

Clinical & Care Governance Committee

Agenda item:

Date of Meeting: 26th October 2022

Title of Report: Health & Social Care Partnership- Performance Report (Nov 2022)

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

The Clinical & Care Governance Committee is asked to:

- Acknowledge performance against target with regards to the Outpatient & Inpatient Long Waiting Times for November and previous month.
- Note the performance with regards to the Treatment Time Guarantee (TTG) - Inpatient/Day Case Waiting List
- Note the update with regards to progress with the development of the Integrated Performance Management Framework(IPMF)
- Acknowledge Delayed Discharge performance and forecasting
- Acknowledge progress against CAMHS & Psychological Therapies 18 week LDP standard

EXECUTIVE SUMMARY

New Key Performance Indicators (KPI's) have been established in relation to long waiting times across both inpatient and outpatient specialities for 2022, 2023 & 2024. This report details current performance against the new targets building on previous remobilisation performance. In addition this report also focusses on performance with regards to Treatment Time Guarantee (TTG), Delayed Discharge and CAMHS/Psychological Therapies 18 Week Local Delivery Plan (LDP) Standards with an update on the Integrated Performance Management Framework (IPMF).

1. INTRODUCTION

This report details performance against the six new targets set for reducing Long Waiting Times across Scotland, the focus of which is to eliminate:

- two year waits for outpatients in most specialities by the end of August 2022
- 18 month waits for outpatients in most specialities by the end of December 2022
- one year waits for outpatients in most specialities by the end of March 2023
- two years waits for inpatient/day cases in the majority of specialities by September 2022
- 18 month waits for inpatient/day cases in the majority of specialities by September 2023
- one year for inpatient/day cases in the majority of specialities by September 2024

2. DETAIL OF REPORT

The report details performance for November 2022 with regards to the Health & Social Care Partnership, Greater Glasgow & Clyde and NHS Highland.

3. RELEVANT DATA & INDICATORS

4.1 Long Waiting Times Performance

The table below details current performance against Long Waiting Times targets for August and September 2022 and is extracted from New Outpatient Monthly Management Information. The RAG (Red, Amber & Green) status bar identifies performance against current and future targets.

Performance Indicator	Target	August 2022 (Actual)	September 2022 (Actual)	RAG
Eliminate two year waits for outpatients in most specialities by the end of August 2022	0	0	0	Green
Eliminate 18 month waits for outpatients in most specialities by the end of December 2022	0	3	3	Amber
Eliminate one year waits for outpatients in most specialities by the end of March 2023	0	6	4	Amber
Eliminate two years waits for inpatient/day cases in the majority of specialities by September 2022	0	0	0	Green
Eliminate 18 month waits for inpatient/day cases in the majority of specialities by September 2023	0	0	0	Green
Eliminate one year for inpatient/day cases in the majority of specialities by September 2024	0	0	0	Green
Total Waits	0	9	7	

(MMI Data- August & September 2022)

The table below identifies the new outpatient speciality waits greater than 1 Year as at 4th September 2022.

Specialities	>1Yr	>18 Months	>2 yrs.	Total
Endoscopy	1	1	0	2
Gynaecology	0	1	0	1
Neurology	1	0	0	1
Pain Management	1	1	0	2
Trauma and Orthopaedic	1	0	0	1
Total Waits	4	3	0	7

(MMI Data- 4th September 2022)

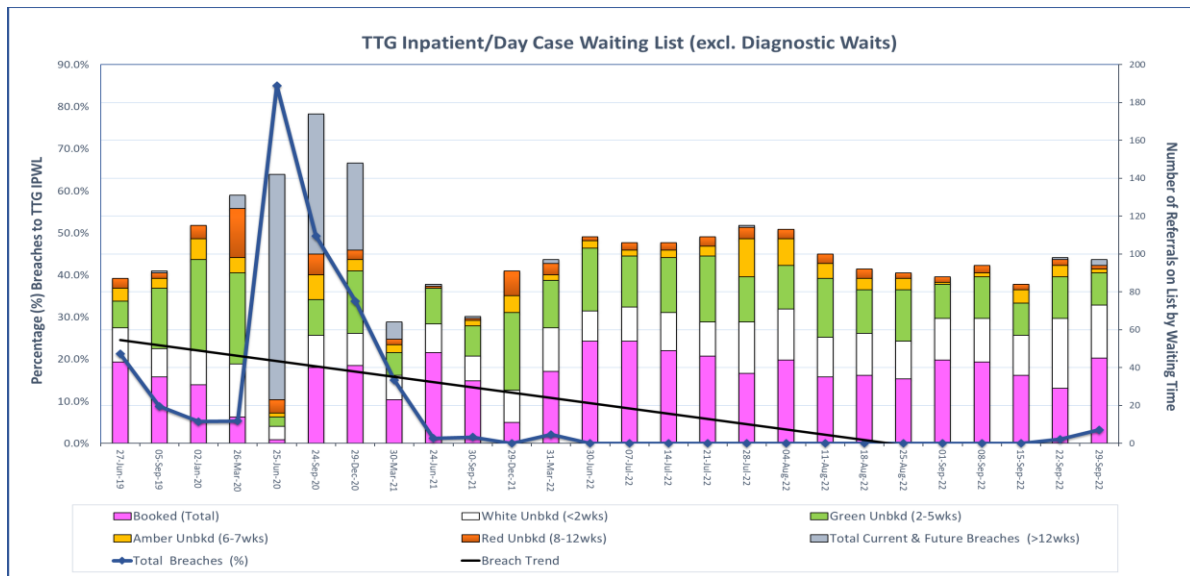
Performance Assessment:

