

Performance Management Report - Month Ending OCTOBER 2020

Trust Board -

Version - 19th November 2020

- 1

## Contents

<u>Title</u>	<u>Page</u>
Introduction	3
2020/2021 Standards and Targets	4
Glossary of Terms	18

## Introduction

This report presents the monthly Corporate Performance Information, in the categories of:

- \* Commissioning Plan Direction Ministerial Targets as per the HSC Commissioning Plan Direction (NI) 2018
- Supporting activity and profiles

Actual performance is outlined as well as the level of progress against the target. This progress is presented using the red, amber, green format (RAG). Charts are included to highlight trends in performance. In addition arrow indicators are included to assess changing performance as follows:

	RAG Rating								
Red Not achieving Target									
Amber	Almost Achieving Target								
Green	Achieving Target								

Trend on previous month (TOPM)	
Performance Improving	1
Performance Decreasing	•
Performance Static	-

The direction of the arrows indicates whether performance has improved, deteriorated or stayed the same since the previous reporting period.

The information figures are provided at a point in time and are subject to validation. This may mean the figures for previous months have to be adjusted. Where this results in a material change to information previously reported, this will be flagged up to Trust Board.

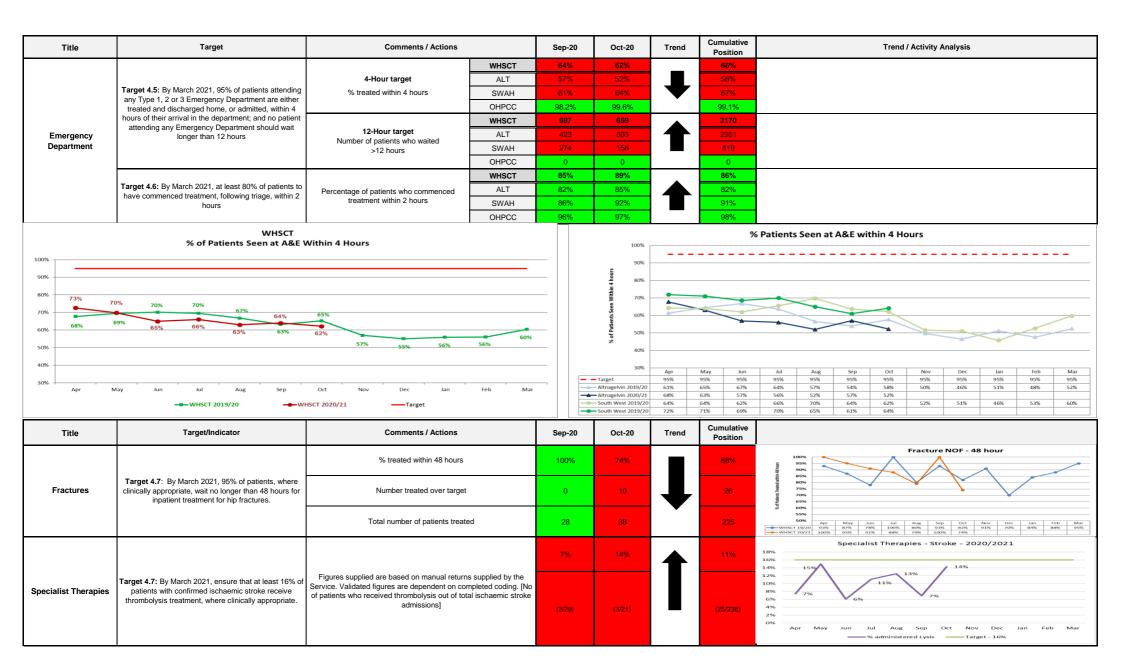
## 2020/2021 Ministerial Standards and Targets

