2,181	1,901	2,184	936,605	0.2%
PORTSMOUTH CITY TEACHING PCT	7,839	5,810	5,207	635	358,795	0.2%
SOUTH CENTRAL SHA	27,192	39,632	45,125	44,170	391,200	11.3%
SOUTHAMPTON CITY PCT	2,033	155	917	2,849	405,540	0.7%
<b>SOUTH CENTRAL TOTAL SHA/PCT SECTOR</b>	<b>36,748</b>	<b>44,290</b>	<b>59,541</b>	<b>58,029</b>	<b>6,548,791</b>	<b>0.9%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
BERKSHIRE HEALTHCARE NHS TRUST (1)	299	n/a	n/a	n/a	n/a	n/a
BUCKINGHAMSHIRE HOSPITALS NHS TRUST	1,729	(2,750)	146	3,048	327,958	0.9%
HAMPSHIRE PARTNERSHIP NHS TRUST (2)	2,599	2,597	n/a	n/a	n/a	n/a
HEATHERWOOD AND WEXHAM PARK HOSPITALS NHS TRUST (3)	1,319	n/a	n/a	n/a	n/a	n/a
MILTON KEYNES GENERAL HOSPITAL NHS TRUST (4)	852	n/a	n/a	n/a	n/a	n/a
NUFFIELD ORTHOPAEDIC NHS TRUST	56	59	311	145	79,638	0.2%
OXFORD LEARNING DISABILITY NHS TRUST	386	631	181	400	37,977	1.1%
OXFORD RADCLIFFE HOSPITALS NHS TRUST	4,311	2,405	106	0	642,874	0.0%
OXFORDSHIRE AND BUCKINGHAMSHIRE MENTAL HEALTH PARTNERSHIP NHS TRUST (5)	1,053	n/a	n/a	n/a	n/a	n/a
PORTSMOUTH HOSPITALS NHS TRUST	7,299	159	(14,877)	11	429,351	0.0%
SOUTH CENTRAL AMBULANCE SERVICE NHS TRUST	30	559	602	1,323	133,179	1.0%
SOUTHAMPTON UNIVERSITY HOSPITALS NHS TRUST	17,944	13,591	6,777	4,879	506,034	1.0%
WINCHESTER AND EASTLEIGH HEALTHCARE NHS TRUST	633	286	224	0	139,898	0.0%
<b>SOUTH CENTRAL TOTAL TRUST SECTOR</b>	<b>38,510</b>	<b>17,537</b>	<b>(6,530)</b>	<b>9,806</b>	<b>2,296,909</b>	<b>0.4%</b>

**For FTs the forecast position is only for the time when the organisation was an NHS trust**

- 1 Berkshire Healthcare NHS Trust achieved Foundation Trust status on 1st May 2007.
- 2 Hampshire Partnership NHS Trust achieved Foundation Trust status on 1st April 2009.
- 3 Heatherwood and Wexham Park Hospitals NHS Trust achieved Foundation Trust status on 1st June 2007.
- 4 Milton Keynes General Hospital NHS Trust achieved Foundation Trust status on 1st October 2007
- 5 Oxfordshire and Buckinghamshire Mental Health Partnership Trust incorporates Buckinghamshire Mental Health Trust (RWT) from 1st April 2006. This Trust achieved Foundation Trust status on 1st April 2008.

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:

- a) impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or
- b) incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

Nuffield Orthopaedic NHS Trust (£0.7m)  
Oxford Radcliffe Hospitals NHS Trust (£5m)

