

NHS Ayrshire & Arran



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| Meeting: | Ayrshire and Arran NHS Board |
| Meeting date: | Monday 14 August 2023 |
| Title: | Performance Report |
| Responsible Director: | Kirstin Dickson |
| Report Author(s): | NHS Ayrshire & Arran Performance and Insights Team – Directorate of Transformation and Sustainability |

1. Purpose

This is presented to NHS Board members for:

- Discussion

This paper relates to:

- Government policy/Directive

This aligns to the following NHS Scotland quality ambitions:

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The format of the NHS Board Performance Report has been revised to provide members with an Executive summary on the key aspects of performance for the latest period to June 2023. This main high level summary report focuses on the following service areas:

- Planned Care and Musculoskeletal Waiting Times;
- Diagnostic and Cancer Waiting Times;
- Mental Health Waiting Times;
- Urgent Care Pathways;
- Unscheduled Care Emergency Department (ED) Performance; and
- Delayed Transfers of Care.

To enhance intelligence and understanding of these key areas of Performance, trend charts, including control charts (where appropriate), in addition to improvement plans, have been included for the above areas in **Appendix 1**.

2.2 Background

Our Annual Delivery Plan (ADP) for 2023/24 has recently been submitted to Scottish Government (SG) and we will continue to develop and refine our Performance reporting to provide members with insight and intelligence on the key data aspects relating to the ADP and our wider Performance against the National Waiting Times Standards. Where possible, this Performance report includes progress against our ADP trajectories for Quarter 1 (ending June 2023). *Please note the ADP 2023/24 trajectories are classed as provisional at this stage.*

2.3 Assessment

The latest performance data within this report is for the period June 2023 for the majority of measures. For some measures, the latest data may be for May 2023.

Executive Data Summary

Planned Care

- Performance against the 12 week national target for New Outpatients remains below target and has fallen for the third consecutive month in June 2023; with the overall total number of patients waiting also reaching a new high at June 2023.
- In June 2023, NHS Ayrshire & Arran remobilised 97% of all New Outpatient activity compared to June 2019, exceeding the local ADP target of 95%.
- The number of New Outpatients waiting longer than 12 months has been increasing since the end of March 2023; with 18 and 24 month waits remaining level.
- Compliance against the 12 week national target for Inpatients/Daycases has reduced for the second consecutive month at June 2023 and despite remaining below the 95% target, the overall total waiting list continues on an overall downward trend in June 2023.
- In June 2023, NHS Ayrshire & Arran remobilised 92% of all Inpatient/Daycase activity compared to June 2019, surpassing the local ADP target of 85%.
- The number of Inpatients/Daycases waiting longer than 18 months has fallen in the three weeks up to 30th June 2023.

Musculoskeletal

- Compliance in relation to the national 4 week target for Musculoskeletal (MSK) waiting times remains at around 37% at June 2023; below the target of 95%.

Diagnostics

- Performance against the 6 week national target for Imaging had been decreasing since January 2023 due to a continued increase in the number of Non-Obstetrics Ultrasound waits. At June 2023, compliance showed a slight increase, which coincides with a decrease in Non-Obstetric Ultrasound waits at June 2023.
- Following an improving trend in performance, compliance against the 6 week national target for Endoscopy continues to remain below target and has shown a reduction at June 2023, the first time compliance has fallen below 40% since July 2022. Compliance is however within the normal variation limits. ADP trajectories in relation to activity for Endoscopy were not achieved in June 2023.

Cancer

- Performance against the 62-day Cancer target reached a two year high of 91% in May 2023. Although not meeting the national target of 95%, compliance levels exceeded the local ADP trajectory of 80%.
- Performance in relation to the 31-day Cancer target continues to meet the 95% national target.

Mental Health

- In June 2023, compliance in relation to Child and Adolescent Mental Health Services (CAMHS) continued to exceed the national target of 90%. CAMHS also met the local ADP trajectory in June 2023.
- Drug and Alcohol Treatment services continued to exceed the national target of 90% in May 2023.
- At June 2023, performance for Psychological Therapy (PT) waiting times has shown an improvement, although remains below the 90% national target, which has not been met since December 2022. Performance is still within 'normal' variation limits. Compliance against the local ADP trajectory was also not achieved in June 2023. It should be noted that due to an under reporting of referrals from July 2022, alongside a change in criteria for patients to be classified as 'seen', a refresh of data has resulted in a change to previously reported performance, with 90% target having now been met at April, August and October 2022, as well as January 2023.

Urgent Care

- In June 2023, 90% of patients who contacted Ayrshire Urgent Care Service (AUCS) did not require attendance at the front door and received alternative pathways of care. This exceeded the local aim of 85%.

Emergency Department (ED)

- Unscheduled ED attendances between January and June 2023 remain at similar levels to the same period in 2022.
- Since falling to a low in December 2002, compliance against the ED 4-Hour standard continues on an increasing trend however this rise is within 'normal' variation limits and performance remains below the 95% national target.
- The local ADP trajectory for 2023/24 is for no 12 hour breaches in our EDs by August 2023. In June 2023, the number of breaches at University Hospital Crosshouse (UHC) fell to their lowest level since July 2021, with 214 breaches. Conversely, the number of breaches at University Hospital Ayr (UHA) have reached their third highest level with 369.

Delayed Transfers of Care

- In May 2023, the total number of delayed transfers of care reached their highest level in 2023, with the numbers rising for a second consecutive month. The majority of delays remain in South Ayrshire HSCP.
- Bed days occupied due to a delayed discharge have also increased in May 2023 but remain within 'normal' variation limits.

2.3.1 Quality/patient care

We seek to balance remobilising, reforming and stabilising our services with a continued response to COVID-19. Systems and procedures continue to be in place to monitor and manage the impact on performance in our provision of unscheduled and planned care for our citizens to ensure high quality of care for patients.

2.3.2 Workforce

A sustainable workforce and appropriate recruitment levels are imperative across all services as we provide services within the current circumstances. We will continue to monitor performance against key measures to understand how this will impact on workforce and recruitment levels; and to ensure appropriate levels of capacity are maintained to manage demand.

