



Western Health
and Social Care Trust

PERFORMANCE REPORT JANUARY – MARCH 23 & 2022/23 END OF YEAR REPORT

Trust Board – 8th June 2023

Context

This report provides an update for Acute and Community Services on progress at the end of Quarter 4 (January to March 23) and the 2022/23 End of Year position for the full SDP period (July 22 – March 23). Information is provided on the Trust's performance against:

- Activity target set out in the 2022/23 HSC Service Delivery Plan (SDP); and
- Access targets within the Ministerial standards, as set out in the last Commissioning Plan Direction (CPD).

SDP targets are "RAG" rated by SPPG, who apply an allowed variance of 5%, when comparing actual performance with expected performance, this is assessed in line with the RAG key below.

less than -5%
between -5% and -1%
between 0% and 5%
greater than 5%

The report also provides a look forward to 2023/24 in each section, where targets for the year ahead have been set.

Executive Summary

The 2022/23 cumulative position (July 22 to March 23) showed the Trust reporting the lowest number of areas in the SDP as "Red"; thereby the best performing Trust over the course of the 9 months covered by the SDP period. However, in the month of March 23, the Trust had the highest number of metrics reported as red across Trusts, which shows how challenging it continues to be to rebuild services.

The RAG assessment of Western Trust actual performance against the SPPG expected targets for March 23 and the 2022/23 cumulative position (July 22 to March 23) is set out in the table on Page 3. The focus of this report will be the cumulative position for the 2022/23 SDP.

Service areas where the cumulative end of year performance met or exceeded the SDP target includes:

Hospital Services

- Cancer activity delivered (14 and 62 Day pathways)
- Cancer 31 Day - access performance
- Red Flag Referrals – 1st Outpatient appointment
- Inpatient / Day case activity delivered (combined)
- Endoscopy activity delivered
- Imaging – MRI & CT activity delivered
- Cardiac – MRI, CT & Cath Labs activity delivered

Community Services

- Domiciliary Care activity delivered
- Children's Services (IFA & Held within 15 Days)
- Mental Health activity delivered
- District Nursing – Contacts delivered

Service areas where the cumulative end of year performance is more than 5% below the SDP target (and rated "Red") includes:

Hospital Services

- Cancer activity delivered (31 Day pathway)
- Cancer access performance (62 Day pathway)
- Cardiac Services - Echo activity delivered
- Unscheduled Care (Weekend Discharge Rates & Length Of Stay)

Community Services

- Adult Social Care – Adult Day Care activity delivered
- Child Protection Case Conferences (6 months),
- Stroke (Thrombolysis and % Admitted less than 4 hours)
- Community Dental activity delivered (Contacts & General Anaesthetic procedures)

Appendix 1 provides a detailed assessment of the Quarters 2 to 4 (cumulative July 22 to March 23), the SPPG expected target and the performance or activity delivered for each service area. These are the accepted suite of targets and performance measures in place during 22/23, against which The Trust is held to account.

Appendix 2 provides an overview of the Trusts performance against the Ministerial standards/Commissioning Plan Direction Targets. The March 23 or Cumulative 2022/23 (12 month position) and associated RAG out turn is also provided. The Trust continues to formally report on this suite of targets, but they do not form part of the formal accountability processes with the Trust. They are nevertheless important to place in front of Trust Board as part of the year-end report.

SDP OVERALL RAG ASSESSMENT (March 23 & 2022/23 Cumulative Performance)

WESTERN TRUST	Red	Amber	Green	Blue	Variation in RAG	2022/23 Cumulative RAG
Adult Day Care					↔	
Adult Short Breaks	Q4 position to be reported in May					TBC
Domiciliary Care Hours					↑	
Children's Social Care - IFA					↔	
Child Protection <15 days					↔	
Child Protection <3 months					↓	
Child Protection <6 months					↔	
Mental Health (new and review combined)					↔	
Cancer -14-day performance					↔	
Cancer -31-day performance					↓	
Cancer -62-day performance					↔	
Cancer - 14 day activity (Core only)					↔	
Cancer - 31 day activity					↔	
Cancer - 62 day activity					↔	
Red Flag - 1st OP appointment					↔	
Stroke - Thrombolysis					↔	
Direct to Stroke Unit (2 x R = R)					↔	
Community Nursing					↔	
Compliance with the SSKIN bundle for pressure ulcers	2 Month time lag in reporting					TBC
Compliance with all elements of MUST						TBC
AHP (new and review combined)					↑	
MRI					↑	
CT					↑	
NOUS					↑	
Cardiac MRI					↓	
Cardiac CT					↔	
Echo					↔	
Cath Lab					↑	
Cardiac Surgery						
Community Dental					↑	
CDS GA					↔	
NIAS handover						
LOS (2 x R)					↔	
Discharge (2 X R)					↔	
OP (new and review combined)					↑	
IPDC combined					↔	
MPH IP						
MPH DC						
Endoscopy					↔	
March 2023 Totals	14	5	0	13		
March 2023 RAG Position	44%	16%	0%	41%		
2022/23 Cumulative Totals (July - March)	11	5	3	13		
2022/23 Cumulative RAG Position (July - March)	34%	16%	9%	41%		

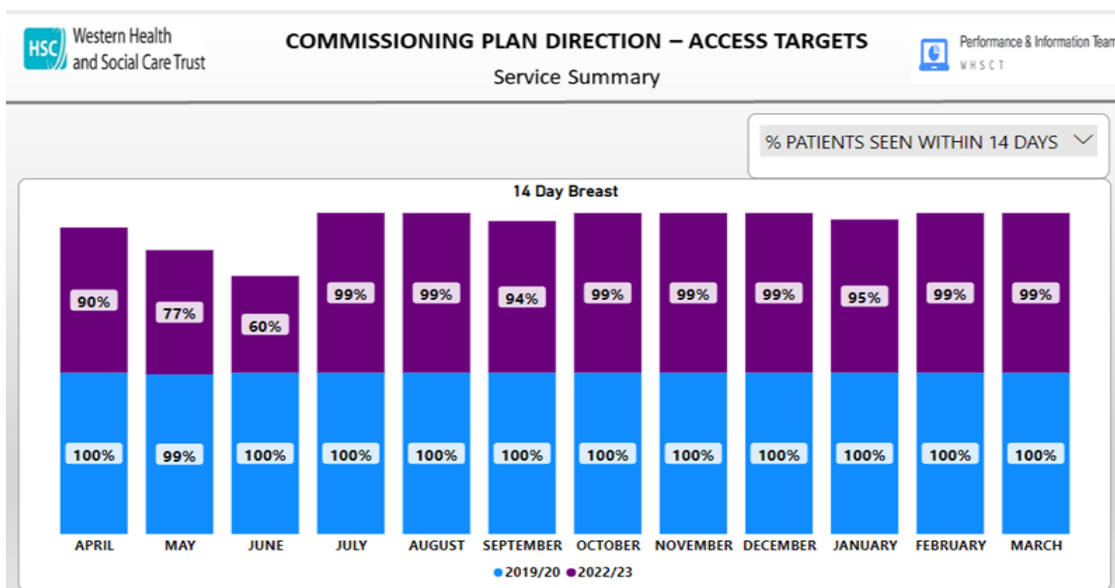
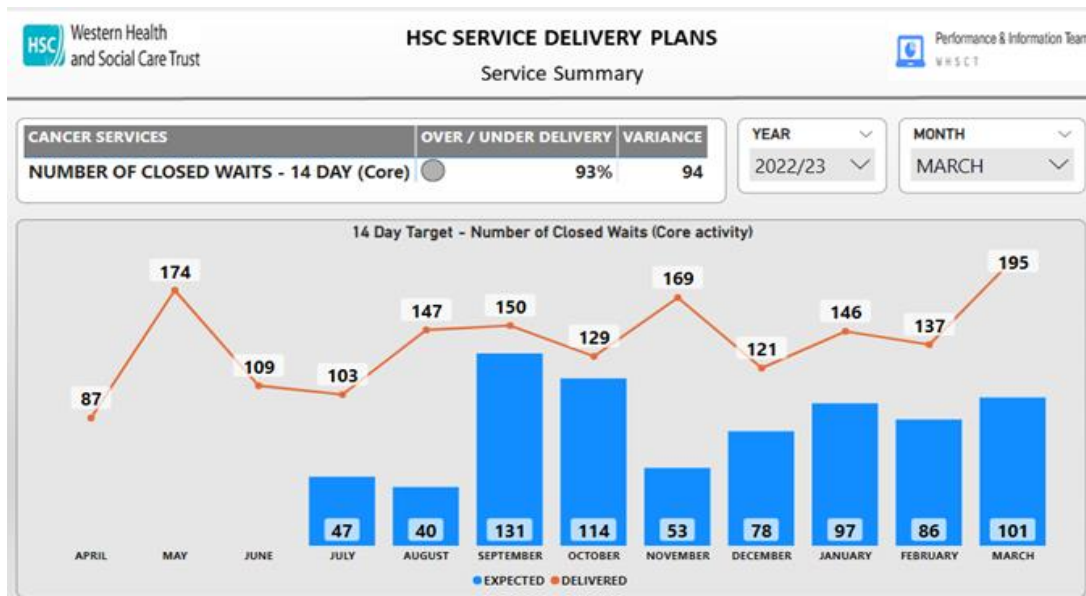
HOSPITAL SERVICES

Cancer services – Service Delivery Plan & Access Performance

The 2022/23 SDP target was to deliver 100% of 2021/22 activity levels. Target amended by SPPG in January 23 to report Core Activity only.

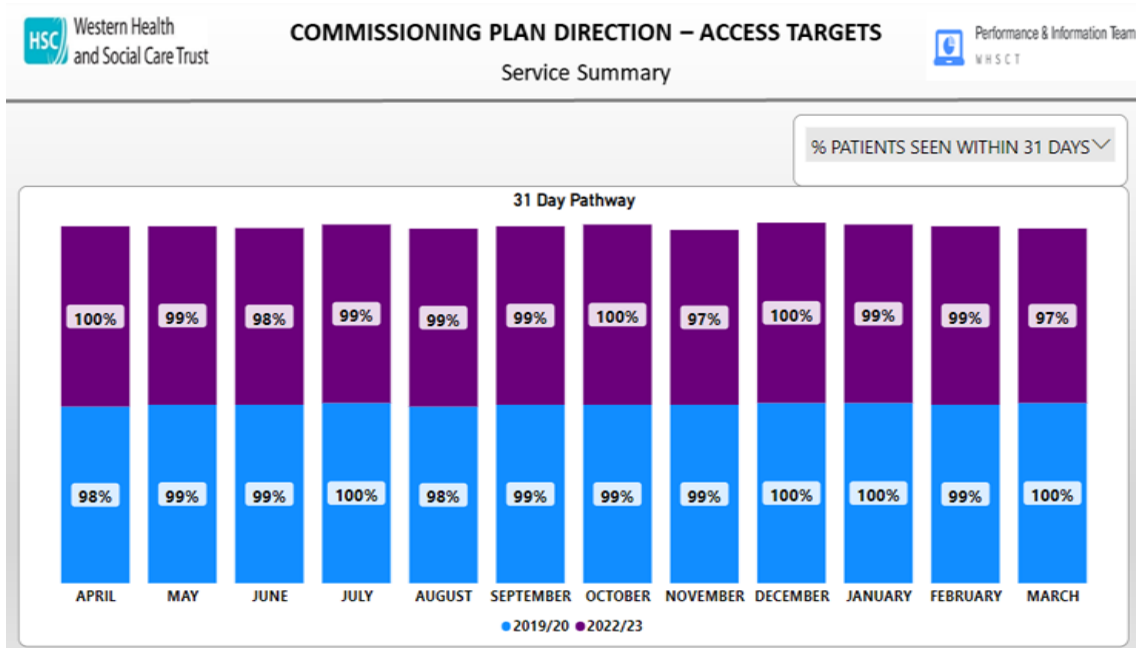
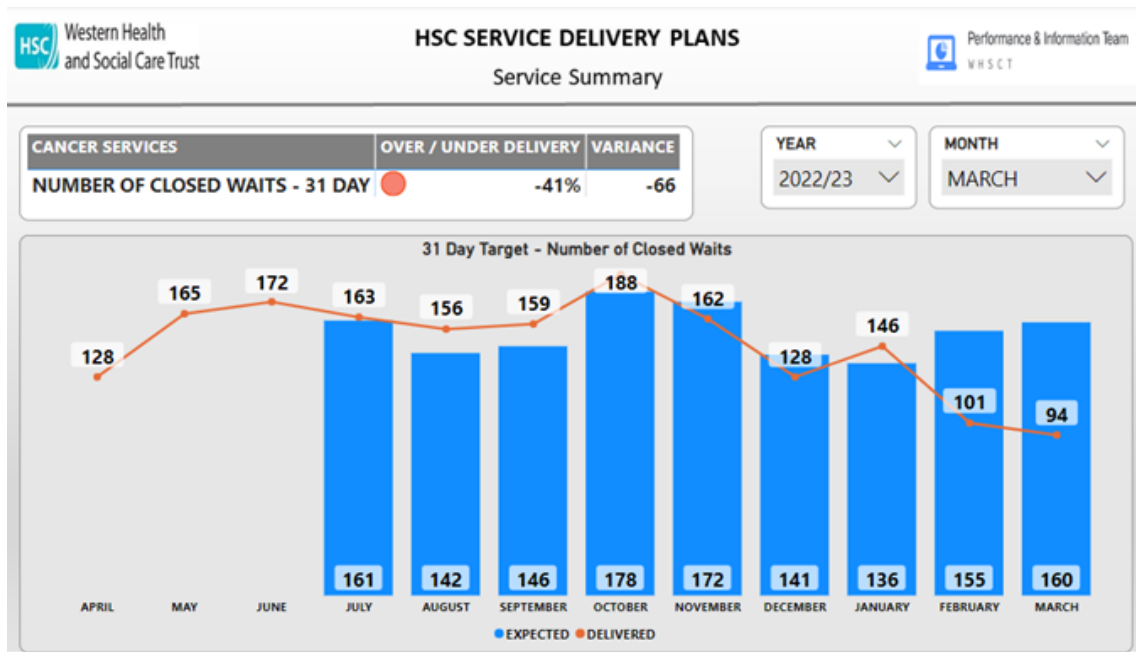
14 Day Target: Overall, this service achieved an excellent outturn for the year, and in March 23, the number of closed waits increased to the highest level delivered in 2022/23. Throughout the year, activity levels fluctuated in line with demand with the SPPG expected target exceeded each month from July 22 to March 23. The cumulative number of closed waits completed during Quarter 2 to 4 (July 22 to March 23) (1,297) reflects **174%** of the cumulative SPPG expected target (747) and of pre-pandemic level of delivery.

Performance against the Ministerial Access target also improved during this timeframe, with **99%** achieved at March 23 where one patient waited longer than 14 days (longest wait 19 days). After a difficult start in the first quarter, access performance remained high across the 9 month SDP period (July 22 - March 23), with 7 of the 9 months achieving 99% access for patients.



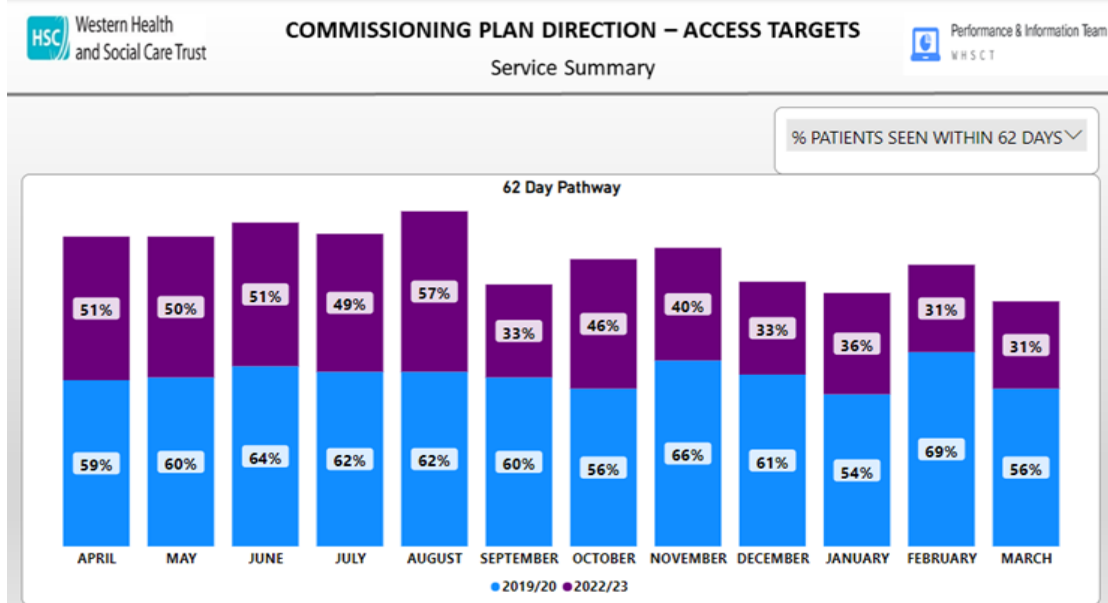
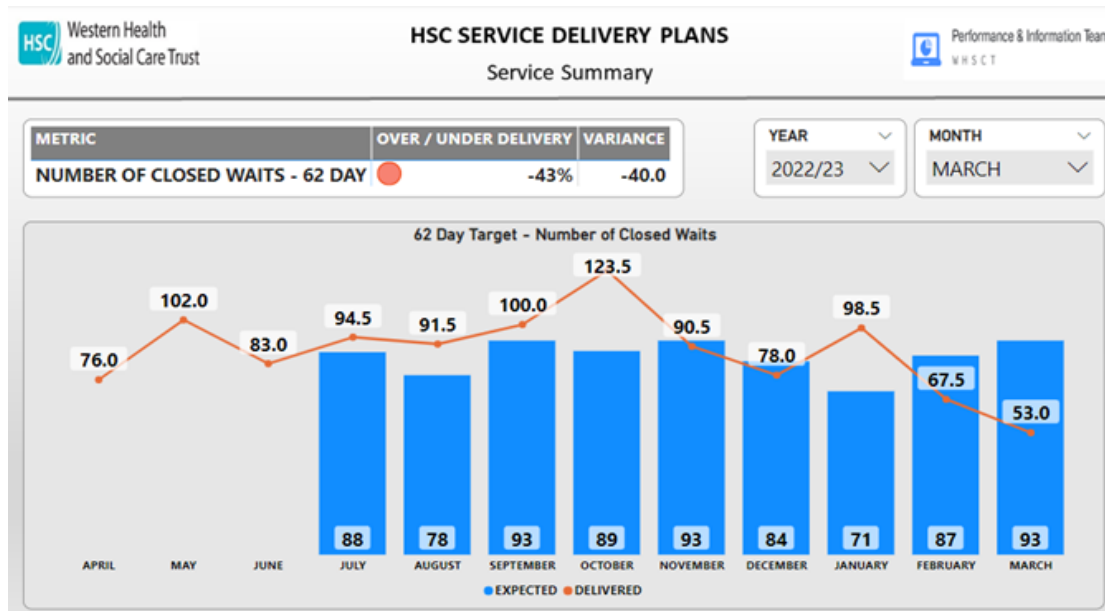
31 Day Target: there has been continued improvement in Trust performance against this target throughout 2022/23, in line with the one month time lag and activity validation. The SPPG target has been exceeded in 5 of the 9 months from July 22 to March 23. The cumulative number of closed waits completed during Quarter 2 to 4 (July 22 to March 23) (1,297) reflects **93%** of the cumulative SPPG expected target (1,391) and pre-pandemic level of delivery; it is expected that this will increase when the February and March 23 information is validated.

