



Western Health  
and Social Care Trust

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# PERFORMANCE REPORT APRIL – JUNE 2024

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Trust Board – 5th September 2024

## Context

This report provides an update for Hospital and Community Services on progress at the end of 2024/25 Quarter 1 (April to June 24). Information is provided on the Trust's performance against:

- Targets set out in the 2024/25 HSC Service Delivery Plan (SDP) version 3 (17 July 2024).
- Access targets within the Ministerial standards, as set out in the last Commissioning Plan Direction (CPD).

The 2023/24 SDP has been rolled forward into 2024/25 with some adjustments and/or uplifts to Baselines and Targets as detailed at Appendix 1. This approach was agreed at the Performance and Transformation Executive Board (PTEB) meeting in May 24, pending the introduction of the new Strategic Outcomes Framework and associated Systems Oversight Measures, which has since been approved by Minister in July 24.

Reporting against the four District Nursing metrics has been paused following a review of the District Nursing Service. It is expected that the District Nursing Service Overview report will be presented at the PTEB meeting in September 2024, highlighting recommendations including a revision of monitoring metrics. As a result, Western Trust performance against the four metrics for Quarter 1 (April to June 24) has been reported as "Unavailable" in line with the HSC Service Delivery Plan – Performance Report Quarter 1 (April to June 24); this reduced the total number of RAG assessed "Green" metrics by four as detailed below.

In addition, a change to the methodology in the Public Health Agency (PHA) Health Care Acquired Infection (HCAI) for Methicillin-resistant staphylococcus aureus (MRSA) and Clostridioides Difficile (CDI) has resulted in a material shift in the SDP target and Western Trust Quarter 1 (April to June 24) performance; with one metric RAG assessed "Red" and one RAG assessed "Green", compared to two RAG assessed "Green" metrics at 2023/24 Year End.

The overall Western Trust RAG status in 2024/25 Quarter 1 (April to June 24) has been impacted by the above changes. It is anticipated that performance in each Quarter of 2024/25 may potentially be impacted, as these service areas achieved high levels of performance throughout 2023/24.

## Executive Summary

The 2024/25 Quarter 1 (April to June 24) performance was reported against 64 metrics; of these 45% assessed as "Red", 16% "Amber", 33% "Green" and 6% "Unavailable".

Although the number of metrics RAG assessed "Red" increased at 2024/25 Quarter 1 (April to June 24), the cumulative activity levels delivered during this period improved across a number of service areas, when compared to the same period (April to June 23) of 2023/24 and the end of year 2023/24 Quarter 4 (January to March 24). Specific acknowledgement to the improvement in Red Flag 1<sup>st</sup> Outpatient appointment, Imaging: MRI and CT, Cardiac MRI, Cardiac CT, Echo, Inpatients, Endoscopy, Psychological Therapies, Dementia, Child

and Adolescent Mental Health Service, Physiotherapy, Speech and Language Therapy and Community Dental Contacts.

Industrial Action during 2024/25 Quarter 1 (April to June 24) had some impact on elective performance and activity with 663 Outpatient, 18 Inpatient and 60 Day case cancellations. These cancellations do not represent the full impact, as they exclude lost activity where appointment slots were not booked once Industrial Action was agreed.

A detailed assessment of Western Trust 2024/25 Quarter 1 (April to June 24) cumulative activity delivered, baseline and expected target for each service area is summarised in Section 2. The RAG status for 2023/24 Quarter 4, 2023/24 Year End and each month of 2024/25 Quarter 1 is provided in detail in Section 3.

Service areas where the cumulative Quarter 1 (April to June 24), performance has met or exceeded the baseline activity and the expected/SBA target (RAG assessed Green) are:

### **Hospital Services**

- *Cancer Services*: Red Flag 1<sup>st</sup> OP appointment.
- *Imaging*: MRI, CT and Non-Obstetric ultrasound.
- *Cardiac*: MRI and CT.
- *Elective Care*: Review Outpatients.

### **Community Services**

- *Community Care*: Domiciliary Care Unmet Need (Total packages).
- *Children's Social Care*: Child Protection Case Conferences (15 Days, 3 and 6 months) and Unallocated Cases.
- *Mental Health Services*: Psychological Therapies, Dementia (New and Review Total) and Child and Adolescent Mental Health Service (New and Review).
- *Allied Health Professionals*: Occupational Therapy and Speech and Language (New and Review Total).
- *Community Dental*: Contacts (New and Review Total).

### **Public Health**

- *Healthcare Associated Infections (HCAI)*: Methicillin-resistant Staphylococcus aureus (MRSA).

### **Northern Ireland Ambulance Service (NIAS)**

- *Handover Times*: <60 minutes.

Service areas where the cumulative Quarter 1 (April to June 24), performance has almost met the baseline activity and the expected/SBA target (RAG assessed Amber) are:

### **Hospital Services**

- *Cancer Services*: 31 Cancer Access performance.
- *Cardiac*: Echo.
- *Elective Care*: Day Case and Theatre Operating Times (Main).

## **Community Services**

- *Community Care*: Direct Payments.
- *Mental Health Services*: Adult Mental Health (New and Review Total).
- *Allied Health Professionals*: Physiotherapy (New and Review Total).
- *Stroke Service*: Thrombolysis (South West Acute).
- *Community Dental*: GA sessions (Total).

## **Northern Ireland Ambulance Service (NIAS)**

- *Handover Times*: <30 minutes.

Service areas where the cumulative Quarter 1 (April to June 24), performance has not met baseline activity and the expected/SBA target; with an under-delivery in performance of 5% or more (RAG assessed Red) include:

## **Hospital Services**

- *Cancer Services*: 14 and 62 Day Access.
- *Cardiac*: Cath Lab procedures.
- *Elective Care*: New Outpatients, Inpatient, Endoscopy, Scheduled Theatre Minutes and Theatre operating times (DPU).
- *Unscheduled Care*: ED 12 Hour Performance, Weekend Discharges (Complex and Simple: Altnagelvin and South West Acute) and Average Length of Stay (Altnagelvin and South West Acute).

## **Community Services**

- *Allied Health Professionals*: Dietetics, Orthoptics and Podiatry (New and Review Total).
- *Stroke Service*: Thrombolysis (Altnagelvin) and % Admitted <4 hours (Altnagelvin and South West Acute).

## **Public Health**

- *Healthcare Associated Infections (HCAI)*: Clostridioides Difficile (CDI).
- *Antimicrobial Consumption*: Total antibiotic prescribing, Carbapenem use, Piperacillin-tazobactam use and Use of Antibiotics from the WHO access AWaRe Category

## **Northern Ireland Ambulance Service (NIAS)**

- *Handover Times*: <15 minutes, >2 hours and Ambulance Turnaround Times <30 minutes.

## **Other Relevant Issues**

To support service delivery in 2024/25, the Minister has approved full year Waiting List Initiative (WLI) funding of £12 million for the Western Trust. To date, WLI funding has been approved on a quarterly basis and this commitment will enable the Trust to maximise the additional In-house and Independent Sector (IS) capacity that this full year funding will provide. This funding is directed to Red Flag, Urgent and Time Critical patients. The Trust is finalising the full year plan for submission to SPPG by the end of August 24.

During the roll out of Encompass in the Belfast Trust, there were 156 Western Trust staff who either provided support in the weeks prior to and or during the Go Live process on the 6<sup>th</sup> June 24. This included 120 Super Users, 6 Pharmacists and 15 Doctors for the Bedded Cut Over, 3 Senior Leaders as observers, 8 PMO staff who provided Strategic Command Centre support and 4 Professional Leads who provided Operational Lead support. The Trust support from across the region culminated in a successful Go Live for the Belfast Trust.

We have now commenced discussion on a new set of System Outcome Measures and meetings have been held with all Trusts on a new framework and reporting mechanism. It is expected that Trust Board will be briefed on this in due course.

## HOSPITAL SERVICES

### Cancer services – Commissioning Plan Direction: Access Performance

*During 2024/25, all urgent suspected breast cancer referrals should be seen within 14 days.*

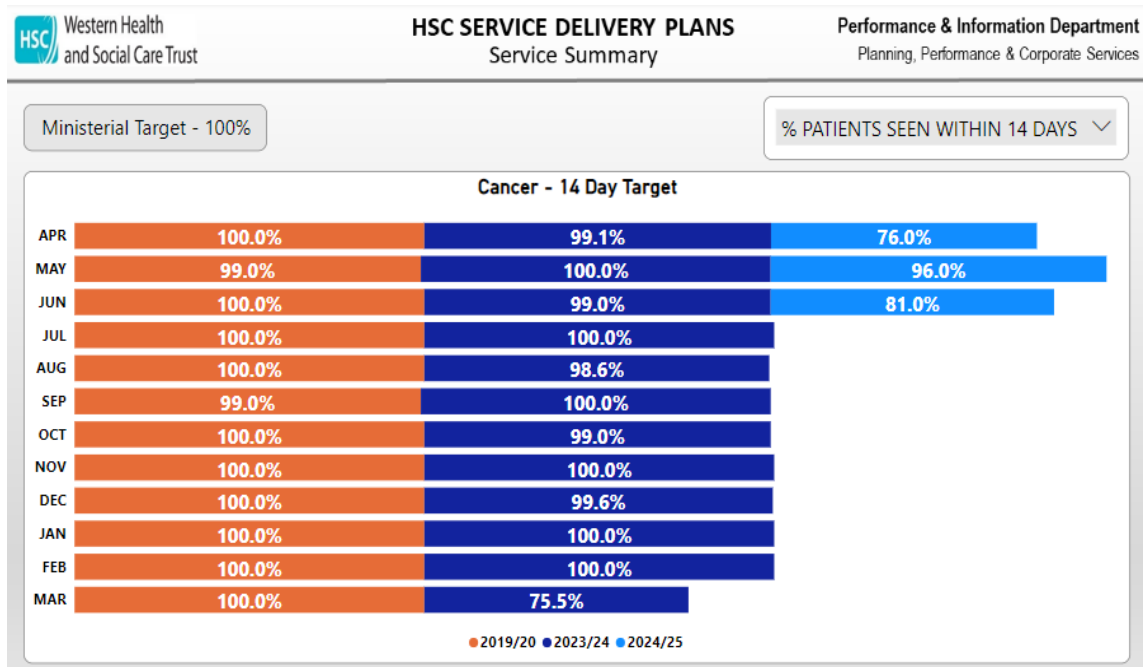
**14 Day Target:** During Quarter 1 (April to June 24), the Western Trust provided support to South Eastern Trust (SET) and Belfast Trust (BT) to help address their suspect breast cancer waiting times.

The Trust accepted and assessed 149 patients (75 SET patients in April 24 and 74 BT patients in June 24); of which 126 patients waited longer than 14 days (**15%**).

The Western Trust performance was **97%** (23 patients waited longer than 14 days).

This resulted in an overall quarter end performance of **84.0%** against the 100% Target.

The Western Trust remains the only Trust to deliver an “Acceptable” performance during this period.



### Cancer services – Commissioning Plan Direction: Access Performance

*During 2024/25, at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.*

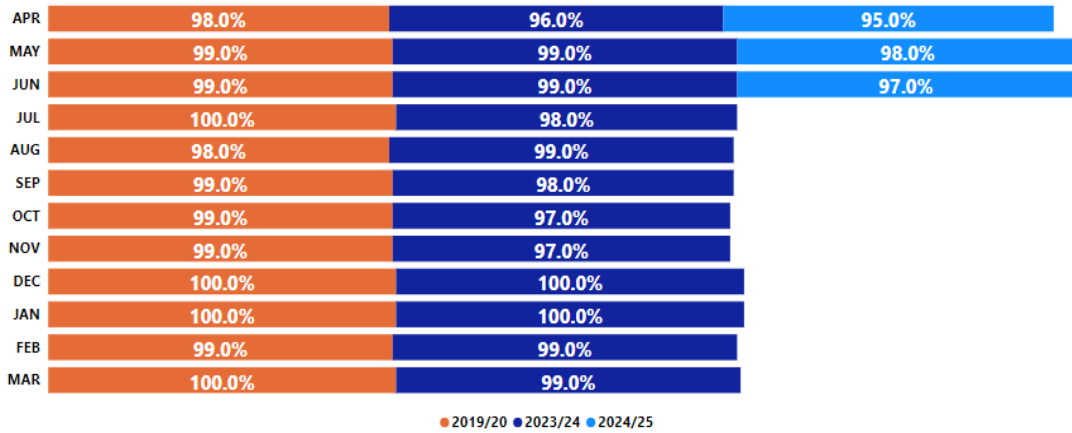
**31 Day Target:** Performance against the Ministerial Cancer access target remains strong with **97%** achieved during Quarter 1 (April to June 24).

The Western Trust was the only Trust to maintain a high level of performance against this target and achieve an “Amber” RAG Status at Quarter 1.

Ministerial Target - 98%

% PATIENTS SEEN WITHIN 31 DAYS

Cancer - 31 Day Target



**Cancer services – Commissioning Plan Direction: Access Performance**

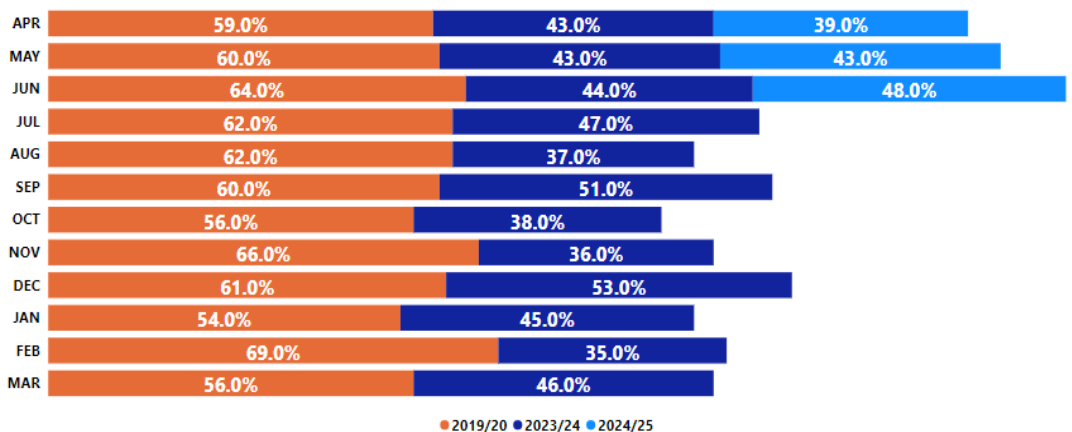
*During 2024/25, at least 95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days.*

**62 Day Target:** performance against this target remains challenging and was not met any month during Quarter 1 (April to June 24). A similar position was reported by all Trusts against this specific target.

Ministerial Target - 95%

% PATIENTS SEEN WITHIN 62 DAYS

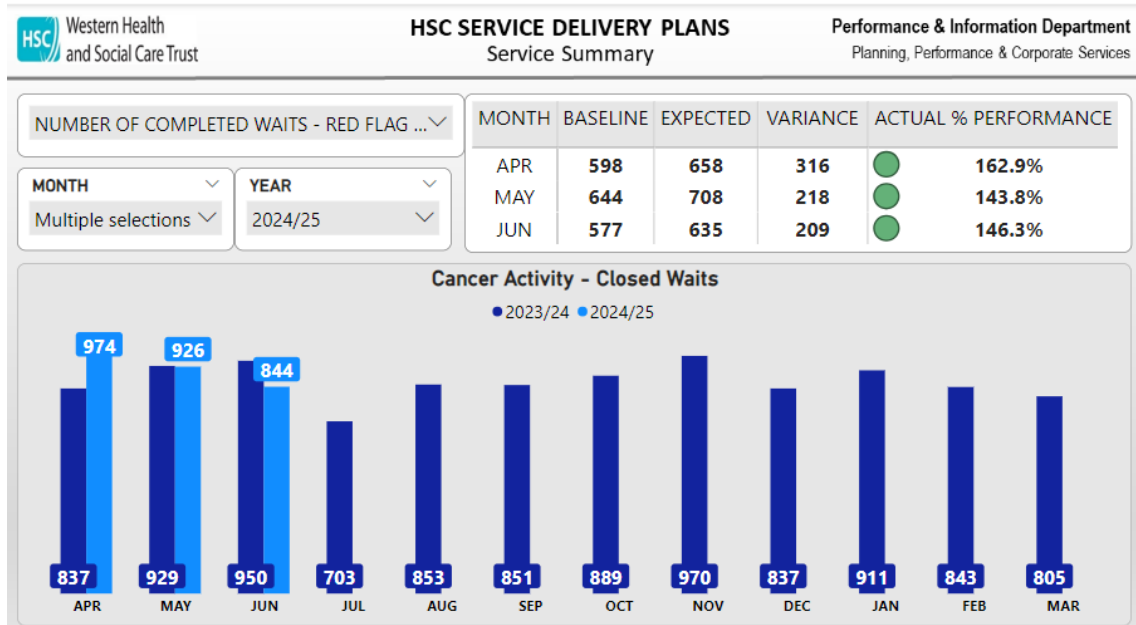
Cancer - 62 Day Target



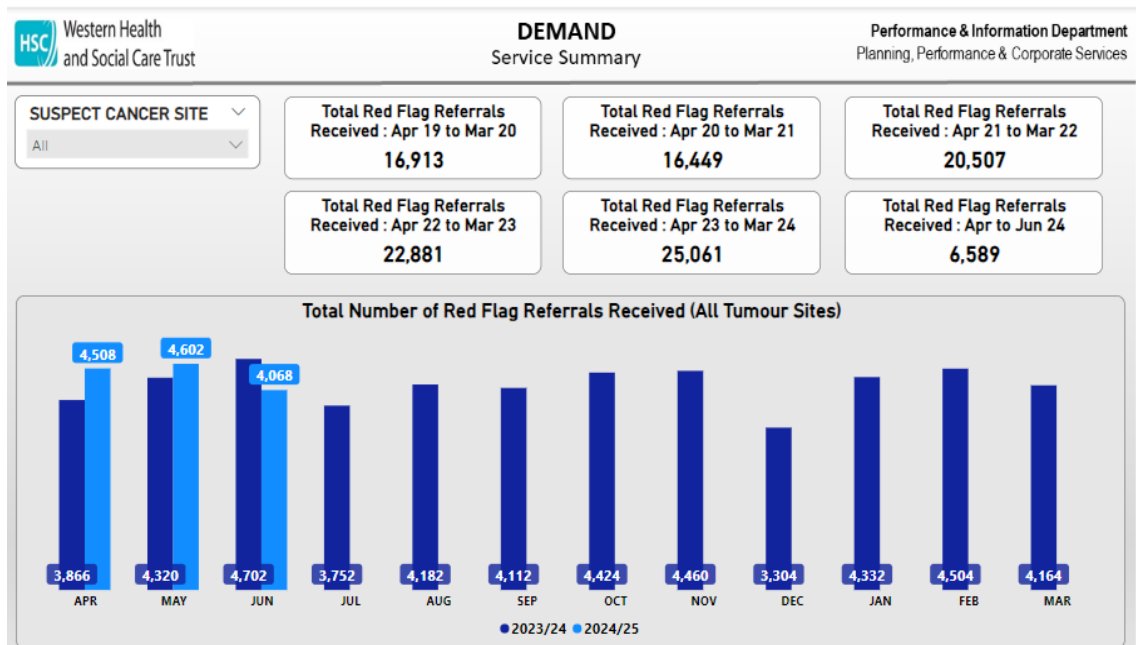
## Red Flag (New) Completed Waits (Excluding Breast)

The 2024/25 SDP target is to deliver 110% of 2019/20 activity.

The cumulative number of closed waits completed during Quarter 1 (April to June 24) (2,744) reflects **150.9%** of the cumulative 2019/20 Baseline activity (1,819), and continues to reflect the best performance of the 5 Trusts.



The number of Red Flag Referrals Received (All Tumour sites) during 2024/25 Quarter 1 (April to June 24) (6,589), increased by **25%** compared to same period 2021/22 (5,269) (Baseline year); equivalent to 1,320 additional Red Flag referrals.





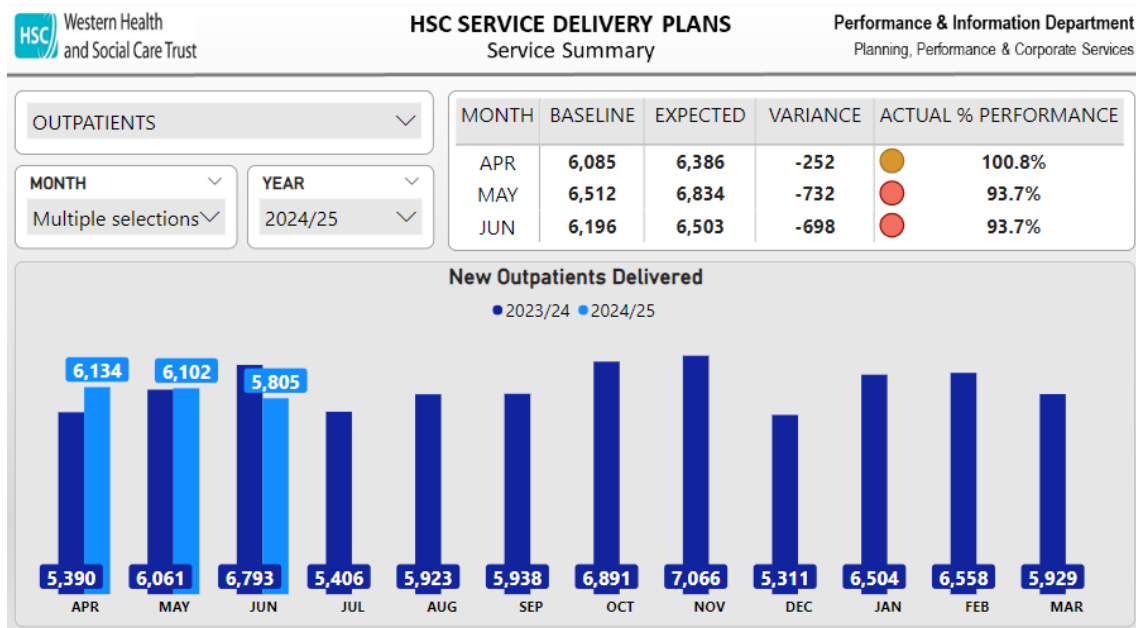
## Elective Care – Outpatients Service Delivery Plan

The 2024/25 SDP target is to deliver 105% (New) and 100% (Review) of 2019/20 activity.