**Note:** SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

SHA and PCT name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) £000s	2010/11 Q1 Forecast Outturn Revenue Resource Limit (RRL) (£000s)	2010/11 Q1 Forecast Outturn Surplus/ (Deficit) as % RRL
BATH AND NORTH EAST SOMERSET PCT	2,837	1,752	1,924	2,685	284,781	0.9%
BOURNEMOUTH AND POOLE TEACHING PCT	5,779	5,403	2,886	5,356	571,087	0.9%
BRISTOL TEACHING PCT	3,689	4,514	4,974	6,955	749,409	0.9%
CORNWALL AND ISLES OF SCILLY PCT	2,727	5,622	6,064	8,562	907,148	0.9%
DEVON PCT	3,700	15	237	3,500	1,199,591	0.3%
DORSET PCT	3,070	4,057	4,374	6,133	644,367	1.0%
GLOUCESTERSHIRE PCT	2,798	5,784	6,216	8,685	909,772	1.0%
NORTH SOMERSET PCT	9	48	48	1,500	326,128	0.5%
PLYMOUTH TEACHING PCT	5,042	2,745	1,400	4,165	449,706	0.9%
SOMERSET PCT	5,110	5,235	5,751	7,965	855,301	0.9%
SOUTH GLOUCESTERSHIRE PCT	1,090	48	39	1,500	360,568	0.4%
SOUTH WEST SHA	56,710	63,822	56,756	39,355	460,630	8.5%
SWINDON PCT	935	1,930	2,080	2,945	308,811	1.0%
TORBAY CARE TRUST	7,881	1,640	1,808	2,494	263,876	0.9%
WILTSHIRE PCT	0	1,167	0	3,200	663,376	0.5%
<b>SOUTH WEST TOTAL SHA/PCT SECTOR</b>	<b>101,377</b>	<b>103,782</b>	<b>94,557</b>	<b>105,000</b>	<b>8,954,551</b>	<b>1.2%</b>

Trust name	2007/8 Annual Accounts Surplus/ (Deficit) £000s	2008/9 Annual Accounts Surplus/ (Deficit) £000s	2009/10 Annual Accounts Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) £000s	2010/11 Q1 Forecast Outturn Turnover £000s	2010/11 Q1 Forecast Outturn Surplus/ (Operating Deficit) as % Turnover
AVON AND WILTSHIRE MHP NHS TRUST	1,009	1,827	1,113	3,200	194,853	1.6%
CORNWALL PARTNERSHIP NHS TRUST (1)	0	402	1,250	n/a	n/a	n/a
DEVON PARTNERSHIP NHS TRUST	1,700	1,298	209	500	126,807	0.4%
GLOUCESTERSHIRE PARTNERSHIP NHS TRUST (2)	1,366	n/a	n/a	n/a	n/a	n/a
GREAT WESTERN AMBULANCE SERVICE NHS TRUST	1,449	5	94	800	85,519	0.9%
NORTH BRISTOL NHS TRUST	4,008	3,036	6,177	7,880	485,265	1.6%
NORTHERN DEVON HEALTHCARE NHS TRUST	7,602	7,902	0	250	133,099	0.2%
PLYMOUTH HOSPITALS NHS TRUST	12,698	5,023	2,010	1,000	375,535	0.3%
POOLE HOSPITALS NHS TRUST (3)	199	n/a	n/a	n/a	n/a	n/a
ROYAL CORNWALL HOSPITALS NHS TRUST	1,285	2,009	8,349	9,756	308,290	3.2%
ROYAL UNITED HOSPITAL BATH NHS TRUST	1,900	5,600	5,800	6,000	211,698	2.8%
SOMERSET PARTNERSHIP NHS AND SOCIAL CARE NHS TRUST (4)	541	94	n/a	n/a	n/a	n/a
SOUTH WEST AMBULANCE SERVICE NHS TRUST	0	325	511	500	119,830	0.4%
SWINDON AND MARLBOROUGH NHS TRUST (5)	835	1,274	n/a	n/a	n/a	n/a
TAUNTON AND SOMERSET NHS TRUST (6)	627	n/a	n/a	n/a	n/a	n/a
UNITED BRISTOL HEALTHCARE NHS TRUST (7)	12,809	3,706	n/a	n/a	n/a	n/a
WESTON AREA HEALTH NHS TRUST	8	408	2,448	3,607	91,018	4.0%
<b>SOUTH WEST TOTAL TRUST SECTOR</b>	<b>48,036</b>	<b>32,909</b>	<b>27,961</b>	<b>33,493</b>	<b>2,131,914</b>	<b>1.6%</b>

