

# Trust Board Performance Report May 2023

Prepared and issued by Strategic Planning, Performance & ICT 21 June 2023

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# **Executive Summary**



#### **Elective Care**

The Department of Health (DoH) set activity trajectories for a number of services from July 2022 to March 2023 in order to monitor a return to prepandemic levels of activity. This monthly submission is called the Service Delivery Plan (SDP). For 2023/24 new trajectories are being established and will be reported on in July 2023 to cover performance for the first quarter of 23/24.

Outpatient referrals in May were comparable to May 2022 and new Outpatient attendances narrowly missed the indicative trajectories set by DOH for May 2023 with 6033 appointments provided.

#### **Waiting Times**

Only 21% of Outpatients waiting on an appointment are waiting less than 9 weeks however Outpatient 52 week waits continued to improve at the end of May with 20,975 patients waiting over a year at the end of May, out of a total of 54,598 patients waiting. This marks 13 months of consecutive improvement in the number of patients waiting 52 weeks to be seen.

The number of patients waiting longer than 52 weeks for an inpatient or daycase procedure has been reducing since February 2022 to 3,174 out of a total of 7,831 patients waiting at the end of May.

Diagnostic capacity continues to be a challenge with 43% of patients waiting more than 9 weeks for a diagnostic appointment at the end of May. There are 4,936 patients waiting longer than 26 weeks for a diagnostic appointment.

The Endoscopy waiting list position at the end of May decreased slightly to 54% of patients waiting less than 9 weeks when compared to April's performance. A sustained improvement on previous months continues of patients waiting over 26 weeks. There were 886 patients waiting over 26 weeks out of a total of 3,109 at the end of May.

During May the AHP waiting list position deteriorated to 10,312 patients waiting over 13 weeks to be seen by an Allied Health Professional from 9,490 waiting over 13 weeks at the end of April. The total number of patients waiting at the end of May was 21,475.

# **Executive Summary**



#### **Cancer Care**

2,236 Primary care red flag referrals were received in May 2023, which is a 3% increase on May 2022.

Breast cancer 14-day performance during May improved to 98% from 93% during April. Some additional funding has been confirmed from the Department of Health and support from other Trusts is underway in recognition of the capacity gap in NHSCT Breast Surgery service.

Performance against the 31-day target during May improved to 97% of patients treated within 31 days of a decision to start cancer treatment. Performance against the 62-day target in May also improved to 58% from 52% in April. Delays in access to red flag outpatient appointments, endoscopy and diagnostics continue to be a contributing factor to performance against the 62-day target.

#### **Unscheduled Care**

ED attendances during May at both Antrim and Causeway increased when compared to April 2023 and also showed an increase of 7% and 14% respectively against May 2022. From January the reporting of Ambulance Turnaround times changed to Patient Handover Times. This change allows more accurate monitoring of the time taken for the patient to be formally handed over to the ED from the ambulance service. Patient handover within one hour during May at Antrim improved to 88% with Causeway performance remaining similar to the three previous months at 66%.

In May, triage to treatment time at Antrim was 45% against a target of 80%. Causeway achieved 65% against the same target. 4-hour ED performance is monitored against a target of 95% and during May, Antrim performance remained the same as April with 44%. Causeway 4-hour performance improved slightly during May with 57%. The number of 12-hour waits continues to be a challenge on both sites. In Antrim there were 1420 patients waiting longer than 12 hours and in Causeway hospital there were 443 during May.

Complex discharges within 48 hours in Antrim deteriorated for the fourth consecutive month to 59%, against a target of 90%. Non-complex discharge performance within 6 hours remained similar to April with 92% against a target of 100%. Complex discharge performance at Causeway site decreased to 54% discharged within 48 hours during May. Causeway performance in non-complex discharges remained similar to April's position with 91% during May.

During May, both Antrim (12%) and Causeway (5%) did not achieve the stroke thrombolysis standard of 16%.

# **Executive Summary**



#### Mental Health and Learning Disability

Mental Health 7 day and 28 day discharge figures are under review with a data validation exercise underway and have not been included in the report this month.

As at the end of May 2023, 32 patients were waiting more than 9 weeks for access to adult Mental Health services, which is an improvement month on month since November 2022. Dementia assessment performance improved this month and at the end of May 80 patients were waiting over 9 weeks. Waiting times for Psychological Therapies remained similar to April's position with 539 patients waiting longer than 13 weeks for access to services at the end of May 2023.

#### **Children's Services**

The number of patients waiting over 9 weeks for CAMHS assessment at the end of May was 634, out of a total of 904 patients waiting. The number of patients waiting over 9 weeks last year at the end of May 2022 was 490.

#### **Community Care**

Quarter 4 direct payments position for 2022/23 shows 95% of the target has been delivered by the Trust. Carers' assessment has achieved 85% of the target in Q4 of 2022/23. Short breaks has achieved 102% of the target in Q4 of 2022/23.

#### **HCAIs**

During the first two months of 2023/24 there have been 7 CDiff cases which is below the Trust profile of 8.2 cases. 2 MRSA episodes were recorded for April to May. There have been 10 gram negative infections recorded during the first two months of 2023/24 which is below the target profile of 12.5 cases for the year to date.

#### Workforce

Trust absence improved in March 2023 to 7.94% from 9.82% in January. From 1<sup>st</sup> October 2022, Covid-19 absence is being managed in line with the Managing Attendance Protocol and Procedure.

# **Performance Summary Dashboard (i)**



Ass/var

May 2023

Section	Indicator	Perf.	Ass/var	Section	Indicator		Perf.
Elective Care OP 9	OP 9-week waits	21%	F (s/s)	Cancer care	14-day breast		98%
	OP 52-week waits	20,975			31-day		97%
	OP Cancellations	689	? («/h»)		62-day		58%
	IPDC 13-week waits	29%	<b>F</b>	Unscheduled care	Triage to treatment	ANT CAU	45% 65%
	IPDC 52-week waits	3,174	<b>F</b>		4-hour performance	ANT CAU	44% 57%
	Diagnostic 9-week 57%	12-hour waits	ANT CAU	1420 443			
	Diagnostic 26-week	4,936			Complex discharges	ANT CAU	59% 54%
	DRTT (urgent)	82%	F. (%)		Non-complex discharges	ANT CAU	92% 91%
	Diagnostic Endoscopy 9-week	54%	F H		Stroke Thrombolysis	ANT CAU	12% 5%
	Diagnostic Endoscopy 26-week	886		Mental Health and learning disability	Adult 9-week waits		32
	AHP 13-week wait	10,312			Adult 7-day discharges		

# Performance Summary Dashboard (ii)



Indicator		Perf.	Ass/var
Adult 28-day discharges			
Dementia 9-week waits		80	F after
Psychological therapies 13-week		539	
Learning disability 7-day discharges		100%	(a) (a) (b)
Learning disability 28-day discharges		0	P (A)
CAHMS 9-week waits		634	F H
Placement change		88% (Sep21)	
Adoption		36% (Mar22)	F (A)
		3	
MRSA		1	
Gram -ve		4	
Complaints replied to within 20 days		39%	F (A)
Absence rate		7.94	F (A)
	Adult 28-day discharges  Dementia 9-week waits  Psychological therapies 13-week  Learning disability 7-day discharges  Learning disability 28-day discharges  CAHMS 9-week waits  Placement change  Adoption  CDiff  MRSA  Gram -ve  Complaints replied to within 20 days	Adult 28-day discharges  Dementia 9-week waits  Psychological therapies 13-week  Learning disability 7-day discharges  Learning disability 28-day discharges  CAHMS 9-week waits  Placement change  Adoption  CDiff  MRSA  Gram -ve  Complaints replied to within 20 days	Adult 28-day discharges  Dementia 9-week waits  Psychological therapies 13-week  Learning disability 7-day discharges  Learning disability 28-day discharges  CAHMS 9-week waits  Placement change 88% (Sep21)  Adoption 36% (Mar22)  CDiff 3  MRSA 1  Gram -ve 4  Complaints replied to within 20 days

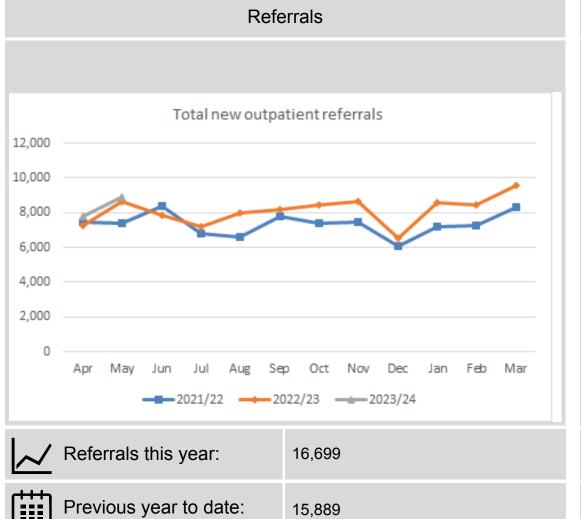
## Icon Key:

Assurance			Variation			
?	P	F	<b>○</b> \$••	H. (1)	H-> (1-)	
Randomly achieves target	Consistently (P)assing the target	Consistently (F)alling short of the target	Common cause	Special cause of concerning variation	Special cause of improving variation	

% Change:

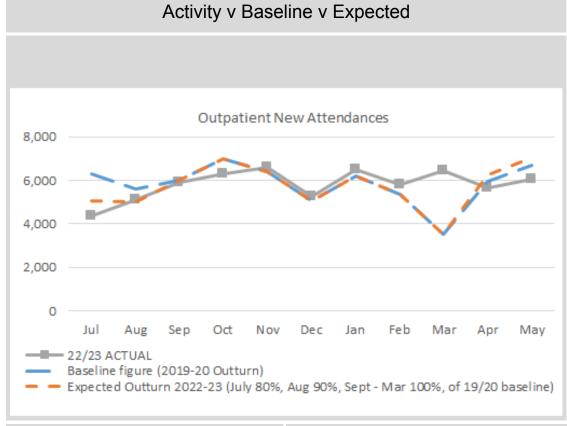
## Outpatients





15,889

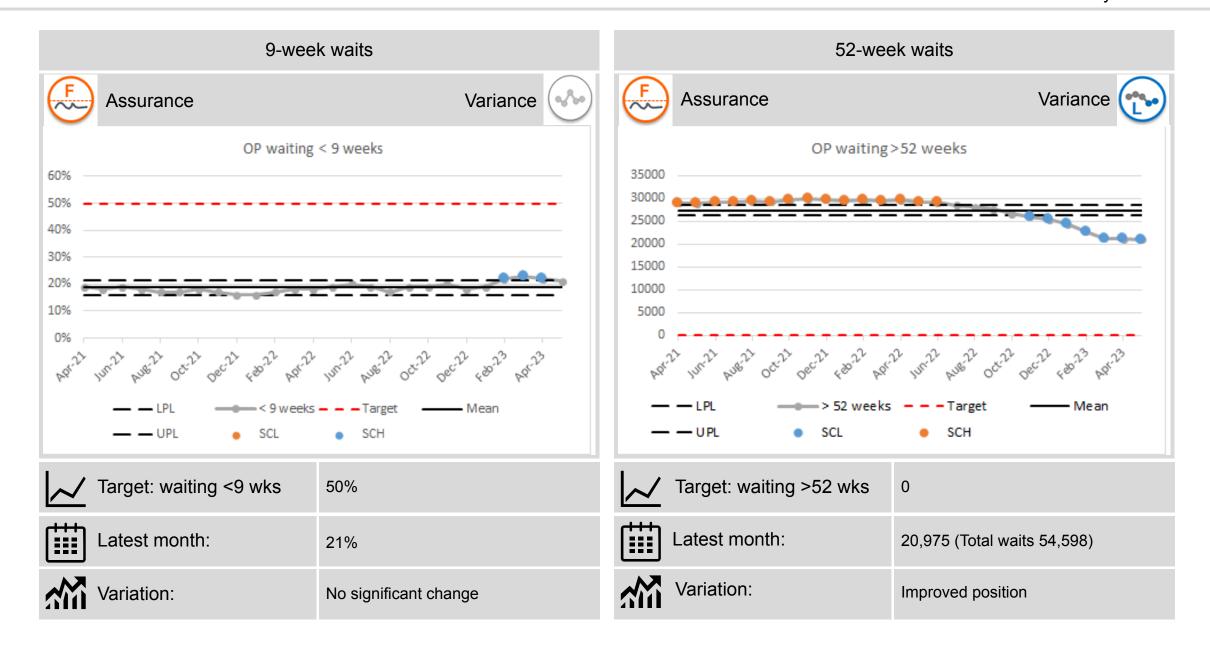
5%



Activity this fiscal year:	63,982 (July22 - May23)
Expected Outturn to date this year:	62,921 (July22 - May23)
% delivery to date:	102%

