

WAITING TIMES AND ACCESS TARGETS

Recommendation:

The NHS Board is asked to note progress against the national targets as at the end of April 2014.

This paper reports on progress across the single system towards achieving waiting time and other access targets set by the Scottish Government (commonly known as HEAT Targets).

1. GENERAL WAITING TIMES / 18 WEEKS REFERRAL TO TREATMENT (RTT)

Waiting times for outpatient appointments, inpatient / day case treatment and diagnostic tests have been falling over recent years as the Board has achieved successive Government targets. The Government target is that, from December 2011, the total maximum journey time will be 18 weeks from referral to treatment, referred to as the 18 weeks RTT target. The national target requires the Board to deliver 90% performance for combined admitted / non admitted performance from 31 December 2011.

The 18 weeks standard requires all Boards to measure the total period waited by each patient, from referral to treatment (RTT), and to manage each patient's journey in a timely and efficient manner. The clock starts for a RTT period on the date of receipt of a referral to a consultant-led service. The Acute Division reports on the individual stage of treatment targets against the 18 week RTT target, along with the national stage of treatment targets, and information on patient unavailability.

➤ 1.1 Combined admitted / non admitted performance

This measure outlines the Board's performance against the agreed target for both the admitted and non-admitted pathways. As detailed below, the Board is currently achieving 90.6% performance, against the target of 90%.

	Feb 14	March 14	April 14
Actual	91.1%	90.4%	90.6%
Trajectory	90%	90%	90%

The Division continues to mitigate pressures on services by seeking to improve utilisation and using additional internal capacity where possible. Key performance indicators are closely monitored and managed to ensure all specialties are using their capacity effectively. Ophthalmology continues to be an area of particular pressure and the revised maximum waiting time of 12 weeks remains in place.

➤ 1.2 Linked Pathways

This is a measure of the percentage of patients where their total pathway is being linked. The Board continues to exceed the target of 80% in April 2014. Work continues nationally to develop more robust inter Board processes to allow appropriate pathway linkage to be facilitated.

	Feb 14	March 14	April 14
Actual	91.1%	88.0%	87.3%
Trajectory	80%	80%	80%

An emphasis on the recording of clinic outcomes on the Patient Management System is ongoing to ensure that where treatment has started the pathways are closed.

➤ **1.3 Stage of Treatment targets**

Inpatients

NHS GG&C met the national Treatment Time Guarantee of 12 weeks from decision to treat in March and April 2014 for the majority of patients; however, during this period there were two patients that breached the guarantee, detailed below:

- One Ophthalmology patient in March and one Urology patient in April.
- Both patients have now attended for treatment.
- In both instances the patients were not added to the waiting list at the correct time due to administrative errors. Administrative processes have since been reviewed to ensure this does not happen in future.

Outpatients

NHS GG&C has met the national waiting time target of 12 weeks from GP referral to outpatient consultation for the majority of specialties. However, in March 2014, 27 Ophthalmology patients and 1 Endocrinology patient breached this target. In April 2014, 24 Ophthalmology patients breached the target. All patients have now attended for their consultation, or been removed from the waiting list as appropriate, with the exception of 4 Ophthalmology patients who have appointments in June. A separate report is being prepared for discussion at the July 2014 Quality & Performance Committee on Ophthalmology service pressures.

In addition, NHS GG&C recently agreed to accept 28 Respiratory patients from NHS Ayrshire and Arran (NHS A&A) and to add these to the outpatient waiting list. These patients were referred into NHS GG&C late in their patient pathway and as such have breached the outpatient 12 week target. However, as the delay was due to processes within the primary Health Board they will be declared as NHS A&A breaches.

