



Performance Report to the Board

January 2019

Introduction

This report summarises

- current performance against the Board's Annual Operational Plan trajectories and progress against the actions in the annual operational plan letter from Scottish Government; and
- relevant information published by the NHS National Services Division regarding aspects of the Board's performance.

The overall approach adopted is that performance management is integral to the delivery of quality and effective management, governance and accountability. The need for transparent and explicit links of performance management and reporting within the organisational structure at all levels is important.

The indicators noted below are a high level set of performance standards which are supported by a comprehensive framework of measures at directorate and service level. These are reported to and monitored by the relevant senior officers and their clinical and senior professional support staff.

Responsive

Unscheduled Care

Annual Operational Plan	Performance
95% of patients should wait no more than 4 hours from arrival to admission, discharge or transfer for accident and emergency treatment.	The percentage spending 4 hours or less in an A&E department was 93.1% - down from 94.5% for the year ending November 2018. However this was still well above the Scotland wide rate of 89.5% ¹ .

In common with elsewhere in Scotland, delivery of the 4 hour standard has been challenging. However, performance within NHS Grampian remains above the Scottish average in terms of performance against the national standard.

The weekly published performance during December and January has been:

	8 Dec	15 Dec	22 Dec	29 Dec	5 Jan
Grampian	89.6%	87.4%	85.2%	88.1%	87.8%
Patients waiting over 8 hrs	20	22	23	17	19
Scotland	82.6%	78.9%	79.9%	85.0%	81.8%

In terms of our performance in relation to delayed discharges, there has been a concerted effort in Grampian to reduce the number of people delayed in hospital awaiting discharge and the length of time they are delayed. Whilst there are fluctuations from month to month an overall downward trend has been delivered since the inception of the Integration Joint Boards.

Delayed Discharges at November 2019

- There were 105 patients delayed – down 10.3% from 117 in October. A smaller decrease of 2.6% was recorded across Scotland.
- The number of delayed discharges in each IJB was as follows: Aberdeen City: 38 (up 2.7% from 37 in October), Aberdeenshire: 33 (down 23.3% from 43 in October), Moray: 30 (down 11.8% from 34 in October).
- 15 (14.3%) of these delays were for patients with specific complex care needs. This compared to 18.0% across Scotland. Of the remaining 90 patients delayed at the census, 89 were due to health and social care reasons and one was due to patient and family related reasons.

¹ The total number of attendances was 141,836 which represented a 1.8% increase from the same period one year previously (139,331). A greater increase of 3.9% was recorded across Scotland.

Bed Days in November 2019

- Patients spent 3,559 days in hospital due to delays in discharge in Grampian. This represented a 2.6% increase from October (3470). By contrast a decrease of 2.9% was recorded across Scotland.
- The number of bed days due to delayed discharges in each IJB was as follows: Aberdeen City: 1053 (7.8% decrease from 1142 in October), Aberdeenshire: 1373 (8.5% increase from 1265 in October), Moray: 1040 (7.3% increase from 969 in October)

Comparison with prior months (bed days)

	June	July	August	September	October	November
Aberdeen	1,066	1,115	1039	1170	1142	1053
Aberdeenshire	1,078	1,523	1350	1507	1265	1373
Moray	768	698	680	751	969	1040

Annual Operational Plan - actions for 2019/20

Health and Social Care Partnerships have developed performance plans for the following indicators:

- Unplanned admissions
- Unplanned bed days
- A&E attendances
- Delayed discharge bed days
- Last 6 months of life at home
- Balance of care

These plans set out how the partnerships, with their wider communities and the Board will deliver optimum performance within resources available. Each partnership has developed Strategic Commissioning Plans. The Aberdeen City Health & Social Care Partnership (ACHSCP) has published a new strategic plan for the years 2019-2022, with the Aberdeenshire (2020-2025) and Moray (2019-2022) Strategic Commissioning Plans under review at present.