**For FTs the forecast position is only for the time when the organisation was an NHS trust**

- 1 Cornwall Partnership NHS Trust achieved Foundation Trust status on 1st March 2010.
- 2 Gloucestershire Partnership NHS Trust achieved Foundation Trust status on 1st July 2007.
- 3 Poole Hospitals NHS Trust achieved Foundation Trust status on 1st November 2007
- 4 Somerset Partnership NHS and Social Care NHS Trust achieved Foundation Trust status on 1st May 2008
- 5 Swindon and Marlborough NHS Trust achieved Foundation Trust status on 1st December 2008
- 6 Taunton and Somerset NHS Trust achieved Foundation Trust status on 1st December 2007
- 7 United Bristol Healthcare NHS Trust achieved Foundation Trust status on 1st June 2008

In addition to the operating deficits forecast in Quarter 1, 2010/11 shown above, the following organisation(s) also forecast a technical deficit (£m) in the same period. A technical deficit is a deficit arising due to:

- a) impairments including those attributable to the transition to MEA (Modern Equivalent Assets) valuation, or
- b) incurring additional non-cash revenue charges associated with bringing PFI assets on the balance sheet due to the introduction of IFRS accounting in 2009/10. This is a non-cash issue that is not recognised for NHS budgeting purposes.

Great Western Ambulance Service NHS Trust (£2m)  
Northern Devon Healthcare NHS Trust (£3m)  
Plymouth Hospitals NHS Trust (£2m)

**Note:** SHA and PCT turnover equals the Revenue Resource Limit (RRL) they are allocated. Trust turnover is all the income they receive including income from PCTs. Trust income should therefore be excluded from any aggregation of SHA economy turnover to avoid double counting resources.

