



Western Health
and Social Care Trust

PERFORMANCE REPORT JULY – SEPTEMBER 2024

Trust Board – 7th November 2024

Context

This report provides an update for Hospital and Community Services on progress at the end of 2024/25 Quarter 2 (July to September 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).

During 2024/25 Quarter 2 (July to September 24), the Trust reported against 64 metrics across Hospital and Community Services, Public Health and Northern Ireland Ambulance Service (NIAS). Performance against the four District Nursing metrics remains paused and reported as "Unavailable" in line with SPPG decision.

Executive Summary

The 2024/25 Quarter 2 (July to September 24) performance was reported against 64 metrics; of these 42% assessed as "Red", 19% "Amber", 33% "Green" and 6% "Unavailable". Unfortunately, at the time of publishing this report, we are not in receipt of the Performance and Transformation Executive Board (PTEB) report, which provides the regional comparison across the Trusts.

Overall, the 2024/25 Quarter 2 (July to September 24) performance has seen an improvement with fewer metrics RAG assessed "Red" and more metrics RAG assessed "Amber" when compared to 2024/25 Quarter 1.

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

Service areas where the cumulative Quarter 2 (July to September 24), performance has met or exceeded the baseline activity and the expected/SBA target (RAG assessed Green) are:

Hospital Services

- *Cancer Services*: Red Flag 1st OP appointment.
- *Imaging*: MRI, CT and Non-Obstetric ultrasound.
- *Cardiac*: CT and Echo.
- *Elective Care*: Day Case.

Community Services

- *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*: Physiotherapy, Dietetics and Speech and Language (New and Review Total).

- *Stroke Service: Thrombolysis (South West Acute).*
- *Community Dental: GA sessions (Total).*

Public Health

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

Service areas where the cumulative Quarter 2 (July to September 24), performance has almost met the baseline activity and the expected/SBA target (RAG assessed Amber) are:

Hospital Services

- *Cancer Services: 14 and 31 Cancer Access performance.*
- *Cardiac: MRI.*
- *Elective Care: Review Outpatients, Scheduled Theatre Minutes and Theatre Operating Times (Main).*

Community Services

- *Community Care: Domiciliary Care Unmet Need (Total packages) and Direct Payments.*
- *Mental Health Services: Adult Mental Health (New and Review Total).*
- *Allied Health Professionals: Podiatry (New and Review Total).*
- *Community Dental: Contacts (Total).*

Northern Ireland Ambulance Service (NIAS)

- *Handover Times: <60 minutes.*

Service areas where the cumulative Quarter 2 (July to September 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: 62 Day Access.*
- *Cardiac: Cath Lab procedures.*
- *Elective Care: New Outpatients, Inpatient, Endoscopy 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: Occupational Therapy and Orthoptics (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, <30 minutes, >2 hours and Ambulance Turnaround Times <30 minutes.

Other Relevant Issues

The Trust submitted its full year Waiting List Initiative (WLI) plan of £11.902m to SPPG at the beginning of September 24. The plan includes delivery of Elective Care In-house and Independent Sector (IS) activity across a range of specialties for the twelve month period from April 2024 to March 2025.

At the end of September 24, the Trust have delivered cumulative activity of 14,582. To ensure full delivery against the planned volumes by March 2025, robust monitoring of the plan is undertaken at the Elective Core Group meeting on a weekly basis.

Further detail on the plan is provided in the table below.

Activity Type		Planned Volumes
Independent Sector	IP/DC	499
	Scopes	2868
	Diagnostics (MRI / plain film reporting)	11464
In-House	New Outpatients	5234
	Review Outpatients	2922
	Inpatients	160
	Day case	161
	Scopes	160
	Scopes Validation and Follow-Up of IS transfers	6948
	Imaging	4422
	Physiological Measurement	1802
Total		36,640

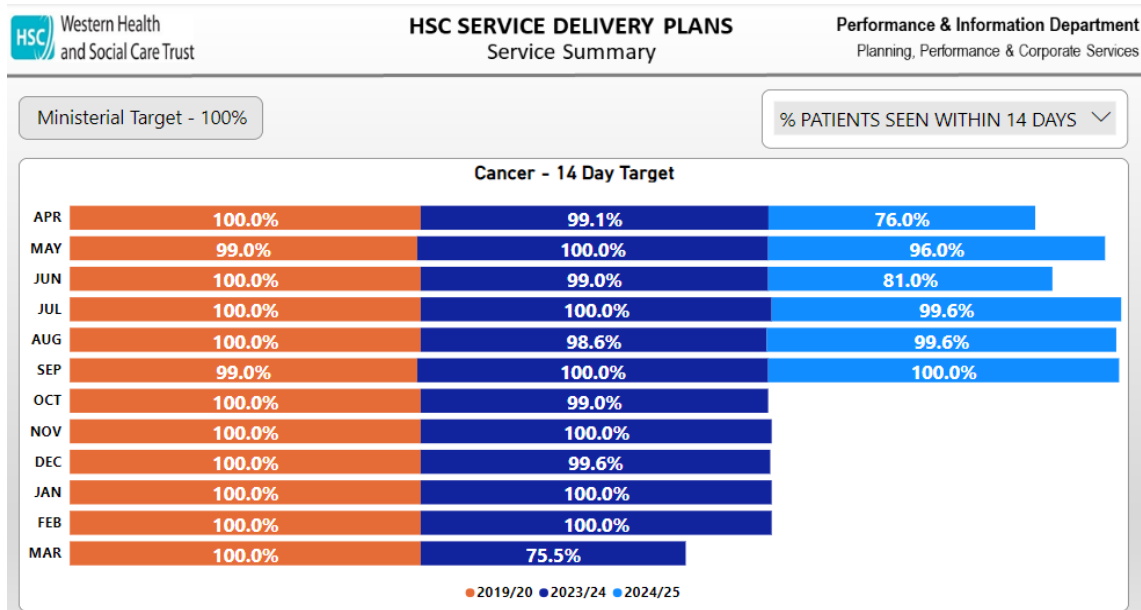
HOSPITAL SERVICES

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: performance against the Ministerial Cancer access target has substantially improved during Quarter 2 (July to September 24) with **99.5%** achieved (2 patients waited longer than 14 days).

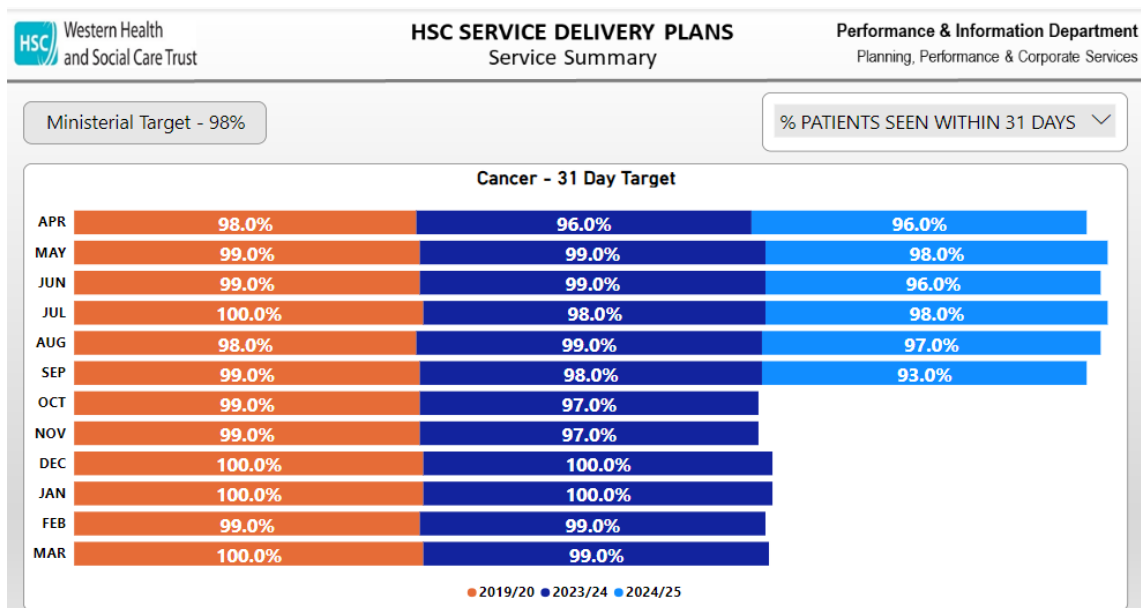
Western Trust mutual aid support to other Trusts was not required during this time period.



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.

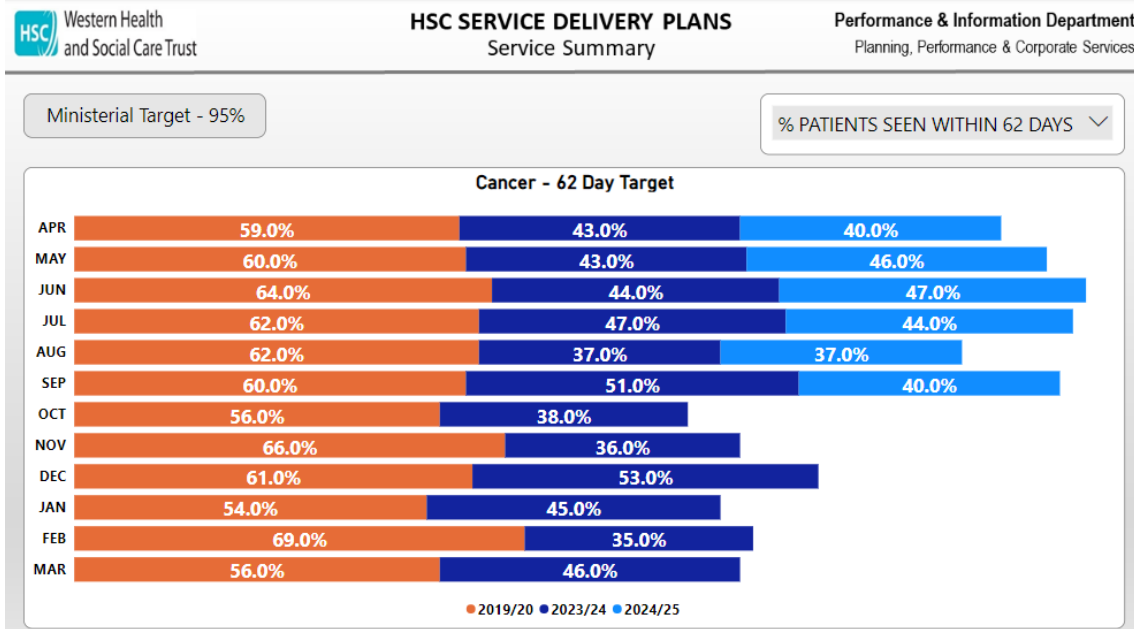
31 Day Target: Performance against the Ministerial Cancer access target remains strong with **97%** achieved during Quarter 2 (July to September 24).



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 2 (July to September 24).



The continued increase in Red Flag demand, medical workforce vacancies (Consultant, Middle Grade and Nurse Specialists), unplanned leave, outpatient capacity and diagnostic service demand (pathology and imaging), continues to impact service delivery and performance. There is a need for additional recurrent funding to support growing service demand across the multi-disciplinary teams. The main service areas impacted are Gastroenterology, Urology, Gynaecology, Head and Neck and Dermatology.

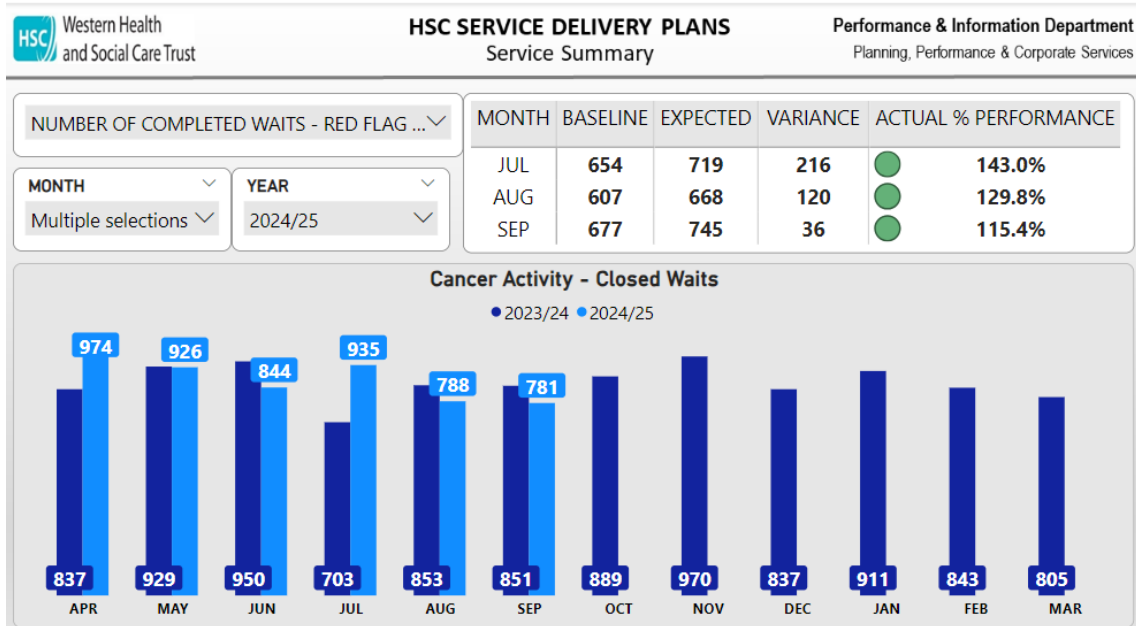
These service areas continue to progress recruitment to substantive and temporary vacancies via regional and international avenues, securing Locum cover where available and exploring all available options to improve delivery and performance. Following successful recruitment of medical staff within Gastroenterology, General Surgery, Gynaecology and Urology; the Trust expect to see a phased increase in capacity and delivery in 2024/25 Quarter 3 and 4 within these areas. Pathology service capacity impacted by Consultant vacancies which contributed to longer turnaround times than expected; the service have successfully recruited two Pathologists who are now in post.

In the interim, the Trust are availing of Waiting List initiative (WLI) and Independent Sector (IS) funding to support delivery across these service areas as detailed on page 3. In addition, mutual aid is being provided to the Trust's Head and Neck Services by the South Eastern Trust. Due to ongoing resource challenges within this service, discussions have commenced with SPPG regarding a pathway for new diagnosis head and neck patients.

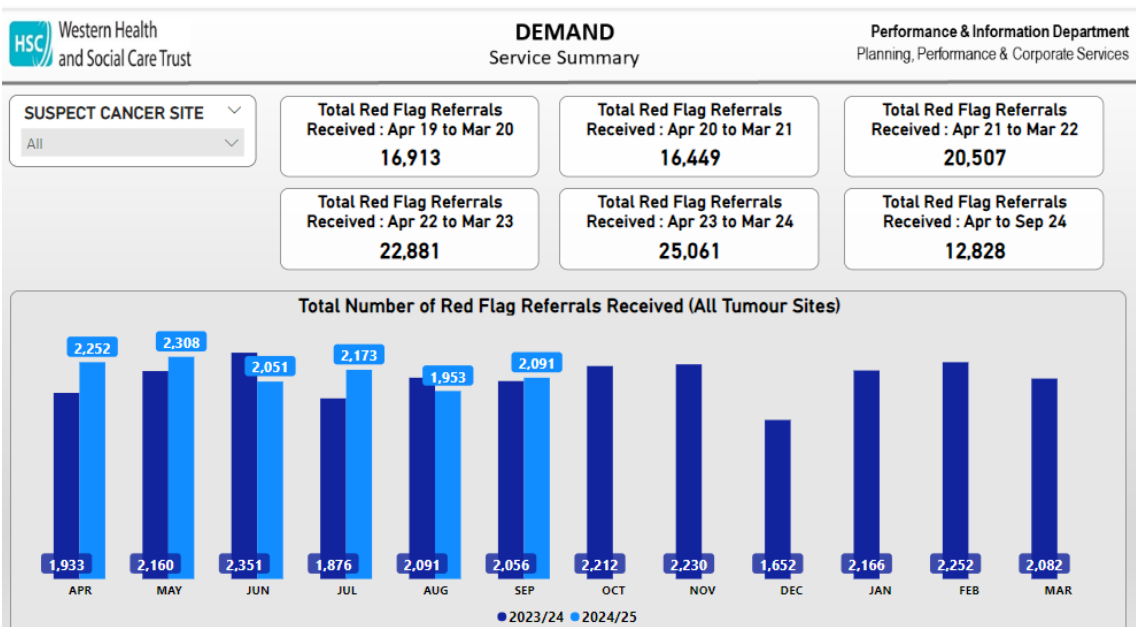
Red Flag (New) Completed Waits (Excluding Breast)

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

The cumulative number of closed waits completed during Quarter 2 (July to September 24) (2,504) reflects **129.2%** of the cumulative 2019/20 Baseline activity (1,938).



The number of Red Flag Referrals Received (All Tumour sites) during 2024/25 Quarter 2 (July to September 24) (6,217), increased by **41%** compared to same period 2019/20 (4,396) with 1,821 additional Red Flag referrals and by **22%** compared to same period 2021/22 (5,083) (Baseline year); equivalent to 1,134 additional Red Flag referrals.

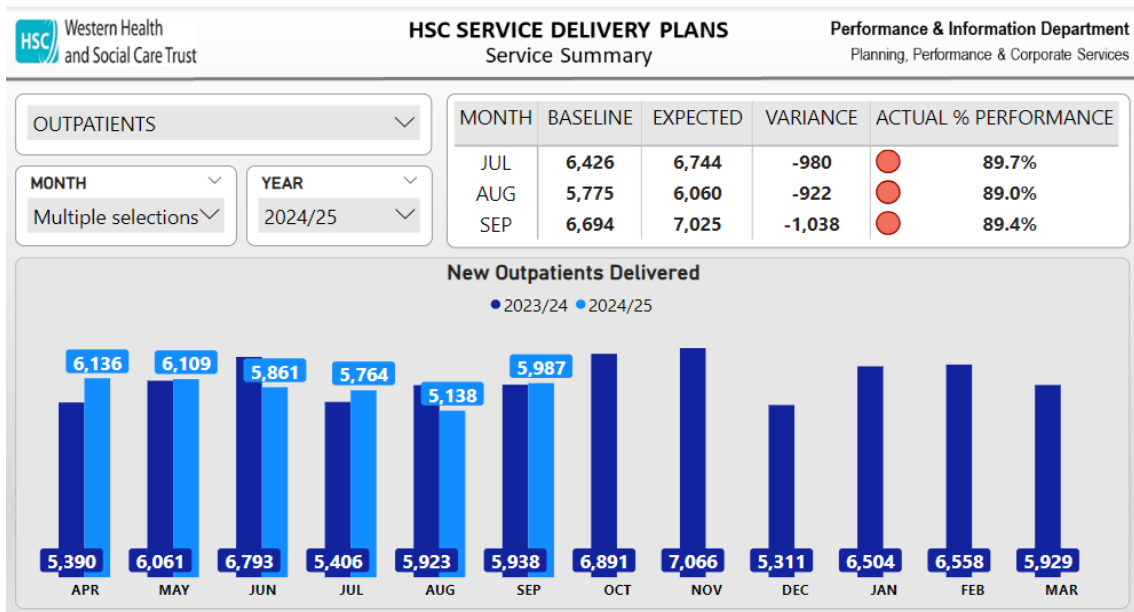


Elective Care – Outpatients Service Delivery Plan

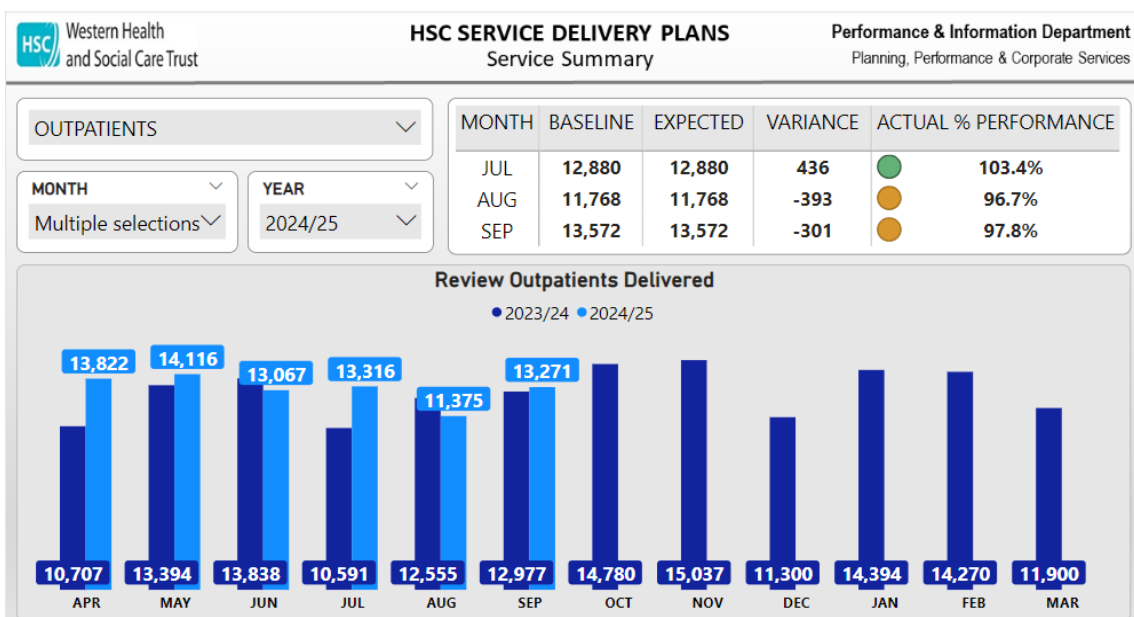
The 2024/25 SDP target is to deliver 105% (New) and 100% (Review) of 2019/20 activity.

Overall a total of **54,851** New (16,889) and Review (37,962) Outpatients was delivered during Quarter 2 (July to September 24); reflecting a **4%** decrease on 2019/20 Baseline activity (2,264 less attendances) and a **3%** increase on 2023/24 activity (1,461 additional attendances). A breakdown by New and Review is provided below.

The cumulative New outpatient activity delivered during Quarter 2 (July to September 24) (16,889) reflects **89.4%** of the cumulative 2019/20 Baseline activity (18,895). The 2019/20 Baseline uplifted by 788 (Full Year) equating to 198 in Quarter 2 (July to September 24), to reflect additional investment received.



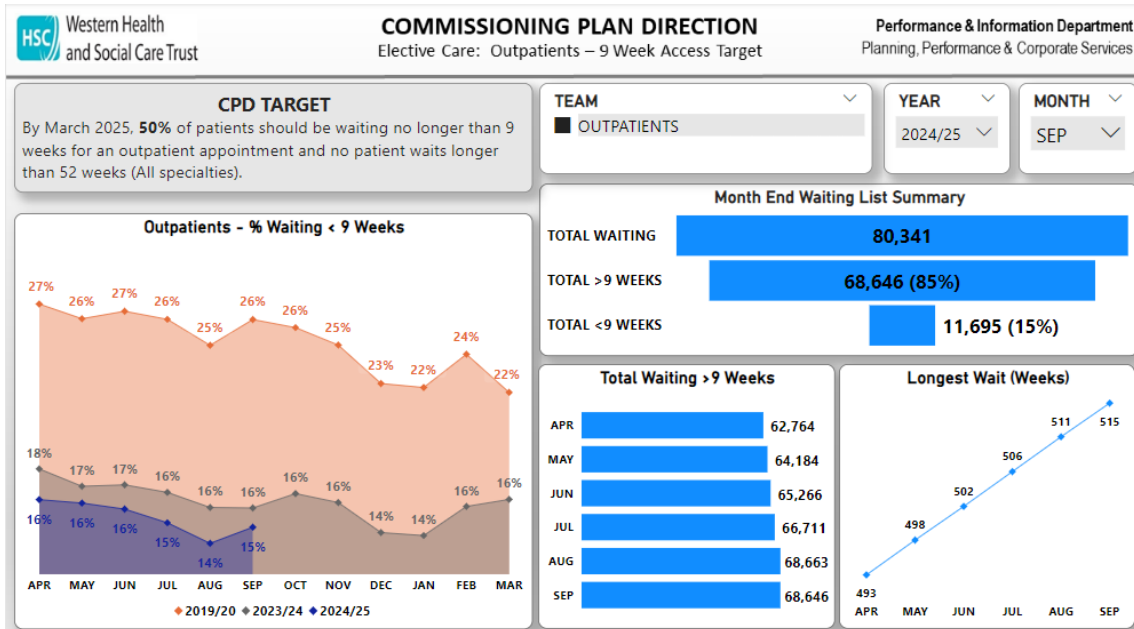
The cumulative Review outpatient activity delivered during Quarter 2 (July to September 24) (37,962) reflects **99.3%** of the cumulative 2019/20 Baseline activity (38,220). The 2019/20 Baseline uplifted by 595 (Full Year) equating to 150 in Quarter 2 (July to September 24), to reflect additional investment received.



