

Year-end Performance Scorecard

Performance against key Commissioning
Plan targets



2019/20

Introduction

This report presents the performance at fiscal year-end performance against Commissioning Plan targets for each directorate, and compares to the year-end position in 2018/19. While the normal monthly Performance Scorecard also presents information on issues such as Safe & Effective Care, Workforce and other measures, these are not reported here as many of these issues are subject to separate in-depth annual reporting through to Trust Board.

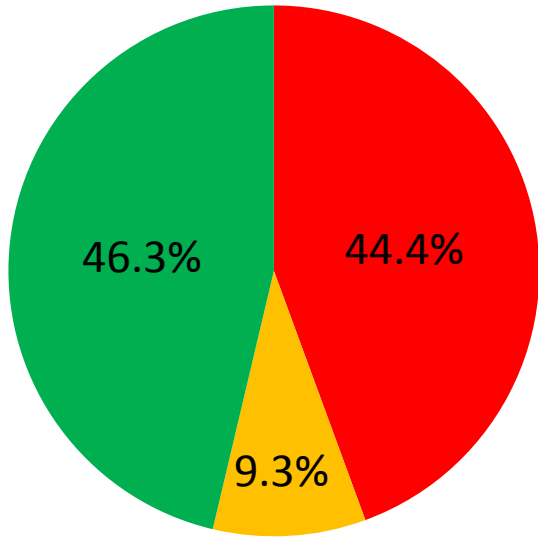
Within the 2019/20 year the Trust launched a new integrated accountability report for Trust Board.

This approach focuses on measuring the contribution that our services are making in order to improve outcomes for our patients and clients.

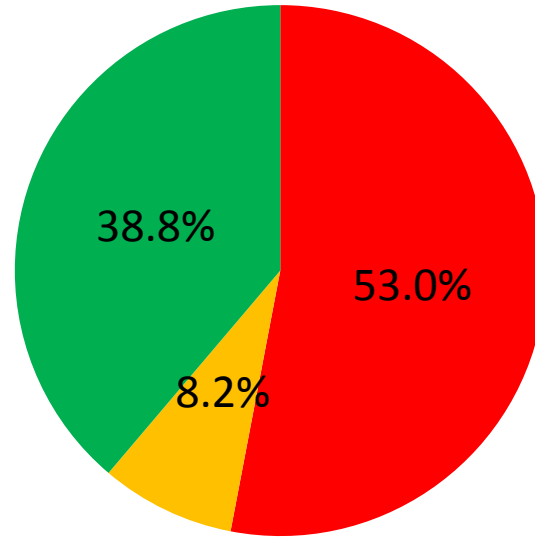
Summary

	Red	Amber	Green	Total Measures
2015/16	31	7	19	55
2016/17	24	5	25	57
2017/18	26	4	19	49
2018/19	33	5	19	57
2019/20	39	4	14	57