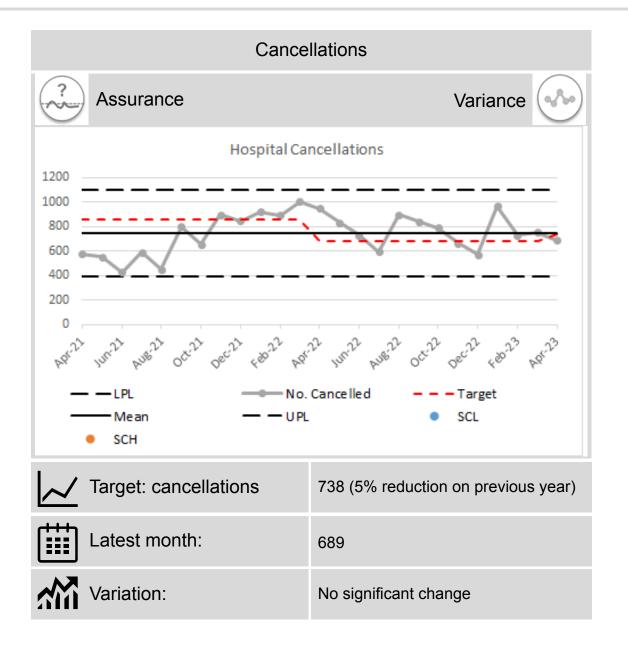
### Outpatients





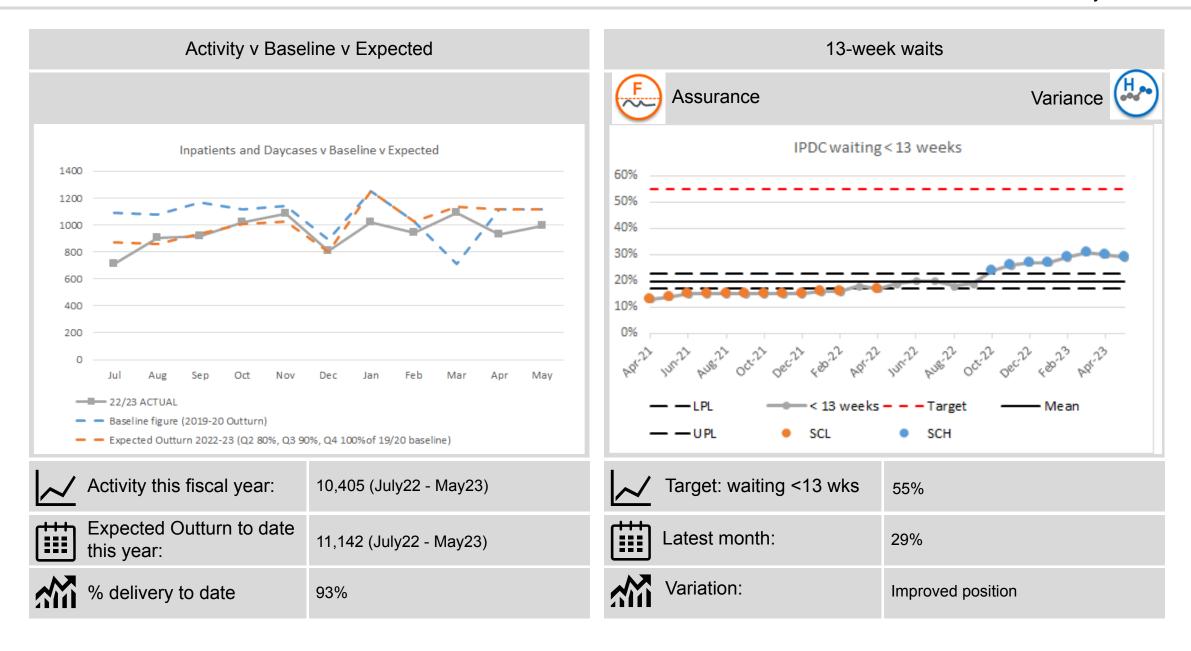
## Outpatients





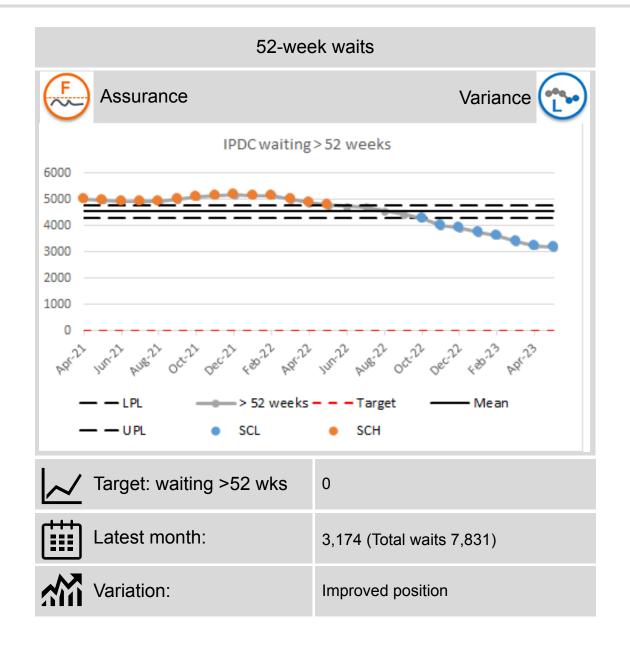
### Inpatients and Daycases





## Inpatients and Daycases





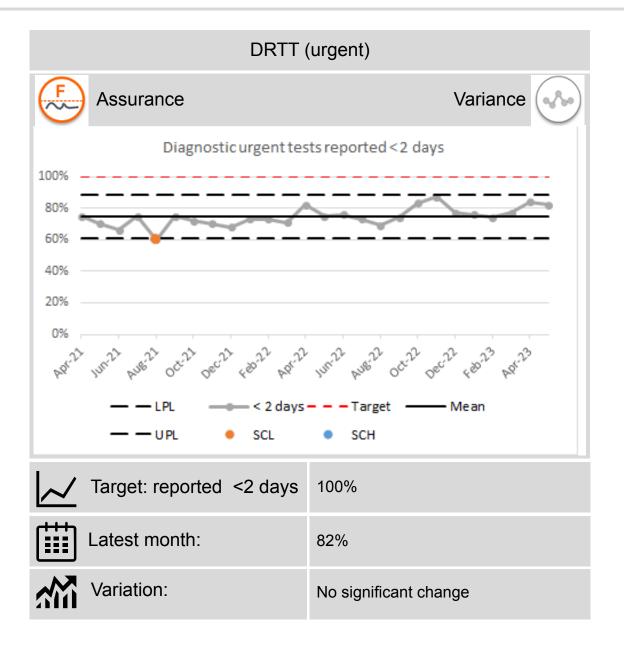
### Diagnostics





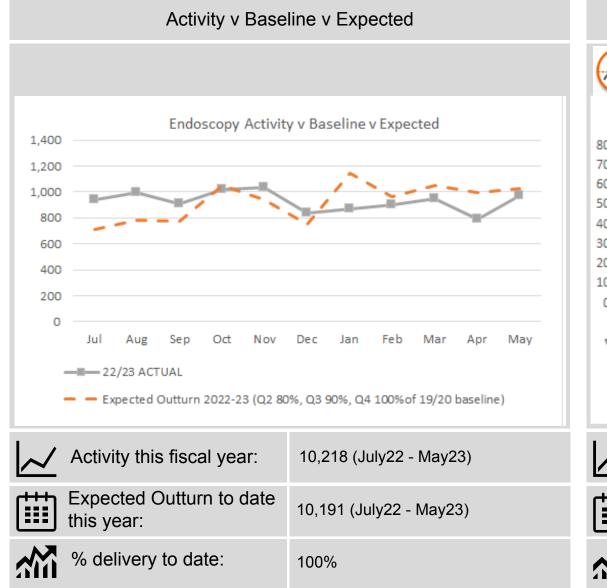
## Diagnostics

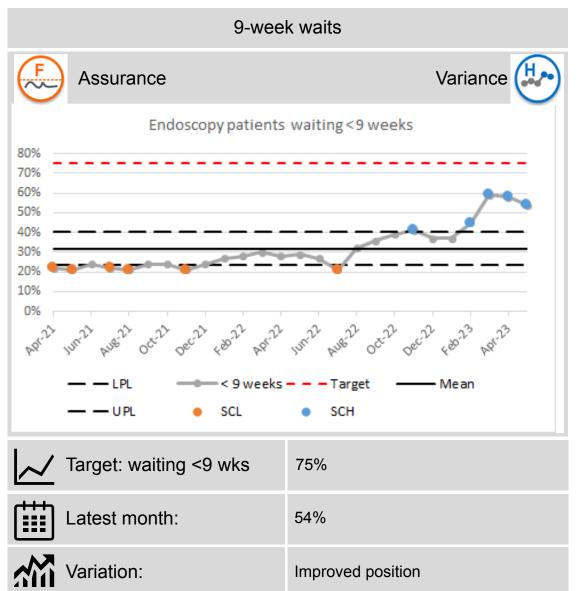




### Diagnostics - Endoscopy

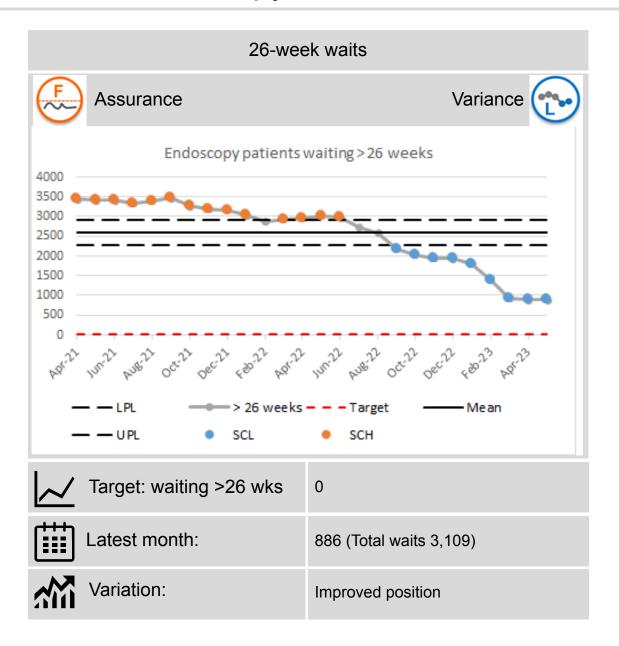






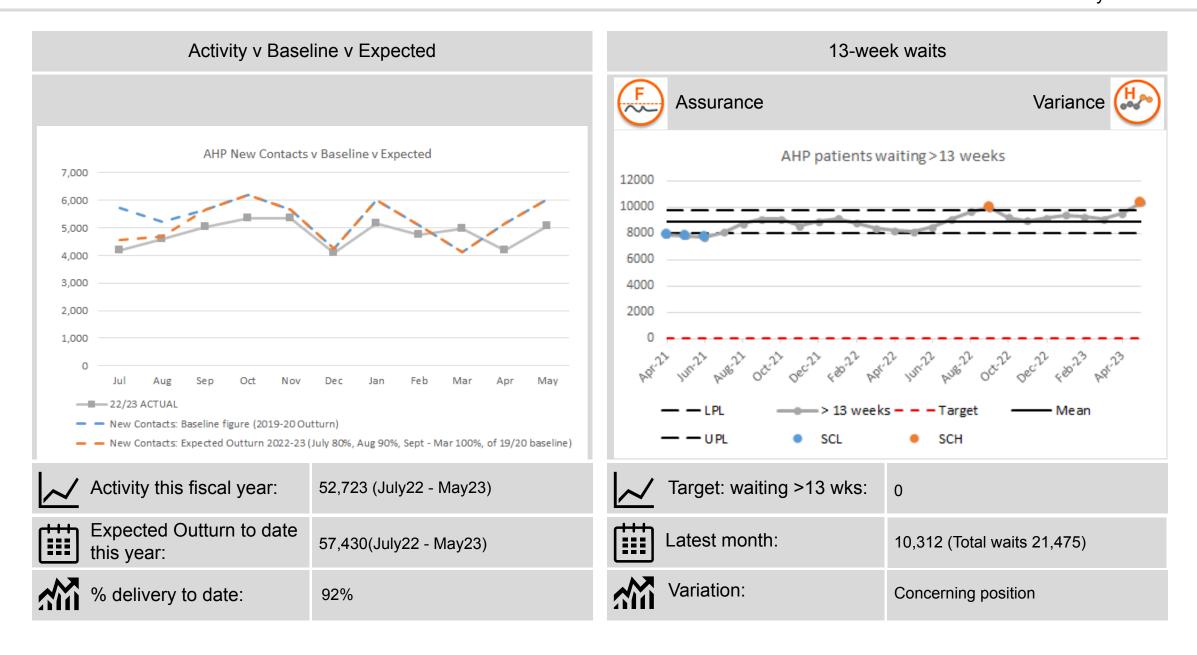
### Diagnostics - Endoscopy





#### **AHPs**

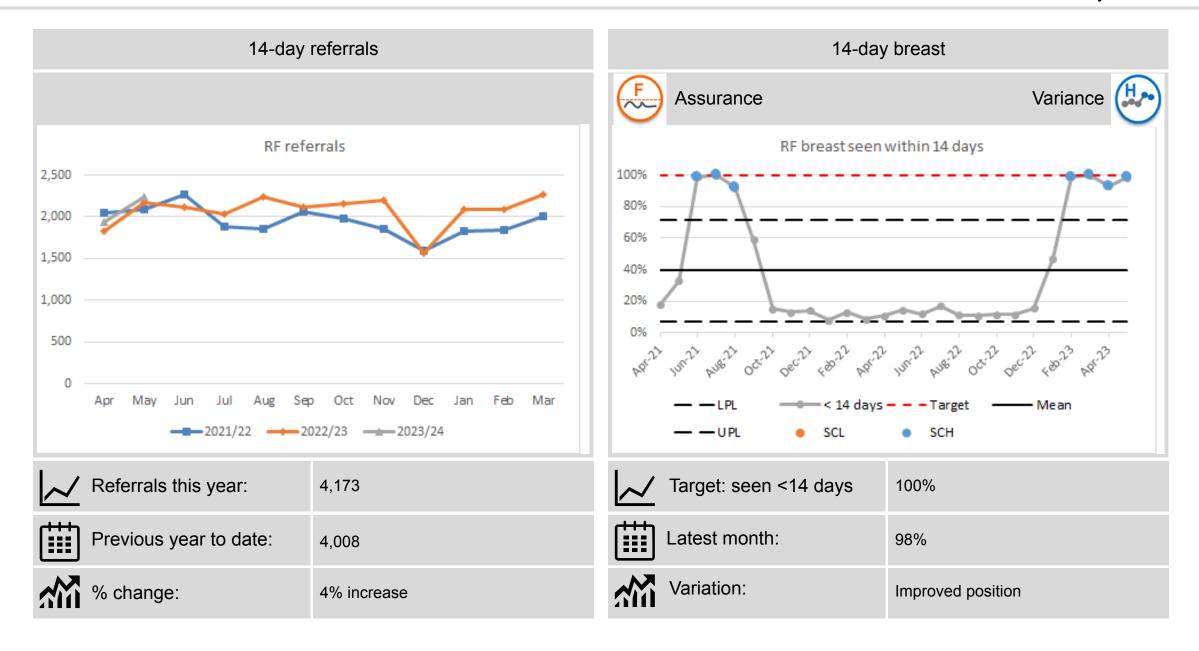




## **Cancer Care**

14-day

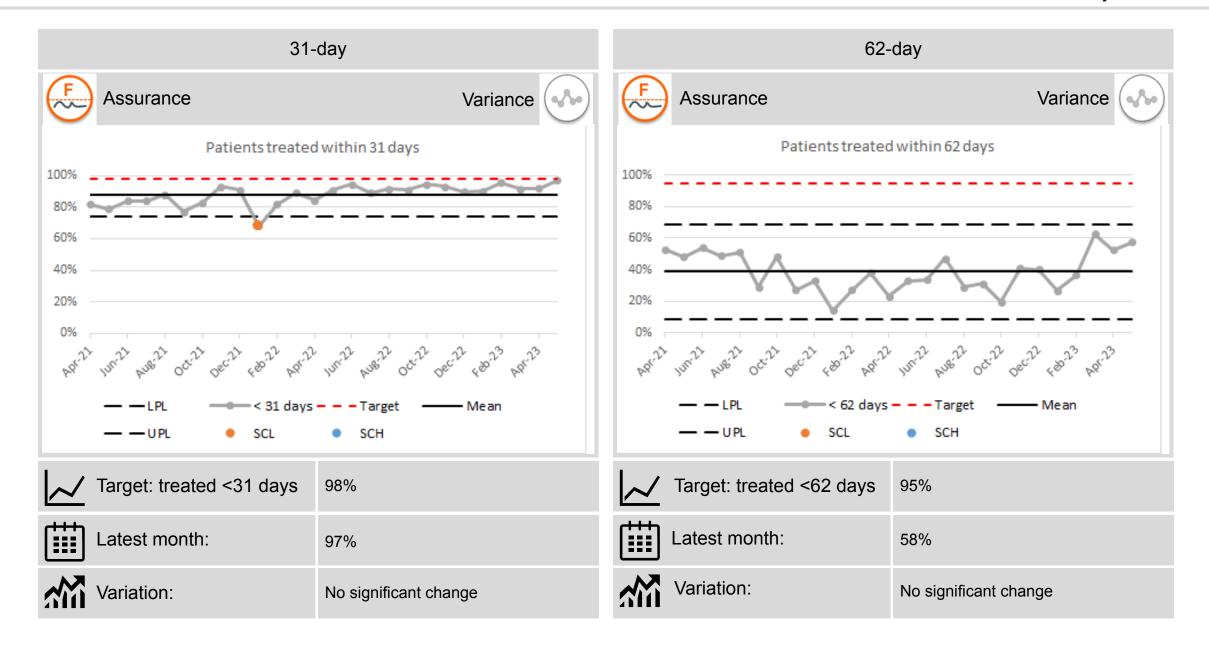




# Cancer care

31-day and 62-day





# **Cancer care**

## 62-day by tumour site



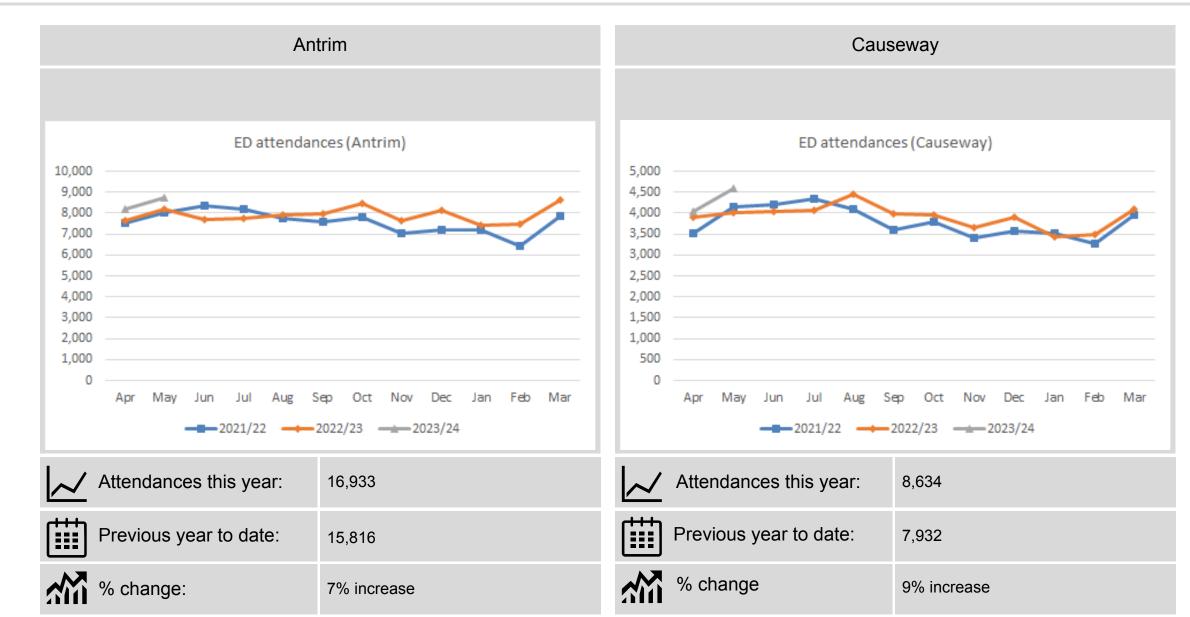
62-day
