

Performance Management Report - Month Ending June 2018

Trust Board - 2nd August 2018

Version - 24th July 2018

Contents

<u>Title</u>	<u>Page</u>
Introduction	3
2018/19 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	↑
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.



2018/19 Ministerial Standards and Targets

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Smoking Cessation	Target 1.1: By March 2020, 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.	Target reported by PHA.					
Breastfeeding	Target 1.3: By March 2019, 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 2019, 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 2019, 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 (b): By March 2019, 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. Final 17/18 position will be available at end July 2018.

Title	Target	Comments / Actions	May-18	Jun-18	Trend		Trend / Activity Analysis
Delivering Care Framework	Target 2.1: By March 2019 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.

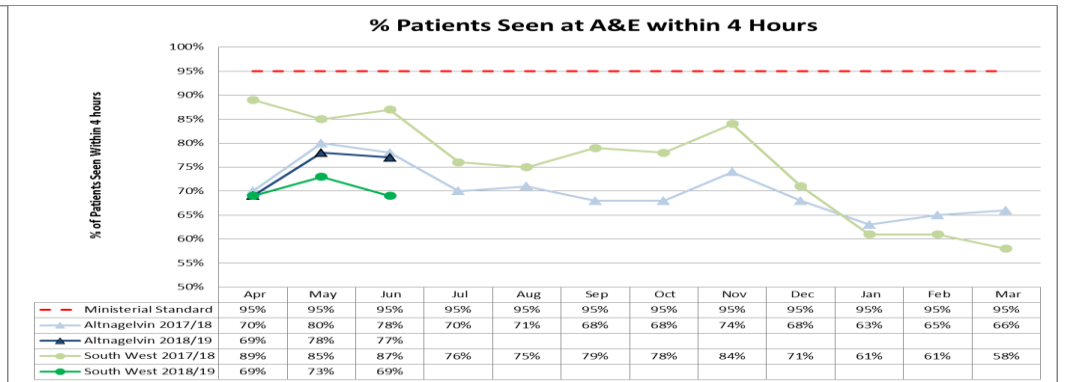
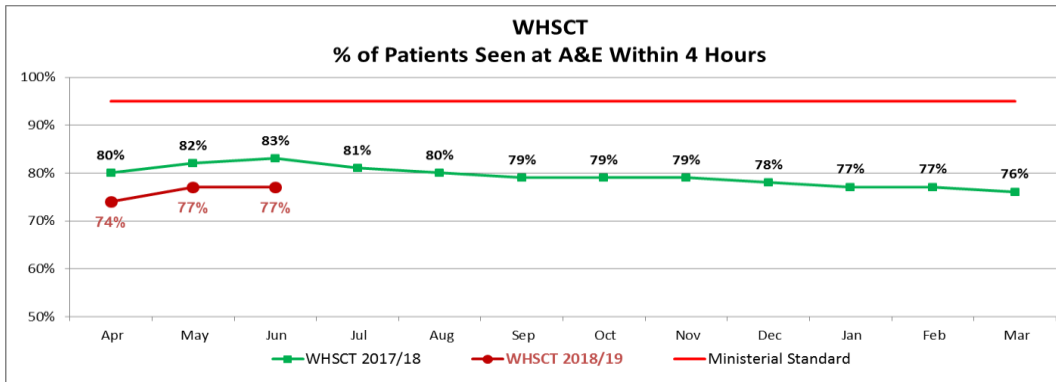
Title	Target	Comments / Actions	Maximum Target 2017/18	April 18 - May 18	Trend		Trend / Activity Analysis
Healthcare Acquired Infections	Target 2.4: By 31 March 2019, to secure a regional aggregate reduction of X% in the total number of in-patient episodes of Clostridium Difficile infection in patients aged 2 years and over and in-patient episodes of MRSA infection compared to 2017/18.	MRSA WHSCCT 2018/19 Target Maximum = X	5				Information sourced from HSCB Performance Report. Only available on a cumulative basis with 1 month time lag.
		C. Difficile WHSCCT 2018/19 Target Maximum = X	44				