The New and Review activity further improved in the first two months of 2024/25 with more activity delivered in April and May 24 when compared to the same months of 2023/24. There was some impact on the performance and activity from industrial action with 663 outpatient cancellations (New Outpatients 221 and Review Outpatients 442).

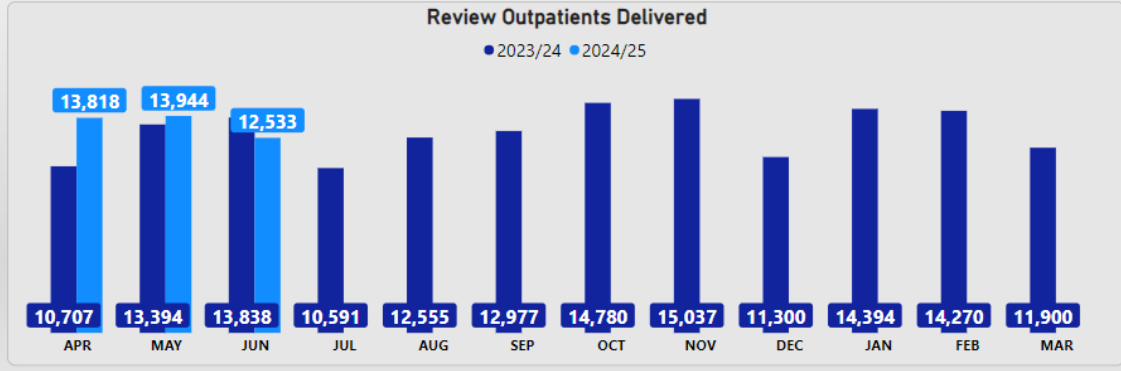
Overall a total of **58,336** New (18,041) and Review (40,295) Outpatients was delivered during Quarter 1 (April to June 24); reflecting a **2%** increase on 2019/20 Baseline activity (1,289 additional attendances) and a **4%** increase on 2023/24 activity (2,153 additional attendances). The Western Trust was again the second best performing Trust in the region, no Trust met the New Outpatient Target during this Quarter. A breakdown by New and Review is provided below.

The cumulative New outpatient activity delivered during Quarter 1 (April to June 24) (18,041) reflects 96.0% of the cumulative 2019/20 Baseline activity (18,793). The 2019/20 Baseline uplifted by 788 (Full Year) equating to 198 in Quarter 1 (April to June 24), to reflect additional investment received.



The cumulative Review outpatient activity delivered during Quarter 1 (April to June 24) (40,295) reflects 105.3% of the cumulative 2019/20 Baseline activity (38,254). The 2019/20 Baseline uplifted by 595 (Full Year) equating to 150 in Quarter 1 (April to June 24), to reflect additional investment received.

OUTPATIENTS	MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
	APR	12,631	12,631	1,187	109.4%
	MAY	13,235	13,235	709	105.4%
	JUN	12,388	12,388	145	101.2%



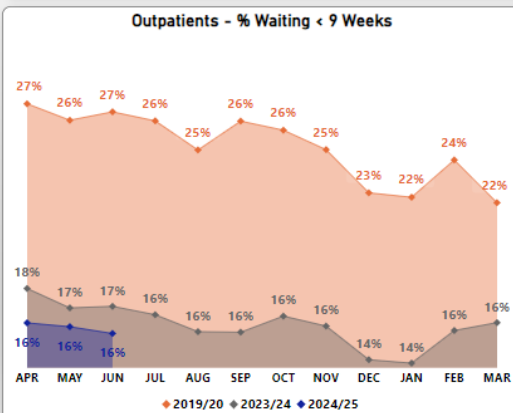
### Elective Care – Outpatients Access Performance

By March 2025, 50% of patients should be waiting no longer than 9 weeks for an outpatient appointment and no patient waits longer than 52 weeks. For ALL Specialties

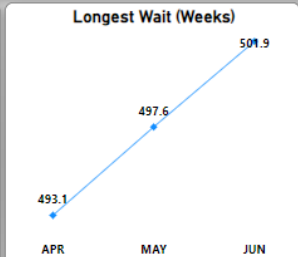
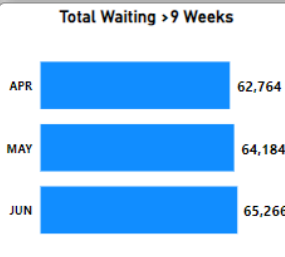
At the end of June 24, the Trust reported **77,293** patients waiting for an outpatient appointment; with **65,266** patients waiting longer than 9 weeks. Performance has deteriorated when compared to End of Year March 24; when there were **73,255** patients in total waiting; with **61,462** waiting longer than 9 weeks.

**CPD TARGET**  
By March 2025, 50% of patients should be waiting no longer than 9 weeks for an outpatient appointment and no patient waits longer than 52 weeks (All specialties).

TEAM: OUTPATIENTS  
YEAR: 2024/25  
MONTH: JUN



TOTAL WAITING	77,293
TOTAL >9 WEEKS	65,266 (84%)
TOTAL <9 WEEKS	12,027 (16%)



## Elective Care – Inpatient and Day Case Service Delivery Plan

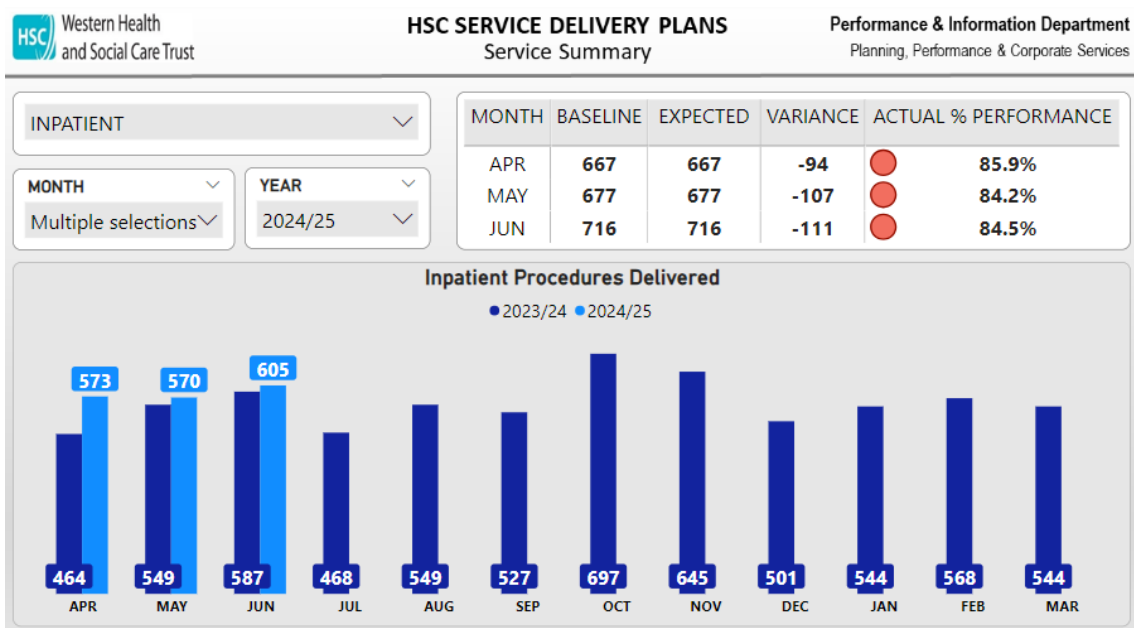
The 2024/25 SDP target is to deliver 100% of 2019/20 activity.

The Trust delivered more Inpatient activity during Quarter 1 (April to June 24), when compared to the same months of 2023/24. Despite this increase, the out turn and performance was below target during this period.

The high level of Day case performance achieved throughout 2023/24 was maintained in the first two months of Quarter 1 (April to June 24), with more activity delivered during April and May 24 when compared to the same months of 2023/24. Industrial Action during the Quarter had some impact on the Inpatient and Day case performance and activity with 18 Inpatients and 60 Day case cancellations.

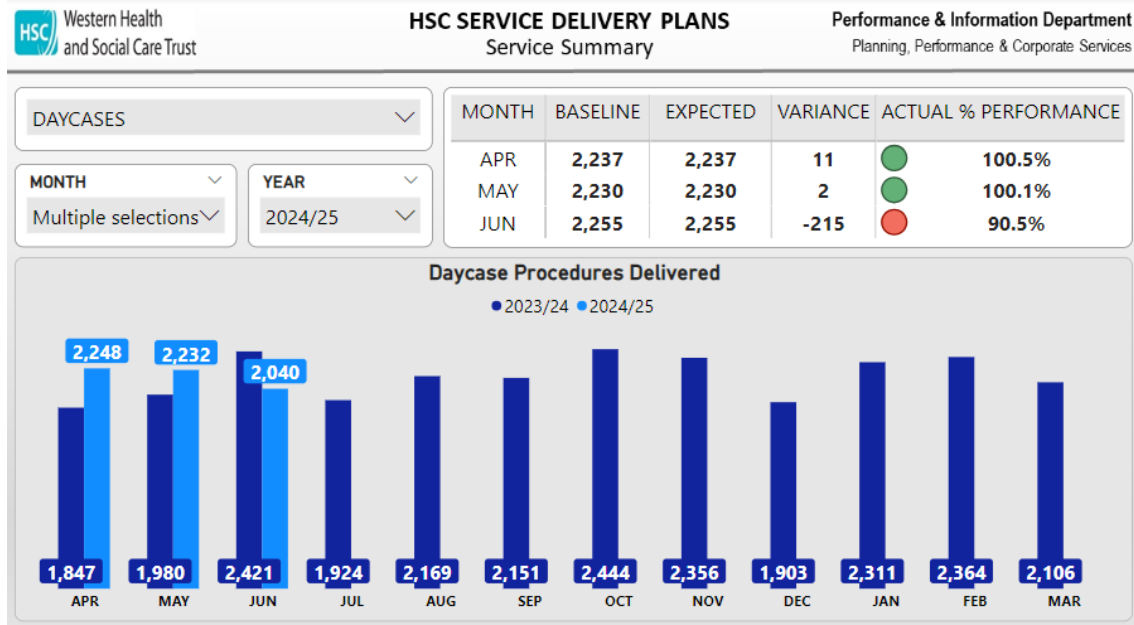
The cumulative Inpatient activity delivered during Quarter 1 (April to June 24) (1,748) reflects 84.9% of the 2019/20 Baseline activity (2,060).

Achievement of the Inpatient target remains challenging; across the region performance was deemed “Unacceptable” by SPPG in its report to PTEB in 4 of the 5 Trusts.



The cumulative Day case activity delivered during Quarter 1 (April to June 24) (6,520) reflects **97%** of the 2019/20 Baseline activity (6,722). The 2019/20 Baseline uplifted by 1,989 (Full Year) equating to 498 in Quarter 1 (April to June 24), to reflect additional investment received.

The Western Trust was the best performing Trust across the region in this service area at Quarter 1, achieving an “Amber” RAG Status.



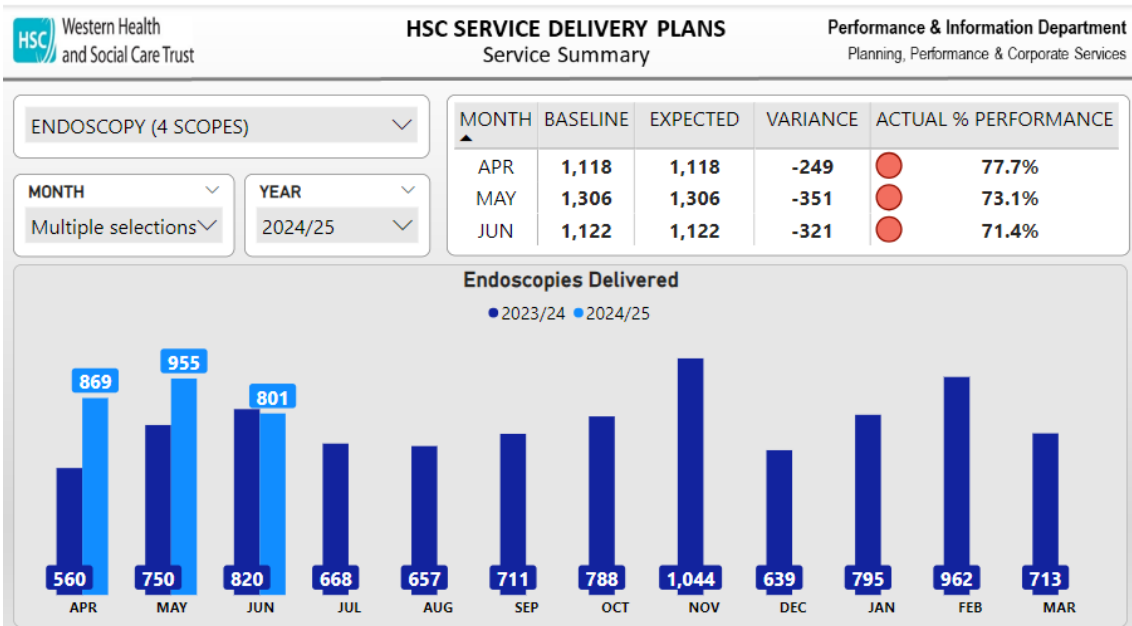
### Elective Care – Endoscopy Service Delivery Plan

*The 2024/25 SDP target is to deliver 100% of 2019/20 baseline + 3,000 scopes per year. (Target adjusted to reflect regional investment into Omagh Hospital).*

Activity levels improved in the first two months of 2024/25 with more activity delivered in April and May 24 when compared to the same months of 2023/24. The quarterly activity was impacted by industrial action with 40 booked appointments cancelled.

The Endoscopy service capacity also remains impacted by vacant Consultant (Surgical and Gastroenterology) and Nurse Endoscopist posts. It is anticipated that capacity will increase from Quarter 3 (October to December 24) with the commencement of three GI Endoscopists (one to commence end August 24 and two by the end of September 24) and three Consultant Surgeons starting in Autumn 24. In addition, a third Nurse is to undertake the Nurse Endoscopy training from September 24 to September 26.

The cumulative activity delivered during Quarter 1 (April to June 24) (2,625) reflects **74.0%** of the cumulative 2019/20 Baseline activity (3,546). The 2019/20 Baseline uplifted by 3,000 (Full Year), equating to 750 in Quarter 1 (April to June 24), to reflect additional investment received.



The Quarter 1 (April to June 24) Endoscopy Service Trajectory provides a breakdown of the **2,625** activity delivered by:

- **Core Service:** 45 available sessions per week equated to predicted activity of 2,370 patients during this period, of which **2,226** patients attended.
- **Omagh DPC:** 60 available sessions which equated to predicted activity of 432 patients of which **399** patients attended.

The Service continue to utilise resource from the Regional Endoscopy Centre (Lagan Valley) and two Independent Sector providers to support core capacity. During Quarter 1 (April to June 24), a total of:

- **294** Western Trust red flag patients attended and were treated at Lagan Valley.
- **142** Western Trust patients attended and were treated via external out sourcing to the Independent Sector. Contract commenced week beginning 10<sup>th</sup> June 24.

The patients treated at these sites are additional and separate to the Western Trust SDP activity detailed above.

### Elective Care – Inpatients and Day Case Access Performance

*By March 2025, 55% of patients should wait no longer than 13 weeks for inpatient/day case treatment and no patients waits longer than 52 weeks.*

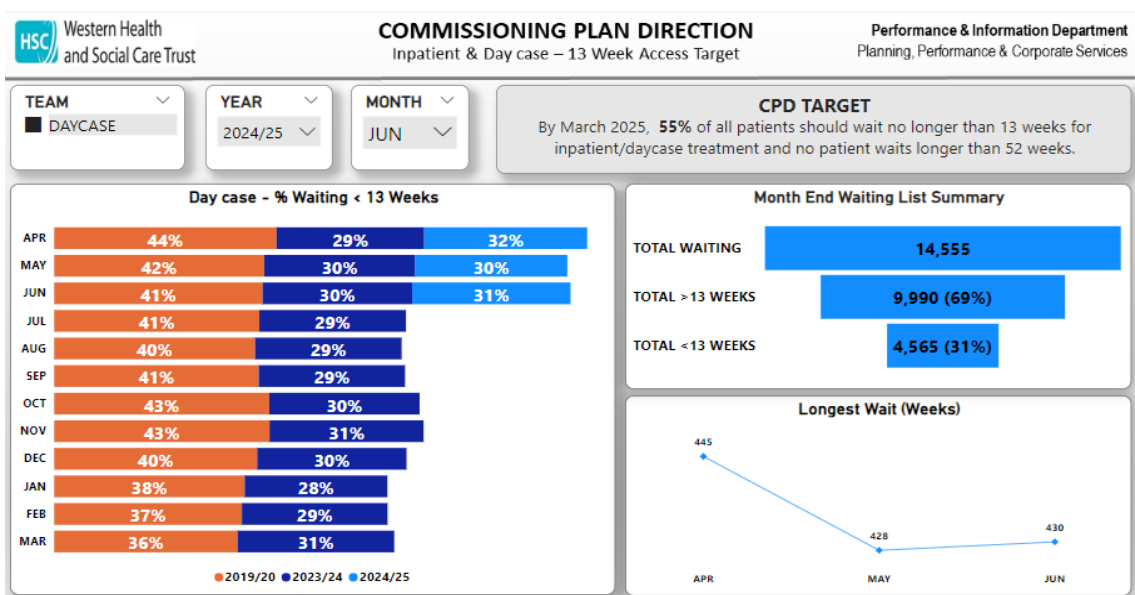
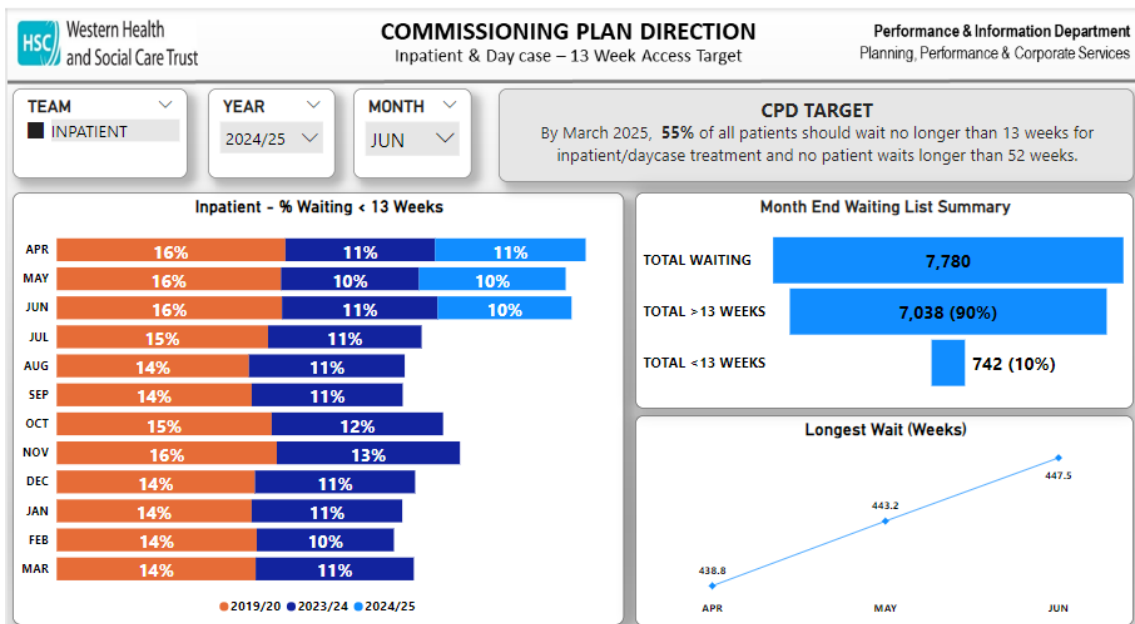
There has been continued improvement in performance in this service. At the end of June 24 the Trust reported an overall total of **22,335** waiting for Inpatient and Day case treatment with **17,028** waiting longer than 13 weeks; compared to total waiting of **22,858** with **17,379** waiting longer than 13 weeks at the End of Year March 24. Of those waiting at the end of June 24 there were:

- **7,780** patients waiting for Inpatient Treatment with **7,038** waiting longer than 13 weeks. Performance has further improved when compared to End of Year March 24; when there were **8,165** in total waiting and **7,245** waiting longer than 13 weeks.
- **14,555** patients waiting for Day case Treatment, with **9,990** waiting longer than 13 weeks. Performance has further improved when compared to End of Year March 24; when there were **14,693** in total waiting and **10,134** waiting longer than 13 weeks.

Endoscopy

Of the number waiting for Inpatient and Daycare treatment (22,335) at the end of June 24 there were:

- **4,539** people waiting for an Endoscopy of which **957** are red flag patients. Of the 957 red flag patients waiting, **416** are waiting longer than 21 days. The overall total number waiting for an Endoscopy, the number of red flag patients and those waiting longer than 21 days has further improved compared to End of Year March 24 (4,857 total waiting, 1,041 red flag patients with 497 waiting longer than 21 days).



