

Trust Performance Report 2017/18

TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph								
CPD: Outcome 2: People using health and social care services are safe from avoidable harm												
1.0	By 31 March 2018, to secure a regional aggregate reduction of 15% in the total number of in-patient episodes of in-patient MRSA infection compared to 2016/17.	<p>Cumulative April to July = 5 infections.</p> <p>The Trust 2017/18 target for MRSA bacteraemias has been confirmed as 15 cases to end of March 2018 (circa 1.25 pm)</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>MRSA - HCAI.</td> <td>2</td> <td>1</td> <td>0</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	MRSA - HCAI.	2	1	0	<p>Healthcare Associated Infections (HCAI) MRSA. Target 2017/18 = 15 (circa 1.25 pm)</p>
Standard	May-17	Jun-17	Jul-17									
MRSA - HCAI.	2	1	0									
2.0	By 31 March 2018, to secure a regional aggregate reduction of 15% in the total number of in-patient episodes of Clostridium Difficile infection in patients aged 2 years and over.	<p>Cumulative April to July = 33 infections.</p> <p>The Trust 2017/18 target for Clostridium difficile infection (CDI) has been confirmed as 97 cases to end of March 2018 (circa 8.08 pm).</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>C.Diff - HCAI</td> <td>6</td> <td>11</td> <td>7</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	C.Diff - HCAI	6	11	7	<p>Healthcare Associated Infections (HCAI) Clostridium Difficile. Target 2017/18 =97 (circa 8.1pm)</p>
Standard	May-17	Jun-17	Jul-17									
C.Diff - HCAI	6	11	7									
CPD: Outcome 4: Health and social care services are centred on helping to maintain or improve the quality of life												

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of people who use them																								
3.0	By March 2018, to have 95% of acute/urgent calls to GP OOH triaged within 20 minutes.	<p>Cumulative April to June = 92.3%.</p> <p>The Trust performance has been consistently above 90%.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>GP OOH triaged within 20 minutes</td> <td>93.7%</td> <td>93.2%</td> <td>93.8%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	GP OOH triaged within 20 minutes	93.7%	93.2%	93.8%													
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4.0	By March 2018, 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.	<p>Cumulative April to July = 76%.</p> <p>The Trust trajectory for improvement in 2017/18 is to achieve a further 10% improvement in winter baseline against the 4 hour unscheduled care standard.</p> <p>RVH = 72% MIH = 80%</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>ED waiting > 4 hour target</td> <td>72%</td> <td>82%</td> <td>82%</td> </tr> </tbody> </table> <p>Trust Improvement Trajectory ED 4 hour target 10% improvement</p> <table border="1"> <thead> <tr> <th>Trust Improvement Trajectory</th> <th>Apr-17</th> <th>May-17</th> <th>Jun-17</th> </tr> </thead> <tbody> <tr> <td>RVH (72%)</td> <td>66%</td> <td>67%</td> <td>83%</td> </tr> <tr> <td>MIH (80%)</td> <td>67%</td> <td>73%</td> <td>72%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	ED waiting > 4 hour target	72%	82%	82%	Trust Improvement Trajectory	Apr-17	May-17	Jun-17	RVH (72%)	66%	67%	83%	MIH (80%)	67%	73%	72%	
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5.0	By March 2018, no patient attending any emergency department should wait longer than 12 hours.	<p>Cumulative April to July = 262.</p> <p>The Trust continues to improve to the 12 hour wait target.</p> <p>The Trust trajectory for improvement in 2017/18 is to reduce the number of patients that wait in ED for more than 12 hours by: RVH = 30%, 66 pm MIH = 20%, 39 pm</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>ED waiting > 12 hour target</td> <td>152</td> <td>31</td> <td>14</td> </tr> </tbody> </table> <p>Trust Improvement Trajectory ED Reduce the number of patients that wait in ED for more than 12 hours</p> <table border="1"> <thead> <tr> <th>Trust Improvement Trajectory</th> <th>Apr-17</th> <th>May-17</th> <th>Jun-17</th> </tr> </thead> <tbody> <tr> <td>RVH (66)</td> <td>13</td> <td>68</td> <td>5</td> </tr> <tr> <td>MIH (39)</td> <td>50</td> <td>84</td> <td>26</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	ED waiting > 12 hour target	152	31	14	Trust Improvement Trajectory	Apr-17	May-17	Jun-17	RVH (66)	13	68	5	MIH (39)	50	84	26	<p>Emergency Department: Number of patients waiting more than 12 hours of their arrival.</p>
