



# QUALITY AND PERFORMANCE REPORT

December 2020

## *INTRODUCTION*

The Quality and Performance Committee obtains assurance that high standards of care are provided by Health and Community Services (HCS) and in particular, that adequate and appropriate governance structures are in place.

## *PURPOSE*

The Quality and Performance Report (QPR) is the reporting tool providing assurance and evidence to the committee that care groups are meeting quality and performance across the full range of HCS services and activities. Where performance is below standards, the committee will ensure that robust recovery plans are developed and implemented.

## *BACKGROUND*

The Quality and Performance Committee has been established by the Health and Community Services Board and is authorised to investigate any activity within its terms of reference.

**SPONSOR:** Rose Naylor

**AUTHOR:** Andrew Carter

**DATA:** SPPP Informatics

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# EXECUTIVE SUMMARY

This report is laid out in the new format currently being designed by HCS Governance & Performance Manager and HCS MEX.

**STRENGTHS**

**WEAKNESSES**

## DEMAND AND ACTIVITY

Measure	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	% Change	
																On Month	YoY
Deliveries	49	66	57	78	69	68	75	86	80	75	77	61	73		865	20%	49%
ED Attendances	3169	3073	2890	2212	717	951	1221	2393	3100	2816	2616	2526	1873		26388	-26%	-41%
UTC Attendances	ND	ND	ND	ND	740	1844	2008	832	ND	ND	ND	ND	ND		5424	NA	NA
Total Emergency Attendances (ED + UTC)	3169	3073	2890	2212	1457	2795	3229	3225	3100	2816	2616	2526	1873		31812	-26%	-41%
Emergency Admissions	676	646	648	494	333	440	529	518	505	476	520	487	419		6015	-14%	-38%
Elective Admissions	154	188	228	184	112	113	160	246	183	292	261	268	147		2382	-45%	-5%
Day Cases	600	756	664	508	75	184	491	562	391	569	627	553	349		5729	-37%	-42%
Stranded patients with LOS > 7 days	160	171	152	138	63	98	95	112	97	104	126	100	130		1386	30%	-19%
JGH/Overdale Outpatient Referrals	3381	4111	3817	3100	1433	1643	2854	3354	2977	3773	4058	3517	2951		37588	-16%	-13%
JGH/Overdale Outpatient Referrals - Under 18	450	533	566	336	84	104	273	362	245	338	351	296	281		3769	-5%	-38%
Adult Mental Health Outpatient Referrals	192	259	263	229	298	210	211	240	199	280	284	196	153		2822	-22%	-20%
CAMHS Outpatient Referrals	54	44	56	53	11	17	42	39	28	35	61	64	42		492	-34%	-22%

## DEMAND AND ACTIVITY (Continued)

Measure	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	% Change	
																On Month	YoY
Outpatient Attendances	13167	16202	14053	13760	10688	11872	13891	14952	12927	15539	15923	16067	13118		168992	-18%	0%
OP 1st Appointment Waiting List	9668	9409	9031	8397	7784	7465	7655	8392	8816	9678	10264	10082	9986		9986	-1%	3%
Elective Waiting List	2849	2802	2719	2317	2267	2818	2718	2530	2692	2677	2484	2514	2652		2652	5%	-7%
Elective Waiting List - Under 18	144	155	137	116	117	136	144	130	125	114	102	110	101		101	-8%	-30%
[Deprecated] Community MH Caseload	2045	2091	2176	2160	2159	2067	2001	1994	2063	2048	2118	2088	2078		2078	0%	2%
[Deprecated] CAMHS Caseload	721	672	697	707	704	712	730	750	744	741	778	782	799		8816	2%	11%
JTT/PATS Referrals	103	128	115	72	ND	ND	7	77	60	81	109	81	83		813	2%	-19%

