

Performance Dashboard 2010/2011

Month 11

Reference	Indicator Description	Strategy	Secondary Objective	Key Driver 1	Key Driver 2	Does not meet goal	Meets Goal	Exceeds Goal	Sep 2010
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OBJECTIVE : SAFE, HIGH QUALITY CO-ORDINATED CARE - Mary Sexton and Rob Haigh

S1	MRSA BSI	Patient Safety	An Effective Organisation	Performance Framework	CQC Outcome 8	>0.5	0.5	<0.5	0
S2	Cdiff (Hospital acquired only) (Cumulative)	Patient Safety	An Effective Organisation	Performance Framework	CQC Outcome 8	>11.3	11.3	<11.3	5
S3	Hand hygiene compliance	Patient Safety	An Effective Organisation	CQC Outcome 8	PCT / Contract	<99%	99%	>99%	98.0%
S4	MRSA elective Screening compliance	Patient Safety	An Effective Organisation	CQC Outcome 8	PCT / Contract	<95%	95%	>95%	109.8%
S5 (pg.23)	% Patients reporting that before or after staff attended to them they saw the staff member wash their hands or apply alcohol gel (very often and always)	Patient Safety	An Effective Organisation	CQC Outcome 8	PCT / Contract	<80%	80%	>80%	77.2%
S6	HSMR all admissions	Clinical Effectiveness	An Effective Organisation	Internal Policy	PCT / Contract	>100	100	<100	81
S7	HSMR non-elective	Clinical Effectiveness	An Effective Organisation	Internal Policy	PCT / Contract	>100	100	<100	79
S8	HSMR Alerts (negative)	Clinical Effectiveness	An Effective Organisation	Internal Policy	SHA	>0	0	N/A	0
S9	Venous Thromboembolism (VTE) Risk Assessment Compliance	Clinical Effectiveness	An Effective Organisation	CQUIN (National)	Quality Account	<90%	90%	>90%	6.6%
S10	Enhancing Quality Programme Milestones achieved	Clinical Effectiveness	An Effective Organisation	CQUIN (National)	Quality Account	<100%	100%	N/A	100.0%
S11	Enhancing Quality Programme - percentage of eligible patients data entered	Clinical Effectiveness	An Effective Organisation	CQUIN (National)	Quality Account	<95%	95%	>95%	90.0%
S12	Participation in applicable national clinical audit	Clinical Effectiveness	Better Information, More Choice	Quality Account	Internal Policy	<100%	100%	N/A	100.0%
S13	Participation in applicable national confidential enquiries	Clinical Effectiveness	Better Information, More Choice	Quality Account	Internal Policy	<100%	100%	N/A	100.0%
S14	NICE - Full Compliance with all applicable clinical guidelines	Clinical Effectiveness	Safe, High quality co-ordinated care	CQC outcome 4	PCT / Contract	<99%	99%	N/A	78.5%
S15	NICE - Full Compliance with all applicable Interventional Procedures	Clinical Effectiveness	Safe, High quality co-ordinated care	CQC Outcome 4	PCT / Contract	<99%	99%	N/A	90.0%
S16	NICE - Full Compliance with all applicable Technical Appraisals	Clinical Effectiveness	Safe, High quality co-ordinated care	CQC Outcome 4	PCT / Contract	<99%	99%	N/A	95.0%
S17 (pg.15)	Stroke - 90% or more of time spend time on stroke unit	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<80%	80%	>80%	63.0%
S18(pg.15)	Stroke/TIA - High risk TIA treated within 24 hours	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<60%	60%	>60%	64.3%
S20 (pg.17)	Hip fracture repaired in < 36 hours (%)	Clinical Effectiveness	Shorter Waiting Times	SHA	PCT / Contract	<73%	73%	>73%	32.0%
S21	Unplanned readmissions within 14 days as % of admissions	Clinical Effectiveness	An Effective Organisation	PCT / Contract	DH Policy	>4.1%	2.8%	<4.1%	2.1%
S22	C-Section rates	Clinical Effectiveness	An Effective Organisation	PCT / Contract	SHA	>26.5%	26.5%	<26.5%	29.4%
S23	Breast Feeding Initiation Note: This indicator is comparing performance to last year out-turn	Clinical Effectiveness	An Effective Organisation	CQC Periodic Review	SHA	<100%	100%	>100%	99.2%
S24	Reduction in smoking during pregnancy (at delivery) Note: This indicator is comparing performance to last year out-turn	Clinical Effectiveness	An Effective Organisation	CQC Periodic Review	SHA	>100%	100%	<100%	99.2%
S25	% of women seen a midwife or h'care prof. by < 12wks, 6days	Clinical Effectiveness	Shorter Waiting Times	PCT / Contract	SHA	<85%	85%	>85%	90.2%