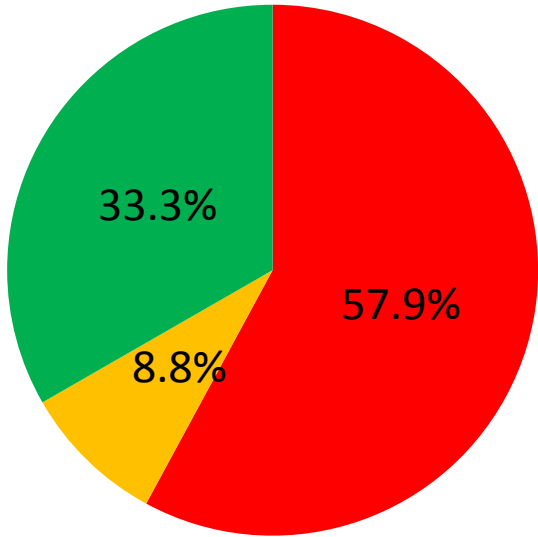
2016/17



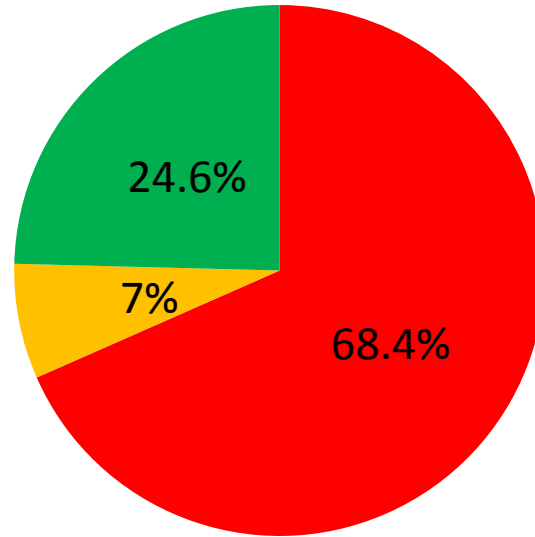
2017/18



2018/19



2019/20



HOSPITAL SERVICES

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Outpatient Waits	From April 2016, at least 50% of patients to wait no longer than nine weeks for their first outpatient appointment. No-one to wait longer than 52 weeks		Outpatients waiting less than 9 weeks as a % of total waiters.	19.8%	16.2%	Demand continues to increase across all areas of outpatient activity whilst capacity has remained largely unchanged. Non-recurrent waiting list initiative and Independent Sector transfers to address risk areas has been funded.
			No. waiting >52 weeks	28265	21055	
Diagnostic waits	75% of patients should wait no longer than 9 weeks for a diagnostic test. No patient to wait over 26wks	These figures relate to Imaging waits only.	Patients waiting less than 9 weeks as a % of total waiters.	65.8%	51.8%	There is pressure on the service due to increased demand; current position has been achieved with the use of Waiting List Initiatives and Independent Sector. Pressures continue in modalities with no Independent Sector availability. 1854 patients waiting over 26wks at Mar 20
		These figures relate to Physiological Measurement; i.e. all diagnostics with the exception of Imaging and Endoscopy.	Patients waiting less than 9 weeks as a % of total waiters.	51.4%	46%	There has been increased demand for this service with no additional funding of Waiting List or Independent Sector. 1227 patients waiting over 9wks at Mar 20
Diagnostic waits	No patient should wait longer than 9 weeks for a day case endoscopy for sigmoidoscopy, ERCP, colonoscopy, gastroscopy.		Patients waiting less than 9 weeks as a % of total waiters.	69%	72%	Numbers of patients waiting more than 9 weeks has decreased due to use of waiting list initiative for areas at risk; however demand continues to increase in urgent/suspect cancer referrals and unscheduled care. 465 patients waiting over 9wks and 301 waiting over 13wks
	No patient should wait longer than 13 weeks for other endoscopies.		Patients waiting less than 13 weeks as a % of total waiters.	63%	58%	
Inpatient & Daycase Waits	By March 2019, at least 55% of inpatients and day cases to be treated within 13 weeks and no patient to wait longer than 52 weeks for treatment.	Inpatients / Day case – 55% in 13 wks target.	% Patients treated within 13 weeks	52%	44%	Increased demand in unscheduled care and an increase in red flag and urgent cases have impacted on routine waits, and have resulted in capping of elective admissions and an increase of medical outliers in elective beds. 5313 patients waiting over 13wks and 2190 waiting over 52wks at Mar 20
		All Specialties – 52 week target.	% Patients treated within 52 weeks	82%	77%	