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6.0	By March 2018, at least 80% of ED patients to have commenced treatment, following triage, within 2 hours.	<p>Cumulative April to July = 81%.</p> <p>The Trust continues to deliver to the 2 hour triage target.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>ED waiting > 2 hours triage target</td> <td>78%</td> <td>84%</td> <td>84%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	ED waiting > 2 hours triage target	78%	84%	84%	<p>ED: Treatment to commence < 2 hours of triage. Target 80%</p>												
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7.0	By March 2018, 95% of patients, where clinically appropriate, wait no longer than 48 hours for inpatient treatment for hip fractures.	Cumulative April to July = 74%	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits > 48 hours Hip fractures</td> <td>79%</td> <td>58%</td> <td>64%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits > 48 hours Hip fractures	79%	58%	64%	
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8.0	By March 2018, all urgent diagnostic tests should be reported on within two days.	At the end of July 2017, 81% of patients were receiving their urgent diagnostic tests within 2 days.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Urgent Diagnostic within 2 days</td> <td>84%</td> <td>85%</td> <td>81%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Urgent Diagnostic within 2 days	84%	85%	81%	
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9.0	During 2017/18, all urgent suspected breast cancer referrals should be seen within 14 days.	Cumulative April to July= 98%.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Cancer 14 day urgent</td> <td>100%</td> <td>100%</td> <td>91%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Cancer 14 day urgent	100%	100%	91%	<p>Breast Cancer referrals - 14 day pathway. Target 100%</p> <table border="1"> <caption>Breast Cancer - 14 day pathway Performance Data</caption> <thead> <tr> <th>Month</th> <th>Performance (%)</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>88%</td></tr> <tr><td>Aug-16</td><td>82%</td></tr> <tr><td>Sep-16</td><td>98%</td></tr> <tr><td>Oct-16</td><td>97%</td></tr> <tr><td>Nov-16</td><td>99%</td></tr> <tr><td>Dec-16</td><td>99%</td></tr> <tr><td>Jan-17</td><td>99%</td></tr> <tr><td>Feb-17</td><td>99%</td></tr> <tr><td>Mar-17</td><td>99%</td></tr> <tr><td>Apr-17</td><td>99%</td></tr> <tr><td>May-17</td><td>99%</td></tr> <tr><td>Jun-17</td><td>99%</td></tr> <tr><td>Jul-17</td><td>91%</td></tr> </tbody> </table>	Month	Performance (%)	Jul-16	88%	Aug-16	82%	Sep-16	98%	Oct-16	97%	Nov-16	99%	Dec-16	99%	Jan-17	99%	Feb-17	99%	Mar-17	99%	Apr-17	99%	May-17	99%	Jun-17	99%	Jul-17	91%
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10.0	During 2017/18, at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.	Cumulative April to July = 89%.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Cancer 31 day pathway</td> <td>87%</td> <td>91%</td> <td>93%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Cancer 31 day pathway	87%	91%	93%	<p>Urgent Cancer referrals - 31 day pathway. Target 98%</p> <table border="1"> <caption>Urgent Cancer - 31 day pathway Performance Data</caption> <thead> <tr> <th>Month</th> <th>Performance (%)</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>90%</td></tr> <tr><td>Aug-16</td><td>94%</td></tr> <tr><td>Sep-16</td><td>89%</td></tr> <tr><td>Oct-16</td><td>92%</td></tr> <tr><td>Nov-16</td><td>92%</td></tr> <tr><td>Dec-16</td><td>93%</td></tr> <tr><td>Jan-17</td><td>91%</td></tr> <tr><td>Feb-17</td><td>90%</td></tr> <tr><td>Mar-17</td><td>90%</td></tr> <tr><td>Apr-17</td><td>90%</td></tr> <tr><td>May-17</td><td>88%</td></tr> <tr><td>Jun-17</td><td>90%</td></tr> <tr><td>Jul-17</td><td>92%</td></tr> </tbody> </table>	Month	Performance (%)	Jul-16	90%	Aug-16	94%	Sep-16	89%	Oct-16	92%	Nov-16	92%	Dec-16	93%	Jan-17	91%	Feb-17	90%	Mar-17	90%	Apr-17	90%	May-17	88%	Jun-17	90%	Jul-17	92%
