



# **Performance Management Dashboard**

## **August 2018**



# ELECTIVE WAITS

Suspect Cancer Target – 2wks  
 Outpatient Target - 50% in 9wks, All in 52wks  
 Inpatient Target - 55% in 13wks, All in 52wks

Specialty	Suspect Cancer/Red Flag OP Anticipated Position Sep 18	Routine Outpatient Anticipated Position Sep 18	Inpatient & Daycase Anticipated Position Sep 18
Symptomatic Breast Clinic	2 weeks	14 weeks	
Cardiology	-	23 weeks	52+ weeks
Dermatology	4 weeks	133 weeks	38 weeks
ENT	5 weeks	117 weeks	52+ weeks
General Medicine /Gastroenterology	2 weeks	208 weeks	-
General Surgery	6 weeks	45 weeks	52+ weeks
Geriatric Medicine	-	72 weeks	-
Gynaecology	5 weeks	99 weeks	52+ weeks
Haematology	2 weeks	27 weeks	-
Nephrology	2 weeks	13 weeks	-
Neurology	2 weeks	180 weeks	-
Maxillo Facial	2 weeks	90 weeks	52+ weeks
Paediatrics	2 weeks	196 weeks	13 weeks
Paediatric Surgery	-	9 weeks	36 weeks (Transfers from RHSC)
Pain Management	-	67 weeks	52+ weeks
Plastic Surgery	2 weeks	95 weeks	52+ weeks
Thoracic Medicine	2 weeks (CT carried out prior to appointment)	22 weeks	-
Rheumatology	-	83 weeks	-
Urology	4 weeks	94 weeks	52+ weeks
Diagnostic Scopes	-	-	52+ weeks

Specialty	Anticipated end of Aug 18 position- Suspect Cancer/Red Flag	Previous Position December 16
Symptomatic Breast Clinic	2 weeks	2 weeks
Dermatology	4 weeks	14 weeks
ENT	5 weeks	3 weeks
General Medicine /Gastroenterology	2 weeks	14 weeks
General Surgery	6 weeks	8 weeks
Gynaecology	5 weeks	4 weeks
Haematology	2 weeks	2 weeks
Nephrology	2 weeks	2 weeks
Neurology	2 weeks	2 weeks
Maxillo Facial (SET)	2 weeks	3 weeks
Paediatrics	2 weeks	2 weeks
Plastic Surgery	2 weeks	11 weeks
Thoracic Medicine	2 weeks (CT carried out prior to appointment)	4 weeks
Urology	4 weeks	4 weeks

### Attendances & Admissions

	<b>August 18</b>	<b>July 18</b>	<b>August 17</b>
Total ED Attendances (N&UP)	7935	7914	8111
PAS Emergency Admissions	2143	2091	2200
% Conversions SET	27.0	26.5	26.6
PAS Elective Admissions (Adult Wards)	306	370	328