These provide more detailed information as well as the demographic and workforce challenges which are faced and which could detrimentally impact on delivery of planned targets for the future. The Heath Board with its partners will continue to implement appropriate surge plans in line with the Scottish Government six essential actions focusing on areas such as:

- Cross system safety huddles (daily)
- Co-ordinated and supported patient flow co-ordination (including weekend activity)
- Reducing delays in transfer of patients to home or a community setting
- Supporting the public to access services where care and advice can be sought through planned pathways rather than using emergency or unscheduled capacity.

The Board approved the winter plan in November 2019.

Mental Health and Learning Disability Services

In terms of national standards for mental health and learning disabilities, the key targets relate to access to Child and Adolescent Mental Health Services and Psychological Therapy services.

Current performance

In terms of the commitments made in the Annual Operational Plan we have implemented the following:

- Relocation of the CAHMS services for Aberdeen and Aberdeen City into a single purpose designed centre of excellence.
- Review of the application of the updated advice on new waiting times standards for CAHMS and psychological therapies. A local Project Board was established to oversee this work.
- Agreement by the three Integration Joint Boards to enhance available resources within primary care using the Action 15 funding allocated by Scottish Government to enable implementation of key priorities within the NHS Scotland Mental Health Strategy.

In terms of performance we have noted below the current position:

a. CAHMS

Whilst the published information is not available for the current period yet, based on management information, the current level of compliance against the national standard is now at 85% compliance. City and Shire at over 90% compliance (which is the national standard) and we are working with Moray to support the team to reduce the average patient wait. Performance will continue at this level based on the investment confirmed by NHS Grampian Board, additional Scottish Government funding and continued support of the Local Authorities at Tiers 1 and 2.

b. Psychological Therapies

The ISD publication on psychology workforce and waiting times for the quarter ended September 2019 noted the following:

- There were 123 clinical staff (100.1 WTE) employed in Psychology Services including 85 (67.5 WTE) Applied Psychologists in post at 30th September 2019.
- 1246 people started treatment for Psychological Therapies in Grampian during the quarter ending September 2019 – 17.9% more than during the previous quarter (1057). An increase of 0.1% was recorded across Scotland.
- The proportion of patients waiting less than 18 weeks was 75.2% – up from the previous quarter's figure of 72.9%. There was also an increase across Scotland from 78.7% to 79.2%.

The newly appointed Director of Psychology, together with the Chief Officers, has been reviewing the data and reporting of performance for psychological services and a number of actions are being taken forward to address areas where improvements are required.

Elective Care

Treatment Time Guarantee and Outpatients

The performance in terms of the number of patients waiting longer than 12 and 26 weeks for a first outpatient appointments or treatment (inpatients/daycases) is shown below.

	6 Jan 2019	12 Jan 2020	Reduction since Jan 2019	Trajectory (Mar 2020)
Outpatients				
Over 12 weeks	15,830	8,834	(6,996) or 44%	7,050
Over 26 weeks	5,236	2,593	(2,643) or 51%	
Treatment				
Over 12 weeks	5,654	4,377	(1,277) or 23%	4,000
Over 26 weeks	3,194	2,032	(1,162) or 36%	

The number of patients waiting for both a first outpatient appointment and treatment has improved since January 2019 due to available additional capacity both internally and externally. Additional capacity will be maintained during the remainder of the financial year, including additional resources in Aberdeen, Elgin and at the Regional Treatment Centre, Stracathro.

Actions for 2019/20

The waiting time position is monitored weekly by members of the Board's system leadership. Specialty teams review their performance, particularly when unexpected increases occur. This includes close scrutiny of elective classification status. There has been extensive modelling of demand and capacity at specialty level and a range of improvement options and their cost have been identified. Target operating plans are implemented at specialty level to ensure maximum efficiency is delivered.