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11.0	During 2017/18 at least 95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days.	<p>Cumulative April to July = 50%.</p> <p>The Trust is discussing an appropriate improvement trajectory for Cancer Access with the HSCB for 2017/18. Trust performance will be monitored against the agreed trajectory.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Cancer 62 day pathway</td> <td>54%</td> <td>54%</td> <td>41%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Cancer 62 day pathway	54%	54%	41%	<p>Urgent Cancer referrals - 62 day pathway. Target 95%</p> <table border="1"> <caption>Urgent Cancer referrals - 62 day pathway (Rolling 12 months)</caption> <thead> <tr> <th>Month</th> <th>Performance (%)</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>58%</td></tr> <tr><td>Aug-16</td><td>52%</td></tr> <tr><td>Sep-16</td><td>50%</td></tr> <tr><td>Oct-16</td><td>55%</td></tr> <tr><td>Nov-16</td><td>56%</td></tr> <tr><td>Dec-16</td><td>58%</td></tr> <tr><td>Jan-17</td><td>48%</td></tr> <tr><td>Feb-17</td><td>50%</td></tr> <tr><td>Mar-17</td><td>48%</td></tr> <tr><td>Apr-17</td><td>52%</td></tr> <tr><td>May-17</td><td>54%</td></tr> <tr><td>Jun-17</td><td>54%</td></tr> <tr><td>Jul-17</td><td>41%</td></tr> </tbody> </table>	Month	Performance (%)	Jul-16	58%	Aug-16	52%	Sep-16	50%	Oct-16	55%	Nov-16	56%	Dec-16	58%	Jan-17	48%	Feb-17	50%	Mar-17	48%	Apr-17	52%	May-17	54%	Jun-17	54%	Jul-17	41%
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12.0	By March 2018, 50% of patients should be waiting no longer than 9 weeks for an outpatient appointment.	At the end of July 2017, 26% of patients on Trust waiting lists were waiting no longer than 9 weeks for a first outpatient appointment.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits >9 weeks for first OP Appointment</td> <td>26%</td> <td>27%</td> <td>26%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits >9 weeks for first OP Appointment	26%	27%	26%	<p>Percentage of Outpatients waiting no longer than 9 weeks at month end. Target 50%</p> <table border="1"> <caption>Percentage of Outpatients waiting no longer than 9 weeks (Rolling 12 months)</caption> <thead> <tr> <th>Month</th> <th>Performance (%)</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>31%</td></tr> <tr><td>Aug-16</td><td>31%</td></tr> <tr><td>Sep-16</td><td>26%</td></tr> <tr><td>Oct-16</td><td>26%</td></tr> <tr><td>Nov-16</td><td>27%</td></tr> <tr><td>Dec-16</td><td>27%</td></tr> <tr><td>Jan-17</td><td>24%</td></tr> <tr><td>Feb-17</td><td>27%</td></tr> <tr><td>Mar-17</td><td>29%</td></tr> <tr><td>Apr-17</td><td>26%</td></tr> <tr><td>May-17</td><td>26%</td></tr> <tr><td>Jun-17</td><td>27%</td></tr> <tr><td>Jul-17</td><td>26%</td></tr> </tbody> </table>	Month	Performance (%)	Jul-16	31%	Aug-16	31%	Sep-16	26%	Oct-16	26%	Nov-16	27%	Dec-16	27%	Jan-17	24%	Feb-17	27%	Mar-17	29%	Apr-17	26%	May-17	26%	Jun-17	27%	Jul-17	26%
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13.0	March 2018, no patient waits longer than 52 weeks for an outpatient appointment.	The number of patients waiting in excess of 52 weeks has increased each month since April 2016, however has reduced slightly in July 2017.	<table border="1"> <thead> <tr> <th>Standard</th> <th>Apr-17</th> <th>May-17</th> <th>Jun-17</th> </tr> </thead> <tbody> <tr> <td>Waits >52 weeks for first OP Appointment</td> <td>28606</td> <td>28979</td> <td>29488</td> </tr> </tbody> </table>	Standard	Apr-17	May-17	Jun-17	Waits >52 weeks for first OP Appointment	28606	28979	29488	<p>Number of Outpatients waiting more than 52 weeks at month end. Target = 0</p> <table border="1"> <caption>Approximate data for Graph 13.0</caption> <thead> <tr> <th>Month</th> <th>OP's Waiting waiting > 52 weeks</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>20,000</td></tr> <tr><td>Aug-16</td><td>21,000</td></tr> <tr><td>Sep-16</td><td>22,500</td></tr> <tr><td>Oct-16</td><td>24,500</td></tr> <tr><td>Nov-16</td><td>25,500</td></tr> <tr><td>Dec-16</td><td>26,000</td></tr> <tr><td>Jan-17</td><td>27,000</td></tr> <tr><td>Feb-17</td><td>27,500</td></tr> <tr><td>Mar-17</td><td>28,000</td></tr> <tr><td>Apr-17</td><td>28,500</td></tr> <tr><td>May-17</td><td>29,000</td></tr> <tr><td>Jun-17</td><td>29,500</td></tr> <tr><td>Jul-17</td><td>29,000</td></tr> </tbody> </table>	Month	OP's Waiting waiting > 52 weeks	Jul-16	20,000	Aug-16	21,000	Sep-16	22,500	Oct-16	24,500	Nov-16	25,500	Dec-16	26,000	Jan-17	27,000	Feb-17	27,500	Mar-17	28,000	Apr-17	28,500	May-17	29,000	Jun-17	29,500	Jul-17	29,000
