

NHS Greater Glasgow and Clyde	Paper No. 24/06
Meeting:	Board Meeting
Meeting Date:	27 February 2024
Title:	Draft Proposed Board Performance Report
Sponsoring Director:	Colin Neil, Director of Finance
Report Author:	Tricia Mullen, Head of Performance

1. Purpose

The purpose of this report is to:

- Provide Board members with an update on performance against the key indicators as outlined in the Performance Assurance Framework (AIF).
- Consider the revised draft performance report that has been developed to reflect each measure identified in the Board's AIF (approved at the last Board meeting) to be presented at all Board meetings. See *Appendix 1* which outlines the changes made to the report since the last Board meeting.

2. Executive Summary

The paper can be summarised as follows: A summary of performance against the respective KPIs outlined in the AIF, and based on the measures contained in the 2023-24 Annual Delivery Plan and the 2023-24 planned care reduction targets approved by the Scottish Government alongside key local and national performance measures as per the previous report.

As at December 2023, 10 of the 28 measures that can be rated against target are currently delivering against target and rated green, six are rated amber (<5% variance from trajectory), 10 have been rated red (>5% adverse variance from trajectory) and the remaining two measure with no target are rated grey.

Key Areas of Performance Improvement:

- The number of GP Out of Hours scheduled shifts that remained open (100%) during December 2023 continued to exceed the 90% planned position.

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- Performance in relation to the number of CAMHS patients seen <18 weeks of referral (97.8%) continues to exceed the national target of 90% and the ADP planned position for December 2023.
- Compliance with the Psychological Therapies target (91.6% for December 2023) remained above the planned position of 87% and continued to exceed the national target of 90%.
- Acute activity in relation to new outpatients, endoscopies and inpatient / daycases remains on track and currently exceeding the YTD planned trajectory.
- There has been significant improvement in the number of new outpatients waiting >78 weeks in December 2023, the number of patients waiting has reduced from 737 for the month ending January 2023 to three for the month ending December 2023.
- The number of new outpatients waiting >52 weeks (5,468) is ahead of the planned position (9,000) for December 2023.
- The number of patients waiting for an endoscopy test (12,533) is also ahead of the planned position (12,800) for December 2023.
- There was an improvement on the previous months' position in relation to Cancer 31 Day Waiting Times, increasing from 92.4% in November 2023 to 94.1% in December 2023.
- Performance in relation to patients accessing Podiatry Services <4 weeks (89%) saw a further increase on the previous months' position.

Key Areas of Performance in Need of Improvement:

- Performance in relation to the Cancer 62 Day Waiting Times also reported an improvement on the previous month's position increasing from 63.4% in November 2023 to 64.4% in December 2023, however performance, particularly in the context of the significant increase in Urgent Suspicion of Cancer referrals, remains a challenge.
- Overall compliance with the A&E four hour waits (66.4%) saw a reduction on the previous months' position (67.7%).
- There was a 2% increase in the number of acute delays reported in December 2023 (301 compared to 294 the previous month), performance remains challenging and as a consequence, a total of 9,570 Acute bed days were lost to delayed discharge in December 2023.
- The number of mental health delayed discharges also remains a challenge with a total of 83 mental health delays reported in December 2023.
- Performance in relation to each of the TTG long waiting time reduction targets is above the planned position for December 2023.
- Whilst there was an increase in the MSK Physiotherapy waiting times performance in terms of percentage of patients seen <4 weeks (42%) compared to the previous months' position (41%), performance remains significantly below target as focus continues on reducing the longest waiting times.

More detail on each of the performance measures that either remain challenging or are below the planned position for December 2023 can be seen in the attached draft performance report.

3. Recommendations

- The Board members are asked to note the performance across NHSGGC in relation to the KPIs outlined in the AIF.

- Consider the format and structure of the draft proposed performance report that has been developed to reflect the measures identified in the AIF to be presented at each Board meeting.
- Note that the remaining measures contained within the AIF i.e. those identified to be reported less frequently via other performance reports and Committees, have been aligned to the Board's schedule of business.

4. Response Required

This paper is presented for approval.

5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

- | | |
|------------------------|-----------------|
| • Better Health | Positive impact |
| • Better Care | Positive impact |
| • Better Value | Positive impact |
| • Better Workplace | Positive impact |
| • Equality & Diversity | Positive impact |
| • Environment | Positive impact |

6. Engagement & Communications

The issues addressed in this paper were subject to the following engagement and communications activity: These performance indicators have been discussed and agreed as part of the development of NHSGGC's AIF with the Chair, Vice Chair and Executive leads for the Board.

7. Governance Route

This paper has been previously considered by the following groups as part of its development: These measures have been reviewed by Corporate Management Team, Acute Services Committee and the Finance, Planning and Performance Committee.

8. Date Prepared & Issued

20 February 2024

APPENDIX 1

Background

The draft proposed performance report outlines the following:

- Following the approval of the Board's AIF at the last Board meeting held on 19 December 2023, the draft proposed performance report has been created to reflect the measures identified in the AIF to be presented at all Board meetings. The financial measures will be reflected within the Board's Finance Report.
- Note that the remaining measures that were highlighted to be reported less frequently to the Board via other reports and Committees will either be incorporated into the draft performance report in line with the frequency identified in the AIF or be reported via other reports that have been aligned to the Boards schedule of business.

Changes to the Draft Performance Report

Based on the Boards AIF the draft proposed performance report has been developed to reflect the following:

- Each of the measures identified in the Board's AIF to be reported at all Board meetings. This report will replace the existing Board performance report if agreed.
- Note that all of the measures contained within the report have been aligned to the Corporate Aims, Objectives and where appropriate the 2023-24 Operational Priorities and Actions. This can be seen in the At a Glance Scorecard.
- As per the structure of the previous Board Performance Report, those measures with an adverse variance of either >5% or up to 5% i.e. those measures rated as either red or amber below the planned/expected position detail some of the improvement actions underway to address performance.
- The control limits have been revised to reflect the following:
 - For those measures below the national target position, the agreed trajectories have been used to set the control limits namely, A&E waits, MSK Physiotherapy Waits, Delayed Discharges and Cancer 62 Days Waiting Times targets.
 - For those measures that are by far exceeding target, the control limits have been removed and performance will be tracked against target unless the situation changes and control limits will be re-applied. The measures this relates to are CAMHS Waiting Times and GP Out Of Hours Shifts.
- The At a Glance scorecard has been further developed to reflect the performance values against target in addition to identifying those measures that have either met or exceeded the planned position for the last three months. Board members are asked to review and help refine the new format.

NHS GREATER GLASGOW & CLYDE BOARD MEETING



Board Assurance Information Framework – February 2024
Draft Proposed Performance Report

AT A GLANCE										
BETTER HEALTH										
No	Corporate Objective	Operational Priority	Measure	Current Performance	Target for Current Performance	Current Performance Status	Projected Performance as at 31 March 2024	Direction of Travel on Previous Month	3 Periods Better/Equal to Target	Slide Number
1	COBH1&3/ COBC7	OPBH3.0	Alcohol & Drugs Waiting Times - % of referrals that start treatment <3 weeks of referral	96.1%	90.0%	●	●	➡	✓	6
BETTER CARE										
No	Corporate Objective	Operational Priority	Measure	Current Performance	Target for Current Performance	Current Performance Status	Projected Performance as at 31 March 2024	Direction Of Travel On Previous Month	3 Periods Better/Equal to Target	Slide Number
2	COBC7/10	OPBC9.0	Unscheduled Care: A&E 4 Hour Waits	66.4%	95.0%	●	●	⬇		7
3	COBC7/10	OPBC9.0	Unscheduled Care: A&E Attendances	308,790	2% Reduction	●	●	⬆		9
4	COBC10	OPBC9.0	Delayed Discharges: Number of Acute Delayed Discharges	301	243	●	●	⬇		11
5	COBC10	OPBC9.0	Delayed Discharges: Number of Mental Health Delayed Discharges	83	58	●	●	⬇		13
6	COBC10	OPBC9.0	Delayed Discharges: Number of Acute bed days lost to delayed discharges	9,570	8,108	●	●	⬇		15
7	COBC10	OPBC9.0	Delayed Discharges: Number of Mental bed days lost to delayed discharges	2,570	1,857	●	●	⬇		17
8	COBC10	OPBC9.0	GP Out Of Hours Activity	18,364	FIO	●	●	⬆		19
9	COBC10	OPBC9.0	GP Out Of Hours: % of Scheduled Shifts Open	100.0%	90.0%	●	●	⬆	✓	20
10	COBC7	OPBC7.0	Number of patients on the New Outpatient Waiting List	149,261	145,000	●	●	⬆		21
11	COBC7	OPBC7.0	Number of New Outpatients Waiting >78 weeks	3	0	●	●	⬆		22
12	COBC7	OPBC7.0	Number of New Outpatients Waiting >52 weeks	5,468	9,000	●	●	⬆	✓	23
13	COBC7	OPBC7.0	New Outpatient Activity	218,819	209,363	●	●	⬇	✓	24
14	COBC7	OPBC7.0	Number of patients on the TTG Waiting List	45,787	44,761	●	●	⬇		25
15	COBC7	OPBC7.0	Number of TTG Patients Waiting >104 weeks	2,251	2,000	●	●	⬇		26
16	COBC7	OPBC7.0	Number of TTG Patients Waiting >78 weeks	6,670	6,000	●	●	⬇		27

AT A GLANCE										
BETTER CARE										
No	Corporate Objective	Operational Priority	Measure	Current Performance	Target for Current Performance	Current Performance Status	Projected Performance as at 31 March 2024	Direction Of Travel On Previous Month	3 Periods Better/Equal to Target	Slide Number
17	COBC7	OPBC7.0	Number of TTG Patients Waiting >52 weeks	13,602	13,500			↓		28
18	COBC7	OPBC7.0	TTG Inpatient/Daycase Activity	49,267	47,944			↓	✓	30
19	COBC7	OPBC8.0	Access to Cancer Services Treatment Time - % of patients starting treatment within 31 days of decision to treat	94.1%	95.0%			↑		31
20	COBC7	OPBC8.0	Access to Cancer Services - % of patients starting first cancer treatment within 62 days of receipt of urgent referral with a suspicion of cancer	64.4%	78.0%			↑		32
21	COBC7	OPBC7.0	Diagnostics: Endoscopy Waiting List	12,533	12,800			↑		35
22	COBC7	OPBC7.0	Diagnostics: Endoscopy Activity	26,692	24,083			↓	✓	36
23	COBC7/ COBH5	OPBC13.1	Access to Psychological Therapies - % eligible referrals starting treatment <18 weeks of referral	91.6%	90.0%			↓	✓	37
24	COBC7/ COBH5	OPBC13.2	Access to Child and Adolescent Mental Health Service - % eligible referrals starting treatment <18 weeks of referral	97.8%	90.0%			↓	✓	38
25	COBC7	OPBC12.0	MSK Physiotherapy Waiting Times - % of patients seen <4 weeks	42.0%	90.0%			↑		39
26	COBC7	OPBC12.0	Podiatry Waiting Times - % of patients seen <4 weeks	89.0%	90.0%			↑		41
BETTER WORKPLACE										
No	Corporate Objective	Operational Priority	Measure	Current Performance	Target for Current Performance	Current Performance Status	Projected Performance as at 31 March 2024	Direction of Travel on Previous Month	3 Periods Better/Equal to Target	Slide Number
27	COBW20	OPBW6.1	Staff Absence Total	26.2%	24.0%			↓		42
28	COBW20	OPBW6.1	Staff Sickness Absence Rate	7.5%	5.0%			↑		43
28	COBW20	OPBW6.1	Short Term Absence Rate	3.1%	2.0%			↑		43
28	COBW20	OPBW6.1	Long Term Absence Rate	4.4%	3.0%			↓		43

AT A GLANCE

BETTER VALUE

No	Corporate Objective	Operational Priority	Measure	Current Performance	Target for Current Performance	Agenda Item XX
	COBV 11/12	OPBV15.0	The Better Value measures are reflected within the Finance Report			
29	Rationale for Control Limits Applied					44

Key	Performance Status
On target or better	
Adverse variance of up to 5%	
Adverse variance of more than 5%	
No target	

Executive Summary

This Draft Proposed Performance Report aims to reflect all of the measures identified in the Board’s Assurance Information Framework to be reported at all Board meetings and for the purpose of illustration reflects the December 2023 position. The measures contained within the report reflect the following:

- The measures outlined in the 2023-24 Annual Delivery Plan approved by the Scottish Government (SG).
- Key national and local targets.
- The 2023-24 planned care reduction targets approved by the SG relating to new outpatients, inpatient/daycases and key diagnostic tests in line with the joint ambition to tackle waiting lists.

Each of the measures have been aligned to the Board’s Aims, Corporate Objectives and, where appropriate, the 2023-24 Operational Priorities and Actions. In conjunction with Service leads each of the measures have confirmed national and/or local targets in which to track progress against.

Similar to the existing Board’s performance report, the At A Glance on slides two to four provides a snapshot of the current performance against target as of December 2023, current status and the expected status for March 2024 for each of the measures contained within the report alongside a direction of travel based on a comparison with the previous months’ position. In addition, a column has been added to highlight those measures where performance has either been better or equal to the planned position. Each of the measures have also been allocated a **Red** (>5% adverse variance from trajectory), **Amber** (<5% variance from trajectory) and **Green** (meets or exceeds the planned position) status.

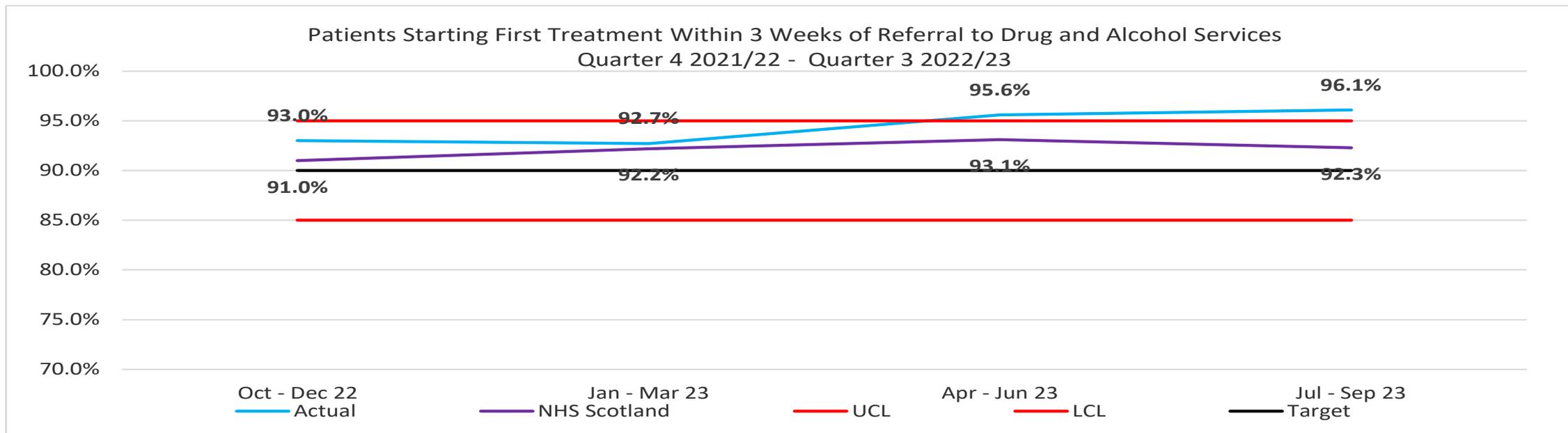
As at December 2023, 10 of the 28 measures that can be rated against target are currently delivering against target and rated green, six are rated amber (<5% variance from trajectory), 10 have been rated red (>5% adverse variance from trajectory) and the remaining two measure with no target are rated grey.

1. BETTER HEALTH: Alcohol & Drugs Waiting Times - % of referrals that start treatment <3 weeks of referral

At least 90% of clients will wait no longer than 4 weeks from referral to start their first treatment

Target
90%

Performance
96.1%



Please note: The national published October - December 2023 data is scheduled to be published on 26 March 2024.