## QUALITY AND PERFORMANCE SCORECARD

CATEGORY	INDICATOR	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	STD
<b>COVID-19</b>																	
COVID-19	Confirmed COVID-19 cases	ND	ND	ND	125	162	22	10	15	39	49	167	459	1734		2782	TBC
	New people tested for COVID-19	ND	ND	42	1036	1593	3902	4450	16845	34951	22059	10846	11204	11425		118353	TBC
	Unique people tested for COVID-19 in month	ND	ND	42	1037	1688	4323	5980	20016	41442	31275	21047	23020	26740			TBC
<b>WOMEN, CHILDREN AND FAMILY CARE</b>																	
Maternity	% deliveries by C-section (Planned & Unscheduled)	44.0%	47.6%	38.6%	37.7%	42.0%	48.6%	37.8%	30.2%	36.8%	29.5%	38.7%	34.9%	29.2%		37.3%	R->26% A:22%-26% G:<22%
	% deliveries home birth (Planned & Unscheduled)	4.1%	3.0%	1.8%	5.1%	0.0%	0.0%	1.3%	0.0%	0.0%	1.3%	2.6%	6.6%	2.7%		2.0%	TBC
	% 3rd degree perineal tear	15.4%	9.4%	3.0%	2.1%	0.0%	0.0%	6.7%	3.4%	2.0%	2.0%	8.5%	10.5%	7.8%		4.6%	3.50%
	% primary postpartum haemorrhage >= 1500	4.1%	6.1%	7.0%	2.6%	5.8%	4.4%	2.7%	8.1%	11.3%	2.7%	1.3%	9.8%	11.0%		6.0%	2.70%
	% of women that have an induced labour	28.6%	25.8%	36.8%	14.1%	23.2%	22.1%	32.0%	23.3%	40.0%	25.3%	28.6%	26.2%	26.0%		26.8%	R->25% A:20%-25% G:<20%
	Average length of stay on maternity ward	2.5	2.6	2.7	2.0	1.9	2.4	2.6	2.4	2.4	2.4	2.5	2.2	2.4	3.0		2.4
Childrens Services	Average length of stay on Robin Ward	1.3	1.3	1.5	2.4	6.5	0.7	1.5	3.4	1.3	2.2	2.3	1.7	1.9		2.0	TBC
	Was Not Brought Rate	11.6%	11.4%	10.3%	10.8%	3.2%	2.7%	4.6%	6.9%	10.8%	11.1%	10.1%	7.1%	10.0%		9.0%	TBC
	Tooth extractions for patients <18	22	26	18	16	ND	ND	1	2	4	3	3	3	3		79	<25

CATEGORY	INDICATOR	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	STD
<b>SECONDARY SCHEDULED CARE</b>																	
Outpatients	% patients waiting >90 days for 1st appointment	39.4%	39.8%	37.1%	34.3%	46.2%	65.7%	70.6%	58.0%	51.1%	46.5%	44.5%	44.2%	48.9%		48.3%	R->35% A:25%-35% G:<25%
	Total patients waiting >90 days without appointment date	2619	2627	2313	1984	2576	3444	3865	3525	3423	3490	3394	3442	3703		3149	NA
	Outpatient Did not attend (DNA) Rate	9.9%	9.5%	9.2%	9.8%	3.5%	3.1%	4.4%	5.9%	8.4%	9.1%	8.9%	6.3%	6.9%		7.3%	8%
	New to follow-up ratio	2.87	3.10	3.11	2.46	1.98	2.00	4.68	4.29	4.04	4.21	3.99	3.71	3.63		3.33	2
Elective Inpatients	% of patients waiting > 90 days for elective admissions	54.1%	53.0%	51.0%	50.0%	61.3%	72.9%	77.3%	72.9%	64.6%	60.1%	55.9%	48.8%	50.9%		60.1%	R->35% A:25%-35% G:<25%
	Acute elective length of stay	2.0	1.6	1.7	1.3	0.6	0.9	0.6	1.5	1.4	1.3	1.7	1.3	1.4		1.3	R:>4 A:3-4 G:<3
Theatres	Intra-session theatre utilisation rate	74.1%	75.3%	75.6%	64.4%	21.2%	14.1%	27.7%	66.2%	66.3%	69.9%	72.4%	72.2%	66.5%		59.9%	85%