## Elective Care – Theatre Scheduled Minutes Service Delivery Plan

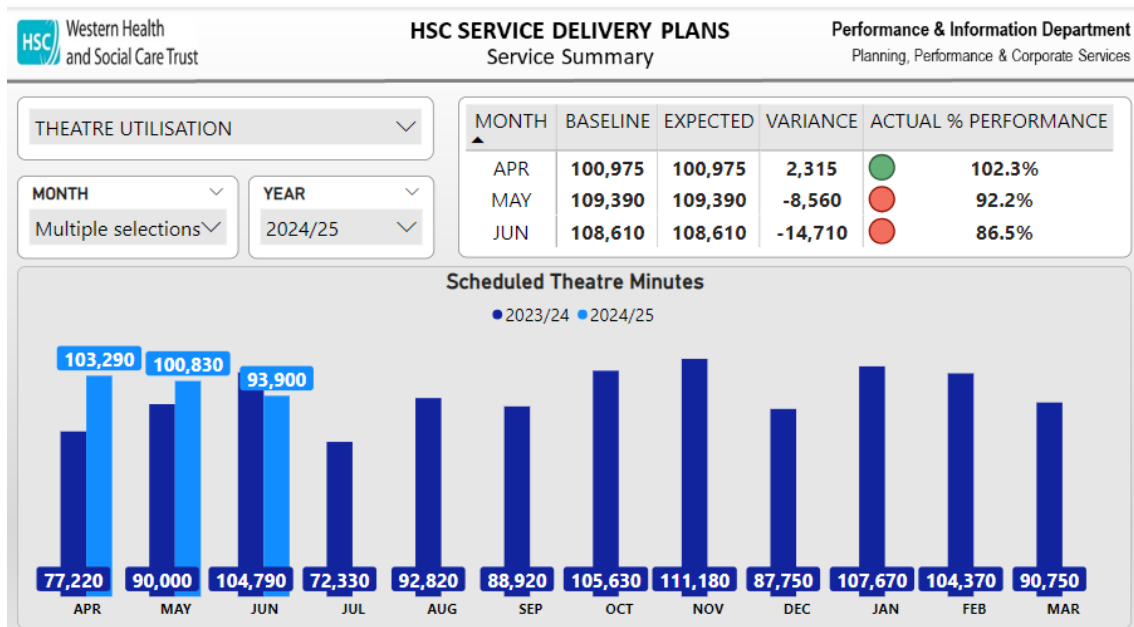
*Trusts to deliver at least the average elective (planned) theatre minutes delivered in 2018/19 and 2019/20 adjusted where appropriate to reflect new investment*

The number of Scheduled Theatre Minutes increased in the first two months of 2024/25 with more activity delivered in April and May 24 when compared to the same months of 2023/24. Despite this increase, the May and June 24 activity was below the expected target and overall deemed “Unacceptable” by SPPG in their report to PTEB.

Although the performance across all Trusts received a “Red” RAG Status, the Western Trust was the best performing in the region.

Consultant Anaesthetic workforce challenges impacted on performance; the Trust continues to progress recruitment and work with Clinicians to address these vacancies.

The cumulative Scheduled Theatre Minutes delivered during Quarter 1 (April to June 24) (298,020) reflects 93.4% of the cumulative number delivered against Baseline activity (318,975).



## Elective Care – Theatre Operating Times Service Delivery Plan

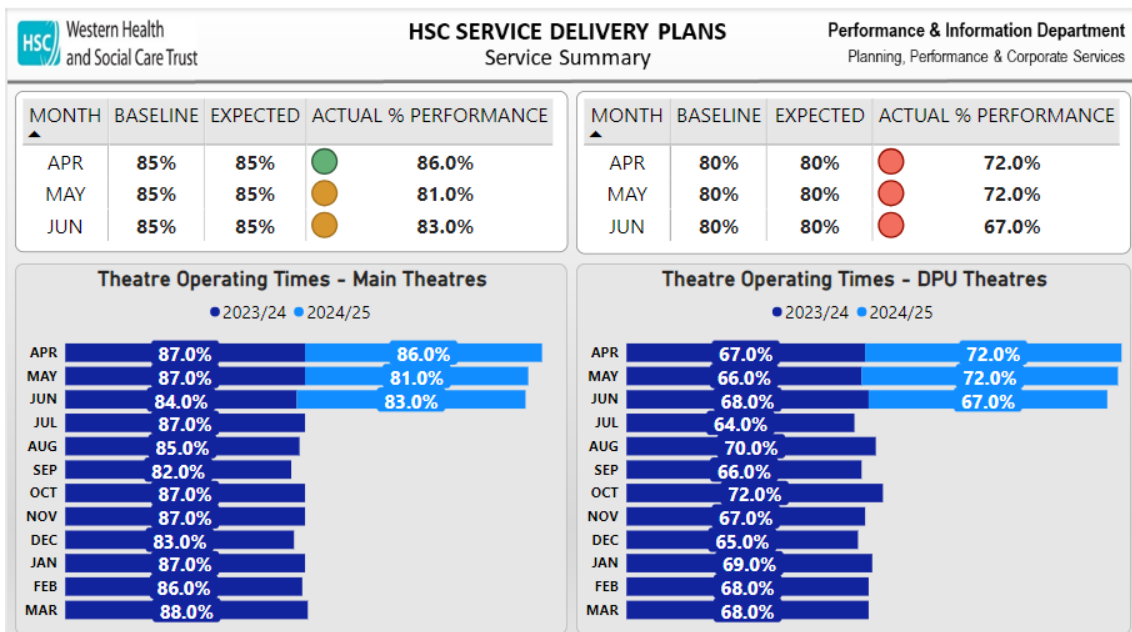
Trusts to deliver an OP time of 85% for main theatres and 80% for day procedure units

The Main Operating Times performance has remained broadly similar during Quarter 1 (April to June 24), with a marginal dip in May 24. Regionally, Western Trust performance ranked 2<sup>nd</sup> of the 5 Trusts in this service area.

The DPU Operating Times performance improved in April and May 24 yet remained below the expected target. Regionally, the Western Trust was 4<sup>th</sup> of the 5 Trusts in its performance delivery, and again deemed “Unacceptable” by SPPG in its report to PTEB.

The cumulative Quarter 1 (April to June 24) performance achieved:

- **Main Theatres: 83.0%** against the 85% target.
- **DPU Theatres: 70.0%** against the 80% target.





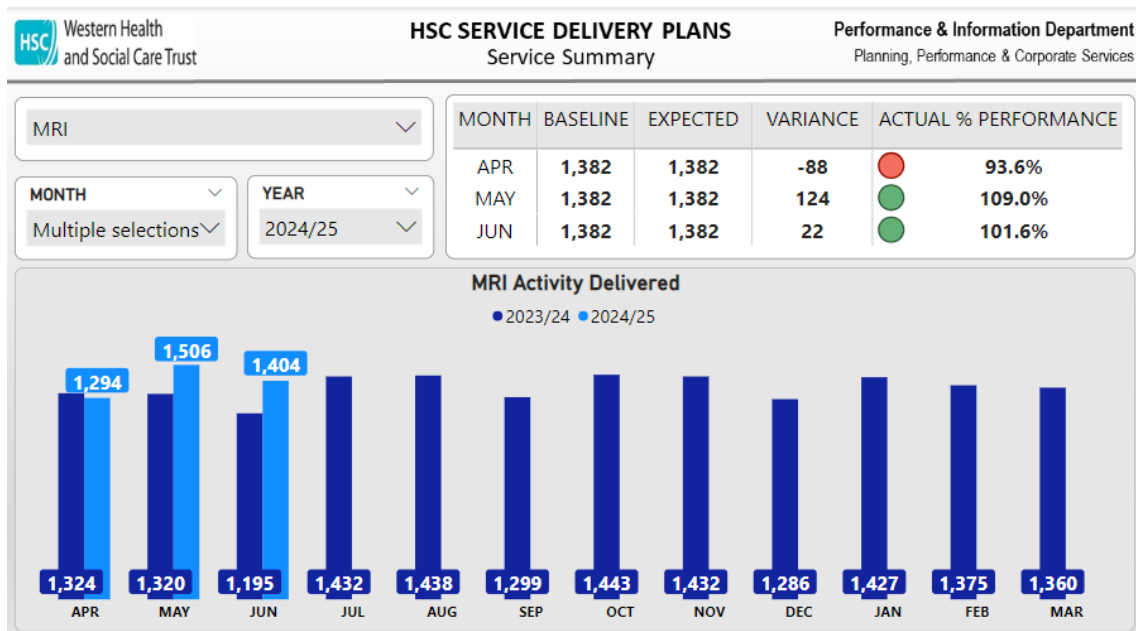
## Imaging Diagnostics – Service Delivery Plan

The 2024/25 SDP target is to deliver activity in line with agreed SBA volumes.

A high level of performance has been maintained across these three areas throughout Quarter 1 (April to June 24). Regionally, the Western Trust was the only trust to achieve RAG “Green” in all three metrics at Quarter 1.

The cumulative performance achieved during Quarter 1 (April to June 24) for:

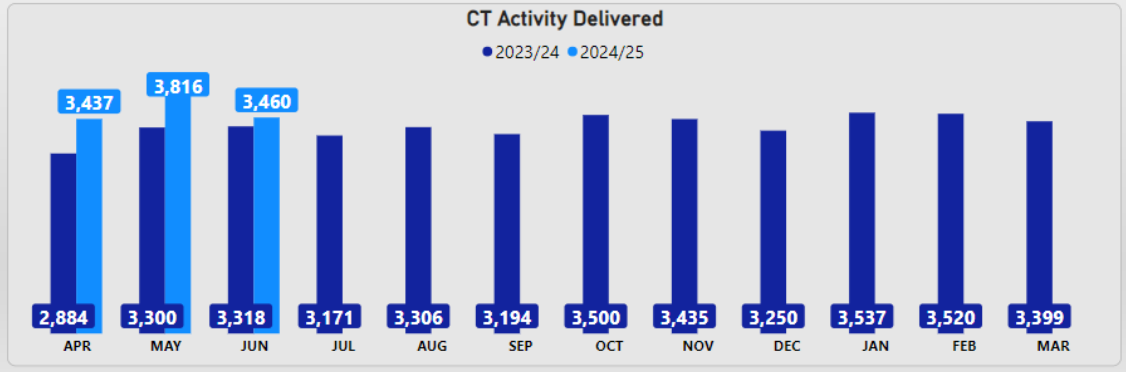
- **MRI: 101.4%** of SBA volume achieved; cumulatively the service delivered 4,204 scans compared to the cumulative SBA target of 4,146.
- **CT: 132.5%** of SBA volume achieved; cumulatively the service delivered 10,713 scans compared to the cumulative SBA target of 8,088. The SBA target exceeded every month of Quarter 1.
- **Non-Obstetric Ultrasound: 103.6%** of SBA volume achieved; cumulatively the service delivered 11,005 scans compared to the cumulative SBA target of 10,627. The SBA target was exceeded every month of Quarter 1.



CT

MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
APR	2,696	2,696	741	127.5%
MAY	2,696	2,696	1,120	141.5%
JUN	2,696	2,696	764	128.3%

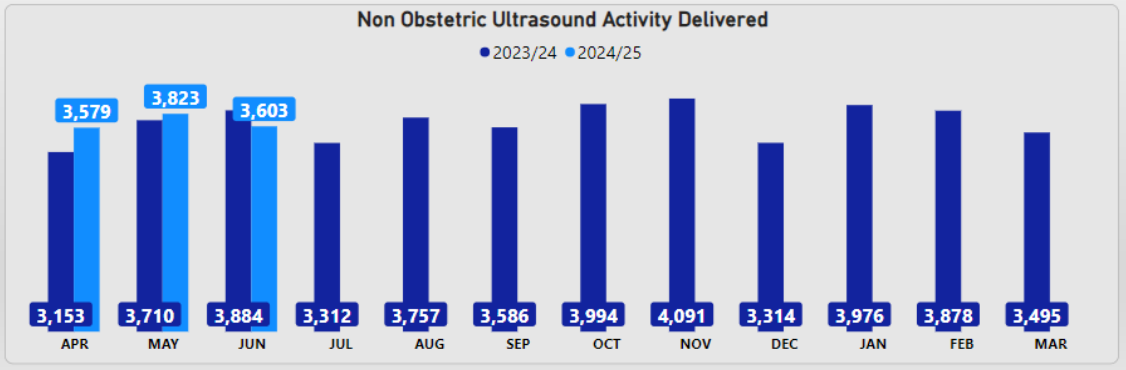
MONTH: Multiple selections  
YEAR: 2024/25



NOUS

MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
APR	3,542	3,542	37	101.0%
MAY	3,542	3,542	281	107.9%
JUN	3,542	3,542	61	101.7%

MONTH: Multiple selections  
YEAR: 2024/25



## Cardiac Services – Service Delivery Plan

**Cardiac MRI & Echo:** the 2024/25 SDP target is to deliver activity in line with agreed SBA volume.

**Cardiac CT & Cath Lab procedures:** the 2024/25 SDP target is to deliver activity 110% of 2019/20 activity.

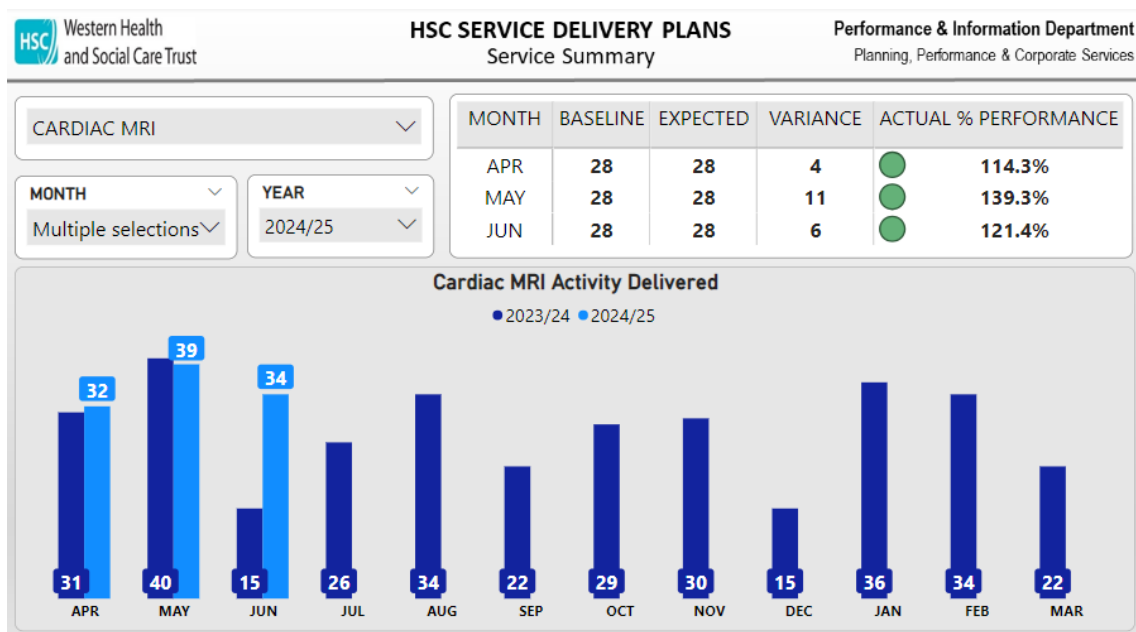
The Quarter 1 (April to June 24) performance remains strong within Cardiac MRI and Cardiac CT with the SBA/Expected Target exceeded each month.

Echo performance in April 24 was impacted by sickness absence but improved in May and June 24, achieving an “Amber” RAG status at Quarter 1.

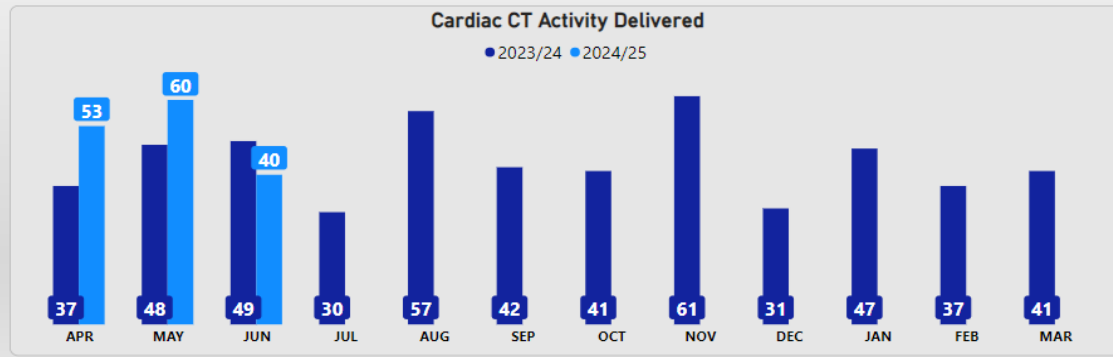
The Cath Lab activity delivered during Quarter 1 (April to June 24) remained broadly in line with the outturn during the same months in 2023/24. Although performance was below the 110% target, SPPG deemed it “Acceptable” in its report to PTEB.

The cumulative performance achieved during Quarter 1 (April to June 24) for:

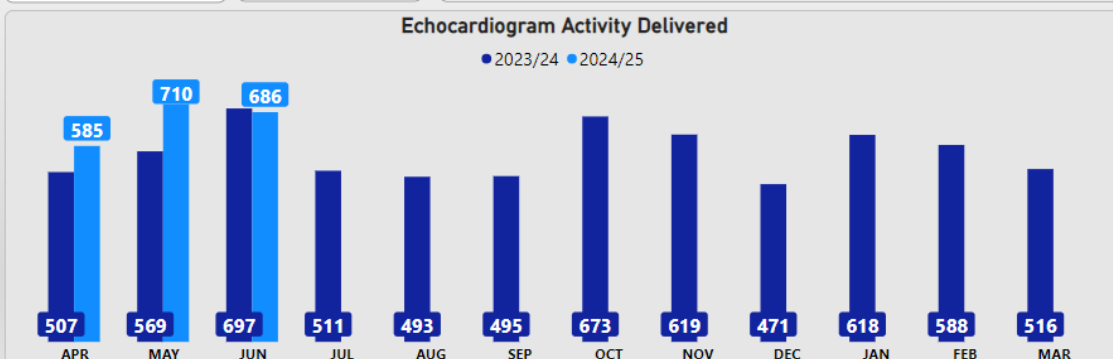
- **Cardiac MRI: 125.0%** of SBA volume achieved; cumulatively the service delivered 105 tests compared to the cumulative SBA target of 84.
- **Cardiac CT: 133.0%** of 2019/20 Baseline achieved; cumulatively the service delivered 153 tests compared to the cumulative 2019/20 Baseline activity of 115.
- **Echo: 95.3%** of SBA volume achieved; cumulatively the service delivered 1,981 tests compared to the cumulative SBA target of 2,079.
- **Cath Lab Procedures: 94.1%** of 2019/20 Baseline achieved, cumulatively 475 procedures delivered compared to the cumulative 2019/20 Baseline activity of 505.



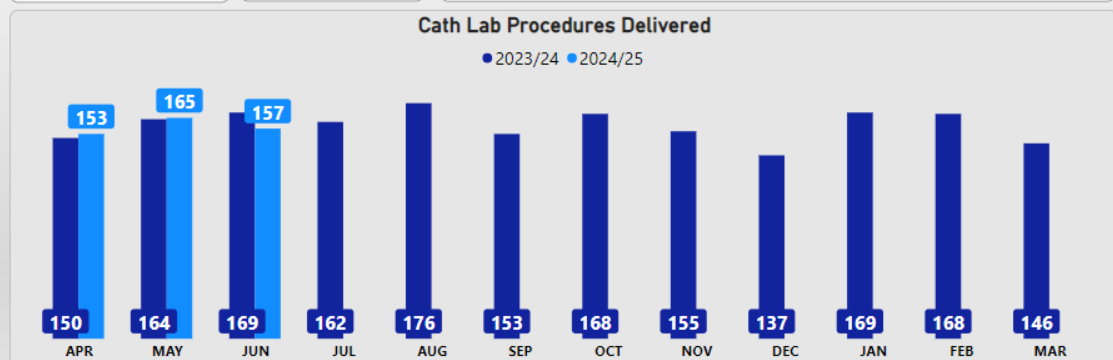
CARDIAC CT		MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
MONTH	YEAR	APR	36	40	13	147.2%
Multiple selections	2024/25	MAY	51	56	4	117.6%
		JUN	28	31	9	142.9%



ECHO		MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
MONTH	YEAR	APR	693	693	-108	84.4%
Multiple selections	2024/25	MAY	693	693	17	102.5%
		JUN	693	693	-7	99.0%



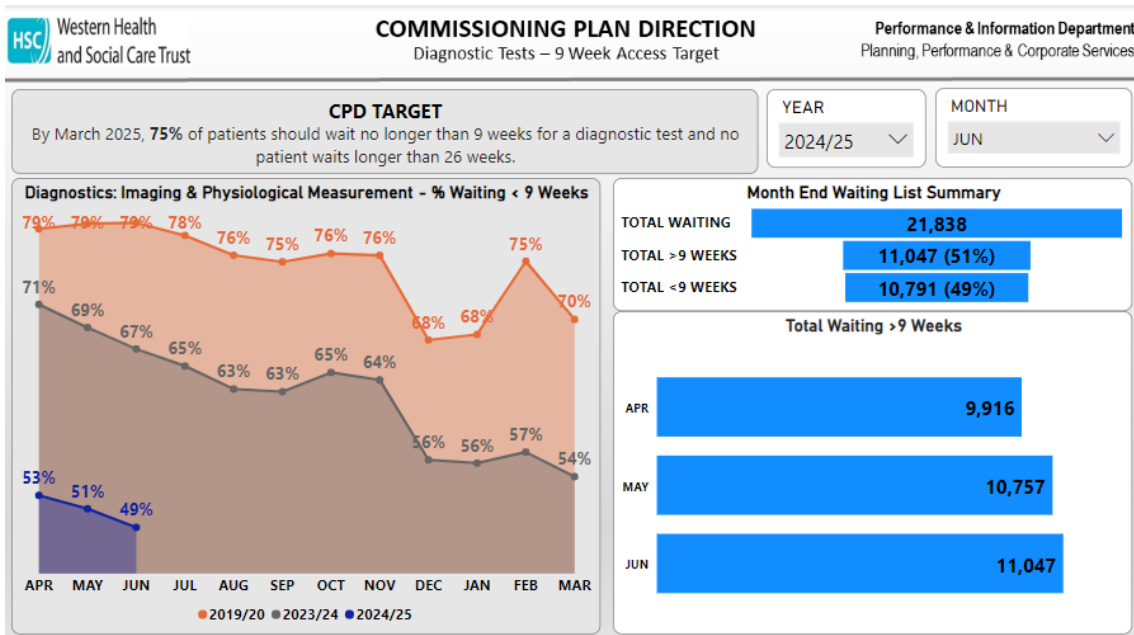
CATH LAB PROCEDURES		MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
MONTH	YEAR	APR	161	177	-24	95.0%
Multiple selections	2024/25	MAY	177	195	-30	93.2%
		JUN	167	184	-27	94.0%



## Imaging / Diagnostics – Access Performance

By March 2025, 75% of patients should wait no longer than 9 weeks for a diagnostic test and no patient waits longer than 26 weeks.