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	Year to date			
Tumour site	Total	< 62 days	% 62 days	
Breast	20.5	17.5	85%	
Gynae	4.5	1.5	33%	
Haematological	7.0	6.0	86%	
Head/Neck	2.5	0.5	20%	
Lower Gastrointestinal	14.0	1.0	<b>7</b> %	
Lung	6.5	2.5	38%	
Other	0.5	0.0	0%	
Skin	17.5	5.0	29%	
Upper Gastrointestinal	5.0	2.5	50%	
Total	78.0	36.5	47%	

Target: treated <62 days	95%
Year to date:	47%

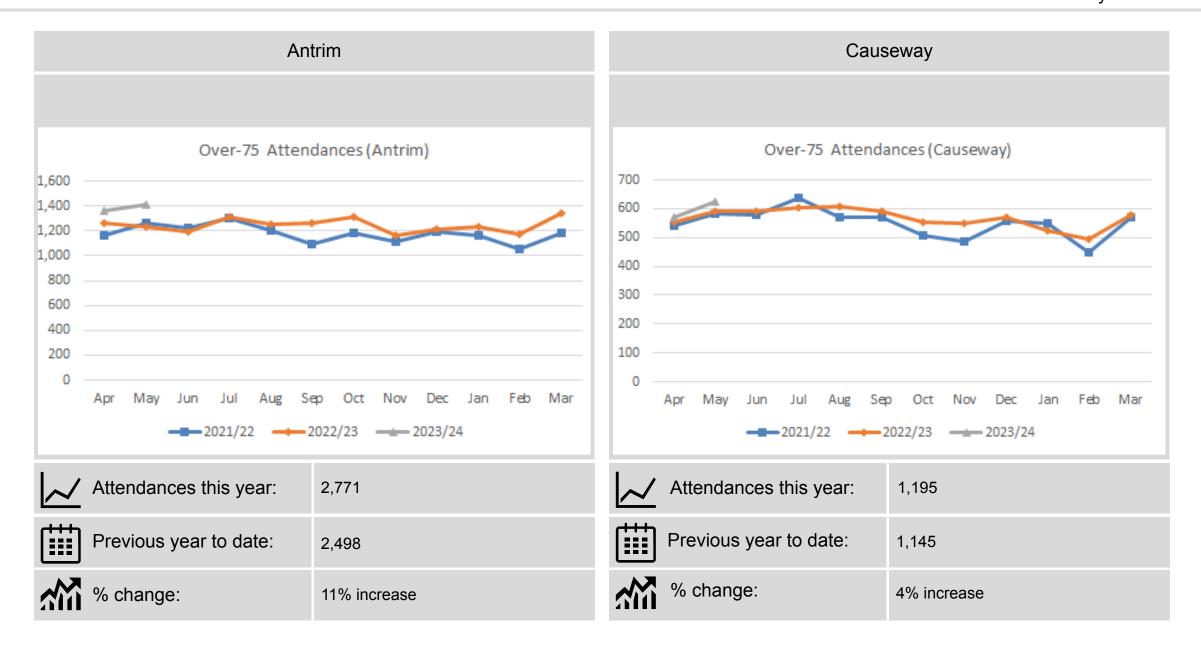
### ED attendances





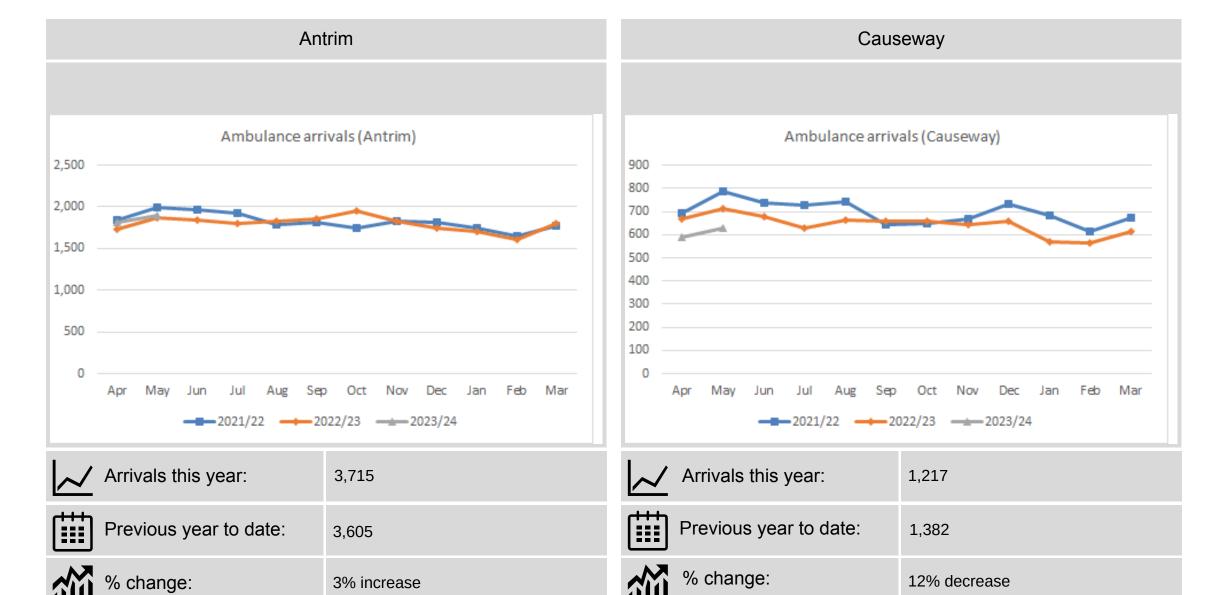
#### Over-75 attendances





### Ambulance arrivals

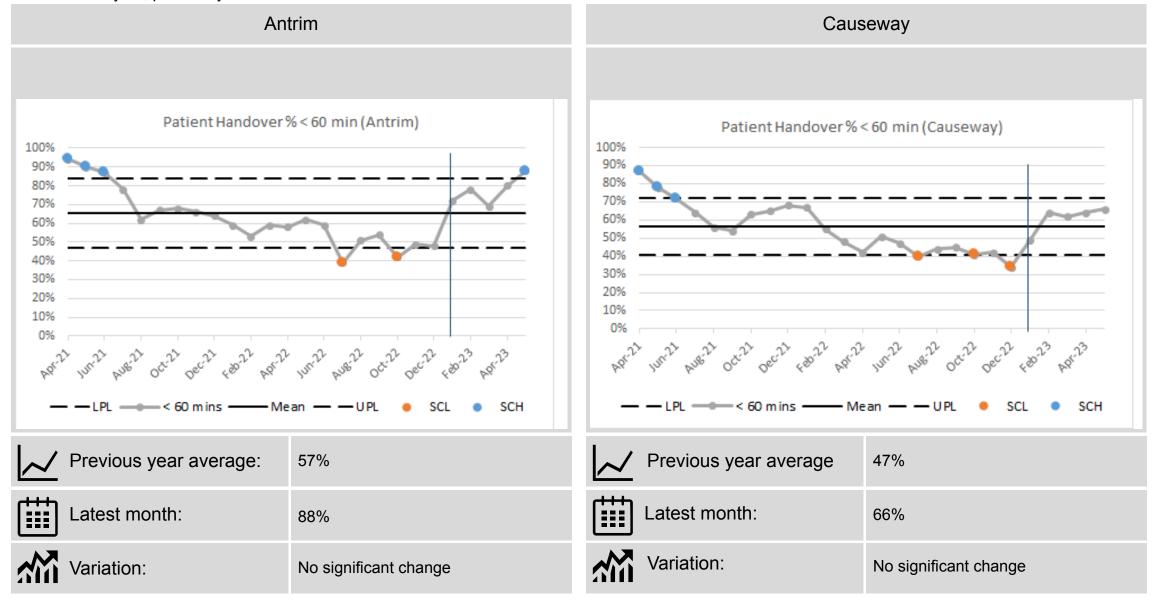




#### Ambulance Patient Handover within 60 minutes

Northern Health and Social Care Trust May 2023

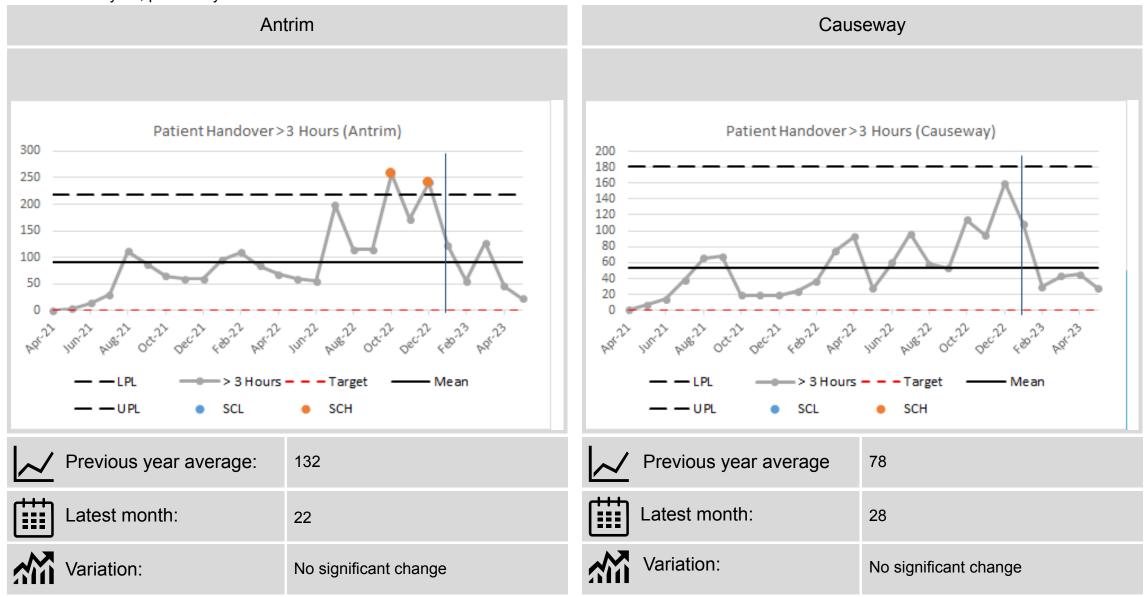
Change of metrics from January 23, previously ambulance turnaround times