➤ **1.4 Unavailability**

	Total Unavailable	Total Unavailable	Total Unavailable	<i>Pt Advised Site/Clinician</i>
Inpatient / Day Cases	February 14	March 14	April 14	<i>April 14</i>
Greater Glasgow & Clyde	3,790	3,348	3,467	2,316
Yorkhill	607	553	544	235
TOTAL	4,397	3,901	4,011	<i>2,551</i>
Outpatients	February 14	March 14	April 14	<i>April 14</i>
Greater Glasgow & Clyde	1,859	1,670	2,283	1365
Yorkhill	30	44	38	16
TOTAL	1,889	1,714	2,321	<i>1,381</i>

At the end of April 2014, the total number of patients waiting (both available and unavailable) was 17,778 inpatients / day cases and 64,417 new outpatients.

Many NHS Boards are strictly interpreting the access provision and returning patients to the care of their GP if they have declined two reasonable offers. This process has not been adopted in NHS GG&C and the Division has also continued to seek to provide patients with access to their nearest hospital, where at all possible. This has the effect of increasing patient unavailability.

➤ **1.5 Diagnostic Waiting Times**

As a milestone towards achieving the 18 weeks referral to treatment guarantee, the Division met the target set for March 2010 of no patients waiting over 4 weeks from referral to CT scan, MRI scan, non-obstetric ultrasound, barium studies, upper endoscopy, lower endoscopy, colonoscopy and cystoscopy. No patients waited beyond 4 weeks in March and April 2014.

2. ACCIDENT AND EMERGENCY WAITING TIMES

The Board is required to ensure that the maximum length of time from arrival at A&E to admission, discharge or transfer is 4 hours for 98% of Accident and Emergency patients.

Site	Feb 14	March 14	April 14
Western Infirmary	75%	76%	78%
Glasgow Royal Infirmary	88%	87%	92%
Stobhill Hospital (MIU)	100%	100%	100%
RHSC	98%	97%	97%
Southern General Hospital	90%	91%	89%
Victoria Infirmary	85%	87%	88%
Victoria Infirmary (MIU)	100%	100%	100%
Royal Alexandra Hospital	86%	92%	82%
Inverclyde Royal Hospital	94%	93%	90%
Vale of Leven Hospital	96%	99%	97%
Board Average	89%	90%	89%

Overall Position

The NHS GG&C position ranged from 89% - 90% compliance in each month over the quarter. Performance for the quarter overall was 89.1% and this was a reduction from 90.0% for the same quarter in the previous year. The period saw an increase of 2% in the number of new attendances for the quarter compared to February - April 2013.

There were 19 patients in NHS GG&C who waited over 12 hours to the conclusion of treatment in the quarter from February to April 2014.

Overnight on Monday 2nd June into Tuesday 3rd June, the Division experienced an unprecedented 25% surge in attendances and a 24% increase in admissions at the Victoria Infirmary A&E Department. Increases in activity were also experienced elsewhere in the city and led to a number of unacceptable lengths of stay for some patients.

33 patients waited over 12 hours across the city over that period.

To relieve pressure on the system we therefore put in place a number of measures in line with our procedures for dealing with peaks in demand. These included:

- A&E referrals to the Victoria Infirmary were diverted to other Glasgow hospitals.
- Non-urgent routine elective procedures that were due to take place this week were postponed. All urgent and cancer cases were unaffected.
- Additional inpatient beds were provided in south Glasgow.

The clinical teams all worked enormously hard to care for their patients during this period of exceptional demand and a number of actions have been identified to ensure that our ability to admit patients from our Emergency Departments is improved.

3. CANCER WAITING TIMES

95% of all eligible patients should wait no longer than 62 days or 31 days. A 5% tolerance level is applied to these targets, as for some patients it may not be clinically appropriate for treatment to begin within target.