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S26	Thrombolysis Door to Needle time < 30 mins	Clinical Effectiveness	Easier Access and Shorter Waiting Times	PCT / Contract	Quality Account	<75%	75%	>75%	100.0%
S27	Thrombolysis Call to Needle time < 60 mins	Clinical Effectiveness	Shorter Waiting Times	PCT / Contract	Quality Account	<68%	68%	>68%	100.0%
S28	Call to Balloon within 150 minutes	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<100%	100%	>100%	100.0%
S29	Patients receiving aspirin / statin / beta blocker to prevent AMI	Clinical Effectiveness	An Effective Organisation	Quality Account		<80%	80%	>80%	93.4%
S30	Patients receiving clopidogrel as a preventative treatment*	Clinical Effectiveness	An Effective Organisation	Quality Account		N/A	N/A	N/A	97.0%
S31(pg.16)	Cancer - TWR	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<93%	93%	>93%	92.0%
S32	Cancer - 31 Day second or subsequent treatment (surgery)	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<94%	94%	>94%	97.0%
S33	Cancer - 31 Day second or subsequent treatment (drug)	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<98%	98%	>98%	100.0%
S34	Cancer - 31 Day diagnosis to treatment	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<96%	96%	>96%	100.0%
S35	Cancer - 62 Day referral to treatment from screening	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<90%	90%	>90%	50.0%
S36	Cancer - 62 Day referral to treatment (Upgrade)	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<90%	90%	>90%	100.0%
S37	Cancer - 62 Day Urgent Referral	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<85%	85%	>85%	91.2%
S38 (pg.16)	Cancer - Breast Symptom Two Week Wait	Clinical Effectiveness	Shorter Waiting Times	Performance Framework	PCT / Contract	<93%	93%	>93%	84.3%
S39	RIDDOR reported to HSE	Risk Management	An Effective Organisation	HSE	CQC Outcome	N/A	N/A	N/A	1
S40	RIDDOR Incidents reported to HSE within 10 days	Environmental Safety	Safe, High Quality Coordinated Care	HSE	NHSLA	50%	50-70%	70%	100.0%
S41	SUIs due to be closed in month	Risk Management	An Effective Organisation	SHA	PCT / Contract	>2	2	<2	0
S42	% Complaints responded within timeline agreed with complainant / 25 working days	Patient Experience	An Effective Organisation	CQC Outcome 17	PCT / Contract	80%	80-90%	90%	94.4%
S43 (pg.18)	Pressure ulcers (Hospital acquired Grade 2+)	Patient Experience	An Effective Organisation	PCT / Contract	SHA	>10.3	10.3	<10.3	14
S46	Number of Falls reported as clinical incidents	Patient Experience	Safe, High quality co-ordinated care	CQC Outcomes	PCT / Contract	>73	73	<73	54.0
S47	Number of falls resulting in a fracture / head injury	Patient Experience	Safe, High quality co-ordinated care	CQC Outcomes	HSE	>0	0	N/A	1.0
S48	Number of Medication Errors reported as clinical incidents resulting in an adverse event	Patient Experience	Safe, High quality co-ordinated care	CQC Outcomes	PCT / Contract	>0	0	N/A	0.0
S50	Number of Never Events reported	Patient Safety	Safe, High quality co-ordinated care	CQC Outcomes	PCT / Contract	>0	0	N/A	0
S51	Statutory Induction H&S training for all new staff	Environmental Safety	An Effective Organisation	HSE	NHSLA	<85%	85-95%	>95%	56%
S52	3 Yearly Refresher H&S training for all existing staff - 86 staff to be trained each month	Environmental Safety	An Effective Organisation	HSE	NHSLA	<85%	85-95%	>95%	100.09%
S55	Workplace injury rates compared to incidents reported	Environmental Safety	An Effective Organisation	HSE	NHSLA	>70%	50-70%	<50%	66%