Summary

Current Position (including against trajectory):

As at the quarter July - September 2023, 96.1% of patients referred for alcohol and drugs treatment treated <3 weeks of referral, above the 90% national target. **6.1% above target.**

Current Position Against National Target:

NHSGGC performance is above the latest national quarterly published position of 92.3% for the quarter ending September 2023.

Projection to 31 March 2024:

National Target 90%. **Performance expected to continue to exceed target by March 2024.**

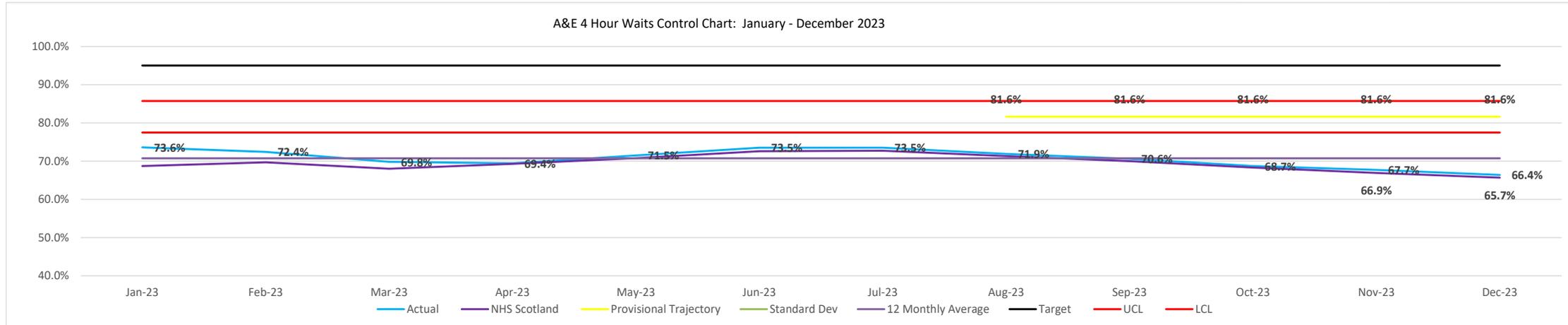
NHSGGC continues to consistently exceed the 90% alcohol and drugs waiting times target and consistently above the overall position for NHS Scotland.

2. BETTER CARE: Accident and Emergency 4 Hour Waiting Times Standard

At least 95% of patients will wait less than 4 hours from arrival to admission, discharge or transfer for Accident & Emergency treatment

Target
95%

Performance
66.4%



Please note: monthly data reflects NHS Board-wide position and includes ED & MIU performance.

Summary

Current Position (including against trajectory):

Currently **66.4%** of patients seen within 4 hours, a marginal reduction on the previous months position of 67.7%. Local management information for the week ending 19 February 2024 shows compliance at 70.5%. Performance remains below the national target of 95%.

Current Position Against National Target:

NHSGGC's performance was above the latest national published position of 66.4% for December 2023 and overall performance is in line with the national trend.

Projection to 31 March 2024:

National target 95%. Provisional Quarter 3 trajectory of 81.6% (included in recent Unscheduled Care Funding Bid to SG).

Key Actions

- The new winter healthcare campaign, launched in November 2023 and will run until the end of February 2024, aims to make it as easy as possible for people to access care this winter. The new ABC campaign aims to help people to know where to go if they need help as well as doing their bit to help the NHS during what is traditionally the busiest time of year. (**A** - Ask yourself, do you need to go out?; **B** - Be aware there is help right on your door step and **C** - Call 111). Unless it's an emergency, the public are being asked to think ABC before going to A&E. Based on intelligence gathered on A&E users, the campaign is also aimed at targeting specific population groups i.e. men and students who are most likely to attend A&E to help raise awareness on alternative services.
- The Board-wide redirection pathway now running in all ED sites ensures our patients are seen and treated in an appropriate setting, which for many minor injuries is not an ED. This is beginning to have an impact in that in November 2023 a total of 678 patients were redirected away from ED and this increased to 1,105 patients in December 2023. Current work is focused on increasing the publicity of this service, working with NHS 24 to increase awareness of this option to meet patient expectations and with clinical staff to encourage completion of all relevant Trak fields to support stronger outcome evaluation.

2. BETTER CARE: Accident and Emergency 4 Hour Waiting Times Standard by Hospital Site (Continued)

At least 95% of patients will wait less than 4 hours from arrival to admission, discharge or transfer for Accident & Emergency treatment

**Target
95%**

**Performance
66.4%**

Hospital Site	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Queen Elizabeth University Hospital	51.7%	51.8%	55.2%	53.3%	48.1%	47.9%	45.5%	45.1%	45.3%
Glasgow Royal Infirmary	41.9%	51.3%	57.2%	58.3%	60.6%	56.6%	51.9%	50.3%	51.3%
Royal Alexandra Hospital	67.1%	65.8%	66.1%	72.5%	68.6%	65.8%	66.2%	58.4%	56.8%
Inverclyde Royal Hospital	81.8%	82.1%	83.1%	86.8%	80.1%	74.6%	72.4%	75.2%	65.8%
Royal Hospital for Children	94.8%	97.3%	98.4%	99.1%	96.5%	94.8%	92.9%	92.9%	93.6%
Vale of Leven Hospital	93.0%	92.3%	91.3%	92.1%	91.7%	93.2%	91.5%	90.9%	88.7%
Stobhill Hospital	98.4%	98.3%	98.4%	99.9%	99.5%	98.7%	99.1%	99.7%	99.5%
New Victoria Hospital	97.6%	93.1%	92.4%	96.4%	94.7%	96.5%	97.9%	96.6%	97.5%
Total	69.4%	71.5%	73.5%	73.5%	71.9%	70.6%	68.7%	67.7%	66.4%
Target	95.0%								
National Performance	69.3%	70.8%	72.6%	72.7%	71.3%	70.0%	68.3%	66.9%	65.7%
NHSGGC Variance from National Position	0.1%	0.7%	0.9%	0.8%	0.6%	0.6%	0.4%	0.8%	

Summary

The information above, provides a monthly breakdown of performance against target at a hospital site level for the period April - December 2023. As seen from the table, Stobhill MIU consistently exceeds target and the New Victoria Hospital MIU has continued to exceed target since September 2023. With the exception of the Royal Hospital For Children (RHC) (93.6%) narrowly missing the national target of 95% all other hospital sites are below target. Performance against target at the three busiest sites across NHSGGC namely the Queen Elizabeth University Hospital (QEUI), Glasgow Royal Infirmary (GRI) and the Royal Alexandra Hospital (RAH) remains a consistent challenge.

3. BETTER CARE: Accident and Emergency Attendances by Hospital Site

**2%
Reduction**

Hospital Site	A&E/MIU Attendances									23-24 YTD	22/23 YTD	23/24 YTD	YTD %
	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total	Total	Var on 22/23	Change
Queen Elizabeth University Hospital	7,715	8,387	8,290	8,545	8,690	8,313	8,241	7,785	7,868	73,834	69,748	4,086	5.9%
Glasgow Royal Infirmary	6,586	7,103	7,100	7,017	7,189	7,081	7,110	6,499	6,714	62,399	62,680	-281	-0.4%
Royal Alexandra Hospital	4,635	5,189	5,113	4,908	5,251	4,963	4,952	4,682	4,704	44,397	42,399	1,998	4.7%
Inverclyde Royal Hospital	2,308	2,733	2,610	2,468	2,562	2,555	2,490	2,496	2,322	22,544	22,451	93	0.4%
Royal Hospital for Children	5,828	6,364	5,902	4,800	5,612	6,008	6,249	6,304	6,268	53,335	59,639	-6,304	-10.6%
Emergency Department Sub-Total	27,072	29,776	29,015	27,738	29,304	28,920	29,042	27,766	27,876	256,509	256,917	-408	-0.2%
Vale of Leven Hospital	1,375	1,565	1,595	1,434	1,583	1,724	1,548	1,391	1,434	13,649	11,845	1,804	15.2%
Stobhill Hospital	1,865	2,173	2,180	1,812	2,113	1,922	1,827	1,788	1,483	17,163	17,581	-418	-2.4%
New Victoria Hospital	2,319	2,538	2,653	2,389	2,522	2,431	2,434	2,237	1,946	21,469	20,532	937	4.6%
MIU Sub Total	5,559	6,276	6,428	5,635	6,218	6,077	5,809	5,416	4,863	52,281	49,958	2,323	4.6%
Total	32,631	36,052	35,443	33,373	35,522	34,997	34,851	33,182	32,739	308,790	306,875	1,915	0.6%
Target 2% Reduction for 2023-24													

Summary

The information above, provides a monthly breakdown of Accident & Emergency/Minor Injuries Unit attendances by hospital site for the period April - December 2023. Overall, five of the eight hospital sites reported a slight increase (308,790) in the YTD number of attendances when compared to the same period the previous year (306,875). The most notable increases can be seen at the Vale of Leven (VOL) (15.2%), the QEUH (5.9%), the RAH (4.7%) and the New Victoria MIU (4.6%).

The increase at the Minor Injury Units (MIU) is expected due to the flow navigation centre and signposting that is now in place.

3. BETTER CARE: Accident and Emergency Attendances by Health & Social Care Partnership

**2%
Reduction**

HSCP	Number Of A&E / MIU Presentations										2022-23 YTD Total	23/24 YTD Var on 22/23	23/24 % Change
	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	YTD Total			
East Dunbartonshire	2,062	2,247	2,267	2,006	2,228	2,253	2,169	2,139	1,971	19,342	19,949	(607)	-3.0%
East Renfrewshire	1,755	1,908	1,965	1,775	2,037	1,923	1,808	1,782	1,724	16,677	16,714	(37)	-0.2%
Glasgow City	15,259	16,748	16,374	15,430	16,229	15,909	16,149	15,110	15,129	142,337	142,953	(616)	-0.4%
Inverclyde	2,252	2,638	2,532	2,383	2,480	2,459	2,456	2,533	2,314	22,047	22,276	(229)	-1.0%
Renfrewshire	4,330	4,789	4,690	4,498	4,882	4,728	4,639	4,552	4,466	41,574	40,135	1,439	3.6%
West Dunbartonshire	2,398	2,720	2,669	2,494	2,563	2,699	2,696	2,561	2,508	23,308	22,738	570	2.5%
Other	4,575	5,002	4,946	4,787	5,103	5,026	4,934	4,505	4,627	43,505	42,108	1,397	3.3%
Total	32,631	36,052	35,443	33,373	35,522	34,997	34,851	33,182	32,739	308,790	306,875	1,915	0.6%

Summary

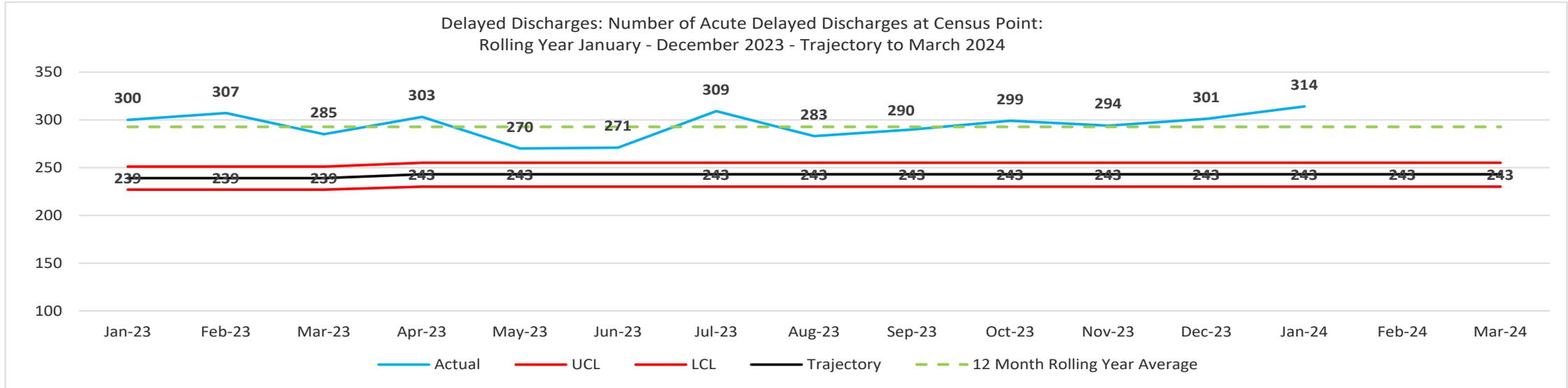
The information above provides a breakdown of A&E/MIU attendances by HSCPs for the period April - December 2023. Overall, there was a marginal increase in the YTD A&E attendances compared to the same period the previous year. This increase has been driven by increases in Renfrewshire (3.6%) and West Dunbartonshire (2.5%) HSCPs alongside the other category which reflects people from out with NHSGGC (3.3%) when compared to the same period the previous year. The remaining four HSCPs either remained fairly static on the same period the previous year or saw a reduction in A&E attendances.

4. BETTER CARE: Number of Acute Delayed Discharges

A delayed discharge occurs when a hospital patient is deemed clinically fit for discharge but continues to occupy a hospital bed. Reduction in average monthly Acute delayed discharges at monthly census point

Target
243

Performance
301



Summary

Current Position (including against trajectory):

A total of **301** Acute delayed discharges were reported at the monthly census point for December 2023, a **2% increase on the previous month's performance**. Local management information for the 19 February 2024 reported a total of 337 acute delays. **Current performance is 24% above the monthly trajectory of 243.**

Current Position Against National Target:

No national target relevant.

Projection to 31 March 2024:

No more than 243 acute delays by March 2024.

Key Actions

Performance in relation to Acute delayed discharges remains a significant challenge. Complex delays account for 187 (62%) of the 301 Acute delays reported in December 2023. Of the total number of Acute delays reported, 49% (148) are from Glasgow City HSCP and 18% (53) from other local authorities. Improvement actions include:

- Additional meetings between the Corporate, HSCP, and Acute delayed discharge leads were held over the festive period to help progress the discharge of patients who were delayed in their discharge.
- The Delayed Discharge Team is currently providing additional support to the QEUH with their delayed discharge position.
- Weekly meetings remain in place between Acute and HSCP discharge leads and the Discharge Team to monitor and progress actions to discharge delayed patients at the QEUH.
- eHealth have produced a draft daily Delayed Discharge performance report and this has been shared with colleagues across Acute and HSCPs for initial feedback.

4. BETTER CARE: Number of Acute Delayed Discharges by HSCP (continued)

A delayed discharge occurs when a hospital patients is deemed clinically fit for discharge but continues to occupy a hospital bed. Reduction in average monthly Acute delayed discharges at monthly census point

**Target
243**

**Performance
301**

Acute Delayed Discharges	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Monthly Target	Variance from Target
West Dunbartonshire HSCP	37	31	34	33	23	24	27	39	29	15	14
East Dunbartonshire HSCP	18	14	20	23	20	15	21	14	31	15	16
East Renfrewshire HSCP	13	8	2	20	9	18	11	10	13	6	7
Glasgow City HSCP	145	135	126	144	144	156	161	147	148	132	16
Inverclyde HSCP	22	13	18	20	17	10	13	20	19	10	9
Renfrewshire HSCP	7	8	14	10	8	11	9	6	8	12	-4
HSCP Total Acute Delays	242	209	214	250	221	234	242	236	248	190	58
Other Local Authorities Acute Delays	61	61	57	59	62	56	57	58	53	53	0
NHSGGC Total Acute Delays	303	270	271	309	283	290	299	294	301	243	58

Summary

Overall there has been a month on month increase in the number of patients delayed across Acute hospitals since August 2023. Current performance is above the planned monthly performance of no more than 243 delays. As at December 2023 there were a total of 301 Acute delays reported and local management information for the 19 February 2024 highlights a further increase to 337 Acute delays. NHSGGC's HSCPs account for 82.4% (248) of the overall total number of Acute delays reported with Glasgow City HSCP representing 60% of all HSCP delays reported across NHSGGC.