CATEGORY	INDICATOR	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	STD
<b>SECONDARY UNSCHEDULED CARE</b>																	
Ambulance	[Deprecated] Red 1/ Red 2 ambulance response within 8 mins	58.8%	57.6%	56.9%	58.0%	57.2%	56.7%	65.0%	65.4%	60.3%	63.4%	55.8%	ND	ND		59.6%	R:<65% A:65%-75% G:>75%
Emergency Department	Average time in ED (Mins)	166	164	160	141	113	134	151	128	138	140	151	148	152		146	<=240
	% triaged within 15 minutes of arrival	73.6%	72.4%	71.6%	74.6%	85.2%	86.3%	79.8%	74.1%	77.9%	73.5%	72.9%	75.5%	79.0%		75.4%	>90%
	% commenced treatment within 60 minutes	67.9%	73.0%	73.6%	81.0%	92.5%	91.5%	86.1%	86.3%	78.6%	79.8%	83.0%	83.7%	89.0%		81.3%	>70%
	Proportion of patients with DTA to departure within 60 minutes	15.7%	13.7%	12.4%	17.4%	30.2%	25.6%	18.6%	19.6%	18.2%	20.7%	16.8%	18.2%	15.9%		17.8%	TBC
	Total patients in department > 10 hours	26	20	17	9	ND	1	3	5	5	7	11	3	10		91	0
	ED conversion rate	16.6%	16.0%	16.2%	15.9%	35.0%	35.9%	33.2%	16.4%	13.8%	13.9%	18.2%	16.9%	20.2%		18.2%	<=15%
Acute Floor	% discharged within 48 hours (to home) from EAU	0.7%	ND	0.3%	0.3%	ND	0.0%	ND		0.2%	R:<30% A:30%-35% G:>35%						
Emergency Inpatients	Non-elective acute length of stay	4.7	5.0	4.6	4.5	5.3	5.4	3.8	4.6	4.9	4.4	5.4	4.6	7.1		4.9	R:>10 A:8-10 G:<8
	% Emergency admissions with 0 length of stay	13.6%	13.2%	18.7%	18.8%	21.0%	18.9%	22.9%	18.8%	15.1%	15.4%	12.7%	17.3%	14.3%		17.1%	R:>17% A:15%-17% G:<15%
	Number of Beddays >7	1928	2212	1713	1643	860	1179	751	1232	1174	1202	1524	1018	1847		16355	TBC
	Number of patients delayed at the end of period	20	16	13	14	9	5	13	8	21	13	35	21	16			TBC
	[Deprecated] % discharges before midday	18.5%	17.8%	17.4%	14.2%	19.2%	13.4%	14.9%	13.9%	15.2%	12.0%	15.4%	13.1%	14.8%		15.2%	25%
	Acute bed occupancy at midnight (EL & NEL)	65.9%	64.3%	63.8%	45.6%	31.5%	40.9%	48.5%	54.3%	56.8%	54.5%	55.4%	57.5%	55.1%		52.5%	R:>85% A:80%-85% G:<80%
	Rate of Emergency readmission within 30 days of a previously admitted discharge	14.5%	14.4%	16.1%	16.1%	12.5%	13.3%	14.1%	14.0%	13.3%	10.7%	13.2%	10.6%	Reported 1 Month in Arrears		13.4%	R:>10% A:8%-10% G:<8%

CATEGORY	INDICATOR	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	STD
<b>MENTAL HEALTH</b>																	
Adult Acute (Orchard House)	Acute admissions per 100,000 registered population	18	17	20	29	20	22	17	21	25	18	22	22	21		21	<20
	Adult acute admissions patients < 18 years	0	1	0	1	0	0	1	0	0	0	0	0	0		3	0
	Adult acute bed occupancy at midnight	83.1%	91.8%	87.9%	95.1%	82.9%	87.3%	89.5%	90.4%	80.0%	71.3%	74.4%	76.4%	70.0%		83.4%	<88%
	Adult acute length of stay (including leave)	21	27	40	31	27	35	26	52	13	33	8	31	13		29	<28 Days
	[Deprecated] % Adult acute admissions under MH Law	30.8%	50.0%	21.4%	47.6%	28.6%	12.5%	58.3%	26.7%	5.6%	15.4%	18.8%	18.8%	20.0%		26.4%	<37%
	% patients discharged with LOS >= 60 days	6.7%	18.2%	21.4%	15.0%	5.9%	15.4%	9.1%	18.8%	0.0%	23.8%	0.0%	12.5%	0.0%		12.2%	<14%
Older Adult Acute (Beech/Cedar)	Older adult acute admissions per 100,000 registered population	49	32	37	69	32	26	74	95	32	32	32	16	26		42	<35
	Older adult acute bed occupancy (including leave)	84.6%	72.7%	74.3%	80.7%	54.2%	78.2%	76.5%	78.7%	94.0%	64.9%	45.1%	41.0%	79.7%		67.7%	<85%
	Older adult acute length of stay (including leave)	49	95	81	55	69	62	45	67	61	85	66	106	185		78	<85 Days
Community Mental Health	CMHT did not attend rate	6.1%	6.5%	5.8%	5.5%	1.9%	2.5%	3.6%	4.0%	5.0%	7.6%	7.2%	6.1%	6.4%		5.4%	<6.5%
CAMHS	[Duplicate] Referral acceptance rate (% of total referrals)	88.6%	77.0%	79.7%	87.3%	94.7%	100.0%	94.4%	93.6%	89.7%	89.5%	94.7%	95.6%	86.6%		47.2%	77%
	CAMHS Re-referrals as a % of total referrals received	50.0%	47.5%	41.9%	45.1%	42.1%	35.7%	27.8%	46.8%	25.6%	43.9%	30.7%	45.1%	38.8%		39.8%	15%
	% assessments completed within target																
	Urgent (2 working days)	70.0%	62.5%	80.0%	77.8%	40.0%	ND	100.0%	62.5%	100.0%	58.8%	94.1%	100.0%	50.0%		78.5%	TBC
	Soon (10 working days)	ND	33.3%	0.0%	0.0%	ND	100.0%	40.0%	ND	66.7%	50.0%	0.0%	100.0%	100.0%		45.8%	TBC
Routine (6 Weeks)	0.0%	13.0%	0.0%	23.1%	29.4%	63.6%	57.1%	90.9%	60.0%	87.5%	84.0%	72.7%	0.0%		49.0%	TBC	