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14.0	By March 2018, 75% of patients should wait no longer than 9 weeks for a diagnostic test.	The Trust is currently not able to achieve the target.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Diagnostic Waits > 9 weeks</td> <td>44%</td> <td>45%</td> <td>42%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Diagnostic Waits > 9 weeks	44%	45%	42%	<p>Percentage of patients waiting no longer than 9 weeks for Diagnostic tests. Target 75%</p> <table border="1"> <caption>Approximate data for Graph 14.0</caption> <thead> <tr> <th>Month</th> <th>Diagnostic waits < 9 weeks</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>58%</td></tr> <tr><td>Aug-16</td><td>52%</td></tr> <tr><td>Sep-16</td><td>52%</td></tr> <tr><td>Oct-16</td><td>50%</td></tr> <tr><td>Nov-16</td><td>50%</td></tr> <tr><td>Dec-16</td><td>43%</td></tr> <tr><td>Jan-17</td><td>43%</td></tr> <tr><td>Feb-17</td><td>45%</td></tr> <tr><td>Mar-17</td><td>49%</td></tr> <tr><td>Apr-17</td><td>41%</td></tr> <tr><td>May-17</td><td>44%</td></tr> <tr><td>Jun-17</td><td>45%</td></tr> <tr><td>Jul-17</td><td>42%</td></tr> </tbody> </table>	Month	Diagnostic waits < 9 weeks	Jul-16	58%	Aug-16	52%	Sep-16	52%	Oct-16	50%	Nov-16	50%	Dec-16	43%	Jan-17	43%	Feb-17	45%	Mar-17	49%	Apr-17	41%	May-17	44%	Jun-17	45%	Jul-17	42%
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Mar-17	49%																																							
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Trust Performance Report 2017/18

TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph																																				
15.0	By March 2018, no patient waits longer than 26 weeks for a diagnostic test.	The Trust is under delivering against the target at the end of June 2017.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Diagnostic Waits >26 weeks</td> <td>16081</td> <td>17346</td> <td>20274</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Diagnostic Waits >26 weeks	16081	17346	20274	<p>Number of patients waiting more than 26 weeks for Diagnostic tests. Target = 0</p> <table border="1"> <caption>Approximate data for Diagnostic Waits >26 weeks</caption> <thead> <tr> <th>Month</th> <th>Number of Patients</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>2,000</td></tr> <tr><td>Aug-16</td><td>3,000</td></tr> <tr><td>Sep-16</td><td>3,000</td></tr> <tr><td>Oct-16</td><td>3,500</td></tr> <tr><td>Nov-16</td><td>4,500</td></tr> <tr><td>Dec-16</td><td>5,500</td></tr> <tr><td>Jan-17</td><td>5,500</td></tr> <tr><td>Feb-17</td><td>6,000</td></tr> <tr><td>Mar-17</td><td>5,500</td></tr> <tr><td>Apr-17</td><td>19,000</td></tr> <tr><td>May-17</td><td>13,000</td></tr> <tr><td>Jun-17</td><td>17,000</td></tr> <tr><td>Jul-17</td><td>20,000</td></tr> </tbody> </table>	Month	Number of Patients	Jul-16	2,000	Aug-16	3,000	Sep-16	3,000	Oct-16	3,500	Nov-16	4,500	Dec-16	5,500	Jan-17	5,500	Feb-17	6,000	Mar-17	5,500	Apr-17	19,000	May-17	13,000	Jun-17	17,000	Jul-17	20,000
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Jun-17	17,000																																							
Jul-17	20,000																																							
16.0	By March 2018, 55% of patient should wait no longer than 13 weeks for inpatient/daycase treatment.	The Trust is under delivering against the target. At the end of July 2017, 38% of patients are waiting no longer than 13 weeks at the end of March 2017.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits >13 weeks IPDC</td> <td>35%</td> <td>35%</td> <td>38%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits >13 weeks IPDC	35%	35%	38%	<p>Percentage of Inpatients / Daycases patients waiting no longer than 13 weeks. Target 55%</p> <table border="1"> <caption>Approximate data for IPDC % waiting no longer than 13 weeks</caption> <thead> <tr> <th>Month</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>38%</td></tr> <tr><td>Aug-16</td><td>37%</td></tr> <tr><td>Sep-16</td><td>36%</td></tr> <tr><td>Oct-16</td><td>38%</td></tr> <tr><td>Nov-16</td><td>39%</td></tr> <tr><td>Dec-16</td><td>36%</td></tr> <tr><td>Jan-17</td><td>35%</td></tr> <tr><td>Feb-17</td><td>35%</td></tr> <tr><td>Mar-17</td><td>37%</td></tr> <tr><td>Apr-17</td><td>36%</td></tr> <tr><td>May-17</td><td>35%</td></tr> <tr><td>Jun-17</td><td>35%</td></tr> <tr><td>Jul-17</td><td>38%</td></tr> </tbody> </table>	Month	Percentage	Jul-16	38%	Aug-16	37%	Sep-16	36%	Oct-16	38%	Nov-16	39%	Dec-16	36%	Jan-17	35%	Feb-17	35%	Mar-17	37%	Apr-17	36%	May-17	35%	Jun-17	35%	Jul-17	38%
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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph																																																		
