



INTEGRATED PERFORMANCE REPORT

March 2021

MANX CARE KPI REPORTING

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Manx Care KPI Reporting

Surgery, Theatres, Critical Care and Anaesthetics



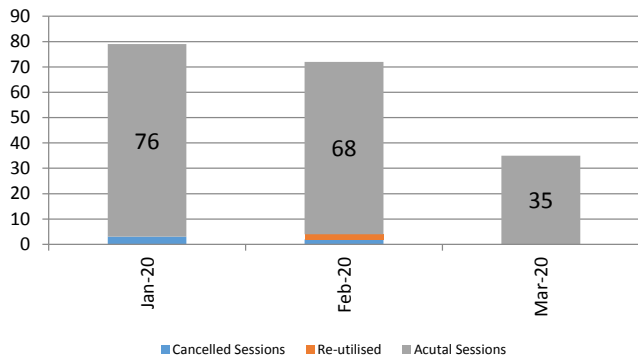
Care Group Reporting (March 2021)

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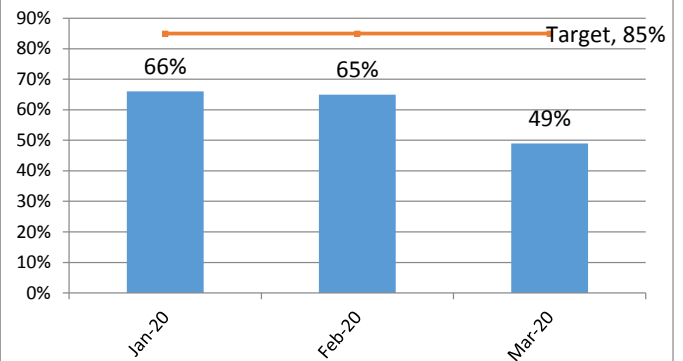
Theatre's KPI Dataset

MAIN THEATRE INFORMATION - 2020-21

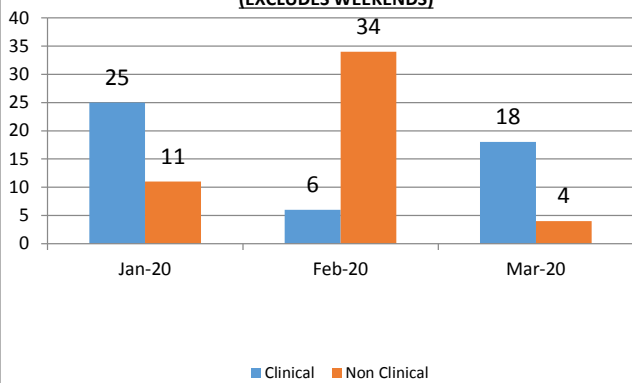
THEATRE SESSIONS - 2021-22
(EXCLUDES WEEKEND TRAUMA)



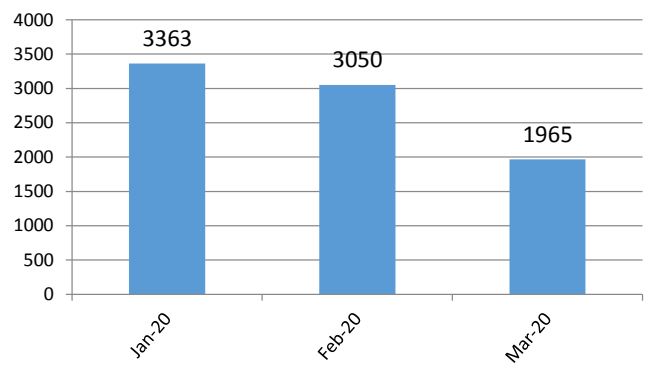
% UTILISATION - 2021-22
(EXCLUDES WEEKEND TRAUMA)



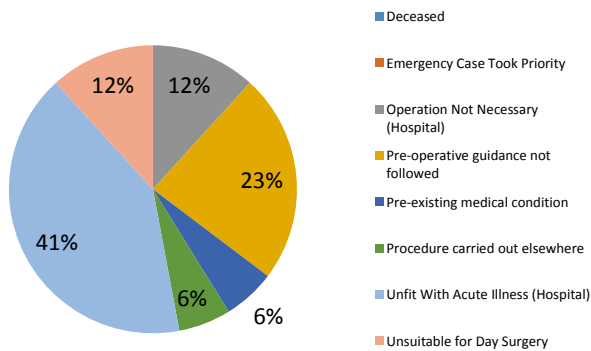
THEATRE CANCELLATIONS ON DAY - 2021-22
(EXCLUDES WEEKENDS)



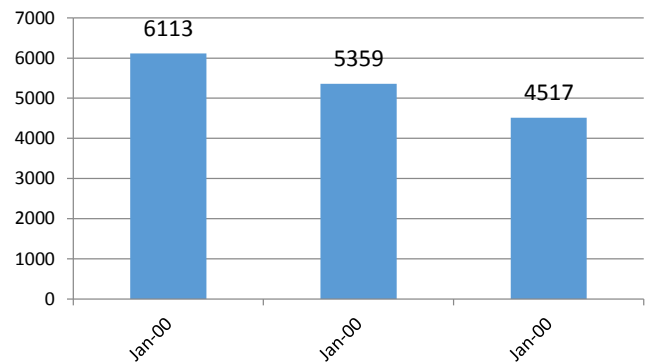
LATE STARTS IN MINUTES - 2021-22
(EXCLUDES WEEKEND TRAUMA)



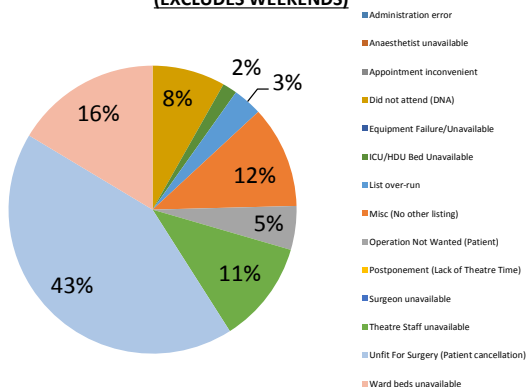
CLINICAL CANCELLATIONS ON DAY - 2021-22
(EXCLUDES WEEKENDS)



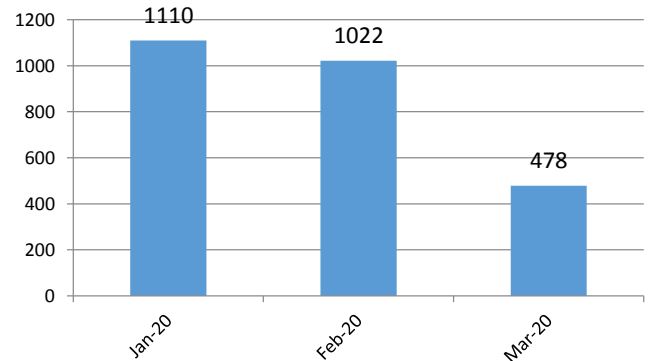
EARLY FINISHES IN MINUTES - 2021-22
(EXCLUDES WEEKEND TRAUMA)



NON-CLINICAL CANCELLATIONS ON DAY - 2021-22
(EXCLUDES WEEKENDS)



LATE FINISHES IN MINUTES - 2021-22
(EXCLUDES WEEKEND TRAUMA)



MAIN THEATRE INFORMATION - 2020-21

Theatres Narrative - March 2021:

All procedures undertaken during March were urgent, emergency and trauma. All elective sessions for March were cancelled due to COVID restrictions.



Manx Care KPI Reporting

Medicine, Urgent Care & Ambulance Service

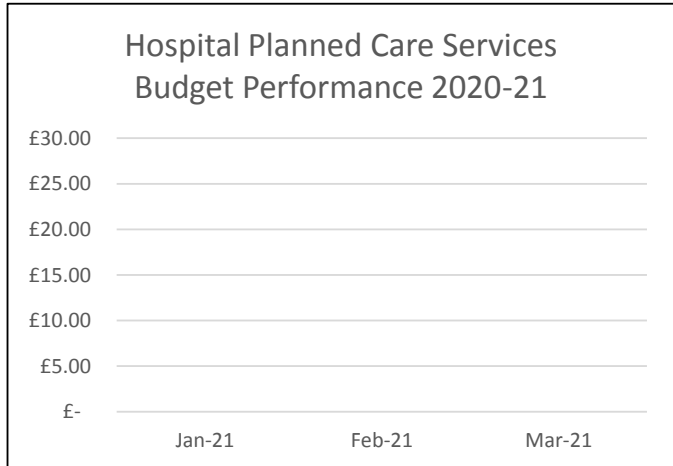
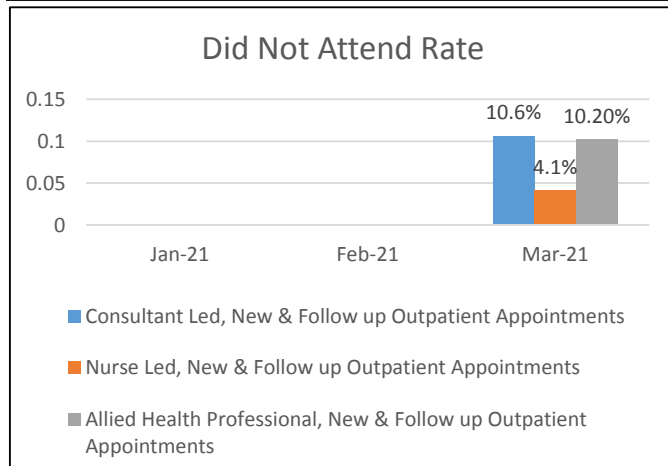
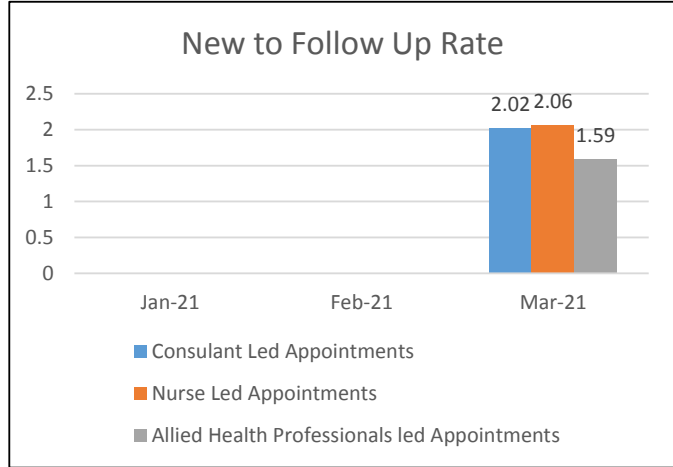
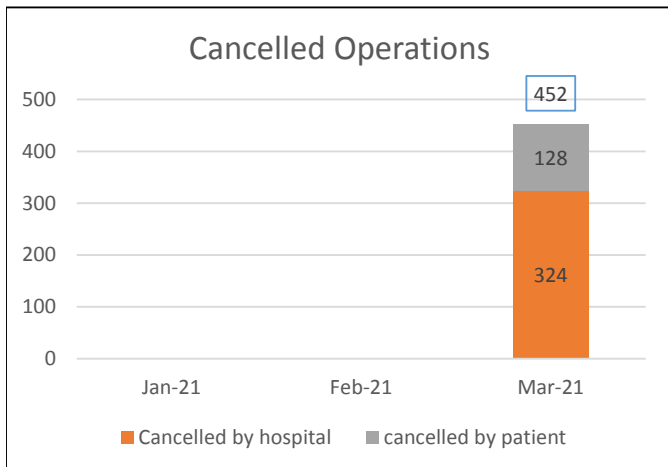
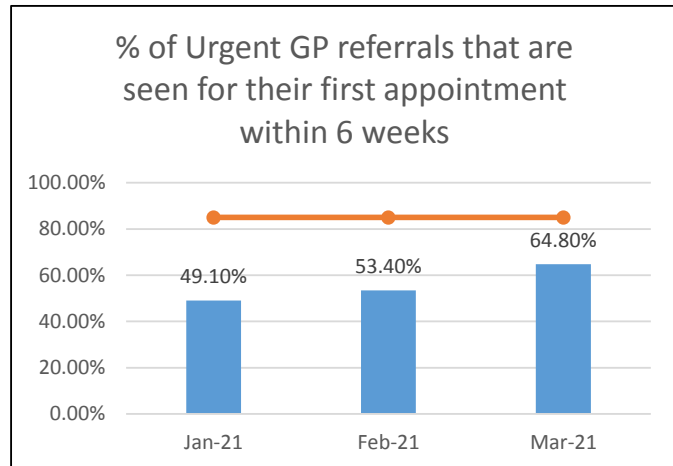
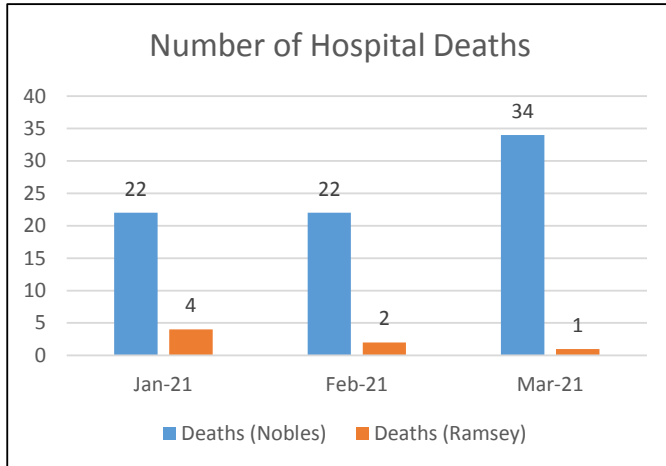
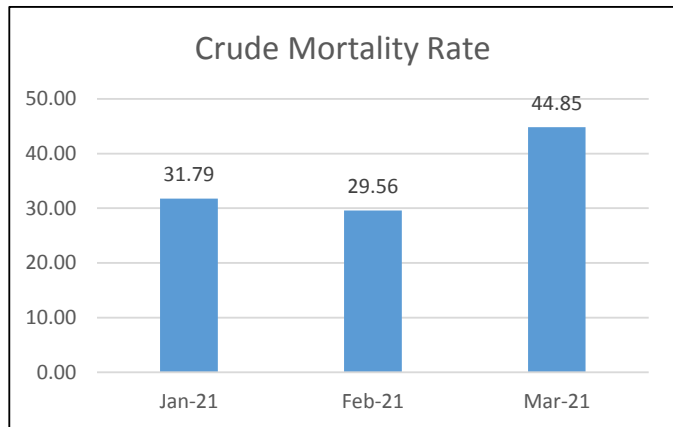
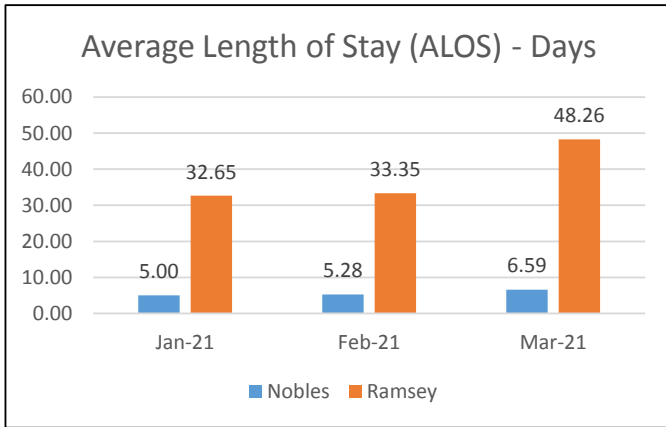