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY	
Diagnostic Reporting	All urgent diagnostic tests to be reported within 2 days of the test being undertaken			% Tests reported < 2 days	70.1%	76.0%	Performance on reporting of urgent tests improved by 5.9% on Mar19 despite an increase of 458 urgent tests undertaken on last year. 597 tests were not reported within the target
Non-complex Discharges	All non-complex discharges to be discharged within 6 hours of being declared medically fit.	All qualifying patients in SET beds. Main reason for delays is patient awaiting transport from friends, family or ambulance service.	% Patients discharged <6hrs		89%	85.9%	The aim of this target is to ensure early flow out of the Emergency Department (ED). Performance against target has dropped, however we continue to maximise use of our discharge lounge evidencing an increase in the number of patients transferring from ED to ward during the day, and a 5% drop in patients moving overnight. The Trust continues to proactively encourage family on the timely pick up of their relatives from hospital and to seek alternative appropriate transport arrangements. A contract with the Red Cross Assisted Discharge service has been implemented in co-ordination with the discharge hub.
Emergency Departments	95% of patients attending any Emergency Department to be either treated and discharged home, or admitted, within 4 hours of their arrival in the department. No patient attending any Emergency Department should wait longer than 12 hours.		SET	% within 4hrs target	69.3%	72%	There were 95,662 new and unplanned attendances to the Ulster ED in FY19/20. Regionally the Trust performed best in region for FY19/20 with a cumulative compliance of 71% against the 4 hour target. There were 9,599 12hr breaches during FY19/20. We have made significant investment in senior medical and nursing cover enabling us to improve our 4 hour and maintain our ability to see and assess patients in a timely manner.
				Number waiting 12hrs or more	789	514	
			UH	% within 4hrs target	57%	60.3%	
				Number waiting 12hrs or more	759	495	
LVH	% within 4hrs target	73.8%	82.6%				
	Number waiting 12hrs or more	11	1				

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY	
			DH	% within 4hrs target	86.4%	86.9%	Development of ambulatory pathways within respiratory, cardiology, diabetes and gastrointestinal services continues to prevent admission and reduce LOS impacting positively on ED performance.
				Number waiting 12hrs or more	22	18	
Hip Fractures	95% of patients should, where clinically appropriate, wait no longer than 48 hours for inpatient treatment for hip fractures.			% within 48hr target	97% (Feb19)	92%	Escalation measures have been put in place at various points over the year with additional lists organised and patients transferred to elective lists in Musgrave Park Hospital. The Trust's inability to meet the target is due to insufficient fracture theatre resource to manage peak demand and due to the urgency of other complex fracture trauma cases.
				Breaches	No March data – 1 in Feb	2	

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY	
Other Operative Fractures	No patient to wait longer than 7 days for operative fracture treatment (including day cases)			Number >7 days	2	1	The Trust's inability to meet the target is due to insufficient fracture theatre resource to manage peak demand and due to the urgency of other complex fracture trauma cases. Within current resource the Directorate anticipates 65 – 70% target is achievable.
Stroke Services	From April 2016, ensure that at least 15% of patients with confirmed ischaemic stroke receive thrombolysis. 15/16 target – 13%			% Treated with thrombolysis	16.5%	8%	In March, of the 37 confirmed ischaemic strokes admitted only 8% (3) patients presented within the appropriate timeframe and were assessed as suitable for thrombolysis.

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Card Before you Leave	Ensure that all adults and children who self-harm and present for assessment at ED are offered a follow-up appointment with appropriate mental health services within 24 hours.		% Compliance	84.8%	100%	Target was met
			Number of breaches	7	0	

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Cancer 62-day	95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days.		% Beginning treatment <62 days	49%	45%	Compliance against the 62 day standard remains challenging. The number of red flag referrals received each month has continued to increase. In 2018/19 the Trust received on average 1425 referrals each month. This increased to 1530 in 2019/20. The Trust has recruited 2 additional trackers to allow for proactive tracking. Significant additional waiting list initiative and independent sector activity has been required across dermatology, plastics, endoscopy and radiology services.
			Breaches	22	38.5	
Breast Cancer	From April 2015 all urgent breast cancer referrals should be seen within 14 days.		% Being seen within 14 days	98.6%	98.3%	The number of referrals to the Symptomatic Breast Service has continued to increase throughout 2019/20. In 2019/20 the average number of referrals received each month rose to 172 from 161 in the previous year. In 2019/20 there were 4 patients who breached the 14 day standard.
			Breaches	3	4	