Performance against the Ministerial Cancer access target remains very strong. The Trust met or exceeded this target each month this year with the exception of November 22 and March 23; where 3 patients waited longer than 31 days to commence treatment. Regionally, Western Trust continues to be the only Trust to achieve a high level of performance for this Ministerial target.



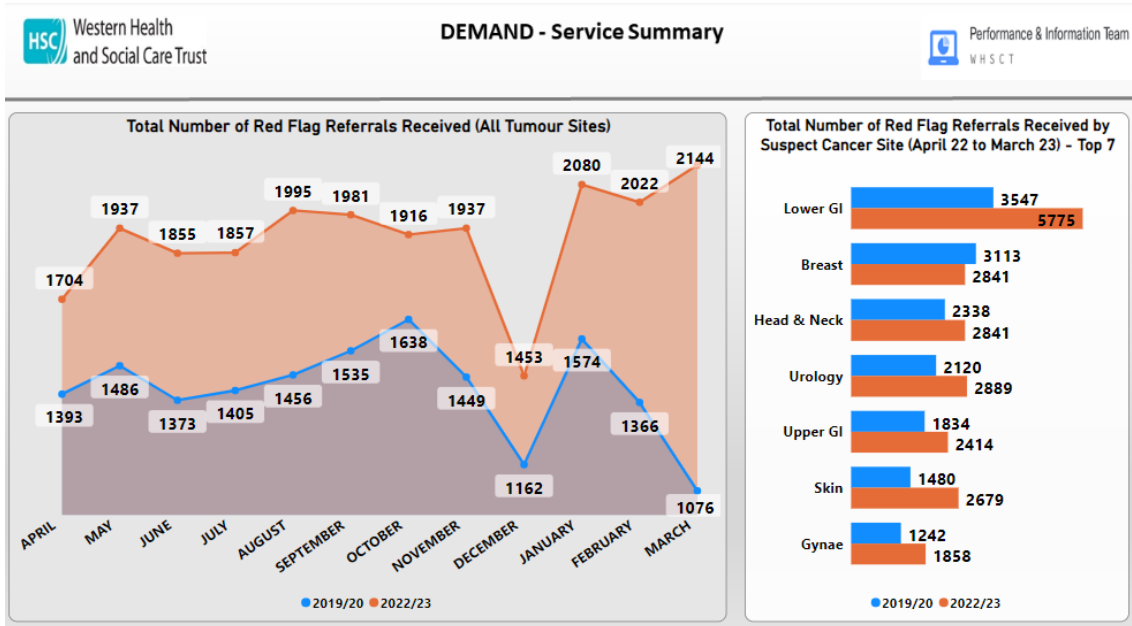
62 Day Target: This remains an extremely challenged area for the Trust, however the SPPG expected activity target has been exceeded in 5 of the 9 months from July 22 to March 23. The February and March 23 position is expected to increase in line with the 2 month time lag for validation. The cumulative number of closed waits completed during Quarter 2 to 4 (July 22 to March 23) (797) reflects **103%** of the cumulative SPPG expected target (775) and pre-pandemic level of delivery.

Access performance remains extremely challenging with the target not met in any month in 2022/23. The service continues to be impacted by an increase in red flag referrals, as detailed in the following section.



In March 23, the Total Number of Red Flag Referrals Received (All Tumour Sites) has increased **by 16%** when compared to March 22 (baseline year 2021/22).

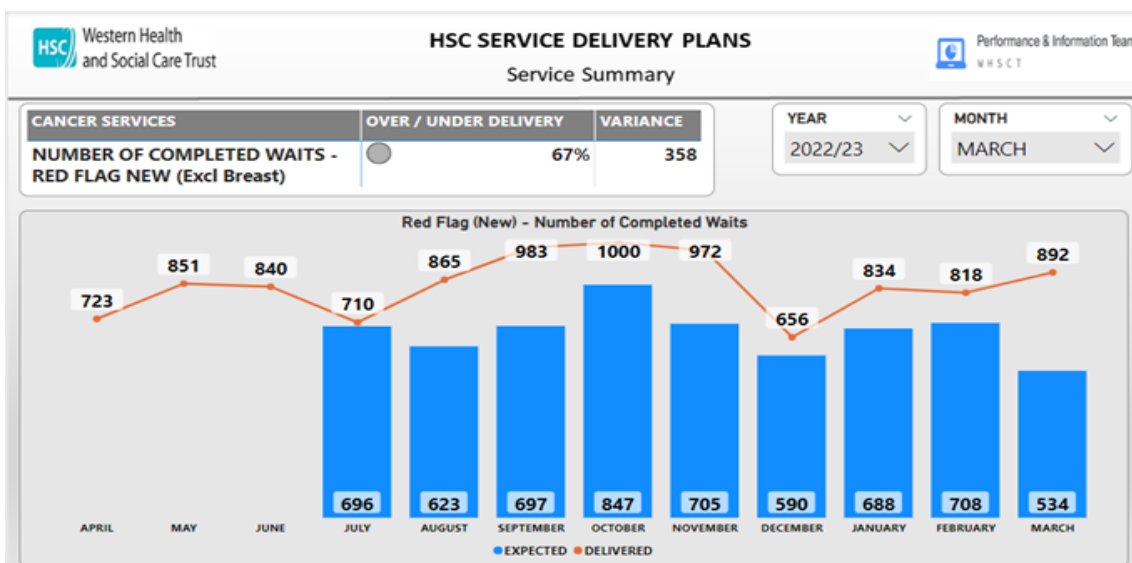
During 2022/23 (April 22 to March 23), the Trust saw a **35% increase (5,968 additional red flag referrals received)** compared to the same period in 2019/20 and a **12% increase (2,374 additional red flag referrals received)** compared to March 22 (baseline year 2021/22).



Red Flag (New) Completed Waits (Excluding Breast)

The 2022/23 SDP target was to deliver 100% of pre-COVID (2019/20) activity by March 23.

Western Trust performance exceeded in the SPPG expected target each month from July 22 to March 23. The cumulative number of closed waits completed during Quarter 2 to 4 (July 22 to March 23) (7,730) reflects **127%** of the cumulative SPPG expected target (6,088) and pre-pandemic level of delivery.



Year Ahead – 2023/24

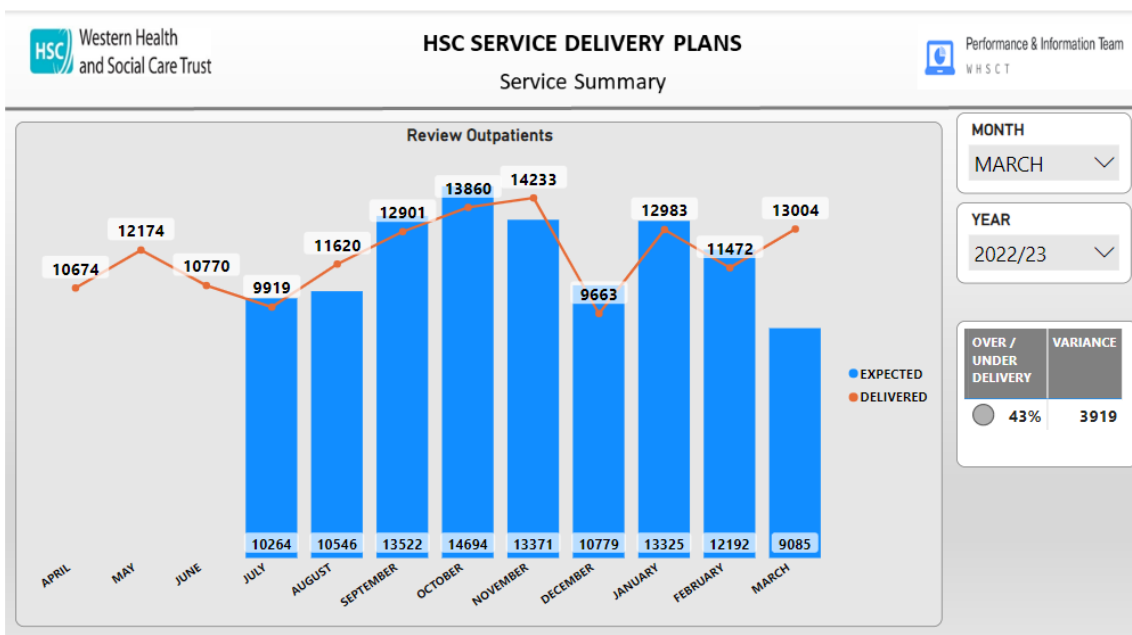
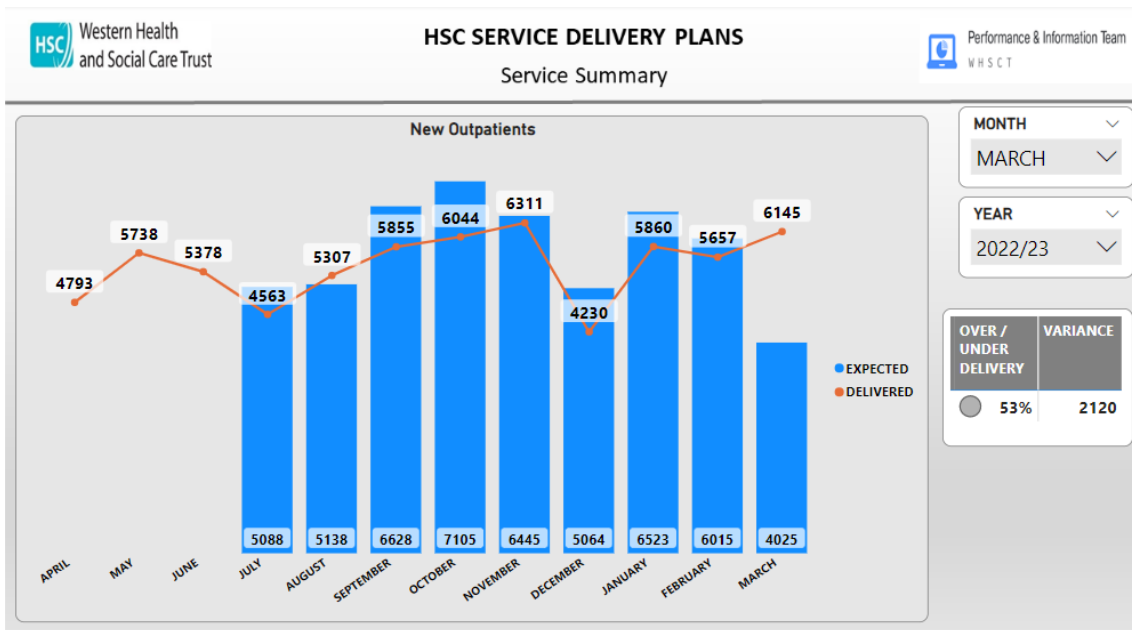
- Updated Cancer Optimisation plans were submitted to SPPG at the end of April 23 with specific focus on four tumour sites including; Gynaecology, Urology, Dermatology and Lower GI. These plans focus on Outpatient activity pre and post pandemic, Theatre and TP Biopsy capacity, scheduling and capacity for Endoscopy and Hysteroscopy and recruitment to vacant posts. They will be reviewed at the Cancer Monthly Performance Meetings and updated as actions are progressed.
- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for:
 - 14, 31 and 62 activity metrics is to achieve 110% of 2021/22 activity levels.
 - Red Flag (New) Completed Waits is to achieve 110% of 2019/20 activity levels.
 - Ministerial CPD Access Targets remain unchanged.

Outpatients – Service Delivery Plan

The 2022/23 SDP target was to return to pre-COVID (2019/20) activity by the end of September 22.

Overall, New and Review activity performance recovered well during 2022/23 (July 22 to March 23). Activity levels incrementally increased monthly with a dip in attendances during December 22; as a result of cancellations due to industrial action. Vacant medical posts continue to impact capacity specifically within General Surgery, Gynaecology and Cardiology. Regional and international recruitment continues to be progressed. Locum cover is in place, where available, whilst recruitment completes.

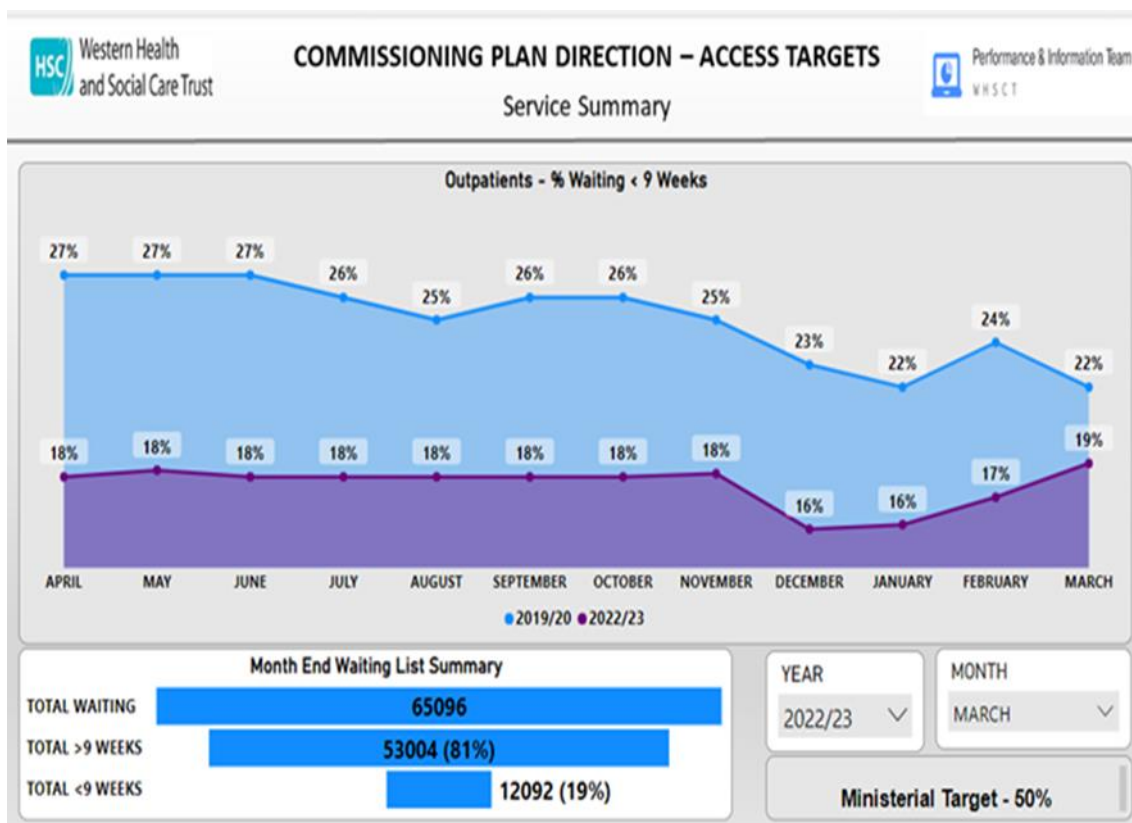
The cumulative number of attendances delivered during Quarter 2 to 4 (July 22 to March 23) (159,627) reflects **99.8%** of the cumulative SPPG expected target (159,809) and **97%** of pre-pandemic level of delivery.



Outpatients – Access Performance

Performance against the 50% CPD target remained challenging throughout 2022/23 with the total number waiting and those waiting longer than 9 weeks increasing. There was some improvement in August and October 22 and March 23.

There are currently over 53,000 patients waiting over 9 weeks for their assessment.



Year Ahead – 2023/24

- Outpatient Improvement Plans for the 2023/24 year are being finalised for a focused number of Outpatient Specialities, which are: Cardiology, ENT, Gynaecology, General Surgery and Neurology due to ongoing challenges in meeting the expected targets. These plans will include demand/capacity work (activity pre and post pandemic), review of clinic capacity and an agreed trajectory with the service team on expected activity each month. The plans will be reviewed at the Elective Weekly Performance Meetings and updated as actions are progressed.
- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for the:
 - New Outpatients is to achieve 105% of 2019/20 activity levels.
 - Review Outpatients is to maintain 100% of 2019/20 activity levels.
- In recognition of the considerable work required in Outpatient services, SPPG are establishing an Outpatient Modernisation Board, which will report to the DoH Elective Care Management Team, and this will focus on areas of variation, and opportunities for improvement based on accepted/best practice.

