
PERFORMANCE REPORT OCTOBER – DECEMBER 2024

Trust Board – 6 February 2025

Context

This report provides an update for Hospital and Community Services on progress at the end of 2024/25 Quarter 3 (October to December 24). Information is provided on the Trust's performance against targets set out in the 2024/25 HSC Service Delivery Plan (SDP) version 3 (17 July 2024). Access Targets are not included in this quarter report other than for cancer.

During 2024/25 Quarter 3 (October to December 24), the Trust reported against 64 metrics across Hospital and Community Services, Public Health and Northern Ireland Ambulance Service (NIAS). Performance against the four District Nursing metrics remains paused and reported as "Unavailable" in line with SPPG decision.

Executive Summary

The 2024/25 Quarter 3 (October to December 24) performance was reported against 64 metrics; of these 48% assessed as "Red", 13% "Amber", 33% "Green" and 6% "Unavailable". Unfortunately, at the time of publishing this report, we are not in receipt of the Performance and Transformation Executive Board (PTEB) report, which provides the regional comparison across the Trusts.

Overall, the 2024/25 Quarter 3 (October to December 24) performance deteriorated with more metrics RAG assessed "Red" when compared to 2024/25 Quarter 1 and 2.

Although the number of metrics RAG assessed "Red" increased in 2024/25 Quarter 3 (October to December 24), the cumulative activity levels delivered during this period improved across a number of service areas, when compared to the same period of 2023/24 (October to December 23). Specific acknowledgement to the improvement in Red Flag 1st Outpatient appointment, Imaging: MRI, CT and Non-Obstetric Ultrasound, Cardiac MRI, Cardiac CT, Echo, Cath Lab procedures, Endoscopy, Adult Mental Health, Psychological Therapies, Dementia, Child and Adolescent Mental Health Service, Physiotherapy, Podiatry and Community Dental GA sessions (Total).

Trust Board should note that Western Trust provided mutual aid to Northern Trust in Quarter 3 to support them over the period when they went live with encompass, and this was highlighted in the exception report to Trust Board in January 25. The 14 Day Cancer performance for Western Trust in Quarter 3 was that **99.9%** of patients accessed the service within 14 days. All patients referred from Northern Trust exceeded the 14 day target.

A detailed assessment of Western Trust 2024/25 Quarter 3 (October to December 24) cumulative activity delivered, baseline and expected target for each service area is summarised in Section 2. The RAG status for 2023/24 Year End and 2024/25 Quarter 1 to 3 is provided in detail in Section 3.

Service areas where the cumulative Quarter 3 (October to December 24), performance has met or exceeded the baseline activity and the expected/SBA target (RAG assessed Green) are:

Hospital Services

- *Cancer Services*: 31 Cancer Access performance and Red Flag 1st OP appointment.
- *Imaging*: MRI, CT and Non-Obstetric ultrasound.
- *Cardiac*: MRI, CT and Echo.
- *Elective Care*: Review Outpatients, Day Case and Scheduled Theatre Minutes.

Community Services

- *Children's Social Care*: Child Protection Case Conferences (15 Days and 6 months) and Unallocated Cases.
- *Mental Health Services*: Adult Mental Health, Psychological Therapies, Dementia (New and Review Total) and Child and Adolescent Mental Health Service (New and Review).
- *Allied Health Professionals*: Speech and Language (New and Review Total).

Public Health

- *Healthcare Associated Infections (HCAI)*: Methicillin-resistant Staphylococcus aureus (MRSA).

Service areas where the cumulative Quarter 3 (October to December 24), performance has almost met the baseline activity and the expected/SBA target (RAG assessed Amber) are:

Hospital Services

- *Cancer Services*: 14 Day Access performance (for Western Trust patients).
- *Elective Care*: Theatre Operating Times (Main).

Community Services

- *Community Care*: Domiciliary Care Unmet Need (Total packages) and Direct Payments.
- *Children's Social Care*: Child Protection Case Conferences (3 months)
- *Stroke Service*: Thrombolysis (Altnagelvin and South West Acute).

Public Health

- *Antimicrobial Consumption*: Use of Antibiotics from the WHO access AWaRe Category.

Service areas where the cumulative Quarter 3 (October to December 24), performance has not met baseline activity and the expected/SBA target; with an under-delivery in performance of 5% or more (RAG assessed Red) include:

Hospital Services

- *Cancer Services*: 62 Day Access performance.
- *Cardiac*: Cath Lab procedures.

- *Elective Care*: New Outpatients, Inpatient, Endoscopy and Theatre operating times (DPU).
- *Unscheduled Care*: ED 12 Hour Performance, Weekend Discharges (Complex and Simple: Altnagelvin and South West Acute) and Average Length of Stay (Altnagelvin and South West Acute).

Community Services

- *Allied Health Professionals*: Physiotherapy, Occupational Therapy, Dietetics, Orthoptics and Podiatry (New and Review Total).
- *Stroke Service*: % Admitted <4 hours (Altnagelvin and South West Acute).
- *Community Dental*: Contacts and GA sessions (Total).

Public Health

- *Healthcare Associated Infections (HCAI)*: Clostridioides Difficile (CDI).
- *Antimicrobial Consumption*: Total antibiotic prescribing, Carbapenem use and Piperacillin-tazobactam use.

The Trust are not in agreement with the Baseline and methodology calculations in four of the six PHA metrics, and discussions continue on this area of performance delivery.

Northern Ireland Ambulance Service (NIAS)

- *Handover Times*: <15 minutes, <30 minutes, <60 minutes, >2 hours and Ambulance Turnaround Times <30 minutes.

Other Relevant Issues

Waiting List Initiative (WLI)

The Trust received further WLI allocation for the Independent Sector in 2024/25 Quarter 4. The total WLI plan has been uplifted to £12.46m. The plan below has been updated to reflect this additionality and includes delivery of Elective Care In-house and Independent Sector (IS) activity across a range of specialties for the twelve month period from April 2024 to March 2025.

At the end of December 24, the Trust have delivered cumulative activity of 23,239 and expenditure of £9.5M. To ensure full delivery against the planned volumes by March 2025, robust monitoring of the plan continues at the internal Elective meeting.

Activity Type		Planned Volumes
Independent Sector	IP/DC	529
	Scopes	3003
	Diagnostics (MRI / plain film reporting)	13754
In-House	Outpatients/IP/DC and Echo	8758
	Scopes	160
	Scopes Validation and Follow-Up of IS transfers	10122
	Imaging	4801
Total		41,127

HOSPITAL SERVICES

Cancer services – Commissioning Plan Direction: Access Performance

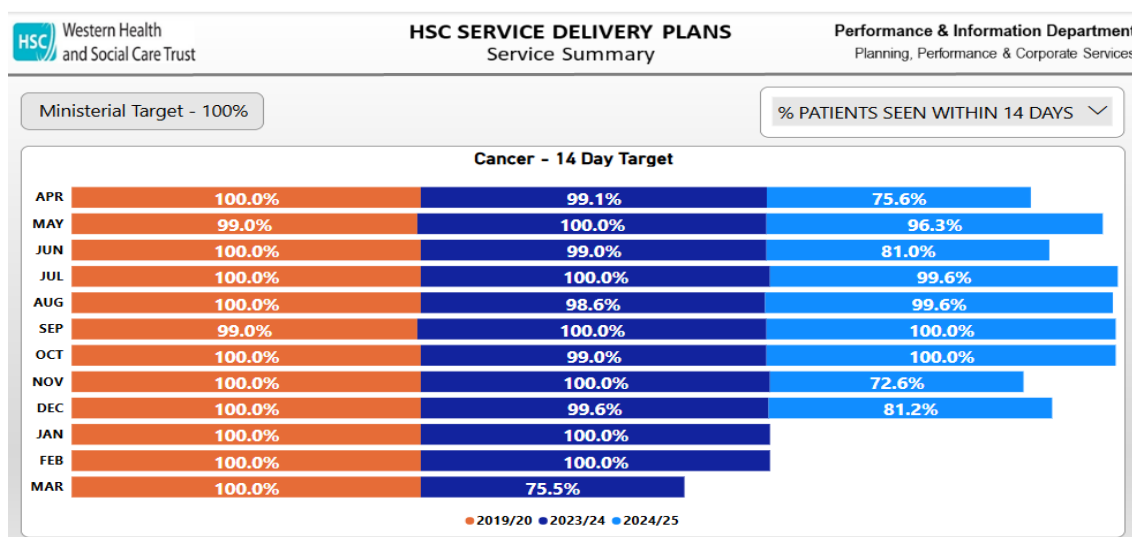
During 2024/25, all urgent suspected breast cancer referrals should be seen within 14 days.

14 Day Target: During Quarter 3 (October to December 24), the Western Trust provided support to Northern Trust (NT) to address their suspect breast cancer waiting times during their Encompass Go Live in November 24.

The Trust accepted and assessed 135 NT patients (86 patients in November 24 and 49 patients in December 24); of which all patients waited longer than 14 days (**0%**).

The Western Trust performance was **99.9%** (1 patient waited longer than 14 days), and therefore an “Amber” performance is recorded in this report.

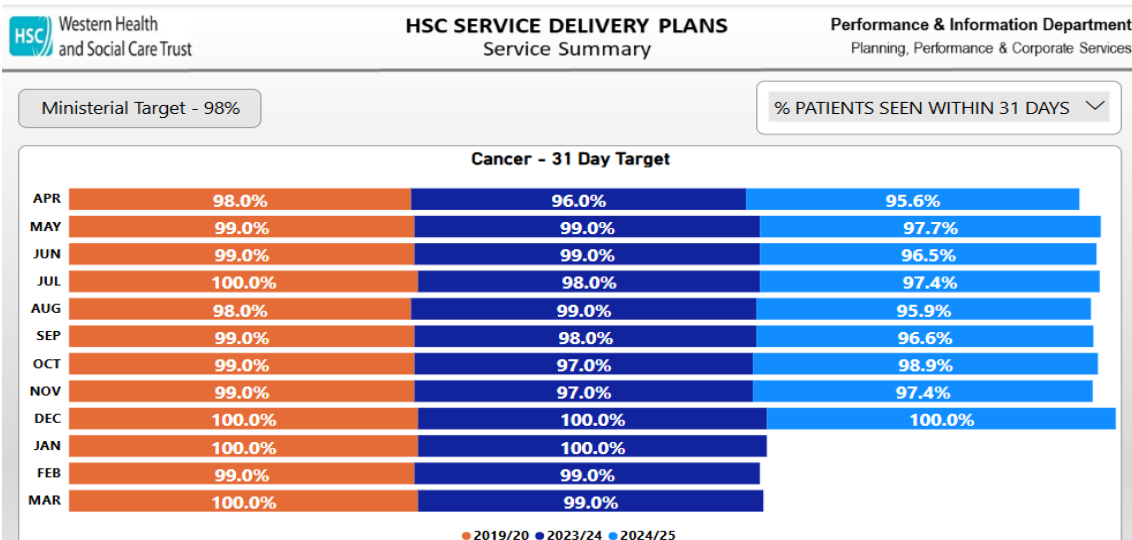
When the Northern Trust patients are included, the quarter end performance is **83.6%** overall.



Cancer services – Commissioning Plan Direction: Access Performance

During 2024/25, at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.

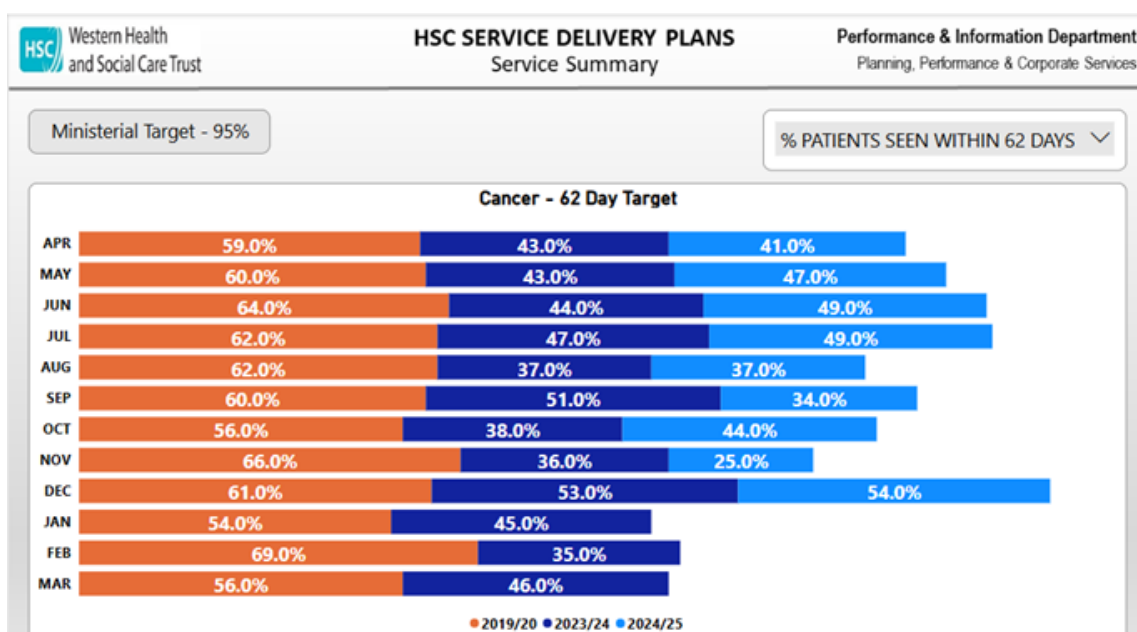
31 Day Target: Performance against the Ministerial Cancer access target remains strong with **99%** achieved during Quarter 3 (October to December 24).



Cancer services – Commissioning Plan Direction: Access Performance

During 2024/25, at least 95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days.

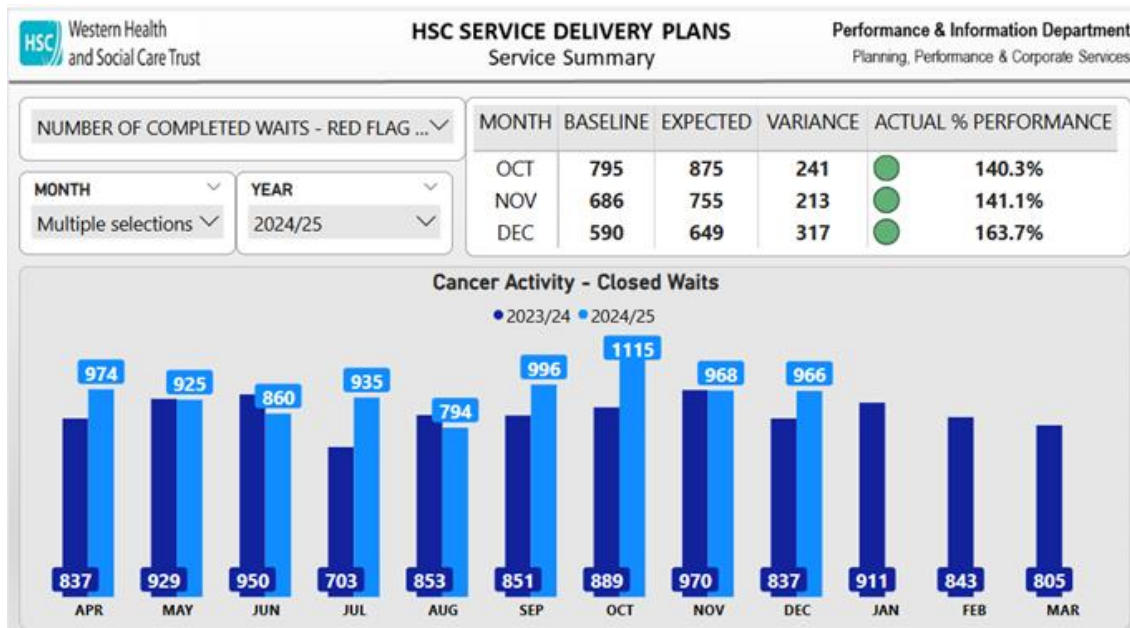
62 Day Target: performance against this target remains challenging and was not met any month during Quarter 3 (October to December 24).



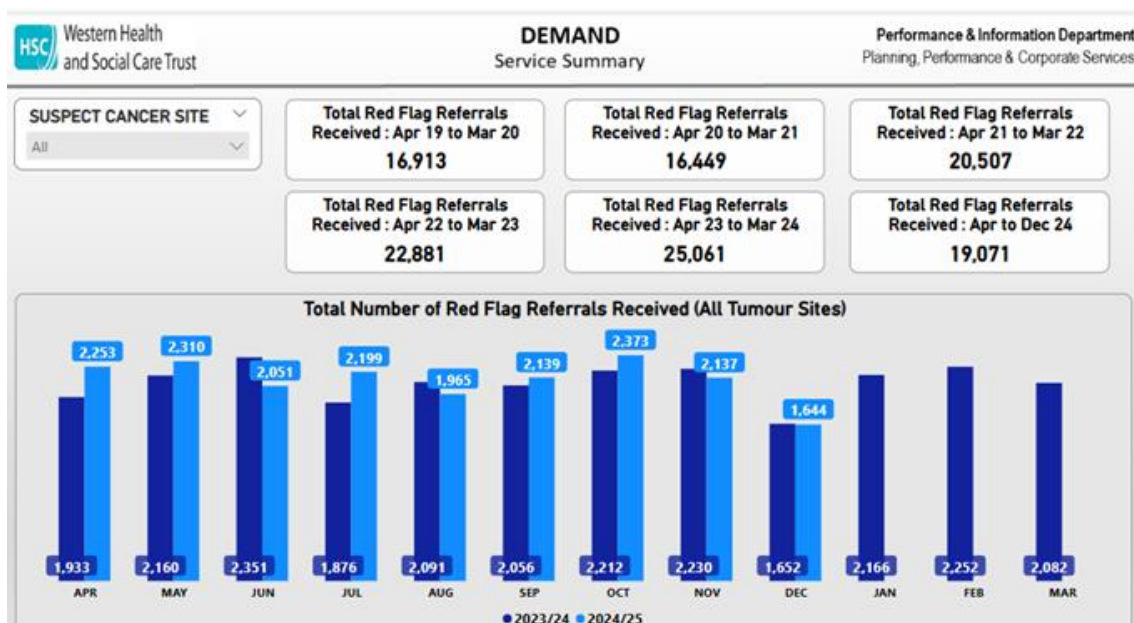
Red Flag (New) Completed Waits (Excluding Breast)

The 2024/25 SDP target is to deliver 110% of 2019/20 activity.

The cumulative number of closed waits completed during Quarter 3 (October to December 24) (3,049) reflects **147.2%** of the cumulative 2019/20 Baseline activity (2,071).



The number of Red Flag Referrals Received (All Tumour sites) during 2024/25 Quarter 3 (October to December 24) (6,154), increased by **45%** compared to same period 2019/20 (4,249) with 1,905 additional Red Flag referrals and by **24%** compared to same period 2021/22 (4,950) (Baseline year); equivalent to 1,204 additional Red Flag referrals.

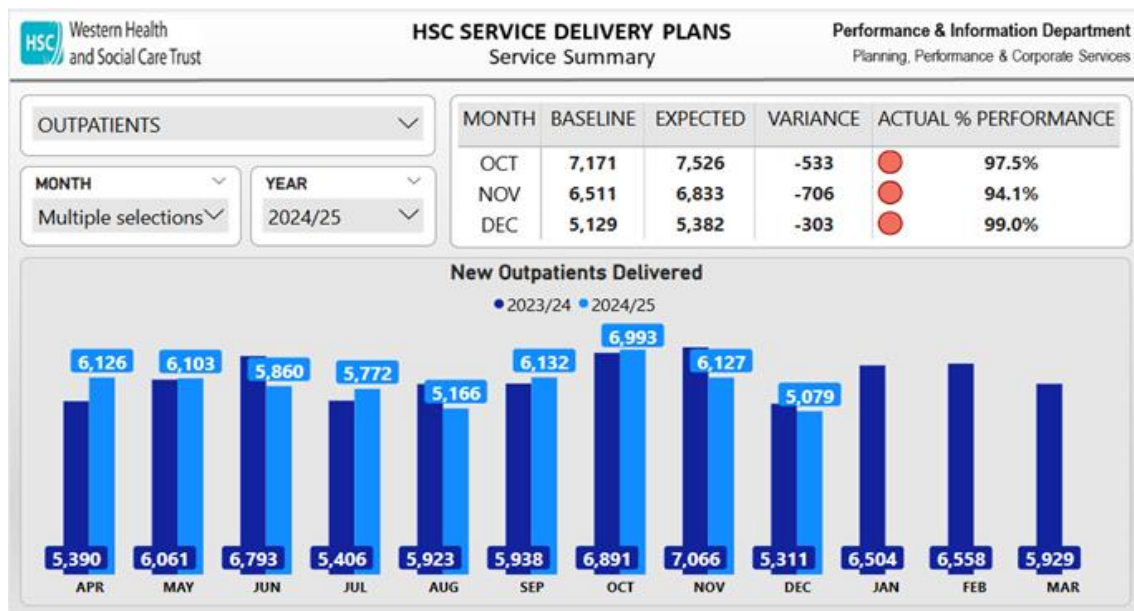


Elective Care – Outpatients Service Delivery Plan

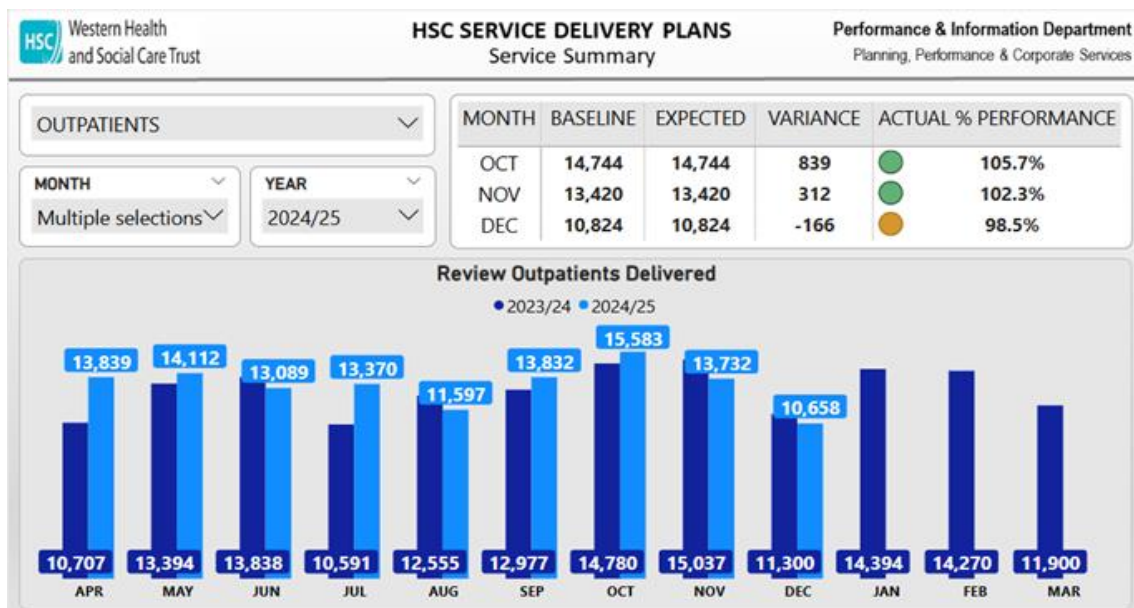
The 2024/25 SDP target is to deliver 105% (New) and 100% (Review) of 2019/20 activity.