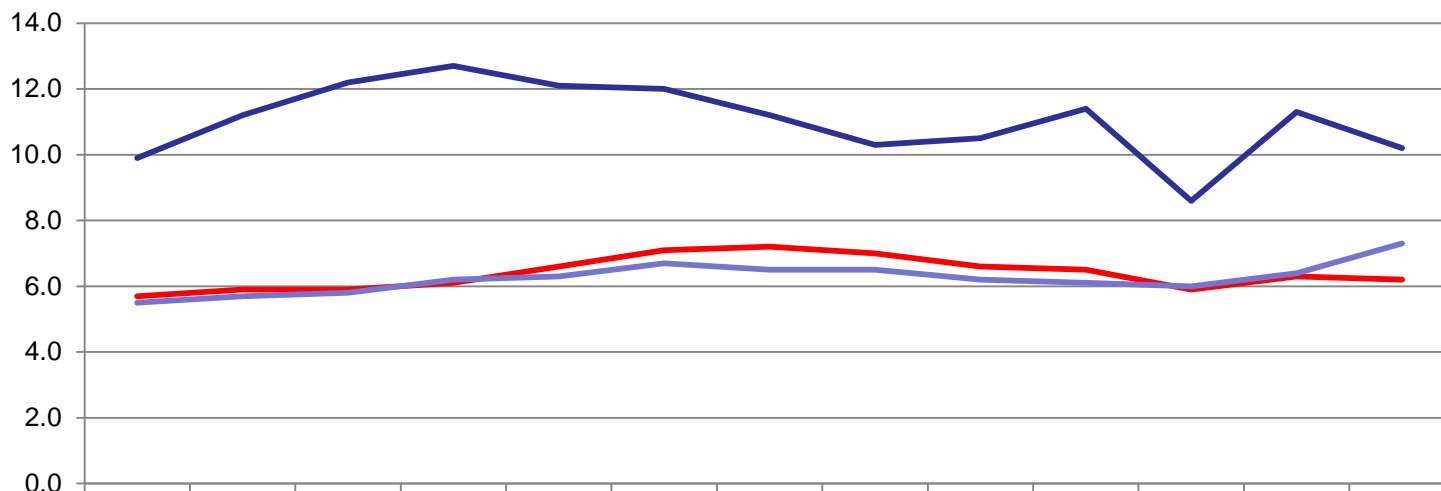
### Discharges

	<b>August 18</b>	<b>July 18</b>	<b>August 17</b>
Total Non-Complex Discharges	2153	2055	2247
Total Complex Discharges	369	353	290
No. Complex <48hrs	296	277	202
No. Complex >48hrs	73	76	88

## Overview of Activity LVH, Downe Aug 17 v Aug 18

ED Attendances & Breaches				
	LVH		Downe	
	August 18	August 17	August 18	August 17
Total ED Attendances (N&UP)	2213	2090	2087	1950
4hr Target	79.9%	91.0%	92.4%	93.7%
12hr breaches	1	0	4	1
% growth Aug18vAug17	5.9%		7%	

## Ulster Hospital General Medicine, Care of the Elderly and All Adult Non Maternity Specialties Length of Stay



	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
General Medicine	5.7	5.9	5.9	6.1	6.6	7.1	7.2	7.0	6.6	6.5	5.9	6.3	6.2
Care of Elderly	9.9	11.2	12.2	12.7	12.1	12.0	11.2	10.3	10.5	11.4	8.6	11.3	10.2
Ave LOS All Specialties	5.5	5.7	5.8	6.2	6.3	6.7	6.5	6.5	6.2	6.1	6.0	6.4	7.3

— General Medicine

— Care of Elderly

— Ave LOS All Specialties

### Key Points

Average length of stay (ALOS) is shown by patient's specialty on discharge and calculated on bed days occupied divided by number of discharges and deaths.

- ALOS for GMED increased by 0.5 days August 17 to August 18
- COE ALOS increased by 0.3 days August 17 to August 18
- Overall length of stay increased by 1.8 days August 17 to August 18

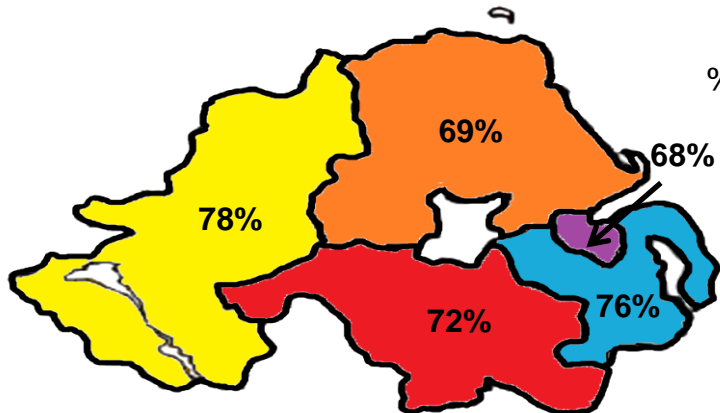
LEAD DIRECTOR: SEAMUS MCGORAN, DIRECTOR OF HOSPITAL SERVICES

TARGET: 95% of patients attending any Type 1, 2 or 3 Emergency Department are either treated and discharged home, or admitted, within 4 hours of their arrival in the department.