2.3.3 Financial

Through our ADP, the health and care system is ensuring appropriate levels of capacity are maintained to remobilise and stabilise services whilst also maintaining COVID-19 capacity and resilience. The impact of COVID-19 on the delivery of key performance targets and trajectories are routinely being assessed and monitored.

2.3.4 Risk assessment/management

Through our ADP we have planned how we would safely prioritise service delivery, whilst also maintaining COVID-19 capacity and resilience.

2.3.5 Equality and diversity, including health inequalities

An Impact Assessment has not been completed as this paper provides an update on performance of the health and care system and incorporates progress in relation to the ADP.

2.3.6 Other impacts

- **Best value**

Successful management of waiting times requires leadership, and engagement with clinical staff. Local performance management information is used to provide as up to date a position as possible in this report. Some information may change when the data is quality assured by Public Health Scotland in readiness for publication.

- **Compliance with Corporate Objectives**

The achievement of the waiting times targets set out within this paper complies with a number of the corporate objectives: improving health; safety/outcomes; quality of experience; equality; transforming and patient flow; supply and demand.

- **Local outcomes improvement plans (LOIPs)**

The achievement of the targets provides better access to healthcare services and should therefore have a positive effect on the health inequalities priority within local LOIPs.

The achievement of the patients awaiting discharge targets will have a positive contribution towards the Outcomes for Older People priority.

2.3.7 Communication, involvement, engagement and consultation

There is no legal duty for public involvement in relation to this paper. Any public engagement required for specific service improvement plans will be undertaken as required.

2.3.8 Route to the meeting

The content discussed in this paper has been considered by the Senior Responsible Officer for each area and the Strategic Planning and Operational Group (SPOG). They have either supported the content, and/or their feedback has informed the development of the content presented in this report.

3. Recommendation

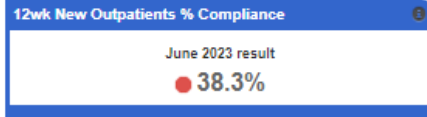
For discussion. NHS Board members are asked to discuss the information provided in this report which provides assurance that systems and procedures are in place to monitor and manage the continued impact of whole system pressures on the provision of unscheduled and planned care for our citizens.

4. List of appendices

- **Appendix 1 – Performance Report**

Planned Care

New Outpatients



- National Target – 95% of patients to wait no longer than 12 weeks from referral (all sources) to a first outpatient appointment (measured on month end Census).
- Annual Delivery Plan Trajectory 2023/24 - Achieve 95% of pre-COVID-19 activity in Q1.



National Benchmarking – 12 Week New OP Target (95%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 38.4% | 38.0% | 39.3% | 39.2% | 39.3% | 39.2% | 39.3% | 39.2% | 39.9% | 38.1% | 36.8% | 37.4% | 42.0% |
| Scotland | 50.1% | 49.5% | 49.5% | 49.5% | 47.0% | 47.0% | 47.0% | 44.0% | 44.0% | 44.0% | 47.1% | 47.1% | 47.1% |

Source: Public Health Scotland and Local Management Reports

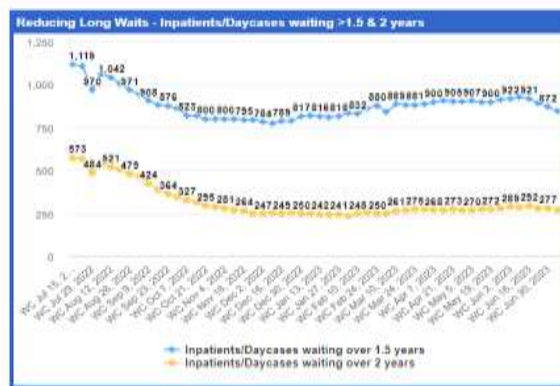
IMPROVEMENT ACTIONS

- All patients waiting over 26 weeks have undergone waiting list validation
- Mutual aid capacity is in place for Diabetes and Endocrinology and Neurology with NHS Forth Valley. Mutual aid arrangements are also confirmed for Gastroenterology with NHS Grampian subject to resolution of some digital security issues to allow the Grampian consultant access to NHSAA systems.
- Insourcing contracts providing additional outpatients capacity are in place for a number of specialties, although it should be noted that some contractors are reporting increasing difficulties in sourcing sufficient consultants to deliver the contracted level of activity.
- A Short Life Working Group (SLWG) is underway within Diabetes and Endocrinology to implement a series of initiatives aimed at reducing demand and creating more capacity through different ways of using the wider clinical team.
- Regular engagement with the Centre for Sustainable Delivery (CfSD) through the CfSD Champions meetings and completion of the CfSD Heatmap is helping to drive redesign and increasing use of best practice approaches including Enhanced Triage/Active Clinical Referral Triage (ACRT) and Patient Initiated Review (PIR).

Inpatients/Day Cases



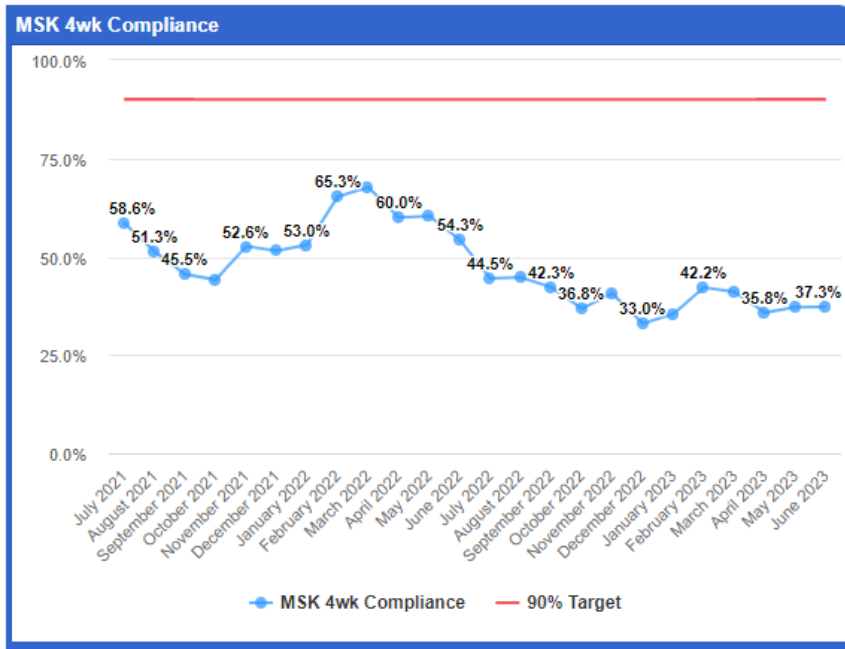
- National Target - 100% of eligible patients receive inpatient or daycase treatment within 12 weeks of such treatment being agreed.
- Long Waits – Eliminate 18 month waits for inpatient/day cases in most specialities by September 2023.
- Annual Delivery Plan Trajectory 2023/24 - Achieve 85% of pre-COVID-19 activity in Q1.



