

Performance Report

**COVID position, Critical and Protected Services, Surge and Flow and
Test and Protect**

(Update – Vaccinations and Staff Health and Wellbeing will be presented
at the Board meeting)

February 2021

1. Introduction

The purpose of the report is to provide the Board with a summary of performance in the following areas:

- COVID position
- Surge and Flow
- Critical and Protected Services (Acute)
- Test and Protect

2. COVID position

Since the December Board meeting, there have been significant changes in the COVID position locally and nationally. Additional lockdown measures have been implemented and the NHS Grampian Board moved to Level 4 of the Contingency Plan (the highest level of escalation) in December.

During the latter part of December and early January the COVID 7 day positivity rate peaked nationally, with the peak in Aberdeen City and Aberdeenshire falling a few weeks behind the peak of new case rates in west and central Scotland.

The 7 day positivity rate has continued to decrease nationally and in both Aberdeen City and Aberdeenshire. However cases in Moray have been fluctuated recently due to an incidence of localised outbreaks.

The national vaccine programme commenced in December and good progress has been made in relation to vaccinations of the priority groups determined by the Joint Committee on Vaccination and Immunisation .

We have launched a COVID Vaccination website which will provide further information, both about the delivery of the programme and to provide answers to some frequently asked questions.

3. Test and Protect

Whilst the commencement of the COVID vaccination programme is a major step forward in reducing the risk of the COVID virus, the other measures implemented to minimise and reduce community transmission continue to be critical to protecting the population.

Test and Protect continues to remain a key element of our COVID response and during January we have increased the staffing by a further 20 FTE to increase resilience in the team.

4. Surge and Flow

The key points to note are as follows:

- the paper sets out the current position in relation to the bed occupancy within Aberdeen Royal Infirmary which is close to capacity and a change in the performance against the 4 hour target since December reflecting the pressures on the whole health and social care system. A whole system response has been implemented in line with the winter / surge plan approved by the Board.
- The bed occupancy during the 2nd wave reflects the increase in overall activity we are managing during this period with higher levels of unscheduled care activity in particular which in the 1st wave dropped during the initial COVID response.

5. Critical and Protected Services (Acute)

Planned care (inpatients): the report sets out the current position regarding the activity and performance for inpatients and outpatients

In terms of context, there has been significant pressure on the whole system which under the Board's Tactical Operating Model has required an increase in capacity to meet COVID and winter unscheduled care admissions with a resultant impact on the surgical bed capacity during the latter part of December and January. We remain committed to protecting critical and urgent care and using the ECSATS system to prioritise patients according to clinical priority. The current priority is to support our most critical patients – ESCAT 0 and 1 categories including cancer.

Maintaining this level of capacity has been challenging given the high levels of COVID and winter unscheduled care admissions in recent weeks, with available bed and theatre capacity for surgery having decreased and the waiting list across all ESCAT categories increasing during January. Our whole system effort is focused on improving flow and increasing surgical bed capacity for our priority patients.

Planned care (outpatients)

In relation to outpatients, GP referrals have returned to pre-COVID levels. Outpatient capacity has been maintained, however with these predominately delivered using virtual modes – telephone or Near Me.

The number of patients waiting over 26 weeks has decreased to 8,325 (from 10,525 in September).

Cancer

31 day performance remains better than prior to COVID and, until the impact on bed, theatre and diagnostic capacity during December and January, the 62 day performance had also been better than prior to COVID. Following the 1st COVID wave the remobilisation plan which the clinical teams had implemented was maintaining a balanced demand and capacity position.

However, 62 day performance has been impacted since December due to the need to increase COVID and medical beds and reduce the planned elective bed capacity.

As noted in the commentary on planned care, we are taking a whole system approach consistent with the Winter / Surge plan approved by the Board in January 2021 to establish additional protected bed capacity for our highest priority patients, including cancer. The Performance Governance Committee will continue to seek assurances in relation to these plans and our performance for priority patients.

COVID position

7 day positive COVID rates – 18 – 24 Jan 2021 (compared with position 6 - 12 December 2020)

7 day positive cases in Scotland based on people tested between 6 December 2020 and 12 December 2020

7 day positive cases	7 day positive rate per 100,000 population	7 day test positivity rate
6,039	110.5	5.3%

7 day positive cases in Scotland based on people tested between 18 January 2021 and 24 January 2021

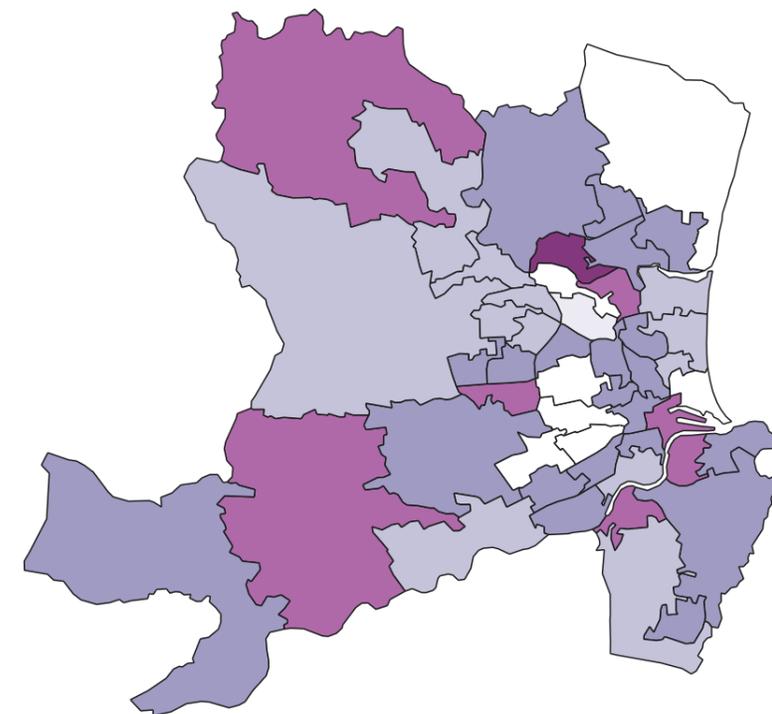
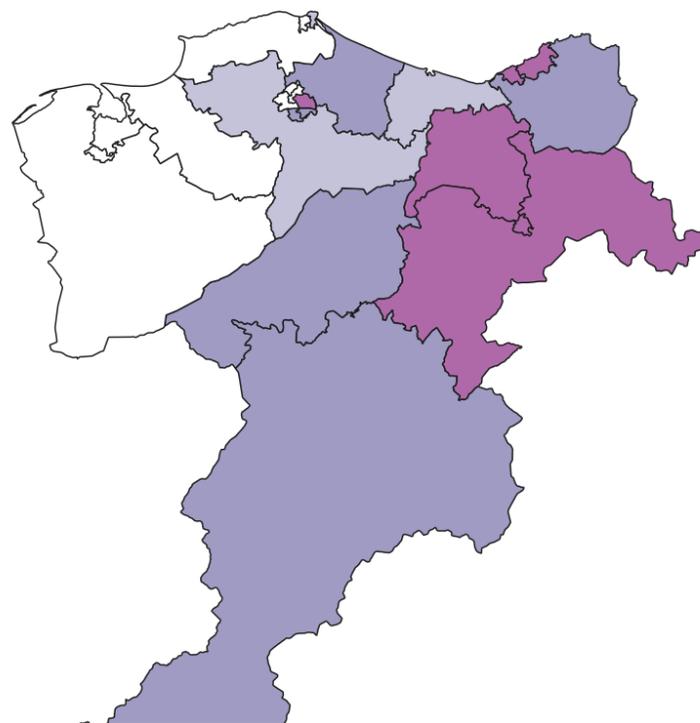
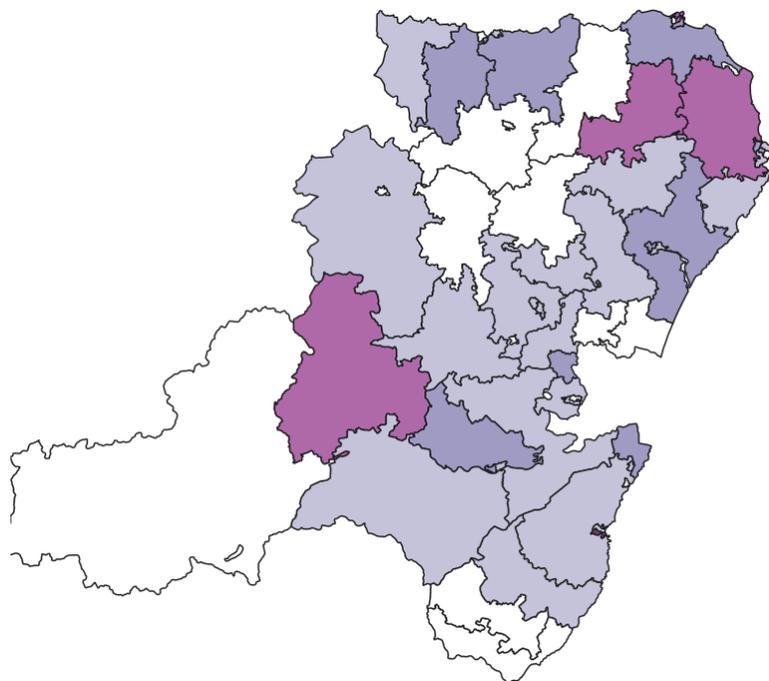
7 day positive cases	7 day positive rate per 100,000 population	7 day test positivity rate
9,142	167.3	7.7%

