



Western Health
and Social Care Trust

PERFORMANCE REPORT OCTOBER - DECEMBER 2022

Trust Board – 2 February 2023

Context

This report provides an update for Acute and Community Services on progress at the end of December 22 (Month 6) and Quarter 3 (October – December 22) against the:

- Activity trajectories set out in the 2022/23 HSC Service Delivery Plan (SDP) and
- Performance against the Commissioning Plan Direction (CPD) Access Targets.

SPPG apply a variance of 5%, when comparing actual performance with expected performance, this is assessed in line with the RAG key below.

| |
|---------------------|
| less than -5% |
| between -5% and -1% |
| between 0% and 5% |
| greater than 5% |

Based on the percentage of metrics recorded as red, the Western Trust had the lowest % reported, across the five Trusts, during November and December 22. The Trust reported 48% in October, 28% in November and 38% in December. The Trust cumulative position reported for Quarter 3 (October to December 22) was 41%; we were one of two Trusts regionally with the lowest % of metrics recorded as red during this Quarter.

The RAG assessment of Western Trust actual performance against the expected targets for December 22 is set out in the table on Page 3.

The areas where performance has improved or been maintained when compared to November 2022 include: Domiciliary Care, Initial Family Assessments, Child Protection Case Conferences (three metrics), Red Flag 1st Outpatient, District Nursing, Inpatients, Endoscopy, Imaging Diagnostic (MRI & CT) and Cardiac Services (Cardiac MRI, Cardiac CT & Cath Lab procedures).

Service areas with monthly performance that is more than 5% below the SDP target include:

Acute Services

- Cancer activity delivered (14, 31 & 62 Day)
- Cancer access performance (62 Day)
- Outpatients
- Elective Care – Day cases
- Cardiac Services - Echo
- Unscheduled Care (Weekend Discharge Rates & Length Of Stay)

Community Services

- Adult Social Care – Adult Day Care
- Adult Mental Health & Dementia (New)
- Child & Adolescent Mental Health Services (New & Review)
- Allied Health Professionals – Occupational Therapy & Orthotics (New & Review), Dietetics (New), & Podiatry (Review)

- Community Dental

In December 22, there are three metrics where the RAG assessment has deteriorated to 'red' when compared to the previous month:

- Cancer 14 day activity (RAG Blue in November to RAG Red in December)
- Outpatients (RAG Green in November to RAG Red in December)
- Adult Day Care (RAG Amber in November to RAG Red in December)

Trust Board were briefed last month on the impact of Industrial Action across Trust services. The areas which saw our performance impacted include:

- Outpatients: **-14%** (RAG Red) with 1585 cancellations. Inclusion of the lost capacity, less DNA rate, the Trust would have achieved **-5%** (RAG Amber).
- Inpatients: **-2%** (RAG Amber) with 11 cancellations. Inclusion of the lost capacity, the Trust would have achieved **1%** (RAG Green).
- Day Case: **-6%** (RAG Red) with 109 cancellations. Inclusion of the lost capacity, the Trust would have achieved **2%** (RAG Green).

Appendix 1 provides a detailed assessment of the December 22, and Quarter 3 (October – December 22) SPPG expected target and activity delivered for each service area.

SDP OVERALL RAG ASSESSMENT (December Performance)

| WESTERN TRUST | Red | Amber | Green | Blue | Variation in RAG |
|--|---|----------|----------|-----------|------------------|
| Adult Day Care | | | | | ↓ |
| Adult Short Breaks | M6/Q3 position to be reported in February | | | | |
| Domiciliary Care Hours | M6/Q3 position to be reported in February | | | | |
| Children's Social Care - IFA | | | | | ↔ |
| Child Protection <15 days | | | | | ↔ |
| Child Protection <3 months | | | | | ↑ |
| Child Protection <6 months | | | | | ↑ |
| Mental Health (new and review combined) | | | | | ↔ |
| Cancer -14-day performance | | | | | ↔ |
| Cancer -31-day performance | | | | | ↔ |
| Cancer -62-day performance | | | | | ↔ |
| Cancer - 14 day activity | | | | | ↓ |
| Cancer - 31 day activity | | | | | ↔ |
| Cancer - 62 day activity | | | | | ↔ |
| Red Flag - 1st OP appointment | | | | | ↔ |
| Stroke - Thrombolysis (1 x R, 1 x A = A) | | | | | |
| Direct to Stroke Unit (2 x R = R) | | | | | |
| Community Nursing | | | | | ↔ |
| AHP (new and review combined) | | | | | ↑ |
| MRI | | | | | ↓ |
| CT | | | | | ↓ |
| NOUS | | | | | ↓ |
| Cardiac MRI | | | | | ↑ |
| Cardiac CT | | | | | ↑ |
| Echo | | | | | ↔ |
| Cath Lab | | | | | ↔ |
| Cardiac Surgery | | | | | |
| Community Dental | | | | | ↔ |
| CDS GA | | | | | ↔ |
| NIAS handover (3 x R, 1 x A = R) | | | | | |
| LOS (2 x R = R) | | | | | ↓ |
| Discharge (2 x R = R) | | | | | ↔ |
| OP (new and review combined) | | | | | ↓ |
| IPDC combined | | | | | ↓ |
| MPH IP | | | | | |
| MPH DC | | | | | |
| Endoscopy | | | | | ↔ |
| TOTALS | 13 | 6 | 3 | 10 | |

TREND (On previous Month / Quarter)

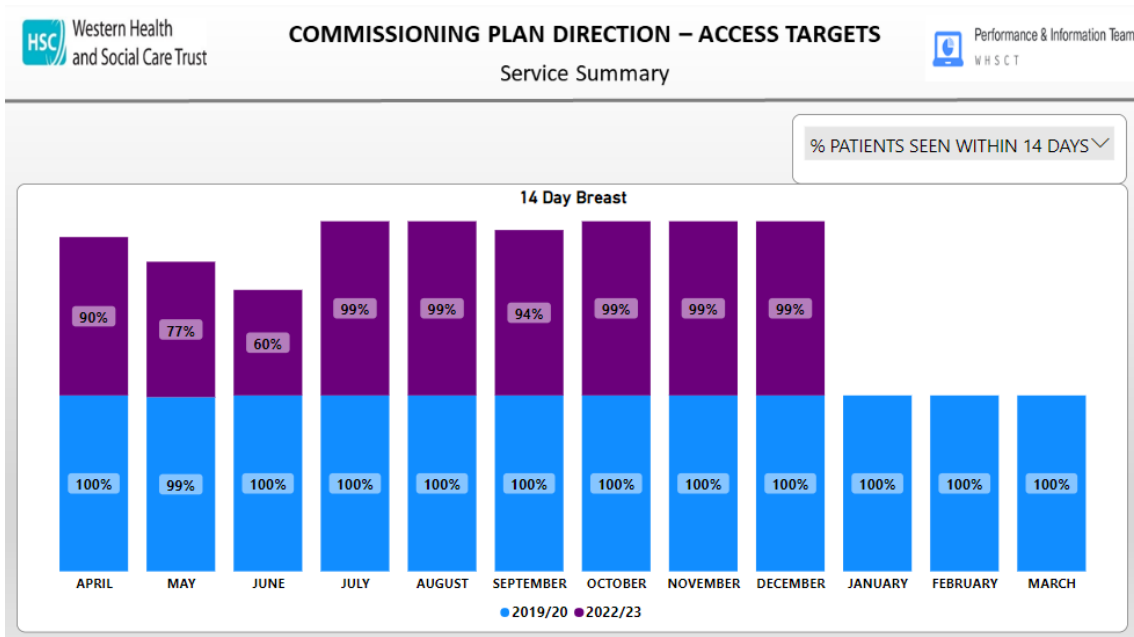
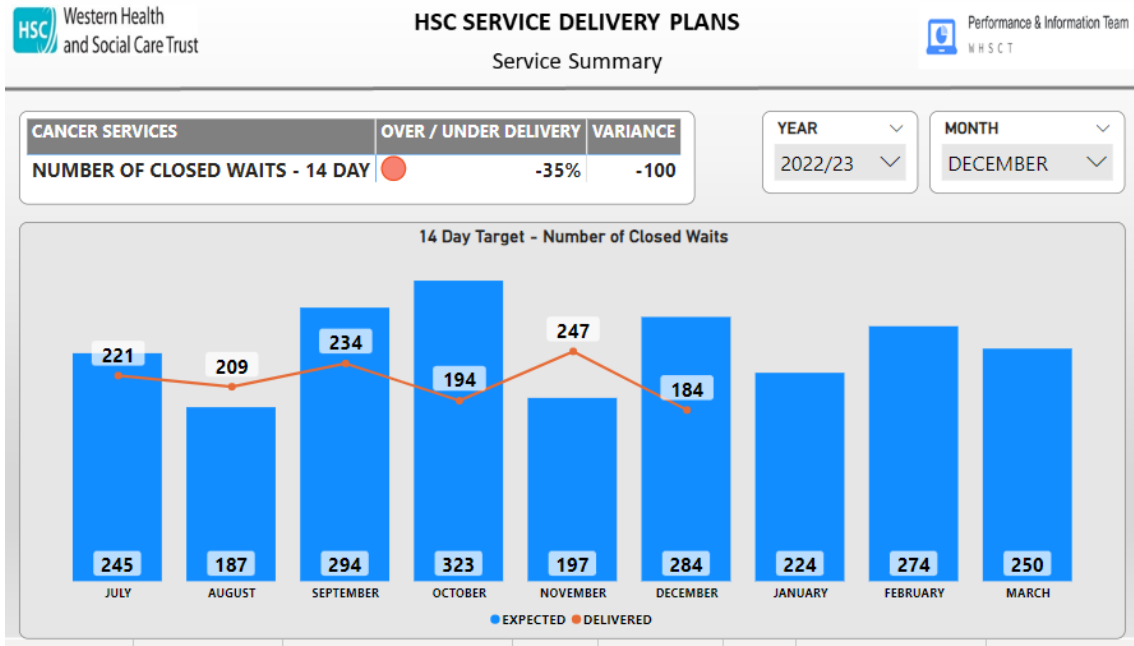
| | |
|---------------------------------|---|
| Performance/Activity Improving | ↑ |
| Performance/Activity Decreasing | ↓ |
| Performance/Activity Static | ↔ |

ACUTE

Cancer services – Service Delivery Plan & Access Performance

SPPG expected target for Service Delivery Plan Quarter 3 (October to December 22) is to maintain 2021/22 Quarter 3 activity.

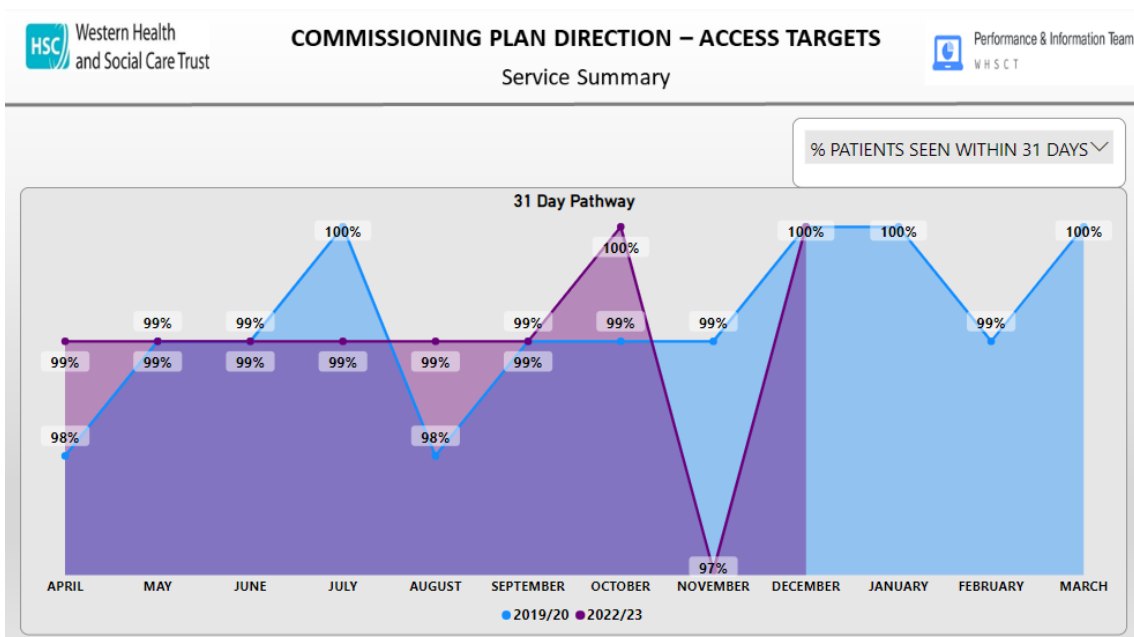
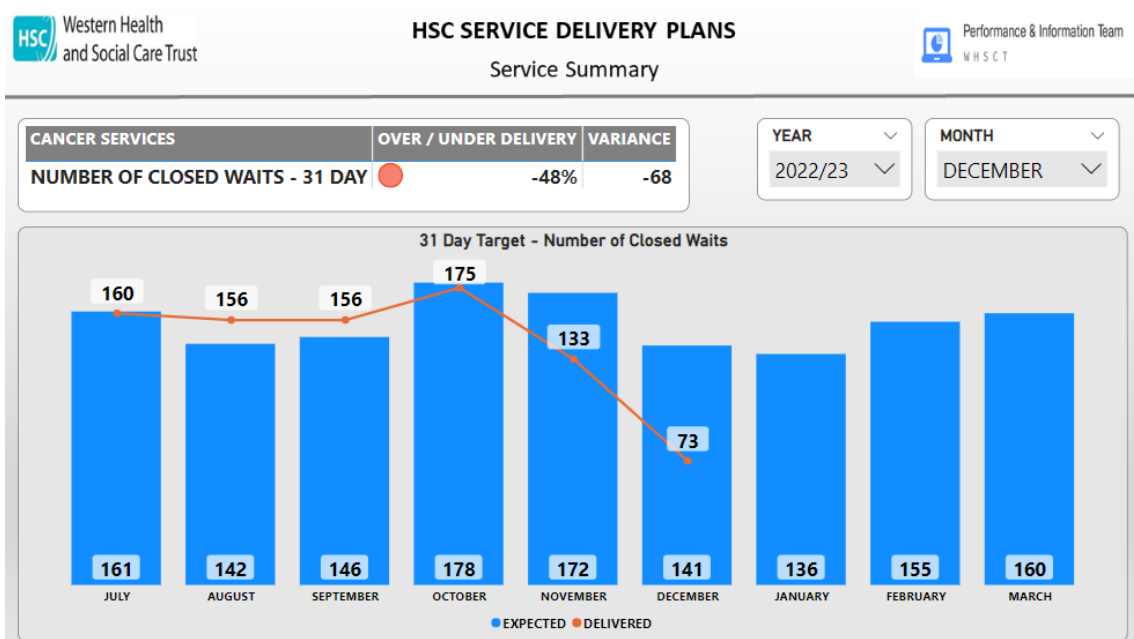
14 Day Target: activity levels are lower in December 22, however **99%** performance was achieved against the Ministerial Cancer access target; with one patient waiting longer than 14 days (longest wait 21 days). The underperformance in December 22 reflects a lower level of demand for the service when compared to the baseline period.



31 Day Target: activity level below expected targets in November and December 22, however this target requires a one month time lag. The activity will be re-run on 7th February 23, in line with the SPPG agreed reporting calendar, to validate performance for previous months.