The Board's Annual Operational Plan for 2019/20 confirms the funding from Scottish Government to support the retention of the additional capacity sourced in 2018/19 whilst we progress plans for the new diagnostic and treatment centre and sourcing additional permanent workforce to reduce our current dependency on temporary staffing and use of the independent sector. We have also taken action to significantly reduce the number of patients who have waited more than 78 weeks for treatment.

Longer term sustainability is dependent on new models of care being taken forward through the Board's Elective Care programme and the wider population focus on prevention and self-management consistent with the Board's clinical strategy.

Cancer

The statistics for cancer for the quarter to 30 September will be published on 17 December. The latest published results are as at 30 June 2019.

Measure	Performance
31 days from decision to treat (95%)	Quarter ending Sep 2019 – compliance rate with standard
62 days from urgent referral with suspicion of cancer (95%)	

Additional information – 62 day standard (as at Sept 2019)

- Across the north cancer alliance the compliance rate was 83.4% and across the whole of Scotland, 83.3%.
- Breast with 95.0%, Head & Neck with 100% and Upper GI with 98.3%, all met the 95% target. Melanoma recorded the lowest compliance rate of 37.5%.

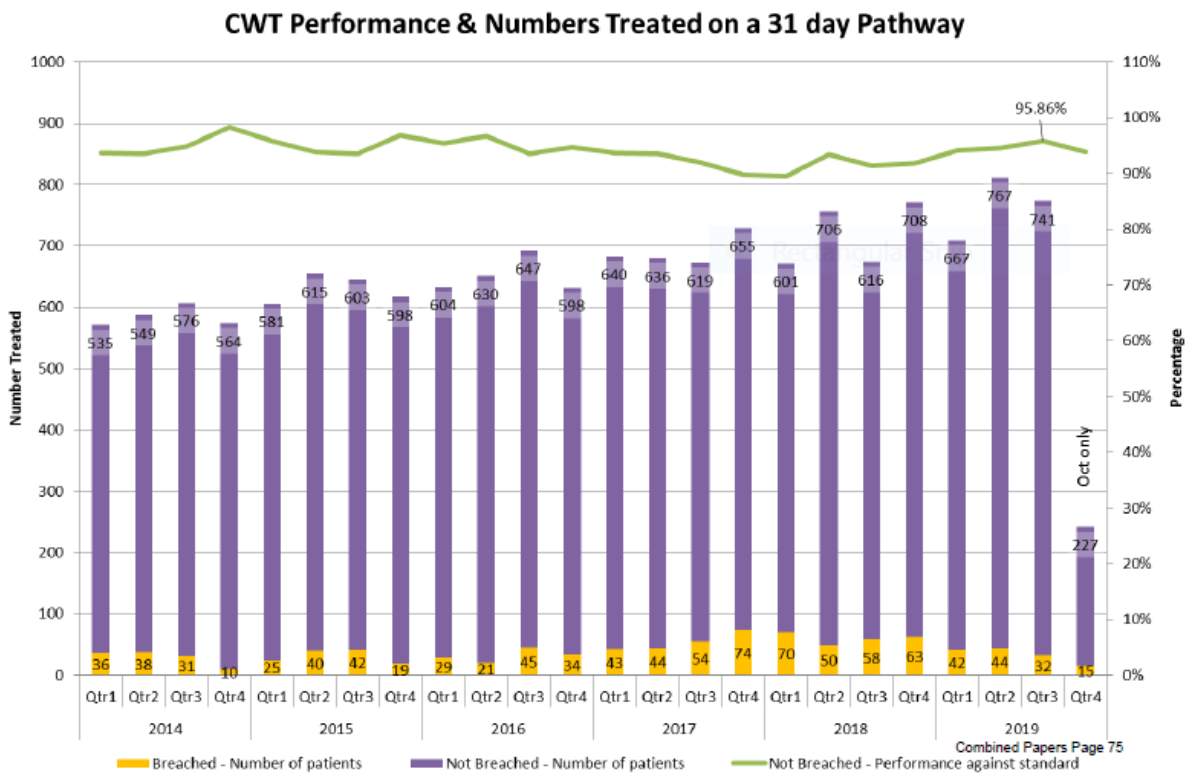
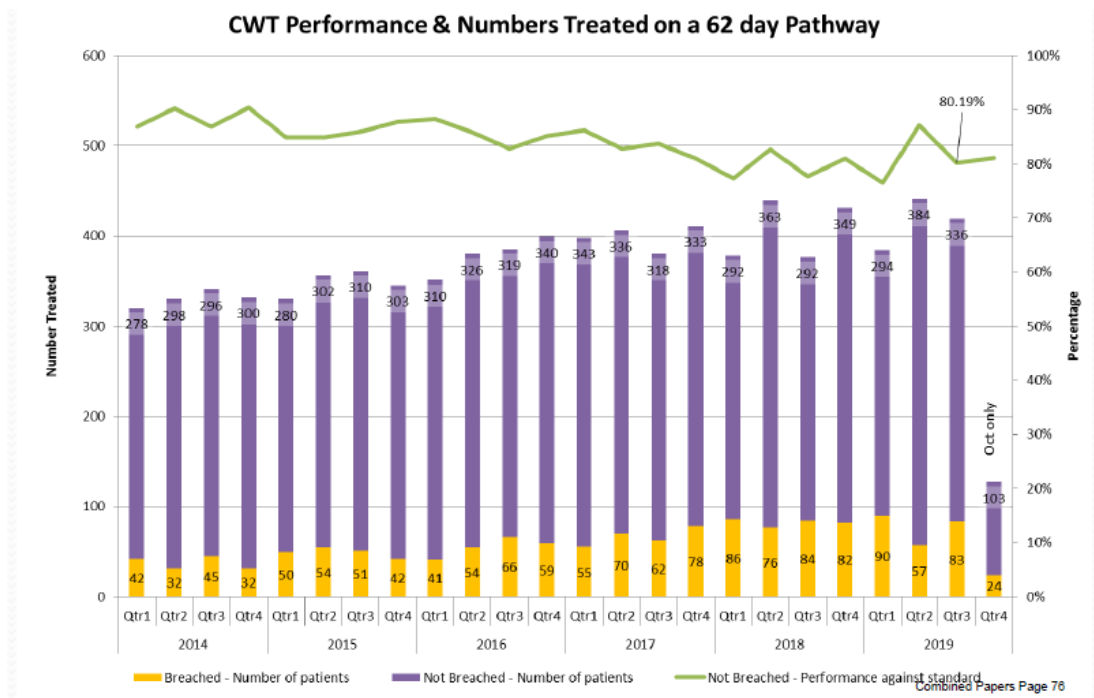
Additional information – 62 day standard (as at Sept 2019)