Aberdeenshire

Moray

Aberdeen City

Suppressed | 1 to 49 | 50 to 99 | 100 to 199 | 200 to 399 | 400+



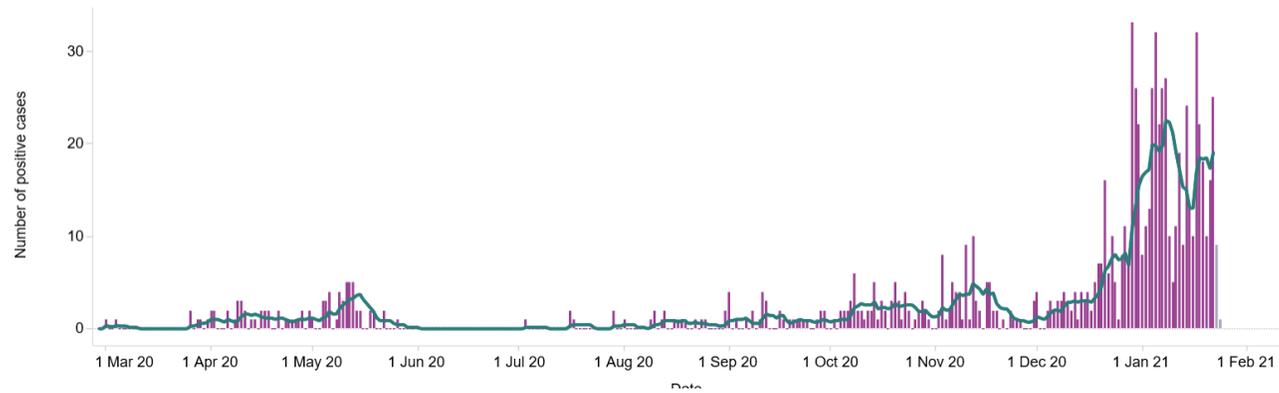
7 day positive cases	Rate per 100,000 pop	7 day positivity rate
276 (226)	105.7 (86.5)	5.8% (4.8%)

7 day positive cases	Rate per 100,000 pop	7 day positivity rate
115 (21)	120.0 (21.9)	6.3% (1.4%)

7 day positive cases	Rate per 100,000 pop	7 day positivity rate
321 (297)	140.4 (129.9)	7.2% (6.3%)

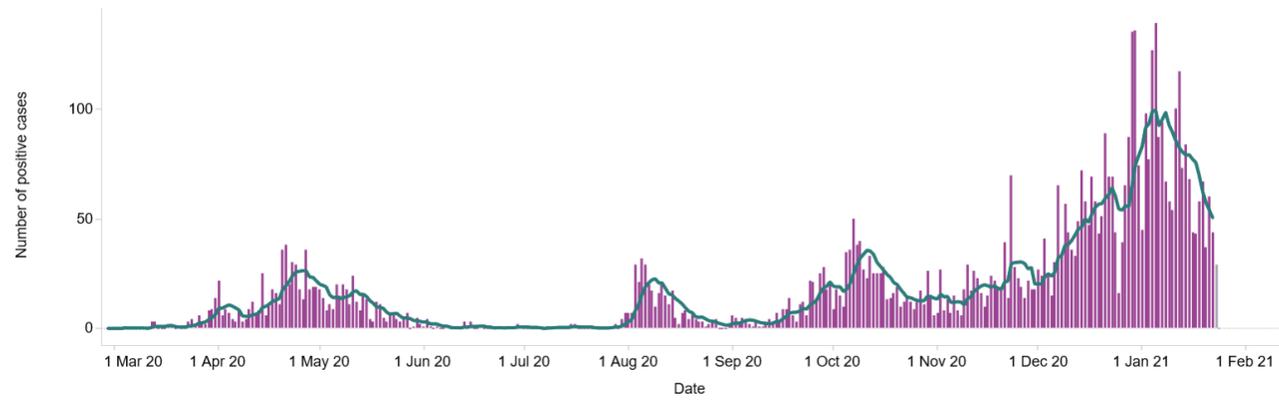
Positive Case Trend by local authority area

Positive cases by specimen date in Moray

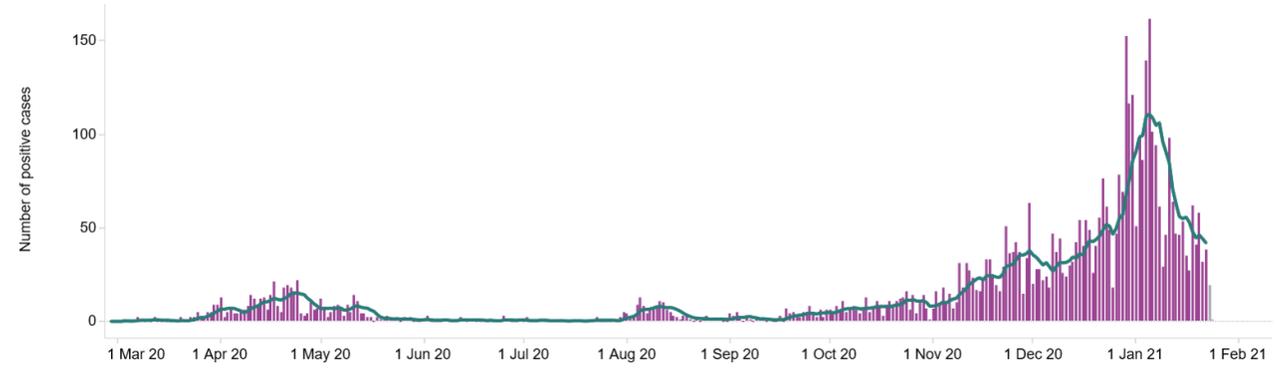


- Daily figure
- 7 day moving average
- Most recent data incomplete

Positive cases by specimen date in Aberdeen City



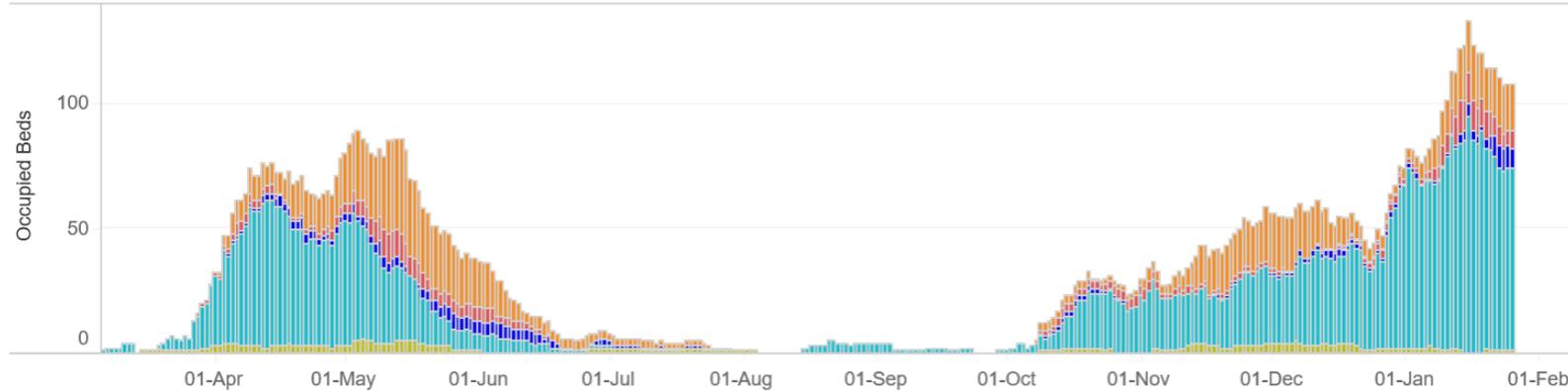
Positive cases by specimen date in Aberdeenshire