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S57	Manual handling equipment maintained and LOLER tested in year					<100%	100%	N/A	80%
Better Information, More Choice - Ian Mackenzie									
B1	Inpatient CDS score (IG Toolkit Req 507)	Patient Safety	An Effective Organisation	IG Toolkit	Quality Account	<9.0	9.0	>9.0	9.4
B2	Outpatient CDS Score (IG Toolkit Req 507)	Patient Safety	An Effective Organisation	IG Toolkit	Quality Account	<9.0	9.0	>9.0	8.8
B4	% Maternity HES Tail incomplete	Patient Safety	An Effective Organisation	Periodic Review		>15%	15%	<15%	9.3%
B5	% NHS Numbers verified - Inpatient episodes	Patient Safety	An Effective Organisation	IG Toolkit	Quality Account	<95%	95%	N/A	98.1%
B6	% NHS Number verified - Outpatient attendances	Patient Safety	An Effective Organisation	IG Toolkit	Quality Account	<95%	95%	N/A	99.3%
B9	% Patients surveyed that reported they were given enough opportunity to ask questions about their treatment	Patient Experience	Engaging with our Community	CQC Outcome	PCT / Contract	<80%	80%	>80%	67.1%
OBJECTIVE : EASIER ACCESS SHORTER WAITING TIMES - Bernie Bluhm									
E1(pg13)	A&E Waits - Type 1, 2 and 3	Clinical Effectiveness	Safe, High Quality Coordinated Care	Performance Framework	PCT / Contract	<95%	95%	>95%	93.0%
E4	2 Weeks RACP	Clinical Effectiveness	Safe, High Quality Coordinated Care	Performance Framework	PCT / Contract	<100%	100%	N/A	100.0%
E5	Delayed Transfers as a % of Admitted Patients	Clinical Effectiveness	Safe, High Quality Coordinated Care	Performance Framework	PCT / Contract	>3.5%	3.5%	<3.5%	1.2%
E6	Cancelled Operations as a % of Elective admissions	Patient Experience	Safe, High Quality Coordinated Care	Performance Framework	PCT / Contract	>0.8%	0.8%	<0.8%	1.0%
E7	% Cancelled Operations not treated within 28 days	Patient Experience	Safe, High Quality Coordinated Care	Performance Framework	PCT / Contract	>5%	5%	<5%	9.5%
E8(pg.14)	18 Weeks - Admitted	Patient Experience	Safe, High Quality Coordinated Care	NHS Constitution	PCT / Contract	<90%	90.0%	>90%	92.0%
E9	18 Weeks - Admitted Median Waits (in weeks)					>11.1	11.1	<10	12
E10 (pg.14)	18 Weeks - Admitted 95th Percentile (in weeks)					>27.7	27.7	<26	23.0
E11	18 Weeks - Non Admitted	Patient Experience	Safe, High Quality Coordinated Care	NHS Constitution	PCT / Contract	<95%	95.0%	>95%	97.1%
E12	18 Weeks - Non Admitted Median Waits (in weeks)					>6.6	6.6	<5	5
E13	18 Weeks - Non - Admitted 95th Percentile (in weeks)					>18.3	18.3	<17	15.0
E14	Intended admitted Pathways: Pts > 18 weeks with no clock stop	Patient Experience	Safe, High Quality Coordinated Care	NHS Constitution	PCT / Contract	N/A	N/A	N/A	437
E15	18 Weeks No. of Failing Specialties - Admit	Patient Experience	Safe, High Quality Coordinated Care	NHS Constitution	PCT / Contract	>1	0	N/A	3
E16	18 Weeks No. of Failing Specialties - Non-Admit	Patient Experience	Safe, High Quality Coordinated Care	NHS Constitution	PCT / Contract	>1	0	N/A	5
OBJECTIVE: REVITALISING OUR ENVIRONMENT - Ian Mackenzie									
R1	Cleaning audit compliance - very high risk areas	Patient Safety	Safe, High Quality Coordinated Care	CQC Outcome 8	NPSA	<98%	98%	>98%	97.0%
R2	Cleaning audit compliance high risk areas	Patient Safety	Safe, High Quality Coordinated Care	CQC Outcome 8	NPSA	<95%	95%	>95%	97.0%