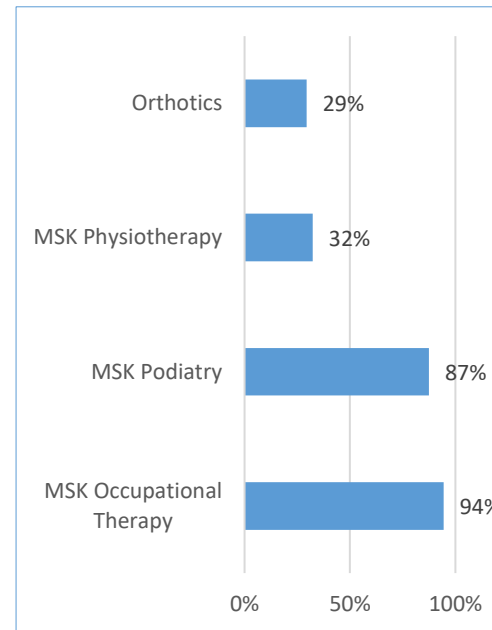
Musculoskeletal (MSK)



- National Target - At least 90% of patients from receipt of referral should wait no longer than four weeks to be seen for a first outpatient appointment at Allied Health Professional (AHP) led Musculoskeletal (MSK) services.



June 2023 - % Performance



National Benchmarking - 4 Week MSK Target (90%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 67.7% | 60.0% | 60.4% | 54.3% | 44.5% | 44.8% | 42.3% | 36.8% | 40.7% | 33.0% | 35.5% | 42.2% | 41.1% |
| Scotland | 54.7% | 50.4% | 50.4% | 50.4% | 51.4% | 51.4% | 51.4% | 51.6% | 51.6% | 51.6% | 51.8% | 51.8% | 51.8% |

Source: Public Health Scotland and Local Management Reports

IMPROVEMENT ACTIONS

- Workforce remains a significant challenge. Capacity remains restricted by a number of factors including vacancies, retirements, annual leave, maternity leave, sickness absence
- There has been a growth in urgent post-operative and trauma demand over the year reflective of the improvements in return to elective activity.
- A number of initiatives have been taken to optimise capacity: Flexible diaries are now implemented to allow conversion of consultation appointments to virtual, telephone or face to face to facilitate appropriate consultations reflective of patient choice, and ensure best utilisation of clinical capacity.
- Patient Initiated Reviews, opting in for new appointments and Active Clinical Referral Triage are being utilised to optimise efficiency in line with the recommendations of the National Modernising Patient Pathways Programme.
- A new pathway of care for patients with carpal tunnel syndrome has been successfully implemented, and ongoing evaluation will inform potential for expansion of this approach for other MSK conditions.

Diagnostics

Radiology/Imaging



- National Target – 100% of patients waiting for key diagnostic tests and investigations should wait no longer than six weeks (42 days).



National Benchmarking - 6 Week Imaging Target (100%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 65.6% | 60.5% | 67.8% | 71.4% | 73.4% | 77.3% | 76.5% | 66.6% | 80.0% | 70.2% | 76.7% | 75.3% | 74.4% |
| Scotland | 53.5% | 48.5% | 50.1% | 50.6% | 47.3% | 48.1% | 50.2% | 49.6% | 53.1% | 48.5% | 48.2% | 56.3% | 55.0% |

Source: Public Health Scotland and Local Management Reports

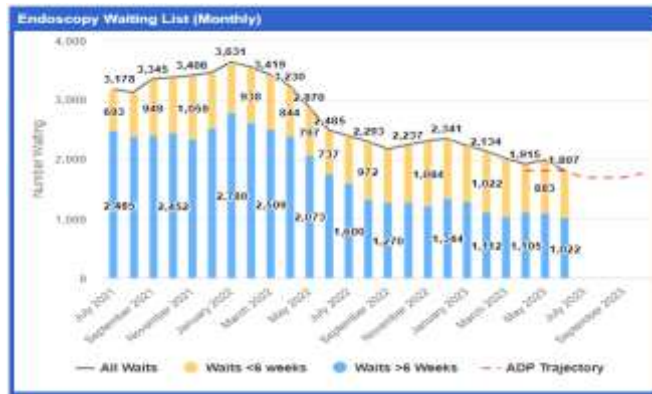
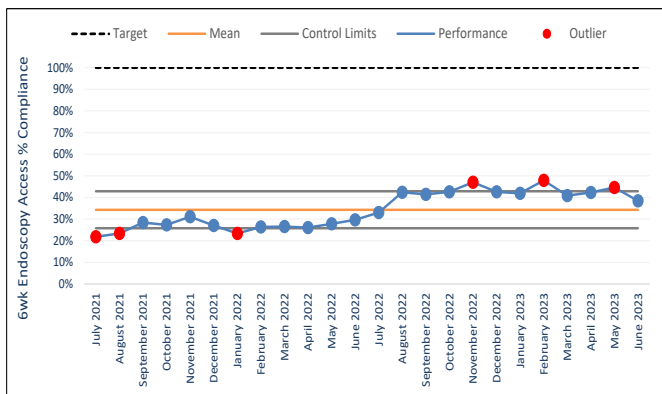
IMPROVEMENT ACTIONS

- The mobile MRI scanner will remain in situ until 31 March 2024, and continues to support an increase in MRI and a significant reduction in the waiting list. However SG has intimated that this funding will not be renewed after March 2024. Loss of this capacity is a significant risk for NHS Ayrshire & Arran.
- Staffing for the CT Pod at Ayrshire Central Hospital (ACH) will now be funded on a recurring basis.
- There is a plan for development of a Diagnostics Hub at ACH, incorporating the CT Pod and a new static MRI scanner. This will require identification of capital funding.
- Demand significantly outstrips capacity for Ultrasound. The service has recently made two new appointments and has also had additional funding for two new trainee posts. This is considered a positive step in addressing workforce sustainability although it will take 12-18 months to see the benefit on the waiting list.
- Five international radiographers have commenced post, with a further five preferred candidates due to start in summer 2023 once they have completed their course.