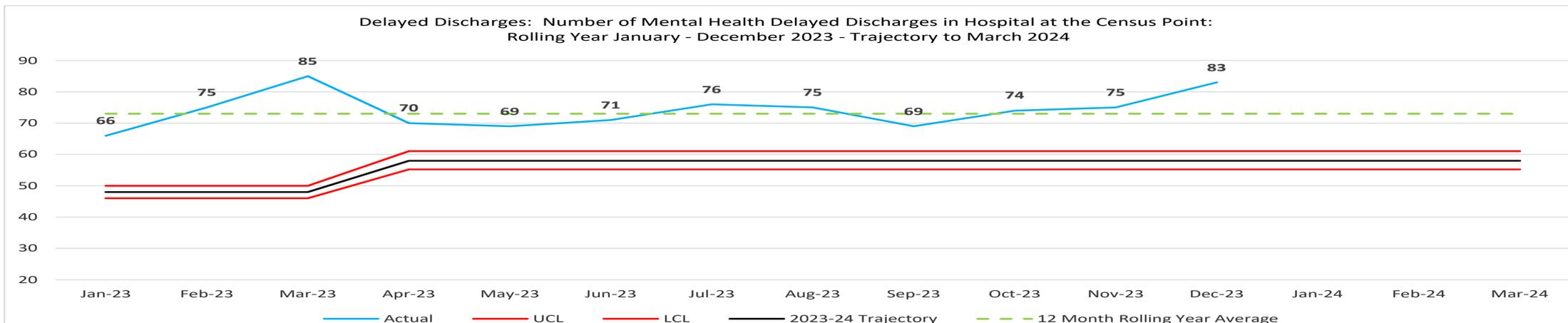
With the exception of Renfrewshire HSCP, all other HSCPs are currently above the monthly planned position. Both Glasgow City and East Dunbartonshire reporting the biggest variance from the planned position. Four of the six reported an increase on the previous months position with the most significant increase in East Dunbartonshire HSCP. Both West Dunbartonshire (-10) and Inverclyde (-1) HSCPs were the only two HSCPs that reported a reduction on the previous months' position. Whilst the number of delays across Acute from other local authorities remains a challenge there has been an overall reduction in the number of delays reports compared to April 2023.

5. BETTER CARE: Number of Mental Health Delayed Discharges

A delayed discharge occurs when a hospital patient is deemed clinically fit for discharge but continues to occupy a hospital bed. Reduction in average monthly Acute delayed discharges at monthly census point

Target
58

Performance
83



Summary

Current Position (including against trajectory):

Currently **83** Mental Health delayed discharges were reported at the monthly census point for December 2023, **an 11% increase** on the previous months' position. **Performance is above the monthly trajectory of 58.** Local management information for 19 February 2024 reported a total of 98 Mental Health delays.

Current Position Against National Target:

No national target relevant.

Projection to 31 March 2024:

No more than 58 delays by March 2024.

Key Actions

Overall performance remains a challenge. Of the total delays reported across NHSGGC, 57 are Glasgow City residents (62 the previous month) comprising 18 LD patients (19 last month), five Forensic Psychiatry patients (five last month) and 34 Glasgow City HSCP Adult Mental Health and Older People Mental Health (OPMH) patients (38 last month). Other Mental Health delays are reported in Renfrewshire (5), West Dunbartonshire (4), East Dunbartonshire (4), Inverclyde (2) and East Renfrewshire (1) HSCPs and 10 from other local authorities. Actions to improve this include:

- Glasgow City are currently concluding the review of the discharge teams with a report on the required actions to help drive improvement. In addition the Care Home Quality Team will be progressing the adult care home review work to look at thresholds. This has been done for OPMH and will help provide an overview of provision and the complexity of need within care homes across the city to ensure the discharge of patients from hospital into an appropriate care setting.
- Since December 2023, three Learning Disability patients have been discharged and a further six are scheduled to move to Waterloo Close early 2024. Plans are also in place for a further five patients to be discharged by the end of March 2024.
- Renfrewshire HSCP have a number of actions underway to help reduce the number of Mental Health delays including a pro-active approach with families and solicitors on a case by case basis and this is monitored and regularly reviewed by the MHO Manager. The use of interim placements, if possible, facilitating discharge when patients have a determined destination to help avoid delayed discharges in Acute beds.

5. BETTER CARE: Number of Mental Health Delayed Discharges by HSCP (Continued)

A delayed discharge occurs when a hospital patients is deemed clinically fit for discharge but continues to occupy a hospital bed. Reduction in average monthly Acute delayed discharges at monthly census point

Target
58

Performance
83

Mental Health Delayed Discharges	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Monthly Target	Variance from Target
West Dunbartonshire HSCP	2	4	4	4	6	3	4	3	4	2	2
East Dunbartonshire HSCP	1	1	2	2	2	2	1	2	4	0	4
East Renfrewshire HSCP	0	0	0	0	0	0	0	1	1	0	1
Glasgow City HSCP	58	51	51	58	55	53	58	58	57	51	6
Inverclyde HSCP	3	3	2	1	1	1	1	1	2	0	2
Renfrewshire HSCP	4	5	5	5	6	5	5	5	5	2	3
HSCP Total Mental Health Delays	68	64	64	70	70	64	69	70	73	55	18
Other Local Authorities Mental	2	5	7	6	5	5	5	5	10	3	7
NHSGGC Total Mental Health Delays	70	69	71	76	75	69	74	75	83	58	25

Summary

Overall there has been a month on month increase in the number of patients delayed since September 2023. Current performance is above the monthly planned position of no more than 58 Mental Health delays across all HSCPs. As at December 2023 there were a total of 83 Mental Health delays reported and local management information for the 19 February 2024 highlights a further increase to 98 Mental Health delays. NHSGGC's HSCPs account for 88.0% (73) of the overall total number of Mental Health delays reported with Glasgow City HSCP representing 78% of all HSCP delays reported across NHSGGC.

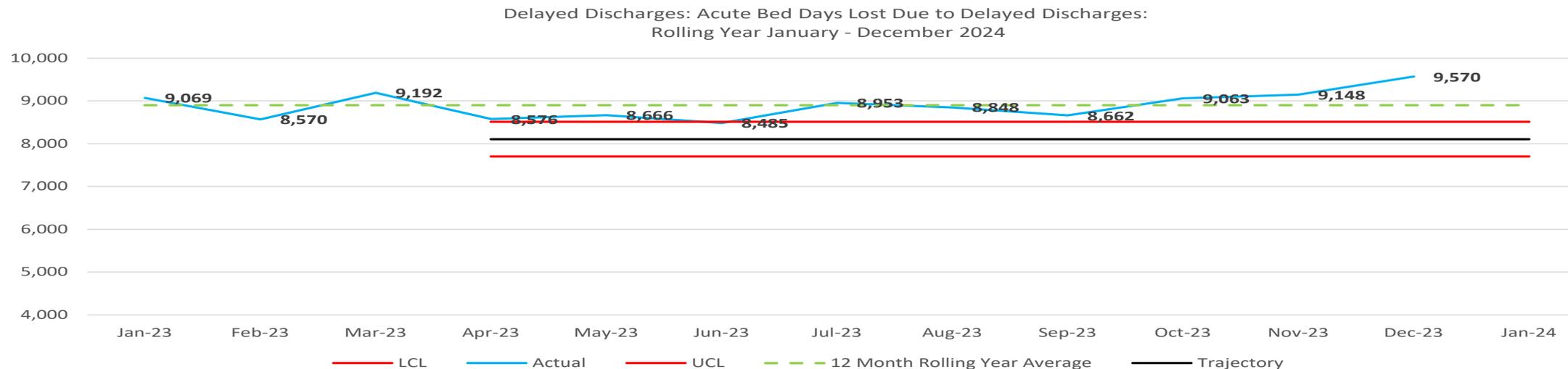
Three of the six HSCPs reported a marginal increase, Glasgow City reported a marginal decrease and two remained the same, namely East Renfrewshire and Renfrewshire HSCPs compared to the previous months position. Overall, there has been a notable increase in the number of Mental Health delays reported across other local authorities increasing from two in April to 10 in December 2023.

6. BETTER CARE: Number of Acute Bed Days Lost to Delayed Discharges

A reduction in the number of hospital bed days associated with delayed discharges

Target
8,108

Performance
9,570



Summary

Current Position (including against trajectory):

A total of **9,570** Acute bed days were lost to delayed discharges during December 2023, a 5% increase on the previous month's position. **Current performance is above the monthly trajectory of 8,108.**

Current Position Against National Target:

No national target relevant.

Projection to 31 March 2024:

No more than 8,108 bed days lost to delayed discharge each month by March 2024.

Key Actions

December 2023 saw a 5% increase in the number of bed days lost to delayed discharge. In addition to the actions outlined in the previous slides, the following actions are also underway:

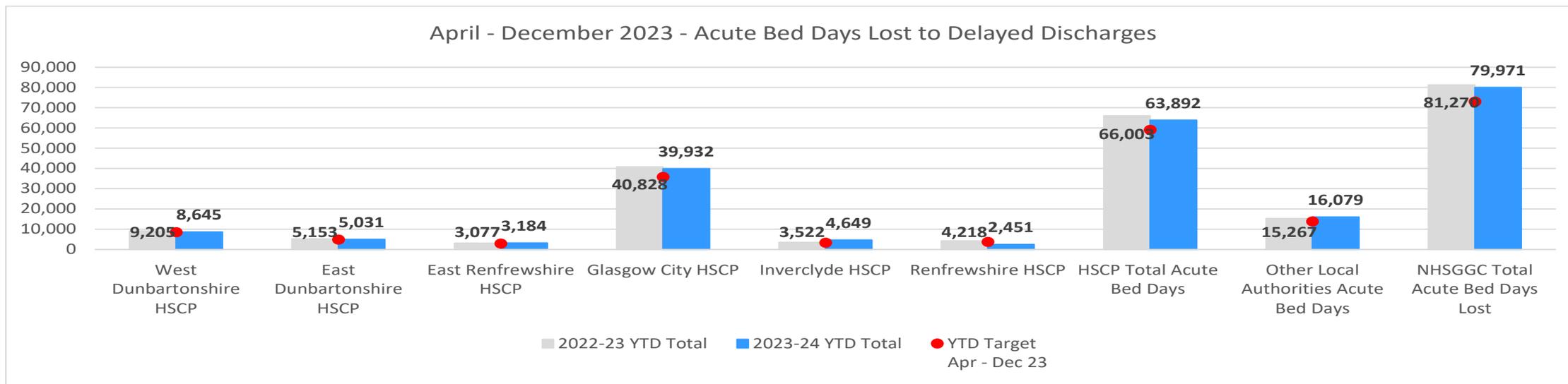
- As part of the Discharge without Delay (DwD) Criteria Led Discharge, a pilot aimed to promote quicker discharge and reduce the length of stay has been completed at Inverclyde Royal Hospital (IRH). A Board-wide Trak based plan is being rolled out across Acute wards from January 2024 onwards.
- Multi-agency Discharge Planning Events (MAP) were held on Medicine wards across each Acute site over the festive two week period and an outcome report is being drafted identifying recommendations for improvement.
- The new standardised DwD Highlight Reports have been introduced in each Sector to help reduce the number of bed days lost. The Unscheduled Care team provide data on key DwD metrics to each specialty General Manager, and then the DwD General Manager Lead for each Sector compiles the highlights to inform the narrative alongside the data.

6. BETTER CARE: Year To Date Acute Bed Days Lost to Delayed Discharges by HSCP (Continued)

A reduction in the number of hospital bed days associated with delayed discharges

YTD Target
72,968

Performance
79,971



Summary

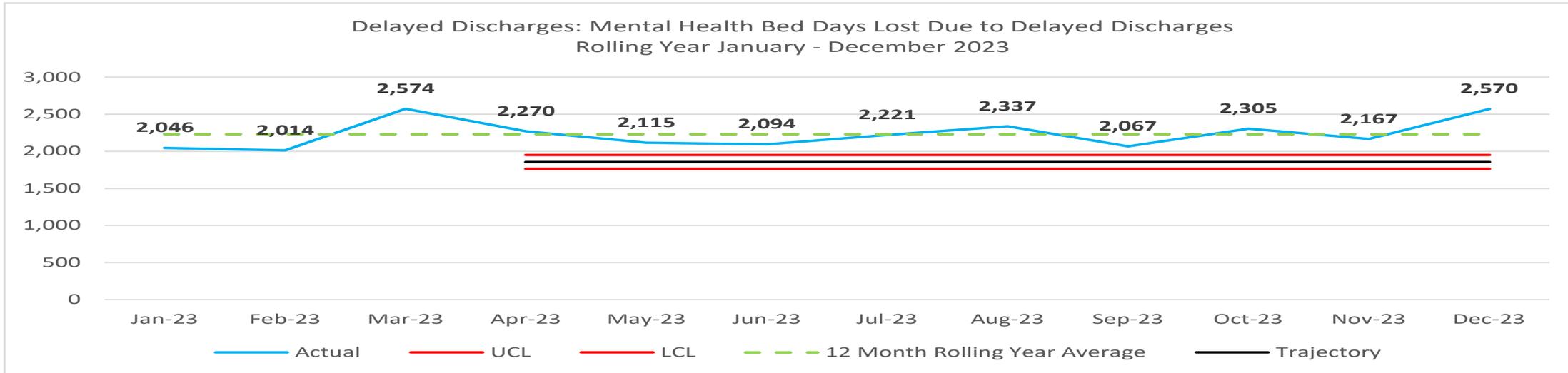
The graph above provides a year to date breakdown of Acute bed days lost to delayed discharges by NHSGGC's HSCPs. For the period April – December 2023, a total of 79,971 Acute bed days have been lost to delayed discharge across NHSGGC 1.6% reduction on the same period the previous year (81,270). The partnerships reporting the highest number of bed days lost to delayed discharge are Glasgow City HSCP (48%) and West Dunbartonshire HSCP (11%). Other local authorities account for 20% of the overall Acute bed days lost to delayed discharge.

7. BETTER CARE: Number of Mental Health Bed Days Lost to Delayed Discharges

A reduction in the number of hospital bed days associated with delayed discharges

**Target
1,857**

**Performance
2,570**



Summary

Current Position (including against trajectory):

A total of **2,570** Mental Health bed days were lost to delayed discharges during December 2023, a 19% increase on the previous month's position. **Current performance is above the monthly trajectory of 1,857.**

Current Position Against National Target:

No national target relevant.

Projection to 31 March 2024:

No more than 1,857 bed days lost to delayed discharge per month by March 2024.

Key Actions

December 2023 saw a 19% increase in the number of Mental Health bed days lost to delayed discharge. In addition to the actions outlined in the previous slides, the following actions are also underway:

- As part of the Discharge without Delay (DwD) Criteria Led Discharge, a pilot aimed to promote quicker discharge and reduce the length of stay has been completed at Inverclyde Royal Hospital (IRH). A Board-wide Trak based plan is being rolled out across Acute wards from January 2024 onwards.
- Multi-agency Discharge Planning Events (MAP) were held on Medicine wards across each Acute site over the festive two week period and an outcome report is being drafted identifying recommendations for improvement.
- The new standardised DwD Highlight Reports have been introduced in each Sector to help reduce the number of bed days lost. The Unscheduled Care team provide data on key DwD metrics to each specialty General Manager, and then the DwD General Manager Lead for each Sector compiles the highlights to inform the narrative alongside the data.