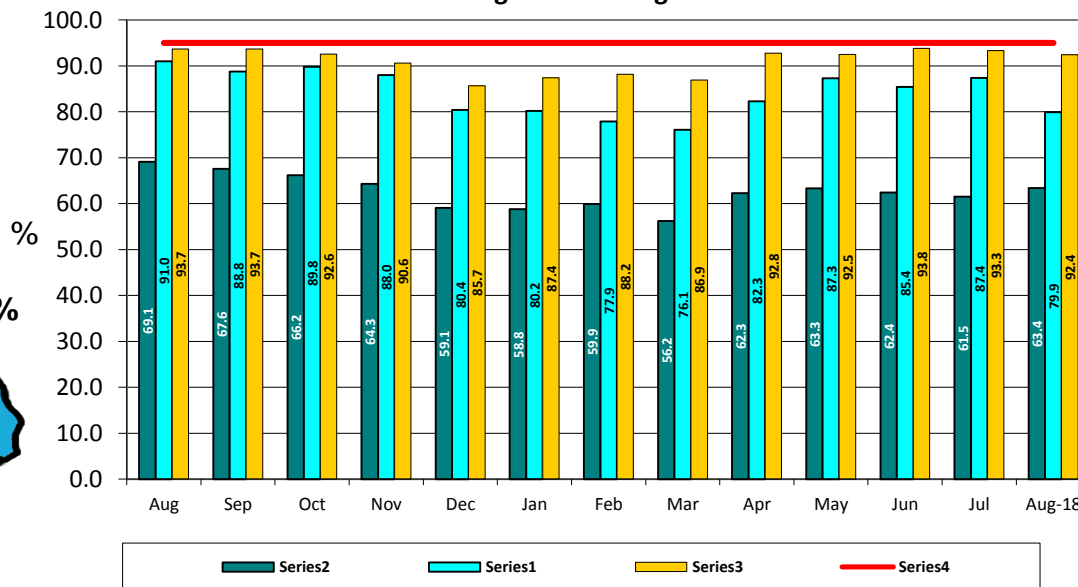
August attendances:

Ulster	7935	- 63.4% 4 hr
LVH	2213	- 79.9% 4 hr
Downe	2087	- 92.4% 4 hr

Regional Comparison July 2018



Performance against 4hr target A&E



**Key Points**

New and Unplanned Review attendances are monitored against the 4 hour target. The Trust's greatest demand is focused on the Ulster Hospital site.

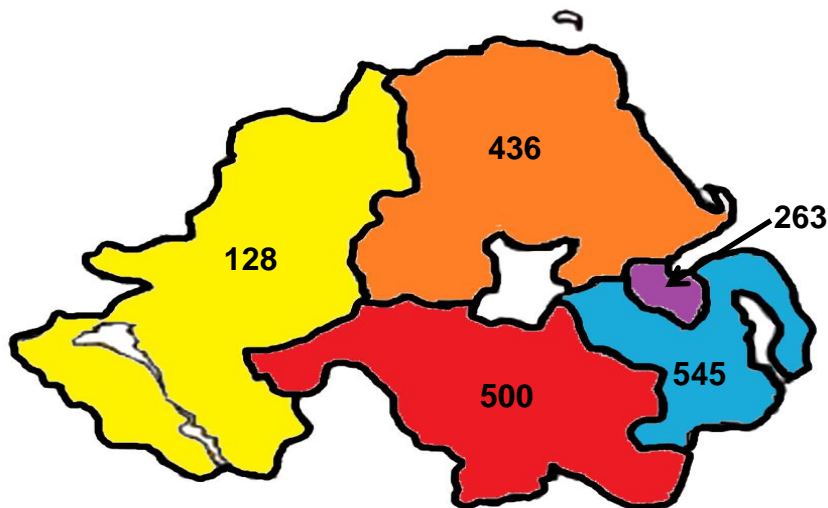
- SET 4hr compliance August - 73.5%
- UH conversion rate (attendance to admission) last 12 months – 26.6%
- 79.3% of attendances to the Ulster Hospital who did not require admission met the 4hr target
- 93.2% 12 hour breaches at the Ulster Hospital were subsequently admitted