During Quarter 3 (October to December 24), an overall total of **58,172** outpatient attendances was delivered (New (18,199) and Review (39,973); reflecting a **1%** increase on 2019/20 Baseline activity (373 additional attendances) and a **1%** decrease on the expected target (558 less attendances). A breakdown by New and Review is provided below.

The cumulative New outpatient activity delivered during Quarter 3 (October to December 24) (18,199) reflects **96.7%** of the cumulative 2019/20 Baseline activity (18,811). The 2019/20 Baseline uplifted by 788 (Full Year) equating to 198 in Quarter 3 (October to December 24), to reflect additional investment received.



The cumulative Review outpatient activity delivered during Quarter 3 (October to December 24) (39,973) reflects **102.5%** of the cumulative 2019/20 Baseline activity (38,988). The 2019/20 Baseline uplifted by 595 (Full Year) equating to 150 in Quarter 3 (October to December 24), to reflect additional investment received.



The Quarter 3 (October to December 24) Elective Outpatient activity and access performance continued to be impacted by workforce challenges across a number of specialities. Medical workforce vacancies, long and short term sick leave, retirements and unplanned leave. These service areas continue to progress all available recruitment options locally, regionally and internationally.

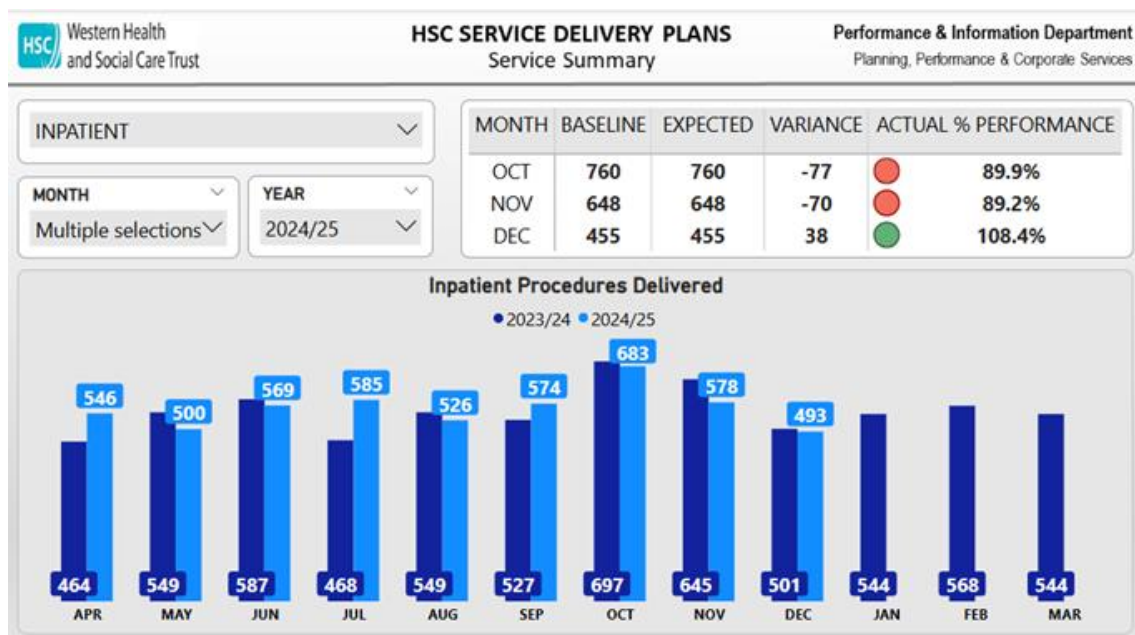
Elective Care – Inpatient and Day Case Service Delivery Plan

The 2024/25 SDP target is to deliver 100% of 2019/20 activity.

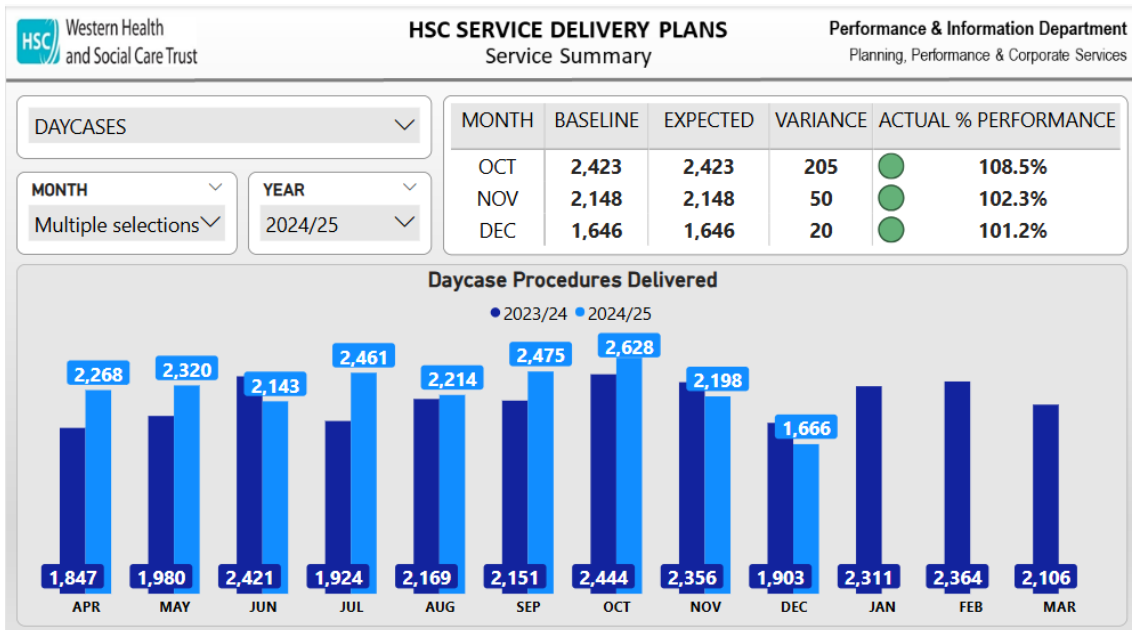
The Inpatient activity delivered (**1,754**) during Quarter 3 (October to December 24) reflects the highest volume delivered this year to date. Despite this increase, the Quarter 3 out turn and performance remains below target.

During Quarter 3 (October to December 24) performance against the Western Trust Day Case target remains strong with target achieved each month.

The cumulative Inpatient activity delivered during Quarter 3 (October to December 24) (1,754) reflects **94.1%** of the 2019/20 Baseline activity (1,863).



The cumulative Day case activity delivered during Quarter 3 (October to December 24) (6,492) reflects **104.4%** of the 2019/20 Baseline activity (6,217). The 2019/20 Baseline uplifted by 1,989 (Full Year) equating to 498 in Quarter 3 (October to December 24), to reflect additional investment received.



Elective Care – Endoscopy Service Delivery Plan

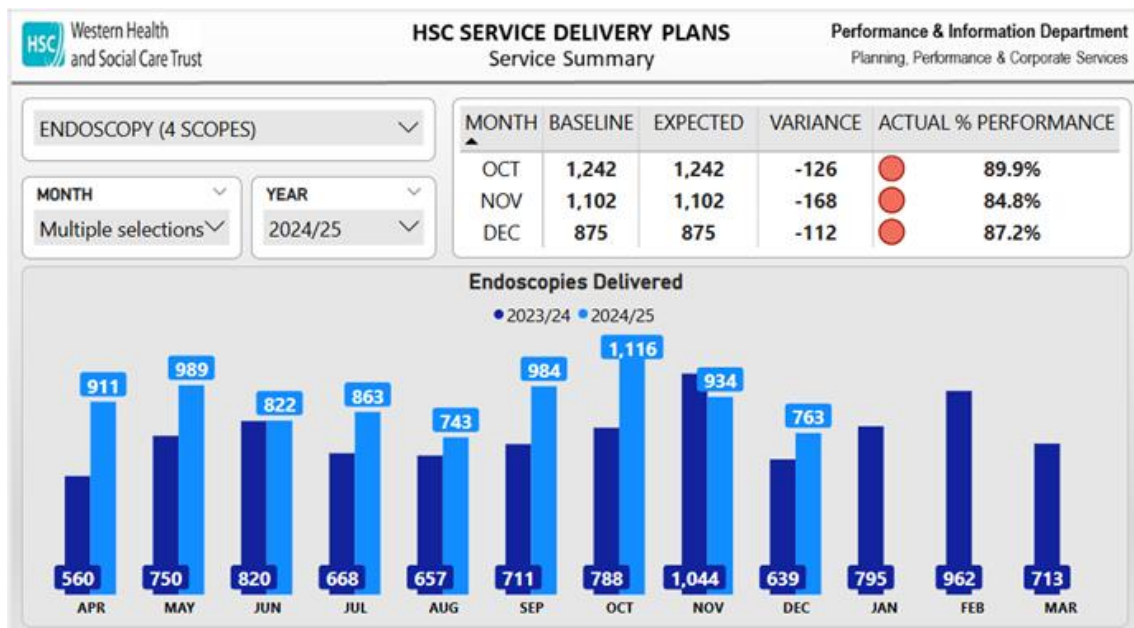
*The 2024/25 SDP target is to deliver 100% of 2019/20 baseline + 3,000 scopes per year.
(Target adjusted to reflect regional investment into Omagh Hospital).*

Endoscopy activity levels improved further during Quarter 3 (October to December 24); reflecting more activity delivered when compared to the same period of 2023/24 and the highest volume delivered in any Quarter this year to date.

The Endoscopy service capacity will remain challenged whilst the recently recruited GI Endoscopists, Consultant Surgeons and three Nurse Endoscopist are undertaking specialist training. It is expected that the capacity and activity levels will increase further from April, August and September 25.

The cumulative activity delivered during Quarter 3 (October to December 24) (2,813) reflects 87.4% of the cumulative 2019/20 Baseline activity (3,219). The 2019/20 Baseline uplifted by 3,000 (Full Year), equating to 750 in Quarter 3 (October to December 24), to reflect additional investment received.

A breakdown of the Quarter 3 (October to December 24) activity (**2,813**) included **2,137** patients seen within Core Service and **676** patients seen within Omagh DPC.



The Service continue to utilise resource from the Regional Endoscopy Centre (Lagan Valley) and two Independent Sector providers to support core capacity. During Quarter 3 (October to December 24), a total of:

- **550** Western Trust red flag patients attended and were treated at Lagan Valley.
- **2,254** Western Trust patients attended and were treated via external out sourcing to the Independent Sector.

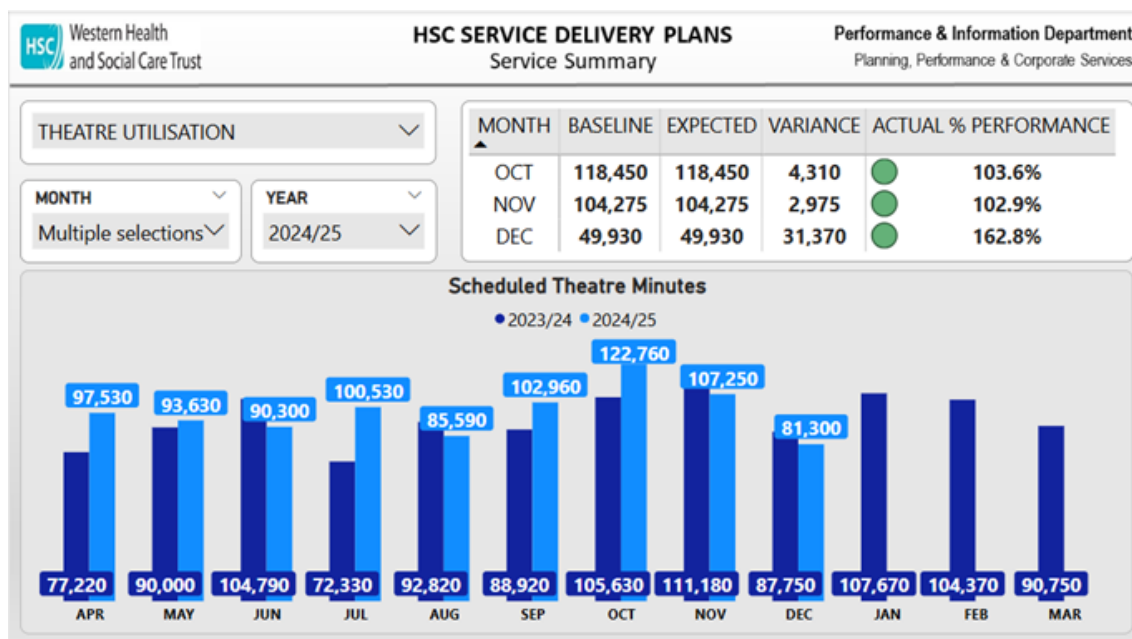
The patients treated at these sites are additional and separate to the Western Trust SDP activity detailed above.

Elective Care – Theatre Scheduled Minutes Service Delivery Plan

Trusts to deliver at least the average elective (planned) theatre minutes delivered in 2018/19 and 2019/20 adjusted where appropriate to reflect new investment

High level of performance achieved throughout Quarter 3 (October to December 24) with the expected target exceeded each month. October 24 reflects the highest number of Scheduled Theatre Minutes this year to date.

The cumulative Scheduled Theatre Minutes during Quarter 3 (October to December 24) (311,310) reflects **114.2 %** of the cumulative number delivered against Baseline activity (272,655).



Elective Care – Theatre Operating Times Service Delivery Plan

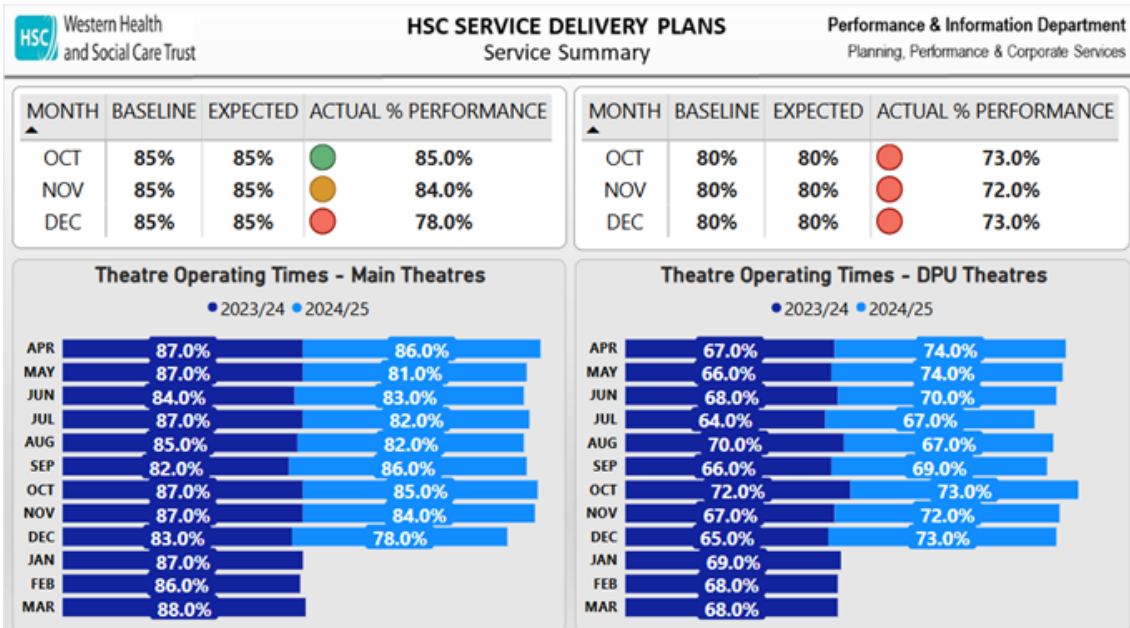
Trusts to deliver an OP time of 85% for main theatres and 80% for day procedure units

The Main Operating Times performance has remained static during the first two months of Quarter 3 (October to December 24), with some deterioration in December 24. Despite the dip in December 24 performance, an overall “Amber” RAG status was achieved for 2024/25 Quarter 3.

The DPU Operating Times performance improved during Quarter 3 (October to December 24) when compared to Quarter 2 (July to September 24). Although the out turn remained broadly static across October to December 24, performance was below the expected target.

The cumulative Quarter 3 (October to December 24) performance achieved:

- **Main Theatres: 82.3%** against the 85% target.
- **DPU Theatres: 72.7%** against the 80% target.



The Trust continues to working closely with SPPG Commissioners on a Theatre Utilisation Improvement Programme, focusing on Omagh and South West Acute. A robust Theatre performance framework is in place and has been reviewed and strengthened as part of the overall improvement programme; this includes weekly governance meetings with the relevant teams to ensure maximum utilisation of lists.

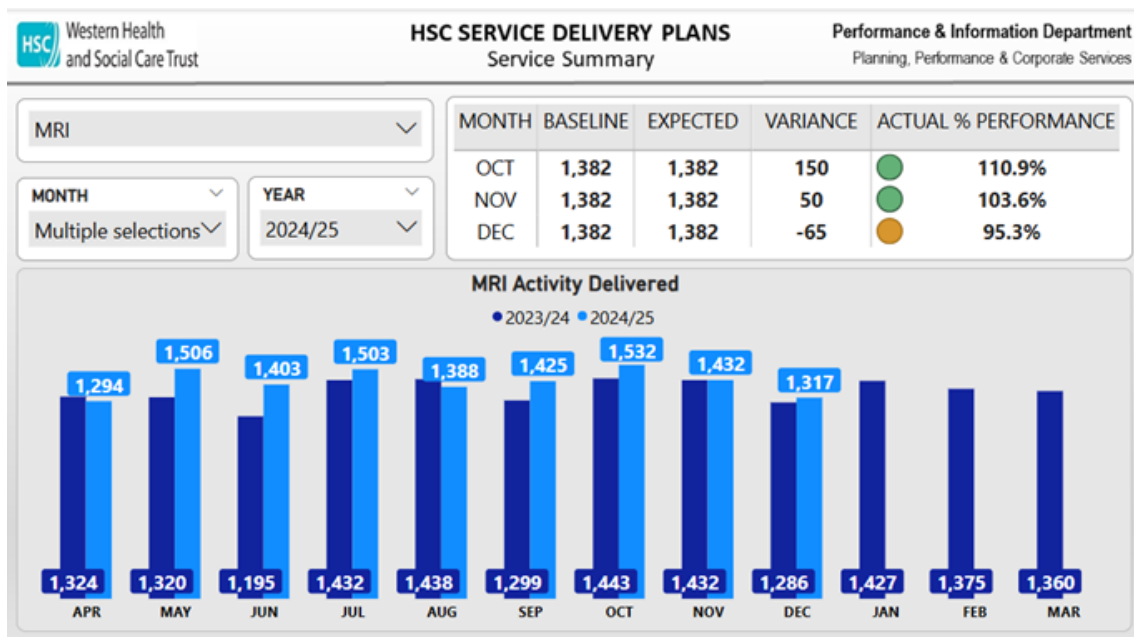
Imaging Diagnostics – Service Delivery Plan