#### Ambulance Patient Handover >3 hours

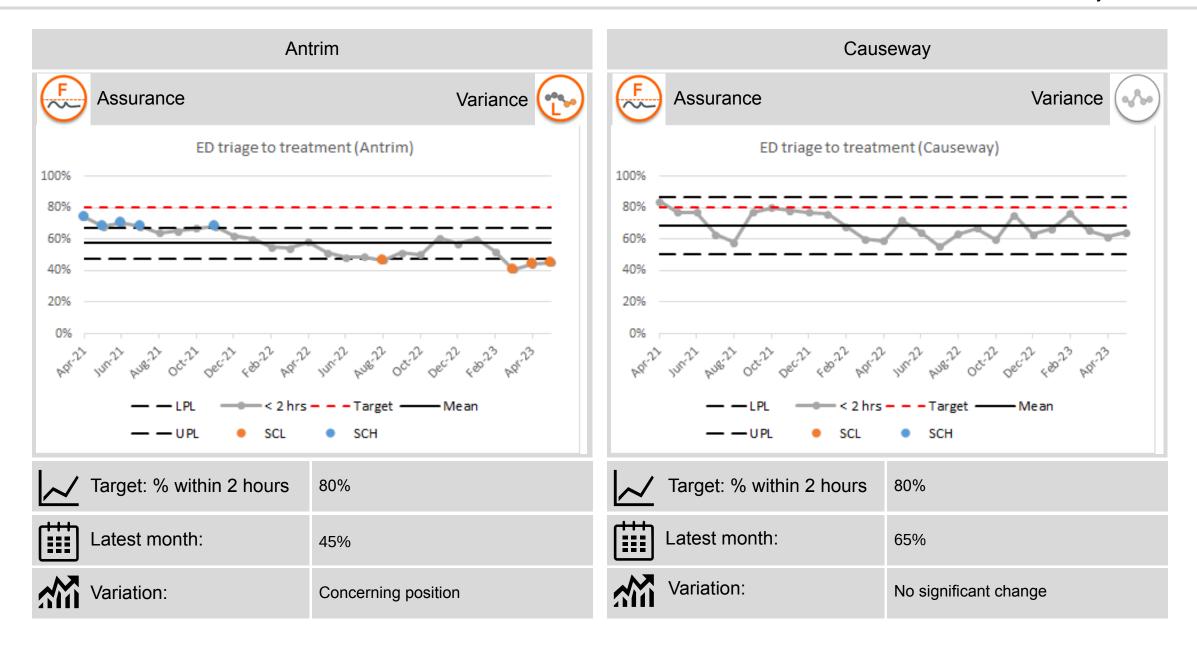
Northern Health and Social Care Trust May 2023