- There are no waits estimated longer than 2 years for current Consultant and Nurse led specialities against a (0) target by August 2022
- With regards to waits longer than 18 months data for September note 3 waits, 1 Endoscopy, 1 Gynaecology and 1 Pain Management for consecutive months against a target of (0) by December 2022
- Performance with regards to outpatients waits exceeding 1 year note (6) August against a reduction of (4) in September, this equates to an overall 40% reduction against the target of (0) for March 2023

4.5 Treatment Time Guarantee (TTG) - Inpatient/Day Case Waiting List

Argyll & Bute Inpatient/Day Case Activity

The graph below identifies current performance with regards to Inpatient /Day Case -12 week breaches and current overall performance as at 4th August 2022 in Argyll and Bute at LIH, Oban



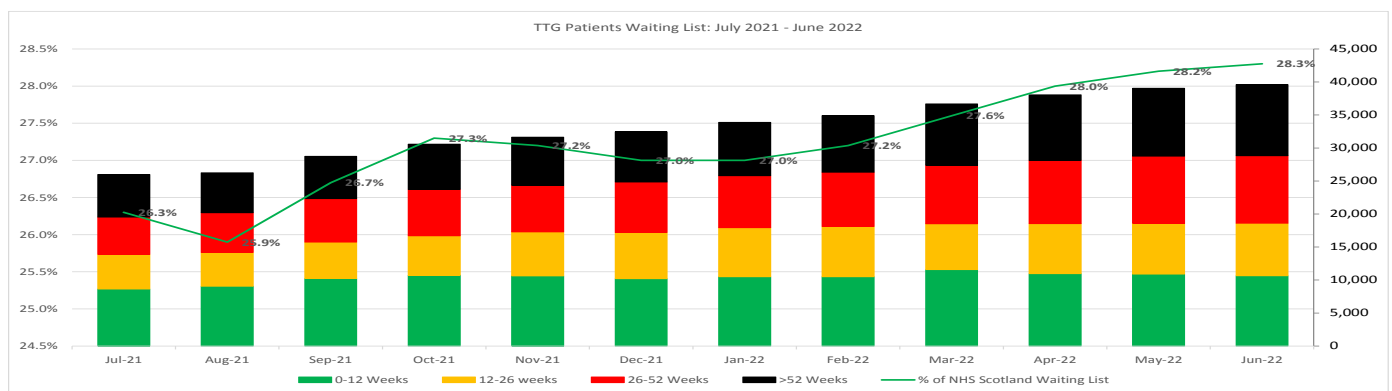
(TTG Performance Report- 4th August 2022)

Performance Assessment:

- Currently 3 breaches with regards to TTG Inpatient/ Day Case waits greater than 12 weeks
- For September (47.4%) booked appointment performance has seen a 9.6% increase at the same time on the previous month August (37.8%)
- NHS Highland Board performance is noted in both **Appendix 1 & 2**

Greater Glasgow & Clyde

The graph below identifies TTG Inpatient/Daycase Patient Waiting Times by Length of Wait (July 2021 – June 2022)



(Greater Glasgow & Clyde Performance Assurance Information- August 2022)

Performance Assessment:

- At the end of June 2022, there were 39,595 patients on the overall waiting list. Of this total 10,776 patients were waiting >1 year, 5,419 were waiting >18 months and 2,810 were waiting >2 years. Targets have recently been set for long waiting patients in each of these time

bands including no patients waiting >104 weeks by end of September 2022 and no patients waiting >78 weeks by September 2023. Local management information shows a further reduction in the number of patients waiting >2 years in that there are currently 2,519 patients waiting >104 weeks as at 27 July 2022.