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Smoking Cessation	Target 1.1: By March 2021, in line with the departments ten year Tobacco Control Strategy, to reduce the proportion of 11-16 years old children who smoke to 3%; of adults who smoke to 15%; and of pregnant women to 9%.	Target reported by PHA.					
Obesity	Target 1.2: By March 2022, reduce the level of obesity by 4 percentage points and overweight and obesity by 3 percentage points for adults and by 3 percentage points and 2 percentage points for children.						
Breastfeeding	Target 1.3: By March 2021, through continued promotion of breastfeeding to increase the percentage of infants breastfed, (i) from birth, and (ii) at 6 months. This is an important element in the delivery of the Breastfeeding Strategy Objectives for achievement by March 2025.	Awaiting confirmation of baseline and technical guidance on how this will be reported					
Healthy Places	Target 1.4: By March 2021, establish a minimum of 2 "Healthy Places" demonstration programmes, working with General Practice and partners across community, voluntary and statutory organisations.						
Children in Care	Target 1.10 (a): By March 2021, the proportion of children in care for 12 months or longer with no placement change is at least 85%.	Target 1.10 (a) reported at year end in line with the delegated statutory functions report.					Target 1.10(a) reported at year end in line with delegated statutory functions report.
S	Target 1.10 (b): By March 2021, 90% of children, who are adopted from care, are adopted within a three year time frame (from date of last admission).	Target 1.10 (b) will only be reported on a yearly basis through the electronic AD1 return. CIB are looking to collect this 6 monthly but no processes are in place yet.					Target 1.10(b) will be reported on a yearly basis in line with CIB reporting.

Title	Target	Comments / Actions			Trend		Trend / Activity Analysis	
Delivering Care Framework	Target 2.1: By March 2021 all HSC Trusts should have fully implemented phases 2, 3, and 4 of Delivering Care, to ensure safe and sustainable nurse staffing levels across all medical and surgical wards, emergency departments, health visiting and district nursing services.	Phase 1: Delivery Care Framework: Full implementation has not been sustained due to current level of vacancies.					Achieving this target is dependent on HSCB making appropriate investment in Nurse staffing.	
Title	Target	Comments / Actions	Target Profile ACTUAL Trend Variance Trend / Activity Analysis					
	Target 2.3: By 31 March 2021 secure an aggregate reduction of XX% (to be confirmed) of Escheric hia coli, Klebsiella spp. and Pseudomonas aeruginosa bloodstream infections acquired after two days of hospital admission, compared to 20XX/XX	HCAGNBSI WHSCT 2020/21 Target Maximum =						
Healthcare Acquired Infections	Target 2.4: In the year to March 2021 the Public Health Agency and the Trusts should secure a reduction of XX% in the total number of in-patient episodes of Clostridium Difficile infection in patients aged 2 years	MRSA WHSCT 2020/21 Target Maximum =	All reporting of healthcare acquired infections was suspended as a result of the response to COVID-19.  Plans are in place to restart monitoring and an update on performance will be provided in a future report.  No reports have been formally issued regarding Trusts' performance from April 2020, and targets have not yet been agreed for 2020/21.					
	and over, and in-patient episodes of Methicillin-resistant  Staphylococcus aureus (MRSA) bloodstream infection compared to 2018/19.	C. Difficile WHSCT 2020/21 Target Maximum =						
Title	Target	Comments / Actions	Aug-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis	
NEWS KPI's	Target 2.2: From April 2016, ensure that the clinical condition of all patients is regularly and appropriately monitored in line with the NEWS KPI audit guidance, and timely action taken to respond to any signs of deterioration.	The NEWS audits are completed quarterly on 34 Acute inpatient wards and each ward is required to audit a sample of 10 patients. Audits will be reported bi-monthly from February 2018 - Target 95%.	87%	94%	1		Percentage  Det 15 Feb 16 May 18 May	

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Care Standards in Residential/ Nursing	Target 2.8(a): During 2020/2021 the HSC, through the application of care standards, should continue to seek improvements in the delivery of residential and nursing care and ensure a reduction in the number of (i) residential homes, (ii) nursing homes, inspected that receive a failure to comply notice.		1	1			
Homes	Target 2.8(b): During 2020/2021 the HSC, through the application of care standards, should seek improvements in the delivery of residential and nursing care and ensure a reduction in the number of (i) residential homes, (ii) nursing homes, subsequently attract a notice of decision, as published by RQIA.	reported centrally to RQIA and the Department.	0	1			