Tumour Type	Quarter 1 (January - March 2014)			
	62-Day Target		31-Day Target	
	Number	%	Number	%
Breast (Screened Excluded)	89/85	95.5	185/175	94.6
Breast (Screened only)	129/123	95.3	111/84	75.7
Cervical (Screened Excluded)	3/3	100.0	14/14	100.0
Cervical (Screened Only)	5/5	100.0	6/6	100.0
Colorectal (Screened Excluded)	69/67	97.1	186/180	96.8
Colorectal (Screened Only)	29/24	82.8	31/31	100.0
Head & Neck	35/31	88.6	106/102	96.2
Lung	140/129	92.1	288/284	98.6
Lymphoma	29/28	96.6	67/67	100.0
Melanoma	22/22	100.0	62/62	100.0
CNS	-/-	-	6/6	100.0
Ovarian	4/4	100.0	38/38	100.0
Upper GI	73/58	79.5	169/168	99.4
Urological	112/93	83.0	323/288	89.2
All Cancer Types	739/672	90.9	1592/1505	94.5

The Scottish Government Health Department (SGHD) Cancer Performance Support Team (CPST), requested an action plan to demonstrate the measures that the Acute Division are taking to control and improve performance, especially in relation to the 62-day pathway. An action plan was produced and sent to SGHD. A supportive visit took place on 24th April 2014 to review the measures outlined.

The CPST reported back that they are reassured that the NHSGG&C team were well informed on the detail and underlying causes for the recent below standard performance, and were collectively taking ownership and providing leadership with seeking solutions. It was also noted that they were reassured to hear about the depth of work carried out and how improvements are being introduced to enable performance against the 95% target to be improved and sustained. A very detailed list of measures being taken forward in each pathway has been agreed and is being delivered.

However, despite this feedback, quarter 2 continues to be a challenging period and our compliance rate is being closely monitored after a relatively poor month in April 2014.

4. STROKE

As outlined in last month's report, in January 2014 the Scottish Government announced a new national stroke target replacing previous reporting for Admission to an Acute Stroke Unit. This new target - the 'stroke bundle' - is compiled from four national standards for acute stroke care. Stroke bundle performance is based on performance against the appropriate elements for each individual patient.

NHS GG&C has a target of 55% of suspected stroke patients receiving all appropriate elements of the stroke bundle by March 2015, with an interim target of 50% by September 2014. NHS GG&C performance in 2013 was 46% for the year. Performance is reported on a monthly and quarterly basis overleaf.

	Stroke Bundle		Individual Elements – Performance April 2014			
	Quarter ended March 2014 Target 50%	Monthly Performance April 2014	ASU Admission Target 90% day 0/1	Stroke Scan Target 90% within 24hrs	Swallow Screen Target 90% day 0	Give Aspirin Target 100% day 0/1
NHSGGC	53%	60%	87%	93%	77%	79%
IRH	n/a	60%	95%	85%	75%	67%
RAH	n/a	52%	96%	85%	81%	59%
GRI	n/a	66%	88%	97%	83%	88%
WIG	n/a	45%	71%	94%	61%	79%
SGH	n/a	76%	96%	98%	85%	89%
Vic	n/a	45%	60%	91%	73%	89%

Stroke bundle performance remains above target in April 2014, however 2 sites have performed below target in April. At the Victoria Infirmary plans are progressing to change the stroke admission pathway and see all patients from the Victoria catchment area being admitted to the SGH, replacing the current inconsistent pathway. At the WIG the performance for admission to the stroke unit has dipped and the picture appears similar for May 2014. There has been significant pressure on stroke beds during this period; however local clinicians are continuing to work with colleagues across the hospital to address these delays.

Achieving all individual elements of the new stroke bundle will continue to be a challenging target for NHS GG&C and a number of improvement actions are being taken forward across all our hospital sites.

5. PATIENTS AWAITING DISCHARGE

In order to ensure that patients receive the most appropriate care and to ensure that capacity is available for new admissions, it is imperative that patients are discharged as soon as they are clinically ready. The national target for discharge is currently 4 weeks and will reduce further to 2 weeks by April 2015. This work is the principal focus of joint planning with local authorities regarding older people, and is supported by the additional “Change Funds” released to the partnerships.

At the May 2014 census, there were 33 patients with ‘included’ codes waiting over 4 weeks, of which 4 patients are within mental health services. Of the 33 delays over 4 weeks

- 21 patients were from Glasgow City;
- 7 patients were from South Lanarkshire;
- 3 patients from West Dunbartonshire;
- 1 patient from North Lanarkshire; and
- 1 patient from Inverclyde.