- This was the first time that the target had been achieved since the quarter ending June 2016. Across the north cancer alliance the compliance rate was 95.9% and across the whole of Scotland, 95.8%.
- Urological, with 87.2%, was the only cancer type which failed to meet the 95% target.

Long waiting patients – actions being taken

- We are using external providers and consultant lists at Aberdeen Royal Infirmary to clear the majority of the long waiting patients before the end of March 2020 – the risk to this being successful will be around the short stay ward being used to reduce bed pressures and continued high demand of colorectal cancer patients taking priority. This is being monitored as part of our coordinated winter surge plan
- Continue to use Stracathro Regional Treatment Centre for both Urology and General Surgery. Further additional sessions have been identified to utilise Dr Gray's Hospital every weekend from January to March for General Surgery, Urology, Ear Nose and Throat (ENT) and Oral and Maxillofacial Surgery (OMFS).

In terms of the numbers of patients seen and treated the performance against the 31 day and 62 day standards are noted below:



Actions for 2019/20

NHS Grampian is committed to ensuring that all those who require treatment for cancer should receive that treatment as soon as clinically appropriate. Improving cancer performance remains a Board priority as outlined within the Annual Operational Plan 2019/20 and we have established a robust cancer improvement action plan which seeks to deliver the recommendations of the Scottish Government's Effective Cancer Management Framework. The NHS Grampian Cancer Local Improvement plan sets out our ambitions to fully explore, and implement where clinically appropriate, the Effective Cancer Management Framework peer review recommendations to improve cancer management.

Recognising the significant staffing challenges which have impacted on capacity across NHS Grampian, a number of actions have been taken to effectively manage available resources whilst mitigating risk and ensuring appropriate governance.

In order to achieve this, a clinically-led risk management system of clinical prioritisation was introduced from June 2017 to enhance our ability to prioritise patient clinical need, as determined by the treating clinician. The system is underpinned by robust monitoring and escalation processes which were developed in partnership with Primary Care and includes ongoing assessment of clinical risk to ensure highest risk patient groups are identified. NHS Grampian is committed to ensuring all available staffed theatre resource is targeted at patients with the highest clinical need.

Well Led

Financial performance – nine months ending 31 October 2019

NHS Grampian recorded an operational overspend in the month of £2.2m. After taking account of the use of Board reserves, this moves the year to date overspend to £3.068 million (compared to £0.85 million at the same point last year). The major pressures on our financial position continue to be due to operational overspends in the Acute Sector and exposure to forecast overspends for Aberdeenshire and Moray IJBs.

The overspend recorded for the month of December was a result of two factors:-

- Operational budgets recorded an overspend of £2.2 million for the month (compared to a break even position for the month of December 2018). Key areas of overspend for the month were medical staffing (£0.7 million), Nursing (£0.5 million) and medical supplies (£0.5 million largely in Radiology).
- These operational overspends were mitigated by £1.6 million of further identified slippage against earmarked funding allocations. Projected spend levels against a number of earmarked funding streams have been revised downwards following reassessments of what will actually be spent against projects for this financial year.

There are now only three months of the year left to recover this deficit in order to achieve financial targets. A number of actions have been agreed with the System Leadership Team to address the financial gap, including ensuring only essential spend is incurred before the end of the year. Responsibility for these actions has been assigned to the relevant budget holders and progress on implementation will be monitored closely.

The level of overspend is above the financial trajectory which we have agreed with the Scottish Government.

Appendix 1: ISD published data

1. Trends in independent contractor services

NHS *general ophthalmic* services are provided by eye care professionals who use a wide variety of tests and procedures to examine the eyes of a patient during an eye examination. During 2018/19:

- 253,620 eye examinations were performed by optometrists working in Grampian, an increase of 5.7% from 2017/18, compared to 5.9% across Scotland.
- 74.7% were for initial eye examinations (primary examinations). The others were for emergency, additional or follow-up care (supplementary examinations). Across Scotland 75.2% were for primary examinations.
- 93.5% of eye examinations in Grampian were dealt with in a primary care setting and not referred for further investigation (95.2% across Scotland).

The annual *dental* report provides information on workforce and costs during 2018/19 and indicates a slight improvement in recruitment of dentists although still well behind the Scottish average:

- A total of 265 principal dentists were in post - up from 260 in 2017/18. This equated to a rate of 45 per 100,000 population and compared with a rate of 52 per 100,000 population across Scotland.
- There were 90 non-salaried dental practices in Grampian with an average of 1036 children and 4032 adults registered at each practice. The Scotland wide average was lower for children (832) but higher for adults (4140).
- 83.2% of the population were registered with a dental practice in Grampian, below the registration rate of 94.9% across Scotland and the lowest rate of any mainland board. However 73.2% of those patients registered had attended in the past two years compared to 69.7% across Scotland.
- Total fees including capitation and continuing care authorised for General Dental Services and Public Dental Services came to £25.8m (gross) during 2018/19. This worked out at a per capita rate of £44.14 compared to £55.95 across Scotland.