17.0	By March 2018, no patient waits longer than 52 weeks for inpatient / daycare treatment.	The Trust is currently unable to achieve the target.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits >52 weeks IPDC</td> <td>4770</td> <td>5027</td> <td>5078</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits >52 weeks IPDC	4770	5027	5078	<p>Number of Inpatients / Daycases waiting more than 52 weeks at month end. Target = 0</p> <table border="1"> <caption>Data for Graph 17.0</caption> <thead> <tr> <th>Month</th> <th>IPDC Waiting > 52 weeks</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>3400</td><td>0</td></tr> <tr><td>Aug-16</td><td>3500</td><td>0</td></tr> <tr><td>Sep-16</td><td>3700</td><td>0</td></tr> <tr><td>Oct-16</td><td>3800</td><td>0</td></tr> <tr><td>Nov-16</td><td>4000</td><td>0</td></tr> <tr><td>Dec-16</td><td>4200</td><td>0</td></tr> <tr><td>Jan-17</td><td>4500</td><td>0</td></tr> <tr><td>Feb-17</td><td>4600</td><td>0</td></tr> <tr><td>Mar-17</td><td>4500</td><td>0</td></tr> <tr><td>Apr-17</td><td>4600</td><td>0</td></tr> <tr><td>May-17</td><td>4800</td><td>0</td></tr> <tr><td>Jun-17</td><td>5000</td><td>0</td></tr> <tr><td>Jul-17</td><td>5078</td><td>0</td></tr> </tbody> </table>	Month	IPDC Waiting > 52 weeks	Target	Jul-16	3400	0	Aug-16	3500	0	Sep-16	3700	0	Oct-16	3800	0	Nov-16	4000	0	Dec-16	4200	0	Jan-17	4500	0	Feb-17	4600	0	Mar-17	4500	0	Apr-17	4600	0	May-17	4800	0	Jun-17	5000	0	Jul-17	5078	0
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18.0	By March 2018, no patient waits longer than nine weeks to access child and adolescent mental health services	<p>The Trust is in the process of agreeing improvement trajectories for 2017/18 with the HSCB.</p> <p>Trust performance will be monitored during the year against these agreed trajectories.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits > 9 weeks CAMHS</td> <td>97</td> <td>116</td> <td>143</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits > 9 weeks CAMHS	97	116	143	<p>Number of CAMHS patients waiting > 9 weeks. Target = 0</p> <table border="1"> <caption>Data for Graph 18.0</caption> <thead> <tr> <th>Month</th> <th>CAMHS waits > 9 weeks</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>48</td><td>0</td></tr> <tr><td>Aug-16</td><td>58</td><td>0</td></tr> <tr><td>Sep-16</td><td>38</td><td>0</td></tr> <tr><td>Oct-16</td><td>55</td><td>0</td></tr> <tr><td>Nov-16</td><td>42</td><td>0</td></tr> <tr><td>Dec-16</td><td>88</td><td>0</td></tr> <tr><td>Jan-17</td><td>88</td><td>0</td></tr> <tr><td>Feb-17</td><td>82</td><td>0</td></tr> <tr><td>Mar-17</td><td>82</td><td>0</td></tr> <tr><td>Apr-17</td><td>102</td><td>0</td></tr> <tr><td>May-17</td><td>95</td><td>0</td></tr> <tr><td>Jun-17</td><td>116</td><td>0</td></tr> <tr><td>Jul-17</td><td>143</td><td>0</td></tr> </tbody> </table>	Month	CAMHS waits > 9 weeks	Target	Jul-16	48	0	Aug-16	58	0	Sep-16	38	0	Oct-16	55	0	Nov-16	42	0	Dec-16	88	0	Jan-17	88	0	Feb-17	82	0	Mar-17	82	0	Apr-17	102	0	May-17	95	0	Jun-17	116	0	Jul-17	143	0
Standard	May-17	Jun-17	Jul-17																																																			
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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph								
19.0	By March 2018, no patient waits longer than nine weeks to access adult mental health services.	<p>The Trust is in the process of agreeing improvement trajectories for 2017/18 with the HSCB.</p> <p>Trust performance will be monitored during the year against these agreed trajectories.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits >9 weeks Adult MH</td> <td>717</td> <td>760</td> <td>860</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits >9 weeks Adult MH	717	760	860	<p>Number of Adult Mental Health patients waiting > 9 weeks. Target = 0</p>
Standard	May-17	Jun-17	Jul-17									
Waits >9 weeks Adult MH	717	760	860									
20.0	By March 2018, no patient waits longer than 13 weeks to access psychological therapies (any age).	<p>The Trust is in the process of agreeing improvement trajectories for 2017/18 with the HSCB.</p> <p>Trust performance will be monitored during the year against these agreed trajectories.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits >13 weeks Psychological Therapy</td> <td>444</td> <td>533</td> <td>592</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits >13 weeks Psychological Therapy	444	533	592	<p>Number of Psychological patients waiting > 13 weeks. Target = 0</p>
Standard	May-17	Jun-17	Jul-17									
Waits >13 weeks Psychological Therapy	444	533	592									

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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph								