Care Group Reporting (March 2021)

Contents:

Planned Care KPI Dataset
Urgent & Emergency Care KPI Dataset
Ambulance Service KPI Dataset

Planned Care 2020-21



Planned Care 2020-21

Hospital Planned Care Services - Narrative - March 2021

ALOS:

We saw an increase in ALOS in Ramsey as due to bed pressure and a further lockdown meant that the Hospital sent more delayed transfer of care (DTOC) patients to Ramsey to free up beds in Nobles.

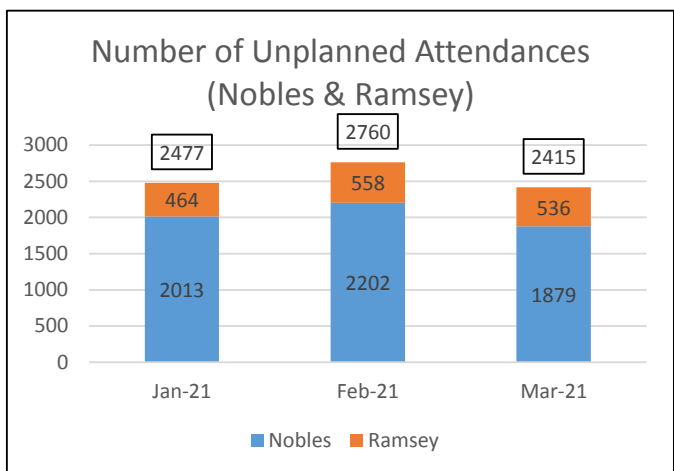
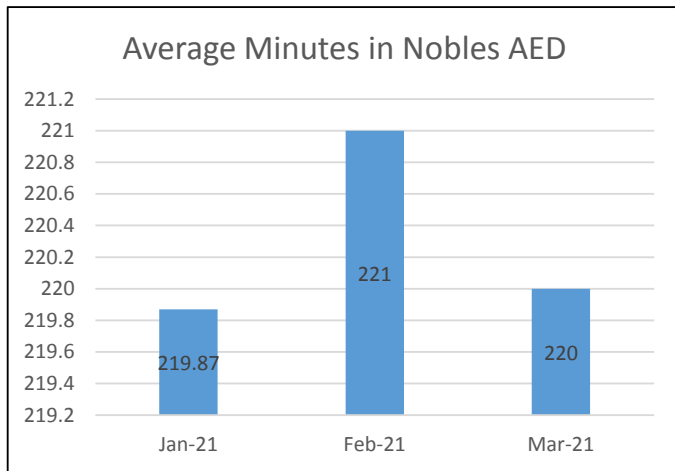
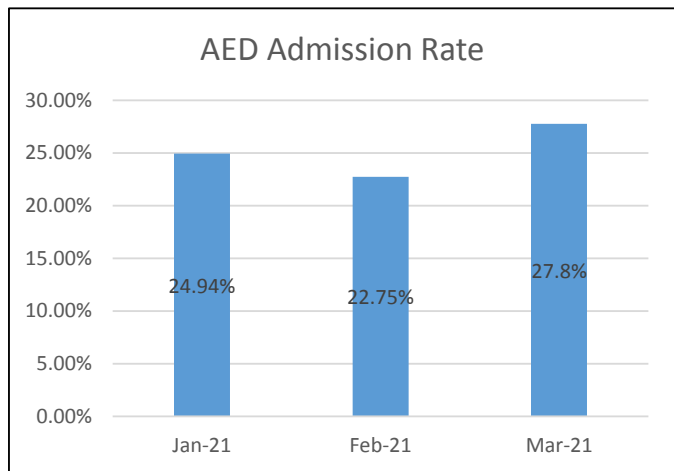
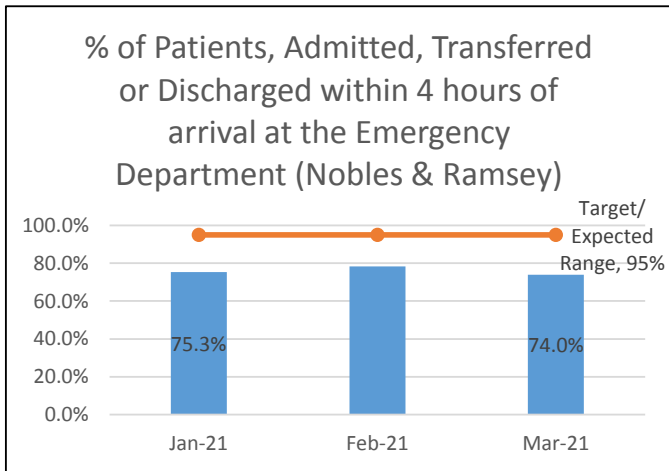
Cancelled operations:

Due to our third lockdown in March elective operations were cancelled to free up vital nursing staff to help with the wards and relieve pressure on ICU.

DNA Rates:

This was a reflection on the third lockdown on the Island and patients not wishing to attend their appointments.

Urgent Emergency Care -2021-21



Urgent & Emergency Care - Narrative - March 2021

% of patients, admitted, transferred or Discharged within 4 hours

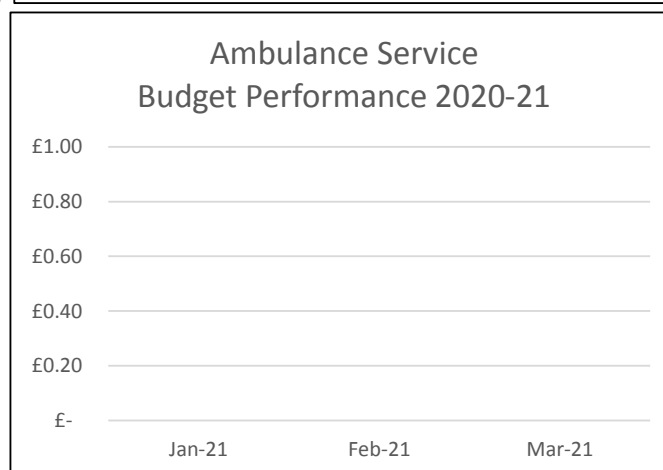
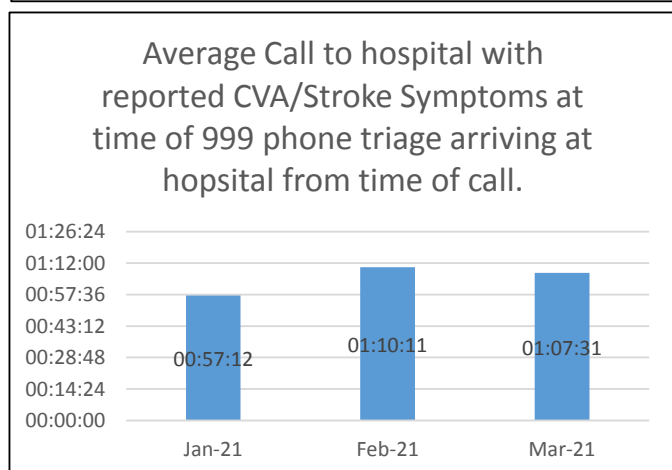
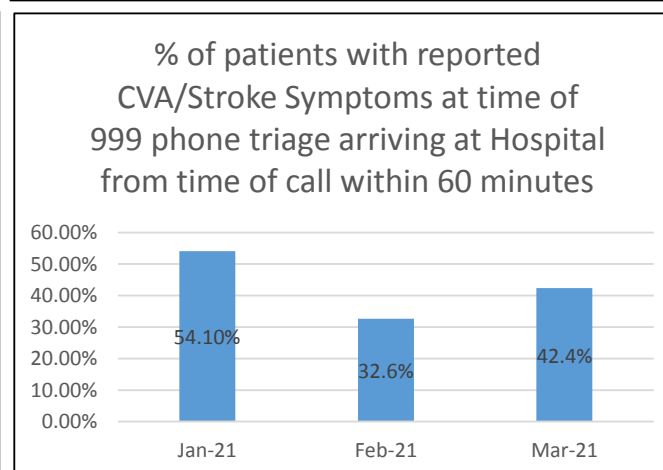
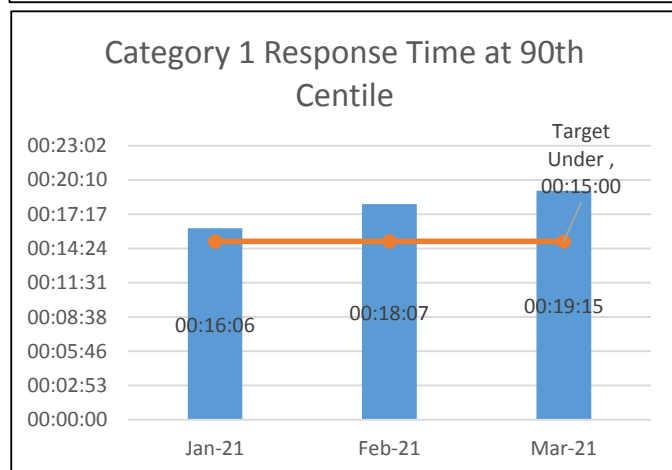
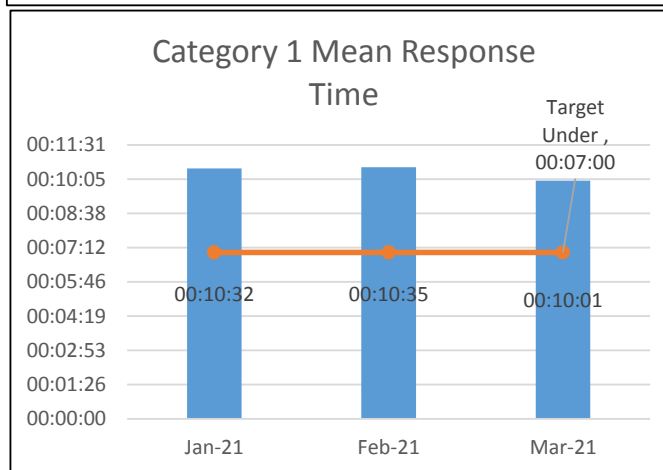
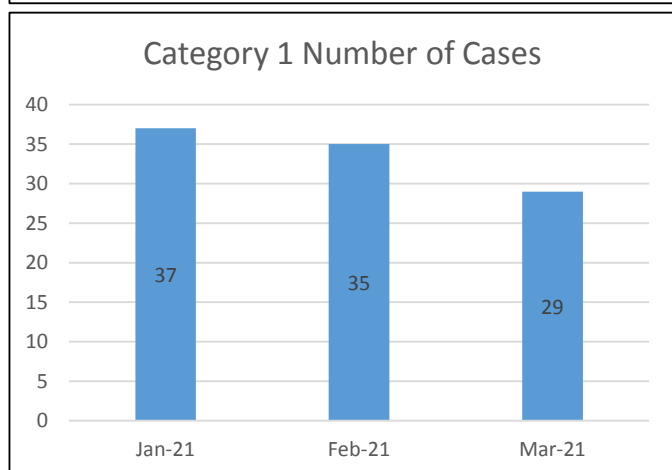
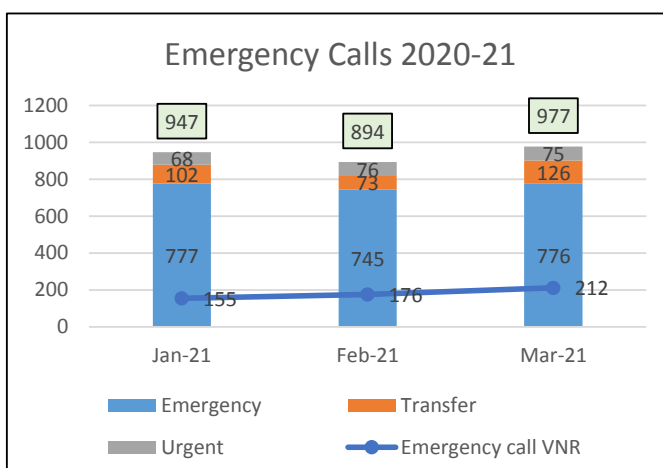
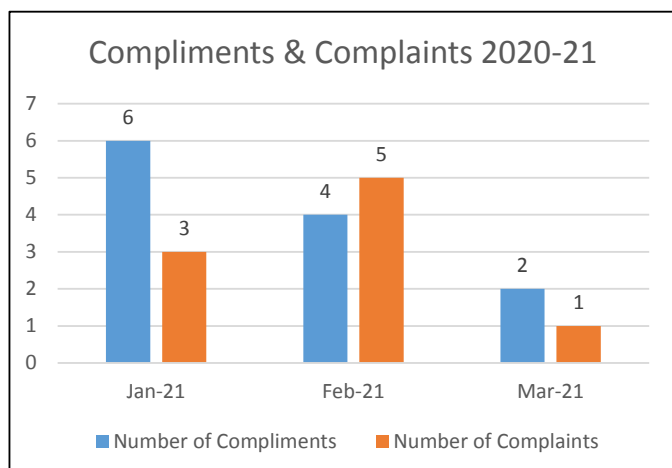
Numbers reflect the same compared to January 21. Both months we had lockdown and therefore all patients that entered the department were treated as suspected COVID. All areas had to be deep cleaned once a patient had been discharged or admitted causing more delays ED. However, with all this 74% is good going.