The decline in *general practice* workforce coupled with increasing list sizes and an ageing population are highlighted in a publication looking at a 10 year period from 2009 to 2019:

- There were 529 GPs in Grampian in 2019 – a 5.4% decrease from 559 in 2009, contrasting with an increase of 3.0% across Scotland.
- The average practice list size has increased by 24% since 2009 from 6792 to 8431. This is the highest average list size of any Scottish board – some 37% higher than the average, of 6171, which has increased by only 15% in the past 10 years.
- There has been a shift in GP gender profile over the last 10 years. Males accounted for 49% of the GP workforce in 2009 but only 37% in 2019.
- The number of salaried GPs has increased considerably over the last 10 years, with approximately 23% GPs salaried in 2019 compared to 14% in 2009.
- The number of patients aged 65 and over registered with GP practices in Grampian has risen from 87,821 in 2009 to 108,806 in 2019 – a 24% increase compared to 21% across Scotland.

2. Health services costs

Payments to GPs during 2018/19 highlighted the increase from £82.6 million in 2017/18 (75 Practices) to £85.6 million in 2018/19 (73 Practices), and the differences in per capita payments:

- The total sum of payments worked out at £143.70 per capita. This compared to £135.40 in Lanarkshire (the lowest per capita payment) and £251.90 in Shetland (the highest per capita payment).

A publication of health services costs shows changes in expenditure across the health system and how Grampian compares to Scotland overall:

- Total operating costs in Grampian increased by 0.5% compared to 0.9% across Scotland (after taking inflation into account).
- Expenditure within the hospital sector was £663.1m - an increase 0.7% in real terms. Across Scotland the comparable increase was greater at 1.1%.
- Within the community sector, which contains the smaller hospitals which serve their local communities, as well as community services delivered outside hospitals, £219.4m was spent in 2018/19. This represented a 1.3% increase in real terms and compared to the Scottish average increase of 0.4%.
- Family health sector expenditure, which includes the cost of running local GP practices as well as local pharmacy, dental and ophthalmic services, amounted to £264m in 2018/19 – a real terms decrease of 0.3%, compared to an increase of 1.1% across Scotland.

3. Trends in service delivery, health status and outcomes

A report summarising long term trends for patients with learning disabilities over the past decade reflects the changes in service delivery, away from long term hospital care to community care:

- Hospital discharges from the Learning Disability specialty fell sharply from an average of 150 per year between 1997/98 and 2003/04 to an average of 27 per year between 2013/14 and 2018/19, a trend which is mirrored across Scotland.
- The average length of stay (continuous inpatient stay), between 2013/14 and 2018/19, was 188 days which compared to 128 days across Scotland. This is partly reflective of the more complex nature of patients admitted in Grampian where the general model of care tends to be more community oriented than other parts of Scotland)

The health of a pregnant woman and her baby are closely linked and are influenced by a number of different factors during pregnancy, childbirth and the early period after birth. These include the mother's social and economic circumstances, her previous and current health and health related behaviours such as diet, exercise and smoking, and the medical care provided. This publication gives insight into pregnancy health, risk factors and care for women and children in Grampian during 2018/19:

- There were 5834 births in Grampian, 11.4% of the total across Scotland. Of these, 23 were stillbirths – 12.6% of the total across Scotland.
- 4.8% of babies were classed as 'low birthweight' i.e. weighed less than 2500g, compared to 5.4% across Scotland.
- 47.0% of mothers were of a healthy weight when they booked for antenatal care compared to 44.5% across Scotland. 50.7% were overweight or obese compared to 52.7% across Scotland.
- 12.6% of women were known to be current smokers at the time of antenatal booking compared to 14.6% across Scotland.