CPD: Outcome 5: People, including those with disabilities, long term conditions, or who are frail, receive the care that matters to them												
21.0	By March 2018, secure a 10% increase in the number of direct payments to all service users.	<p>Cumulative April to July = 665.</p> <p>The Trust continues to increase the take up of Direct Payments. Trust target 693, to be confirmed.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Direct Payment</td> <td>616</td> <td>630</td> <td>665</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Direct Payment	616	630	665	
Standard	May-17	Jun-17	Jul-17									
Direct Payment	616	630	665									
22.0	By March 2018, no patient should wait longer than 13 weeks from referral to commencement of treatment by an allied health professional.	<p>The Trust is currently unable to achieve the 13 week target to commence AHP services.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Waits >13 weeks AHP</td> <td>5468</td> <td>5289</td> <td>5325</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Waits >13 weeks AHP	5468	5289	5325	
Standard	May-17	Jun-17	Jul-17									
Waits >13 weeks AHP	5468	5289	5325									

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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph																
23.0	During 2017/18, ensure that 99% of all learning disability discharges take place within seven days of the patient being assessed as medically fit for discharge.	<p>Cumulative April to July = 75%.</p> <p>The Trust achieved the target for completed discharges.</p> <p>The smaller numbers of Learning Disability patients, however, means that any delay impacts greatly on the percentage outturn.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Disch-7 days %</td> <td>100%</td> <td>100%</td> <td>100%</td> </tr> <tr> <td>Number of discharges in 7 days</td> <td>3</td> <td>3</td> <td>2</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Disch-7 days %	100%	100%	100%	Number of discharges in 7 days	3	3	2	<p>Percentage of Learning Disability discharges < 7 days of the patient assessed as medically fit for discharge. Target 99%</p>				
Standard	May-17	Jun-17	Jul-17																	
Disch-7 days %	100%	100%	100%																	
Number of discharges in 7 days	3	3	2																	
24.0	During 2017/18, No discharge takes more than 28 days for learning disability patient assessed as medically fit for discharge.	<p>From April to July 2017 there were: 9 Learning Disability patients discharged within the 28 day target; and 3 Learning Disability patients discharged with a completed discharge taking more than 28 days (all in April 2017).</p> <p>At the end of July 2017, there are 21 patients awaiting discharge who are medically fit for discharge.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Patients discharged within 28 days</td> <td>3</td> <td>3</td> <td>2</td> </tr> <tr> <td>Patients discharged > 28 days</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Patients awaiting discharge > 28 days</td> <td>21</td> <td>21</td> <td>21</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Patients discharged within 28 days	3	3	2	Patients discharged > 28 days	0	0	0	Patients awaiting discharge > 28 days	21	21	21	<p>Learning Disability patients discharged within 28 days of the patient being assessed as medically fit for discharge.</p>
Standard	May-17	Jun-17	Jul-17																	
Patients discharged within 28 days	3	3	2																	
Patients discharged > 28 days	0	0	0																	
Patients awaiting discharge > 28 days	21	21	21																	

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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph																
25.0	During 2017/18, ensure that 99% of all mental health discharges take place within seven days of the patient being assessed as medically fit for discharge.	Cumulative April to July = 95%.	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Discharge <7 days</td> <td>94%</td> <td>100%</td> <td>94%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Discharge <7 days	94%	100%	94%	<p>Percentage of Mental Health discharges <7 days of the patient assessed as medically fit for discharge. Target 99%</p>								
Standard	May-17	Jun-17	Jul-17																	
Discharge <7 days	94%	100%	94%																	