Endoscopy



- National Target – 100% of patients waiting for key diagnostic tests and investigations should wait no longer than six weeks (42 days).
- Annual Delivery Plan 2023/24 Trajectory – Achieve 100% of pre-COVID-19 activity in Q1.



National Benchmarking – 6 Week Endoscopy Target (100%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 26.6% | 26.0% | 27.8% | 29.7% | 33.0% | 42.4% | 41.4% | 42.6% | 47.0% | 42.6% | 41.9% | 47.9% | 40.9% |
| Scotland | 36.4% | 33.9% | 36.4% | 36.7% | 36.1% | 38.1% | 39.4% | 40.5% | 41.6% | 37.2% | 36.1% | 41.5% | 42.3% |

Source: Public Health Scotland and Local Management Reports

IMPROVEMENT ACTIONS

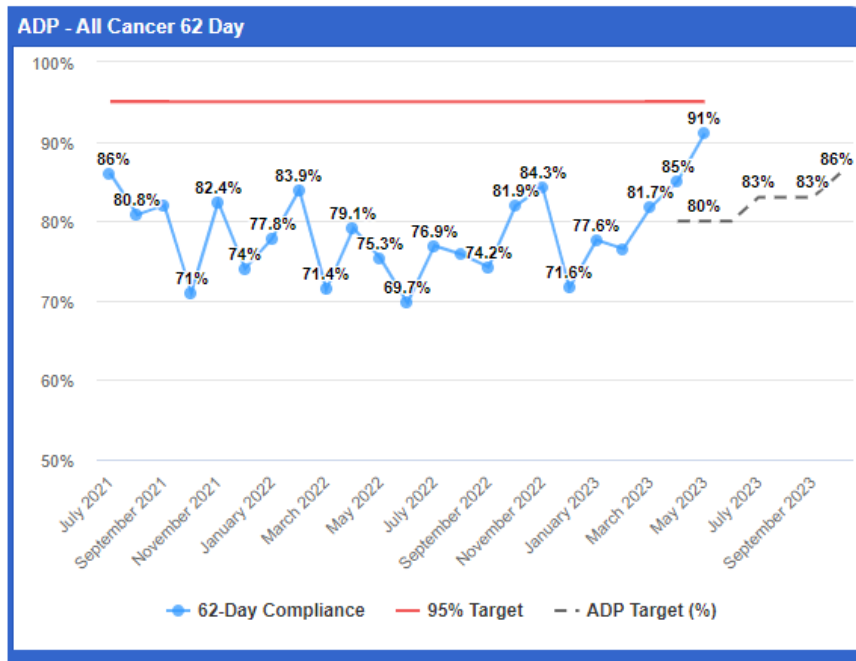
- The recovery space for Endoscopy at UHC remains restricted due to the placement of the extended Intensive Care Unit (ICU).
- A 4th Endoscopy Room has been created at UHA. Some Information Governance issues in relation to equipment has delayed opening, but it is hoped that this room will be in use imminently and represents a step change in Ayrshire endoscopy capacity
- Similar to the operating theatres, weekly endoscopy utilisation meetings are helping to increase productivity of endoscopy lists.
- The routine waiting list (lower procedures) has been validated using home qFiT tests. qFiT testing is now being rolled out for GP usage as part of the referral process which will allow better triage and will improve the patient pathway
- Additional endoscopy capacity at Golden Jubilee National University Hospital (GJNUH) continues to be used and through changes to admin processes utilisation of these lists has improved.
- Alternative procedures, Colon Capsule Endoscopy (CCE) and Cytosponge continue to be used in appropriate cases as an alternative to endoscopy, although clinical uptake remains fairly low.

Cancer

Cancer – 62 day Target



- National Target - 95% of those referred urgently with a suspicion of cancer are to begin treatment within 62 days of receipt of referral.
- Annual Delivery Plan 2023/24 Quarter 1 Trajectory – Achieve 80% by end of Q1.



National Benchmarking – 62 Day Cancer Target (95%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|--------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 71.4% | 79.1% | 75.3% | 69.7% | 76.9% | 75.8% | 74.2% | 81.9% | 84.3% | 71.6% | 77.6% | 76.5% | 81.7% |
| Scotland | 76.0% | 78.2% | 77.2% | 73.8% | 77.1% | 75.1% | 73.2% | 70.7% | 71.9% | 72.5% | 67.6% | 67.4% | 72.6% |