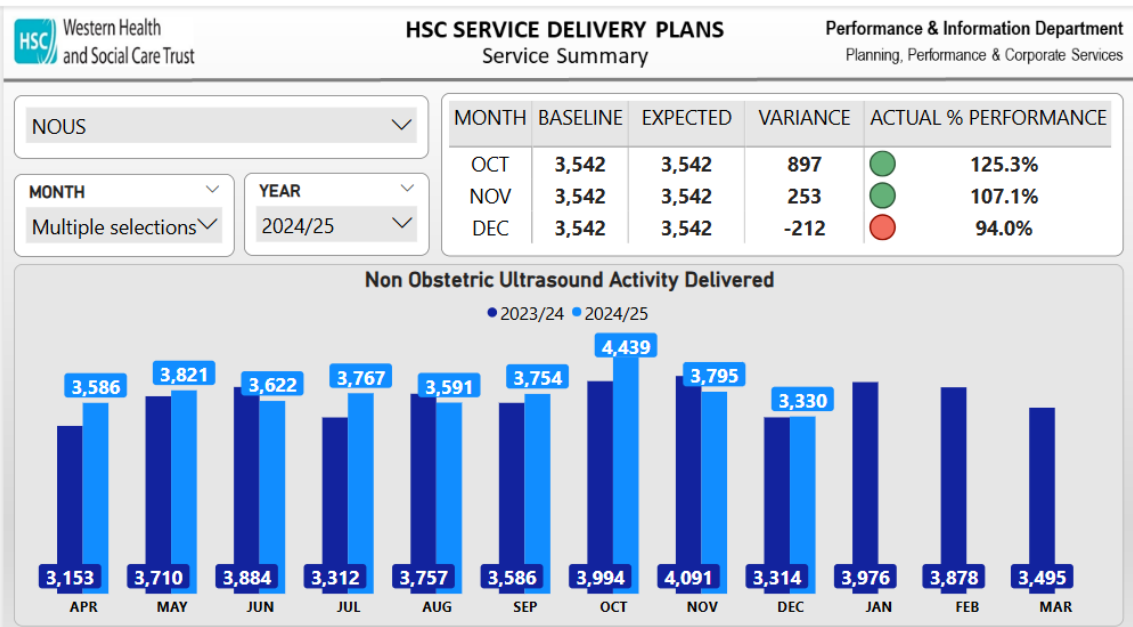
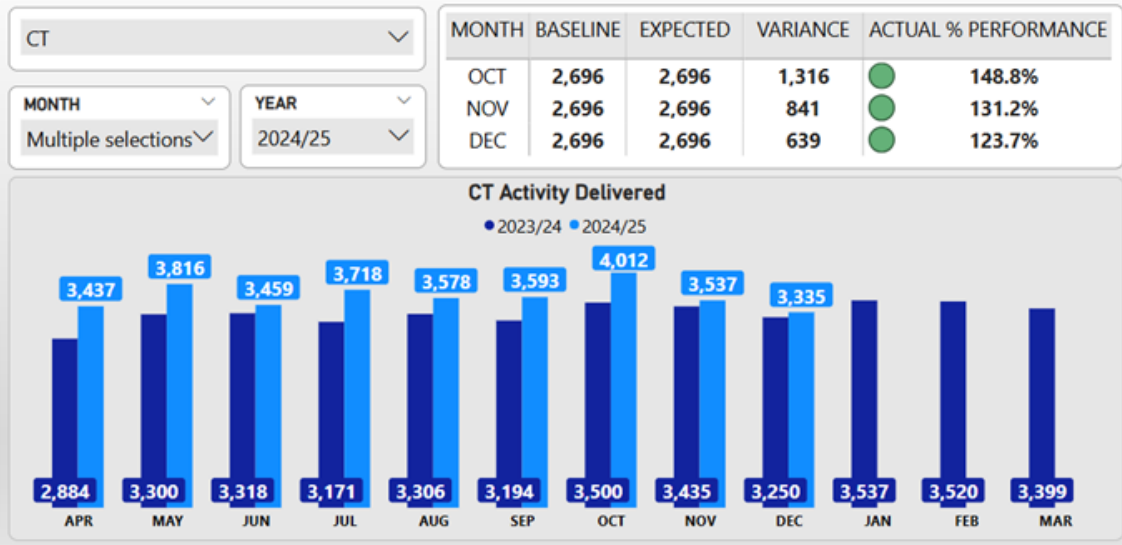
The 2024/25 SDP target is to deliver activity in line with agreed SBA volumes.

A high level of performance was achieved in Quarter 3 (October to December 24) with the Quarterly SBA target exceeded in each of the three areas; as a result the additional activity delivered across these areas equates to 3,869 scans when compared to the SBA targets.

The cumulative performance achieved during Quarter 3 (October to December 24) for:

- **MRI: 103.3%** of SBA volume achieved; cumulatively the service delivered 4,281 scans compared to the cumulative SBA target of 4,146.
- **CT: 134.6%** of SBA volume achieved; cumulatively the service delivered 10,884 scans compared to the cumulative SBA target of 8,088. The SBA target exceeded every month of Quarter 3.
- **Non-Obstetric Ultrasound: 108.8%** of SBA volume achieved; cumulatively the service delivered 11,564 scans compared to the cumulative SBA target of 10,626.





Cardiac Services – Service Delivery Plan

Cardiac MRI & Echo: the 2024/25 SDP target is to deliver activity in line with agreed SBA volume.

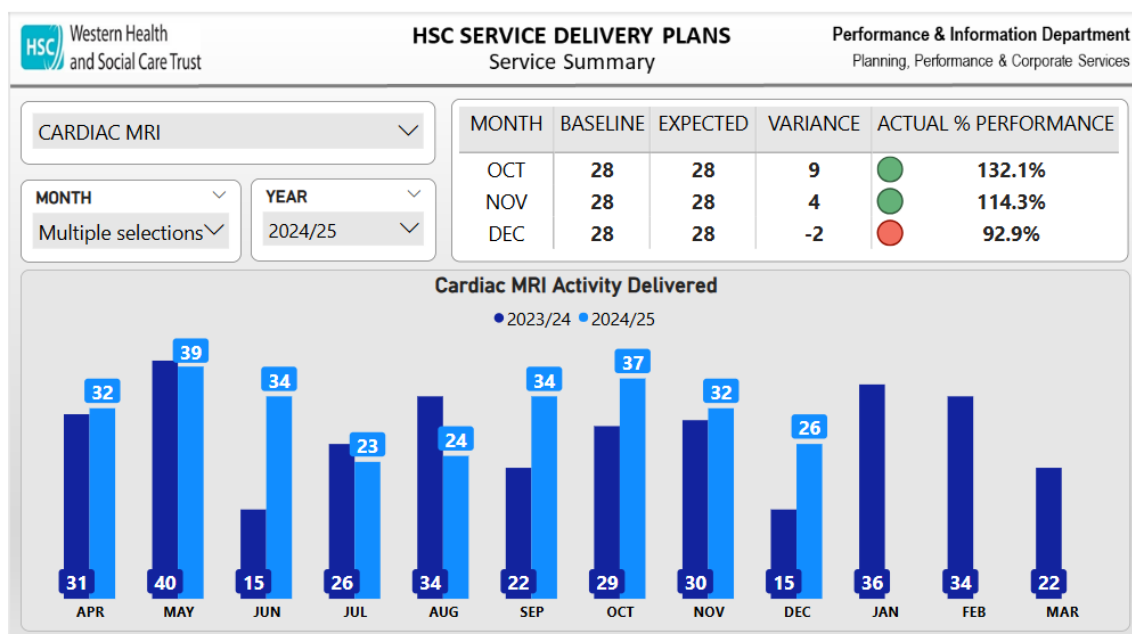
Cardiac CT & Cath Lab procedures: the 2024/25 SDP target is to deliver activity 110% of 2019/20 activity.

Overall, a high level of performance was achieved in Quarter 3 (October to December 24). Across the four areas, more tests have been delivered during 2024/25 Quarter 3 when compared to the same period in 2023/24.

The Cath Lab activity delivered during Quarter 3 (October to December 24) was impacted by a number of complex cases which require two Consultants and extended procedure time, staff sickness absence, patient non attendances and hospital cancellations.

The cumulative performance achieved during Quarter 3 (October to December 24) for:

- **Cardiac MRI: 113.1%** of SBA volume achieved; cumulatively the service delivered 95 tests compared to the cumulative SBA target of 84.
- **Cardiac CT: 116.8%** of 2019/20 Baseline achieved; cumulatively the service delivered 153 tests compared to the cumulative 2019/20 Baseline activity of 131.
- **Echo: 105.5%** of SBA volume achieved; cumulatively the service delivered 2,194 tests compared to the cumulative SBA target of 2,079.
- **Cath Lab Procedures: 96.0%** of 2019/20 Baseline achieved, cumulatively 482 procedures delivered compared to the cumulative 2019/20 Baseline activity of 502.



CARDIAC CT

MONTH

Multiple selections

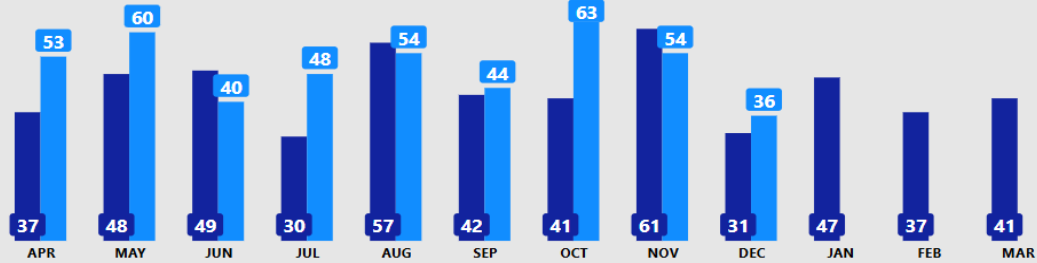
YEAR

2024/25

MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
OCT	46	51	12	137.0%
NOV	53	58	-4	101.9%
DEC	32	35	1	112.5%

Cardiac CT Activity Delivered

2023/24 2024/25



ECHO

MONTH

Multiple selections

YEAR

2024/25

MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
OCT	693	693	151	121.8%
NOV	693	693	47	106.8%
DEC	693	693	-83	88.0%

Echocardiogram Activity Delivered

2023/24 2024/25



CATH LAB PROCEDURES

MONTH

Multiple selections

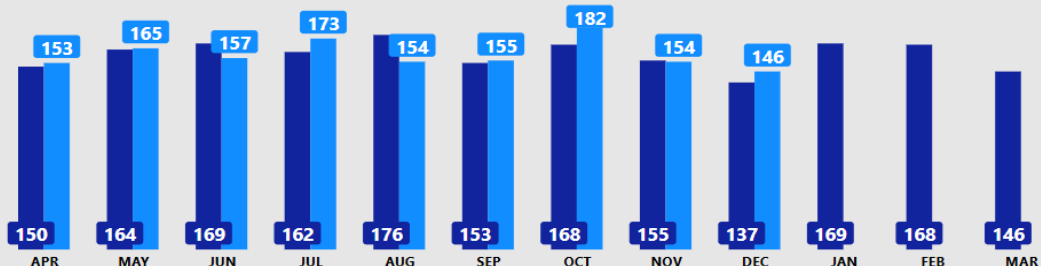
YEAR

2024/25

MONTH	BASELINE	EXPECTED	VARIANCE	ACTUAL % PERFORMANCE
OCT	184	202	-20	98.9%
NOV	172	189	-35	89.5%
DEC	146	161	-15	100.0%

Cath Lab Procedures Delivered

2023/24 2024/25

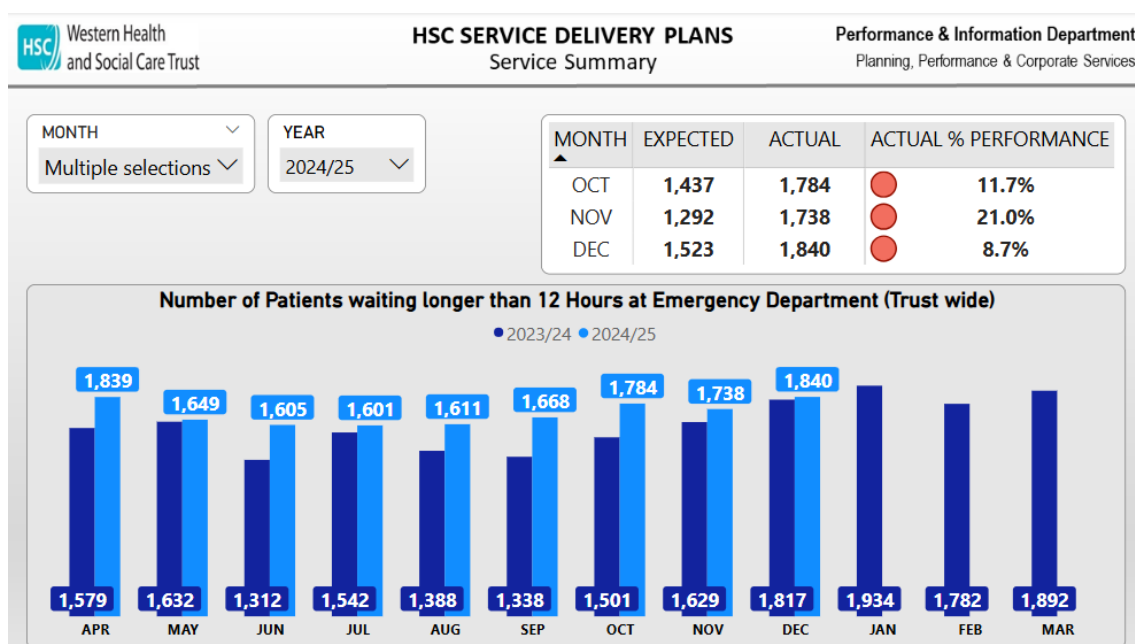


Unscheduled Care – ED Performance (12 Hours) Service Delivery Plan

By March 2025, reduce the number of patients who waited longer than 12 hours in ED in 2022/23 by 10%

Performance targets not met in any part of this service area, and this remains broadly common with all Trusts in the region. During Quarter 3 (October to December 24), **5,362** patients waited longer than 12 hours in ED compared to **4,725** during the same period in 2022/23; an increase of 537 (13.5%).

November 24 saw significant growth in ED attendances which continued into January 2025 with most hospitals seeing significantly high numbers of patients waiting to be admitted in ED.



The 2024/25 Quarter 3 (October to December 24) Northern Ireland Ambulance Service (NIAS) performance has deteriorated further with all five metrics below target during each month of this Quarter.

The individual target and performance for Quarter 1 to 3 (April to December 24) is detailed in the table below.

Service Area	2024/25 Target Trajectory	Quarter 1	Quarter 2	Oct-24	Nov-24	Dec-24	Quarter 3
NIAS Handover < 15 mins	Q1: 12%, Q2: 15%, Q3: 20% & Q4: 25%	6.4%	5.7%	6.4%	6.5%	4.6%	5.8%
NIAS Handover < 30 mins	Q1: 32%, Q2: 36%, Q3: 40% & Q4: 45%	28.8%	25.7%	27.1%	26.5%	24.9%	26.1%
NIAS Handover < 60 mins	Q1: 64%, Q2: 70%, Q3: 76% & Q4: 85%	72.3%	69.6%	70.0%	69.6%	61.7%	67.1%
NIAS Handover > 2 hours	0%	5.7%	6.5%	6.4%	7.6%	10.4%	8.2%
Ambulance Turnaround within 30 mins	Q1: 20%, Q2: 30%, Q3: 40% & Q4: 51%	12.9%	10.9%	12.6%	13.3%	12.3%	12.7%

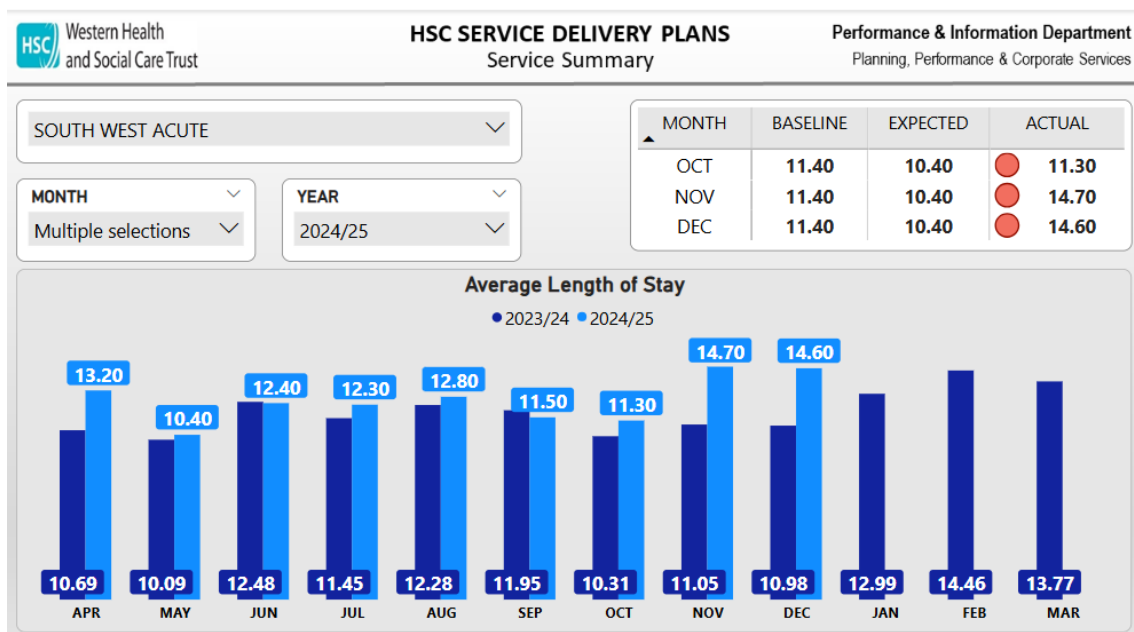
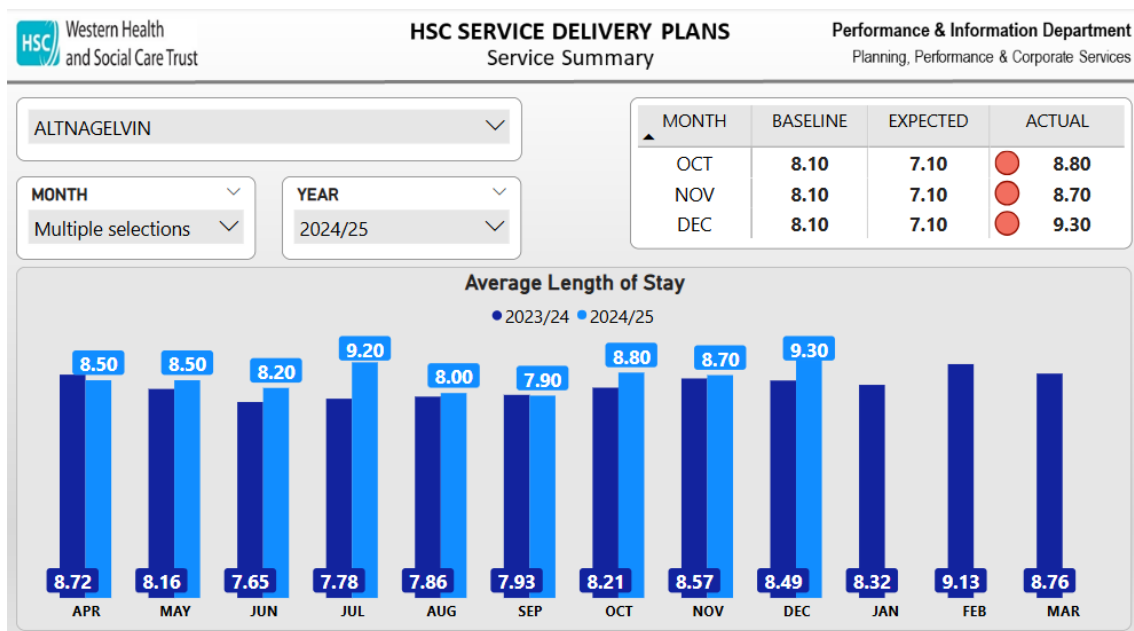
Average non-elective Length of Stay – Service Delivery Plan

1 Day reduction of 2022/23 Quarter 4 Baseline

The cumulative performance achieved during Quarter 3 (October to December 24) for:

- Altnagelvin: **9.0 days** compared to 8.1 days in the same period 2022/23.
- South West Acute: **13.6 days** compared to 11.4 days in the same period 2022/23.

The increased number of Complex Delays and subsequent discharges contribute to an increase in the Average Length of Stay. During Quarter 3 (October to December 24), there were 62 patients discharged (28 Altnagelvin and 34 South West Acute) with a length of stay greater than 100 days.



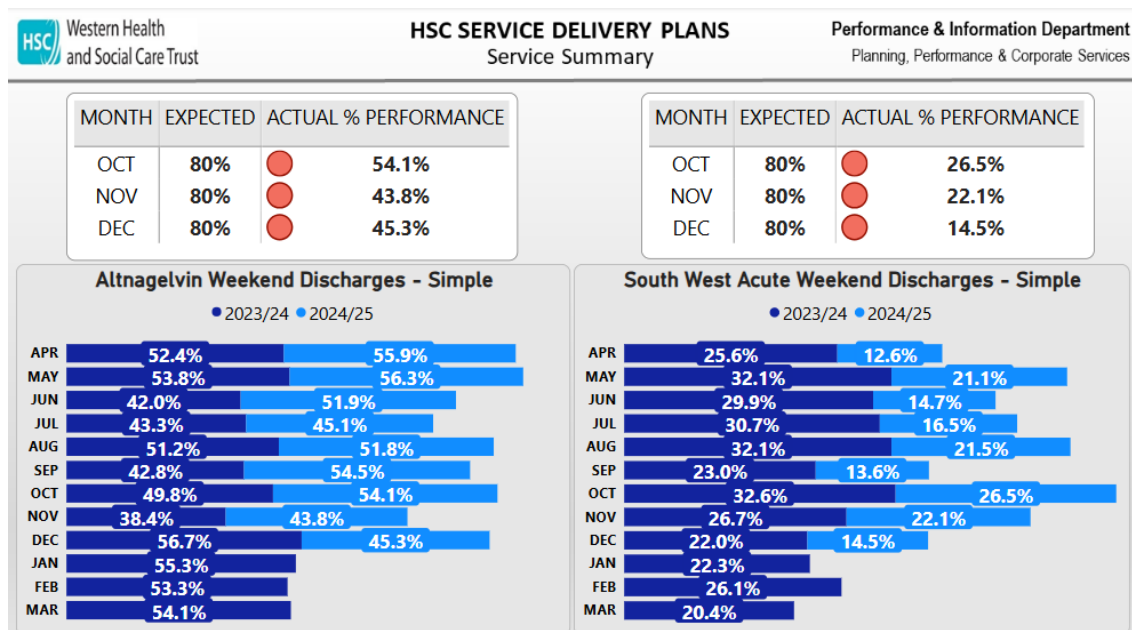
Weekend Discharge Rates - Service Delivery Plan

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.

