

## Bute & Cowal Area Committee

## Item

**Date of Meeting:** 3 March 2020

**Title of Report:** HSCP Performance Exception Report - Financial Quarter 2  
(2019/20)

**Presented by:** Stephen Whiston - Head of Strategic Planning & Performance

### The Integration Joint Board/Committee is asked to:

- Note the new scorecard performance for the FQ2 (19/20) reporting period
- Consider and note the HSCP performance against National Health and Well Being Outcome Indicators and the Ministerial Steering Group measures of integration for the HSCP
- Note the performance commentary with regard to actions to address exceptions against all indicators

## 1. EXECUTIVE SUMMARY

For FQ2 (19/20) as agreed there has been a redesign of the current scorecard and this has seen a reduction in the overall number of performance measures across the nine HWBOI's, namely a reduction from 65 to 44 individual performance measures.

The measures remain aligned within the report under the nine pillars which form the national outcome indicators. The new performance report details all the performance indicators on a quarterly basis and utilises the most available data at the time of reporting.

Performance for FQ2 19/20 notes 26 of the new 44 measures are reporting as on target or better, with 17 reported as being off target and 1 measure still under development.

Key areas of success against target for FQ2 (19/20) are:

- Increase in the percentage of telecare service users with enhanced telecare packages- Target=31% Actual= 44.1%
- Increase in the number of looked after and accommodated children with a plan for permanence after a year- Target=81% Actual=82.8%
- Reduction in the rate of emergency admissions for adults- Target=30,800 Actual=20,444

- Increase in the number of people seen within 5 days who are on Community Payback Orders- Target= 80% Actual=90%
- Increase in the proportion of last 6 months of life spent at home or in a community setting- Target=89% Actual=93%

The MSG performance indicators are now reported within the main scorecard and these have been split across the nine outcome indicators, this work to ensure that there is greater continuity and context with regards to the HSCP's performance with regards to the national measures for integration.

There is particular Scottish Government focus on the length of time patients are waiting for healthcare treatment with the introduction of their Waiting Times 3 year Improvement Plan (2019/20-2021/22). The plan aims to put in place arrangements to sustainably support a reduction in length of wait by providing additional investment across all boards to achieve the various waiting times targets and standards.

The number of breaching outpatients across all specialties was updated monthly and reported quarterly to the Integrated Joint Board under Outcome 4 of the IJB Scorecard, namely the 'number of outpatient ongoing waits >12 weeks.'

It is important the IJB is aware of the detail of current waiting times performance and a more detailed breakdown has been included in this report. There are a number of specialties which are breaching waiting times targets but actions with the additional funding received is now having an impact.

The scorecard development and changes on Pyramid will see a gradual transition from old to new scorecard across the month of January 2020, a new look to the scorecard will complete this evolution.

## **2. INTRODUCTION**

The national health and wellbeing outcomes provide a strategic framework for the planning and delivery of health and social care services. These suites of outcomes, together, focus on improving the experiences and quality of services for people using those services, carers and their families. These outcomes focus on improving how services are provided, as well as, the difference that integrated health and social care services should make, for individuals. Currently there are 9 key National Health and Wellbeing Outcomes (NHWBOI's) and 23 sub-indicators and additional measures which form the foundation of the reporting requirement for the HSCP. In addition the scorecard details progress against the Ministerial Steering Group (MSG) measures for monitoring the progress of integrated service delivery across the HSCP.

## **3. RELEVANT DATA AND INDICATORS**

### **3.1 Overall Scorecard Performance for FQ2 (19/20)**

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development





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- Reduction in the rate of emergency admissions for adults- Target=30,800 Actual=20,444
- Increase in the number of people seen within 5 days who are on Community Payback Orders- Target= 80% Actual=90%
- Increase in the proportion of last 6 months of life spent at home or in a community setting- Target=89% Actual=93%





**Appendix 1** identifies the most recent SOURCE performance data with regards to Argyll & Bute HSCP, benchmarked partnership performance against comparable IJB's for the 9 Health & Wellbeing Outcome Indicator's.

