



The Office of the
Committee for
Health & Social Care

THE
MEDICAL
SPECIALIST
GROUP
LLP



Partnership
of Purpose

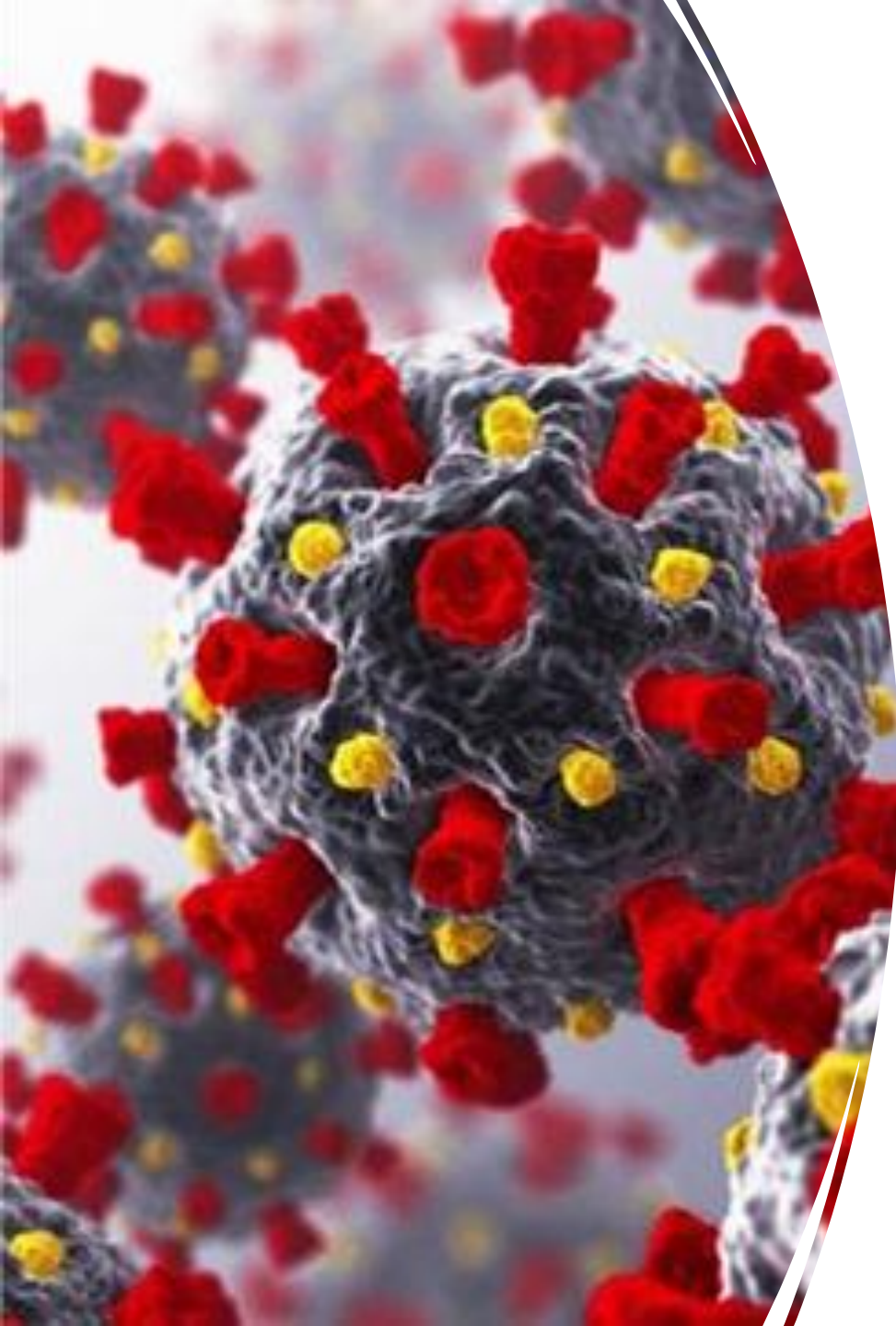
Secondary Healthcare Contract Key Performance Indicator (KPI) Measures: 2020 Summary

Further detail on each of these KPIs can be found in the "Supporting Information" document.

KPI measures are reported across the following themes:

- | | |
|--------------------------------|---------------------------|
| 1. Professional Compliance | 4. Outpatient Measures |
| 2. Patient Safety & Experience | 5. Inpatient Measures |
| 3. Waiting Times | 6. Patient Focus Measures |





Impact of COVID-19 on 2020 KPIs

HSC & MSG are proud of their achievements in what has been an extraordinary year. The response by the Bailiwick to the COVID-19 pandemic had a profound impact on the delivery of health and social care services, with all aspects impacted to a greater or lesser extent.