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Cancer 31-day	From April 2015 at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.		% Beginning treatment <31 days	94%	96%	Performance has been over 90% on 10 of the last 12 months with the use of Independent Sector and Waiting List Initiatives. There were 13 breaches in March 2020.
Specialist Drug Therapies	From April 2016, no patient should wait longer than 3 months to commence NICE-approved specialist therapies for rheumatoid arthritis, psoriatic arthritis or ankylosing spondylitis.		Patients waiting less than 13 weeks as a % of total waiters.	100%		Data Unavailable
			Breaches	0		
Specialist Drug Therapies	From April 2016, no patient should wait longer than 3 months to commence NICE approved specialist therapies for psoriasis.		Patients waiting less than 13 weeks as a % of total waiters.	100%		Data Unavailable
			Breaches	0		

PRIMARY CARE AND OLDER PEOPLE SERVICES

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY																													
AHP Services	No patient to wait longer than 13 weeks from referral to commencement of treatment.	At 31 st March 2020 of 11314 patients on the AHP waiting list, 734 are waiting longer than 13 weeks.	% Within 13 wk target	99.98%	93.4%	Performance has been steady over the year. The main area of pressure is Adult Speech and language Therapy where demand has increased threefold due to the number of referrals for swallowing assessments. Swallow awareness e-learning training package has been developed and was launched in Jan 20																													
		<table border="1"> <thead> <tr> <th>Service</th> <th>No on W/L</th> <th>Waiting >13 wks</th> <th>Compliance</th> </tr> </thead> <tbody> <tr> <td>Physio</td> <td>4757</td> <td>76</td> <td>98.4%</td> </tr> <tr> <td>OT</td> <td>1280</td> <td>100</td> <td>92.2%</td> </tr> <tr> <td>Orthoptics</td> <td>214</td> <td>1</td> <td>99.5%</td> </tr> <tr> <td>Podiatry</td> <td>1232</td> <td>29</td> <td>97.6%</td> </tr> <tr> <td>Adults S&LT</td> <td>843</td> <td>396</td> <td>53%</td> </tr> <tr> <td>Childrens S&LT</td> <td>330</td> <td>4</td> <td>98.8%</td> </tr> <tr> <td>Dietetics</td> <td>917</td> <td>22</td> <td>97.6%</td> </tr> </tbody> </table>					Service	No on W/L	Waiting >13 wks	Compliance	Physio	4757	76	98.4%	OT	1280	100	92.2%	Orthoptics	214	1	99.5%	Podiatry	1232	29	97.6%	Adults S<	843	396	53%	Childrens S<	330	4	98.8%	Dietetics
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Breaches	734	628																																	
Complex Discharges	90% of complex discharges should take place within 48 hours.	All qualifying patients from SET Trust of Residence in NI acute beds.	% Within 48hr target	78%	72.4%	The Discharge Hub has taken forward a Home First programme in the Ulster Hospital, initially identifying patients attending the Emergency Department whose assessment can be carried out in the person's own home and avoiding hospital admission. Discharge Hub is rolling out the Home First approach to wards in UHD so discharges can be facilitated at an earlier stage.																													
			Breaches	71	107																														
		All qualifying patients in SET beds.	% Within 48hr target	77.6%	67.4%																														
			Breaches	536	402																														
	No Complex discharge should take longer than 7 days.	All qualifying patients in SET beds.	% Within 7-day target	91.6%	93%																														
			Breaches	45	22																														

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
HCAI	By March 2019 secure a reduction of 7.5% in the total number of in-patient episodes of Clostridium difficile infection in patients aged 2 years and over, and in-patient episodes of Methicillin-resistant Staphylococcus aureus (MRSA) bloodstream infection compared to 2017/18. By March 2019 secure an aggregate reduction of 11% of (GNB) Escherichia coli, Klebsiella spp. and Pseudomonas aeruginosa bloodstream infections acquired after two days of hospital admission, compared to 2017/18.	C. Difficile	Number in Year	84	74	
			(Target)	<55	<55	
		MRSA	Number in Year	12	7	
			(Target)	<5	<5	
		GNB	Number in Year	59	68	
			(Target)	<39	<39	
Unplanned Admissions	By March 2019 reduce the number of unplanned hospital admissions by 5% for adults with specified long-term conditions		No of Admissions	2884	2784	*PROJECTED (target reported in arrears)
			(Target)	<2684	<2684	