Title	Target	Comments / Actions	Apr-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
NEWS KPI's	Target 2.5: Throughout 2018/19 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%.	85%	92%	↑		<p>Western Trust Overall Compliance</p> <p>Percentage</p> <p>— Target — All elements performed — Part 1 & 2 elements performed</p>

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Care Standards in Residential/ Nursing Homes	Target 2.8(a): During 2018/19 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.	Annual reviews of each client in a residential/nursing home place ensures that any issues are identified and then raised. These are reported centrally to RQIA and the Department.	0	0			
	Target 2.8(b): During 2018/19 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.		0	0			

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Children in Care	Target 3.2: During 2018/19 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 March 2019, 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 2019, 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 2019, the HSC should ensure that the Co-production model is adopted when designing and delivering transformational change. This will include integrating PPI, co-prdocution, patient experience into a single organisational plan.	Awaiting confirmation of baseline and technical guidance on how this will be reported					

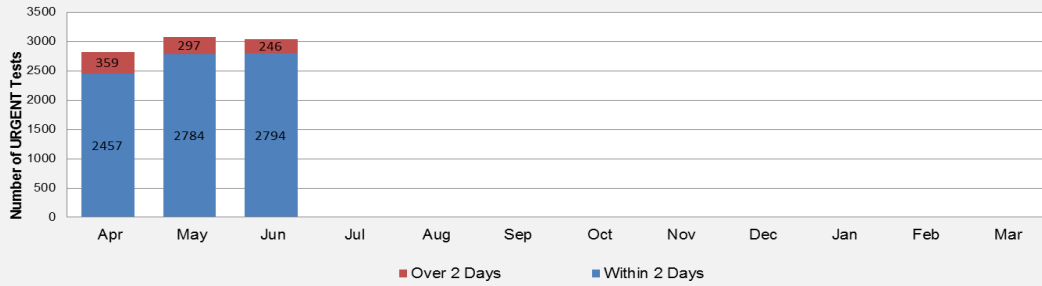
Title	Target	Comments / Actions	May 18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis	
Emergency Department	Target 4.4: By March 2019, 95% of patients attending any Type 1, 2 or 3 Emergency Department are either treated and discharged home, or admitted, within 4 hours of their arrival in the department; and no patient attending any Emergency Department should wait longer than 12 hours	4-Hour target % treated within 4 hours	WHSCT	80%	78%	↓	77%	
			ALT	78%	77%		75%	
			SWAH	73%	69%		70%	
		12-Hour target Number of patients who waited >12 hours	WHSCT	29	64	↓	177	
			ALT	12	36		94	
			SWAH	17	28		83	
	Target 4.5: By March 2019, at least 80% of patients to have commenced treatment, following triage, within 2 hours	Percentage of patients who commenced treatment within 2 hours	WHSCT	91%	88%	↓	88%	
			ALT	92%	91%		89%	
			SWAH	87%	81%		83%	
			OHPCC	94%	94%		94%	



Title	Target/Indicator	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Fractures	Target 4.6: By March 2019, 95% of patients, where clinically appropriate, wait no longer than 48 hours for inpatient treatment for hip fractures.	% treated within 48 hours	91%	91%	→	86%	
		Number treated over target	4	3		17	
		Total number of patients treated	46	33		120	
Specialist Therapies	Target 4.7: By March 2019, ensure that at least 15% of patients with confirmed ischaemic stroke receive thrombolysis treatment, where clinically appropriate.	Figures supplied are based on manual returns supplied by the Service. Validated figures are dependent on completed coding. [No of patients who received thrombolysis out of total ischaemic stroke admissions]	18.0%	37.0%	↑	24.7%	
			(4/22)	(7/19)		(18/73)	