At the end of June 24, the Trust reported **21,838** patients waiting for Diagnostic test (both imaging and physiological measurement); with **11,047** patients waiting longer than 9 weeks. Performance has deteriorated when compared to End of Year March 24; when there were **19,620** patients in total waiting; with **8,954** waiting longer than 9 weeks.

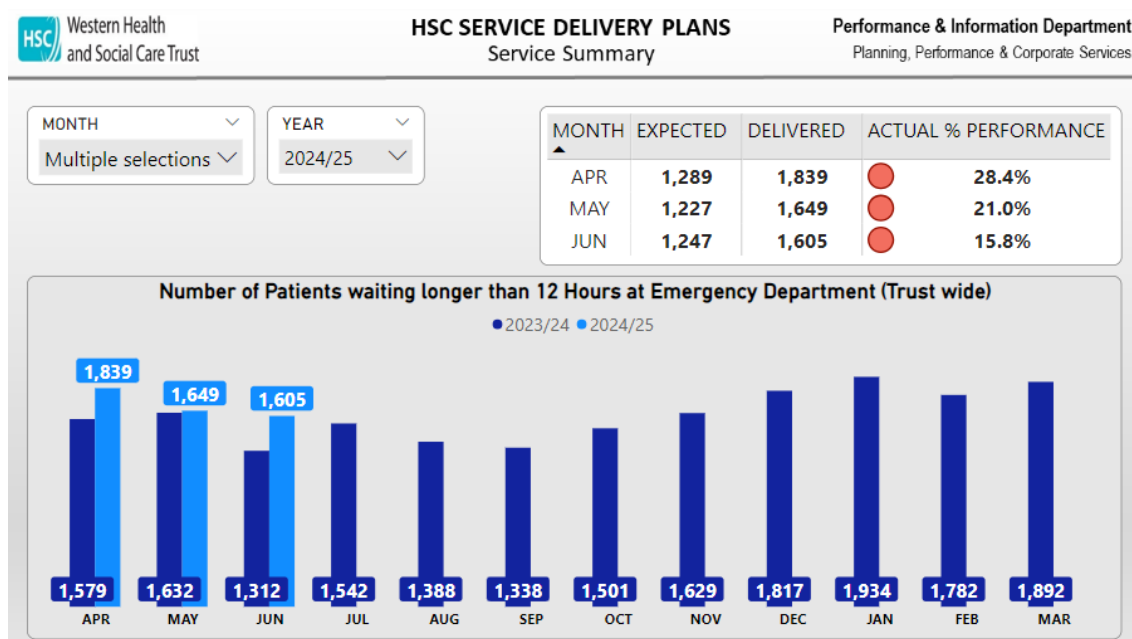


## Unscheduled Care – ED Performance (12 Hours) Service Delivery Plan

By March 2025, reduce the number of patients who waited longer than 12 hours in ED in 2022/23 by 10%

Performance remained challenging throughout Quarter 1 (April to June 24) with **5,093** patients waiting longer than 12 hours in ED compared to **4,181** during the same period in 2022/23; an increase of 912 (21.8%).

This was a similar position across the region as highlighted in SPPG’s report to PTEB; all Trusts reported an increase in the number of patients who waited longer than 12 hours during Quarter 1 2024/25 when compared to the Baseline year (2022/23).



The 2024/25 Quarter 1 (April to June 24) Northern Ireland Ambulance Service (NIAS) performance was below target in three of the five metrics. The Patient handover time of less than or equal to 60 minutes was exceeded each month during the Quarter, whilst the Patient handover time of less than or equal to 30 minutes almost met the expected target in two of the three months.

The underperformance against the Patient Handover exceeding 2 hours was experienced in each Trust across the region. The individual target and performance for Quarter 1 (April to June 24) is detailed in the table below.

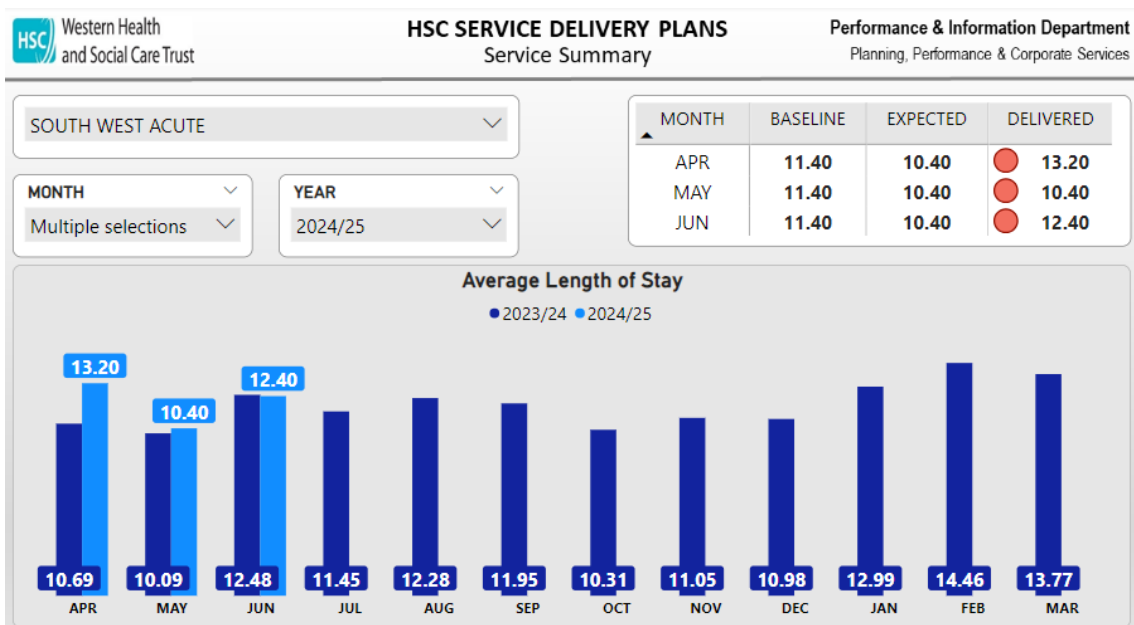
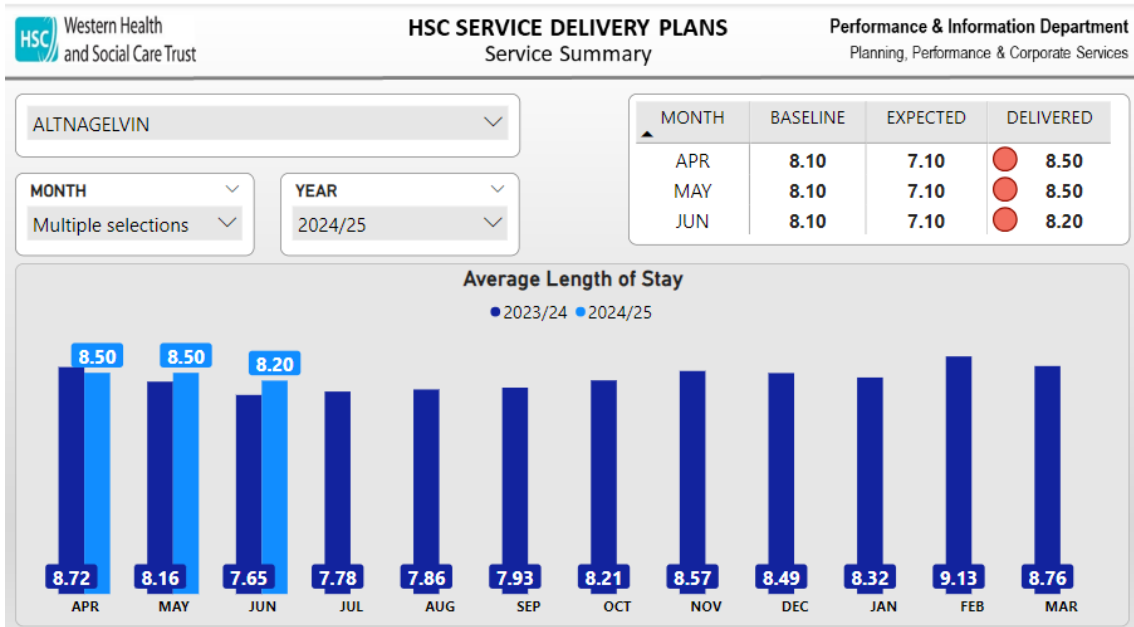
Service Area	2024/25 Target Trajectory	Apr-24	May-24	Jun-24	Quarter 1
NIAS Handover < 15 mins	Q1: 12%, Q2: 15%, Q3: 20% & Q4: 25%	6.0%	6.9%	6.3%	6.4%
NIAS Handover < 30 mins	Q1: 32%, Q2: 36%, Q3: 40% & Q4: 45%	25.4%	31.9%	29.0%	28.8%
NIAS Handover < 60 mins	Q1: 64%, Q2: 70%, Q3: 76% & Q4: 85%	65.0%	79.0%	72.5%	72.3%
NIAS Handover > 2 hours	0%	9.4%	2.5%	5.4%	5.7%
Ambulance Turnaround within 30 mins	Q1: 20%, Q2: 30%, Q3: 40% & Q4: 51%	12.2%	12.0%	15.0%	12.9%

## Average non-elective Length of Stay – Service Delivery Plan

1 Day reduction of 2022/23 Quarter 4 Baseline

The cumulative performance achieved during Quarter 1 (April to June 24) for:

- Altnagelvin: **8.4 days** compared to 8.1 days in the same period 2022/23.
- South West Acute: **11.9 days** compared to 11.4 days in the same period 2022/23.



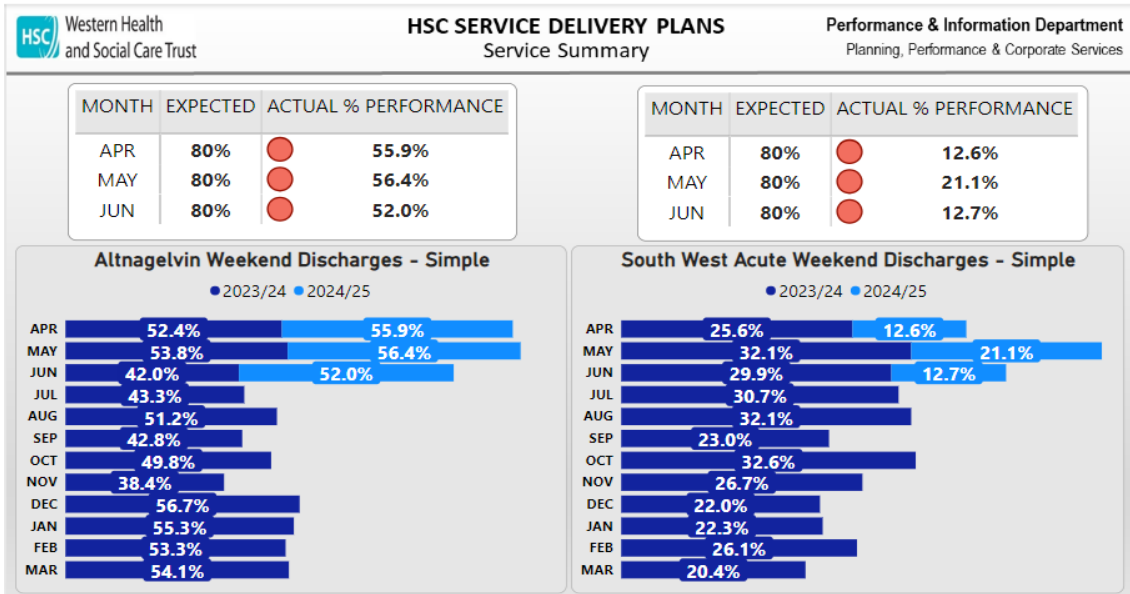
## Weekend Discharge Rates - Service Delivery Plan

The number of Simple Discharges on any Saturday and any Sunday should be at least 80% of the average daily number of Simple Discharges from Mon-Fri in that week.

The number of Complex Discharges on any Saturday and any Sunday should be at least 60% of the average daily number of Complex Discharges from Mon-Fri in that week.

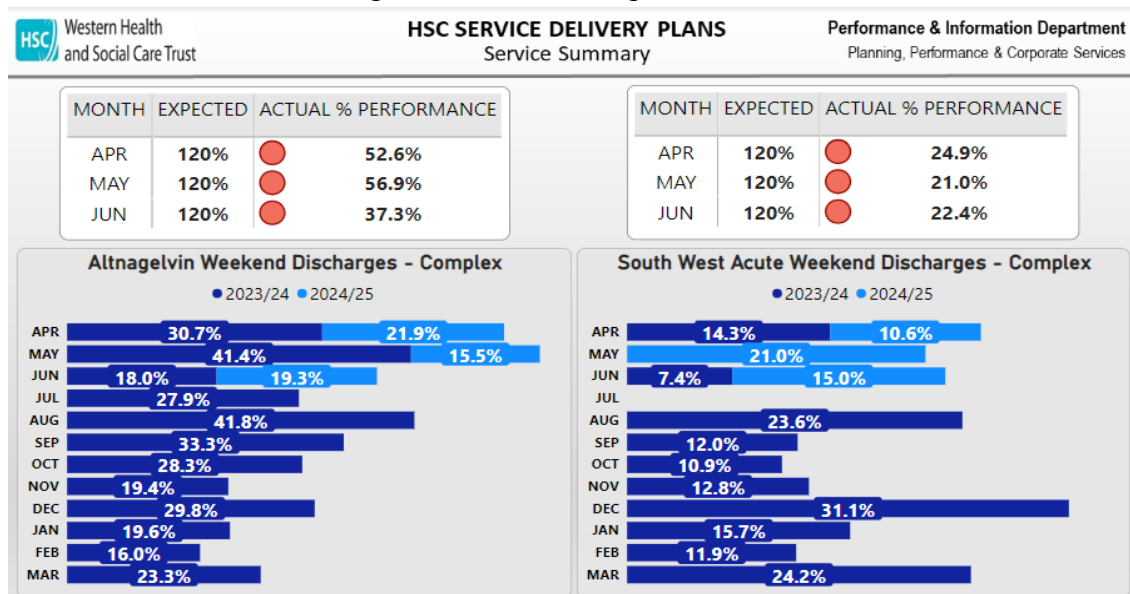
### Simple Discharges: Quarter 1 (April to June 24) cumulative performance:

- Altnagelvin: **54.5%** against the 80% target.
- South West Acute: **15.3%** against the 80% target.



### Complex Discharge: Quarter 1 (April to June 24) cumulative performance:

- Altnagelvin: **18.9%** against the 60% target.
- South West Acute: **15.0%** against the 60% target.





## Stroke Services – Service Delivery Plan

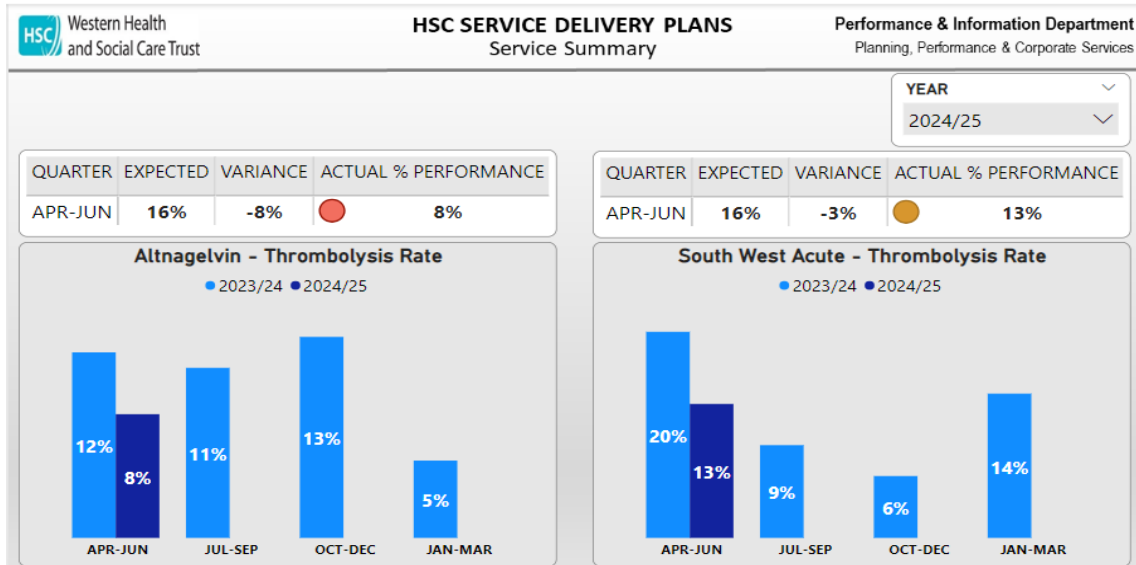
The 2024/25 SDP target is that 16% of patients with confirmed ischaemic stroke receive thrombolysis treatment, where clinically appropriate.

Information for the four metrics is extracted from SPPG Portal. SPPG Information staff source this data from the SSNAP Return.

The Quarter 1 (April to June 24) performance against these four metrics, was deemed “Acceptable” by SPPG.

**Altnagelvin: 8% achieved against the 16% target.**

**South West Acute: 13% achieved against the 16% target.**

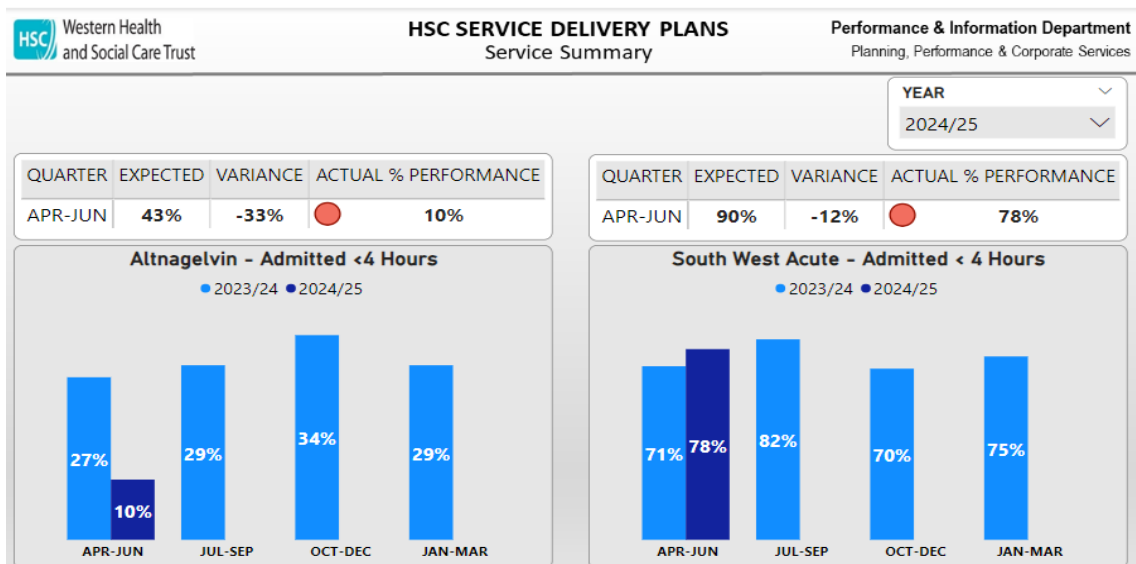


## % Admitted to stroke unit within 4 hours of arrival

The 2024/25 SDP target - 43% of patients at Altnagelvin Hospital and 90% of patients at South West Acute Hospital are admitted to a stroke unit with 4 hours of arrival.

**Altnagelvin: 10% achieved against the 43% target.**

**South West Acute: 78% achieved against the 90% target.**



## Public Health – Service Delivery Plan

*HCAI - Clostridioides difficile (CDI): 14.2 cases per 100,000 occupied beds*

*HCAI - Methicillin-resistant staphylococcus aureus (MRSA): 1.613 cases per 100,000 occupied beds*

*Antimicrobial Consumption - total antibiotic prescribing: 1% reduction*

*Antimicrobial Consumption - carbapenem use: 1% reduction*

*Antimicrobial Consumption - piperacillin-tazobactam use: 1% reduction*

*Antimicrobial Consumption - use of antibiotics from the WHO Access AWaRe category: 55%*

The 2024/25 (Health Care Acquired Infection (HCAI) and Antimicrobial Consumption metrics have been revised due to the launch of the new UK Antimicrobial resistance National Action Plan 2024-2029. This has resulted in a change to the methodology for calculating these targets.

The Quarter 1 (April to June 24) target was exceeded in one of the six metrics; namely HCAI-Methicillin-resistant staphylococcus aureus (MRSA).

Performance against the HCAI - Clostridioides difficile (CDI) and the four Antimicrobial Consumption metrics was below target achieving a “Red” RAG Status and deemed “Unacceptable” by SPPG in the report to PTEB.