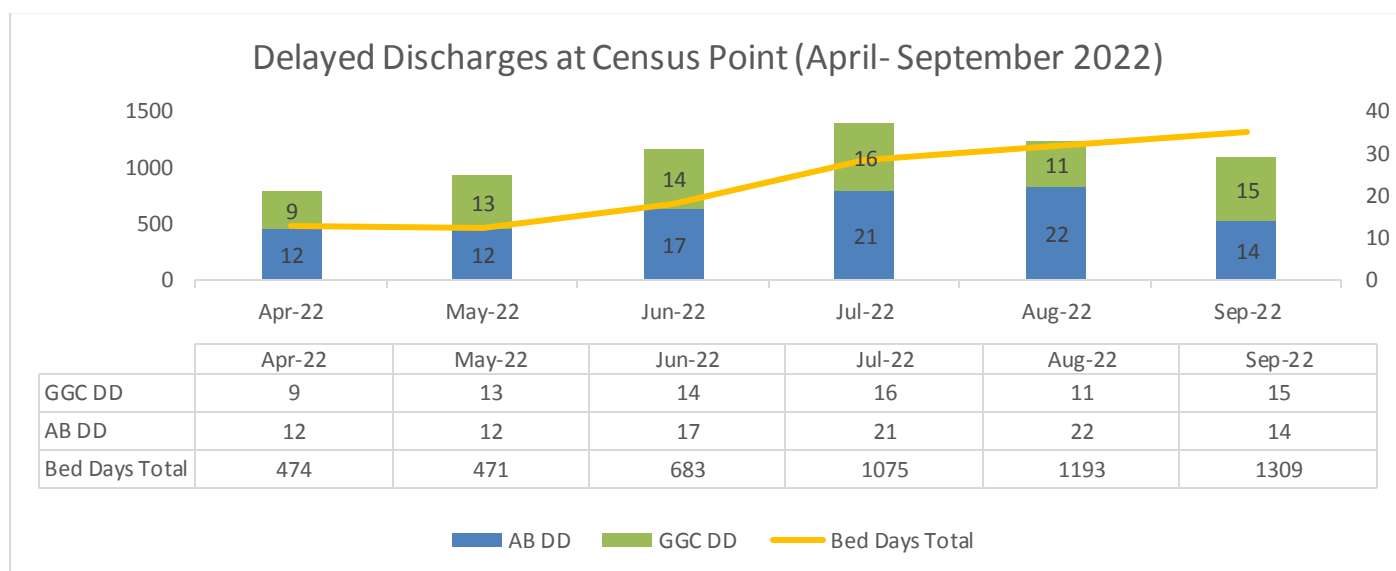
- Currently 29.9% of the over 12 week’s national waiting list at the end of June 2022.
(Trajectories are currently being developed for the new planned care targets that have been set.)
- There are a number of challenges in the adult pathway around Orthopaedics, Urology and Neurosurgery (Spinal) and within paediatrics there are challenges within Ear Nose and Throat and Paediatric Surgery. There is a risk that the targets will not be met without additional capacity.

4.6 Integrated Performance Management Framework (IPMF) Update

- IPMF Development Sessions have been completed with all Service Leads and Heads of Service
- Work for October will focus on bringing together the draft KPI’s to form the first iteration of the performance dashboard- analyst will be engaging with Heads of Service and Service Leads to further refine and finalise indicators.
- Target setting will be across November and December with the first draft presented to the Senior Leadership Team in January 2023

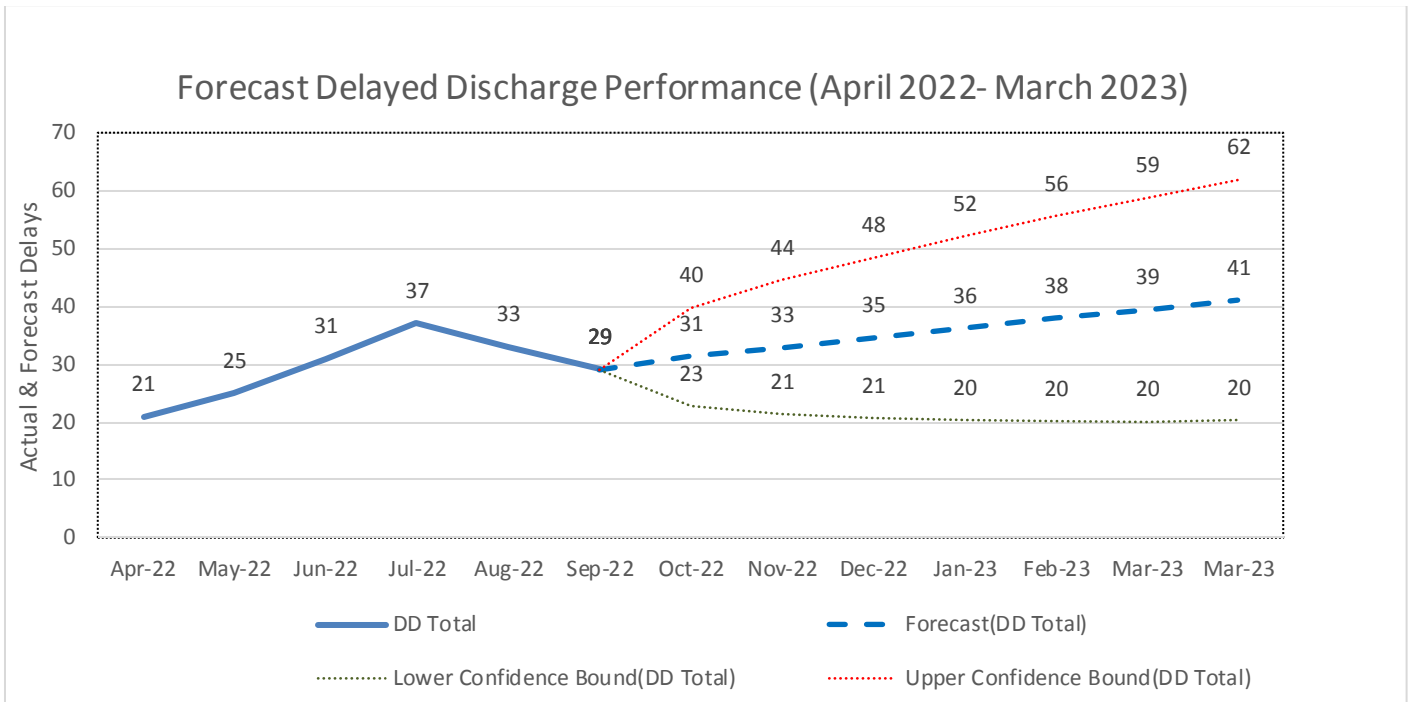
5. Delayed Discharge

The table below notes performance with regards to the total monthly delays and associated bed days occupied, the local target is 12 and the national target is 0 delays, the data below includes the breakdown of HSCP and Greater Glasgow & Clyde Hospital delays.