Elective Care – Service Delivery Plan

Inpatients and Day Cases

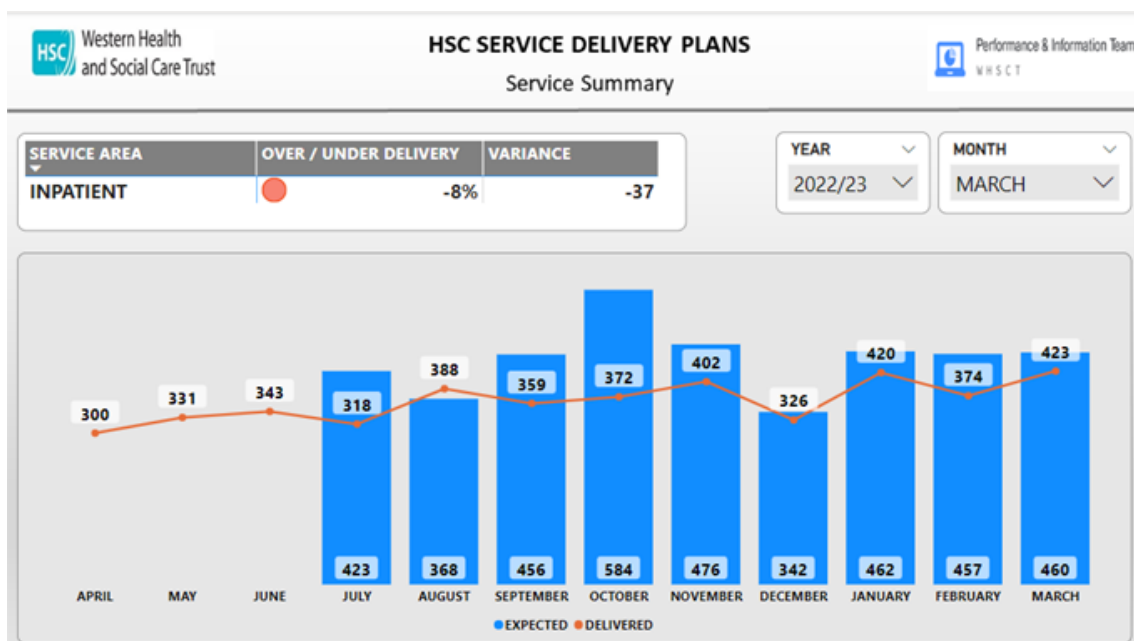
The 2022/23 SDP target was to increase IPDC activity to 100% of pre-COVID (2019/20) activity by Quarter 4 2023.

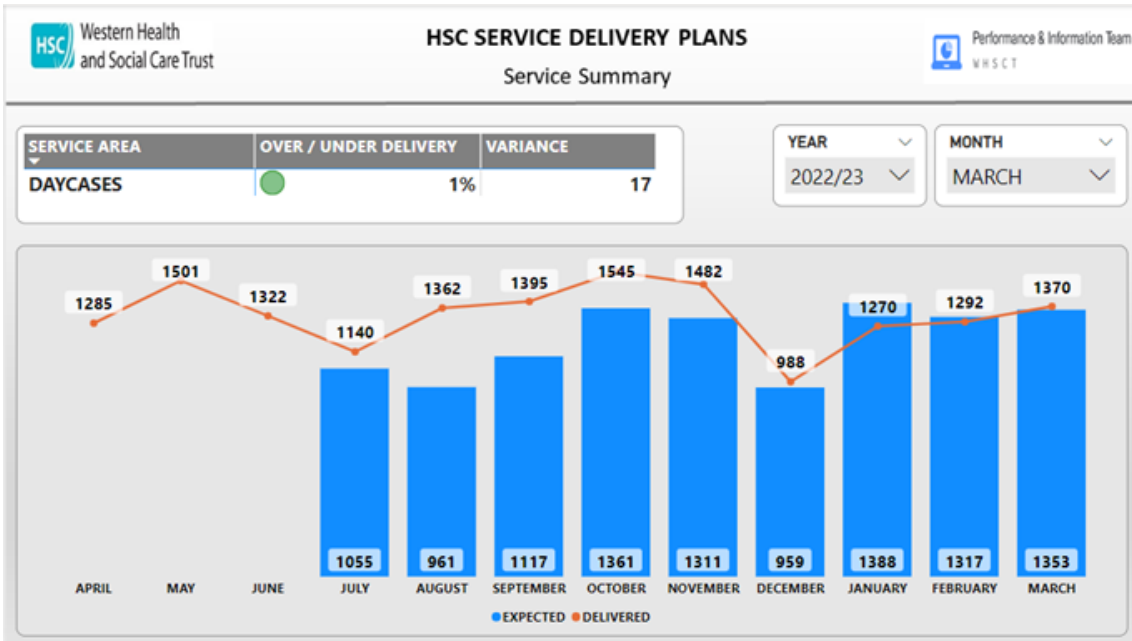
Inpatient activity levels struggled to meet SPPG expected targets in Quarter 2 and 3 (July to December 22); with the exception of August 22, where activity levels exceeded the expected target. Quarter 4 (January to March 23) performance improved with the highest level of inpatient activity delivered in March 23 (423). Workforce gaps, theatre session availability and elective bed availability continued to impact performance. The Trust has established an Elective Board reporting to its Strategic Change Board, which is charged with restoring all theatres sessions to pre-pandemic levels. The Theatres Efficiency Project has been re-established within the Trust's Working Together Delivering Value programme, to target improvement by optimising theatre utilisation and improving productivity across the 3 hospital sites.

The cumulative number of Inpatients during Quarter 2 to 4 (July 22 to March 23) (4,248) reflects **88%** of the cumulative SPPG expected target (4,842) and **80%** of pre-pandemic level of delivery.

Day case activity reflects an upward trend throughout 2022/23 (July 22 to March 23) with the exception of December 22; the SPPG target was exceeded in 7 of the 9 months. The cumulative number of Day cases delivered during Quarter 2 to 4 (July 22 to March 23) (18,488) reflects **110%** of the cumulative SPPG expected target (16,757) and **103%** of pre-pandemic level of delivery.

Regionally, the Western Trust was the only Trust to have exceeded the Inpatient and Day case (combined) cumulative expected target and the individual Day case cumulative expected target for Quarter 2 to 4 (July 22 to March 23).



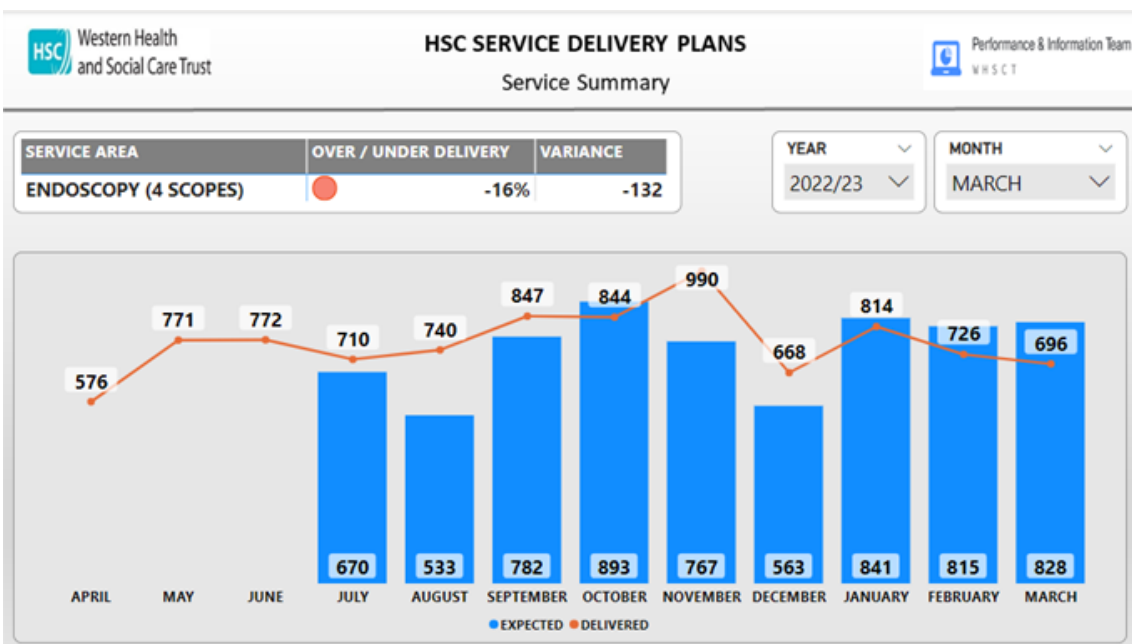


Endoscopy

The 2022/23 SDP target was to deliver 100% of pre-COVID (2019/20) activity by March 23.

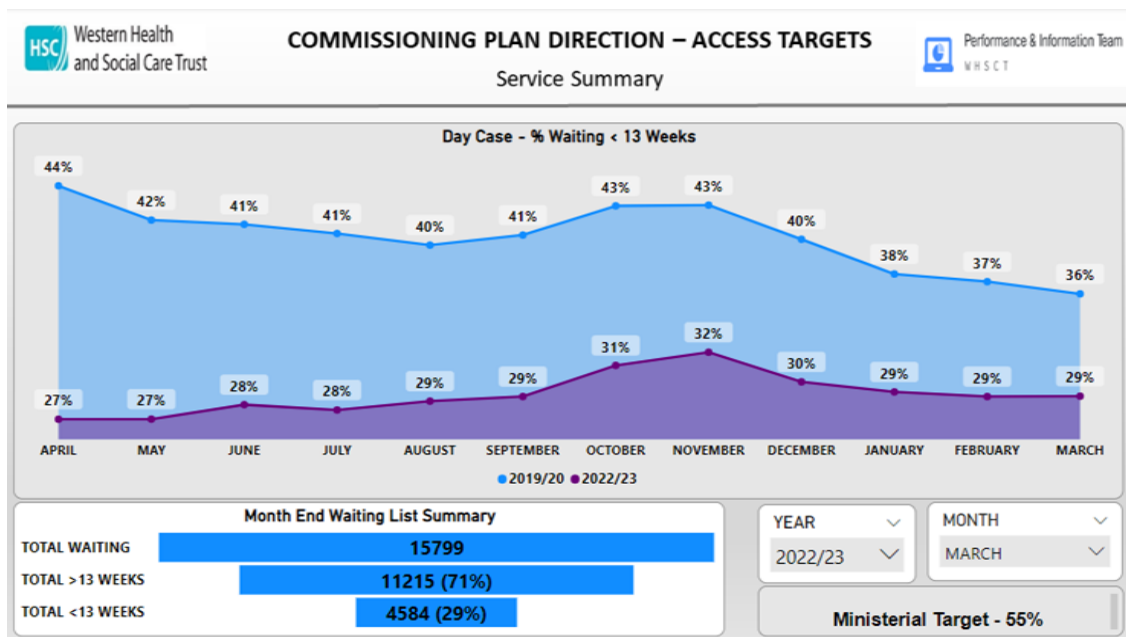
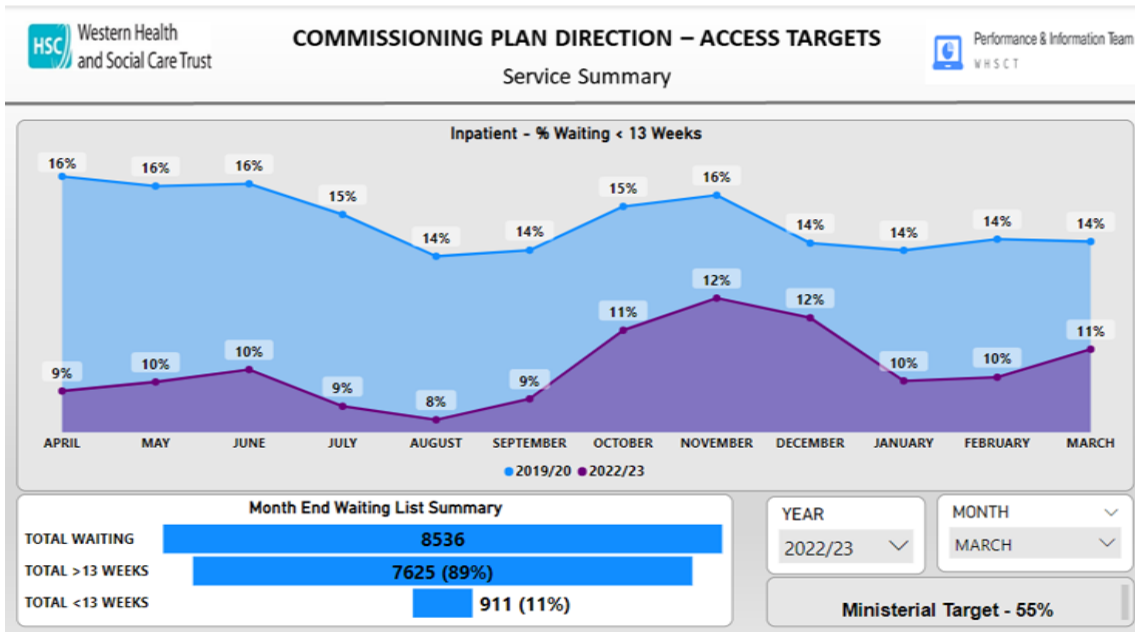
This service recovered well throughout Quarter 2 and 3 (July to December 22) with the SPPG expected target exceeded in 6 of the 7 months. In Quarter 4 (January to March 23) performance was impacted by reduced capacity due to vacant posts (Nurse Endoscopist and two Consultants). Recruitment is ongoing to fill the vacant posts; which will also deliver regional capacity at Omagh Hospital.

The cumulative number of endoscopies delivered during Quarter 2 to 4 (July 22 to March 23) (4,248) reflects **105%** of the cumulative SPPG expected target (6,692) and **99%** of pre-pandemic level of delivery.



Elective Care – Access Performance

Access to elective Inpatient and daycase treatment remains extremely challenging, with 7,625 patients waiting more than 13 weeks for their inpatient treatment, and 11,215 patients waiting more than 13 weeks for their daycase treatment.



Year Ahead – 2023/24

- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Inpatient and Day Case is to maintain 100% of 2019/20 activity levels.
 - Endoscopy to deliver activity in line with Q1 2019/20 during Q1 2023/24” with a plan move to points-based monitoring from Q2.

- The DoH Elective Care Management Team continue to oversee improvement plans in this area of care, and the focus in 2023/24 will be on fully restoring theatres to pre-covid levels of activity, improving the productivity of theatre slots, driving out waste and improving treatment and follow up pathways with clinical advice.
- DoH have also undertaken reviews in Gynae and Urology, delivered by the “Getting it Right First Time” (GIRFT) teams from NHS England. Trusts will work on the plans and actions emerging from those reviews in 2023/24.

Imaging Diagnostics – Service Delivery Plan

The 2022/23 SDP target was to deliver 100% of pre-COVID activity (2019/20) from end of September 22 **or** if the 2021/22 position was greater, this should be maintained for the same comparable month during 2022/23.

Strong performance against the SPPG expected targets was maintained across the three areas in Quarter 4 (January to March 23).

CT and MRI exceeded the SPPG expected target in 8 of the 9 months (July 22 to March 23) with only a minimal reduction in activity in February 23; MRI capacity was impacted with the replacement of a new scanner and the associated staff training.

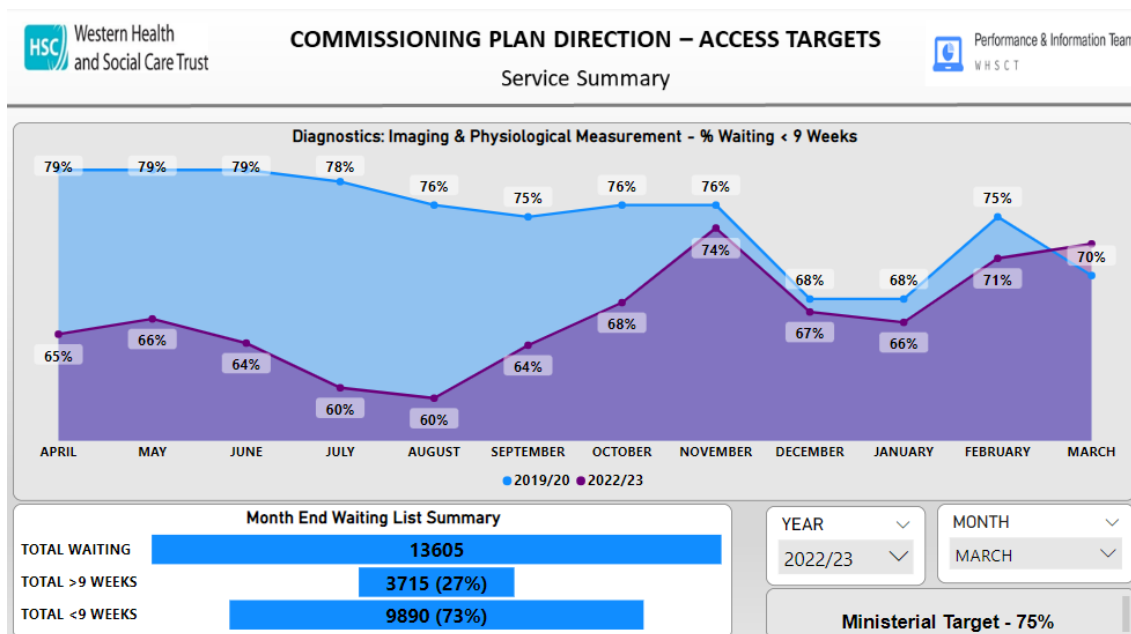
Non Obstetric Ultrasound (NOUS) recovered well throughout 2022/23 (July 22 to March 23); exceeding the SPPG expected target in 4 of the 9 months and cumulatively delivering **98%** of pre-pandemic activity (July 22 to March 23). Service capacity was impacted by vacant posts however this is now resolved with two new staff in post from March and May 23.

The cumulative activity delivered, across the three areas, during Quarter 2 to Quarter 4 (July 22 to March 23) (70,992) reflects **103%** of the cumulative SPPG expected target and **104%** of pre-pandemic activity, delivering an additional 2,670 tests compared to 2019/20.



Imaging Diagnostics – Access Performance

Overall performance reflected an improving trend from August 22, with a dip in December 22 and January 23, with the November 22 to February 23 position broadly in line with 2019/20. Improvement was achieved at March 23 with **73%** of patients waiting less than 9 weeks for a diagnostic test compared to **70%** at March 20 (pre-pandemic).



Year Ahead – 2023/24

- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Imaging (CT, MRI & NOUS) to deliver activity in line with volumes delivered in 2019/20 or 2021/22 or agreed SBA volumes, whichever is greater.