Overall, there has been improvement in Trust performance against the 31 Day Target once validated. The July to October 22 activity is broadly in line or exceeded the expected targets.

In December 22, performance against the Ministerial Cancer access target remains strong with **100%** of patients commencing treatment within 31 days. The Trust has met this target each month this year with the exception of November 22. Regionally, the Trust continues to be the only Trust to achieve a high level of performance for this Ministerial target.

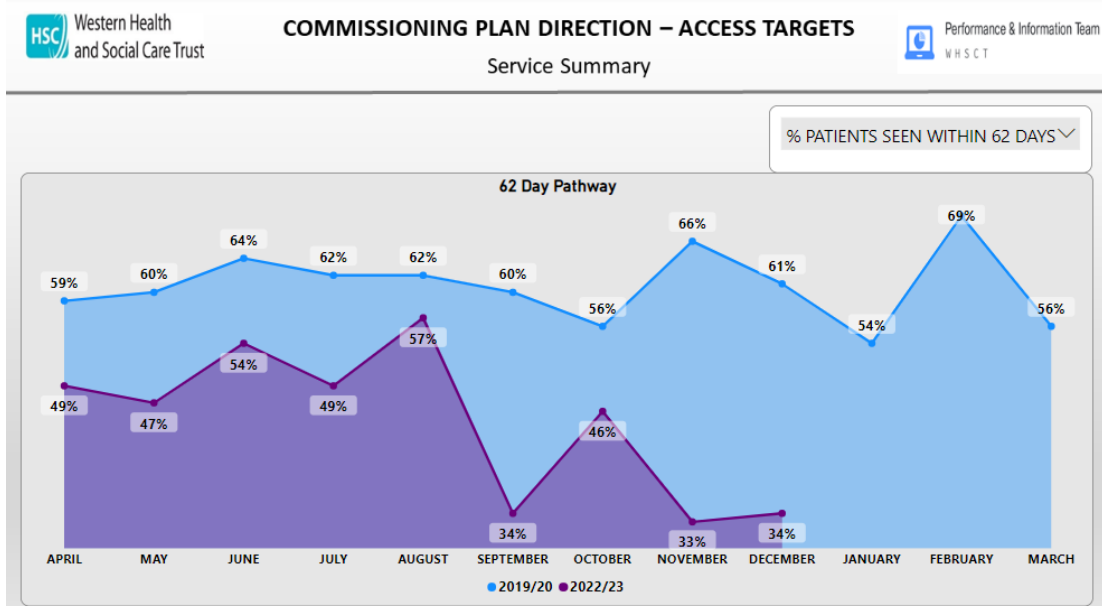
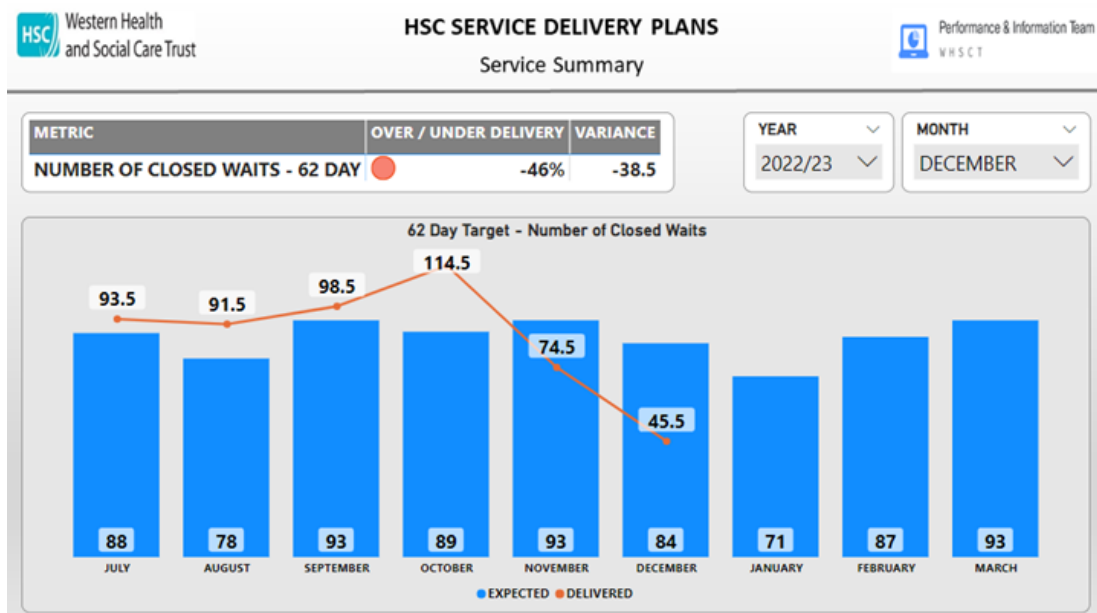


62 Day Target: activity delivered is below the expected target, however this target requires a 2 month time lag for validation. The activity will be re-run on 7th February 23, in line with the SPPG agreed reporting calendar, to validate performance for previous months.

The activity targets for July to October 22 have been exceeded on validation. The cumulative number of closed waits completed during Quarter 2 (July to September) and Quarter 3 (October to December) (518) reflects **99%** of the cumulative SPPG expected target (525) and **99%** of pre-pandemic level of delivery; this will increase once validation has completed for November and December.

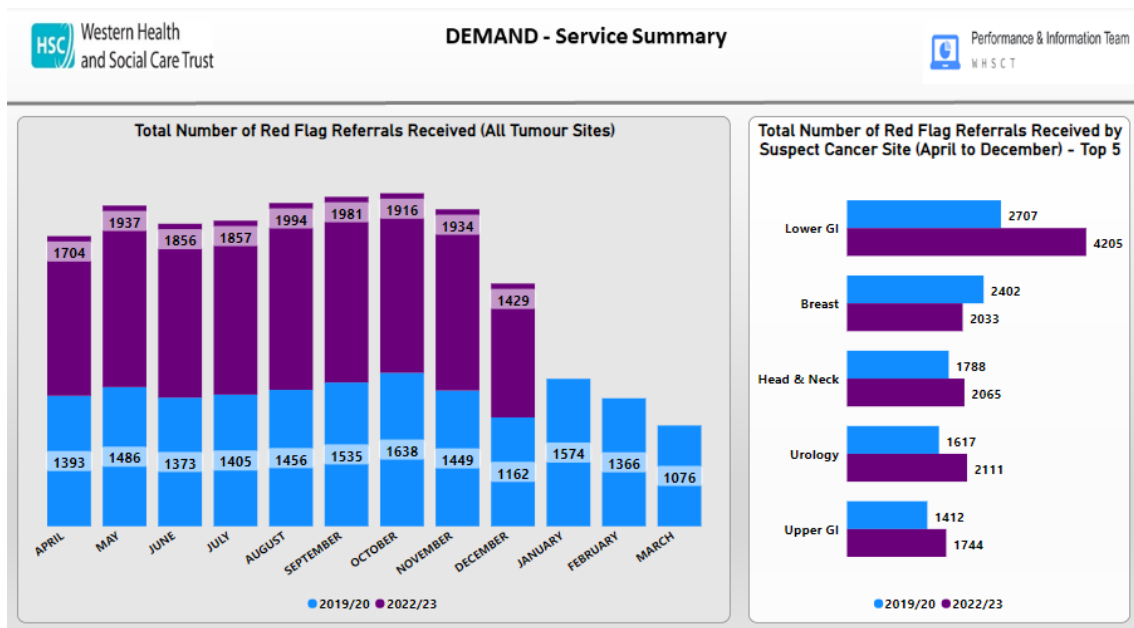
Access target not achieved in December 22, with **34.1%** of patients commencing treatment within 62 days. Access performance remains extremely challenging and continues to be impacted by an increase in red flag referrals, as detailed on the next page.

SPPG held a cancer performance meeting with the Trust on 11 January 2023. The Trust has committed to sharing its improvement plan and key areas with SPPG, and will focus on TP Biopsy, pathology and cancer tracking at the next performance meeting.



In December 22, the Total Number of Red Flag Referrals Received (All Tumour Sites) has increased **23%** when compared to December 2019 (pre-pandemic) and **4%** when compared to the baseline year 2021/22.

During April to December 22, the Trust have seen a **29%** increase (**3,711 additional red flag referrals received**) compared to the same period in 2019/20 and a **9%** increase (**1,306 additional red flag referrals received**) compared to the baseline year 2021/22.



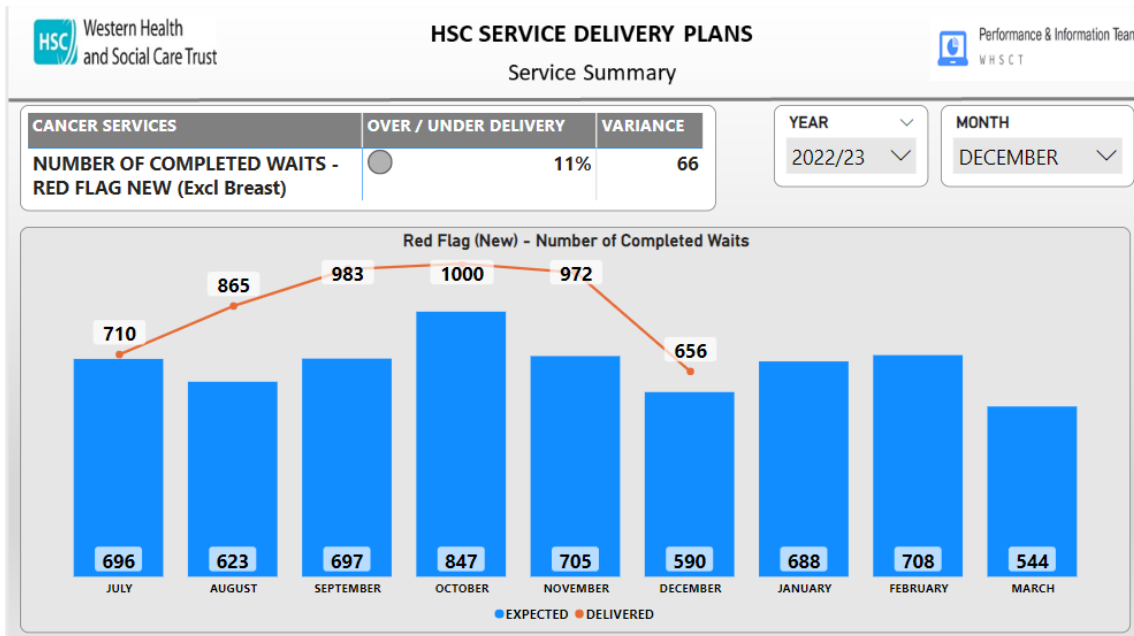
Red Flag (New) Completed Waits (Excluding Breast)

SPPG expected target for Quarter 3 (October to December 22) is to maintain 2019/20 Quarter 3 activity.

During the October 22, Performance and Transformation Executive Board meeting, it was agreed that the metric “red flag patients who had first outpatient appointment within 14 days (excluding breast)” would be replaced by “the total number of red flag first outpatient appointments”.

Western Trust performance has exceeded SPPG expected targets each month from July 22 with **111%** achieved in December 22.

The cumulative number of completed waits during Quarter 2 (July to September) and Quarter 3 (October to December) (5,186) reflects **125%** of the cumulative SPPG expected target (4,158).

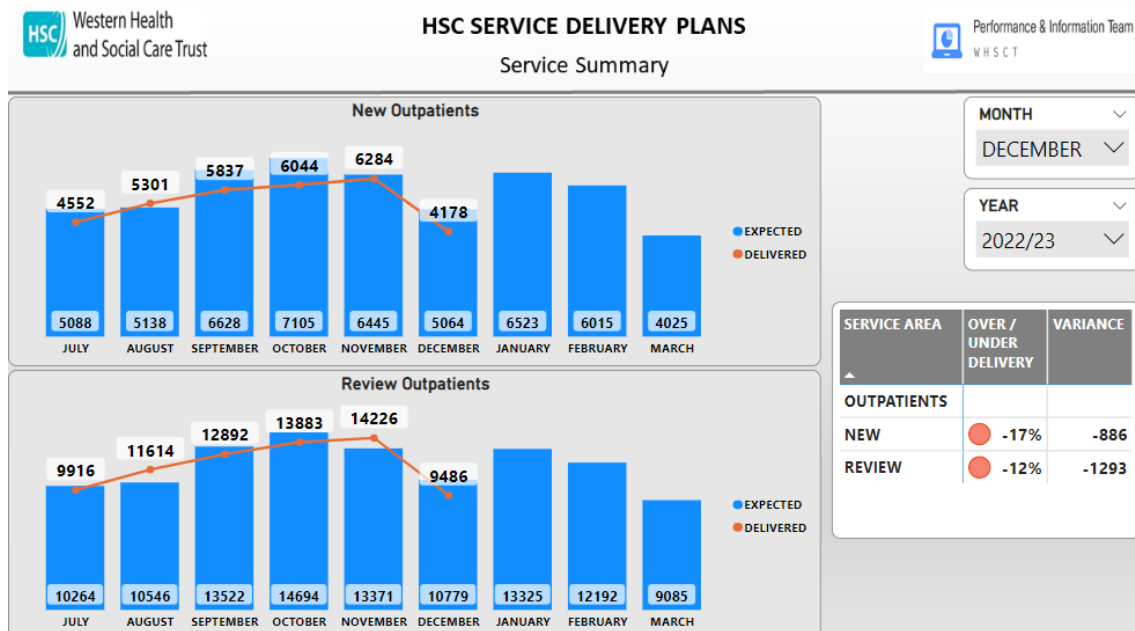


Outpatients – Service Delivery Plan

SPPG expected target is 100% of 2019/20 activity from September 22.

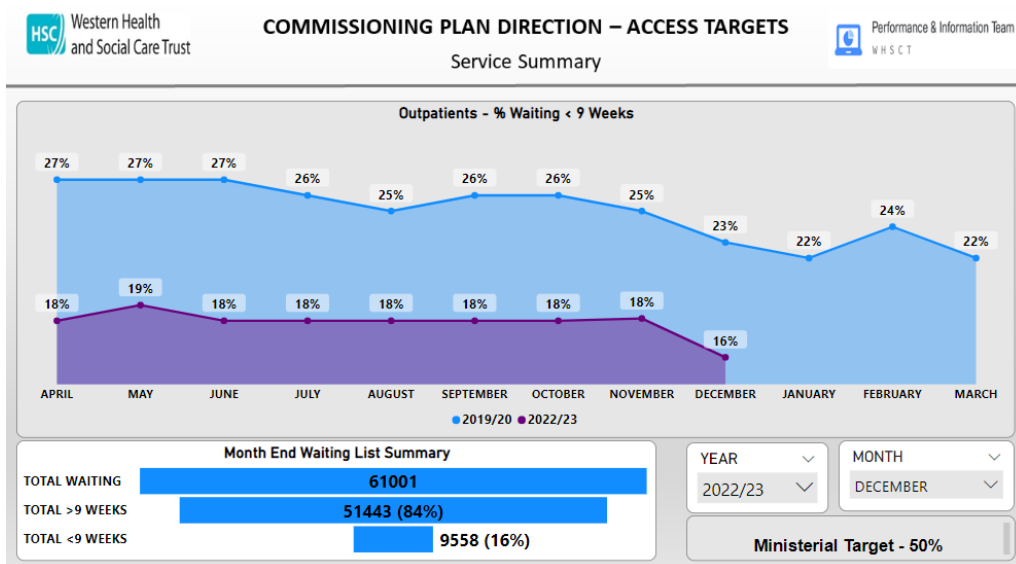
Overall the number of New and Review activity levels reflect an upward trend from July to November 22 (+6,042 attendances in November 22 compared to July 22) with a reduction in December attendances. The cumulative number of attendances during Quarter 2 (July to September) and Quarter 3 (October to December) (104,213) reflects **96%** of the cumulative SPPG expected target (108,644) and **91%** of pre-pandemic level of delivery.