(Weekly DD Census Reporting April- September 2022)

The data forecasting table below identifies the current total delays data and projects this forward for the rest of the financial year with up and below trend modelling.



(Weekly DD Census Reporting April- September 2022- Excel Forecast Data Smoothing Algorithm)

Performance Assessment:

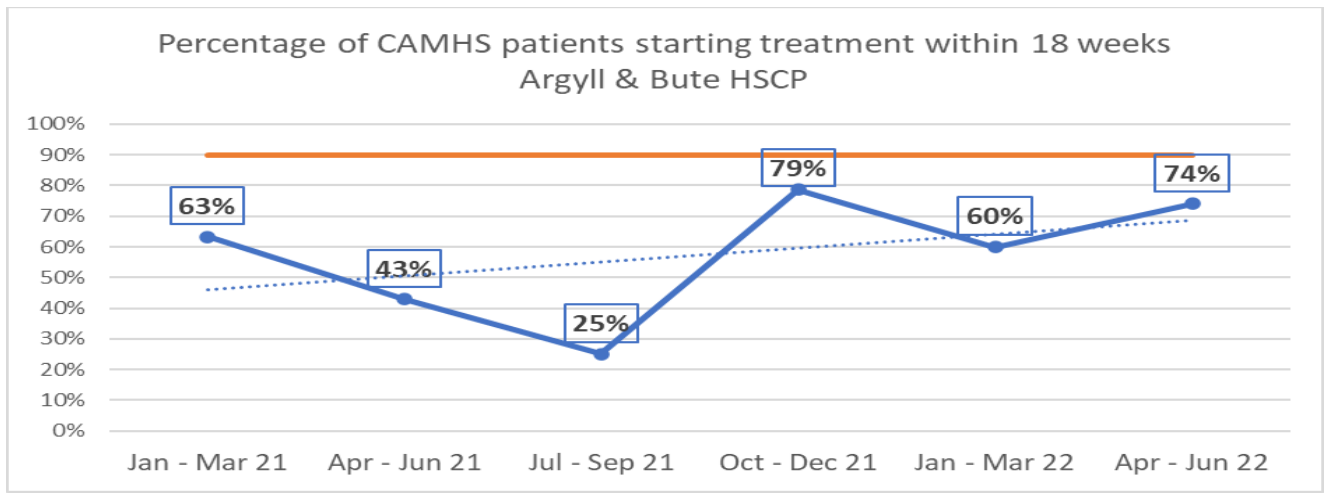
- Performance against the local monthly target of 12 remains consistently above, for both delays in Argyll & Bute Hospitals and Greater Glasgow Hospitals. Alongside this, the data notes that bed days occupied by those delays has significantly increased month on month.
- From April (474) the beds days occupied has seen a 94% increase as at September (1309), effectively identifying that more people are being delayed in hospital for longer
- Argyll & Bute specific delays have an average number of delays (16) this is against an average number of delays for GG&C (13)
- Forecast performance notes the potential for an increasing trend using the current data projected forward to March 2023. This is in-turn modelled against upper and lower confidence boundaries to show a better and worse case scenario, this is not definitive but designed to identify potential future performance informed by actual monthly data.

6. CHILD & ADOLESCENT MENTAL HEALTH & PSYCHOLOGICAL THERAPIES

6.1 CAMHS Waiting Time Performance

Completed Waits

The table below identifies the quarterly percentage of patients starting treatment within 18 weeks from Jan 2021 to June 2022



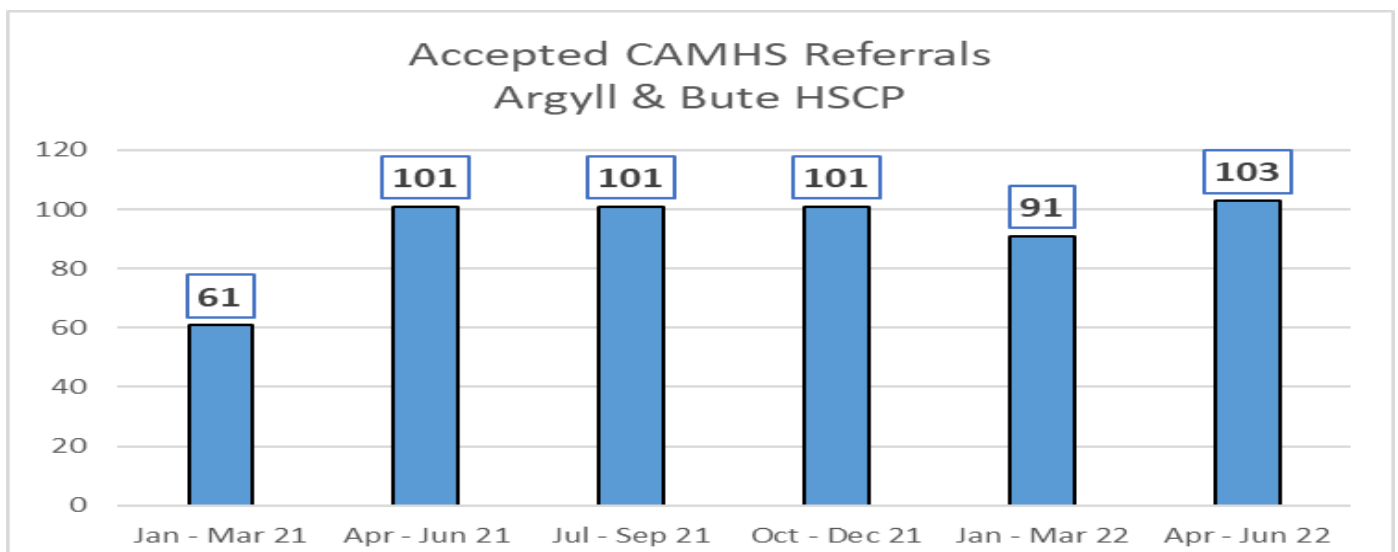
(TrakcarePMS & manual team data collection via NHS Highland)