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R4	Reported Mixed sex breaches	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	>0	0	N/A	4
R5(pg.23)	% Patients rating the cleanliness of their room / ward as good or excellent	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	<80%	80%	>80%	86.7%
R6 (pg.23)	% Patients surveyed that were given enough privacy when being examined, treated or spoken with about confidential information (ALWAYS)	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	<80%	80%	>80%	75.3%
R7(pg.23)	% Patients surveyed who reported that they shared a sleeping area with patients of the opposite sex	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	>0	0%	N/A	8.9%
R8 (pg.23)	% Patients surveyed reporting that they shared a bathroom or toilet with a patient of the opposite sex	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	>0	0%	N/A	8.0%
R9 (pg.23)	% Patients surveyed that felt their dignity was maintained the whole time they were a patient (ALWAYS)	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	<80%	80%	>80%	76.6%

OBJECTIVE: ENGAGING WITH OUR COMMUNITY - Ian Mackenzie

EC1 (pg.23)	% of patients surveyed rating quality of food as good or excellent	Patient Experience	Safe, High Quality Coordinated Care	CQUIN (National)	Quality Account	<80%	80%	>80%	52.7%
EC2 (pg.23)	% of patients surveyed reporting they were always offered a choice of food	Patient Experience	Safe, High Quality Coordinated Care	CQUIN (National)	Quality Account	83%	83-89%	89%	63.2%
EC3	Ethnic Group coding	Patient Experience	Better Information, More Choice	Periodic Review	PCT / Contract	<85%	85%	>85%	87.9%
EC4 (pg.23)	% Patients surveyed reporting that staff treated them with kindness and respect (ALWAYS)	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	<80%	80%	>80%	62.0%
EC5 (pg.23)	% Patients surveyed who would choose to be treated at SASH in the future	Patient Experience	Safe, High Quality Coordinated Care	CQC Outcome	PCT / Contract	<80%	80%	>80%	65.2%

OBJECTIVE: AN EFFECTIVE ORGANISATION - Paul Simpson and Yvonne Parker

EO1	Financial Position (£,000)	?	An Effective Organisation			<£1,925	£4,800	>£1,925	£185
EO2	Delivery of Savings Plan	?	An Effective Organisation			<£3,895	£12,000	>£3,895	£227
EO3 (pg.11)	Total Establishment		An Effective Organisation			N/A	N/A	N/A	3073
EO4	Total in post		An Effective Organisation			N/A	2766	N/A	2697
EO5	Vacancy rate		An Effective Organisation			>10%	10%	<8%	12.2%
EO6	Total WTE agency excluding extra capacity nursing		An Effective Organisation			>40	40	<30	63
EO7	Total WTE bank excluding extra capacity nursing		An Effective Organisation			>210	210	<200	267
EO8	WTE extra capacity bank and agency (nursing)		An Effective Organisation			N/A	N/A	N/A	8
EO9	Total WTE locum		An Effective Organisation			>10	10	<8	18
EO10	Total WTE starters		An Effective Organisation			N/A	N/A	N/A	35.6
EO11	Total WTE leavers		An Effective Organisation			N/A	N/A	N/A	19.3
EO12	Sickness (First care data)		An Effective Organisation			>3.0%	3.0%	<2.5%	3.6%
EO13	Overtime WTE		An Effective Organisation			>12.0	12.0	<10	17