AED Admission rate

2.86% increase in admission rates for March compared to Jan. We had less attendances in March as the lockdown was more enforced than the previous.

Average minutes in ED, this is only a small increase, although the graph presents it as quite large.

Ambulance Service 2020-21



Ambulance Service 2020-21

Ambulance Service Narrative - March - 2021

Ambulance Service Narrative -March 2021

Increase in 999 calls and transfers undertaken this month, urgent calls remain similar.

Cat 1 Mean response time remains around 10 minutes.

Poor West and North Cat 1 performance likely due to lack of robust CFR Provision in those areas. West only has Ambulance cover when 4 ambulances are available 09.00-21.00 and none are committed to cases. This rarely happens.

ESJCR Average CAT 1 dispatch time for March remains low. One of the NHSE clock start points is 30 seconds after call connect (Including address confirmation using Caller Line Identification). April will see the introduction of Nature of Call (NOC) pre triage questions, which will assist in the dispatch of ambulances earlier, this providing they are clear at the time of the call.

Clock start is not currently as per NHS England Specification. Time of call is recorded within the ESJCR following address entry on the CAD as opposed to call connect time. The clock start for these figures is measured at that point plus 30 seconds for Cat 1 and plus 240 seconds for all remaining categories. NHS England specification is the shortest of 3 options for clock start from time of call. We will be unable to measure against those until further IT work is conducted within ESJCR.

Clock Stop is as per NHS England specification based on vehicle type and conveyance status. These are manually altered where multiple units have attended a case. There is a secondary audit check of those changes to ensure accuracy. This process will be automated once funding is secured for changes within ESJCR systems.

CVA data is based upon Case Type identified within the ESJCR during initial call. It may not be the actual patient condition found once on scene. Changes in reporting since February have removed any suspected Strokes that are not conveyed. In recognition that the suspected stroke figures will differ from practitioner suspected stroke a service audit from Patient Care Records will be undertaken each quarter to compare. Staff have been informed of data at staff meeting to highlight on scene times.

Since the start of Manx Care we have introduced the Manchester Triage System to assist with clinician safer discharge, signposting to appropriate services (where available) and assist with ED triage. Data will be collected from paper care records to track the triage outcomes after clinician contact.



Manx Care KPI Reporting

Integrated Cancer & Diagnostics Services



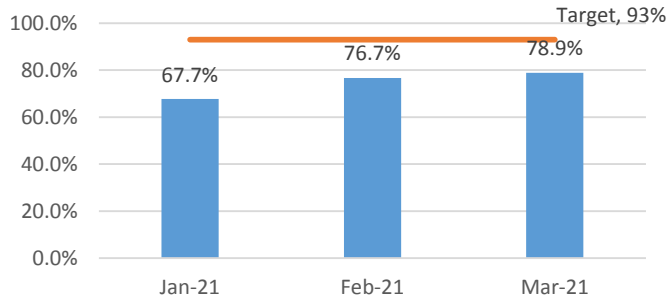
Care Group Reporting **(March 2021)**

Contents:

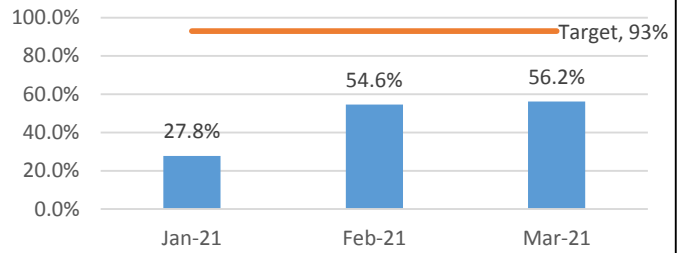
**Integrated Cancer Services KPI Dataset -
Radiology KPI Dataset -
Pathology KPI Dataset -**

Integrated Cancer Services 2020-21

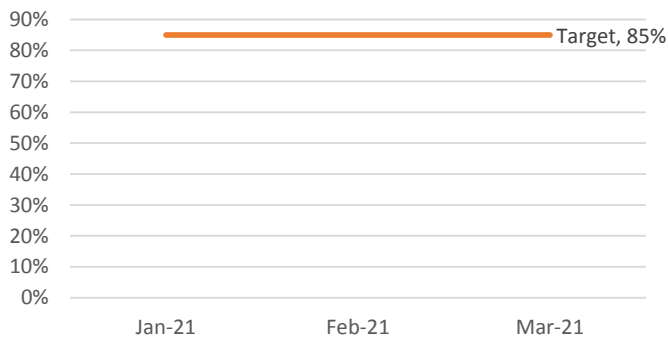
2 week wait - receipt of urgent referrals for suspected cancer to first outpatient attendance



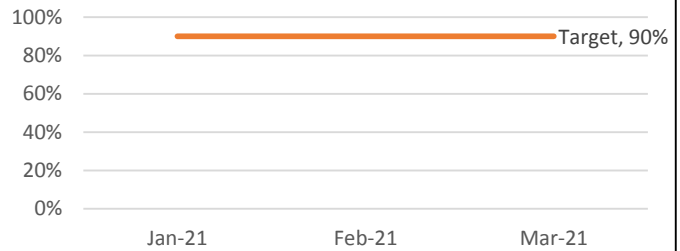
Receipt of referral of any patient with breast symptoms (where cancer not suspected) to first hospital assessment - Maximum of 2 weeks.



62 days - urgent referral for suspected cancer to first treatment



62 days - urgent referral from a NHS Cancer Screening Programme (breast, cervical or bowel) for suspected cancer to first treatment

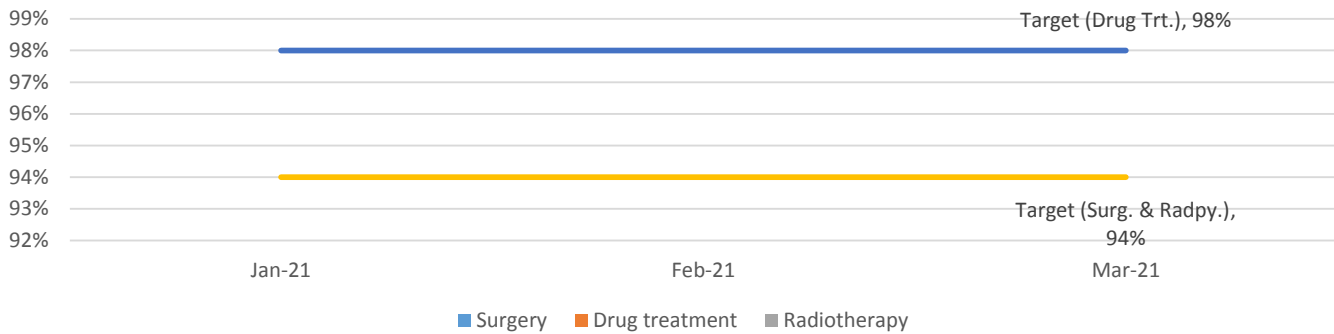


Integrated Cancer Services Budget Performance 2020-21



Integrated Cancer Services 2020-21

31 days - Decision to treat/earliest clinically appropriate date to start of second or subsequent treatment(s) for all cancer patients including those diagnosed with a recurrence where subsequent treatment is:



Integrated Cancer Services - Narrative - March 2021

2 week wait - receipt of urgent referrals for suspected cancer to first outpatient attendance

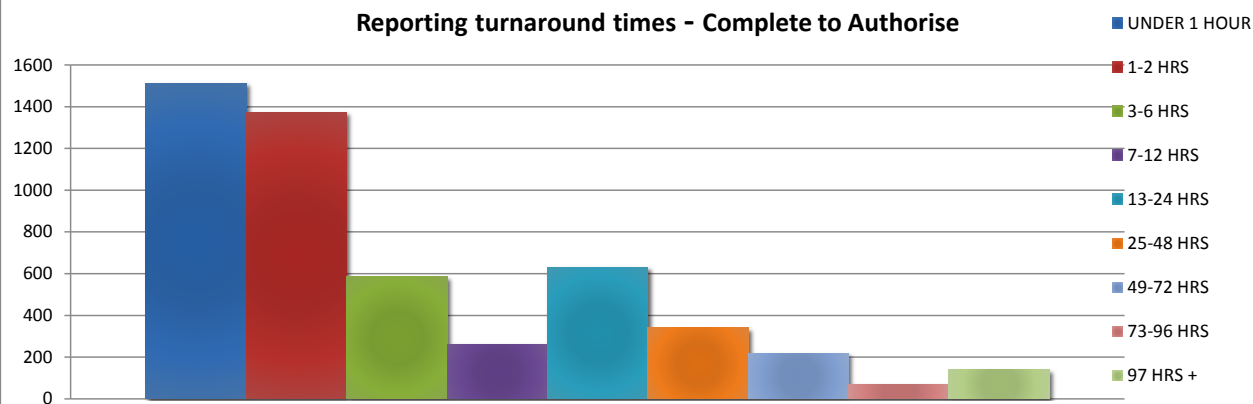
This is the average overall performance for all tumour groups. Please see accompanying report. The Breast 2WW performance has dropped to 56.2% for March 2021, due to the high number of referrals received since September 2020. Capacity & Demand modelling has been done and work is underway with the Breast Surgical and Radiology teams to address capacity for the One-stop model - reports have been submitted to management on the current position and additional resources are being looked at.

Receipt of referral of any patient with breast symptoms (where cancer not suspected) to first hospital assessment - Maximum of 2 weeks.