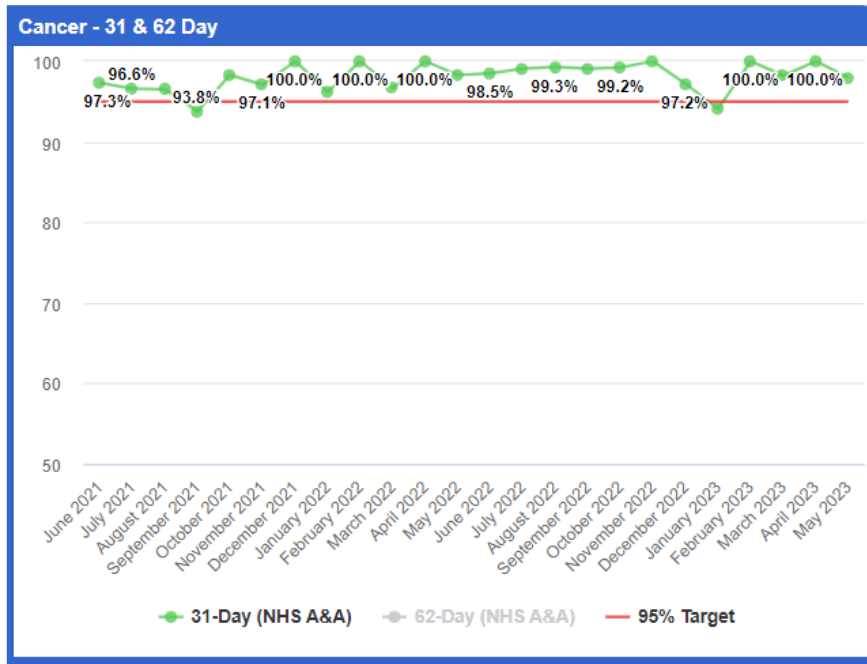
IMPROVEMENT ACTIONS

- Continued focus on addressing diagnostic delays, particularly the actions mentioned earlier relating to increased Imaging capacity and Endoscopy capacity form part of the cancer plan.
- Actions underway to address the Pathology backlog and capacity shortfall including locum appointments and outsourcing.
- The Effective Cancer Management framework has been reviewed and is being prioritised nationally. Referral processes have also been reviewed and this will allow for more robust re-grading policies to be implemented.
- Working towards implementing the National Optimal Lung Cancer Pathway.
- The Rapid Cancer Diagnosis Service (RCDS) (formerly Early Cancer Diagnosis Centre) has received 493 referrals up to end March 2023 with 22 cancers diagnosed.
- New quarterly Cancer Performance Governance group chaired by Director of Transformation and Sustainability will provide additional senior leadership.

Cancer – 31 day Target



- National Target - 95% of all patients diagnosed with cancer are to begin treatment within 31 days of decision to treat.



National Benchmarking – 31 Day Cancer Target (95%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|--------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 96.7% | 100.0% | 98.3% | 98.5% | 99.1% | 99.3% | 99.1% | 99.2% | 100.0% | 97.2% | 94.1% | 100.0% | 98.2% |
| Scotland | 96.5% | 95.9% | 95.2% | 95.3% | 95.2% | 94.3% | 93.8% | 93.8% | 94.0% | 94.5% | 91.8% | 95.4% | 94.8% |

Source: Public Health Scotland and Local Management Reports

IMPROVEMENT ACTIONS

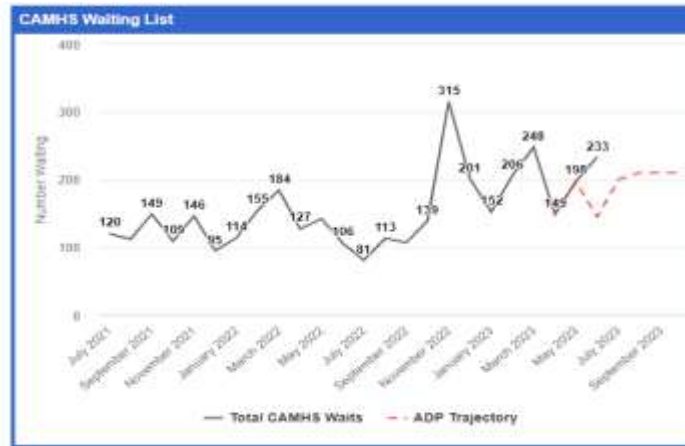
- Performance continues to be monitored but consistently achieve over the 95% National Target

Mental Health

Child and Adolescent Mental Health Service (CAMHS)



- National Target – 90% of young people to commence treatment for specialist Child and Adolescent Mental Health services within 18 weeks of referral.
- Annual Delivery Plan 2023/24 Trajectory – Achieve compliance levels of 97.9% at the end of Q1.



National Benchmarking – 18 weeks CAMHS Target (90%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 98.9% | 94.5% | 97.9% | 98.1% | 87.7% | 89.4% | 67.3% | 61.2% | 63.8% | 96.5% | 98.7% | 99.5% | 97.2% |
| Scotland | 73.1% | 67.1% | 66.7% | 71.1% | 67.5% | 66.4% | 69.5% | 69.0% | 67.4% | 75.9% | 74.3% | 73.8% | 74.5% |

Source: Public Health Scotland and Local Management Reports

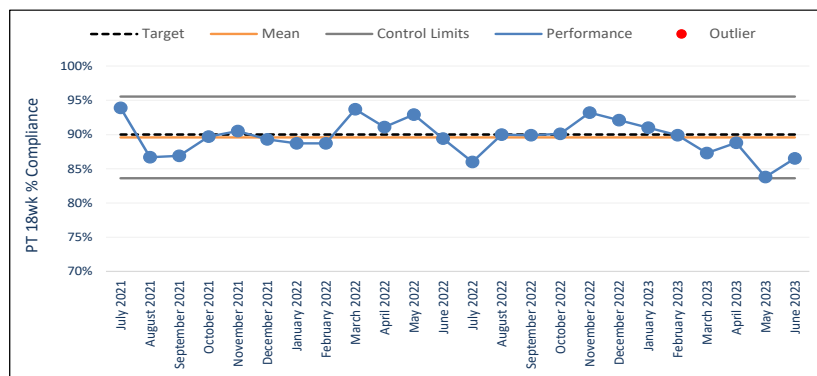
IMPROVEMENT ACTIONS

- The work of the CAMHS implementation group has now concluded with full implementation of the CAMHS Specification from 1st August 2023.
- A neurodevelopmental extreme team has been commissioned by IJB Chief Officers to develop alternative solutions/service model for children and young people that do not meet the criteria for the CAMHS specification
- Community Eating Disorder Service (CEDS) has appointed a Consultant Psychologist and the referral criteria and treatment pathways are being reviewed and updated in line with evidence-based practice and the Eating Disorder National Review.
- The N-CAMHS (neurodevelopmental CAMHS) team continues to work on pathways and processes to provide smooth transition between teams and reduce the need for duplication. Full implementation of the CAMHS specification on the 1st August 2023 will result in a change of service access.
- Discussions with IJB's and the GP Sub Committee are underway and a Communication Strategy has been developed.
- CAMHS will offer assessment, treatment and care to children and young people experiencing moderate to severe depression, moderate to severe anxiety problems, self-harming behaviours and other diagnosable mental health conditions where there is an indication for treatment and therapeutic care.