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.

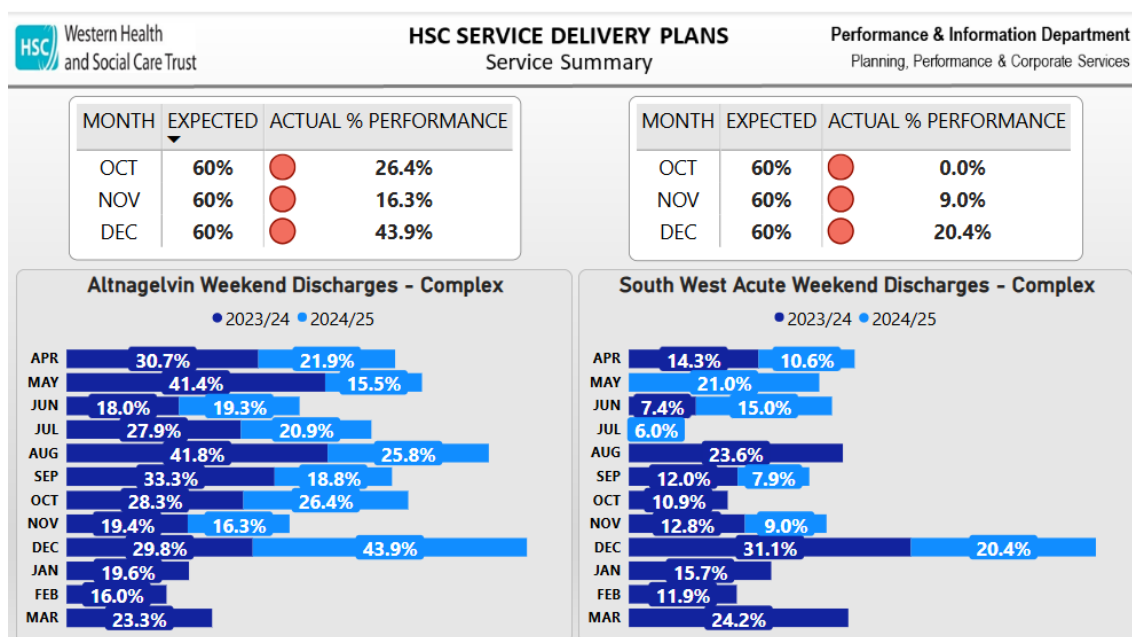
Simple Discharges: Quarter 3 (October to December 24) cumulative performance:

- Altnagelvin: **49.4%** against the 80% target.
- South West Acute: **22.0%** against the 80% target.



Complex Discharge: Quarter 3 (October to December 24) cumulative performance:

- Altnagelvin: **30.1%** against the 60% target.
- South West Acute: **11.1%** against the 60% target.



Stroke Services – Service Delivery Plan

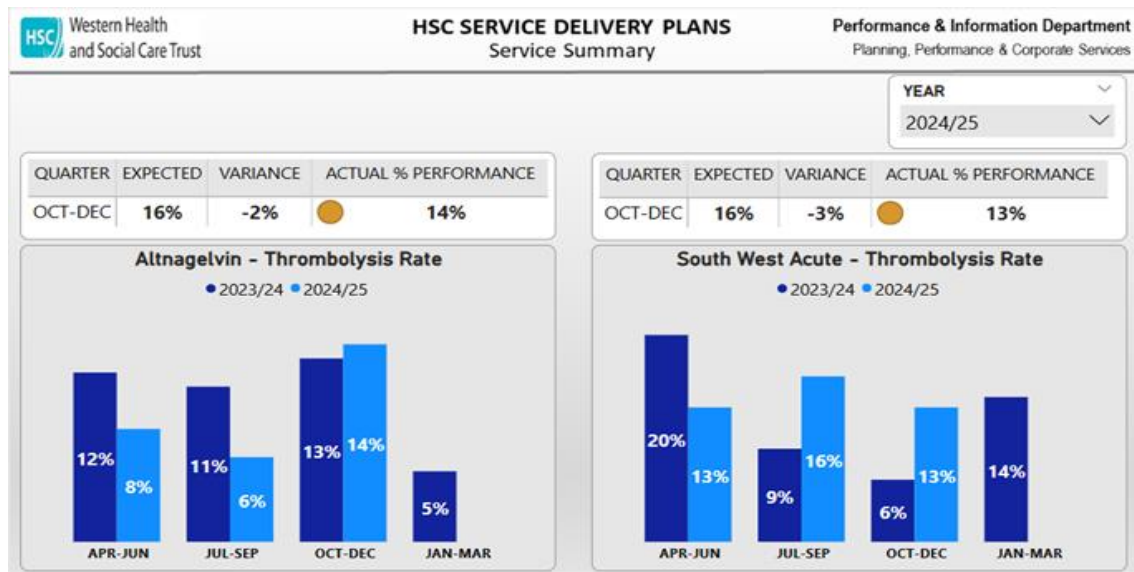
The 2024/25 SDP target is that 16% of patients with confirmed ischaemic stroke receive thrombolysis treatment, where clinically appropriate.

Information for the four metrics is extracted from SPPG Portal. SPPG Information staff source this data from the SSNAP Return.

Thrombolysis: Quarter 3 (October to December 24) cumulative performance:

Altnagelvin: 14% achieved against the 16% target.

South West Acute: 13% achieved against the 16% target.



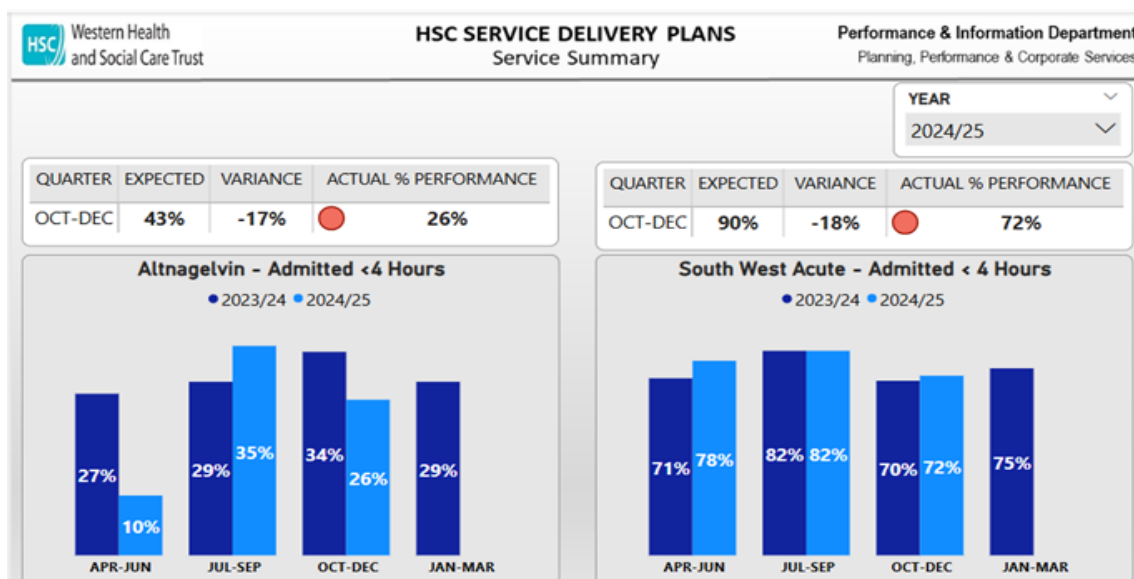
% Admitted to stroke unit within 4 hours of arrival

The 2024/25 SDP target - **43%** of patients at Altnagelvin Hospital and **90%** of patients at South West Acute Hospital are admitted to a stroke unit with 4 hours of arrival.

% Admitted <4 Hours: Quarter 3 (October to December 24) cumulative performance:

Altnagelvin: 26% achieved against the 43% target.

South West Acute: 72% achieved against the 90% target.



Public Health – Service Delivery Plan

HCAI - *Clostridioides difficile* (CDI): **14.2 cases per 100,000 occupied beds**

HCAI - Methicillin-resistant staphylococcus aureus (MRSA): **1.613 cases per 100,000 occupied beds**

Antimicrobial Consumption - total antibiotic prescribing: **1% reduction**

Antimicrobial Consumption - carbapenem use: **1% reduction**

Antimicrobial Consumption - piperacillin-tazobactam use: **1% reduction**

Antimicrobial Consumption - use of antibiotics from the WHO Access AWaRe category: **55%**

The Quarter 3 (October to December 24) performance has remained static with one of the six metrics having exceeded the expected target (HCAI- Methicillin-resistant staphylococcus aureus (MRSA)).

Performance against the HCAI - *Clostridioides difficile* (CDI) and three of the four Antimicrobial Consumption metrics remain below target achieving a “Red” RAG status.

The Antimicrobial Consumption metric - Use of Antibiotics from the WHO access AWaRe Category achieved an “Amber” RAG status at the end of Quarter 3. The Quarter 1 and 2 RAG status for this metric has been updated to “Amber”. This is a result of PHA amending their RAG rating to include “Amber”, when performance is within 5% of the expected target, this is in addition to RAG “Green and Red”.

The individual target and performance for Quarter 1 to 3 (April to December 24) is detailed in the table below:

Service Area	2024/25 Target Trajectory	Quarter 1 (Apr-Jun 24 cumulative)	Quarter 2 (Jul-Sep 24 cumulative)	Quarter 3 (Apr-Dec 24 cumulative)
HCAI - clostridioides difficile (CDI)	Q1: 14.2 cases per 100,000 occupied beds Q2: 13.9 cases per 100,000 occupied beds Q3: 13.7 cases per 100,000 occupied beds	19.4	20.1	18.5
HCAI - Methicillin-resistant staphylococcus aureus (MRSA)	1.613 cases per 100,000 occupied beds (CDI)	1.495	0.746	1.500
Antimicrobial Consumption - total antibiotic prescribing	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in total antibiotic prescribing (DDD per 1000 admission). Q1: 9417.2, Q2: 9331.7, Q3: 9246.2	10,684.6	10,296.9	10,274.7
Antimicrobial Consumption - carbapenem use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in carbapenem use, measured in DDD per 1000 admissions Q1: 106.5, Q2: 106.0, Q3: 105.6	142.0	166.5	168.3
Antimicrobial Consumption - piperacillin-tazobactam use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in piperacillin-tazobactam use, measured in DDD per 1000 admissions Q1: 446.6, Q2: 444.0, Q3: 441.3	504.3	492.6	484.9
Antimicrobial Consumption - use of antibiotics from the WHO Access AWaRe category	by 31st March 2025, all Trusts to secure (in secondary care) a total of 55% usage of antibiotics from the WHO Access AWaRe category	53.22%	52.26%	52.17%

In light of the change in methodology and baselines selected for the 2024/25 reporting year, the Trust continues to raise concerns with SPPG and Public Health Agency (PHA). A meeting was held with the Public Health Agency (PHA) on 16th December 2024, to address these concerns, however no resolution has been confirmed at this time. A further suggestion has been made for the Trust Lead to meet with the PHA to review their processes and associated datasets in an attempt to resolve these queries.

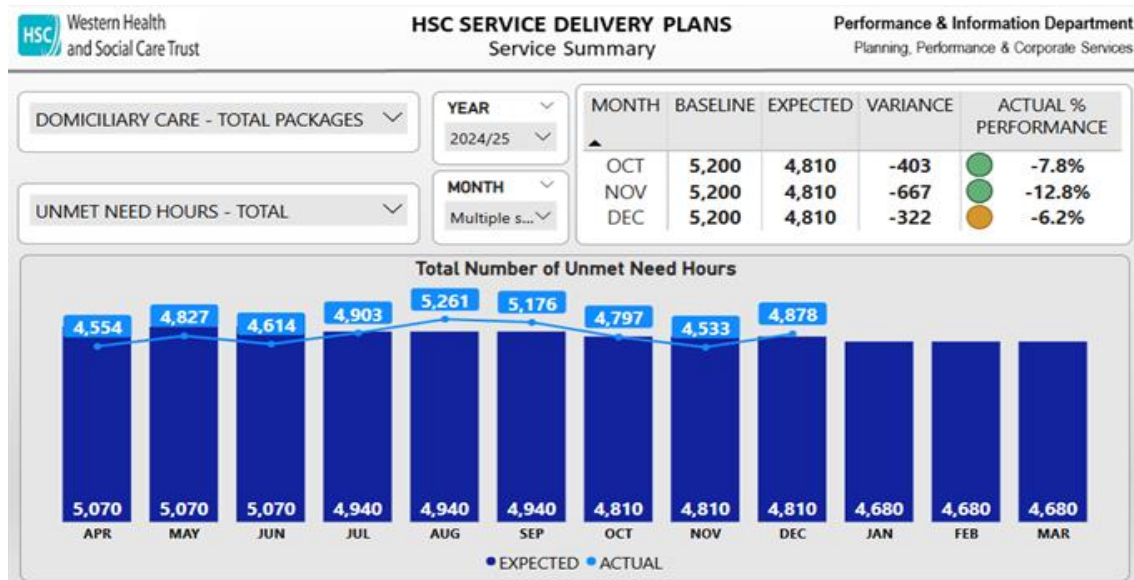
COMMUNITY CARE

Domiciliary Care – Service Delivery Plan

The 2024/25 SDP target is to achieve a 10% reduction in unmet need hours by March 2025 (full and partial packages across all POCs) (2.5% reduction per quarter).

Baseline Position: 31st March 2024.

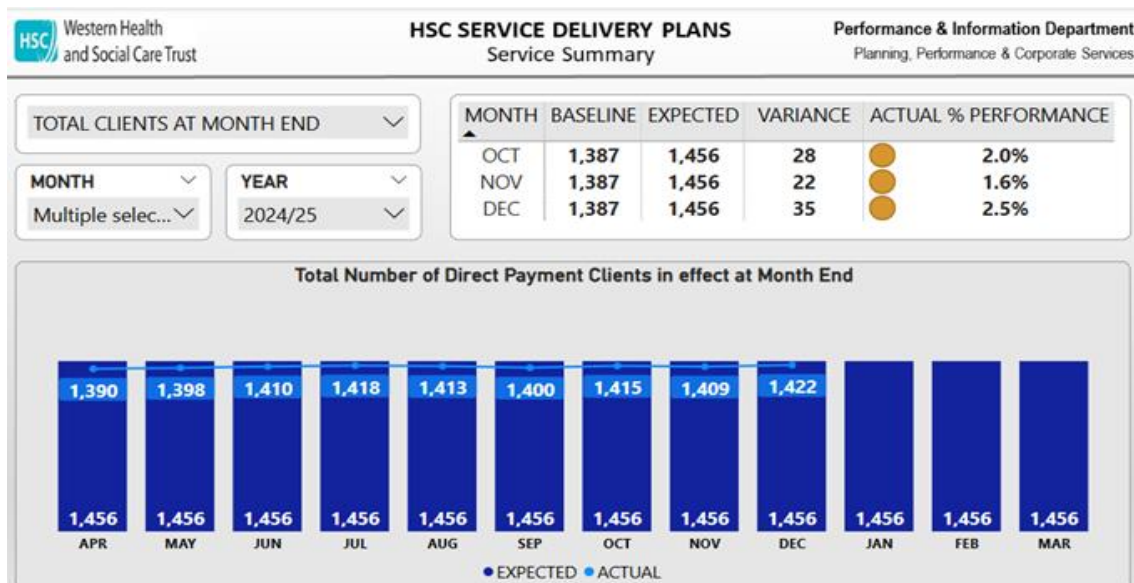
Total Packages: at the end of December 24, the Trust reported **4,878** unmet need hours against the expected target of 4,810.



Direct Payments – Service Delivery Plan

The 2024/25 SDP target is to achieve 5% increase in the number of service user Direct Payments in effect by March 2025 (compared to position at 31st March 2024).

By the end of March 25, the Trust are expected to achieve 1,456 Service User Direct Payments in effect. At the end of December 24, SDP target almost achieved with **1,422** Service User Direct Payments in effect.



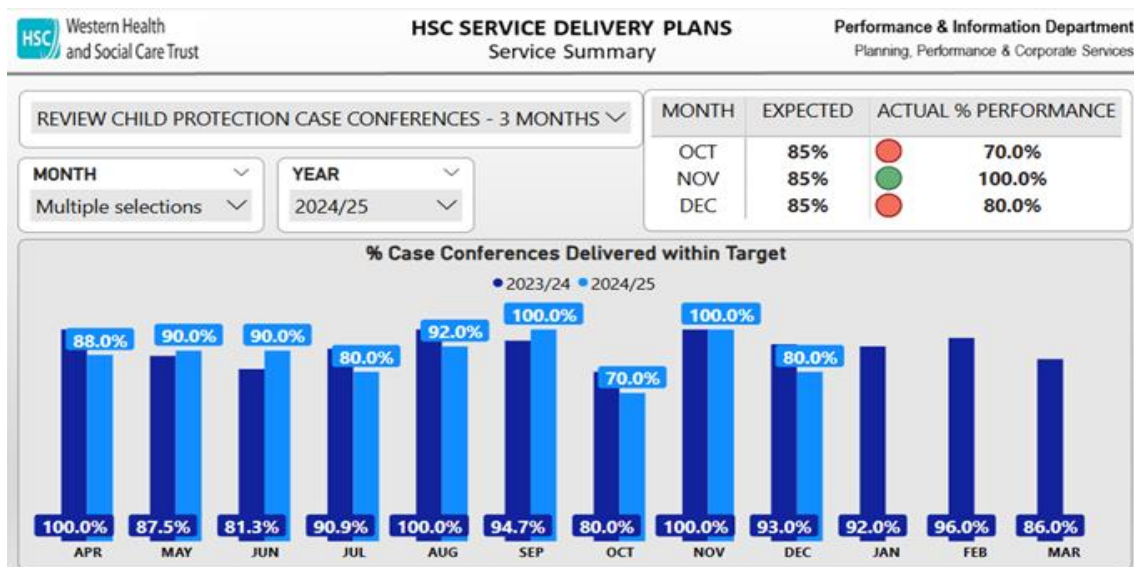
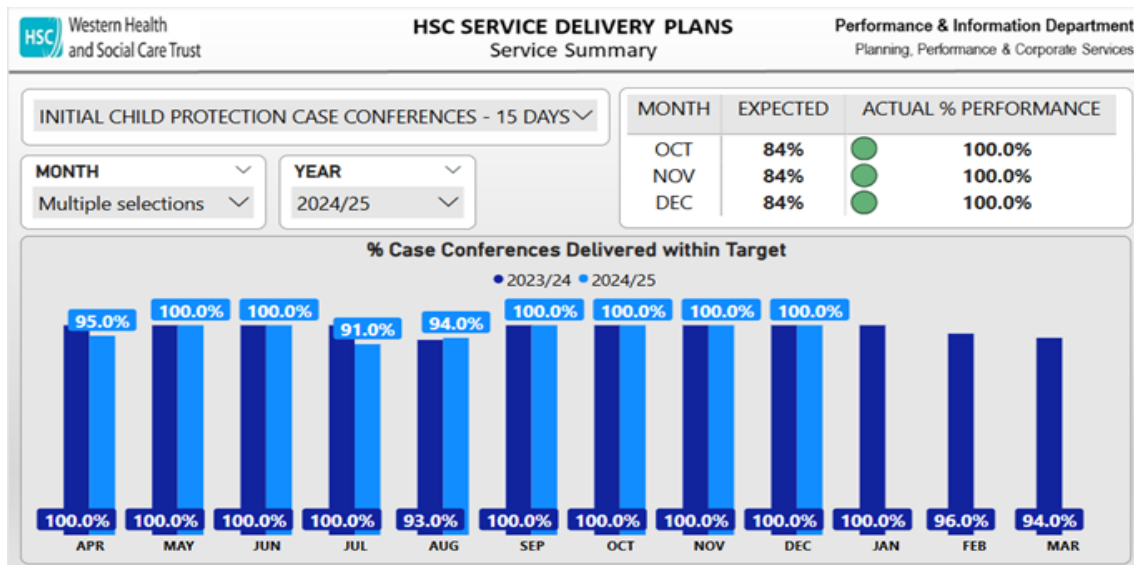
Children's Social Care – Service Delivery Plan

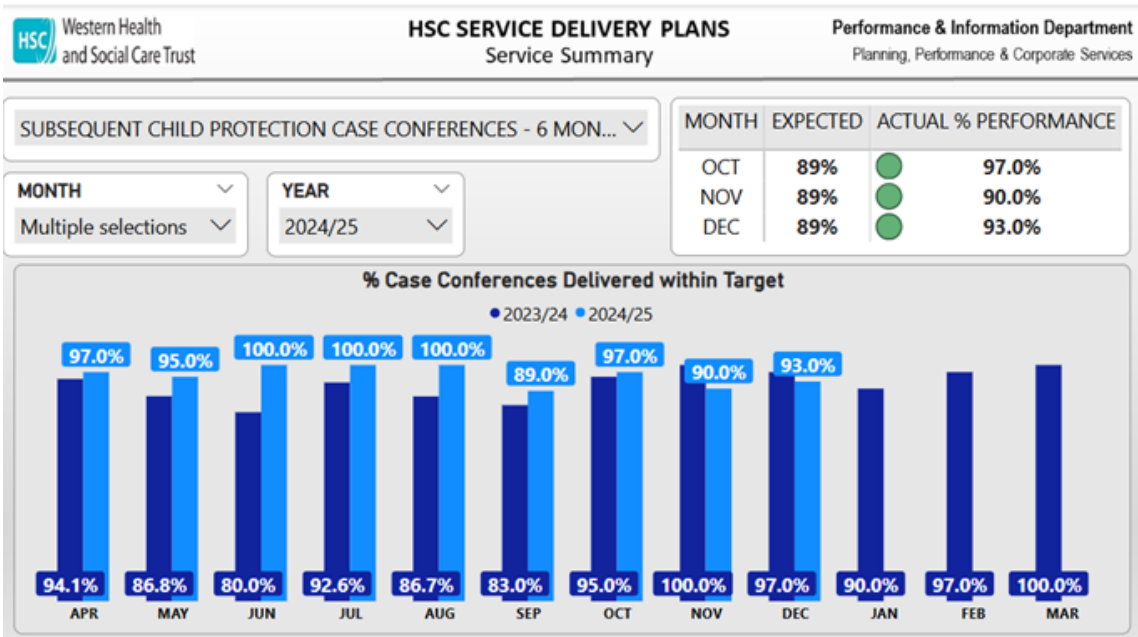
The 2024/25 SDP target for Child Protection Case Conferences is to achieve **84%** of Initial Child Protection Case Conferences held <15 days; **85%** of Review Case Conferences held <3 months and **89%** of Subsequent Review Case Conferences held <6 months.