The individual target and performance for Quarter 1 (April to June 24) is detailed in the table below:

Service Area	2024/25 Target Trajectory	Quarter 1 (Apr-Jun 24 cumulative)
HCAI - clostridioides difficile (CDI)	Q1: 14.2 cases per 100,000 occupied beds	20.5
HCAI - Methicillin-resistant staphylococcus aureus (MRSA)	1.613 cases per 100,000 occupied beds (CDI)	1.577
Antimicrobial Consumption - total antibiotic prescribing	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in total antibiotic prescribing (DDD per 1000 admission).	10,189.9
Antimicrobial Consumption - carbapenem use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in carbapenem use, measured in DDD per 1000 admissions	131.0
Antimicrobial Consumption - piperacillin-tazobactam use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in piperacillin-tazobactam use, measured in DDD per 1000 admissions	457.1
Antimicrobial Consumption - use of antibiotics from the WHO Access AWaRe category	by 31st March 2025, all Trusts to secure (in secondary care) a total of 55% usage of antibiotics from the WHO Access AWaRe category	53.75

## COMMUNITY CARE

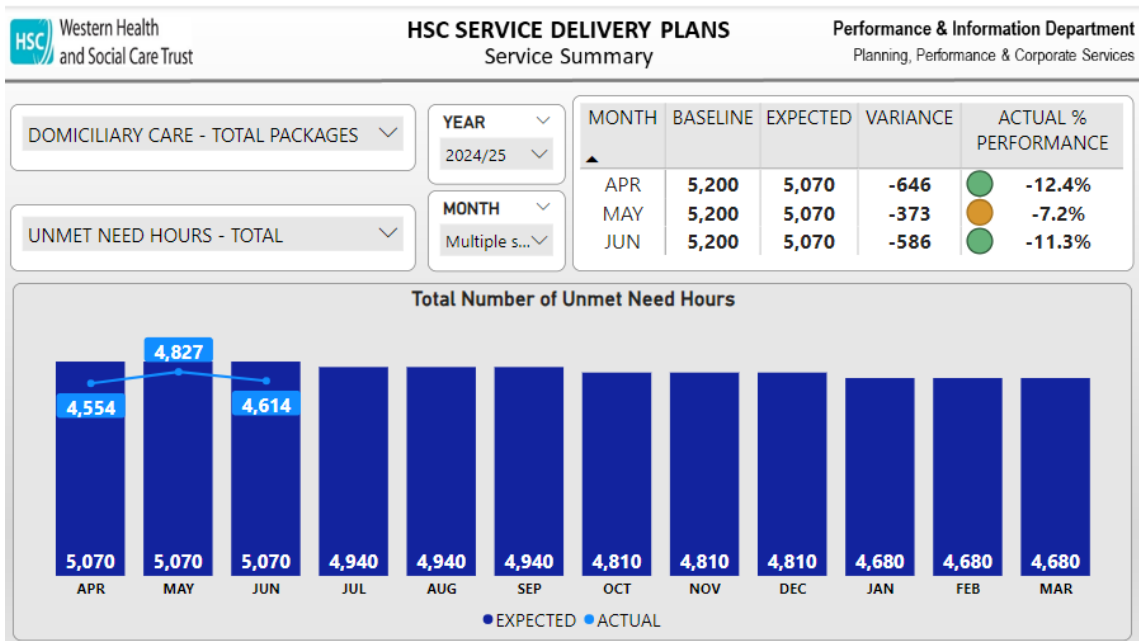
It is important to note that overall, Western Trust had no area of service delivery deemed “Unacceptable” by SPPG for the first Quarter of 2024/25, this continues to be a commendable position for these Services.

### Domiciliary Care – Service Delivery Plan

The 2024/25 SDP target is to achieve a 10% reduction in unmet need hours by March 2025 (full and partial packages across all POCs) (2.5% reduction per quarter).

Baseline Position: 31<sup>st</sup> March 2024.

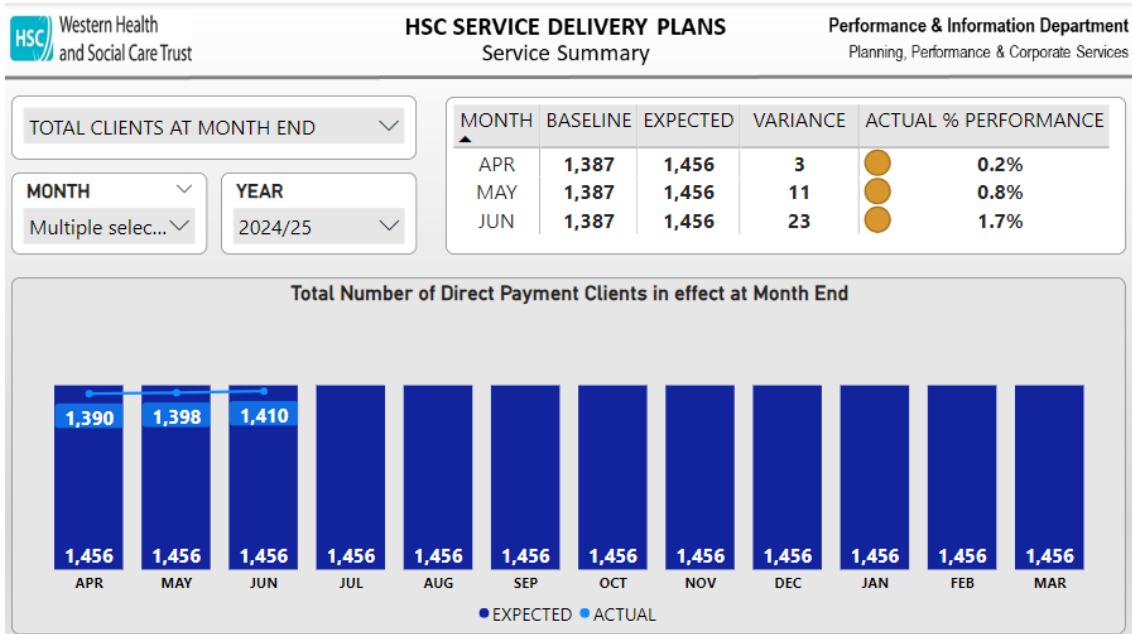
**Total Packages:** at the end of June 24, the Trust exceeded the SDP Target with **4,614** unmet need hours reported against the expected target of 5,070.



## Direct Payments – Service Delivery Plan

The 2024/25 SDP target is to achieve 5% increase in the number of service user Direct Payments in effect by March 2025 (compared to position at 31<sup>st</sup> March 2024).

By the end of March 25, the Trust are expected to achieve 1,456 Service User Direct Payments in effect. At the end of June 24, SDP target almost achieved with 1,410 Service User Direct Payments in effect. Adult Mental Health services continue to meet their individual Sub-Directorate Target.



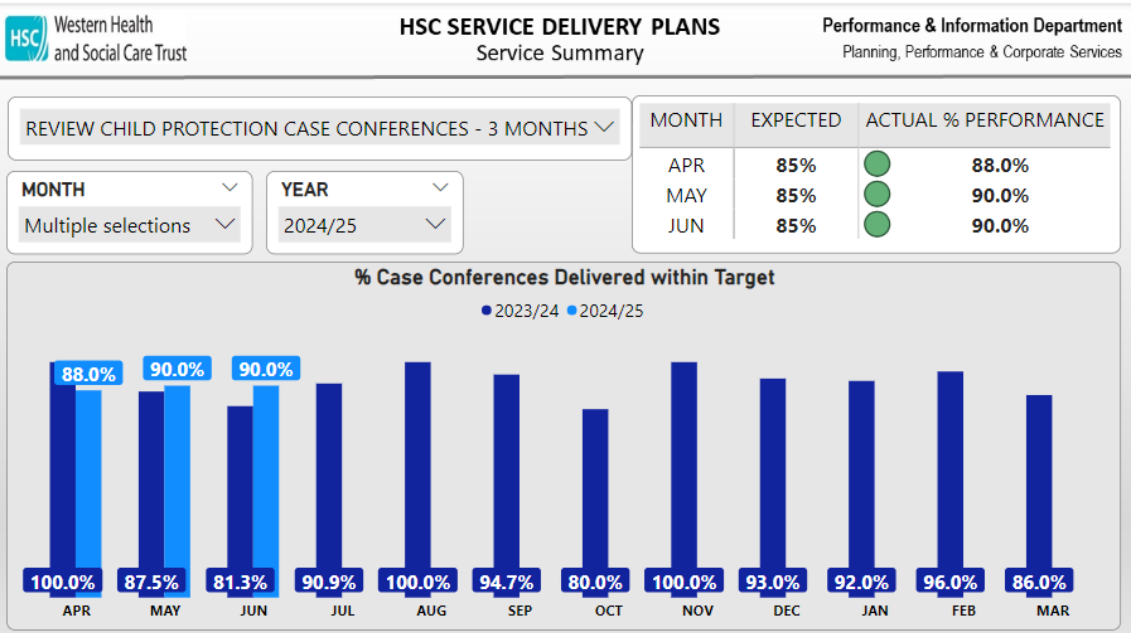
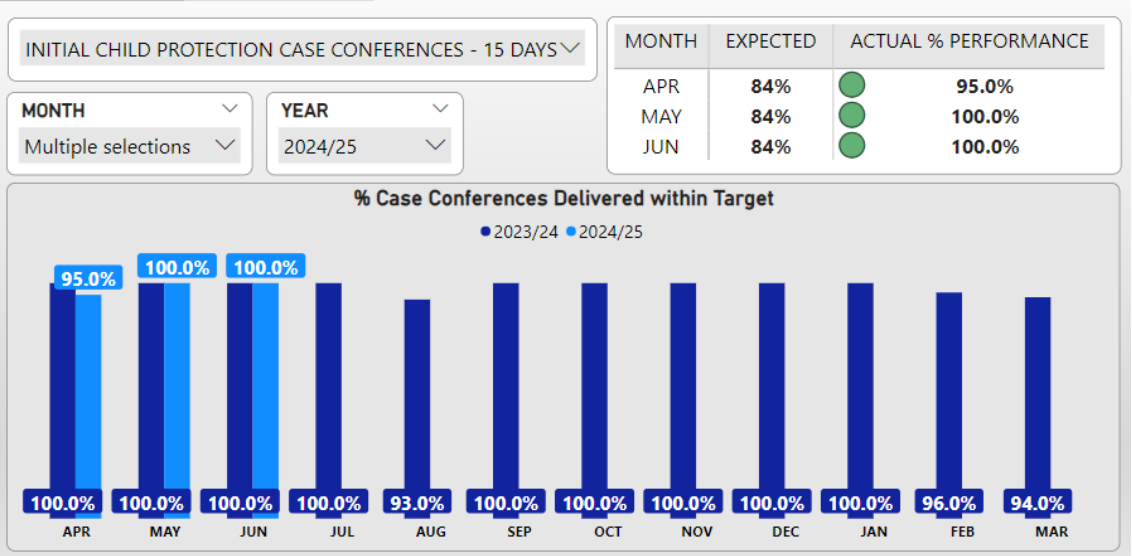
## Children’s Social Care – Service Delivery Plan

The 2024/25 SDP target for Child Protection Case Conferences is to achieve **84%** of Initial Child Protection Case Conferences held <15 days; **85%** of Review Case Conferences held <3 months and **89%** of Subsequent Review Case Conferences held <6 months.

During Quarter 1 (April to June 24) the SDP target was exceeded in each of the three metrics in April, May and June 24. Of the three Trusts that reported this data monthly, the Western Trust was the only Trust to achieve the “Green” RAG status every month for each of the three metrics.

The cumulative performance achieved during Quarter 1 (April to June 24) for:

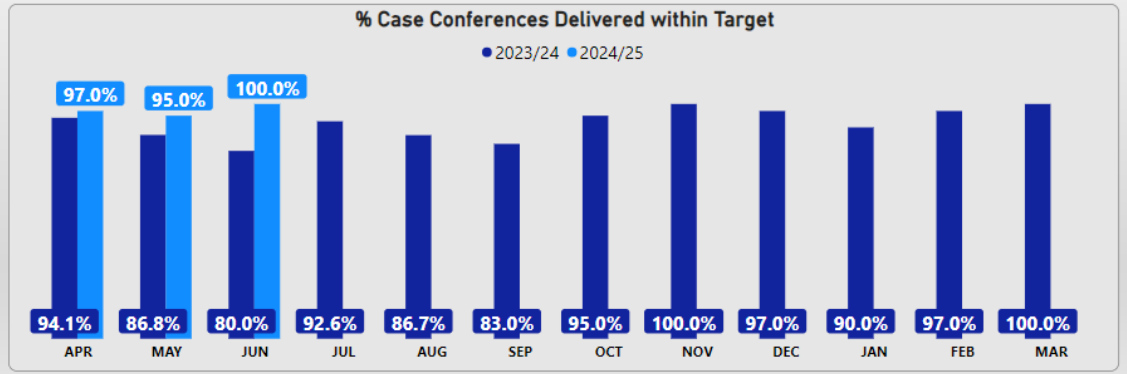
- Initial Child Protection Case Conferences held <15 days: **99%** against the 84% target.
- Review Case Conferences held <3 months: **90%** against the 85% target.
- Subsequent Review Case Conferences held <6 months: **98%** against the 89% target.



SUBSEQUENT CHILD PROTECTION CASE CONFERENCES - 6 MON...

MONTH	EXPECTED		ACTUAL % PERFORMANCE
APR	89%	●	97.0%
MAY	89%	●	95.0%
JUN	89%	●	100.0%

MONTH: Multiple selections  
YEAR: 2024/25



### Children’s Social Care – Unallocated Cases - Service Delivery Plan

The 2024/25 SDP target is to achieve a 10% reduction in the number of Unallocated Family Support cases by March 2025.

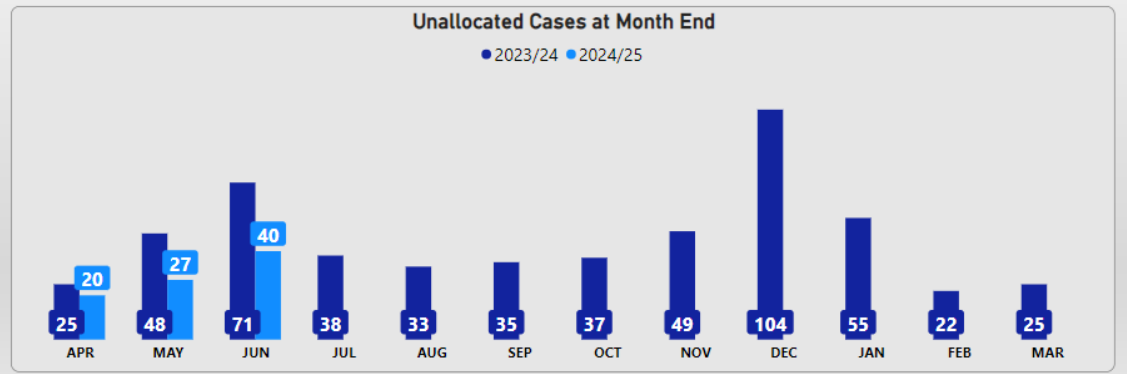
High level of performance has continued in the first Quarter of 2024/25. The cumulative performance achieved during Quarter 1 (April to June 24) was **-43.7%** against the 10% reduction target.

The Western Trust reported **40** Unallocated Cases against the Baseline Target of 71. Of the three Trusts that reported data, Western Trust was the best performing Trust in the reduction of unallocated cases across the region.

UNALLOCATED CASES (FIS)

MONTH	BASELINE	EXPECTED	VARIANCE		ACTUAL % PERFORMANCE
APR	71	64	-51	●	-71.8%
MAY	71	64	-44	●	-62.0%
JUN	71	64	-31	●	-43.7%

MONTH: Multiple select...  
YEAR: 2024/25

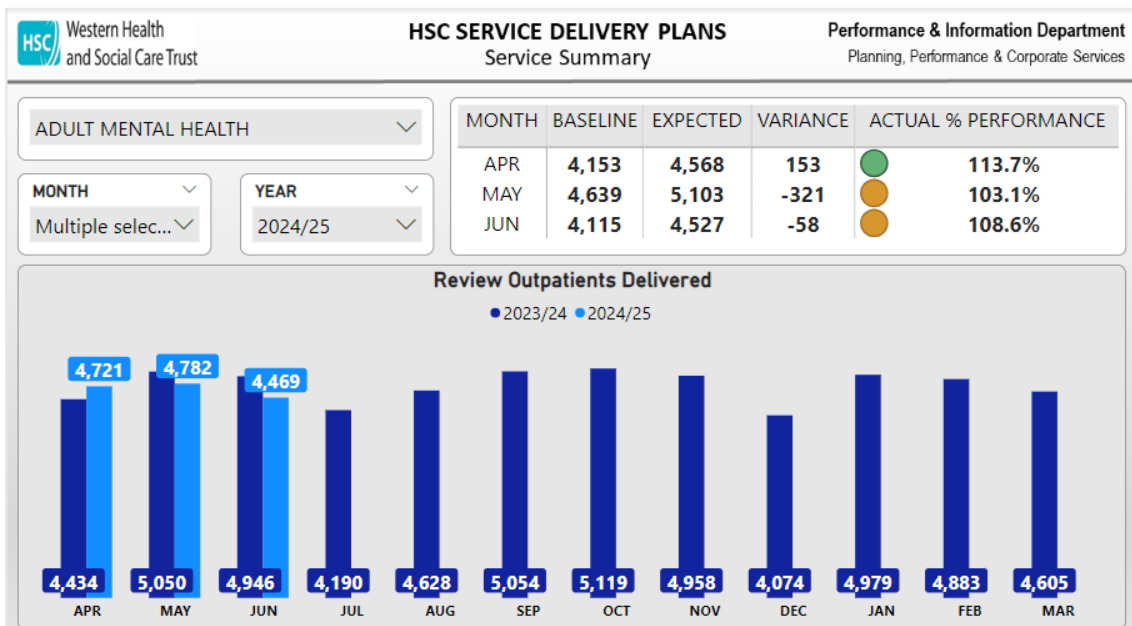
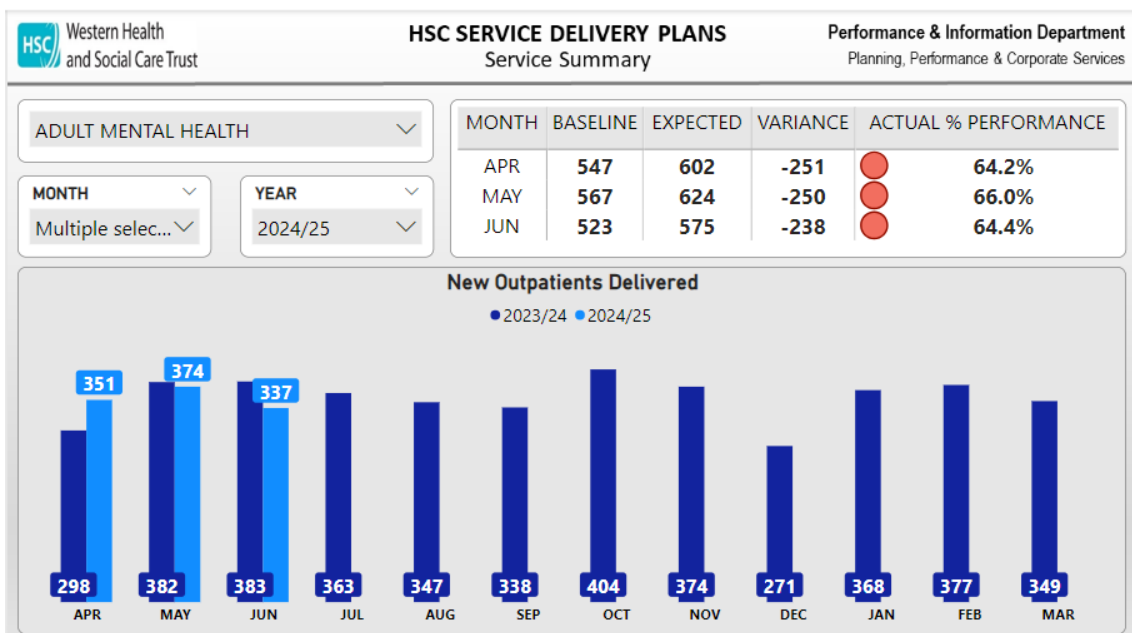