Change of metrics from January 23, previously ambulance turnaround times



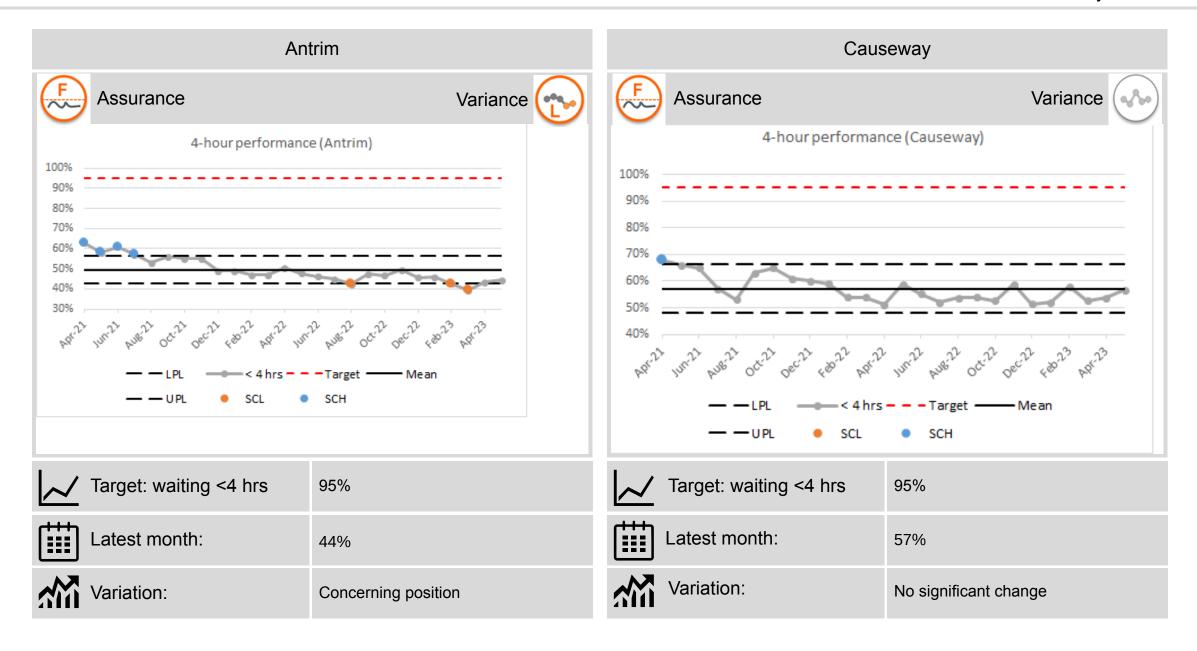
### Triage to treatment





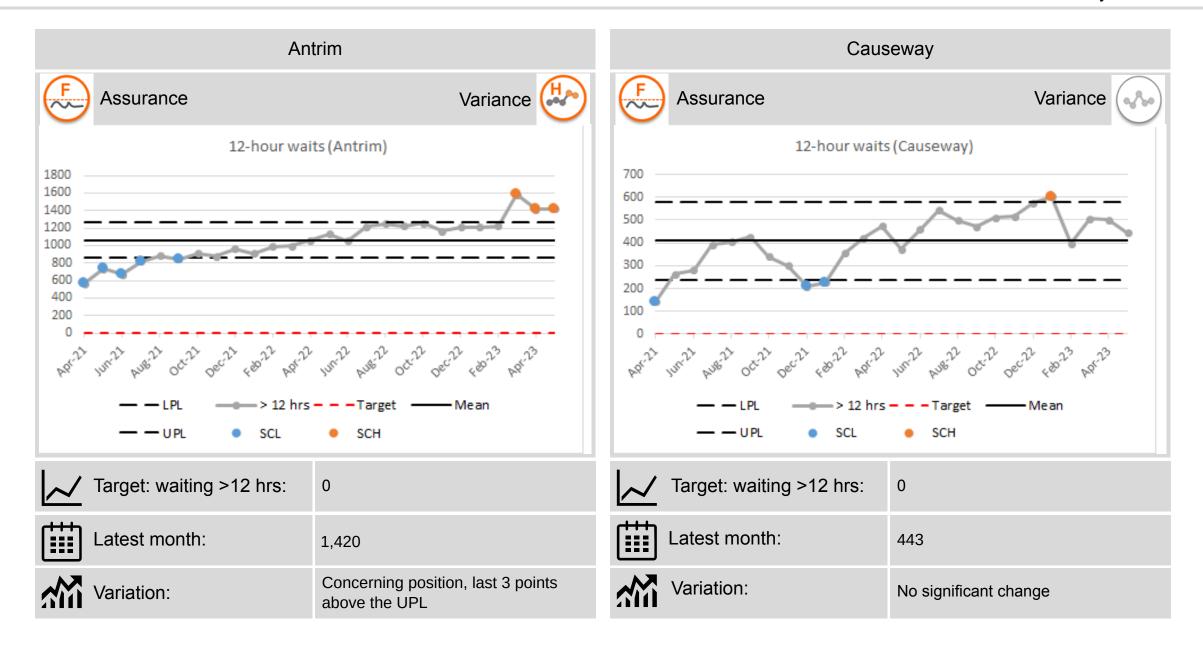
### 4-hour performance





### 12-hour performance





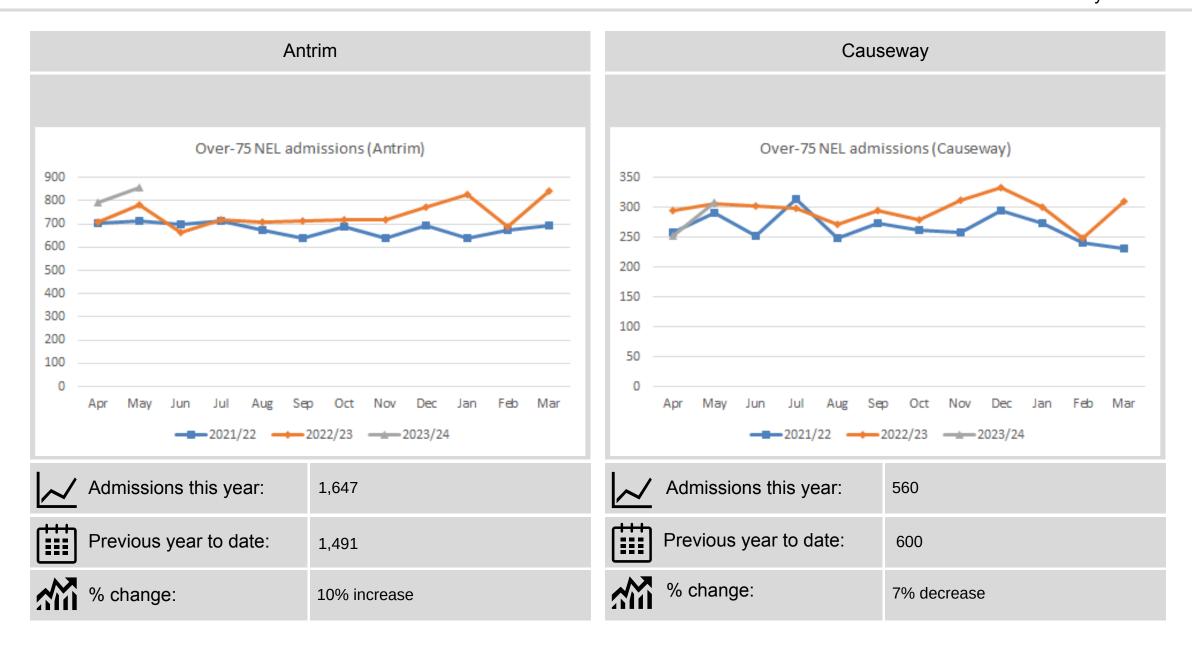
#### Non-elective admissions





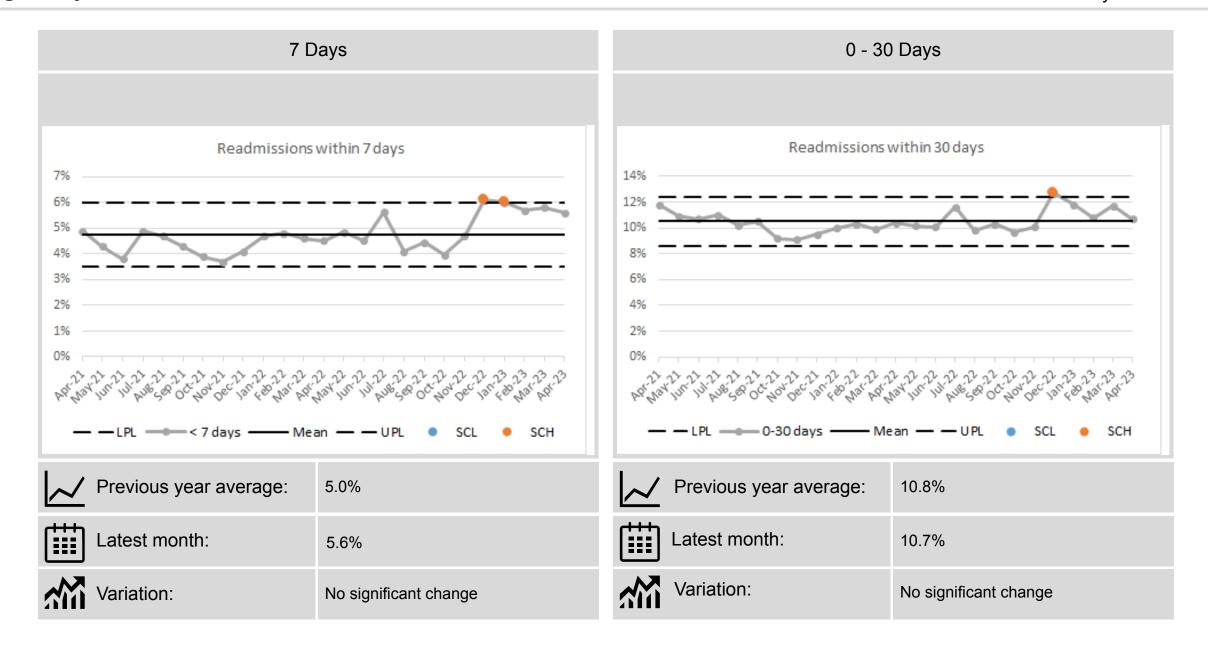
#### Over-75 admissions





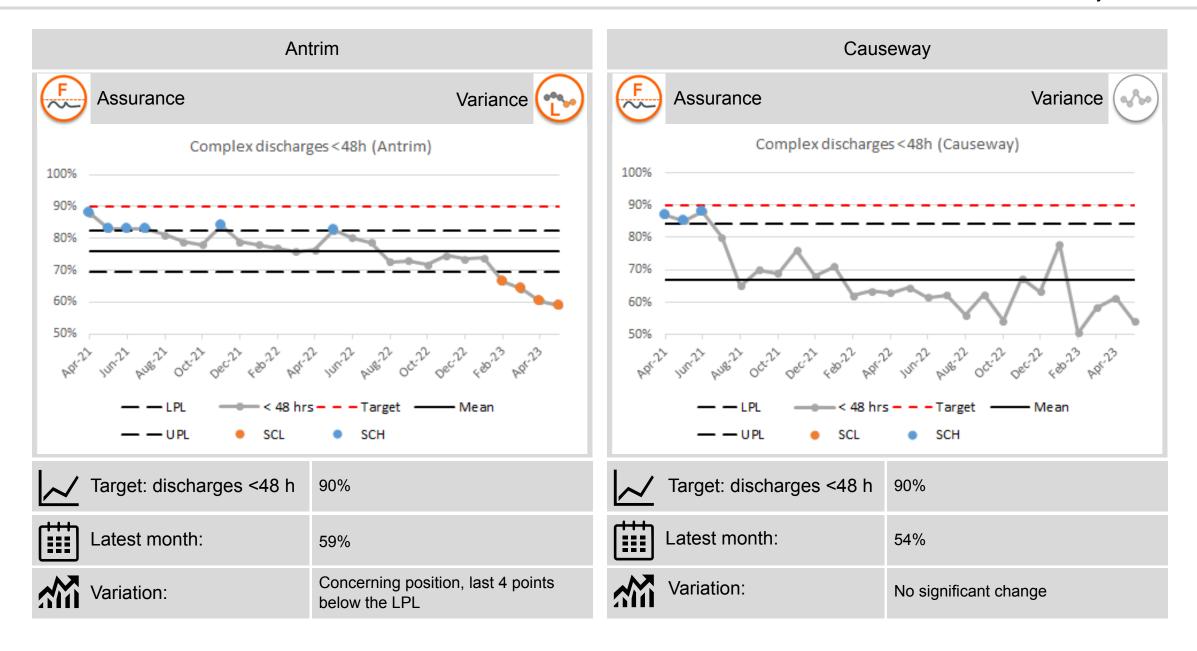
### **Emergency Readmissions**





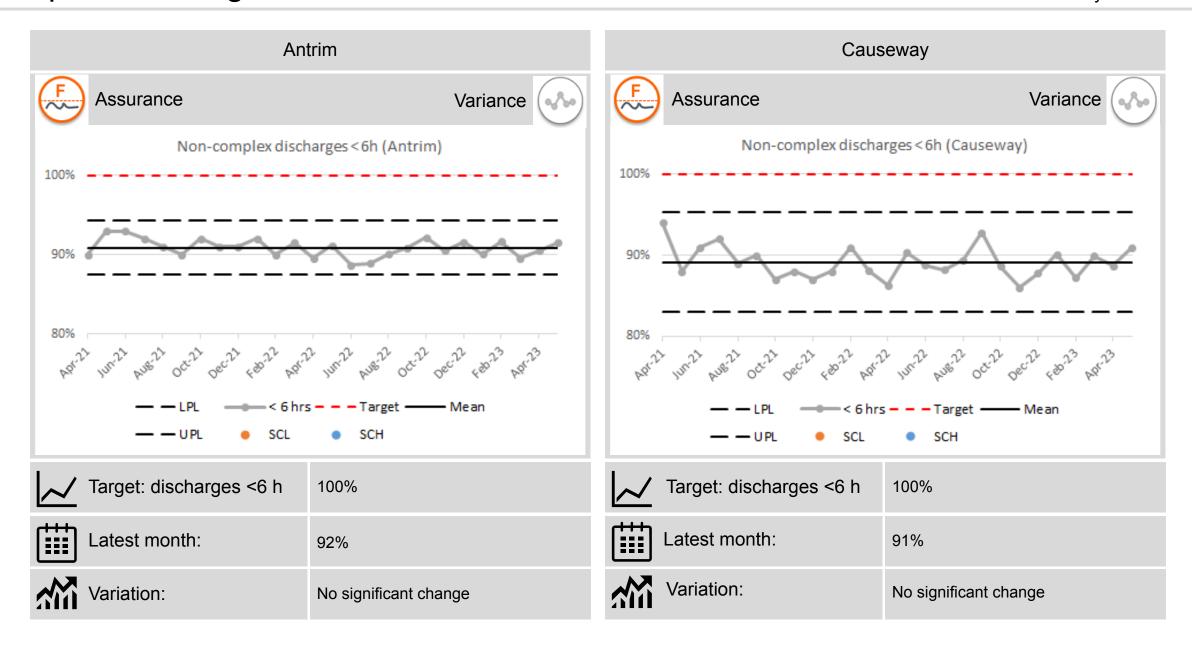
### Complex discharges





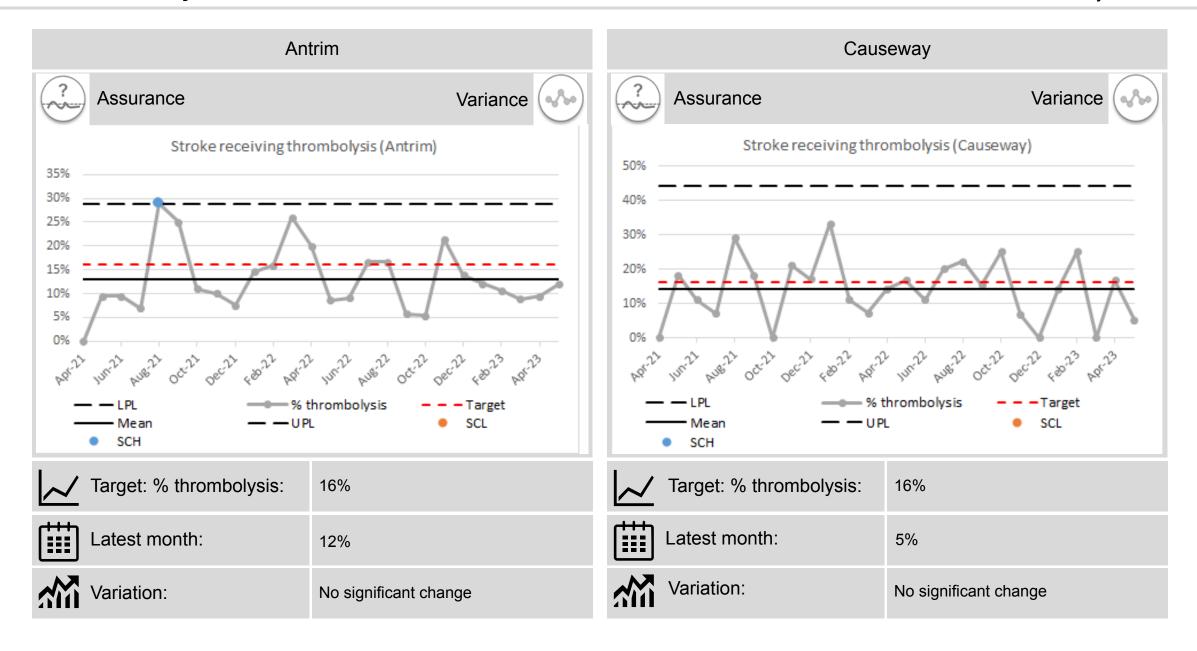
### Non-complex discharges





### Stroke - Thrombolysis

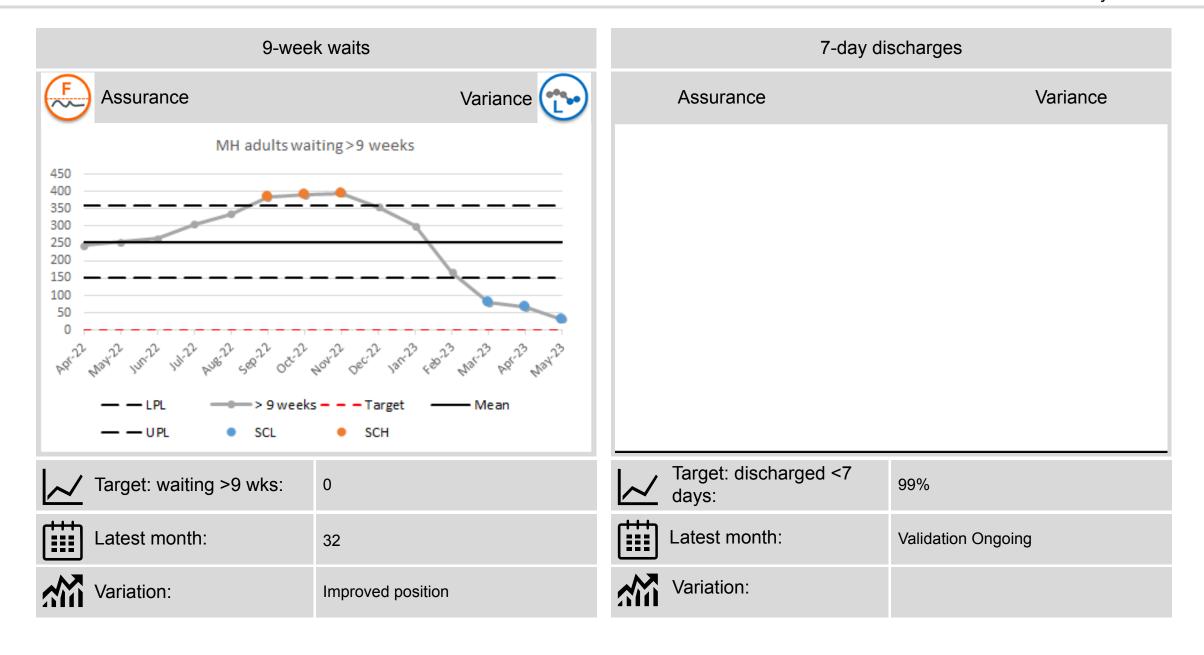