7. BETTER CARE: Year To Date Mental Health Bed Days Lost to Delayed Discharges by HSCP (Continued)

A reduction in the number of hospital bed days associated with delayed discharges

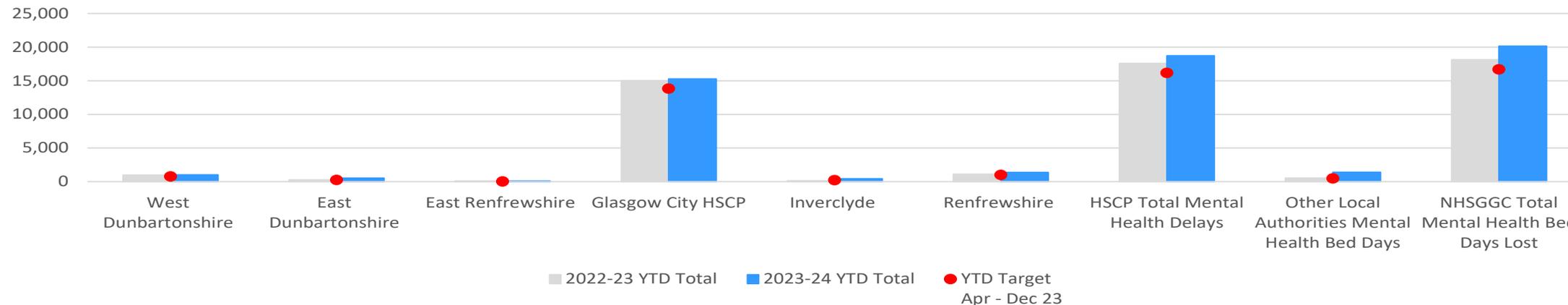
YTD Target

16,716

Performance

20,146

April - December 2023 - Mental Health Bed Days Lost to Delayed Discharges



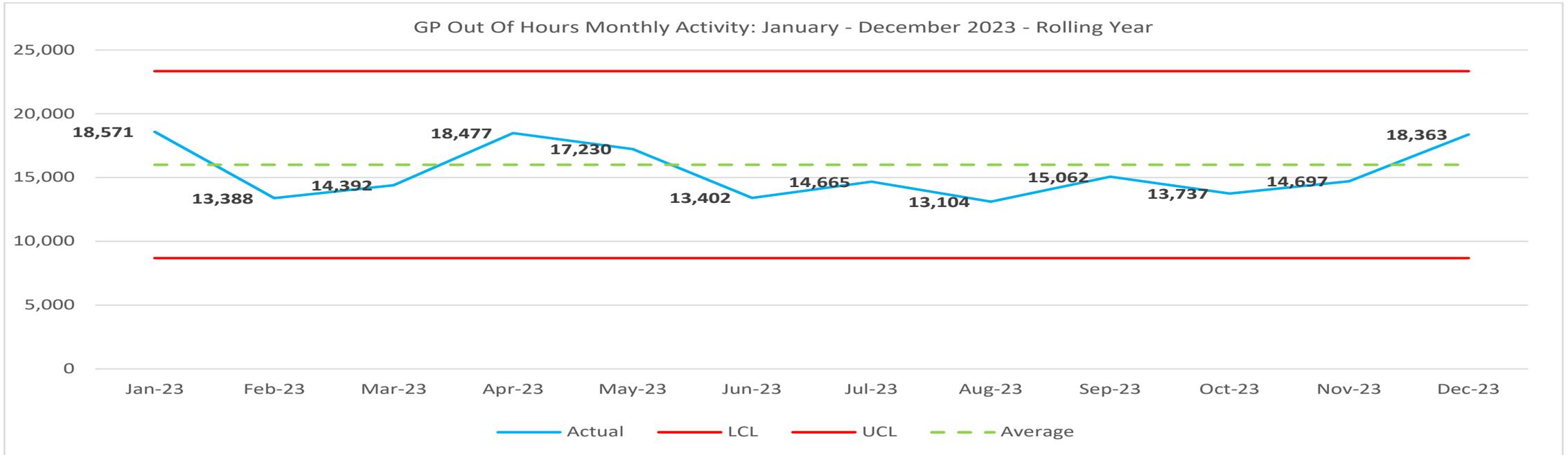
Summary

The graph above provides a year to date breakdown of Mental Health bed days lost to delayed discharges by NHSGGC’s HSCPs. For the period April – December 2023, a total of 20,146 Mental Health bed days have been lost to delayed discharge across NHSGGC an 11% increase on the same period the previous year (18,131). The partnerships reporting the highest number of Mental Health bed days lost to delayed discharge are Glasgow City HSCP (72%) and other local authorities account for 9% of the overall Mental Health bed days lost to delayed discharge.

8. BETTER CARE: GP Out Of Hours Activity

The number of patients using the GP out of Hours Services

For Information Only



Summary

Current Position (including against trajectory):

A total of **18,363** GP Out Of Hours contacts were made during December 2023. No Target as for information only.

Current Position Against National Target:

No relevant national target.

Projection to 31 March 2024:

NHSGGC remain fully committed to ensuring access to GP OOH Service.

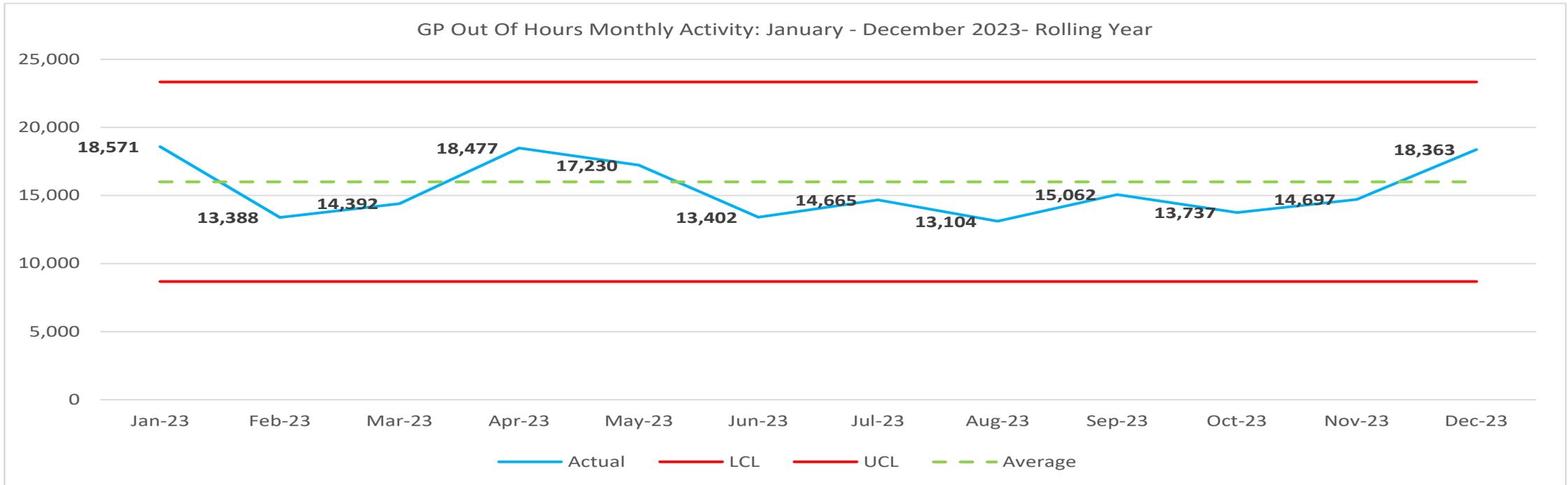
Overall, the GPOOH Service activity represents a monthly average of 15,424 site visits, home visits, GP advice contacts for the period January - December 2023.

9. BETTER CARE: Number of GP Out of Hours Scheduled Shifts Open

The percentage of scheduled GP Out Of Hour Shifts that were open

Target
90%

Performance
100%



Summary

Current Position (including against trajectory):

In December 2023, **100.0%** (304) of the 304 scheduled shifts were open against the NHSGGC's target of 90%. **Above the target by 10%.**

Current Position Against National Target:

No relevant national target.

Projection to 31 March 2024:

NHSGGC Target 90%. **The target continues to be exceeded.**

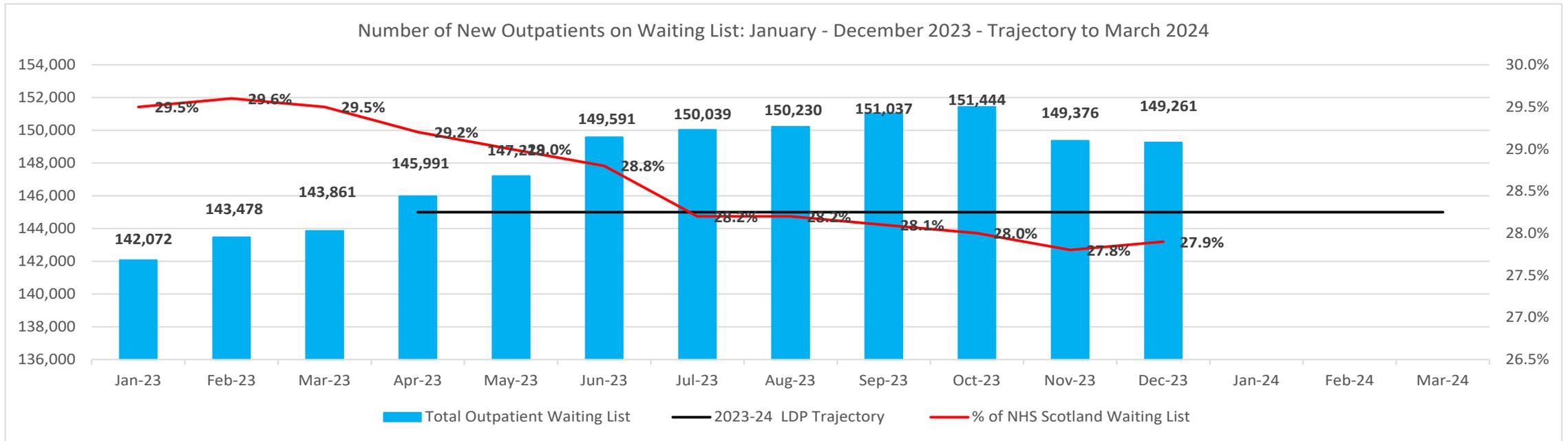
As seen in the chart above, overall performance in relation to the number of scheduled GP OOH shifts that are open to patients remains positive with performance continuing to consistently exceed the 90% target.

10. BETTER CARE: New Outpatient Wait List

The number of new outpatients on the new outpatient waiting list

Target
145,000

Performance
149,261



Summary

Current Position (including against trajectory):

As at the end of December 2023, there were a total of **149,261** patients waiting for a new outpatient appointment, above the 2023-24 Annual Delivery Plan trajectory of 145,000 by December 2023. **Above trajectory by 3.0%.**

Current Position Against National Position:

27.9% of NHS Scotland's outpatients waiting for a first new outpatient appointment at the end of December 2023 were NMSGC patients.

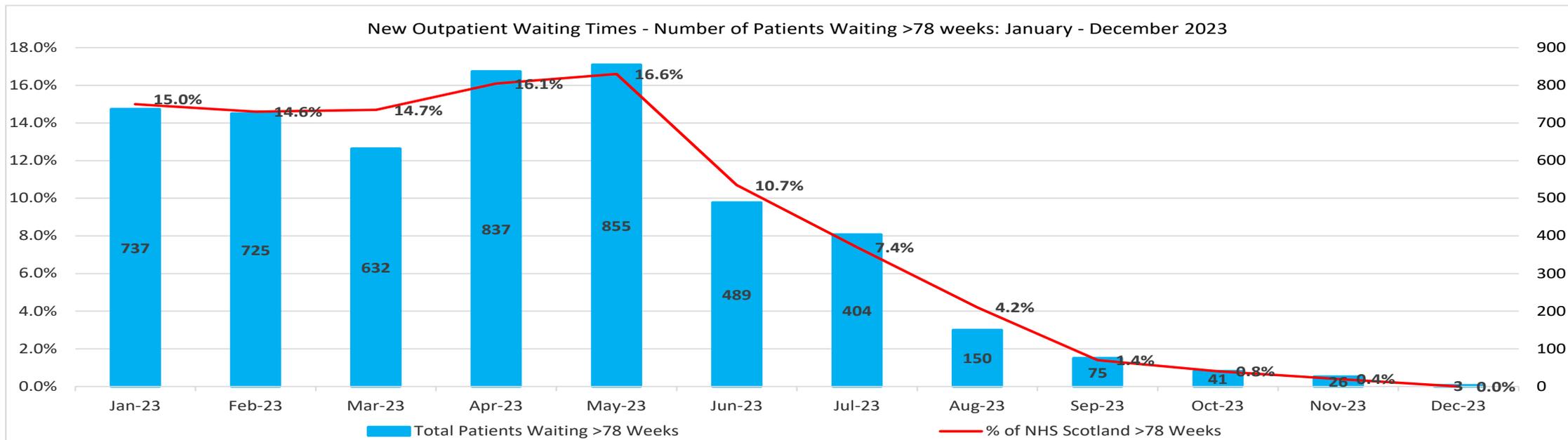
Projection to 31 March 2024:

2023-24 Annual Delivery Plan target is no more than 145,000 patients on the new outpatient waiting list by March 2024.

11. BETTER CARE: Number of New Outpatients waiting >78 weeks for a new outpatient appointment

Target
0

Performance
3



Summary

Current Position (including against trajectory):

At the end of December 2023, there were a total of **three** patients waiting >78 weeks for a first new outpatient appointment, a further improvement on the previous months' position. Whilst this is a significant improvement on the previous months' position, current performance is marginally above the 2023-24 Annual Delivery Plan reduction target of no new outpatients waiting >78 weeks by June 2023.

Current Position Against National Position:

Management information shows a total of 8,459 new outpatients were waiting >78 weeks for a first new outpatient appointment across NHS Scotland as of 29 December 2023.

Target to 31 March 2024:

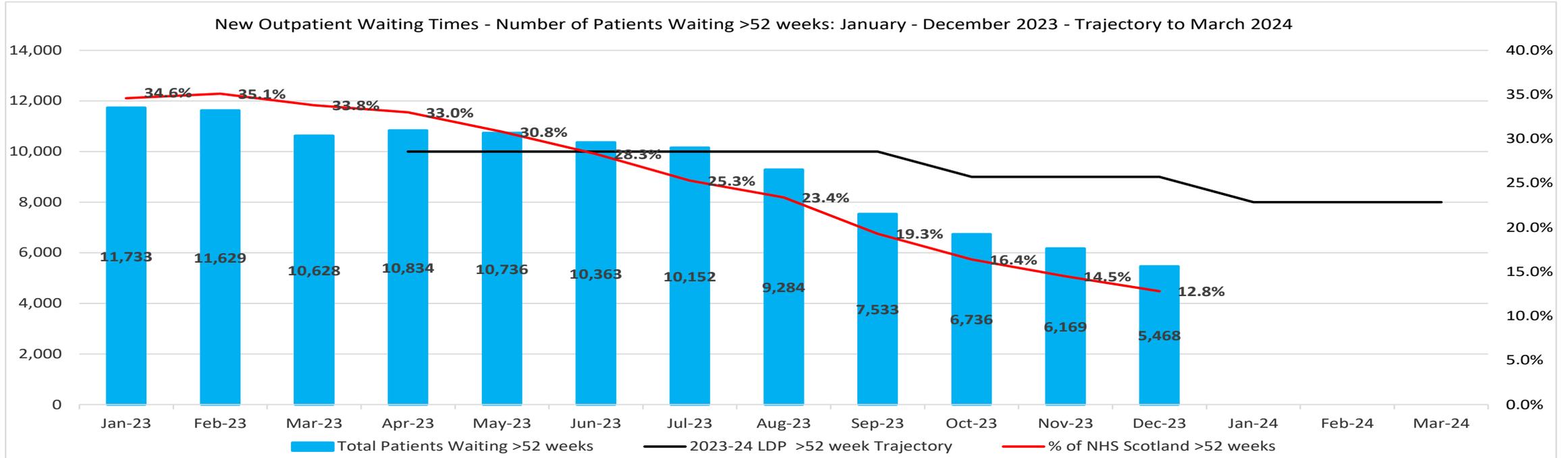
2023-24 Annual Delivery Plan target of no new outpatient should be waiting >78 weeks by June 2023. Whilst this target was not achieved by June 2023, steady progress has continued to be made and the forecast is that no new outpatients will be waiting >78 weeks by the end of March 2024.

Actions remain in place to reduce the remaining patients waiting and to ensure there are no new outpatients waiting >78 weeks by the end of March 2024.