### 3.2 Scorecard Performance Exceptions for (FQ2-19/20)

The table below report the exceptions for FQ2 (19/20), including narrative identifying key trends and where appropriate actions reported to improve performance against targets.

National Health & Wellbeing Indicator and Performance Measure		Target	Latest (FQ2)	FQ1 Actual	Performance Narrative
1	The percentage of adults supported at home who agree that their health & care services seemed to be well co-ordinated	74%	72% 	72%	<b>Performance Narrative:</b> This performance measure is part of the bi-Annually reported Health & Care Experience Survey and as such future performance update will be reported for Feb 2020. Area specific analysis notes that H&L reported 63% against a 70% average across the other areas.
2	The number of unplanned bed days for Mental Health specialties	3974	5716 	4431	<b>Performance Narrative:</b> There is a general increasing performance trend from FQ1 to FQ2. Area specific data notes that B&C had the largest reported number of unplanned bed days(2096) against (890) for H&L
2	The number of Accident & Emergency attendances	4240	456 	4487	<b>Performance Narrative:</b> The performance trend against this data notes an increase from FQ1 to FQ2 against target. In particular H&L note (2027) number of A&E attendances against, (1735) for OLI, (474) for B&C and (328) for MAKI
2	The percentage of population in community or institutional settings	2%	2.1% 	2.1%	<b>Performance Narrative:</b> The performance trend against this measures remains flat in trajectory and is slightly below percentage target (0.1%)

National Health & Wellbeing Indicator and Performance Measure		Target	Latest (FQ2)	FQ1 Actual	Performance Narrative
2	The percentage of Looked After Children who are looked after at home or in a community setting	90%	84.2% 	84.1%	<b>Performance Narrative:</b> Trend against this target shows a very slight improvement from FQ1 to FQ2 (0.1%) but overall remains (5.8%) below target.
3	The percentage of adults supported at home who agree they are supported to live as independently	81%	79% 	79%	<b>Performance Narrative:</b> This performance measure is part of the bi-annually reported Health & Care Experience Survey and as such future performance update will be reported for Feb 2020. Area specific analysis notes that H&L reported (75%) against, (81%) for OLI, (82%) for B&C and (90%) for MAKI
3	The percentage of Accident & Emergency attendances seen within 4 hours	95%	91.2% 	93.2%	<b>Performance Narrative:</b> The area specific breakdown for this measures notes the largest number of people seen within the 4hrs (1792) in H&L, OLI (1672), B7C (411) and MAKI (288). There is a reducing overall trend against target.
4	Percentage of adults supported at home who agree their support had impact improving/maintaining quality of life	80%	74% 	74%	<b>Performance Narrative:</b> This performance measure is part of the bi-annually reported Health & Care Experience Survey and as such future performance update will be reported for Feb 2020.
4	Outpatient ongoing waits over 12 weeks as a percentage of all new outpatients on waiting list for consultant led outpatient appointments for specialties subject to Treatment Time Guarantee in Argyll and Bute	25%	32% 	29%	<b>Performance Narrative:</b> There is currently extensive work being done alongside NHS Highland to provide more consultant lead clinic spaces in order to reduce patient wait. The details of improving performance against target is noted within Section 4 of this report.
5	The number of days people spent in hospital when ready to be discharged, per 1,000 population	160 days	163 days 	139 Days	<b>Performance Narrative:</b> Trend analysis notes an increase in the number of days (3 days per 1000) against target and an increase of (24 days per 1000) against the previous quarter.
5	Percentage of substance misuse clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery.	90%	86.3% 	94.9%	<b>Performance Narrative:</b> The data trajectory notes a (3.7%) reduction in performance against target and (8.9%) reduction from FQ1. It is expected that a recovery of previous performance for FQ3 is supported by overall trend data.
6	The percentage of carers who feel supported to continue in their caring role	37%	33% 	33%	<b>Performance Narrative:</b> This performance measure is part of the bi-annually reported Health & Care Experience Survey and as such future performance update will be reported for Feb 2020
6	Percentage of carers who have received a carers assessment/support plan	20%	17% 	15.7%	<b>Performance Narrative:</b> The data for the measure is new for FQ2 and is now part of the quarterly national data submission to the Scottish Government