# Mental health and learning disability

Adult mental health services



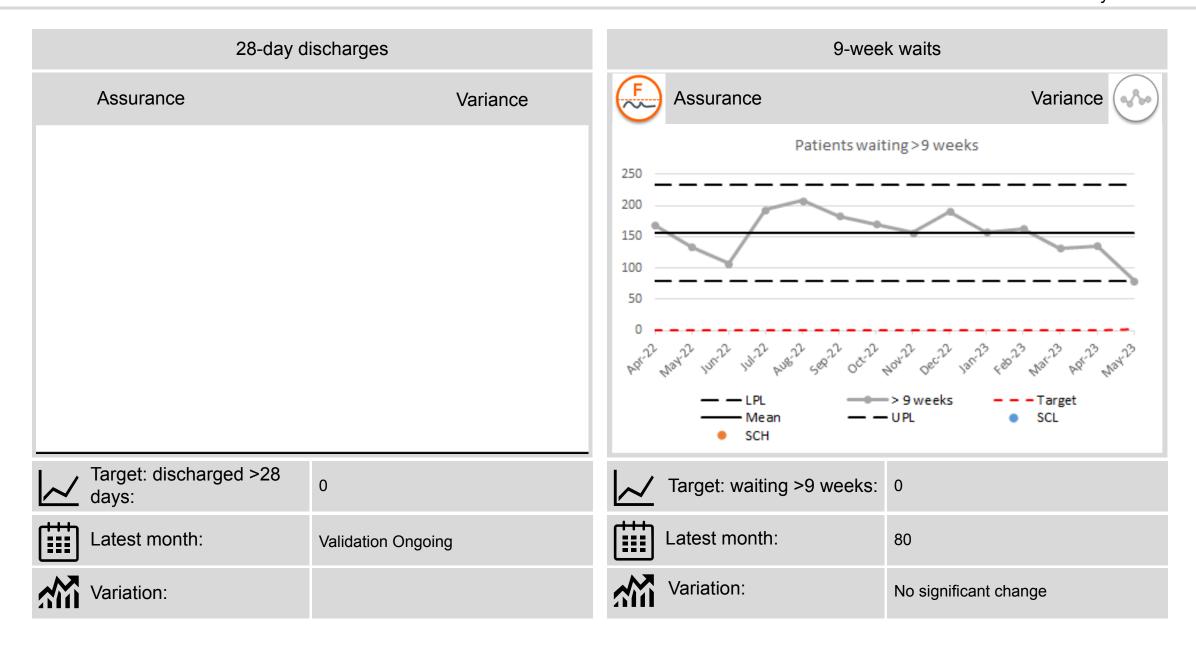


# Mental health and learning disability

Adult mental health services





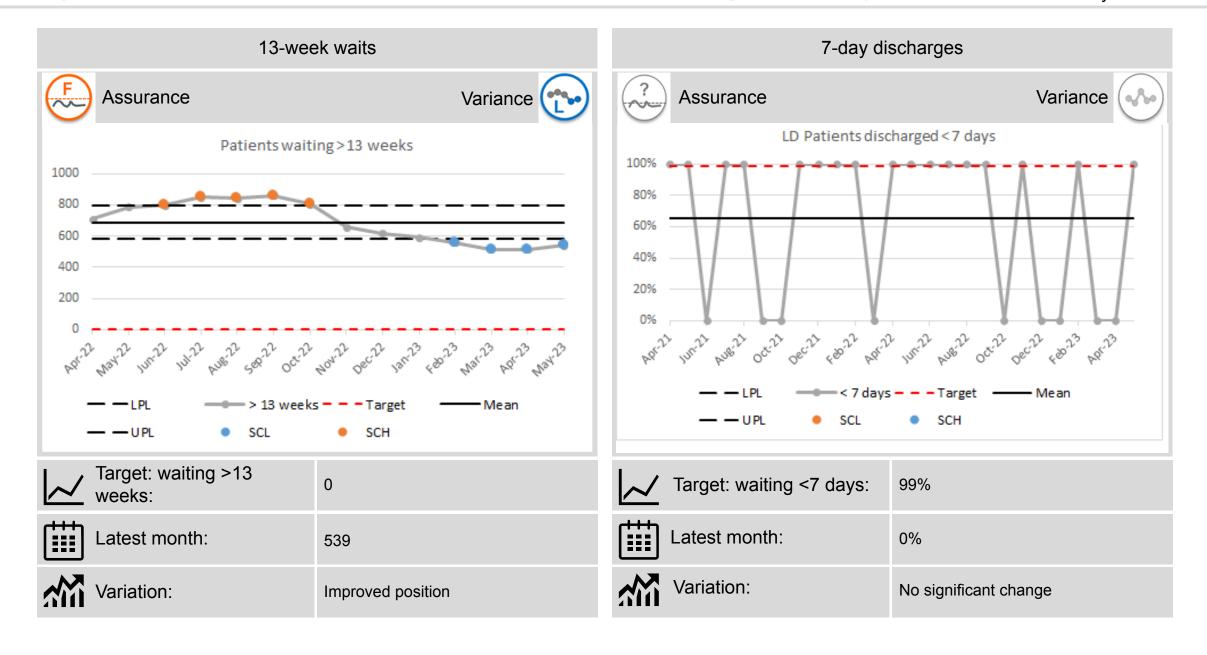


## Mental health and learning disability

Psychological therapies

Learning disability

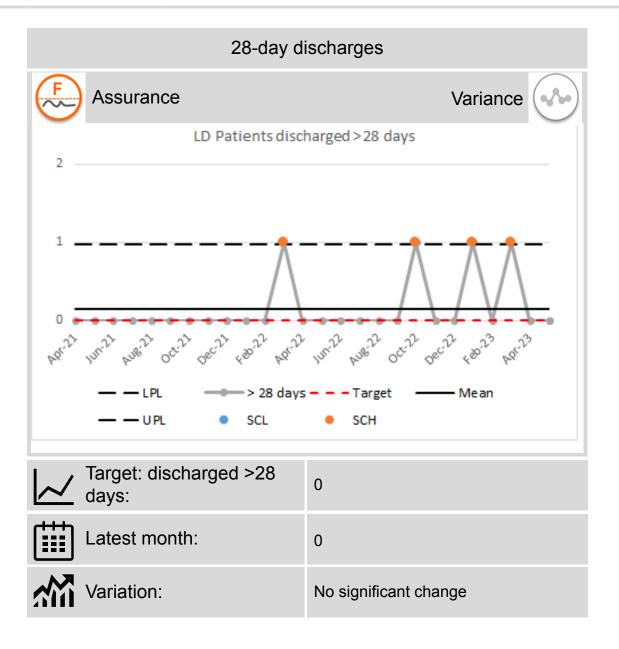




## Mental health and learning disability

Learning disability





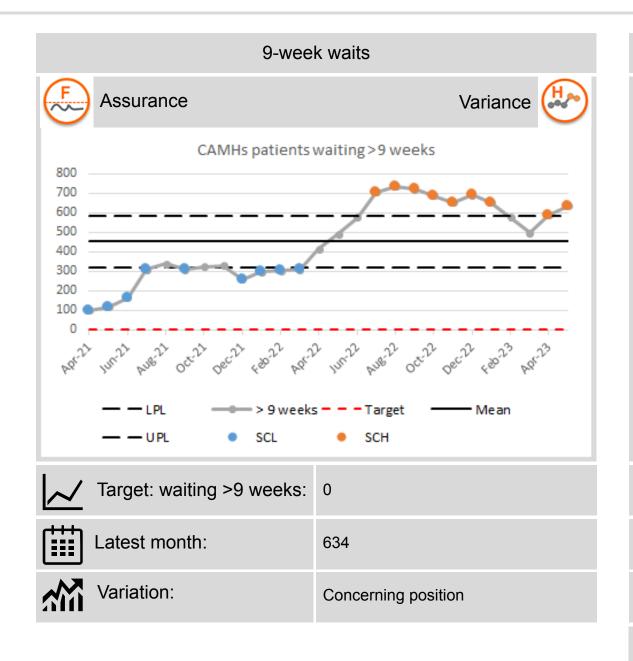
### Children's services

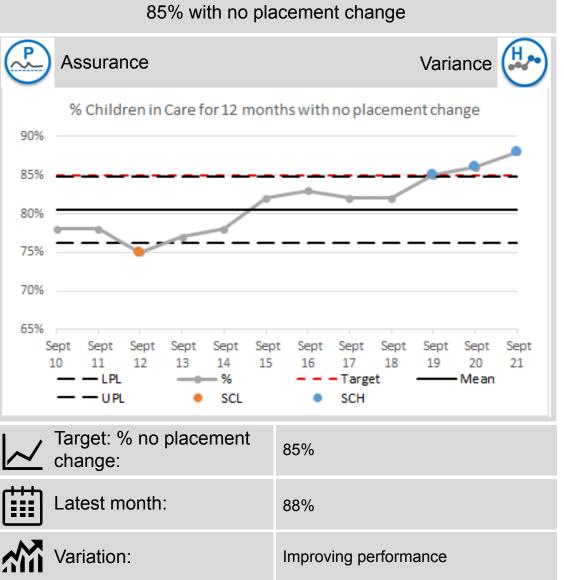
### **CAMHS**



### Placement change





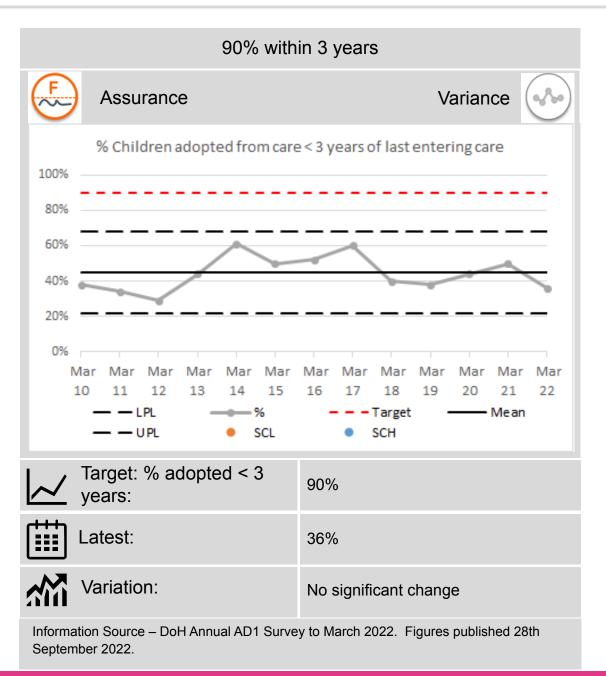


Information Source - DoH Annual OC2 Survey to Sept 2021. Figures published 23rd August 2022.