December 22 activity levels were impacted by cancellations due to industrial action. With the inclusion of lost capacity (1458), the Trust would have achieved **95%** of expected Target and pre pandemic level (-14% actual to -5% when adjusted for the impact of Industrial Action). Other factors continue to impact capacity; including vacant consultant posts which are out for recruitment, sick leave, reduction of middle grade support staff and the increasing complexity of patients which reduces the number of sessions.



Outpatients – Access Performance

In December 22, the overall number waiting and those waiting longer than 9 weeks has increased within Outpatients compared to the previous month. A validation of outpatient waiting lists, focused on the longest waiters, has been undertaken and seen the removal of 4,171 patients across a number of specialities.



Elective Care – Service Delivery Plan

Inpatients and Day Cases

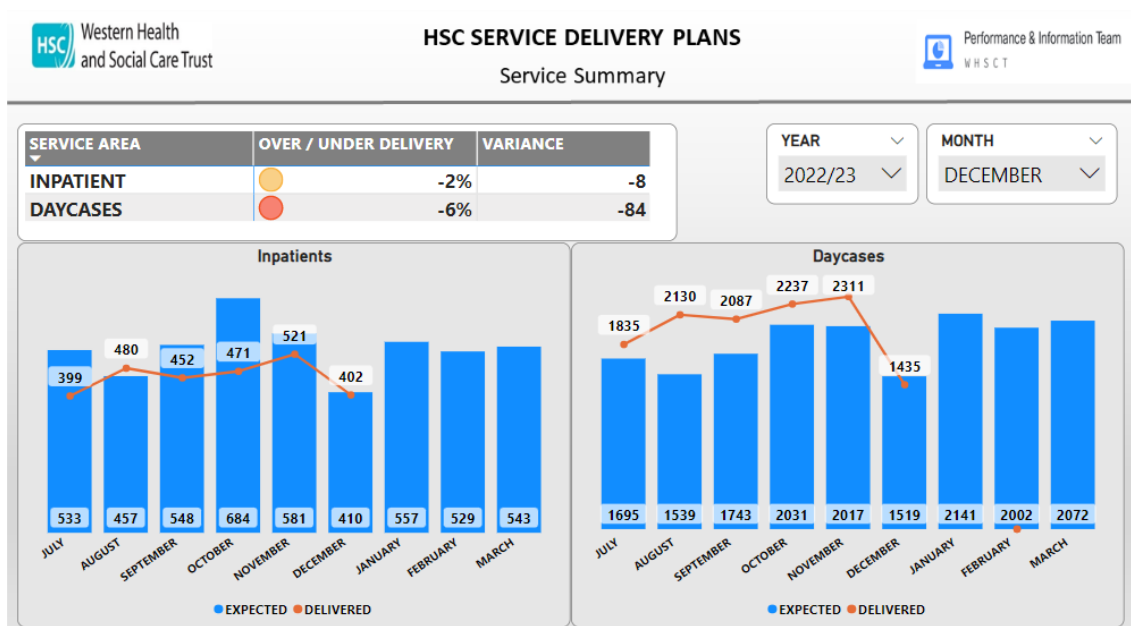
SPPG expected target for Quarter 3 (October to December 22) is 90% of 2019/20 Quarter 3 activity.

Inpatient activity levels are marginally below expected targets in December with **98%** achieved; this activity reflects **88%** of pre-pandemic levels. Day case activity reflects an upward trend from July to November 22; the SPPG target was exceeded each month from July 22 with **94%** achieved in December 22; **85%** of pre-pandemic levels. Regionally, the Western Trust is the only Trust to have exceeded the Day case targets in Quarter 2 and October and November 22.

The impact of cancellations, due to the industrial action in December 22, saw activity levels falls below the expected targets. With inclusion of the lost capacity (11 Inpatients and 109 Day cases), the Trust would have achieved **101%** Inpatient and **102%** Day Case of expected Target (Inpatient: -2% to 1% and Day case: -6% to 2%). Access to theatre sessions, consultant vacancies and reduction in available elective beds across the Trust continue to challenge Inpatient performance.

The cumulative number of Inpatients during Quarter 2 (July to September) and Quarter 3 (October to December) (2,725) reflects **85%** of the cumulative SPPG expected target (3,213) and **72%** of pre-pandemic level of delivery.

The cumulative number of Day cases during Quarter 2 (July to September) and Quarter 3 (October to December) (12,035) reflects **114%** of the cumulative SPPG expected target (10,544) and **97%** of pre-pandemic level of delivery.

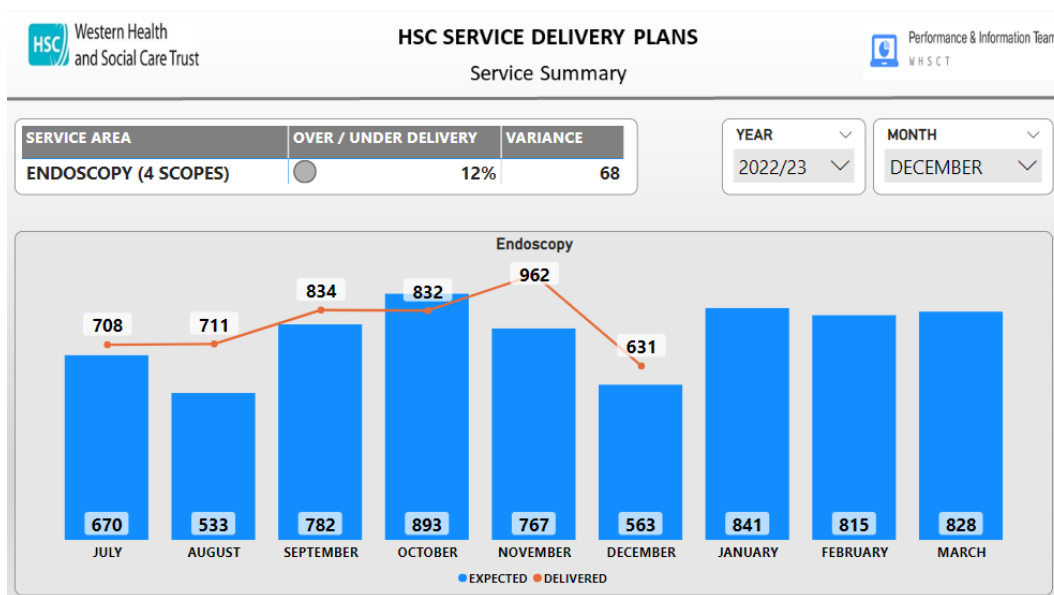


Endoscopy

SPPG expected target for Quarter 3 (October to December 22) is 90% of 2019/20 Quarter 3 activity.

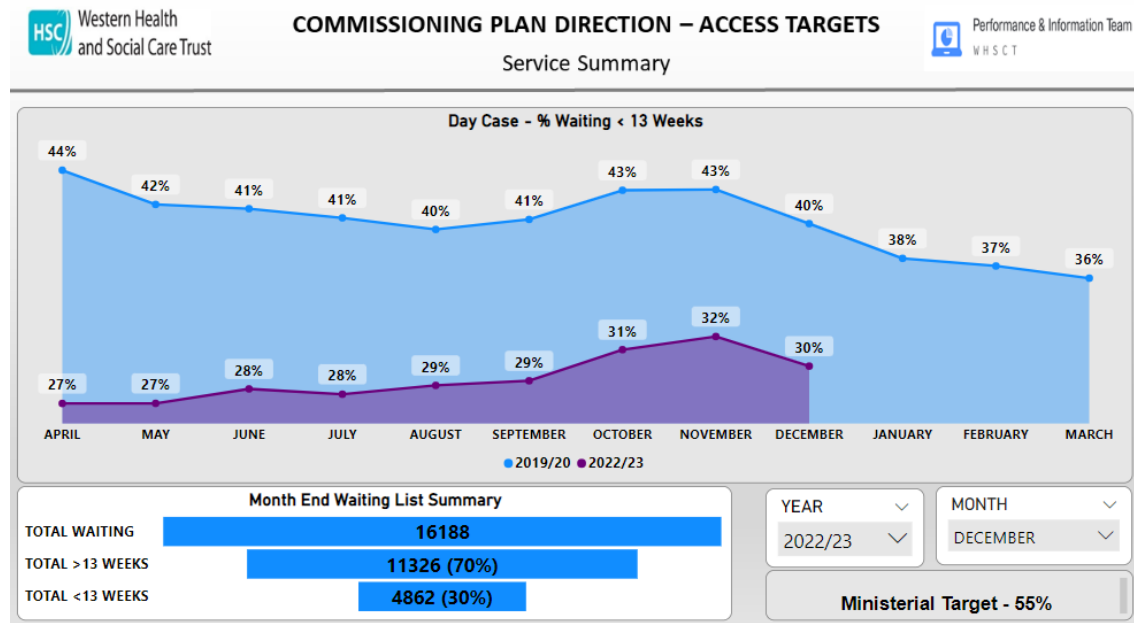
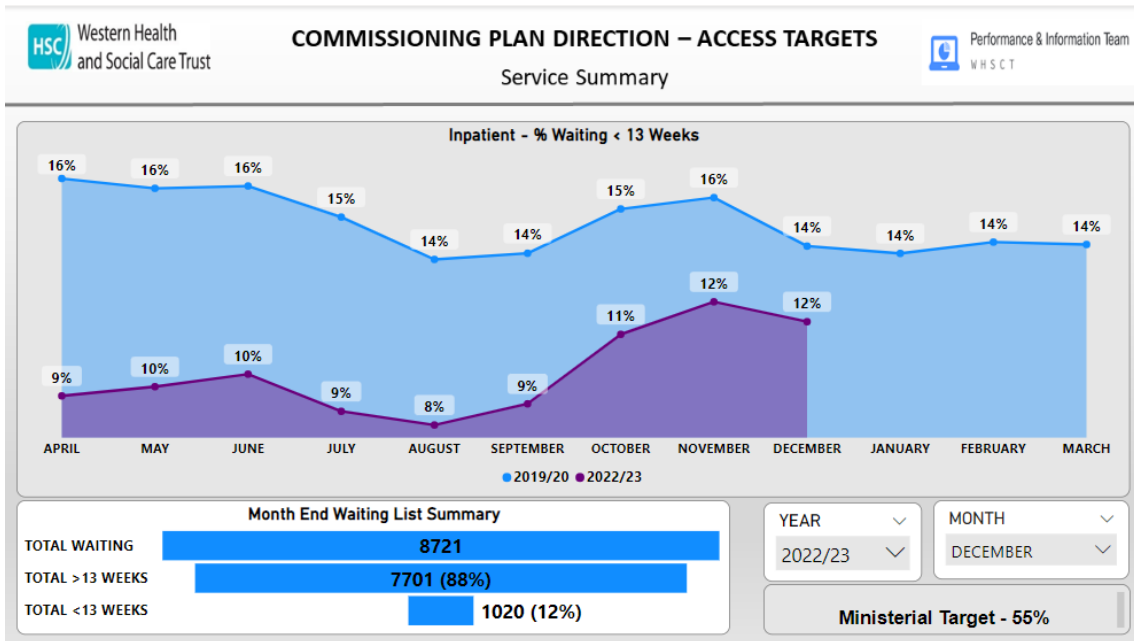
SPPG target has been exceeded each month from July to December 22 with the exception of October 22, following activity validation. The 15 day regional clinical coding standard requires a one month time lag for reporting.

Cumulatively, during Quarter 2 (July to September) and Quarter 3 (October to December) the service have achieved **111%** of the cumulative SPPG expected target; delivering an additional 470 endoscopies. This activity reflects **95%** of pre-pandemic levels. This will increase further when activity is validated.



Elective Care – Access Performance

December 22 performance for Inpatient and Day case treatment (including scopes) has plateaued compared to the gradual improvement from August 22.

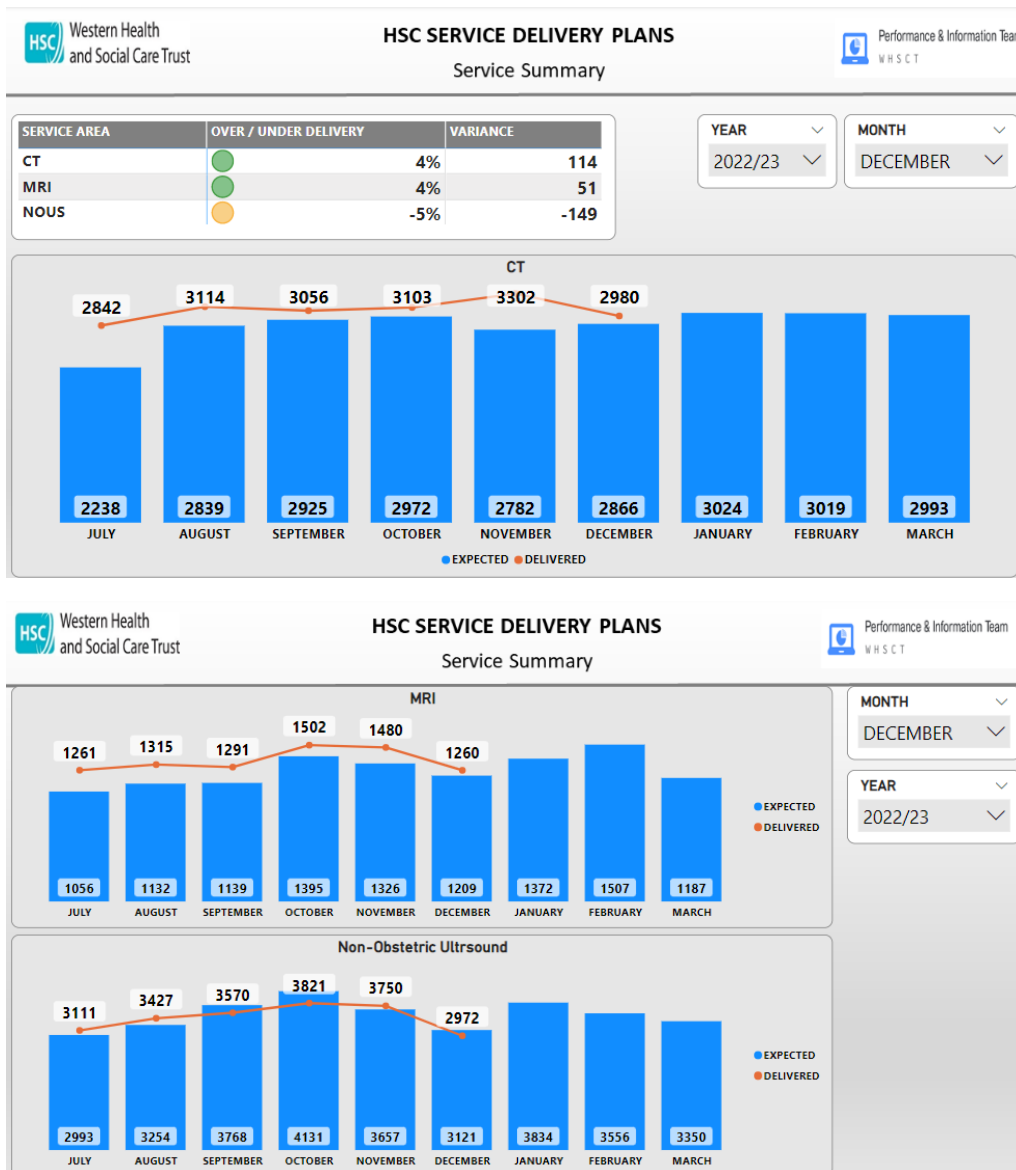


Imaging Diagnostics – Service Delivery Plan

SPPG expected target for Quarter 3 (October to December 22) is 100% of 2019/20 Quarter 3 activity or if 2021/22 position was greater, this should be maintained for the same comparable month during 2022/23.