These trend charts indicate reducing 7 day average of new case in Aberdeen and Aberdeenshire but with a more variable position in Moray over the last week

Hospitalisation Trend report (including ICU occupancy)

Hospital Occupancy *as at 23:59, counted from Date First Tested Positive



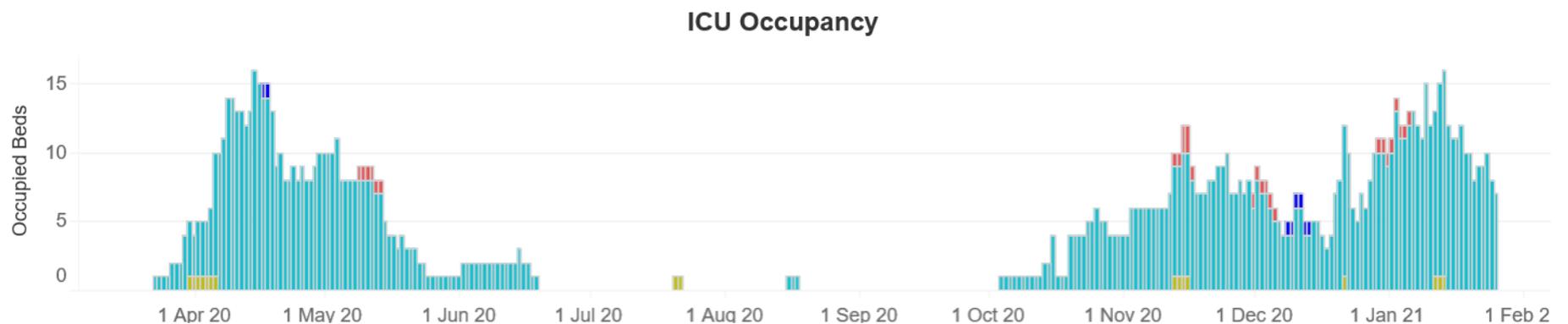
		13/01	14/01	15/01	16/01	17/01	18/01	19/01	20/01	21/01	22/01	23/01	24/01	25/01
Re-admission	Non-nosocomial	4	4	5	4	3	2	4	6	8	9	9	9	8
First admission	Non-nosocomial	83	85	95	85	84	89	80	80	78	73	72	73	73
	Definite Nosocomial	21	22	21	22	22	18	17	17	19	19	19	19	19
	Indeterminate	1						2	1	1	1	1	1	1
	Possible Nosocomial	13	12	12	12	11	11	11	10	8	8	6	6	7
Total		122	123	133	123	120	120	114	114	114	110	107	108	108

- Definite Nosocomial, First admission
- Non-nosocomial, First admission
- Possible Nosocomial, Re-admission
- Indeterminate, First admission
- Possible Nosocomial, First admission
- Non-nosocomial, Re-admission

Definite Nosocomial = in hospital for at least 14 days prior to testing positive for the first time
 Possible Nosocomial = in hospital for 8-14 days prior to testing positive for the first time
 Indeterminate = in hospital for 3-7 days prior to testing positive for the first time

Inpatient COVID now higher than in peak in 1st wave but has been reducing in recent days

ICU Occupancy



Surge and Flow (occupancy)

Unscheduled Care Position – ED Front Door

ED performance

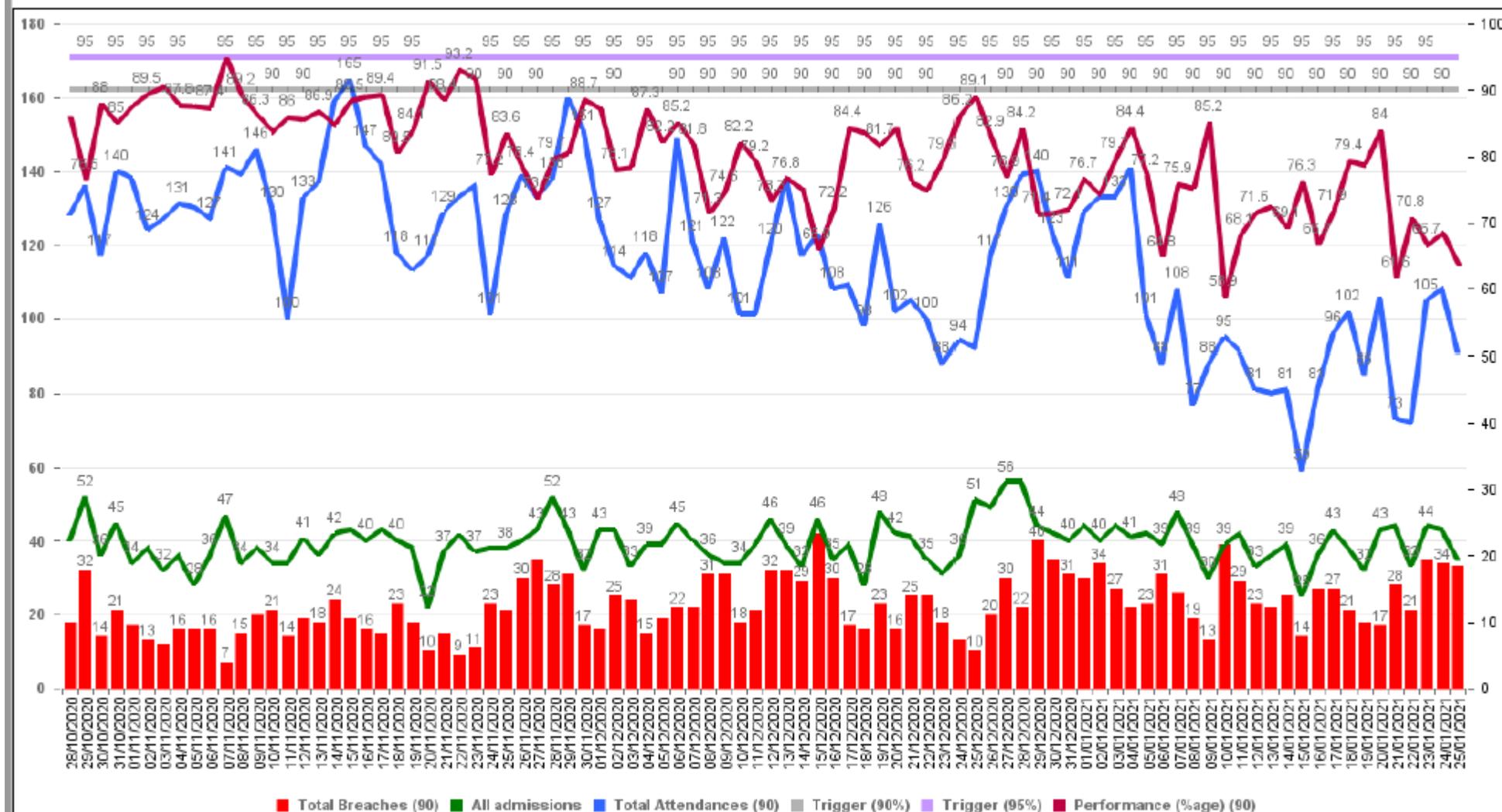
Cumulative this month –
81.6%

Whilst there has been a drop in attendances to ED the wider flow challenges and the complexity of patients presenting is impacting on performance against the 4 hour target.

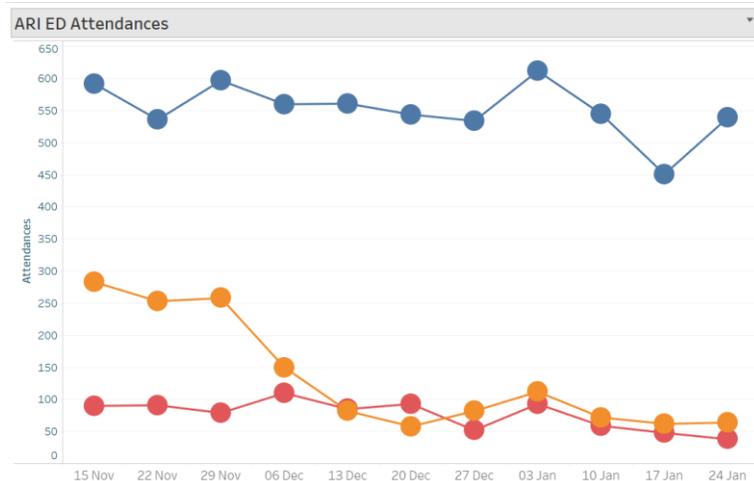
The team have implemented enhanced monitoring and support to assist with the flow in ED and ensuring patients are transferred or discharged safely to the appropriate clinical or community setting.