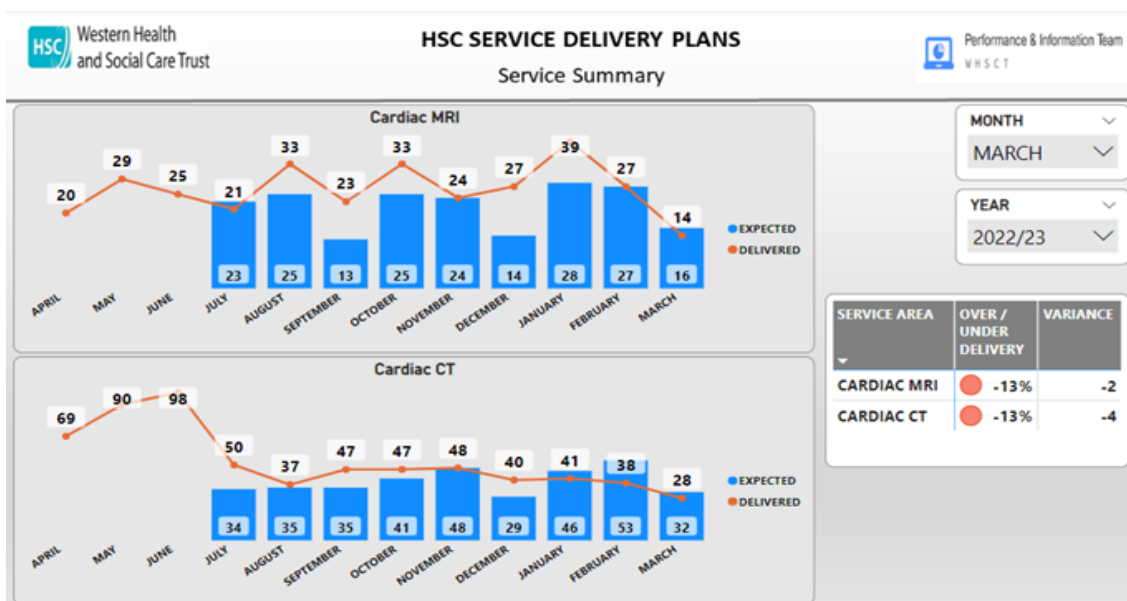
Cardiac Services – Service Delivery Plan

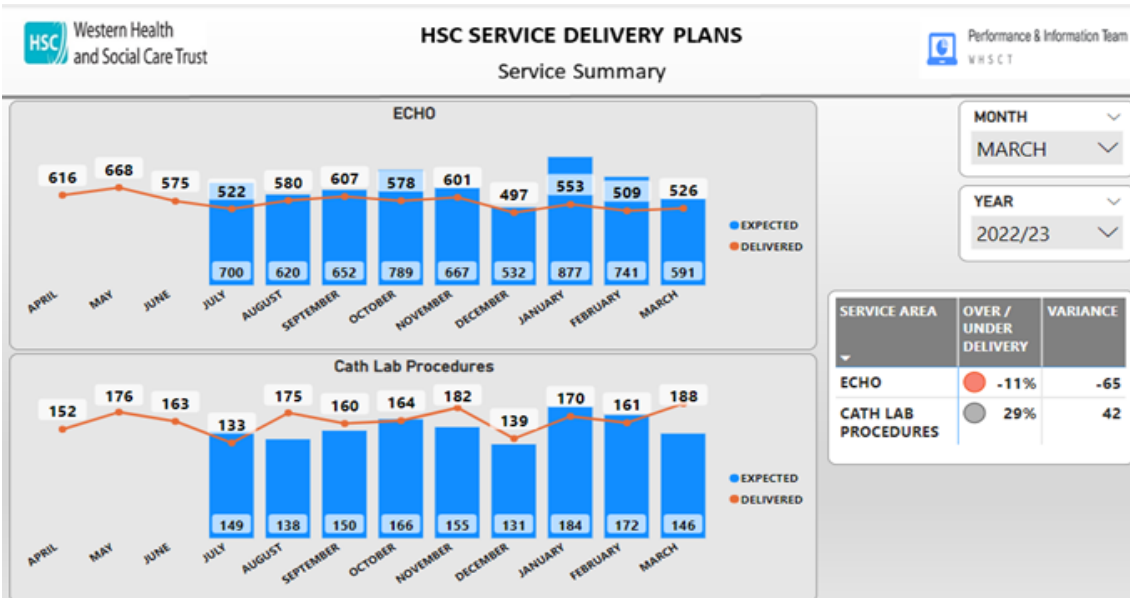
The 2022/23 SDP target was to deliver 100% of pre-COVID (2019/20) activity by March 23.

A strong performance was achieved in 2022/23 against the SPPG expected targets within Cardiac MRI, Cardiac CT and Cath Lab procedures. The activity delivered was either broadly in line with 2019/20, met or exceeded in the months from July 22 to March 23. Capacity increased at the end of March when a Cardiologist returned from sickness absence.

The cumulative activity delivered, across these three areas, during Quarter 2 to Quarter 4 (July 22 to March 23) reflects **108%** of the cumulative SPPG expected target; delivering an additional 149 procedures (45 Cardiac MRI, 23 Cardiac CT and 81 Cath Lab procedures). This reflects **97%** of pre-pandemic levels.

Echo activity was challenged in meeting the monthly SPPG expected targets from July 22 to March 23 as the service was impacted by two vacant Clinical Physiologists posts. These posts have been filled, however, training and lead in time is required in this role before full capacity is realised. The cumulative Echo activity delivered during Quarter 2 to Quarter 4 (July 22 to March 23) reflects **81%** of the cumulative SPPG expected target and **71%** of pre-pandemic levels.





Year Ahead – 2023/24

- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for:
 - Cardiac MRI is to deliver activity in line with 2019/20 or agreed SBA volumes, whichever is greater
 - Cardiac CT is to deliver 110% of 2019/20 activity levels.
 - Echo is to deliver activity in line with 2019/20 or agreed SBA volumes, whichever is greater
 - Cath Lab procedures is to deliver 110% of 2019/20 activity levels.

Unscheduled Care – Service Delivery Plan

Emergency Department attendances are broadly in line with or marginally higher in 2022/23 compared to 2019/20 in the Western Trust. Performance against the 4 hour and 12 hour Ministerial targets has deteriorated and the number of Delayed Discharges across both sites remains challenging. There is a continued focus on expediting complex delayed patients across the HSC system. Additional external support for improvement work has been secured regionally for 2023/24.

Altnagelvin Hospital							
Year	Emergency Department			Inpatients - Adults		Complex Discharges	
	Attends (Arrivals)	% 4hr	No >12 hours	Non Elective Adms	Non EI Avg Length of Spell	Number of Complex Discharges	% Discharged within 48 hours
Apr - Mar 20	67,931	56%	4,743	14,596	7.08	2215	72%
Apr - Mar 21	54,925	56%	4,464	12,661	6.99	2393	87%
Apr - Mar 22	67,225	42%	9,251	13,521	9.48	2374	85%
Apr - Mar 23	66,158	33%	12,558	13,765	8.12	2481	87%

South West Acute Hospital							
Year	Emergency Department			Inpatients - Adults		Complex Discharges	
	Attends (Arrivals)	% 4hr	No >12 hours	Non Elective Adms	Non EI Avg Length of Spell	Number of Complex Discharges	% Discharged within 48 hours
Apr - Mar 20	38,070	60%	2,518	7,613	8.13	2298	86%
Apr - Mar 21	31,422	65%	2,025	6,374	8.07	1546	89%
Apr - Mar 22	38,706	54%	4,022	5,929	9.68	656	68%
Apr - Mar 23	38,870	50%	5,375	5,726	11.19	822	74%

Achievement of the Northern Ireland Ambulance Service (NIAS) handover targets has proved difficult throughout 2022/23 locally and regionally; with improvement dependent on improvements to Length of Stay and discharge.

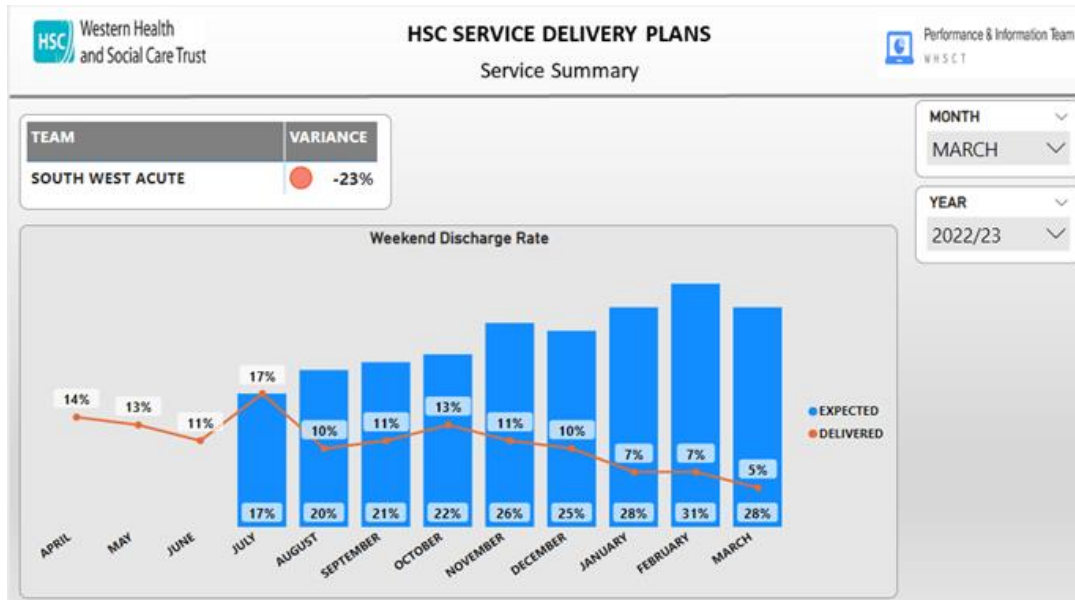
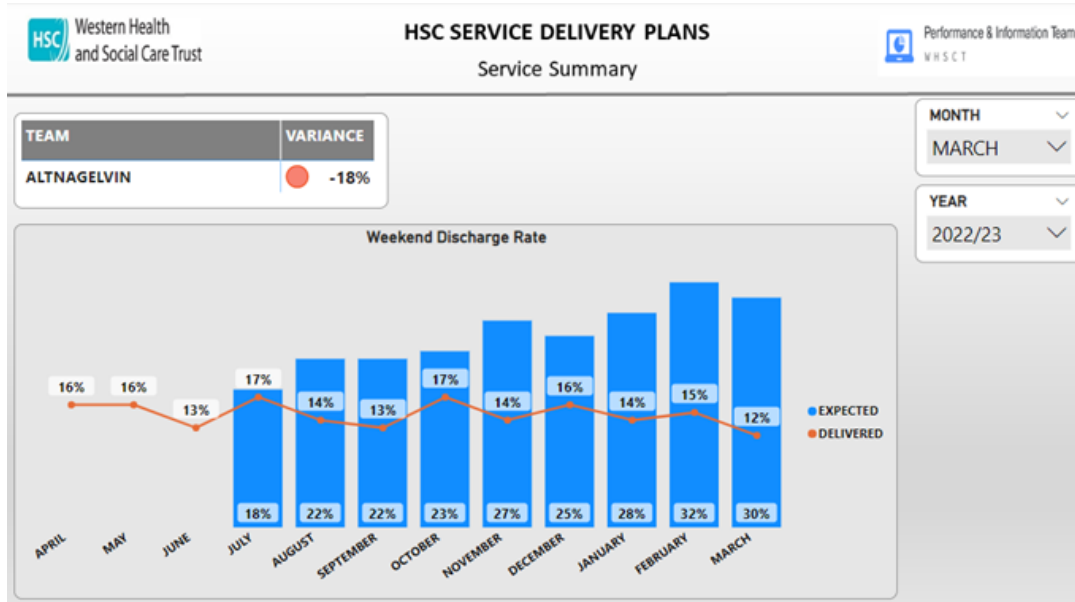
The Western Handover Time Over 3 hours, maintained a good level performance with the target either met or close to meeting in 6 of the 9 months (July 22 to March 23). Cumulatively, **1.02%** was achieved against a target of 0.13%.

Performance remained challenging for the Handover Times of less than 15, 30 and 60 minutes with no target met throughout Quarter 2 to 4 (July 22 to March 23). Cumulatively, **2.55%** achieved against a target of 25% (≤ 15 minutes), **25.05%** achieved against the 59% target (≤ 30 minutes) and **77.28%** achieved against the 91% target (≤ 60 minutes). Across these three metrics, the improved position from July to November 22 was unable to be maintained with a deterioration in performance from December 22 to March 23.

Weekend Discharge Rates - Service Delivery Plan

The 2022/23 SDP target - Average discharge rates at weekends should increase by 5% points in Q2, 10% points in Q3 and 15% points in Q4 relative to baseline weekend discharge rates in 2019/20

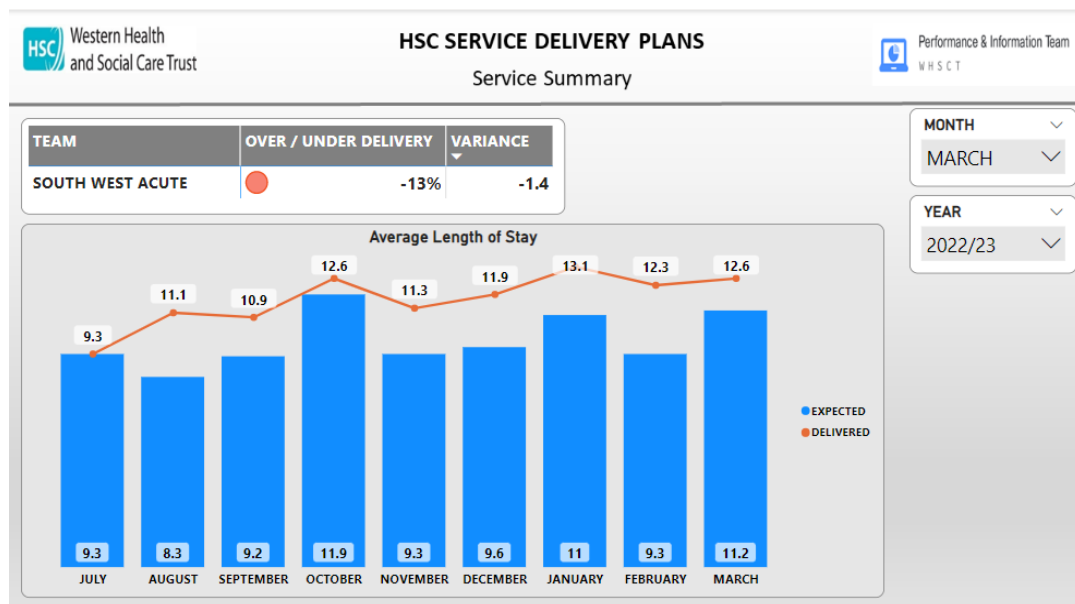
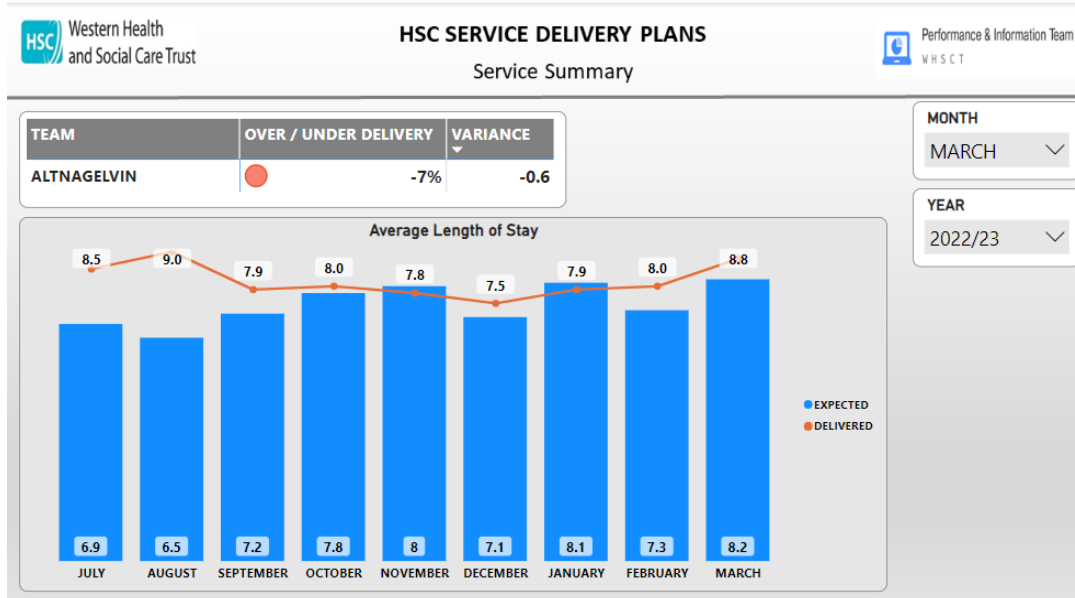
This remains an extremely challenged area for the Trust; as the overall SPPG expected target was not achieved from July 22 to March 23. Regionally, no Trust met the expected target in March 23.



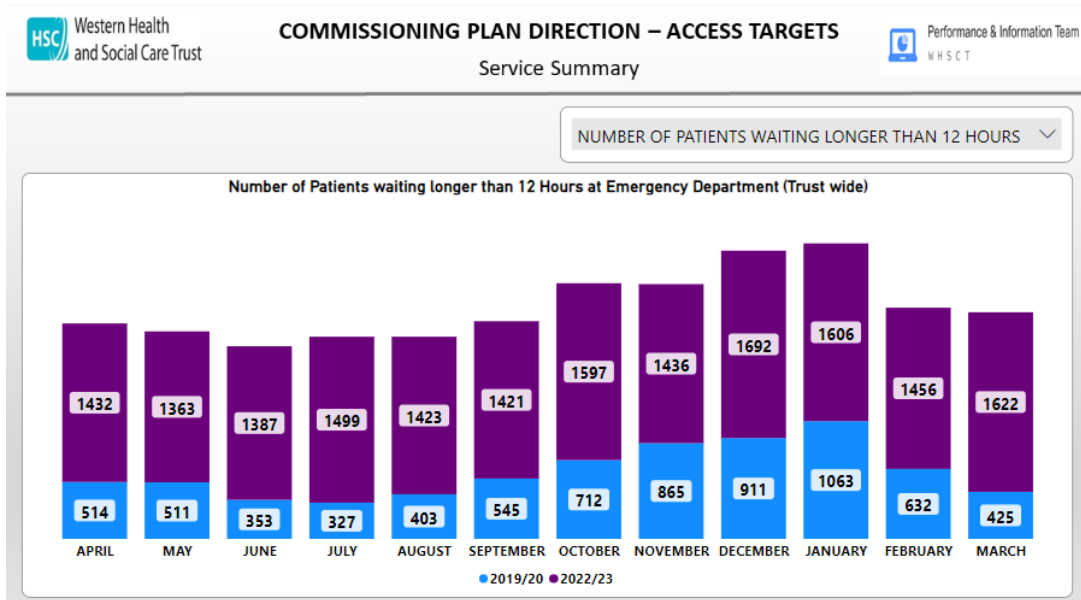
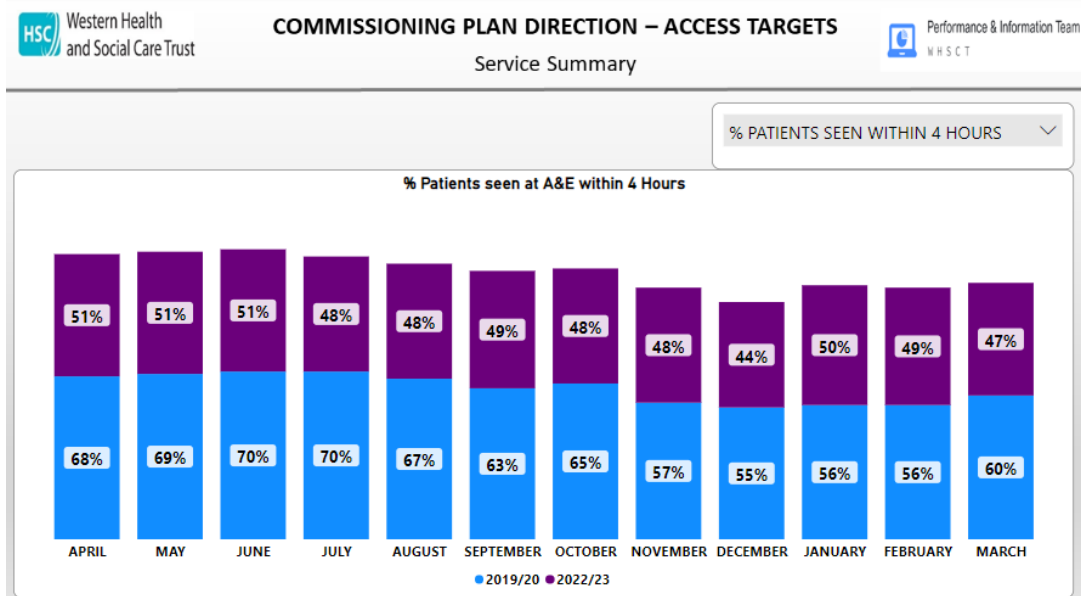
Average non-elective Length of Stay – Service Delivery Plan

The 2022/23 SDP target - Average N/E LoS should be reduced by 0.2 days based on the 2021/22.