26.0	During 2017/18, No discharge takes more than 28 days for mental health patients assessed as medically fit for discharge.	<p>From April to July 2017 there were: 147 Mental Health patients discharged within the 28 day target; and 6 Mental Health patients who have been discharged with a completed discharge taking more than 28 days (in April and May 2017).</p> <p>At the end of July 2017 there are 8 patients awaiting discharge who are medically fit for discharge.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Patients discharged within 28 days</td> <td>44</td> <td>34</td> <td>33</td> </tr> <tr> <td>Patients discharged > 28 days</td> <td>3</td> <td>0</td> <td>0</td> </tr> <tr> <td>Patients awaiting discharge > 28 days</td> <td>8</td> <td>9</td> <td>8</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Patients discharged within 28 days	44	34	33	Patients discharged > 28 days	3	0	0	Patients awaiting discharge > 28 days	8	9	8	<p>Mental Health patients discharged within 28 days of the patient being assessed as medically fit for discharge.</p>
Standard	May-17	Jun-17	Jul-17																	
Patients discharged within 28 days	44	34	33																	
Patients discharged > 28 days	3	0	0																	
Patients awaiting discharge > 28 days	8	9	8																	

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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph																		
CPD: Outcome 6: Supporting those who care for others																						
27.0	By March 2018, secure a 10% increase (based on 2016/17 figures) in the number of carers' assessments offered to carers for all service users.	<p>Cumulative April to July = 841.</p> <p>Carers' Assessments are reported quarterly. The Trust continues to deliver high numbers of Carers' assessments. Target to be confirmed.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>Q3 16/17</th> <th>Q4 16/17</th> <th>Q1 17/18</th> </tr> </thead> <tbody> <tr> <td>Carers Assessments</td> <td>839</td> <td>784</td> <td>841</td> </tr> </tbody> </table>	Standard	Q3 16/17	Q4 16/17	Q1 17/18	Carers Assessments	839	784	841	<p>Carers Assessments - Quarterly Target 2017/18 = 862 (10% increase on 2016/17 outturn Q4 of 784)</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Carers Assessments</th> </tr> </thead> <tbody> <tr> <td>Q2 2016/17</td> <td>1055</td> </tr> <tr> <td>Q3 2016/17</td> <td>839</td> </tr> <tr> <td>Q4 2016/17</td> <td>784</td> </tr> <tr> <td>Q1 2017/18</td> <td>841</td> </tr> </tbody> </table>	Quarter	Carers Assessments	Q2 2016/17	1055	Q3 2016/17	839	Q4 2016/17	784	Q1 2017/18	841
Standard	Q3 16/17	Q4 16/17	Q1 17/18																			
Carers Assessments	839	784	841																			
Quarter	Carers Assessments																					
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Q3 2016/17	839																					
Q4 2016/17	784																					
Q1 2017/18	841																					

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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph								
CPD: Outcome 7: Ensure the sustainability of health and social care services												
28.0	By March 2018, reduce by 20% the number of hospital-cancelled consultant-led outpatient appointments.	<p>Cumulative April to July = 24,342.</p> <p>The Trust continues to experience a high level of Hospital Cancelled Consultant-led Outpatient appointments.</p> <p>Note: The target is based on 2015/16 outturn and is sourced from the QOAR return provided by HIB</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>No. of Hospital Cancelled Appointments</td> <td>6130</td> <td>6198</td> <td>6310</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	No. of Hospital Cancelled Appointments	6130	6198	6310	<p>Hospital Cancelled OP Appointments: Reduction of 20%. Baseline 2015/16 outturn, sourced from the HIB, QOAR return. Baseline= 72,072 to reduce to 57,658 by March 2018</p>
Standard	May-17	Jun-17	Jul-17									
No. of Hospital Cancelled Appointments	6130	6198	6310									
29.0	By March 2018, ensure that 90% of complex discharges from an acute hospital take place within 48 hours.	<p>Cumulative April to July = 44%.</p> <p>During July 2017, 47% of complex patients were discharged from an acute hospital setting within 48 hours. (All NI Acute Hospitals with Belfast Trust of Residence (ToR). Source web portal).</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>48 hours target complex discharges</td> <td>49%</td> <td>44%</td> <td>47%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	48 hours target complex discharges	49%	44%	47%	<p>Complex Delayed Discharges within 48 hours. Target 90%</p>
Standard	May-17	Jun-17	Jul-17									