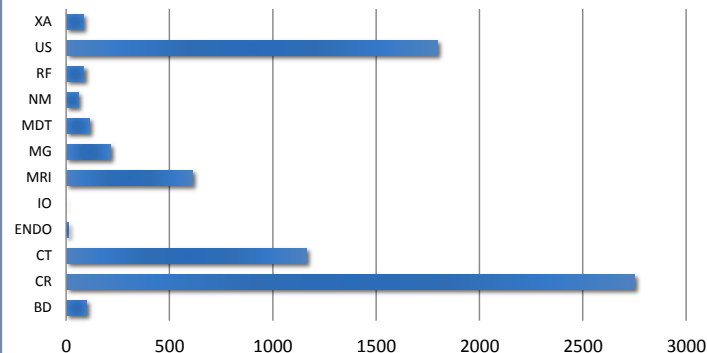
This figure is based on the 2WW performance for breast clinic. We are not currently reporting on those not on a 2WW pathway although they are monitored on the PTL report weekly to ensure any upgraded referrals are seen in the same timeframe as 2WW referrals

Radiology Monthly Performance Dashboard -March 2021

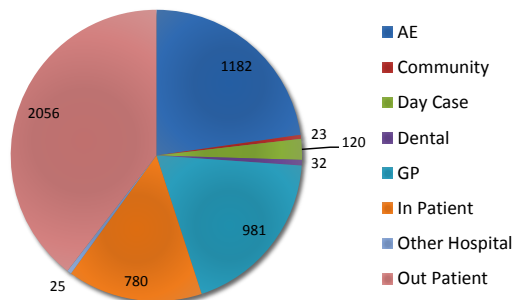
Reporting turnaround times - Complete to Authorise



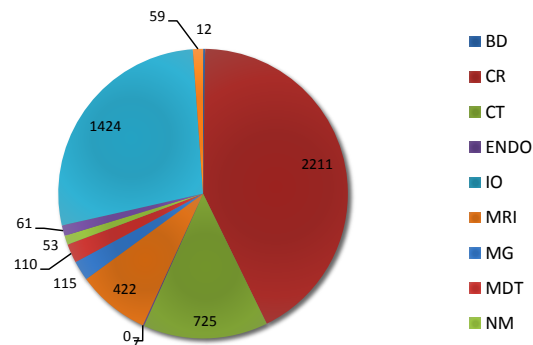
Referrals received per modality



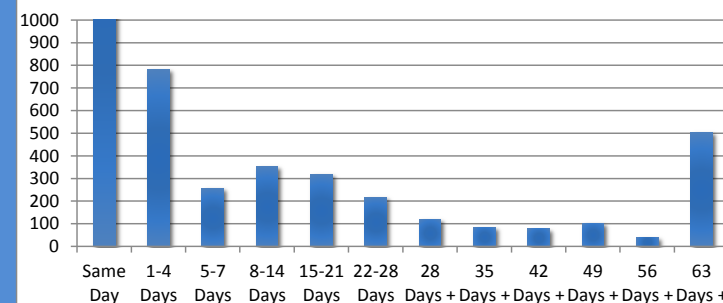
Referral source



Activity per Modality



Referral to Completed -length of time waiting before examination



Radiology- Narrative - March 2021

Reporting turnaround times

The majority of exams are reported under 24hours. This ensures that the results are available in a timely manner to the clinicians. A small number of exams are taking longer than expected to report. We have teleradiology to support on island reporting to meet timelines.

Referral to Completed.

This demonstrates the waiting time for exams. Most are imaged within 28 days but a large number are over 42 days. Projects on going to increase capacity to reduce waiting times.

Referral source

Demonstrates where the requests are being generated from within primary and secondary care.

-

Activity

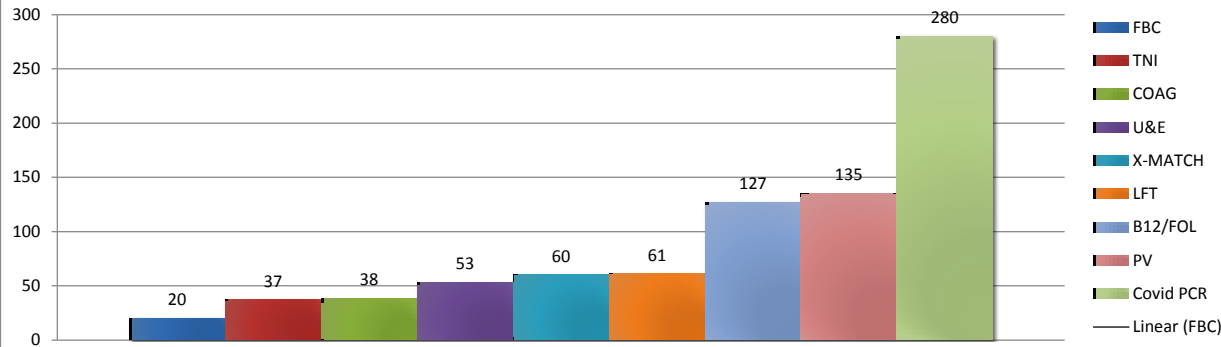
Activity per modality within radiology

Referrals received.

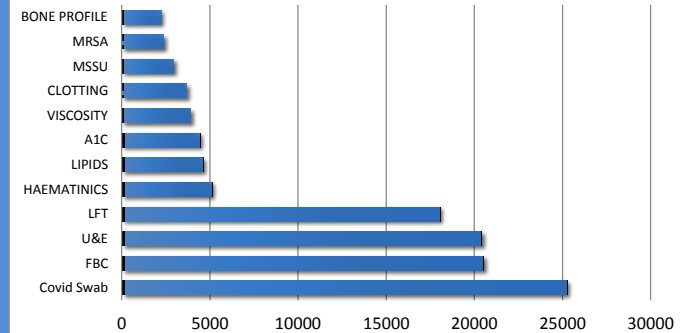
Number of exams requested for each radiology modality.

Pathology Performance Dashboard - March 2021

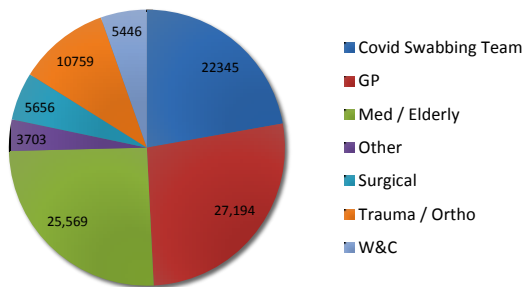
Average Turnaround Times (Minutes)



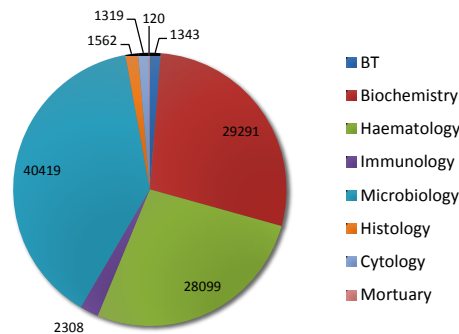
Most Requested Tests



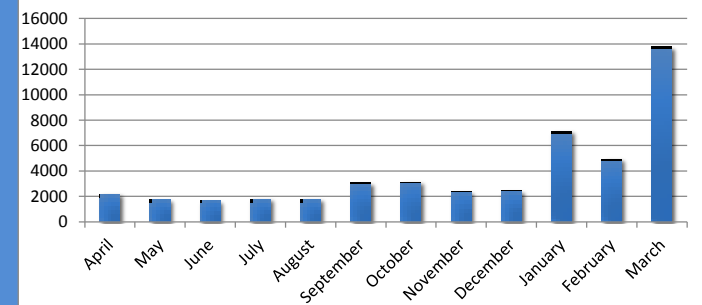
Source of Request



Requests per Department



Covid swabs tested in last 12 months



MARCH 2021 NARRATIVE.

Pathology- Annual core audits outlining external quality assurance and benchmarking turnaround times with RCPATH and RLUH Standards, should be completed and available in May. 5 out of 7 are complete.

Pathology - Analytical EQA schemes - participation: BT = 8 schemes; Immunology = 18 schemes; Biochemistry = 16 schemes; Microbiology = 21 schemes; Haematology = 9 schemes; Histology = 5 schemes

Pathology - Analytical Internal Quality Control monitoring, Nearly all analytes have routine IQC monitoring (often twice daily).

Pathology - Quality of training for on-call laboratory staff. All on-call laboratory staff are up to date with training requirements.

All Biomedical Scientists are currently registered with the HCPC and so can evidence Continuous Professional Development. PDPs are run on a rolling window around April / May. We aim to have all staff up to date by the end of May. Pathology - compliance with Mandatory training: Fire 71%; Equality and Diversity 83%; Moving and Handling 96%; Infection Control 87%; Safeguarding Children 85%; Safeguarding Adults 85%



Manx Care KPI Reporting



Integrated Women's Children's and Families Services

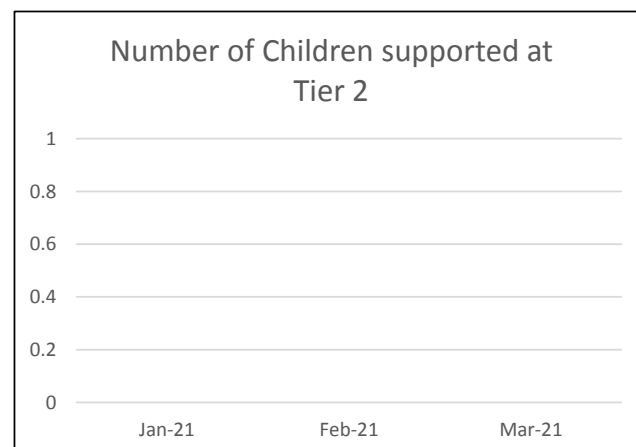
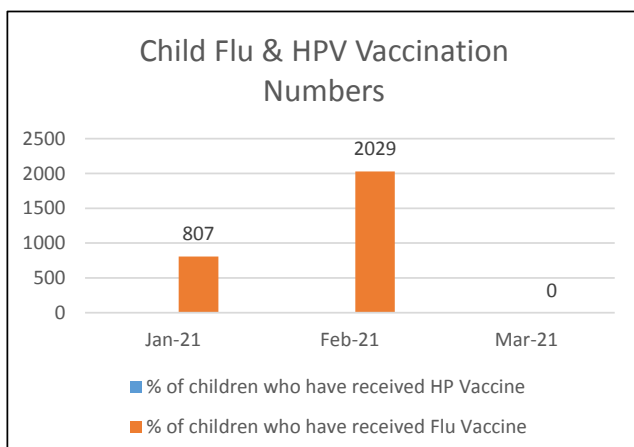
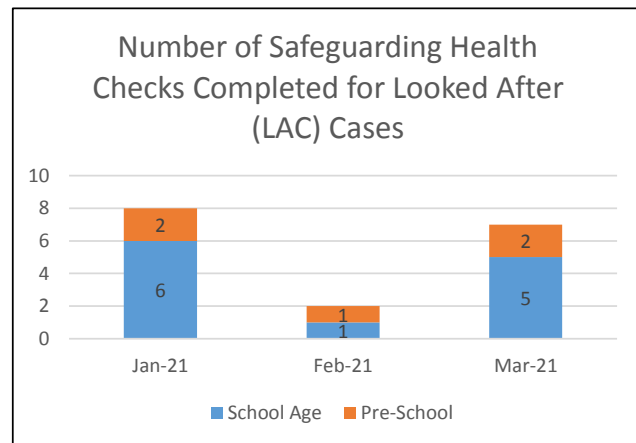
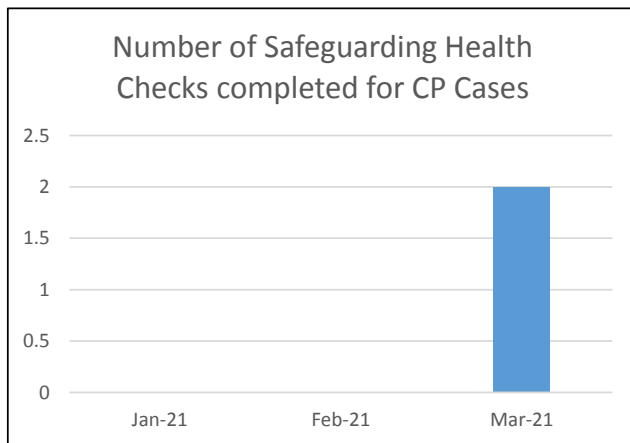
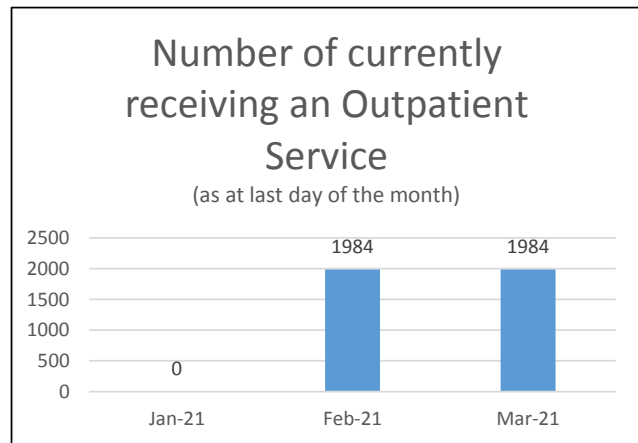
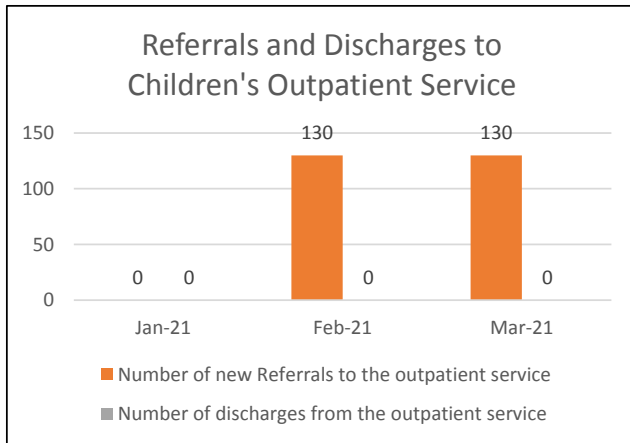
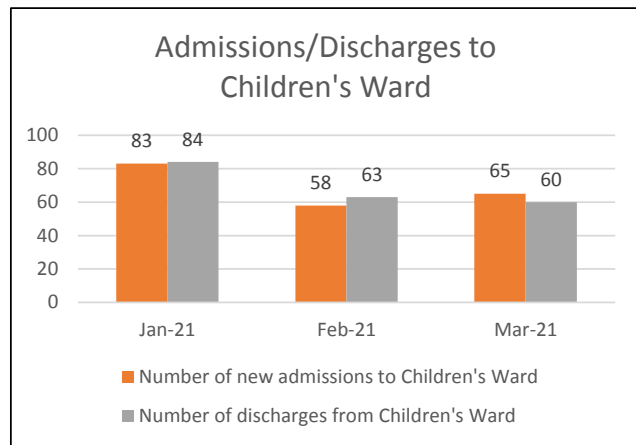
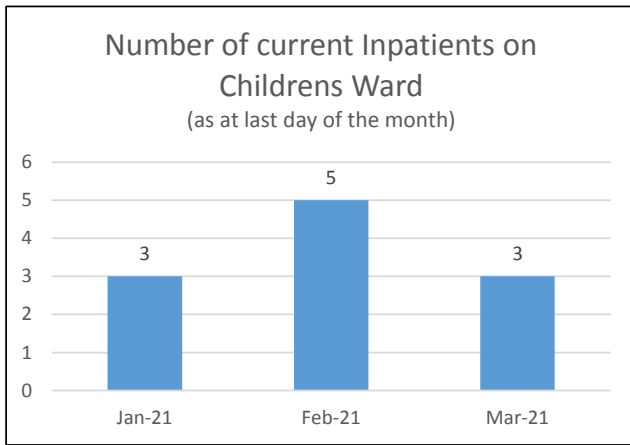
Care Group Reporting