Psychological Therapies



- National Target – 90% of patients to commence Psychological Therapy based treatment within 18 weeks of referral.
- Annual Delivery Plan 2023/24 Trajectory – Achieve compliance levels of 89.1% at the end of Q1.



National Benchmarking – 18 Weeks PT Target (90%)

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 92.5% | 88.0% | 90.6% | 87.8% | 81.8% | 86.6% | 87.1% | 87.1% | 91.0% | 90.3% | 88.9% | 87.0% | 83.1% |
| Scotland | 84.5% | 81.2% | 80.9% | 82.3% | 79.2% | 81.6% | 81.2% | 80.9% | 80.6% | 82.4% | 80.6% | 79.4% | 79.3% |

Source: Public Health Scotland and Local Management Reports

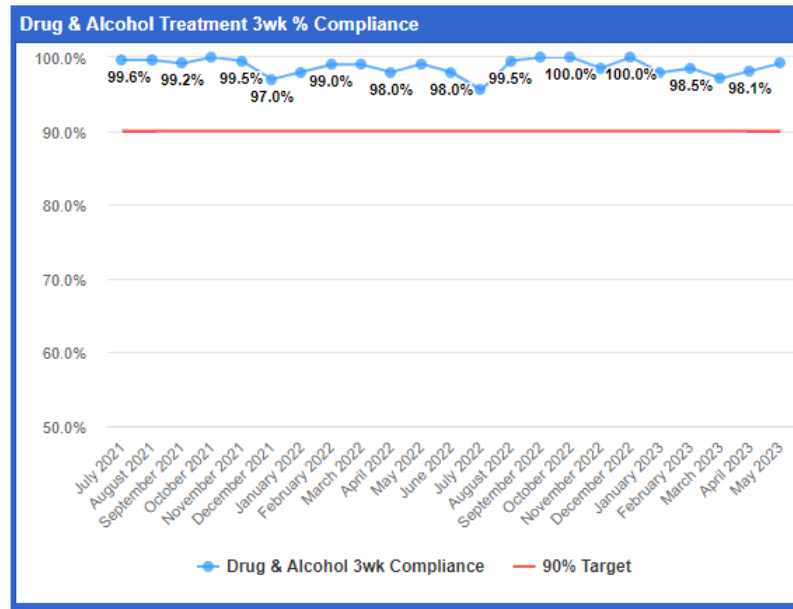
IMPROVEMENT ACTIONS

- **Recruitment** - Psychological Services (PS) continues to engage in a strong recruitment drive to fill all vacancies. PS have been successful, in a very competitive workforce context, in utilising our full SG funding allocation for PT, increasing capacity for longest waits and unmet need. The greatest challenges in our workforce remain in CAMHS and parts of our Adult Mental Health Specialties. Difficulties in recruitment and retention and high maternity leave in these clinical areas are leading to longer waiting times. However, this reduction in capacity, and therefore compliance, has been offset by improvements in Referral to Treatment for other Specialties, resulting in our overall compliance remaining high.
- **Service Delivery** – Continue remote delivery and development of assessment and treatment where appropriate. Expand access to an increased range of SG supported digital options as part of a tiered model of service delivery. Continued engagement with SG priorities, including the PT and Secondary Care Mental Health Standards Taskforce. SG has positively assessed our Board as not requiring enhanced support for PT.
- **Training/Wider Workforce Upskilling** - Implement the recently developed strategic plan for psychological training and supervision, initially focused on Adult Mental Health, based on clinical care pathways, and with more explicit knowledge of what resource is available and required for delivery of the different levels of psychological work.

Drug and Alcohol Treatment



- National Target – 90% of clients will wait no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery.



National Benchmarking – 3 Weeks Drug and Alcohol Target

| | Mar-22 | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 99.0% | 98.0% | 99.1% | 98.0% | 95.6% | 99.5% | 100.0% | 100.0% | 98.5% | 100.0% | 97.9% | 98.5% | 97.2% |
| Scotland | 91.5% | 90.5% | 90.5% | 90.5% | 90.9% | 90.9% | 90.9% | 91.6% | 91.6% | 91.6% | 92.9% | 92.9% | 92.9% |

Source: Public Health Scotland and Local Management Reports

IMPROVEMENT ACTIONS

- North Ayrshire** – Recruitment to vacant mental health nursing posts and social worker posts being progressed; Review of national Medication Assisted Treatment (MAT) benchmarking report and localised information will be conducted to enable identification of further improvement actions; Actions relating to MAT Standard 7 (primary care) being progressed including the offer of a MAT related Local Enhanced Service (LES) to interested GPs and for local pharmacies to pilot Buidal support clinics.
- East Ayrshire** - East Ayrshire Addiction & Recovery Service are currently progressing with a service review and redesign which will align to our Strategic Improvement plan and respond to requirements set out in the MAT Standards; Funding received from the CORRA Foundation has been used to create a Recovery Hub in Kilmarnock.
The team of Community Recovery and Engagement Workers (CREW) is continuing to expand, creating networks and recovery support groups across the towns and villages of East Ayrshire.
- South Ayrshire** - Community alcohol and drugs service, known as START, have continued providing medication access clinics, extending this to five days per week, across five different clinics across South locality, for individuals wishing to commence opiate replacement therapy (ORT) on that day. South Ayrshire Community Mental Health Services have continued with their service developments with a specific focus on Primary Care.

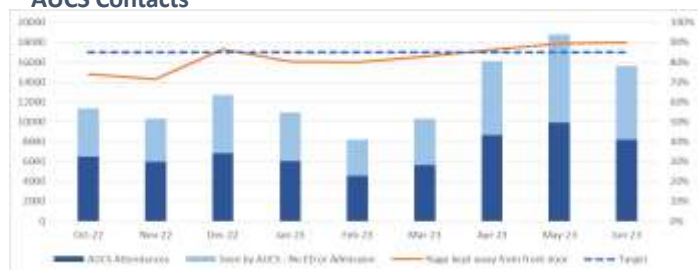
Urgent Care

Ayrshire Urgent Care Service (AUCS)



- At least 85% of patients who contact AUCS will not require attendance at the Front Door and will receive alternative pathways of care in the right place, at the right time.