12. BETTER CARE: Number of New Outpatients waiting >52 weeks for a new outpatient appointment

Target
9,000

Performance
5,468



Summary

Current Position (including against trajectory):

At the end of December 2023, there were a total of **5,468** patients on the new outpatient waiting list waiting >52 weeks for an appointment. Current performance is within the 2023-24 Annual Delivery Plan trajectory of no more than 9,000 new outpatients to be waiting >52 weeks by the end of December 2023. **39% within trajectory.**

Current Position Against National Position:

12.8% of NHS Scotland's outpatients waiting >52 weeks for a new outpatient appointment at the end of December 2023 were NMSGC patients.

Target at 31 March 2024:

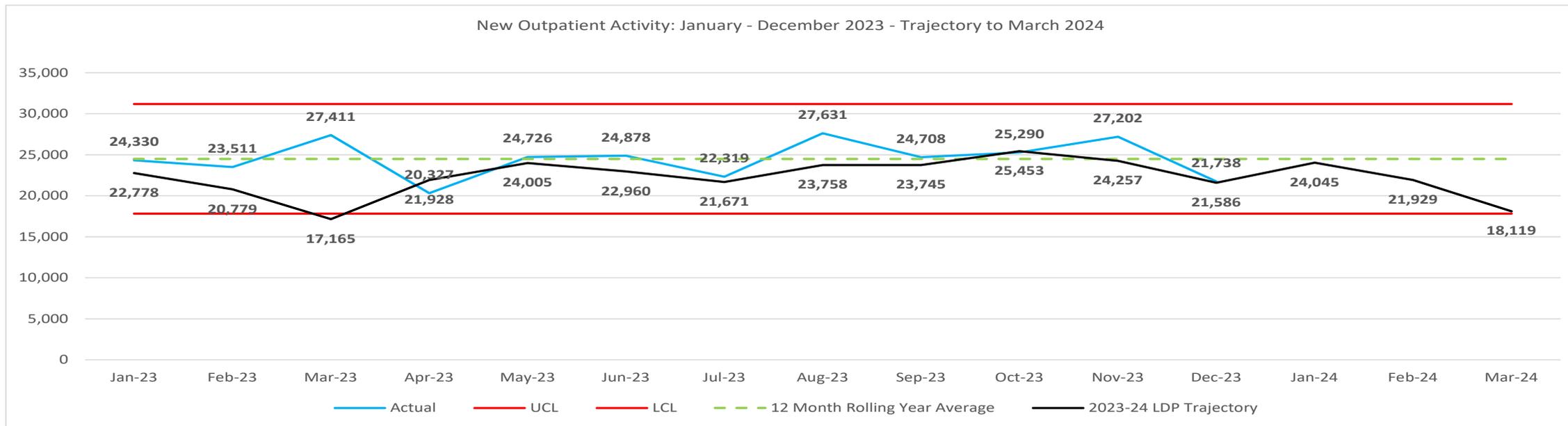
2023-24 Annual Delivery Plan target of no more than 8,000 new outpatients to be waiting >52 weeks by March 2024. Current performance is ahead of the year end planned position.

13. BETTER CARE: New Outpatient Activity

The number of new outpatients seen

Target
209,363

Performance
218,819



Summary

Current Position (including against trajectory):

A total of **218,819** new outpatients were seen during the period April - December 2023, above the 2023-24 Annual Delivery Plan trajectory of 209,363. **Exceeding trajectory by 5%.**

Current Position Against National Target:

No national position relevant.

Projection to 31 March 2024:

2023-2024 Annual Delivery Plan target of 273,456 new outpatients to be seen by March 2024. Performance is on track to exceed the March 2024 planned position.

Key Actions

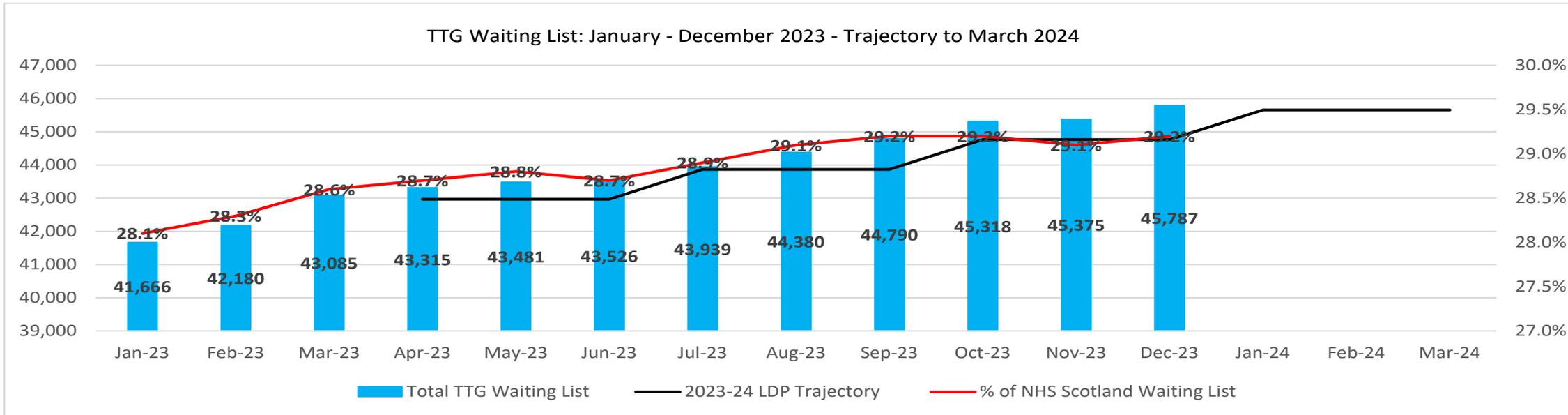
New outpatient activity is 5% above the 2023-24 Annual Delivery Plan trajectory for the period April - December 2023.

14. BETTER CARE: TTG Waiting List

The number of TTG patients on the TTG waiting list

Target
44,761

Performance
45,787



Summary

Current Position (including against trajectory):

At the end of December 2023, there were a total of **45,787** patients on the TTG waiting list waiting for an inpatient/daycase procedure, an increase on the previous months' position and marginally above the 2023-24 Annual Delivery Plan target of no more than 44,761 TTG patients on the TTG waiting list by December 2023. **2% above trajectory.**

Current Position Against National Position:

29.2% of NHS Scotland's total TTG patients waiting at the end of December 2023 were NHSGGC patients.

Projection to 31 March 2024:

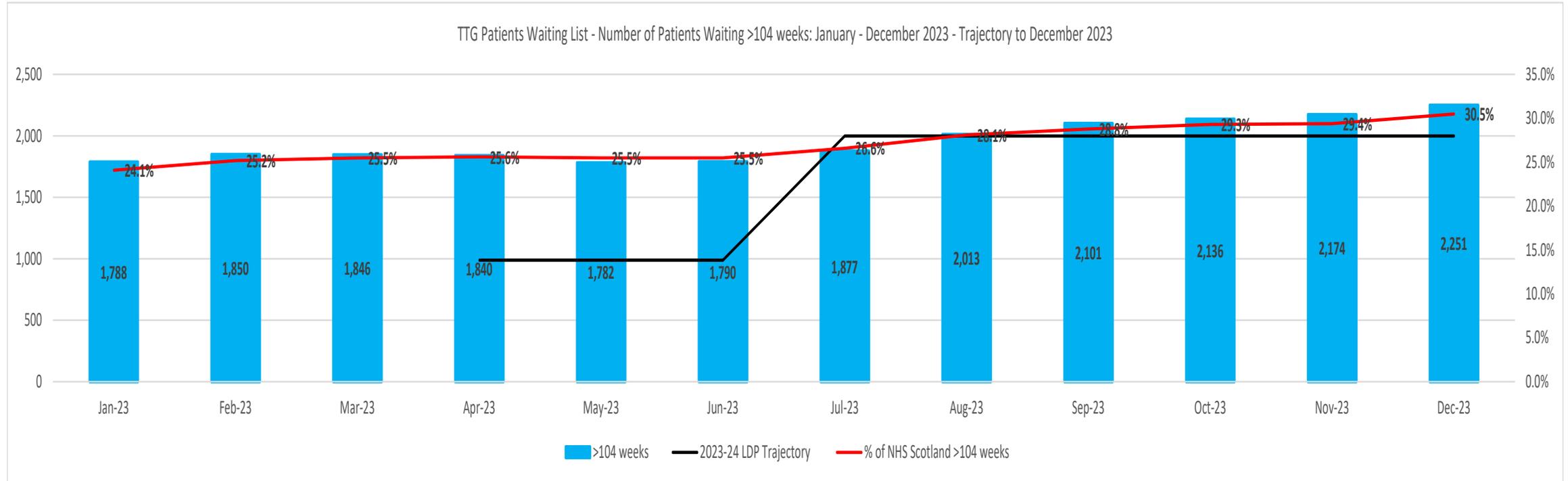
2023-24 Annual Delivery Plan target of no more than 45,657 patients on the TTG waiting list by March 2024.

Current performance is marginally above the planned position for December 2023. Capacity continues to be targeted at urgent, highest priority cases and long waiting patients. Elective activity has been maintained where possible given the high bed occupancy and competing priority for emergency patient activity. Incremental session delivery projected for each theatre site with operational teams working to deliver the end of March desired position. Actions to reduce the number of patients on the waiting list are outlined on slide 29.

15. BETTER CARE: Number of TTG patients waiting >104 weeks

Target
2,000

Performance
2,251



Summary

Current Position (including against trajectory):

At the end of December 2023, there were a total of **2,251** TTG patients waiting >104 weeks for an inpatient/daycase procedure on the TTG waiting list. **Current performance is 13% above the revised position of under 2,000 TTG patients waiting in this timeband.**

Current Position Against National Position:

30.5% of NHS Scotland's total patients waiting >104 weeks at the end of December 2023 were NHSGGC patients.

Projection to 31 March 2024:

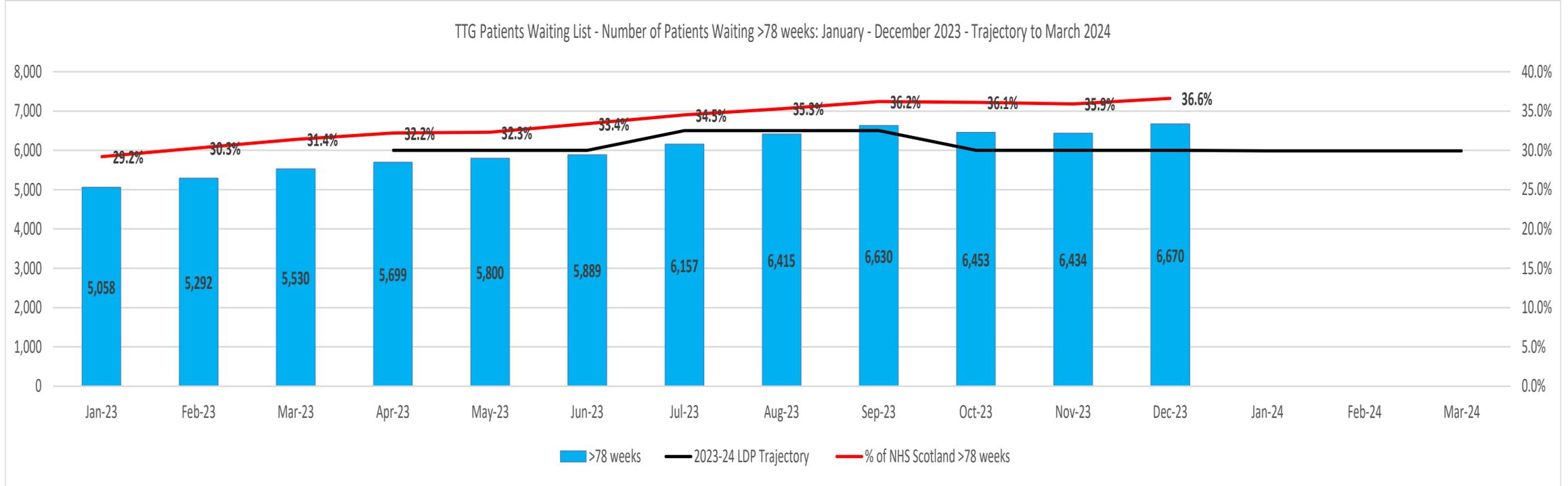
Discussions are ongoing with the Scottish Government to agree a trajectory for the remainder of 2023-24.

Actions to reduce long waiting TTG patients are outlined on slide 29.

16. BETTER CARE: Number of TTG patients waiting >78 weeks

Target
6,000

Performance
6,670



Summary

Current Position (including against trajectory):

As at December 2023 month end, a total of **6,670** TTG patients were waiting >78 weeks for an inpatient/daycase procedure on the TTG waiting list, above the 2023-24 ADP target of no more than 6,000 by December 2023. **Above trajectory by 11%.**

Current Position Against National Position:

36.6% of NHS Scotland's total patients waiting >78 weeks at the end of December 2023 were NHSGGC patients.

Projection to 31 March 2024:

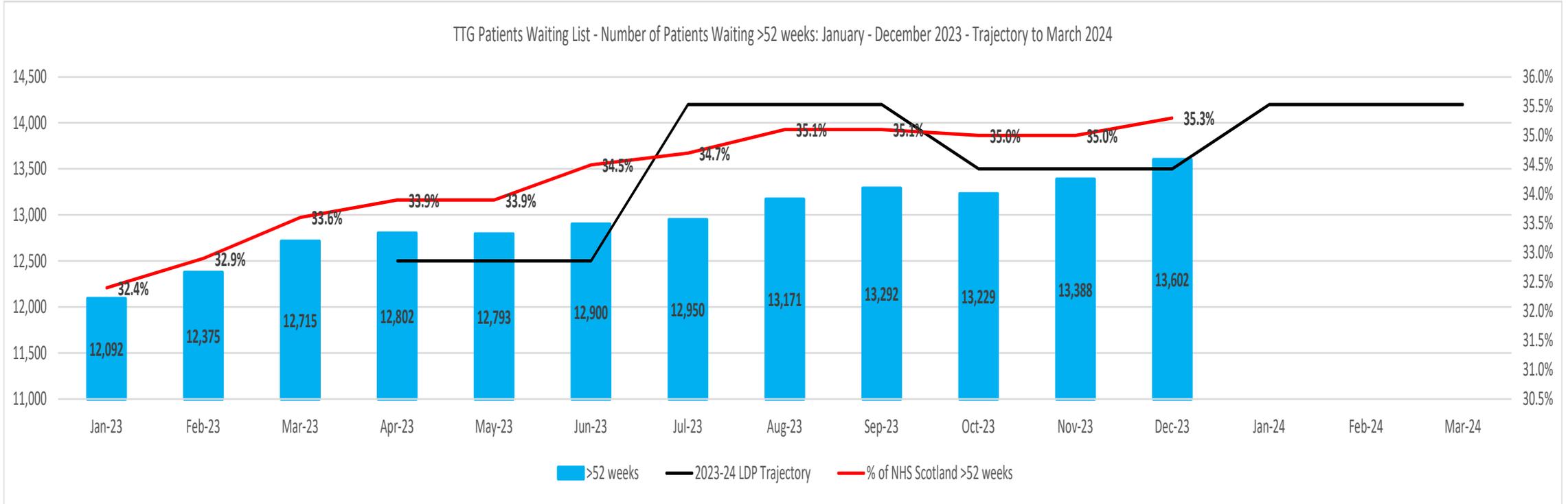
2023-24 Annual Delivery Plan of no more than 5,990 TTG patients waiting >78 weeks by March 2024.

Actions to reduce long waiting TTG patients are outlined on slide 29.

17. BETTER CARE: Number of TTG patients waiting >52 weeks

Target
13,500

Performance
13,602



Summary

Current Position (including against trajectory):

At the end of December 2023, there were a total of **13,602** TTG patients waiting >52 weeks for an inpatient/daycase procedure on the TTG waiting list. Current performance is marginally above the 2023-24 ADP target of no more than 13,500 by December 2023. **Above trajectory by 1%.**

Current Position Against National Position:

35.3% of NHS Scotland's total patients waiting >52 weeks at the end of December 2023 were NHSGGC patients.