National Health & Wellbeing Indicator and Performance Measure		Target	Latest (FQ2)	FQ1 Actual	Performance Narrative
7	The percentage of Children on Child Protection Register with a completed Child Protection Plan	100%	93% 	79%	<b>Performance Narrative:</b> Trend analysis shows improving performance against target, locality specific breakdown notes B&C (100%), H&L (86%), MAKI (100%) and OLI (100%). The net effect of a reduction in the H&L performance against target is singly affecting overall performance
7	The percentage of Adult Protection referrals completed within 5 days	80%	55% 	40%	<b>Performance Narrative:</b> Trend analysis notes that performance for FQ2 (55%) remains significantly below target (80%). There is an increase of (15%) from previous quarter. Area specific date notes MAKI (20), B&C (17), H&L and OLI ( 9)
8	Percentage of PRDs completed for the Health & Social Care Partnership	90%	72% 	64%	<b>Performance Narrative:</b> Locality breakdown notes percentage completion for Adult Care East (27%), Adult Care West (56%), Children & Families and Criminal Justice (90%) and Strategic Planning & Performance (100%).
8	Health & Social Care Partnership Attendance	4.10 Days	5.03 Days 	5 days	<b>Performance Narrative:</b> Current data is only available for HSCP- Social Work staff- further development is required to include NHS Highland data. Locality breakdown notes for B&C (4.94 days), H&L (4.48 days), MAKI (4.93 days) , OLI (5.33 days) and Strategic Planning & Performance (8.09 days)
9	Health & Social Care Partnership Finance				<b>Under Development</b>

#### 4. Waiting Times Performance-FQ2 (19/20)

Argyll & Bute's anticipated performance in terms of the number of patients in breach of consultant waiting times targets for new appointments has been quantified in the NHS Highland Annual Operational Plan (AOP) submitted in March 2019. The AOP was informed by a "demand, capacity, activity, queue" analysis (DCAQ) process which identified the additional capacity that would be required to address average demand on a specialty by specialty basis.

The AOP details a position for each quarter end census point throughout 2019/20 and the following two financial years. There is particular focus on achieving the projected FQ4 19/20 position of 333 outpatients to be in breach of the 12 week target with the 26 week position also subject to scrutiny. This is an interim point to ultimately achieve a zero breaching patient waiting times position as at the end of March 2021.

The HSCP has received £245,000 in 2019/20 to support this activity with 60% of the funding released in the first tranche and the balance to be released if waiting times performance trajectories are met.

Planned inpatient/daycase care is also subject to AOP projections however in general the HSCP is able to meet the 12 week Treatment Time Guarantee (TTG) target that applies within this setting from decision to treat to treatment. For the purposes of the IJB to reassure and demonstrate the improvements made the most up to date activity data for the outpatient position as at end December 2019 is available and has been presented.

#### 4.1 FQ2 Outpatient Waiting Times Performance

The majority of the clinics provided in Argyll and Bute are provided by visiting consultants from NHS GG&C. However, there are some local specialties which are also not meeting waiting times targets at present.

A comparison between the FQ2 position and the AOP figures across all consultant outpatient specialties reporting variances against the 12 week target is detailed below.

##### 12 week target

**618** New Outpatient Appointments at Consultant Led Clinic breaches as at Q2 19/20. This is against a projected AOP forecast figure of 411 (+ 50.4%)

##### 26 week target

**252** New Outpatient Appointments at Consultant Led Clinic breaches as at Q2 19/20. This is against a projected AOP forecast figure of 127 (+ 98.4%)

#### 4.2 FQ3 Outpatient Waiting Times Performance Update

At mid December 2019 we are projecting **346** 12 week outpatient breaching patients against the AOP figure of 382 (- 9.4%) and **112** 26 week breaches against the AOP figure of 103 (+ 8.7%) as at the quarter end.