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Urgent Diagnostic Tests	Target 4.8: By March 2019, all urgent diagnostic tests are reported on within 2 days.	% urgent diagnostic tests reported within 2 days	90%	92%	↑	90%	

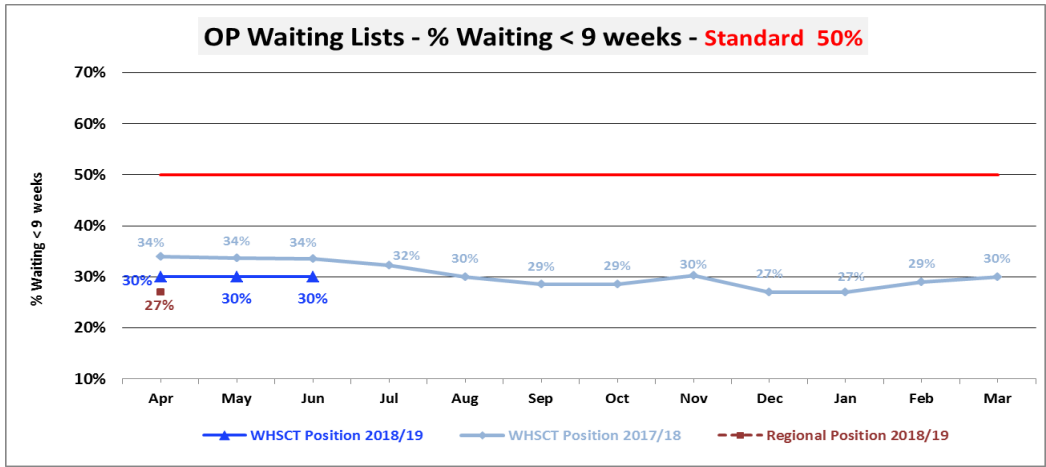
Diagnostic Reporting Turnaround Times - URGENT TESTS



Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Cancer Services	Target 4.9(i): During 2018/19, all urgent breast cancer referrals should be seen within 14 days.	% treated within 14 days	100%	99.3%	↓	99.8%	
		Number treated over target	0	2		2	
	Target 4.9(ii): During 2018/19, at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.	% treated within 31 days	100%	100%	→	100%	
		Number treated over target	0	0		0	
	Target 4.9(iii): During 2018/19, at least 95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days.	% commencing treatment within 62 days	82%	84%	↓	85%	
		Number treated over target	13.0	10.5		29.0	
			The 13.0 treated over target equates to 17 patients, 8 of which are ITT's	The 10.5 treated over target equates to 14 patients, 7 of which are ITT's		The 29.0 treated over target equates to 37 patients, 16 of which are ITT's	

Title	Target/Indicator	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Outpatient Waiting List	Target 4.10: By March 2019, at least 50% of patients should be waiting no longer than 9 weeks for an outpatient appointment and no patient waits longer than 52 weeks.	- % waiting < 9 weeks	29.5%	29.8%	↓		
		- [Number waiting > 9 weeks]	24265	24228	↑		
		- [Number waiting > 52 weeks]	11566	11908	↓		