Projection to 31 March 2024:

2023-24 Annual Delivery Plan of no more than 14,200 TTG patients waiting >52 weeks by March 2024.

Actions to reduce long waiting patients are outlined on the next slide.

17. BETTER CARE: Actions in place to reduce the number of long waiting TTG inpatients /daycases (Continued)

Key Actions

Key actions in place to help reduce the number of long waiting TTG patients include the following:

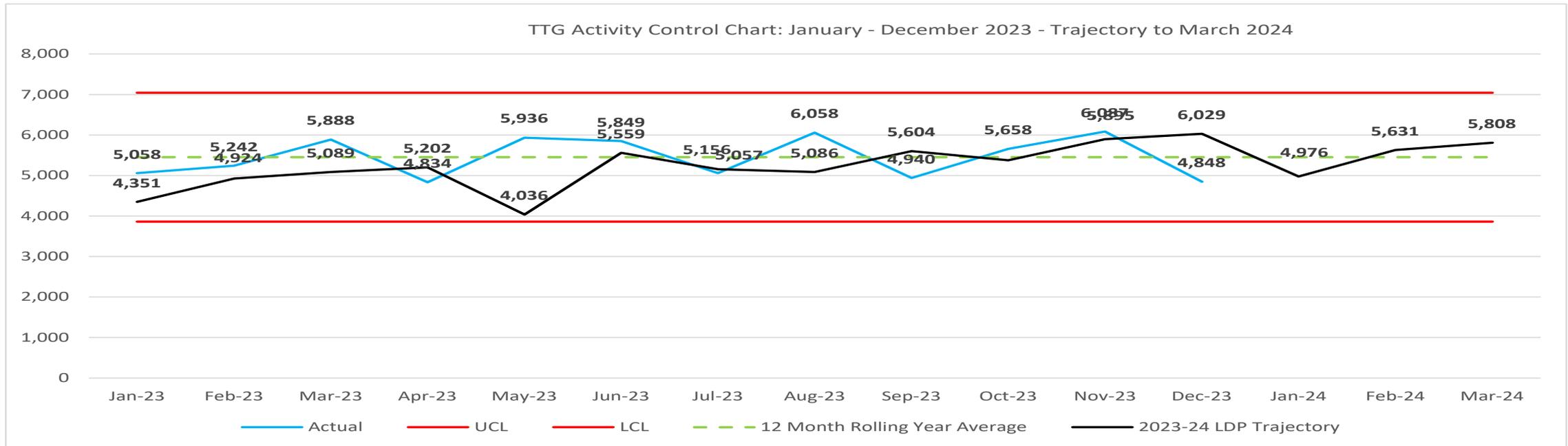
- Elective operating has been maintained at surgical hubs in the immediate post Christmas period to a greater level than previous years.
- Increasing elective session delivery across the sites has been the focus of review with operational teams. Nurse staffing including sickness and vacancy positions have been assessed by site and sector. An outline plan to achieve incremental increase in theatre sessions has progressed with sector teams with monitoring in place against delivery.
- It is recognised that the staff training programme in theatres is an integral part of service delivery. Programmes are running at each sector to support dual training covering anaesthetic and scrub skills. Options for accelerating these training programmes are being prioritised with a cross sector anaesthetic nurse course currently in progress.
- Increased level of Paediatric ENT sessions has been supporting a reduction in the longest waiting patient group. The number of patients waiting >104 weeks has reduced from 154 at the end of June 2023 to 33 at the end of December 2023.
- Trauma and Orthopaedic TTG patients continue, by volume, to create the greatest pressure for long waiting patients. There are currently 1,327 patients, who if not treated, will have waited >104 weeks for care by the end of March 2024. Capacity is being utilised across the sites to support the management of this patient group. The plan to increase Orthopaedic sessions at Gartnavel General Hospital (GGH) has been implemented to provide up to an additional six sessions a week (18 patients) being reinstated on the GGH site for priority waiting patients. Changes already made in extending Orthopaedic bed capacity at weekends is resulting in increased arthroplasty patient capacity and supporting Waiting List Initiative (WLI) sessions being delivered at weekends. Continuing this approach to substantiate increased beds and theatre capacity is subject to funding.
- Patients have been referred to fill the allocated capacity at Golden Jubilee National Hospital (GJNH) for Orthopaedics, Ophthalmology and the small allocation for General Surgery. Current projection from GJNH is for 95% of Joints to be delivered by end of March 2024 (961 patients of 1,012 allocation). Close liaison with GJNH operational staff to ensure sufficient patient referrals and patient preparation undertaken to maximise available capacity with more detailed clinical discussions now progressing relating to patient suitability and preparation for care at GJNH.
- No capacity has been received from the Forth Valley National Treatment Centre. The allocation for NHSGGC had been for 1,086 patients to have joint replacements in 2023-24 through this pathway. Discussions are ongoing with regard to the potential for capacity to be allocated to NHSGGC in 2024-25 with appropriate funding.

18. BETTER CARE: TTG Inpatient/Daycase Activity

The number of TTG inpatient/Daycases seen

Target
47,944

Performance
49,267



Summary

Current Position (including against trajectory):

A total of **49,267** patients were seen during the period April - December 2023, above the 2023-24 ADP trajectory of 47,944 for the period April - December 2023. **Exceeding trajectory by 3%.**

Current Position Against National Target:

No national target relevant.

Projection to 31 March 2023:

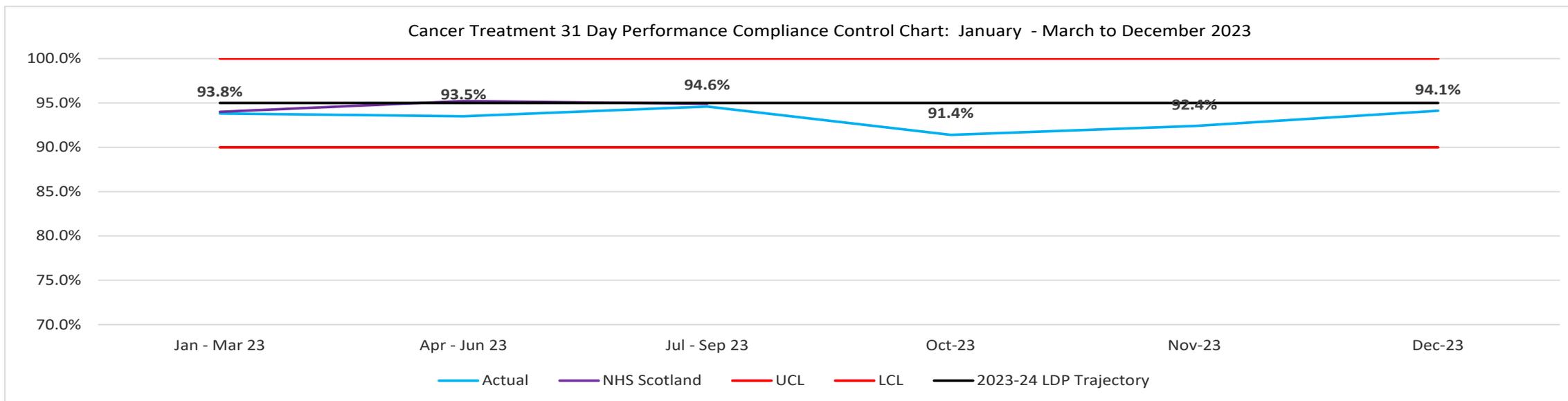
2023-24 Annual Delivery Plan target of 64,359 TTG patients to be seen by March 2024.

19. BETTER CARE: Access to Cancer Services Treatment Time: - % of Patients Treated within 31 days of Decision to Treat

95% of patients should wait no more than 31 days from decision to treat to first cancer treatment

Target
95%

Performance
94.1%



Please note: data from October 2023 onwards is provisional and subject to validation. The published data October - December 2023 is scheduled to be published on 26 March 2024.

Summary

Current Position (including against trajectory):

The latest provisional position is **94.1%** (506 of the 538 eligible patients started treatment within 31 days) for the month ending December 2023, a 1.7% improvement on the November 2023 position and below **target by 0.9%**.

Position Against National Target:

At the quarter ending September 2023, NHSGGC's performance was marginally below the latest national published position of 94.9%.

Projection to 31 March 2023-24:

The 2023-24 Annual Delivery Plan target remains at 95% to be achieved target in March 2024.

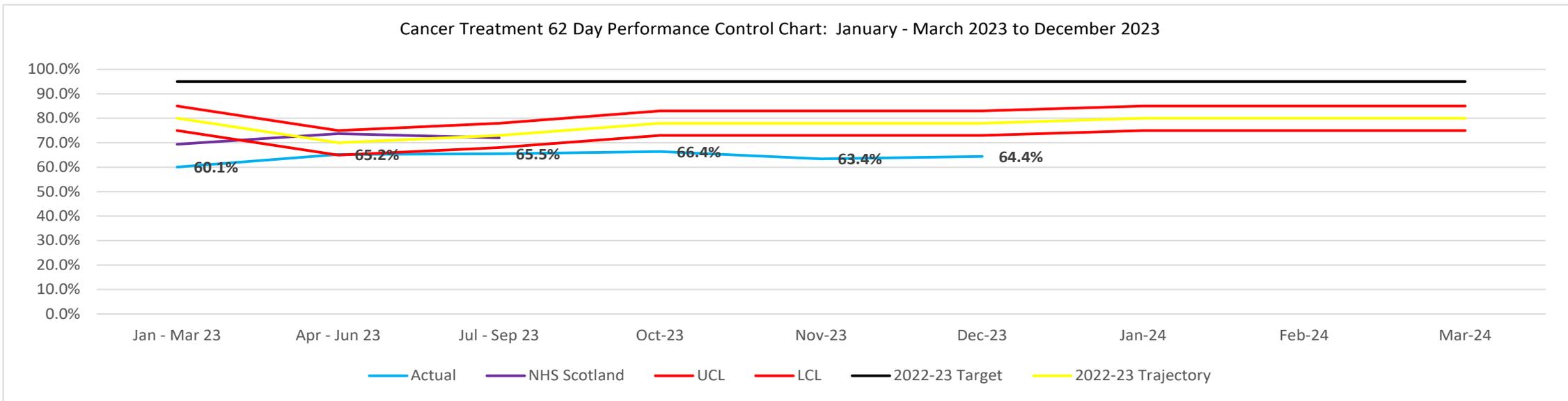
Key Actions

Current performance highlights an improvement on the previous months' performance. A total of seven of the 10 cancer types exceeded the 95% target. The cancer types below target are Cervical (80.0% - four of the five eligible referrals started their treatment within 31 days, a reduction on the 100.0% reported the previous month), Colorectal (94.1% - 64 of the 68 eligible referrals started their treatment within 31 days, an improvement on the 91.1% reported the previous month) and Urological (81.8% - 112 of the 137 eligible referrals started their treatment within 31 days, an improvement on the 80.5% reported the previous month). Actions to address performance in relation to tumour types more challenged are outlined in slide numbers 31 and 32.

20. BETTER CARE Access to Cancer Services - % of patients starting first cancer treatment within 62 days of receipt of urgent referral with a suspicion of cancer

95% of patients should wait no more than 62 days from urgent suspicion of cancer to treatment

Trajectory 78%	Performance 64.4%
---------------------------------	------------------------------------



Please note: data from October 2023 onwards is provisional and subject to validation. The published data October - December 2023 is scheduled to be published on 26 March 2024

Summary

Current Position (including against trajectory):

The latest provisional position is **64.4%** (244 of the 379 eligible referrals were seen) for the month ending December 2023, a marginal increase on the previous month's position of 63.4% and **below the trajectory of 78%**.

Against National Target:

At the quarter ending September 2023, NHSGGC's performance is below the latest national published position of 72.0%.

Projection to 31 March 2024:

2023-24 Annual Delivery Plan trajectory of 80% of patients starting their first cancer treatment within 62 days of receipt of urgent referral by March 2024. Work is underway to improve the current position as described in the next two slides.

In terms of volume of patients, the main challenges to performance continue to be in Colorectal (49.1% - 26 of the 53 eligible referrals started their treatment within 62 days) however, the volume of USOC referrals has increased by 74% on pre-pandemic levels, and Urology (36.4% - 32 of the 88 eligible referrals started their treatment within 62 days of referral) again the volume of USOC referrals has increased by 64% on pre-pandemic levels. Other lower volume cancer types challenged during December 2023, include Head and Neck (63.6% - 14 of the 22 eligible referrals started their treatment within 62 days of referral), the volume of USOC referrals has increased by 29% on pre-pandemic levels, and Upper GI (56.8% - 21 of the 37 eligible referrals started their treatment within 62 days of referral) the volume of USOC referrals also increased by 17% on pre-pandemic levels. Key actions to address performance in those cancer types facing ongoing challenges are outlined in the next two slides.

20. BETTER CARE: Access to Cancer Services - % of patients starting first cancer treatment within 62 days of receipt of urgent referral with a suspicion of cancer (Continued)

Overall

- Overall performance should be seen in the context of the year on year increase in the number of USOC referrals since pre-pandemic. USOC referrals increased by 54%, increasing from 43,821 in 2019-20 to 67,504 in 2022-23 across all cancer types. 2023-24 is predicted to further increase (71,433) based on current referral rates (representing a 63% increase on 2019-20 and a 6% increase on 2022-23 USOC referrals).
- A Short Life Working Group with Primary Care has met to agree actions to ensure only appropriate referrals are classified as USOC. Template referral guidelines for GP's will be developed to assist with this process, with work progressing in January 2024.
- A review of conversion rates for USOC referrals is also being undertaken to identify if increased referrals are reflected in number of cases going for surgery.
- The SG review of systems and processes commenced in the summer and a full report has still to be produced. A further site visit by the SG cancer lead is planned for end of January 2024.

Colorectal - December 2023 Performance: 49.1% - 26 of the 53 eligible referrals started their treatment within 62 days of referral. (Below the October - December 2023 Colorectal trajectory of 60%)

- Colorectal performance improved from 44.6% in November 2023 to 49.1% in December 2023. Overall activity reduced from 65 eligible referrals in November 2023 to 53 eligible referrals in December 2023. The focus remains on reducing the backlog of patients who have waited longer than 62 days.
- Colonoscopy delays continue to be the main reason for breach. The Endoscopy Insourcing commenced in September 2023, delivering six Endoscopy lists running on a Saturday. This is in addition to the initiatives already in place and previously reported and with the patient mix, which includes bowel screening, the Saturday sessions will scope approximately 150 patients per month for six months.
- Bowel screening Qfit parameters have been reviewed and revised for the three highest risk categories and updated triage guidance provided. This is now in place for those patients waiting >6 months for Colonoscopy/diagnosis.

Head & Neck - December 2023 Performance: 63.6% - 14 of the 22 eligible referrals started their treatment within 62 days of referral. (Below the October - December 2023 Head & Neck trajectory of 85%)

- Head & Neck performance improved from 40.0% in November 2023 to 63.6% in December 2023. Patient activity increased from 20 eligible referrals in November 2023 to 22 eligible referrals in December 2023.
- Within ENT, almost 300 patients remain over 14 days for first outpatient appointment despite additional clinics being run. This is an improving position however, a more robust solution is being worked on with the introduction of a diagnostic hub.
- The OMFS head and neck cancer service continues to provide mutual aid to NHS Lanarkshire. This additional workload has a detrimental impact on our ability to meet the 14 day target for outpatients and the additional operating influences our ability to meet the 31 day and 62 day target due to funding being received after the patients have been treated. Funding is required prior to increasing the additional capacity to manage the additional patients and West of Scotland planning negotiations are underway to seek a more sustainable solution for this activity.

20. BETTER CARE: Access to Cancer Services - % of patients starting first cancer treatment within 62 days of receipt of urgent referral with a suspicion of cancer (Continued)

Head & Neck (Continued)

- We have been successful in securing £390k non-recurring funding for the Optimal Head & Neck Pathway. The funding will facilitate the following:
 - ENT Diagnosis Hub at the QEUH, will significantly increase capacity and reduce waiting times for rapid diagnosis.
 - ENT Ultrasound Service development, develop and train two Sonographers to support service expansion. This additional capacity will support faster diagnostics at the front end of the Head & Neck pathway.
 - Five digital pathway reporting stations, to permit five Head & Neck pathologists working in NHSGGC to report pathology cases quicker by allowing a fully digital workflow. To improve turnaround time of pathology samples to ensure patients have the required information available for full Multi-Disciplinary Team (MDT) discussion.