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Children in Care	Target 3.2: During 2020/2021 the HSC should ensure that care, permanence and pathway plans for children and young people in or leaving care (where appropriate) take account of the views, wishes and feelings of children and young people.						The teams within the Women & Childrens Directorate issue feedback forms to children & young people leaving care to take into account their views and feelings which are kept within the Directorate.
Dementia Portal	Target 3.3: By September 2021, patients in all Trusts will have access to the Dementia Portal.	Awaiting confirmation of baseline and technical guidance on how this will be reported					
Palliative/ End of Life Care	Target 3.4: By March 2021, to have arrangements in place to identify individuals with palliative and end of life care needs, both in the acute and primary settings, which will support people to be cared for in their preferred place of care and in the manner best suited to meet their needs.						An overall WHSCT Palliative Care work Plan for 2016/2017 has been developed. An information system has been developed which captures preferences for care. As a result staff are able to support care within Specialist Palliative care team.
Co-production Model	Target 3.5: By March 2021, the HSC should ensure that the Co-production model is adopted when designing and delivering transformational change. This will include integrating PPI, co-production, patient experience into a single organisational plan.	Awaiting confirmation of baseline and technical guidance on how this will be reported					



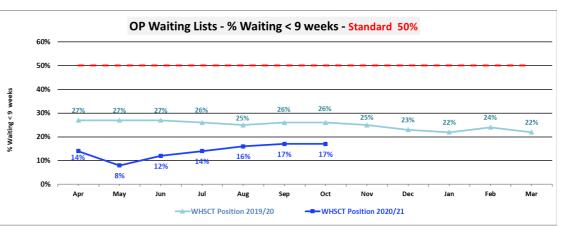
Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Urgent Diagnostic Tests	Target 4.9: By March 2021, all urgent diagnostic tests are reported on within 2 days.	% urgent diagnostic tests reported within 2 days	91%	94%	1	94%	



Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	
	Target 4.10(i): During 2020/21, all urgent suspected	% treated within 14 days	99%	84%		96%	
	breast cancer referrals should be seen within 14 days.	Number treated over target	2	45		58	
	Target 4.10(ii): During 2020/21, at least 98% of	% treated within 31 days	98%	100%		99%	
	patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.	Number treated over target	3	0		9	
Cancer Services		% commencing treatment within 62 days	70%	71%	•	64%	
	Target 4.10(iii): During 2020/21, at least 95% of	Number treated over target	22.5	14.0		155.5	
	patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days.			The 14.0 treated over target equates to 17 patients 6 of which are ITT'S		The 155.5 treated over target equates to 190 patients 69 of which are ITT'S	er es nts

Title	Target/Indicator	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
		- % waiting < 9 weeks	17%	17%	<b></b>		
<b>Outpatient Waiting List</b>	Target 4.11: By March 2021, 50% of patients should be waiting no longer than 9 weeks for an outpatient appointment and no patient waits longer than 52 weeks.	<ul><li>[Number waiting &gt; 9 weeks]</li></ul>	37968	38298	<b></b>		
		- [Number waiting > 52 weeks]	19555	20888	1		

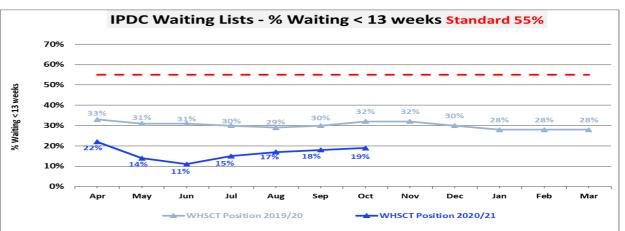
Outpatients Waiting Lists - Key Specialties - As at 31/10/2020									
Specialty	Total OP Waiting	Number Waiting > 9 weeks	Number Waiting > 52 weeks	Longest Waiter (weeks)	Site of Longest Waiter				
General Surgery	8139	7015	4303	308.6	ALTNAGELVIN				
Orthopaedics	6560	5692	3926	289.1	OMAGH				
Oral Surgery	3323	3049	2048	297.6	CAUSEWAY				
Gastroenterology	2496	2161	1566	283.1	OMAGH				
Respiratory Medicine	1193	1017	555	254.3	SWAH				
Neurology	3791	3613	2963	310.7	ALTNAGELVIN				
Rheumatology	1923	1665	925	156.4	ALTNAGELVIN				



Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
		Diagnostic Test					
		- % waiting < 9 weeks	57%	57%			
	Towns 440. Do March 2004 750/ of a final about	- Total Number waiting > 9 weeks	5806	5489			
Diagnostic Test	<b>Target 4.12:</b> By March 2021, 75% of patients should wait no longer than 9 weeks for a diagnostic test and no	- [Imaging]	1801	1655			
	patient waits longer than 26 weeks.	- [Physiological Measurement]	4005	3834			
		- Total Number waiting > 26weeks	2531	2005			
		Endoscopy					
		- [Number waiting > 9 weeks]	3482	3580			

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Inpatients &	Target 4.13: By March 2021, 55% of patients should	- % waiting < 13 weeks	18%	19%	1		
Day Cases (Includes Scopes)	wait no longer than 13 weeks for inpatient/daycase treatment and no patients waits longer than 52 weeks.	- Number waiting > 13 weeks	16831	16780	1		
		- Number waiting > 52 weeks	9796	10365	•		

Inpa	atients Waiting	Lists - Key S	Specialties	- As at 31/10/2020	)
Specialty	Total IP/DC Number Waiting S 13 weeks Number Waiting > 52 weeks		Longest Waiter (weeks) - INPATIENT	Longest Waiter (weeks) - DAY CASE	
General Surgery (not incld RASC VV)	2055	1791	1362	302.2	239.3
Urology	1554	1109	696	240.7	213.2
Orthopaedics	5026	4545	3260	293.4	302.5
E. N. T.	2273	2181	1771	305.6	191.5
Ophthalmology (not incld RASC Eye NHSCT)	3054	2524	1337	0	198.5
Oral Surgery	370	250	165	171.4	196.5
Pain Management	316	304	105	0	105.4
Gynaecology	803	624	323	180.1	146.2



Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
		Total number waiting at month end	370	293			9 Week Breaches - CAMHS 700 600 574
	Target 4.14: By March 2021, no patient waits longer than 9 weeks to access Child and Adolescent Mental Health services.	Number waiting >9 weeks	231	140			400 432 476 432 376 316 316 300 249 252 231 267 294 317 320 306 316 200 200 179
9 week Access Targets:		Longest wait (weeks) at month end	54	43			100 110 131 131 131 140 140 140 140 140 140 140 140 140 14
CAMHS & Older People (Dementia)		Total Number waiting at month end	498	496			9 Week Breaches - Dementia  440  400  364  360  364  360  360  360
	Target 4.14: By March 2021, no patient waits longer than 9 weeks to access <b>Dementia Services</b> .	Number waiting > 9 weeks	394	388			280 217 220 150 147 157 163 159 153 170 169 150 150 150 150 150 150 150 150 150 150
		Longest wait (weeks) at month end	54	54			80
	Target 4.14: By March 2021, no patient waits longer than 9 weeks to access Adult Mental Health Services.	Total Number waiting	935	908			9 Week Breaches - AMH
9 week Access Targets:		Total Number waiting > 9 weeks	502	444			676 654 686 686 686 686 631 616 631 640 640 640 640 640 640 640 640 640 640
Mental Health & Learning Disability		Longest wait (weeks) at month end	66	71			150
		Patient Breaches = 404 PCL, 2 Forensics, 1 EDS, 1 ADS & 36 PCOP					0 Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar ## 2019/20 ## 2020/21
		Total Number Waiting	1558	1549	<b></b>		13 Week Breaches - Psychological Therapies  1500 1287 1309 1284 1268 1222
13 week Access Targets:	Target 4.14: By March 2021, no patient waits longer than 13 weeks to access to any Psychological	Total Number waiting >13 weeks	1268	1222			1180 1050 1050 1050 1050 1050 1050 1050
Psychological Therapies	Therapy Service (any age).	Longest wait (weeks) at month end	171	175			750 571 609 620 672 450
		Patient Breaches = 719 AMH, 7 PCOP, 130 Adult LD, 189 Child LD, 16 Adult Health Psych, 161 Child Psych					Apr Many Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Direct Payments	Target 5.1: By March 2021 secure 10% increase in direct payments across all programmes of care	By March 2021 secure 10% increase in the number of direct payments across all programmes of care.  20/21 Target by 31st March 2021 = 1720 (All Direct Payments during Month)	1498	1534	1		No of All Direct Payments in Place - Service Users & Carers - 2020/21  1800  1700  1600  1500  1458  1500  1498  1534  1400  1373  1371  1374  1300  Apr-20  May-20  May-20  Number of DP in Place  Target 2020/21
Self Directed Support	Target 5.2: By September 2021, all service users and carers will be assessed or reassessed at review under the Self Directed Support approach, and will be offered the choice to access direct payments, a managed budget, Trust arranged services, or a mix of those options, to meet any eligible needs identified.	By September 2021, all service users and carers will be assessed or reassessed at review under the Self Directed Support approach, and will be offered the choice to access direct payments, a managed budget, Trust arranged services, or a mix of those options, to meet any eligible needs identified. (Active Clients at Month End)	6278	6409			
		Total waiting >13 weeks	7226	6374			Allied Health Professionals (AHP) Number Waiting >13 Weeks at Month End
		Dietetics	613	553			12,000
	Target 5.3: By March 2021, no patient waits longer	Occupational Therapy	1871	1991			8,000
AHPs	than 13 weeks from referral to commencement of AHP treatment by an allied health professional.	Orthoptics	517	507			6,000
	treatment by an amed health professional.	Physiotherapy	2449	1850			2,000
		Podiatry	1225	910			0 — Apr May jun jul Aug Sep Oct Nov Dec Jan Feb Mar
		Speech and Language Therapy	551	563			→ No >13 weeks 2019/20 → No >13 weeks 2020/21
Self Directed Physiotherapy	Target 5.5: By March 2021, Direct Access Physiotherapy service will be rolled out across all Health and Social Care Trusts	Awaiting confirmation of baseline and technical guidance					
Emotional Wellbeing Framework	Target 5.6: By May 2021, to have delivered the Children & Young Peoples Developmental & Emotional Wellbeing Framework along with a costed Implementation Plan.	Awaiting confirmation of baseline and technical guidance					

Title	Target	Comments / Actions	Sep-20	Oct-20		Cumulative Position	Trend / Activity Analysis
		Total Discharges	127	115		851	Adult Mental Health Discharges within 7 day standard
	Target 5.7: During 2020/2021, ensure	% Mental Health Discharges within 7 days	98%	95%		98%	200
	that 99% of all mental health discharges take place within 7 days of	Number of Mental Health Discharges within 7 days	125	109	•	830	
	the patient being assessed as medically fit for discharge, with no	% Mental Health Discharges > 28 days	1%	3%		2%	50
		Number of Mental Health Discharges > 28 days	1	3		15	0 Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar
Delayed Discharges		3 patients delayed >28 days (completed waits) during Oct-20 (1 AMH & 2 PCOP)					■ 2020/2021 ■ 2019/20
Mental Health & Learning Disability		Total Discharges	1	0		1	Learning Disability Discharges within 7 day standard
	Target 5.7: During 2020/2021, ensure that 99% of all learning disability	% Learning Disability Discharges within 7 days	0%	100%		0%	5
	discharges take place within 7 days of the patient being assessed as	Number of Learning Disability Discharges within 7 days	0	0	0	0	3 2
	medically fit for discharge, with no discharge taking more than 28 days.	% Learning Disability Discharges > 28 days	100%	0%	1	100%	O Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar
		Number of Learning Disability Discharges > 28 days	1	0		1	■ 2020/2021 ■ 2019/20