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 Specialities

At the end of September 24, the Trust reported **80,341** patients waiting for an outpatient appointment; with **68,646** patients waiting longer than 9 weeks. Performance has deteriorated when compared to June 24; when there were **77,293** patients in total waiting; with **65,266** waiting longer than 9 weeks.



Elective Outpatient activity and access performance remains impacted by workforce challenges across a number of specialities. Medical workforce vacancies, long and short term sick leave, retirements and unplanned leave. These service areas continue to progress all available recruitment options locally, regionally and internationally.

Recruitment to Consultant posts was successful within General Surgery, Gynaecology and Urology with start dates confirmed between August 24 and January 25. It is anticipated activity will increase in the last two quarters of 2024/25 in these specialities.

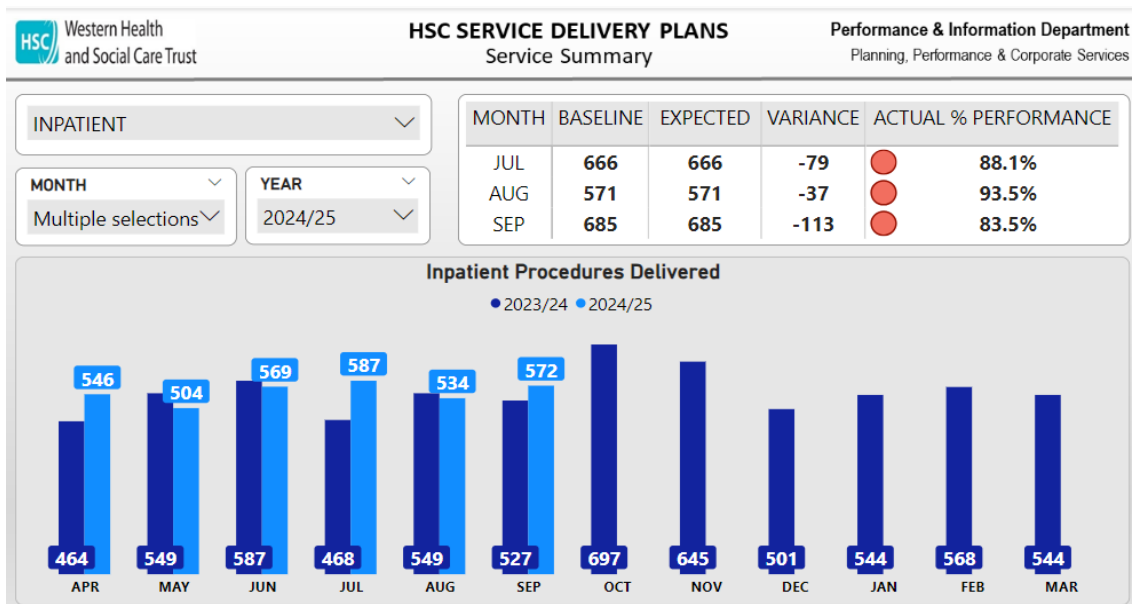
Elective Care – Inpatient and Day Case Service Delivery Plan

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

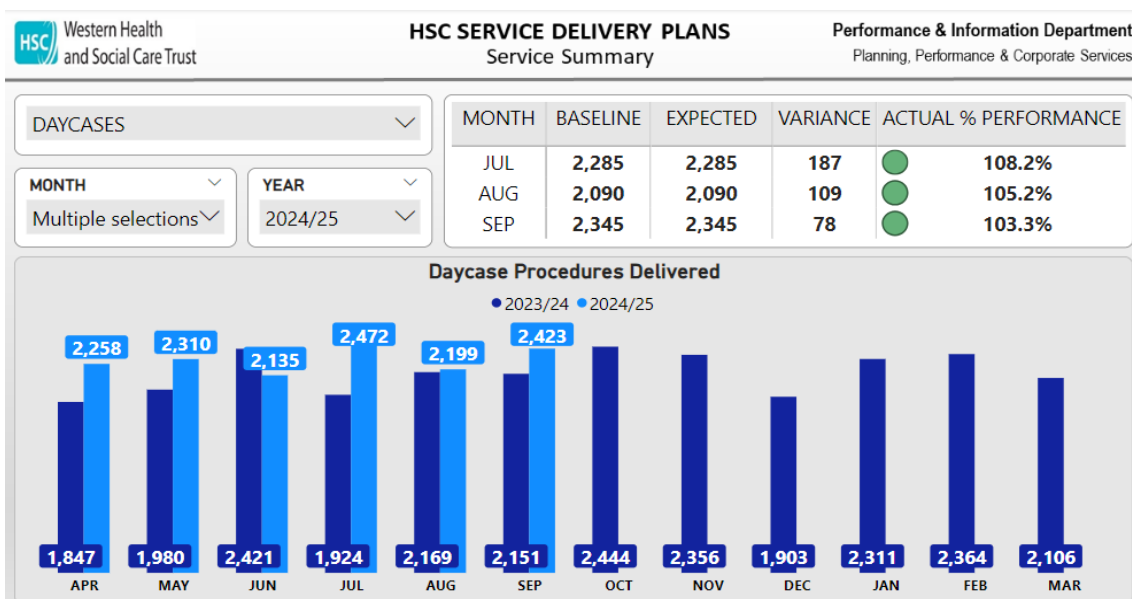
The Trust has continued to deliver more Inpatient activity during Quarter 2 (July to September 24), when compared to the same months of 2023/24. Despite this increase, the Quarter 2 out turn and performance remains below target.

During Quarter 2 (July to September 24) Day case performance remained strong with the Baseline/Expected target exceeded each month. The service have delivered more activity during July, August and September 24 when compared to the same months of 2023/24.

The cumulative Inpatient activity delivered during Quarter 2 (July to September 24) (1,693) reflects 88.1% of the 2019/20 Baseline activity (1,922).



The cumulative Day case activity delivered during Quarter 2 (July to September 24) (7,094) reflects 105.6% of the 2019/20 Baseline activity (6,720). The 2019/20 Baseline uplifted by 1,989 (Full Year) equating to 498 in Quarter 2 (July to September 24), to reflect additional investment received.



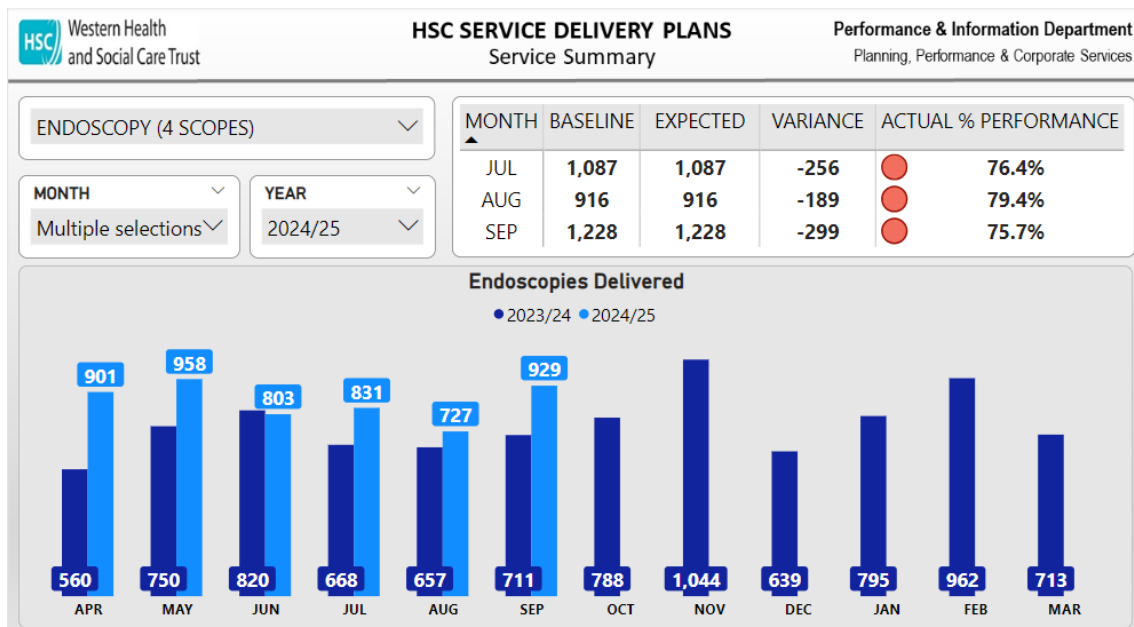
Elective Care – Endoscopy Service Delivery Plan

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 have continued to improve throughout Quarter 2 (July to September 24); with the service delivering more activity in 2024/25 Quarter 2, when compared to the same period of 2023/24.

The Endoscopy service capacity remains challenged by workforce issues. Of the recently recruited GI Endoscopists and Consultant Surgeons, there are two Surgeons, two GI Endoscopist and two Nurse Endoscopist undertaking specialist training. It is expected that the capacity and activity levels will increase further from April, August and September 25.

The cumulative activity delivered during Quarter 2 (July to September 24) (2,487) reflects 77.0% of the cumulative 2019/20 Baseline activity (3,231). The 2019/20 Baseline uplifted by 3,000 (Full Year), equating to 750 in Quarter 2 (July to September 24), to reflect additional investment received.



A breakdown of the Quarter 2 (July to September 24) activity (**2,487**) included **2,047** patients seen within Core Service and **440** patients seen within Omagh DPC.

The Service continue to utilise resource from the Regional Endoscopy Centre (Lagan Valley) and two Independent Sector providers to support core capacity. During Quarter 2 (July to September 24), a total of:

- **413** Western Trust red flag patients attended and were treated at Lagan Valley.
- **1,254** Western Trust patients attended and were treated via external out sourcing to the Independent Sector.

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.

Performance against this Access Target has further improved during Quarter 2 (July to September 24). At the end of September 24, the Trust reported an overall total of **20,324** waiting for Inpatient and Day case treatment with **15,362** waiting longer than 13 weeks; compared to total waiting of **22,335** with **17,028** waiting longer than 13 weeks at June 24.

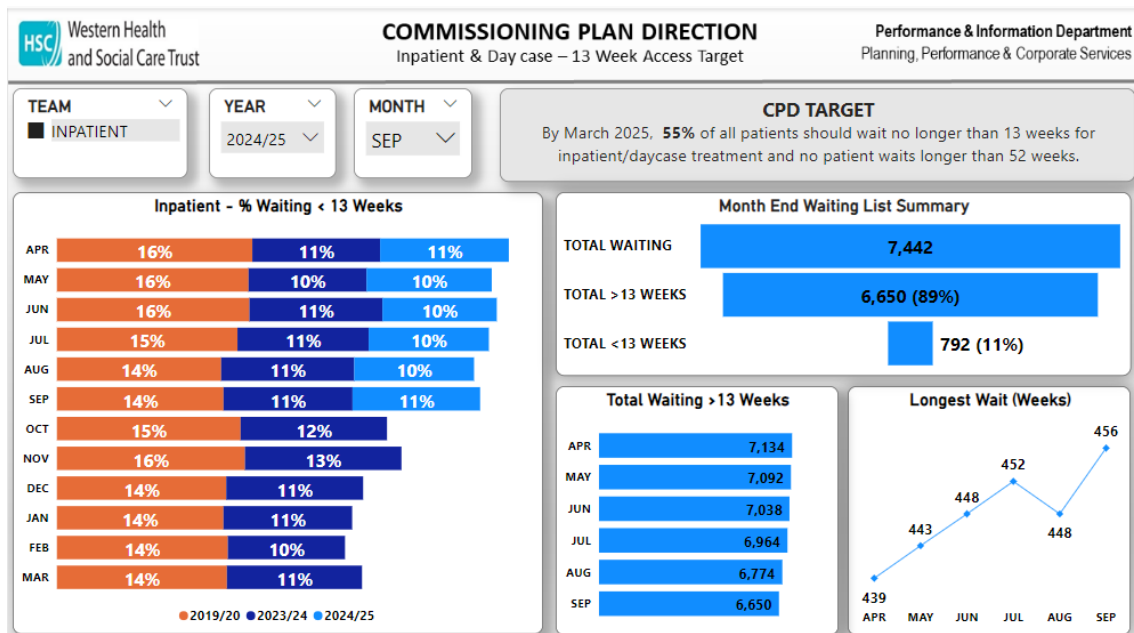
Of those waiting at the end of September 24 there were:

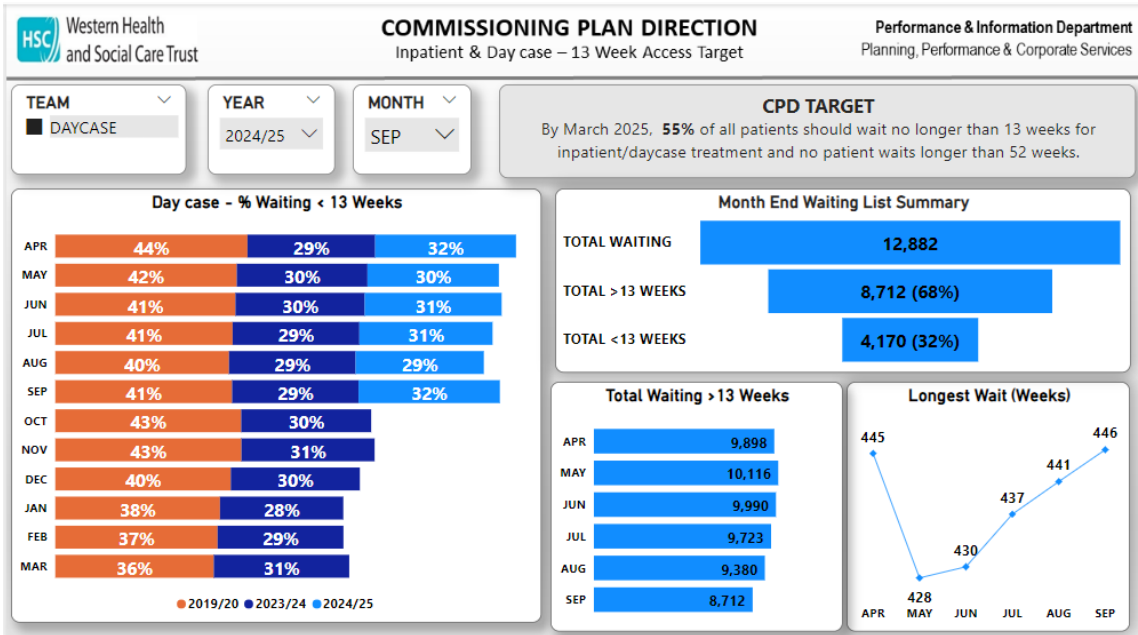
- **7,442** patients waiting for Inpatient Treatment with **6,650** waiting longer than 13 weeks. Performance has further improved when compared to June 24; when there were **7,780** in total waiting and **7,038** waiting longer than 13 weeks.
- **12,882** patients waiting for Day case Treatment, with **8,712** waiting longer than 13 weeks. Performance has further improved when compared to June 24; when there were **14,555** in total waiting and **9,990** waiting longer than 13 weeks.

Endoscopy

Of the number waiting for Inpatient and Daycare treatment (20,324) at the end of September 24 there were:

- **3,419** people waiting for an Endoscopy of which **910** are red flag patients. Of the 910 red flag patients waiting, **369** 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 June 24 (4,539 total waiting, 957 red flag patients with 416 waiting longer than 21 days).



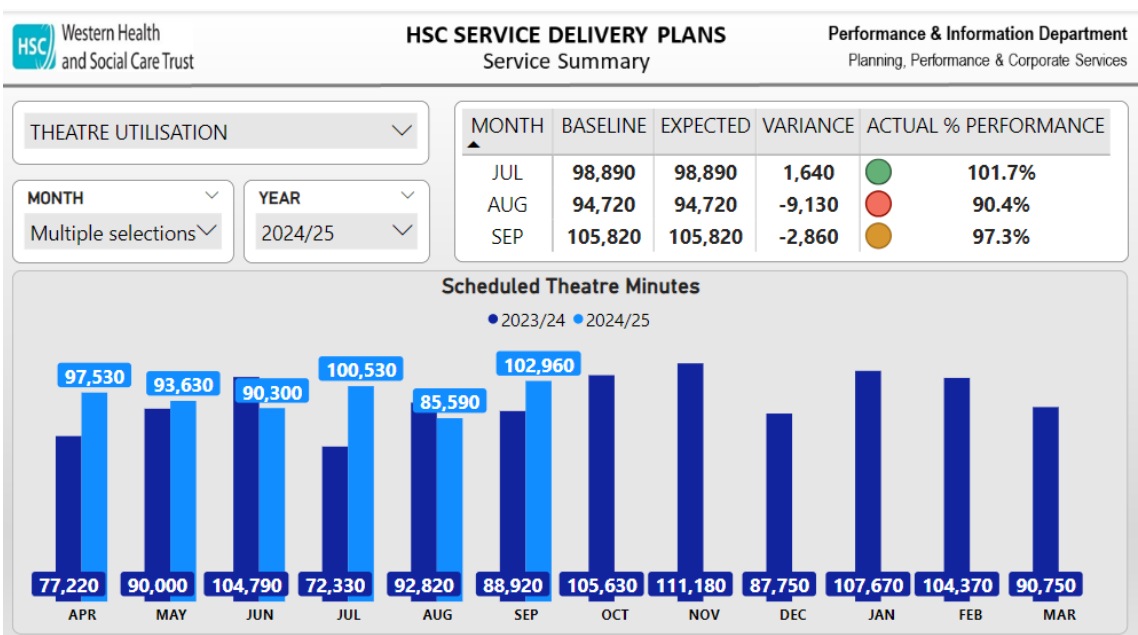


Elective Care – Theatre Scheduled Minutes Service Delivery Plan

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 July and September 24 with more minutes scheduled when compared to the same months of 2023/24. September 24 reflects the highest number of Scheduled Theatre Minutes this year to date.

The cumulative Scheduled Theatre Minutes during Quarter 2 (July to September 24) (289,080) reflects 96.5% of the cumulative number delivered against Baseline activity (299,430).



Elective Care – Theatre Operating Times Service Delivery Plan

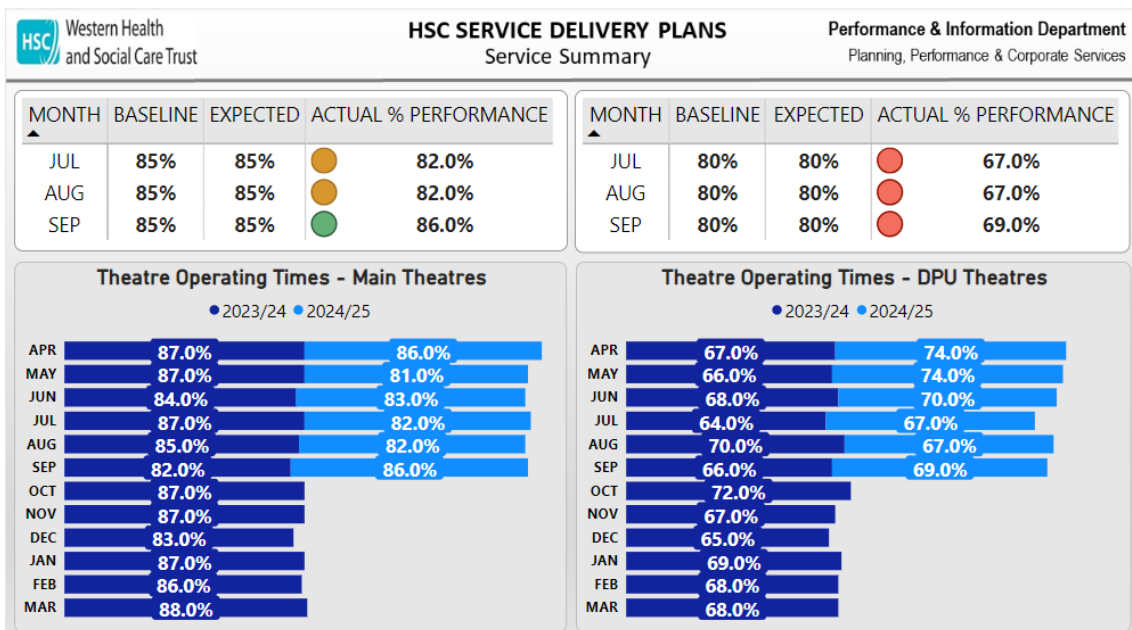
Trusts to deliver an OP time of 85% for main theatres and 80% for day procedure units

The Main Operating Times performance has remained static during the first two months of Quarter 2 (July to September 24), with some improvement in September 24.

The DPU Operating Times performance dropped during July and August 24. Some improvement in September 24, however performance remained below the expected target.

The cumulative Quarter 2 (July to September 24) performance achieved:

- **Main Theatres: 83.0%** against the 85% target.
- **DPU Theatres: 68.0%** against the 80% target.



September 24 reflects improvement in the Scheduled Theatre minutes and DPU performance, however challenges remain with the under-utilisation of lists. Late starts, early finishes and high DNA rates all contribute to this. To address the underperformance the Trust is working closely with SPPG Commissioners on a Theatre Utilisation Improvement Programme. This includes the development of an improvement trajectory for the remainder of 2024/25. A robust Theatre performance framework is in place and has been reviewed and strengthened as part of the overall improvement programme.

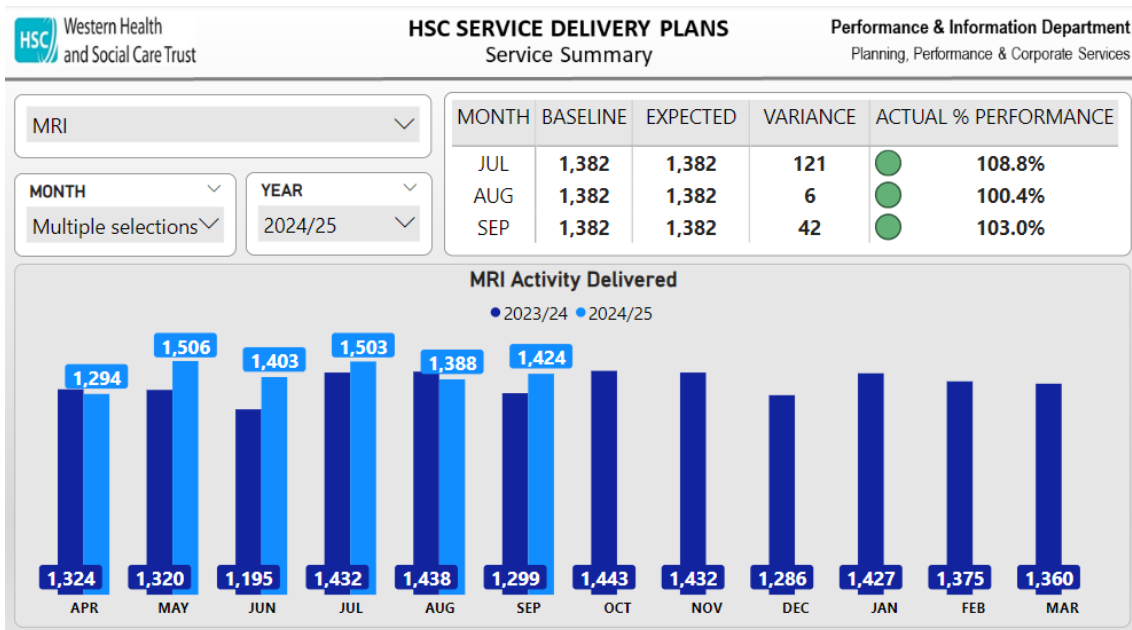
Imaging Diagnostics – Service Delivery Plan

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

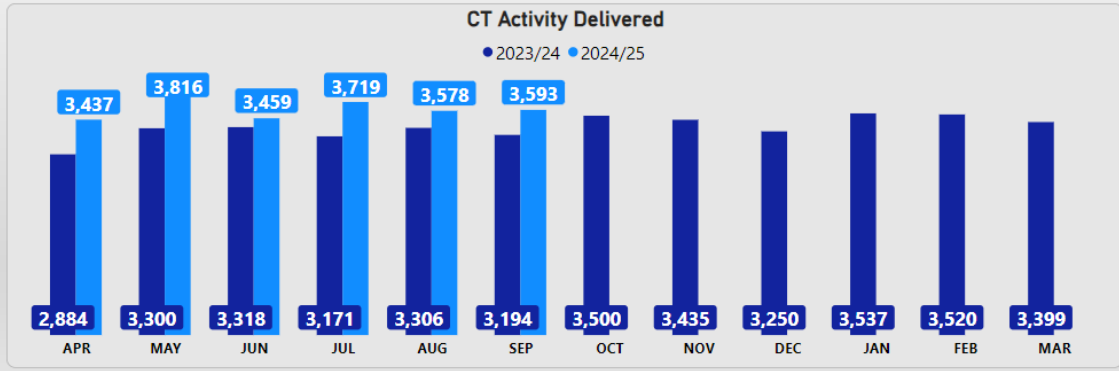
Performance across the three areas remained strong throughout Quarter 2 (July to September 24); the SBA targets for these areas has been exceeded each month during Quarter 2. Additional activity, across these three areas, has been delivered during 2024/25 Quarter 2 when compared to the same period in 2023/24.