A high level of delivery against the expected targets continues to be maintained across the three areas. CT and MRI activity continues to achieve or exceed SPPG expected targets with Non Obstetric Ultrasound (NOUS) achieving **95%** in December 22. Month on month the SBA target is being met across these modalities.

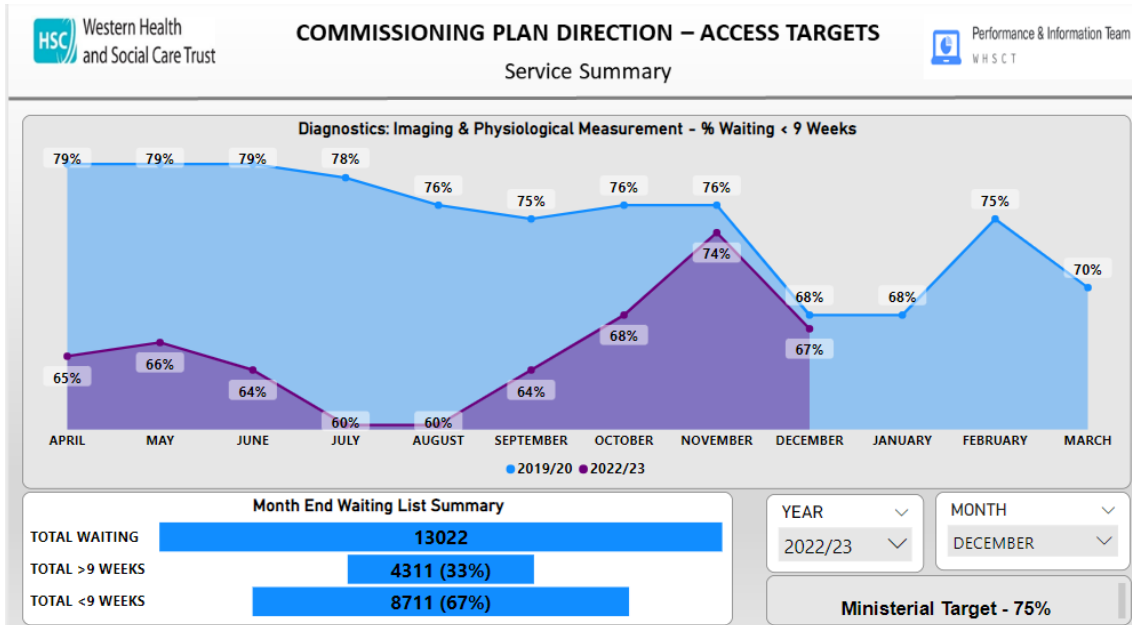
The cumulative activity delivered, across the three areas, during Quarter 2 (July to September) and Quarter 3 (October to December) reflects **105%** of the cumulative SPPG expected target, delivering an additional 2,352 tests. This represents **102%** of pre-pandemic activity.



Imaging Diagnostics – Access Performance

Access performance reflects an improving trend from August 22 with a dip in December 22. **67%** of patients were waiting less than 9 weeks for a diagnostic test with 4,311 waiting greater than 9 weeks. Performance in November and December 22, is broadly in line with 2019/20.

In December 22, **88%** of urgent patients were reported within 2 days.



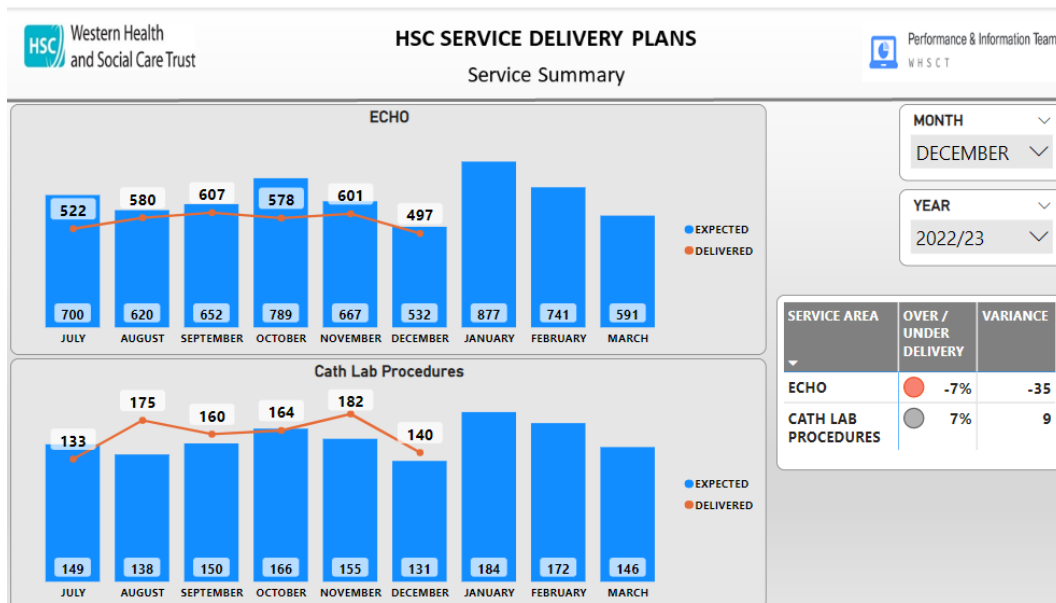
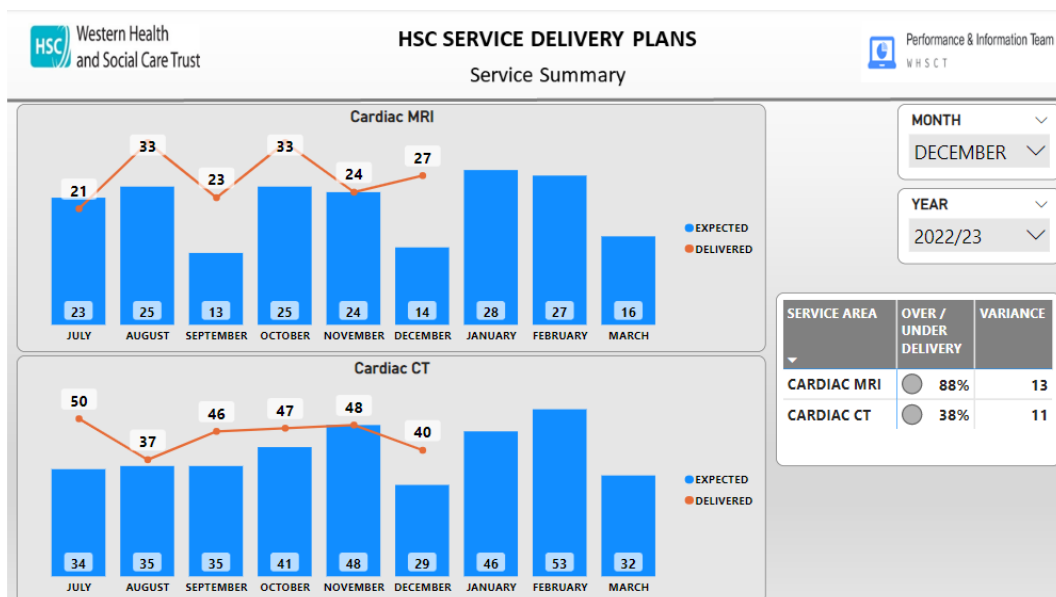
Cardiac Services – Service Delivery Plan

SPPG expected target for Quarter 3 (October to December 22) is 90% of 2019/20 Quarter 3 activity.

Activity performance in December 22 remains strong with SPPG targets exceeded in Cardiac MRI, Cardiac CT and Cath Lab procedures.

The cumulative activity delivered, across these three areas, during Quarter 2 (July to September) and Quarter 3 (October to December) reflects **112%** of the cumulative SPPG expected target; delivering an additional 147 procedures (36 Cardiac MRI, 46 Cardiac CT and 65 Cath Lab procedures). This reflects **95%** of pre-pandemic levels;

Echo activity is marginally below the SPPG expected target in December 22 with **93%** achieved and **84%** of pre-pandemic level of delivery. Reduced capacity continues to impact this service due to a vacant post and an unfilled maternity leave.



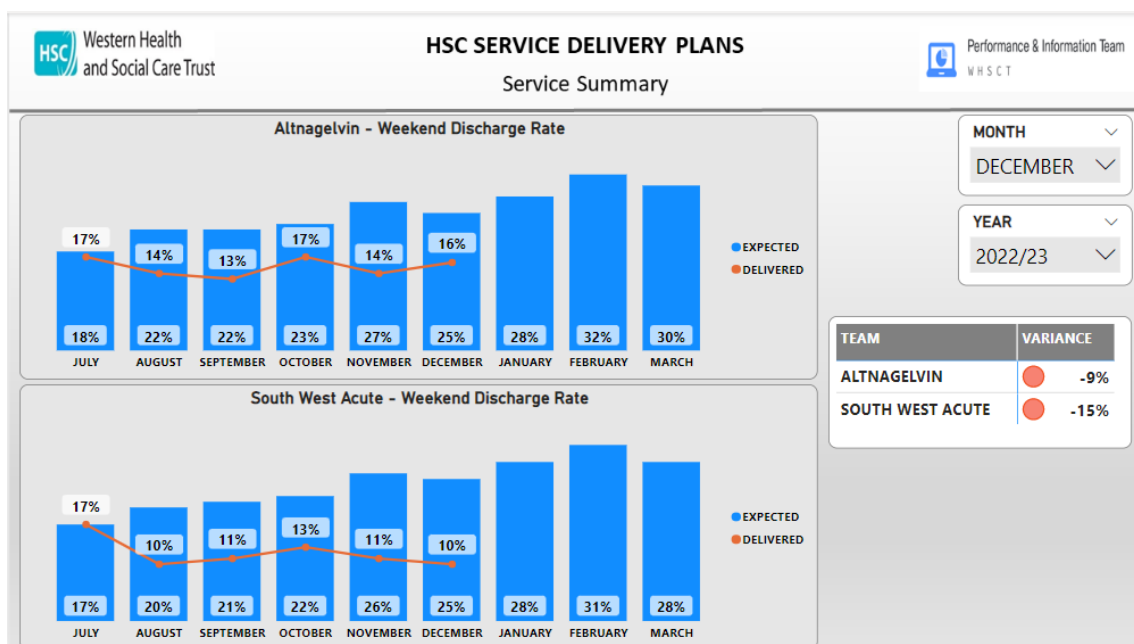
Unscheduled Care – Service Delivery Plan

Emergency Department attendances are higher in December 22 compared to previous years, however performance against the 4 hour Ministerial targets has worsened due to overall pressures in hospital flow.

| Altnagelvin Hospital | | | | | | | | |
|----------------------|----------------------|-------|--------------|--------------|---------------------|----------------------------|------------------------------|------------------------------|
| Month | Emergency Department | | | | Inpatients - Adults | | | |
| | Attends (Arrivals) | % 4hr | No >12 hours | Longest Wait | Non Elective Adms | Non EI Avg Length of Spell | Complex Discharges | |
| | | | | | | | Number of Complex Discharges | % Discharged within 48 hours |
| December 19 | 5,286 | 46% | 636 | 53.7 | 1,254 | 7.15 | 204 | 67% |
| December 20 | 4,263 | 55% | 544 | 50.9 | 1,055 | 7.41 | 189 | 88% |
| December 21 | 5,300 | 39% | 818 | 64.0 | 1,167 | 7.30 | 172 | 83% |
| December 22 | 5,501 | 28% | 1,174 | 67.0 | 1,222 | 7.46 | 191 | 85% |

| South West Acute Hospital | | | | | | | | |
|---------------------------|----------------------|-------|--------------|--------------|---------------------|----------------------------|------------------------------|------------------------------|
| Month | Emergency Department | | | | Inpatients - Adults | | | |
| | Attends (Arrivals) | % 4hr | No >12 hours | Longest Wait | Non Elective Adms | Non EI Avg Length of Spell | Complex Discharges | |
| | | | | | | | Number of Complex Discharges | % Discharged within 48 hours |
| December 19 | 3,194 | 51% | 275 | 59.9 | 642 | 7.22 | 221 | 93% |
| December 20 | 2,372 | 58% | 352 | 65.0 | 506 | 9.18 | 103 | 86% |
| December 21 | 2,981 | 50% | 386 | 63.9 | 489 | 9.85 | 30 | 40% |
| December 22 | 3,261 | 47% | 518 | 80.0 | 469 | 11.28 | 53 | 72% |

Weekend discharge remains an area of regional focus, however there is an acceptance that a range of hospital and community measures will be required to improve this position.



Stroke Services – Service Delivery Plan

Thrombolysis: this metric is demand driven and fluctuates monthly. It is reported by SPPG on a rolling 3-monthly average figure.

Altnagelvin: the Quarter 3 target is based on a 3 month average of 15%. The October to December 22 average performance is marginally below expected target with **13%** achieved.

South West Acute: the Quarter 3 target is based on a 3 month average of 14%. The October to December 22 average performance is marginally below expected target with **13%** achieved.

% Admitted < 4 Hours

This information is extracted from SPPG Return. SPPG source this from the SSNAP Return.

In Quarter 3, the % variation against the expected target was -12% in Altnagelvin and -15% in South West Acute.

Although South West Acute performance is 15% below expected target in quarter 3, it is the highest performing 'direct to stroke unit in <4 hrs' within Northern Ireland, achieving 73%.

COMMUNITY CARE

Adult Social Care – Service Delivery Plan

Adult Day Care Attendances

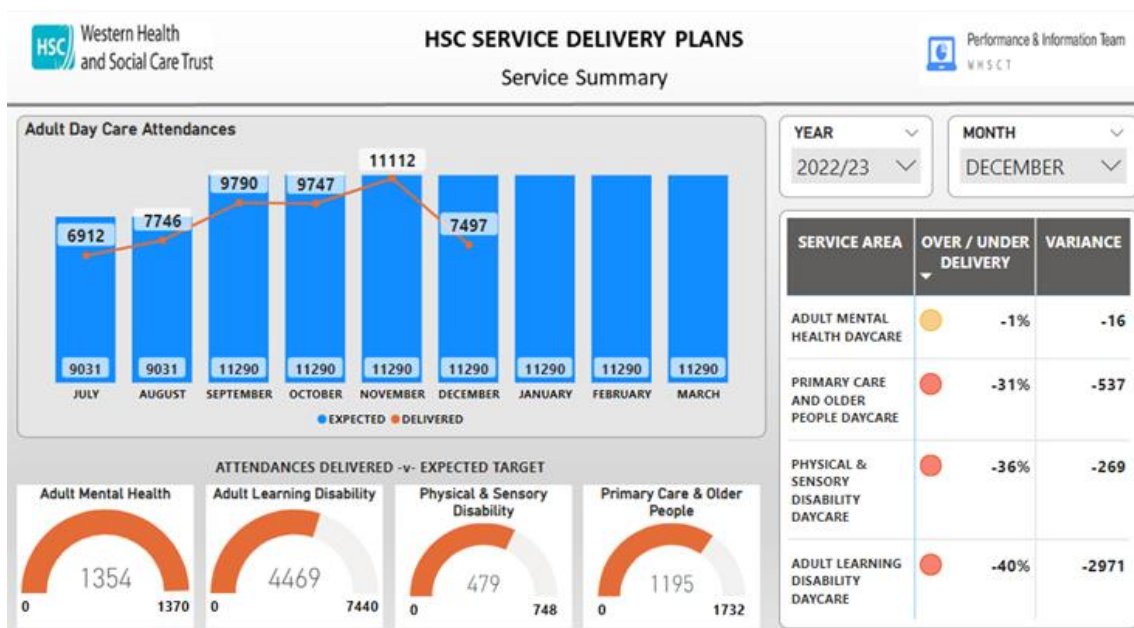
SPPG expected target is 100% of pre-pandemic level (February 2020) from September 22.