When looking at the trends in the following data for this year against previous years it is important to factor in the impact of the pandemic.

Once again, islanders are thanked for their response and support of the process to manage the COVID-19 threat and are asked for their patience whilst HSC and MSG continue to work together to recover surgical services and optimise the activity that can be delivered for patients over the course of the next year.

In addition, to manage this demand and to keep pace with the ever evolving needs and requirements of our changing community, HSC are delivering a major 'Hospital Modernisation Programme' which, subject to States' approvals, aims to break ground in 2021, providing the facilities, services and capacity required by our community into the future.

1

Professional Compliance

Target: 100%
2020 Result: 100%



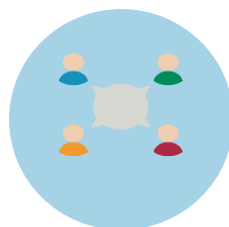
Up to Date Job Plans & Job Descriptions

Completion of Annual Appraisals



Target: 100%
2020 Result: 98%

Target: 70%
2020 Result: 75%



Attendance in the Cancer Multidisciplinary Team Meetings

Target: 70%
2020 Result: 74%



Attendance at Contractual Meetings

Compliance with Discharge Summaries Process



Target: 100%
2020 Result: 73%

Attendance of Academic Half Days (AHDs)



Target: To attend seven out of the 12 AHDs that are delivered across the year.

Due to the pandemic only nine AHDs were delivered in 2020.

2 Patient Safety & Experience Measures



Never Events

Never Events' are serious clinical incidents in specific areas or situations as defined by the NHS. They are an important part of an open (just) culture. They are fully investigated so we can learn from them to help improve the care we provide.

The number of 'Never Events' is published every three years. From 2018 to 2020 four 'Never Events' were reported.



Hospital Acquired Infection Rate

This KPI measures the number of infections for E.coli, C. Diff., MRSA and MSSA which patients have acquired in a hospital stay exceeding 48 hours.

In 2020, there were five incidences arising from 13,114 hospital admissions.

3 Waiting Times - Target 95%

Emergency Department Waiting Times

Target: 4 hours

In 2020, 89% of our service users were admitted and discharged within 4 hours of arrival.



Radiology Waiting Times

Targets: 24 hours, 2, 6 or 8 weeks

In 2020, 77% of patients were seen within the relevant waiting time.



Inpatient Contract Waiting Times

Targets: 24 hours, 7 days, 2 or 8 weeks

Including orthopaedic patients, 69% of inpatients were seen within the contractual waiting time during 2020.

Despite the lockdown in 2020, 100 % of patients requiring emergency treatment (within 24 hours) and 95% of patient requiring urgent treatment (7 days) were admitted within the target time.



Outpatient Contract Waiting Times

Targets: 24 hours, 7 days, 2 or 8 weeks

Including orthopaedic patients, 72% of patients were seen within the contractual waiting time during 2020.

Despite the lockdown, 90% of patients prioritised as Emergency (24 hours), Cancer (14 days) and Urgent (7 days) within their target times.



4

Outpatient Measures

14%



8%



1%



5%



77%



Organisation Cancelled Outpatient Appointment Rate

Target: Less than 10%

The average rate for 2020 was 14%. It should be noted that a cancelled appointment can include changes made in the best interests of the patient, this included reorganising appointments during the pandemic as clinics were moved to other locations or changed to telephone appointments.

Failed to Attend and Short Notice Patient Cancellation Rate Paediatrics

Target: Less than 11%

The average failure to attend / patient cancellation rate for paediatrics in 2020 was 8%. In 2020, this meant that 470 of 6,039 booked appointments were not attended by paediatric patients.

Organisation Initiated Radiology Cancellation Rates

Target: Less than 10%

In 2020, an average of 1% of appointments were cancelled per month.

Failure to Attend and Short Notice Patient Cancellation Rate Adults

Target: Less than 6%

The average failure to attend / cancellation rate for adult outpatient appointments was 5% in 2020. Out of 70,777 appointments, this meant that 3,553 were not attended by the patient.

Meet Expected Timings for Clinics

Target: >90%

During 2020, an average of 77% of patients were seen within 30 minutes of their appointment time. Work is continuing to ensure that all clinicians consistently record their clinic times.