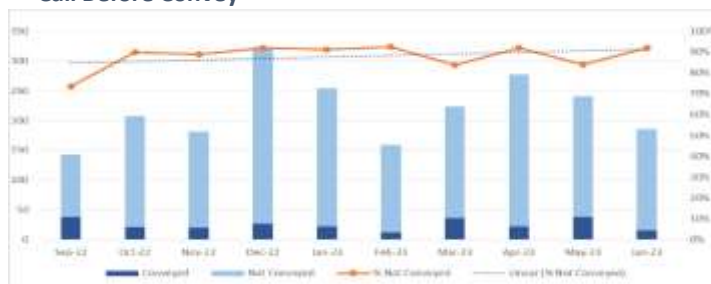
AUCS Contacts



NHS24 to AUCS Response Time

| | Dec-22 | Jan-23 | Feb-23 | Mar-23 | Apr-23 | May-23 | Jun-23 | Target |
|--|--------|--------|--------|--------|--------|--------|--------|--------|
| AUCS Referrals from NHS 24 - % of patients contacted within response times | 70% | 94% | 94% | 92% | 88% | 94% | 91% | 85% |

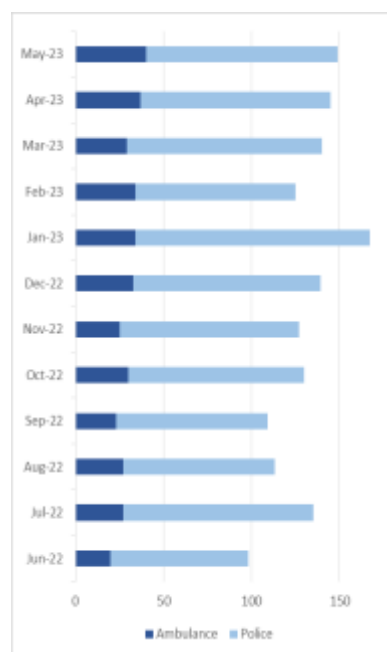
Call Before Convey



Care Home Contacts to AUCS

| | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 | Apr-23 | May-23 | Jun-23 |
|---------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Non NHS24 Contacts | 336 | 317 | 442 | 391 | 226 | 317 | 411 | 488 | 449 |
| Contacts to NHS24 | 84 | 70 | 78 | 102 | 80 | 49 | 72 | 64 | 64 |
| % Contacts to NHS24 | 18% | 18% | 18% | 18% | 18% | 18% | 18% | 18% | 18% |

Emergency Services Mental Health



Rapid Respiratory Response

| End June 2023 | |
|------------------------------------|-----|
| No. of Practices involved with RRR | 15 |
| %age of COPD Patients | 43% |
| Average no. of consults per month | 144 |
| Bed Days saved per month | 244 |

IMPROVEMENT ACTIONS

- NHS24 to AUCS Response Time** – All contacts from NHS24 to AUCS that require a clinician response have a priority attached. The target for meeting these response times is 85%.
- Call before Convey** - involves SAS crews receiving decision support from the FNC/AUCS clinicians & exploring alternatives for patients before conveying to hospital. The average number of SAS calls per week is 52 with on average 46 not being conveyed. We aim to have a target of 60 per week, but numbers have reduced over the summer months. This will continue to be promoted across SAS.
- Care Home pathway** - Care Homes in Ayrshire now have direct access to Urgent Care during the out of hours period for their residents. This includes redirection to other appropriate pathways during the out-of-hours period. There are on average 400 calls per month via this pathway with only 8% of patients requiring to attend an acute hospital.
- Rapid Respiratory Response (RRR)** - This service expansion is well underway providing an alternative to hospital attendance for those patients experiencing a COPD exacerbation. The service is now receiving referrals from within 15 local GP Practices with a further 2 Practices due to begin referring patients into the service next month.
- Emergency Services Mental Health Pathway** – This pathway provides Police Scotland and SAS with an alternative pathway to access community mental health services for those patients in need of urgent Mental Health intervention.
- Community Pharmacy** - Further development is underway of a Community Pharmacy pathway into Ayrshire Urgent Care Service to support patients to access appropriate care and avoid unnecessary attendance at the Emergency Department.

Unscheduled Care

Emergency Department



- National Target - At least 95% of patients will wait less than 4 hours from arrival at Emergency Department to treatment, admission, or discharge (unscheduled attendances only).
- Annual Delivery Plan 2023/24 Trajectory – No patient will wait longer than 12 hours in our ED by August 2023.



| Number of Unscheduled ED Attendances | |
|--------------------------------------|--------|
| Jan-Jun 2023 | 44,041 |
| Jan-Jun 2022 | 44,368 |
| Jan-Jun 2019 (pre-COVID-19) | 57,522 |



National Benchmarking – 4 Hour ED Target (95%)

| | May 22 | Jun 22 | Jul 22 | Aug 22 | Sep 22 | Oct 22 | Nov 22 | Dec 22 | Jan 23 | Feb 23 | Mar 23 | Apr 23 | May 23 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NHS A&A | 71.7% | 67.6% | 68.9% | 70.8% | 67.6% | 65.4% | 65.7% | 62.3% | 62.8% | 66.4% | 64.7% | 68.1% | 69.5% |
| Scotland | 69.9% | 67.9% | 66.4% | 66.0% | 65.6% | 64.0% | 64.0% | 58.3% | 65.2% | 66.3% | 64.5% | 65.7% | 67.2% |