Overall the number of monthly attendances reflects an upward trend from July to November 22 (+4,200 attendances in November 22 compared to July 22) with a reduction in December attendances; achieving **66%** of SPPG expected target.

Despite the dip in December 22 performance, the cumulative attendances (28,356) delivered in Quarter 3 (October to December) demonstrates **84%** of the cumulative SPPG expected target; with an additional 3,908 attendances delivered compared to Quarter 2 (July to September) (24,448). As a result of the improved position, the fortnightly SPPG Remobilization meetings have been stood down with Adult Learning Disability meetings remaining in place.

December performance was impacted by a number of factors including Christmas closures, inclement weather, staff training days and industrial action. The increase in December underperformance is also impacted by the comparison to February 2020 baseline; this month is not affected by seasonal centre closures. The overall December 22 attendances (7,497) reflects **88%** of December 19 attendances (8,481) (-984 attendances).

The impact from Industrial action on the 12 December 22, saw a reduction of 299 day care attendances. Inclusion of lost attendances and comparison to December 2019 baseline, the Trust would have achieved **-8%** against the 2019 baseline.



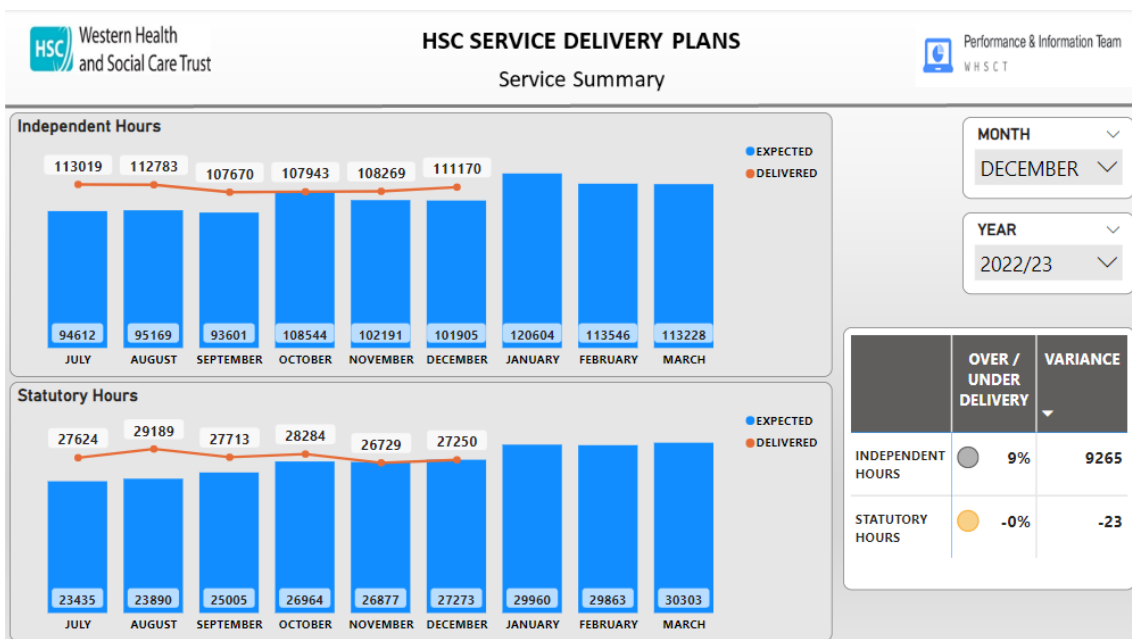
Domiciliary Care

SPPG expected target for Quarter 3 (October to December 22) is 90% of 2019/20 Quarter 3 activity.

The December 22 performance remains strong against the SPPG expected target with **109%** Independent Hours and **99%** Statutory Hours achieved.

Independent Hours: the cumulative hours delivered in Quarter 2 (July to September) and Quarter 3 (October to December) represents **111%** of the cumulative SPPG expected target; with an additional 64,832 hours delivered. This represents **94%** of pre-pandemic level of delivery.

Statutory Hours: the cumulative hours delivered in in Quarter 2 (July to September) and Quarter 3 (October to December) represents **109%** of the cumulative SPPG expected target; with an additional 13,346 hours delivered. This represents **92%** of pre-pandemic level of delivery.

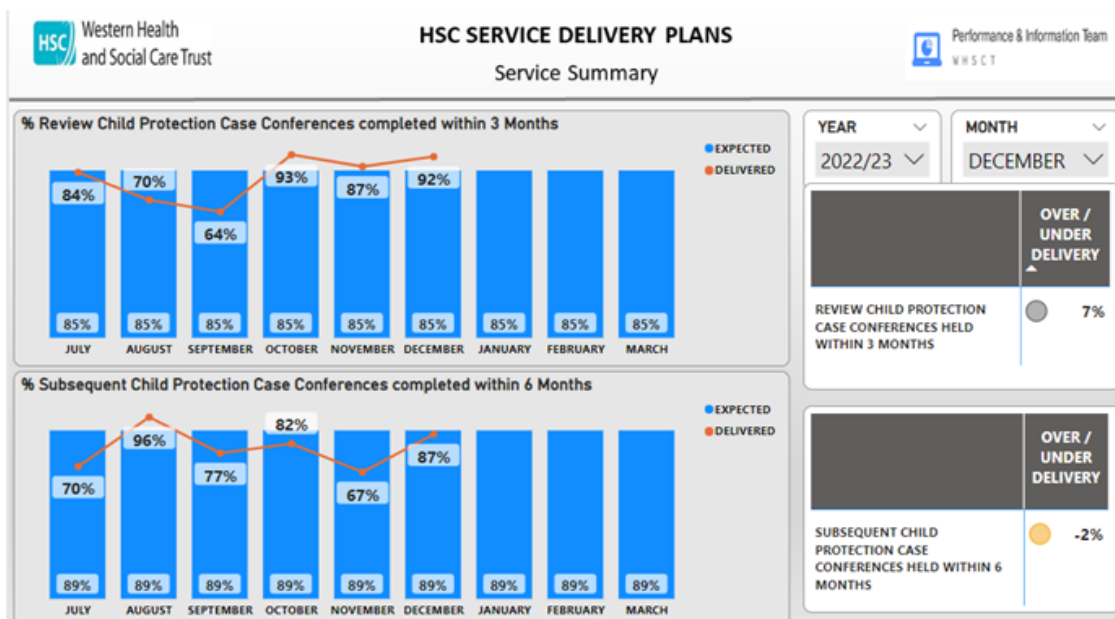
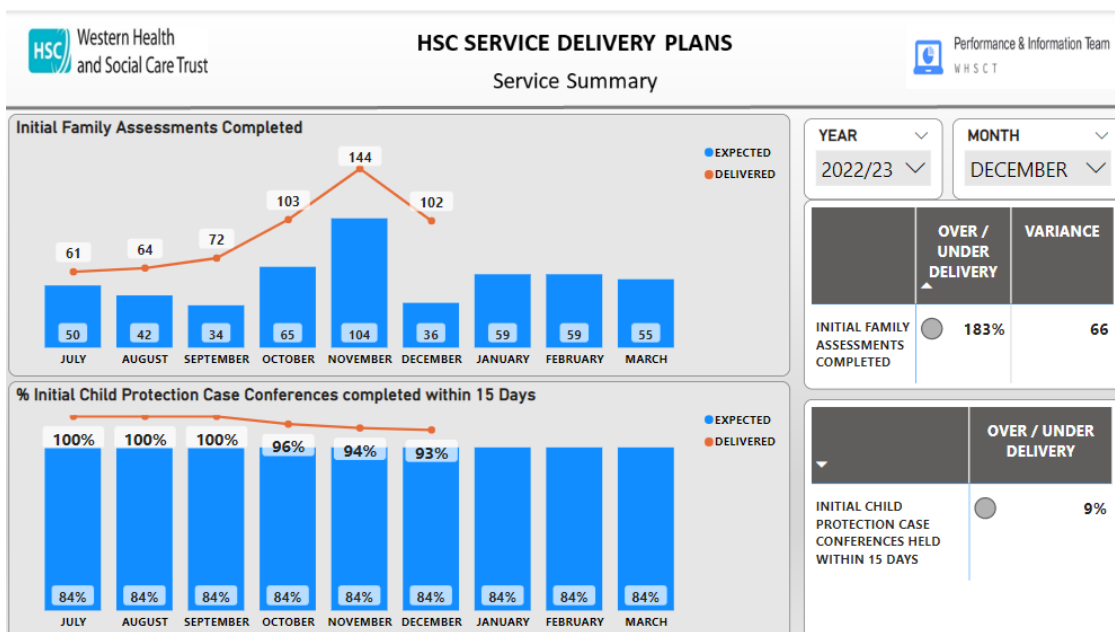


Children’s Social Care – Service Delivery Plan

The service have exceeded three of the four expected targets in December 22; Initial Family Assessments Completed, the % of Initial Child Protection Case Conferences held within 15 days and the % of Review Child Protection Case Conferences held within 3 months.

Performance for the % of Subsequent Child Protection Case Conferences held within 6 months remains marginally below expected target in December 22 but has increased compared to the previous month. These Case Conferences are scheduled within the required timeframe, however, performance is impacted by issues with conferences being quorate and cancellations due to sickness.

Regionally, the Western Trust is only Trust who exceeded the monthly target for Initial Family Assessments Completed during Quarter 2 and 3.



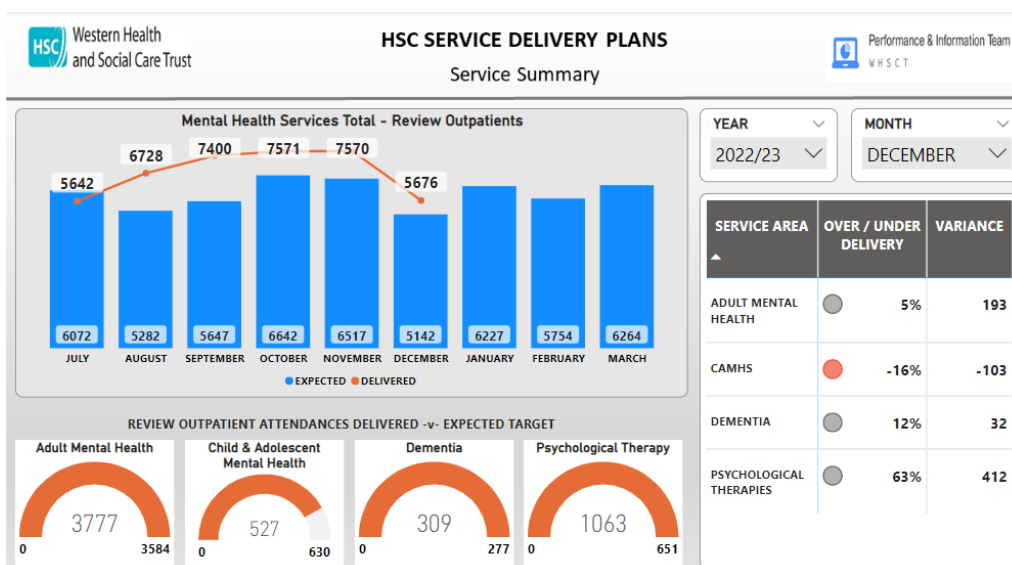
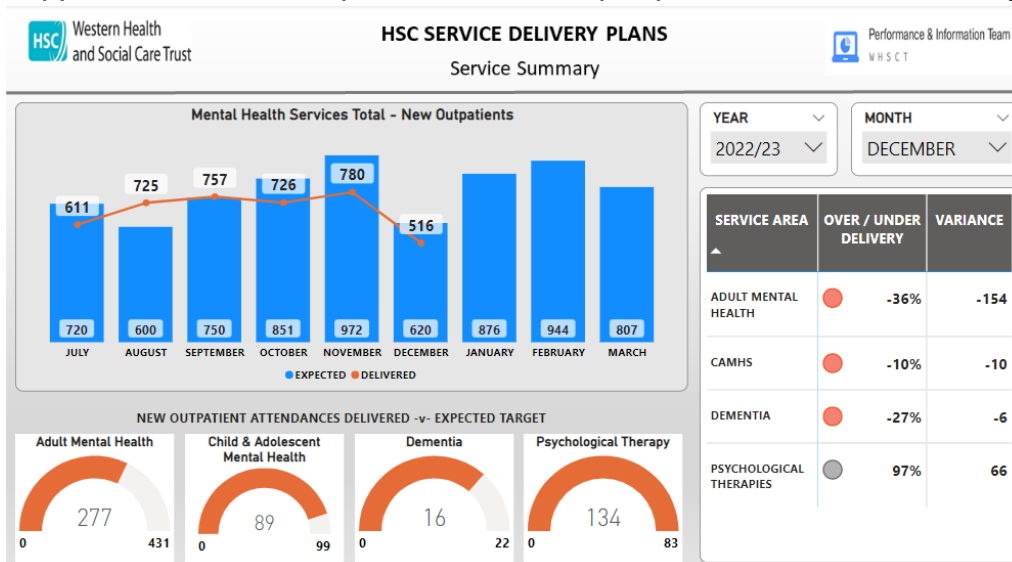
Mental Health Services – Service Delivery Plan

SPPG expected target for Quarter 3 (October to December 22) is 100% of 2019/20 Quarter 3 activity for Adult Mental Health and Dementia and 90% of 2019/20 for Psychological Therapies.

SPPG monitoring of Child & Adolescent Mental Health Service SDP activity is 100% of 2020/21 from November 22.

Activity levels in December 22 remain below expected target within Adult Mental Health and Dementia (New Outpatients) and Child & Adolescent Mental Health Service (New and Review Outpatients) with an under delivery of 170 outpatient appointments. Workforce challenges; vacant posts and sickness absence continue to impact capacity. Services continue to progress recruitment to vacant posts and continue to source other available means to increase capacity.