	21 Jan	22 Jan	23 Jan	24 Jan	25 Jan
Total Acute Daily Performance	77.9%	81.1%	76.9%	78.1%	77.2%

ED performance – last 5 days

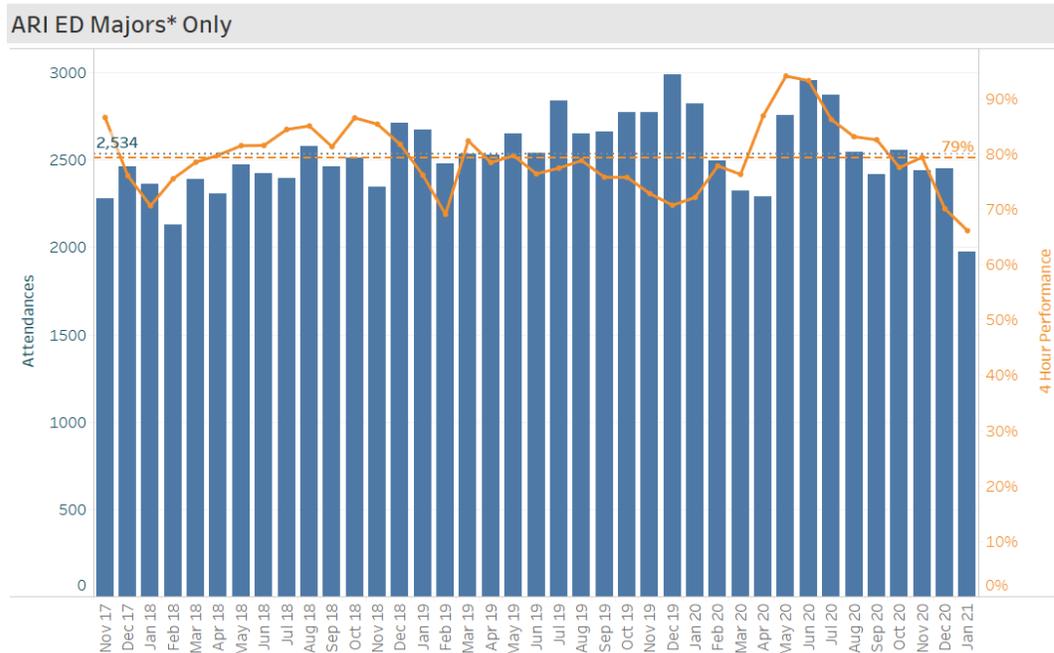


A&E attendances – comparison wit prior years



Drop-off in minor attendances at ARI ED since the launch of the flow navigation centre and but ED majors have increased by over 90 attendances this week (to 24 January)

Does the change in minors presentations explain the drop in 4hr performance at ARI?



4 hour performance for Jan-21 to date at 67% is significantly down and is lower but not dissimilar to changes seen back in winters 17/18 (71%), 18/19 (69%) and 19/20 (71%).

Overall numbers admitted from ED in Jan-21 to date seems to be broadly in-line with recent months with higher admission rates in Dec-20 and Jan-21 reflecting lower levels of minors now attending ED

Community and Care Home occupancy

Occupancy Overview

Acute			Aberdeen City		Aberdeenshire		Moray	
ARI	Dr Grays	Woodend	Community Hospitals	Care Homes	Community Hospitals	Care Homes	Community Hospitals	Care Homes
88%	88%	94%	---	89%	64%	87%	89%	89%

CARE HOME OCCUPANCY

Data Last Updated:

25 Jan 2021

Percentage occupancy excludes unoccupied beds in care homes closed to admissions

88.2%



88.9%



87.1%



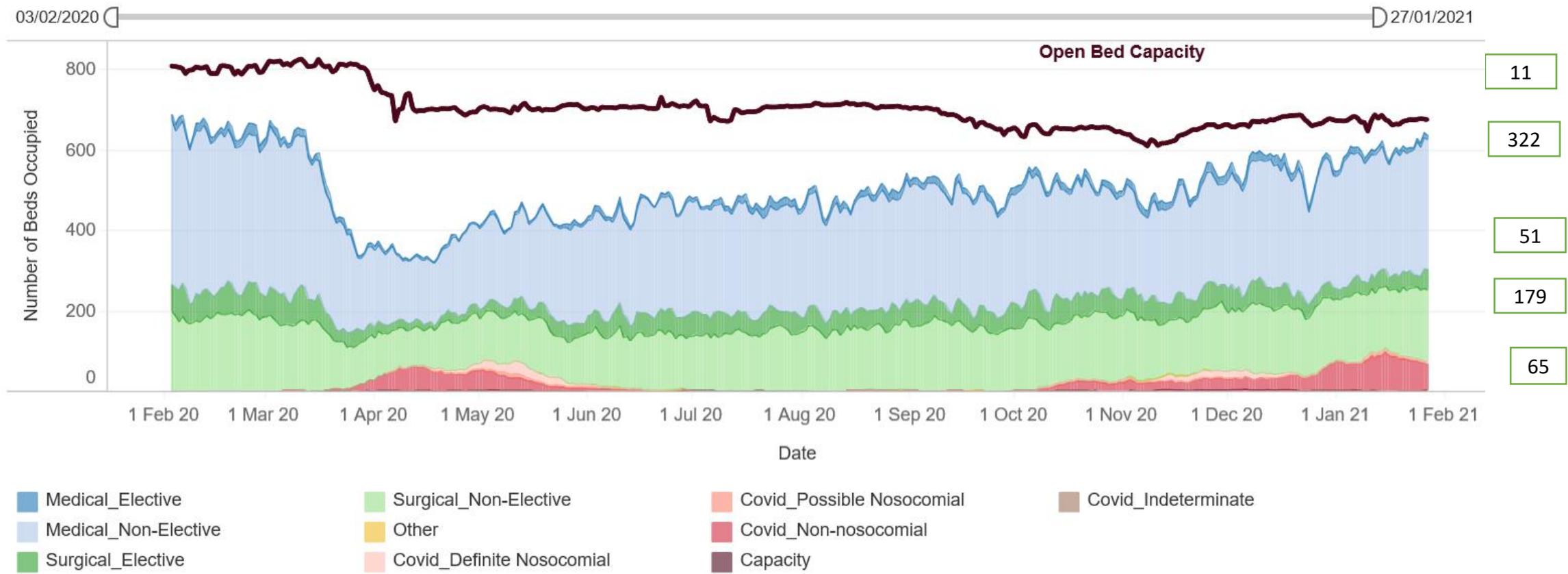
89.5%



- Summary
 By Care Home Type

	Grampian	Aberdeen City	Aberdeenshire	Moray
Safety Huddles Submitted	127	53	61	13
% Submitted		96.4%	92.4%	92.9%
Care Home Residents*	3,318	1,333	1,518	467
Resident Places*	3,966	1,628	1,811	527
Care Homes Closed to Admissions*	19	10	8	1
Care Homes Open with Control Measures in Place*	9	2	5	2
Unoccupied Beds Closed to Admissions*	203	129	69	5
Beds Available for Admission*	445	166	224	55
% Occupancy	88.2%	88.9%	87.1%	89.5%

ARI – occupancy compared to capacity



Max capacity flexed each day to reflect current position

Maintaining – critical and protected services, winter surge requirements and COVID.