The cumulative performance achieved during Quarter 2 (July to September 24) for:

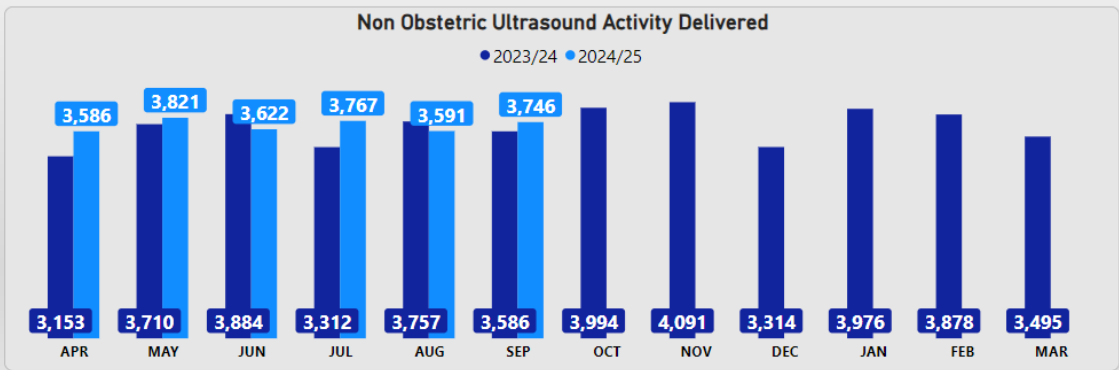
- **MRI: 104.1%** of SBA volume achieved; cumulatively the service delivered 4,315 scans compared to the cumulative SBA target of 4,146.
- **CT: 134.6%** of SBA volume achieved; cumulatively the service delivered 10,890 scans compared to the cumulative SBA target of 8,088. The SBA target exceeded every month of Quarter 2.
- **Non-Obstetric Ultrasound: 104.5%** of SBA volume achieved; cumulatively the service delivered 11,104 scans compared to the cumulative SBA target of 10,626.



CT	MONTH	YEAR	MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
	Multiple selections	2024/25					
			JUL	2,696	2,696	1,023	137.9%
			AUG	2,696	2,696	882	132.7%
			SEP	2,696	2,696	897	133.3%



NOUS	MONTH	YEAR	MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
	Multiple selections	2024/25					
			JUL	3,542	3,542	225	106.3%
			AUG	3,542	3,542	49	101.4%
			SEP	3,542	3,542	204	105.8%



Cardiac Services – Service Delivery Plan

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

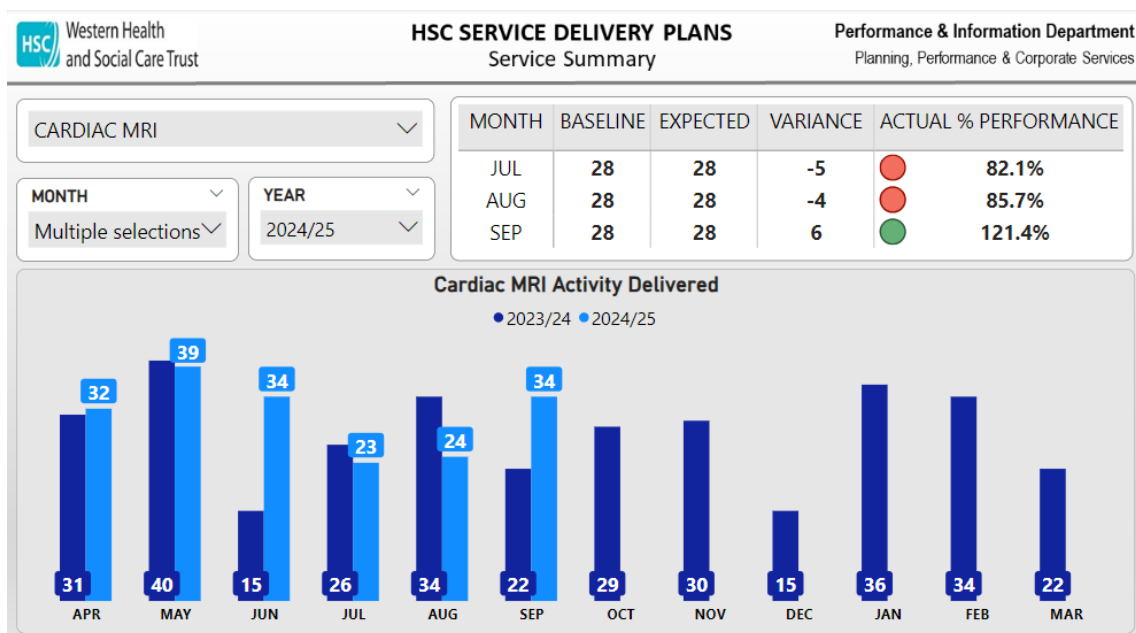
Cardiac CT & Cath Lab procedures: the 2024/25 SDP target is to deliver activity 110% of 2019/20 activity.

Overall, a high level of performance was achieved in Quarter 2 (July to September 24) within Cardiac MRI, Cardiac CT and Echo with the expected target almost achieved or exceeded. Cardiac CT and Echo have delivered more activity during 2024/25 Quarter 2 when compared to the same period in 2023/24.

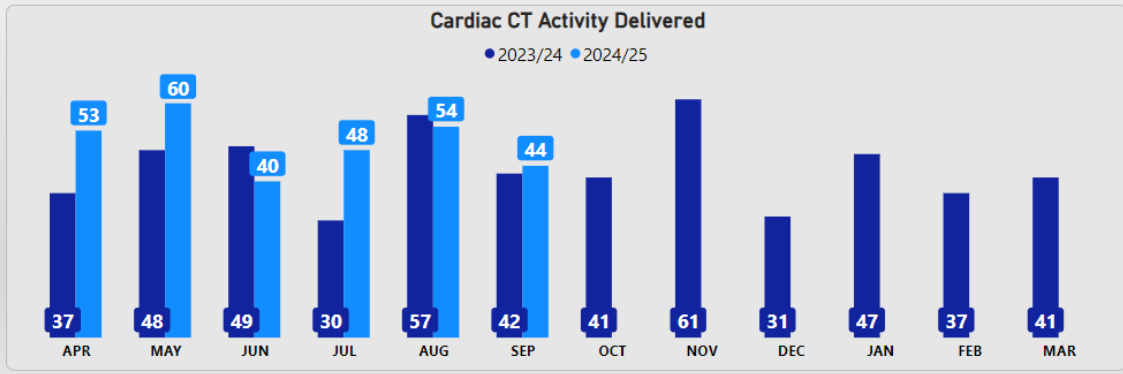
The Cath Lab activity delivered during Quarter 2 (July to September 24) remained below the 110% Expected Target but is broadly in line with the outturn delivered during the same months in 2023/24. This is an Unscheduled/Elective service which has seen an increase in unscheduled demand. The service continue to meet its SBA of 108 per month; activity and performance is dependent on procedure room capacity.

The cumulative performance achieved during Quarter 2 (July to September 24) for:

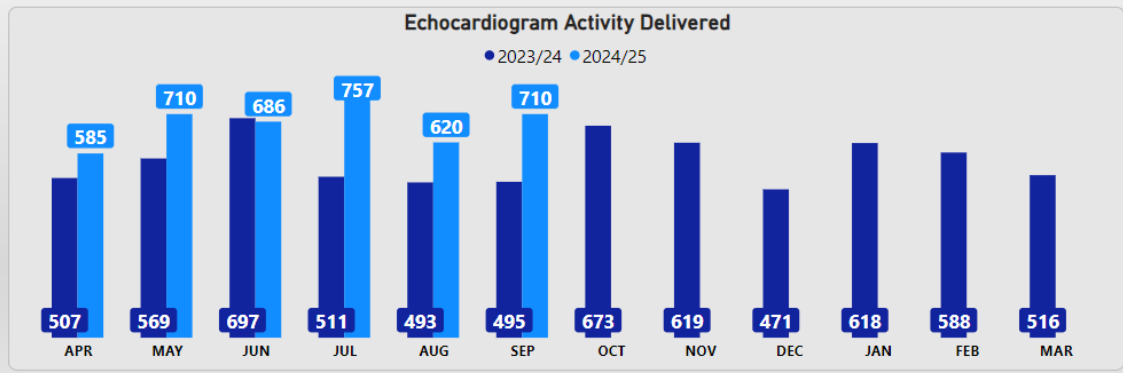
- **Cardiac MRI: 96.4%** of SBA volume achieved; cumulatively the service delivered 81 tests compared to the cumulative SBA target of 84.
- **Cardiac CT: 112.3%** of 2019/20 Baseline achieved; cumulatively the service delivered 146 tests compared to the cumulative 2019/20 Baseline activity of 130.
- **Echo: 100.4%** of SBA volume achieved; cumulatively the service delivered 2,087 tests compared to the cumulative SBA target of 2,079.
- **Cath Lab Procedures: 88.3%** of 2019/20 Baseline achieved, cumulatively 482 procedures delivered compared to the cumulative 2019/20 Baseline activity of 546.

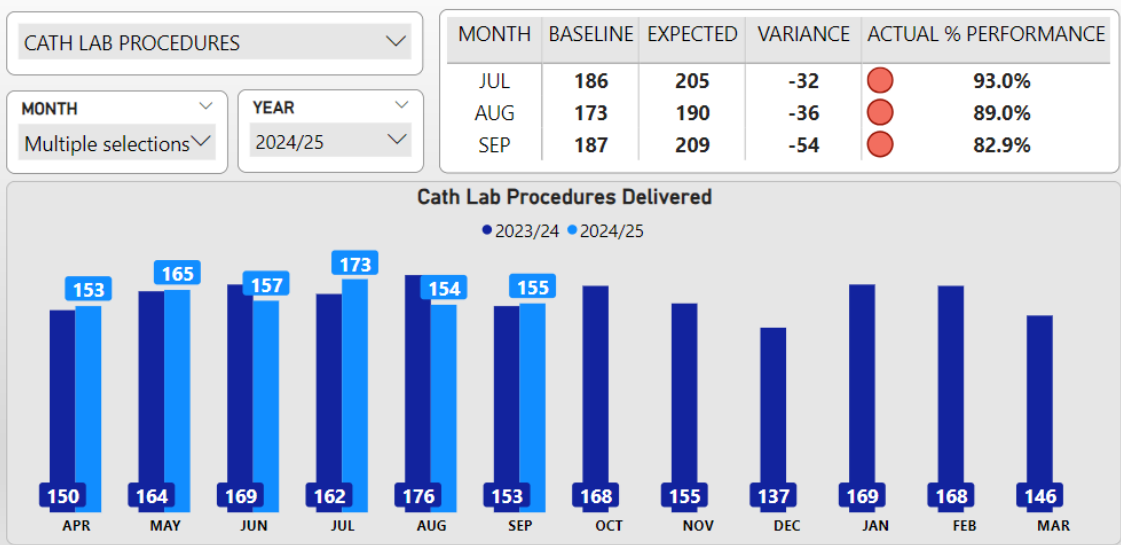


CARDIAC CT		MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
MONTH: Multiple selections YEAR: 2024/25		JUL	42	46	2	114.3%
		AUG	44	48	6	122.7%
		SEP	44	48	-4	100.0%



ECHO		MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
MONTH: Multiple selections YEAR: 2024/25		JUL	693	693	64	109.2%
		AUG	693	693	-73	89.5%
		SEP	693	693	17	102.5%



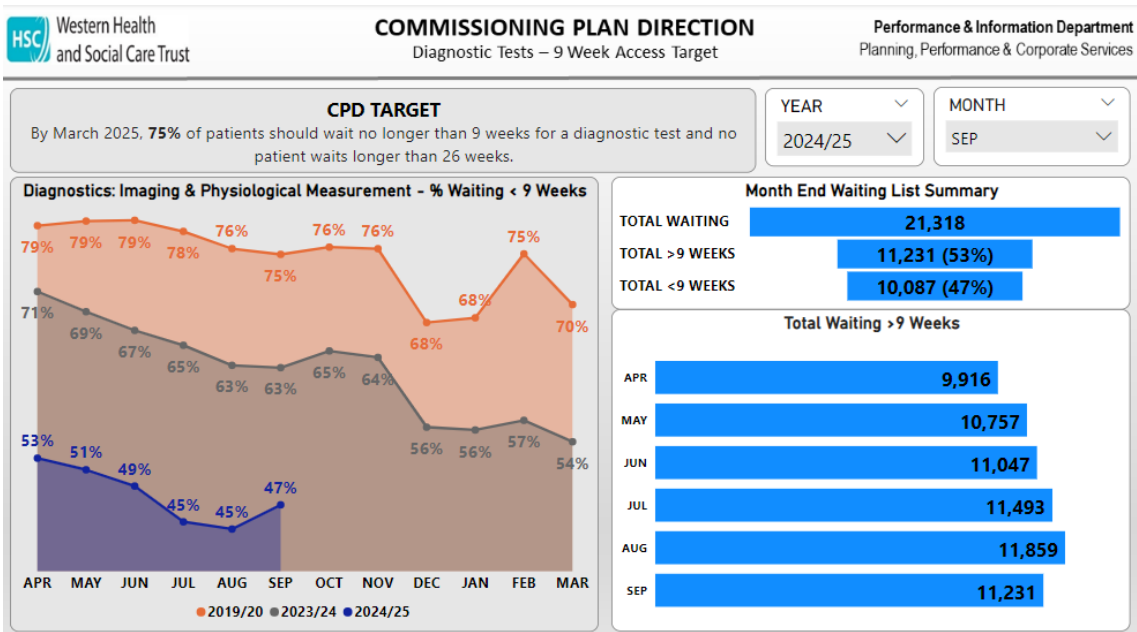


Imaging / Diagnostics – Access Performance

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 September 24, the Trust reported **21,318** patients waiting for Diagnostic test (both imaging and physiological measurement); with **11,231** patients waiting longer than 9 weeks. Compared to June 24, this reflects an improvement in the total number waiting (**21,838**) and a deterioration in the number of patients waiting longer than 9 weeks (**11,047**).

To support access performance the Trust have been funded to deliver **11,464** Independent Sector (Diagnostics – MRI and Plain Film imaging), **4,422** In-House Imaging and **1,802** In-House Psychological Measurement.

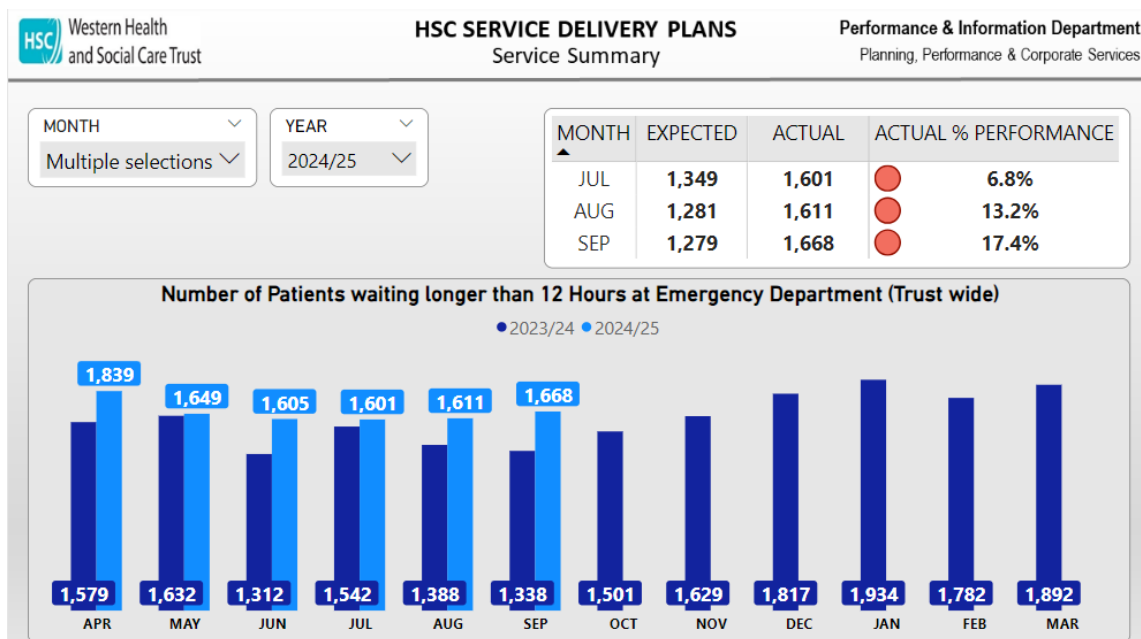


Unscheduled Care – ED Performance (12 Hours) Service Delivery Plan

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

Performance does not meet targets in any part of this service area, and this is broadly common with all Trusts in the region. During Quarter 2 (July to September 24), **4,880** patients waiting longer than 12 hours in ED compared to **4,343** during the same period in 2022/23; an increase of 537 (12.4%).

In response to hospital pressures within the Altnagelvin site, the Trust stood up Silver command from the 24th – 26th September 24.



The 2024/25 Quarter 2 (July to September 24) Northern Ireland Ambulance Service (NIAS) performance has deteriorated with four of the five metrics below target each month this Quarter. The Patient handover time of less than or equal to 60 minutes exceeded the monthly target in July and August 24 but deteriorated in September 24.

The individual target and performance for Quarter 1 and 2 (April to September 24) is detailed in the table below.

Service Area	2024/25 Target Trajectory	Apr-24	May-24	Jun-24	Quarter 1	Jul-24	Aug-24	Sep-24	Quarter 2
NIAS Handover < 15 mins	Q1: 12%, Q2: 15%, Q3: 20% & Q4: 25%	6.0%	6.9%	6.3%	6.4%	4.9%	6.5%	5.6%	5.7%
NIAS Handover < 30 mins	Q1: 32%, Q2: 36%, Q3: 40% & Q4: 45%	25.4%	31.9%	29.0%	28.8%	25.0%	26.6%	25.5%	25.7%
NIAS Handover < 60 mins	Q1: 64%, Q2: 70%, Q3: 76% & Q4: 85%	65.0%	79.0%	72.5%	72.3%	70.4%	70.9%	67.5%	69.6%
NIAS Handover > 2 hours	0%	9.4%	2.5%	5.4%	5.7%	5.0%	5.6%	9.0%	6.5%
Ambulance Turnaround within 30 mins	Q1: 20%, Q2: 30%, Q3: 40% & Q4: 51%	12.2%	12.0%	15.0%	12.9%	10.7%	11.5%	10.5%	10.9%

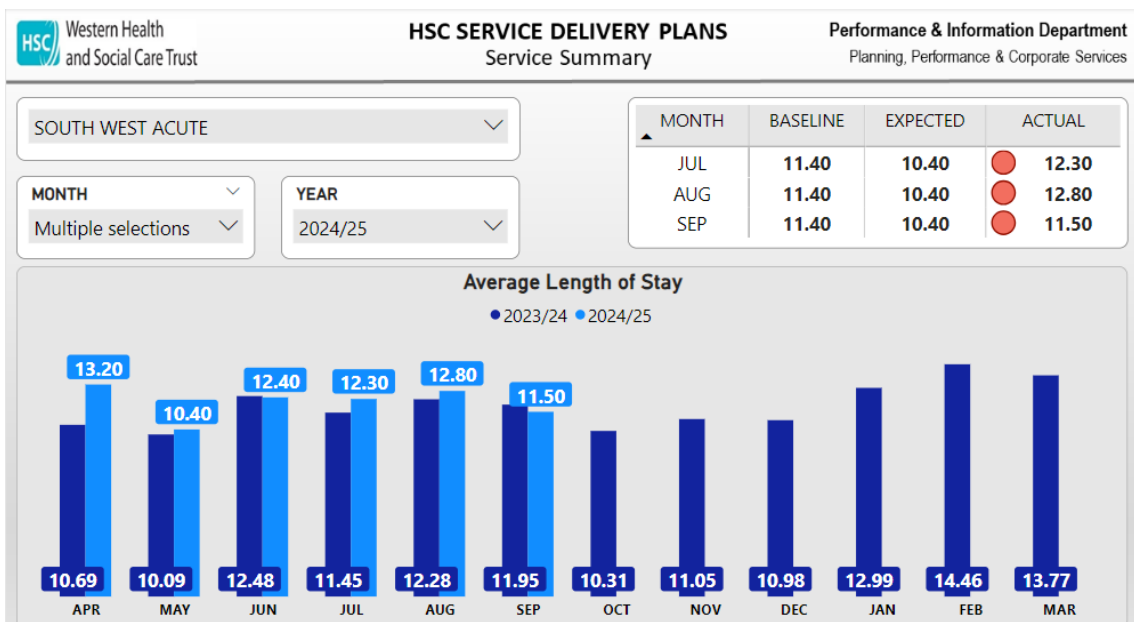
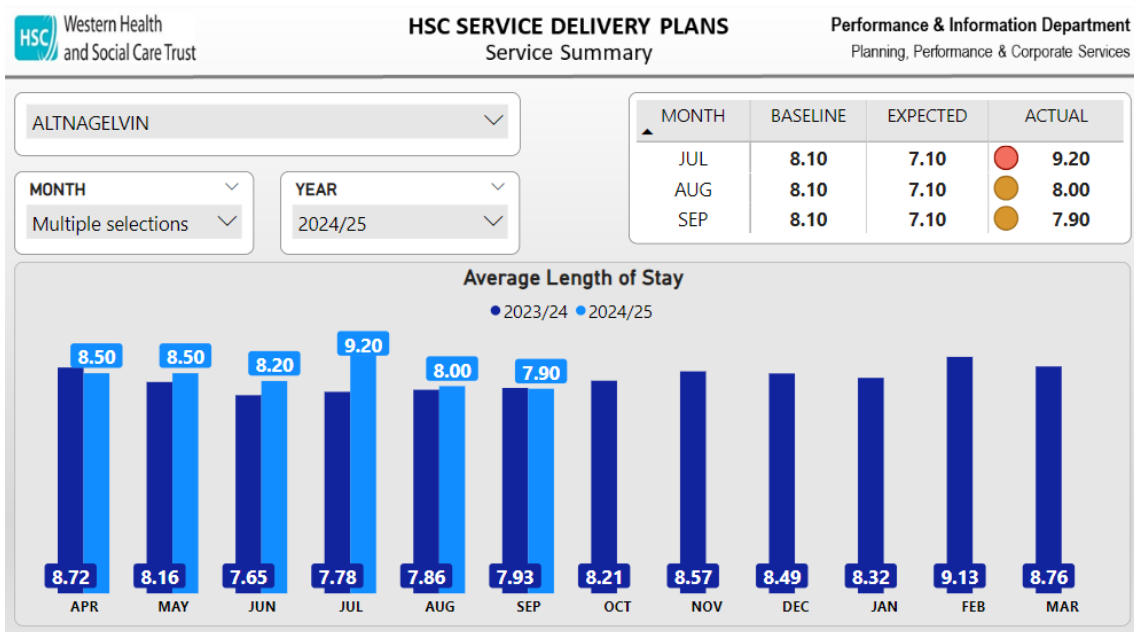
Average non-elective Length of Stay – Service Delivery Plan

1 Day reduction of 2022/23 Quarter 4 Baseline

The cumulative performance achieved during Quarter 2 (July to September 24) for:

- Altnagelvin: **8.4 days** compared to 8.1 days in the same period 2022/23.
- South West Acute: **12.2 days** compared to 11.4 days in the same period 2022/23.