ADULT SERVICES

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Mental Health Services						
Waiting Times For Assessment And Treatment	No patient to wait more than 9 weeks from referral to assessment and commencement of treatment in Adult Mental Health Services.		% within 9 week target	92.4%	82.2%	Significant increased pressure within the Ards Sector has contributed to breaches. This is mostly associated with increased staff turnover and increased demand for emergency assessments. An action plan has been outlined to address the number of breaches.
			Breaches	57	153	
Discharge and Follow-up	From April 2016, 99% of discharges take place within 7 days of patient being assessed as medically fit for discharge and all within 28 days.		% Within 7 days	100%	87.0%	As community accommodation options are more limited, it is increasingly more challenging to meet this target and it is anticipated that the Trust will find it increasingly difficult to meet the target as we progress through 2021.
	All discharged patients due to receive a continuing care plan in the community to receive a follow-up visit within 7 days of discharge.	There were 73 SET discharges in March. 73 were offered 7 day follow up. 72 were seen within 7 days. 1 DNA..	% within 7 days	100%	100%	This is an important target for the service, which strives to perform consistently well against it. This target is linked to findings and recommendations from National Confidential Inquiry into Suicide and Homicide by People with Mental Illness. The first 7 days post discharge had been noted in previous Inquiries as a critical period when individuals were most at risk. The 7 day follow up visit helps individuals manage this transition through early contact and support.

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Disability Services						
Discharge	From April 2016, 99% of discharges take place within 7 days of patient being assessed as medically fit for discharge and all within 28 days.		% within 7 days	100%	100%	The Trust has met this target
Resettlement	By March 2017, resettle the remaining long-stay patients in learning disability hospitals to appropriate places in the community.			At the end of March 2019 the Trust has 3 patients to resettle 2 in receipt of treatment .	At the end of March 2020 the Trust has 3 patients to resettle 2 in receipt of treatment.	SEHSCT have 3 remaining patients to resettle from the original list. New services are being developed to meet this need; however 2 of the 3 patients are not ready for discharge at this stage as they are receiving treatment.

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Prison Healthcare Services						
Reception/ Committal	ALL prisoners to have healthcare / keep-safe screen on day of reception, before spending first night in prison		% compliance	100%	99.1%	100% patients offered initial assessment, however 0.9% refused.
	ALL prisoners to be subject to a "Comprehensive Health Assessment" within 72 hours of committal		% compliance	97.5%	99.1%	100% patients offered comprehensive assessment, however 0.9% refused.
Inter-prison transfer	All prisoners to receive a "Transfer Health Screen" by Prison Healthcare Staff on the day of arrival.		% compliance	100%	100%	Target met
Emergency Care	In an emergency, prisoners to be seen by Healthcare Staff within 1 hour		% compliance	100%	100%	Target met
Addictions Services	No prisoner with an opiate or an intravenous drug addiction who wishes to be seen by the Addictions Team should wait longer than 9 weeks.		% compliance	100%	68%	Increased referral rate and latterly the pandemic have impacted on delivery and inductions onto Opiate Substitution Therapy. Community services are not meeting this target especially BHST from whom we receive the vast majority of referrals. A new standardised Addictions report, agreed regionally, will be considered for 20/21 reporting.

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Psychology Services						
Waiting Times For Assessment And Treatment	No patient of any age to wait more than 13 weeks from referral to assessment and commencement of treatment in Psychological Therapies		% > 13 weeks	51.3%	29.6%	Deterioration in performance is due to increased demand; increase in complexity and staff recruitment challenges
			Breaches	413	943	

CHILDREN'S SERVICES

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Children in Care	All children admitted to residential care should, prior to admission:- (1) Have been the subject of a formal assessment to determine the need for residential care. (2) Have had their placement matched through the Children's Resource Panel Process.	All placements were subject to formal assessment and went through the Children's Resource Panel.	% compliance	100%	100%	This target was met
	For every child taken into care, a plan for permanence and associated timescales should be agreed within 6 months and formally agreed at the first six-monthly LAC review.	There were 17 children taken into care during September 2015. One child was respite / shared care, 7 children were discharged from care.	% compliance	100%	100%*	Feb 20 position
		Of the remaining 9 children, 7 had a permanence plan in place at the end of March 2016.	Number of children without permanence plan within 6 months.	0	0*	
Assessment Of Children At Risk Or In Need	All child protection referrals to be allocated within 24 hours of receipt of referral.		% compliance (breaches)	100%	100%	This target was met