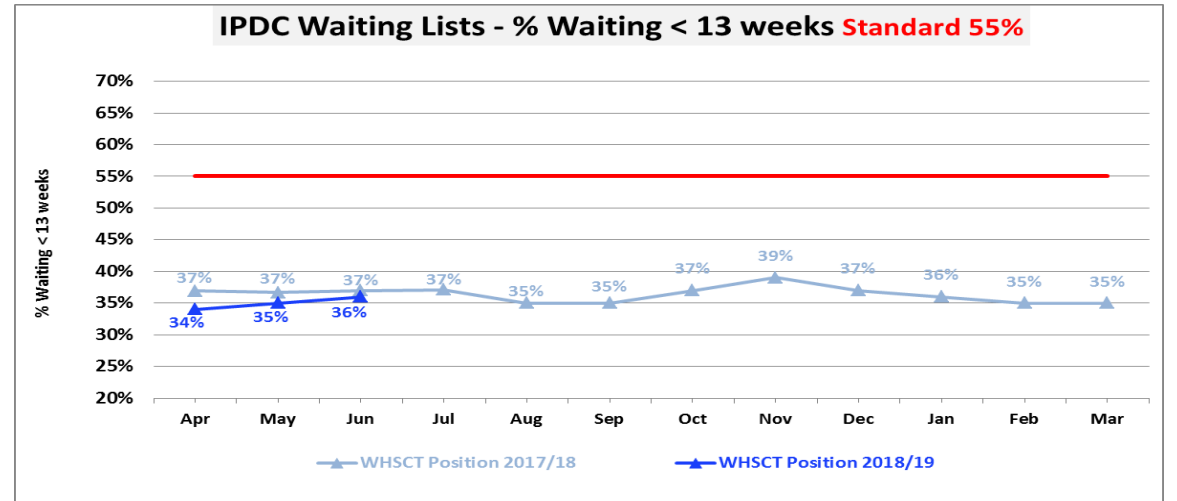
Outpatients Waiting Lists - Key Specialties - As at 30/06/2018					
Specialty	Total OP Waiting	Number Waiting > 9 weeks	Number Waiting > 52 weeks	Longest Waiter (weeks)	Site of Longest Waiter
General Surgery	4489	3269	1593	186.6	ALTNAGELVIN
Orthopaedics	7128	5782	3491	212.7	ALTNAGELVIN
Oral Surgery	3869	3456	2057	189.7	CAUSEWAY
Gastroenterology	2249	1825	1277	180.3	ALTNAGELVIN
Respiratory Medicine	1404	1067	447	154.1	OMAGH
Neurology	3299	3020	2036	188.7	ALTNAGELVIN
Rheumatology	1866	1544	751	129.4	SOUTH WEST ACUTE



Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Diagnostic Test	Target 4.11: By March 2019, 75% of patients should wait no longer than 9 weeks for a diagnostic test and no patient waits longer than 26 weeks.	Diagnostic Test			↑		
		- % waiting < 9 weeks	83%	83%			
		- Total Number waiting > 9 weeks	1550	1536			
		- [Imaging]	9	26			
		- [Physiological Measurement]	1541	1510			
		- Total Number waiting > 26weeks	177	225			
		Endoscopy			→		
- [Number waiting > 9 weeks]	376	378					

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Inpatients & Day Cases <i>(Includes Scopes)</i>	Target 4.12: By March 2019, 55% of patients should wait no longer than 13 weeks for inpatient/ daycase treatment and no patients waits longer than 52 weeks.	- % waiting < 13 weeks	35%	36%	↑		
		- Number waiting > 13 weeks	10991	10865	↓		
		- Number waiting > 52 weeks	4655	4775	↓		

Inpatients Waiting Lists - Key Specialties - As at 30/06/2018					
Specialty	Total IP/DC Waiting	Number Waiting > 13 weeks	Number Waiting > 52 weeks	Longest Waiter (weeks) - INPATIENT	Longest Waiter (weeks) - DAY CASE
General Surgery	2228	1571	748	212.6	200.3
Urology	1596	722	177	143.2	44.6
Orthopaedics	4145	3589	2353	200.2	192.5
E. N. T.	2037	1628	820	202.3	166.6
Ophthalmology	2735	1746	200	-	111.5
Oral Surgery	486	251	72	104.3	149.4
Pain Management	352	279	46	-	81.1
Gynaecology	1183	760	258	146.5	122.9



Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis	
9 week Access Targets: CAMHS & Older People (Dementia)	Target 4.13: By March 2019, no patient waits longer than 9 weeks to access Child and Adolescent Mental Health services .	Total number waiting at month end	358	324	↑		<p>9 Week Access Targets - CAMHS</p>	
		Number waiting >9 weeks	74	61				
		Longest wait (weeks) at month end	15	20				
	Target 4.13: By March 2019, no patient waits longer than 9 weeks to access Dementia Services .	Total Number waiting at month end	265	260	↓			<p>9 Week Access Targets - Dementia</p>
		Number waiting > 9 weeks	88	96				
		Longest wait (weeks) at month end	22	26				
9 week Access Targets: Mental Health & Learning Disability	Target 4.13: By March 2019, no patient waits longer than 9 weeks to access Adult Mental Health Services .	Total Number waiting	1120	1111	→		<p>9 Week Access Targets - AMH</p>	
		Total Number waiting > 9 weeks	455	453				
		Longest wait (weeks) at month end	41	41				
		Target Achieved Eating Disorder Service & Forensic Service						
13 week Access Targets: Psychological Therapies	Target 4.13: By March 2019, no patient waits longer than 13 weeks to access to any Psychological Therapy Service (any age) .	Total Number Waiting	975	1008	↓		<p>13 Week Access Targets</p>	
		Total Number waiting >13 weeks	519	533				
		Longest wait (weeks) at month end	90	95				
		Patient Breaches = 355 AMH, 96 LD Adult, 0 Adult Health Psychology, 26 LD Childrens, 56 Childrens Psychology, 0 OP FMI						