March (2021)

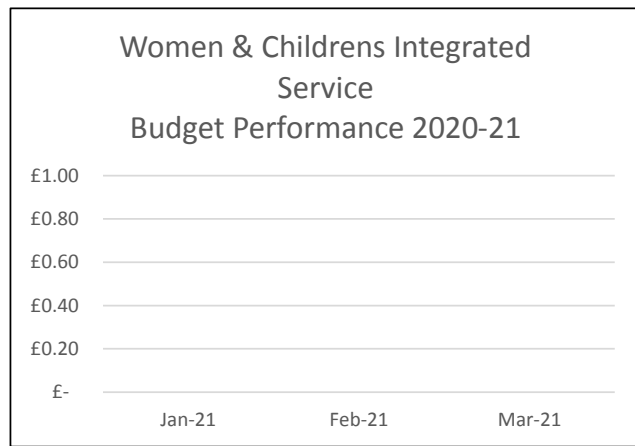
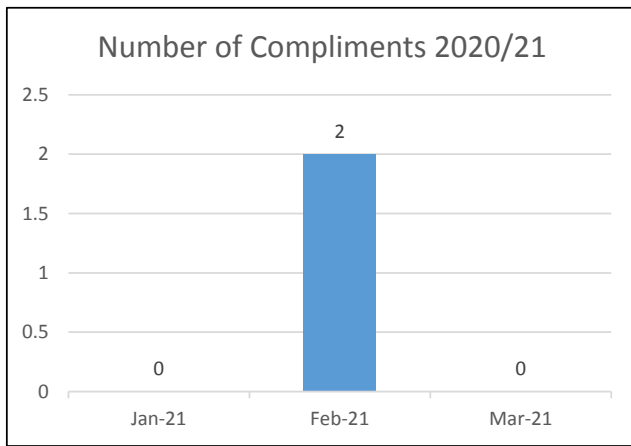
Contents:

Women & Childrens ~~Integrated~~ Care KPI Dataset

Women Childrens Integrated Services 2020-21



Women Childrens Integrated Services 2020-21



Women & Children's Integrated Services - Narrative - March 2021

The data requires review going forward. Consideration in respect of what is meaningful and how the care group evidences outcomes for the patient / client group. Additionally activity during this period is not an accurate reflection of normal activity as a direct consequence of Covid.

In going forward all specialities must be included across the care group.



Manx Care KPI Reporting

Integrated Community Services

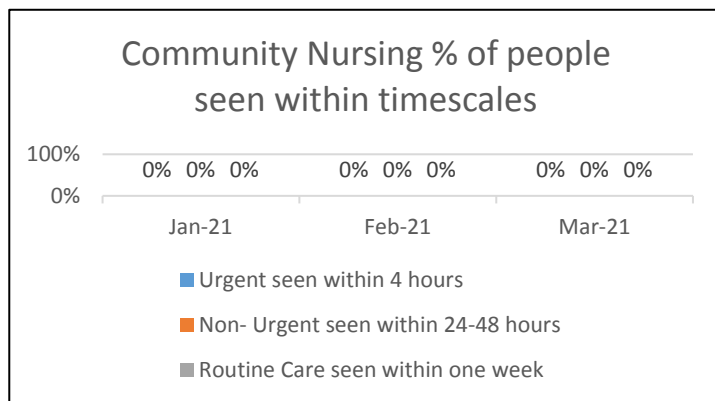
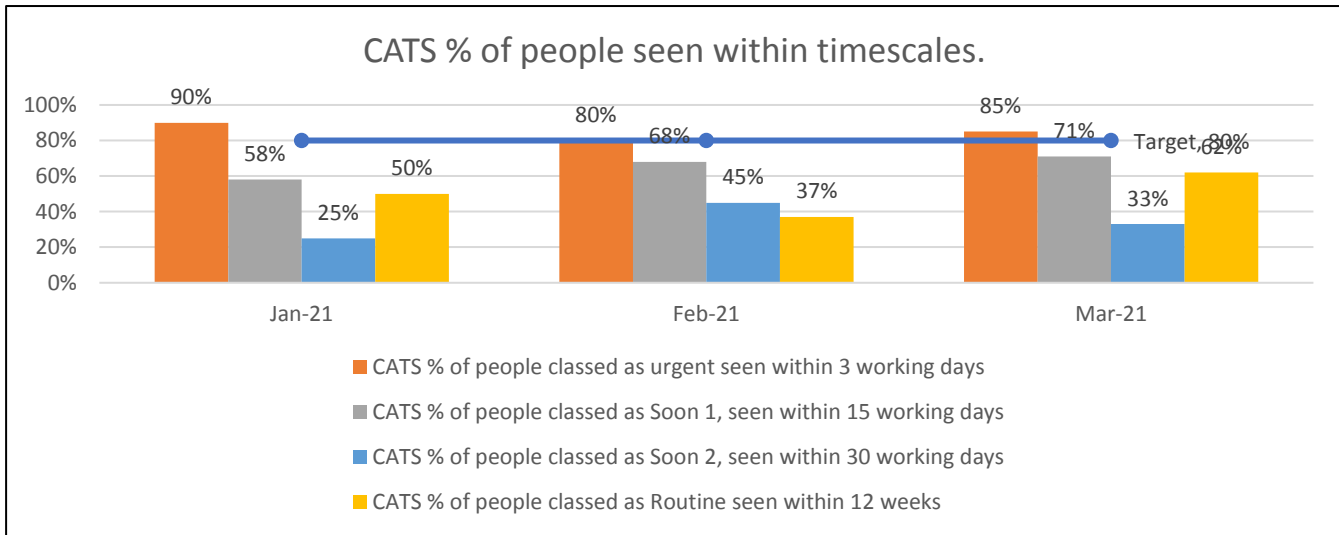


Care Group Reporting (March 2021)

Contents:

Integrated Community Services KPI Dataset

Integrated Community Services 2020-21



Integrated Community Services - Narrative - March 2021

CATS access performance is poor due to significant backlogs developed during both initial lockdown and January lockdown due to a number of staff shielding and service users declining to receive therapy in the home both during lockdowns and in between. Following resumption of services on 19th April 2021, some less urgent services such as group exercises and falls clinics, have not been reactivated to ensure that patients who are graded Soon 1 and Soon 2 are seen as soon as possible and that ground is gained within these clinical priority areas. In addition, a recent opportunity to restructure the team has arisen, therefore an additional 1.5WTE Occupational Therapist will be put into the service.

Due to ongoing issues with EMIS reporting, access to Community Nursing cannot be reported from the system. Despite the lockdowns that have been in place on island during January and March, access to Community Nursing on an urgent and non-urgent pathway has been maintained as reported manually by District Nursing Team Leads – this has been supported by twice weekly District Nursing ward rounds within hospital and regular attendance at Wellbeing Partnership MDTs. Routine care has been reduced during lockdown periods due to staffing issues, reduced productivity due to PPE requirements as well as a requirement to support both the care home and community vaccination programmes. All routine cases have been risk assessed by a District Nursing Team Leader and visits either reduced, suspended or, where appropriate, handed over to another service such as Community Support Services.



Manx Care KPI Reporting

Primary Care Services



Care Group Reporting **(March 2021)**

Contents:

Primary Care Service KPI Dataset

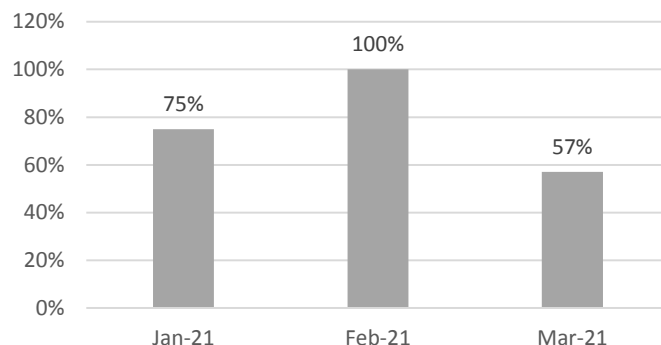
Primary Care - 2020-21

QUALITY INDICATORS

Number of Compliments & Complaints

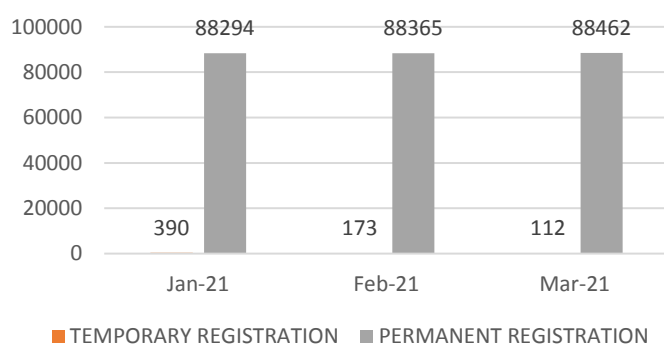


% of Complaints responded to within Timescale

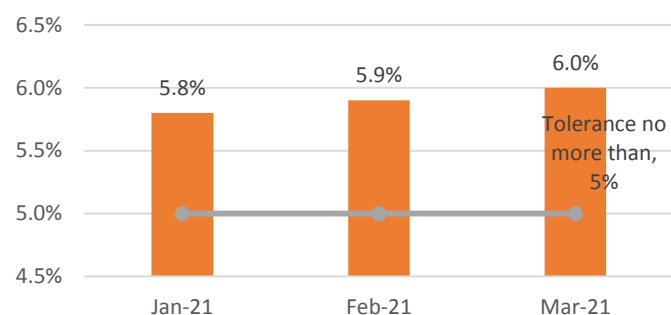


PERFORMANCE INDICATORS

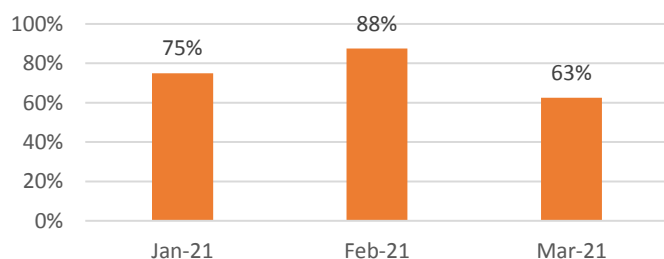
Number of Patients Registered with a GP



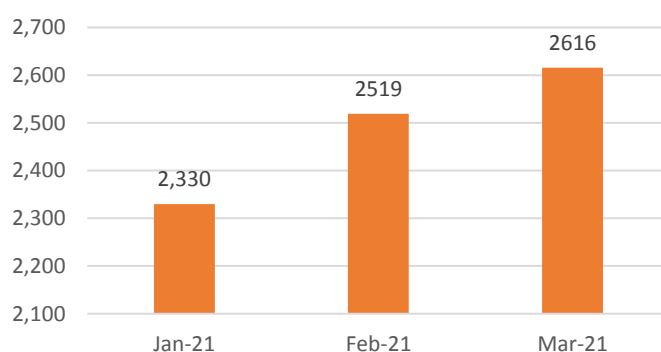
The % of patients registered with a GP
(Permanent Registration)



The % of dental contractors on target to meet their contracted number of UDA's
(Units of dental activity)

