Delayed Discharge Performance

April – August 2021/22 HSCP North Lanarkshire delayed discharge performance deteriorated with 10,738 standard bed days against a target of 9,945, 793 above target (figure 1). From May 2021 there has been an increase in standard bed days, however August 2021 figures shows a slight improvement in performance when compared with July 2021.

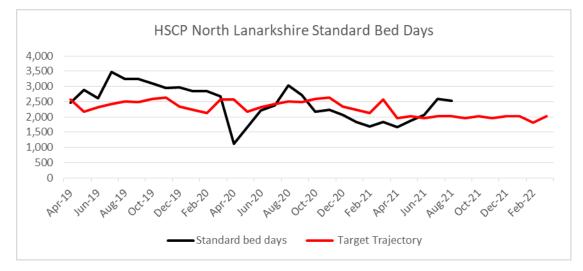


Figure 1 Delayed Discharge bed days performance

The increase in delays can be linked to similar pressures affecting other areas of the system, including:

- Increased hospital activity
- Home support sickness absence, Covid isolation and vacancies (affecting all Localities but particularly Cumbernauld and Wishaw)
- Reduction of independent sector Home Support capacity
- Increased guardianship referrals
- Care Home closures due to Covid outbreaks and suspected outbreaks limiting discharge volumes.

A wide range of activity is underway, both locally and nationally, to try to resolve these issues:

- Whole system improvement work on the PDD process
- Home Support recruitment over 200 applicants in latest round, though important to note this could impact on independent sector capacity
- Use of interim placements
- Redeployments of some staff groups to enhance Care at Home capacity, including use of some community nursing resource
- Participation in national Rapid Action Group for Care at Home.

AHP Waiting Times – H&SCP NL Hosted

The waiting times data contained in this report is provided by NHSL Information Services and is unvalidated/unpublished. This report is for the performance period from the 1st to 30th September 2021.

The Capacity Planning and Waiting Times (CPWT) group is re-established and is supporting AHP Services in recovery and remobilisation. Historically the group has limited focus to specialties with a national profile which are outlined below. CPWT is working towards including all AHP specialties in future reporting.

Through the CPWT services have highlighted a number of factors which continue to affect service recovery.

- Social distancing continues to limit activity levels
- There remain significant challenges relating to capacity for essential face to face consultations which are impacting on some services ability to meet increasing demand. An example can be seen in the waiting times for Podiatry.
- Vacancy rates for some services are affecting recovery
- Staff redeployed has affected capacity and activity levels.

Given the current environment HSCP NL have agreed a recovery target of 50% for AHP services. AHP Service performance for ongoing waits is detailed in figure 2. Speech and Language Therapy – Children and Young People (C&YP)), Podiatry (excl MSK) and Podiatry Domicilliary Appts have not met the 50% target.

Service	Compliance 50% Target	Target (Local/National)	Longest Wait in Weeks	Waiting >12 weeks
Podiatry Biomechanical MSK Service	72.0%	Local 12 week	72	303
Speech & Language Therapy Children and Young People	28.6%	Local 12 week	76	993
Speech & Language Therapy Adult	85.2%	Local 12 week	21	38
Podiatry Service (excl MSK)	27.6%	Local 12 week	193	3326
Podiatry Service - Domicilliary Appts	45.8%	Local 12 week	45	88
Dietetics	60.9%	Local 12 week	90	257
Medical Children and Young People - Cons Led service	96.6%	National 12	27	20
Community Claudication Service	96.7%	Local 12 week	24	6

Figure 2 Performance against 50% target

Speech & Language Therapy Children and Young People

Performance Commentary

Performance prior to COVID-19 was at 62.7%. The service has previously described the SLT covid-19 journey – suspension in OP appointments; staff redeployed to staff wellbeing and immunization teams; and a gradual move to remote working

Figure 3 illustrates performance over time for SLT C&YP. Pre Covid the Service was unable to achieve the 90% 12 week target, however performance deteriorated significantly from April 2020 dipping below the lower control limit. Performance was

showing a slow recovery, however July to September performance has deteriorated with September performance 28.6% against the 12 week target.