### Children's services

### Adoption



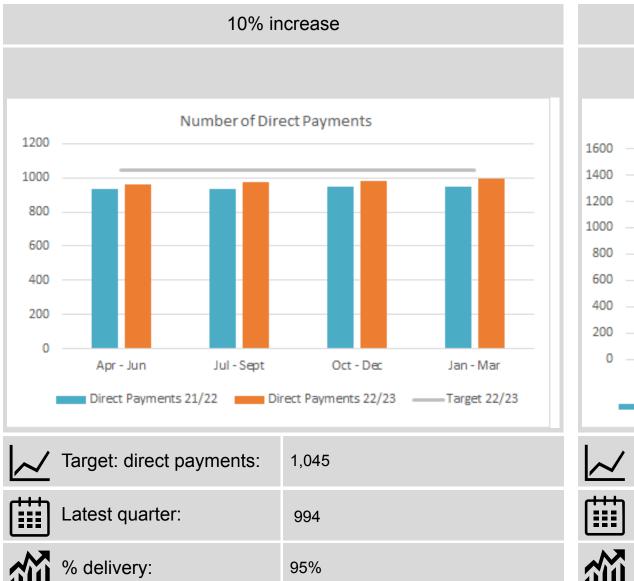


## **Community Services**

### Direct payments

### Carers' assessments





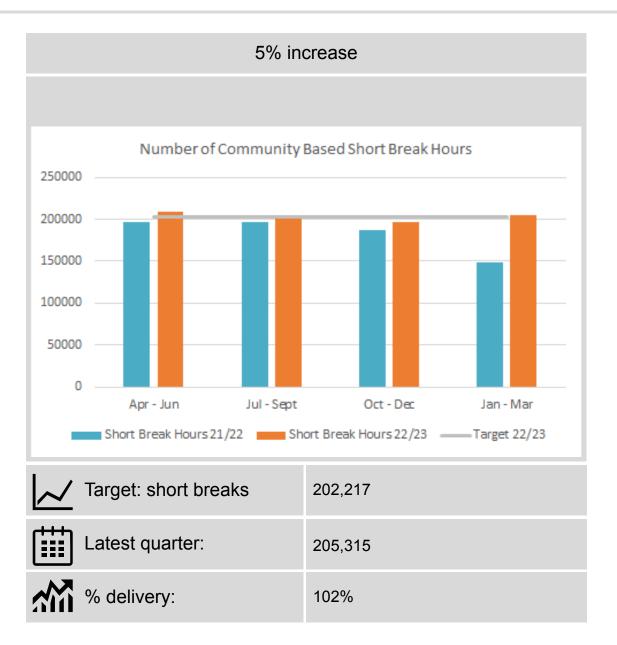


Target: carers' assessments:	1,371
Latest quarter:	1,171
% delivery:	85%

## **Community Services**

### Short breaks

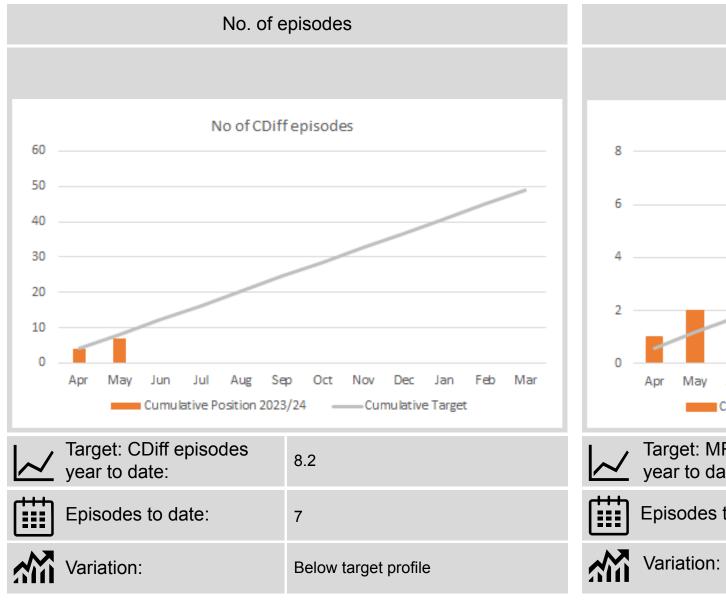


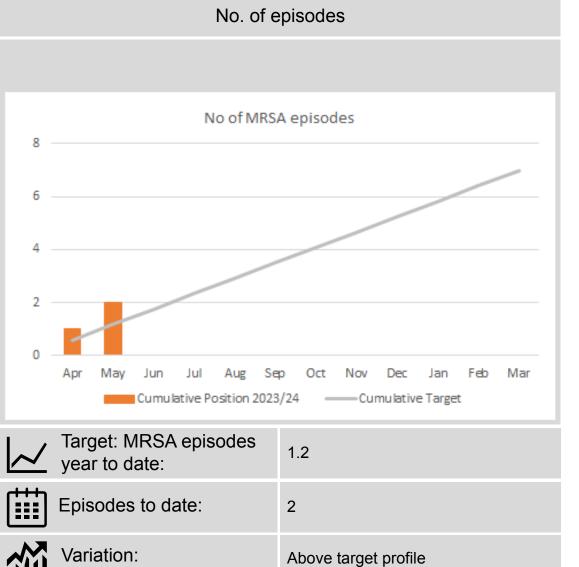




### **MRSA**



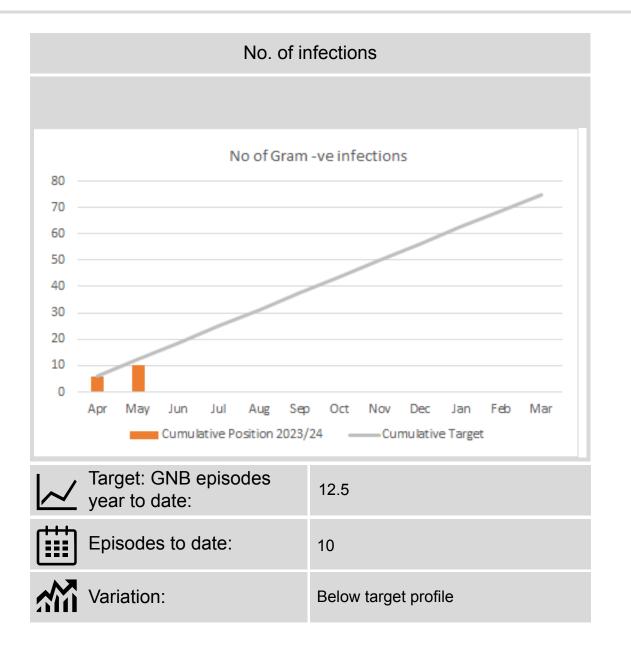






May 2023

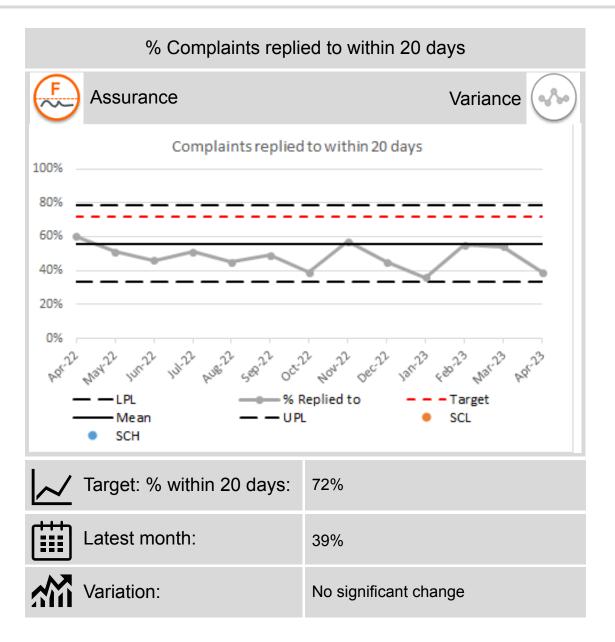




### **Service User Experience**

### Complaints

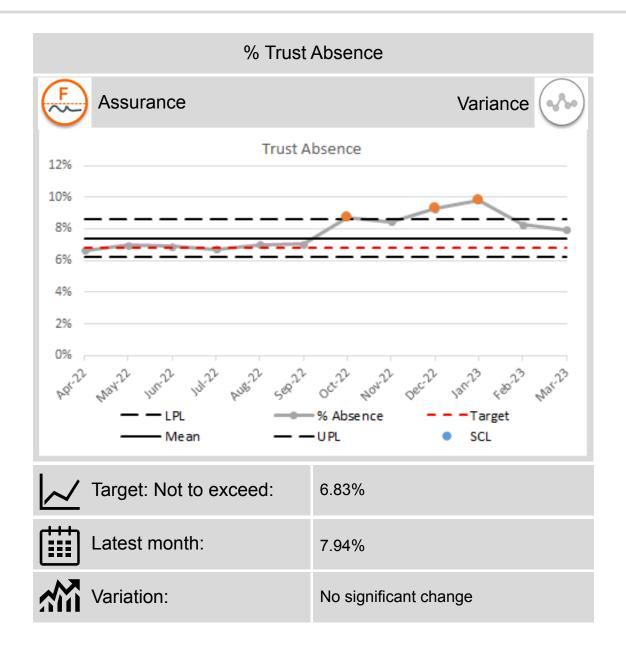




### Workforce

### Absence





## **Appendix**Service Delivery Plans - Adult Social Care



ERVICE AREA & METRIC	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Ma
DULT SOCIAL CARE										
	Number of attendances: Expected 2022-23	16,720	16,720	16,720	16,720	16,720	16,720	16,720	16,720	16,7
Adult Day Care	22/23 ACTUAL	9,657	13,877	13,374	14,046	15,628	10,834	12,906	13,522	15,9
	22/23 % vs Expected	57.8%	83.0%	80.0%	84.0%	93.5%	64.8%	77.2%	80.9%	95.
	Hours of Short Breaks Delivered: Expected Outturn 2022-23 (Q2 80% of 19/20 baseline)			409,278						511,
Adult Short breaks	22/23 ACTUAL			278,923						
	22/23 % vs Expected			68.2%						
	Hours Delivered (Stat): Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100% of 19/20 baseline	78,698	79,002	79,598	89,585	89,301	88,339	99,539	99,223	98,
	22/23 ACTUAL	92,734	88,897	91,282	90,652	90,441	87,994	86,105		
Domiciliary Care	22/23 % vs Expected	117.8%	112.5%	114.7%	101.2%	101.3%	99.6%	86.5%	0.0%	0.0
Domicinally Care	Hours Delivered (Ind): Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100% of 19/20 baseline	109,528	109,218	109,746	122,989	121,838	120,602	136,654	135,376	134,
	22/23 ACTUAL	144,777	143,418	145,572	146,097	147,432	149,907	145,093		
	22/23 % vs Expected	132.2%	131.3%	132.6%	118.8%	121.0%	124.3%	106.2%	0.0%	0.0

## Appendix Service Delivery Plans - Children's Social Care



SERVICE AREA & METRIC	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Ma
CHILDREN'S SOCIAL CARE										
Initial Family Assessments	Initial assessments: Expected 2022-23 (100% of 19/20 baseline)	147	167	132	165	117	139	142	142	143
Completed	22/23 ACTUAL	113	141	126	131	113	116	146	116	11
Completed	22/23 % vs Expected	76.9%	84.4%	95.5%	79.4%	96.6%	83.5%	102.8%	81.7%	80.3
% of Initial child protection	Initial CP Case Conferences: Expected 2022-23	84%	84%	84%	84%	84%	84%	84%	84%	84
cases conferences held within	22/23 ACTUAL	74%	72%	77%	82%	74%	72%	88%	72%	85
	22/23 % vs Expected	88.1%	85.7%	91.7%	97.6%	88.1%	85.7%	104.8%	85.7%	101.
% of Review child protection	Review CP Case Conferences: Expected 2022-23	85%	85%	85%	85%	85%	85%	85%	85%	85
cases conferences held within	22/23 ACTUAL	68%	75%	77%	72%	90%	84%	85%	71%	84
3 months	22/23 % vs Expected	80.0%	88.2%	90.6%	84.7%	105.9%	98.8%	100.0%	83.5%	98.
% of subsequent child	Review CP Case Conferences: Expected 2022-23	89%	89%	89%	89%	89%	89%	89%	89%	89
protection cases conferences	22/23 ACTUAL	76%	95%	77%	81%	80%	91%	61%	81%	91
held within 6 months	22/23 % vs Expected	85.4%	106.7%	86.5%	91.0%	89.9%	102.2%	68.5%	91.0%	102.

# Appendix Service Delivery Plans - Mental Health

HSC	Northern Health and Social Care Trust
May 2	023

SERVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
MENTAL HEALTH	Contacts									
	Scheduled New Contacts: Expected Outturn 2022-23 (Q2 90%, Q3&Q4 100% of 19/20 bas	402	398	402	516	489	379	512	523	435
	22/23 ACTUAL	308	392	400	395	483	398	426	427	398
Adult Mental Health (Non	22/23 % vs Expected	76.6%	98.5%	99.4%	76.6%	98.8%	105.0%	83.2%	81.6%	91.59
Inpatient)	Scheduled Review Contacts: Expected Outturn 2022-23 (Q2 90%, Q3&Q4 100% of 19/20 t	5,500	5,364	5,000	6,301	5,978	5,040	6,438	5,778	5,726
	22/23 ACTUAL	7,434	8,309	8,533	8,498	8,754	7,545	8,457	8,032	8,584
	22/23 % vs Expected	135.2%	154.9%	170.6%	134.9%	146.4%	149.7%	131.4%	139.0%	149.99
	New Contacts: Expected Outturn 2022-23 (90% of 19/20 baseline)	240	188	237	215	210	190	203	206	203
	22/23 ACTUAL	193	181	181	215	303	190	290	287	242
Psychological Therapies	22/23 % vs Expected	80.3%	96.2%	76.5%	100.0%	144.5%	100.1%	142.6%	139.3%	119.2
	Review Contacts: Expected Outturn 2022-23 (90% of 19/20 baseline)	1,887	1,620	1,777	2,280	2,059	1,458	2,246	2,088	1,69
	22/23 ACTUAL	1,370	1,637	1,478	1,755	2,023	1,378	1,792	1,780	1,999
	22/23 % vs Expected	72.6%	101.0%	83.2%	77.0%	98.2%	94.5%	79.8%	85.2%	117.8
	New Contacts: Expected Outturn 2022-23 (Q2 90%, Q3&Q4 100% of 19/20 baseline)	138	131	167	194	157	145	198	111	84
	22/23 ACTUAL	109	111	162	131	199	117	167	137	197
Dementia	22/23 % vs Expected	79.2%	84.5%	97.3%	67.5%	126.8%	80.7%	84.3%	123.4%	234.5
Dementia	Review Contacts: Expected Outturn 2022-23 (Q2 90%, Q3&Q4 100% of 19/20 baseline)	675	601	666	996	886	622	899	888	766
	22/23 ACTUAL	728	953	984	861	918	734	904	898	991
	22/23 % vs Expected	107.9%	158.5%	147.7%	86.4%	103.6%	118.0%	100.6%	101.1%	129.4
	New Contacts: Expected Outturn 2022-23	131	103	127	161	160	106	166	147	146
	Activity Delivered	89	101	123	149	167	140	174	181	227
CAMHS	Activity vs Expected	67.9%	98.1%	96.9%	92.5%	104.4%	132.1%	104.8%	123.1%	155.5
CAMITIO .	Review Contacts: Expected Outturn 2022-23	804	786	767	995	881	715	987	879	1,02
	Activity Delivered	832	946	1,013	1,100	1,183	856	1,158	1,099	1,25
	Activity vs Expected	103.5%	120.4%	132.1%	110.6%	134.3%	119.7%	117.3%	125.0%	122.79

# Appendix Service Delivery Plans - Cancer Services



ERVICE AREA & METRI	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
ANCER SERVICES										
	Expected Performance 2022-23 (Q2 70%, Q3 85%, Q4 100% of 19/20 baseline)	186	221	182	238	209	130	280	246	153
14 day Activity	22/23 ACTUAL	210	214	304	220	251	249	262	217	21
	22/23 % vs Expected	112.8%	97.1%	167.0%	92.4%	120.0%	191.5%	93.6%	88.2%	138.
	Expected Performance 2022-23 (100% of 19/20 baseline)	117	121	116	117	112	101	109	97	10
	22/23 ACTUAL	104	123	103	117	104	98	85	82	7
	22/23 % vs Expected	88.9%	101.7%	88.8%	100.0%	92.9%	97.0%	78.0%	84.5%	67.
	Expected Performance 2022-23 (100% of 19/20 baseline)	56	49	58	60	57	59	65	54	4
62 day Activity	22/23 ACTUAL	71.0	62.5	55.5	69.5	60	53	53.0	55.5	42
	22/23 % vs Expected	127.9%	128.9%	95.7%	115.8%	106.2%	90.6%	81.5%	102.8%	85.
Red Flag - first outpatient	Expected Performance 2022-23 (Q2 80%, Q3 90%, Q4 100 % of 19/20 baseline)	866	794	897	1,172	1,001	841	1,158	955	1,0
appointment (excl breast).	22/23 ACTUAL	742	901	1,074	1,131	1,010	876	1,144	1,083	1,2
appointment (excrureast).	22/23 % vs Expected	85.7%	113.5%	119.8%	96.5%	100.9%	104.2%	98.8%	113.4%	123

## **Appendix**Service Delivery Plans - Community Nursing



SERVICE AREA & METRIC	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mai
COMMUNITY NURSING										
	Contacts : Expected Outturn 2022-23 (Q2 75%, Q3 85%, Q4 95% of 19/20 baseline)	23,806	23,806	23,806	26,980	26,980	26,980	30,154	30,154	30,1
	22/23 ACTUAL	28,012	29,944	26,736	25,704	26,350	24,759	25,778	22,940	22,7
	22/23 % vs Expected	117.7%	125.8%	112.3%	95.3%	97.7%	91.8%	85.5%	76.1%	75.6
District Nursing Compliance	% Compliance : Expected 2022-23	80%	80%	80%	90%	90%	90%	90%	95%	959
vith SSKIN Bundle for Pressure	22/23 ACTUAL	92%	92%	75%	97%	98%	98%			
Ulcers	22/23 % vs Expected	115.0%	115.0%	93.8%	107.8%	108.9%	108.9%	0.0%	0.0%	0.0
District Number Consultance	% Compliance : Expected 2022-23 (Q2 10% above 2021 Average)	40%	40%	40%	60%	60%	60%	60%	95%	959
District Nursing Compliance	22/23 ACTUAL	89%	80%	84%	100%	96%	92%			
with all elements of MUST	22/23 % vs Expected	222.5%	200.0%	210.0%	166.7%	160.0%	153.3%	0.0%	0.0%	0.0

# Appendix Service Delivery Plans - Outpatients



/	ay	2023	

RVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr
TPATIENTS											
	Expected Outturn 2022-23 (July 80%, Aug 90%, Sept - Mar 100%, of 19/20 baseline)	5,047	5,028	6,017	6,989	6,427	5,040	6,181	5,343	3,537	6,269
New	22/23 ACTUAL	4,384	5,103	5,914	6,300	6,585	5,276	6,502	5,792	6,457	5,636
	22/23 % vs Expected	86.9%	101.5%	98.3%	90.1%	102.5%	104.7%	105.2%	108.4%	182.6%	89.9%
	Expected Outturn 2022-23 (July 80%, Aug 90%, Sept 100%, of 19/20 baseline)	8,281	8,906	11,165	12,574	11,270	9,158	12,088	10,250	8,424	10,122
Review	22/23 ACTUAL	8,823	10,521	11,358	11,464	12,329	9,781	11,648	10,213	11,625	10,013
Keview	22/23 % vs Expected	106.5%	118.1%	101.7%	91.2%	109.4%	106.8%	96.4%	99.6%	138.0%	98.9%