The number of patient delays in West Glasgow has reached 16. Other areas with significant numbers of delays are South Glasgow and South Lanarkshire and West Dunbartonshire. Funding is now being flagged as a barrier to discharge.

NUMBER OF PATIENTS WAITING - TOTAL BY CH(C) P COMPARISON 2014/15

The number of patients awaiting discharge by CH(C) P, and by service, in May 2013 and May 2014, is shown in the following tables. These demonstrate that there has been an increase of 26% in the overall number of patients and this is reflected in the increase of over 100% in the number of delays over 4 weeks from the same period in the previous year.

Patients on Census with 'included codes'

Number of patients	May-13	May-14	May-13	May-14	May-13	May-14
	<4wks	<4wks	> 4wks	> 4wks	Total	Total
East Dun	7	10			7	10
West Dun	5	17		3	5	20
Glasgow	79	93	13	21	92	114
<i>GCE</i>	27	13			27	13
<i>GCW</i>	22	31	2	16	24	47
<i>GCS</i>	30	49	11	5	41	54
Inverclyde	10	10		1	10	11
North Lan	2	2		1	2	3
South Lan	10	7	2	7	12	14
East Ren	5	7			5	7
Renfrewshire	10	6			10	6
Other	6	4	1		7	4
TOTAL	134	156	16	33	150	189

Number of patients	May-13	May-14	May-13	May-14	May-13	May-14
	<4wks	<4wks	> 4wks	> 4wks	Total	Total
Mental Health and Learning Disability	13	21	4	4	17	25
Acute and DME	121	135	12	29	133	164
Total	134	156	16	33	150	189

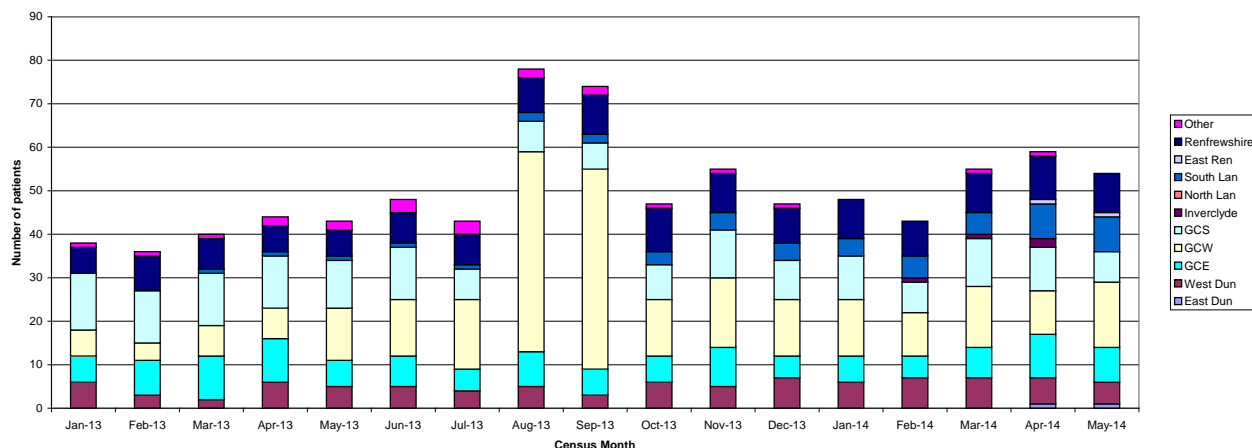
The benchmark is the same period in the previous year but with the significant increase in delayed discharge in recent months, the following table allows us to also benchmark with previous month of April 2014. We can see from the previous month that in May 2014 there has been a 50% increase in delayed discharge numbers compared to April 2014 the most significant increase being in West Glasgow.