Upper GI - December 2023 Performance: 56.8% - 21 of the 37 eligible referrals started their treatment within 62 days of referral. (Below the October - December 2023 Upper GI trajectory of 86%)

- Upper GI performance reduced from 61.3% in November 2023 to 56.8% in December 2023. Overall activity increased from 31 eligible referrals in November 2023 to 37 eligible referrals in December 2023. Endoscopy actions noted above continue to support the Upper GI position.
- Diagnostic tests, particularly PET CT are the main reason for breach. PET CT is recovering from operational difficulties and running additional evening sessions to address waiting times.

Urology - December 2023 Performance: 36.4% - 32 of the 88 eligible referrals started their treatment within 62 days of referral. (Below the October - December 2023 trajectory of 55%)

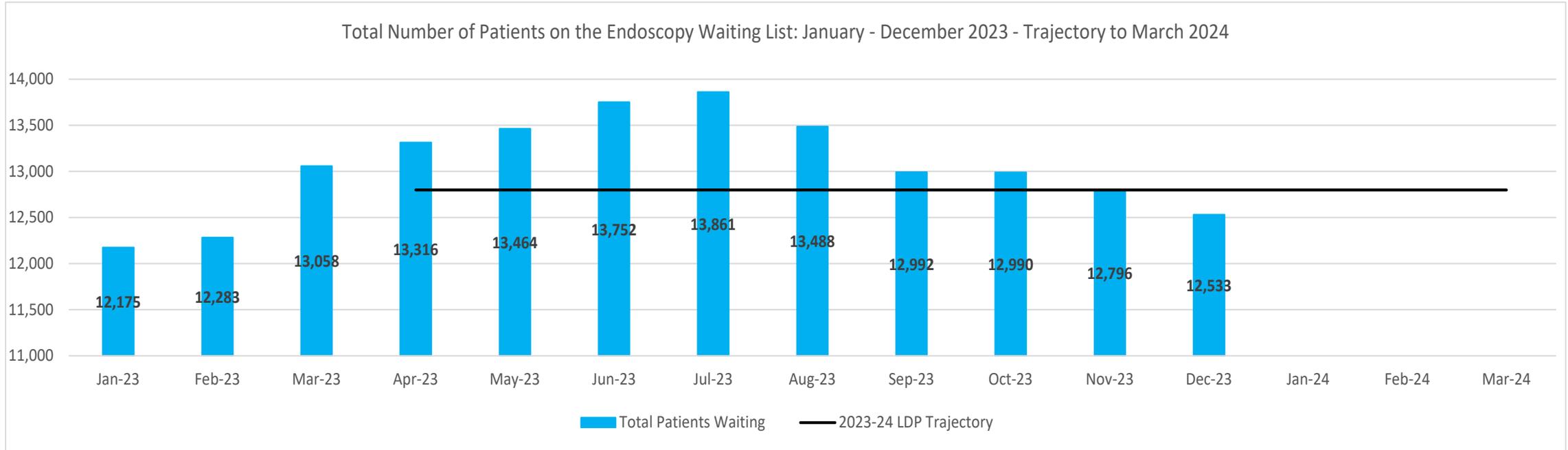
- Urology performance improved slightly from 36.1% in November 2023 to 36.4% in December 2023. Activity reduced from 97 eligible referrals in November 2023 to 88 eligible referrals in December 2023. The focus remains on reducing backlog of patients currently waiting over 62 days, substantial additional treatment capacity is required to improve the performance.
- The prostate pathway has been mapped and steps removed to aid early diagnosis. The main blockages continue to be Transrectal Ultrasound (TRUS)/Transperineal (TP) biopsy, clinic appointment following MDT and Robotic Assisted Laparoscopic Prostatectomy (RALP).
- Additional TRUS, TP Biopsy sessions, clinics (surgery and oncology) and RALP lists continue to run.
- 33 RALP procedures were undertaken in October, 37 in November and provisional data indicates 30 procedures in December 2023. This is against a planned target delivery of 24 per month. Additional mid-week theatre sessions took place in January 2024.
- Consultant staffing remains challenging due to vacancy and maternity leave. There have been no applicants for the additional substantive post. A part time locum appointment started in October 2023 for six months.
- The audit of the National Haematuria Pathway, has now been completed and shows good compliance and a reduction in the patients progressing to cystoscopy.
- The backlog of Trans Urethral Resection of Bladder Tumour (TURBT) procedures has halved in the past three months - additional capacity is being sought to drive the waiting time down from six weeks to below 31 days.

21. BETTER CARE: Diagnostics - Endoscopy Waiting List

Number of patients on the Endoscopies waiting list

Target
12,800

Performance
12,533



Summary

Current Position (including against trajectory):

As at December 2023 month end, there are **12,533** patients on the overall waiting list, a further reduction on the previous months' position and within the 2023-24 Annual Delivery Plan trajectory of no more than 12,800 patients on the Endoscopy Waiting List by December 2023. **Within trajectory.**

Current Position Against National Position:

No relevant national position.

Projection to 31 March 2024:

2023-24 Annual Delivery Plan target of no more than 12,800 patients on the Endoscopy waiting list by March 2024. Current performance is ahead of the planned position for March 2024.

Key improvement actions remain in place to sustain the improvements made to date and further reduce the number of patients waiting.

22. BETTER CARE: Diagnostics - Endoscopy Activity

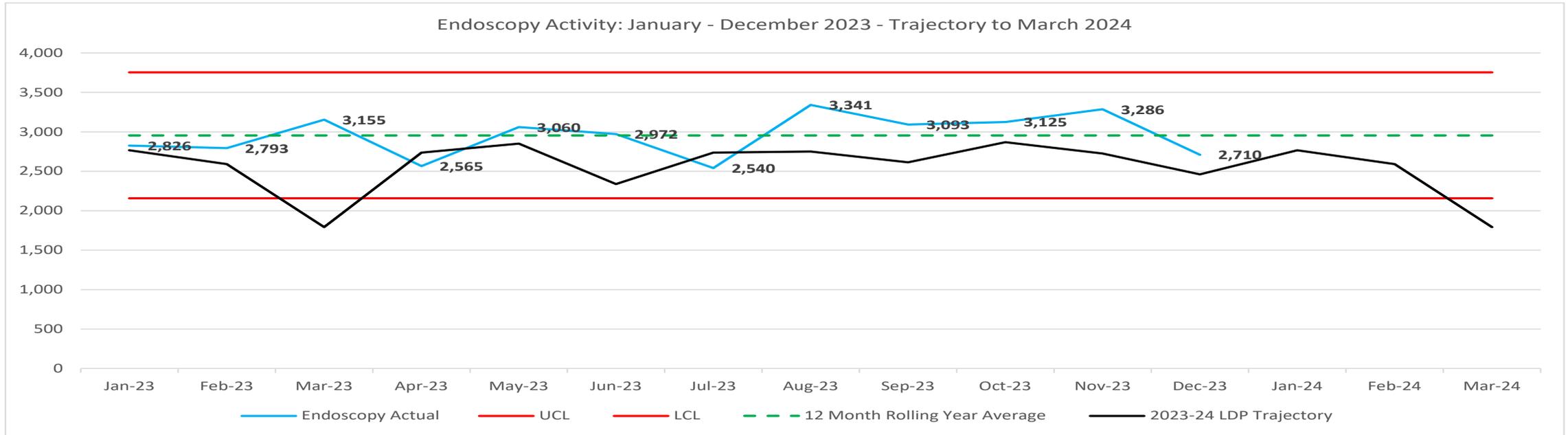
Number of Endoscopy tests carried out

Target

24,083

Performance

26,692



Please note: data relating to December 2023 is provisional.

Summary

Current Position (including against trajectory):

Annual

Current Position Against National Target:

Projection to March 2024:

A total of **26,692** endoscopies were carried out during the period April - December 2023, above the 2023-24 Delivery Plan trajectory of 24,083. **Exceeding trajectory by 11%.**

No national target relevant.

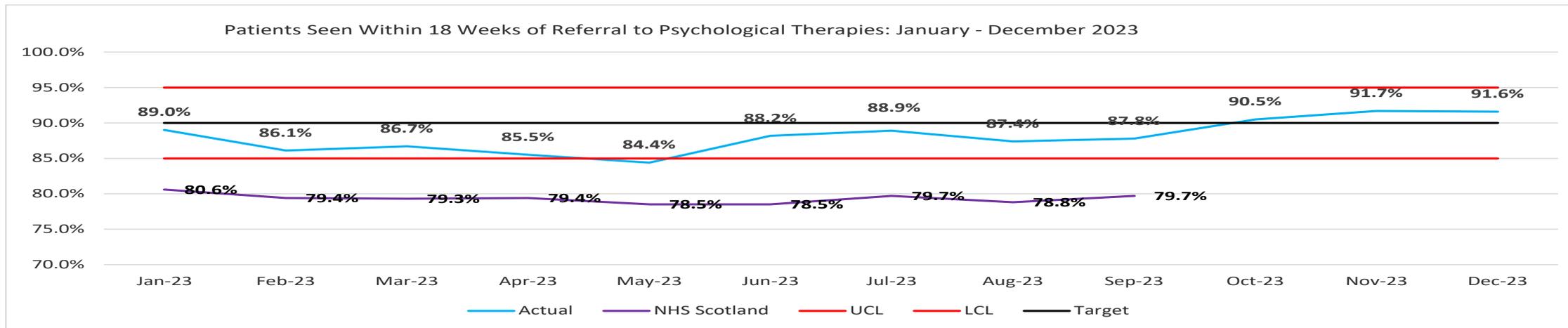
2023-24 Annual Delivery Plan target of 31,234 endoscopies carried out by March 2024. Performance is on track to exceed the March 2024 planned position.

23. BETTER CARE: Psychological Therapies - % of eligible referrals starting treatment <18 weeks of referral

At least 90% of eligible referrals will wait no longer than 18 weeks from referral to start their first treatment

Target
90%

Performance
91.6%



Please note: The national published October - December 2023 data is scheduled to be published on 5 March 2024.

Summary

Current Position (including against trajectory):

In December 2023, **91.6%** eligible referrals were seen <18 weeks of referral, within the expected position of 87.0%. **4.6% above the trajectory of 87% and above the national target of 90%.**

Current Position Against National Target:

National target 90%. Performance remains significantly above the national position of 79.7% for the latest published month ending September 2023.

Projection to 31 March 2024:

Current performance is exceeding the national target of 90%.

Key Actions

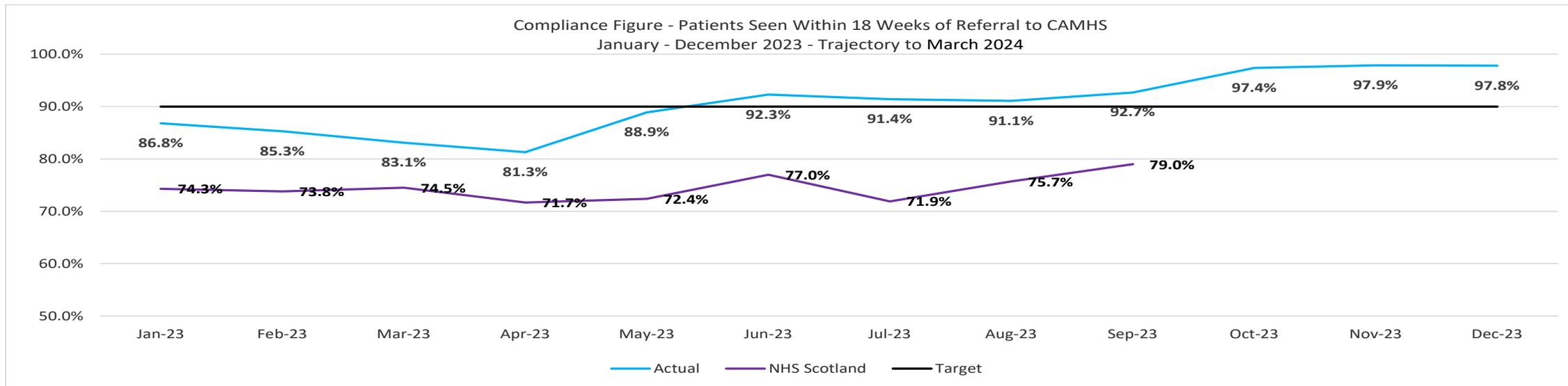
Performance is currently exceeding the planned position for December 2023. Services have continued to prioritise actions to deliver against the standard and reduce the number of long waiting patients.

24. BETTER HEALTH: Child and Adolescent Mental Health - % of eligible patients starting treatment <18 weeks of referral

At least 90% of eligible referrals will wait no longer than 18 weeks from referral to start their first treatment

Target
90%

Performance
97.8%



Please note: The national published October - December 2023 data is scheduled to be published on 5 March 2024.

Summary

Current Position (including against trajectory):

In December 2023 **97.8%** of eligible CAMHS patients referred for treatment started treatment <18 weeks of referral, above the 2023-24 ADP trajectory of 90% for December 2023 and above the national target of 90%. **Above the 2023-24 ADP target by 7.8%.**

Current Position Against National Target:

National Target 90%. Performance for the latest monthly published position (September 2023) was 92.7%, significantly above the national position of 79.0%.

Projection to 31 March 2024:

2023-24 ADP Target 90% by March 2024. Currently exceeding the national target.

Current monthly performance continues to exceed the planned position for the eighth consecutive month.

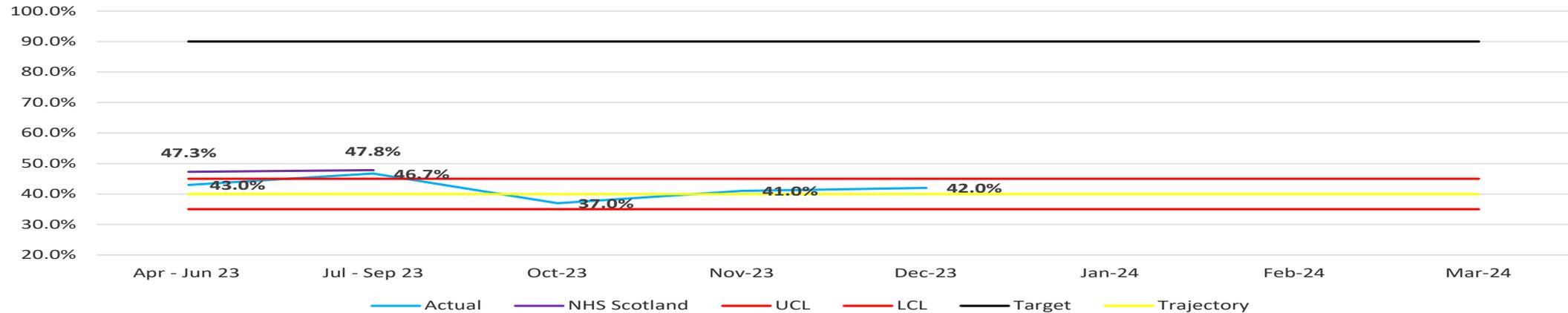
25. BETTER CARE: MSK Physiotherapy Waiting Times - % of patients seen <4 weeks

At least 90% of referrals will wait no longer than 4 weeks from referral to start treatment

**Target
90%**

**Performance
42.0%**

Patients Seen Within 4 Weeks of Referral to MSK Services: April - June 2023 - December 2023 - Trajectory to March 2024



Please note: monthly data relating to October 2023 onwards is provisional and will be subject to validation. Also of note is local data relates to MSK Physiotherapy adults only whereas the national data reflects a wider cohort of patients. The data is currently being reviewed. The national published data October - December 2023 is scheduled to be published on 19 March 2024.

