QUALITY AND PERFORMANCE REPORT
DECEMBER 2019

INTRODUCTION

The Quality and Performance Committee obtains assurance that high standards of care are provided by Health and Community Serives (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 comittee that care groups are meeting quality and performance across the full raage of HCS services and activities. Wheere performance is below standards, the committee will ensure that robust reovery plans are developed and implemented.

BACKGROUND

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

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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

Whilst the total number of day cases decreased in December 2019 there was a 13% increase in day case activity in 2019.

Occupancy at Orchard House has decreased as average LOS & the total number of admissions & the % of patients with a LOS > 60 days all decreased in December 2019.

% discharges before midday is a new metric on the QPR and will need RAG rating setting. Currently 15.9% in December 2019.

EL & EM LOS are both green in December but there is positive correlation in EM LOS showing an increase over the past 12 months. In line with this the total number of stranded patients (> 7 day LOS) grew by 17% in 2019.

Achieved the tooth extraction target for 2019, 199 vs target of 300.

No MRSA in 2019 and 13 C-Diff cases.

WEAKNESSES

There were 49 births in Maternity in December 2019, a 39% reduction on the previous month. Despite this the department had 4 3rd Degree Perineal tears (8.2%) and 45.8% of deliveries were via c-section.

The Outpatient 1st appointment waiting list finished the year with 9176 patients (unvalidated) on the list, a 1% reduction on the previous month but an 11% increase when compared to 2018.

37% of these patients have been waiting > 90 days.

Similarly the elective waiting list saw 12% growth when compared to 2018 ending the year with 2600 patients on the list.

53% of these patients have been waiting > 90 days.

As a balancing measure there was a 9% increase in referrals in 2019 v 2018.

The Emergency Department saw an increase in 10 hour breaches (26) and the conversion rate increased to 16.6% (although this is similar to the same period last year - Dec 18).

There is an issue with the older adult acute bed occupancy data which is currently being investigated.

Falls and Pressure Ulcers both Red and consistent across the year.

Community MH caseload and CAMHS caseload both significantly increased in 2019 (16%-17%) with CAMHS assessment completed in target at 50% for Urgent and 0% for Soon/Routine.

DEMAND AND ACTIVITY

Measure	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	TREND	YTD	% Change On Month	% Change YoY
Deliveries	81	75	80	71	68	73	65	90	74	86	75	80	49		886	-39%	-40%
ED Attendances	2973	3011	2717	3104	3251	3423	3465	3660	3488	3312	3289	3037	3170		38927	4%	7%
Emergency Admissions	636	651	569	659	660	641	652	666	627	612	641	613	675		7666	10%	6%
Elective Admissions	165	217	172	186	189	191	197	200	155	197	199	182	154		2239	-15%	-7%
Day Cases	521	689	686	715	602	674	681	710	479	615	804	647	600		7902	-7%	15%
Stranded patients with LOS > 7 days	133	154	164	150	150	178	129	164	154	144	147	171	160		1865	-6%	20%
Outpatient Referrals	2990	4054	3711	3962	3911	3842	3884	4305	3634	3511	4698	3730	3275		46517	-12%	10%
Outpatient Attendances	14034	16911	15798	16534	15988	15495	16047	17706	15781	15245	17264	15292	13985		192046	-9%	0%
OP 1st Appointment Waiting List	8193	8575	8520	8787	8721	8990	9216	9146	8787	8751	9040	9300	9176		9176	-1%	12%
Elective Waiting List	2287	2311	2387	2377	2522	2421	2428	2408	2690	2644	2451	2510	2600		2600	4%	14%
Community MH Caseload	1823	1824	1829	1864	1877	1860	1882	1892	1956	2060	2121	2152	2179		2179	1%	20%
CAMHS Caseload	597	605	622	615	600	592	618	621	626	627	665	702	722		7615	3%	21%
JTT Referrals	105	152	131	141	139	160	131	139	128	110	159	101	103		1594	2%	-2%