48 hours target complex discharges	49%	44%	47%									

Trust Performance Report 2017/18

TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph																																																		
30.0	By March 2018, ensure that no complex discharge taking more than seven days.	<p>Cumulative April to July = 271.</p> <p>During July 2017, 64 complex patients took more than seven days for discharge. (All NI Acute Hospitals with Belfast Trust of Residence (ToR). Source web portal).</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>7 days target complex discharges</td> <td>73</td> <td>80</td> <td>64</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	7 days target complex discharges	73	80	64	<p>Complex Delayed Discharges delayed more than 7 days. Target = 0</p> <table border="1"> <caption>Complex Delayed Discharges (Estimated Data)</caption> <thead> <tr> <th>Month</th> <th>Complex discharges >7 days</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>38</td><td>0</td></tr> <tr><td>Aug-16</td><td>52</td><td>0</td></tr> <tr><td>Sep-16</td><td>38</td><td>0</td></tr> <tr><td>Oct-16</td><td>50</td><td>0</td></tr> <tr><td>Nov-16</td><td>72</td><td>0</td></tr> <tr><td>Dec-16</td><td>73</td><td>0</td></tr> <tr><td>Jan-17</td><td>80</td><td>0</td></tr> <tr><td>Feb-17</td><td>75</td><td>0</td></tr> <tr><td>Mar-17</td><td>55</td><td>0</td></tr> <tr><td>Apr-17</td><td>55</td><td>0</td></tr> <tr><td>May-17</td><td>75</td><td>0</td></tr> <tr><td>Jun-17</td><td>80</td><td>0</td></tr> <tr><td>Jul-17</td><td>64</td><td>0</td></tr> </tbody> </table>	Month	Complex discharges >7 days	Target	Jul-16	38	0	Aug-16	52	0	Sep-16	38	0	Oct-16	50	0	Nov-16	72	0	Dec-16	73	0	Jan-17	80	0	Feb-17	75	0	Mar-17	55	0	Apr-17	55	0	May-17	75	0	Jun-17	80	0	Jul-17	64	0
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31.0	By March 2018, ensure that all non-complex discharges from an acute hospital take place within six hours.	<p>Cumulative April to July = 96%.</p> <p>Non-complex discharges from an acute hospital normally take place within six hours, with 97% during July 2017.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Non-complex discharges</td> <td>93%</td> <td>96%</td> <td>97%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Non-complex discharges	93%	96%	97%	<p>Non-Complex Delayed Discharges within 6 hours. Target = 100%</p> <table border="1"> <caption>Non-Complex Delayed Discharges (Estimated Data)</caption> <thead> <tr> <th>Month</th> <th>non-complex discharges <6 hours</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jul-16</td><td>95%</td><td>100%</td></tr> <tr><td>Aug-16</td><td>95%</td><td>100%</td></tr> <tr><td>Sep-16</td><td>95%</td><td>100%</td></tr> <tr><td>Oct-16</td><td>95%</td><td>100%</td></tr> <tr><td>Nov-16</td><td>95%</td><td>100%</td></tr> <tr><td>Dec-16</td><td>95%</td><td>100%</td></tr> <tr><td>Jan-17</td><td>95%</td><td>100%</td></tr> <tr><td>Feb-17</td><td>95%</td><td>100%</td></tr> <tr><td>Mar-17</td><td>95%</td><td>100%</td></tr> <tr><td>Apr-17</td><td>93%</td><td>100%</td></tr> <tr><td>May-17</td><td>92%</td><td>100%</td></tr> <tr><td>Jun-17</td><td>95%</td><td>100%</td></tr> <tr><td>Jul-17</td><td>97%</td><td>100%</td></tr> </tbody> </table>	Month	non-complex discharges <6 hours	Target	Jul-16	95%	100%	Aug-16	95%	100%	Sep-16	95%	100%	Oct-16	95%	100%	Nov-16	95%	100%	Dec-16	95%	100%	Jan-17	95%	100%	Feb-17	95%	100%	Mar-17	95%	100%	Apr-17	93%	100%	May-17	92%	100%	Jun-17	95%	100%	Jul-17	97%	100%
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TPR ref	Objectives / Goals for Improvement	Narrative	Performance – 3 months	Trend (rolling 12 months) Graph								
CPD: Outcome 8: Supporting the HSC workforce												
32.0	By March 2018, to reduce Trust staff sick absence levels by a regional average of 5% compared to 2016/17 figure.	<p>Cumulative April to July = 6.24%.</p> <p>Trust 2017/18 target to be confirmed.</p>	<table border="1"> <thead> <tr> <th>Standard</th> <th>May-17</th> <th>Jun-17</th> <th>Jul-17</th> </tr> </thead> <tbody> <tr> <td>Trust Absence Rate</td> <td>6.16%</td> <td>6.01%</td> <td>6.22%</td> </tr> </tbody> </table>	Standard	May-17	Jun-17	Jul-17	Trust Absence Rate	6.16%	6.01%	6.22%	<p>Absence Rate in month. Target 2017/18 tbc</p> <p>Target 2016/17 = 5.8%</p>
Standard	May-17	Jun-17	Jul-17									
Trust Absence Rate	6.16%	6.01%	6.22%									

NB: Elective Care Activity Improvement Trajectories are to be agreed with the HSCB in September 2017 and will be reported on in the next report.