Summary

Current Position (including against trajectory):

In December 2023, **42%** of patients were seen within four weeks, a further improvement on the previous months' position however, below **the national target of 90%**. This figure relates to the percentage of urgent referrals seen. Until the routine waiting times are closer to the four week target, the percentage of patients seen within four weeks will not vary greatly as they constitute the urgent referrals. However, the service is in the planning stages to improve performance against target by utilising GP sessional commitment to see routine patients at the point of referral (see the next slide for more detail).

Current Position Against National Target:

Performance for the latest national published position (quarter ending September 2023) is 46.7%, marginally below the national position of 47.8%.

Projection to 31 March 2024:

The projection for end March 2024 was to reduce routine waiting times to six weeks as part of the aim of the priority project work. The service was on track to achieve this until demand rose significantly in August 2023 and has remained high since. The service is preparing a briefing update report with revised trajectory data based on a projected referral rate of 71k referrals (previous trajectory data was based on a referral rate of 54k referrals).

The programme of quality improvement work underway to further improve and sustain the improvements made to date are outlined on the next slide.

25. BETTER CARE: MSK Physiotherapy Waiting Times: % of patients seen <4 weeks (Continued)

Key Actions

- Agency staff have been employed for 12 weeks specifically to do WLI work. Their diary templates have been designed accordingly. They started in post in October/November 2023 and the service is now able to extend four of these seven staff until end February 2024. The staff have focused on addressing routine waiting times which will decrease by one week in January 2024. Although capacity has improved as a result of the agency staff the hoped improvement in waiting times has not been realised due to the increased demand since August 2023.
- Another test of change was carried out on 22 January 2024. This project aims to increase the percentage of patients seen within the four week target. GP Advanced Practice Physiotherapists (APP), in their MSK sessional commitment, will see routine patients at point of referral to provide bespoke advice and supported self management information. This will utilise their skillset to replicate their role within GP practice and will focus on patients who self refer (i.e. they have not already seen a GP APP or other Health Care Practitioner). The project will create approximately 300 extra new patients per month. Data will be monitored to assess whether the percentage of patients supported to self manage (without re-accessing the service) is similar to the 79% achieved in a primary care setting.
- A Standard Operating Procedure has been produced and continues to be adopted to maximise efficiency - local admin staff to merge any two un-utilised return slots in clinician's diaries and convert to new patient slots. This process created an additional 25 new patient appointments across NHSGGC in December 2023.
- The MSK service is scoping out the number of referrals where the evidence base states that the patient is "less likely" to benefit from MSK. This relates to three categories of patients i.e. those patients who have been to MSK in the last year with the same condition; those patients who have been through the Pain Management Service with the same condition; and those patients with widespread body pain (as will not truly be MSK pathology). This is with a view to focusing service provision on those who are most likely to benefit. Early indicators are that "widespread body pain" (i.e. non MSK condition) equates to around 3.6% on average of each staff caseload. This would equate to just over 2,000 new patient appointments each year. The service plan to manage these patients differently with supported self management information and is working to progress this. The service will be mindful that any actions do not impact on any other Primary or Secondary Care services.

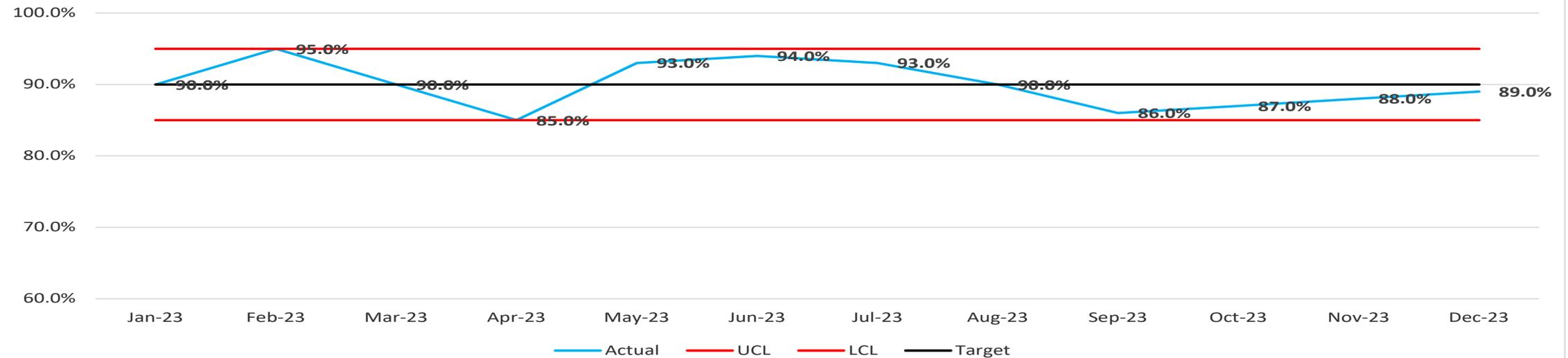
26. BETTER CARE: Podiatry Waiting Times: % of patients seen <4 weeks

At least 90% of clients will wait no longer than 4 weeks from referral to start treatment

Target
90%

Performance
89.0%

Patients Seen Within 4 Weeks of Referral to Podiatry: January - December 2023



Summary

Current Position (including against trajectory):

89% of eligible podiatry patients were seen <4 weeks of referral in December 2023, a further improvement on the previous months' position albeit marginally below the 90% target. **1% below target.**

Current Position Against National Target:

No national position available.

Projection to 31 March 2024:

Target of 90% (national target). **Performance is expected to be in line with the national target by the end of February 2024.**

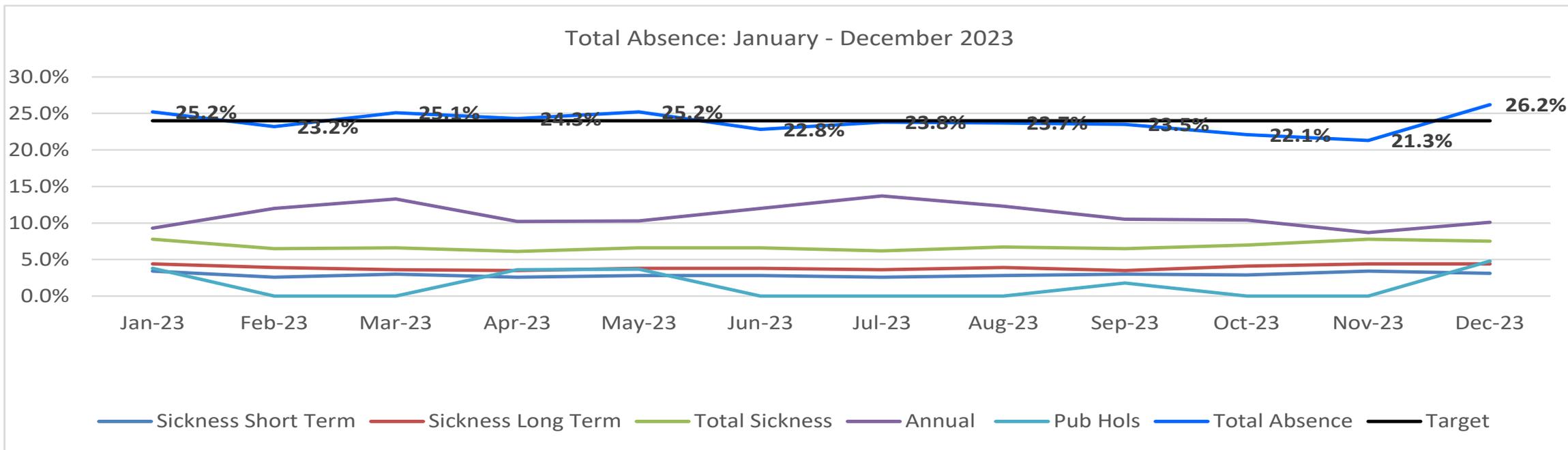
Overall, there has been a month on month improvement in performance during the past three months' albeit performance is marginally below (1%) the national target of 90%. As previously indicated, overall performance is due to the legacy issue from August 2023 where the referral rate of 4,800 was the highest ever reported and the October 2023 school holiday resulting in reduced capacity. The service is confident that performance will achieve the national target due to the successful recruitment to four vacant posts within the service in December 2023 and all new recruits are now in post.

27. BETTER WORKPLACE: Staff Absence Total

The reasons for absence across NHSGGC

Target
24.0%

Performance
26.2%



Summary

Current Position:

During December 2023, overall absence across NHSGGC was 26.2%. The highest levels of absence across NHSGGC were due to Annual leave (10.1%), sickness absence (7.5%), Public Holidays (4.8%) and Maternity Leave (2.1%).

Current Position Against National Target:

No relevant national target.

Projection to 31 March 2024:

No projection has been agreed.

Overall absence across NHSGGC was 26.2% in December 2023, representing an increase on the 21.3% reported in November 2023.

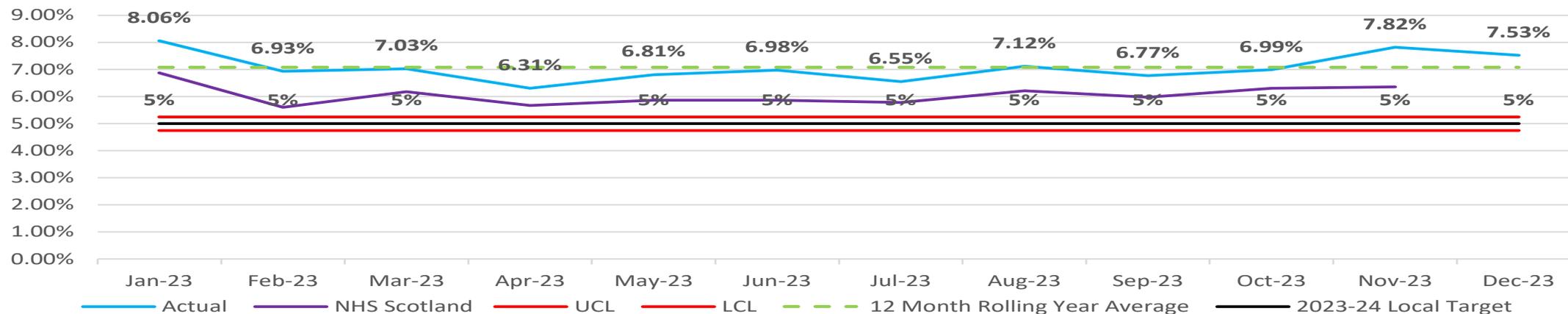
28. BETTER WORKPLACE: Staff Sickness Absence Rate

Reduce sickness absence percentage to meet local target of 5%

Target
5.0%

Performance
7.53%

Sickness Absence Control Chart: January - December 2023



Summary

Current Position (including against trajectory):

Current performance **7.53%**. **2.53% above the local target of 5.0%**.

Current Position Against National Target:

Above national average of 6.38% for November 2023. Not yet received data for December 2023.

Projection to 31 March 2024:

Local target of 5% and national target of 4%. Current projection is above both targets.

Key Actions

Current performance of 7.53% (3.14% short term and 4.38% long term) represents a 0.29% decrease on the previous months' position (7.82%) and is 1.25% lower than December 2022 (8.78%). Overall, short term absence decreased on the previous month by 0.30%, and long term stayed the same. Acute conveys an overall reduction of 0.07%, HSCPs reduced by 0.62%, Estates and Facilities reduced by 0.47% and Corporate Services reduced by 0.70% when compared to the previous month. Deep dives are being undertaken into areas that increased during December 2023 and appropriate action will be taken.

Action plans and trajectories are in place for each area to reduce sickness absence and support employees back to work with a continued focus on earlier intervention and enhanced support for stress-related absence. A review of long term cases in all areas is continuing to ensure that all appropriate measures are in place and under regular review, and the HR Support and Advice Unit are proactively reaching out to managers where staff have high incidences of short term absence but aren't already being supported by HR to ensure appropriate support is being provided and action is being taken.

Specific actions include: HR supporting cases less than three months in Estates and Facilities due to an increase in new long term cases; Focusing HR resource on Band 5 Nursing absence cases to drive earlier return to work; Coaching managers through back to basics sessions - managing in line with policy and moving cases on in a timely manner; Introduction of daily reporting, enhancing monitoring of absence levels, and weekly reporting to provide assurance around progression of cases.

RATIONALE				
BETTER HEALTH				
No	Measure	Targets	Control Limits	Slide Number
1	Alcohol & Drugs Waiting Times - % of referrals that start treatment <3 weeks of referral	National Target	Based on 5% variance from target	6
BETTER CARE				
No	Measure	Targets	Control Limits	Slide Number
2	Unscheduled Care: A&E 4 Hour Waits	National Target	Based on 5% variance from trajectory	7
3	Unscheduled Care: A&E Attendances	Local Target	Not Applied	9
4	Delayed Discharges: Number of Acute Delayed Discharges	Local Target	Based on 5% variance from trajectory	11
5	Delayed Discharges: Number of Mental Health Delayed Discharges	Local Target	Based on 5% variance from trajectory	13
6	Delayed Discharges: Number of Acute bed days lost to delayed discharges	Local Target	Based on 5% variance from trajectory	15
7	Delayed Discharges: Number of Mental bed days lost to delayed discharges	Local Target	Based on 5% variance from trajectory	17
8	GP Out Of Hours Activity	Local Target	Based on 5% variance from target	19
9	GP Out Of Hours: % of Scheduled Shifts Open	For Information	Not Applied	20
10	Number of patients on the New Outpatient Waiting List	2023-24 Planned Care Reduction Target	Not Applied	21
11	Number of New Outpatients Waiting >78 weeks	2023-24 Planned Care Reduction Target	Not Applied	22
12	Number of New Outpatients Waiting >52 weeks	2023-24 Planned Care Reduction Target	Not Applied	23
13	New Outpatient Activity	2023-24 Annual Delivery Plan Target	Standard deviation is based on 12 month rolling average	24
14	Number of patients on the TTG Waiting List	2023-24 Planned Care Reduction Target	Not Applied	25
15	Number of TTG Patients Waiting >104 weeks	2023-24 Planned Care Reduction Target	Not Applied	26
16	Number of TTG Patients Waiting >78 weeks	2023-24 Planned Care Reduction Target	Not Applied	27

29. Control Limits (Continued)

RATIONALE				
BETTER CARE				
No	Measure	Targets	Control Limits	Slide Number
17	Number of TTG Patients Waiting >52 weeks	2023-24 Planned Care Reduction Target	Not Applied	28
18	TTG Inpatient/Daycase Activity	2023-24 Annual Delivery Plan Target	Standard deviation is based on 12 month rolling average	30
19	Access to Cancer Services Treatment Time - % of patients starting treatment within 31 days of decision to treat	National Target	Based on 5% variance from target	31
20	Access to Cancer Services - % of patients starting first cancer treatment within 62 days of receipt of urgent referral with a suspicion of cancer	National Target	Based on 5% variance from trajectory	32
21	Diagnostics: Endoscopy Waiting List	2023-24 Planned Care Reduction Target	Not Applied	35
22	Diagnostics: Endoscopy Activity	2023-24 Planned Care Reduction Target	Standard deviation is based on 12 month rolling average	36
23	Access to Psychological Therapies - % eligible referrals starting treatment <18 weeks of referral	2023-24 Annual Delivery Plan Target	Based on 5% variance from target	37
24	Access to Child and Adolescent Mental Health Service - % eligible referrals starting treatment <18 weeks of referral	2023-24 Annual Delivery Plan Target	Not Applied	38
25	MSK Physiotherapy Waiting Times - % of patients seen <4 weeks	National Target	Based on 5% variance from trajectory	39
26	Podiatry Waiting Times - % of patients seen <4 weeks	National Target	Based on 5% variance from target	41
BETTER WORKPLACE				
No	Measure	Targets	Control Limits	Slide Number
27	Staff Absence Total	Local Measure	Not applied	42
28	Staff Sickness Absence Rate	Local Target	Based on 5% variance from target	43
28	Short Term Absence Rate	Local Target	Not Applied	43
28	Long Term Absence Rate	Local Target	Not Applied	43
BETTER VALUE				
No	Measure	Targets		Slide Number
	The Better Value Finance measures are reflected within the Finance Report.			
29	Rationale for Control Limits Applied			44