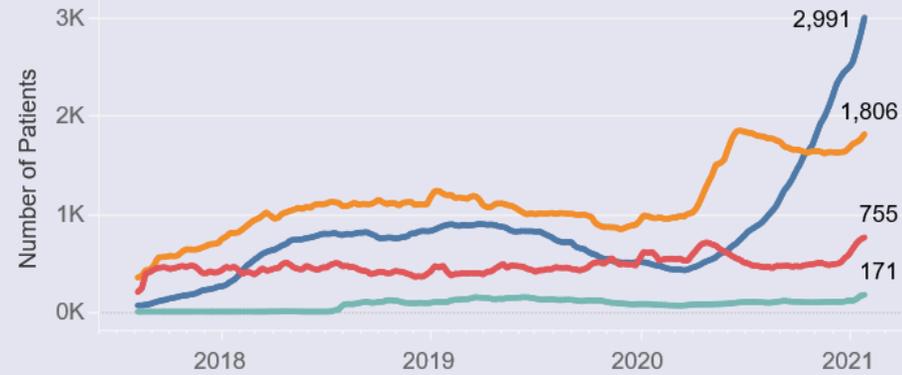
Critical and protected services
(Acute)

ESCAT summary

Waiting List Size



Breachers



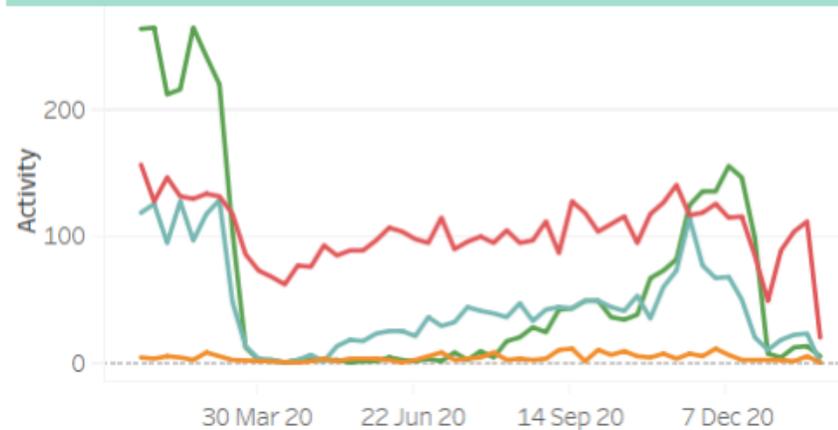
Specialty Waiting List Size

ESCATS : (Multiple val... ▼)

Highlighting goes from green (shrinking) to red (increasing)

	31 Oct	30 Nov	31 Dec	25 Jan
Ear, Nose & Throat (ENT)	21	23	61	87
General Surgery (excl Vascular,...	161	165	182	226
Gynaecology	48	50	54	74
Ophthalmology	129	90	85	116
Oral and Maxillofacial Surgery	8	8	7	9
Plastic Surgery	23	19	24	32
Trauma and Orthopaedic Surge..	12	12	13	31
Urology	230	228	244	275
Other	91	86	110	167
Grand Total	723	681	780	1,017

Activity Trends by ESCATs



Since November there has been a drop in ESCAT 2 and 3 activity in line with protecting ESCAT 1 capacity.

Specialty waiting list table reflects the WT for ESCATS 0 and 1 – significant increase since 31 December

General TTG and Outpatients position

Changes in relation to patients waiting over 26 weeks (TTG and outpatients) are noted below:

	TTG	Outpatients
18 January	6,752	8,325
11 January	6,563	8,459
21 September	7,804	10,525
27 April	2,574	2,929

Additional capacity

Additional local capacity building has been implemented – endoscopy and ultrasound (independent sector offsite) and Albyn Hospital (1 theatre – 18th Jan, 1.5 theatres – 1st Feb and 2 theatres -1st March).

All other independent sector additional capacity has been paused, together with the use of Stracathro Hospital.

The commissioning of increased orthopaedic capacity at Dr Gray's Hospital remains part of our forward plan.

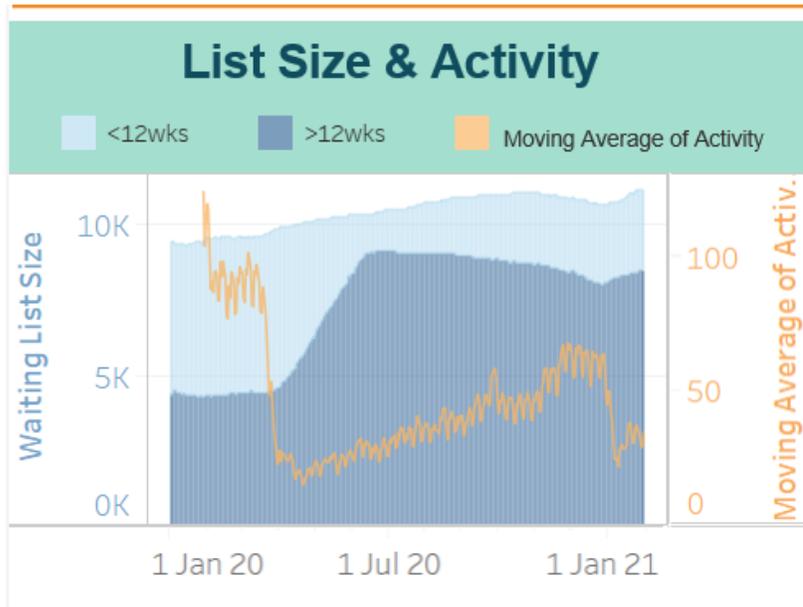
Comments

Inpatient – activity has decreased as reported (see previous slide)

Outpatient – virtual consultations continuing and capacity is broadly in line with demand at this stage.

GP referrals to Acute as shown in following slides are in line with pre-COVID levels

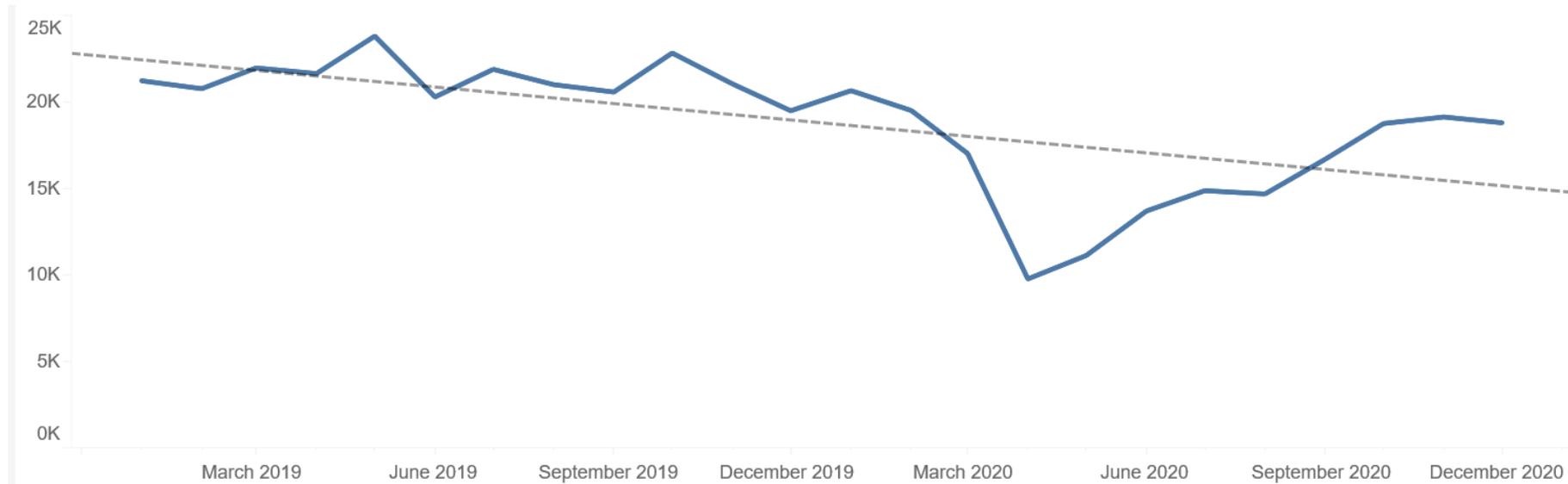
Inpatient List size and activity



Outpatient List size and activity



GP Referrals – Acute Outpatient



REFERRAL SOURCE	December 2019	January 2020	February 2020	March 2020	April 2020	May 2020	June 2020	July 2020	August 2020	September 2020	October 2020	November 2020	December 2020	Grand Total
General Practitioner	10,789	11,432	10,838	9,396	4,798	6,064	7,647	8,590	8,935	10,252	10,989	11,142	10,670	255,503
Consultant at this Health...	6,263	6,533	6,207	5,734	4,319	3,650	4,507	4,944	4,347	4,882	5,778	5,965	6,045	141,662
Optometrist/Optician	623	744	689	498	39	33	63	509	516	667	721	644	600	15,594
Other Healthcare Profes..	553	656	617	507	293	270	400	316	336	296	473	506	507	12,214
Dental Practitioner	471	509	488	345	12	9	15	76	108	115	152	197	228	9,212
Accident and Emergenc..	406	349	284	216	62	828	787	154	136	134	185	247	259	7,837
Self Ref	178	214	182	152	128	163	169	178	177	185	252	196	240	4,442
Consultant from a Healt..	61	81	75	57	36	25	24	37	47	35	56	78	65	1,431
Local Authority/Volunta..	65	53	44	32	5	7	4	2	12	55	65	72	75	1,254
Other (includes Armed F..	15	29	17	17	7	13	10	10	10	13	17	17	25	480
Community Health Servi..	21	7	12	21	24	10	25	9	8	7	19	19	32	432
Specified Other Commo..		1	1		1	2	1		2	2	1		3	21
			6			2			2				1	11
NHS24			1					1	1	1				7
Prison/Penal Establish..														2
Decision Support														1
Judicial OP														1
Grand Total	19,445	20,608	19,461	16,975	9,724	11,076	13,652	14,826	14,637	16,644	18,708	19,083	18,750	450,104

Performance

- Current month performance 98.13% for 31 days and 81.03% for 62 days
- In terms of 62 day cancer performance, the main tumour groups where performance is impacted are - Colorectal, Lung, Lymphoma & Prostate. Further information is presented overleaf in relation to the position and factors impacting on performance
- The 62 day Q3 figure for Grampian is 83.2% (Provisional Q4 figure is 86.18%). Q4 final figures will not be available until 30/03/2021.