Performance against this target remains challenging, the overall SPPG expected target was not met from July 22 to March 23. Regionally, across all the major hospital sites, the Length of Stay has continued to increase with no site meeting the SPPG expect target.



Unscheduled Care – Access Performance



Year Ahead – 2023/24

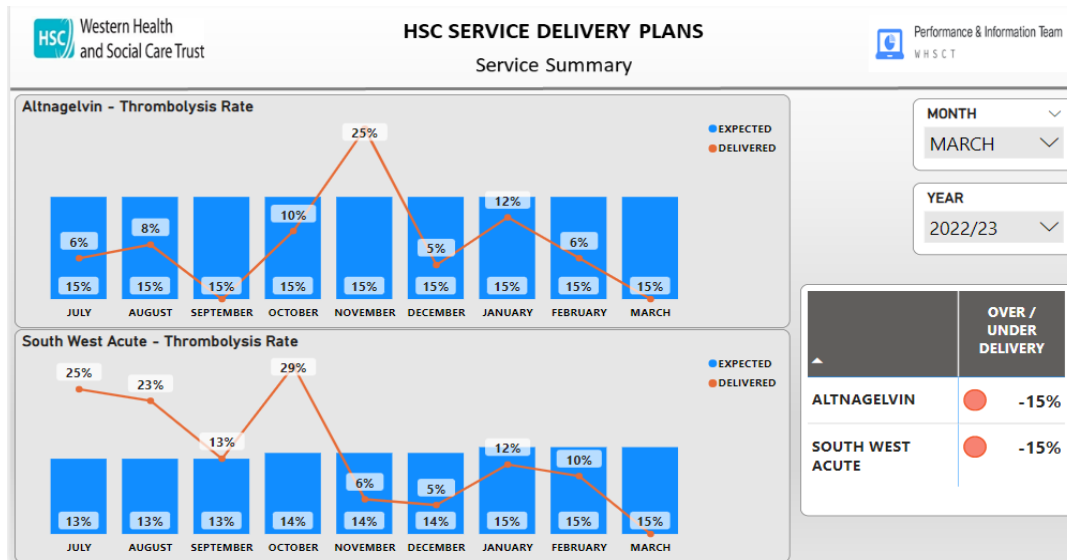
- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for:
 - Weekend Discharge Rates - the number of Simple Discharges on any Saturday and any Sunday should be at least 80% of the average daily number of Simple Discharges from Mon-Fri in that week and the 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.
 - Average Length of Stay - Q1: -0.25 days, Q2: -0.5 days, Q3: -0.75 days and Q4: -1.0 days.
 - ED Performance (12 hours) - by March 2024, reduce the number of patients who waited longer than 12 hours in ED in 2022/23 by 10%

Stroke Services – Service Delivery Plan

Thrombolysis: this metric is demand driven and fluctuates monthly. It is reported by SPPG on a rolling 3-monthly average figure.

Altnagelvin: the Quarter 4 expected target is based on a 3 month average of 15%. The January to March 23 average performance is below expected target with **6%** achieved.

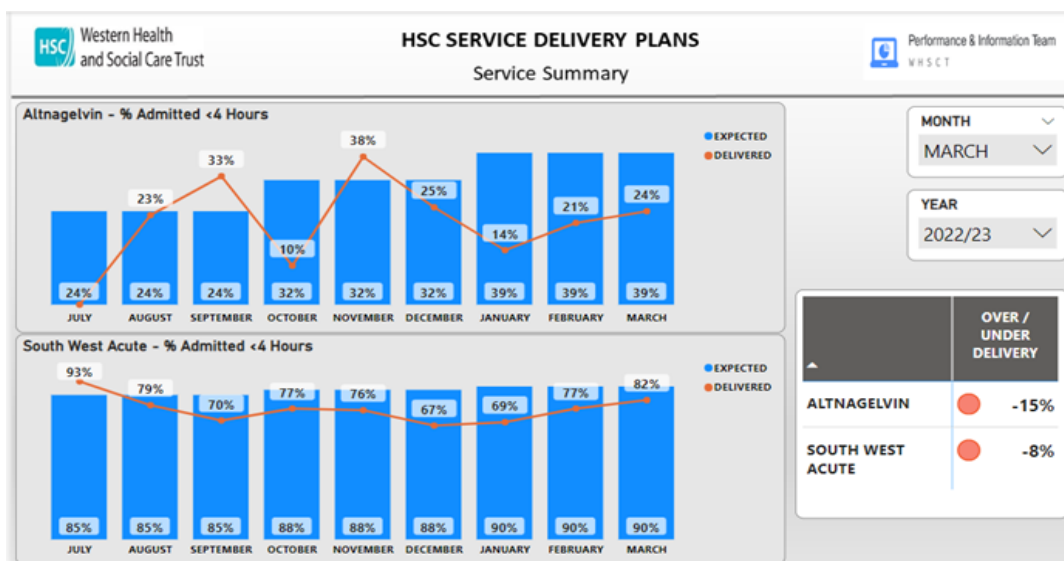
South West Acute: the Quarter 4 expected target is based on a 3 month average of 15%. The January to March 23 average performance is below expected target with **7%** achieved.



% Admitted < 4 Hours

This information is extracted from SPPG Return. SPPG source this from the SSNAP Return. In Quarter 4, the % variation against the expected target was -19% in Altnagelvin and -14% in South West Acute.

Although South West Acute performance is 14% below expected target in Quarter 4, it remains the best performing unit, admitting 76% of patients within 4 hours.



COMMUNITY CARE

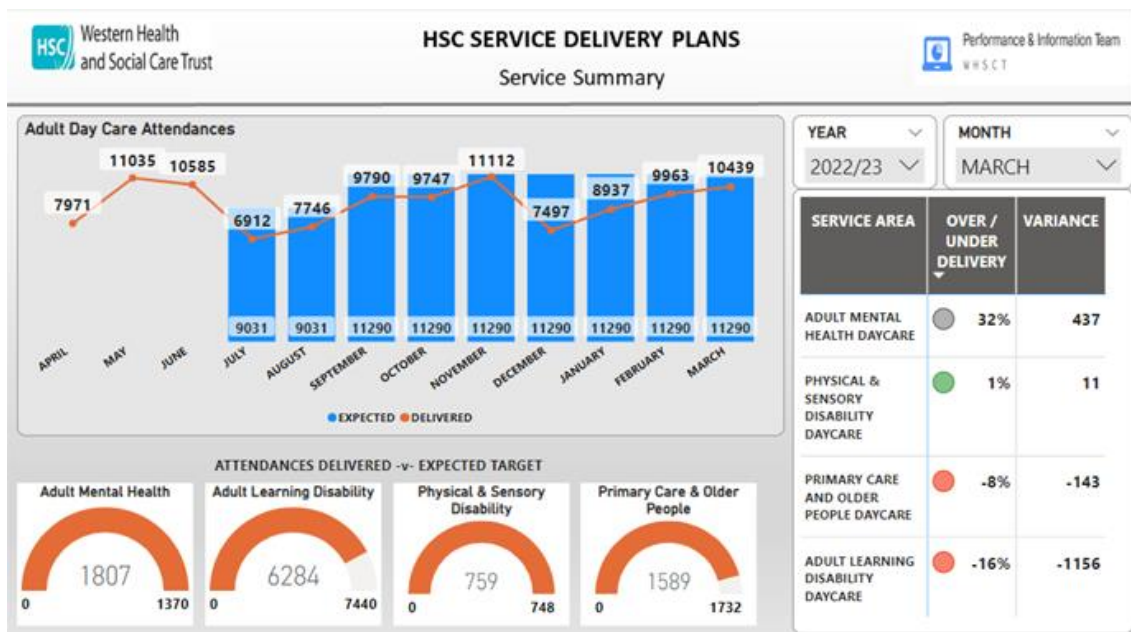
Adult Social Care – Service Delivery Plan

Adult Day Care Attendances

The 2022/23 SDP target was to return to 100% of pre-pandemic level (February 20) from September 22.

Overall the number of monthly attendances reflects an upward trend from July to November 22, reduction in December 22 and a monthly increase from January to March 23. Throughout 2022/23, performance impacted by a number of factors including holiday closures, inclement weather, staff training days and industrial action.

The cumulative attendances delivered in Quarter 2 to 4 (July 22 to March 23) (28,356) demonstrates **85%** of the cumulative SPPG expected target and **81%** of pre-pandemic levels.



Year Ahead – 2023/24

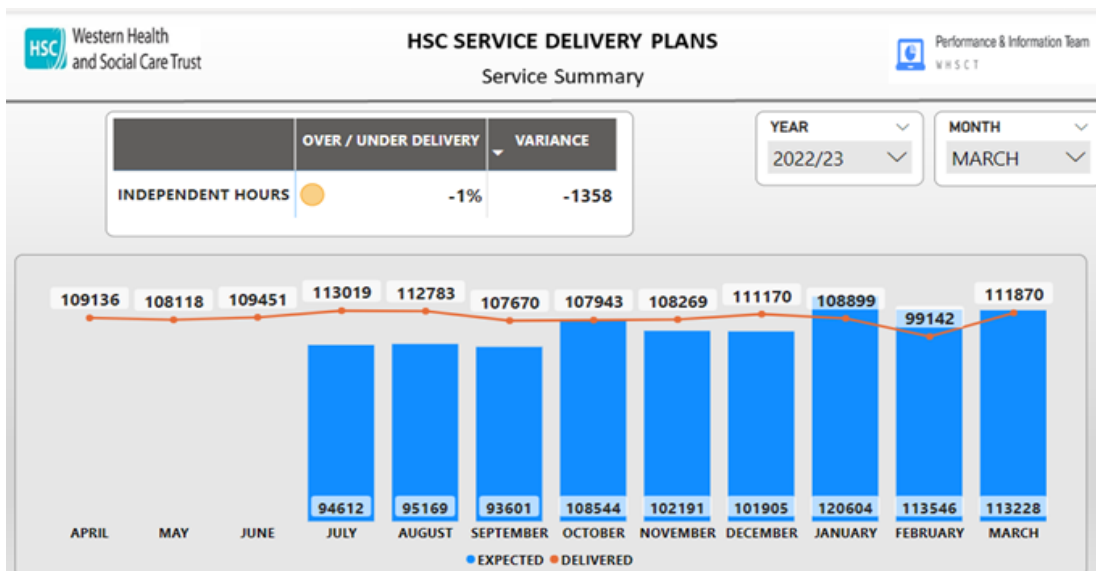
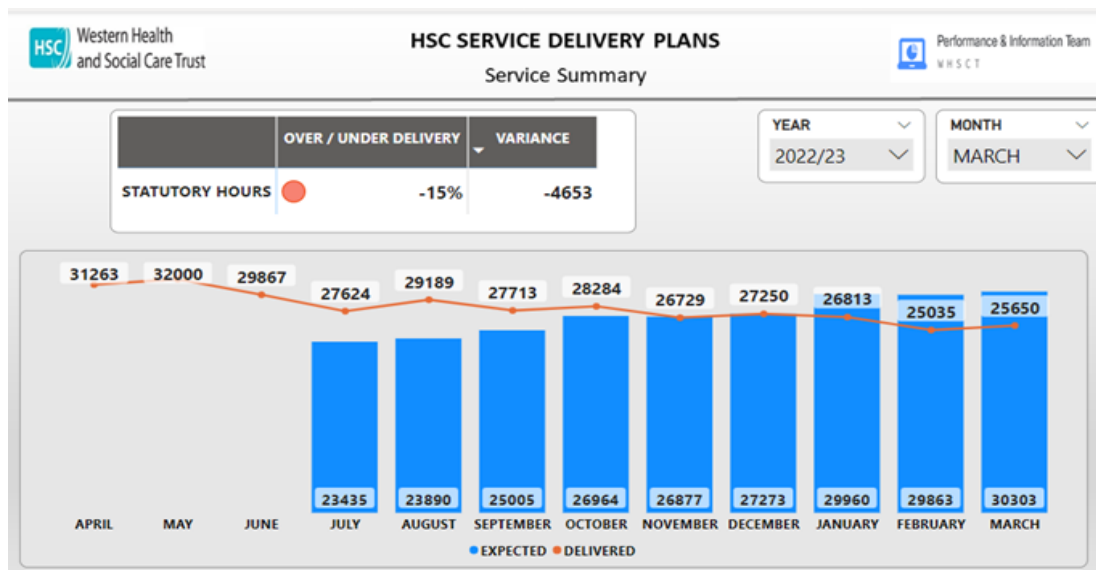
- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Day Care - SPPG propose to remove from the SDP for 2023/24 and be addressed along individual Adult Programme of care lines through other existing fora.

Domiciliary Care

The 2022/23 SDP target was to achieve 100% of pre-COVID (2019/20) activity by March 23.

Statutory Hours: the number of hours delivered started to decrease toward the end of Quarter 3 and continued through January to March 23. The cumulative hours delivered in in Quarter 2 to 4 (July 22 to March 23) represents **100%** of the cumulative SPPG expected target; with an additional 718 hours delivered. This represents **92%** of pre-pandemic level of delivery.

Independent Hours: the number of hours delivered remain relatively static throughout 2022/23 with the exception of February 23. The cumulative hours delivered in Quarter 2 to 4 (July 22 to March 23) represents **104%** of the cumulative SPPG expected target; with an additional 37,365 hours delivered. This represents **96%** of pre-pandemic level of delivery.



Year Ahead – 2023/24

- SPPG propose that the current Domiciliary Care metric is removed and replaced with a new metric - 10% reduction in unmet need hours by March 2024 (full and partial packages across all POCs) (2.5% reduction per quarter).

Children’s Social Care – Service Delivery Plan

The 2022/23 SDP target for Initial Family Assessments was to achieve 100% of pre-COVID (2019/20) activity.

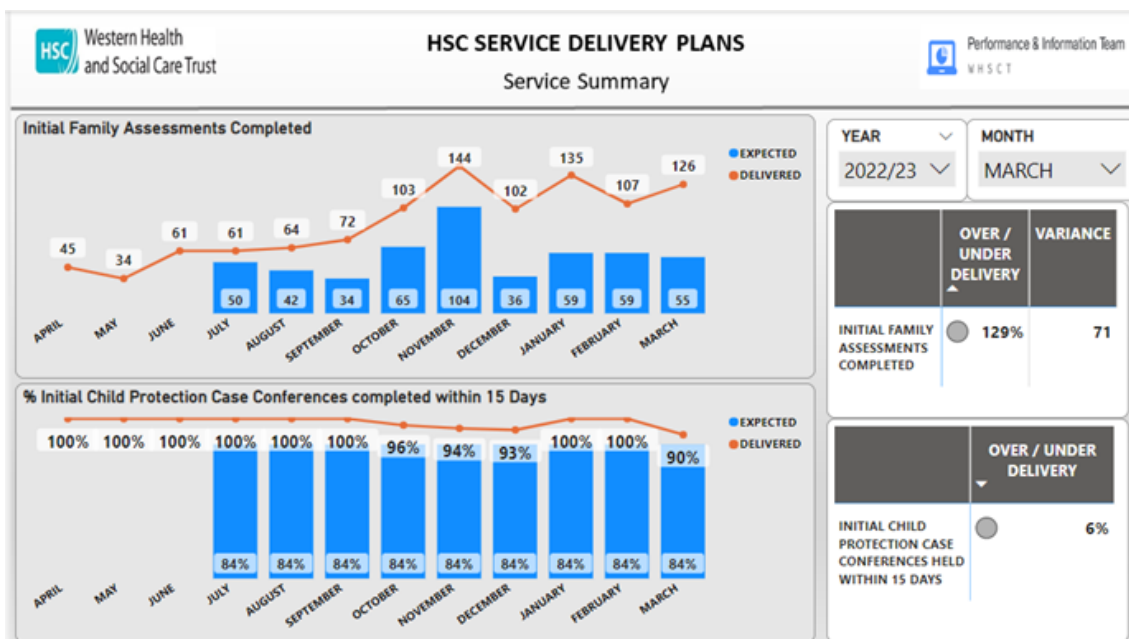
The 2022/23 SDP target for Child Protection Case Conferences was to return to pre-COVID position (2019/20) by September 2022 with a minimum of 84% of initial Child Protection Case Conferences held <15 days; 85% of Review Case Conferences held <3 months and 89% of subsequent review case conferences held <6 months.

A very strong performance was maintained throughout 2022/23 for the Initial Family Assessments Completed and % of Initial Child Protection Case Conferences held within 15 days.

The cumulative number of Initial Family Assessments completed during Quarter 2 to 4 (July 22 to March 23) (914) represents **181%** of the cumulative SPPG expected target (504) and pre-pandemic level of delivery; with an additional 410 assessments completed.

