

**LANARKSHIRE NHS BOARD  
INTEGRATED CORPORATE PERFORMANCE REPORT – PUBLISHED DATA AT Q3, 2018/19**

**SUBJECT: EXCEPTIONS REPORT:  
Extract of Red and Amber KPIs taken from ICPR dashboard on 31<sup>st</sup> January 2019**

KPI	R/A	Performance	Date of data	Target	Lead	Explanation	Governance Committee
<b>Person Centred:</b>							
12w Outpatients	R	77.42%	Sept 18	95%	H Knox	Separate detailed reports on Waiting Times are submitted to PP&RC / Board in respect of these topics.	Acute OMC and DMT
18 RTT CAMHS	R	63.6%	Sept 18	90%	R McGuffie	The service continues to experience challenging levels of referrals.  Management plans are being implemented to bring performance levels back to target by February 2019. Remedial actions include proactive vacancy management, recruiting additional CAAP trainees, continued delivery of waiting time clinics, introduction of Psychology of Positive Parenting Programme (PoPP) and review of the neurodevelopmental pathway.	North IJB

						<p>New investment from Scottish Government will provide additional staffing and recruitment will commence in the next two months.</p> <p>CAMHS RTT performance increased to 82% in December.</p> <p>Accommodation and IT enablement reviews are underway.</p> <p>(GC for RMcG)</p>	
TTG	R	64.77%	Sept 18	100%	H Knox	Separate detailed reports on Waiting Times are submitted to PPRC / Board in respect of these topics.	Acute DMT and OMC
A&E 4 hours	R	89.2%	Nov 18	95%			
A&E number of attendances	R	17,018	Nov 18	16,755			
Advance Booking P Care	R	59%	Mar 18	90%	V de Souza	<p>The biennial survey for 2017/18 was published in May 2018. While previous performance was 69.3%, demand for services has been steadily increasing at the same time as GP numbers have been falling. In seeking to manage demand, more practices have introduced same day triage requiring patients to phone up on the day they want an appointment. While this approach offers same day appointments for patients, there is limited scope for advance booking. This has</p>	South IJB

						also most likely contributed in the improvement in the 48 hour access standard which has moved from 'amber' into 'green'. (CC for VdeS)	
Paediatric S&LT	R	84.2%	Dec 18	90%	R McGuffie	<p>Demand for Children &amp; Young People SLT services continues to increase and recruitment challenges and maternity leave have also impacted service capacity. The following actions are being undertaken to bring the service back in line with trajectory:</p> <ul style="list-style-type: none"> <li>• Staff bank sessions have been utilised and additional hours offered to staff to support the shortfall;</li> <li>• Families are being offered the first available local appointment as well as earlier appointments in neighbouring Localities and staff have been rotating to support the Localities affected;</li> <li>• Newly recruited staff commenced across the service during November 2018. commenced across the service during November 2018.</li> </ul> <p>(GC for RMcG)</p>	North IJB

MSK Physio		R	75.3%	Dec 18	90%	V de Souza	Work is continuing in relation to the 'Deep Dive' on Physiotherapy MSK services to review service processes and pathways, ensuring the most efficient use of a limited resource. Over the peak winter period, priority has been given to ensuring 'flow' through the hospital services. Work is also proceeding to identify any short term funding which may be utilised to do extra clinics. (CC for VdeS)	South IJB
Detect Early	Cancer	R	24.9%	Dec 17	29%	G Docherty / H Knox	<p>We did not meet the target of 29.9% by the due date of December 2015 (25.5% achieved at that point, 24.9% at December 2017).</p> <p>While the target has made a very positive contribution in driving down the proportion of non-staged cancers locally and nationally, the target as it is currently worded is unhelpful due to the problems with identifying progress. Our local focus around DCE and increasing stage 1 disease is on increasing (informed) participation in all cancer screening programmes, although cervical cancers are not include in the national DCE</p>	Cancer Management Team and the DCE Steering Group within Acute Division.

						target. (GD)	
18 RTT Psychology	A	81.4%	Sept 18	85%	R McGuffie	<p>Within Psychological Services, all specialist departments continue to meet the 90% target for the RTT standard. Challenges remain within the Psychological Therapies Teams, in relation to vacancy management and high rates of maternity leave, although the majority of the locality PTTs are now meeting the target. The EK, and Motherwell PTTs have the longest waits, but have both seen significant reductions in numbers waiting since October 2018. Key actions taken in Q3 of 2018 have seen a return to target for Psychological Services (90.1% in December 2018). There will be ongoing challenges in continuing to deliver against the standard in 2019 and, in particular, there are growing concerns over lack of appropriate clinical space to see patients in some localities. A review is being undertaken of the PTT Service Development Plan in February, with a view to identifying approaches to maximising the benefits of the matched-care model used across all localities.</p>	North IJB