Patients on Census with 'included codes' - Month on Month

Number of patients	Apr-14	May-14	Apr-14	May-14	Apr-14	May-14
	<4wks	<4wks	> 4wks	> 4wks	Total	Total
East Dun	17	10	1		18	10
West Dun	9	17	2	3	11	20
Glasgow	108	93	7	21	115	114
<i>GCE</i>	17	13			17	13
<i>GCW</i>	47	31	5	16	52	47
<i>GCS</i>	44	49	2	5	46	54
Inverclyde	10	10	1	1	11	11
North Lan	1	2	2	1	3	3
South Lan	9	7	6	7	15	14
East Ren	9	7			9	7
Renfrewshire		6			0	6
Other	1	4	3		4	4
TOTAL	164	156	22	33	186	189

The number of AWI case recorded at each census is as recorded below. In May 2014 there were 54 patients a slight decrease since April 2014 (59), but a significant increase from the same period in 2013 (43).

TOTAL AWI cases at Census



CHANGE FUND – BED DAYS LOST, BASED ON JANUARY 2014 INFORMATION

In terms of CH(C)P performance against the bed days lost, targets linked to the Change Fund progress has been made as follows for the year 2013/14 and at the month of April 2014 the full year 2013/14 shows a decrease of 19.2% from the previous year. However performance in year was 30.9% below the determined target. All local authority partners showed a significant improvement on the previous year’s activity with the exception of South Lanarkshire and areas outwith NHS GG&C. The only local authority partners to achieve their target at year end were East Dunbartonshire, Inverclyde, Renfrewshire and North Lanarkshire.

CHANGE FUND

BED DAYS OCCUPIED BY PATIENTS OVER 65 YEARS OF AGE (non mental health)

2013/14

Bed Days	Cumulative April 12 - Mar 13	Cumulative Apr 13 to Mar 14	% Change on last year
East Dun	5534	2686	51.5%
East Ren	5171	2445	52.7%
Glasgow	43185	39929	7.5%
Inverclyde	3744	3010	19.6%
Renfrewshire	12698	5835	54.0%
West Dun	6050	4925	18.6%
Sub Total	76382	58830	23.0%
North Lan	793	677	14.6%
South Lan	3922	4851	-23.7%
All Other	2288	2985	-30.5%
TOTAL	83385	67343	19.2%

Targets April 2013 - Mar 2014

Cumulative Target to Mar 14	Variance from Target (days)	% Variance from target Mar 14
3680	994	27.0%
2415	-30	-1.2%
26555	-13374	-50.4%
3362	352	10.5%
8104	2269	28.0%
3819	-1106	-29.0%
47935	-10895	-22.7%
684	7	1.0%
2268	-2583	-113.9%
576	-2409	-418.2%
51463	-15880	-30.9%

April 2014 figures have recently been published. The following table highlights a 3% increase in the number of days lost in comparison to April 2013 and performance shows a shortfall of 33.6% from the target.

Current Month

Bed Days	Cumulative Apr 13	Cumulative Apr 14	% Change on last year
East Dun	408	424	-3.9%
East Ren	274	309	-12.8%
Glasgow	3004	3277	-9.1%
Inverclyde	195	301	-54.4%
Renfrewshire	625	244	61.0%
West Dun	454	416	8.4%
Sub Total	4960	4971	-0.2%
North Lan	74	80	-8.1%
South Lan	336	461	-37.2%
All Other	190	215	-13.2%
TOTAL	5560	5727	-3.0%

Targets

Cumulative Target to Apr 14	Variance from Target (days)	% Variance from target Apr 14
307	-117	-38.1%
201	-108	-53.7%
2213	-1064	-48.1%
280	-21	-7.5%
675	431	63.9%
318	-98	-30.8%
3994	-977	-24.5%
57	-23	-40.4%
189	-272	-143.9%
48	-167	-347.9%
4288	-1439	-33.6%

EARLY REFERRAL TO SOCIAL WORK

Local Target - 0 % of patients to be referred on the day designated ready for discharge (RFD).

Current performance

Since April 2013 there has been a reduction in the percentage of referrals on the same day as RFD from 15.5% to 6.1% in May 2014. The number of patients being referred in excess of 1 week from RFD has increased month on month from 52.8% at April 2013 to 69.6% by March 2014 but has reduced in April 2014 to 64.5% and further to 58.1% in May 2014.