Title	Target	Comments / Actions	Jun-20	Sep-20	Trend	Cumulative Position	Trend / Activity Analysis
Carers Assessments	Target 6.1: By March 2021, secure a 10% increase in the number of carers' assessments offered to carers for all service users (reported quarterly)	By March 2021, secure a 10% increase in the number of carers' assessments offered (first assessments)  20/21 Quarterly Target = 337	213	320	1		Number of Adult Carers Offered Individual Carers Assessments  400 350 250 250 250 298 298 213 320 320 200 201 201 202 202 203 203 204 205 207 207 207 207 207 207 207 207 207 207
Short Breaks	Target 6.2: By March 2021, secure a 5% increase in the number of community based short break hours (i.e. non-residential respite) received by adults across all programmes of care.	Number of Community Based Short Break Hours (i.e. non residential) received by adults 20/21 Quarterly Target = 24,246 Hours (Ex Daycare)	13,389	23,515	1		Community Short Breaks 2020/21 (Ex. Daycare)  3000 25000 23,515 2000 15000 13,389 10000 5000  Apr - Jun 20 Jul - Sep 20 Oct - Dec 20 Jan - Mar 21 Quarterly Target 20/21- 29,761 hrs (Exc Daycare)
	Target 6.3: By March 2021, to create a baseline for the number of young carers receiving short breaks (ie non-residential respite).	Number of Community Based Short Break Hours (i.e. non residential) received by young carers  Baseline =  Awaiting confirmation of baseline and technical guidance					

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Pharmacy Efficiency Programme	Target 7.1: By March 2021, to ensure delivery of community pharmacy services in line with financial envelope.						The trust has achieved its share of the procurement efficiencies and full achievement of the efficiencies resulting from the 'Boost' element of the efficiency programme is awaiting confirmation.
DSF Framework	Target 7.2: By March 2021, to establish an outcomes reporting framework for DSF that will demonstrate the impact and outcome of services on the social wellbeing of service users and the baseline activity to measure this.						

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
Cancelled Appointments	Target 7.3: By March 2021, to establish a baseline of the number of hospital cancelled, consultant-led, outpatient appointments in the acute programme of care which resulted in the patient waiting longer for their appointment and by March 2020 seek a reduction of 5%.	roumber of Outpatient Appointments Cancelled by Hospital which resulted in the patient waiting longer for their appointment  WHSCT 2018/19 Baseline: 10 009	1715	1775	1	11266	
Elective Care	Target 7.4: By March 2021, to reduce the percentage of funded activity associated with elective care service that remains undelivered.	See the below table that outlines the IP & DC / New and Review OP positions.					

Title	Target	Comments / Actions	Sep-20	Oct-20	Trend	Cumulative Position	Trend / Activity Analysis
	Target 7.5: By March 2021, ensure that 90% of	Acute Discharges					
		Complex Discharges	84%	84%		87%	
		- % discharged within 48 hours	0476			01 76	
Delayed Discharges Acute Hospital	complex discharges from an acute hospital take place within 48 hours, with no complex discharge taking more than 7 days; and all non-complex discharges from an	% discharged within 7 days	93%	93%		94%	
	acute hospital take place within 6 hours	Number waiting > 7 days	22	17		137	
		Non Complex Discharges	069/	95%		96%	
		- % discharged within 6 hours	96%		+	90%	

Con	Top 5 Reasons for Delay  nplex Discharges Greater Than 48 Hours  April - October 2020	ALTNAGELVIN HOSPITAL	SOUTH WEST ACUTE HOSPITAL	TOTAL
1	COMPLEX 110 - NO DOMICILARY PACKAGE AVAILABLE	60	37	97
2	COMPLEX 111 - AWAIT ASSESSMENT/ ACCEPTANCE TO CARE HOME	20	11	31
3	COMPLEX 104 - BED CASED IC - SUB ACUTE/NON ACUTE HOSP	30	2	32
4	COMPLEX 116 - DEMENTIA	14	13	27
5	COMPLEX 118 - ESSENTIAL EQUIPMENT/ADAPT NOT AVAILABLE	4	6	10