Performance remained strong throughout Quarter 3 (October to December 24) with the SDP target exceeded in each of the three metrics; with the exception of Review Child Case Conferences held within 3 months. The October and December 24 performance for Review Child Case Conferences was impacted by difficulty in securing meeting quorum and parent cancellations.

The cumulative performance achieved during Quarter 3 (October to December 24) for:

- Initial Child Protection Case Conferences held <15 days: **100%** against the 84% target.
- Review Case Conferences held <3 months: **81%** against the 85% target.
- Subsequent Review Case Conferences held <6 months: **94%** against the 89% target.

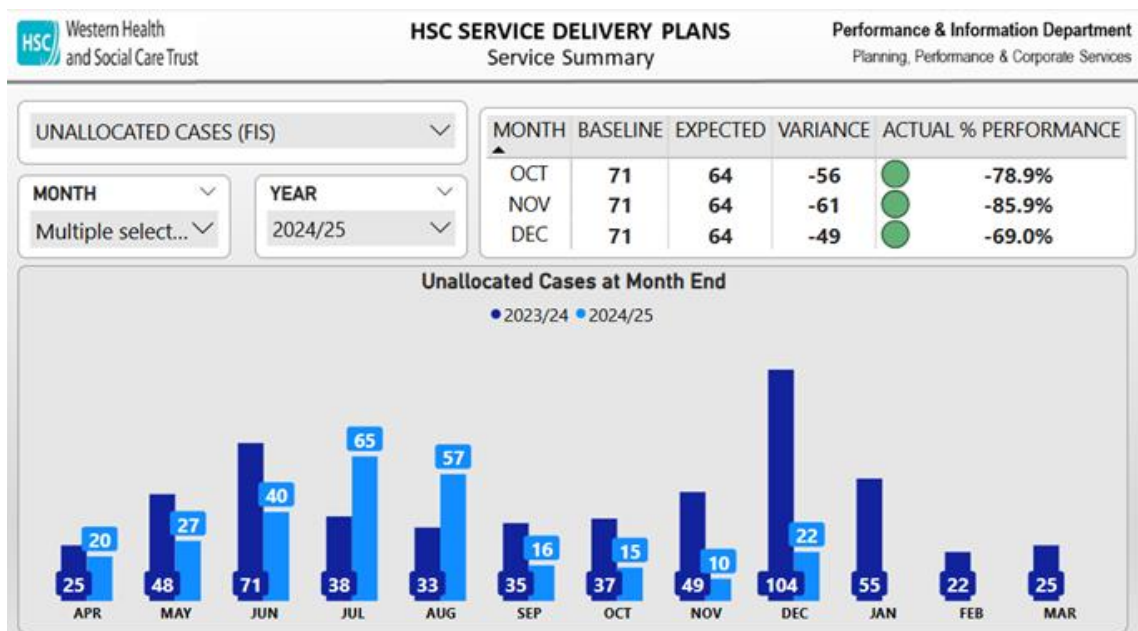




Children’s Social Care – Unallocated Cases - Service Delivery Plan

The 2024/25 SDP target is to achieve a 10% reduction in the number of Unallocated Family Support cases by March 2025.

High level of performance maintained during Quarter 3 (October to December 24); the Trust reported **22** Unallocated Cases against the Baseline Target of 71. The cumulative performance achieved during Quarter 3 (October to December 24) was **–69.0%** against the 10% reduction target.



Mental Health Services – Service Delivery Plan

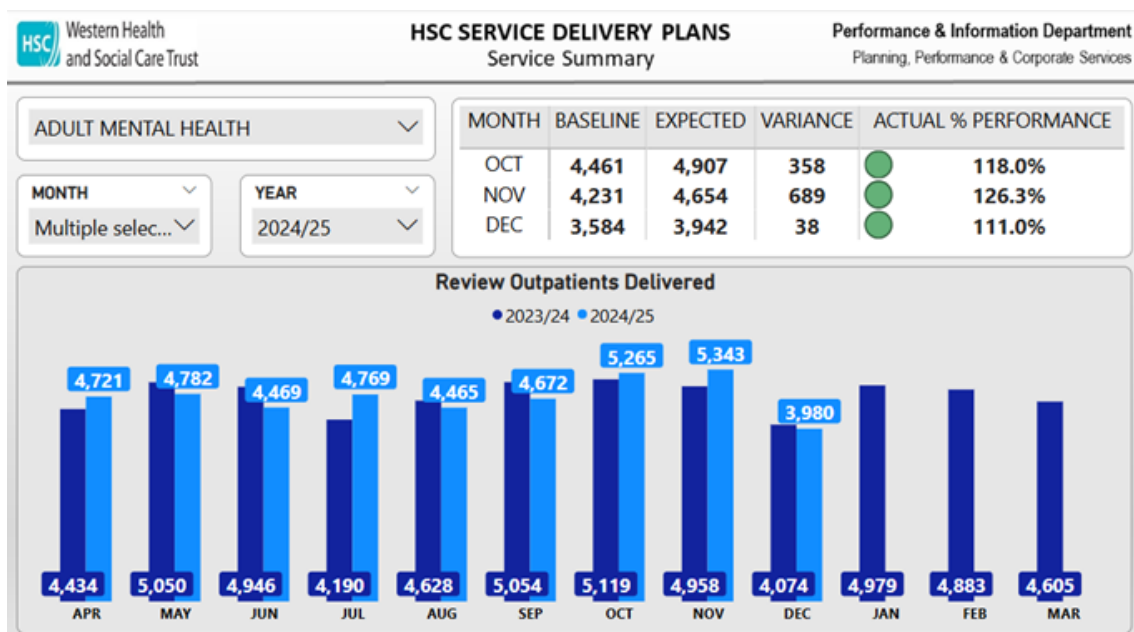
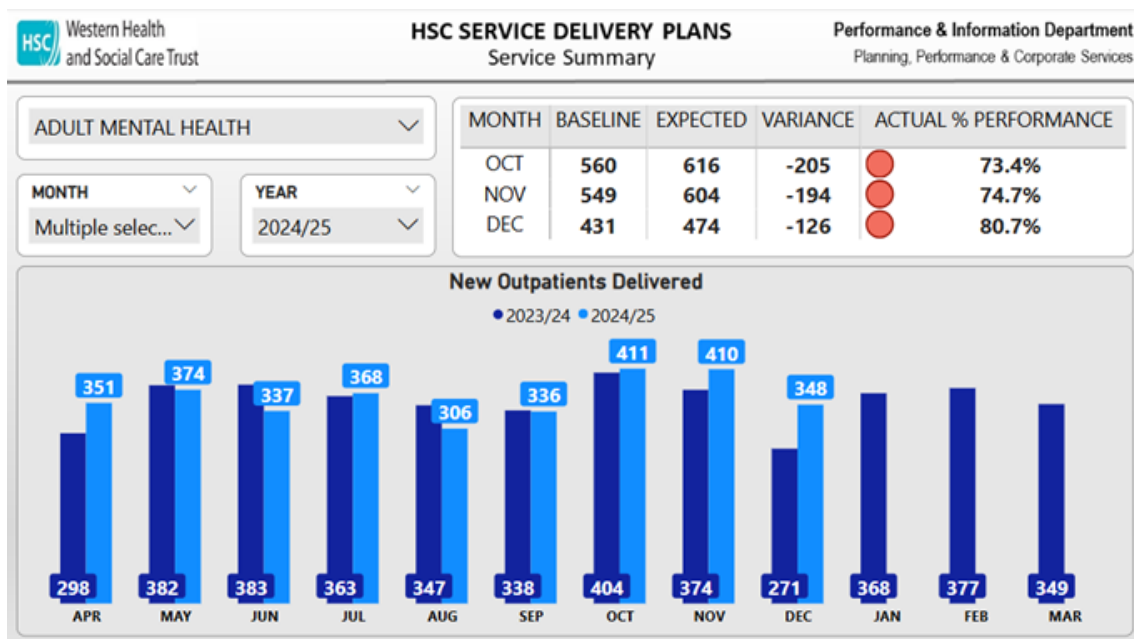
The 2024/25 SDP target - deliver 110% of 2019/20 activity for Adult Mental Health and Dementia.

The 2024/25 SDP target - deliver 100% of 2019/20 activity for Psychological Therapies.

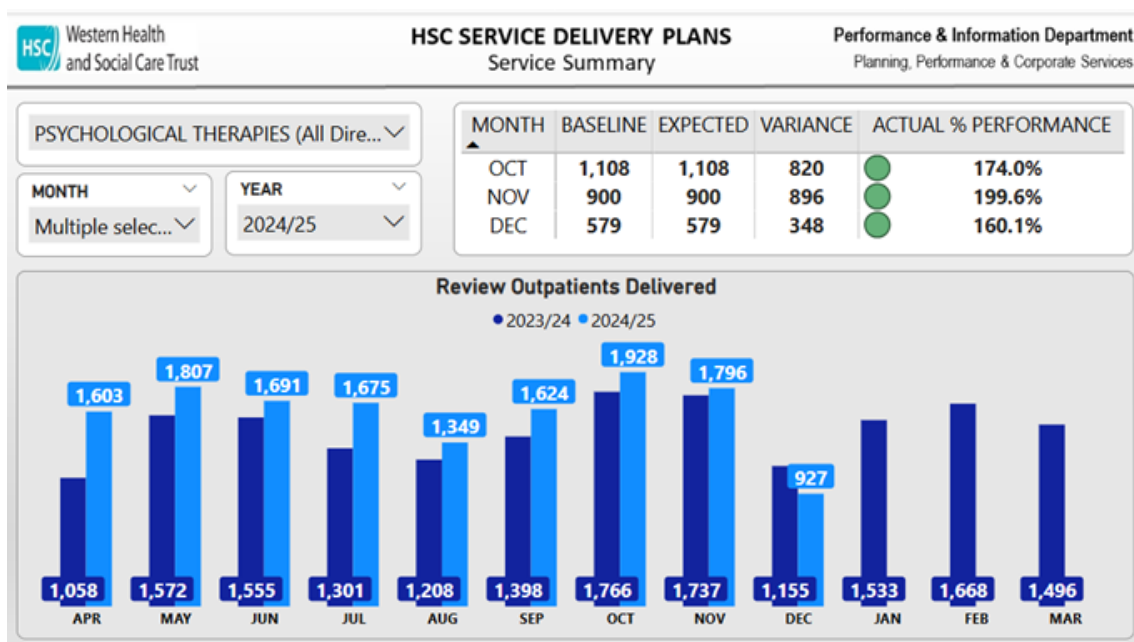
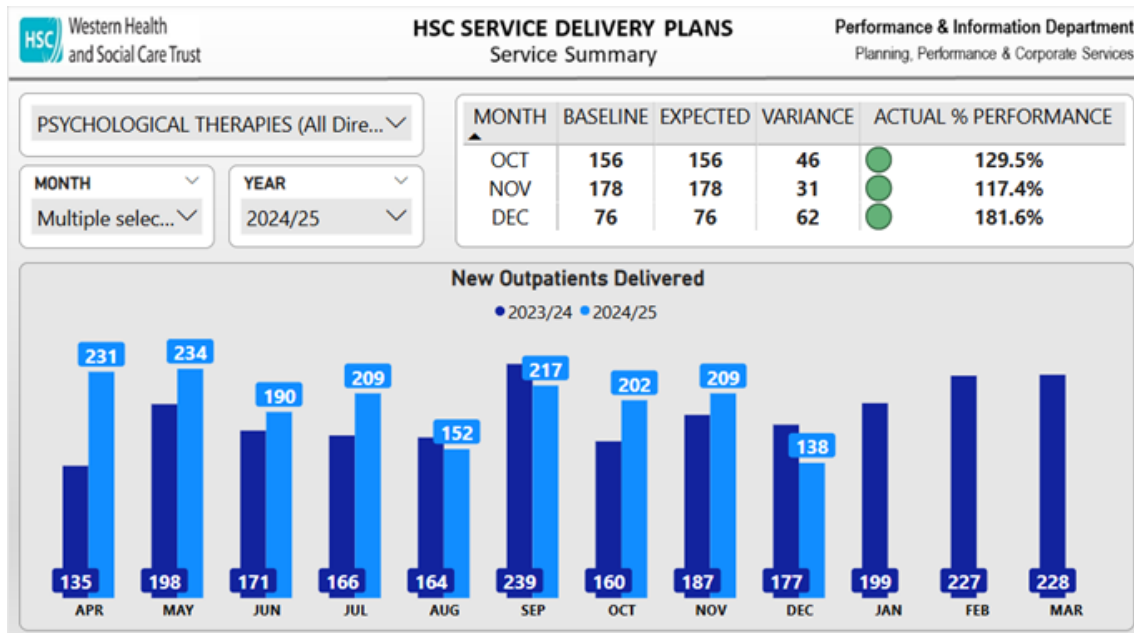
The 2024/25 SDP target - deliver 100% (New) and 110% (Review) of 2019/20 activity for Child & Adolescent Mental Health Service

During Quarter 3 (October to December 24), a high level of performance has been achieved with an overall total of **25,556** New (2,235) and Review (23,321) Outpatients delivered across the four service areas; reflecting a 27.2% increase on 2019/20 Baseline activity (5,462 additional attendances). An individual breakdown by Service area provided below.

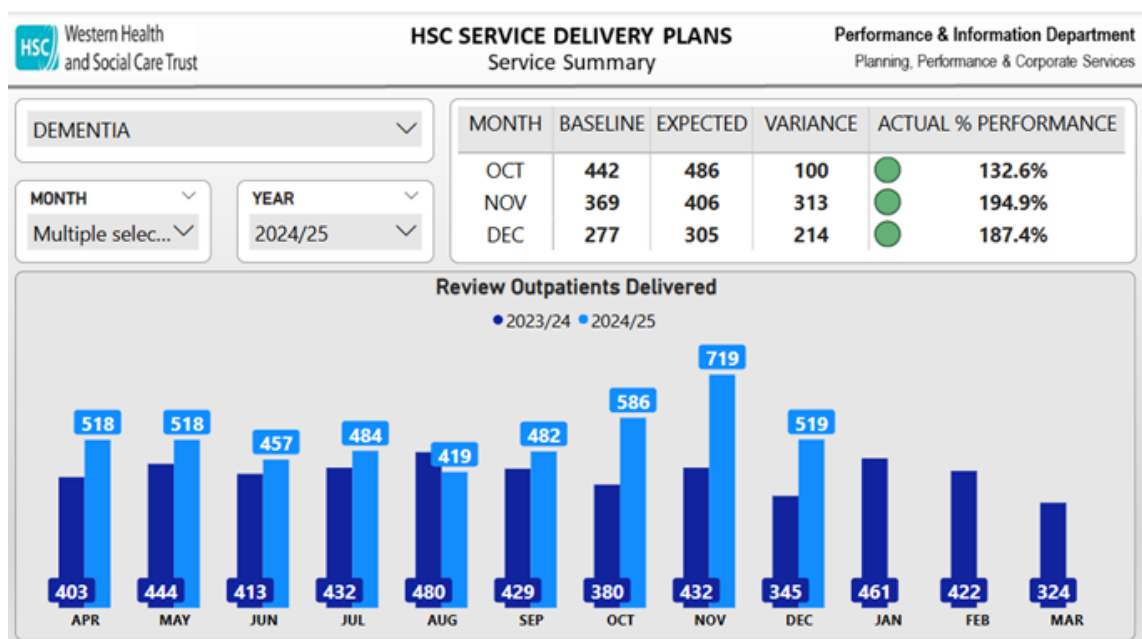
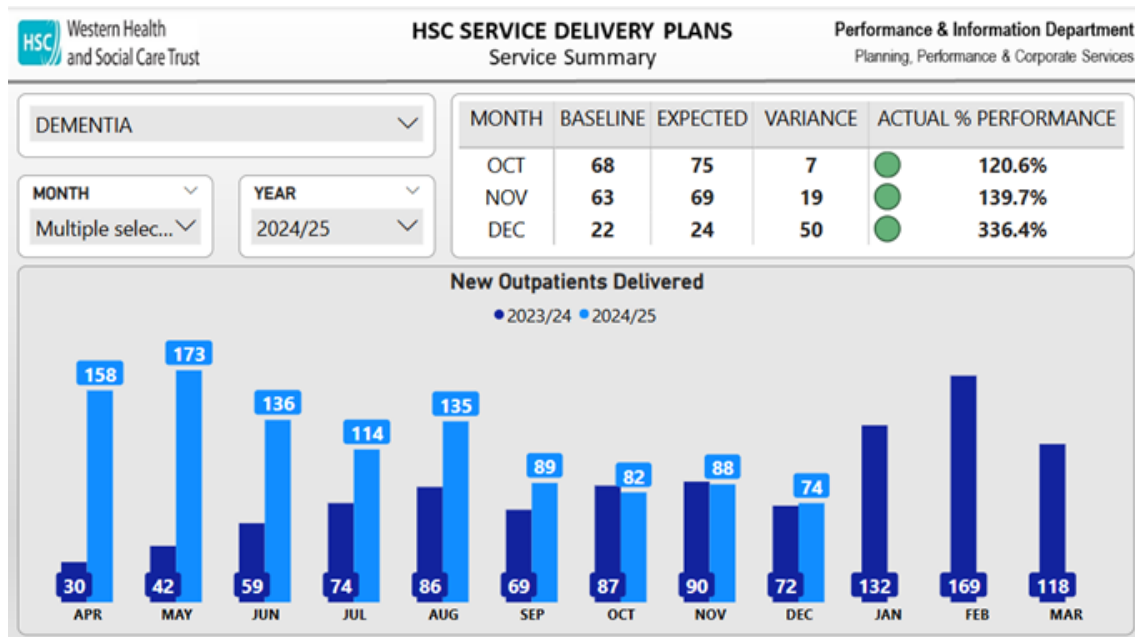
Adult Mental Health: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(15,757)** reflects **114.0%** (RAG Green) of the cumulative 2019/20 Baseline activity (13,816); this represents 1,941 additional attendances.



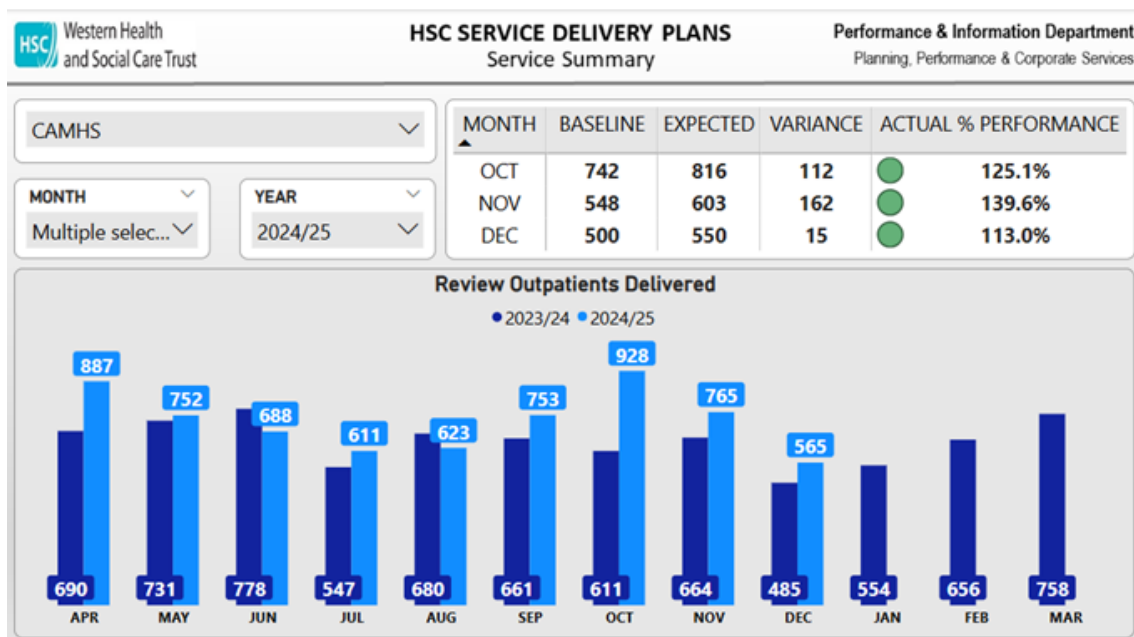
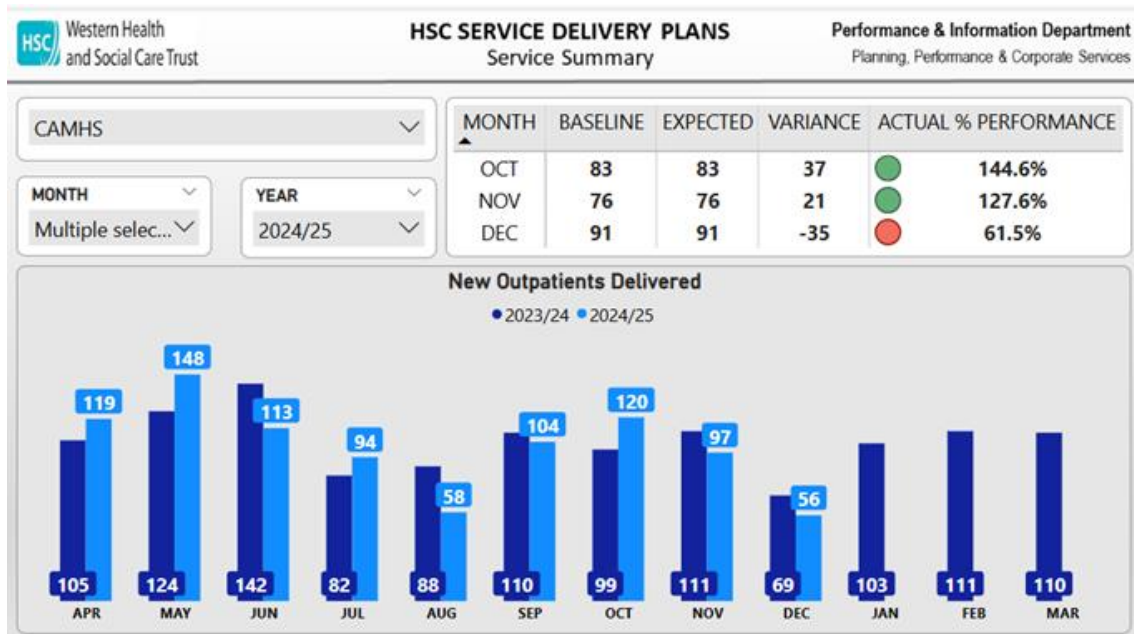
Psychological Therapies: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(5,200)** reflects **173.5%** (RAG Green) of the cumulative 2019/20 Baseline activity (2,997); this represents 2,203 additional attendances.