The increased number of Complex Delays and subsequent discharges contribute to an increase in the Average Length of Stay. During Quarter 2 (July to September 24), there were 46 patients discharged (23 Altnagelvin and 23 South West Acute) with a length of stay greater than 100 days.



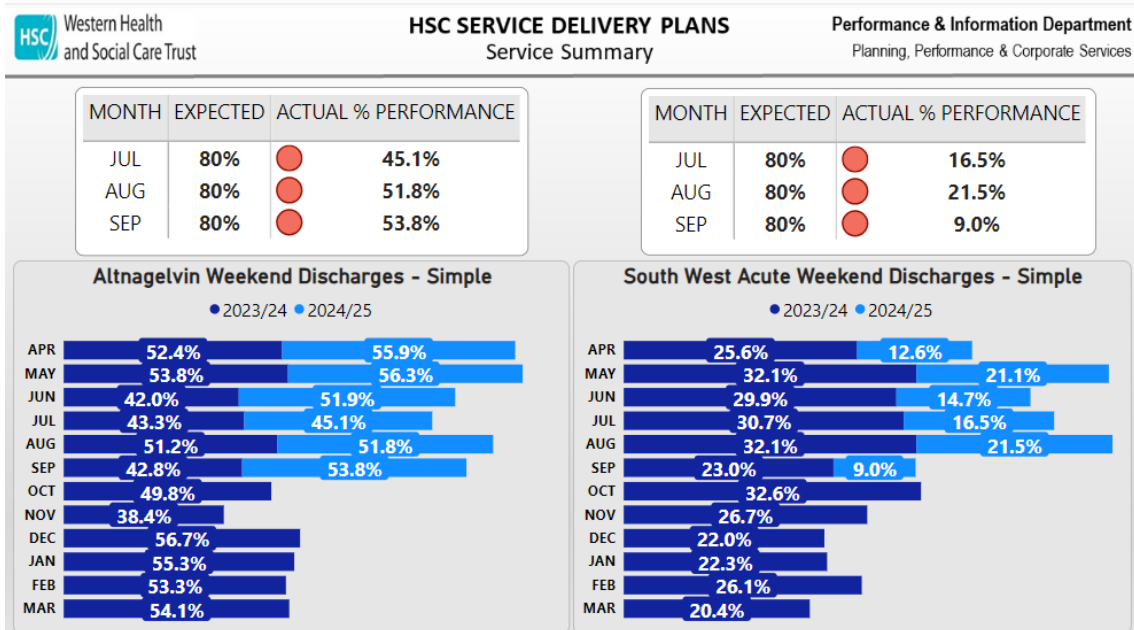
Weekend Discharge Rates - Service Delivery Plan

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.

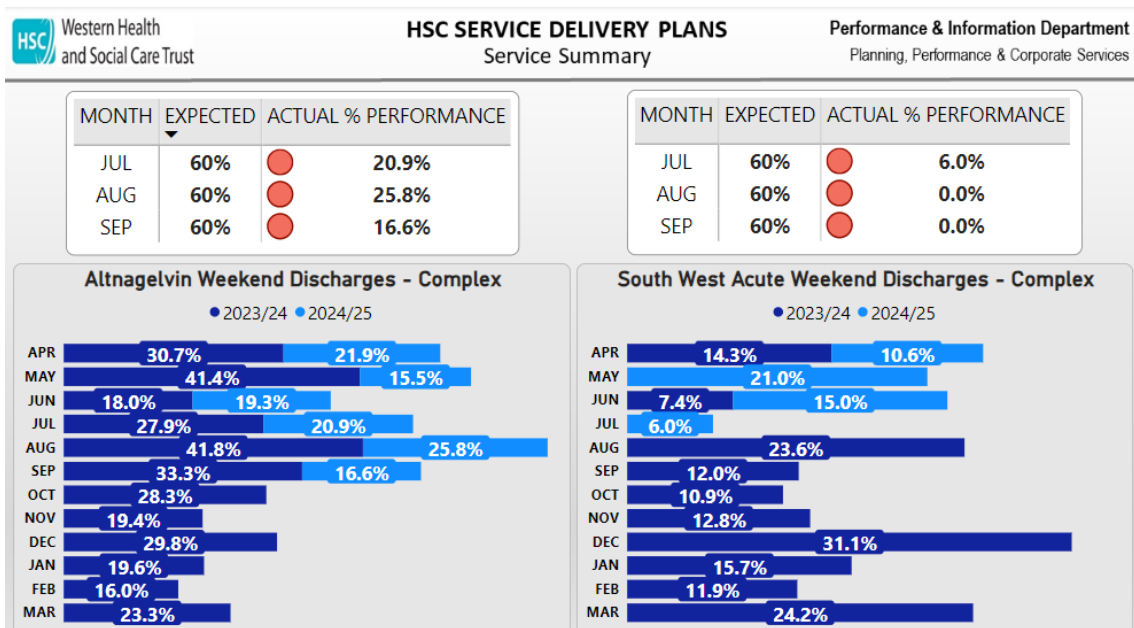
Simple Discharges: Quarter 2 (July to September 24) cumulative performance:

- Altnagelvin: **50.9%** against the 80% target.
- South West Acute: **17.1%** against the 80% target.



Complex Discharge: Quarter 2 (July to September 24) cumulative performance:

- Altnagelvin: **21.8%** against the 60% target.
- South West Acute: **4.5%** against the 60% target.



Stroke Services – Service Delivery Plan

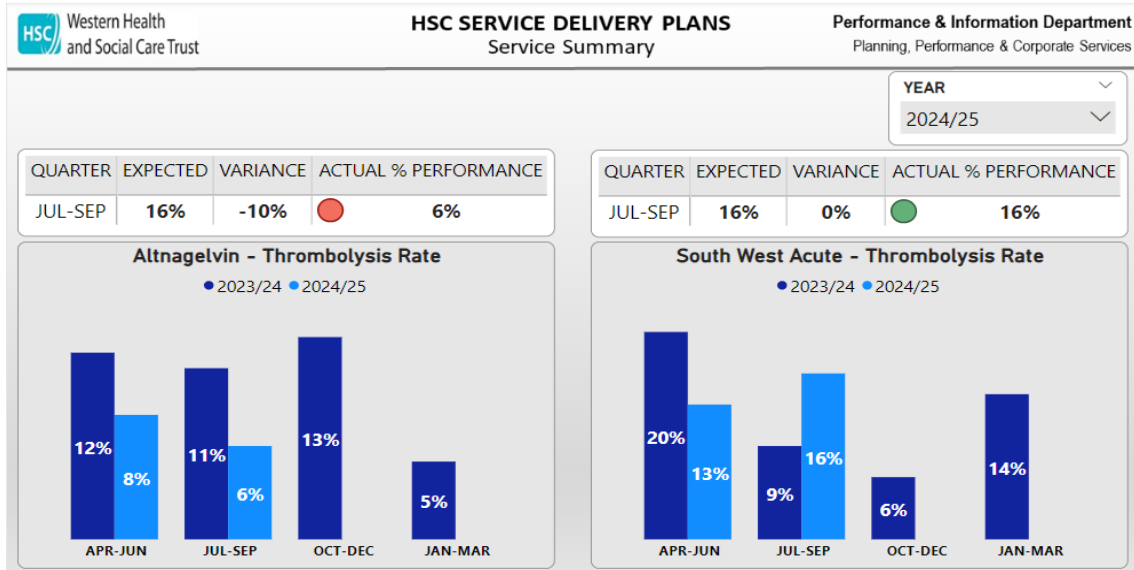
The 2024/25 SDP target is that 16% of patients with confirmed ischaemic stroke receive thrombolysis treatment, where clinically appropriate.

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

Thrombolysis: Quarter 2 (July to September 24) cumulative performance:

Altnagelvin: 6% achieved against the 16% target.

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



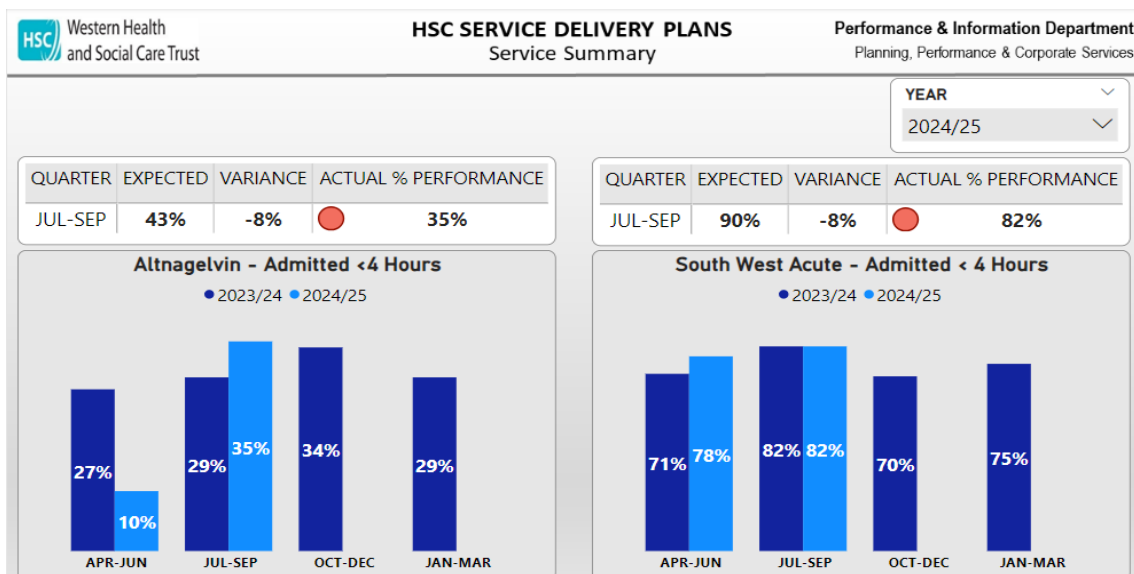
% Admitted to stroke unit within 4 hours of arrival

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.

% Admitted <4 Hours: Quarter 2 (July to September 24) cumulative performance:

Altnagelvin: 35% achieved against the 43% target.

South West Acute: 82% 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 Quarter 2 (July to September 24) performance has remained static with one of the six metrics having exceeded the expected target (HCAI- *Methicillin-resistant staphylococcus aureus* (MRSA)).

Performance against the HCAI - *Clostridioides difficile* (CDI) and the four Antimicrobial Consumption metrics remain below target achieving a “Red” RAG Status.

The individual target and performance for Quarter 1 and 2 (April to September 24) is detailed in the table below:

Service Area	2024/25 Target Trajectory	Quarter 1 (Apr-Jun 24 cumulative)	Quarter 2 (Jul-Sep 24 cumulative)
HCAI - <i>clostridioides difficile</i> (CDI)	Q1: 14.2 cases per 100,000 occupied beds Q2: 13.9 cases per 100,000 occupied beds	19.4	20.8
HCAI - <i>Methicillin-resistant staphylococcus aureus</i> (MRSA)	1.613 cases per 100,000 occupied beds (CDI)	1.495	0.769
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). Q1: 9417.2, Q2: 9331.7	10,684.6	10,551.0
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 Q1: 106.5, Q2: 106.0	147.0	175.0
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 Q1: 446.6, Q2: 444.0	504.3	514.8
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	53.2%	52.17%

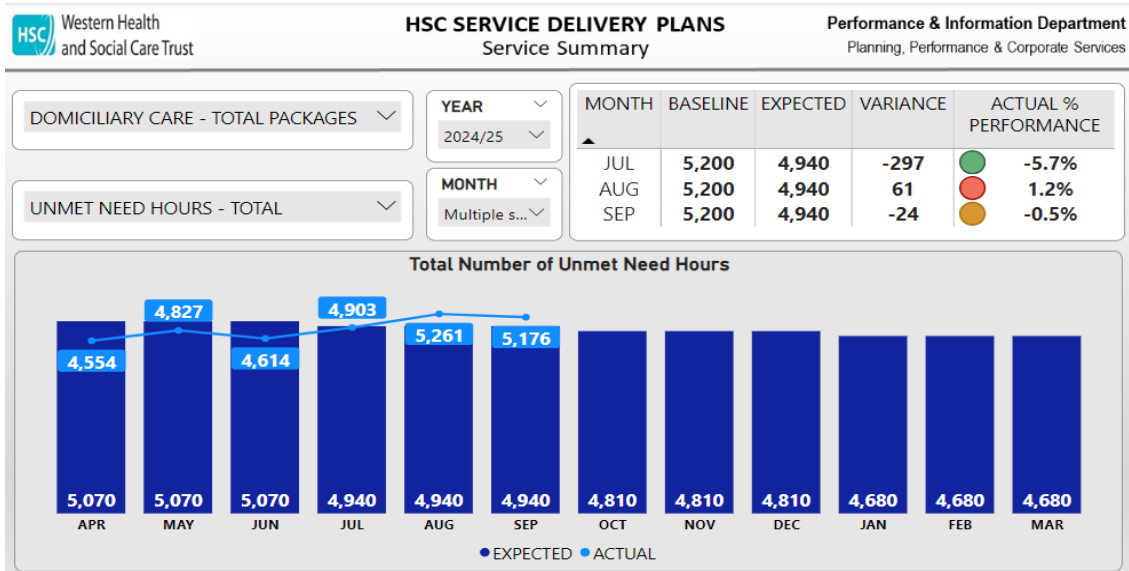
COMMUNITY CARE

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: 31st March 2024.

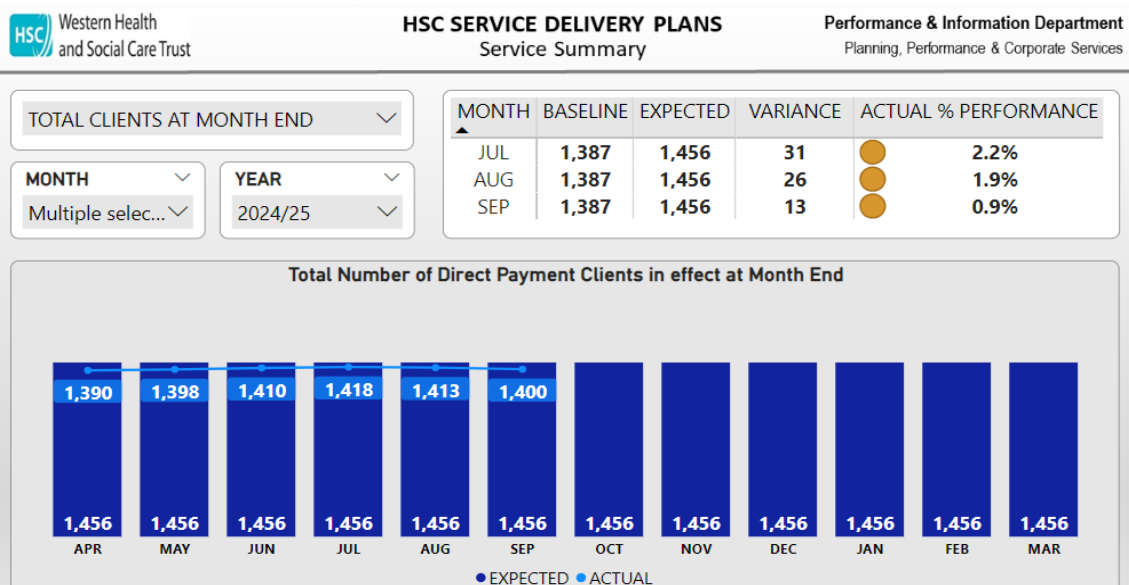
Total Packages: at the end of September 24, the Trust reported **5,176** unmet need hours against the expected target of 4,940.



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 31st 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 September 24, SDP target almost achieved with 1,400 Service User Direct Payments in effect. Adult Mental Health services continue to meet their individual Sub-Directorate Target.



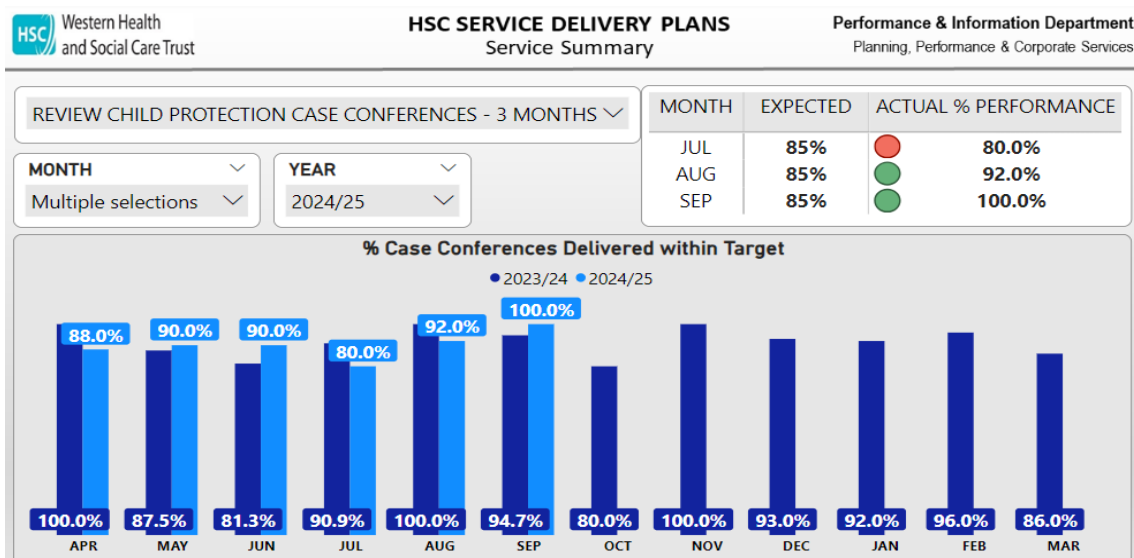
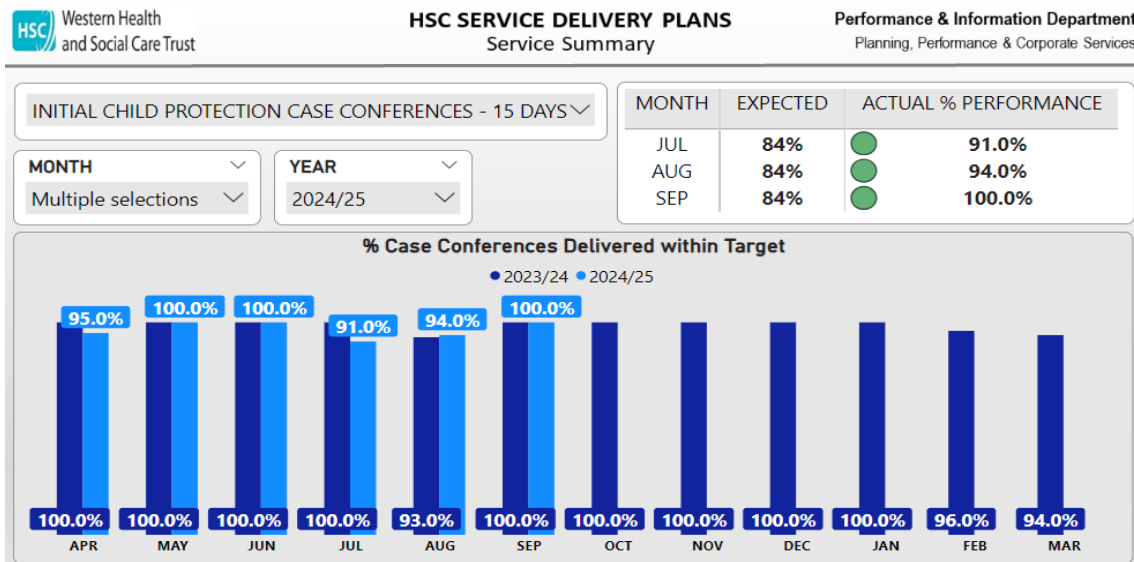
Children’s Social Care – Service Delivery Plan

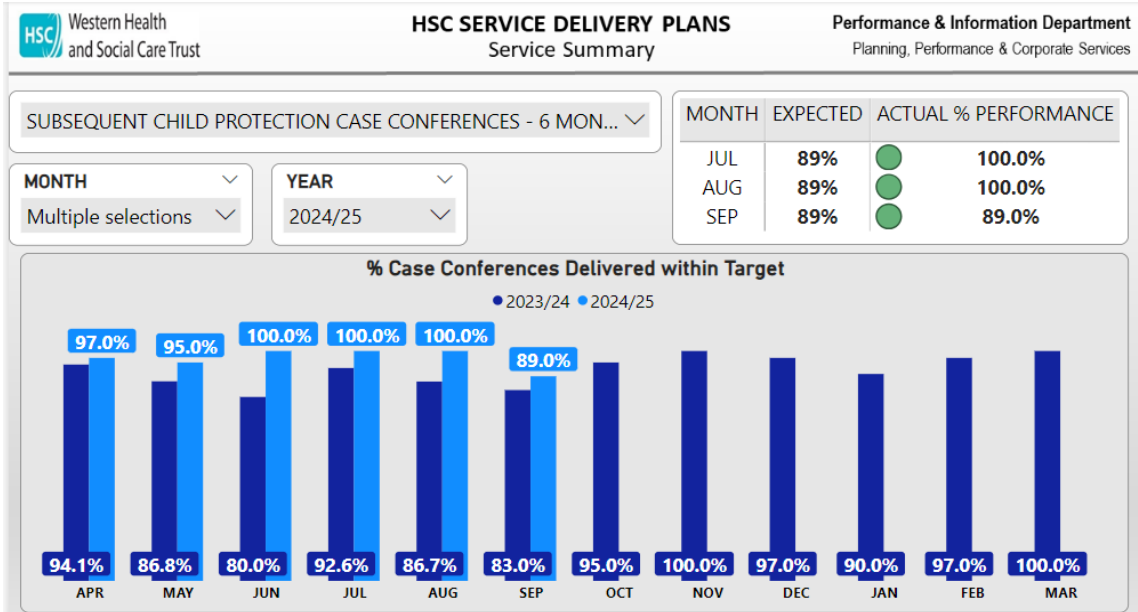
The 2024/25 SDP target for Child Protection Case Conferences is to achieve **84%** of Initial Child Protection Case Conferences held <15 days; **85%** of Review Case Conferences held <3 months and **89%** of Subsequent Review Case Conferences held <6 months.

Performance remained strong throughout Quarter 2 (July to September 24) with the SDP target exceeded in each of the three metrics in July, August and September 24; with the exception of Review Child Case Conferences held within 3 months. The July 24 performance for Review Child Case Conferences was impacted by difficulty in securing meeting quorum; any change to scheduled meetings during July and August prove challenging to reschedule within the required timescales, due to summer leave of all the required professionals.

The cumulative performance achieved during Quarter 2 (July to September 24) for:

- Initial Child Protection Case Conferences held <15 days: **95%** against the 84% target.
- Review Case Conferences held <3 months: **89%** against the 85% target.
- Subsequent Review Case Conferences held <6 months: **95%** against the 89% target.