LEAD DIRECTOR: SEAMUS MCGORAN, DIRECTOR OF HOSPITAL SERVICES

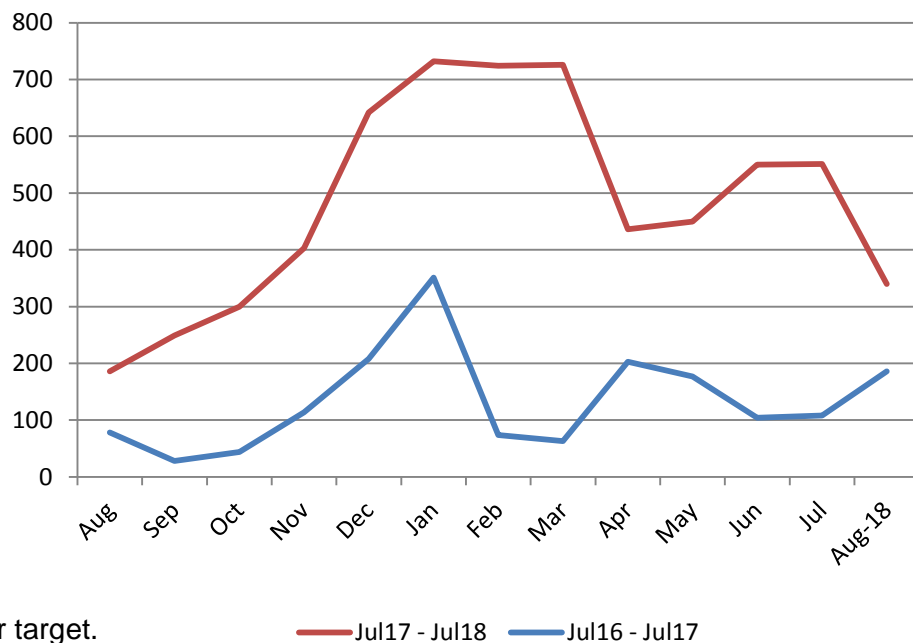
TARGET: NO PATIENT SHOULD WAIT LONGER THAN 12 HOURS IN A&E DEPT TO BE TREATED, DISCHARGED HOME OR ADMITTED

There were 345 12 hour breaches in July -  
340 Ulster, 1 LVH 4 Downe

**Regional Comparison July 2018**



**Ulster ED 12 Hour Breaches**



**Key Points**

- New and unplanned attendances are monitored against the 12 hour target.
- 340 UH patients breached the target during August – 4% of attendances
- (%) of these patients were admitted