Regionally, the Western Trust is only Trust who exceeded the Initial Family Assessments cumulative expected target for Quarter 2 to 4 (July 22 to March 23).

Of the Initial Child Protection Case Conferences held within 15 days, during Quarter 2 to 4 (July 22 to March 23), the service achieved **97%**, exceeding the target each month during this period.

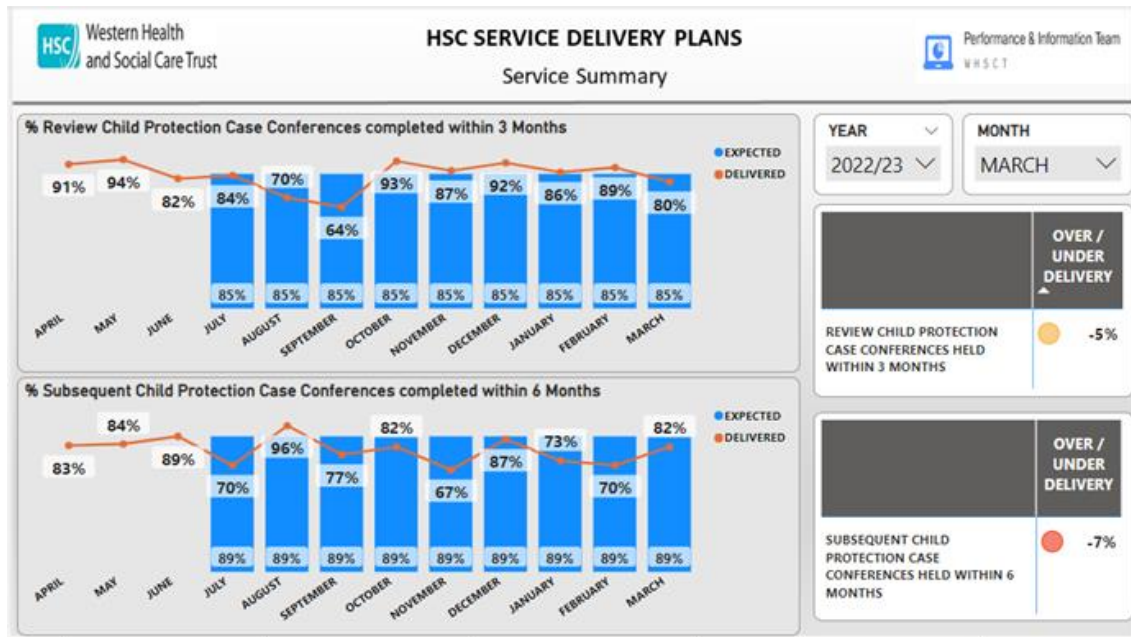


Performance against the % of Review Child Protection Case Conferences held within 3 months was impacted during Quarter 2 due to challenges in securing dates due to summer leave and school holidays. The position improved from October 22 to February 23 where the SPPG expected target was met or exceeded in each of these months.

Achievement of the SPPG expected target, for the % of Subsequent Child Protection Case Conferences held within 6 months, was challenging throughout 2022/23. Performance

fluctuated with the expected target achieved in 1 of the 9 months during Quarter 2 to 4 (July 22 to March 23).

These Case Conferences are scheduled within the required timeframes, however, performance is impacted by issues with conferences being quorate and cancellations due to sickness. This results in meetings being rescheduled which then fall outside the target timescale. The March 23 outturn has also been impacted by workforce issues with a number of vacant posts and lengthy recruitments; a targeted recruitment campaign is planned to resolve this issue. In addition, the service are to undertake a 'Deep Dive' of the processes involved in the timing and scheduling of case conferences.



Year Ahead – 2023/24

- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Number of Initial Family Assessments Completed - propose to pause the target on initial assessments. Further exploration is required as to what each Trust is counting in relation to initial assessments. This target may be reintroduced following this review.
 - Case Conference (3 metrics) – targets remain unchanged however, the target trajectories to be reviewed following publication of DSF report in June 2023.
 - Introduction of two new metrics:
 - Unallocated Cases - reduce the number of Unallocated Cases within Family Intervention, Family Support, (or where there is a combined team family Intervention/LAC), by 20% by March 2024.
 - DSF Related – to be confirmed following publication of DSF report in June 2023

Mental Health Services – Service Delivery Plan

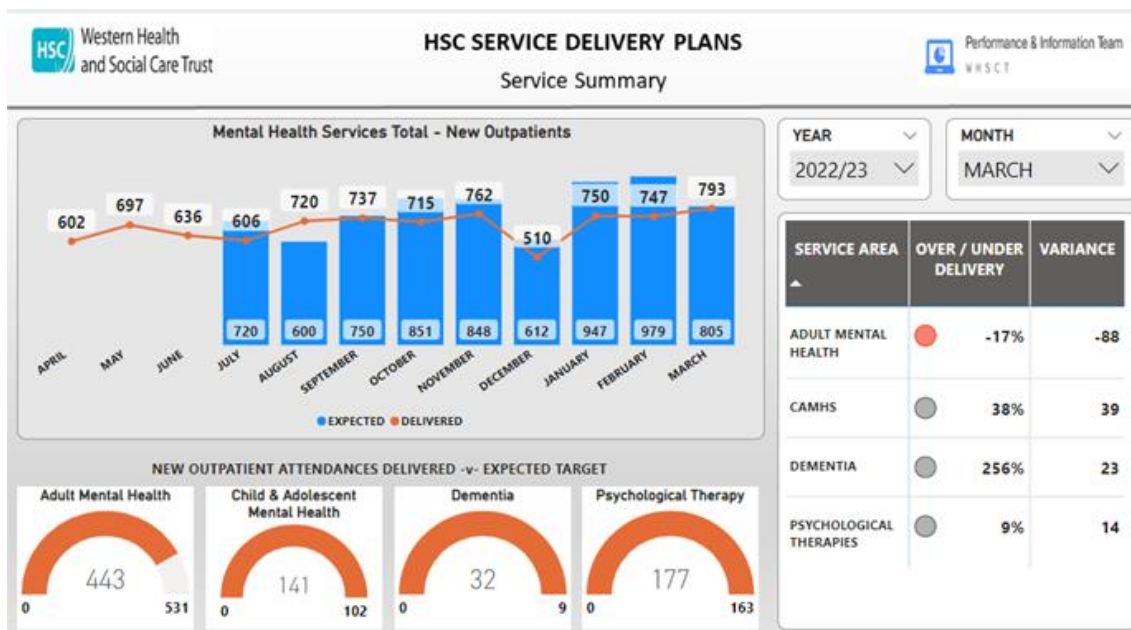
The 2022/23 SDP target was to deliver 100% of pre-COVID (2019/20) activity by December 22 and, as a minimum, maintain that level to end of March 23 for Adult Mental Health and Dementia.

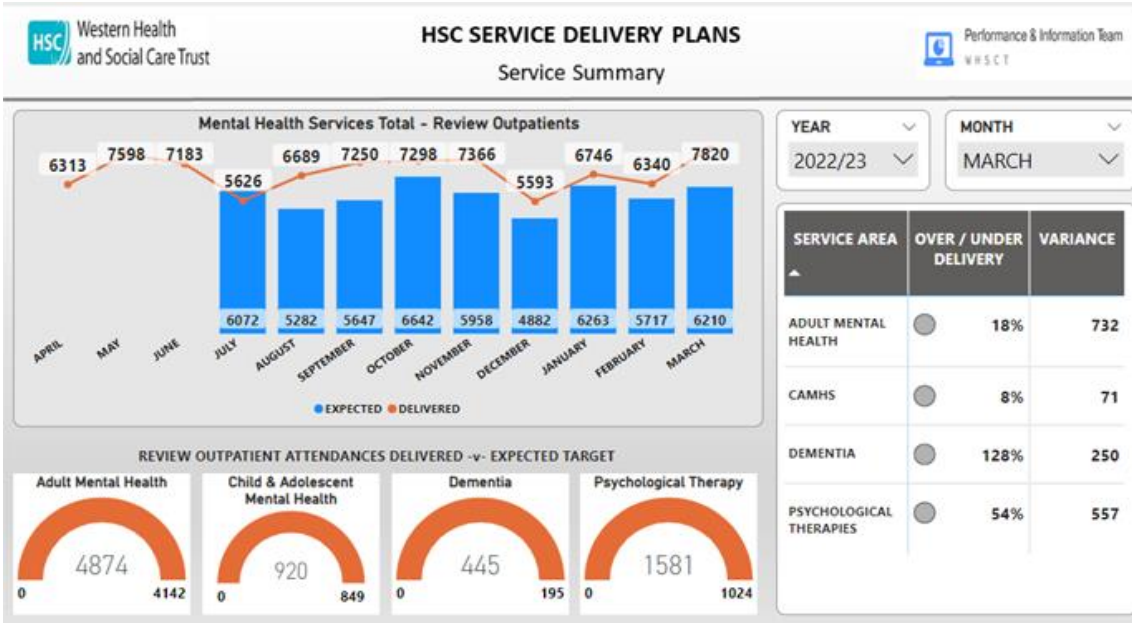
The 2022/23 SDP target was to deliver 90% of pre-COVID (2019/20) activity by September 22 and, as a minimum, maintain that level to end of March 23 for Psychological Therapies.

The 2022/23 SDP target was to deliver 100% of pre-COVID (2019/20) activity during 2022/23 for Child & Adolescent Mental Health Service.

Overall, New activity levels continued to rebuild throughout Quarter 2 to 4 (July 22 to March 23) with the highest number of attendances delivered in March 23 (793). Workforce challenges with recruitment and retention to vacant posts and sickness absence has particularly impacted new capacity within these services. Recruitment continues to be progressed; with services sourcing alternative means to increase capacity. The overall Review activity exceeded the SPPG expected target in 8 of the 9 months; again with the highest number of attendances delivered in March 23 (7,820).

The New and Review cumulative activity delivered in Quarter 2 to 4 (July 22 to March 23), across the four service areas (Adult Mental Health, Child & Adolescent Mental Health Service, Dementia and Psychological Therapies) represents **112%** of the cumulative SPPG expected target; delivering an additional 7,001 outpatient appointments. This represents **107%** of pre-pandemic level of delivery.

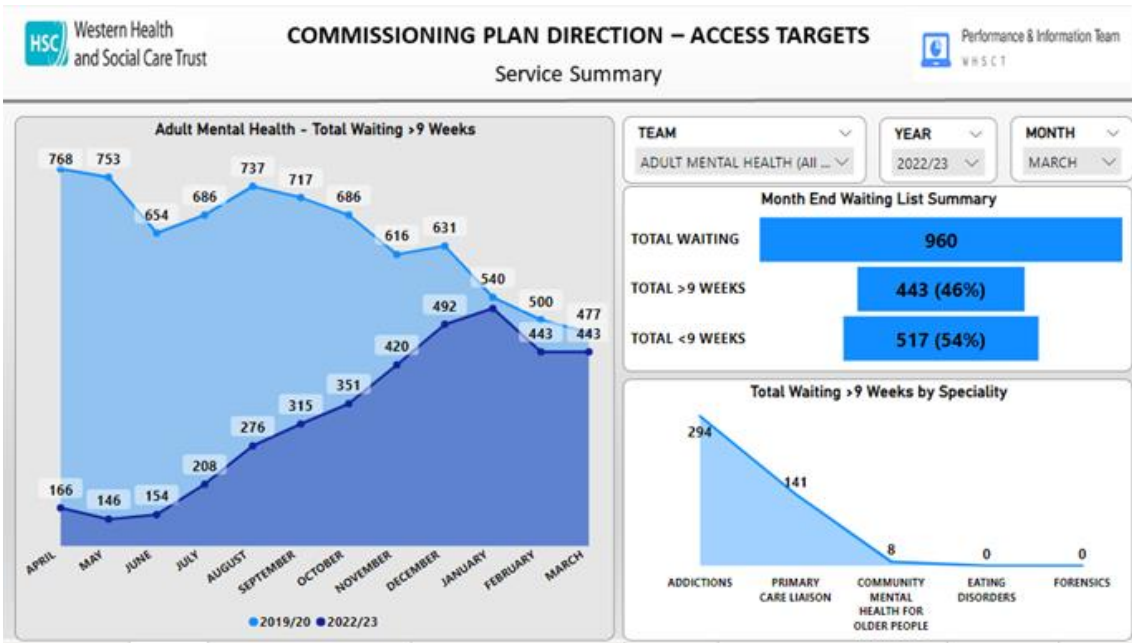




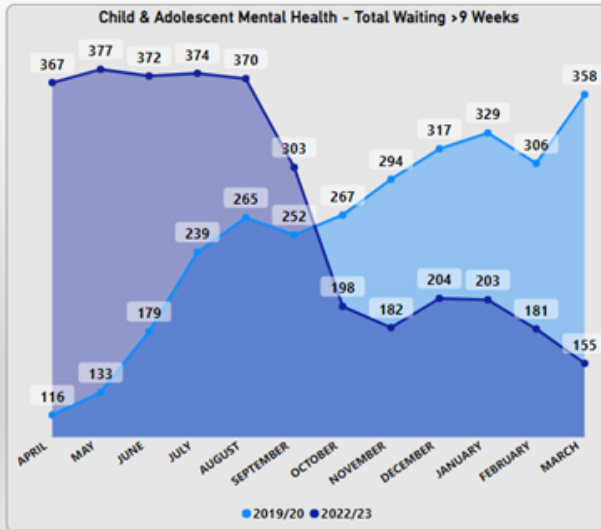
Mental Health Services – Access Performance

Performance against the 9 and 13 Week targets remained challenging across Adult Mental Health, Child and Adolescent Mental Health, Dementia and Psychological Therapies

Despite the number waiting at March 2023, improvement was achieved throughout the year in the number waiting longer than 9 weeks specifically within the Child and Adolescent Mental Health Service and a number of services within Adult Mental Health (Primary Care Liaison - 4 of the 5 teams, Older People’s Mental Health, Eating Disorder and Forensic Services).



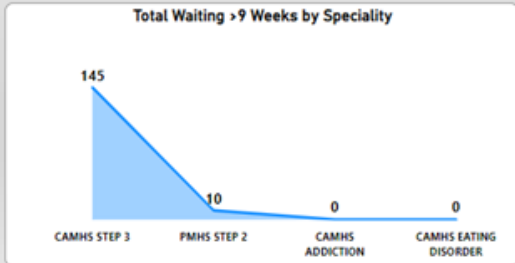
Service Summary



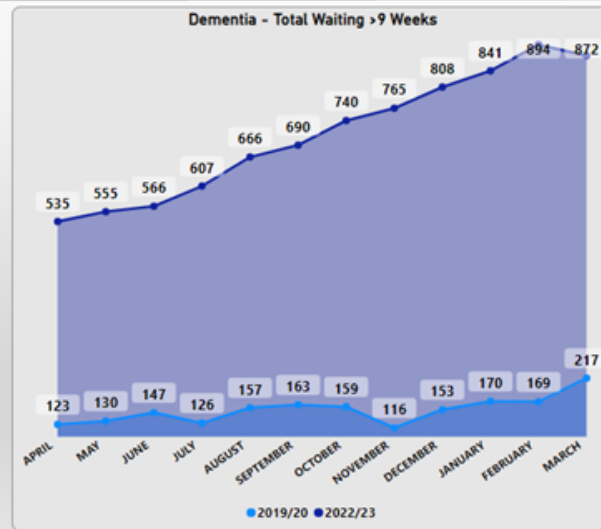
TEAM: CAMHS
 YEAR: 2022/23
 MONTH: MARCH

Month End Waiting List Summary

TOTAL WAITING	313
TOTAL > 9 WEEKS	155 (50%)
TOTAL < 9 WEEKS	158 (50%)



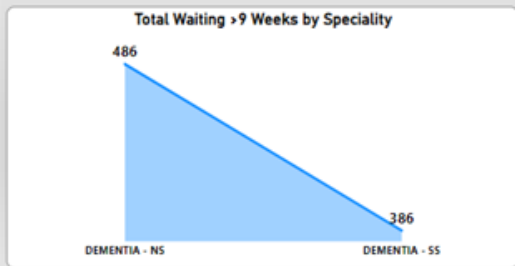
Service Summary

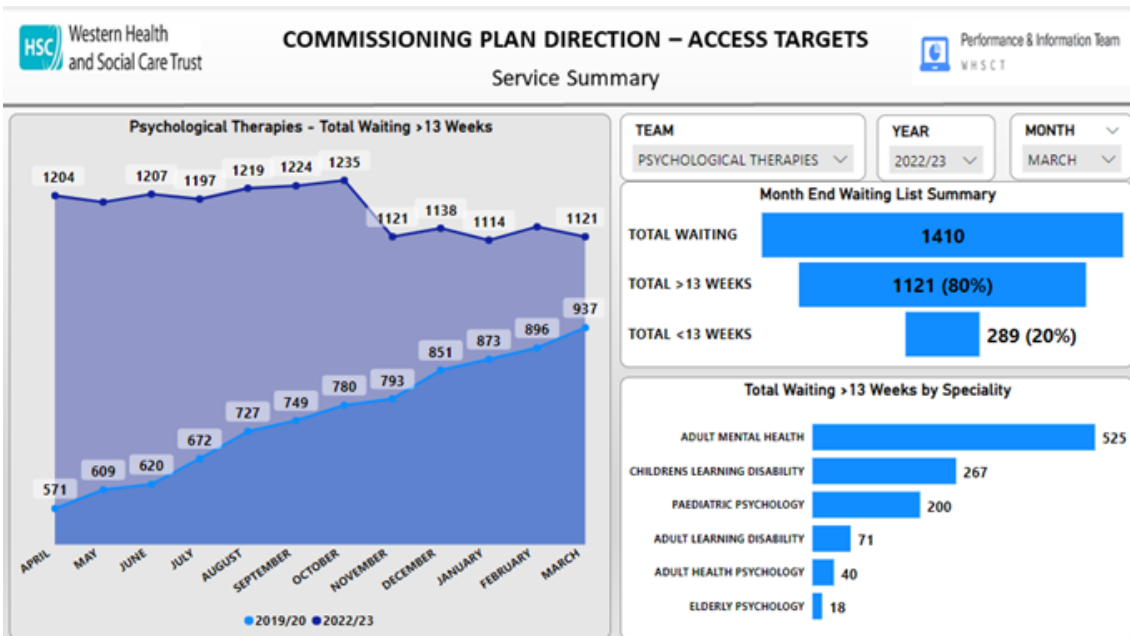


TEAM: DEMENTIA
 YEAR: 2022/23
 MONTH: MARCH

Month End Waiting List Summary

TOTAL WAITING	1042
TOTAL > 9 WEEKS	872 (84%)
TOTAL < 9 WEEKS	170 (16%)





Year Ahead – 2023/24

- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Adult Mental Health and Dementia Services to achieve 110% of 2019/20 activity levels.
 - Psychological Therapy Services to achieve 100% of 2019/20 activity levels.
 - Child and Adolescent Mental Health Service to achieve 100% of 2019/20 New activity levels and 110% of 2019/20 Review activity levels.
- The Child and Adolescent Mental Health Service Improvement Plan, submitted to SPPG in March 23, detailing current issues, short term plans and associated timelines for completion; will continue to be monitored at SDP Performance meetings and by SPPG. PTEB have targeted this area for a “deep dive” review in 2023/24.