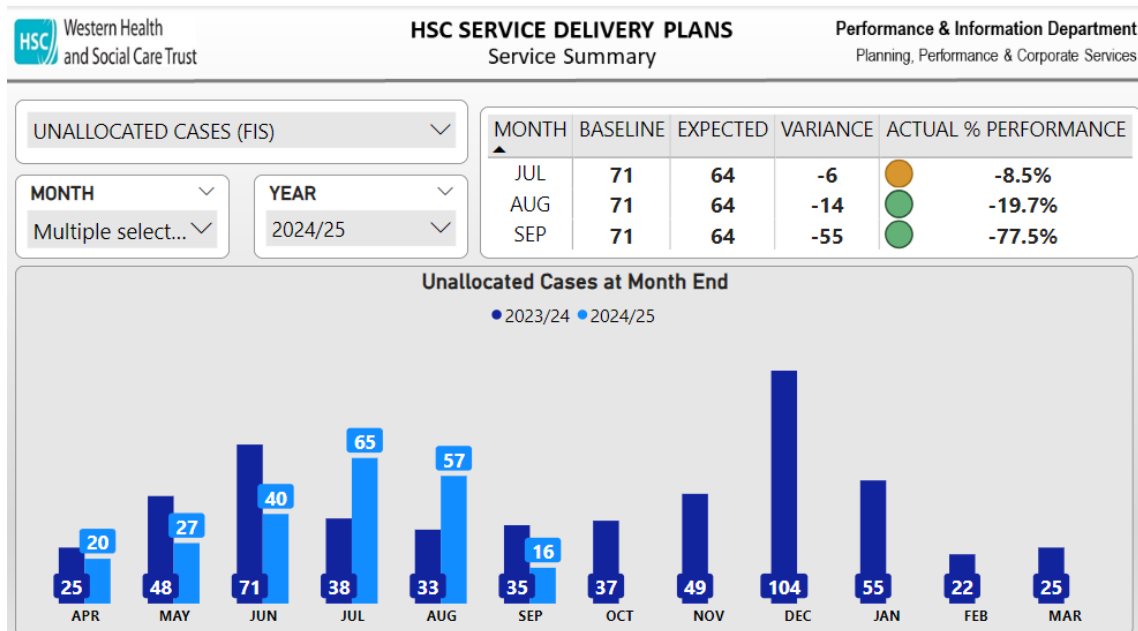




Children’s Social Care – Unallocated Cases - Service Delivery Plan

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 maintained during Quarter 2 (July to September 24); the Trust reported **16** Unallocated Cases against the Baseline Target of 71. The cumulative performance achieved during Quarter 2 (July to September 24) was **-77.5%** against the 10% reduction target.



Mental Health Services – Service Delivery Plan

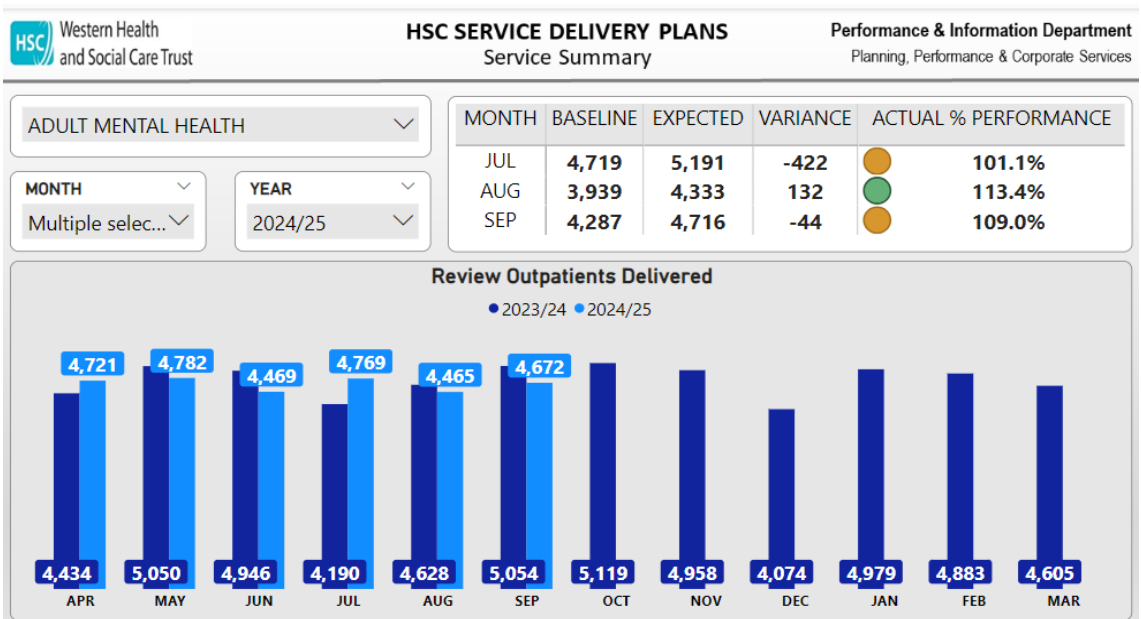
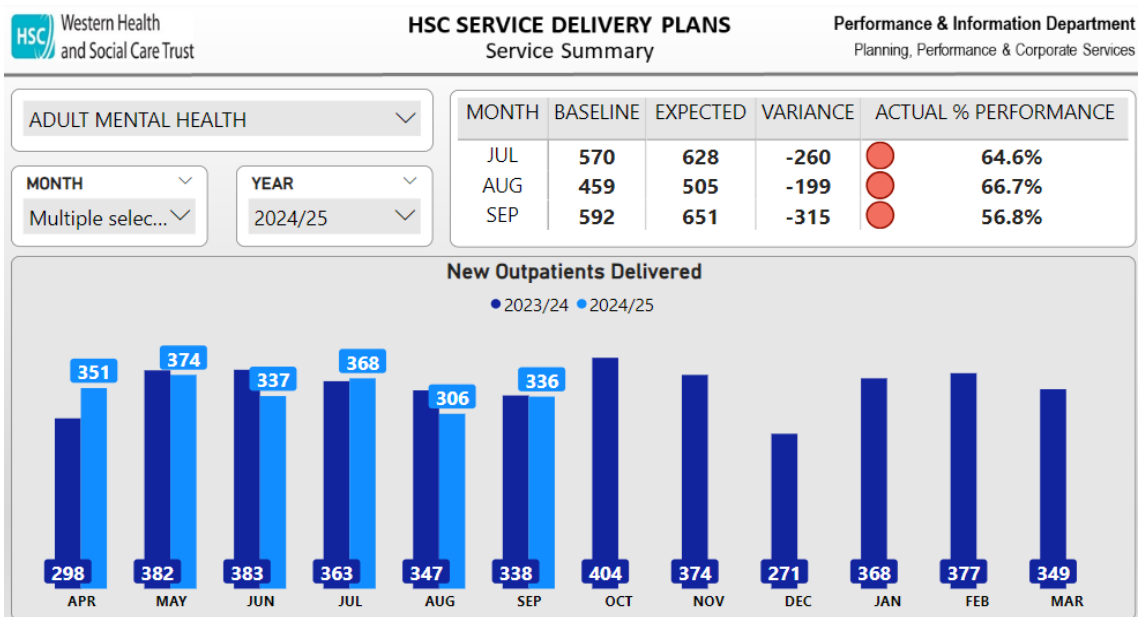
The 2024/25 SDP target - deliver 110% of 2019/20 activity for Adult Mental Health and Dementia.

The 2024/25 SDP target - deliver 100% of 2019/20 activity for Psychological Therapies.

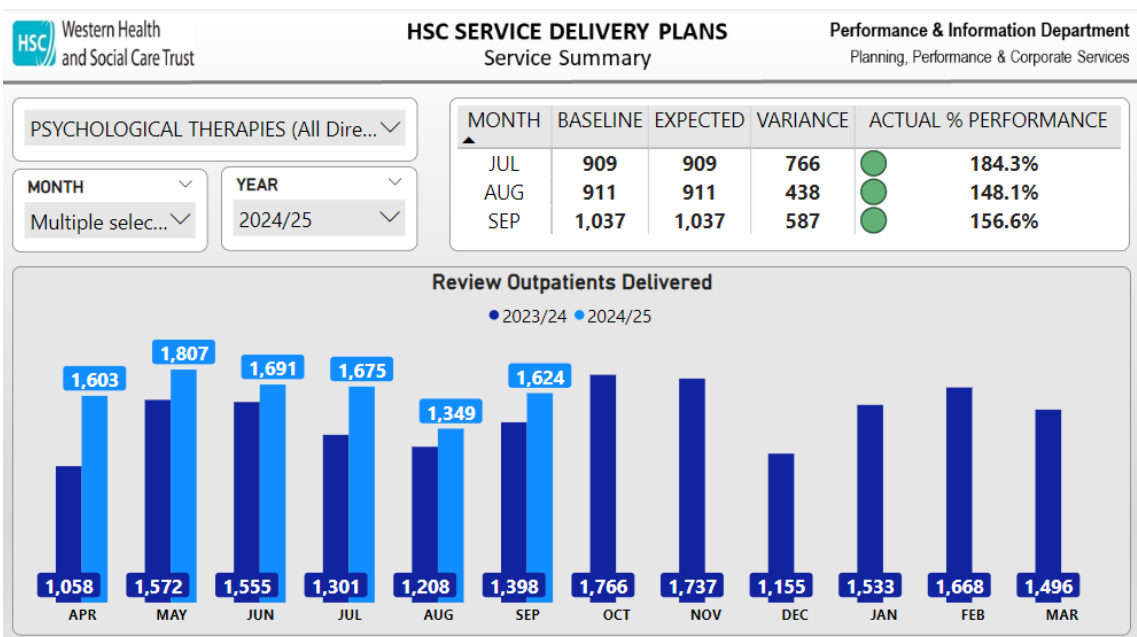
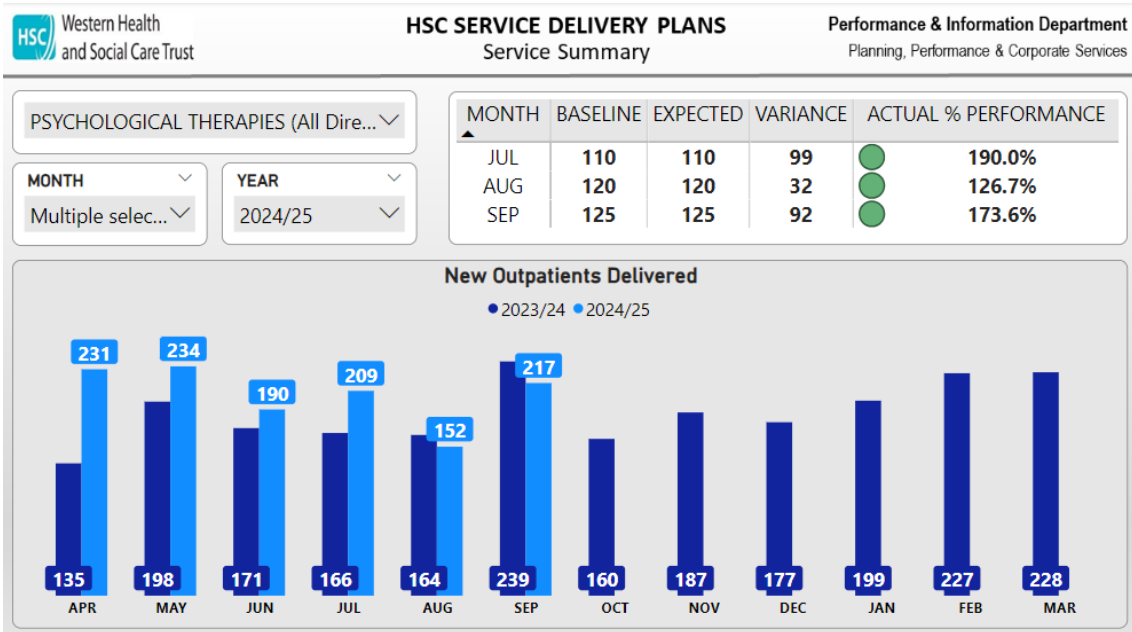
The 2024/25 SDP target - deliver 100% (New) and 110% (Review) of 2019/20 activity for Child & Adolescent Mental Health Service

During Quarter 2 (July to September 24), a high level of performance has been achieved with an overall total of **24,108** New (2,182) and Review (21,926) Outpatients delivered across the four service areas; reflecting a 14.8% increase on 2019/20 Baseline activity (3,114 additional attendances). An individual breakdown by Service area provided below.

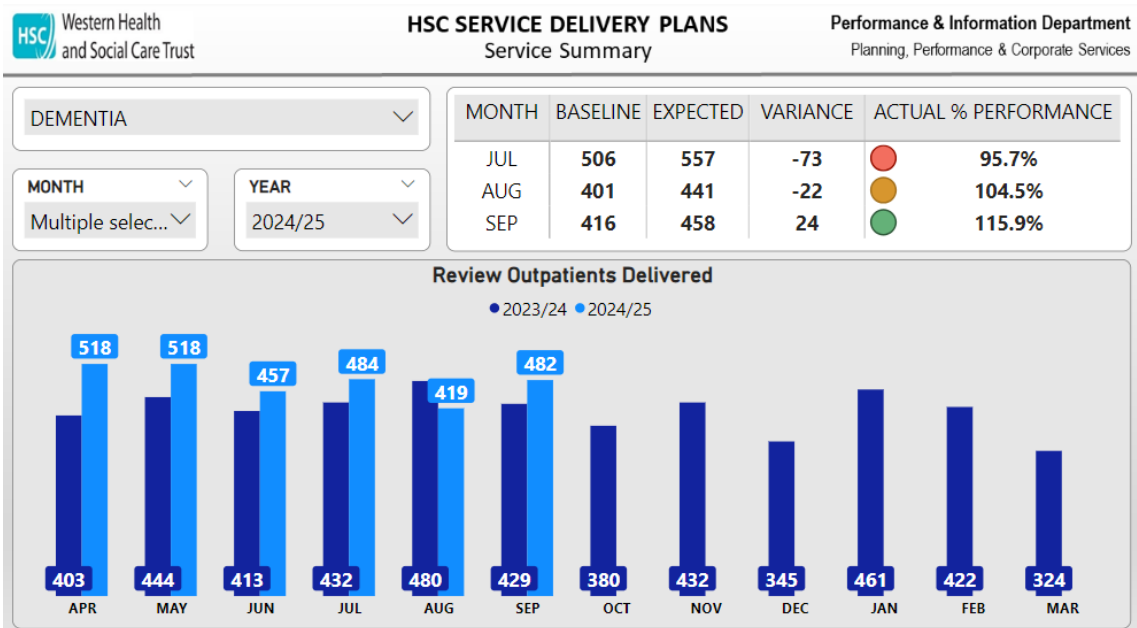
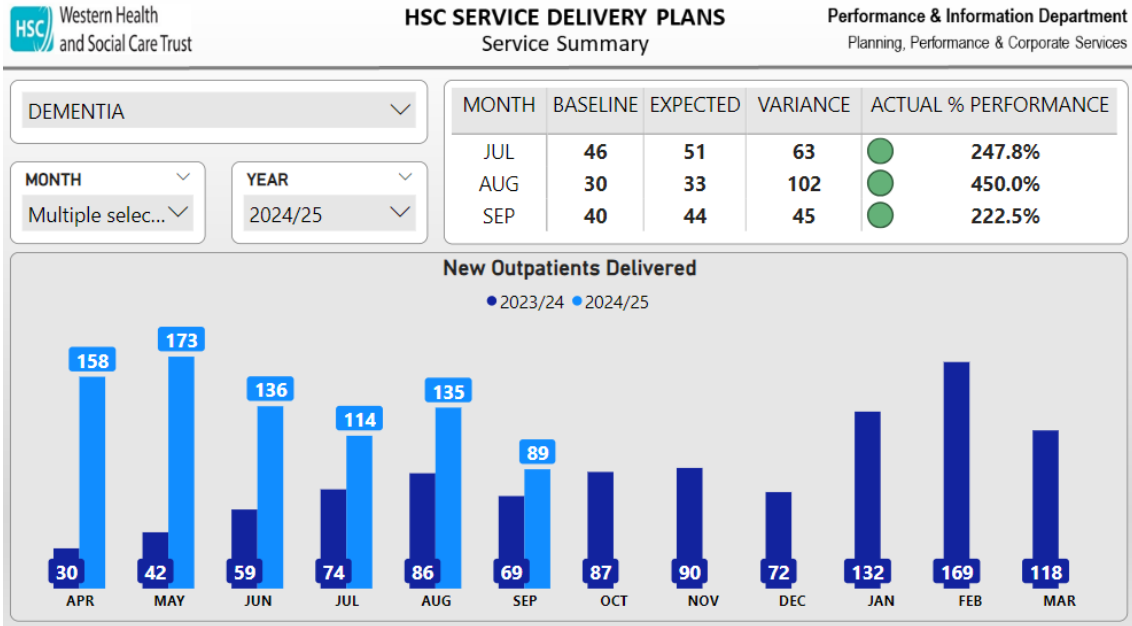
Adult Mental Health: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (**14,916**) reflects **102.4%** (RAG Amber) of the cumulative 2019/20 Baseline activity (14,566); this represents 350 additional attendances.



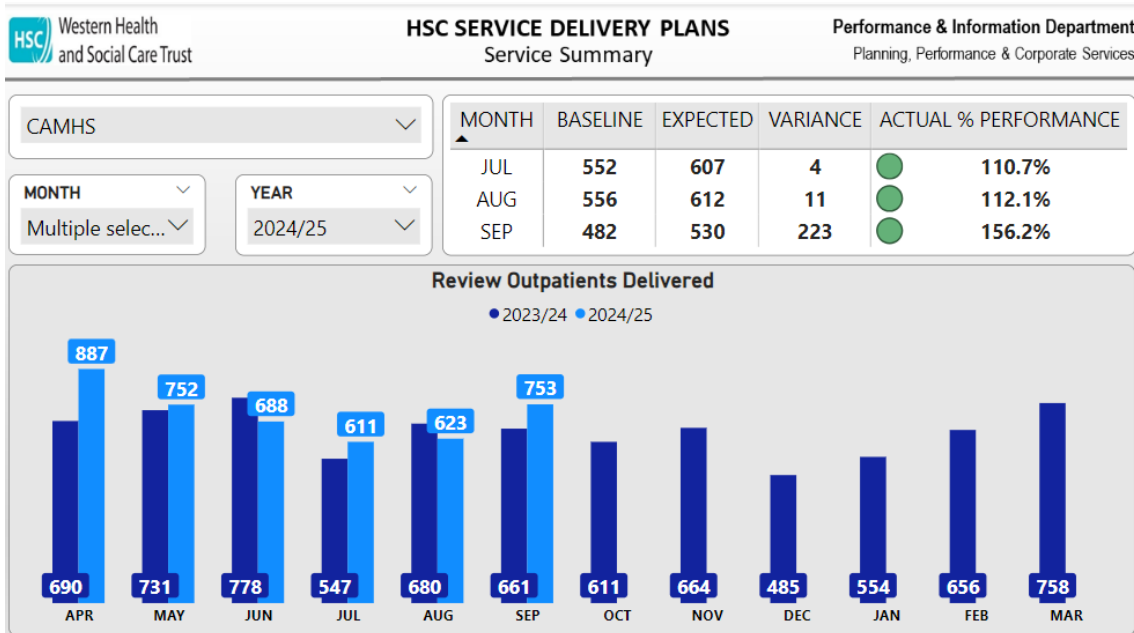
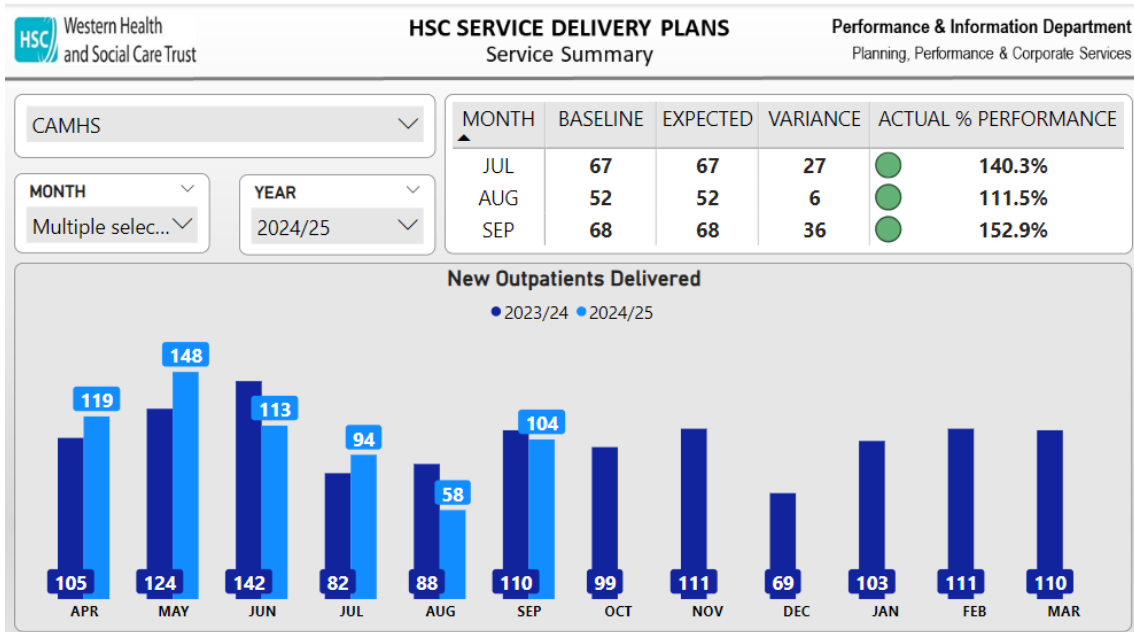
Psychological Therapies: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (5,226) reflects 162.7% (RAG Green) of the cumulative 2019/20 Baseline activity (3,212); this represents 2,014 additional attendances.



Dementia: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (1,723) reflects 119.7% (RAG Green) of the cumulative 2019/20 Baseline activity (1,439); this represents 284 additional attendances.



Child and Adolescent Mental Health Service: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (2,243) reflects 126.2% (136.9% New and 125.0% Review) of the cumulative 2019/20 Baseline activity (1,777); this represents 466 additional attendances.