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis																																																															
Direct Payments	Target 5.1: By March 2019 secure 10% increase in direct payments across all programmes of care	By March 2019 secure 10% increase in the number of direct payments across all programmes of care. 16/17 Quarterly Baseline = 17/18 Quarterly target = Awaiting confirmation of baseline for 2018/19 and technical guidance	881	911	↑		<p>No of direct payments recipients</p> <table border="1"> <caption>No of direct payments recipients</caption> <thead> <tr> <th>Month</th> <th>No of Direct Payments recipients</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Apr</td><td>860</td><td>850</td></tr> <tr><td>May</td><td>880</td><td>850</td></tr> <tr><td>Jun</td><td>910</td><td>850</td></tr> <tr><td>Jul</td><td>910</td><td>850</td></tr> <tr><td>Aug</td><td>910</td><td>850</td></tr> <tr><td>Sep</td><td>910</td><td>850</td></tr> <tr><td>Oct</td><td>910</td><td>850</td></tr> <tr><td>Nov</td><td>910</td><td>850</td></tr> <tr><td>Dec</td><td>910</td><td>850</td></tr> <tr><td>Jan</td><td>910</td><td>850</td></tr> <tr><td>Feb</td><td>910</td><td>850</td></tr> <tr><td>Mar</td><td>910</td><td>850</td></tr> </tbody> </table>	Month	No of Direct Payments recipients	Target	Apr	860	850	May	880	850	Jun	910	850	Jul	910	850	Aug	910	850	Sep	910	850	Oct	910	850	Nov	910	850	Dec	910	850	Jan	910	850	Feb	910	850	Mar	910	850																								
Month	No of Direct Payments recipients	Target																																																																				
Apr	860	850																																																																				
May	880	850																																																																				
Jun	910	850																																																																				
Jul	910	850																																																																				
Aug	910	850																																																																				
Sep	910	850																																																																				
Oct	910	850																																																																				
Nov	910	850																																																																				
Dec	910	850																																																																				
Jan	910	850																																																																				
Feb	910	850																																																																				
Mar	910	850																																																																				
Self Directed Support	Target 5.2: By March 2019, 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 March 2019, 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.	Not currently available*				*Service validating monthly information																																																															
AHPs	Target 5.3: By March 2019, no patient waits longer than 13 weeks from referral to commencement of AHP treatment by an allied health professional.	<table border="1"> <thead> <tr> <th>Specialist</th> <th>May-18</th> <th>Jun-18</th> </tr> </thead> <tbody> <tr> <td>Total waiting >13 weeks</td> <td>4690</td> <td>4388</td> </tr> <tr> <td>Dietetics</td> <td>250</td> <td>201</td> </tr> <tr> <td>Occupational Therapy</td> <td>1978</td> <td>1876</td> </tr> <tr> <td>Orthoptics</td> <td>30</td> <td>71</td> </tr> <tr> <td>Physiotherapy</td> <td>1325</td> <td>1217</td> </tr> <tr> <td>Podiatry</td> <td>662</td> <td>642</td> </tr> <tr> <td>Speech and Language Therapy</td> <td>445</td> <td>381</td> </tr> </tbody> </table>	Specialist	May-18	Jun-18	Total waiting >13 weeks	4690	4388	Dietetics	250	201	Occupational Therapy	1978	1876	Orthoptics	30	71	Physiotherapy	1325	1217	Podiatry	662	642	Speech and Language Therapy	445	381	4690	4388	↑		<p>No Waiting > 13 weeks for an AHP appointment</p> <table border="1"> <caption>No Waiting > 13 weeks for an AHP appointment</caption> <thead> <tr> <th>Month</th> <th>Total No waiting > 13 weeks for AHPs 18/19</th> <th>Total No waiting > 13 weeks for AHP 17/18</th> </tr> </thead> <tbody> <tr><td>Apr</td><td>4800</td><td>2200</td></tr> <tr><td>May</td><td>4800</td><td>2200</td></tr> <tr><td>June</td><td>4500</td><td>2200</td></tr> <tr><td>July</td><td>2800</td><td>2200</td></tr> <tr><td>Aug</td><td>3500</td><td>2200</td></tr> <tr><td>Sept</td><td>3800</td><td>2200</td></tr> <tr><td>Oct</td><td>3800</td><td>2200</td></tr> <tr><td>Nov</td><td>3800</td><td>2200</td></tr> <tr><td>Dec</td><td>4200</td><td>2200</td></tr> <tr><td>Jan</td><td>4500</td><td>2200</td></tr> <tr><td>Feb</td><td>4800</td><td>2200</td></tr> <tr><td>Mar</td><td>4800</td><td>2200</td></tr> </tbody> </table>	Month	Total No waiting > 13 weeks for AHPs 18/19	Total No waiting > 13 weeks for AHP 17/18	Apr	4800	2200	May	4800	2200	June	4500	2200	July	2800	2200	Aug	3500	2200	Sept	3800	2200	Oct	3800	2200	Nov	3800	2200	Dec	4200	2200	Jan	4500	2200	Feb	4800	2200	Mar	4800	2200
Specialist	May-18	Jun-18																																																																				
Total waiting >13 weeks	4690	4388																																																																				
Dietetics	250	201																																																																				
Occupational Therapy	1978	1876																																																																				
Orthoptics	30	71																																																																				
Physiotherapy	1325	1217																																																																				
Podiatry	662	642																																																																				
Speech and Language Therapy	445	381																																																																				
Month	Total No waiting > 13 weeks for AHPs 18/19	Total No waiting > 13 weeks for AHP 17/18																																																																				
Apr	4800	2200																																																																				
May	4800	2200																																																																				
June	4500	2200																																																																				
July	2800	2200																																																																				
Aug	3500	2200																																																																				
Sept	3800	2200																																																																				
Oct	3800	2200																																																																				
Nov	3800	2200																																																																				
Dec	4200	2200																																																																				
Jan	4500	2200																																																																				
Feb	4800	2200																																																																				
Mar	4800	2200																																																																				
Self Directed Physiotherapy	Target 5.5: By March 2019, 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 2018, 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	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Delayed Discharges Mental Health & Learning Disability	Target 5.7: During 2018/19, ensure that 99% of all mental health discharges take place within 7 days of the patient being assessed as medically fit for discharge, with no discharge taking more than 28 days.	Total Discharges	149	130	↓	407	Mental Health Discharges % within 7 Day Standard
		% Mental Health Discharges within 7 days	96%	94%		97%	
		Number of Mental Health Discharges within 7 days	143	122		394	
		% Mental Health Discharges > 28 days	0%	4%	↓	3%	
		Number of Mental Health Discharges > 28 days	0	5		6	
		5 patients delayed >28 days during June'18 (1 x AMH, 4 x PCOPMH)					
	Target 5.7: During 2018/19, ensure that 99% of all learning disability discharges take place within 7 days of the patient being assessed as medically fit for discharge, with no discharge taking more than 28 days.	Total Discharges	6	0	→	6	Learning Disability Discharges % within 7 Day Standard
		% Learning Disability Discharges within 7 days	100%	N/A		100%	
		Number of Learning Disability Discharges within 7 days	6	N/A		6	
		% Learning Disability Discharges > 28 days	0%	N/A	→	0%	
Number of Learning Disability Discharges > 28 days		0	N/A		0		