# **Appendix**Service Delivery Plans - AHP's



ERVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Ma
	New Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	1,827	1,901	2,312	2,372	2,307	1,685	2,243	1,919	1,393	2,350	2,5
	22/23 ACTUAL	1,461	1,767	1,980	2,077	1,948	1,694	2,079	1,956	1,776	1,576	1,8
Dhl.+h	22/23 % vs Expected	80.0%	93.0%	85.6%	87.6%	84.4%	100.5%	92.7%	101.9%	127.5%	67.1%	72
Physiotherapy	Review Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	6,061	6,417	7,516	8,083	7,589	5,789	7,701	6,987	5,891	7,080	8,
	22/23 ACTUAL	4,347	5,052	5,329	5,463	5,568	4,302	5,923	5,621	5,582	4,869	5,
	22/23 % vs Expected	71.7%	78.7%	70.9%	67.6%	73.4%	74.3%	76.9%	80.4%	94.8%	68.8%	68
	New Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	878	850	1,083	1,198	1,126	789	1,172	1,054	784	833	9
	22/23 ACTUAL	800	867	1,026	1,022	1,039	789	908	963	1,131	780	9
0 1: 171	22/23 % vs Expected	91.1%	102.0%	94.7%	85.3%	92.3%	100.0%	77.5%	91.4%	144.3%	93.6%	10
Occupational Therapy	Review Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	1,390	1,343	1,749	2,221	2,058	1,444	2,066	1,764	1,811	1,641	1,
	22/23 ACTUAL	1,748	1,838	2,127	2,236	2,210	1,658	2,075	2,203	2,520	2,195	2,
	22/23 % vs Expected	125.8%	136.9%	121.6%	100.7%	107.4%	114.8%	100.4%	124.9%	139.1%	133.8%	21
	New Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	523	465	570	692	726	560	847	624	672	641	-
	22/23 ACTUAL	489	539	406	532	601	422	547	469	550	538	5
	22/23 % vs Expected	93.5%	115.8%	71.2%	76.9%	82.8%	75.4%	64.6%	75.2%	81.8%	83.9%	83
Dietetics	Review Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	1,105	1,087	1,299	1,347	1,349	913	1,545	1,236	1,547	1,335	1,
	22/23 ACTUAL	1,327	1,444	1,333	1,428	1,405	1,170	1,382	1,641	1,565	1,101	1,
	22/23 % vs Expected	120.1%	132.8%	102.6%	106.0%	104.2%	128.1%	89.4%	132.8%	101.2%	82.5%	92
	New Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	323	386	512	579	469	312	486	468	274	382	5
	22/23 ACTUAL	406	346	454	406	416	344	452	419	520	409	5
Outhorities	22/23 % vs Expected	125.6%	89.6%	88.7%	70.1%	88.7%	110.3%	93.0%	89.5%	189.8%	107.1%	10
Orthoptics	Review Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	582	710	850	1,087	920	578	954	913	449	677	7
	22/23 ACTUAL	560	766	625	652	723	527	844	804	825	663	7
	22/23 % vs Expected	96.2%	107.9%	73.5%	60.0%	78.6%	91.2%	88.5%	88.1%	183.7%	97.9%	10
	New Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	264	289	286	234	248	210	335	393	252	319	4
	22/23 ACTUAL	365	340	341	442	387	250	378	349	412	282	3
Consideration Theorem	22/23 % vs Expected	138.3%	117.7%	119.2%	188.9%	156.0%	119.0%	112.8%	88.8%	163.5%	88.4%	84
Speech&Language Therapy	Review Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	2,276	2,365	4,152	4,845	4,132	2,606	4,424	3,655	4,108	3,336	4,
	22/23 ACTUAL	2,943	3,233	3,705	4,268	4,281	2,567	4,395	3,850	4,704	3,284	4
	22/23 % vs Expected	129.3%	136.7%	89.2%	88.1%	103.6%	98.5%	99.3%	105.3%	114.5%	98.4%	88
	New Contacts: Expected Outturn 2022-23 (July 80%, Aug 90%, Sept-Mar 100%, of 19/20 baseline)	754	807	888	1,120	798	680	913	628	737	632	9
	22/23 ACTUAL	656	726	824	864	957	602	796	611	576	590	7
Dadisto.	22/23 % vs Expected	87.0%	89.9%	92.8%	77.1%	119.9%	88.5%	87.2%	97.3%	78.2%	93.4%	80
Podiatry	Review Contacts: Baseline figure (2019-20 Outturn)	5,751	5,522	5,507	6,528	5,590	5,015	5,989	5,717	5,428	5,452	6,
	22/23 ACTUAL	4,955	5,832	5,870	5,663	5,969	5,004	6,033	5,539	5,762	5,121	5.
	22/23 % vs Expected	107.7%	117.3%	106.6%	86.7%	106.8%	99.8%	100.7%	96.9%	106.2%		_

# Appendix Service Delivery Plans - Elective Care



May 2023

ERVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
ECTIVE CARE												
	Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100% of 19/20 baseline)	192	169	218	249	230	180	275	261	268	224	233
Inpatients	22/23 ACTUAL	248	283	311	300	304	206	311	293	300	277	275
	22/23 % vs Expected	129.2%	167.7%	142.9%	120.3%	132.5%	114.4%	113.1%	112.3%	111.9%	123.7%	118.0%
Daycases	Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100%of 19/20 baseline)	680	693	717	756	799	621	973	762	868	893	882
	22/23 ACTUAL	463	619	604	718	777	600	708	649	791	652	716
	22/23 % vs Expected	68.1%	89.3%	84.3%	95.0%	97.2%	96.6%	72.8%	85.2%	91.1%	73.0%	81.2%
	Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100%of 19/20 baseline)	713	782	778	1,049	941	751	1,143	962	1,053	995	1,027
Endoscopy ( 4 scopes)	22/23 ACTUAL	937	994	911	1,021	1,037	836	873	903	948	790	968
	22/23 % vs Expected	131.5%	127.2%	117.2%	97.4%	110.3%	111.4%	76.4%	93.9%	90.0%	79.4%	94.3%

# Appendix Service Delivery Plans - Imaging Diagnostics



RVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
AGING DIAGNOSTICS										
	Expected Outturn 2022-23 (July 80%, Aug 90%, Sept 100%, of 19/20 baseline)	692	759	833	960	916	878	1,155	1,047	826
MRI	22/23 ACTUAL	869	894	962	864	916	778	937	897	1,009
	22/23 % vs Expected	125.6%	117.8%	115.5%	90.0%	100.0%	88.6%	81.1%	85.7%	122.29
ст	Expected Outturn 2022-23 (July 100%, Aug 100%, Sept 100% of 21/22 baseline)	3,550	3,422	3,424	3,743	3,805	3,637	3,590	3,440	3,831
	22/23 ACTUAL	3,960	4,018	3,979	4,010	4,099	3,639	4,237	3,835	4,353
	22/23 % vs Expected	111.5%	117.4%	116.2%	107.1%	107.7%	100.1%	118.0%	111.5%	113.69
	Expected Outturn 2022-23 (July 80%, Aug 90% of 19/20 baseline, Sept 100% of 21/22 baseline)	3,288	3,383	4,241	4,230	4,634	3,652	4,120	4,066	4,517
Non Obstetric Ultrasound	22/23 ACTUAL	4,074	4,477	4,515	4,501	4,650	3,623	4,415	4,061	4,432
	22/23 % vs Expected	123.9%	132.3%	106.5%	106.4%	100.3%	99.2%	107.2%	99.9%	98.1%

# Appendix Service Delivery Plans - Cardiac Services



/lay	2023
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ERVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Ma
ARDIAC SERVICES										
	Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100% of 19/20 baseline)	30	21	28	42	31	20	47	34	
Cardiac MRI	22/23 ACTUAL	25	38	42	38	42	32	31	31	
	22/23 % vs Expected	82.2%	182.7%	150.0%	89.8%	137.3%	161.6%	66.0%	91.2%	О
Cardiac CT (incl CT TAVI Workup & excl Ca	Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100% of 19/20 baseline)	21	15	20	17	25	12	19	28	
	22/23 ACTUAL	18	18	25	17	27	16	27	19	
Scoring)	22/23 % vs Expected	86.5%	118.4%	125.0%	99.4%	107.1%	136.8%	142.1%	67.9%	(
	Expected Outturn 2022-23 (Q2 80%, Q3 90%, Q4 100% of 19/20 baseline)	564	478	516	579	579	525	643	643	
ECHO	22/23 ACTUAL	547	639	606	557	714	660	630	607	
	22/23 % vs Expected	97.0%	133.8%	117.4%	96.3%	123.4%	125.8%	98.0%	94.4%	12

## **Appendix**Service Delivery Plans - Unscheduled Care



ERVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
NSCHEDULED CARE										
Weekend Discharge Rates - Antrim	WE Discharge rate: Expected Outturn 2022-23 (Q2 +5%, Q3 +10%, Q4 +15% on 19/20 baseline)	22%	23%	25%	26%	29%	29%	31%	35%	34%
	22/23 ACTUAL	22%	15%	18%	19%	14%	18%	19%	18%	16%
	22/23 % vs Expected	100.6%	65.3%	72.0%	72.6%	48.3%	61.1%	61.3%	51.4%	47.19
Weekend Discharge Rates - Causeway	WE Discharge rate: Expected Outturn 2022-23 (Q2 +5%, Q3 +10%, Q4 +15% on 19/20 baseline)	18%	19%	21%	23%	27%	27%	28%	33%	31%
	22/23 ACTUAL	22%	15%	14%	20%	16%	18%	17%	16%	15%
	22/23 % vs Expected	123.6%	79.0%	66.7%	87.8%	59.3%	67.4%	60.7%	48.5%	48.4
	Expected Outturn 2022-23 (0.2 less than 21/22 baseline)	6.1	6.3	6.5	6.4	7.3	6.9	6.7	7.0	7.2
Average N/E LOS - Antrim	22/23 ACTUAL	8.0	7.8	7.7	7.8	8.4	8.1	7.8	7.0	8
	22/23 % vs Expected	132.0%	124.5%	118.5%	121.3%	115.1%	117.2%	116.4%	100.5%	106.9
	Expected Outturn 2022-23 (0.2 less than 21/22 baseline)	6.7	6.8	7.8	7.5	6.9	6.2	6.7	7.3	7.2
Average N/E LOS - Causeway	22/23 ACTUAL	8.0	7.5	7.8	8.1	8.2	8.2	8.3	7.8	8
	22/23 % vs Expected	120.0%	110.2%	100.0%	108.2%	118.8%	133.1%	123.9%	106.8%	113.

May 2023

# Appendix Service Delivery Plans - Stroke Services



SERVICE AREA & METRICS	MEASURABLE OUTCOME	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
STROKE SERVICES										
ANTRIM	Thrombolysis rate: Expected Outturn 2022-23 (Q2 2% less than 19/20 baseline)	14%	14%	14%	14%	14%	14%	15%	15%	15%
	22/23 ACTUAL	13%	14%	6%	5%	22%	17%	14%	13%	13%
	22/23 % vs Expected	92.9%	100.0%	42.9%	35.7%	157.1%	121.4%	93.3%	86.7%	86.7%
	% Admitted <4 hrs: Expected Outturn 2022-23 (Q2 24% and Q3 12% less than 19/20 baseline)	25%	25%	25%	37%	37%	37%	49%	49%	49%
	22/23 ACTUAL	11%	13%	31%	15%	21%	32%	16%	16%	22%
	22/23 % vs Expected	44.0%	52.0%	124.0%	40.5%	56.8%	86.5%	32.7%	32.7%	44.9%
	Thrombolysis rate: Expected Outturn 2022-23 (6% less than 19/20 baseline)	15%	15%	15%	15%	15%	15%	15%	15%	15%
	22/23 ACTUAL	19%	21%	19%	16%	14%	0%	19%	25%	0
CAUSEWAY	22/23 % vs Expected	126.7%	140.0%	126.7%	106.7%	93.3%	0.0%	126.7%	166.7%	0.0%
CAUSEWAY	% Admitted <4 hrs: Expected Outturn 2022-23 (Q2 16% and Q3 8% less than 19/20 baseline)	34%	34%	34%	42%	42%	42%	50%	50%	50%
	22/23 ACTUAL	7%	8%	23%	24%	25%	5%	10%	21%	15%
	22/23 % vs Expected	20.6%	23.5%	67.6%	57.1%	59.5%	11.9%	20.0%	42.0%	30.0%

May 2023

## **Appendix**Service Delivery Plans - Community Dental



								Jan	Feb	Mar
ommunity Dental										
N	New: Expected Outturn 2022-23 (Q2 80% of 19/20 baseline)	177	177	177	198	198	198	243	243	243
2:	22/23 ACTUAL	184	202	255	243	319	204	253	220	302
CDS Contacts	22/23 % vs Expected	104.1%	114.3%	144.2%	122.7%	161.1%	103.0%	104.1%	90.5%	124.3
CDS Contacts	Review: Expected Outturn 2022-23 (Q2 80% of 19/20 baseline)	1,096	1,096	1,096	1,115	1,115	1,115	1,169	1,169	1,16
2:	22/23 ACTUAL	638	827	994	1,014	995	553	938	765	969
2	22/23 % vs Expected	58.2%	75.5%	90.7%	90.9%	89.2%	49.6%	80.2%	65.4%	82.9
C	Cases : Expected Outturn 2022-23 (Q2 60% of 19/20 baseline)	34	34	34	40	40	40	46	46	46
CDS General Anaesthetic 2:	22/23 ACTUAL	35	51	58	56	71	43	52	60	52
2:	22/23 % vs Expected	102.3%	149.1%	169.6%	140.4%	177.9%	107.8%	113.0%	130.4%	113.0