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
	All child protection referrals to be investigated and an initial assessment completed within 15 working days from the date of the original referral being received.		% compliance (breaches)	100%	96.6%	This target was met
Assessment Of Children At Risk Or In Need	Following the completion of the initial child protection assessment, a child protection case conference to be held within 15 working days of the original referral being received.		% compliance (breaches)	82.4%	82.4%	3 Breaches in March 2020
	All Looked After Children Initial assessments to be completed within 14 working days from the date of the child becoming looked after.		% compliance (breaches)	100%	100%	This target was met
	All family support referrals to be allocated to a social worker within 30 working days for initial assessment.		% compliance (breaches)	81.8%	93.6%	11 breaches in March 2020
	All family support referrals to be investigated and an initial assessment completed within 10 working days from the date the original referral was allocated to the social worker.		% compliance (breaches)	24%	21.4%	Regionally Trusts have difficulty with this target. Completion of a Family Support assessment is not wholly within the control of Trust staff; there is a reliance on gathering information from other disciplines, carrying out an analysis and having the assessment written up and quality assured by a SSW.

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
	On completion of the initial assessment 90% of cases deemed to require a Family Support pathway assessment to be allocated within a further 30 working days.		% compliance (breaches)	72%	50%	This target was not met. There were 11 breaches out of 22 cases

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY									
Autism	No child to wait more than 13 weeks for assessment following referral.	At 31 st March 2020, 98 children were on the waiting list specifically for diagnostic assessment for ASD. No children waiting > 13 wks (Longest wait 68 Days) % = compliance (n) = breaches	% compliance (breaches)	100%	100%	This target was met.									
	No child to wait more than 13 weeks for the commencement of specialist treatment following assessment.	31 st March 2020 – 58 total waiters:- <table border="1"> <tr> <td>0 – 4 wks</td> <td>35</td> </tr> <tr> <td>>4 – 8 wks</td> <td>14</td> </tr> <tr> <td>>8 – 13 wks</td> <td>9</td> </tr> <tr> <td>> 13 wks</td> <td>0</td> </tr> <tr> <td>Total</td> <td>58</td> </tr> </table> % = compliance (n) = breaches	0 – 4 wks	35	>4 – 8 wks	14	>8 – 13 wks	9	> 13 wks	0	Total	58	% compliance (breaches)	100%	100%
0 – 4 wks	35														
>4 – 8 wks	14														
>8 – 13 wks	9														
> 13 wks	0														
Total	58														

TITLE	TARGET	NARRATIVE		Mar 2019	Mar 2020	COMMENTARY
Unallocated Cases	Monitor the number of unallocated cases >20 days in Children's Services		Number of Unallocated Cases >20 days at 31 st March	151	206	

Hospital Services

Performance Area	Performance 2018/19	Projected Performance 2019/20	Actual Position 19/20
Cancer 14 days (%)	98	99	100
Cancer 31 days (%)	94	84	92.2%
Cancer 62 days (%)	52	29	40.7%
Fracture Neck of Femur (%)	77	71	75.2%
IPDC Core Elective (%)	5.7%	-0.6%	9.6%
Endoscopy Core Elective (%)	-3.3%	-3%	-6.7%
NOP Core (%)	-6.4%	-5.7%	-3.7%

ED 4 Hour Performance (%)			
SET		70%	87%
UH		58%	58%
LVH		77%	77%
Diagnostics- Projected Breaches of 9 weeks	Performance 2018/19	Projected Performance 2019/20	Actual Position 19/20
Breaches of 9 weeks	2,485	7,328	5,305
Breaches of 26 weeks		2,594	1,210

Performance Area	Performance 2018/19	Projected Performance 2019/20	Actual Position 19/20
Psychological Therapies	379	218	943
Adult Mental Health	56	0	153