Estimates of the number of babies affected by congenital abnormality have been published in a new report by ISD. This has been reviewed by the maternity team and confirmed:

- In 2017, 235 babies affected by a serious congenital anomaly were identified among pregnancies in Grampian. This equates to a rate of 394.8 per 10,000 total (live and still) births which is statistically significantly higher than then across Scotland (308.4 per 10,000 births).
- Overall, the commonest group of anomalies seen was congenital heart defects (59 babies affected; 99.1 per 10,000 total births compared to 84.3 across Scotland).

4. Health safety

Antimicrobial resistance is a threat to public health and patient safety due to higher healthcare costs, treatment failures and increased mortality. Antimicrobial use and spread of infection in humans, animals and the environment contribute to the development of resistant infections. A report by Health Protection Scotland on antimicrobial use and resistance in 2018 looks at how trends are changing:

- 1.79 antibiotic items were prescribed per 1000 population per day in Grampian during 2018, down from 2.04 in 2014. This compared to 1.99 across Scotland, down from 2.24 in 2014.
- 23.7% of people in Grampian received at least one course of antibiotics, down from 27.8% in 2014. This compared to 27.8% in Scotland, down from 30.6% in 2014.
- 18.0% of antibiotics were prescribed by nursing staff in Grampian in 2018. This compared to 10.0% across Scotland.
- 7.2% of antibiotics were prescribed by dental staff in Grampian in 2018. This compared to 7.4% across Scotland.

5. Variation in care and outcomes

The Scottish Atlas of Healthcare Variation highlights geographical variation in the provision of health services and associated health outcomes. The ISD publication on chronic obstructive airways disease (COPD) highlights the extent of variation in emergency admissions across Scotland, particularly in the west of the country:

- Chronic Obstructive Pulmonary Disease (COPD) – 1-3 emergency admissions: In 2018/19 there was a 2.4-fold variation in the rate of people aged 40 years and over with between 1 and 3 emergency admissions to hospital for COPD across NHS Boards, ranging from 221.1 to 532.1 per 100,000 population. Grampian recorded 275.1 (adjusted for age and sex), compared to the figure for Scotland overall at 392. (Aberdeenshire 224.5; Aberdeen City 347.8 and Moray 269.1)
- COPD – 3+ emergency admissions: These ranged from 21.7 to 57.8 per 100,000 population across all Boards. Grampian recorded 22.2 compared to the Scottish average of 39.8. (Aberdeenshire 16.2; Aberdeen City 32.6; Moray 18.7).
- COPD – length of stay: Mean length of stay across Scotland ranged from 4 days to 7.8 days. Grampian recorded 6.4 days compared to the Scottish average of 7 days. (Aberdeen City 5.5; Aberdeenshire 7.0; Moray 7.3 days).
- COPD – mortality rates: The mortality rate ranged from 69.5 to 125.6 per 100,000 population. Grampian recorded 85.0 compared to Scottish average of 106.2. (77.8 Aberdeenshire, 99.0 in Moray and 86.3 in Aberdeen City).
- COPD – emergency COPD readmissions within 28 days: Emergency COPD readmissions ranged from 10.4% to 19.3%. Grampian recorded 13.2% compared to Scotland overall at 16.6%. (12.0% Aberdeenshire; 17.1% Moray and 12.5% Aberdeen City).

- Smoking cessation – 4-week quit rates: The percentage of 4-week quits ranged from 33.4% to 81.1%. Grampian recorded 41.6% compared to the average in Scotland of 38.7%. (40.0% in Moray, 42.1% in Aberdeenshire and 41.5% in Aberdeen City).
- Smoking prevalence (adults 16+): In survey year 2017 there was a 1.6-fold variation in the percentage of random adult (16+) respondents answering yes to “Do you smoke cigarettes nowadays?” across NHS Boards, ranging from 14.4% to 22.4%. Grampian recorded 17.1% with 15.7% in Aberdeenshire, 19.6% in Moray and Aberdeen City recording 17.7%. The corresponding figure for Scotland as a whole was 17.9%.