Northern Health and Social Care Trust

Trust Board Briefing Paper	
Reference Number:	TB157/8/C
Date of Meeting:	23rd May 2024
Presenting Director:	Neil Martin, Director of Strategic Planning, Performance and ICT
Subject:	Performance Report as at year end 2023/24 – summary position
Purpose: Approval/Noting	For Discussion

Elective and Cancer Performance

Outpatients (Pages 8-10)

- Outpatient referrals have increased by 10% when compared to 2022/23.
- The Trust delivered 97.5% of expected activity.
- The total OP waiting list grew by 9,574 between March 2023 and March 2024. Approximately 3,600 of this was due to patients being transferred from SEHSCT and BHSCT waiting lists because of changes in booking practice associated with the implementation of encompass.

IPDC (Pages 11-12)

- The Trust delivered 94.5% of expected activity.
- Total waits reduced by 11% across the year, with the number of patients waiting >52 weeks falling from 3,386 to 2,734.

Diagnostics (Pages 13-14)

- The diagnostic waiting position has deteriorated significantly across 2023/24, with the number of 26-week breaches increasing from 3,280 to 11,644.
- There is a material and recognised capacity gap for medical imaging, most particularly in CT.

Endoscopy (Pages 15-16)

- The Trust delivered 95.7% of expected activity.
- Total patients waiting increased from 3,328 to 3,744.

AHPs (Page 17)

- The Trust delivered 102% of expected activity.
- Total patients waiting increased from 20,076 to 23,751.

Cancer (Pages 18-20)

- There was a 7% year-on-year increase in red flag (suspect cancer) referrals into the Trust.
- Breast 14-day performance showed an improvement early in the year due to a regional redirection of referrals in recognition of the significant capacity-demand gap in the Northern Trust. This support was withdrawn in summer 2023 and the Trust's 14-day position deteriorated as a result.
- 31-day performance has averaged 92% across the year, while 62-day performance has averaged 36%.

Unscheduled performance

Demand (Pages 21-23)

- ED attendances increased on both acute sites by 6%, with a 10-12% increase in the number of over-75 attendances.

Ambulance handover (Pages 24-25)

- Pressures on the unscheduled care system continued to impact on ambulance handover times.
- NIAS data shows that the number of hours lost to ambulance delays at NHSCT hospitals reduced significantly in 2023/24 compared to the previous year.

Mental health and learning disability

Mental health services (Pages 36-37)

- The number of patients waiting more than 9 weeks for a first appointment in adult mental health services reduced across the year, from 79 to 9.
- The number of patients waiting more than 9 weeks for a first appointment in dementia services increased, from 132 to 171.

Service Delivery Plans

The table below shows the year end position for the Service Delivery Plans monitored by SPPG.