Title	Target	Comments / Actions	Mar-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Carers Assessments	Target 6.1: By March 2019, secure a 10% increase in the number of carers' assessments offered to carers for all service users (reported quarterly)	By March 2019, secure a 10% increase in the number of carers' assessments offered 17/18 Quarterly Baseline = 18/19 Quarterly Target =	628	Reported in line with HSCB Quarterly Schedule	↑		Carers' Assessment
Short Breaks	Target 6.2: By March 2019, 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 17/18 Quarterly Baseline = 18/19 Quarterly Target =	29,702	Reported in line with HSCB Quarterly Schedule	↓		Number of Community Based Short Break Hours
	Target 6.3: By March 2019, 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 17/18 Quarterly Baseline = 18/19 Quarterly Target = Awaiting confirmation of baseline and technical guidance					

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Pharmacy Efficiency Programme	Target 7.1: By March 2019, to have commenced implementation of new contractual arrangements for community pharmacy services.						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 2019, 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.	Awaiting confirmation of baseline and technical guidance					

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Cancelled Appointments	Target 7.3: By March 2019, 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%.	Number of Outpatient Appointments Cancelled by Hospital which resulted in the patient waiting longer for their appointment	957	747		2691	
Elective Care	Target 7.4: By March 2019, 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.					

1st April - 30th June 2018					
SUMMARY	CORE ACTIVITY				
Activity Type	Target for Year 2018/19	Core Target YTD	Core Activity YTD	Variance	% Variance
Elective Inpatients (Admissions) & Day Cases	29022	7256	6887	-369	-5.1%
Scopes	11050	2763	2504	-259	-9.4%
New Outpatient Attendances	71895	17974	16897	-1077	-6.0%
Review Outpatient Attendances	112434	28109	27500	-609	-2.2%
Fracture Outpatient Attendances	22629	5657	5545	-112	-2.0%
Imaging (includes MRI, CT, Non Obstetric Ultrasound and Plain Film Xrays)	263180	65795	68942	3147	4.8%

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Delayed Discharges Acute Hospital	Target 7.5: By March 2019, ensure that 90% of 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 acute hospital take place within 6 hours	Acute Discharges					
		Complex Discharges - % discharged within 48 hours	86%	78%	↓	81%	
		% discharged within 7 days	92%	91%	↓	90%	
		Number waiting > 7 days	30	25	↓	97	
		Non Complex Discharges - % discharged within 6 hours	97%	97%	→	97%	

Top 5 Reasons for Delay			ALTNAGELVIN HOSPITAL	SOUTH WEST ACUTE HOSPITAL	TOTAL
(Complex Discharges Greater Than 48 Hours)					
APRIL - JUNE 2018					
1	COMPLEX 5	NO DOMICILIARY PACKAGE AVAILABLE	22	34	56
2	COMPLEX 2	CARE PLANNING	30	18	48
3	COMPLEX 18	NO SUITABLE STEP DOWN BED AVAILABLE	20	6	26
4	COMPLEX 1	HOSPITAL ASSESSMENT	3	12	15
5	COMPLEX 6	NO RESIDENTIAL HOME BED AVAILABLE	8	0	8