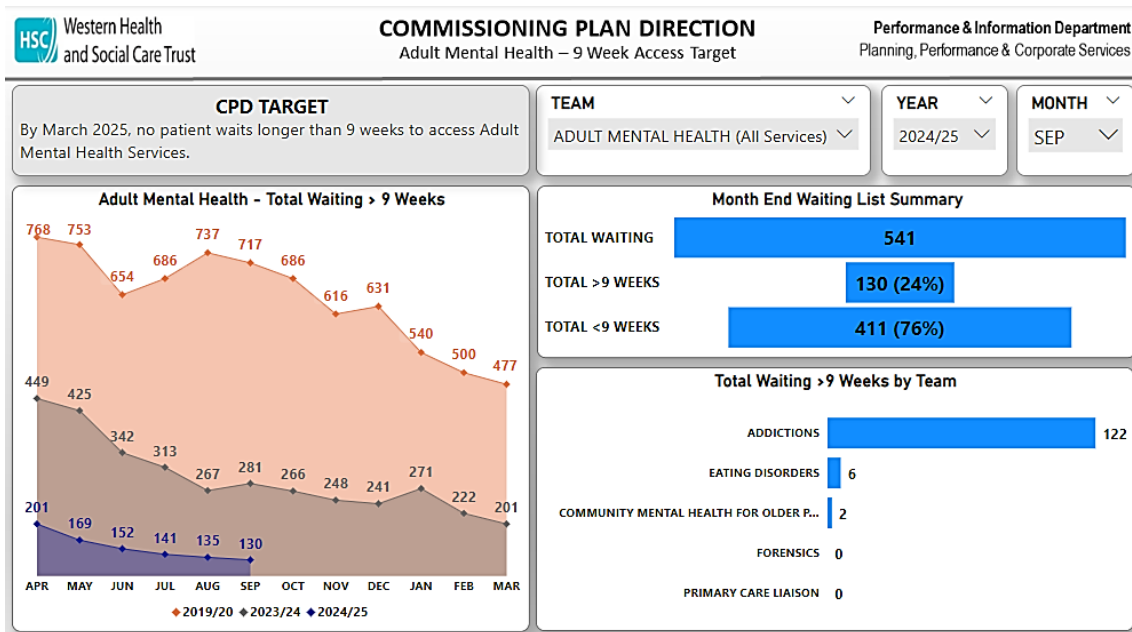


Mental Health Services – Access Performance

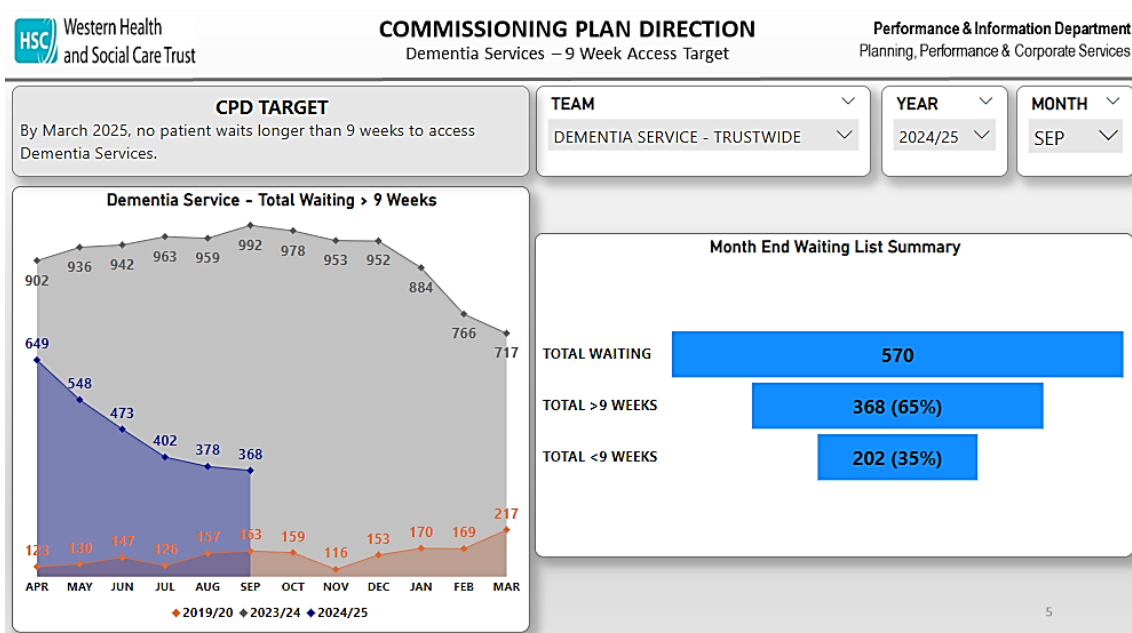
By March 2025, no patient waits longer than 9 weeks to access Adult Mental Health, Dementia and Child and Adolescent Mental Health services and no patient waits longer than 13 weeks to access Psychological Therapy services.

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

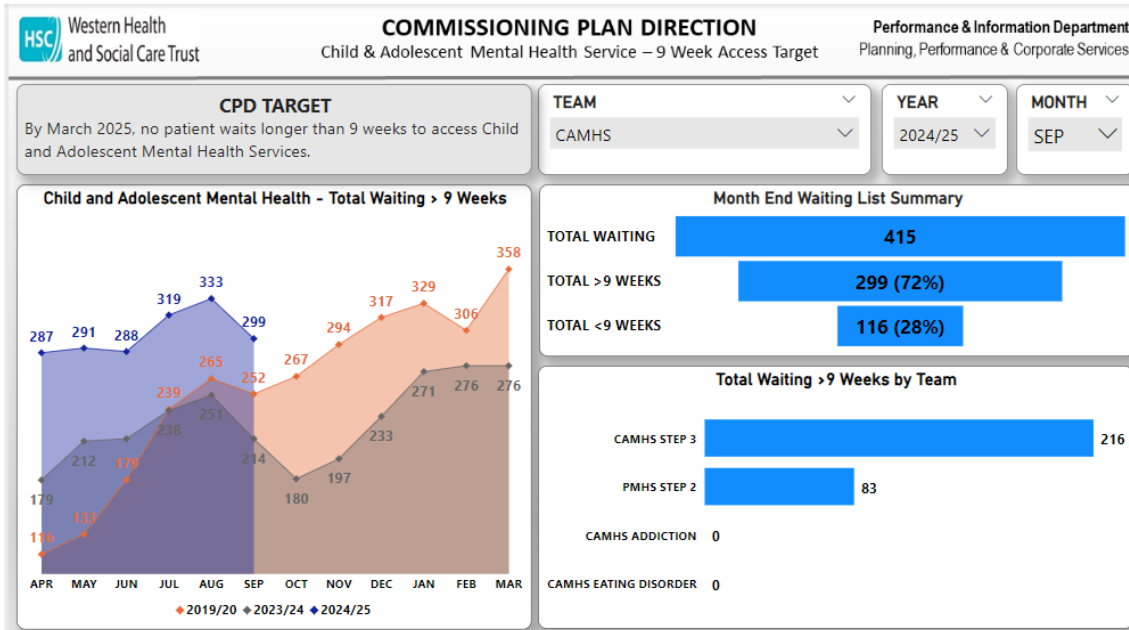
- **541** patients waiting to access the Adult Mental Health Service with **130** waiting longer than 9 weeks. This is a further improvement in access to this service, when compared to June 24; there were **557** patients in total waiting; with **152** waiting longer than 9 weeks.



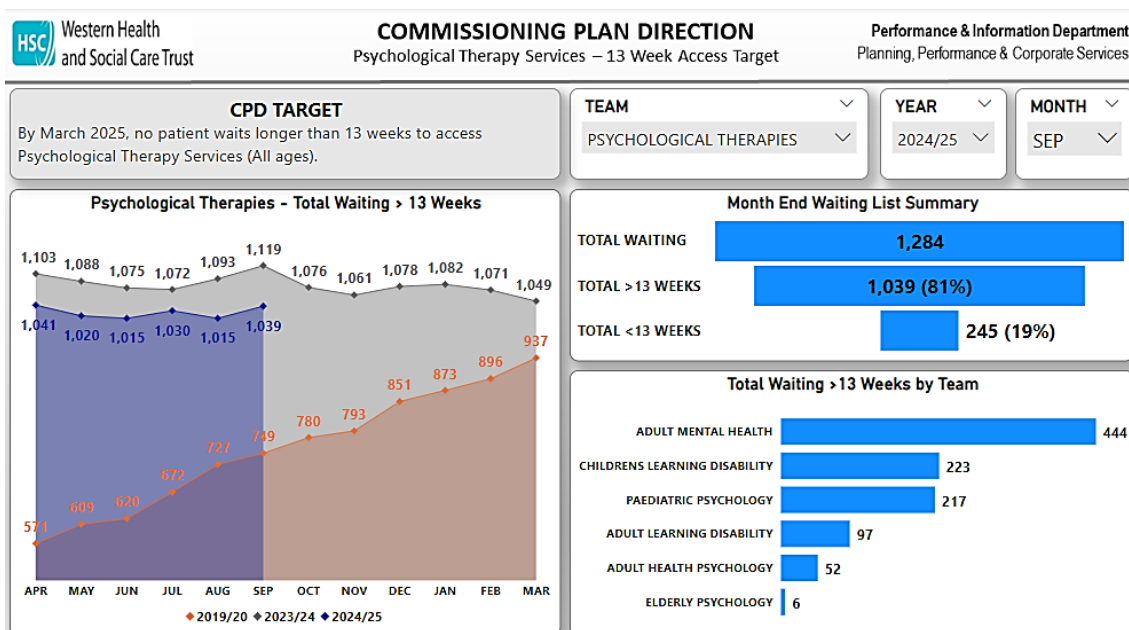
- **570** patients waiting to access the Dementia Service with **368** waiting longer than 9 weeks. This is a significant improvement in access, when compared to June 24; there were **675** in total waiting and **473** waiting longer than 9 weeks.



- **415** patients waiting to access the Child and Adolescent Mental Health Service with **299** waiting longer than 9 weeks. This represents a deterioration in access to this service when compared June 24; there were **427** in total waiting and **288** waiting longer than 9 weeks.



- **1,284** patients waiting to access Psychological Therapy Services with **1,039** waiting longer than 13 weeks. This is a deterioration in access to this service area, when compared to June 24; there were **1,270** in total waiting and **1,015** waiting longer than 13 weeks.



Allied Health Professionals (AHPs) – Service Delivery Plan

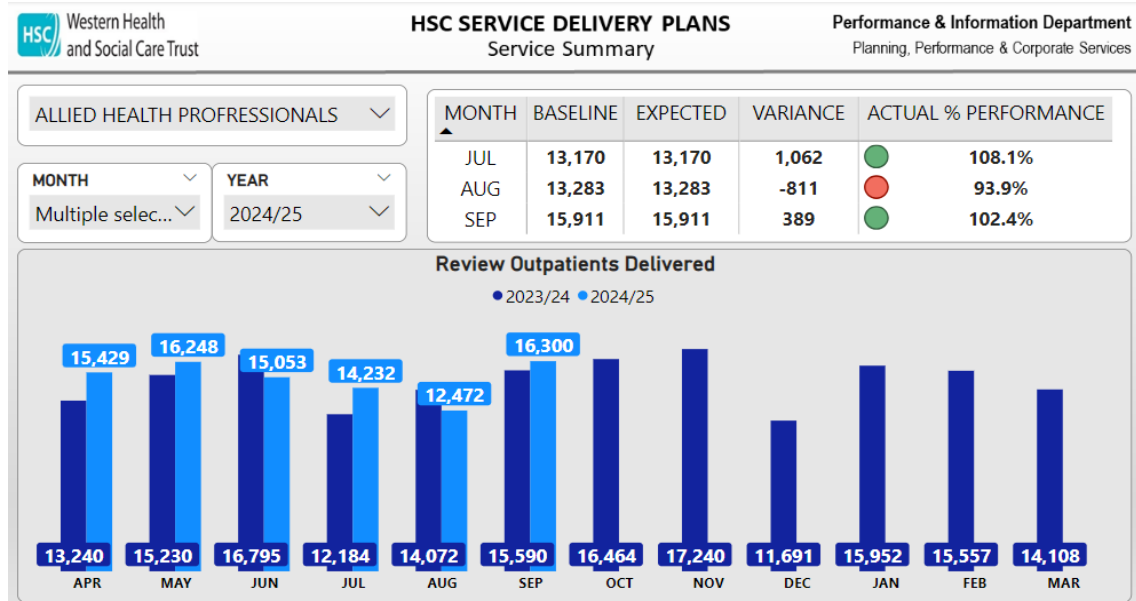
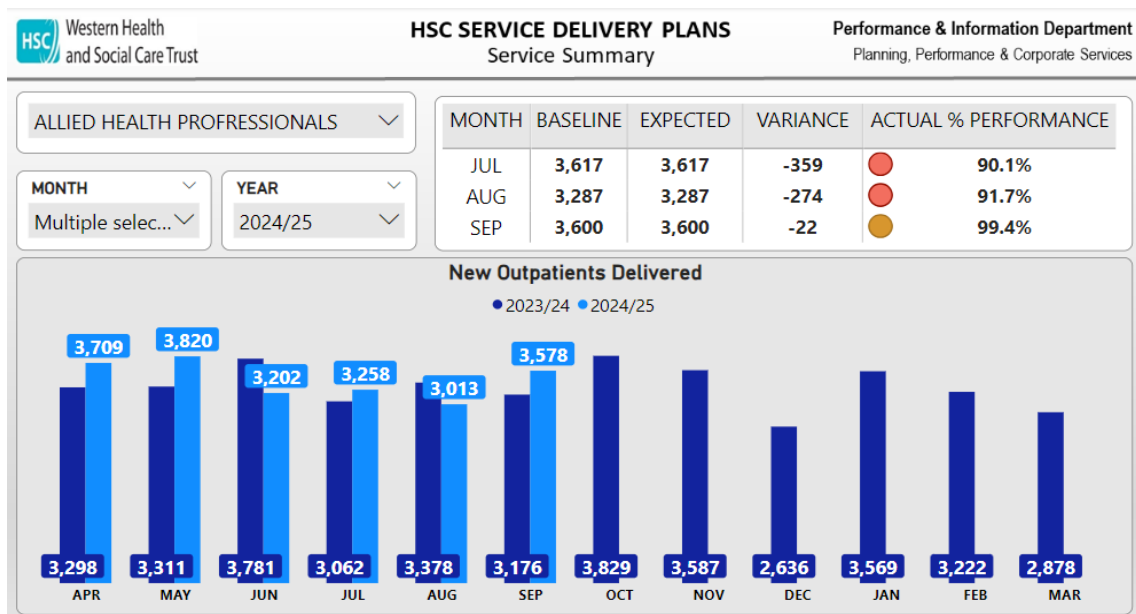
The 2024/25 SDP target is to deliver 100% of 2019/20 activity for Physiotherapy, Occupational Therapy, Orthoptics and Podiatry.

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

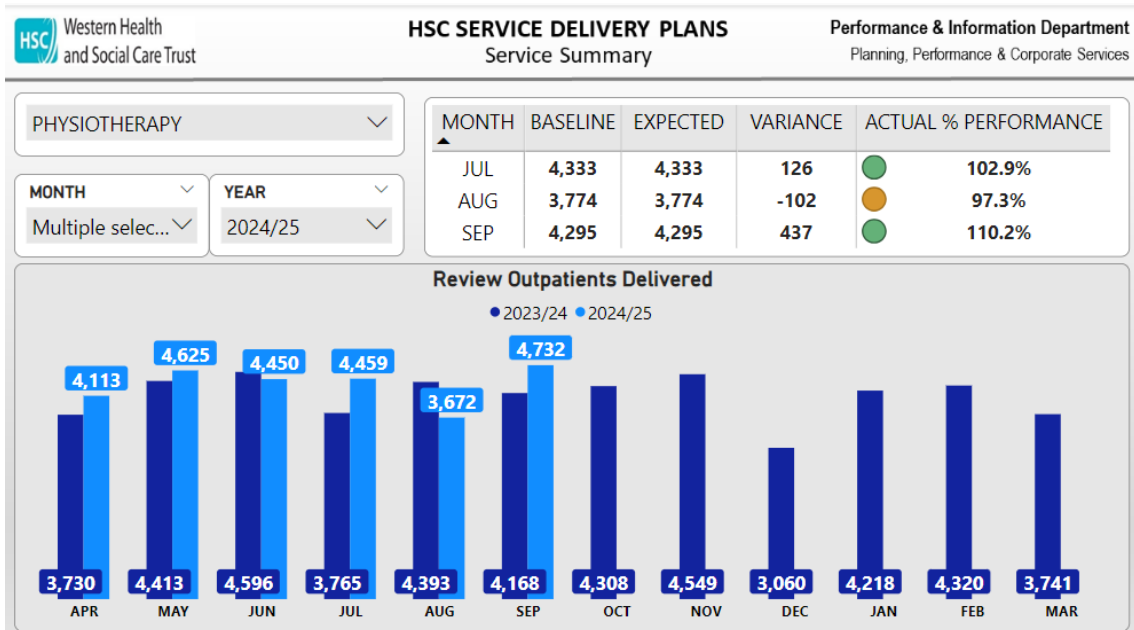
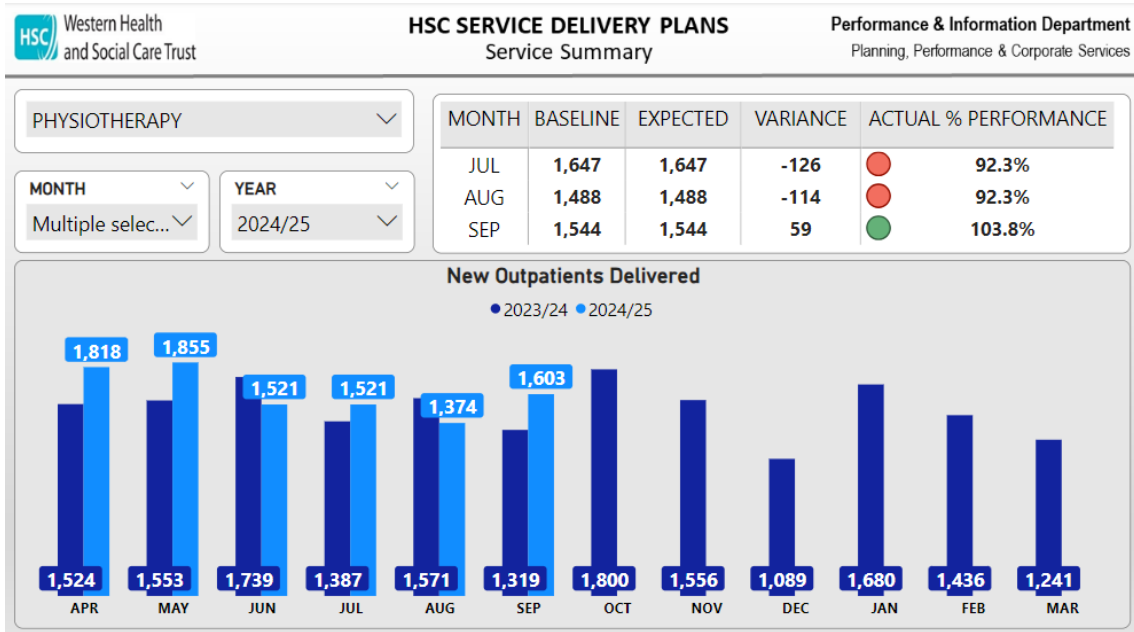
During Quarter 2 (July to September 24), cumulative activity (New and Review Total) increased in the month of September 24. Overall, across the six service areas, more activity was delivered during 2024/25 Quarter 2 when compared to the same period 2023/24. Workforce challenges including vacant posts, sickness absence (long and short term) and retirement continues to impact available capacity.

The cumulative New and Review activity delivered during Quarter 2 (July to September 24) **(52,853)**, across the six service areas, represents **99.9%** (93.8% New and 101.5% Review) of the cumulative Baseline activity (52,868).

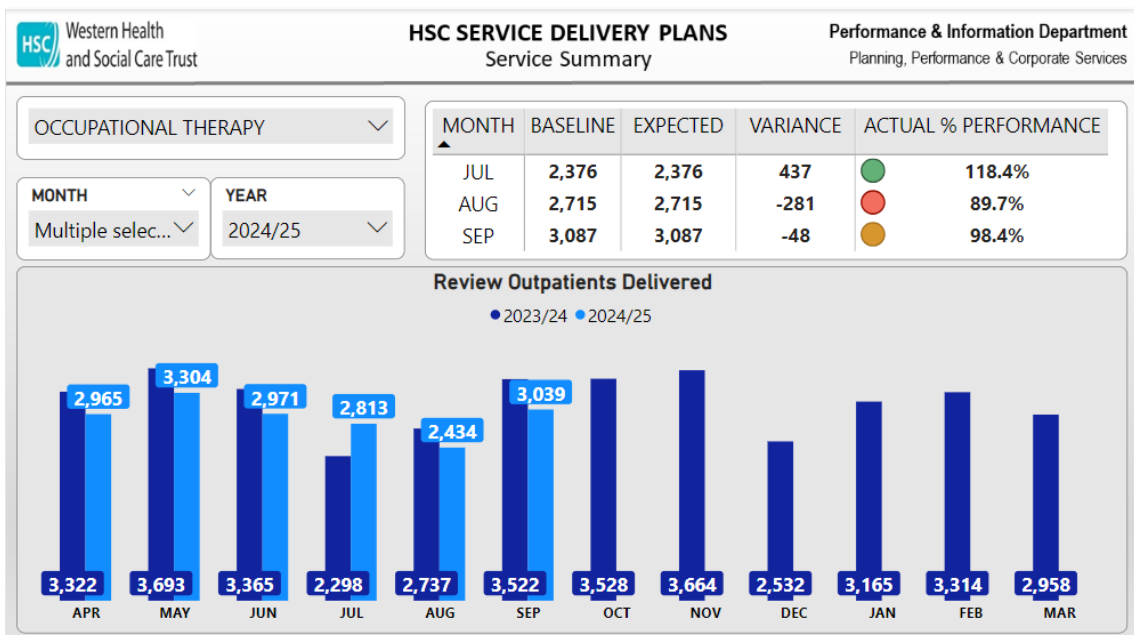
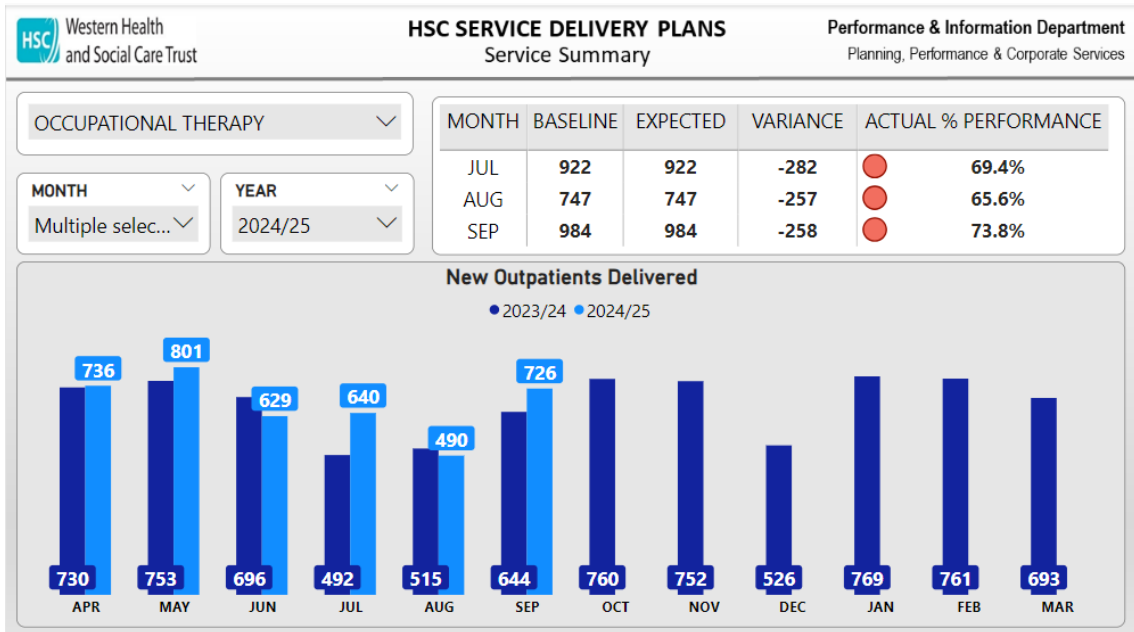
An individual breakdown by Service area provided below.