## Mental Health Services – Service Delivery Plan

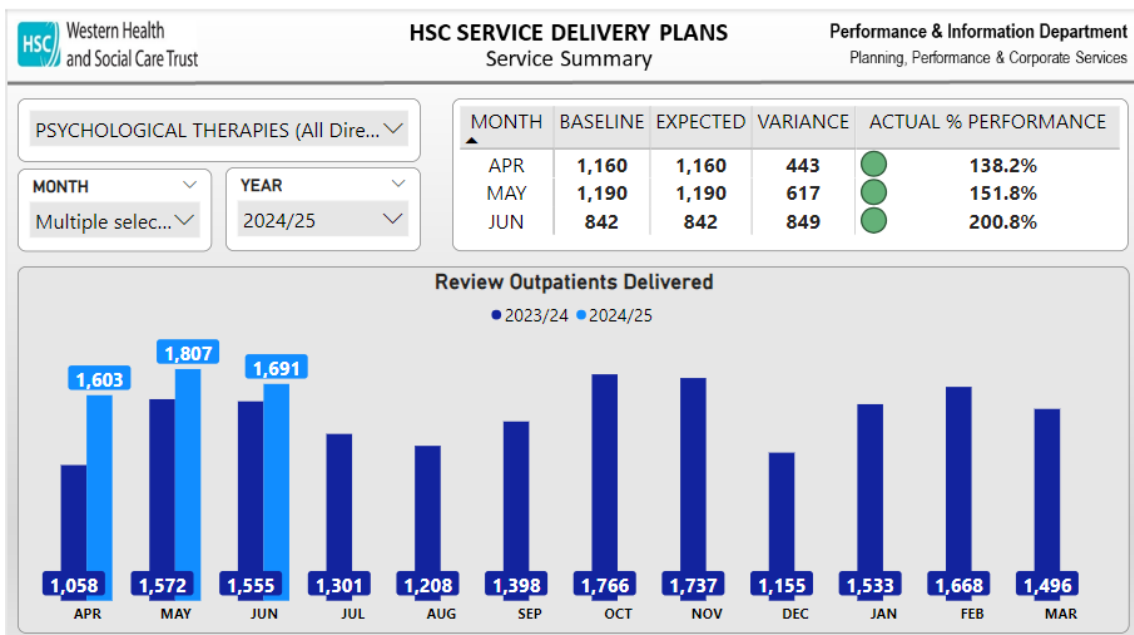
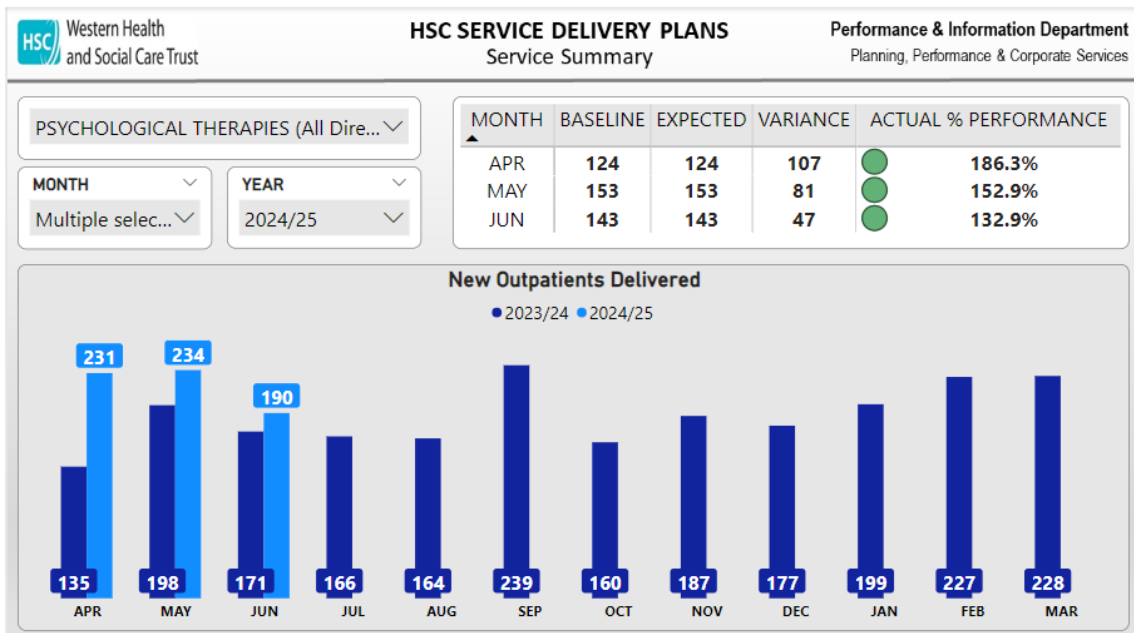
The 2024/25 SDP target - deliver 110% of 2019/20 activity for Adult Mental Health and Dementia.  
 The 2024/25 SDP target - deliver 100% of 2019/20 activity for Psychological Therapies.  
 The 2024/25 SDP target - deliver 100% (New) and 110% (Review) of 2019/20 activity for Child & Adolescent Mental Health Service

Overall, a total of **25,457** New (2,564) and Review (22,893) Outpatients delivered during Quarter 1 (April to June 24) across the four service areas; reflecting a 17.2% increase on 2019/20 Baseline activity (3,738 additional attendances). An individual breakdown by Service area provided below.

**Adult Mental Health:** the cumulative new and review activity delivered during Quarter 1 (April to June 24) (15,034) reflects 103.4% of the cumulative 2019/20 Baseline activity (14,544); this represents 490 additional attendances. Regionally, the Western Trust was ranked 3<sup>rd</sup> of the 5 Trusts in its performance delivery during this reporting period.



**Psychological Therapies:** the cumulative new and review activity delivered during Quarter 1 (April to June 24) (5,756) reflects 159.4% of the cumulative 2019/20 Baseline activity (3,612); this represents 2,144 additional attendances, the Western Trust remains the best performing Trust, in this service area, across the region at this reporting period.

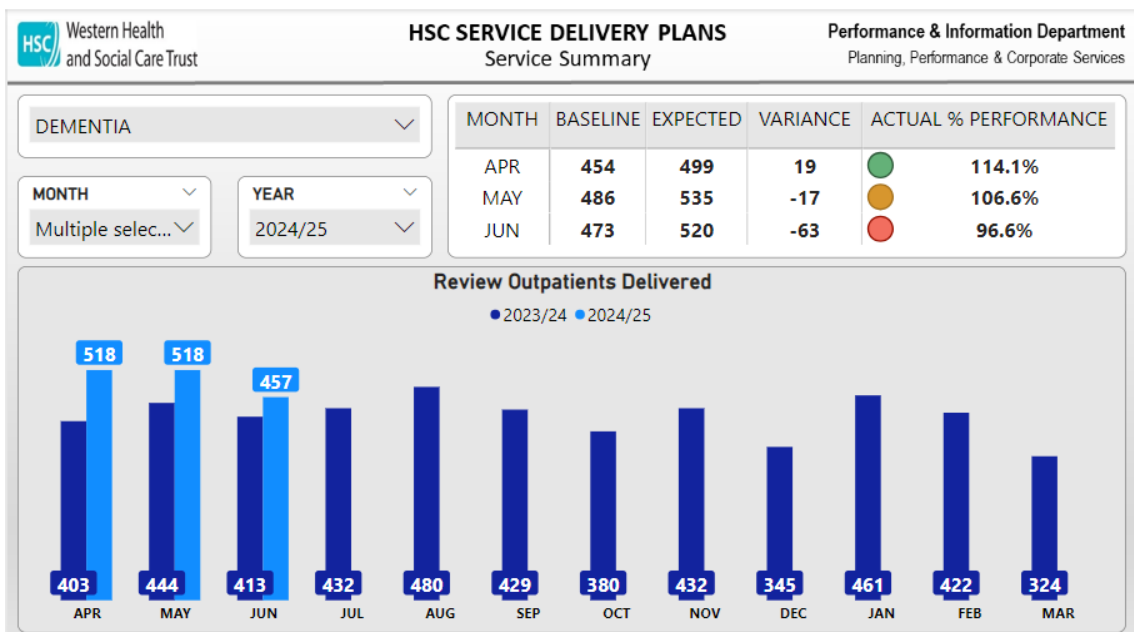
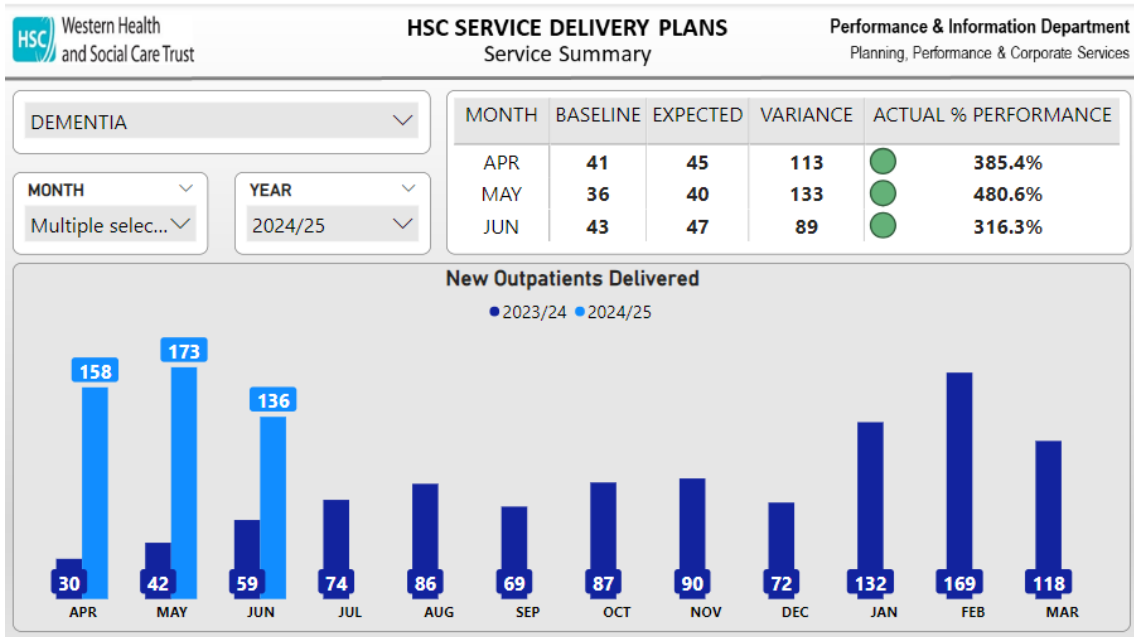




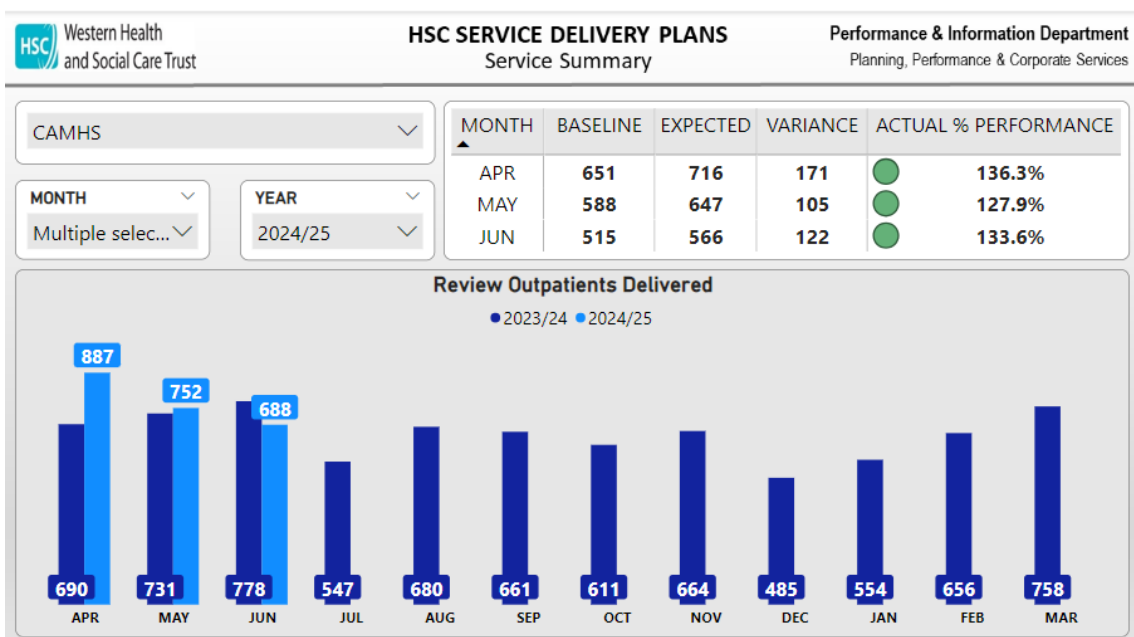
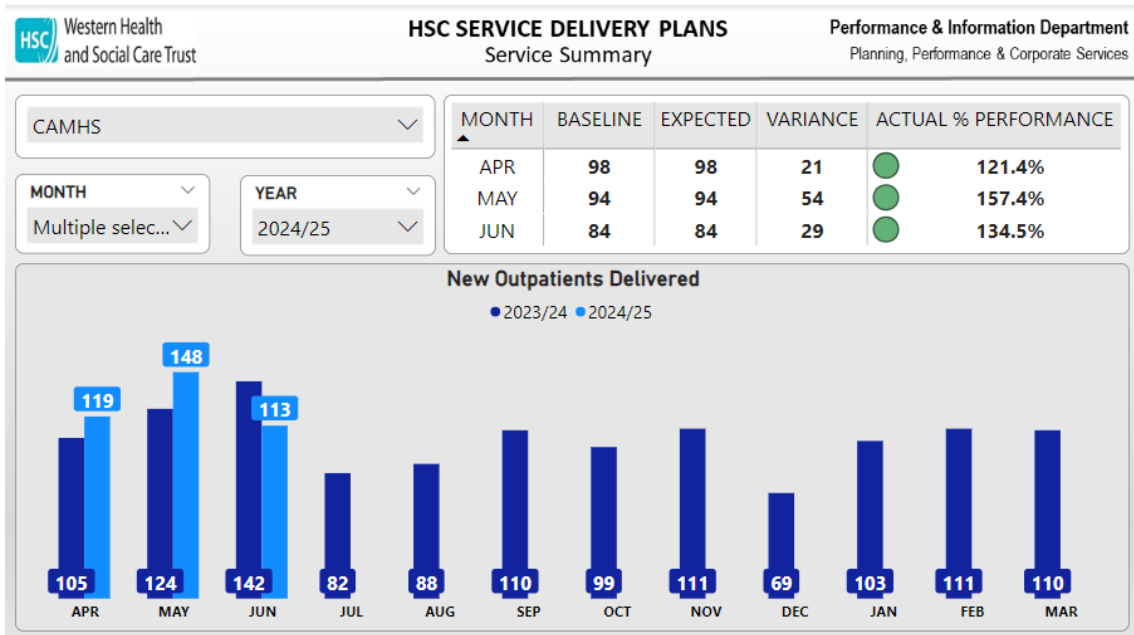
**Dementia:** the cumulative new and review activity delivered during Quarter 1 (April to June 24) (1,960) reflects 127.9% of the cumulative 2019/20 Baseline activity (1,533); this represents 427 additional attendances.

The new and review activity delivered during each month of Quarter 1 has significantly increased when compared to the same months of 2023/24. Although the service continue to experience workforce challenges, the improvement reflects the work being undertaken within their Quality/Service improvement projects. This is further reflected in the continued improvement in the access Targets as detailed on page 33.

The Western Trust was the second best performing Trust in this service area, across the region at this reporting period.



**Child and Adolescent Mental Health Service:** the cumulative new and review activity delivered during Quarter 1 (April to June 24) (2,707) reflects 133.3% (137.7% New and 132.7% Review) of the cumulative 2019/20 Baseline activity (2,030); this represents 677 additional attendances. The Western Trust was the best performing Trust, in this service area, across the region at this reporting period.

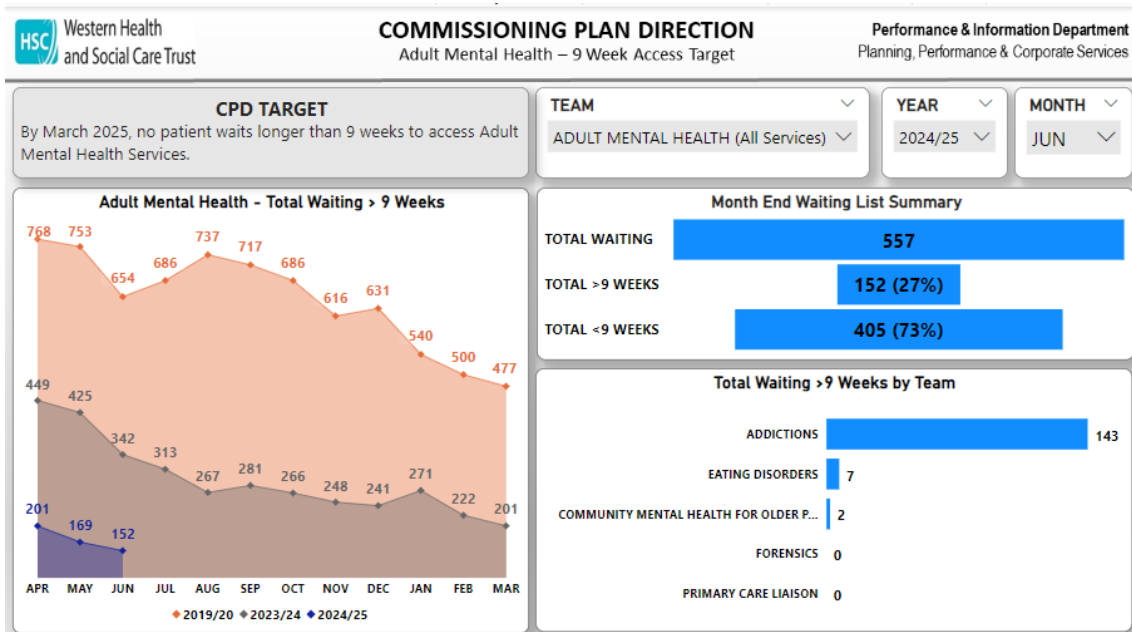


## Mental Health Services – Access Performance

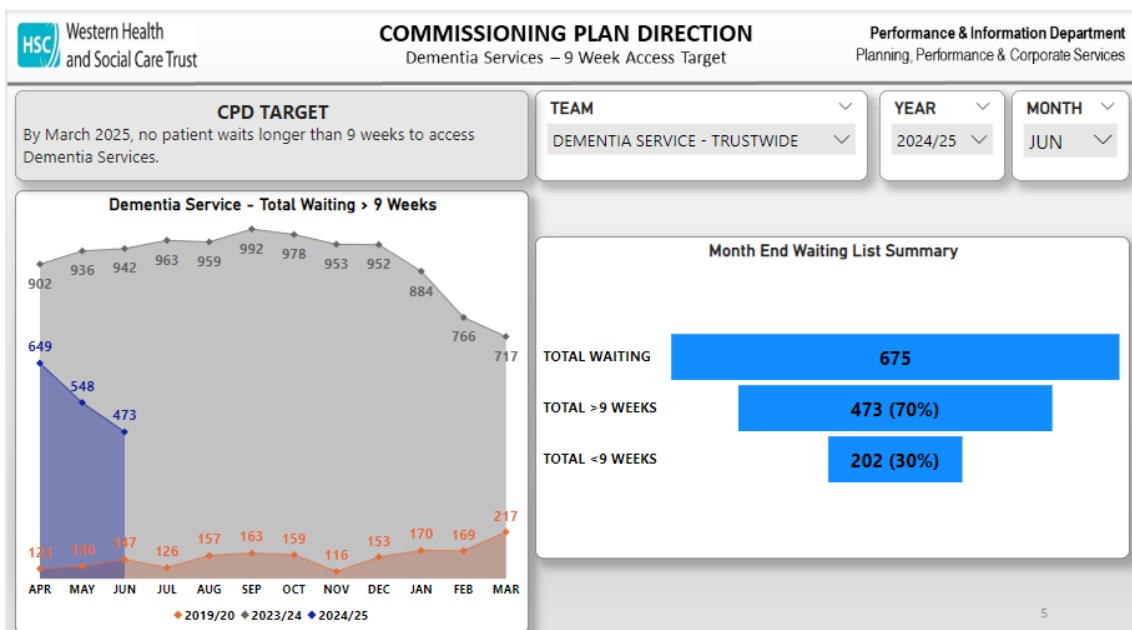
By March 2025, no patient waits longer than 9 weeks to access Adult Mental Health, Dementia and Child and Adolescent Mental Health services and no patient waits longer than 13 weeks to access Psychological Therapy services.

At the end of June 24, the Trust reported a total of:

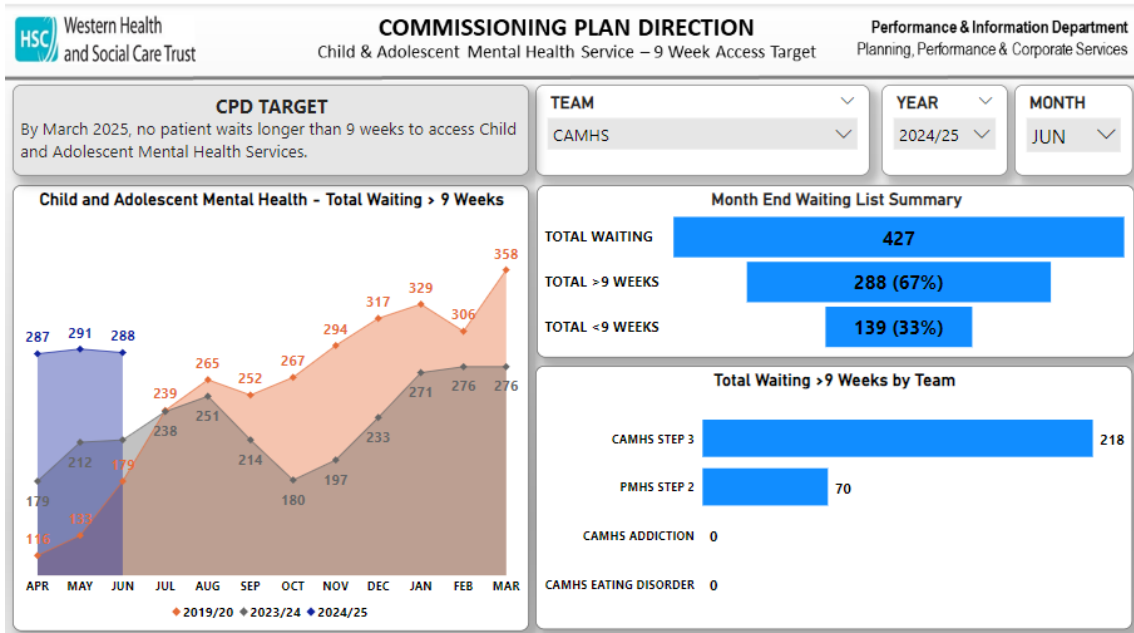
- **557** patients waiting to access the Adult Mental Health Service with **152** waiting longer than 9 weeks. This is a further improvement in access to this service, when compared to End of Year March 24; when there were **643** patients in total waiting; with **201** waiting longer than 9 weeks.