Government of Jersey - Health and Community Services

QUALITY AND PERFORMANCE SCORECARD

CATEGORY	INDICATOR	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	TREND	YTD	STD
WOMEN, CHILDREN AND FAMILY CARE																	
Maternity	% deliveries by C-section (Planned & Unscheduled)	34.2%	44.9%	34.6%	28.0%	30.9%	39.7%	46.9%	32.6%	30.7%	33.7%	39.5%	39.2%	45.8%		36.8%	R:>26% A:22%-26% G:<22%
	% deliveries home birth (Planned & Unscheduled)	3.7%	2.7%	0.0%	2.8%	7.4%	4.1%	1.5%	2.2%	2.7%	3.5%	1.3%	2.5%	4.1%		3.1%	TBC
	% 3rd degree perineal tear	1.2%	1.3%	1.3%	2.8%	1.5%	1.4%	1.5%	0.0%	5.4%	1.2%	5.3%	1.3%	8.2%		2.6%	3.50%
	% primary pospartum haemorrhage > 1500	0.0%	2.7%	6.3%	5.6%	2.9%	4.1%	7.7%	8.9%	1.4%	2.3%	4.0%	8.8%	0.0%		5.0%	2.70%
	% of women that have an induced labour	17.3%	18.7%	25.0%	23.9%	29.4%	23.3%	32.3%	23.3%	24.3%	23.3%	26.7%	28.8%	28.6%		25.4%	R:>25% A:20%-25% G:<20%
	Average length of stay on maternity ward	2.9	2.5	2.5	2.9	2.4	2.4	2.4	3.2	2.3	2.2	2.3	2.5	2.5		2.5	TBC
Childrens Services	Average length of stay on robin ward	0.8	2.1	1.0	1.7	2.6	1.1	1.4	1.1	1.2	1.1	1.0	2.4	1.3		1.5	TBC
	Did not Bring Rate	9.9%	7.6%	9.5%	7.2%	10.1%	10.6%	8.7%	10.9%	10.2%	9.6%	8.8%	9.0%	9.6%		9.3%	TBC
	Tooth extractions for patients <18	26	21	11	28	10	9	12	12	22	17	17	18	22		199	<25
SECONDARY SCHEDULED CARE																	
Outpatients	% patients waiting >90 days for 1st appointment	35.8%	34.8%	35.3%	33.8%	34.1%	34.5%	35.5%	34.7%	35.7%	37.2%	35.4%	34.6%	37.0%		35.2%	R:>35% A:25%-35% G:<25%
	Outpatient Did not attend (DNA) Rate	9.3%	9.2%	9.0%	8.7%	9.3%	9.3%	8.6%	9.2%	8.9%	9.2%	9.3%	9.5%	9.0%		9.1%	8%
	New to follow-up ratio	3.53	3.54	3.32	3.45	3.31	3.33	3.26	3.29	2.99	3.38	3.35	3.32	3.14		3.30	2
Elective Inpatients	% of patients waiting > 90 days for elective admissions	37.7%	42.5%	42.9%	44.2%	44.3%	47.4%	46.0%	47.6%	47.7%	49.4%	49.7%	50.5%	53.0%		47.2%	R:>35% A:25%-35% G:<25%
	Acute elective length of stay (not including Samares)	1.7	2.1	2.0	2.6	2.4	1.7	2.0	1.8	2.1	1.7	2.2	2.2	2.0		2.1	R:>4 A:3-4 G:<3
Theatres	Intra-session theatre utilisation rate	77.7%	80.3%	79.5%	79.4%	82.0%	78.2%	77.6%	78.2%	77.9%	79.8%	79.2%	75.2%	74.1%		78.4%	85%

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CATEGORY	INDICATOR	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	TREND	YTD	STD
SECONDARY UNSCHEDULED CARE																	
Ambulance	Red 1/ Red 2 ambulance response within 8 mins	62.3%	64.9%	64.1%	68.2%	61.8%	60.6%	63.8%	61.0%	70.3%	66.9%	61.7%	63.2%	58.8%		64.3%	R:<65% A:65%-75% G:>75%
Emergency Department	Average time in ED (Mins)	147	146	143	142	161	161	167	162	153	147	146	157	166		155	<=240
	% triaged within 15 minutes of arrival	80.9%	73.4%	75.3%	73.5%	69.2%	72.2%	65.2%	67.9%	71.8%	70.7%	74.8%	76.3%	73.6%		71.8%	>90%
	% commenced treatment within 60 minutes	74.3%	74.6%	70.6%	71.8%	65.9%	69.2%	62.0%	66.6%	72.5%	75.5%	78.5%	74.6%	67.9%		70.7%	>70%
	Total patients in department > 10 hours	5	7	13	6	14	36	26	33	23	17	7	16	26		224	0
	ED conversion rate	16.2%	14.7%	14.8%	14.4%	13.8%	14.5%	13.7%	13.3%	13.3%	13.6%	13.7%	15.6%	16.6%		14.3%	<=15%
Acute Floor	% discharged within 48 hours (to home) from EAU	56.5%	50.0%	52.4%	51.1%	47.1%	46.2%	44.7%	51.0%	46.0%	45.2%	46.9%	49.0%	57.5%		48.8%	R:<30% A:30%-35% G:>35%
Emergency Inpatients	Average length of stay (not including Samares)	4.1	4.9	4.8	4.3	4.4	4.8	4.1	4.6	5.0	4.4	4.7	5.2	4.7		4.7	R:>10 A:8-10 G:<8
	% emergency admissions with 0 length of stay	19.1%	14.5%	18.5%	18.2%	15.1%	18.0%	13.4%	18.3%	16.2%	14.1%	15.6%	11.6%	13.8%		15.6%	R:>17% A:15%-17% G:<15%
	% discharges before midday	20.0%	14.6%	16.2%	18.4%	14.8%	15.4%	17.2%	16.7%	14.5%	19.8%	16.2%	16.0%	15.9%			25%
	Acute bed occupancy at midnight (EL & NEL)	62.3%	71.2%	68.6%	64.7%	68.2%	70.1%	68.3%	70.6%	64.6%	65.3%	69.3%	71.3%	65.9%		68.2%	R:>85% A:80%-85% G:<80%
	% Emergency re-admissions within 30 days	8.1%	9.6%	11.5%	11.9%	14.0%	11.6%	13.0%	12.6%	11.6%	12.5%	12.4%	14.7%	Reported 1 month in arrears		12.2%	R:>10% A:8%-10% G:<8%