Dementia: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(2,068)** reflects **166.6%** (RAG Green) of the cumulative 2019/20 Baseline activity (1,241); this represents 827 additional attendances.



Child and Adolescent Mental Health Service: the cumulative new and review activity delivered during Quarter 3 (October to December 24) (2,531) reflects 124.1% (109.2% New and 126.1% Review) of the cumulative 2019/20 Baseline activity (2,040); this represents 491 additional attendances.



Allied Health Professionals (AHPs) – Service Delivery Plan

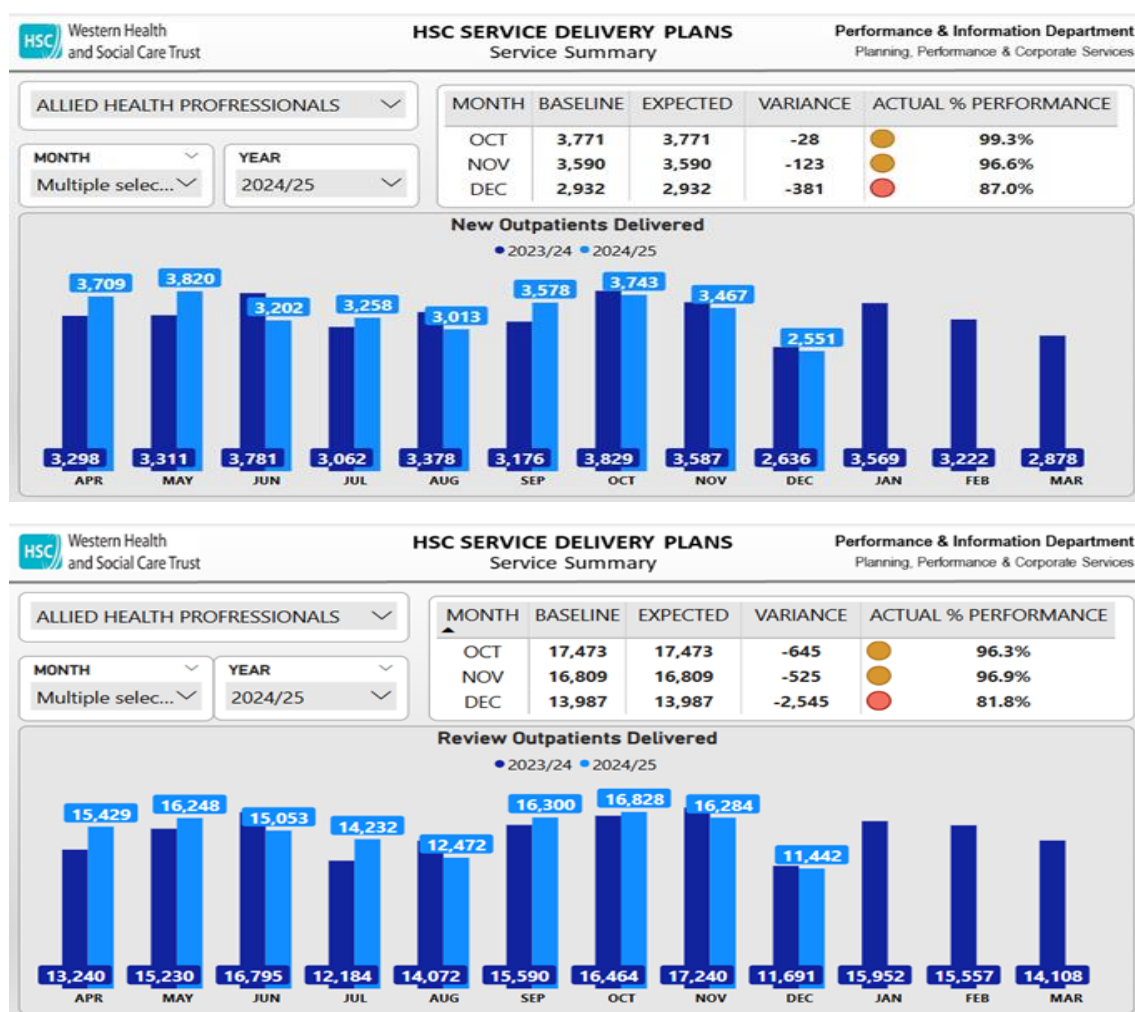
The 2024/25 SDP target is to deliver 100% of 2019/20 activity for Physiotherapy, Occupational Therapy, Orthoptics and Podiatry.

The 2024/25 SDP target is to deliver 100% of 2022/23 activity for Dietetics and Speech & Language Therapy.

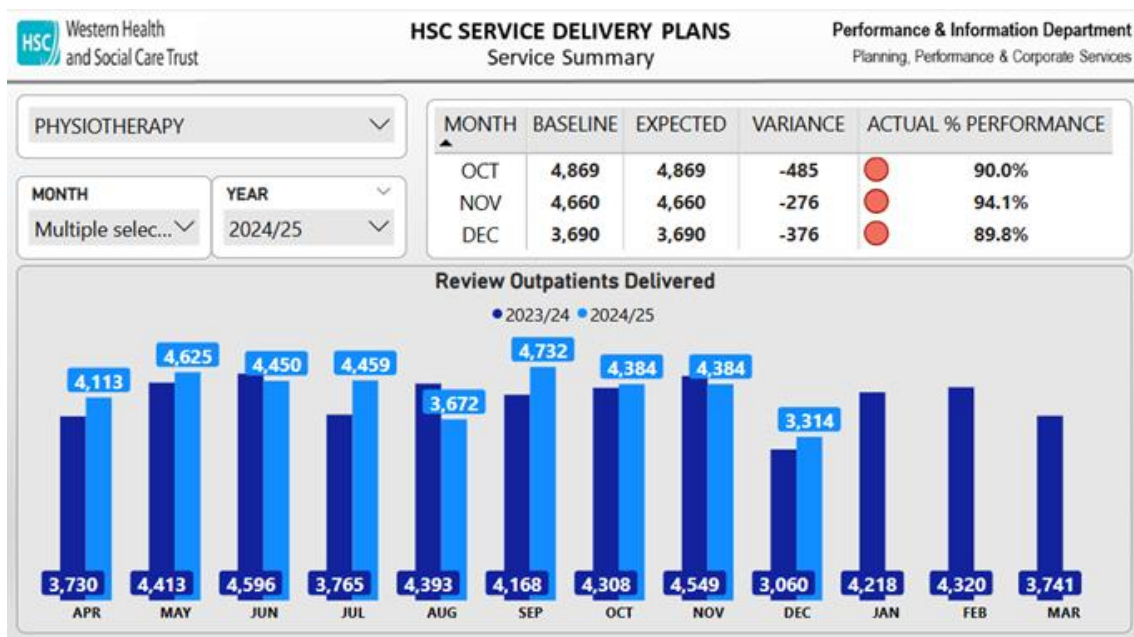
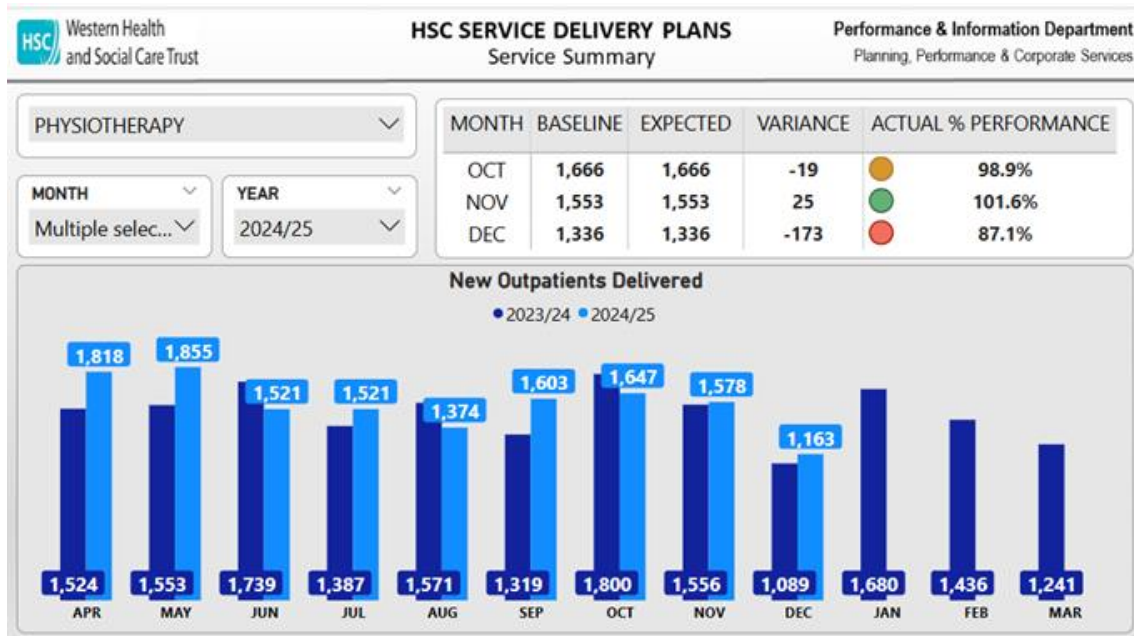
During Quarter 3 (October to December 24), the overall cumulative activity (New and Review Total) across the six service areas increased by 1,462 attendances when compared to 2024/25 Quarter 2 (July to September 24). Quarter 3 (October to December 24) represents the highest overall Baseline/Expected target this year to date. Workforce challenges including vacant posts and sickness absence (long and short term) continue to impact available capacity.

To support improvement in the access and service delivery performance across AHP services, there are a number of ongoing initiatives which include; waiting list validations, temporary use of Bank staff for Dietetic Paediatric clinics to address longest waiters, Podiatry mega clinics, Dietetic and OT TASC (Timely Access to Safe Care), OT Advanced Practitioner referral triage and AskSara project.

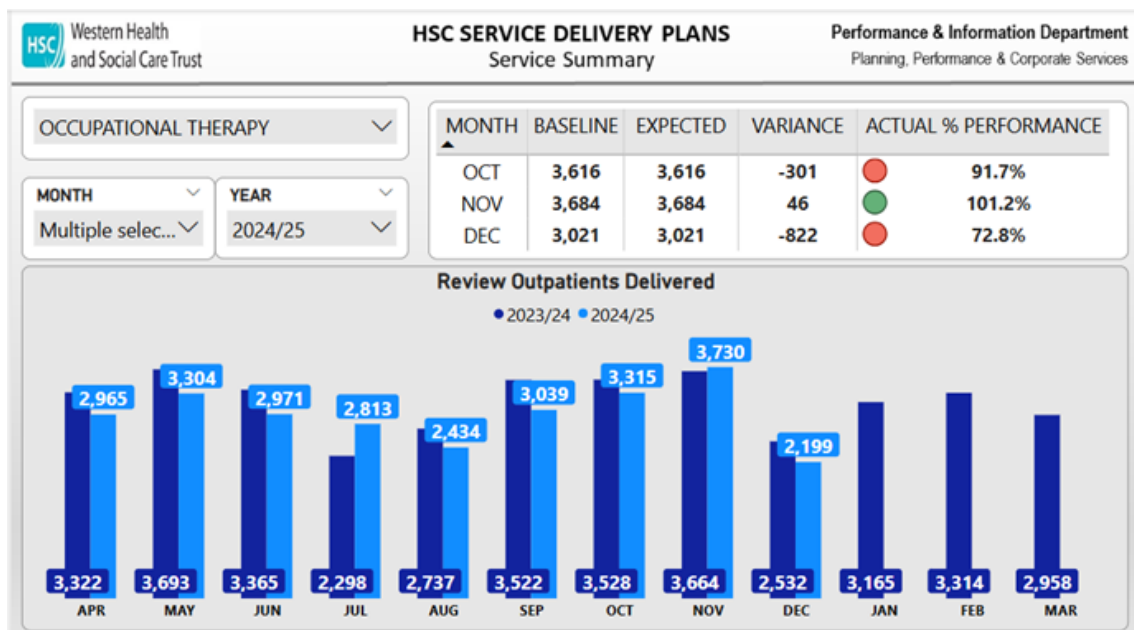
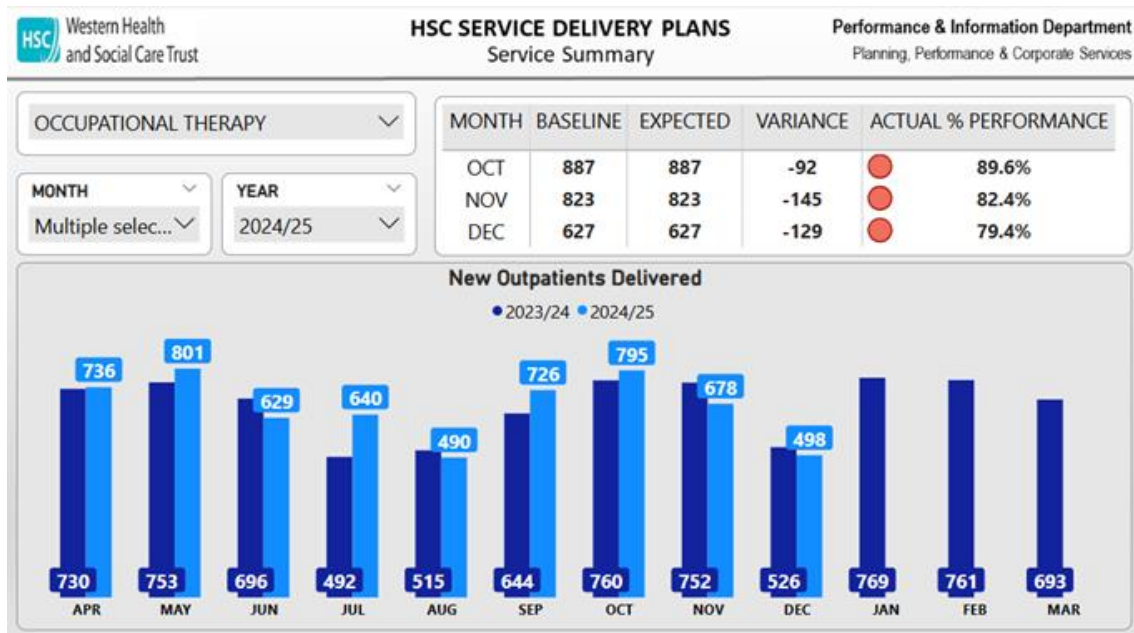
The cumulative New and Review activity delivered during Quarter 3 (October to December 24) (54,315), across the six service areas, represents 92.7% (94.8% New and 92.3% Review) of the cumulative Baseline activity (58,562). An individual breakdown by Service area is provided below.



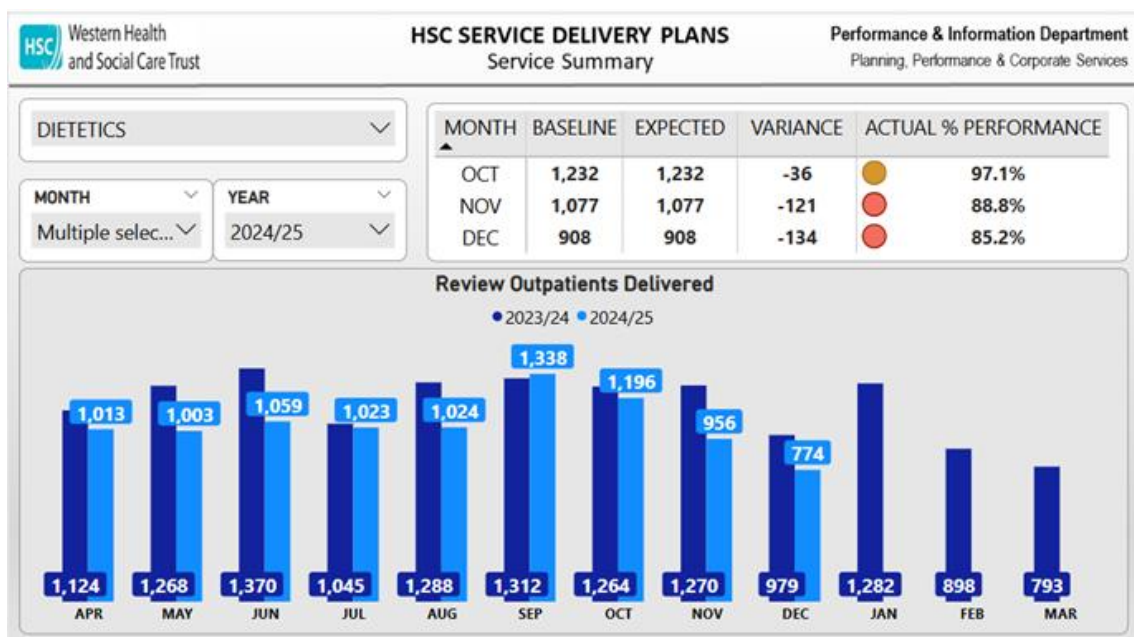
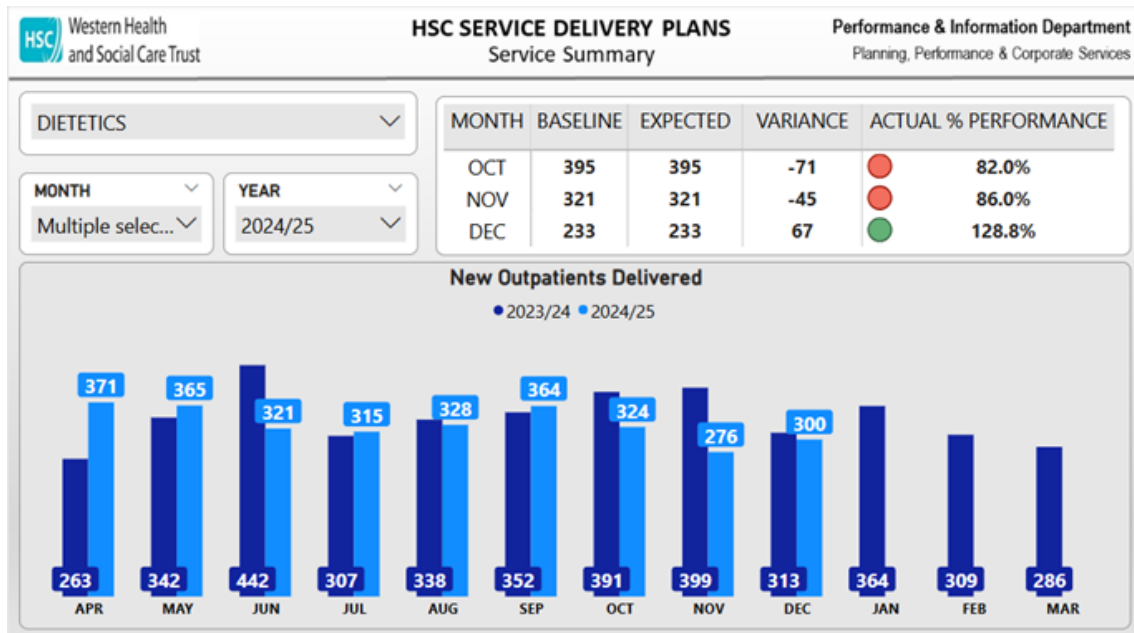
Physiotherapy: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(16,470)** reflects **92.7%** (96.3% New and 91.4% Review) of the cumulative 2019/20 Baseline activity (17,774).