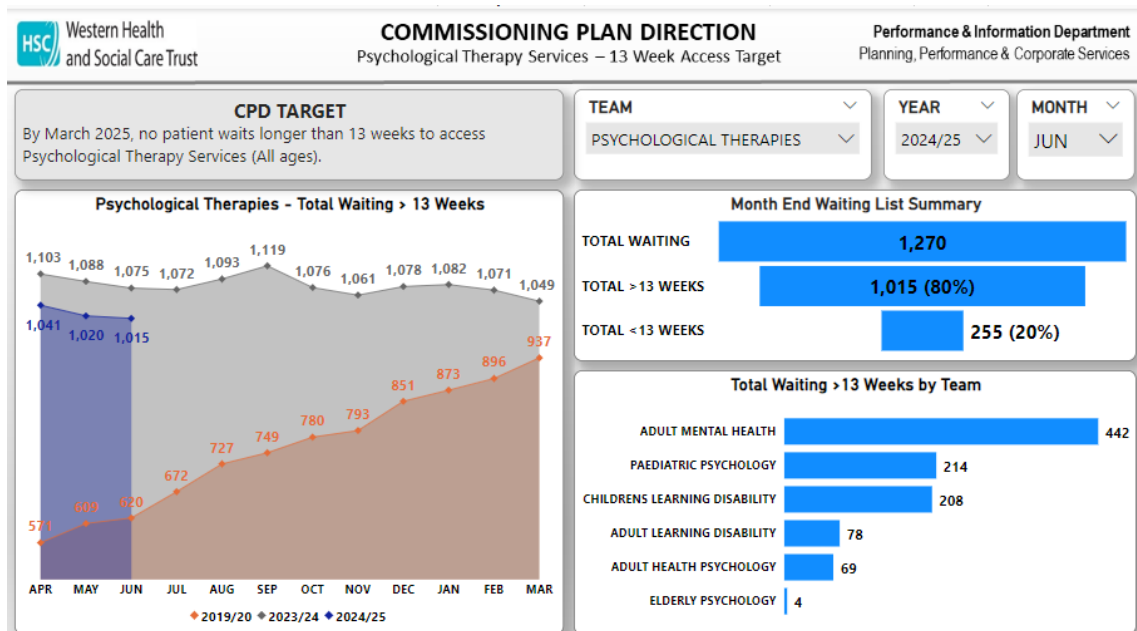
- **675** patients waiting to access the Dementia Service with **473** waiting longer than 9 weeks. This is a significant improvement in access, when compared to End of Year March 24; when there were **962** in total waiting and **717** waiting longer than 9 weeks.



- **427** patients waiting to access the Child and Adolescent Mental Health Service with **288** waiting longer than 9 weeks. This represents a deterioration in access to this service when compared to End of Year March 24; when there were **434** in total waiting and **276** waiting longer than 9 weeks.



- **1,270** patients waiting to access Psychological Therapy Services with **1,015** waiting longer than 13 weeks. This is an improvement in access to this service, when compared to End of Year March 24; when there were **1,320** in total waiting and **1,049** waiting longer than 13 weeks.



## Allied Health Professionals (AHPs) – Service Delivery Plan

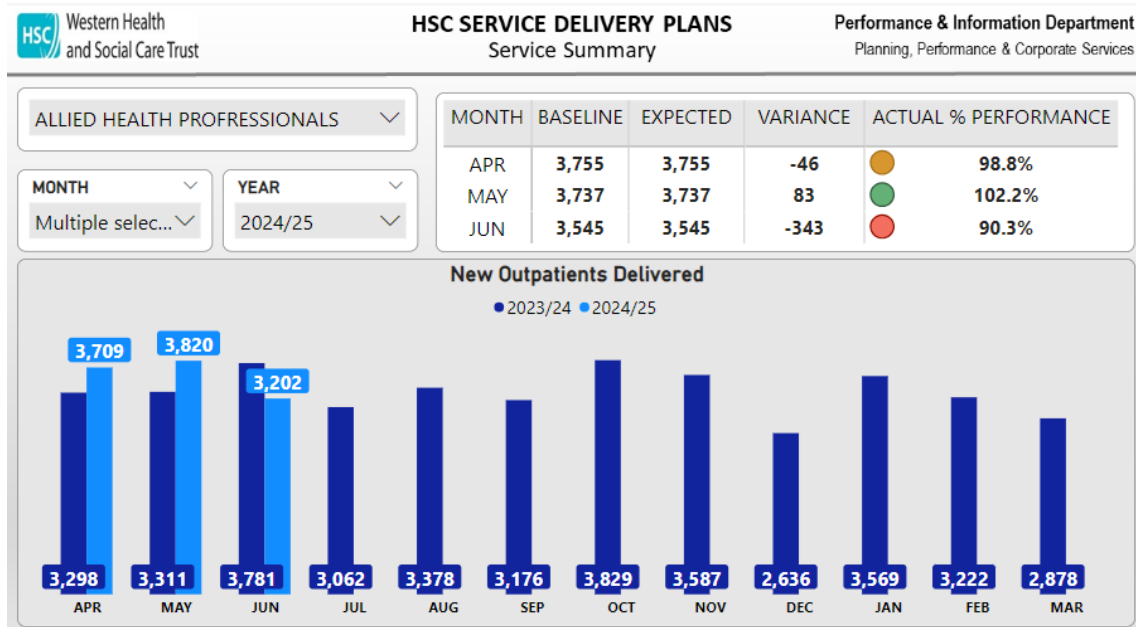
The 2024/25 SDP target is to deliver 100% of 2019/20 activity for Physiotherapy, Occupational Therapy, Orthoptics and Podiatry.

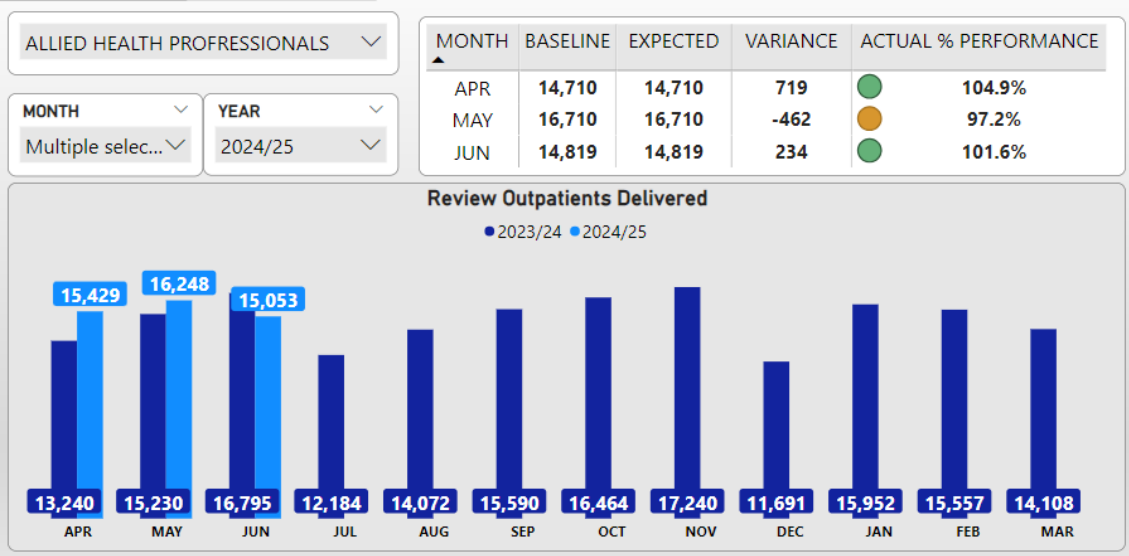
The 2024/25 SDP target is to deliver 100% of 2022/23 activity for Dietetics and Speech & Language Therapy.

The cumulative activity levels across the six service areas improved in the first two months of 2024/25 with more activity delivered in April and May 24 when compared to the same months of 2023/24. Although, capacity within individual service areas continues to be impacted by vacant posts, sickness absence (long and short term) and unfilled maternity leave.

The cumulative New and Review activity delivered during Quarter 1 (April to June 24) **(57,461)**, across the six service areas, represents **100.3%** (97.2% New and 101.1% Review) of the cumulative Baseline activity (57,276); this represents 185 additional attendances).

Regionally, the Western Trust was the 2<sup>nd</sup> best performing Trust, in the cumulative activity delivered across the six professional areas during this reporting period.

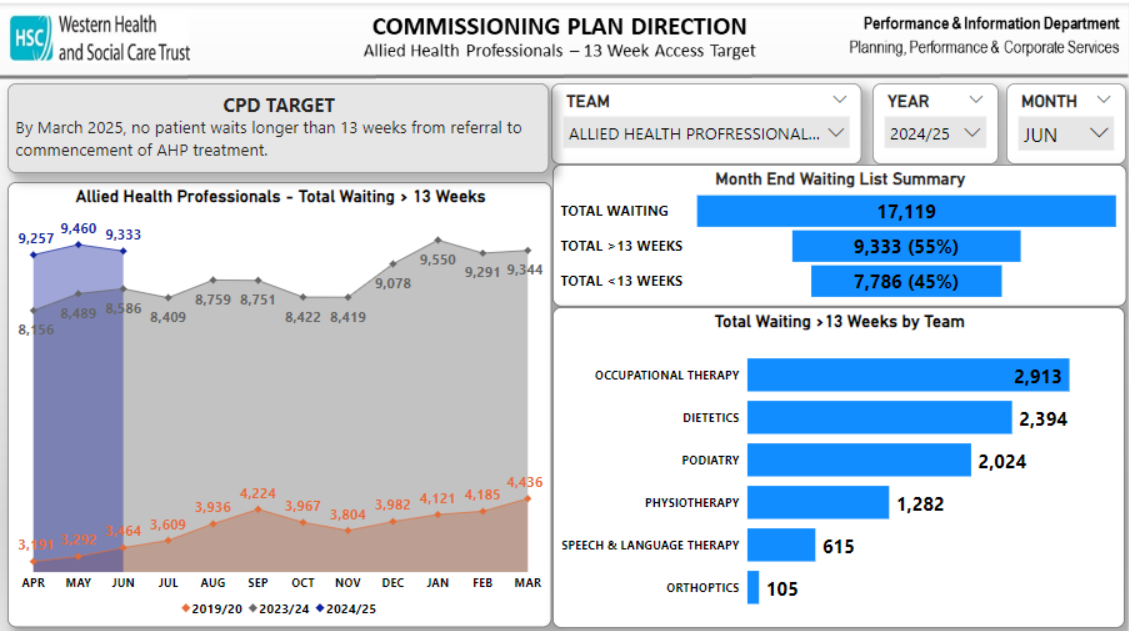




### Allied Health Professionals (AHPs) – Access Performance

*By March 2025, no patient waits longer than 13 weeks from referral to commencement of AHP treatment.*

At the end of June 24, the Trust reported a total of **17,119** patients waiting to commence Allied Health Professional treatment with **9,333** waiting longer than 13 weeks. This represents a deterioration in the total number waiting and a marginal improvement in the number waiting longer than 13 weeks, when compared to to End of Year March 24; when there were **16,339** in total waiting and **9,344** waiting longer than 13 weeks.



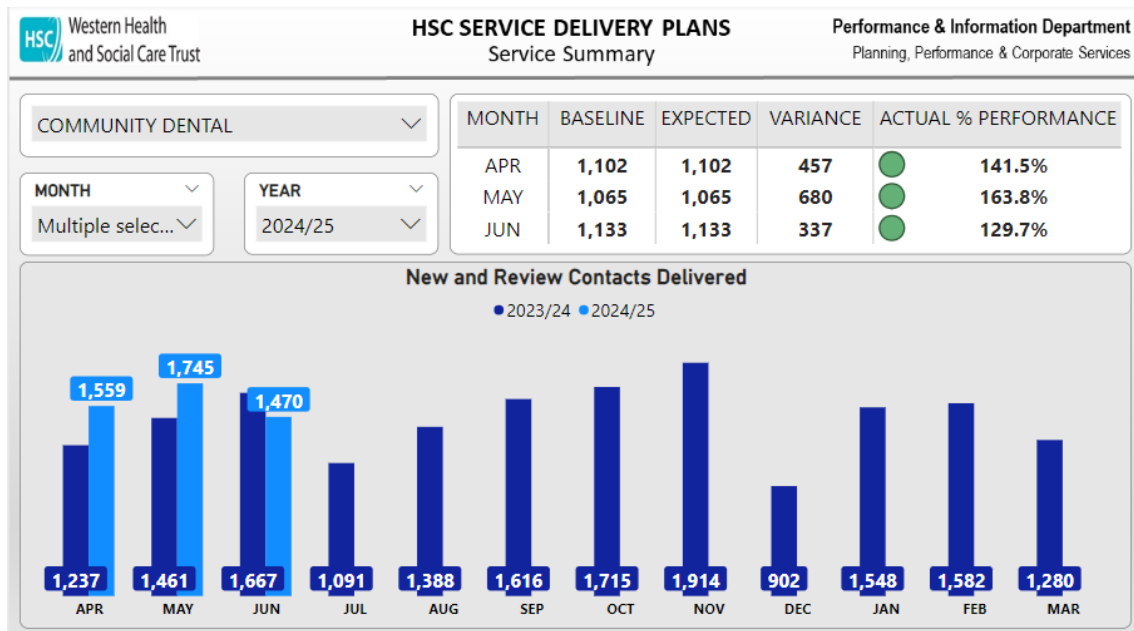
## Community Dental - Contacts

The 2024/25 SDP target for Community Dental Contacts (new and review) is to achieve **100%** of 2019/20 in Quarter 1 & 2, **90%** in Quarter 3 and **80%** in Quarter 4.

A high level of performance was achieved in the overall Community Dental activity throughout Quarter 1 (April to June 24); with more activity delivered in April and May 24 when compared to the same months of 2023/24.

Regionally, the Western Trust was the best performing Trust, in this service area, during Quarter 1 (April to June 24), and was the only Trust that met or exceeded the expected target in each of the three months.

The cumulative number of New and Review contacts delivered during Quarter 1 (April to June 24) (4,774) reflects **144.7%** (94.0% New and 158.8% Review) of the cumulative 2019/20 Baseline activity (3,300); this represents 1,474 additional attendances).

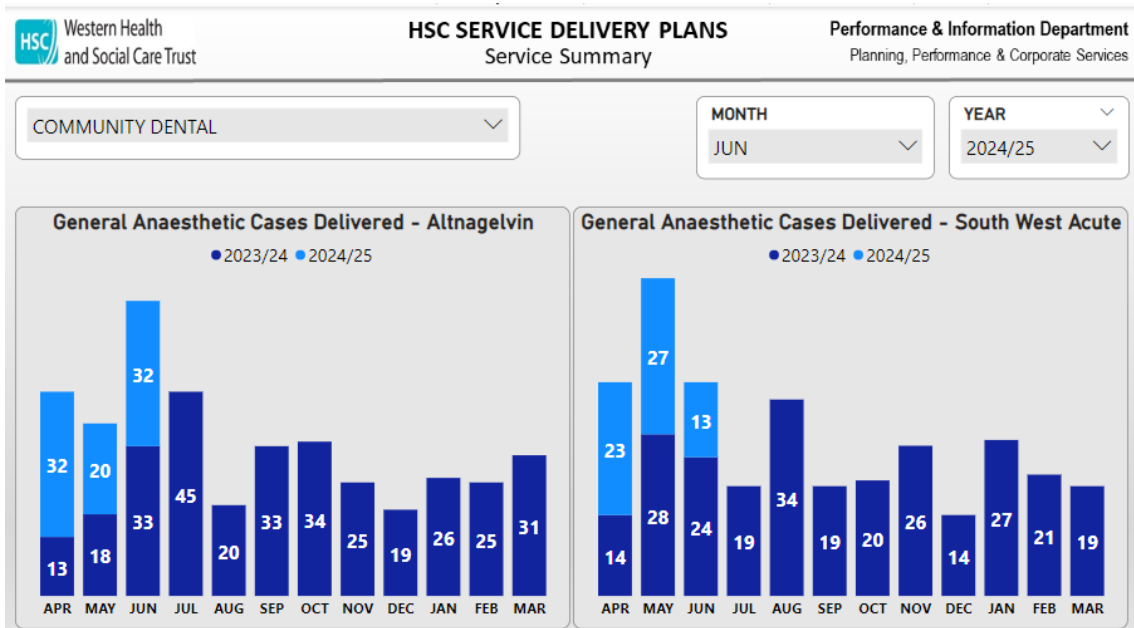
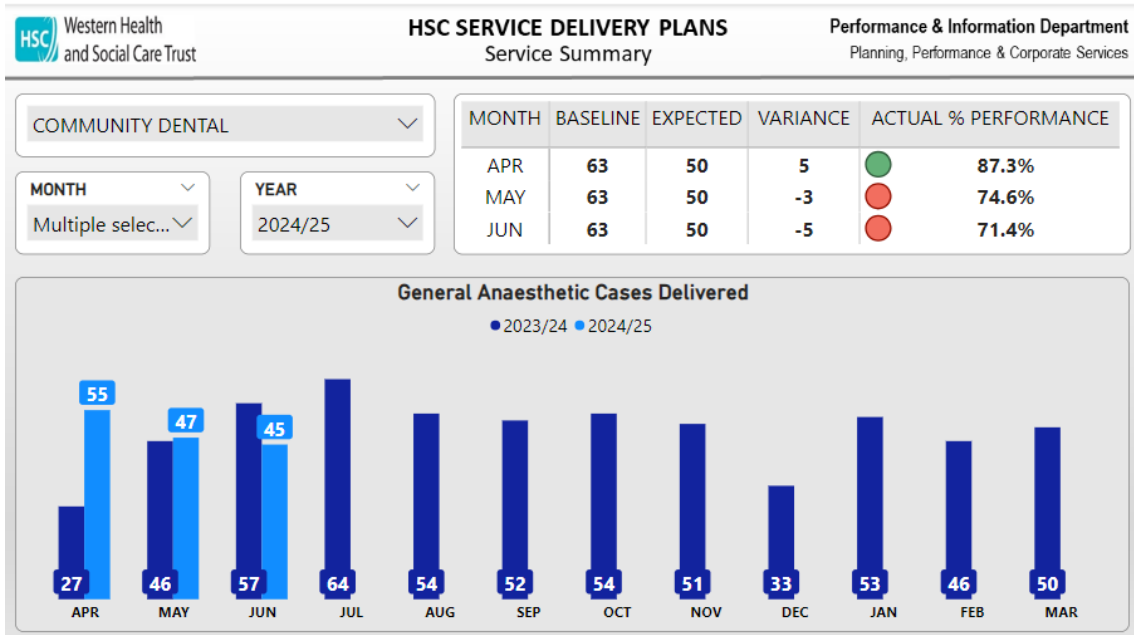


## Community Dental – General Anaesthetic Cases Delivered

The 2024/25 SDP target for Community Dental - General Anaesthetic (GA) Children’s Cases is to achieve **80%** of 2019/20 in Quarter 1 & 2, **85%** in Quarter 3 and **80%** in Quarter 4.

The number of GA cases delivered during Quarter 1 (April to June 24) (147), represents **77.8%** (63.6% Altnagelvin and 110.5% South West Acute) of the cumulative 2019/20 Baseline (189). The Altnagelvin site performance improved in June 24 as a result of additional sessions, due to Consultant summer leave.

Regionally, the Western Trust was ranked 3<sup>rd</sup> of the 5 Trusts in its performance delivery during this reporting period.