<b>12 WEEK POSITION</b>	AOP Figure FQ3 19/20	FQ3 Projection as at 18/12/19	Difference
Dermatology	87	28	-59
Ear, Nose & Throat (ENT)	76	62	-14
General Medicine*	16	20	4
General Surgery*	0	4	4
Gynaecology	0	43	43
Ophthalmology	100	10	-90
Oral and Maxillofacial Surgery	10	1	-9
Orthodontics	5	6	1
Paediatrics	0	3	3
Pain Management*	40	80	40
Respiratory Medicine	0	1	1
Trauma and Orthopaedic	48	88	40
<b>Grand Total</b>	<b>382</b>	<b>346</b>	<b>-36</b>

<b>26 WEEK POSITION</b>	AOP Figure FQ3 19/20	FQ3 Projection as at 18/12/19	Difference
Dermatology	20	6	-14
Ear, Nose & Throat (ENT)	13	22	9
General Medicine	0	1	1
General Surgery	0	1	1
Gynaecology	0	0	0
Ophthalmology	36	3	-33
Oral and Maxillofacial Surgery	5	1	-4
Orthodontics	0	0	0
Paediatrics	0	0	0
Pain Management	20	66	46
Respiratory Medicine	0	0	0
Trauma and Orthopaedic	9	12	3
<b>Grand Total</b>	<b>103</b>	<b>112</b>	<b>9</b>

**Note \* - A&B HSCP consultant specialty**

The expected FQ3 position shows significant improvement from FQ2 with the 12 week position having decreased by 44% from the previous quarter. A series of waiting list initiative clinics have been ongoing since September 2019 with notable improvements made in Dermatology and Oral Surgery. AHP triage of the ENT and Orthopaedic lists undertaken by audiology and physiotherapy is facilitating patients to be seen within these settings where appropriate.

Pain management continues to be a significant risk, the consultant who provided this service has left. Service options being examined include locum and support from the Independent Sector. However, this will not be considered without additional recurring funding to maintain a safe service for return patients. This is the service at most risk at present

Increased funding will be apportioned to increase Gynaecology capacity and internal transformational work alongside tightened data quality procedures will address patients breaching in General Medicine and General Surgery. The HSCP is working closely with NHS Highland on preparing its funding requirements for 2020/21 to put in place sustainable service provision

## **4. GOVERNANCE IMPLICATIONS**

### **4.1 Financial Impact**

There are a number of National Health & Wellbeing Outcome Indicators (NHWBOI's) and Waiting Times Performance which support the quality and financial performance of the HSCP including productivity, value for money and efficiency.

### **4.2 Staff Governance**

A number of the National Health & Wellbeing Outcome Indicators (NHWBOI's) indicators under outcome 9 and the Waiting Times Performance are pertinent for staff governance purposes

### **4.3 Clinical Governance**

A number of the National Health & Wellbeing Outcome Indicators (NHWBOI's) and Waiting Times Performance support the assurance of health and care governance and should be considered alongside that report

## **5. EQUALITY & DIVERSITY IMPLICATIONS**

The National Health & Wellbeing Outcome Indicators (NHWBOI's) and Waiting Times Performance help provide an indication on progress in addressing health inequalities

## 6. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

None

## 7. RISK ASSESSMENT

None

## 8. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

None

## 9. CONCLUSIONS

It is recommended that the Integration Joint Board/committee:

Note overall scorecard performance for the FQ2 19/20 reporting period with regards to the National Health and Well Being Outcome Indicators and Waiting Times Performance

## 10. DIRECTIONS

Directions required to Council, NHS Board or both.	<b>Directions to:</b>	tick
	No Directions required	x
	Argyll & Bute Council	
	NHS Highland Health Board	
	Argyll & Bute Council and NHS Highland Health Board	

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## Appendix 1- A&B HSCP Benchmark HWBOI Performance (FQ2-19/20)

The table below identifies the most recent SOURCE performance data with regards to Argyll & Bute HSCP, benchmarked partnership\* performance, and the Scotland-wide performance against the 9 HWBOI's and their 23 sub-indicators.