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Inpatient Measures

Average Length of Stay (elective admissions only)

Target: Less than 6 days per stay

2020 Result: 3 days per stay

Delayed Transfer of Care Days

Target: Less than 100 days/month

2020 Result: 151 days per month

Failure to Attend and Short Notice Patient
Cancellation Inpatient Rate

Target: Less than 2%

2020 Result: 1%

Emergency Readmission Rate Within 28
Days of Discharge

Target: Less than 10%

2020 Result: 7%

Organisation Initiated Cancellation Rates

Target: Less than 10%

2020 Result: 7%



5

Inpatient Measures

Day Case Unit to Inpatient Conversion Rate.

Target: Less than 5%

2020 Result: 2%

Meet Expected Timings for Operating Theatres

Target: More than 85%

2020 Result: 78%

**Compliance with Discharge Planning Process
(Estimated discharge date within 24 hours)**

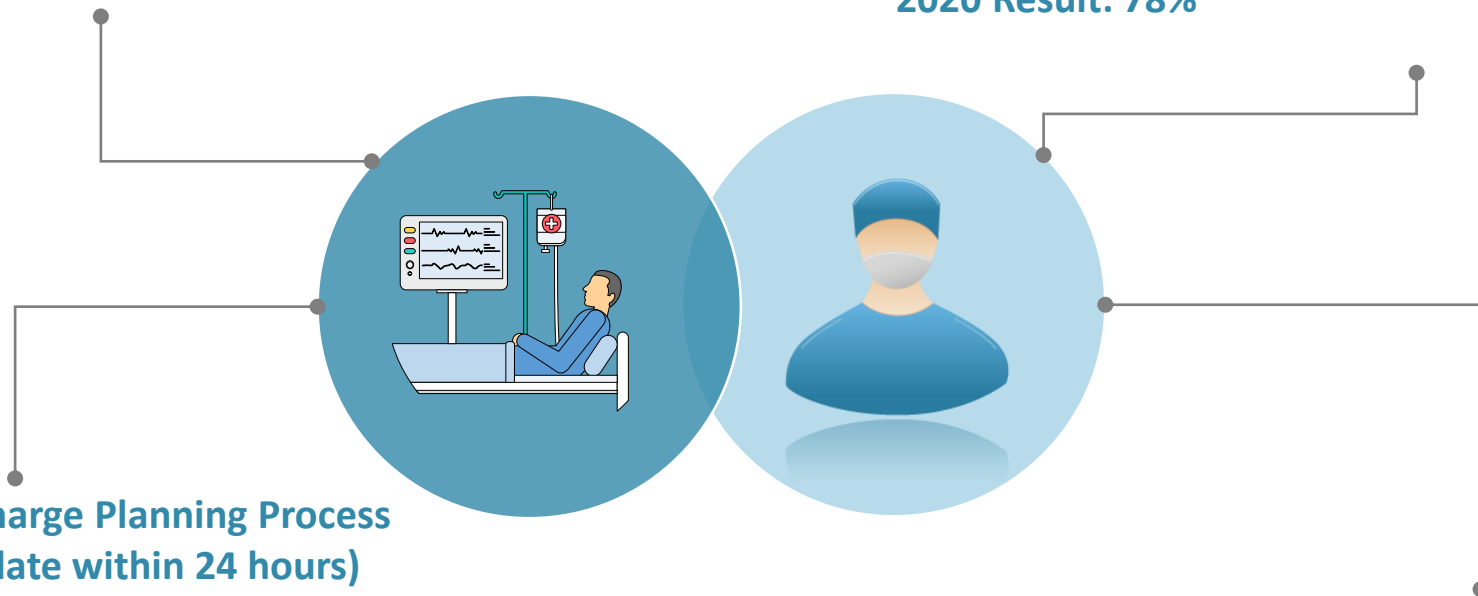
Target: More than 90%

2020 Result: 53%

Unplanned Return to Theatre within 28 days

Target: Less than 2.5%

2020 Result: Less than 0.5%



Patient Focus Measures

Off-Island Activity

Target: 0 per month, 2020 Result: 6 per month

This KPI measures the frequency of occasions when off-island referrals were made incorrectly either because the required referral process was not followed correctly or the referral did not comply with HSC's referral policies.

Family & Friends Test

Target: 85% of respondents select 'Extremely Likely' or 'Likely' Categories, 2020 Result: 100%

This is a recognised national measure which identifies the percentage of service users who respond “extremely likely” to the following question: “How likely are you to recommend this service to friends and family if they needed similar care or treatment?”

Complaints Procedure

Result: 86%

85% of complaints were successfully resolved within 20 days of their receipt, with the balance relating to complex complaints which take longer to investigate and resolve.

Where it was not possible to resolve the complaint within 20 days, an update would be provided to the patient with the reasons for the delay.