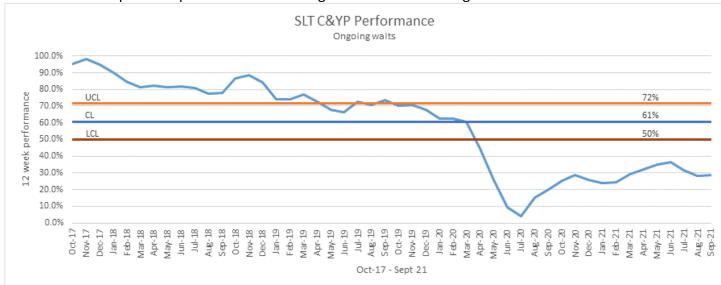


Figure 3: SLT C&YP performance

Performance Recovery Plan

There was a very slight increase in performance during September though the overall longest wait has increased to 76 weeks. This increase is due to an incident, for which a Datix incident has been raised, which resulted in Health Visitor referrals dating back to April 2020 not being received by the service until September. The Service is focusing on ensuring the children affected were placed in the correct place on the waiting list.

The following provides an overview of current actions underway to address performance:

1. Increase capacity

A request was made for 17 wte staff as part of the Remobilisation Plan, this is to ensure the service can recover trajectory post COVID and build a sustainable model for the future. Recruitment is ongoing to build this additional capacity.

Of the 17 wte staff 12 were for the CYP service. The service has recruited to 15 of these with 2 band 7 (CYP) interviews to take place early November. Some of the posts were recruited internally so the service has had a second round of interviews. The service continues to recruit to other vacancies as they arise.

2. Demand

Reduce demand for specialist assessment by increasing targeted offerings During September 195 referrals were received – the average over the year is 187 so still within predicted trajectory.

3. Spread of Trakcare to all SLT teams

While this will not in itself decrease waits, it will allow better metrics around this as currently the performance graphs are only applicable to some parts of the service. Pre-5 Complex needs team are now live on Trakcare, as is the Adult Learning Disability Team. The next team for roll out will be Airdrie Locality.

Podiatry

Podiatry (excl. MSK)

Figure 4 shows performance against the 12 week target for Podiatry (excl MSK). Performance dipped sharply during April 2020 and remains well below 50%. Changes as a result of the Covid emergency have impacted the Service's ability to recover to pre Covid levels.

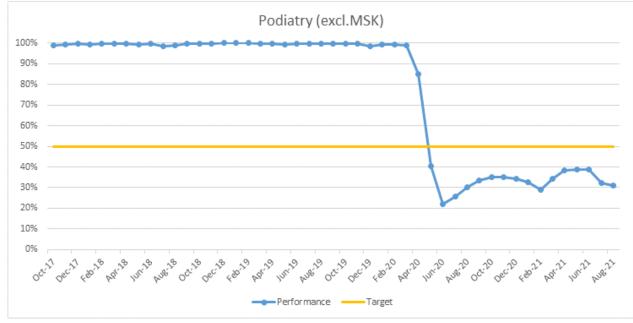


Figure 4 Podiatry (excl. MSK) performance against target

Performance Commentary

Performance reflects the ability for the service to get access to rooms and most of this element of the service is still closed. The service is only able to deliver mainstream services to wounds, infections and infected ingrown toenails. There is a recovery plan in place which is reliant on reclaiming some accommodation and recruiting staff.

The patients remaining on the podiatry routine waiting list are for **low risk diabetic foot screening** only and have **no podiatry issues**. As a result of extremely limited access to health centres and rooms previously used by podiatry due to physical distancing and foot fall restrictions, the majority of clinic appointments are used for patients with active foot ulceration or a podiatry issue such as a painful lesion.

Podiatry – Domiciliary

Prior to March 2020 the service achieved close to 100% performance, however this dipped significantly as the changes resulting from the Covid pandemic impacted on the services activity.