District Nursing – Service Delivery Plan

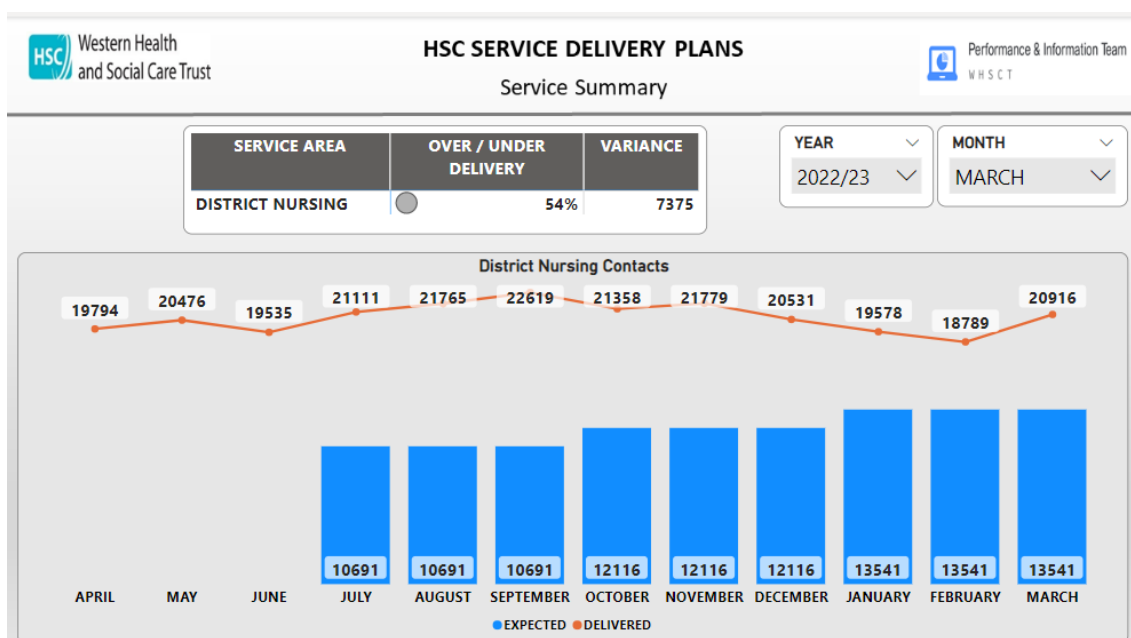
The 2022/23 SDP target was to deliver 75% of expected activity for the total WTE by end of Q2, rising to 85% by December 2022 and 95% by March 2023.

District Nursing Contacts

This service exceeded the SPPG expected target in each month during Quarter 2 to 4 (July 22 to March 23). In March 23, SPPG amended the Trust’s baseline to ‘an average of the number of monthly contacts carried out in 2019/20’.

The cumulative number of contacts delivered in Quarter 2 to 4 (July 22 to March 23) (188,446) demonstrates **173%** of the cumulative SPPG expected target and **147%** of pre-pandemic levels. The additional investment received in 2021, stable workforce and delivery of virtual clinics continues to support this level of delivery.

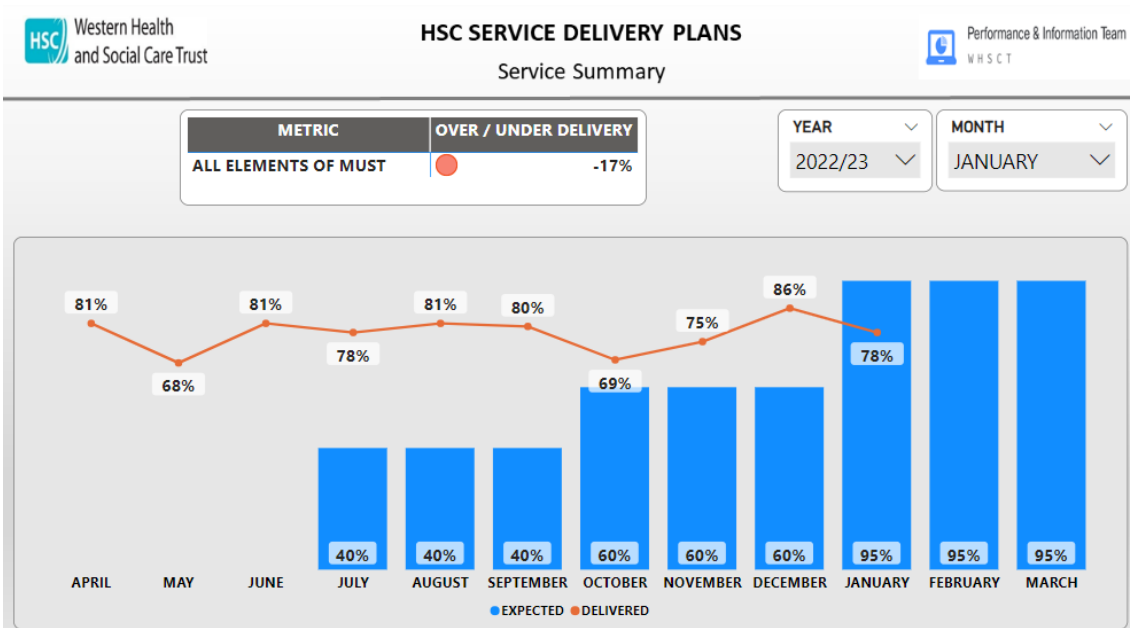
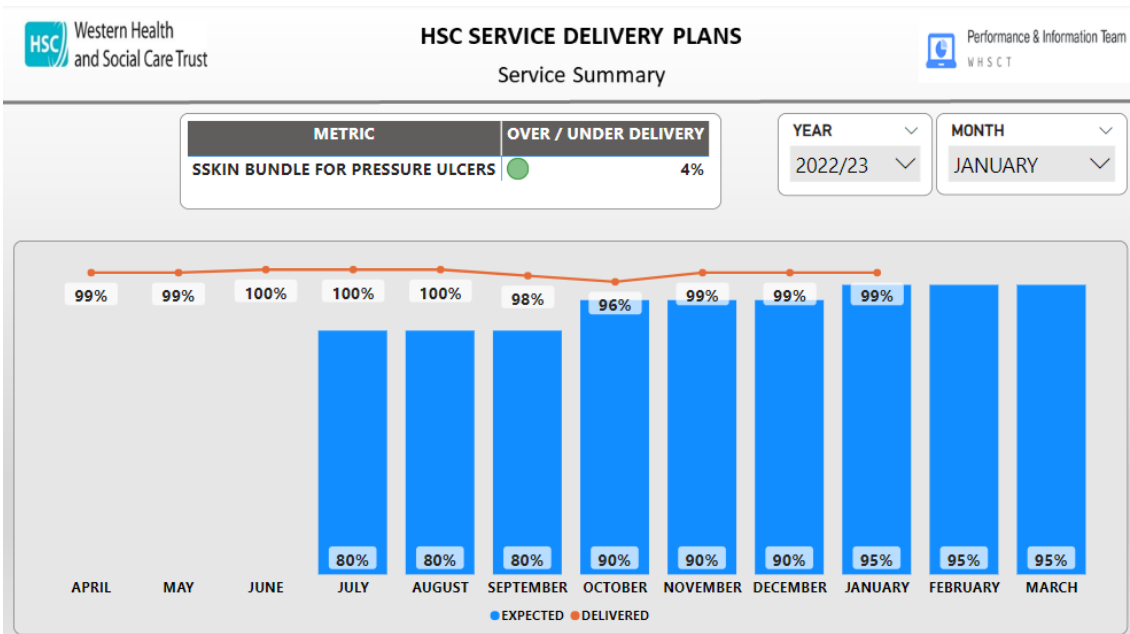
Regionally, the Western Trust is the only Trust to exceed the expected targets throughout Quarter 4 (January to March 23).



District Nursing Contacts – Quality Indicators

The 2022/23 SDP target was to achieve 95% compliance of 2019/20 baseline figures for SSKIN Bundle for Pressure Ulcers and Malnutrition Universal Screen Tool (MUST) by March 2023.

The Trust exceeded the SPPG expected target for both District Nursing Quality Indicators for Quarter 2 and 3 (July to December 22). These metrics are subject to an agreed two month time lag in reporting therefore the end of year position is not yet available.



Year Ahead – 2023/24

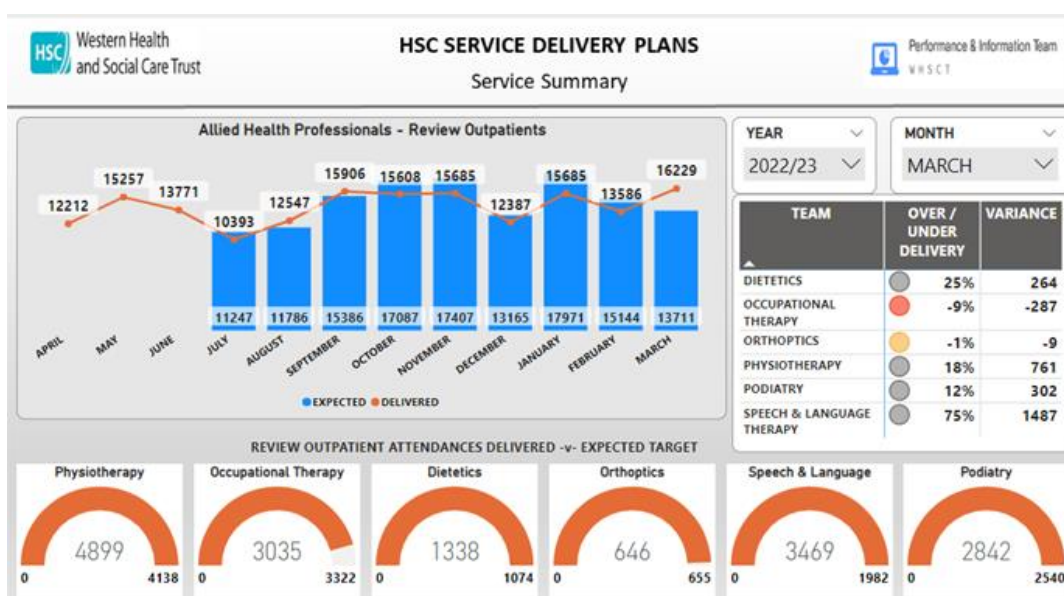
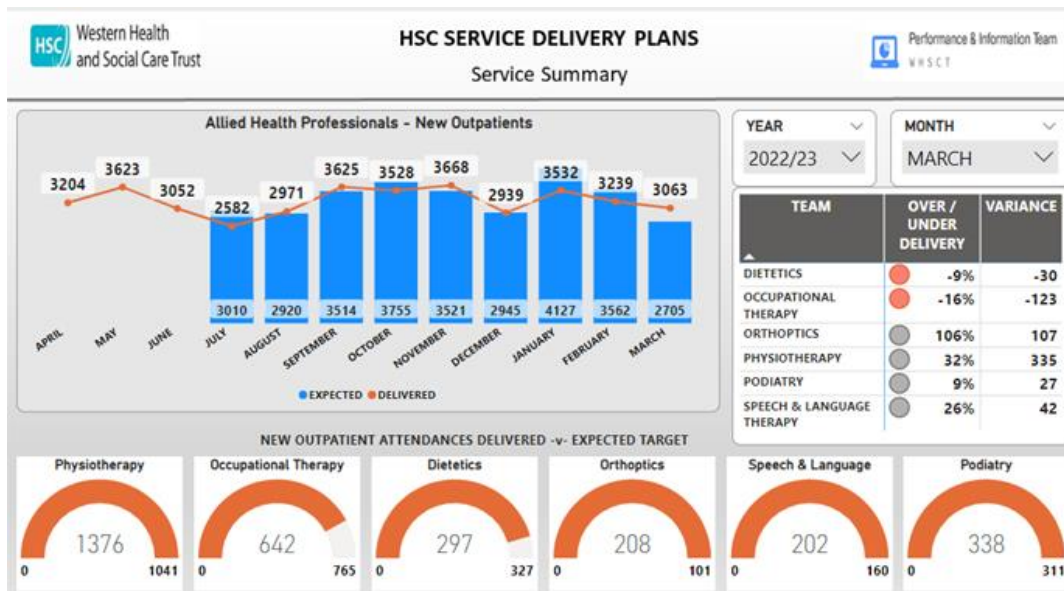
- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Community Nursing Contacts, Compliance with the SSKIN bundle for pressure ulcers and Compliance with all elements of MUST to achieve 100% in 2022/23. The Baseline year yet to be confirmed.
 - Introduction of a new metric:
 - Compliance with all elements of the Palliative Care Quality Indicator to achieve 60 % (April - May), 80% (June - August) and 95% from September. The Baseline year is yet to be confirmed.

Allied Health Professionals (AHPs) – Service Delivery Plan

The 2022/23 SDP target from October 22 was to deliver activity at a similar level to the same month in 2019/20.

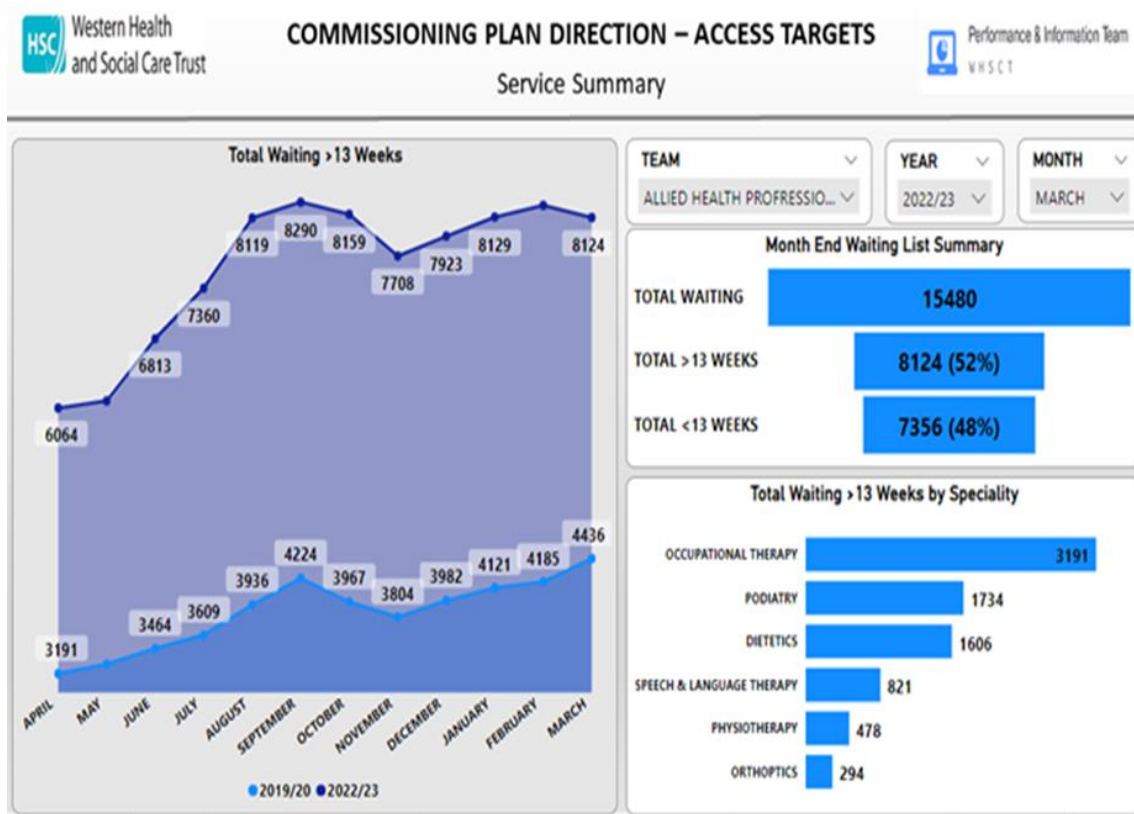
Across AHP Services, the overall New and Review activity levels continued to rebuild throughout Quarter 2 to 4 (July 22 to March 23); with the highest number of review attendances delivered in March 23 (16,229). Workforce challenges including vacant posts, sickness absence and protracted recruitment impacted capacity throughout the year. The affected services continued to progress regional recruitment whilst being supported by the Trust’s Human Resource Department with a temporary internal promotions process; which enabled additional capacity whilst regional recruitment completed.

The New and Review cumulative activity delivered in Quarter 2 to 4 (July 22 to March 23), across the six service areas, represents **96%** of the cumulative SPPG expected target. This represents **93%** of pre-pandemic level of delivery. Of the six service areas, Dietetics and Speech and Language exceeded both the new and review cumulative SPPG expected targets.



Allied Health Professionals (AHPs) – Access Performance

Overall, the number waiting longer than 13 weeks has increased throughout 2022/23. Despite the overall increase, two of the six AHP services (Physiotherapy and Orthoptics) reported continued improvement against the target from September and October 22 respectively.



Year Ahead – 2023/24

- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Allied Health Professionals to achieve 110% of 2019/20 activity levels.
- A regional AHP Elective Task and Finish Group will be established to oversee the implementation of the recommendations included within AHP overview report presented to PTEB in March 23. This group will be led by the Lead AHP Consultant PHA and include Trust representatives.