SHA code	Trust name <sup>1</sup>	Overall Finance Score	Overall Quality of Service Score	Performance Rating After Escalation		Quality: Standards & Vital Signs		Quality: User Experience <sup>4</sup>		Quality: Registration		
				Finance	Quality of Services	Score	Rating	Score	Rating	Rating		
Q31	East Cheshire NHS Trust	Performing	Performing		Performing		Performing	2.59	Performing	5	Performing	Performing
Q31	East Lancashire Hospitals NHS Trust	Performing	Performing		Performing		Performing	3.00	Performing	5	Performing	Performing
Q31	North Cumbria University Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.81	Performing	5	Performing	Performing
Q31	Pennine Acute Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.93	Performing	3	Performance under review	Performing
Q31	Royal Liverpool and Broadgreen University Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.81	Performing	5	Performing	Performing
Q31	Southport and Ormskirk Hospital NHS Trust	Performing	Performing		Performing		Performing	2.85	Performing	5	Performing	Performing
Q31	St Helens and Knowsley Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.85	Performing	5	Performing	Performing
Q31	Trafford Healthcare NHS Trust	Underperforming	Performing	Escalated	Challenged		Performing	2.89	Performing	4	Performing	Performing
Q31	University Hospitals Of Morecambe Bay NHS Trust	Performing	Performing		Performing		Performing	2.45	Performing	5	Performing	Performing
Q32	Hull and East Yorkshire Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.78	Performing	3	Performance under review	Performing
Q32	Leeds Teaching Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.60	Performing	5	Performing	Performing
Q32	Mid Yorkshire Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.61	Performing	2	Performance under review	Performing
Q32	Scarborough and North East Yorkshire Health Care NHS Trust	Performing	Performance Under Review		Performing	Escalated	Underperforming	2.67	Performing	5	Performing	Performance Under Review
Q33	Northampton General Hospital NHS Trust	Performing	Performing		Performing		Performing	2.88	Performing	3	Performance under review	Performing
Q33	Nottingham University Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.54	Performing	5	Performing	Performing
Q33	United Lincolnshire Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.48	Performing	5	Performing	Performing
Q33	University Hospitals Of Leicester NHS Trust	Performing	Performing		Performing		Performing	2.44	Performing	4	Performing	Performing
Q34	George Eliot Hospital NHS Trust	Performing	Performing		Performing		Performing	2.61	Performing	2	Performance under review	Performing
Q34	Hereford Hospitals NHS Trust	Performing	Performance Under Review		Performing		Performance Under Review	2.39	Performance under review	5	Performing	Performing
Q34	Robert Jones and Agnes Hunt Orthopaedic and District Hospital NHS Trust	Performing	Performing		Performing		Performing	3.00	Performing	5	Performing	Performing
Q34	Sandwell and West Birmingham Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.83	Performing	5	Performing	Performing
Q34	Shrewsbury and Telford Hospital NHS Trust	Performing	Performance Under Review		Performing		Performance Under Review	2.27	Performance under review	5	Performing	Performing
Q34	The Royal Wolverhampton Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.68	Performing	4	Performing	Performing
Q34	University Hospital Of North Staffordshire NHS Trust	Performing	Performing		Performing		Performing	2.47	Performing	5	Performing	Performing
Q34	University Hospitals Coventry and Warwickshire NHS Trust	Performing	Performing		Performing		Performing	2.69	Performing	5	Performing	Performing
Q34	Walsall Hospitals NHS Trust	Performing	Performing		Performing		Performing	3.00	Performing	2	Performance under review	Performing
Q34	Worcestershire Acute Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.61	Performing	5	Performing	Performing
Q35	Bedford Hospital NHS Trust	Performing	Performing		Performing		Performing	2.82	Performing	2	Performance under review	Performing
Q35	East and North Hertfordshire NHS Trust	Performing	Performance Under Review		Performing	Escalated	Underperforming	2.63	Performing	1	Underperforming	Performing
Q35	Hinchingbrooke Health Care NHS Trust	Underperforming	Underperforming		Underperforming		Underperforming	1.78	Underperforming	5	Performing	Performing
Q35	Ipswich Hospital NHS Trust	Performing	Performing		Performing		Performing	2.45	Performing	5	Performing	Performing
Q35	Mid Essex Hospital Services NHS Trust	Performance under review	Performing		Performance under review		Performing	2.53	Performing	5	Performing	Performing
Q35	The Princess Alexandra Hospital NHS Trust	Performing	Performing		Performing		Performing	2.81	Performing	3	Performance under review	Performing
Q35	The Queen Elizabeth Hospital King's Lynn NHS Trust	Performing	Performance Under Review		Performing		Performance Under Review	2.19	Performance under review	5	Performing	Performing
Q35	West Hertfordshire Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.75	Performing	2	Performance under review	Performing
Q35	West Suffolk Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.79	Performing	5	Performing	Performing
Q36	Barking, Havering and Redbridge University Hospitals NHS Trust	Underperforming	Performance Under Review	Escalated	Challenged	Escalated	Underperforming	2.79	Performing	3	Performance under review	Performance Under Review
Q36	Barnet and Chase Farm Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.82	Performing	2	Performance under review	Performing
Q36	Barts and The London NHS Trust	Performing	Performing		Performing		Performing	2.54	Performing	5	Performing	Performing
Q36	Ealing Hospital NHS Trust	Performing	Performance Under Review		Performing	Escalated	Underperforming	2.66	Performing	0	Underperforming	Performing
Q36	Epsom and St Helier University Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.79	Performing	5	Performing	Performing
Q36	Great Ormond Street Hospital For Children NHS Trust	Performing	Performing		Performing		Performing	2.73	Performing			Performing
Q36	Imperial College Healthcare NHS Trust	Performance under review	Performing		Performance under review		Performing	2.53	Performing	3	Performance under review	Performing
Q36	Kingston Hospital NHS Trust	Performing	Performing		Performing		Performing	2.77	Performing	5	Performing	Performing
Q36	Mayday Healthcare NHS Trust	Performing	Performance Under Review		Performing	Escalated	Underperforming	2.90	Performing	0	Underperforming	Performing
Q36	Newham University Hospital NHS Trust	Performing	Performing		Performing		Performing	3.00	Performing	3	Performance under review	Performing
Q36	North Middlesex University Hospital NHS Trust	Performing	Performing		Performing		Performing	2.83	Performing	2	Performance under review	Performing
Q36	North West London Hospitals NHS Trust	Underperforming	Performance Under Review	Escalated	Challenged	Escalated	Underperforming	2.88	Performing	0	Underperforming	Performing
Q36	Royal Free Hampstead NHS Trust	Performing	Performance Under Review		Performing	Escalated	Underperforming	3.00	Performing	1	Underperforming	Performing
Q36	Royal National Orthopaedic Hospital NHS Trust	Performing	Performing		Performing		Performing	2.94	Performing	5	Performing	Performing
Q36	South London Healthcare NHS Trust	Underperforming	Performing	Escalated	Challenged		Performing	3.00	Performing	2	Performance under review	Performing
Q36	St George's Healthcare NHS Trust	Performing	Performance Under Review		Performing		Performance Under Review	2.46	Performing	1	Underperforming	Performing
Q36	The Hillingdon Hospital NHS Trust	Performing	Performing		Performing		Performing	2.89	Performing	3	Performance under review	Performing
Q36	The Lewisham Hospital NHS Trust	Performance under review	Performing		Performance under review		Performing	2.54	Performing	3	Performance under review	Performing
Q36	The Whittington Hospital NHS Trust	Performing	Performing		Performing		Performing	2.94	Performing	5	Performing	Performing
Q36	West Middlesex University Hospital NHS Trust	Underperforming	Performance Under Review	Escalated	Challenged	Escalated	Underperforming	2.33	Performance under review	2	Performance under review	Performing
Q36	Whipps Cross University Hospital NHS Trust	Underperforming	Performing		Underperforming		Performing	3.00	Performing	3	Performance under review	Performing
Q37	Ashford and St Peter's Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.71	Performing	5	Performing	Performing
Q37	Brighton and Sussex University Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.58	Performing	5	Performing	Performing
Q37	Dartford and Gravesham NHS Trust	Performing	Performing		Performing		Performing	2.73	Performing	4	Performing	Performing