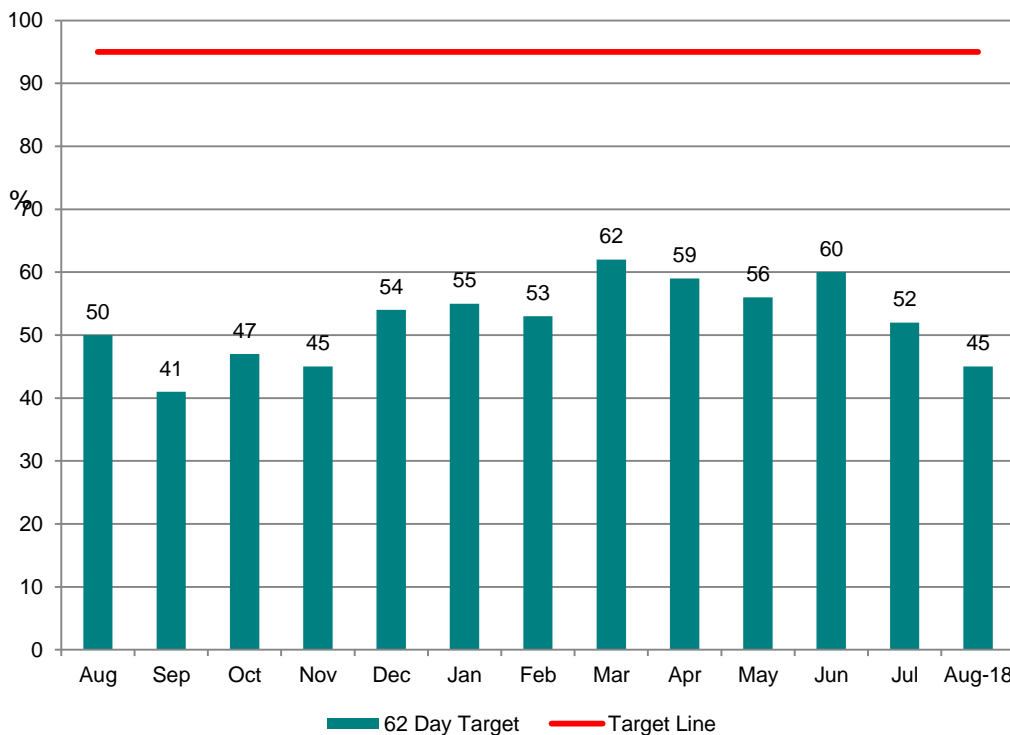
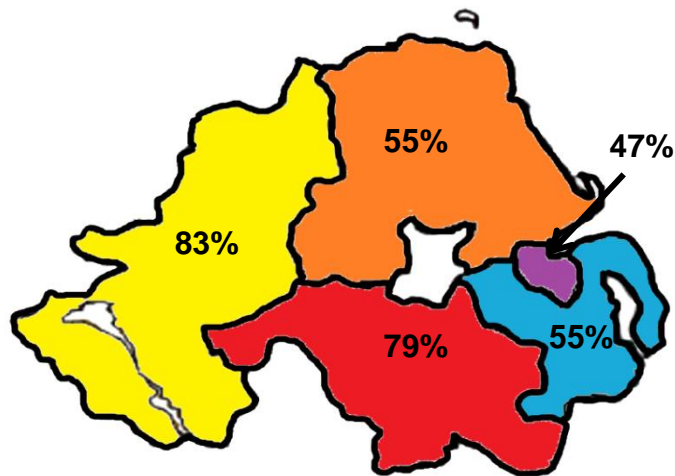