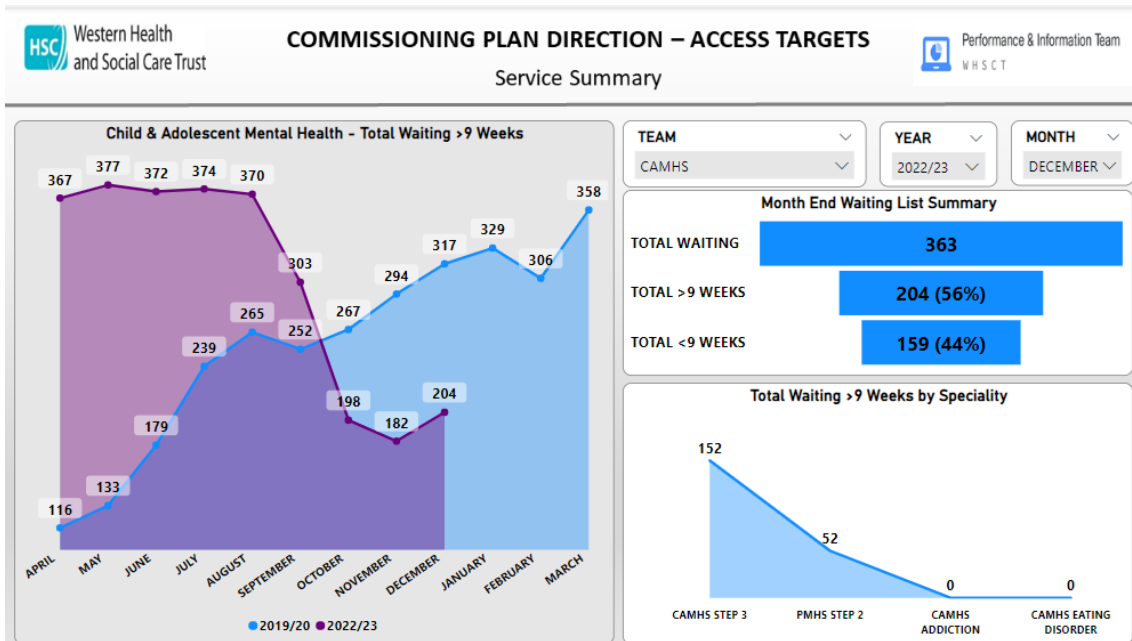
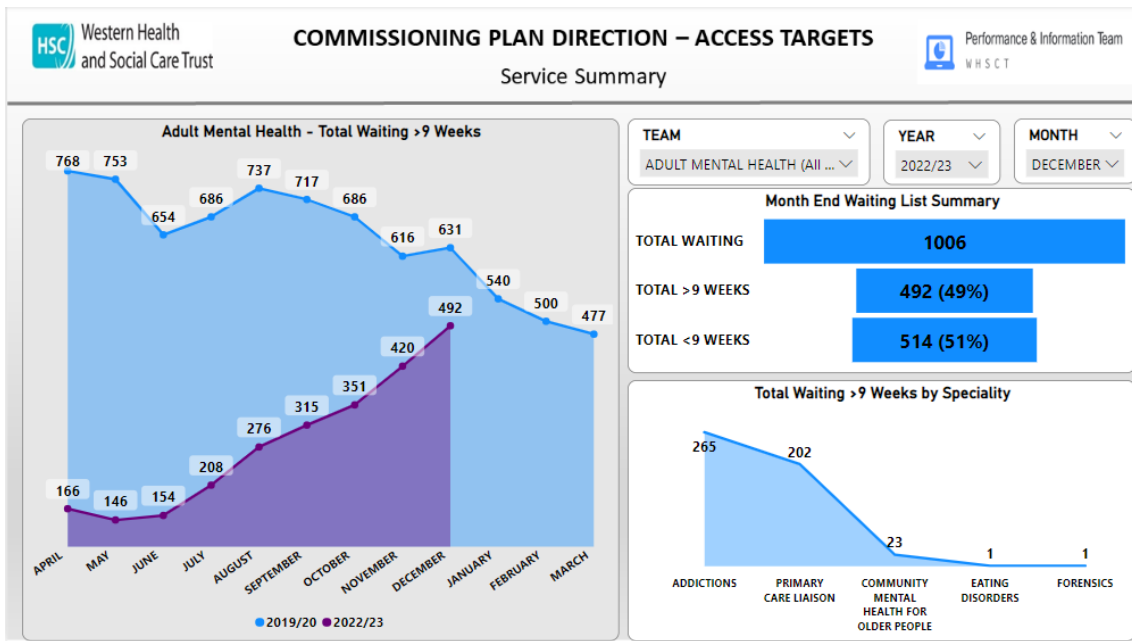
The New and Review activity delivered in December 22, across the four service areas (Adult Mental Health, Child & Adolescent Mental Health Service Dementia and Psychological Therapies) represents **123%** of SPPG expected target; delivering an additional 1,145 outpatient appointments. This represents **121%** of pre-pandemic level of delivery.



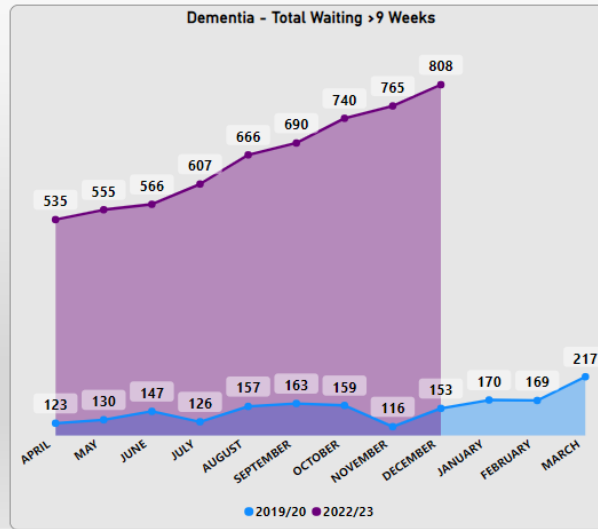
Mental Health Services – Access Performance

Performance against the Ministerial Access Targets remains challenging across these areas. In December 22, the number waiting longer than 9 and 13 weeks increased within Adult Mental Health, Child and Adolescent Mental Health, Dementia and Psychological Therapies, compared to the previous month.

Despite the December 22 performance, improvement is noted within the Child and Adolescent Mental Health Service, in the number waiting longer than 9 weeks from August 22 and when compared to 2019/20.

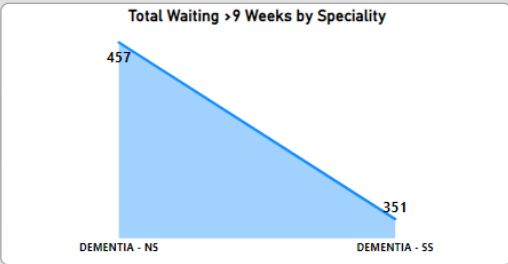


Service Summary

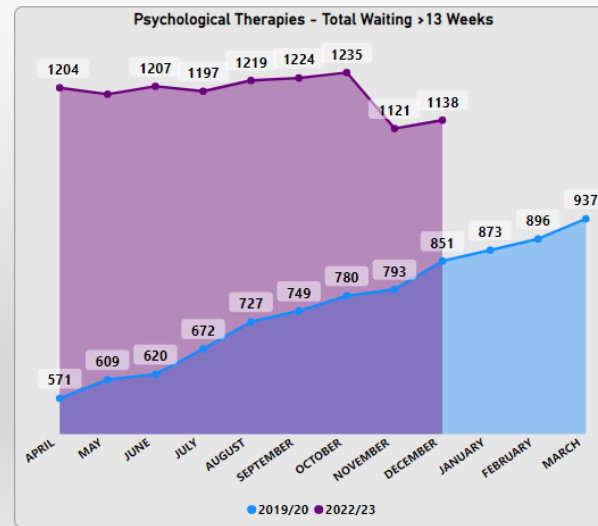


TEAM: DEMENTIA
 YEAR: 2022/23
 MONTH: DECEMBER

| | |
|-----------------|-----------|
| TOTAL WAITING | 941 |
| TOTAL > 9 WEEKS | 808 (86%) |
| TOTAL < 9 WEEKS | 133 (14%) |



Service Summary



TEAM: PSYCHOLOGICAL THERAPIES
 YEAR: 2022/23
 MONTH: DECEMBER

| | |
|------------------|------------|
| TOTAL WAITING | 1393 |
| TOTAL > 13 WEEKS | 1138 (82%) |
| TOTAL < 13 WEEKS | 255 (18%) |



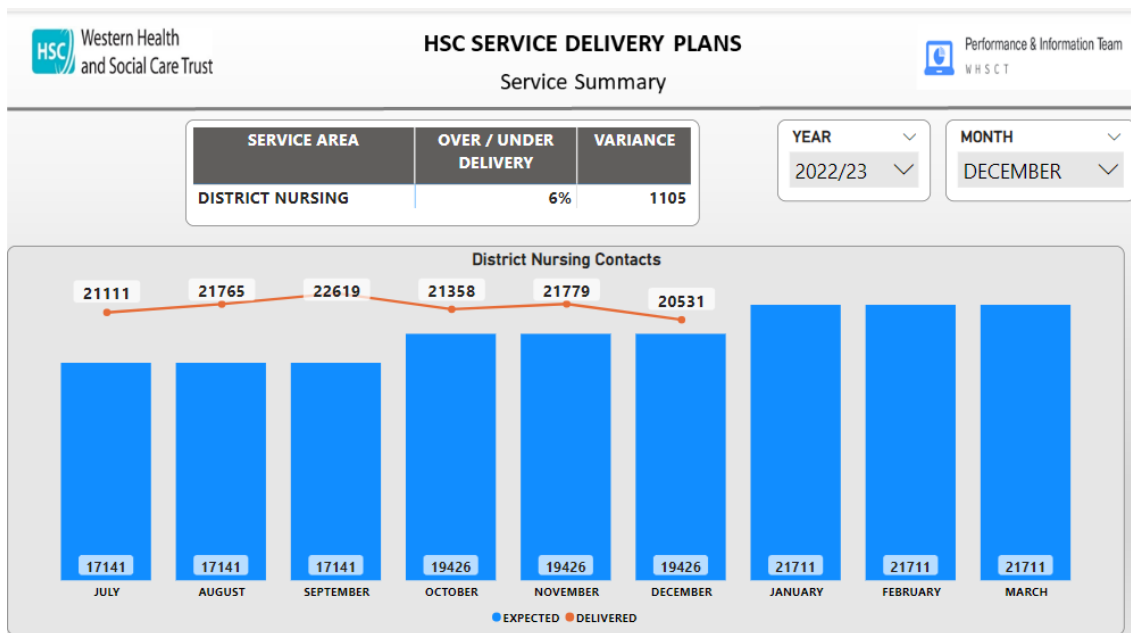
District Nursing – Service Delivery Plan

SPPG expected target for Quarter 3 (October to December 22) is 85% for the total funded WTE.

This service continues to exceed the expected targets with **106%** achieved in December 22. The stable workforce and delivery of virtual clinics continues to support this level of delivery.

The number of contacts delivered in December 22 represents **90%** of pre-pandemic level of delivery.

Regionally, the Western Trust is the only Trust to continue to exceed the expected targets.



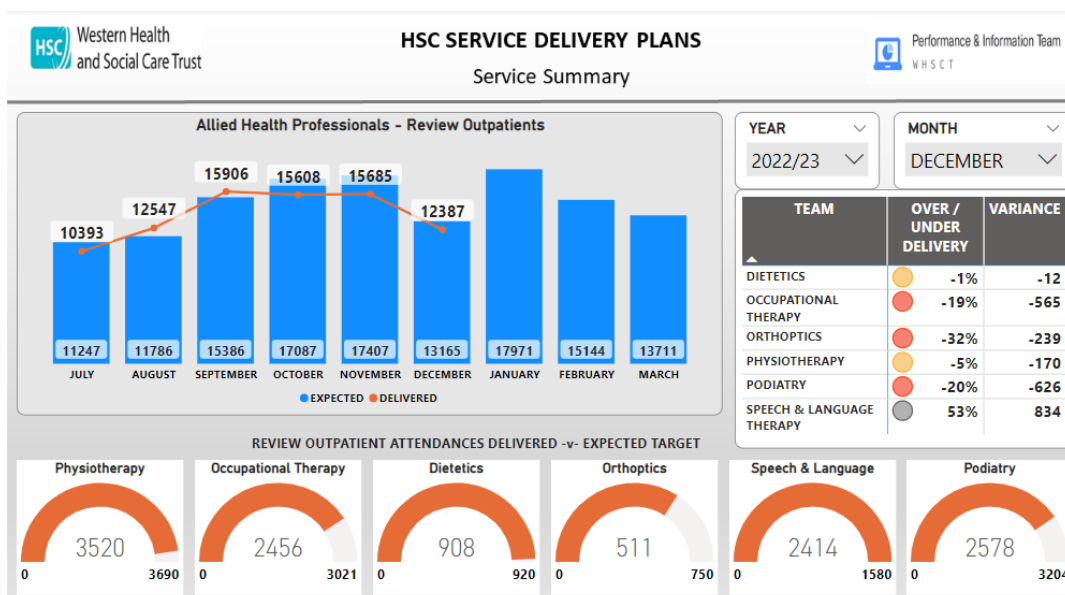
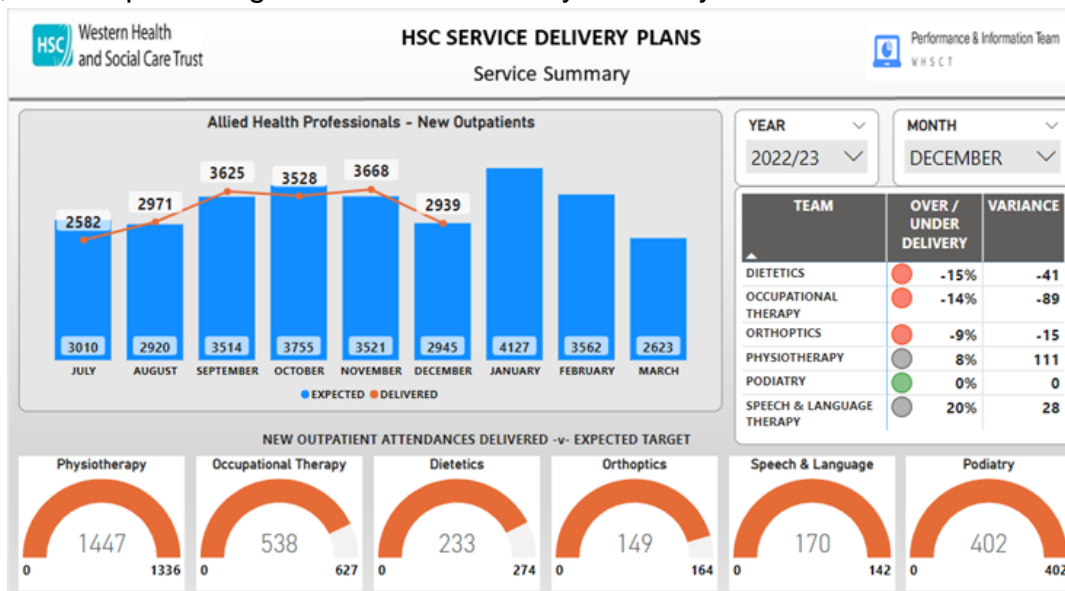
Allied Health Professionals (AHPs) – Service Delivery Plan

SPPG expected target for Quarter 3 (October to December 22) is 100% of 2019/20 activity.

Overall the New and Review activity, across the six services, reflects an upward trend during Quarter 2 (July to September), plateaued during October and November 22 and marginally dropped in December 22 with **95%** of the expected SPPG activity target achieved.

Challenges with vacant posts and reduced capacity due to sickness absence continue to impact four of the six services. The Heads of Service continue to progress recruitment however this process can be protracted. Non-attendances, specifically DNA/CND's have increased in December 22 within Orthoptics, Physiotherapy and Podiatry; which has contributed to lower levels of attendances. Cancellations, due to the industrial action in December 22, had minimal impact on activity levels delivered.