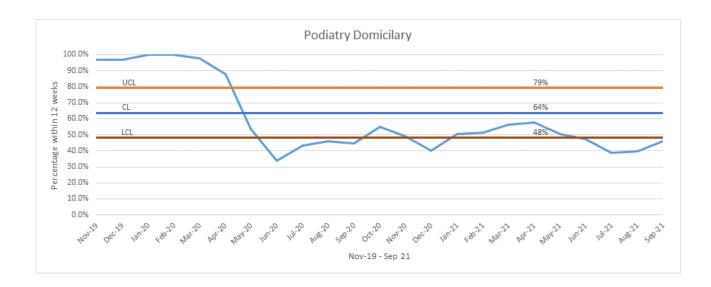


Figure 3 Podiatry Domicilary Performance

Similar to the Podiatry (excl MSK) due to social distancing the numbers of people who can be seen in a session has reduced to 3 rather than 5 or 6. Therefore until this is relaxed it will take double the workforce to see these patients.

There is a plan in place which will gradually give the service more capacity once staff are recruited.

The resource has been found and recruitment of additional staff has begun. However it will take several months to go through the recruiting process, so waiting times will only marginally improve until staff are in place.

Psychological Therapies RTT

The national RTT Target is that 90% of patients commence psychological therapy within 18 weeks of referral (Figure 5).

- In August 2021, 86.53% of patients commenced psychological therapy within 18 weeks,
 - This compares to 85.2% the previous month.
 - The current Scottish average is approx. 81%
- Month-on-month performance has improved over the past 7 months
- The number of patients on the waiting list increased fell slightly from 2406 to 2339
- The longest wait remains within the specialist Neuropsychology service, at 81 weeks
 - This will be mitigated when additional clinical psychologists commence in this service over the next several months.

HEAT Summary	PT	
No. of Patients Waiting (Overall)	2339	
No. of Patients Waiting <= 18 weeks	1866	
% Waiting <= 18 weeks (Overall)	79.78%	
Longest Wait Overall (Weeks)	81	
PT Team with longest wait	Neuropsychology	
No. of Completed Waits	683	
No. of Completed Waits <= 18		
weeks	591	
% Completed Waits <= 18 Weeks	86.53%	

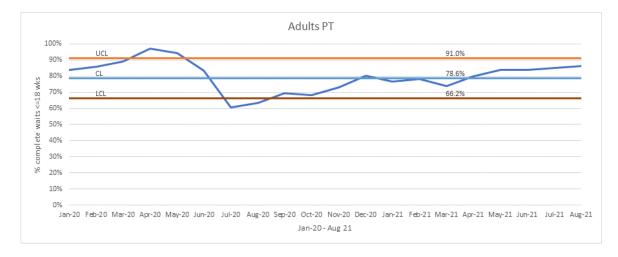


Figure 5 Adults PT performance

Following discussions with Scottish Government, it has been agreed that NHS Lanarkshire will henceforth only report adult psychological therapies waiting times. This is because CAMHS are currently unable to disaggregate psychological therapies from their overall data and, whilst the overall CAMHS data has been used as a proxy measure over the past several years, this is not accurate and only served to skew and distort the majority of psychological therapies waiting times data.

CAMHS report all treatment activity against the RTT, not psychological therapy separately.

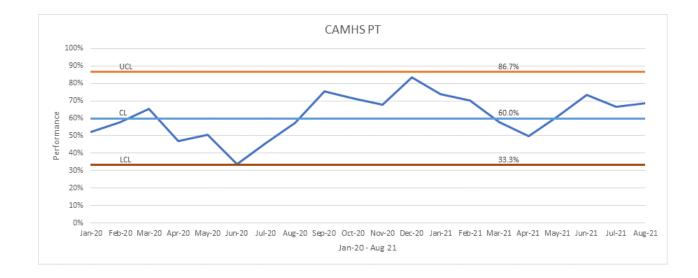


Figure 6 CAMHS RTT performance

The CAMHS RTT showed 68.63% of patients commenced intervention within 18 weeks of referral August 2021

Further recovery meetings have taken place with the Scottish Government Mental Health Directorate to finalise the future staffing model for the Lanarkshire CAMHS service, including use of the national MH Recovery and Renewal funding. A fuller update paper is going to the November meeting of the Population Health Committee covering the wider Mental Health strategy implementation and CAMHS recovery work.