Performance Assessment:

- For the quarter ending June 2022, 74% of patients were seen within 18 weeks of referral, an increase from 60% in the previous quarter ending March 2022 and an increase from 43% in the same quarter ending June last year.
- Performance against the 90% target continues to improve. September 2022 data is yet to be released but indications from July and August look to be consistent around circa 70%.
- The number starting treatment has remained relatively consistent at an average of 30 patients per quarter.

Referral Rates

The table below identifies the quarterly number of accepted CAMHS referrals January 2021 to June 2022



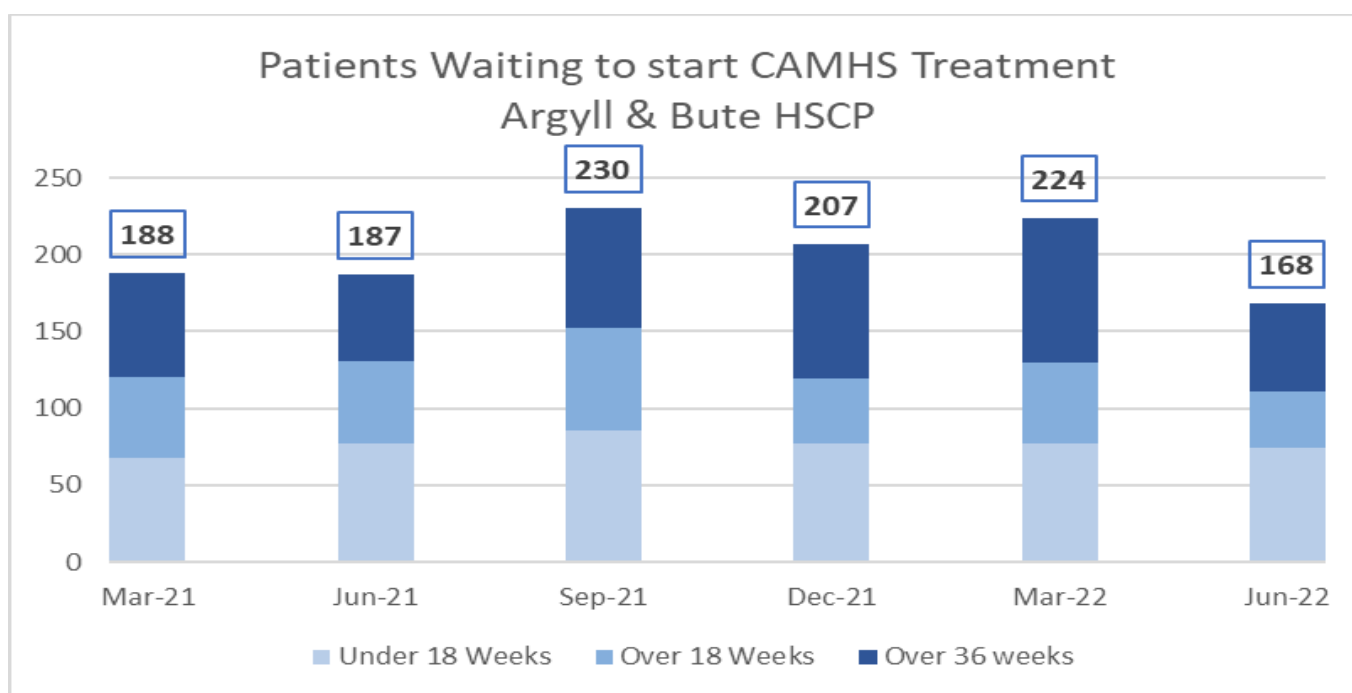
(TrakcarePMS & manual team data collection via NHS Highland)

Performance Assessment:

- 103 patients were referred to CAMHS in the quarter ending June 2022, the referral rate up to and including August 2022 remains steady and shows a slight increase from 2021.