Although many areas have achieved 0% referral on same day as RFD, it should be noted that that this does not always equate to no delays over 4 weeks. Glasgow City North East Sector for example historically have a significantly higher % of referrals on the same day as RFD but have significantly lower numbers of delays and only occasional delayed discharge over 4 weeks

Actions

1. Weekly meetings continue in South Glasgow focused on delays and issues with allocation
2. Monthly meeting arranged with South Lanarkshire focused on delays and funding issues
3. Weekly monitoring and reporting continues between the Acute Division, Glasgow CHP and Glasgow City Council
4. Increase in the use of Step Down beds with additional places now available within Glasgow City

In week beginning 2nd of June there has been an injection of funding to Glasgow City Council to fund an additional 60 care home places. It is anticipated that this will alleviate pressures in acute beds and have an impact on reducing number of bed days lost being reported in the forthcoming weeks. The first table below begins to evidence the reduction in beds days lost for Glasgow City patients and shows a 13.8% reduction in the West, and 18% in the South within the last week (week ending 9th June 2014). The second table shows the significant increase in the number of patients being placed by Glasgow City in the last week with a further 8 being placed on the 9th June.

ALL NHS GG&C - Delayed Discharges - ALL PATIENTS

Includes all patients (including complex codes and mental health patients) with social work involvement on Edison as at:-

Bed Days Lost at week ending					
	19/05/2014	26/05/2014	02/06/2014	09/06/2014	
TOTAL					
All patients					
East Dunbartonshire	405	477	231	240	
East Renfrewshire	203	285	314	267	
Glasgow City	5391	6096	7320	6461	
<i>Glasgow City East</i>	771	963	1193	1287	
<i>Glasgow City West</i>	2930	3092	3529	3043	
<i>Glasgow City South</i>	1690	2041	2598	2131	
Inverclyde	459	279	267	279	
North Lanarkshire	160	188	216	254	
Renfrewshire	1216	1294	1365	1478	
South Lanarkshire	1120	1208	1383	1488	
West Dunbartonshire	1535	1261	1300	1375	
Argyll & Bute	131	119	165	220	
North Ayrshire	49	75	83	104	
Others	4	18	4	0	
TOTAL	10673	11300	12648	12166	

Placements	Week Beginning									
	07/04/2014	14/04/2014	22/04/2014	28/04/2014	06/05/2014	12/05/2014	19/05/2014	26/05/2014	02/06/2014	09/06/2014
East Dunbartonshire	5	2	6	6	1	4		8	4	1
East Renfrewshire	1	5	2	1	4	2		2		1
Glasgow City	18	15	9	18	16	18	7	3	55	8
<i>Glasgow City East</i>	1	3	2	7	3	10	1	1	14	2
<i>Glasgow City West</i>	5	6	3	5	4	4	2	2	18	2
<i>Glasgow City South</i>	12	6	4	6	9	4	4		23	4
Inverclyde	1	2	2	3	3	3	2	1		
North Lanarkshire				1						
Renfrewshire	5			1	2	4	3	1		
South Lanarkshire	1	1	2		3	2	2		1	
West Dunbartonshire		2		2	3	2	1	5	1	
Argyll & Bute	1		1	1		1	1	1		
North Ayrshire		1								
Others										
TOTAL	32	28	22	33	32	36	16	21	61	10

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APPENDIX

➤ Combined admitted / non admitted performance

This measure outlines the Board's performance against the agreed target for both the admitted and non-admitted pathways.

2013 / 14	April	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Actual	90.7%	91.1%	91.1%	91.0%	91.2%	91.0%	91.5%	94.1%	91.1%	91.0%	91.1%	90.4%
Trajectory	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%

➤ 1.2 Linked Pathways

This is a measure of the percentage of patients where their total pathway is being linked.

2013 / 14	April	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Actual	89.9%	87.5%	85.3%	87.3%	88.1%	88.1%	87.9%	87.9%	89.3%	88.6%	89.0%	88.0%
Trajectory	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%