Indicator	Title	Argyll & Bute	Angus	East Lothian	Highland	Midlothian	Moray	Scot Borders	Stirling	Scotland
NI - 1	Percentage of adults able to look after their health very well or quite well	93%	95%	94%	94%	92%	93%	94%	94%	93%
NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible	79%	76%	72%	86%	86%	83%	83%	84%	81%
NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided	76%	71%	68%	79%	80%	75%	74%	73%	76%
NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated	72%	71%	66%	76%	71%	73%	75%	76%	74%
NI - 5	Total % of adults receiving any care or support who rated it as excellent or good	80%	77%	75%	83%	71%	80%	83%	79%	80%
NI - 6	Percentage of people with positive experience of the care provided by their GP practice	85%	78%	80%	87%	76%	80%	88%	86%	83%
NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	74%	77%	75%	86%	73%	79%	80%	81%	80%
NI - 8	Total combined % carers who feel supported to continue in their caring role	33%	34%	36%	38%	32%	39%	36%	38%	37%
NI - 9	Percentage of adults supported at home who agreed they felt safe	83%	80%	81%	84%	79%	84%	86%	88%	83%
NI - 10	Percentage of staff who say they would recommend their workplace as a good place to work	NA	NA	NA	NA	NA	NA	NA	NA	NA

Indicator**	Title		Angus	East Lothian	Highland	Midlothian	Moray	Scot Borders	Stirling	Scotland
NI - 11	Premature mortality rate per 100,000 persons	393	350	333	402	409	394	388	353	<b>432</b>
NI - 12	Emergency admission rate (per 100,000 population)	12,734	11,070	10,061	10,869	11,072	8,965	12,423	9,695	<b>12,259</b>
NI - 13	Emergency bed day rate (per 100,000 population)	114,539	101,329	100,122	107,946	119,404	90,596	132,370	101,658	<b>118,462</b>
NI - 14	Readmission to hospital within 28 days (per 1,000 population)	83	104	99	113	109	77	109	104	<b>103</b>
NI - 15	Proportion of last 6 months of life spent at home or in a community setting	90%	91%	88%	90%	87%	90%	86%	89%	<b>88%</b>
NI - 16	Falls rate per 1,000 population aged 65+	26	25	19	15	18	15	19	22	<b>22</b>
NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	74%	83%	84%	86%	87%	82%	79%	92%	<b>82%</b>
NI - 18	Percentage of adults with intensive care needs receiving care at home	68%	56%	61%	55%	68%	68%	62%	64%	<b>62%</b>
NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	640	314	641	1,248	1,323	1,063	761	540	<b>793</b>
NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	24%	23%	21%	21%	23%	20%	21%	23%	<b>24%</b>
NI - 21	Percentage of people admitted to hospital from home during the year, who are discharged to a care home	NA	NA	NA	NA	NA	NA	NA	NA	<b>NA</b>
NI - 22	Percentage of people who are discharged from hospital within 72 hours of being ready	NA	NA	NA	NA	NA	NA	NA	NA	<b>NA</b>
NI - 23	Expenditure on end of life care, cost in last 6 months per death	NA	NA	NA	NA	NA	NA	NA	NA	<b>NA</b>

\*Improvement Service Benchmarking Family Groupings for Children, Social Work and Housing Indicators

\*\* Latest Data based on ISD Core Suite of Integration Indicators Standards as at Jun 2019 and may be impacted by data completeness.