LEAD DIRECTOR: SEAMUS MCGORAN, DIRECTOR OF HOSPITAL SERVICES

TARGET: At least 95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days

In August, 45% of patients were treated within 62 days with 23 breaches

**Regional Comparison July 2018**

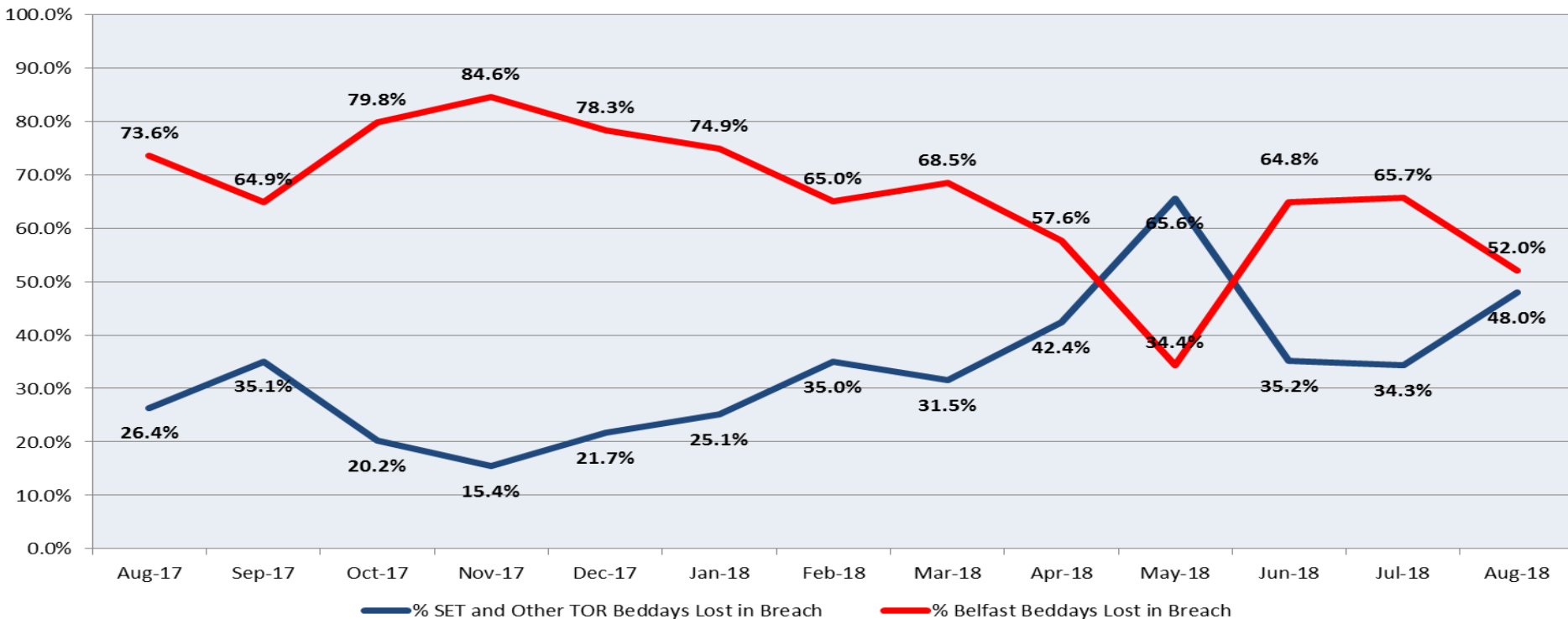


**Key Points**

- Delays in Urology and dermatology pathways impacting on performance
- Longest wait days

LEAD DIRECTOR: NICKI PATTERSON, DIRECTOR NURSING OLDER PEOPLE & PRIMARY CARE

**% Beddays Lost in Breach by TOR**



**Key points:**

This report is based on month of discharge and shows numbers of bed days lost from point of breach to discharge

- Bed days lost to 37 BT patients - 219
- Bed days lost to 36 SET patients – 201
- Main reason SET – No domiciliary care package available
- Main reason BT – No domiciliary care package available

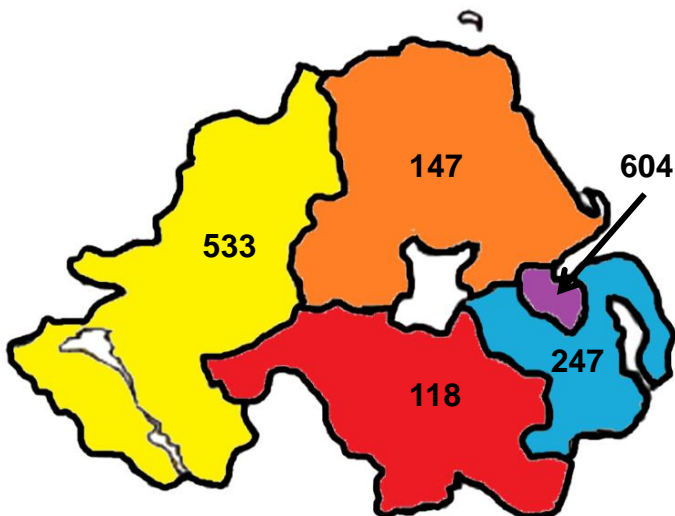
**LEAD DIRECTOR: BRIA MONGAN, DIRECTOR OF ADULT SERVICES**

Target: No patient of any age to wait longer than 13 weeks from referral to assessment and commencement of treatment in Psychological Therapies