Ongoing Waits

The table below identifies the number of patients each quarter waiting to start CAMHS treatment, March 2021 to June 2022



(TrakcarePMS & manual team data collection via NHS Highland)

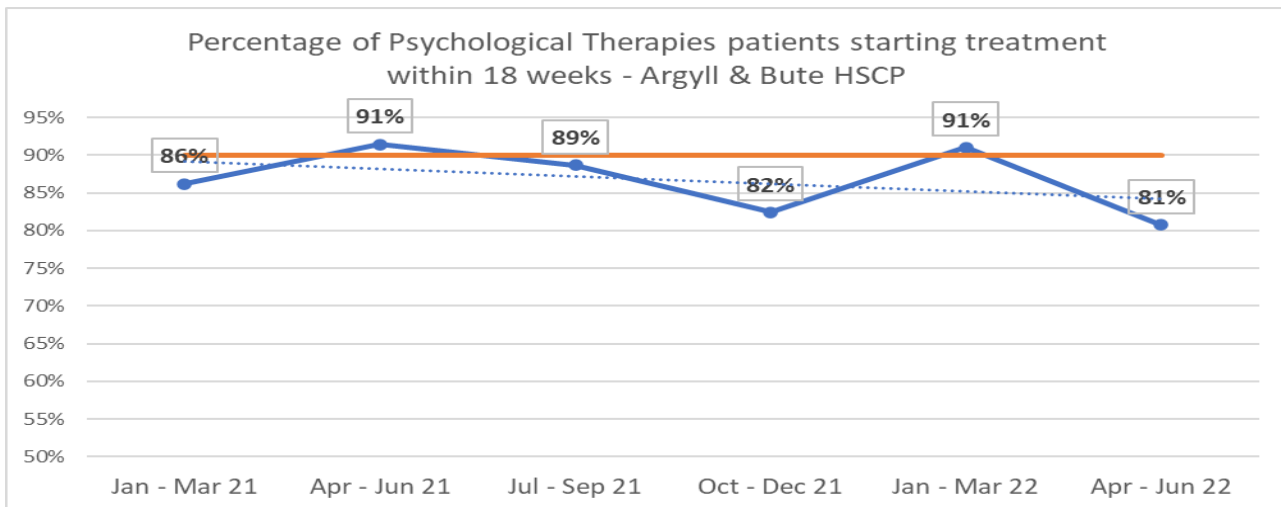
Performance Assessment:

- 168 patients were waiting to start treatment as at June 2022, a 25% reduction in waiting list size from the quarter ending March 2022. Around half of all those waiting have waited longer than 18 weeks and this has been the case since the beginning of 2021.
- The number waiting over 36 weeks has decreased by 40% from the previous quarter and looks to be continuing to improve.
- August 2022 data indicates that the longest waiting patients are being tackled/data quality exercises to cleanse the list may be ongoing. The service is now wholly on the TrakcarePMS system which will help with this going forward.

6.2 Psychological Therapies Waiting Time Performance

Completed Waits

The table below identifies the quarterly percentage of patients starting treatment within 18 Weeks from January 2021 to June 2022



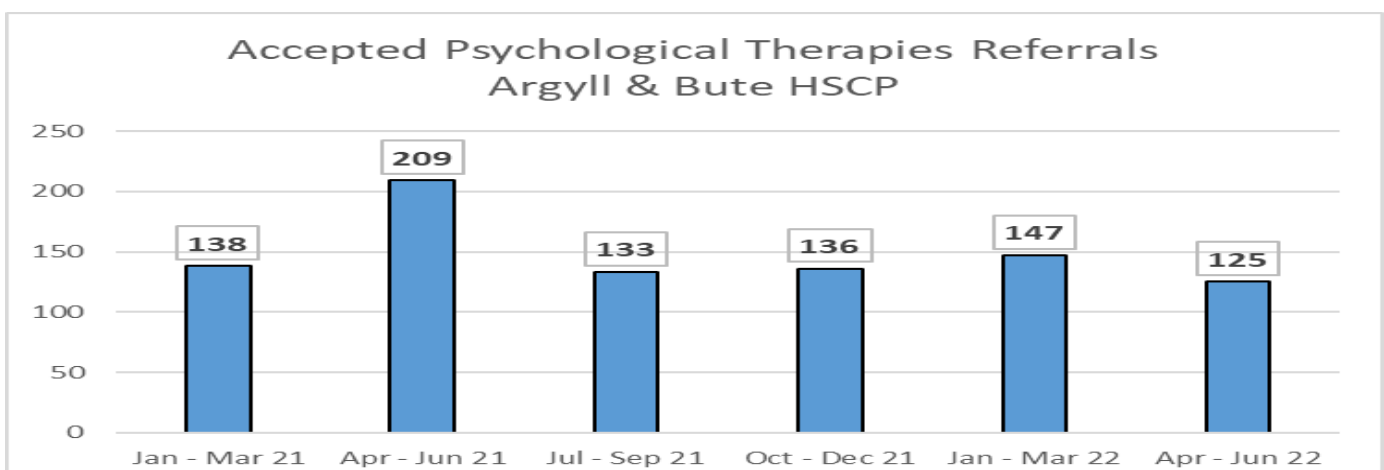
(TrakcarePMS & manual team data collection via NHS Highland)

Performance Assessment:

- For the quarter ending June 2022 81% of patients were seen within 18 weeks of referral, a decrease from 91% in the previous quarter ending March 2022 and from 91% in the same quarter ending June last year. There was a slightly smaller number of patients starting treatment this quarter, possibly due to clinician summer leave etc, and as such percentage attainment can show greater variation due to small sample size.
- September 2022 data is yet to be released but July and August data indicate close to 100% compliance with the 18 week target.
- On average the numbers starting treatment has remained constant at around 90 patients per quarter.