Title	Target	Comments / Actions		Trend	Cumulative Position	Trend / Activity Analysis
Medicines Efficiency Programme	Target 7.6: By March 2021, to have obtained savings of at least £20m through the Medicines Optimisation Programme, separate from PPRS receipts.	Awaiting confirmation of baseline and technical guidance				

Title	Target	Comments / Actions			Trend	Cumulative Position	Trend / Activity Analysis
Seasonal Flu	Target 8.6: By December 2020, to ensure at least 40% of Trust staff (health care and social care staff) have received the seasonal flu vaccine.	As at 31st March 2020 - 2061 out of 7729 Trust frontline staff received the Flu Vaccination excludes Bank nurses and Porters.	To be reporte 2020/21 flu vaco		1		
Title	Target	Comments / Actions	Oct-20		Trend	Cumulative Position	Trend / Activity Analysis
Absence	Target 8.7: By March 2021, to reduce Trust staff sick absence levels by a regional average of 5% compared to 2017/18 figure.	As at 31st October 2020 the cumulative position 7.89% against WHSCT 19/20 target of 5% (One Month reporting Time Lag)	7.89%		1		
Title	Target	Comments / Actions			Trend	Cumulative Position	Trend / Activity Analysis
Healthier Workplace	Target 8.9: By March 2021, to have an agreed and systematic action plan to create a healthier workplace across HSC and to have contributed to the Regional Healthier Workplace Network as part of commitments under PfG.	Awaiting confirmation of baseline and technical guidance					
ОВА	Target 8.10: By March 2021, to pilot OBA approach to strengthen supports for the social work workforce.	Awaiting confirmation of baseline and technical guidance					
Title	Target	Comments / Actions	Oct	-20	Trend	Cumulative Position	Trend / Activity Analysis
Quality 2020	Target 8.11: By March 2021, 60% of the HSC workforce should have achieved training at level 1 in the Q2020 Attributes Framework and 5% to have	Level 1 Training As at 31st October 2020 cumulative position 6,344 against WHSCT 19/20 Target [11,593] Staff **Please note that figures provided from February 2020 onwards may be lower than figures provided for the previous month due to the removal of any staff no longer employed by the Trust.	54.	7%	1		
	achieved training at level 2. Reported quaterly.	Level 2 Training As at 31st October 2020 cumulative position [196] against WHSCT 19/20 Target [11,593] Staff **Please note that figures provided from February 2020 onwards may be lower than figures provided for the previous month due to the removal of any staff no longer employed by the Trust.	1.7%		<b>→</b>		
Title	Target	Comments / Actions			Trend	Cumulative Position	Trend / Activity Analysis
Dsyphagia Awareness	Target 8.13: By March 2021, Dysphagia awareness training designed by speech and language therapy to be available to Trust staff in all Trusts.						