Community Dental

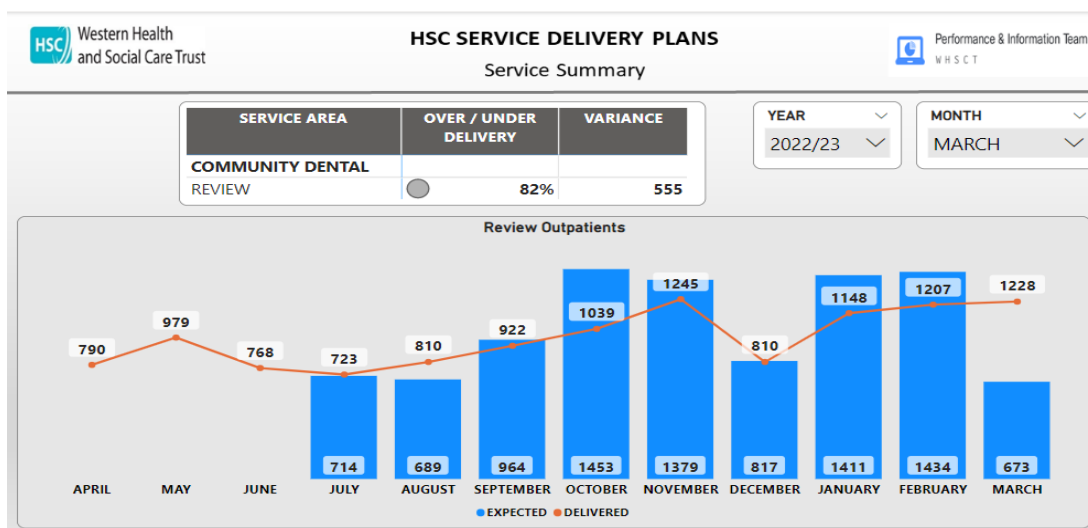
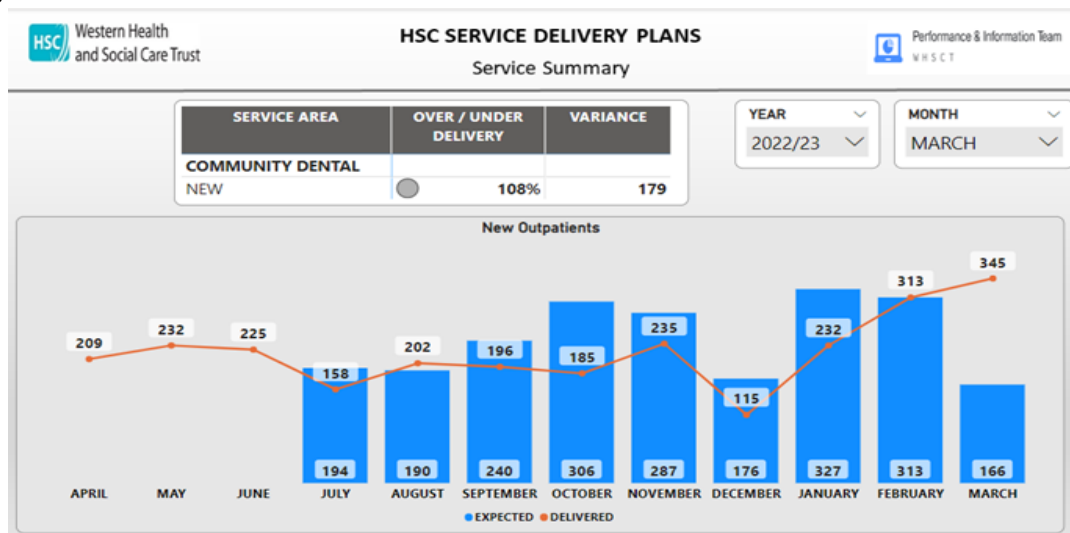
The 2022/23 SDP target for Community Dental Contacts (new and review) was to achieve 90% of pre-COVID (2019/20) service provision by Quarter 3 and 100% by March 23.

Community Dental Contacts

Performance against the SPPG expected targets remained challenging throughout the year; activity rebuilding throughout Quarter 2 and 3 with a seasonal dip in December 22 attendances. Improvement was achieved in both new and review contacts during each month from January to March 23; with the highest number of new contacts delivered in March 23 (345).

Service capacity impacted throughout the year due to sickness absence, vacant posts and reduced hours; recruitment progressed during the year with a new start commenced in February/March 23. Access to Care Homes was delayed and limited due to reduced capacity and Covid infection in some settings; this had a significant impact on performance as these screenings are high volume when compared to baseline year.

The New and Review cumulative activity delivered in Quarter 2 to 4 (July 22 to March 23), represents **95%** of the cumulative SPPG expected target and **86%** of pre-pandemic level of delivery.

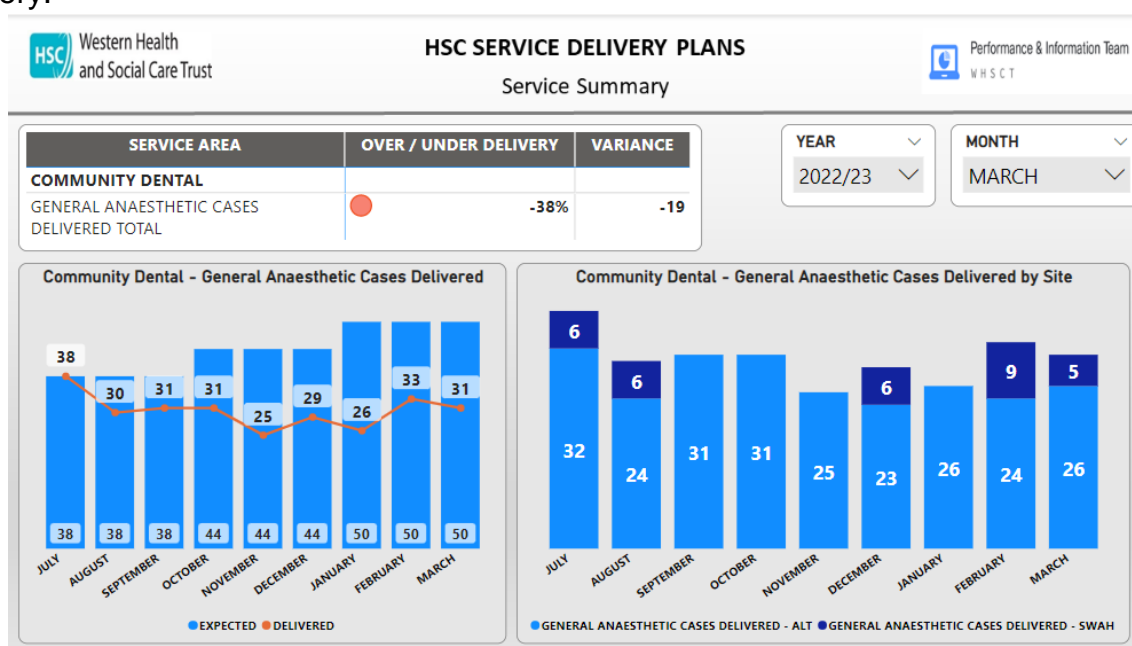


Community Dental – General Anaesthetic Cases Delivered

The 2022/23 SDP target for Community Dental - General Anaesthetic (GA) Cases was to achieve 80% of pre-COVID (2019/20) activity.

Performance against the SPPG expected target continued to be challenging throughout the year. The expected target was achieved once in July 22; with activity levels from August 22 to March 23 remaining relatively static. Performance impacted by reduced theatre capacity across both sites (Altnagelvin: -28 Day cases per month and SWAH -36 Day cases per month) when compared to pre-pandemic. Improvement noted in February and March SWAH activity with the resumption of sessions mid-February 23. It is expected that improvement will be enabled through the Theatres Efficiency Programme.


The cumulative number of GA cases delivered in Quarter 2 to 4 (July 22 to March 23), represents **69%** of the cumulative SPPG expected target and **48%** of pre-pandemic level of delivery.



Year Ahead – 2023/24

- The 2023/24 Proposed SDP Targets for services have been issued to all Trusts. The expected targets for :
 - Community Dental Contacts to achieve 100% in Quarter 2, 105% in Quarter 3 and 110% in Quarter of 2019/20 activity levels. Trust-specific targets set by SPPG to reflect challenges and also differential baselines.
 - Community Dental - General Anaesthetic (GA) Cases to achieve 100% in Quarter 2, 105% in Quarter 3 and 110% in Quarter of 2019/20 activity levels. Trust-specific targets set by SPPG to reflect challenges and also differential baselines.
- SPPG plan to ask Trusts to develop formal action plans to show how they plan to mitigate against the risk of underperformance in 2023-24.

Appendix 1

 HSC SERVICE DELIVERY PLANS	CUMULATIVE ACTIVITY: JULY 2022 - MARCH 2023				VARIANCE -V- BASELINE	OVER / UNDER DELIVERY OF BASELINE ACTIVITY	
	BASELINE	EXPECTED	DELIVERED	VARIANCE -V- EXPECTED			OVER / UNDER DELIVERY OF EXPECTED TARGET
ADULT SOCIAL CARE							
ADULT DAY CARE							
ATTENDANCES	101,610	97,093	82,143	-14,950	-15%	-19,467	-19%
DOMICILIARY CARE							
STATUTORY HOURS DELIVERED	266,382	243,569	244,287	718	0.3%	-22,095	-8.3%
INDEPENDENT HOURS DELIVERED	1,023,902	943,400	980,765	37,365	4%	-43,137	-4%
TOTAL HOURS DELIVERED	1,290,284	1,186,969	1,225,052	38,083	3%	-65,232	-5%
CHILDRENS SOCIAL CARE							
INITIAL FAMILY ASSESSMENTS COMPLETED	504	504	914	410	81%	410	81%
INITIAL CHILD PROTECTION CASE CONFERENCES HELD WITHIN 15 DAYS	87%	84%	165	13%	13%	10%	10%
TOTAL			170				
% WITHIN 15 DAYS	87%	84%	97%	13%			
REVIEW CHILD PROTECTION CASE CONFERENCES HELD WITHIN 3 MONTHS	73%	85%	123	-2%	-2%	10%	10%
TOTAL			149				
% WITHIN 3 MONTHS	73%	85%	83%	-2%			
SUBSEQUENT CHILD PROTECTION CASE CONFERENCES HELD WITHIN 6 MONTHS	78%	89%	246	-10%	-10%	1%	1%
TOTAL			313				
% WITHIN 6 MONTHS	78%	89%	79%	-10%			
MENTAL HEALTH SERVICES							
MENTAL HEALTH SERVICES OVERALL (NEW & REVIEW)	59,824	57,184	64,185	7,001	12%	4,361	7%
CANCER SERVICES							
14 DAY TARGET - CORE ACTIVITY	747	747	1,297	550	74%	550	74%
31 DAY TARGET - ACTIVITY	1,391	1,391	1,297	-94	-7%	-94	-7%
62 DAY TARGET - ACTIVITY	775	775	797	22	3%	22	3%
14 DAY TARGET - ACCESS PERFORMANCE	100%	100%	98%	-2%	-2%	-2%	-2%
31 DAY TARGET - ACCESS PERFORMANCE	98%	98%	99%	1%	1%	1%	1%
62 DAY TARGET - ACCESS PERFORMANCE	95%	95%	40%	-55%	-55%	-55%	-55%
RED FLAG REFERRALS (EXCLUDING BREAST)	6,088	6,088	7,730	1,642	27%	1642	27%
COMMUNITY NURSING							
DISTRICT NURSING CONTACTS	128,286	109,044	188,446	79,402	73%	60,160	47%
OUTPATIENTS							
OUTPATIENTS OVERALL (NEW & REVIEW)	165,390	159,809	159,627	-182	-0.1%	-5,763	-3%

HSC Western Health and Social Care Trust HSC SERVICE DELIVERY PLANS	VARIANCE		CUMULATIVE ACTIVITY: JULY 2022 - MARCH 2023				VARIANCE -V- BASELINE	OVER / UNDER DELIVERY OF BASELINE ACTIVITY	
	< -5%	-5% to -0.1%	BASELINE	EXPECTED	DELIVERED	VARIANCE -V- EXPECTED			OVER / UNDER DELIVERY OF EXPECTED TARGET
ALLIED HEALTH PROFESSIONALS									
AHP OVERALL TOTAL (NEW & REVIEW)			168,161	162,963	157,173	-5,790	-4%	-10,988	-7%
ELECTIVE CARE									
INPATIENT TOTAL (CORE & OTHER)			5,289	4,842	4,248	-594	-12.3%	-1,041	-20%
DAYCASES (CORE & OTHER)			17,948	16,757	18,488	1,731	10.3%	540	3%
INPATIENT / DAYCASE (COMBINED)			23,237	21,599	22,736	1,137	5.3%	-501	-2%
ENDOSCOPY			7,135	6,692	7,035	343	5.1%	-100	-1%
IMAGING DIAGNOSTICS									
MRI			11,610	11,325	12,089	764	7%	479	4%
CT			24,902	25,658	27,806	2,148	8%	2,904	12%
NON OBSTETRIC ULTRASOUND			31,810	31,664	31,097	-567	-2%	-713	-2%
CARDIAC SERVICES									
CARDIAC MRI			219	196	241	45	23%	22	10%
CARDIAC CT			388	353	376	23	7%	-12	-3%
ECHO			7,001	6,169	4,973	-1,196	-19%	-2,028	-29%
CATH LABS PROCEDURES			1,538	1,391	1,472	81	6%	-66	-4%
UNSCHEDULED CARE									
WEEKEND DISCHARGE RATES									
ALTNAGELVIN			15%	25%	14%	-11%	-11%	-1.2%	-1.2%
SOUTH WEST ACUTE			14%	24%	9%	-15%	-15%	-5%	-5%
AVERAGE LOS									
ALTNAGELVIN			7.7	7.5	8.2	-0.7	-9%	-0.5	-7%
SOUTH WEST ACUTE			10.1	9.9	11.7	-1.8	-18%	-1.6	-16%
STROKE SERVICES									
THROMBOLYSIS RATE									
ALTNAGELVIN			15%	15%	8%	-7%	-7%	-7%	-7%
SOUTH WEST ACUTE			24%	14%	14%	-0.3%	-0.3%	-0.3%	-0.3%
% ADMITTED <4 HOURS									
ALTNAGELVIN			39%	32%	21%	-11%	-11%	-18%	-18%
SOUTH WEST ACUTE			92%	88%	77%	-11%	-11%	-15%	-15%
COMMUNITY DENTAL									
TOTAL CONTACTS			12,970	11,733	11,113	-620	-5.3%	-1,857	-14%
GENERAL ANAESTHETIC CASES DELIVERED									
TOTAL G A DELIVERED			567	397	274	-123	-31%	-293	-52%















Appendix 2

CPD Summary / Access to HSC Services

The end-of-year position on the Trust's performance against the Commissioning Plan Direction targets are summarised below.

The red (R) status denotes Not Achieving Target, Amber (A) denotes Almost Achieved Target and Green (G) denotes Achieving Target.

Summary of Trust Performance against Commissioning Plan Targets	2022/23 Cumulative Position	2022/23 Cumulative RAG
By March 2023, ensure that at least 16% of patients with confirmed Ischaemic stroke receive thrombolysis treatment, where clinically appropriate.	11%	R
By March 2023, all urgent diagnostic tests should be reported on within 2 days.	88%	R
During 2022/23, all urgent suspected breast cancer referrals should be seen within 14 days.	93%	R
During 2022/23, at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.	99%	G
During 2022/23, at least 95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days	42%	R
By March 2023, 50% of patients should be waiting no longer than 9 weeks for an outpatient appointment.	19% < 9Weeks (Mar 23)	R
By March 2023, no patient should wait longer than 52 weeks for an outpatient appointment.	32,005 patients (Mar 23)	R
By March 2023, 75% of patients should wait no longer than 9 weeks for a diagnostic test	73% < 9Weeks (Mar 23)	A
By March 2023, no patient should wait longer than 26 weeks for a diagnostic test	676 patients (Mar 23)	R
By March 2023, 75% of patients should wait no longer than 9 weeks for an Endoscopy diagnostic test.	27% < 9Weeks (Mar 23)	R
By March 2023, no patient should wait longer than 26 weeks for an Endoscopy diagnostic test.	4,070 patients (Mar 23)	R
By March 2023, 55% of patients should wait no longer than 13 weeks for inpatient/day case treatment.	23% < 9Weeks (Mar 23)	R
By March 2023, no patient should wait longer than 52 weeks for inpatient/day case treatment	11,582 patients (Mar 23)	R
By March 2023, no patient should wait longer than 13 weeks from referral to commencement of treatment by an Allied Health Professional.	8,124 patients (Mar 23)	R
By March 2023, to establish a baseline of the number of hospital cancelled, consultant led outpatient appointments in the acute programme of care which resulted in the patient waiting longer for their appointment and by March 2024 seek a reduction of 5%.	Awaiting year end validation	
By March 2023, 95% of patients attending any type 1, 2 or 3 emergency department are either treated and discharged home, or admitted, within four hours of their arrival in the department	49%	R
By March 2023, no patient attending any type 1, 2 or 3 emergency department should wait longer than 12 hours	17,934 patients	R
By March 2023, at least 80% of patients to have commenced treatment, following triage, within 2 hours	67%	R

By March 2023, ensure that 90% of complex discharges from an acute hospital take place within 48 hours	83%	
By March 2023, ensure that no complex discharge from an acute hospital takes more than seven days	305 discharges	
By March 2023, all non-complex discharges from an acute hospital to take place within six hours.	95%	
By March 2023, 95% of patients, where clinically appropriate, wait no longer than 48 hours for inpatient treatment for hip fractures.	82%	
By March 2023, no patient waits longer than nine weeks to access adult mental health services.	443 patients (Mar 23)	
By March 2023, no patient waits longer than 9 weeks to access dementia services.	872 patients (Mar 23)	
By March 2023, no patient waits longer than 13 weeks to access psychological therapies (any age).	1,121 patients (Mar 23)	
During 2022/23, ensure that 99% of all learning disability discharges take place within seven days of the patient being assessed as medically fit for discharge	88%	
During 2022/23, no learning disability discharge to take more than 28 days from the patient being assessed as medically fit for discharge	2 discharges	
During 2022/23, ensure that 99% of all mental health discharges take place within seven days of the patient being assessed as medically fit for discharge	97%	
During 2022/23, no mental health discharge to take more than 28 days from the patient being assessed as medically fit for discharge.	31 discharges	
By March 2023, the proportion of children in care for 12 months or longer with no placement change is at least 85%.	Awaiting service validation	
By March 2023, 90% of children, who are adopted from care, are adopted within a three year time frame (from date of last admission).		
By March 2023, no patient waits longer than 9 weeks to access child and adolescent mental health services.	155 patients (Mar 23)	
By March 2023, secure a 10% increase (based on 2019/20 figures) in the number of direct payments to all service users.	1,707 (Mar 23) service users/carers	
By March 2023, secure a 10% increase (based on 2019/20 figures) in the number of carers assessments offered to carers for all service users.	2,649 assessments offered	
By March 2023, secure a 5% increase (based on 2019/20 figures) in the number of community based short break hours (i.e. non-residential respite) received by adults across all programmes of care.	99,733 Community based Short Break hours	