CATEGORY	INDICATOR	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	TREND	YTD	STD
MENTAL HEALTH																	
Adult Acute (Orchard House)	Acute admissions per 100,000 registered population	20	21	18	23	17	38	28	30	24	20	25	21	21		24	<20
	Adult acute admissions patients < 18 years	1	1	0	2	0	1	0	1	0	1	0	1	0		7	0
	Adult acute bed occupancy (including leave)	82.8%	91.7%	68.5%	75.2%	72.9%	67.1%	78.5%	91.9%	87.0%	89.8%	92.1%	88.3%	86.7%		82.7%	<88%
	Adult acute length of stay (including leave)	43	37	57	23	28	24	12	22	18	23	42	28	21		28	<28 Days
	% Adult acute admissions under MH Law	35.7%	33.3%	7.7%	31.3%	16.7%	14.8%	25.0%	52.4%	23.5%	50.0%	38.9%	33.3%	26.7%		29.6%	<37%
	% patients discharged with LOS >= 60 days	15.4%	23.5%	20.0%	8.3%	17.6%	7.7%	0.0%	4.3%	11.8%	9.1%	26.3%	11.1%	6.7%		12.3%	<14%
Older Adult Acute (Beech/Cedar)	Older adult acute admissions per 100,000 registered population	39	43	33	16	38	38	49	38	38	38	38	76	43		41	<35
	Older adult acute bed occupancy (including leave)	83.7%	87.5%	87.3%	73.4%	67.8%	71.6%	71.1%	76.4%	71.6%	68.5%	63.3%	72.4%	ND		77.1%	<85%
	Older adult acute length of stay (including leave)	27	80	79	119	30	215	57	47	72	207	94	55	45		92	<85 Days
Community Mental Health	CMHT did not attend rate	10.2%	6.4%	6.0%	6.2%	7.3%	7.3%	7.6%	6.4%	7.9%	7.5%	7.0%	7.5%	6.1%		6.9%	<6.5%
CAMHS	Referral acceptance rate	89.7%	86.8%	72.2%	92.5%	83.3%	89.6%	81.5%	89.1%	81.1%	100.0%	91.2%	81.3%	94.3%		86.6%	77%
	Re-referrals as a % of total referrals received	29.3%	23.5%	29.6%	39.6%	31.0%	33.3%	38.9%	41.3%	45.9%	55.9%	47.3%	59.4%	57.1%		41.4%	15%
	% assessments completed within target																
	Urgent (2 days)	55.6%	86.4%	40.0%	91.7%	100.0%	75.0%	78.6%	100.0%	85.7%	93.8%	70.0%	70.6%	50.0%		81.0%	TBC
	Soon (14 days)	50.0%	22.2%	0.0%	50.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		30.8%	TBC
	Routine (28 days)	0.0%	0.0%	9.1%	4.5%	25.0%	68.8%	66.7%	75.0%	0.0%	21.4%	29.4%	0.0%	0.0%		24.1%	TBC
Jersey Talking Therapies	% Waited > 18 weeks for treatment	84.0%	71.3%	59.6%	58.3%	38.9%	46.7%	58.5%	57.5%	52.9%	59.4%	68.1%	68.9%	66.7%			R:>2% A:1%-2% G:<1%