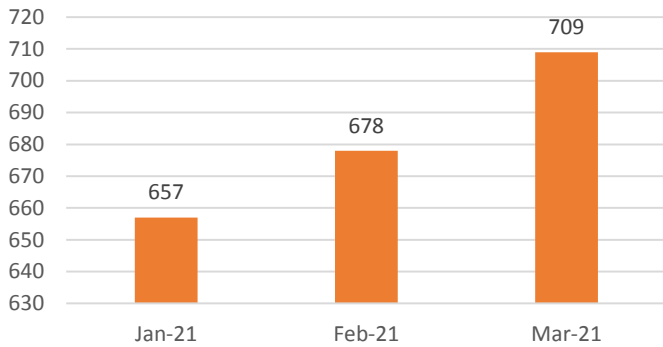


Number of patients waiting for a Dentist

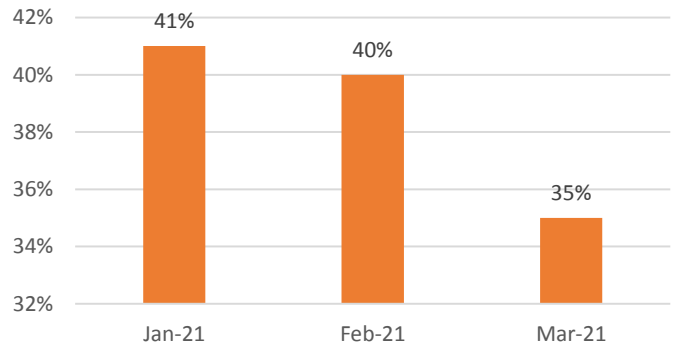


Primary Care - 2020-21

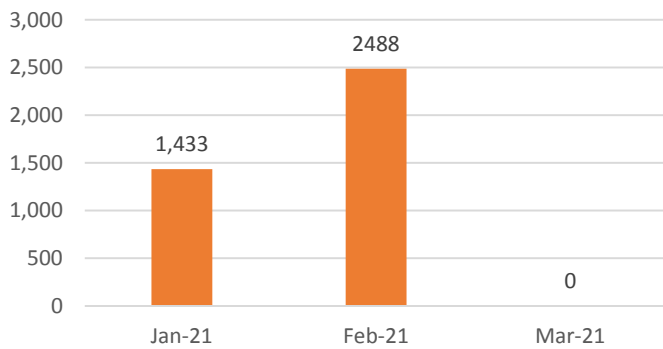
Longest time waiting for Dentist
(Days)



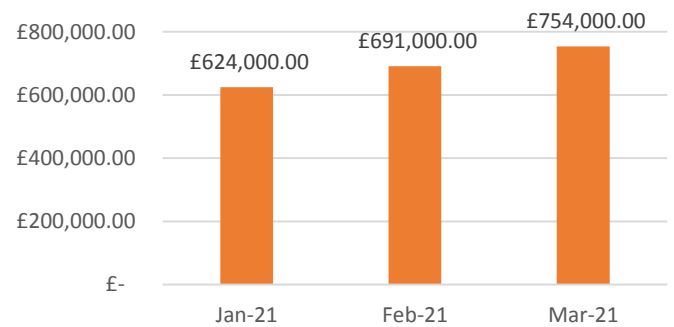
% of dental patients seen within the
year



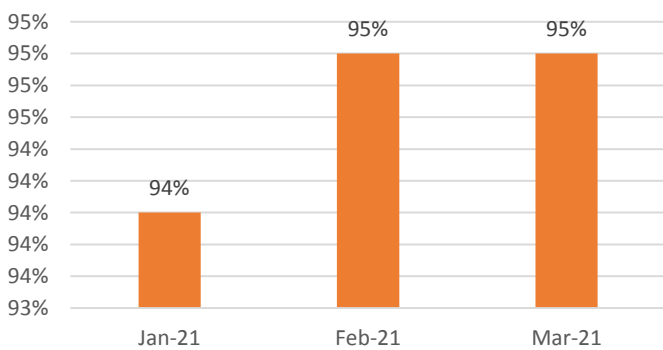
Total number of NHS Sight tests
carried out



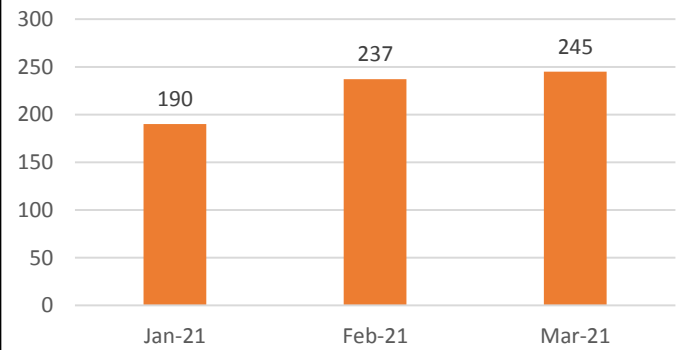
The income received for prescription
items charges
(not including pre-payments)



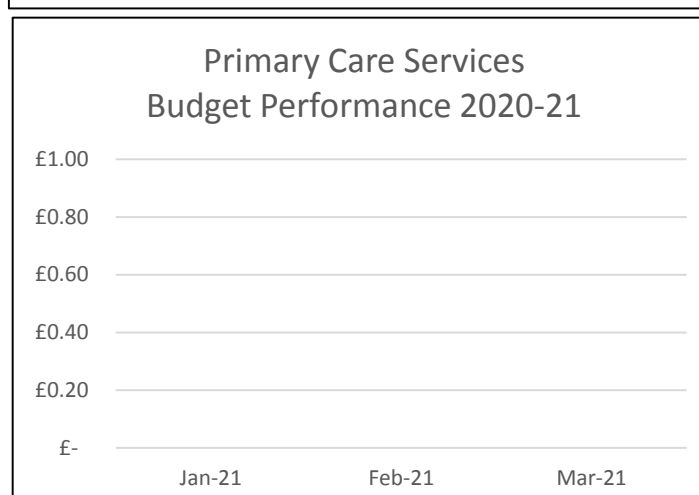
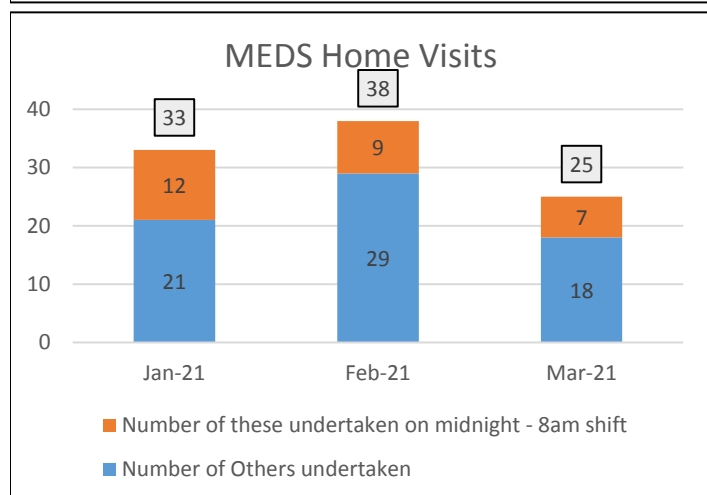
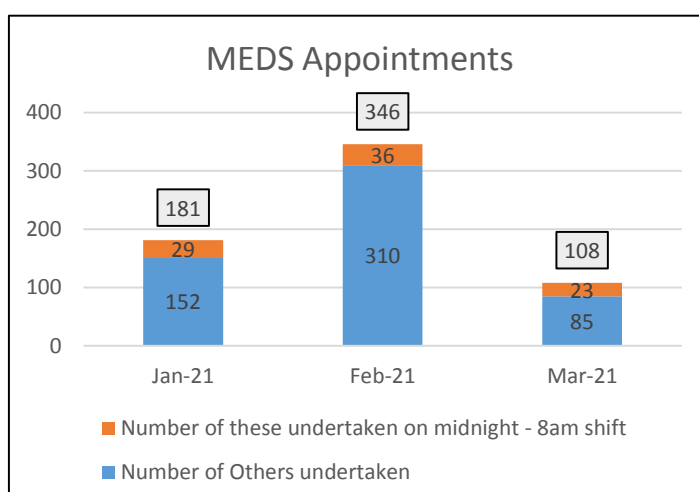
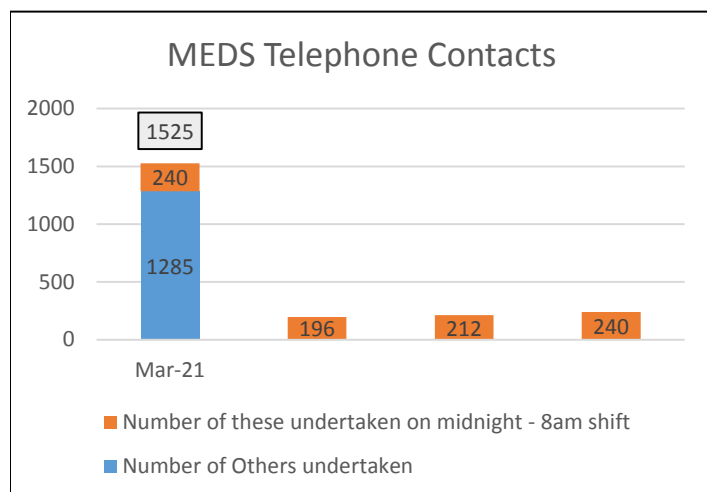
% of target income achieved from
prescriptions



The number of pre-payment
certificates issued



Primary Care - 2020-21



Primary Care Services - Narrative - March 2021

Number of complaints and compliments

To note.

Number of complaints responded to within timescale

These are complaints against primary care contractors. Complaints not dealt within the timescale are followed up with the individual Practices.

Number of patients Registered with a GP

Has risen gradually in the first 3 months of the year. This may in part reflect the need in those months for people who were here on a temporary basis to register as permanent patients to gain a covid vaccination. This issue has since been resolved with the approval of the DHSC to allow vaccination of temporary residents.

The % of patients registered with a GP

This figure is now at 6% over the population figure (the patient inflation figure) and 1% over our usual tolerance. The GP registration section undertakes regular patient list cleansing exercises however the team have not been able to undertake any list inflation cleansing over the last few months as all of their efforts have been focused on the vaccination letters – producing lists of patients in the right cohorts, cleansing those lists and providing them to the Post Office for delivery. The covid vaccination letters will produce some list cleansing however there is a 6 month grace period for removal of patients. We would therefore expect a reduction in this figure towards the end of the year. Once the vaccination letters have all been sent the Primary Care back office team will be able to continue with their list cleansing work.

Primary Care - 2020-21

% of dental contractors on target to meet their contracted hours

We need to find a better way of reporting these figure. Dental contractors have a further two months to submit claims following the end of the financial year. I would therefore expect that the March figure will change in April and again in May and a true figure will be provided in June 2021.

Number of patients waiting for a dentist

This has risen during the covid period. A number of dental practices have recently accepted patients from the waiting list and the waiting list should reduce in the next data set.

Longest waiting time for a dentist – from the waiting list

The increase in this figure reflects the reduction in availability of dentists during the covid period. There are also a number of patients on the waiting list who are waiting for specific Practices and therefore take longer to be allocated to a dentist.

% of dental patients seen within the year

The reduction in March 21 reflects the lower ability to see patients during the covid period.

Total number of NHS sight test carried out

The March 21 '0' figure reflects the instruction to opticians not to carry out any sight tests during the covid lockdown period. Opticians were paid their contract fees however for working on the audit of the Ophthalmology waiting list.

The income received from prescription items

Has increased quite significantly in March 21.

The Primary Care pharmacy team operate in 'normal' circumstances by physically working in the GP surgeries, the mental health teams and by visiting the care homes and learning disability homes; this not only builds up relationships with the teams but allows direct access to the clinicians in these settings. In addition, many surgeries have reduced their hours and therefore the 'tasks' and clinical queries made by the team re not being handled as quickly.

(In addition, Ramsey Group Practice does not permit remote working for the team – they are required to be on-site).

During the recent circuit break the team have not been permitted to work in their normal settings and some of the team have been redeployed to support the hospital pharmacy.

This has naturally resulted in less cost savings and clinical interventions for the month of March.

NB: Cost of prescriptions for the Acute Service excludes ward medicines. These are prescriptions issued by the hospital and processed by community pharmacies. Typically in the UK these would be dispensed by an outpatient pharmacy in the hospital. There is currently no process to gate keep these prescriptions and have prescriptions which are non-formulary or for large amounts of drugs –both of which are inappropriate (but current process doesn't allow for these to be stop at source).

Number & Cost of prescriptions data runs 6 weeks behind actual, due to delays in releasing the information on the UK E pact2 System

% of target income achieved from prescriptions

We are looking into these figures further.

The number of PPC's issued

To note.

MEDS stats

To note

Primary Care Services Budget performance 20-21

Awaiting from our accountant.