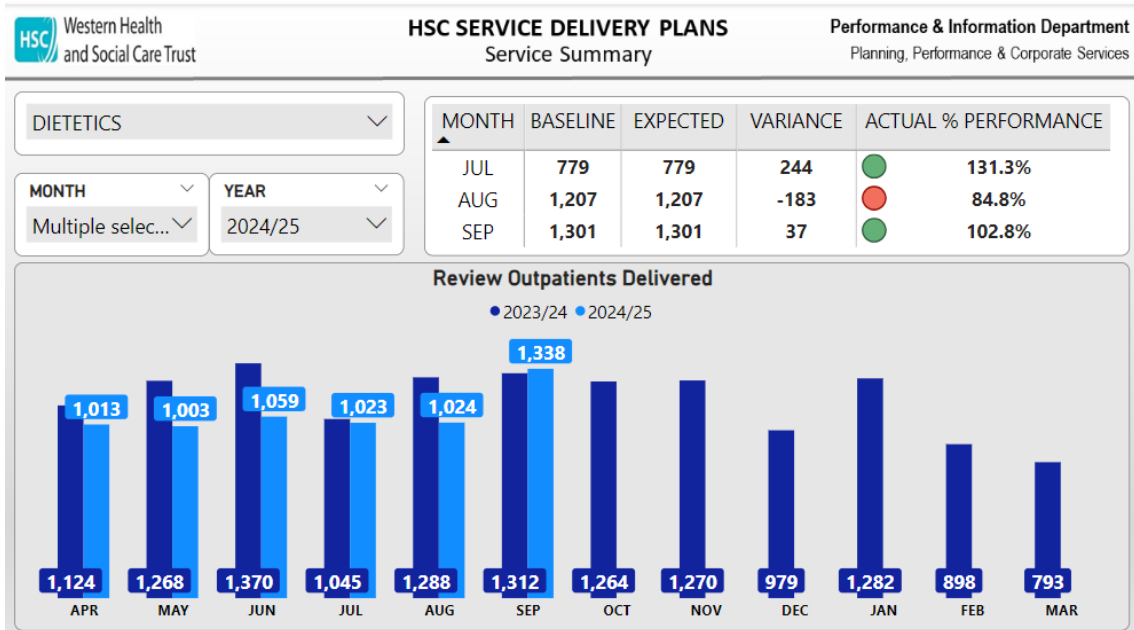
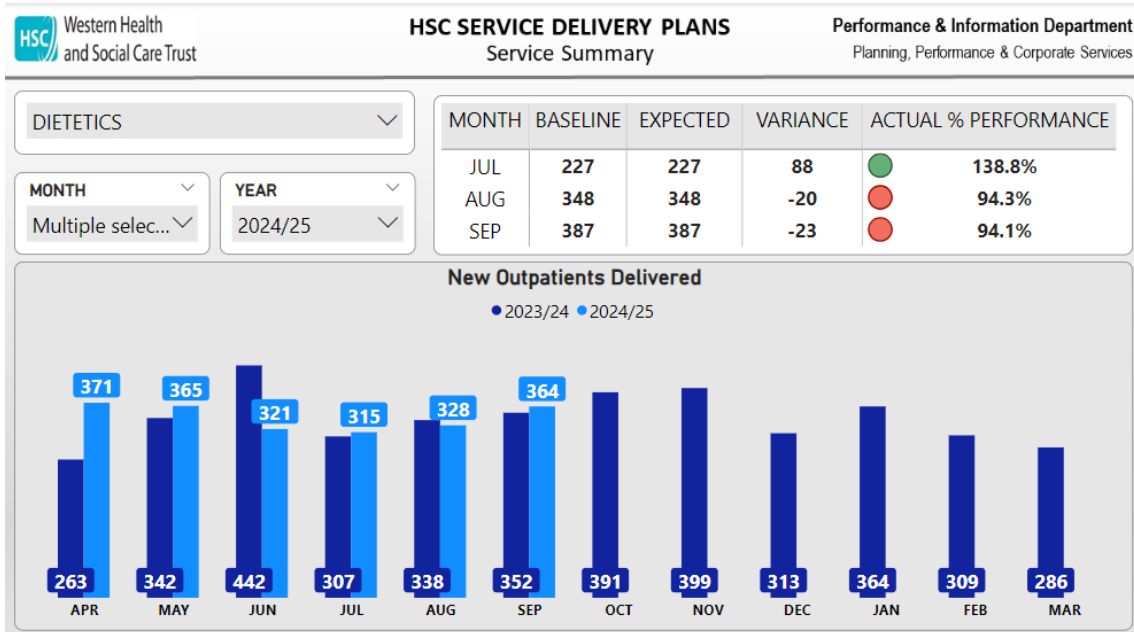
Physiotherapy: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (**17,361**) reflects **101.6%** (96.1% New and 103.7% Review) of the cumulative 2019/20 Baseline activity (17,081); this represents 280 additional attendances.



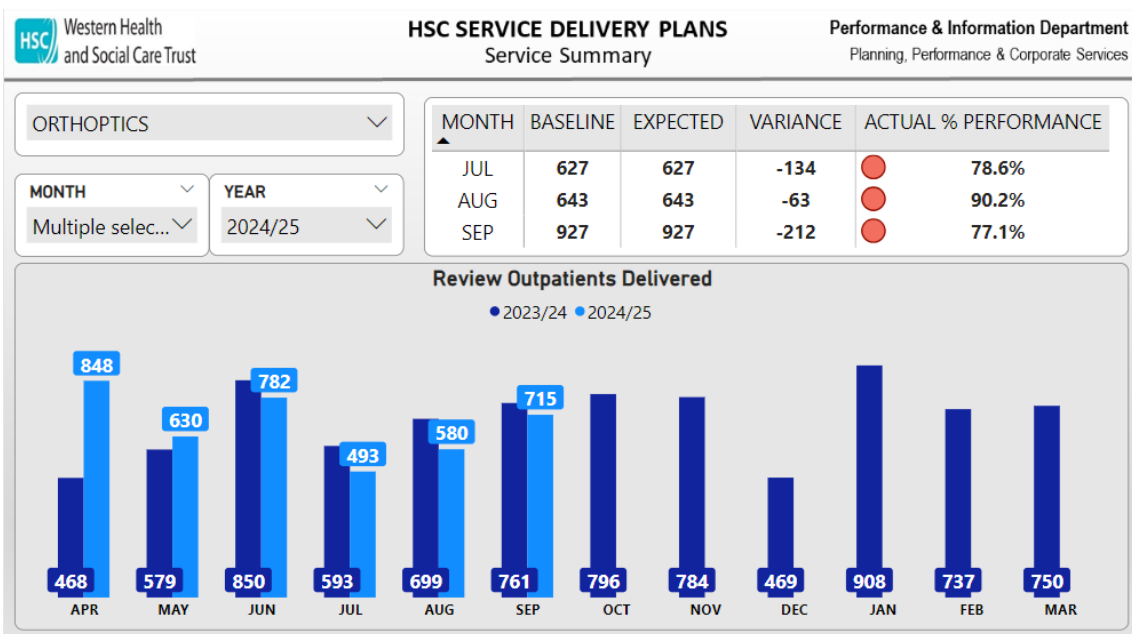
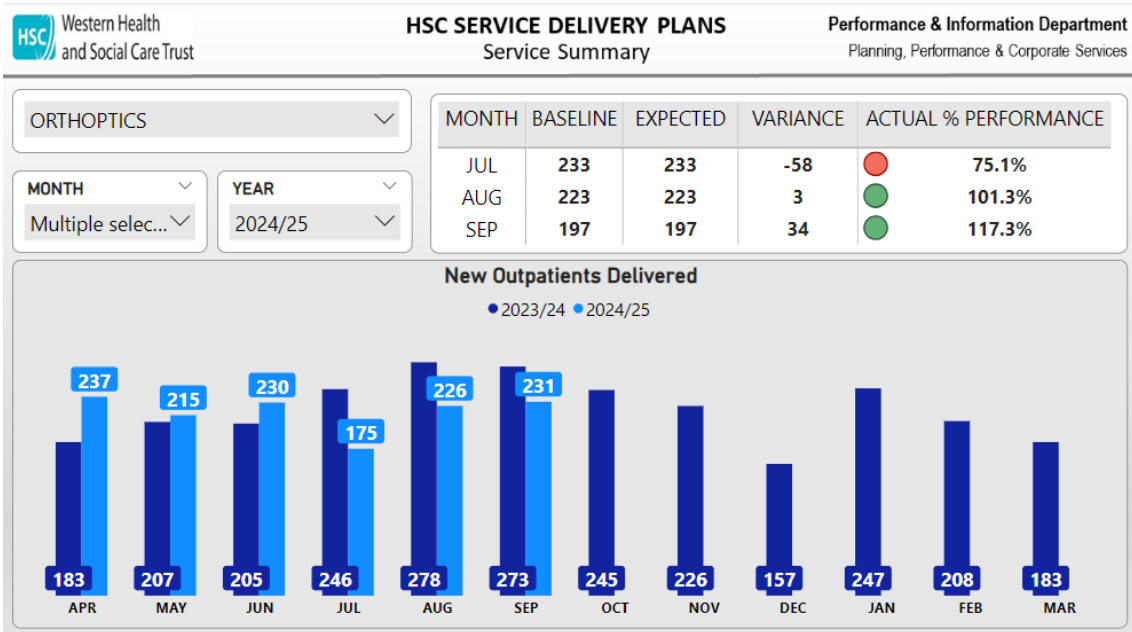
Occupational Therapy: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (10,142) reflects 93.6% (70.0% New and 101.3% Review) of the cumulative 2019/20 Baseline activity (10,831).



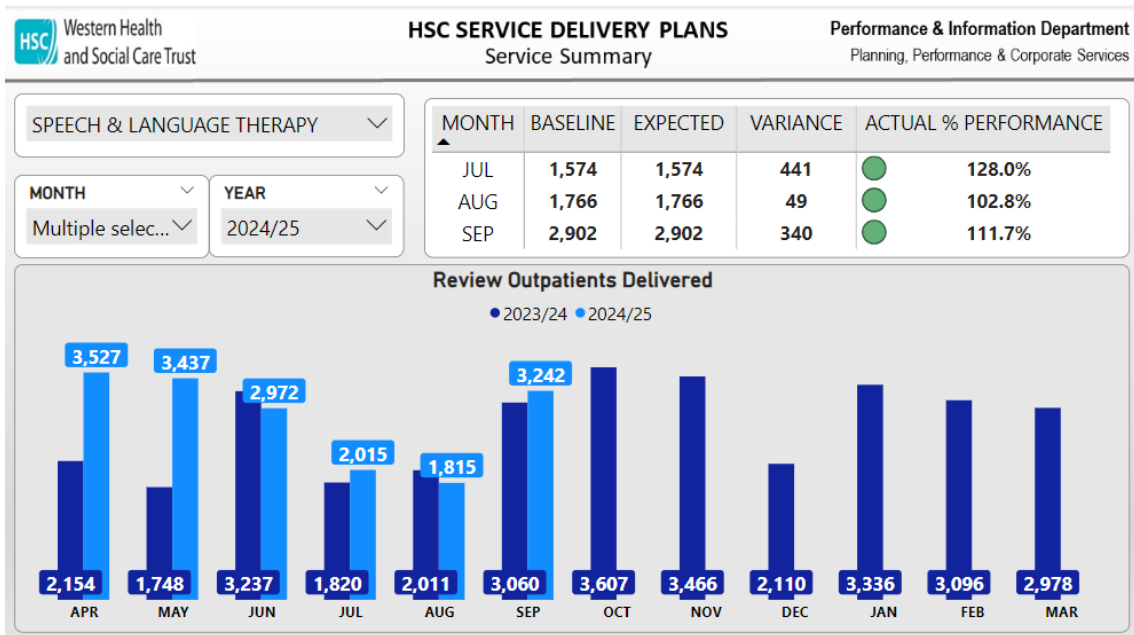
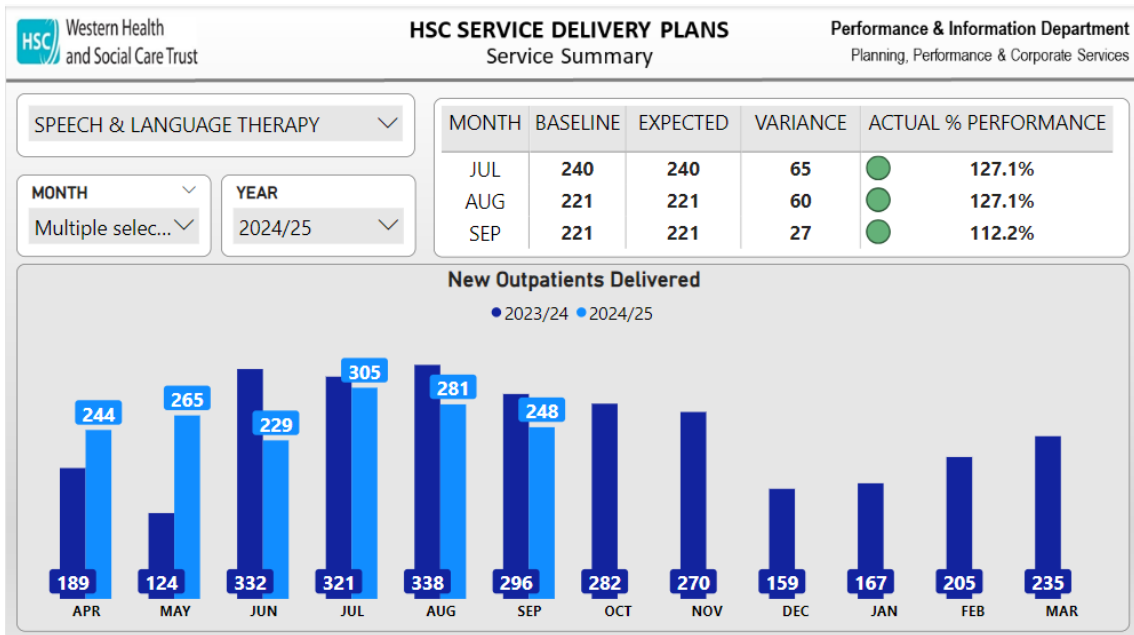
Dietetics: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (**4,392**) reflects **103.4%** (104.7% New and 103.0% Review) of the cumulative 2022/23 Baseline activity (4,249); this represents 143 additional attendances.



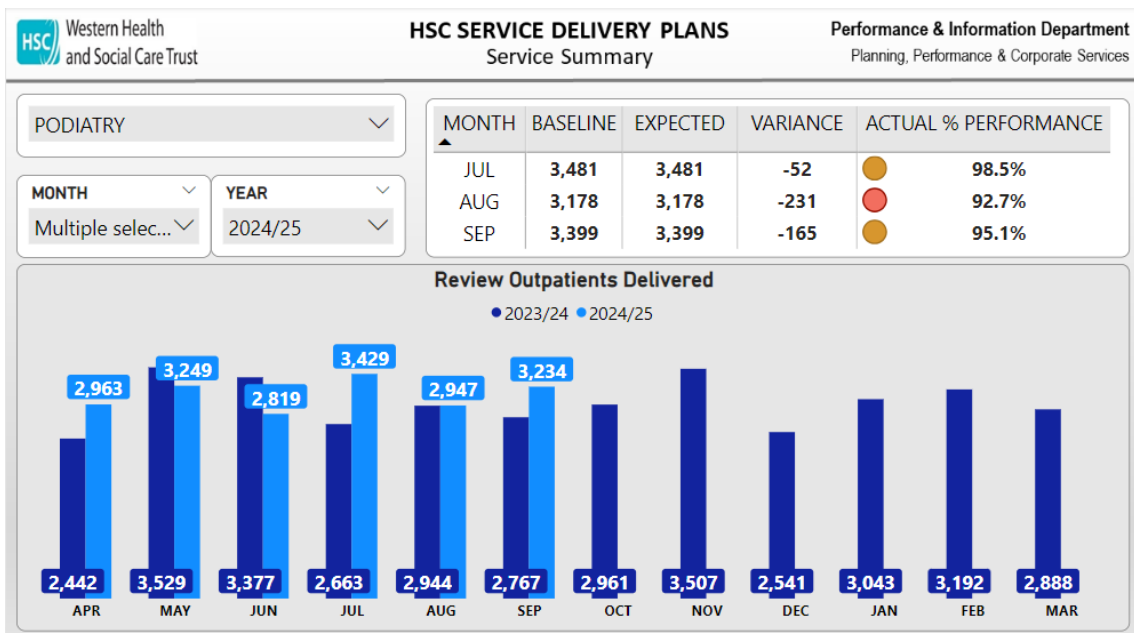
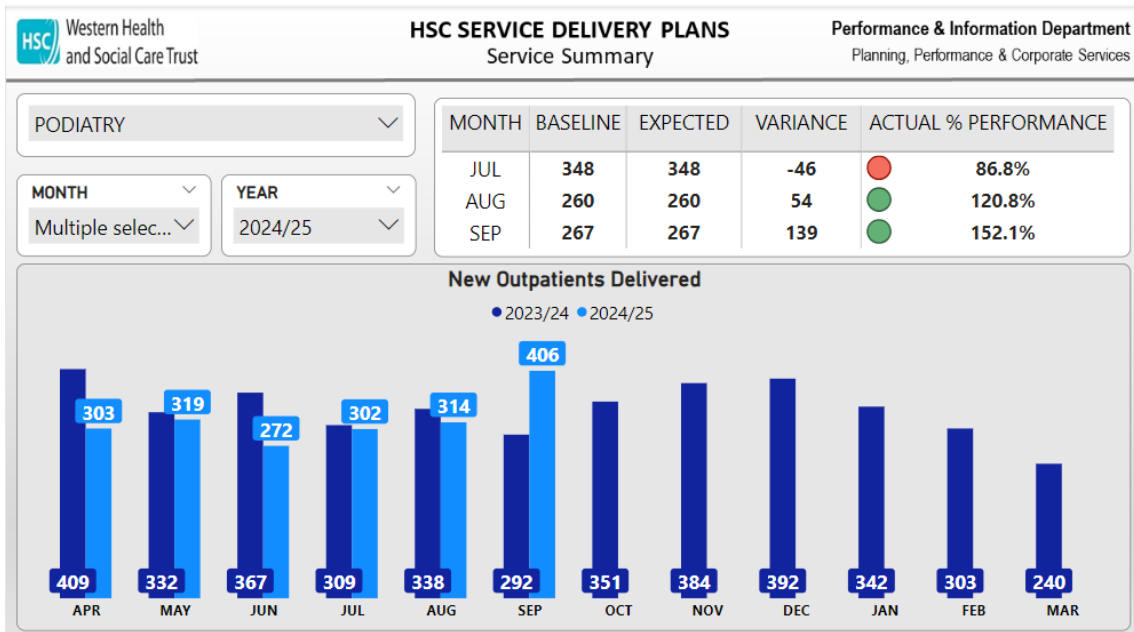
Orthoptics: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (**2,420**) reflects **84.9%** (96.8% New and 81.4% Review) of the cumulative 2019/20 Baseline activity (2,850).



Speech and Language: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (7,906) reflects 114.2% (122.3% New and 113.3% Review) of the cumulative 2022/23 Baseline activity (6,924); this represents 982 additional attendances.



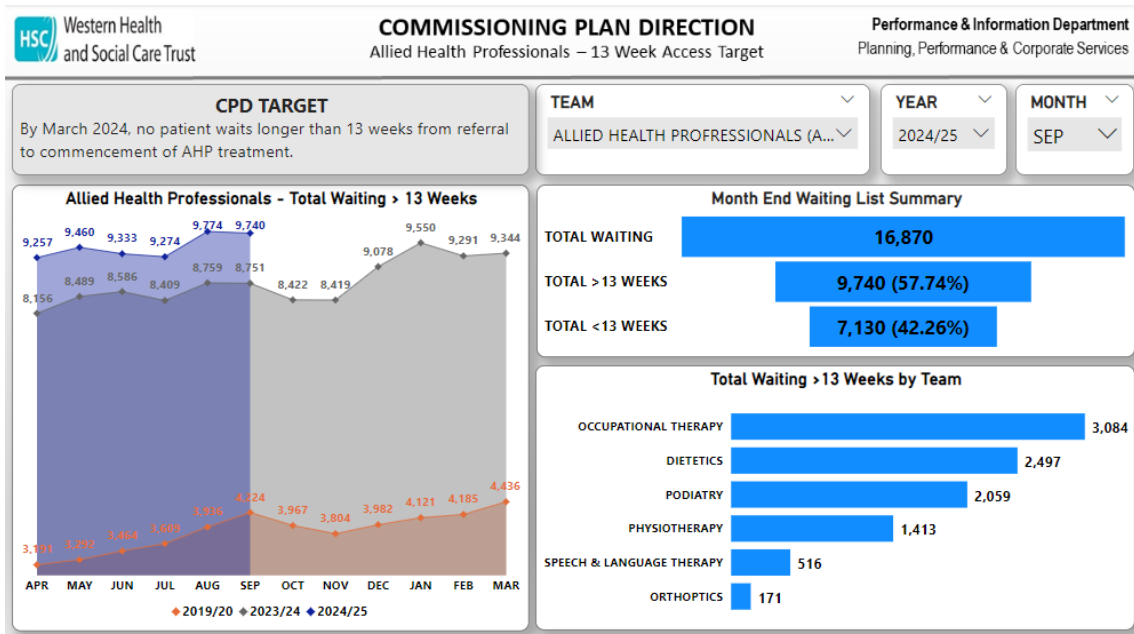
Podiatry: the cumulative new and review activity delivered during Quarter 2 (July to September 24) (10,632) reflects 97.2% (116.8% New and 95.5% Review) of the cumulative 2019/20 Baseline activity (10,933).



Allied Health Professionals (AHPs) – Access Performance

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

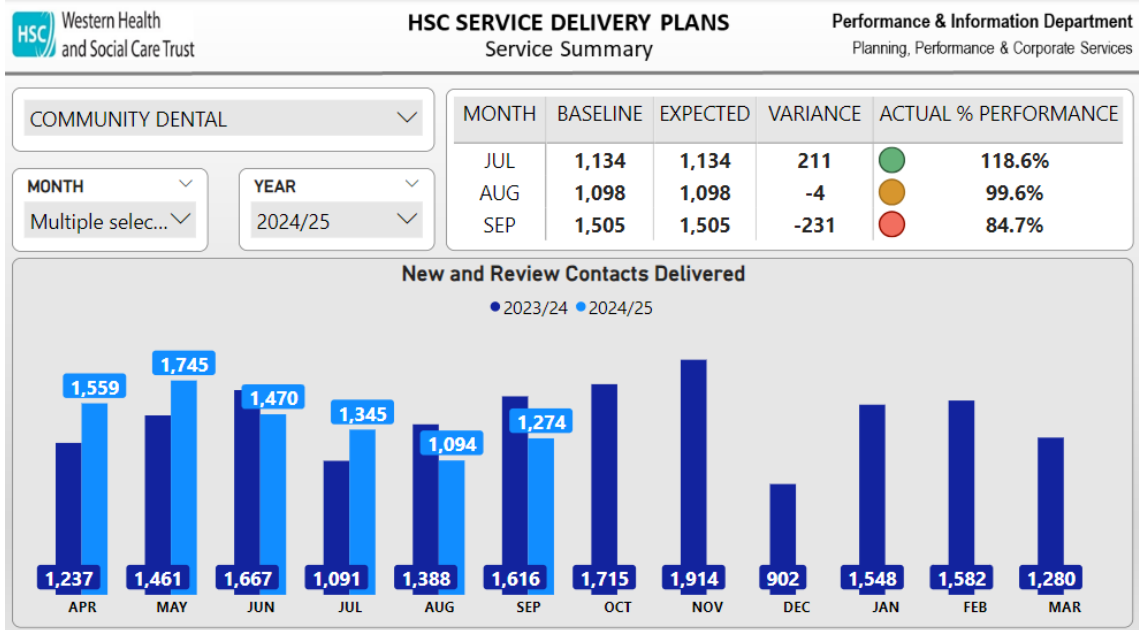
At the end of September 24, the Trust reported a total of **16,870** patients waiting to commence Allied Health Professional treatment with **9,740** waiting longer than 13 weeks. This represents an improvement in the total number waiting and a deterioration in the number waiting longer than 13 weeks, when compared to June 24; there were **17,119** in total waiting and **9,333** 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.