Q37	East Sussex Hospitals NHS Trust	Performance Under Review	Performing		Performance under review		Performing	2.67	Performing	5	Performing	Performing
Q37	Maidstone and Tunbridge Wells NHS Trust	Performing	Performing		Performing		Performing	2.81	Performing	5	Performing	Performing
Q37	Surrey and Sussex Healthcare NHS Trust	Performing	Performance Under Review		Performing		Performance Under Review	2.36	Performance under review	2	Performance under review	Performing
Q37	Western Sussex Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.95	Performing	5	Performing	Performing
Q38	Buckinghamshire Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.57	Performing	4	Performing	Performing
Q38	Isle Of Wight NHS PCT	Performing	Performing		Performing		Performing	3.00	Performing	5	Performing	Performing
Q38	Nuffield Orthopaedic Centre NHS Trust	Performing	Performance Under Review		Performing		Performance Under Review	2.25	Performance under review	5	Performing	Performing
Q38	Oxford Radcliffe Hospitals NHS Trust	Performing	Performance Under Review		Performing	Escalated	Underperforming	2.31	Performance under review	5	Performing	Performing
Q38	Portsmouth Hospitals NHS Trust	Performance Under Review	Performance Under Review	Escalated	Challenged		Performance Under Review	2.56	Performing	1	Underperforming	Performing
Q38	Southampton University Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.73	Performing	5	Performing	Performing
Q38	Winchester and Eastleigh Healthcare NHS Trust	Performing	Performing		Performing		Performing	2.73	Performing	5	Performing	Performing
Q39	North Bristol NHS Trust	Performing	Performing		Performing		Performing	2.68	Performing	5	Performing	Performing
Q39	Northern Devon Healthcare NHS Trust	Performing	Performing		Performing		Performing	2.61	Performing	5	Performing	Performing
Q39	Plymouth Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.73	Performing	5	Performing	Performing
Q39	Royal Cornwall Hospitals NHS Trust	Performing	Performing		Performing		Performing	2.84	Performing	5	Performing	Performing
Q39	Royal United Hospital Bath NHS Trust	Performing	Performing		Performing		Performing	2.81	Performing	5	Performing	Performing
Q39	Weston Area Health NHS Trust	Performing	Performing		Performing		Performing	2.50	Performing	5	Performing	Performing