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EO16	Non GP/GDP referrals		An Effective Organisation		PCT/Contract	>38%	38%	<38%	25.5%
EO17	Ratio of Non-Elective short stay admissions		An Effective Organisation			<54.1%	54.1%	>54.1%	50.4%
EO18	Daycase Rate Healthcare Commission 25 (Dr Foster Intelligence)		An Effective Organisation		PCT/Contract	<84%	84%	>84%	76.6%
EO19	Excess Follow ups		An Effective Organisation		PCT/Contract	N/A	N/A	N/A	991
EO20	% Pre op beddays per Elective FFCE		An Effective Organisation		PCT/Contract	>2.2%	2.2%	<2.2%	4.1%

Oct 2010	Nov 2010	Dec 2010	Jan 2011	Feb 2011	YTD 2010/11
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0	1	0	0	1	4
7	8	4	5	5	62
99.0%	98.5%	98.5%	99.1%	99.2%	N/A
Data reported Quarterly		106.5%	Data reported Quarterly		N/A
76.0%	85.3%	84.0%	72.0%	72.0%	N/A
83.8	94	93	Data reported in arrears	Data reported in arrears	85%
95.7	94	95	Data reported in arrears	Data reported in arrears	85%
1	0	1	Data reported in arrears	Data reported in arrears	3
12.3%	15.6%	38.6%	40.2%	38.5%	N/A
100.0%	100.0%	100.0%	Data reported in arrear	100.0%	N/A
90.0%	90.0%	Data reported in arrears	Data reported in arrears	85.0%	N/A
100.0%	100.0%	100.0%	100.0%	95.0%	100.0%
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
92.5%	92.5%	92.5%	97.0%	92.5%	92.5%
99.0%	99.0%	99.0%	88.0%	99.0%	99.0%
99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
65.0%	40.0%	58.5%	55.9%	48.0%	63.6%
81.8%	70.0%	62.5%	77.8%	40.0%	65.3%
57.1%	62.0%	60.3%	59.0%	70.0%	43.9%
2.2%	2.1%	2.1%	2.0%	2.4%	2.4%
29.2%	28.5%	29.6%	28.8%	29.7%	28.8%
102.2%	79.4%	97.9%	101.3%	99.0%	98.6%
45.6%	161.3%	85.9%	107.6%	106.4%	94.4%
89.6%	91.8%	87.4%	85.9%	89.5%	88.6%

Oct 2010	Nov 2010	Dec 2010	Jan 2011	Feb 2011	YTD 2010/11
100.0%	100.0%	75.0%	83.3%	Data reported a month in arrears	82.1%
100.0%	100.0%	100.0%	75.0%	Data reported a month in arrears	84.2%
70.0%	85.7%	100.0%	Data Reported a month in	Data Reported a month in	90.0%
93.5%	95.6%	96.1%	93.0%	Data reported a month in arrears	97.8%
96.0%	97.0%	96.0%	90.0%	Data reported a month in	97.5%
93.1%	92.7%	87.1%	93.9%	96.9%	92.1%
100.0%	100.0%	100.0%	100.0%	95.0%	97.2%
100.0%	100.0%	100.0%	100.0%	100.0%	99.6%
100.0%	98.8%	96.1%	97.3%	98.8%	98.7%
100.0%	75.0%	0.0%	0.0%	100.0%	82.8%
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
89.8%	89.4%	87.2%	89.5%	89.6%	88.6%
86.6%	93.0%	95.7%	93.8%	93.8%	89.6%
1	7	4	3	7	N/A
100.0%	28.0%	50.0%	33.0%	57.0%	N/A
2	3	0	0	0	17
96.9%	93.1%	93.1%	65.5%	78.3%	88.2%
31	22	13	15	12	180
57	57	46	32	42	N/A
3	0	1	1	0	N/A
7	12	0	3	1	N/A
0	1	0	0	0	1
40.0%	85%	0.0%	44%	62%	N/A
115.0%	87%	20.0%	114.0%	124%	N/A
73%	50%	33.0%	38.0%	44%	N/A