End of Report



## Section 2: Western Trust - Summary of Activity Delivered: April to June 2024



HSC SERVICE DELIVERY PLANS  
HOSPITAL SERVICES 2024/25

LINK TO  
SPPG TARGETS

		QUARTER 1 (APRIL - JUNE 2024)				
		BASELINE	EXPECTED	DELIVERED	VARIANCE DELIVERED - EXPECTED EXCEPTIONS APPLY	ACTUAL PERFORMANCE DELIVERED / BASELINE EXCEPTIONS APPLY
<b>CANCER</b>						
PERFORMANCE	14 DAYS	100%	100%	84.0%	-16.0%	84.0%
	31 DAYS	98%	98%	97%	-1%	97%
	62 DAYS	95%	95%	43%	-52%	43%
RED FLAG - FIRST OUTPATIENT APPOINTMENT (EXCLUDING BREAST) 110% OF 2019/20 BASELINE		1,819	2,001	2,744	743	150.9%
<b>IMAGING</b>						
MRI	TARGET SBA VOLUMES	4,146	4,146	4,204	58	101.4%
CT	TARGET SBA VOLUMES	8,088	8,088	10,713	2,625	132.5%
NOUS	TARGET SBA VOLUMES	10,627	10,627	11,005	378	103.6%
<b>CARDIOLOGY / CARDIAC</b>						
CARDIAC MRI	TARGET SBA VOLUMES	84	84	105	21	125.0%
CARDIAC CT	110% OF 2019/20 BASELINE	115	127	153	26	133.0%
ECHO	TARGET SBA VOLUMES	2,079	2,079	1,981	-98	95.3%
CATH LAB	110% OF 2019/20 BASELINE	505	556	475	-81	94.1%
<b>ELECTIVE</b>						
NEW OUTPATIENTS 105% OF 2019/20 BASELINE	FACE TO FACE	18,793	19,723	13,557	-1,682	96.0%
	VIRTUAL			976		
	OTHER			3,508		
	TOTAL			18,041		
REVIEW OUTPATIENTS 100% OF 2019/20 BASELINE	FACE TO FACE	38,254	38,254	25,889	2,041	105.3%
	VIRTUAL			5,887		
	OTHER			8,519		
	TOTAL			40,295		
OUTPATIENTS (OVERALL)		57,047	57,977	58,336	359	102%
INPATIENT 100% OF 2019/20 BASELINE	CORE	1,664	1,664	1,379	-285	83%
	OTHER	396	396	369	-27	93%
	TOTAL	2,060	2,060	1,748	-312	84.9%
DAY CASES 100% OF 2019/20 BASELINE	CORE	4,613	4,613	4,390	-223	95%
	OTHER	2,109	2,109	2,130	21	101%
	TOTAL	6,722	6,722	6,520	-202	97.0%
INPATIENT AND DAYCASE (OVERALL)		8,782	8,782	8,268	-514	94%
ENDOSCOPY	2019/20 BASELINE + 3000 SCOPES PER YEAR (Additional 250 per month)	3,546	3,546	2,625	-921	74.0%
<b>THEATRE UTILISATION</b>						
SCHEDULED THEATRE MINUTES	SESSION DURATION (MINS)	318,975	318,975	298,020	-20,955	93.4%
THEATRE OPERATING TIMES	MAIN THEATRES	85%	85%	83%	-2%	83.0%
	DPU THEATRES	80%	80%	70%	-10%	70.0%
<b>UNSCHEDULED CARE</b>						
ED PERFORMANCES - 12 HOURS	10% REDUCTION OF 2022/23 BASELINE	4,181	3,764	5,093	912	21.8%
<b>WEEKEND DISCHARGES</b>						
ALTNAGELVIN	SIMPLE	80%	80%	54.5%	-26%	54.5%
	COMPLEX	60%	60%	18.9%	-41%	18.9%
SOUTH WEST ACUTE	SIMPLE	80%	80%	15.3%	-65%	15.3%
	COMPLEX	60%	60%	15.0%	-45%	15.0%
<b>AVERAGE LOS</b>						
ALTNAGELVIN	1 DAY REDUCTION OF Q4 2022/23 BASELINE	8.1	7.1	8.4	1.3	8.4
SOUTH WEST ACUTE	1 DAY REDUCTION OF Q4 2022/23 BASELINE	11.4	10.1	11.9	1.8	11.9

LINK TO  
SPPG TARGETS

		QUARTER 1 (APRIL - JUNE 2024)					
		BASELINE	EXPECTED	DELIVERED	VARIANCE	ACTUAL PERFORMANCE	
					DELIVERED - EXPECTED	DELIVERED / BASELINE	
					EXCEPTIONS APPLY	EXCEPTIONS APPLY	
<b>COMMUNITY CARE</b>							
<b>DOMICILIARY CARE</b>	UNMET NEED HOURS (FULL PACKAGES, ALL POCS)	2,992	2,917	<b>2,592</b>	-400	<b>-13.4%</b>	
2.5% <b>REDUCTION</b> OF MAR 24 BASELINE Q1							
5% <b>REDUCTION</b> OF MAR 24 BASELINE Q2	UNMET NEED HOURS (PARTIAL PACKAGES, ALL POCS)	2,208	2,153	<b>2,022</b>	-186	<b>-8.4%</b>	
7.5% <b>REDUCTION</b> OF MAR 24 BASELINE Q3							
10% <b>REDUCTION</b> OF MAR 24 BASELINE Q4	<b>TOTAL</b>	<b>5,200</b>	<b>5,070</b>	<b>4,614</b>	<b>-586</b>	<b>-11.3%</b>	
<b>DIRECT PAYMENTS</b>	NO. OF CLIENTS IN EFFECT AT MONTH END	1,387	1,456	<b>1,410</b>	23	<b>1.7%</b>	
	5% <b>INCREASE</b> OF MAR 24 BASELINE BY MAR 25						
<b>CHILDRENS SOCIAL CARE</b>							
<b>CHILD PROTECTION CASE CONFERENCES</b>	WITHIN 15 DAYS			<b>80</b>		<b>98.8%</b>	
	TOTAL	N/A	84%	<b>81</b>	15%		
	% <b>WITHIN 15 DAYS</b>			<b>99%</b>			
	WITHIN 3 MONTHS			<b>52</b>		<b>89.7%</b>	
	TOTAL	N/A	85%	<b>58</b>	5%		
	% <b>WITHIN 3 MONTHS</b>			<b>90%</b>			
	WITHIN 6 MONTHS			<b>119</b>		<b>97.5%</b>	
	TOTAL	N/A	89%	<b>122</b>	9%		
	% <b>WITHIN 6 MONTHS</b>			<b>98%</b>			
	<b>UNALLOCATED FAMILY SUPPORT CASES</b>		71.0	63.9	<b>40.0</b>	-31.0	<b>-43.7%</b>
	QUARTETLY MONITORING WITH EFFECT FROM Q2						
	10% <b>REDUCTION</b> BY MAR 24 (JUN 23 BASELINE)						
<b>MENTAL HEALTH SERVICES</b>							
<b>ADULT MENTAL HEALTH (NON INPATIENT)</b>	NEW	1,637	1,801	<b>1,062</b>	-739	<b>64.9%</b>	
	REVIEW	12,907	14,198	<b>13,972</b>	-226	<b>108.3%</b>	
	<b>TOTAL</b>	<b>14,544</b>	<b>15,998</b>	<b>15,034</b>	<b>-964</b>	<b>103.4%</b>	
<b>PSYCHOLOGICAL THERAPIES</b>	NEW	420	420	<b>655</b>	235	<b>156.0%</b>	
	REVIEW	3,192	3,192	<b>5,101</b>	1,909	<b>159.8%</b>	
	<b>TOTAL</b>	<b>3,612</b>	<b>3,612</b>	<b>5,756</b>	<b>2,144</b>	<b>159.4%</b>	
<b>DEMENTIA</b>	NEW	120	132	<b>467</b>	335	<b>389.2%</b>	
	REVIEW	1,413	1,554	<b>1,493</b>	-61	<b>105.7%</b>	
	<b>TOTAL</b>	<b>1,533</b>	<b>1,686</b>	<b>1,960</b>	<b>274</b>	<b>127.9%</b>	
<b>CAMHS</b>	NEW	276	276	<b>380</b>	104	<b>137.7%</b>	
	REVIEW	1,754	1,929	<b>2,327</b>	398	<b>132.7%</b>	
	<b>TOTAL</b>	<b>2,030</b>	<b>2,205</b>	<b>2,707</b>	<b>502</b>	<b>133.3%</b>	
<b>MENTAL HEALTH SERVICES (OVERALL)</b>		<b>21,719</b>	<b>23,502</b>	<b>25,457</b>	<b>1,955</b>	<b>117.2%</b>	

HSC SERVICE DELIVERY PLANS  
COMMUNITY SERVICES 2024/25

LINK TO  
SPPG TARGETS

QUARTER 1 (APRIL - JUNE 2024)

		BASELINE	EXPECTED	DELIVERED	VARIANCE DELIVERED - EXPECTED EXCEPTIONS APPLY	ACTUAL PERFORMANCE DELIVERED / BASELINE EXCEPTIONS APPLY
<b>ALLIED HEALTH PROFESSIONALS</b>						
PHYSIOTHERAPY 100% OF 19/20 BASELINE	NEW	4,470	4,470	5,194	724	116.2%
	REVIEW	13,934	13,934	13,188	-746	94.6%
	<b>TOTAL</b>	<b>18,404</b>	<b>18,404</b>	<b>18,382</b>	<b>-22</b>	<b>99.9%</b>
OCCUPATIONAL THERAPY 100% OF 19/20 BASELINE	NEW	2,532	2,532	2,166	-366	85.5%
	REVIEW	7,960	7,960	9,240	1,280	116.1%
	<b>TOTAL</b>	<b>10,492</b>	<b>10,492</b>	<b>11,406</b>	<b>914</b>	<b>108.7%</b>
DIETETICS 100% OF 22/23 BASELINE	NEW	1,264	1,264	1,057	-207	83.6%
	REVIEW	3,809	3,809	3,075	-734	80.7%
	<b>TOTAL</b>	<b>5,073</b>	<b>5,073</b>	<b>4,132</b>	<b>-941</b>	<b>81.5%</b>
ORTHOPTICS 100% OF 19/20 BASELINE	NEW	772	772	682	-90	88.3%
	REVIEW	2,479	2,479	2,260	-219	91.2%
	<b>TOTAL</b>	<b>3,251</b>	<b>3,251</b>	<b>2,942</b>	<b>-309</b>	<b>90.5%</b>
SPEECH & LANGUAGE 100% OF 22/23 BASELINE	NEW	942	942	738	-204	78.3%
	REVIEW	8,131	8,131	9,936	1,805	122.2%
	<b>TOTAL</b>	<b>9,073</b>	<b>9,073</b>	<b>10,674</b>	<b>1,601</b>	<b>117.6%</b>
PODIATRY 100% OF 19/20 BASELINE	NEW	1,057	1,057	894	-163	84.6%
	REVIEW	9,926	9,926	9,031	-895	91.0%
	<b>TOTAL</b>	<b>10,983</b>	<b>10,983</b>	<b>9,925</b>	<b>-1,058</b>	<b>90.4%</b>
ALLIED HEALTH PROFESSIONALS (OVERALL)	NEW	11,037	11,037	10,731	-306	97.2%
	REVIEW	46,239	46,239	46,730	491	101.1%
	<b>TOTAL</b>	<b>57,276</b>	<b>57,276</b>	<b>57,461</b>	<b>185</b>	<b>100.3%</b>
<b>STROKE SERVICES</b>						
THROMBOLYSIS RATE	ALTNAGELVIN	N/A	16%	8%	-8%	8%
	SOUTH WEST ACUTE	N/A	16%	13%	-3%	13%
% ADMITTED <4 HOURS	ALTNAGELVIN	N/A	43%	10%	-33%	10%
	SOUTH WEST ACUTE	N/A	90%	78%	-12%	78%
<b>COMMUNITY DENTAL</b>						
CONTACTS 100% OF 2019/20 BASELINE FOR Q1 & Q2 90% OF 2019/20 BASELINE FOR Q3 80% OF 2019/20 BASELINE FOR Q4	NEW	718	718	675	-43	94.0%
	REVIEW	2,582	2,582	4,099	1,517	158.8%
	<b>TOTAL</b>	<b>3,300</b>	<b>3,300</b>	<b>4,774</b>	<b>1,474</b>	<b>144.7%</b>
GENERAL ANAESTHETIC CASES DELIVERED CHILDRENS CASES (SUBSET OF HOSPITAL DAY CASES) 80% OF 2019/20 BASELINE FOR Q1, Q2 + Q4, 85% FOR Q3	ALTNAGELVIN	132	106	84	-22	63.6%
	SOUTH WEST ACUTE	57	46	63	17	110.5%
	<b>TOTAL</b>	<b>189</b>	<b>151</b>	<b>147</b>	<b>-4</b>	<b>77.8%</b>

## Public Health: Performance Summary April to June 2024

Service Area	2024/25 Target Trajectory	Quarter 1 (Apr-Jun 24 cumulative)
HCAI - clostridioides difficile (CDI)	Q1: 14.2 cases per 100,000 occupied beds	20.5
HCAI - Methicillin-resistant staphylococcus aureus (MRSA)	1.613 cases per 100,000 occupied beds (CDI)	1.577
Antimicrobial Consumption - total antibiotic prescribing	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in total antibiotic prescribing (DDD per 1000 admission).	10,189.9
Antimicrobial Consumption - carbapenem use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in carbapenem use, measured in DDD per 1000 admissions	131.0
Antimicrobial Consumption - piperacillin-tazobactam use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in piperacillin-tazobactam use, measured in DDD per 1000 admissions	457.1
Antimicrobial Consumption - use of antibiotics from the WHO Access AWaRe category	by 31st March 2025, all Trusts to secure (in secondary care) a total of 55% usage of antibiotics from the WHO Access AWaRe category	53.75

## Northern Ireland Ambulance Service (NIAS): WHSCT Performance Summary April to June 2024

Service Area	2024/25 Target Trajectory	Apr-24	May-24	Jun-24	Quarter 1
NIAS Handover < 15 mins	Q1: 12%, Q2: 15%, Q3: 20% & Q4: 25%	6.0%	6.9%	6.3%	6.4%
NIAS Handover < 30 mins	Q1: 32%, Q2: 36%, Q3: 40% & Q4: 45%	25.4%	31.9%	29.0%	28.8%
NIAS Handover < 60 mins	Q1: 64%, Q2: 70%, Q3: 76% & Q4: 85%	65.0%	79.0%	72.5%	72.3%
NIAS Handover > 2 hours	0%	9.4%	2.5%	5.4%	5.7%
Ambulance Turnaround within 30 mins	Q1: 20%, Q2: 30%, Q3: 40% & Q4: 51%	12.2%	12.0%	15.0%	12.9%

## Overall RAG assessment: April to June 2024

		Quarter 1	
<b>Total Metrics</b> Hospital & Community: 53 HCAI: 6 NIAS: 5	Total Number of SDP Metrics	<b>64</b>	
	Overall RAG Assessment	29	45%
		10	16%
		21	33%
No. of Metrics where performance is not available	4	6%	

### Section 3: RAG Status Summary: 2023/24 Quarter 4 / Year End and 2024/25 Quarter 1



LINK TO SPPG TARGETS

HSC SERVICE DELIVERY PLANS  
HOSPITAL SERVICES 2024/25

ACTUAL % PERFORMANCE

		QUARTER 4 JAN - MAR 2024	YEAR END 2023/24	APR 2024	MAY 2024	JUN 2024	QUARTER 1 APR - JUN 2024
<b>CANCER</b>							
PERFORMANCE	14 DAYS						
	31 DAYS						
	62 DAYS						
RED FLAG - FIRST OUTPATIENT APPOINTMENT (EXCLUDING BREAST)							
110% OF 2019/20 BASELINE							
<b>IMAGING</b>							
MRI	TARGET SBA VOLUMES						
CT	TARGET SBA VOLUMES						
NOUS	TARGET SBA VOLUMES						
<b>CARDIOLOGY / CARDIAC</b>							
CARDIAC MRI	TARGET SBA VOLUMES						
CARDIAC CT	110% OF 2019/20 BASELINE						
ECHO	TARGET SBA VOLUMES						
CATH LAB	110% OF 2019/20 BASELINE						
<b>ELECTIVE</b>							
NEW OUTPATIENTS 105% OF 2019/20 BASELINE	FACE TO FACE						
	VIRTUAL						
	OTHER						
	TOTAL						
REVIEW OUTPATIENTS 100% OF 2019/20 BASELINE	FACE TO FACE						
	VIRTUAL						
	OTHER						
	TOTAL						
INPATIENT 100% OF 2019/20 BASELINE	CORE						
	OTHER						
	TOTAL						
DAY CASES 100% OF 2019/20 BASELINE	CORE						
	OTHER						
	TOTAL						
INPATIENT AND DAYCASE (OVERALL)							
ENDOSCOPY	2019/20 BASELINE + 3000 SCOPES PER YEAR (Additional 250 per month)						
<b>THEATRE UTILISATION</b>							
SCHEDULED THEATRE MINUTES	SESSION DURATION (MINS)						
THEATRE OPERATING TIMES	MAIN THEATRES						
	DPU THEATRES						
<b>UNSCHEDULED CARE</b>							
ED PERFORMANCES - 12 HOURS	10% REDUCTION OF 2022/23 BASELINE						
<b>WEEKEND DISCHARGES</b>							
ALTNAGELVIN	SIMPLE						
	COMPLEX						
SOUTH WEST ACUTE	SIMPLE						
	COMPLEX						
<b>AVERAGE LOS</b>							
ALTNAGELVIN	1 DAY REDUCTION OF Q4 2022/23 BASELINE						
SOUTH WEST ACUTE	1 DAY REDUCTION OF Q4 2022/23 BASELINE						

LINK TO  
SPPG TARGETS

ACTUAL % PERFORMANCE

		QUARTER 4 JAN - MAR 2024	YEAR END 2023/24	APR 2024	MAY 2024	JUN 2024	QUARTER 1 APR - JUN 2024
<b>COMMUNITY CARE</b>							
<b>DOMICILIARY CARE</b> 2.5% <b>REDUCTION</b> OF BASELINE Q1 5% <b>REDUCTION</b> OF BASELINE Q2 7.5% <b>REDUCTION</b> OF BASELINE Q3 10% <b>REDUCTION</b> OF BASELINE Q4	UNMET NEED HOURS (FULL PACKAGES, ALL POCS)						
	UNMET NEED HOURS (PARTIAL PACKAGES, ALL POCS)						
	<b>TOTAL</b>						
<b>DIRECT PAYMENTS</b>	NO. OF CLIENTS IN EFFECT AT MONTH END 10% <b>INCREASE</b> BY MARCH 2024 (MARCH 2023 BASELINE)						
<b>CHILDRENS SOCIAL CARE</b>							
<b>CHILD PROTECTION CASE CONFERENCES</b>	WITHIN 15 DAYS						
	TOTAL						
	% <b>WITHIN 15 DAYS</b>						
	WITHIN 3 MONTHS						
	TOTAL						
	% <b>WITHIN 3 MONTHS</b>						
	WITHIN 6 MONTHS						
	TOTAL						
% <b>WITHIN 6 MONTHS</b>							
<b>UNALLOCATED FAMILY SUPPORT CASES</b> QUARTETLY MONITORING WITH EFFECT FROM Q2 10% <b>REDUCTION</b> BY MARCH 2024 (JUNE 2023 BASELINE)							
<b>MENTAL HEALTH SERVICES</b>							
<b>ADULT MENTAL HEALTH (NON INPATIENT)</b> 110% OF 2019/20 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>PSYCHOLOGICAL THERAPIES</b> 100% OF 2019/20 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>DEMENTIA</b> 110% OF 2019/20 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>CAMHS</b> 100% OF 2019/20 BASELINE (NEW CONTACTS) 110% OF 2019/20 BASELINE (REVIEW CONTACTS)	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>MENTAL HEALTH SERVICES (OVERALL)</b>							

LINK TO  
SPPG TARGETS

ACTUAL % PERFORMANCE

		QUARTER 4 JAN - MAR 2024	YEAR END 2023/24	APR 2024	MAY 2024	JUN 2024	QUARTER 1 APR - JUN 2024
<b>ALLIED HEALTH PROFESSIONALS</b>							
<b>PHYSIOTHERAPY</b> 100% OF 2019/20 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>OCCUPATIONAL THERAPY</b> 100% OF 2019/20 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>DIETETICS</b> 100% OF 2022/23 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>ORTHOPTICS</b> 100% OF 2019/20 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>SPEECH &amp; LANGUAGE</b> 100% OF 2022/23 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>PODIATRY</b> 100% OF 2019/20 BASELINE	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>ALLIED HEALTH PROFESSIONALS (OVERALL)</b>	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>STROKE SERVICES</b>							
<b>THROMBOLYSIS RATE</b> IN LINE WITH WHSCT RETURN	ALTNAGELVIN			REPORTED QUARTERLY IN 2024/25			
	SOUTH WEST ACUTE						
<b>% ADMITTED &lt;4 HOURS</b> FIGURES PROVIDED BY SPPG	ALTNAGELVIN						
	SOUTH WEST ACUTE						
<b>COMMUNITY DENTAL</b>							
<b>CONTACTS</b> 100% OF 2019/20 BASELINE FOR Q1 & Q2 105% OF 2019/20 BASELINE FOR Q3 110% OF 2019/20 BASELINE FOR Q4	NEW						
	REVIEW						
	<b>TOTAL</b>						
<b>GENERAL ANAESTHETIC CASES DELIVERED</b> CHILDRENS CASES (SUBSET OF HOSPITAL DAY CASES) 80% OF 2019/20 BASELINE	ALTNAGELVIN						
	SOUTH WEST ACUTE						
	<b>TOTAL</b>						

## Appendix 1: 2024/25 SDP Baseline and Target Adjustments and/or Uplifts.

2024/25 Target / Activity Uplifts	
<b>Hospital Services</b>	
Outpatients	Activity uplift of 788 New and 595 Review Outpatients
Day Case	Activity uplift of 1,989 (729 Core and 1,260 Omagh DPC)
Endoscopy	Expected to achieve the 2019/20 baseline + 3,000 scopes per year. Target adjusted to reflect regional investment into Omagh Hospital
Average LOS	Expected to achieve a 1-day reduction applied across the year unlike the 2023/24 incremental reduction.
<b>Community Services</b>	
Unallocated Cases	Reporting frequency to PTEB changed to Quarterly in 2024/25.
Domiciliary Care Unmet Need	Baseline Target updated to March 2024 (5,200) from March 2023 (5,561) in 2023/24 (10% reduction).
Direct Payments	Baseline Target updated to March 2024 (1,383) from March 2023 (1,338) in 2023/24 (5% increase).
Stroke Services (Thrombolysis and % Admitted within 4 hours)	Reporting frequency changed to Quarterly in 2024/25.
Community Nursing	Contacts and <i>Quality Indicators</i> - monitoring paused until the District Nursing Service Overview report is finalised and tabled at PTEB and resolution on extraction from Encompass
Community Dental Contacts	Quarterly Targets updated from 2023/24 with a decrease in Quarter 3 (90%) and Quarter 4 (80%).
Community Dental GA Cases	Quarterly Targets updated from 2023/24 with an increase to 85% in Quarter 3.
<b>Northern Ireland Ambulance Service (NIAS)</b>	
	Baseline Target updated to the Regional 2023/24 End of Year positions.
	Quarterly Targets in 2024/25 for Ambulance Handover Delays (4 metrics) and Ambulance Turnaround updated from 2023/24.
<b>Public Health</b>	
HCAI - Clostridioides difficile (CDI):	Change in methodology: 14.2 cases per 100,000 occupied beds
HCAI - Methicillin-resistant staphylococcus aureus (MRSA):	Change in methodology: 1.613 cases per 100,000 occupied beds
Antimicrobial Consumption - total antibiotic prescribing:	1% reduction
Antimicrobial Consumption - carbapenem use:	1% reduction
Antimicrobial Consumption - piperacillin-tazobactam use:	1% reduction
Antimicrobial Consumption - use of antibiotics from the WHO Access AWaRe category:	55%