Title	Target	Comments / Actions			Trend	Cumulative Position	Trend / Activity Analysis
Make Every Contact Count	Target 1.5: By March 2021, to ensure appropriate representation and input to the PHA/HSCB led Strategic Leadership group in Primary Care to embed the Make Every Contact Count approach.	Awaiting confirmation of baseline and technical guidance					
Dental	Target 1.6: By March 2021, to establish a baseline of the number of teeth extracted in children aged 3-5 years - as phase 1 of the work to improve oral health of young children in Northern Ireland over the next 3 years and seek a reduction in extractions by 5% against that baseline by March 2021.	Awaiting confirmation of baseline and technical guidance					
Healthier Pregnancy	Target 1.8: By March 2021, to have further developed, and implemented the "Healthier Pregnancy" approach to improve maternal and child health and to seek a reduction in the percentage of babies born at low borth weight for gestation.	Awaiting confirmation of baseline and technical guidance					Awaiting confirmation of baseline and technical guidance
Title	Target	Comments / Actions	Jun-20	Sep-20	Trend	Cumulative Position	Trend / Activity Analysis
Healthy Child/ Healthy Future	Target 1.9: By March 2021, ensure full delivery of the universal child health promotion framework for Northern Ireland, Healthy Child, Healthy Future. By that date: (i) the antenatal contact will be delivered to all first time mothers, (ii) 95% of two year old reviews must be delivered.	This information is recorded every quarter but not reported to PHA, DHSSPS & HSCB until 3 months after the quarter end.	Cohort = 6552 Total Seen = 5159 % Seen = 79% % Seen in Child's home = 64%	Cohort = 6711 Total Seen = 5257 % Seen = 78% % Seen in Child's home = 71%			These figures are provisional at end of Sept '2020 as validated figures are not reported until 3 months after the quarter end
Title	Target	Comments / Actions			Trend	Cumulative Position	Trend / Activity Analysis
Best Start in Life	Target 1.10: By March 2021, ensure the full regional roll out of Family Nurse Partnerships, ensuring that all teenage mothers have equal access to the family nurse partnership programme. The successful delivery of this objective will directly contribute to PfG Outcome 14 "We give our children and young people the best start in life".	Awaiting confirmation of baseline and technical guidance					
Suicide	Target 1.13: By March 2021, to have further enhanced out of hours capacity to de-escalate individuals presenting in social and emotional crisis, including implementation of a "street triage" pilot and a "safe place" pilot.	This work builds on previous investments in community mental health crisis teams and is an important element of the work to reduce the suicide rate by 10% in 2022 in line with the draft Project Life 2 strategy. Awaiting confirmation of baseline and technical guidance					
Alcohol Drug Related Harm and Drug related Death	Targert 1.14: By March 2021, to have advanced the implementation of revised substitute prescribing services in Northern Ireland, including further exploration of models which are not based on secondary care, to reduce waiting times and improve access. This is an important element in the delivery of our strategy to reduce alcohol and drug related harm and to reduce drug related deaths.	Awaiting confirmation of baseline and technical guidance					
Long Term Conditions	Target 1.15: By July 2021, to provide detailed plans (to include financial profiling) for the regional implementation of the diabetes feet care pathway. Consolidation of preperations for regional deployment of the care pathway will be an important milestone in the delivery of the Diabetes Strategic Framework.	Awaiting confirmation of baseline and technical guidance					

## Glossary of Terms

A&E	Accident and Emergency Department					
AHP	Allied Health Professional					
ASD	Autistic Spectrum Disorder					
C Diff	Clostridium Difficile					
C Section	Caesarean Section					
CLI	Central Line Infection					
CSR	Comprehensive Spending Review					
DC	Day case					
DNA	Did Not Attend (eg at a clinic)					
DSF	Delegated Statutory Functions					
DV	Domestic Violence					
FGC	Family Group Conference					
нѕсв	Health & Social Care Board					
HWIP	Health & Wellbeing Improvement Plan					
ICU	Intensive Care Unit					
IP	Inpatient					
ITT	Inter Trust Transfer					
IV	Intravenous					
JAG	Joint Advisory Group					
LAC	Looked After Children					
LW	Longest Wait					
MARAC	Multi-agency Risk Assessment Conference					
MAU	Medical Assessment Unit					
MD	Multi-disciplinary					
MDT	Multi-disciplinary Team					

MEWS	Modified Early Warning Scheme					
MRSA	Methicillin Resistant Staphylococcus Aureus					
MSSA	Methicillin Sensitive Staphylococcus Aureus					
NH	Nursing Home					
NICAN	Northern Ireland Cancer Network					
NIPACS	NI Picture Archiving & Communication System					
NIRADS	Radiology and Diagnostics System					
ОВА	Outcomes Based Accountabilility					
ОВС	Outline Business Case					
OP	Outpatient					
ОТ	Occupational Therapy					
PAS	Patient Administration System					
PFA	Priorities for Action					
PMSID	Performance Management & Service Improvement Directorate					
PSNI	Police Service of Northern Ireland					
RMC	Risk Management Committee					
S&EC	Safe and Effective Care Committee					
SBA	Service Budget Agreement					
SSI	Surgical Site Infection					
TNF	Anti-TNF medication					
TOR	Terms of Reference					
VAP	P Ventilator Associated Pneumonia					
VTE	Venous Thromboembolism					
WHO	World Health Organisation					