CATEGORY	INDICATOR		Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	TREND	YTD	STD
SOCIAL CARE																		
Safeguarding	Number of safeguarding alerts / self-neglect referrals		25	34	32	27	29	32	25	42	30	42	46	31	42		412	TBC
	Number of safeguarding alerts / self-neglect referrals for children		116	120	110	145	91	114	142	139	66	111	103	102	ND		1243	TBC
INFECTION CONTROL AND PATIENT SAFETY																		
Infection Control	MRSA Bacteraemia	Hosp	0	0	0	0	0	0	0	0	0	0	0	0	0		0	TBC
	C-Diff Cases	Hosp	1	0	0	1	1	3	0	2	0	1	1	3	1		4	TBC
Patient Safety	Number of falls per 1,000 bed days		5	4	6	4	6	6	5	4	4	4	5	4	5		5	TBC
	Number of falls resulting in harm		42	39	49	38	44	52	35	33	31	42	47	42	40		492	TBC
	Number of patient safety incidents		235	273	284	291	296	317	296	333	277	322	341	320	247		3597	TBC
	Number of medication errors resulting in harm		1	0	1	2	0	2	2	2	2	1	0	1	3		16	TBC
	Number of cat 2 pressure ulcers acquired as an inpatient		6	6	4	7	12	9	13	14	5	10	12	9	8		109	TBC
	Number of cat 3-4 pressure ulcers acquired as an inpatient		0	0	0	0	0	0	0	2	1	1	0	0	1		5	TBC
	Number of never events reported		0	0	0	0	0	0	0	0	0	0	0	0	0		ND	TBC
	Number of serious incidents reported		0	1	1	3	1	1	2	0	1	1	2	0	0		13	TBC
LEADERSHIP AND DEVELOPMENT																		
Complaints and Compliments	Total complaints received		12	25	26	24	20	25	20	28	21	26	16	20	27		278	R:>30 A:20-30 G:<20
	Total compliments received		4	12	13	11	24	13	12	16	8	5	16	9	10		149	NA

Jersey Nursing Assessment and Accreditation System (JNAAS) Scorecard

JERSEY NURSING ASSESSMENT AND ACCREDITATION SYSTEM (JNAAS) METRICS

Metric columns: S1: Organisation, S2: Safeguarding, S3: Pain, S4: Patient Safety, S5: Environment, S6: Nutrition, S7: End of Life, S8: Medicines, S9: Person Centred, S10: Pressure Ulcers, S11: Elimination, S12: Communication, S13: Infection Control, S14: Governance, S15: Profession Specific

CARE GROUP	WARD	S15: Profession Specific	Overall Score	Previous Score	NEXT REVIEW DATE
Unscheduled Care	ED	N/A	16/10/2019	06/12/2018	16/10/2020
	EAU	N/A	08/08/2019	19/09/2018	08/08/2020
	HDU/ICU	N/A	16/12/2018	N/A	24/10/2019
Scheduled Care	Bartlett Ward	N/A	07/02/2019	26/01/2018	04/02/2020(TBC)
	Plemont Ward	N/A	23/05/2019	12/06/2018	23/05/2020
	Corbiere Ward	N/A	23/09/2019	06/09/2018	23/09/2020
	Beauport Ward	N/A	17/05/2019	19/12/2018	17/05/2020
	Portelet Ward	N/A	07/03/2019	23/05/2018	03/03/2020(TBC)
	Rayner Ward	N/A	01/10/2019	17/10/2018	01/10/2019
	Sorel Ward	N/A	28/02/2019	28/02/2018	27/02/2020 (TBC)
Women, Children & Family Care	Maternity	(amber)	15/08/2019	N/A	15/12/2019
	SCBU	N/A	N/A	N/A	TBC
	Robin	N/A	18/09/2019	N/A	18/09/2020
Mental Health	Orchard House	(red)	30/10/2019	05/06/2019	01/07/2020 (TBC)
	Maple	N/A	13/08/2019	12/09/2018	13/08/2020
	Oak	N/A	31/10/2019	14/05/2018	31/10/2020(TBC)
	Cedar	(red)	08/08/2019	10/04/2019	08/08/2020
	Beech	(red)	11/01/2019	N/A	09/01/2020 (TBC)
	SandyBrook	N/A	16/04/2019	11/12/2018	16/04/2020
Prevention, Primary & Intermediate Care	Samares	N/A	06/06/2019	05/07/2018	30/07/2020