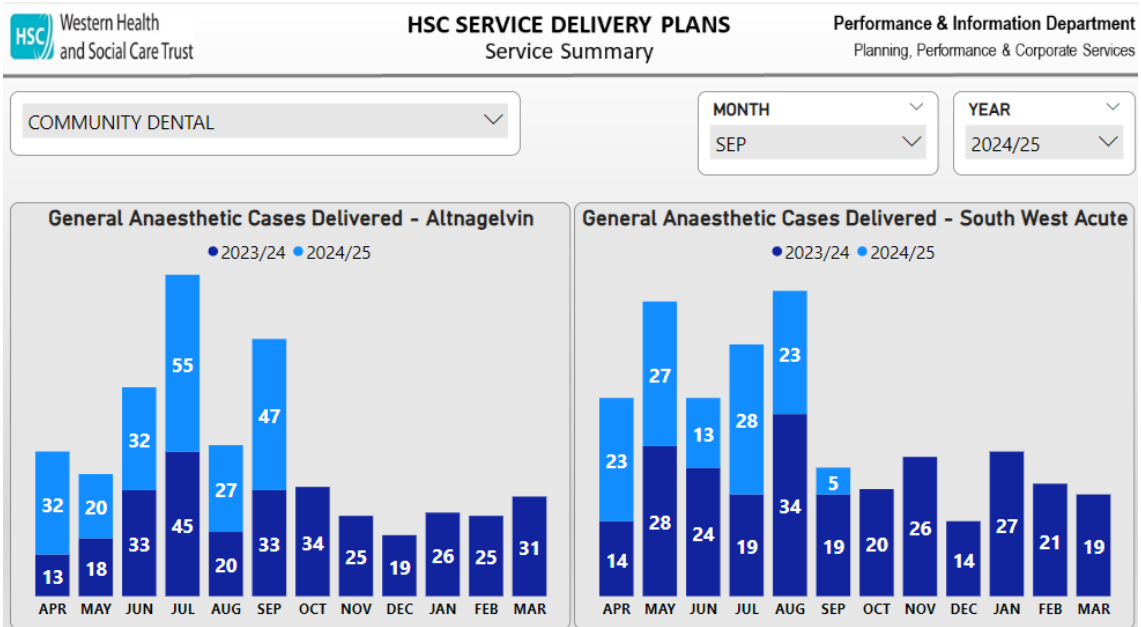
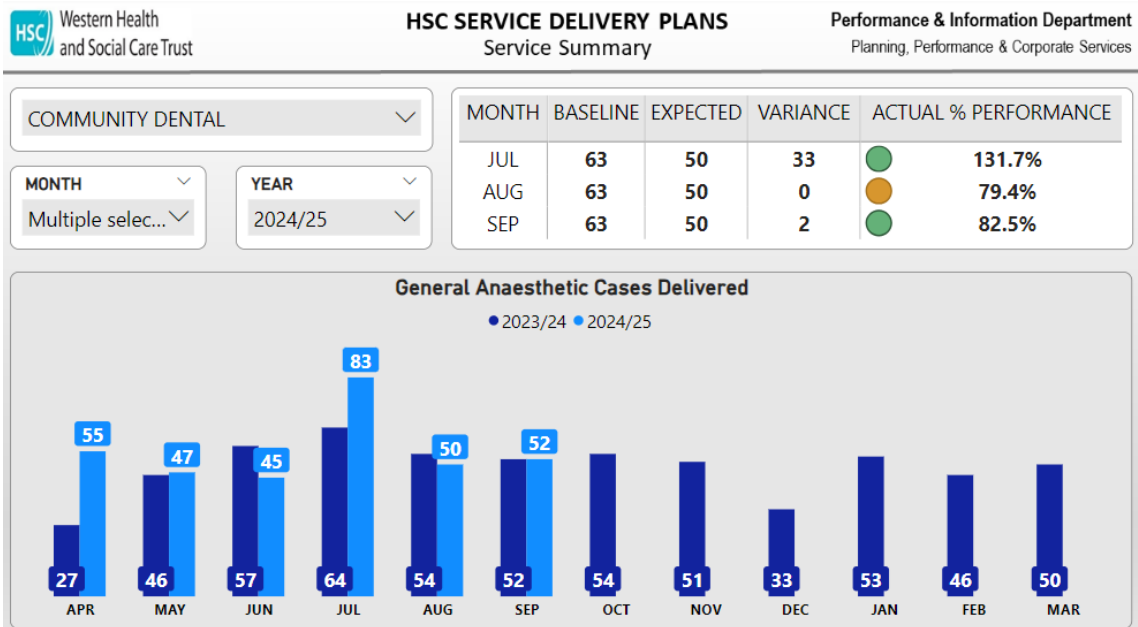
The cumulative number of New and Review contacts delivered during Quarter 2 (July to September 24) **(3,713)** (RAG Amber) reflects **99.4%** (85.4% New and 103.0% Review) of the cumulative 2019/20 Baseline activity (3,737). September 24 represented the highest Baseline/Expected target this year to date.



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 2 (July to September 24) (185), represents **97.9%** (97.7% Altnagelvin and 98.2% South West Acute) of the cumulative 2019/20 Baseline (189).



End of Report

Section 2: Western Trust - Summary of Activity Delivered: July to September 2024



HSC SERVICE DELIVERY PLANS

HOSPITAL SERVICES 2024/25

LINK TO
SPPG TARGETS

QUARTER 2 (JULY - SEPTEMBER 2024)

		BASELINE	EXPECTED	DELIVERED	VARIANCE DELIVERED - EXPECTED EXCEPTIONS APPLY	ACTUAL PERFORMANCE DELIVERED / BASELINE EXCEPTIONS APPLY
CANCER						
PERFORMANCE	14 DAYS	100%	100%	99.5%	-0.5%	99.5%
	31 DAYS	98%	98%	97%	-1%	97%
	62 DAYS	95%	95%	41%	-54%	41%
RED FLAG - FIRST OUTPATIENT APPOINTMENT (EXCLUDING BREAST) 110% OF 2019/20 BASELINE		1,938	2,132	2,504	372	129.2%
IMAGING						
MRI	TARGET SBA VOLUMES	4,146	4,146	4,315	169	104.1%
CT	TARGET SBA VOLUMES	8,088	8,088	10,890	2,802	134.6%
NOUS	TARGET SBA VOLUMES	10,626	10,626	11,104	478	104.5%
CARDIOLOGY / CARDIAC						
CARDIAC MRI	TARGET SBA VOLUMES	84	84	81	-3	96.4%
CARDIAC CT	110% OF 2019/20 BASELINE	130	142	146	4	112.3%
ECHO	TARGET SBA VOLUMES	2,079	2,079	2,087	8	100.4%
CATH LAB	110% OF 2019/20 BASELINE	546	604	482	-122	88.3%
ELECTIVE						
NEW OUTPATIENTS 105% OF 2019/20 BASELINE	FACE TO FACE	18,895	19,830	12,863	-2,941	89.4%
	VIRTUAL			848		
	OTHER			3,178		
	TOTAL			16,889		
REVIEW OUTPATIENTS 100% OF 2019/20 BASELINE	FACE TO FACE	38,220	38,220	25,248	-258	99.3%
	VIRTUAL			5,538		
	OTHER			7,176		
	TOTAL			37,962		
OUTPATIENTS (OVERALL)		57,115	58,050	54,851	-3,199	96%
INPATIENT 100% OF 2019/20 BASELINE	CORE	1,571	1,571	1,338	-233	85.2%
	OTHER	351	351	355	4	101.1%
	TOTAL	1,922	1,922	1,693	-229	88.1%
DAY CASES 100% OF 2019/20 BASELINE	CORE	4,530	4,530	4,520	-10	99.8%
	OTHER	2,190	2,190	2,574	384	117.5%
	TOTAL	6,720	6,720	7,094	374	105.6%
OMAGH DPC Day Case Activity (Included above)		315	315	240	-75	76.2%
INPATIENT AND DAYCASE (OVERALL)		8,642	8,642	8,787	145	101.7%
ENDOSCOPY	2019/20 BASELINE + 3000 SCOPES PER YEAR (Additional 250 per month)	3,231	3,231	2,487	-744	77.0%
OMAGH DPC Endoscopy Activity (Included above)		750	750	440	-310	58.7%
THEATRE UTILISATION						
SCHEDULED THEATRE MINUTES	SESSION DURATION (MINS)	299,430	299,430	289,080	-10,350	96.5%
THEATRE OPERATING TIMES	MAIN THEATRES	85%	85%	83%	-2%	83.0%
	DPU THEATRES	80%	80%	68%	-12%	68.0%
UNSCHEDULED CARE						
ED PERFORMANCES - 12 HOURS	10% REDUCTION OF 2022/23 BASELINE	4,343	3,909	4,880	537	12.4%
WEEKEND DISCHARGES						
ALTNAGELVIN	SIMPLE	80%	80%	50.9%	-29%	50.9%
	COMPLEX	60%	60%	21.8%	-38%	21.8%
SOUTH WEST ACUTE	SIMPLE	80%	80%	17.1%	-63%	17.1%
	COMPLEX	60%	60%	4.5%	-55%	4.5%
AVERAGE LOS						
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	10.4	12.2	1.8	12.2

LNK TO
SPPG TARGETS

QUARTER 2 (JULY - SEPTEMBER 2024)

		BA BASELINE	EXPECTED	DELIVERED	VARIANCE DELIVERED - EXPECTED EXCEPTIONS APPLY	ACTUAL PERFORMANCE DELIVERED / BASELINE EXCEPTIONS APPLY
COMMUNITY CARE						
DOMICILIARY CARE 2.5% REDUCTION OF MAR 24 BASELINE Q1 5% REDUCTION OF MAR 24 BASELINE Q2 7.5% REDUCTION OF MAR 24 BASELINE Q3 10% REDUCTION OF MAR 24 BASELINE Q4	UNMET NEED HOURS (FULL PACKAGES, ALL POCs)	2,992	2,842	2,888	-104	-3.5%
	UNMET NEED HOURS (PARTIAL PACKAGES, ALL POCs)	2,208	2,098	2,288	80	3.6%
	TOTAL	5,200	4,940	5,176	-24	-0.5%
DIRECT PAYMENTS	NO. OF CLIENTS IN EFFECT AT MONTH END 5% INCREASE OF MAR 24 BASELINE BY MAR 25	1,387	1,456	1,400	13	0.9%
CHILDRENS SOCIAL CARE						
CHILD PROTECTION CASE CONFERENCES	WITHIN 15 DAYS			52		94.5%
	TOTAL	N/A	84%	55	11%	
	% WITHIN 15 DAYS			95%		
	WITHIN 3 MONTHS			57		89.1%
	TOTAL	N/A	85%	64	4%	
	% WITHIN 3 MONTHS			89%		
	WITHIN 6 MONTHS			75		94.9%
	TOTAL	N/A	89%	79	6%	
	% WITHIN 6 MONTHS			95%		
UNALLOCATED FAMILY SUPPORT CASES QUARTETLY MONITORING WITH EFFECT FROM Q2 10% REDUCTION BY MAR 24 (JUN 23 BASELINE)		71.0	63.9	46.0	-25.0	-35.2%
MENTAL HEALTH SERVICES						
ADULT MENTAL HEALTH (NON INPATIENT) 110% OF 19/20 BASELINE	NEW	1,621	1,783	1,010	-773	62.3%
	REVIEW	12,945	14,240	13,906	-334	107.4%
	TOTAL	14,566	16,022	14,916	-1,106	102.4%
PSYCHOLOGICAL THERAPIES 100% OF 19/20 BASELINE	NEW	355	355	578	223	162.8%
	REVIEW	2,857	2,857	4,648	1,791	162.7%
	TOTAL	3,212	3,212	5,226	2,014	162.7%
DEMENTIA 110% OF 19/20 BASELINE	NEW	116	128	338	210	291.4%
	REVIEW	1,323	1,455	1,385	-70	104.7%
	TOTAL	1,439	1,583	1,723	140	119.7%
CAMHS 100% OF 19/20 BASELINE (NEW CONTACTS) 110% OF 19/20 BASELINE (REVIEW CONTACTS)	NEW	187	187	256	69	136.9%
	REVIEW	1,590	1,749	1,987	238	125.0%
	TOTAL	1,777	1,936	2,243	307	126.2%
MENTAL HEALTH SERVICES (OVERALL)		20,994	22,753	24,108	1,355	114.8%

HSC SERVICE DELIVERY PLANS
COMMUNITY SERVICES 2024/25

LINK TO
SPPG TARGETS

QUARTER 2 (JULY - SEPTEMBER 2024)

		BASELINE	EXPECTED	DELIVERED	VARIANCE DELIVERED - EXPECTED EXCEPTIONS APPLY	ACTUAL PERFORMANCE DELIVERED / BASELINE EXCEPTIONS APPLY
ALLIED HEALTH PROFESSIONALS						
PHYSIOTHERAPY 100% OF 19/20 BASELINE	NEW	4,679	4,679	4,498	-181	96.1%
	REVIEW	12,402	12,402	12,863	461	103.7%
	TOTAL	17,081	17,081	17,361	280	101.6%
OCCUPATIONAL THERAPY 100% OF 19/20 BASELINE	NEW	2,653	2,653	1,856	-797	70.0%
	REVIEW	8,178	8,178	8,286	108	101.3%
	TOTAL	10,831	10,831	10,142	-689	93.6%
DIETETICS 100% OF 22/23 BASELINE	NEW	962	962	1,007	45	104.7%
	REVIEW	3,287	3,287	3,385	98	103.0%
	TOTAL	4,249	4,249	4,392	143	103.4%
ORTHOPTICS 100% OF 19/20 BASELINE	NEW	653	653	632	-21	96.8%
	REVIEW	2,197	2,197	1,788	-409	81.4%
	TOTAL	2,850	2,850	2,420	-430	84.9%
SPEECH & LANGUAGE 100% OF 22/23 BASELINE	NEW	682	682	834	152	122.3%
	REVIEW	6,242	6,242	7,072	830	113.3%
	TOTAL	6,924	6,924	7,906	982	114.2%
PODIATRY 100% OF 19/20 BASELINE	NEW	875	875	1,022	147	116.8%
	REVIEW	10,058	10,058	9,610	-448	95.5%
	TOTAL	10,933	10,933	10,632	-301	97.2%
ALLIED HEALTH PROFESSIONALS (OVERALL)	NEW	10,504	10,504	9,849	-655	93.8%
	REVIEW	42,364	42,364	43,004	640	101.5%
	TOTAL	52,868	52,868	52,853	-15	99.97%
STROKE SERVICES						
THROMBOLYSIS RATE	ALTNAGELVIN	N/A	16%	6%	-10%	6%
	SOUTH WEST ACUTE	N/A	16%	16%	0%	16%
% ADMITTED <4 HOURS	ALTNAGELVIN	N/A	43%	35%	-8%	35%
	SOUTH WEST ACUTE	N/A	90%	82%	-8%	82%
COMMUNITY DENTAL						
CONTACTS 100% OF 2019/20 BASELINE FOR Q1 & Q2 90% OF 2019/20 BASELINE FOR Q3 80% OF 2019/20 BASELINE FOR Q4	NEW	779	779	665	-114	85.4%
	REVIEW	2,958	2,958	3,048	90	103.0%
	TOTAL	3,737	3,737	3,713	-24	99.4%
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	129	23	97.7%
	SOUTH WEST ACUTE	57	46	56	10	98.2%
	TOTAL	189	151	185	34	97.9%

Public Health: Performance Summary April to September 2024

Service Area	2024/25 Target Trajectory	Quarter 1 (Apr-Jun 24 cumulative)	Quarter 2 (Jul-Sep 24 cumulative)
HCAI - clostridioides difficile (CDI)	Q1: 14.2 cases per 100,000 occupied beds Q2: 13.9 cases per 100,000 occupied beds	19.4	20.8
HCAI - Methicillin-resistant staphylococcus aureus (MRSA)	1.613 cases per 100,000 occupied beds (CDI)	1.495	0.769
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). Q1: 9417.2, Q2: 9331.7	10,684.6	10,551.0
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 Q1: 106.5, Q2: 106.0	147.0	175.0
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 Q1: 446.6, Q2: 444.0	504.3	514.8
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	53.2%	52.17%

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

Service Area	2024/25 Target Trajectory	Apr-24	May-24	Jun-24	Quarter 1	Jul-24	Aug-24	Sep-24	Quarter 2
NIAS Handover < 15 mins	Q1: 12%, Q2: 15%, Q3: 20% & Q4: 25%	6.0%	6.9%	6.3%	6.4%	4.9%	6.5%	5.6%	5.7%
NIAS Handover < 30 mins	Q1: 32%, Q2: 36%, Q3: 40% & Q4: 45%	25.4%	31.9%	29.0%	28.8%	25.0%	26.6%	25.5%	25.7%
NIAS Handover < 60 mins	Q1: 64%, Q2: 70%, Q3: 76% & Q4: 85%	65.0%	79.0%	72.5%	72.3%	70.4%	70.9%	67.5%	69.6%
NIAS Handover > 2 hours	0%	9.4%	2.5%	5.4%	5.7%	5.0%	5.6%	9.0%	6.5%
Ambulance Turnaround within 30 mins	Q1: 20%, Q2: 30%, Q3: 40% & Q4: 51%	12.2%	12.0%	15.0%	12.9%	10.7%	11.5%	10.5%	10.9%

Overall RAG assessment: April to September 2024

		Quarter 1		Quarter 2	
Total Metrics Hospital & Community: 53 HCAI: 6 NIAS: 5	Total Number of SDP Metrics	64		64	
	Overall RAG Assessment	29	45%	27	42%
		10	16%	12	19%
	No. of Metrics where performance is not available	21	33%	21	33%
		4	6%	4	6%

Section 3: RAG Status Summary: 2023/24 Year End and 2024/25 Quarter 1 and 2



LINK TO SPPG TARGETS

HSC SERVICE DELIVERY PLANS
HOSPITAL SERVICES 2024/25

		ACTUAL % PERFORMANCE								
		YEAR END 2023/24	APR 2024	MAY 2024	JUN 2024	QUARTER 1 APR - JUN 2024	JUL 2024	AUG 2024	SEP 2024	QUARTER 2 JUL - SEP 2024
CANCER										
PERFORMANCE	14 DAYS									
	31 DAYS									
	62 DAYS									
RED FLAG - FIRST OUTPATIENT APPOINTMENT (EXCLUDING BREAST) 110% OF 2019/20 BASELINE										
IMAGING										
MRI	TARGET SBA VOLUMES									
CT	TARGET SBA VOLUMES									
NOUS	TARGET SBA VOLUMES									
CARDIOLOGY / CARDIAC										
CARDIAC MRI	TARGET SBA VOLUMES									
CARDIAC CT	110% OF 2019/20 BASELINE									
ECHO	TARGET SBA VOLUMES									
CATH LAB	110% OF 2019/20 BASELINE									
ELECTIVE										
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)									
THEATRE UTILISATION										
SCHEDULED THEATRE MINUTES	SESSION DURATION (MINS)									
THEATRE OPERATING TIMES	MAIN THEATRES									
	DPU THEATRES									
UNSCHEDULED CARE										
ED PERFORMANCES - 12 HOURS	10% REDUCTION OF 2022/23 BASELINE									
WEEKEND DISCHARGES										
ALTNAGELVIN	SIMPLE									
	COMPLEX									
SOUTH WEST ACUTE	SIMPLE									
	COMPLEX									
AVERAGE LOS										
ALTNAGELVIN	1 DAY REDUCTION OF Q4 2022/23 BASELINE									
SOUTH WEST ACUTE	1 DAY REDUCTION OF Q4 2022/23 BASELINE									

HSC SERVICE DELIVERY PLANS
COMMUNITY SERVICES 2024/25

[LINK TO SPPG TARGETS](#)

ACTUAL % PERFORMANCE

		YEAR END 2023/24	APR 2024	MAY 2024	JUN 2024	QUARTER 1 APR - JUN 2024	JUL 2024	AUG 2024	SEP 2024	QUARTER 2 JUL - SEP 2024
COMMUNITY CARE										
DOMICILIARY CARE 2.5% REDUCTION OF BASELINE Q1 5% REDUCTION OF BASELINE Q2 7.5% REDUCTION OF BASELINE Q3 10% REDUCTION OF BASELINE Q4	UNMET NEED HOURS (FULL PACKAGES, ALL POCS)	Red	Green	Green	Green	Green	Green	Yellow	Yellow	Yellow
	UNMET NEED HOURS (PARTIAL PACKAGES, ALL POCS)	Green	Green	Green	Green	Green	Yellow	Red	Red	Red
	TOTAL	Yellow	Green	Green	Green	Green	Green	Red	Yellow	Yellow
DIRECT PAYMENTS	NO. OF CLIENTS IN EFFECT AT MONTH END 10% INCREASE BY MARCH 2024 (MARCH 2023 BASELINE)	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
CHILDRENS SOCIAL CARE										
CHILD PROTECTION CASE CONFERENCES	WITHIN 15 DAYS	Green	Green	Green	Green	Green	Green	Green	Green	Green
	TOTAL	Green	Green	Green	Green	Green	Green	Green	Green	Green
	% WITHIN 15 DAYS	Green	Green	Green	Green	Green	Green	Green	Green	Green
	WITHIN 3 MONTHS	Green	Green	Green	Green	Green	Red	Green	Green	Green
	TOTAL	Green	Green	Green	Green	Green	Red	Green	Green	Green
	% WITHIN 3 MONTHS	Green	Green	Green	Green	Green	Red	Green	Green	Green
	WITHIN 6 MONTHS	Green	Green	Green	Green	Green	Green	Green	Green	Green
	TOTAL	Green	Green	Green	Green	Green	Green	Green	Green	Green
UNALLOCATED FAMILY SUPPORT CASES QUARTETLY MONITORING WITH EFFECT FROM Q2 10% REDUCTION BY MARCH 2024 (JUNE 2023 BASELINE)		Green	Green	Green	Green	Green	Yellow	Green	Green	Green
MENTAL HEALTH SERVICES										
ADULT MENTAL HEALTH (NON INPATIENT) 110% OF 2019/20 BASELINE	NEW	Red	Red	Red	Red	Red	Red	Red	Red	Red
	REVIEW	Green	Yellow	Yellow	Yellow	Yellow	Green	Yellow	Yellow	Yellow
	TOTAL	Yellow	Yellow	Red	Yellow	Yellow	Red	Yellow	Yellow	Yellow
PSYCHOLOGICAL THERAPIES 100% OF 2019/20 BASELINE	NEW	Green	Green	Green	Green	Green	Green	Green	Green	Green
	REVIEW	Green	Green	Green	Green	Green	Green	Green	Green	Green
	TOTAL	Green	Green	Green	Green	Green	Green	Green	Green	Green
DEMENTIA 110% OF 2019/20 BASELINE	NEW	Green	Green	Green	Green	Green	Green	Green	Green	Green
	REVIEW	Yellow	Green	Yellow	Red	Yellow	Red	Yellow	Green	Yellow
	TOTAL	Green	Green	Green	Green	Green	Yellow	Green	Green	Yellow
CAMHS 100% OF 2019/20 BASELINE (NEW CONTACTS) 110% OF 2019/20 BASELINE (REVIEW CONTACTS)	NEW	Green	Green	Green	Green	Green	Green	Green	Green	Green
	REVIEW	Yellow	Green	Green	Green	Green	Green	Green	Green	Green
	TOTAL	Yellow	Green	Green	Green	Green	Green	Green	Green	Green
MENTAL HEALTH SERVICES (OVERALL)										

HSC SERVICE DELIVERY PLANS
COMMUNITY SERVICES 2024/25

LINK TO SPPG TARGETS

ACTUAL % PERFORMANCE

		YEAR END 2023/24	APR 2024	MAY 2024	JUN 2024	QUARTER 1 APR - JUN 2024	JUL 2024	AUG 2024	SEP 2024	QUARTER 2 JUL - SEP 2024
ALLIED HEALTH PROFESSIONALS										
PHYSIOTHERAPY 100% OF 2019/20 BASELINE	NEW									
	REVIEW									
	TOTAL									
OCCUPATIONAL THERAPY 100% OF 2019/20 BASELINE	NEW									
	REVIEW									
	TOTAL									
DIETETICS 100% OF 2022/23 BASELINE	NEW									
	REVIEW									
	TOTAL									
ORTHOPTICS 100% OF 2019/20 BASELINE	NEW									
	REVIEW									
	TOTAL									
SPEECH & LANGUAGE 100% OF 2022/23 BASELINE	NEW									
	REVIEW									
	TOTAL									
PODIATRY 100% OF 2019/20 BASELINE	NEW									
	REVIEW									
	TOTAL									
ALLIED HEALTH PROFESSIONALS (OVERALL)	NEW									
	REVIEW									
	TOTAL									
STROKE SERVICES										
THROMBOLYSIS RATE IN LINE WITH WHSCT RETURN	ALTNAGELVIN		REPORTED QUARTERLY IN 2024/25				REPORTED QUARTERLY IN 2024/25			
	SOUTH WEST ACUTE									
% ADMITTED <4 HOURS FIGURES PROVIDED BY SPPG	ALTNAGELVIN									
	SOUTH WEST ACUTE									
COMMUNITY DENTAL										
CONTACTS 100% OF 2019/20 BASELINE FOR Q1 & Q2 105% OF 2019/20 BASELINE FOR Q3 110% OF 2019/20 BASELINE FOR Q4	NEW									
	REVIEW									
	TOTAL									
GENERAL ANAESTHETIC CASES DELIVERED CHILDRENS CASES (SUBSET OF HOSPITAL DAY CASES) 80% OF 2019/20 BASELINE	ALTNAGELVIN									
	SOUTH WEST ACUTE									
	TOTAL									