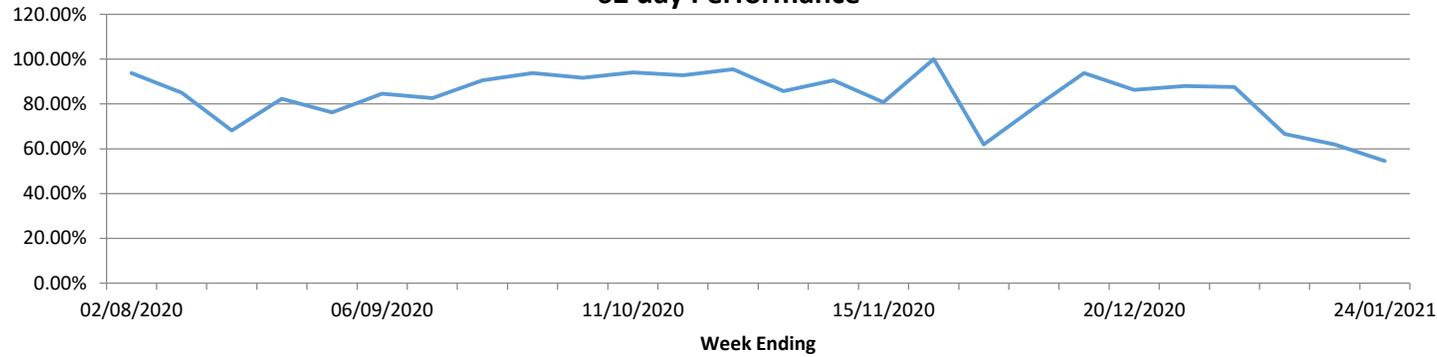
Performance by Cancer Type		31 Days Target				2021	
(RAG Status based on % Performance; Numbers show Referrals Treated)		2020					
		Q1	Q2	Q3	Q4	Q1	
National Target	Bladder	27	47	36	30	4	
	Breast	63	73	77	79	15	
	Breast Screening	43	42	2	35	5	
	Cervical Screening		1				
	Cervix	3	6	3	4		
	Colorectal	67	75	51	64	15	
	Colorectal Screening	8	10	10	2	2	
	Dermatology	5	6	17	20	1	
	Endometrial	5	4	4	5	1	
	Head_Neck	18	10	18	10	4	
	Head_Neck (OMFS)	15	6	3	7	2	
	HPB	37	45	32	36	3	
	Lung	94	103	101	97	23	
	Lymphoma	24	33	35	34	4	
	Neurological	1	3				
	OG	33	34	27	37	5	
	Other Urology	33	25	29	37	5	
	Ovarian	14	7	16	13	2	
	Plastic Surgery	18	21	20	14		
	Prostate	84	96	90	107	33	
Total		592	647	571	631	124	
Not National Target	Endometrial	16	26	13	12	3	
	Mesothelioma	3	3	2	4	1	
	Multiple Myeloma	8	13	12	15	1	
	Neurological	12	11	13	12	3	
	Sarcoma	5	8	4	19	3	
	Thyroid	2	2	6	3		
	Vagina	1					
	Vulva	2	2	2			
	Total		49	65	52	65	11
	Grand Total		641	712	623	696	135

Performance by Cancer Type		62 Days Target				2021
(RAG Status based on % Performance; Numbers show Referrals Treated)		2020				
		Q1	Q2	Q3	Q4	Q1
National Target	Bladder	7	17	20	15	2
	Breast	35	45	56	52	8
	Breast Screening	43	42	2	35	5
	Cervix			1		
	Colorectal	34	41	28	42	11
	Colorectal Screening	9	10	10	2	2
	Dermatology	2	1	10	10	1
	Endometrial		1			1
	Head_Neck	7	3	7	6	2
	Head_Neck (OMFS)	4	1	2	2	1
	HPB	28	30	21	19	2
	Lung	47	48	55	48	16
	Lymphoma	2	8	9	8	2
	Neurological	1	1			
	OG	25	24	21	26	5
	Other Urology	12	6	6	11	
	Ovarian	5	3	10	6	1
	Plastic Surgery	8	10	10	3	
	Prostate	30	41	40	40	13
	Total		299	332	308	326
Not National Target	Endometrial	3	12	5	5	1
	Mesothelioma	2	1	1	1	1
	Multiple Myeloma		1		3	
	Neurological	5	5	6	9	1
	Sarcoma		1		4	1
	Thyroid			1		
	Vulva	1	1	1		
Total		11	21	14	22	4
Grand Total		310	353	322	348	75

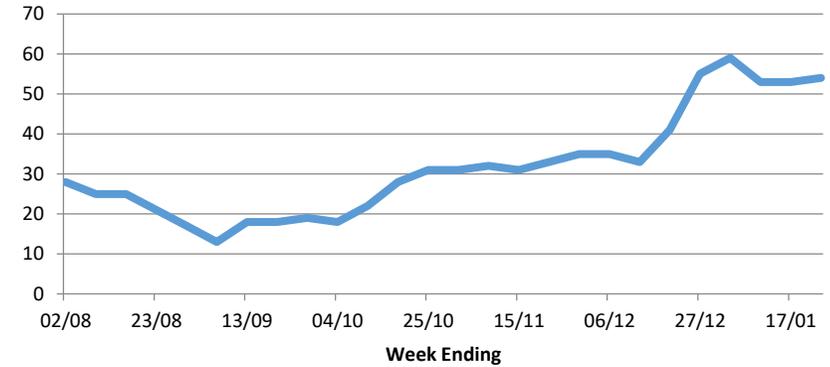
Waiting List Size		2020				2021
(RAG Status and Numbers show Waiting List)		Q1	Q2	Q3	Q4	
		Q1	Q2	Q3	Q4	Q1
National Target	Bladder	5	4	3	2	3
	Breast	19	13	18	13	16
	Breast Screening	17		3	6	4
	Cervical	1	1			1
	Colorectal	16	9	4	4	7
	Colorectal Scree..	5				
	Dermatology				1	
	Head & Neck	6	3	1	4	3
	Head & Neck (O..	1			1	1
	HPB	7	2	3		1
	Lung	5	9	5	13	7
	Lymphoma	2	1	2		1
	Oesophago-gast..	3	1	1		3
	Ovarian	4	4	8	4	5
	Plastic Surgery		4	2	4	3
	Prostate	12	13	8	10	11
Urology	10	5	1	5	6	
Total		113	69	59	67	72
Not National Target	Endometrial	12	4	5	1	4
	Mesothelioma					1
	Multiple Myelo..			2	1	1
	Neurological	2			1	
	Sarcoma	5	1	1	2	
	Thyroid		1	1	1	1
	Vulva	2				
Total		21	6	9	6	7
Grand Total		134	75	68	73	79

Cancer – 62 day performance (additional analysis)