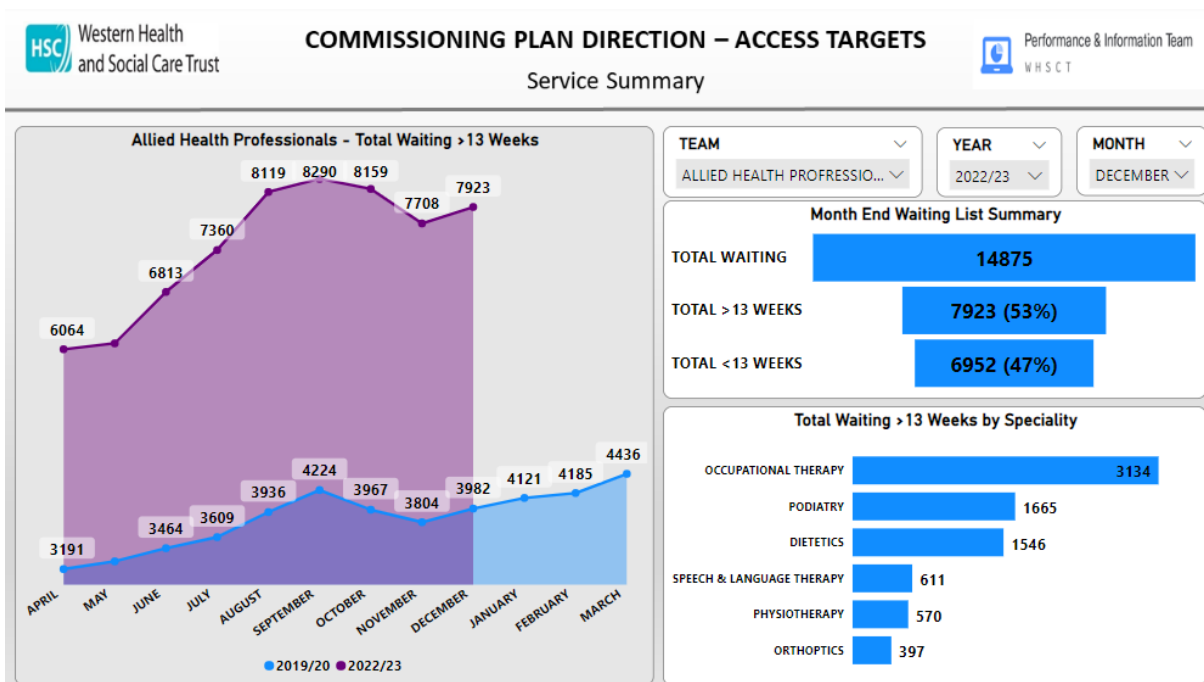
A Demand/Capacity exercise is being reviewed with the AHP Lead, AHP Heads of Service and PSI. This exercise is focusing specifically on a number of sub-specialities within each service; follow up meeting is scheduled for early February 22.



Allied Health Professionals (AHPs) – Access Performance

Performance against the Ministerial Access Targets remains challenging within Allied Health Professionals. Overall, there was some improvement in number waiting longer than 13 weeks in October and November 22, however, the position deteriorated in December 22.

Five of the AHP services reported improvement in the number waiting longer than 13 weeks from September to November 22, however this has not been maintained in December 22. Orthoptics is the only service where the total number waiting and those waiting longer than 13 weeks has reduced monthly from July 22.



Community Dental

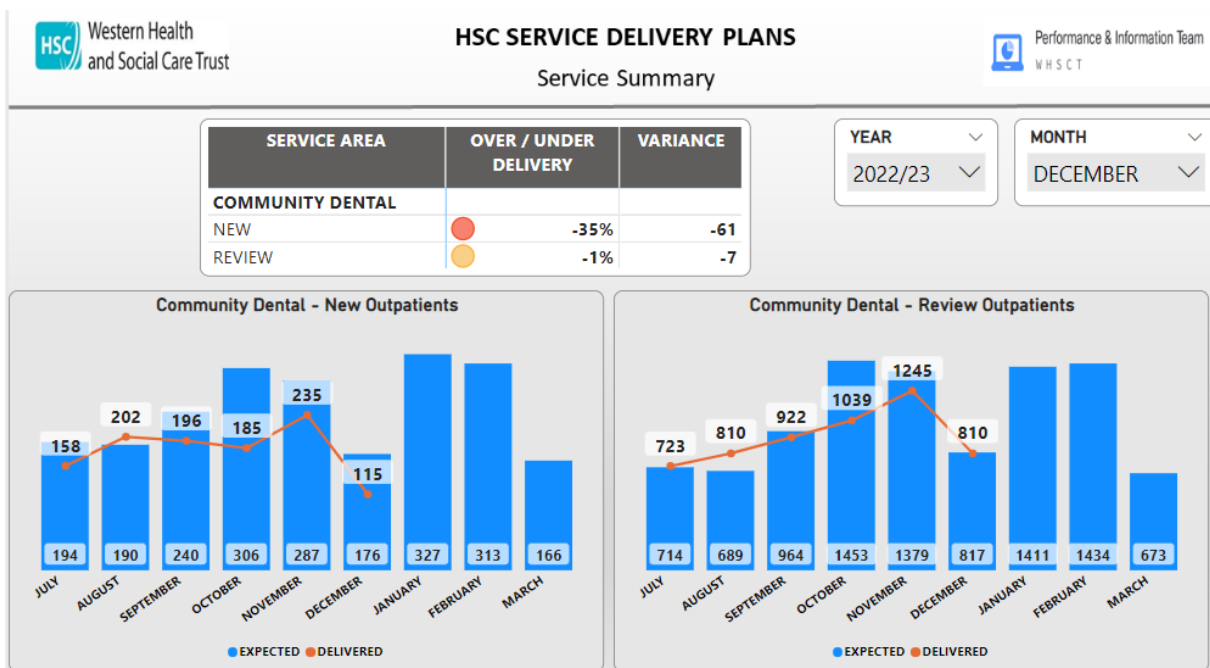
SPPG expected target for Quarter 3 (October to December 22) is 90% of 2019/20 service provision.

Community Dental Contacts

Performance against the new expected target deteriorated in December 22. This service continues to be impacted by reduced capacity due to sickness absence, vacant post and reduced hours. Recruitment to the Trust wide vacant post (3 days Northern Sector / 2 Days Southern Sector) has partially completed with the 3 day Northern Sector post recruited to. The successful candidate is due to commence post at the end of February/early March 23. The remaining 2 day Southern Sector post is yet to be filled.

The Nursing Home screenings have yet to recommence; these have been delayed due to reduced capacity and Covid infection within some of these settings. These screenings are high volume and have a significant impact on performance when compared to baseline year.

Despite the dip in December 22 performance, the cumulative new and review activity (3,629) in Quarter 3 (October to December) demonstrates an additional 618 outpatient attendances delivered compared to Quarter 2 (July to September) (3,011).

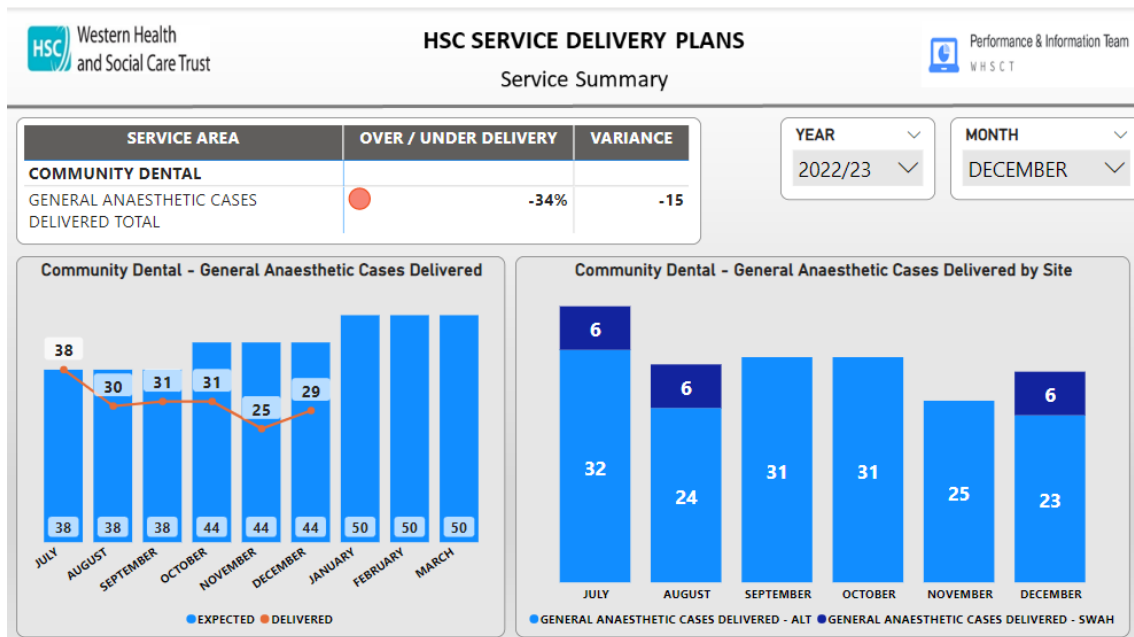


Community Dental – General Anaesthetic Cases Delivered

SPPG expected target for Quarter 3 (October to December 22) is 90% of 2019/20 Quarter 3 activity.

Achievement of this target remains challenging and has only been met in July 22. Performance continues to be impacted by reduced theatre capacity in both sites.

Currently in Altnagelvin, the service have 1.75 sessions per week compared to 2.75 sessions in 2019/20 (loss of 28 Day cases per month). South West Acute have no GA lists compared to 6 per month in 2019/20 (loss of 36 Day cases per month). There is a plan in place to resume sessions in SWAH mid-February 2023.



Appendix 1



HSC SERVICE DELIVERY PLANS
2022/23

| | |
|--------------|---|
| < -5% | QUARTER 3 |
| -5% to -0.1% | BASLINE : 2019/20 |
| 0% to 5% | BASLINE EXCEPTIONS : ADULT DAY CARE (FEBRUARY 2020), CAMHS (2020/21) CANCER (2021/22), DISTRICT NURSING RNLI, AVERAGE N/E LOS (2021/22), SPECIALIST SERVICES (2021/22) |
| > 5% | |

TREND (On previous Month / Quarter)

| | |
|---------------------------------|---|
| Performance/Activity | ↑ |
| Improvement | ↓ |
| Performance/Activity Decreasing | ↔ |
| Performance/Activity Static | ↔ |

| SERVICE AREA | DECEMBER 2022 | | | | | QUARTER 3 (OCTOBER - DECEMBER 2022) | | | | | TREND | TREND | |
|---|-----------------------------|--------------------|-----------|----------|--|-------------------------------------|--------------------|-----------|----------|--|-------------------------------------|---|---|
| | BASELINE | EXPECTED | DELIVERED | VARIANCE | OVER / UNDER DELIVERY OF EXPECTED TARGET | BASELINE (2019) | EXPECTED | DELIVERED | VARIANCE | OVER / UNDER DELIVERY OF EXPECTED TARGET | ACTIVITY DELIVERED NOV 22 -> DEC 22 | ACTIVITY DELIVERED QUARTER 2 -> QUARTER 3 | |
| ADULT SOCIAL CARE | | | | | | | | | | | | | |
| ADULT DAY CARE <small>(EXCLUDES DAY OPPORTUNITIES FROM JULY 2022)</small> | ATTENDANCES | 11,290 | 11,290 | 7,497 | -3,793 | -34% | 33,870 | 33,870 | 28,356 | -5,514 | -16% | ↓ | ↑ |
| ADULT SHORT BREAKS | HOURS DELIVERED | REPORTED QUARTERLY | | | | | REPORTED QUARTERLY | | | | | REPORTED QUARTERLY | |
| DOMICILIARY CARE <small>(EXCLUDES REABLEMENT FROM JULY 2022)</small> | STATUTORY HOURS DELIVERED | 30,303 | 27,273 | 27,250 | -23 | -0.1% | 90,126 | 81,113 | 82,263 | 1,150 | 1% | ↑ | ↓ |
| | INDEPENDENT HOURS DELIVERED | 113,228 | 101,905 | 111,170 | 9,265 | 9% | 347,378 | 312,640 | 327,382 | 14,742 | 4.7% | ↑ | ↓ |
| CHILDRENS SOCIAL CARE | | | | | | | | | | | | | |
| INITIAL FAMILY ASSESSMENTS COMPLETED | | 36 | 36 | 102 | 66 | 183% | 205 | 205 | 349 | 144 | 70% | ↓ | ↑ |
| INITIAL CHILD PROTECTION CASE CONFERENCES HELD WITHIN 15 DAYS | WITHIN 15 DAYS | | | 13 | | | | | 52 | | | | |
| | TOTAL | 83% | 84% | 14 | 9% | 9% | 81% | 84% | 55 | 11% | 11% | ↓ | ↓ |
| | % WITHIN 15 DAYS | | | 93% | | | | | 95% | | | | |
| REVIEW CHILD PROTECTION CASE CONFERENCES HELD WITHIN 3 MONTHS | WITHIN 3 MONTHS | | | 11 | | | | | 45 | | | | |
| | TOTAL | 93% | 85% | 12 | 7% | 7% | 75% | 85% | 50 | 5% | 5.0% | ↑ | ↑ |
| | % WITHIN 3 MONTHS | | | 92% | | | | | 90% | | | | |
| SUBSEQUENT CHILD PROTECTION CASE CONFERENCES HELD WITHIN 6 MONTHS | WITHIN 6 MONTHS | | | 33 | | | | | 100 | | | | |
| | TOTAL | 100% | 89% | 38 | -2% | -2% | 84% | 89% | 126 | -10% | 10% | ↑ | ↓ |
| | % WITHIN 6 MONTHS | | | 87% | | | | | 79% | | | | |
| MENTAL HEALTH SERVICES | | | | | | | | | | | | | |
| ADULT MENTAL HEALTH (NON INPATIENT) | NEW | 431 | 431 | 277 | -154 | -36% | 1,540 | 1,540 | 1,065 | -475 | -31% | | |
| | REVIEW | 3,584 | 3,584 | 3,777 | 193 | 5.4% | 12,276 | 12,276 | 13,151 | 875 | 7% | ↓ | ↑ |
| | TOTAL | 4,015 | 4,015 | 4,054 | 39 | 1% | 13,816 | 13,816 | 14,216 | 400 | 3% | | |
| PSYCHOLOGICAL THERAPIES | NEW | 92 | 83 | 134 | 51 | 62% | 467 | 420 | 514 | 94 | 22% | | |
| | REVIEW | 723 | 651 | 1,063 | 412 | 63% | 2,941 | 2,647 | 4,411 | 1,764 | 67% | ↓ | ↑ |
| | TOTAL | 815 | 734 | 1,197 | 464 | 63% | 3,408 | 3,067 | 4,925 | 1,858 | 61% | | |
| DEMENTIA | NEW | 22 | 22 | 16 | -6 | -27% | 153 | 153 | 76 | -77 | -50% | | |
| | REVIEW | 277 | 277 | 309 | 32 | 12% | 1,088 | 1,088 | 1,244 | 156 | 14% | ↓ | ↓ |
| | TOTAL | 299 | 299 | 325 | 26 | 9% | 1,241 | 1,241 | 1,320 | 79 | 6% | | |
| CAMHS <small>BASELINE FIGURES FROM NOVEMBER ARE BASED ON 2020/2021 YEAR</small> | NEW | 99 | 99 | 89 | -10 | -10% | 345 | 345 | 367 | 22 | 6% | | |
| | REVIEW | 630 | 630 | 527 | -103 | -16% | 2,290 | 2,290 | 2,011 | -279 | -12% | ↓ | ↑ |
| | TOTAL | 729 | 729 | 616 | -113 | -16% | 2,635 | 2,635 | 2,378 | -257 | -10% | | |
| CHILDRENS AUTISM <small>SPG MONITORING ENDED JUNE 2022. INTERNAL MONITORING CONTINUED</small> | DIAGNOSTIC | 14 | 14 | 66 | 52 | 371% | 63 | 63 | 181 | 118 | 187% | | |
| | INTERVENTION | 19 | 19 | 44 | 25 | 132% | 58 | 58 | 119 | 61 | 105% | ↓ | ↑ |
| | TOTAL | 33 | 33 | 110 | 77 | 233% | 121 | 121 | 300 | 179 | 148% | | |
| ADULT AUTISM <small>SPG MONITORING ENDED JUNE 2022. INTERNAL MONITORING CONTINUED</small> | DIAGNOSTIC | 6 | 6 | 2 | -4 | -67% | 19 | 19 | 22 | 3 | 16% | | |
| | INTERVENTION | 1 | 1 | 1 | 0 | 0% | 8 | 8 | 10 | 2 | 25% | ↓ | ↑ |
| | TOTAL | 7 | 7 | 3 | -4 | -57% | 27 | 27 | 32 | 5 | 19% | | |
| MENTAL HEALTH SERVICES TOTAL <small>(EXCLUDES CHILDRENS & ADULT AUTISM FROM JULY 2022 & INCLUDES CAMHS FROM NOVEMBER 2022)</small> | | 5,129 | 5,048 | 6,192 | 1,145 | 23% | 21,356 | 21,015 | 23,439 | 2,424 | 12% | ↓ | ↑ |