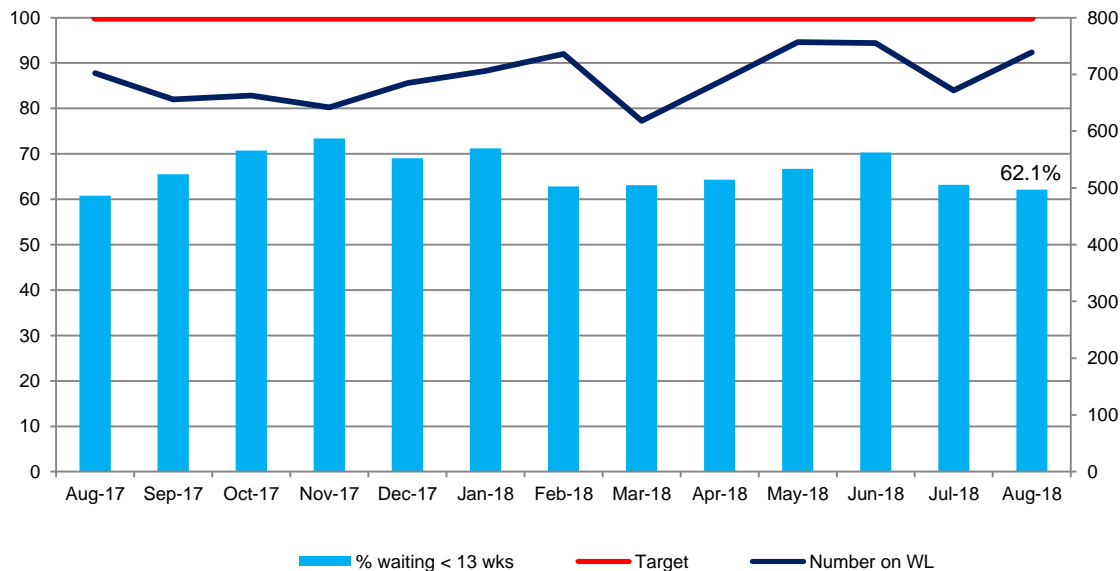
The service attained 62.1% against the target in August

**Regional Performance July 2018**

Number waiting over 13 weeks



**% Compliance for number of patients waiting longer than 13 weeks from referral to assessment and commencement of treatment in Psychological Therapies**



**Key Points**

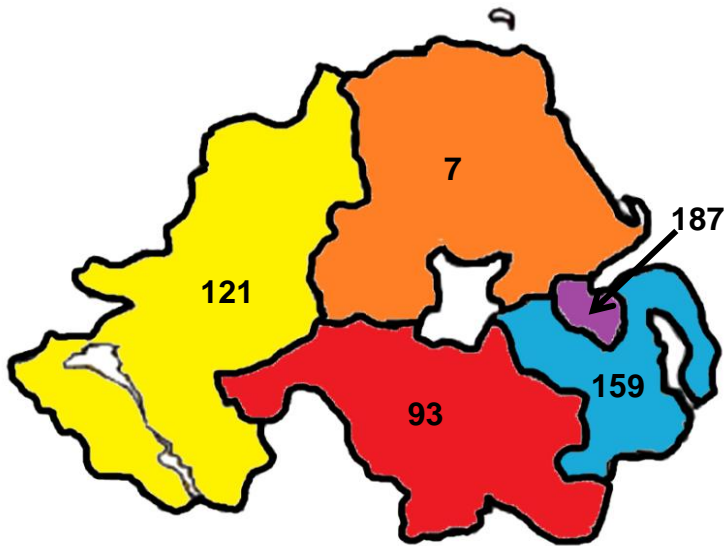
*Service has an acknowledged capacity and demand shortfall*

- Breaching largely within adult mental health and health psychology
- There are 739 patients on the waiting list
- 280 of those on the waiting list have breached