CATEGORY	INDICATOR	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	STD
<b>MENTAL HEALTH (Continued)</b>																	
Jersey Talking Therapies	JTT - % of total clients who Waited > 18 weeks to start treatment	63.3%	76.6%	62.7%	63.2%	ND	ND	100.0%	95.3%	91.4%	66.7%	65.7%	35.7%	28.6%		66.4%	R:>2% A:1%-2% G:<1%
	JTT/PATS - Referrals yet to have a first assessment at the end of the reporting period	692	600	530	482	478	477	363	354	322	281	223	144	78		4332	TBC
	JTT/PATS - Referrals yet to have a first assessment who have been waiting over 90 days at the end of the reporting period	53	55	52	52	59	97	12	9	4	4	12	7	3		366	TBC
	Referrals yet to have a first treatment at the end of the reporting period	702	617	537	491	486	486	317	305	263	234	208	147	110		4201	TBC
	Referrals yet to have a first treatment who have been waiting over 18 weeks at the end of the reporting period	128	113	103	100	126	152	37	54	22	18	21	24	30		800	TBC
<b>SOCIAL CARE</b>																	
Safeguarding	Number of safeguarding alerts / self-neglect referrals for adults	42	21	25	39	20	31	31	35	29	34	20	32	17		334	TBC
	Number of referrals to children's social care	89	80	67	67	41	37	50	65	58	58	64	64	ND		651	TBC
Adult Social Care	Adult needs assessments closed within 30 days	71.1%	86.6%	71.1%	44.2%	70.2%	82.8%	79.1%	65.8%	60.9%	74.8%	71.8%	69.8%	76.1%		70.6%	TBC
	Adult Social Care Team caseload	1935	1955	1960	1725	1670	1578	1557	1571	1591	1618	1654	1696	1665			TBC
	Social Care - Closure rate	53	59	100	343	145	164	114	91	61	83	90	31	102		1383	TBC
	Social Care - Cases re-opened within 90 days as a percentage of all new cases	4.3%	7.0%	13.8%	7.8%	8.3%	8.2%	8.8%	7.3%	2.3%	5.8%	4.3%	0.0%	ND		8.0%	TBC
	% of clients with no contact in 90 days	39.1%	39.3%	40.1%	33.5%	33.7%	32.6%	34.3%	36.9%	39.4%	42.5%	45.9%	49.2%	ND		61.1%	TBC

CATEGORY	INDICATOR		Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	STD
<b>INFECTION CONTROL AND PATIENT SAFETY</b>																		
Infection Control	MRSA Bacteraemia	Hosp	0	0	0	0	1	0	0	0	0	0	0	0	0		1	TBC
	C-Diff Cases	Hosp	1	1	2	3	1	0	1	1	1	0	2	2	0		14	TBC
Patient Safety	Number of falls per 1,000 bed days		5	6	5	5	8	6	6	4	5	6	5	4	7		6	TBC
	Number of falls resulting in harm		14	16	16	12	11	11	10	10	12	7	15	9	13		142	TBC
	Number of patient safety incidents		258	309	306	244	226	279	306	400	380	298	375	302	317		3742	TBC
	Number of medication errors resulting in harm		3	1	1	1	0	0	1	1	0	2	3	1	1		12	TBC
	Number of cat 2 pressure ulcers acquired as an inpatient		0	0	0	0	0	0	0	0	0	0	0	0	0		0	TBC
	Number of cat 3-4 pressure ulcers acquired as an inpatient		0	0	0	0	0	0	0	0	0	0	0	0	0		0	TBC
	[Deprecated] Number of never events reported		0	0	0	0	0	0	0	0	0	0	0	0	0		0	TBC
Number of serious incidents reported		0	0	0	0	1	1	0	1	1	0	0	0	0			4	TBC

CATEGORY	INDICATOR	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TREND	YTD	STD
LEADERSHIP AND DEVELOPMENT																	
Complaints, Compliments and Comments	Total complaints received	29	49	27	23	8	13	34	33	28	18	38	27	18		316	R:>30 A:20-30 G:<20
	% of complaints responded to within 28 days	24.1%	34.7%	22.2%	34.8%	50.0%	30.8%	58.8%	33.3%	46.4%	83.3%	52.6%	Reported 2 months in arrears			43%	R:<80% A:80%-90% G:>90%
	Total compliments received	14	24	19	13	15	14	52	20	23	36	63	57	50		386	NA
	Total Comments Received	6	9	10	10	4	7	14	10	17	8	17	11	8		125	TBC