

Performance rating 2008/09 - South Central Ambulance Service NHS Trust

Overall performance

The overall performance rating is made up of two parts: 'quality of financial management', which looks at how effectively a trust manages its financial resources; and 'quality of services', which is an aggregated score of performance against national standards, existing commitments and national priorities. The below tables summarise the four years of the performance assessment.

	2008/09	2007/08	2006/07	2005/06
Quality of Services	WEAK FAIR GOOD EXCELLENT	● ● ● GOOD	● ● ● FAIR	NOT APPLICABLE
Quality of Financial Management	WEAK FAIR GOOD EXCELLENT	• • FAIR	• • FAIR	NOT APPLICABLE

Based on our assessment for 2008/09, the quality of services provided by South Central Ambulance Service NHS Trust for its local population was 'weak'. The financial management rating for this organisation is 'good', as this organisation has been assessed as performing well and financial targets have been met for at least the past two years.

The trust was not one of those chosen to receive an inspection over the summer.

Components of quality of services:

	2008/09	2007/08	2006/07	2005/06
Meeting core standards	NOT PARTLY ALMOST FULLY MET MET	• • • FULLY MET	• • • FULLY MET	NOT APPLICABLE
Existing commitments	NOT PARTLY ALMOST FULLY MET	● ● ● ALMOST MET	PARTLY MET	NOT APPLICABLE
National priorities	WEAK FAIR GOOD EXCELLENT	EXCELLENT	EXCELLENT	NOT APPLICABLE

Overall performance of ambulance trusts

The graphs below show the percentage spread of results for all ambulance trusts for quality of services and quality of financial management, as well as for the three components of quality of services, over all four years. The performance of South Central Ambulance Service NHS Trust is indicated by +.



Standards performance

Every NHS trust in England is responsible for ensuring that it is complying with the Department of Health's core standards. As part of the performance assessment, we ask all trusts to assess their performance against the core standards and to publicly declare the information. The tables below present South Central Ambulance Service NHS Trust's performance in the seven key areas of health and healthcare over the last four years.

Safety	2008/09	2007/08	2006/07	2005/06
C01a - incidents - reporting and learning	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C01b - safety alerts	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C02 - safeguarding children	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C03 - NICE interventional procedures	COMPLIANT	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
C04a - infection control	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C04b - safe use of medical devices	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C04c - decontamination	COMPLIANT	NOT APPLICABLE	COMPLIANT	NOT APPLICABLE
C04d - medicines management	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C04e - clinical waste	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE

Clinical and cost effectiveness	2008/09	2007/08	2006/07	2005/06
C05a - NICE technology appraisals	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C05b - clinical supervision	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C05c - updating clinical skills	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C05d - clinical audit and review	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C06 - partnership	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE

Governance	2008/09	2007/08	2006/07	2005/06
C07a and c - governance	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C07b - honesty, probity	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C07e - discrimination	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C08a - whistle-blowing	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C08b - personal development	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C09 - records management	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C10a - employment checks	COMPLIANT	NOT MET	COMPLIANT	NOT APPLICABLE
C10b - professional codes of conduct	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C11a - recruitment and training	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C11b - mandatory training	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C11c - professional development	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C12 - research governance	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE

Patient focus	2008/09	2007/08	2006/07	2005/06
C13a - dignity and respect	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C13b - consent	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C13c - confidentiality of information	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C14a - complaints procedure	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C14b - complainants discrimination	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C14c - complaints response	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C15a - food provision	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
C15b - food needs	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
C16 - accessible information	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE

Accessible and responsive care	2008/09	2007/08	2006/07	2005/06
C17 - patient and public involvement	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C18 - equity, choice	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE

Care environment and amenities	2008/09	2007/08	2006/07	2005/06
C20a - safe, secure environment	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C20b - privacy and confidentiality	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C21 - clean, well designed environment	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE

Public health	2008/09	2007/08	2006/07	2005/06
C22a and c - public health partnerships	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C22b - local health needs	COMPLIANT	NOT APPLICABLE	COMPLIANT	NOT APPLICABLE
C23 - public health cycle	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE
C24 - emergency preparedness	COMPLIANT	COMPLIANT	COMPLIANT	NOT APPLICABLE

Key: OCOMPLIANT INSUFFICIENT ASSURANCE NOT MET NOT APPLICABLE

Existing commitments performance by indicator

Our existing commitments assessment looks at performance against long-standing targets that were mostly set during the Department of Health's 2003-2006 planning round. All NHS trusts should be meeting these commitments, which are mainly concerned with waiting times and access to services.

Performance against these indicators is detailed below.

Indicators	2008/09	2007/08	2006/07	2005/06
Category A calls (8 minute)	UNDER ACHIEVED	ACHIEVED	UNDER ACHIEVED	NOT APPLICABLE
Category A calls (19 minute)	UNDER ACHIEVED	ACHIEVED	ACHIEVED	NOT APPLICABLE
Category B calls (19 minute)	UNDER ACHIEVED	UNDER ACHIEVED	UNDER ACHIEVED	NOT APPLICABLE
Time to reperfusion	UNDER ACHIEVED	ACHIEVED	UNDER ACHIEVED	NOT APPLICABLE

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

Key: ACHIEVED UNDER ACHIEVED FAILED DATA NOT RETURNED DATA NOT AVAILABLE NOT APPLICABLE

National priorities performance by indicator

Our national priorities assessment looks at performance against priorities set during the Department of Health's 2008-2011 planning round. These include goals for the whole of the NHS, such as reducing health inequalities and improving the health of the population.

Performance against these indicators is detailed below.

Indicators	2008/09	2007/08	2006/07	2005/06
Experience of patients/users	ACHIEVED	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
Management of asthma	ACHIEVED	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
Management of stroke and TIA	FAILED	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
Management of AMI	● FAILED	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
Management of hypoglycaemia	ACHIEVED	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
Management of cardiac arrest	ACHIEVED	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
NHS staff satisfaction	ACHIEVED	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE

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



Glossary of terms:

Core standards

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

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

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

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

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

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

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

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

Existing commitments and national priorities

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

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

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

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

Excellent: This score means that a trust performed consistently well for the national priorities assessment.

Good: This score means that a trust performed well for many aspects of the national priorities assessment.

Fair: This score means that a trust performed poorly for some aspects of the national priorities assessment.

Weak: This score means that a trust generally performed poorly for the national priorities assessment.

Achieved: This score means that a trust performed to a high level for this performance indicator.

Underachieved: This score means that a trust performed below the required level for this performance indicator.

Failed: This score means that a trust performed poorly for this performance indicator.

Not applicable: This score means that this performance indicator did not apply to this trust.

Data not available: This score means that this performance indicator did apply to this trust, but the relevant data were not available. This was not the fault of the trust.

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

Indicator: This is what we use to measure performance.

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

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

Quality of services / Quality of commissioning assessment

Excellent: This score means that a trust received the highest score for all applicable assessments that contribute to the overall quality score.

Good: This score means that a trust received at least the second highest score for all applicable assessments that contribute to the overall quality score.

Fair: This score means that a trust performed adequately in terms of the overall quality score.

Weak: This score means that a trust performed poorly in terms of the overall quality score.

Quality of financial management assessment

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

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

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

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