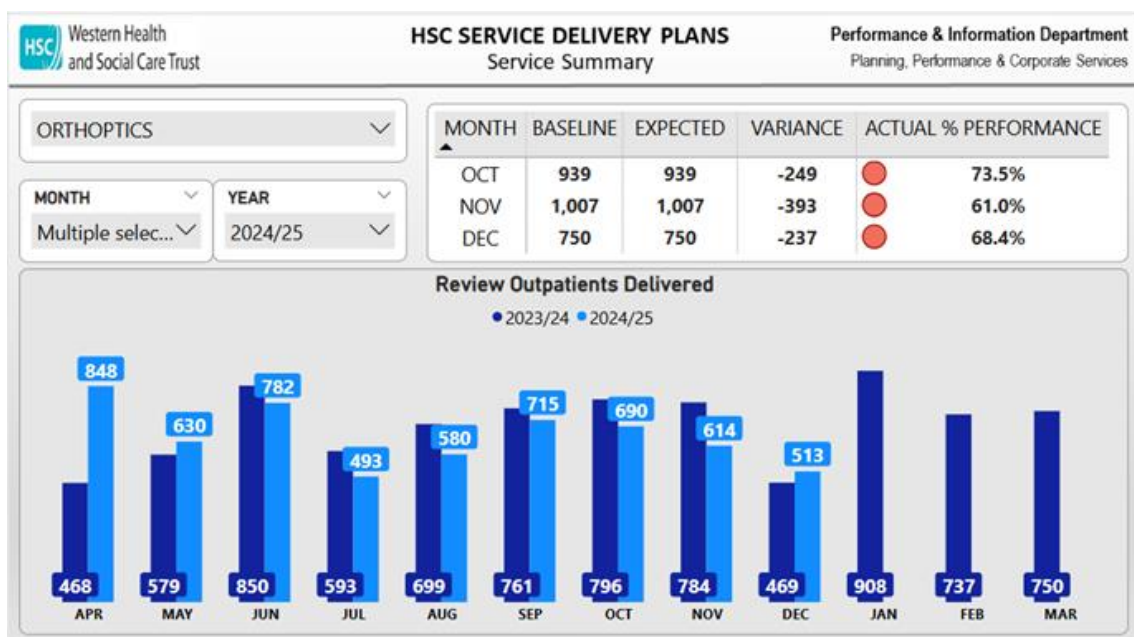
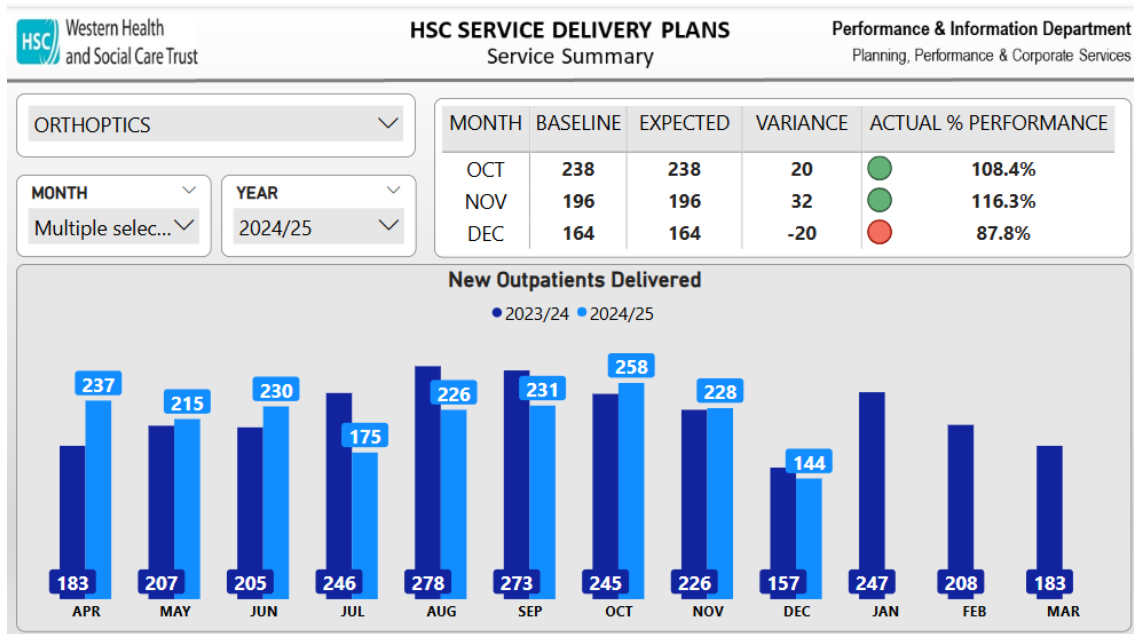
Occupational Therapy: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(11,215)** reflects **88.6%** (84.3% New and 89.6% Review) of the cumulative 2019/20 Baseline activity (12,658).



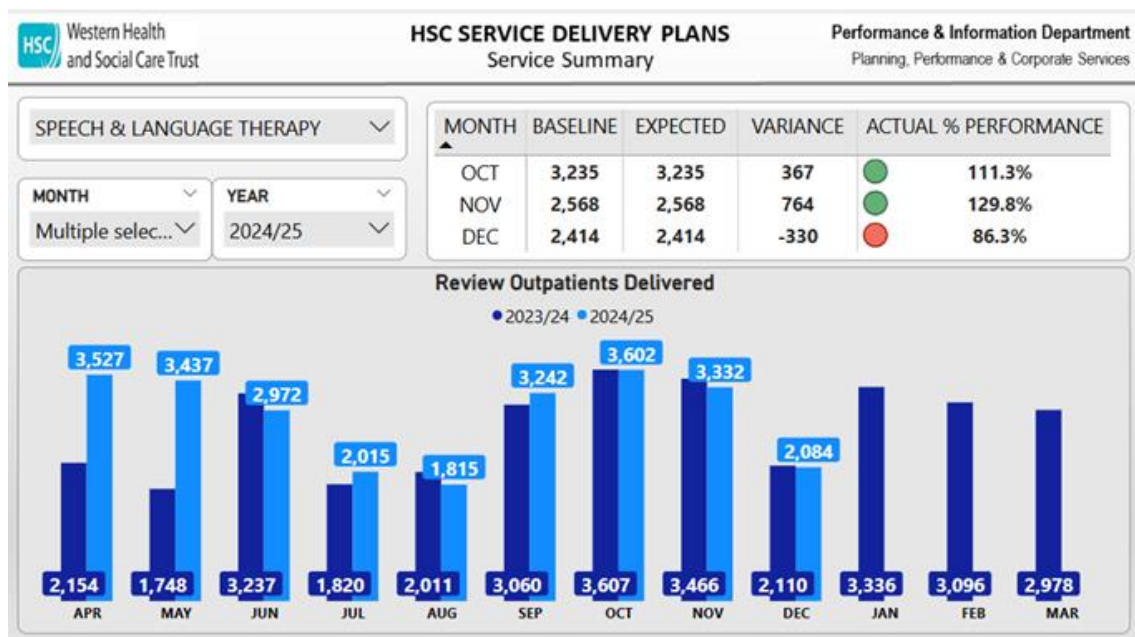
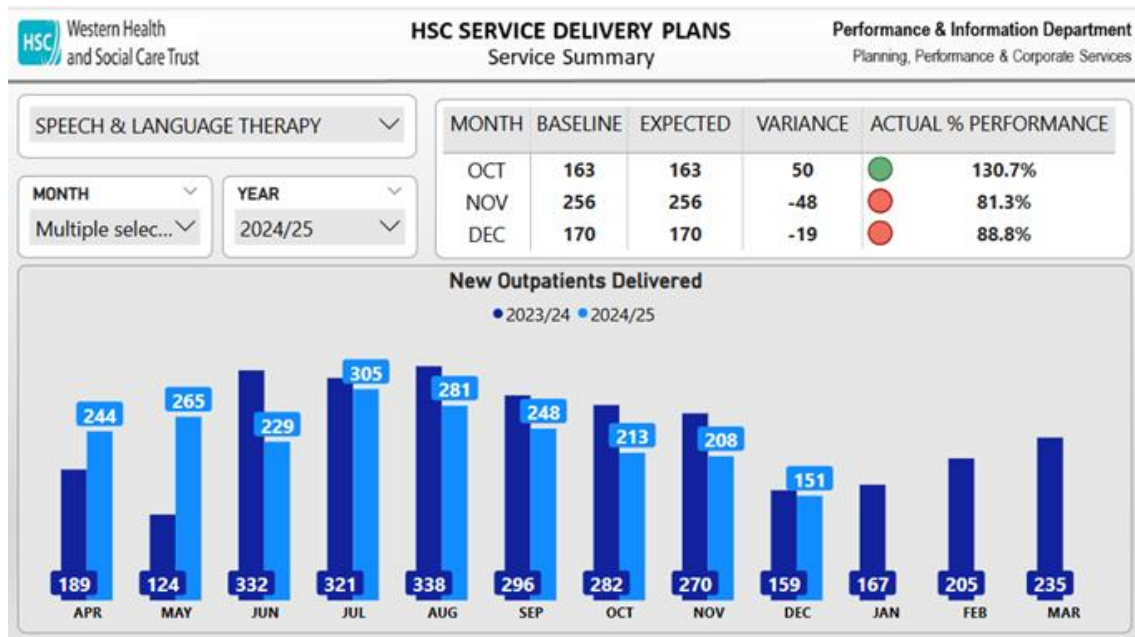
Dietetics: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(3,826)** reflects **91.8%** (94.8% New and 91.0% Review) of the cumulative 2022/23 Baseline activity (4,166).



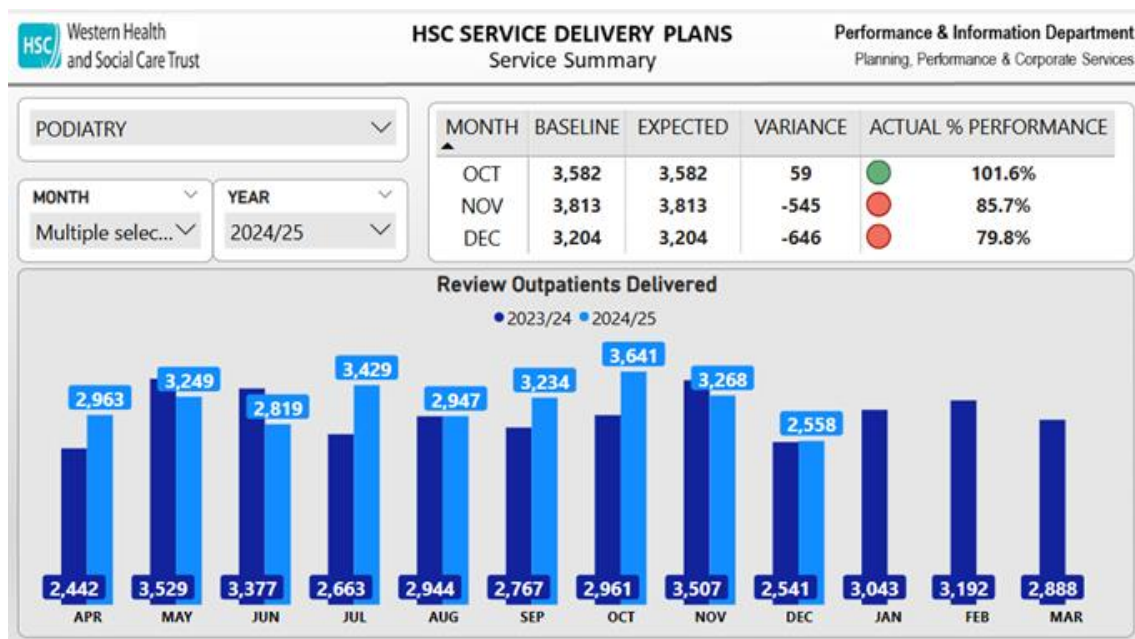
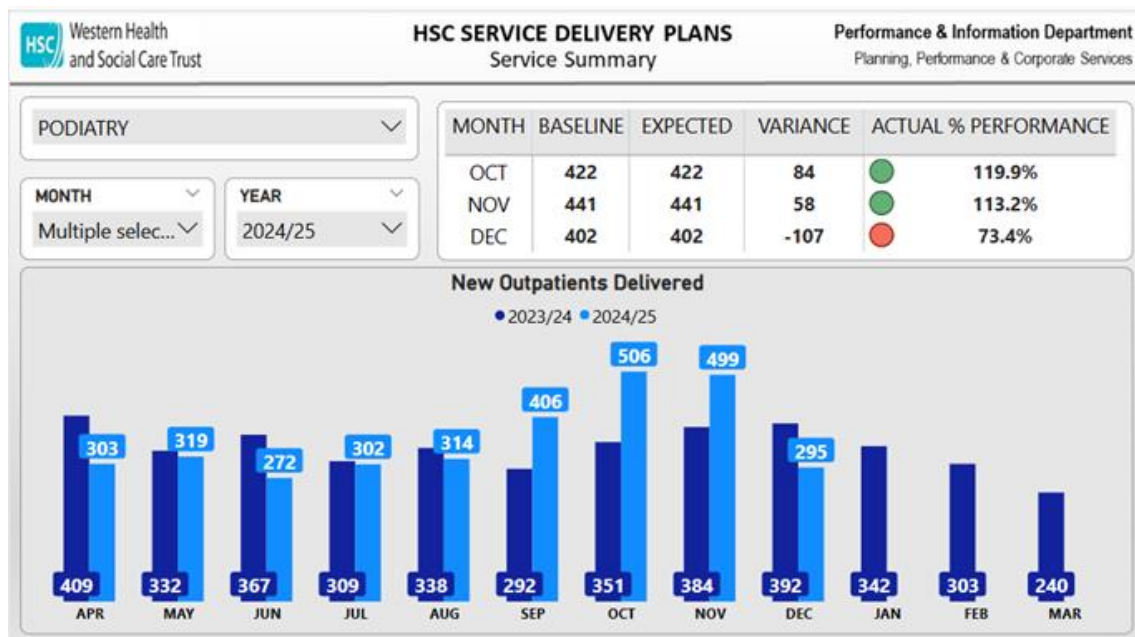
Orthoptics: the cumulative new and review activity delivered during Quarter 3 (October to December 24) (**2,447**) reflects **74.3%** (105.4% New and 67.4% Review) of the cumulative 2019/20 Baseline activity (3,294).



Speech and Language: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(9,590)** reflects **108.9%** (97.1% New and 109.7% Review) of the cumulative 2022/23 Baseline activity (8,806); this represents 784 additional attendances.



Podiatry: the cumulative new and review activity delivered during Quarter 3 (October to December 24) **(10,767)** reflects **90.8%** (102.8% New and 89.3% Review) of the cumulative 2019/20 Baseline activity (11,864).

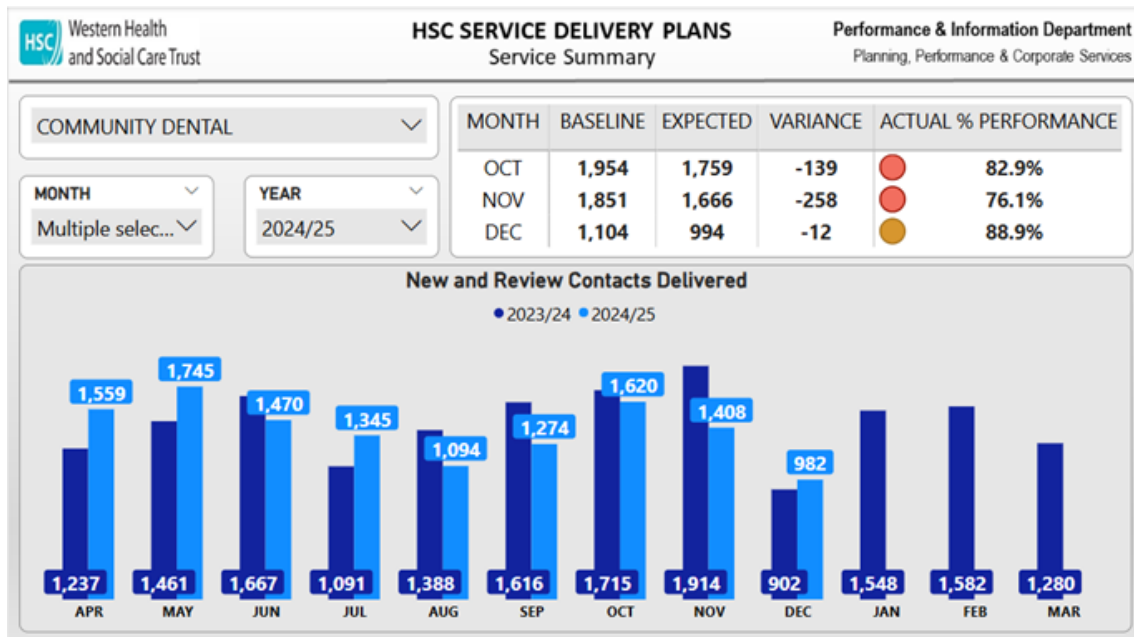


Community Dental - Contacts

The 2024/25 SDP target for Community Dental Contacts (new and review) is to achieve **100%** of 2019/20 in Quarter 1 & 2, **90%** in Quarter 3 and **80%** in Quarter 4.

The cumulative number of New and Review contacts delivered during Quarter 3 (October to December 24) **(4,010)** (RAG Red) reflects **81.7%** (72.5% New and 83.6% Review) of the cumulative 2019/20 Baseline activity (4,909). Quarter 3 (October to December 24) represents the highest Baseline/Expected target this year to date.

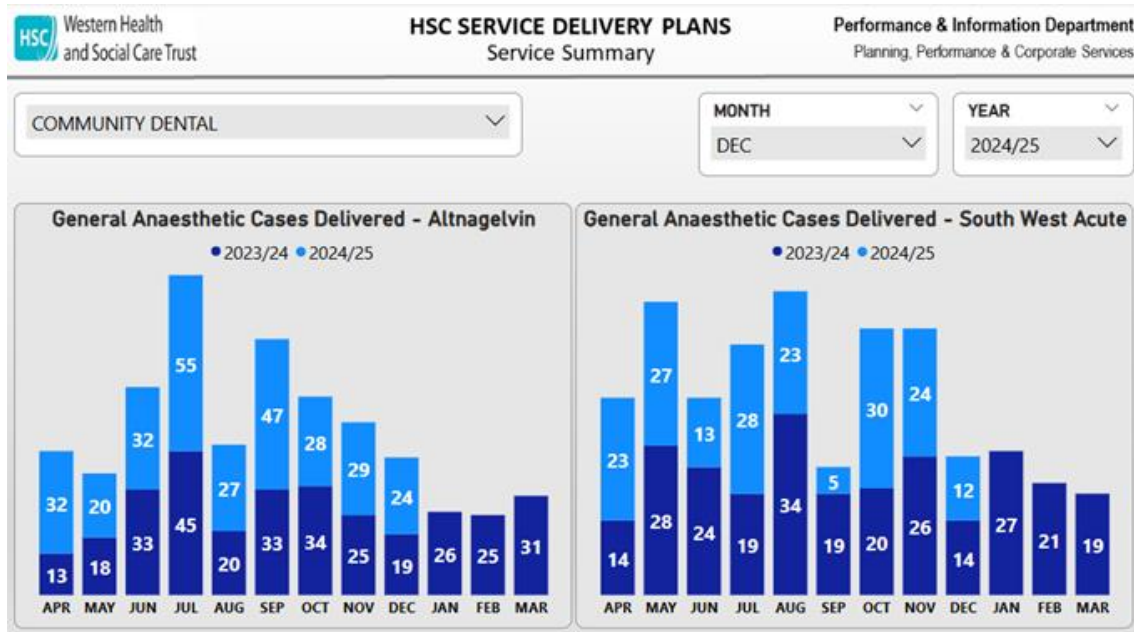
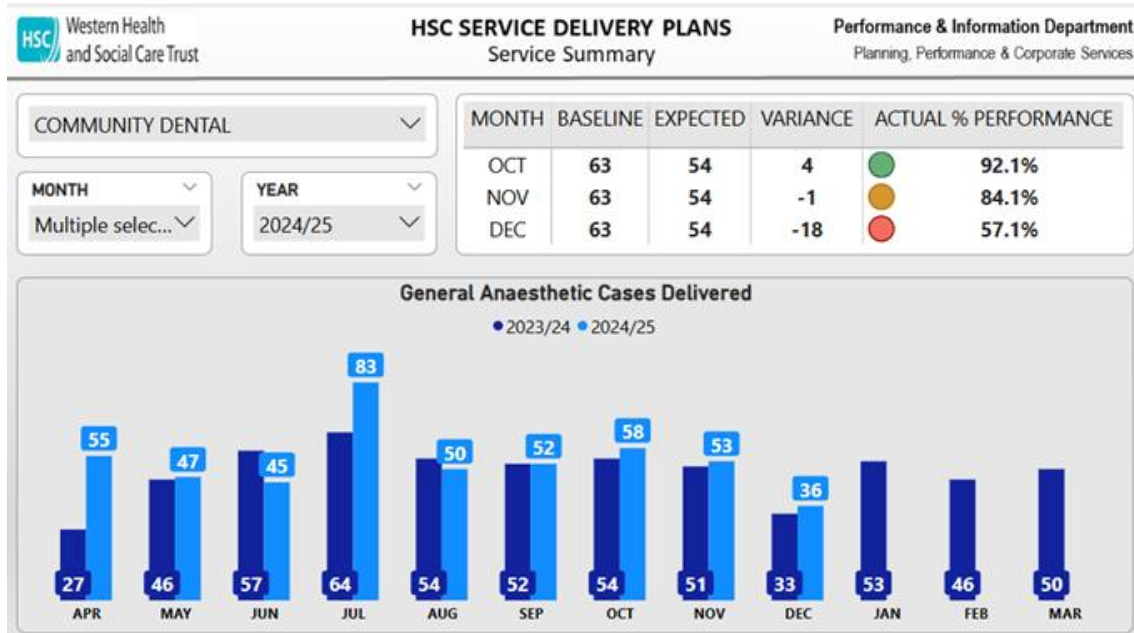
The Quarter 3 (October to December 24) activity and out turn impacted by vacant posts and sickness absence. Recruitment to vacant Dental posts (Dentist Officer and Hygienist) is ongoing with interviews scheduled for early 2025.