Service Area	2023/24 Target Trajectory	End of Year Position 2023/24
UNSCHEDULED CARE		
ED Performance (12 hours)	reduce the number of patients who waited longer than 12 hours in ED in 2022/23 by 10%	13.5%
NIAS Handover <15 mins	**Apr**-2%; **May**-4%; **Jun/Jul**-8%; **Aug**-12%; **Sep**-15%; **Oct**-17%; **Nov**-19%; **Dec**-22%; **Jan**-25%; **Feb**-25%; **Mar**-25%	6.5%
NIAS Handover <30 mins	**Apr/May**-14%; **Jun**-20%; **Jul**-25%; **Aug**-30%; **Sep/Oct**-35%; **Nov/Dec**-40%; **Jan**-45%; **Feb**-55%; **Mar**-60%	30.6%
NIAS Handover <60 mins	**Apr**-59%; **May/Jun**-65%; **Jul/Aug/Sep**-70%; **Oct/Nov**75%; **Dec**-80%; **Jan**-85%; **Feb**-90%; **Mar**-95%	68.1%
NIAS Handover >2 hours	0%	11.5%
Ambulance Turnaround within 30 mins	**Q1**: 30%; **Q2** 37%; **Q3**:44%; **Q4**:51%	10.3%
LOS (Antrim)	**Q1**: 7.35 days; **Q2**: 7.10 days; **Q3**: 6.85 days; **Q4**: 6.60 days	7.50
LOS (Causeway)	**Q1**: 7.55 days; **Q2**: 7.30 days; **Q3**: 7.05 days; **Q4**: 6.80 days	8.30
Weekend Discharge (simple) Antrim	80% of Mon-Fri discharges	52.7%
Weekend Discharge (simple) Causeway		47.2%
Weekend Discharge (complex) Antrim	60% of Mon-Fri discharges	57.5%
Weekend Discharge (complex) Causeway		39.3%
ELECTIVE CARE		
OP (new)	105%	102.4%
OP (review)	100%	106.0%
IP	100%	124.1%
DC	100%	86.0%
Theatre OP times (DPU)	Deliver an OP time of 80%	77.0%
Theatre OP times (main theatres)	Deliver an OP time of 85%	96.0%
Theatre scheduled minutes	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	96.1%
Endoscopy	100% of corresponding month in 2019/20	95.8%
MRI	Deliver activity in line with agreed SBA volumes	77.0%
CT		152.2%
NOUS		88.3%
Cardiac MRI	Deliver activity in line with agreed SBA volumes	84.8%
Echo (TTE only)		101.8%
Cardiac CT	110% of 2019/20	127.1%
AHP - Physiotherapy	100% of 2019/20	84.6%
AHP - Dietetics	100% of 2022/23	96.1%
AHP - Speech & Language Therapy	100% of 2022/23	102.2%
AHP - Podiatry	100% of 2022/23	95.9%
AHP - Occupational Therapy	100% of 2022/23	115.5%
AHP - Orthoptics	100% of 2019/20	96.2%
Cancer - 14-day performance	100% <14 days	31%
Cancer - 31-day performance	98% <31 days	92%
Cancer - 62-day performance	95% <62 days	36%
Red Flag - 1st OP appointment	110% (of 2019/20)	105%
Stroke - Thrombolysis (Antrim)	16%	14%
Stroke - Thrombolysis (Causeway)	16%	12%
Direct to Stroke Unit (Antrim)	55%	31%
Direct to Stroke Unit (Causeway)	55%	38%

COMMUNITY CARE		
Direct Payments	10% increase in the number of service user Direct Payments in effect by March 2024	2.6%
Domiciliary Care Unmet Need Hours	10% reduction in unmet need hours by March 2024 (full and partial packages across all POCs) **(2.5% reduction per quarter): Q1**-2.5%; **Q2**-5%; **Q3-**7.5%; **Q4:**10%	-18.8%
Child Protection <15 days	84%	83.6%
Child Protection <3 months	85%	92.5%
Child Protection <6 months	89%	92.9%
Unallocated cases	10% reduction in the no.of unallocated family support cases by March 2024	9.4%
Adult Mental Health (non inpatient) (new and review)	110%	139.5%
Psychological Therapies (new and review)	100%	120.1%
Dementia (new and review)	110%	200.6%
CAMHS New Contacts	100%	112.1%
CAMHS Review Contacts	110%	129.2%
Community Nursing	100%	87.1%
Compliance with the SSKin bundle for pressure ulcers	**Q1/Q**2 - 95%; **Q3/Q4** - 100%	onth Lag in repor
Compliance with all elements of MUST	**Q1/Q2:** 75%; **Q3:** 85%; **Q4:** 95%	
Compliance with all elements of the Palliative Care Quality Indicator	**Q1/Q2:** 60%; **Q3:** 75%; **Q4:** 80%	
Community Dental (new and review)	90%	82.0%
CDS GA	**Q2:** 90%; **Q3:** 100%; **Q4:** 110%	113.6%
PUBLIC HEALTH		
Please note: all PHA metrics below are presented as a cumulative position at the end of each quarter		**End of Year Position 2023/24**
HCAI - *Methicillin-resistant staphylococcus aureus (MRSA)*	A max of **5** episodes in the year 2023/24	13
HCAI - *Clostridioides difficile (CDI)*	A max of **37** in the year 2023/24	45
Antimicrobial Consumption - *total antibiotic prescribing*	by 31 March 2024, Trusts to secure (in secondary care) a **2%** reduction in total antibiotic prescribing (DDD per 1,000 admissions)	**3.3%**
Antimicrobial Consumption - *carbapenem use*	by 31 March 2024, Trusts to secure (in secondary care) a **3%** reduction in carbapenem use, measured in DDD per 1000 admissions	8.4%
Antimicrobial Consumption - *piperacillin-tazobactam use*	by 31 March 2024, Trusts to secure (in secondary care) a **3%** reduction in piperacillin-tazobactam use, measured in DDD per 1000 admissions	-3.5%
Antimicrobial Consumption - use of antibiotics from the WHO Access Aware category	Increase AwaRe Access to **55%**	54.07%