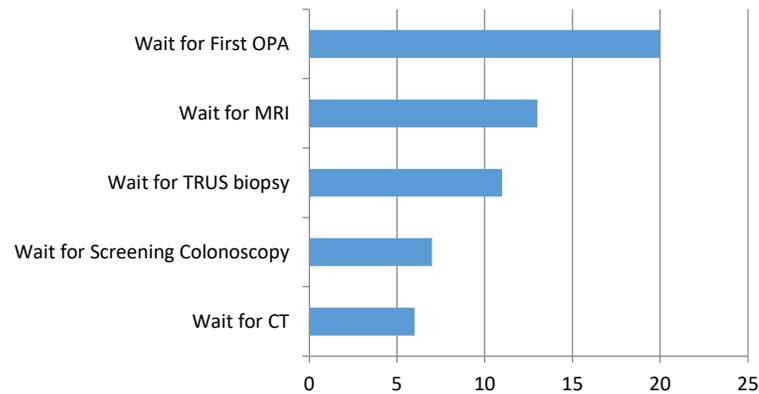
62 day Performance



All Cancers Referrals



Main Reasons for Breach – Aug - Jan

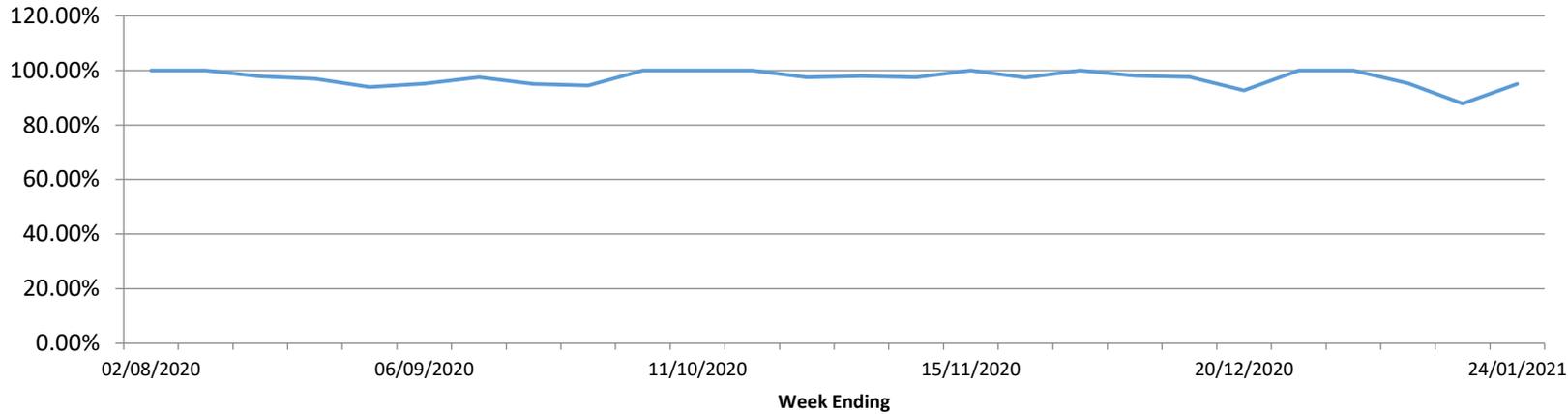


During the 1st COVID wave and the remobilisation plan period to November 2020, our clinical teams were able to protect cancer services and maintain cancer performance at levels at least equal to pre-COVID.

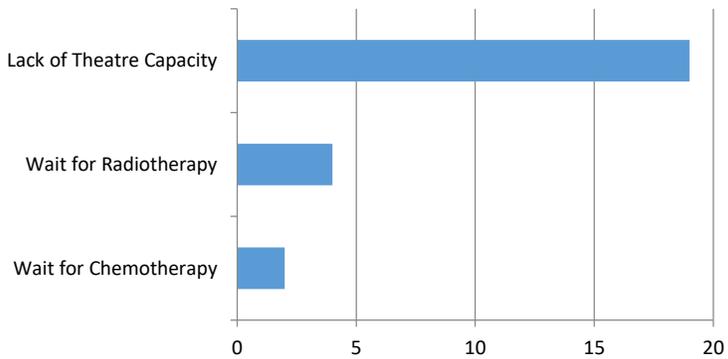
The pattern of performance was also sustained during October and November 2020 as the number of referrals for all cancers started to increase again in line with normal pre-COVID patterns.

However performance in December and January has been impacted primarily by the available bed and theatre capacity, and also for urology access to TRUS biopsy and MRI.

31 day Performance



Main Breach Reasons



Performance in relation to 31 day standard remains consistently at or close to the national standard and this performance has been managed during the 2nd COVID wave. The small number of patients not been seen within the standard relate mainly to availability of theatre capacity.

Cancer – breast, breast screening and colorectal screening & Scoping waiting times

At the last Board meeting further information was requested in relation to the following

Breast cancer (waiting times)

- Urgent Suspected Cancer – 6 weeks
- Urgent – 12 weeks
- Routine – 28 weeks
- Weekend Clinics were run up to the end of December 2020 and there is funding to run further clinics to end of March 2021. We are looking at staffing these sessions but are yet to be able to confirm any dates for 2021.

Breast Screening

- There were no breaches during December.

Colorectal Screening

- Weekend working continues and current wait is 5/6 weeks for ARI and 5 weeks for DGH. Additional weekend capacity using the independent sector has been confirmed until end March 2021, with hope for ongoing provision thereafter.

Scoping

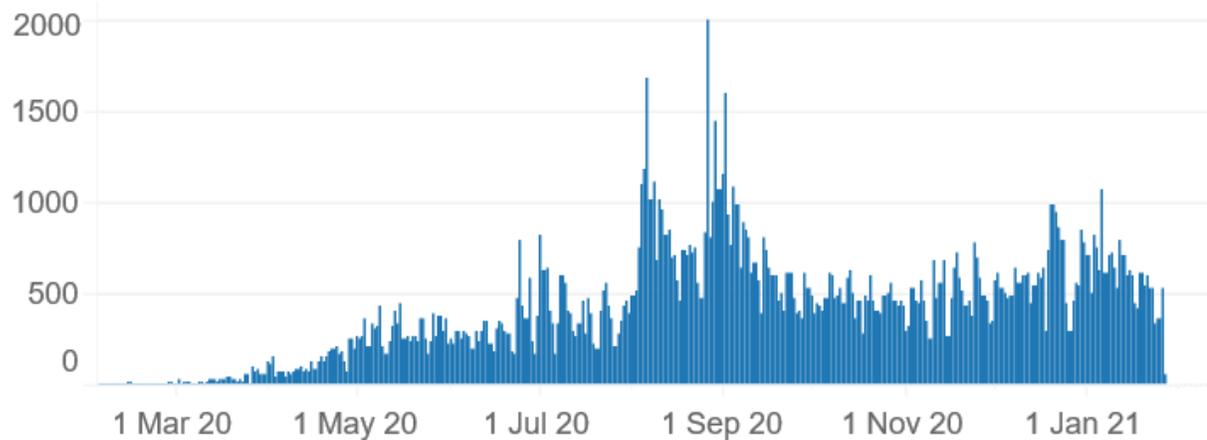
Current average waiting time position as of 15th Jan 2021

- Colon: 10 days
- Flexi: 13 days
- Endoscopy: 11 days
- Screening: 40 Days

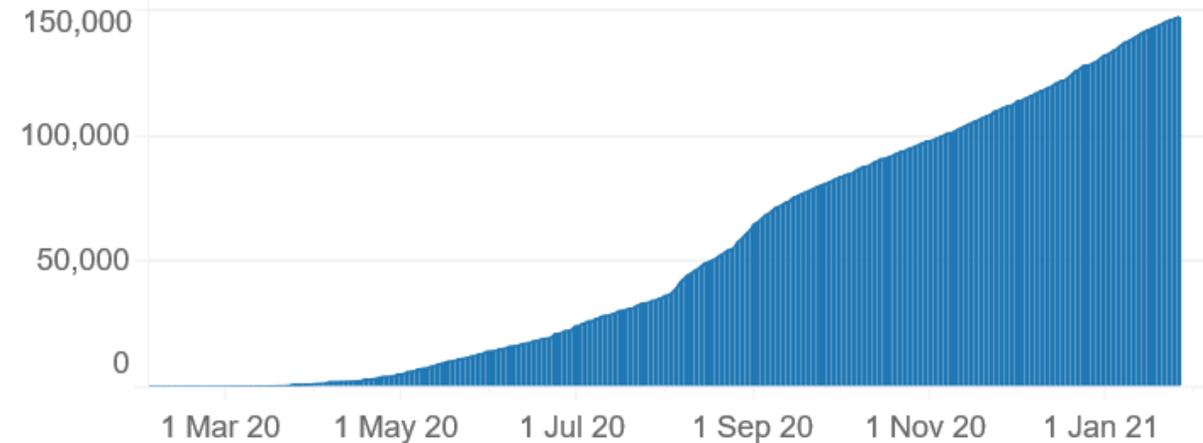
Test and Protect

Testing and Tracing data

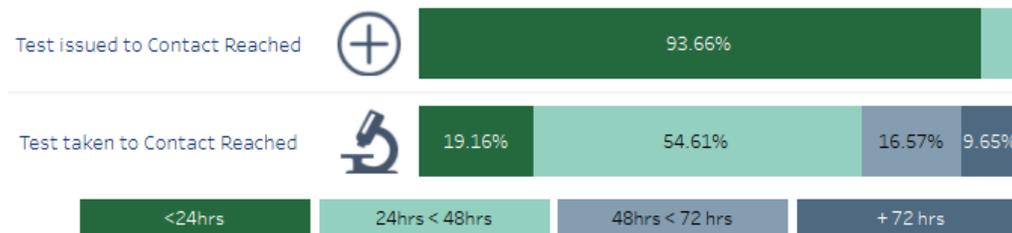
Daily Number of New People Tested (Occupational Health, Hospital & Community)