Referral Rate

The table below identifies the number of quarterly referrals accepted for Psychological Therapies from January 2021 to June 2022

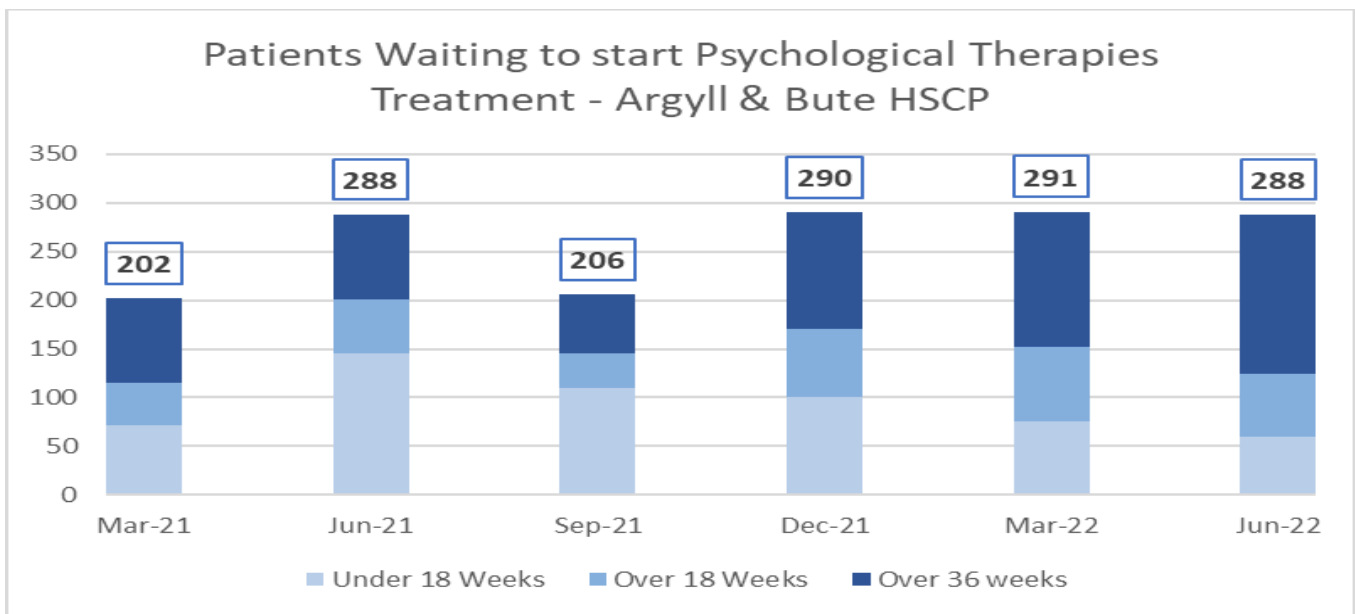


Performance Assessment:

- 125 patients were referred to Psychological Therapies in the quarter ending June 2022, the referral rate up to and including August 2022 remains steady and shows a slight decrease from 2021.

Ongoing Waits

The table below identifies the quarterly number of patients waiting to start Psychological Therapies from March 2021 to June 2022



Performance Assessment:

- 288 patients were waiting to start treatment as at June 2022 and the waiting list size has been around this level since the beginning of the year and shows an increase since 2021.
- Although performance against the 90% target is positive, waiting times experienced by those yet to be seen have increased with 79% of all those on the list waiting 18 weeks and above, an increase from circa 50% during 2021.
- 57% of all those waiting to be seen have waited over 36 weeks and the number of longest waiting patients continues to rise, this trend is also consistent with the August 2022 data.
- The service continues to work on waiting list prioritisation to ensure patients are being booked in order of length of wait.

7. CONTRIBUTION TO STRATEGIC PRIORITIES

The monitoring and reporting of performance with regards to Argyll & Bute HSCP, Greater Glasgow & Clyde and NHS Highland ensures the HSCP is able to deliver against key strategic priorities.

8. GOVERNANCE IMPLICATIONS

8.1 Financial Impact

Performance data is required in order to evidence service level performance and activity in line with cost and service efficiency as well as evidence the impact of additional funding provided to reduce waiting times.

8.2 Staff Governance

There has been a variety of staff governance requirements identified and continue to be progressed and developed include health and safety, wellbeing and new service redesign and working practices.

8.3 Clinical Governance

Clinical Governance and patient safety remains at the core of prioritised service delivery against the National Health & Wellbeing Outcomes Indicators (**Appendix 3**)

9. PROFESSIONAL ADVISORY

Data used within this report is a snapshot of a month and data period, where possible data trends and forecasting are identified to give wider strategic context.

10. EQUALITY & DIVERSITY IMPLICATIONS

EQIA not required

11. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

Data use and sharing within this report is covered within the A&B & NHS Highland Data Sharing Agreement

12. RISK ASSESSMENT

Risks and mitigations associated with performance data sources and reporting are managed and identified within the monthly Performance & Improvement Team- Work Plan

13. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

Not applicable with regard to this performance report, but access to this report for the public is via Argyll and Bute Council and NHS Highland websites.