## Appendix 2- Health & Wellbeing Outcome Indicators- Success Measures for FQ2 (19/20)

Performance element	Status	Target	Actual	Owner
NI-1 - % of adults able to look after their health very well or quite well (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 93.0 %	FQ2 19/20 93.0 %	Julie Lusk
NI-3 - % of adults supported at home who agree they had a say in how their support was provided (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 76.0 %	FQ2 19/20 76.0 %	Caroline Cherry
NI-13 - Emergency Admissions bed day rate (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 30,800	FQ2 19/20 20,444	Elizabeth Higgins
NI-16 - Falls rate per 1,000 population aged 65+ (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 5	FQ2 19/20 4	Caroline Cherry
A&B - % of Total Telecare Service Users with Enhanced Telecare Packages (Telehealthcare)	●	FQ2 19/20 31.0 %	FQ2 19/20 44.1 %	Stephen Whiston
MSG 1.1 - Number of emergency admissions - A&B (MSG Indicators 2019)	●	FQ2 19/20 2,142	FQ2 19/20 1,807	Elizabeth Higgins
MSG 2.1 - Number of unplanned bed days acute specialties - A&B (MSG Indicators 2019)	●	FQ2 19/20 14,172	FQ2 19/20 12,021	Caroline Cherry
NI-5 - % of adults receiving any care or support who rate it as excellent or good (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 80.0 %	FQ2 19/20 85.0 %	Julie Lusk
NI-6 - % of people with positive experience of their GP practice (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 83.0 %	FQ2 19/20 85.0 %	Julie Lusk
CA72 - % LAAC >1yr with a plan for permanence (C&F Placement Process)	●	FQ2 19/20 81.0 %	FQ2 19/20 82.8 %	Alex Taylor

NI-12 - Rate of emergency admissions per 100,000 population for adults (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 3,065	FQ2 19/20 1,951	Elizabeth Higgins
NI-14 - Readmission to hospital within 28 days per 1,000 admissions (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 99	FQ2 19/20 54	Caroline Cherry
MSG 5.1 - % of last six months of life by setting community & hospital - A&B (MSG Indicators 2019)	●	FQ2 19/20 88.2 %	FQ2 19/20 89.9 %	Caroline Cherry
NI-11 - Rate of premature mortality per 100,000 population (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 432	FQ2 19/20 393	Julie Lusk
NI-17 - % of SW care services graded 'good' '4' or better in Care Inspectorate inspections (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 83.0 %	FQ2 19/20 84.1 %	Caroline Cherry
CPC01.4.4 - % Waiting time from a patient's referral to treatment from CAMHS (C&F Plans - PIs)	●	FQ2 19/20 90.0 %	FQ2 19/20 92.0 %	Alex Taylor
NI-9 - % of adults supported at home who agree they felt safe (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 83.0 %	FQ2 19/20 83.0 %	Caroline Cherry
CP43 - No of Child Protection Repeat Registrations - 18 months (Child Protection)	●	FQ2 19/20 0	FQ2 19/20 0	Alex Taylor
CJ63 - % CPO cases seen without delay - 5 days (Supervision of Offenders)	●	FQ2 19/20 80.0 %	FQ2 19/20 90.0 %	Alex Taylor
A&B - % of Adult Protection referrals that lead to AP Investigation (Adult Protection)	●	FQ2 19/20 5.0 %	FQ2 19/20 6.6 %	Julie Lusk
A&B - % of complaints (Stage 2) responded within timescale (Clinical Governance - HSCP)	●	FQ2 19/20 20.0 %	FQ2 19/20 23.8 %	Elizabeth Higgins

NI-10 - % of staff who say they would recommend their workplace as a good place to work (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 67.0 %	FQ2 19/20 71.0 %	Jane Fowler
NI-15 - Proportion of last 6 months of life spent at home or in a community setting (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 89.0 %	FQ2 19/20 93.0 %	Caroline Cherry
NI-18 - % of adults with intensive needs receiving care at home (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 62.0 %	FQ2 19/20 68.0 %	Julie Lusk
NI-20 - % of health & care resource spend on hospital stays where patient admitted in an emergency (Health & Wellbeing Outcome Indicators)	●	FQ2 19/20 24.0 %	FQ2 19/20 18.0 %	Judy Orr
MSG 4.1 - Number of DD bed days occupied - A&B (MSG Indicators 2019)	●	FQ2 19/20 2,151	FQ2 19/20 2,018	Caroline Cherry