						(GC for RMcG)	
18 RTT Acute	A	86.5%	Sept 18	90%	H Knox	Separate detailed reports on Waiting Times are submitted to PP&RC / Board in respect of these topics.	Acute OMC and DMT
A&E 12 hour compliance	A	99.7%	Nov 18	100%			
A&E 8 hour compliance	A	98.6%	Nov 18	100%			
<b>Safe:</b>							
SABs rate	R	0.32	Sept 18	0.24	I Barkby	<p>The confirmed NHSL rate by Health Protection Scotland between April to September 2018 was 0.32.</p> <p>Despite NHSL sitting above the 0.24 AOP target at mid-point of the activity year, there has been a 13% reduction in the overall number of SAB cases between 17/18 and 18/19 time periods (April-September=0.32).</p> <p>Performance against this target is reported and managed bi-monthly at the following Governance Groups:</p> <ul style="list-style-type: none"> <li>• NHSL Infection Control Committee;</li> <li>• HQAIC;</li> <li>• NHSL Board via HAIRT Report.</li> </ul>	NHSL ICC HQAIC NHS Board

						The IP&C Monthly Performance Report (to Board, to each Acute hospital site team, and to H&SCPs) details performance in relation to LDP HAI Standards and Alert Organisms. It provides early warning of areas that may merit attention, allowing prompt action to be taken. (BG for IB)	
Staff flu - High Risk	R	53.5% (as of w/c 4 Feb 19)  (was 52.5% 2017/18)	Feb 19	60%	G Docherty	Well-publicised programme of clinics both planned and reactive, to allow maximum flexibility for staff to attend. Agreed key role for management to encourage staff to attend and facilitate time to do this. Frequent feedback on uptake is provided to staff, CMT, managers and units to allow further targeted encouragement. (The figures detailed from week commencing 4 <sup>th</sup> February 2019 comprise the eighth report of the 2018/19 season).  Ultimately it is a matter of personal choice for each staff member, and NHS Lanarkshire's performance has historically been broadly in line with national averages.  Some momentum in uptake	Immunisation Group, Winter Planning Group, CMT, and HQAIC.
Staff flu - Nursing	R	45.3% (as of w/c 4 Feb 19)  (was 44.0% 2017/18)	Feb 19	50%	G Docherty		
Staff flu - Overall	R	46.6% (as of w/c 4 Feb 19)  (was 45.1% 2017/18)	Feb 19	51%	G Docherty		

						<p>lost during early November was due to national vaccine supply issues.</p> <p>Local targets were refreshed in 2018/19 to set realistic, but achievable, goals for each of the 6 staff groups. Figures shown (as of early Feb 19) are slightly ahead of last year, but are likely to be close to end of season figures – as typically rates do not increase after January, unless there is a spike in flu illness.</p> <p>RAG tolerances are being updated each year based on previous year's out-turn and the 2018/19 campaign has been promoted vigorously. March 2019 out-turn figures will inform 2019/20 local targets. (DC for GD)</p>	
<b>Effective:</b>							
Workforce- vacancies	R	9.4%	Sept 18	6%	J White	All HR indicators are reported to and discussed at the HR Forum and the Staff Governance Committee.	Staff Governance HR Forum
Stroke – Bundle	R	66.7%	Nov 18	80%	J Burns	Swallow screen remains challenging across the three sites and work with A&E	HQAIC



						departments continues in order to reduce variation in month to month performance.		
Workforce Mat/Pat leave	-	A	2.0%	Sept 18	1%	J White	All HR indicators are reported to and discussed at the HR Forum and the Staff Governance Committee.	Staff Governance HR Forum
Antibiotic prescribing rate		A	1.94	Jun 18	1.63	J Burns	NHS Lanarkshire failed to achieve the level three national antibiotic indicator for primary care in 2018. The indicator is based on volume reduction of antibiotic items prescribed (volume of antibiotic items/1000pts/day) against a nationally agreed set baseline (currently 1.63) and is assessed annually using PRISMS data from Quarter 4 (January-March) period.  However, the latest data for Q1 (April - June) 2018 is the lowest Q1 rate for 5 years adding to the sustained reduction in volume NHSL has achieved over the last 5 years.  AMT antibiotic initiatives with local prescribers and other key stakeholders to drive further improvement continue. (SMCC for JB)	AMC and LICC  Part of NHS Board HAIRT Report.
Prescribing costs		A	17,608	Oct 18	16,741	J Burns	Under the oversight of the Prescribing Quality and Efficiency Programme Board	Prescribing Quality & Efficiency Programme Board,

						<p>(PQEPB) a range of actions is being taken forward to reduce cost per patient prescribing (CPP) in primary care. These actions are linked to a similar programme in secondary care. Taken together, the efficiencies that have been identified to date have resulted in a downward trajectory in CPP in primary care, with a levelling out more recently. However, the gap between NHS Lanarkshire and Scotland continues to narrow.</p> <p>As efficiency within GP practices has been less than anticipated, additional practice based pharmacy support has been recruited.</p>	PP&RC
Workforce - total vacancies / absence	A	7.5%	Sept 18	6%	J White	<p>All HR indicators are reported to and discussed at the HR Forum and the Staff Governance Committee. Improvement work on attendance management continues.</p>	Staff Governance HR Forum
Workforce - Sickness	A	5.9%	Sept 18	4%			