Footnote

<sup>1</sup> Please note that the Isle Of Wight score includes performance from the ambulance providers and where stated commissioner elements.

<sup>2</sup> Score moderated where patient experience score is underperforming, in this case highest score trust can achieve is performance under review. In addition, this score has not been compared to last quarter as a Overall Quality Score was not calculated

<sup>3</sup> If a trust has been assessed as 'performance under review' for 3 consecutive quarters, it will be categorised here as 'underperforming', if a trust has been assessed as 'underperforming' for 3 consecutive quarters, it will be categorised

<sup>4</sup> Great Ormond Street do not have user experience data, so for this trusts it has not been used as a moderator

ANNEX 12: NHS PERFORMANCE FRAMEWORK AMBULANCE TRUST RESULTS Q1 2010/11

SHA code	Trust name	Overall Finance Score	Overall Quality Score	Performance Rating After Escalation			Quality: Standards & Vital Signs		Quality: Registration
				Finance	Quality of Services		Score	Rating	Rating
Q30	North East Ambulance Service NHS Trust	Performing	Performing	Performing		Performing	2.75	Performing	Performing
Q31	North West Ambulance Service NHS Trust	Performing	Performance Under Review	Performing	Escalated	Underperforming	2.13	Performance Under Review	Performing
Q32	Yorkshire Ambulance Service NHS Trust	Performing	Performance Under Review	Performing	Escalated	Underperforming	2.63	Performing	Performance Under Review
Q33	East Midlands Ambulance Service NHS Trust	Performing	Performing	Performing		Performing	2.50	Performing	Performing
Q34	West Midlands Ambulance Service NHS Trust	Performing	Performing	Performing		Performing	2.88	Performing	Performing
Q35	East of England Ambulance Service NHS Trust	Performing	Performing	Performing		Performing	2.50	Performing	Performing
Q36	London Ambulance Service	Performing	Performing	Performing		Performing	2.50	Performing	Performing
Q37	South East Coast Ambulance Service NHS Trust	Performing	Performing	Performing		Performing	3.00	Performing	Performing
Q38	South Central Ambulance Service NHS Trust	Performing	Underperforming	Performing		Underperforming	1.63	Underperforming	Performing
Q39	Great Western Ambulance Service NHS Trust	Performing	Performing	Performing		Performing	2.50	Performing	Performing
Q39	South Western Ambulance Service NHS Trust	Performing	Performing	Performing		Performing	2.88	Performing	Performing

<sup>1</sup> If a trust has been assessed as 'performance under review' for 3 consecutive quarters, it will be categorised here as 'underperforming', if a trust has been assessed as 'underperforming' for 3 consecutive quarters, it will be categorised here as 'challenged'.

## Annex 13: Redundancies

### Redundancies (by headcount)

During Q1, there were 491 compulsory redundancies. Of the 491 compulsory redundancies 93 (18.9 percent) were clinical and 398 (81.1 percent) were non-clinical. These include data from SHAs, PCTs, trusts and foundation trusts.

	<b>Compulsory redundancies for clinical staff</b>	<b>Compulsory redundancies for non-clinical staff</b>	<b>Total Compulsory redundancies</b>
NHS England	93	398	491

Note: Data for 2010/11 is incomparable with previous years as it includes data for foundation trusts whereas previous years did not.