Manx Care KPI Reporting

Integrated Mental Health Services



Care Group Reporting

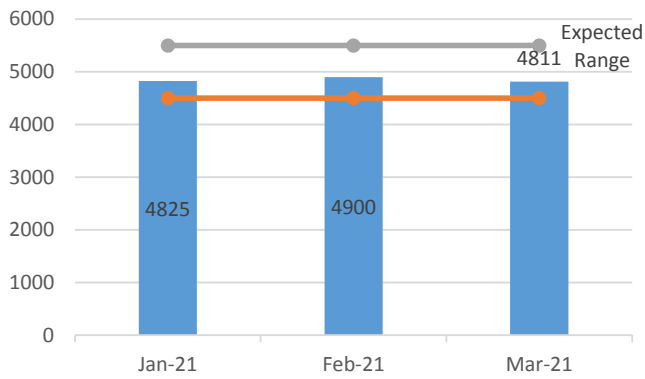
(March 2021)

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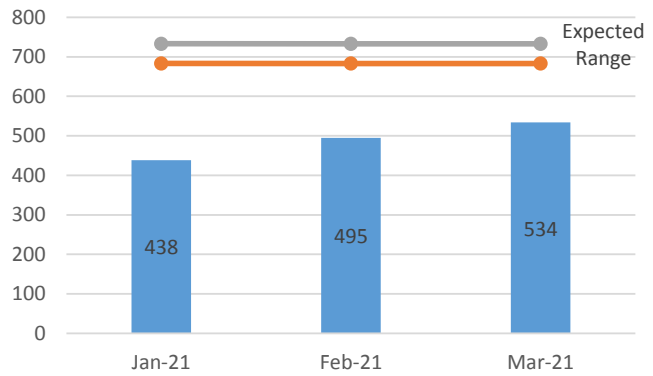
Integrated Mental Health Services KPI Dataset

Mental Health Services Dataset 2020-21

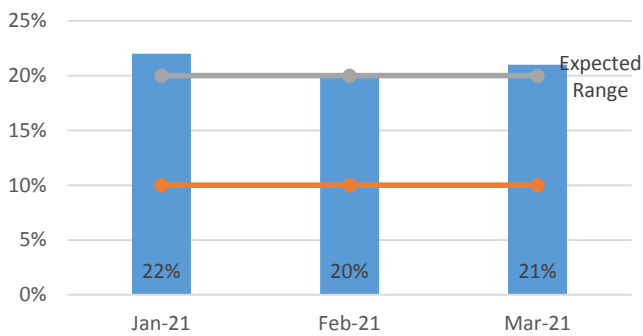
MH Current Caseload 2020-21



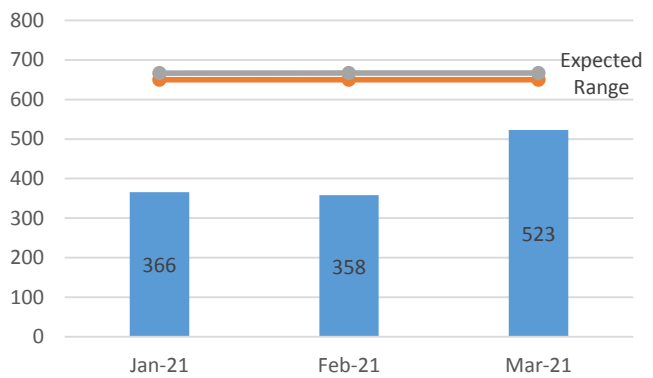
Number of New Referrals 2020-21



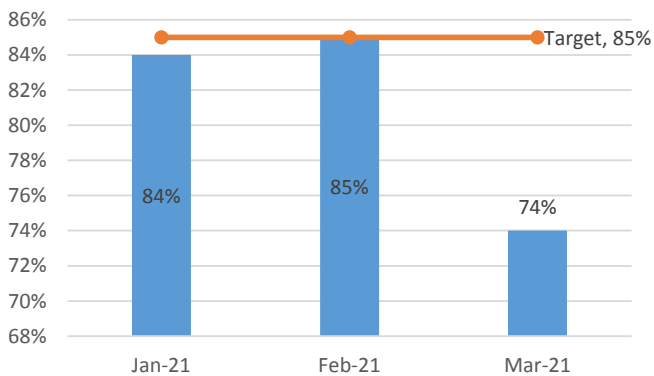
% of Re-Referrals within 6 Months 2020-21



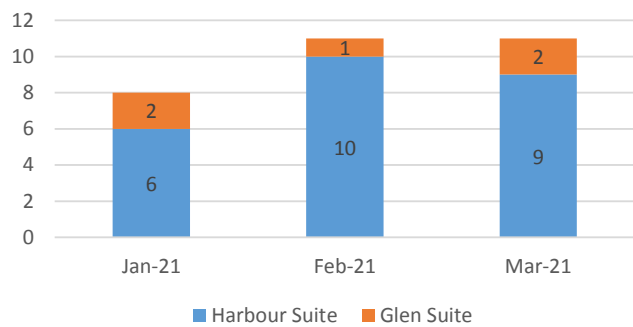
Number of Discharges 2020-21



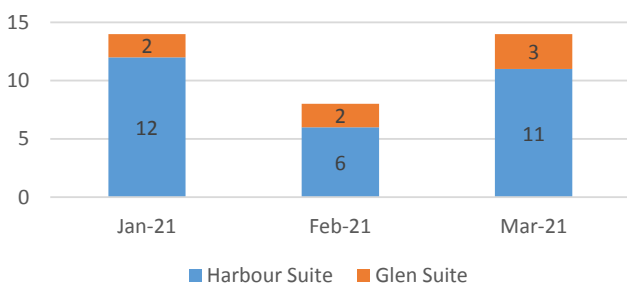
% Bed Occupancy Manannan Court



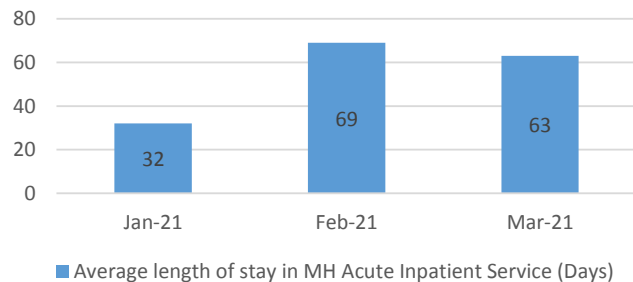
Number of Admissions to MH Acute Inpatient Service 2020-21



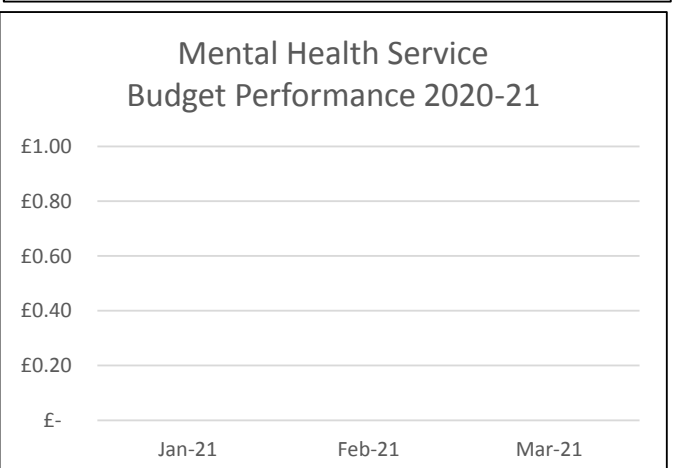
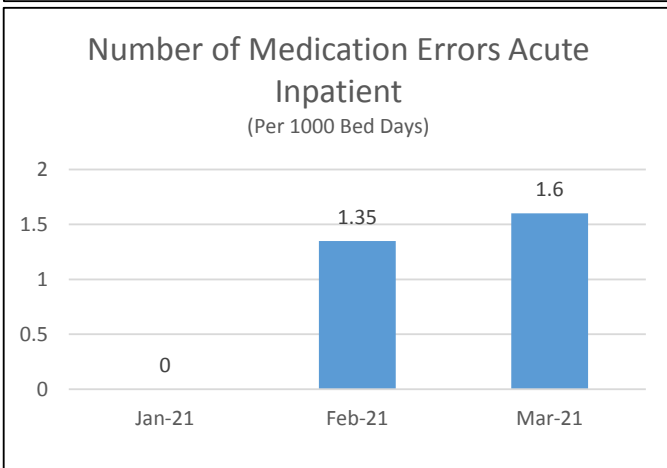
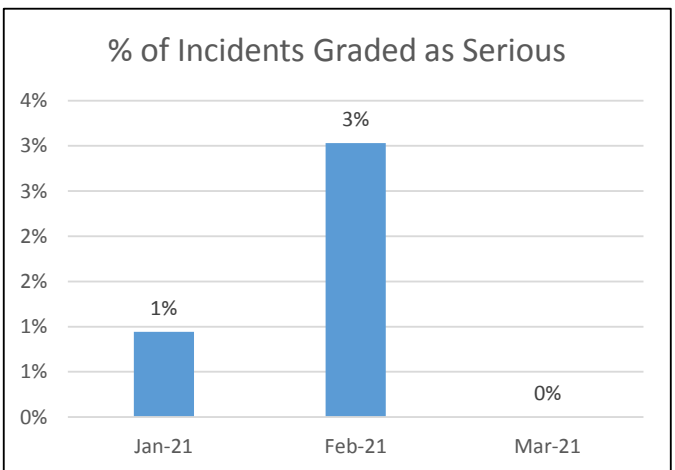
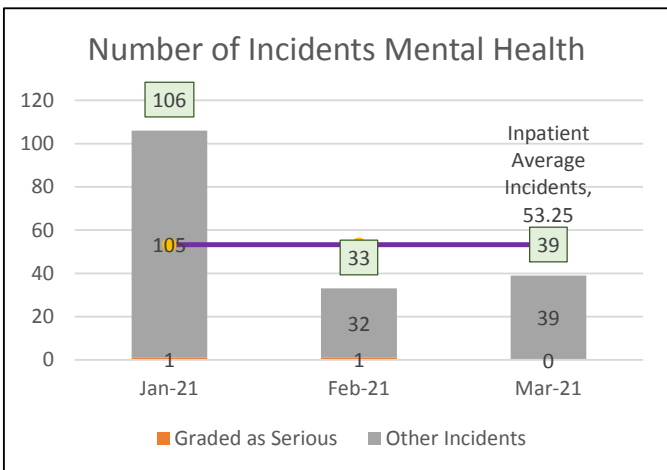
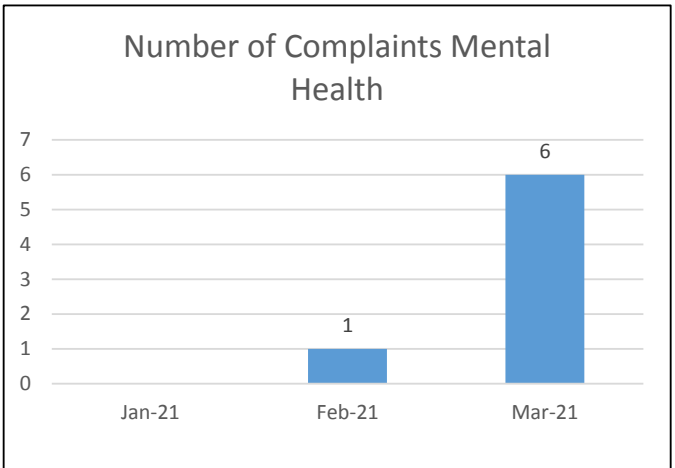
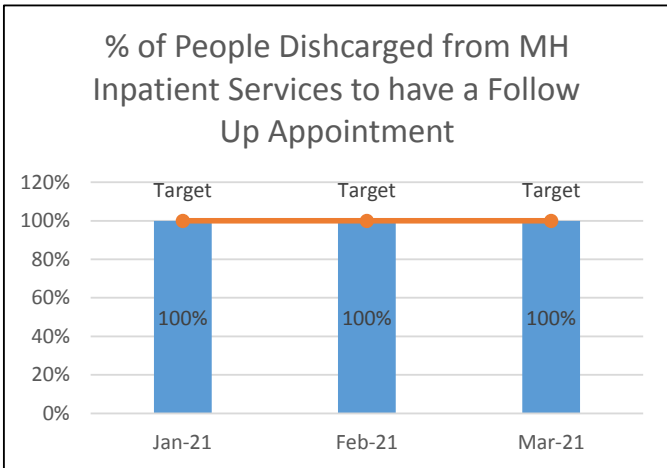
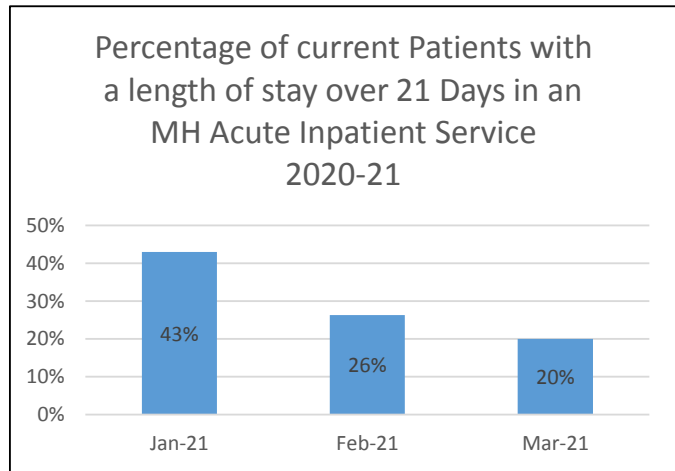
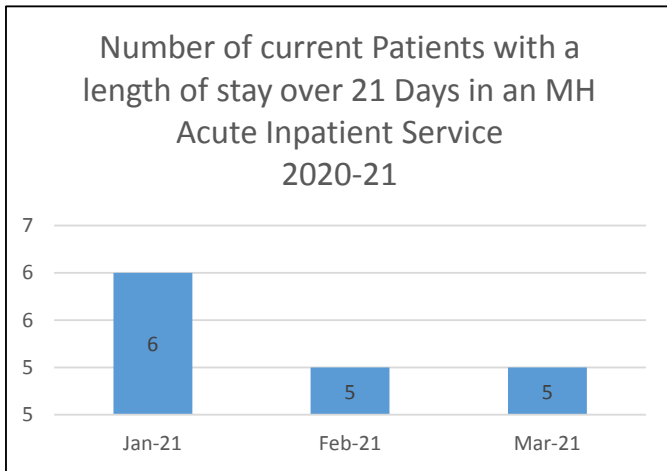
Number of Discharges from MH Acute Inpatient Service 2020-21