| SERVICE AREA | DECEMBER 2022 | | | | | QUARTER 3 (OCTOBER - DECEMBER 2022) | | | | | TREND | TREND | |
|--|---------------|----------|-----------|----------|--|-------------------------------------|----------|-----------|----------|--|-------------------------------------|---|------|
| | BASELINE | EXPECTED | DELIVERED | VARIANCE | OVER / UNDER DELIVERY OF EXPECTED TARGET | BASELINE (2019) | EXPECTED | DELIVERED | VARIANCE | OVER / UNDER DELIVERY OF EXPECTED TARGET | ACTIVITY DELIVERED NOV 22 -> DEC 22 | ACTIVITY DELIVERED QUARTER 2 -> QUARTER 3 | |
| CANCER SERVICES | | | | | | | | | | | | | |
| 14 DAY TARGET - ACTIVITY | 284 | 284 | 184 | -100 | -35% | 804 | 804 | 625 | -179 | -22% | ↓ | ↓ | |
| 31 DAY TARGET - ACTIVITY | 141 | 141 | 73 | -68 | -48% | 491 | 491 | 381 | -110 | -22% | Under Validation | Under Validation | |
| 62 DAY TARGET - ACTIVITY | 84.0 | 84.0 | 45.5 | -39 | -46% | 266 | 266 | 235 | -31 | -12% | | | |
| RED FLAG - 1st OP APPOINTMENT | 590 | 590 | 656 | 66 | 11% | 2142 | 2142 | 2628 | 486 | 23% | ↓ | ↑ | |
| 14 DAY TARGET - ACCESS PERFORMANCE | 100% | 99% | -1% | -1% | | 100% | 99.2% | -0.8% | -0.8% | | ↔ | ↑ | |
| 31 DAY TARGET - ACCESS PERFORMANCE | 98% | 100% | 2% | 2.0% | | 98% | 99.0% | 1.0% | 1.0% | | ↑ | ↔ | |
| 62 DAY TARGET - ACCESS PERFORMANCE | 95% | 34.1% | -60.9% | -60.9% | | 95% | 39.7% | -55.3% | -55.3% | | ↓ | ↓ | |
| COMMUNITY NURSING | | | | | | | | | | | | | |
| DISTRICT NURSING CONTACTS | 22,854 | 19,426 | 20,531 | 1,105 | 6% | 68,562 | 58,278 | 63,668 | 5,390 | 9% | ↓ | ↓ | |
| HEALTH VISITING CONTACTS <i>SPPG MONITORING ENDED JUNE 2022. INTERNAL MONITORING CONTINUED.</i> | 4,781 | 4,781 | 4,964 | 183 | 4% | 18,749 | 18,749 | 20,291 | 1,542 | 8% | ↓ | ↓ | |
| OUTPATIENTS | | | | | | | | | | | | | |
| NEW | FACE | | | 3,113 | | | | 12,378 | | | ↓ | ↑ | |
| | VIRTUAL | 5,064 | 5,064 | 308 | -886 | -17% | 18,614 | 18,614 | 1,257 | -2,108 | | | -11% |
| | OTHER | | | 757 | | | | 2,871 | | | | | |
| | TOTAL | | | 4,178 | | | | 16,506 | | | | | |
| REVIEW | FACE | | | 5,647 | | | | 23,268 | | | ↓ | ↑ | |
| | VIRTUAL | 10,779 | 10,779 | 2,015 | -1,293 | -12% | 38,844 | 38,844 | 7,182 | -1,249 | | | -3% |
| | OTHER | | | 1,824 | | | | 7,145 | | | | | |
| | TOTAL | | | 9,486 | | | | 37,595 | | | | | |
| OUTPATIENT TOTAL | 15,843 | 15,843 | 13,664 | -2,179 | -14% | 57,458 | 57,458 | 54,101 | -3,357 | -6% | ↓ | ↑ | |
| ALLIED HEALTH PROFESSIONALS | | | | | | | | | | | | | |
| PHYSIOTHERAPY | NEW | 1,336 | 1,336 | 1,447 | 111 | 8% | 4,555 | 4,555 | 4,696 | 141 | 3% | ↓ | ↑ |
| | REVIEW | 3,690 | 3,690 | 3,520 | -170 | -4.6% | 13,219 | 13,219 | 12,242 | -977 | -7% | | |
| | TOTAL | 5,026 | 5,026 | 4,967 | -59 | -1% | 17,774 | 17,774 | 16,938 | -836 | -4.7% | | |
| OCCUPATIONAL THERAPY | NEW | 627 | 627 | 538 | -89 | -14% | 2,337 | 2,337 | 2,283 | -54 | -2% | ↓ | ↑ |
| | REVIEW | 3,021 | 3,021 | 2,456 | -565 | -19% | 10,321 | 10,321 | 9,378 | -943 | -9% | | |
| | TOTAL | 3,648 | 3,648 | 2,994 | -654 | -18% | 12,658 | 12,658 | 11,661 | -997 | -8% | | |
| DIETETICS | NEW | 274 | 274 | 233 | -41 | -15% | 918 | 918 | 949 | 31 | 3% | ↓ | ↓ |
| | REVIEW | 920 | 920 | 908 | -12 | -1% | 3,305 | 3,305 | 3,217 | -88 | -3% | | |
| | TOTAL | 1,194 | 1,194 | 1,141 | -53 | -4% | 4,223 | 4,223 | 4,166 | -57 | -1% | | |
| ORTHOPTICS | NEW | 164 | 164 | 149 | -15 | -9% | 598 | 598 | 522 | -76 | -13% | ↓ | ↑ |
| | REVIEW | 750 | 750 | 511 | -239 | -32% | 2,696 | 2,696 | 1,924 | -772 | -29% | | |
| | TOTAL | 914 | 914 | 660 | -254 | -28% | 3,294 | 3,294 | 2,446 | -848 | -26% | | |
| SPEECH & LANGUAGE | NEW | 142 | 142 | 170 | 28 | 20% | 548 | 548 | 589 | 41 | 7% | ↓ | ↑ |
| | REVIEW | 1,580 | 1,580 | 2,414 | 834 | 53% | 7,519 | 7,519 | 8,217 | 698 | 9% | | |
| | TOTAL | 1,722 | 1,722 | 2,584 | 862 | 50% | 8,067 | 8,067 | 8,806 | 739 | 9% | | |
| PODIATRY | NEW | 402 | 402 | 402 | 0 | 0% | 1,265 | 1,265 | 1,096 | -169 | -13% | ↓ | ↑ |
| | REVIEW | 3,204 | 3,204 | 2,578 | -626 | -20% | 10,599 | 10,599 | 8,702 | -1,897 | -18% | | |
| | TOTAL | 3,606 | 3,606 | 2,980 | -626 | -17% | 11,864 | 11,864 | 9,798 | -2,066 | -17% | | |
| ALLIED HEALTH PROFESSIONAL NEW TOTAL | 2,945 | 2,945 | 2,939 | -6 | -0.2% | 10,221 | 10,221 | 10,135 | -86 | -1% | | | |
| ALLIED HEALTH PROFESSIONAL REVIEW TOTAL | 13,165 | 13,165 | 12,387 | -778 | -6% | 47,659 | 47,659 | 43,680 | -3,979 | -8% | ↓ | ↑ | |
| ALLIED HEALTH PROFESSIONAL OVERALL TOTAL | 16,110 | 16,110 | 15,326 | -784 | -4.9% | 57,880 | 57,880 | 53,815 | -4,065 | -7% | | | |

| SERVICE AREA | | DECEMBER 2022 | | | | | QUARTER 3 (OCTOBER - DECEMBER 2022) | | | | | TREND | TREND |
|-------------------------------------|------------------|---------------|----------|-----------|----------|--|-------------------------------------|----------|-----------|----------|--|------------------------------------|--|
| | | BASELINE | EXPECTED | DELIVERED | VARIANCE | OVER / UNDER DELIVERY OF EXPECTED TARGET | BASELINE (2019) | EXPECTED | DELIVERED | VARIANCE | OVER / UNDER DELIVERY OF EXPECTED TARGET | ACTIVITY DELIVERED NOV 22 → DEC 22 | ACTIVITY DELIVERED QUARTER 2 → QUARTER 3 |
| ELECTIVE CARE | | | | | | | | | | | | | |
| INPATIENT | CORE | 380 | 342 | 330 | -12 | -4% | 1,559 | 1,402 | 1,108 | -294 | -21% | | |
| | OTHER | 75 | 68 | 72 | 4 | 6% | 304 | 273 | 286 | 13 | 4.8% | ↓ | ↑ |
| | TOTAL | 455 | 410 | 402 | -8 | -2% | 1,863 | 1,675 | 1,394 | -281 | -17% | | |
| DAYCASES | CORE | 1,065 | 959 | 1,037 | 78 | 8% | 4,032 | 3,631 | 4,261 | 630 | 17% | | |
| | OTHER | 623 | 560 | 398 | -162 | -29% | 2,151 | 1,936 | 1,722 | -214 | -11% | ↓ | ↓ |
| | TOTAL | 1,688 | 1,519 | 1,435 | -84 | -6% | 6,183 | 5,567 | 5,983 | 416 | 7% | | |
| ENDOSCOPY | | 625 | 563 | 631 | 68 | 12% | 2,469 | 2,223 | 2,425 | 202 | 9.1% | ↓ | ↑ |
| IMAGING DIAGNOSTICS | | | | | | | | | | | | | |
| MRI | | 1,209 | 1,209 | 1,260 | 51 | 4% | 3,930 | 3,930 | 4,242 | 312 | 8% | ↓ | ↑ |
| CT | | 2,671 | 2,866 | 2,980 | 114 | 4% | 8,327 | 8,620 | 9,385 | 765 | 9% | ↓ | ↑ |
| NON OBSTETRIC ULTRASOUND | | 3,018 | 3,121 | 2,972 | -149 | -5% | 10,806 | 10,909 | 10,543 | -366 | -3% | ↓ | ↑ |
| CARDIAC SERVICES | | | | | | | | | | | | | |
| CARDIAC MRI | | 16 | 14 | 27 | 13 | 88% | 71 | 64 | 84 | 20 | 32% | ↑ | ↑ |
| CARDIAC CT | | 32 | 29 | 40 | 11 | 38% | 131 | 118 | 135 | 17 | 14% | ↓ | ↑ |
| ECHO | | 591 | 532 | 497 | -35 | -7% | 2,209 | 1,988 | 1,676 | -312 | -16% | ↓ | ↓ |
| CATH LABS PROCEDURES | | 146 | 131 | 140 | 9 | 7% | 502 | 452 | 486 | 34 | 8% | ↓ | ↑ |
| UNSCHEDULED CARE | | | | | | | | | | | | | |
| WEEKEND DISCHARGE RATES | ALTNAGELVIN | 15% | 25% | 16% | -9% | -9% | 15% | 25% | 16% | -9% | -9% | ↑ | ↑ |
| | SOUTH WEST ACUTE | 15% | 25% | 10% | -15% | -15% | 14% | 24% | 11% | -13% | -13% | ↓ | ↔ |
| AVERAGE LOS | ALTNAGELVIN | 7.3 | 7.1 | 7.5 | -0.4 | -6% | 7.8 | 7.6 | 7.7 | -0.1 | -1% | ↓ | ↓ |
| | SOUTH WEST ACUTE | 9.8 | 9.6 | 11.2 | -1.6 | -17% | 10.5 | 10.3 | 11.8 | -1.5 | -15% | ↓ | ↑ |
| STROKE SERVICES | | | | | | | | | | | | | |
| THROMBOLYSIS RATE | ALTNAGELVIN | 15% | 15% | 5% | -10% | -10% | 15% | 15% | 13% | -2% | -2% | ↓ | ↑ |
| | SOUTH WEST ACUTE | 24% | 14% | 5% | -9% | -9% | 24% | 14% | 13% | -1% | -1% | ↓ | ↓ |
| % ADMITTED <4 HOURS | ALTNAGELVIN | 39% | 32% | 20% | -12% | -12% | 39% | 32% | 20% | -12% | -12% | | |
| | SOUTH WEST ACUTE | 92% | 88% | 64% | -24% | -24% | 92% | 88% | 73% | -15% | -15% | | |
| COMMUNITY DENTAL | | | | | | | | | | | | | |
| CONTACTS | NEW | 196 | 176 | 115 | -61 | -35% | 855 | 770 | 535 | -235 | -30% | | |
| | REVIEW | 908 | 817 | 810 | -7 | -1% | 4,054 | 3,649 | 3,094 | -555 | -15% | ↓ | ↑ |
| | TOTAL | 1,104 | 993 | 925 | -68 | -7% | 4,909 | 4,419 | 3,629 | -790 | -18% | | |
| GENERAL ANAESTHETIC CASES DELIVERED | ALTNAGELVIN | | | 23 | | | | | 79 | | | | |
| | SOUTH WEST ACUTE | 63 | 44 | 6 | -15 | -34% | 189 | 132 | 6 | -47 | -36% | ↑ | ↓ |
| | TOTAL | | | 29 | | | | | 85 | | | | |
| SPECIALIST SERVICES | | | | | | | | | | | | | |
| BIOLOGICS >13 WEEKS | | TBC | TBC | 29 | | | TBC | TBC | 29 | | | | ↓ |
| DIEASE MODIFYING FOR MS >13 WEEKS | | TBC | TBC | 6 | | | TBC | TBC | 23 | | | ↓ | ↓ |
| WET AMD | 6 WKS FIRST EYE | 1 | TBC | 28 | | | 2 | TBC | 54 | | | ↓ | ↓ |
| | 6 WKS SECOND EYE | 0 | TBC | 0 | | | 0 | TBC | 0 | | | ↔ | ↔ |