Oct 2010	Nov 2010	Dec 2010	Jan 2011	Feb 2011	YTD 2010/11
75%	75%	65%	65%	65%	N/A
9.4	9.4	9.4	9.2	8.2	9.2
8.8	8.8	8.8	9.2	8.8	8.8
9.4%	9.6%	10.3%	10.2%	15.4%	9.6%
97.7%	98.0%	97.8%	97.6%	92.9%	96.6%
99.3%	99.1%	99.3%	98.6%	96.6%	98.5%
74.9%	86.0%	82.9%	76.0%	83.0%	N/A
93.7%	91.2%	84.7%	82.4%	82.0%	91.5%
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
1.0%	1.1%	1.6%	1.7%	2.8%	1.5%
2.4%			1.4%		1.4%
2.2%			3.0%		4.9%
90.4%	87.9%	85.1%	81.0%	74.9%	85.3%
13	12	11	13	14	13
24.0	25.0	26.0	30.0	32.0	N/A
96.5%	95.4%	96.3%	95.4%	92.1%	96.3%
5	5	5	6	4	5
16.0	18.0	15.7	18.0	20.0	N/A
517	609	835	1029	1097	1097
2	2	4	8	9	5
6	6	5	8	10	3
98.0%	98.0%	97.0%	98.0%	98.0%	N/A
98.0%	98.0%	98.0%	98.0%	99.0%	N/A

Oct 2010	Nov 2010	Dec 2010	Jan 2011	Feb 2011	YTD 2010/11
18	5	6	6	0	N/A
89.6%	79.0%	85.9%	84.0%	78.0%	N/A
85.3%	89.0%	87.3%	85.0%	76.0%	N/A
10.5%	10.0%	10.1%	14.0%	10.0%	N/A
7.7%	8.9%	8.9%	12.0%	16.0%	N/A
89.0%	81.0%	81.0%	83.0%	80.0%	N/A
54.5%	58.9%	53.8%	61.0%	47.0%	N/A
64.6%	57.8%	74.0%	61.0%	62.0%	N/A
86.9%	88.2%	88.3%	87.3%	86.8%	86.9%
74.4%	87.7%	72.2%	78.0%	72.0%	N/A
66.7%	85.8%	63.5%	92.0%	77.0%	N/A
-£66	£246	£215	£181	-£494	-£1,460
£427	£398	£771	£193	£338	£3,503
3133	3139	3140	3136	3137	3136
2751	2792	2787	2799	2825	2799
12.2%	11.1%	11.2%	10.8%	9.9%	10.8%
61	62	58	63	57	67
253	240	198	246	232	260
18	31	36	53	49	N/A
16	13	7	17	12	18
66.2	37.2	8.3	28.0	25.1	N/A
25.1	11.8	14.2	19.2	16.8	N/A
4.0%	4.2%	4.9%	4.2%	4.4%	3.9%
13	14	12	12	12	15

Oct 2010	Nov 2010	Dec 2010	Jan 2011	Feb 2011	YTD 2010/11
26.4%	26.4%	26.7%	26.6%	25.6%	25.9%
51.1%	51.9%	49.3%	50.9%	51.7%	52.1%
73.7%	78.8%	77.7%	Not avail	Not avail	76.0%
858	1024	576	1005	1037	8545
2.9%	1.4%	2.1%	3.5%	3.7%	2.6%