Cumulative Number of New People Tested (Occupational Health, Hospital & Community)



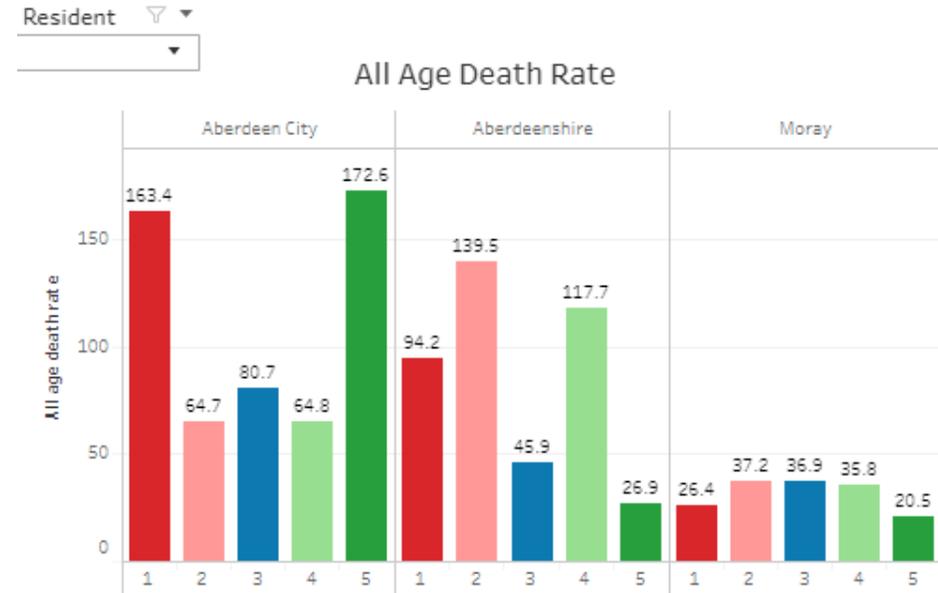
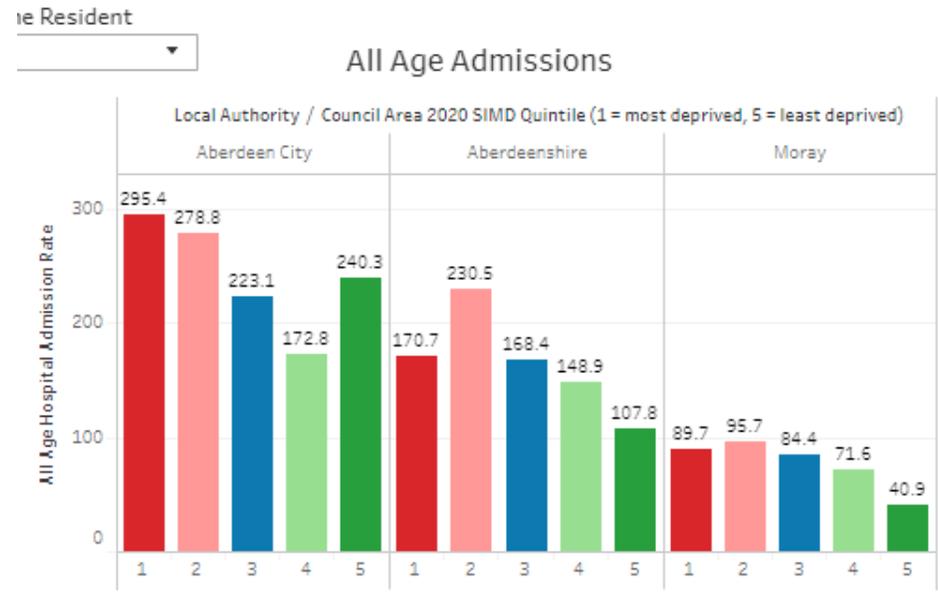
Over 90% of contacts reached within 72 hours of test being taken



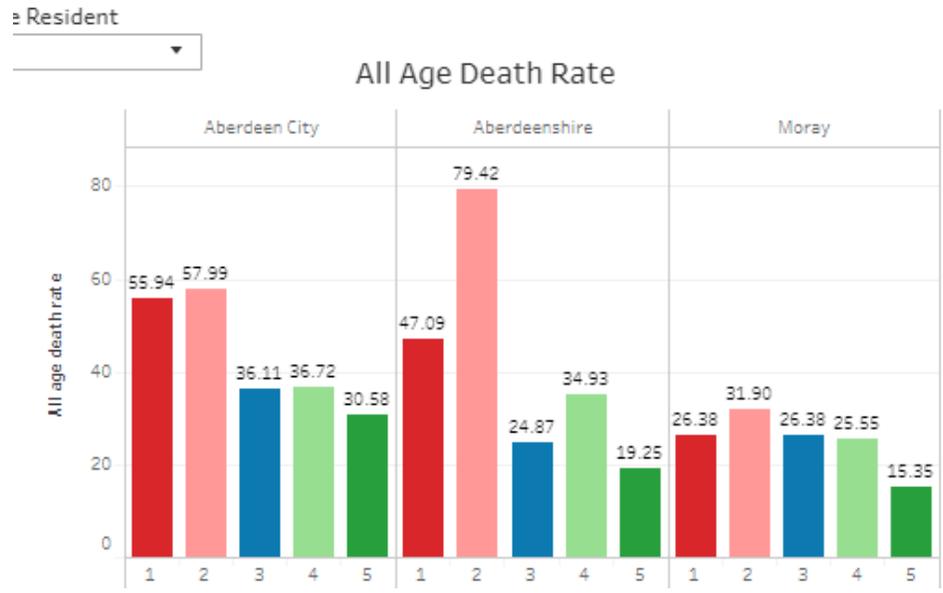
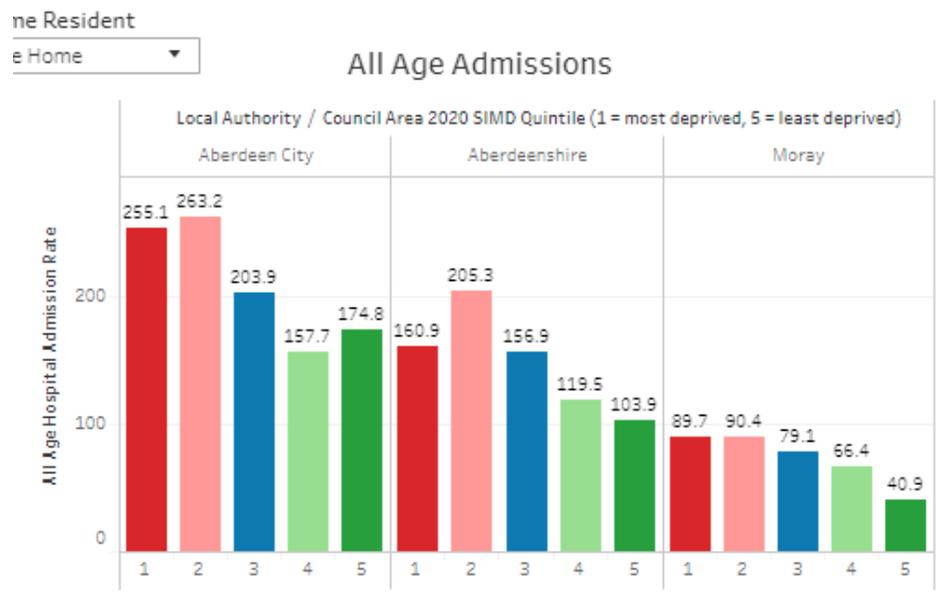
Test and Protect remains a key element of our response to reducing community transmission and protecting the population. We continue to pro-actively monitor a wide range of data to identify and address any clusters and to provide advice to individuals, workplace and other vulnerable settings.

COVID Admissions and death by Scottish Index Multiple Deprivation groups

Including Care Home Residents



Not including Care Home Residents



SIMD: 1= Most Deprived, 5= Least Deprived

NB: Small numbers in Moray