IMPROVEMENT ACTIONS

- **The Strategic Planning and Operational Group (SPOG)** which consists of the three HSCP Directors, Director of Acute Services, Director of Transformation and Sustainability have agreed an revised urgent unscheduled care improvement plan that has 5 specific workstreams and quarterly trajectories for delivery. An operational oversight group which meets weekly is co-chaired by the Head of Health and Social Care, North Ayrshire and the Acute Director of Reform. The workstream leads provide an exception report weekly against improvement trajectories and this is reported to SPOG on a monthly basis.
- **Hospital at Home** - Now established across South and East Ayrshire HSCPs with a workforce in place for 16 virtual beds. We will continue to expand the service to 24 virtual beds as workforce allows. The service is now supporting all 'in hours' nursing home patient referrals and expanding to support delivery of IV antimicrobial service.
- **Rapid Assessment & Care (RAC)** - The RAC area within UHC was opened mid-December 2022 with data showing a steady increase in RAC attendances along with an improving discharge % of 'all attendances'. In the week ending 25th June 2023, Rapid Assessment & Care saw an average of 17 patients per day with a discharge rate of 82%, both increased from the previous week and above the set trajectory.
- **Whole System Interventions** – these events take place collaboratively with all three of our HSCPs. This initiative linked into previous Discharge without Delay (DwD) work, focusses on both expediting safe patient discharge and actioned work on some of the well-known systemic issues.
- **Continuous patient flow model** – based on the 'Bristol Model' has been implemented at UHC with relevant triggers to enact. This is working well on the UHC with plans to implement on the UHA site.

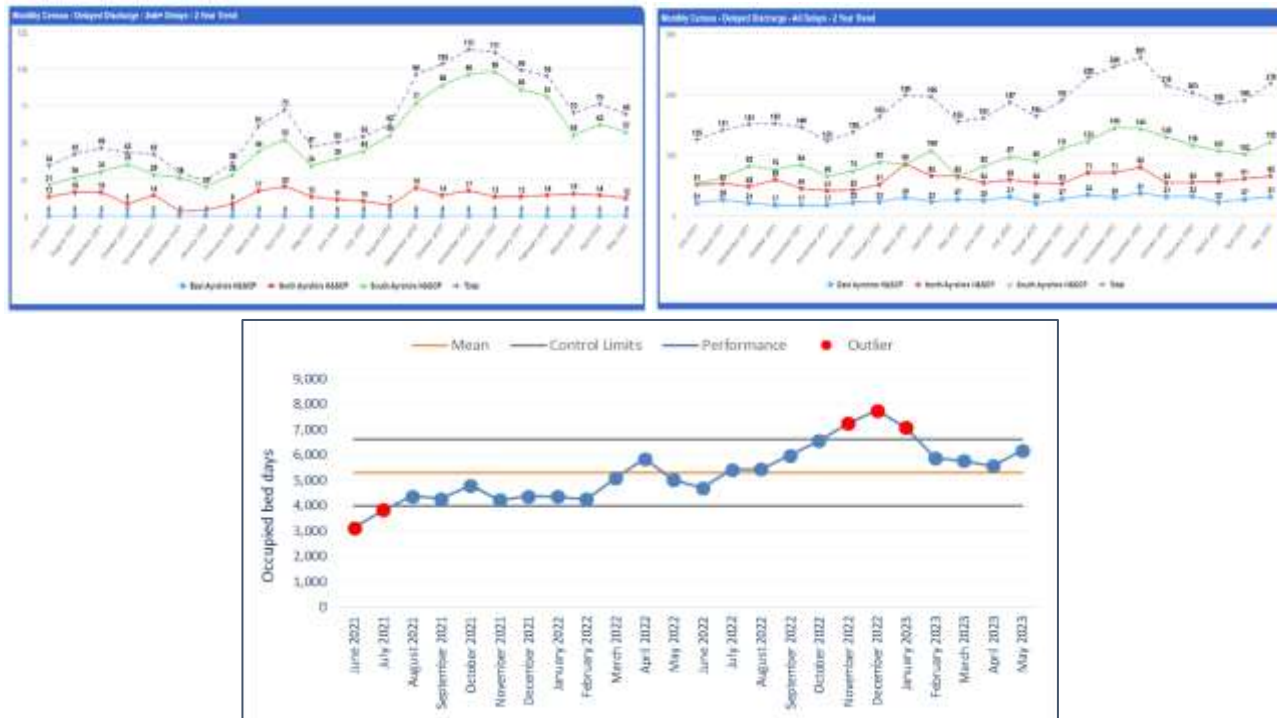
Delayed Transfers of Care

Delayed Transfers of Care

A *delayed discharge* occurs when a hospital patient who is clinically ready for discharge from inpatient hospital care continues to occupy a hospital bed beyond the date they are ready for discharge.

Three main measures are monitored in terms of performance:

- numbers of people experiencing a delay over 2 weeks (*excluding complex code 9 delays*);
- numbers of people experiencing a delay of *any length or reason* in discharge from hospital at the monthly census point;
- numbers of hospital bed days associated with delayed discharges (*any length or reason*) in the calendar month.



Source: Public Health Scotland

IMPROVEMENT ACTIONS

- **North Ayrshire** - Hospital-based social work and care at home teams are involved daily in supporting discharge and discharge planning, including additional support as required. Teams engage with families as part of the assessment and discharge process to ensure all options are fully explored, including discharge home to assess when applicable. We have reviewed our systems for utilising interim beds for those people who can be discharged for assessment to consider their longer-term care needs out with a hospital setting. This model will continue through 2023.
- **South Ayrshire** - The 10 bedded intermediate reablement unit continues to deliver excellent results with over 60 people supported to return home with no need for ongoing care. The Reablement Unmet Need Assessment Team have assessed over 200 people with only 8 (<4%) requiring ongoing care contributing to a reduction of the community waiting list from >300 to <70. Recruitment into in house Care at Home continues with an additional 55 staff now recruited although not yet all started. Unfortunately the net gain of >60 additional care packages replaces only 10% of the capacity lost in the private sector (>580 packages); to mitigate the continued rise in delays we are working with local care homes to implement a discharge to assess model.
- **East Ayrshire** - Community teams co-working to prioritise supporting people/families at home, with key focus on enablement, well-being, and carers support to prevent admission. Ongoing review of internal and commissioned care at home services to optimise capacity to support more people at home and ensure discharge without delay, alongside planning to implement earlier HSCP intervention on hospital admission and streamlining Reablement and end of life pathways on discharge. Investment in developing the model of care at East Ayrshire Community Hospital to provide Advanced Nurse Practitioner (ANP) and Allied Health Professional (AHP) capacity together with supporting rehabilitation and enablement resource to support earlier discharge without delay.