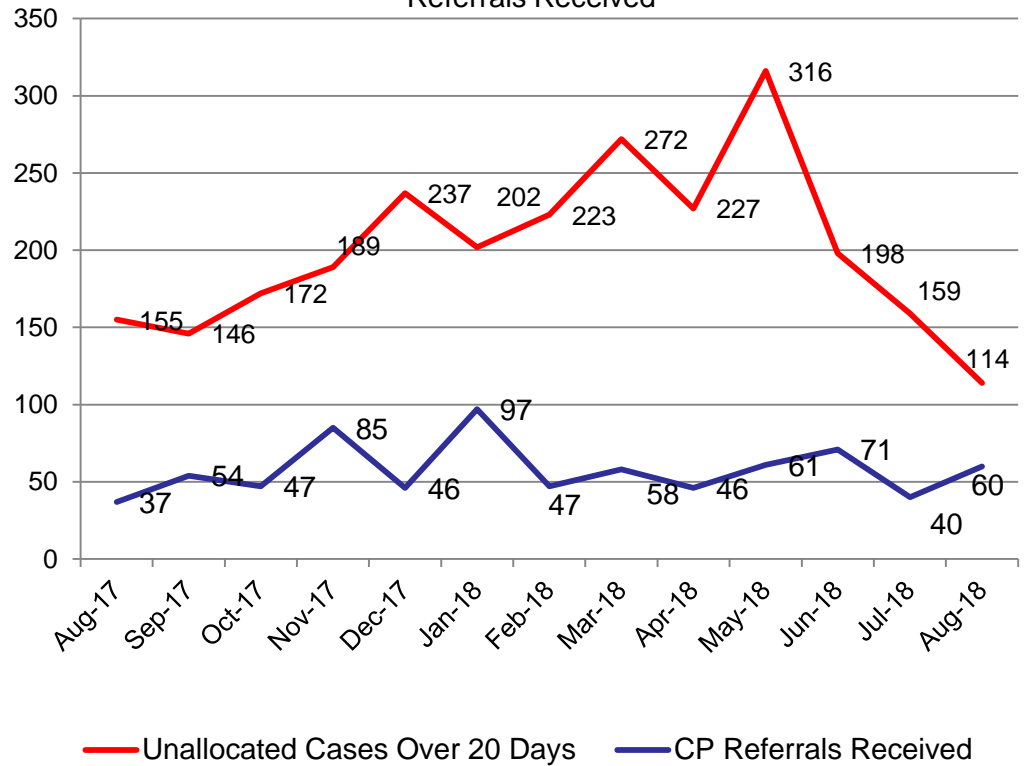
LEAD DIRECTOR: BRENDAN WHITTLE, DIRECTOR OF CHILDRENS SERVICES

Target: Monitor the number of unallocated cases >20 days in Children's Services

Regional Position July 18



Monthly Unallocated Cases & Numbers of Child Protection Referrals Received



Performance Area	Performance 2017/18	Projected Performance 2018/19	Predicted Position August	Actual Position August 18	Predicted year to date (Ave predicted to date)	Actual year to date (Ave actual to date)
Cancer 14 days (%)	100	99	98	100	99	100
Cancer 31 days (%)	95	93	90	94	93	95
Cancer 62 days (%)	51	45	45	45	50	57
Fracture Neck of Femur (%)	66	68	80	73	61.6	66.2
IPDC Core Elective (%)	-2.6	-2.4	-8%	0%	-2.5	0
Endoscopy Core Elective (%)	-10	-6.0	-9.5%	-8.2%	-9.5	-8.2
NOP Core (%)	-3.3	-3.2	-5.5%	-8%	-19	-8.2
<b>Diagnostics- Projected Breaches over 9 weeks</b>			<b>Predicted Position August</b>	<b>Actual Position August 18</b>		
Radiology - over 9 weeks			4521	4306	17779	18029
Audiology - over 9 weeks			1295	966	6625	5540
Psychological Therapies Waits over 13 Weeks	228	650	311	280	293	251