

Meeting:	Board Meeting
Meeting date:	28 April 2021
Item:	9.3
Title:	Local Delivery Plan Reporting Summary & Activity Report Q3 20-21
Responsible Executive/Non-Executive:	Martin Malcolm, Health of Public Health Intelligence
Report Author:	Nicola Walsh, Health Intelligence Analyst

1 Purpose

This is presented to the Board for:

- Awareness

This report relates to a:

- Annual Operation Plan

This aligns to the following NHS Scotland quality ambition(s):

- Effective

2 Report summary

2.1 Situation

Local Delivery Plan (LDP) Reporting Summary & Activity Report Q3 20/21

2.2 Background

This report compares the Boards target performance in Q3 20/21 against the LDP Standard trajectories and the Local Delivery Plan.

2.3 Assessment

The Board is provided with Quarter 2 LDP performance together with trend information to date on patient activity.

Section 1a) Lists Current LDP Standards

Section 1b) Performance status on KPMs not meeting latest planned trajectory. The performance status update from delivery leads and plans for improvement for those KPMs listed below.

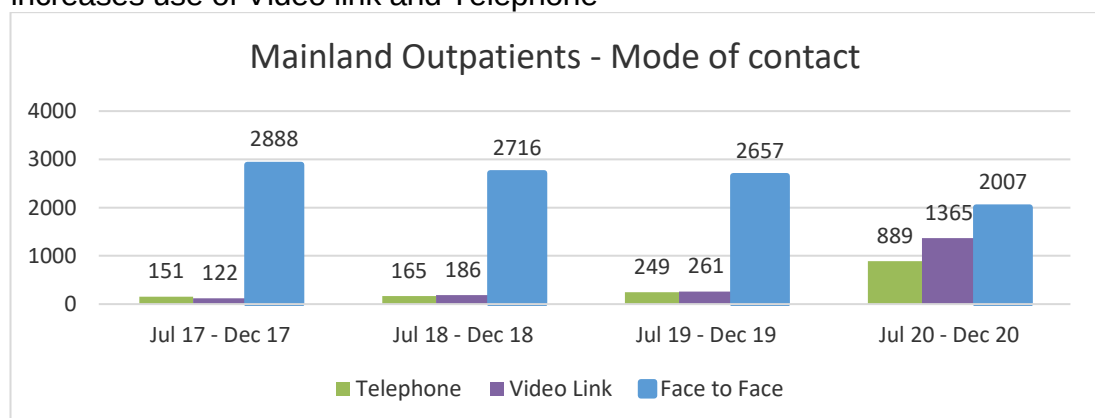
NO.	INDICATOR	Improvement Plan Submitted
6a	% patients able to book an appointment with a GP more than 3 days ahead	Heat N/A
8	Percentage urgent suspected cancer referrals treated within 62 days	Yes
11	Financial Performance E5.1 - Deficit or surplus for end financial year against total resource limit	N/A
13a	Hospital Associated SAB - No. of SA bacteraemias Infections in patients per 100000 total occupied bed days	No
14a	Hospital Associated - Number of Clostridium difficile Infections in patients per 100000 total occupied bed days in all aged 15+	No
15	Alcohol Brief Interventions	Yes
15b	Community Associated - Number of E. Coli Bacteraemias Infections in patients per 100000 total occupied bed days in all aged 15+	No
19	% RTT pathway patients seen within 18 weeks	Yes
20	Dementia - Post-Diagnostic Support	Yes
27	% sickness absence level	Yes
91	IP: % seen within maximum 12 week Treatment Time Guarantee	Yes
92a	New OP: % seen within 12 weeks of referral (excluded from Treatment Time Guarantee)	Yes
92b	New OP: % seen within 16 weeks of referral (excluded from Treatment Time Guarantee)	Yes

Section 1c) contains 2020/21 Quarter 3 Standards Status Summary.

Section 2) contains Patient Activity trends for key hospital settings.

Inpatients/Daycases:

- As expected given the pandemic Jul '20 to Dec '20 sees a decrease in both the number of Outpatients & Inpatient episodes, however there is an increase in activity from Mar-20 to Sep-20
- There was a significant decline in mainland Inpatient episodes from the same quarter in the last 3 year.
- WIH remained below 60% Bed occupancy for the majority of the quarter with only 6 days were it was exceeded, this low occupancy was also seen at St. Brendan's. However, Uist and Barra exceeded 60% occupancy for almost half the period and reached a high of 85% occupancy for 3 days.
- There is a decrease in new outpatient appointments however there has been an increase in the return appointments, the mode of contact continues to include the increases use of Video link and Telephone



The further bed occupancy analysis report shows:

WIH 100% occupancy for 0 days in quarter (remained <60% for 86 of 92 days).
At Ward Level though, there were number of wards with 100% daily occupancy:

- **Med 1** – 49
- **Med 2** – 13
- **APU** – 37
- **HDU** – 9
- **Children** - 1
- **MAU** - 6
- **Maternity** - 2

UBH <60% in 47 days was most frequent daily occupancy (85-89 for 3days).
St. Brendan's <60% in 90 days.

The above 100% occupancy has been adjusted to take account of additional contingency beds being available.

The level of contingency beds utilised during QTR3 :

Ward	Number of Days where Staffed Beds adjusted
Medical 1	25
HDU	2
Children	1
APU	1

2.3.1 Quality/ Patient Care

The reported standards form part of the Local Delivery Plan and aligned to the Quality Strategy and 20/20 Vision.

2.3.2 Workforce

Some measures relating to staff engagement are included in local scorecard performance monitoring.

2.3.3 Financial

To be reported on by Finance department.

2.3.4 Risk Assessment/Management

Performance Risks identified in report. Risk assessments sent out to responsible officer and corrective action and narrative included with the report.

2.3.5 Equality and Diversity, including health inequalities

N/A

2.3.6 Other impacts

N/A

2.3.7 Communication, involvement, engagement and consultation

N/A

2.3.8 Route to the Meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Corporate Management Team ~ 20.04.21
- Discussed with General Managers
- Single Operating Division

2.4 Recommendation

For the Board to note the Local Delivery Plan (LDP) Performance Status for Q3 2020-21 and latest patient activity information.

- **Awareness** – For Members' information only.
- **Discussion** – Examine and consider the implications of a matter.

3 List of appendices

The following appendices are included with this report:

- Performance Monitoring detail to Dec'20