Community Dental – General Anaesthetic Cases Delivered

The 2024/25 SDP target for Community Dental - General Anaesthetic (GA) Children's Cases is to achieve **80%** of 2019/20 in Quarter 1 & 2, **85%** in Quarter 3 and **80%** in Quarter 4.

The number of GA cases delivered during Quarter 3 (October to December 24) (147), represents **77.8%** (61.4% Altnagelvin and 115.8% South West Acute) of the cumulative 2019/20 Baseline (189).



End of Report

Section 2: Western Trust - Summary of Activity Delivered: October to December 2024

		QUARTER 3 (OCTOBER - DECEMBER 2024)				
		BASELINE	EXPECTED	DELIVERED	VARIANCE DELIVERED - EXPECTED EXCEPTIONS APPLY	ACTUAL PERFORMANCE DELIVERED / BASELINE EXCEPTIONS APPLY
CANCER						
PERFORMANCE	14 DAYS	100%	100%	99.9%	-0.1%	99.9%
	31 DAYS	98%	98%	99%	1%	99%
	62 DAYS	95%	95%	39%	-56%	39%
RED FLAG - FIRST OUTPATIENT APPOINTMENT (EXCLUDING BREAST) 110% OF 2019/20 BASELINE		2,071	2,279	3,049	770	147.2%
IMAGING						
MRI	TARGET SBA VOLUMES	4,146	4,146	4,281	135	103.3%
CT	TARGET SBA VOLUMES	8,088	8,088	10,884	2,796	134.6%
NOUS	TARGET SBA VOLUMES	10,626	10,626	11,564	938	108.8%
CARDIOLOGY / CARDIAC						
CARDIAC MRI	TARGET SBA VOLUMES	84	84	95	11	113.1%
CARDIAC CT	110% OF 2019/20 BASELINE	131	144	153	9	116.8%
ECHO	TARGET SBA VOLUMES	2,079	2,079	2,194	115	105.5%
CATH LAB	110% OF 2019/20 BASELINE	502	552	482	-70	96.0%
ELECTIVE						
NEW OUTPATIENTS 105% OF 2019/20 BASELINE	FACE TO FACE	18,811	19,742	13,914	-1,543	96.7%
	VIRTUAL			989		
	OTHER			3,296		
	TOTAL			18,199		
REVIEW OUTPATIENTS 100% OF 2019/20 BASELINE	FACE TO FACE	38,988	38,988	26,084	985	102.5%
	VIRTUAL			6,021		
	OTHER			7,868		
	TOTAL			39,973		
OUTPATIENTS (OVERALL)		57,799	58,730	58,172	-558	101%
INPATIENT 100% OF 2019/20 BASELINE	CORE	1,570	1,570	1,378	-192	87.8%
	OTHER	293	293	376	83	128.3%
	TOTAL	1,863	1,863	1,754	-109	94.1%
DAY CASES 100% OF 2019/20 BASELINE	CORE	4,108	4,108	4,060	-48	98.8%
	OTHER	2,109	2,109	2,432	323	115.3%
	TOTAL	6,217	6,217	6,492	275	104.4%
OMAGH DPC Day Case Activity (Included above)		315	315	181	-134	57.5%
INPATIENT AND DAYCASE (OVERALL)		8,080	8,080	8,246	166	102.1%
ENDOSCOPY	2019/20 BASELINE + 3000 SCOPES PER YEAR (Additional 250 per month)	3,219	3,219	2,813	-406	87.4%
OMAGH DPC Endoscopy Activity (Included above)		750	750	676	-74	90.1%
THEATRE UTILISATION						
SCHEDULED THEATRE MINUTES	SESSION DURATION (MINS)	272,655	272,655	311,310	38,655	114.2%
THEATRE OPERATING TIMES	MAIN THEATRES	85%	85%	82.3%	-3%	82.3%
	DPU THEATRES	80%	80%	72.7%	-7%	72.7%
UNSCHEDULED CARE						
ED PERFORMANCES - 12 HOURS	10% REDUCTION OF 2022/23 BASELINE	4,725	4,252	5,362	637	13.5%
WEEKEND DISCHARGES						
ALTNAGELVIN	SIMPLE	80%	80%	49.4%	-31%	49.4%
	COMPLEX	60%	60%	30.1%	-30%	30.1%
SOUTH WEST ACUTE	SIMPLE	80%	80%	22.0%	-58%	22.0%
	COMPLEX	60%	60%	11.1%	-49%	11.1%
AVERAGE LOS						
ALTNAGELVIN	1 DAY REDUCTION OF Q4 2022/23 BASELINE	8.1	7.1	9.0	1.9	9.0
SOUTH WEST ACUTE	1 DAY REDUCTION OF Q4 2022/23 BASELINE	11.4	10.4	13.6	3.2	13.6

		QUARTER 3 (OCTOBER - DECEMBER 2024)				
		BASELINE	EXPECTED	DELIVERED	VARIANCE	ACTUAL PERFORMANCE
					DELIVERED - EXPECTED EXCEPTIONS APPLY	DELIVERED / BASELINE EXCEPTIONS APPLY
COMMUNITY CARE						
DOMICILIARY CARE 2.5% REDUCTION OF MAR 24 BASELINE Q1 5% REDUCTION OF MAR 24 BASELINE Q2 7.5% REDUCTION OF MAR 24 BASELINE Q3 10% REDUCTION OF MAR 24 BASELINE Q4	UNMET NEED HOURS (FULL PACKAGES, ALL POCS)	2,992	2,768	2,646	-346	-11.6%
	UNMET NEED HOURS (PARTIAL PACKAGES, ALL POCS)	2,208	2,042	2,232	24	1.1%
	TOTAL	5,200	4,810	4,878	-322	-6.2%
DIRECT PAYMENTS	NO. OF CLIENTS IN EFFECT AT MONTH END 5% INCREASE OF MAR 24 BASELINE BY MAR 25	1,387	1,456	1,422	35	2.5%
CHILDRENS SOCIAL CARE						
CHILD PROTECTION CASE CONFERENCES	WITHIN 15 DAYS			59		
	TOTAL	N/A	84%	59	16%	100.0%
	% WITHIN 15 DAYS			100%		
	WITHIN 3 MONTHS			21		
	TOTAL	N/A	85%	26	-4%	80.8%
	% WITHIN 3 MONTHS			81%		
	WITHIN 6 MONTHS			139		
	TOTAL	N/A	89%	148	5%	93.9%
	% WITHIN 6 MONTHS			94%		
UNALLOCATED FAMILY SUPPORT CASES QUARTETLY MONITORING WITH EFFECT FROM Q2 10% REDUCTION BY MAR 24 (JUN 23 BASELINE)		71.0	63.9	22.0	-49.0	-69.0%
MENTAL HEALTH SERVICES						
ADULT MENTAL HEALTH (NON INPATIENT) 110% OF 19/20 BASELINE	NEW	1,540	1,694	1,169	-525	75.9%
	REVIEW	12,276	13,504	14,588	1,084	118.8%
	TOTAL	13,816	15,198	15,757	559	114.0%
PSYCHOLOGICAL THERAPIES 100% OF 19/20 BASELINE	NEW	410	410	549	139	133.9%
	REVIEW	2,587	2,587	4,651	2,064	179.8%
	TOTAL	2,997	2,997	5,200	2,203	173.5%
DEMENTIA 110% OF 19/20 BASELINE	NEW	153	168	244	76	159.5%
	REVIEW	1,088	1,197	1,824	627	167.6%
	TOTAL	1,241	1,365	2,068	703	166.6%
CAMHS 100% OF 19/20 BASELINE (NEW CONTACTS) 110% OF 19/20 BASELINE (REVIEW CONTACTS)	NEW	250	250	273	23	109.2%
	REVIEW	1,790	1,969	2,258	289	126.1%
	TOTAL	2,040	2,219	2,531	312	124.1%
MENTAL HEALTH SERVICES (OVERALL)		20,094	21,779	25,556	3,777	127.2%

HSC SERVICE DELIVERY PLANS
COMMUNITY SERVICES 2024/25

LINK TO
SPPG TARGETS

		QUARTER 3 (OCTOBER - DECEMBER 2024)				
		BASELINE	EXPECTED	DELIVERED	VARIANCE <small>DELIVERED - EXPECTED EXCEPTIONS APPLY</small>	ACTUAL PERFORMANCE <small>DELIVERED / BASELINE EXCEPTIONS APPLY</small>
ALLIED HEALTH PROFESSIONALS						
PHYSIOTHERAPY <small>100% OF 19/20 BASELINE</small>	NEW	4,555	4,555	4,388	-167	96.3%
	REVIEW	13,219	13,219	12,082	-1,137	91.4%
	TOTAL	17,774	17,774	16,470	-1,304	92.7%
OCCUPATIONAL THERAPY <small>100% OF 19/20 BASELINE</small>	NEW	2,337	2,337	1,971	-366	84.3%
	REVIEW	10,321	10,321	9,244	-1,077	89.6%
	TOTAL	12,658	12,658	11,215	-1,443	88.6%
DIETETICS <small>100% OF 22/23 BASELINE</small>	NEW	949	949	900	-49	94.8%
	REVIEW	3,217	3,217	2,926	-291	91.0%
	TOTAL	4,166	4,166	3,826	-340	91.8%
ORTHOPTICS <small>100% OF 19/20 BASELINE</small>	NEW	598	598	630	32	105.4%
	REVIEW	2,696	2,696	1,817	-879	67.4%
	TOTAL	3,294	3,294	2,447	-847	74.3%
SPEECH & LANGUAGE <small>100% OF 22/23 BASELINE</small>	NEW	589	589	572	-17	97.1%
	REVIEW	8,217	8,217	9,018	801	109.7%
	TOTAL	8,806	8,806	9,590	784	108.9%
PODIATRY <small>100% OF 19/20 BASELINE</small>	NEW	1,265	1,265	1,300	35	102.8%
	REVIEW	10,599	10,599	9,467	-1,132	89.3%
	TOTAL	11,864	11,864	10,767	-1,097	90.8%
ALLIED HEALTH PROFESSIONALS (OVERALL)	NEW	10,293	10,293	9,761	-532	94.8%
	REVIEW	48,269	48,269	44,554	-3,715	92.3%
	TOTAL	58,562	58,562	54,315	-4,247	92.7%
STROKE SERVICES						
THROMBOLYSIS RATE	ALTNAGELVIN	N/A	16%	14%	-2%	14%
	SOUTH WEST ACUTE	N/A	16%	13%	-3%	13%
% ADMITTED <4 HOURS	ALTNAGELVIN	N/A	43%	26%	-17%	26%
	SOUTH WEST ACUTE	N/A	90%	72%	-18%	72%
COMMUNITY DENTAL						
CONTACTS <small>100% OF 2019/20 BASELINE FOR Q1 & Q2 90% OF 2019/20 BASELINE FOR Q3 80% OF 2019/20 BASELINE FOR Q4</small>	NEW	855	770	620	-150	72.5%
	REVIEW	4,054	3,649	3,390	-259	83.6%
	TOTAL	4,909	4,418	4,010	-408	81.7%
GENERAL ANAESTHETIC CASES DELIVERED <small>CHILDRENS CASES (SUBSET OF HOSPITAL DAY CASES) 80% OF 2019/20 BASELINE FOR Q1, Q2 + Q4, 85% FOR Q3</small>	ALTNAGELVIN	132	112	81	-31	61.4%
	SOUTH WEST ACUTE	57	48	66	18	115.8%
	TOTAL	189	161	147	-14	77.8%

Public Health: Performance Summary April to December 2024

Service Area	2024/25 Target Trajectory	Quarter 1 (Apr-Jun 24 cumulative)	Quarter 2 (Jul-Sep 24 cumulative)	Quarter 3 (Apr-Dec 24 cumulative)
HCAI - clostridioides difficile (CDI)	Q1: 14.2 cases per 100,000 occupied beds Q2: 13.9 cases per 100,000 occupied beds Q3: 13.7 cases per 100,000 occupied beds	19.4	20.1	18.5
HCAI - Methicillin-resistant staphylococcus aureus (MRSA)	1.613 cases per 100,000 occupied beds (CDI)	1.495	0.746	1.500
Antimicrobial Consumption - total antibiotic prescribing	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in total antibiotic prescribing (DDD per 1000 admission). Q1: 9417.2, Q2: 9331.7, Q3: 9246.2	10,684.6	10,296.9	10,274.7
Antimicrobial Consumption - carbapenem use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in carbapenem use, measured in DDD per 1000 admissions Q1: 106.5, Q2: 106.0, Q3: 105.6	142.0	166.5	168.3
Antimicrobial Consumption - piperacillin-tazobactam use	by 31st March 2025, Trusts to secure (in secondary care) a 1% reduction in piperacillin-tazobactam use, measured in DDD per 1000 admissions Q1: 446.6, Q2: 444.0, Q3: 441.3	504.3	492.6	484.9
Antimicrobial Consumption - use of antibiotics from the WHO Access AWaRe category	by 31st March 2025, all Trusts to secure (in secondary care) a total of 55% usage of antibiotics from the WHO Access AWaRe category	53.22%	52.26%	52.17%

Northern Ireland Ambulance Service (NIAS): WHSCT Performance Summary April to December 2024

Service Area	2024/25 Target Trajectory	Quarter 1	Quarter 2	Oct-24	Nov-24	Dec-24	Quarter 3
NIAS Handover < 15 mins	Q1: 12%, Q2: 15%, Q3: 20% & Q4: 25%	6.4%	5.7%	6.4%	6.5%	4.6%	5.8%
NIAS Handover < 30 mins	Q1: 32%, Q2: 36%, Q3: 40% & Q4: 45%	28.8%	25.7%	27.1%	26.5%	24.9%	26.1%
NIAS Handover < 60 mins	Q1: 64%, Q2: 70%, Q3: 76% & Q4: 85%	72.3%	69.6%	70.0%	69.6%	61.7%	67.1%
NIAS Handover > 2 hours	0%	5.7%	6.5%	6.4%	7.6%	10.4%	8.2%
Ambulance Turnaround within 30 mins	Q1: 20%, Q2: 30%, Q3: 40% & Q4: 51%	12.9%	10.9%	12.6%	13.3%	12.3%	12.7%

Overall RAG assessment: April to December 2024

		Quarter 1		Quarter 2		Quarter 3	
<div>Total Metrics</div> <div>Hospital & Community: 53</div> <div>HCAI: 6</div> <div>NIAS: 5</div>	Total Number of SDP Metrics	64		64		64	
	Overall RAG Assessment	29	45%	27	42%	31	48%
		10	16%	12	19%	8	13%
		21	33%	21	33%	21	33%
	No. of Metrics where performance is not available	4	6%	4	6%	4	6%

Section 3: RAG Status Summary: 2023/24 Year End and 2024/25 Quarter 1 to 3

		ACTUAL % PERFORMANCE			
		YEAR END 2023/24	QUARTER 1 APR - JUN 2024	QUARTER 2 JUL - SEP 2024	QUARTER 3 OCT - DEC 2024
CANCER					
PERFORMANCE	14 DAYS				
	31 DAYS				
	62 DAYS				
RED FLAG - FIRST OUTPATIENT APPOINTMENT (EXCLUDING BREAST)					
110% OF 2019/20 BASELINE					
IMAGING					
MRI	TARGET SBA VOLUMES				
CT	TARGET SBA VOLUMES				
NOUS	TARGET SBA VOLUMES				
CARDIOLOGY / CARDIAC					
CARDIAC MRI	TARGET SBA VOLUMES				
CARDIAC CT	110% OF 2019/20 BASELINE				
ECHO	TARGET SBA VOLUMES				
CATH LAB	110% OF 2019/20 BASELINE				
ELECTIVE					
NEW OUTPATIENTS 105% OF 2019/20 BASELINE	FACE TO FACE				
	VIRTUAL				
	OTHER				
	TOTAL				
REVIEW OUTPATIENTS 100% OF 2019/20 BASELINE	FACE TO FACE				
	VIRTUAL				
	OTHER				
	TOTAL				
OUTPATIENTS (OVERALL)					
INPATIENT 100% OF 2019/20 BASELINE	CORE				
	OTHER				
	TOTAL				
DAY CASES 100% OF 2019/20 BASELINE	CORE				
	OTHER				
	TOTAL				
INPATIENT AND DAYCASE (OVERALL)					
ENDOSCOPY	2019/20 BASELINE + 3000 SCOPES PER YEAR (Additional 250 per month)				
THEATRE UTILISATION					
SCHEDULED THEATRE MINUTES	SESSION DURATION (MINS)				
THEATRE OPERATING TIMES	MAIN THEATRES				
	DPU THEATRES				
UNSCHEDULED CARE					
ED PERFORMANCES - 12 HOURS	10% REDUCTION OF 2022/23 BASELINE				
WEEKEND DISCHARGES					
ALTNAGELVIN	SIMPLE				
	COMPLEX				
SOUTH WEST ACUTE	SIMPLE				
	COMPLEX				
AVERAGE LOS					
ALTNAGELVIN	1 DAY REDUCTION OF Q4 2022/23 BASELINE				
SOUTH WEST ACUTE	1 DAY REDUCTION OF Q4 2022/23 BASELINE				

HSC SERVICE DELIVERY PLANS
COMMUNITY SERVICES 2024/25

LINK TO
SPPG TARGETS

Western Health and Social Care Trust			ACTUAL % PERFORMANCE			
HSC SERVICE DELIVERY PLANS COMMUNITY SERVICES 2024/25			LINK TO SPPG TARGETS			
			YEAR END 2023/24	QUARTER 1 APR - JUN 2024	QUARTER 2 JUL - SEP 2024	QUARTER 3 OCT - DEC 2024
COMMUNITY CARE						
DOMICILIARY CARE 2.5% REDUCTION OF BASELINE Q1 5% REDUCTION OF BASELINE Q2 7.5% REDUCTION OF BASELINE Q3 10% REDUCTION OF BASELINE Q4	UNMET NEED HOURS (FULL PACKAGES, ALL POCS)					
	UNMET NEED HOURS (PARTIAL PACKAGES, ALL POCS)					
	TOTAL					
DIRECT PAYMENTS	NO. OF CLIENTS IN EFFECT AT MONTH END 10% INCREASE BY MARCH 2024 (MARCH 2023 BASELINE)					
CHILDRENS SOCIAL CARE						
CHILD PROTECTION CASE CONFERENCES	WITHIN 15 DAYS					
	TOTAL					
	% WITHIN 15 DAYS					
	WITHIN 3 MONTHS					
	TOTAL					
	% WITHIN 3 MONTHS					
	WITHIN 6 MONTHS					
	TOTAL					
	% WITHIN 6 MONTHS					
UNALLOCATED FAMILY SUPPORT CASES QUARTETLY MONITORING WITH EFFECT FROM Q2 10% REDUCTION BY MARCH 2024 (JUNE 2023 BASELINE)						
MENTAL HEALTH SERVICES						
ADULT MENTAL HEALTH (NON INPATIENT) 110% OF 2019/20 BASELINE	NEW					
	REVIEW					
	TOTAL					
PSYCHOLOGICAL THERAPIES 100% OF 2019/20 BASELINE	NEW					
	REVIEW					
	TOTAL					
DEMENTIA 110% OF 2019/20 BASELINE	NEW					
	REVIEW					
	TOTAL					
CAMHS 100% OF 2019/20 BASELINE (NEW CONTACTS) 110% OF 2019/20 BASELINE (REVIEW CONTACTS)	NEW					
	REVIEW					
	TOTAL					
MENTAL HEALTH SERVICES (OVERALL)						

		ACTUAL % PERFORMANCE			
		YEAR END 2023/24	QUARTER 1 APR - JUN 2024	QUARTER 2 JUL - SEP 2024	QUARTER 3 OCT - DEC 2024
ALLIED HEALTH PROFESSIONALS					
PHYSIOTHERAPY 100% OF 2019/20 BASELINE	NEW				
	REVIEW				
	TOTAL				
OCCUPATIONAL THERAPY 100% OF 2019/20 BASELINE	NEW				
	REVIEW				
	TOTAL				
DIETETICS 100% OF 2022/23 BASELINE	NEW				
	REVIEW				
	TOTAL				
ORTHOPTICS 100% OF 2019/20 BASELINE	NEW				
	REVIEW				
	TOTAL				
SPEECH & LANGUAGE 100% OF 2022/23 BASELINE	NEW				
	REVIEW				
	TOTAL				
PODIATRY 100% OF 2019/20 BASELINE	NEW				
	REVIEW				
	TOTAL				
ALLIED HEALTH PROFESSIONALS (OVERALL)	NEW				
	REVIEW				
	TOTAL				
STROKE SERVICES					
THROMBOLYSIS RATE IN LINE WITH WHSCT RETURN	ALTNAGELVIN				
	SOUTH WEST ACUTE				
% ADMITTED <4 HOURS FIGURES PROVIDED BY SPPG	ALTNAGELVIN				
	SOUTH WEST ACUTE				
COMMUNITY DENTAL					
CONTACTS 100% OF 2019/20 BASELINE FOR Q1 & Q2 105% OF 2019/20 BASELINE FOR Q3 110% OF 2019/20 BASELINE FOR Q4	NEW				
	REVIEW				
	TOTAL				
GENERAL ANAESTHETIC CASES DELIVERED CHILDRENS CASES (SUBSET OF HOSPITAL DAY CASES) 80% OF 2019/20 BASELINE	ALTNAGELVIN				
	SOUTH WEST ACUTE				
	TOTAL				