14. CONCLUSION

The Clinical Care Governance Board is asked to consider the transitional work ongoing with regards to the new Long Wait performance indicators focussed on continuing to improve long waiting times across Scotland. Work continues in the development of the Integrated Performance Management Framework of the HSCP. Current Delayed Discharge performance with forecasting ahead of Winter Pressures is also presented.

15. DIRECTIONS

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

REPORT AUTHOR AND CONTACT

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Appendix 1- Board Level KPI's – 26th September 2022

Board Level KPIs Summary

	26 September 2022								
	OPWL - waiting over 12 weeks	Core 4 hour ED Performance (week)	Patients Spending over 8 hours in core ED (week)	Patients Spending over 12 hours in core ED (week)	Core ED Attendances (week)	Delayed Discharges (total)	TTG - patients waiting over 12 weeks	TTG - patients waiting over 26 weeks	OPWL - waiting over 26 weeks
SCOTLAND	255,127	66.3%	2,960	1,149	25,975	0	98,705	69,640	131,812
Ayrshire & Arran	27,457	67.4%	287	197	1,820	0	6,042	4,337	17,018
Borders	6,907	74.3%	32	14	557	0	1,936	1,372	4,125
Dumfries & Galloway	4,894	72.5%	81	43	1,021	0	1,871	787	1,736
Fife	12,928	55.9%	227	101	1,289	0	2,685	1,123	5,633
Forth Valley	7,307	39.2%	346	199	1,121	0	1,985	867	2,251
Grampian	20,245	62.4%	216	48	1,977	0	13,364	9,656	11,078
Greater Glasgow & Clyde	80,791	70.3%	509	79	6,470	0	29,195	22,017	44,327
Highland	12,103	76.8%	77	15	1,281	0	5,329	3,950	6,592
Lanarkshire	26,413	58.1%	504	168	3,710	0	8,168	6,157	11,655
Lothian	42,464	62.7%	672	283	4,645	0	19,401	13,846	21,844
Orkney	378	91.2%	0	0	137	0	116	46	82
Shetland	311	93.5%	0	0	184	0	119	57	71
Tayside	12,720	87.5%	9	2	1,655	0	7,662	5,070	5,360
Western Isles	185	96.3%	0	0	108	0	188	81	35
Grampian as a % of Scotland		7.30%	4.18%	7.61%		13.63%	13.92%	7.94%	8.40%
Highland as a % of Scotland		2.60%	1.31%	4.93%		5.43%	5.69%	4.74%	5.00%
Tayside as a % of Scotland		0.30%	0.17%	6.37%		7.81%	7.31%	4.99%	4.07%

Appendix 2- Proportion of Outpatients Waiting Over 12 Weeks by Health Board (26th September 2022)



Appendix 3- Health & Wellbeing Outcome Indicators (HWBOI's) - September 2022

Core Suite of Integration Indicators - Annual Performance

Important: Please read the following notes carefully prior to using the figures provided in this worksheet.

The rates presented below relate to the year for which data is most recently available and generally complete for most areas. The individual indicators contain more specific information.

Select Partnership of Residence

Argyll and Bute ▼

Indicator	Title	Partnership rate	Scotland rate	Year of latest data	
Outcome indicators	NI - 1	Percentage of adults able to look after their health very well or quite well	90.8%	90.9%	2021/22
	NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible	75.0%	78.8%	
	NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided	66.9%	70.6%	
	NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated	66.0%	66.4%	
	NI - 5	Percentage of adults receiving any care or support who rate it as excellent or good	68.6%	75.3%	
	NI - 6	Percentage of people with positive experience of care at their GP practice	77.6%	66.5%	
	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	76.7%	78.1%	
	NI - 8	Percentage of carers who feel supported to continue in their caring role	38.0%	29.7%	
	NI - 9	Percentage of adults supported at home who agreed they felt safe	76.4%	79.7%	
	NI - 10	Percentage of staff who say they would recommend their workplace as a good place to work	NA	NA	
Data indicators	NI - 11	Premature mortality rate per 100,000 persons	386	466	2021
	NI - 12	Emergency admission rate (per 100,000 population)	12,139	11,641	2021/22
	NI - 13	Emergency bed day rate (per 100,000 population)	108,810	111,293	2021/22
	NI - 14	Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges)	89	106	2021/22
	NI - 15	Proportion of last 6 months of life spent at home or in a community setting	90.8%	89.8%	2021/22
	NI - 16	Falls rate per 1,000 population aged 65+	29.8	22.9	2021/22
	NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	80.0%	75.8%	2021/22
	NI - 18	Percentage of adults with intensive care needs receiving care at home	71.9%	64.9%	2021
	NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	584	761	2021/22
	NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	22.5%	24.2%	2019/20
	NI - 21	Percentage of people admitted to hospital from home during the year, who are discharged to a care home	NA	NA	NA
	NI - 22	Percentage of people who are discharged from hospital within 72 hours of being ready	NA	NA	NA
	NI - 23	Expenditure on end of life care, cost in last 6 months per death	NA	NA	NA