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Medicines Efficiency Programme	Target 7.6: By March 2019, to have obtained savings of £90m through the 2016-19 Regional Medicines Optimisation Efficiency Programme, separate from PPRS receipts.	Awaiting confirmation of baseline and technical guidance					

Title	Target	Comments / Actions	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis	
Seasonal Flu	Target 8.7: By December 2018, ensure at least 40% of Trust staff (health care and social care staff) have received the seasonal flu vaccine.	As at 31st March 2018 - 2977 staff out of the total no. of Trust staff (10,583) have received the seasonal flu vaccine.				Seasonal flu campaign 18/19 commences Autumn 2018.	
Title	Target	Comments / Actions	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis	
Absence	Target 8.8: By March 2019, to reduce Trust staff sick absence levels by a regional average of 5% compared to 2017/18 figure.	As at 30th June 2018 cumulative position 6.34% against WHSCT 18/19 target of 5% (One Month reporting Time Lag)		↑	6.34%		
Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Healthier Workplace	Target 8.9: By March 2019, 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 FIG.	Awaiting confirmation of baseline and technical guidance					
OBA	Target 8.10: By March 2019, to pilot OBA approach to strengthen supports for the social work workforce.	Awaiting confirmation of baseline and technical guidance					
Title	Target	Comments / Actions	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis	
Quality 2020	Target 8.11: By March 2019, 50% of the HSC workforce should have achieved training at level 1 in the Q2020 Attributes Framework and 5% to have achieved training at level 2.	Level 1 Training As at 30/06/2018 cumulative position [3517] (34%) against WHSCT 18/19 Target [10,516] Staff	Cumulative Position as at 30th June 2018	→	34%		
		Level 2 Training As at 25/07/2018 cumulative position [237] (2%) against WHSCT 18/19 Target [10,516] Staff		↓	1-2%	This needs validated as it includes teams who received microsystem coaching and it needs ensured that they all attended enough of the sessions. SE Trust need to confirm attendance at their programmes. We are commencing our own programme in October and plan to train 60 staff but this will not be completed by the end of March.	
Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Dysphagia Awareness	Target 8.13: By March 2019, Dysphagia awareness training designed by speech and language therapy to be available to Trust staff in all Trusts.						

Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Make Every Contact Count	Target 1.5: By March 2019, 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 2019, 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 1.7: By March 2019, 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 birth weight for gestation.	Awaiting confirmation of baseline and technical guidance					Awaiting confirmation of baseline and technical guidance
Title	Target	Comments / Actions	Mar-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Healthy Child/ Healthy Future	Target 1.8: By March 2019, 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=6760 Total Seen=5509 % Seen=81% % Seen in Child's Home=68%	Cohort=6795 Total Seen=5883 % Seen=86% % Seen in Child's Home=69%			These figures are provisional at end of June'18 as validated figures are not reported until 3 months after the quarter end
Title	Target	Comments / Actions	May-18	Jun-18	Trend	Cumulative Position	Trend / Activity Analysis
Best Start in Life	Target 1.9: By March 2019, 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 1.11: By March 2019, 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	Target 1.12: By September 2018, 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					

<p>Long Term Conditions</p>	<p>Target 1.13: By July 2018, to provide detailed plans (to include financial profiling) for the regional implementation of the diabetes feet care pathway. Consolidation of preparations for regional deployment of the care pathway will be an important milestone in the delivery of the Diabetes Strategic Framework.</p>	<p>Awaiting confirmation of baseline and technical guidance</p>					
------------------------------------	--	--	--	--	--	--	--

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
HSCB	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	NI Radiology and Diagnostics System
OBA	Outcomes Based Accountability
OBC	Outline Business Case
OP	Outpatient
OT	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	Ventilator Associated Pneumonia
VTE	Venous Thromboembolism
WHO	World Health Organisation