Average Length of Stay in MH Acute Inpatient Service 2020-21

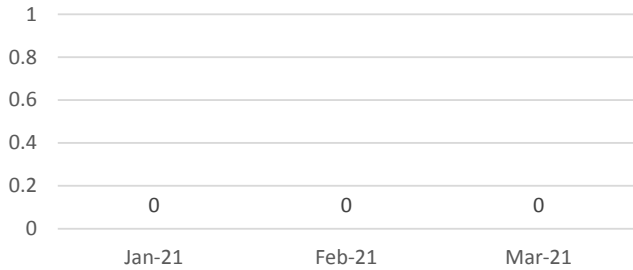


Mental Health Services Dataset 2020-21

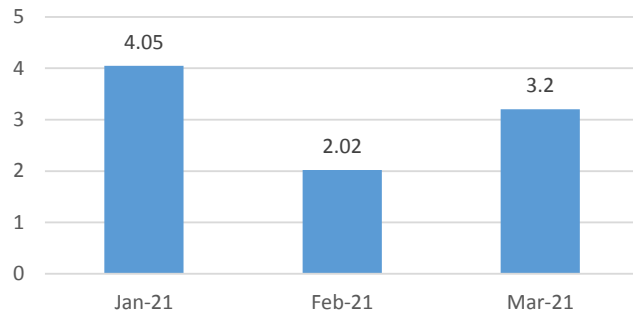


Mental Health Services Dataset 2020-21

Number of Inpatient Pressure Ulcers
Acute Inpatient
(Per 1000 bed days)



Number of Falls Acute Inpatient
(Per 1000 bed days)



Mental Health Services - Narrative - March 2021

FALLS : 2 falls reported on Glen Suite; both categorised as 'no harm'.

MEDICATION ERRORS- 3 errors reported; all reported as 'no harm'.

INCIDENTS - 35 'no harm'; 2 'low harm' (documentation and service user altercation); 1 'moderate harm' (self-harm); 1 'expected death' (not considered a serious untoward incident due to nature of death, however recently open to DAT and long-term liver damage from alcohol use contributed to death in Noble's Hospital. Reviewed by senior managers with no further action required. Reviewed by Coroner with no inquest).

COMPLAINTS - 4 CMHSA; 1 CAMHS; 1 CRHTT. Majority of complaints continue to be submitted by a third party. All complaints received in March remain under investigation and within target date with the exception of one, which has been resolved within the specified target date.



Manx Care KPI Reporting

Social Care Services



Care Group Reporting **(March 2021)**

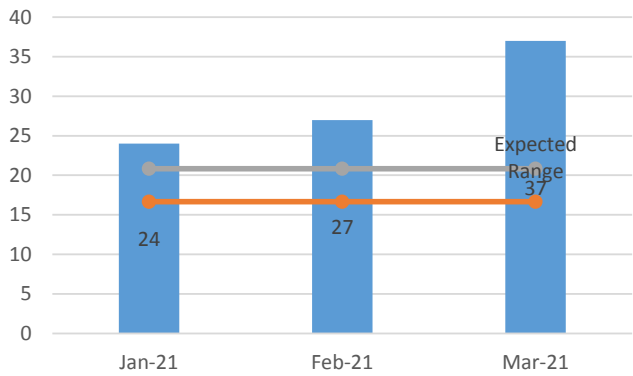
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Children & Families Social Work Service KPI Dataset
Adult Social Care Social Work Service KPI Dataset
Adult Social Care Operational Services KPI Dataset

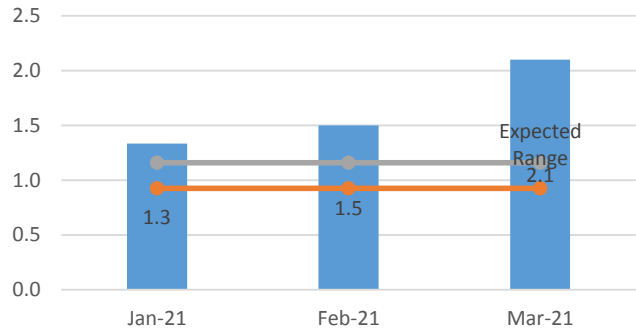
Children Families Social Care - 2020-21

QUALITY INDICATORS

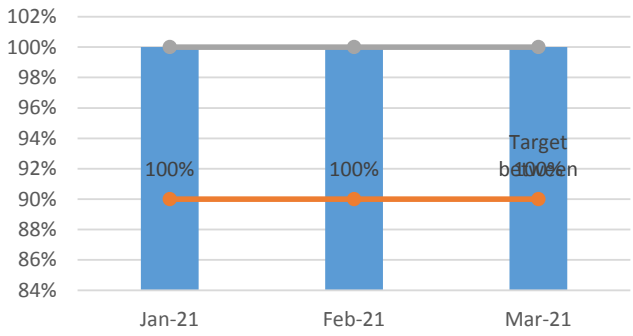
Number of S46 Enquiries



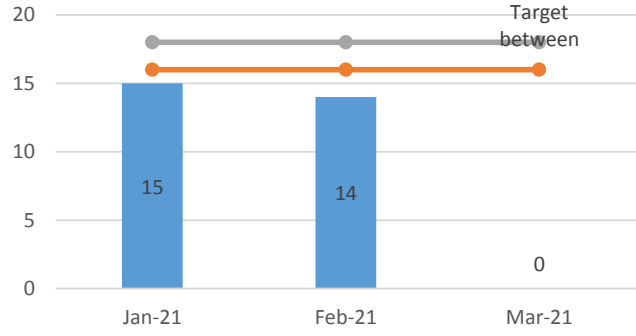
S46 Enquiries Rate per 1000 population



% Supervisions due that were completed

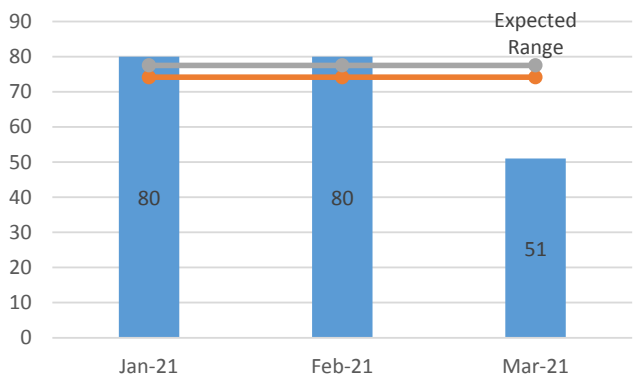


Service to Operate to an agreed average caseload

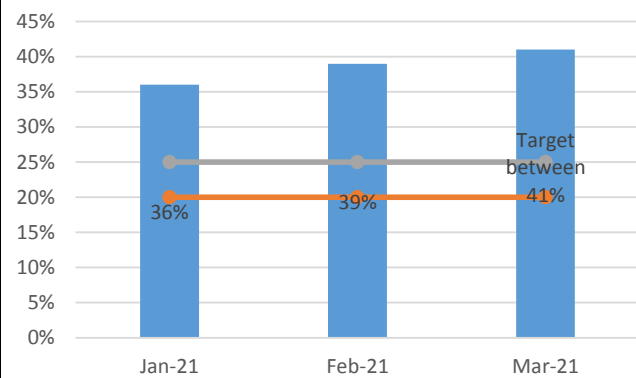


PERFORMANCE INDICATORS

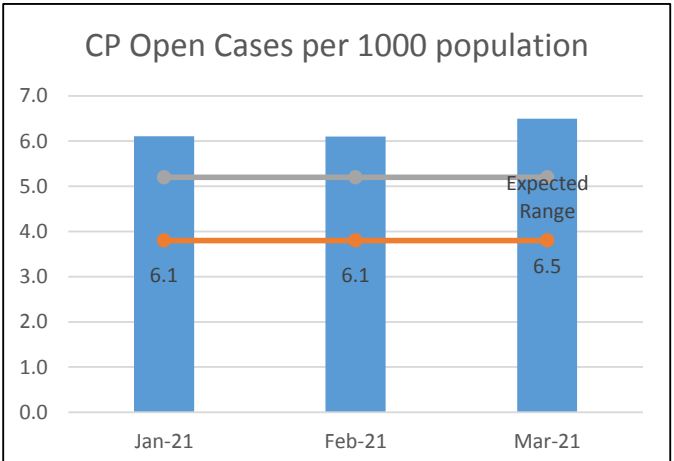
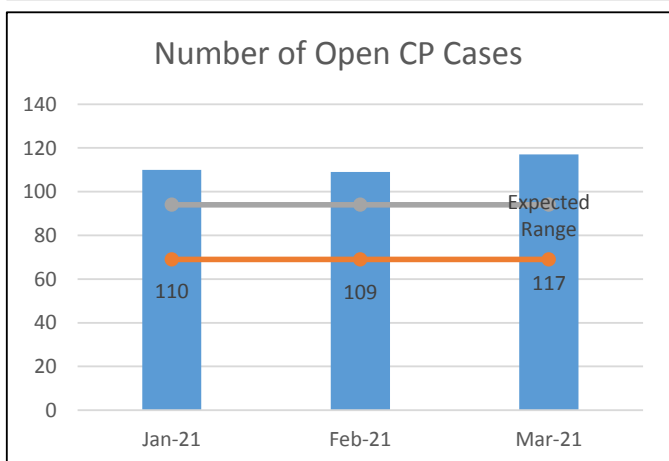
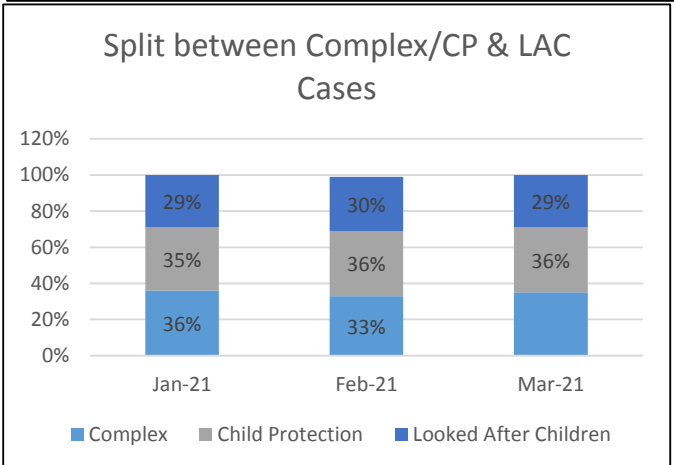
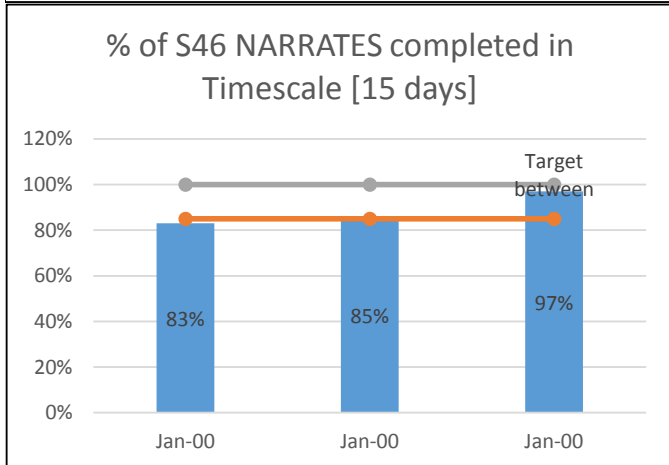
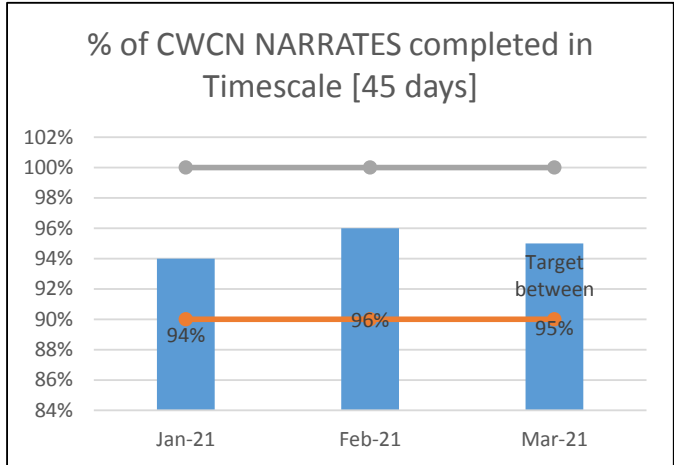
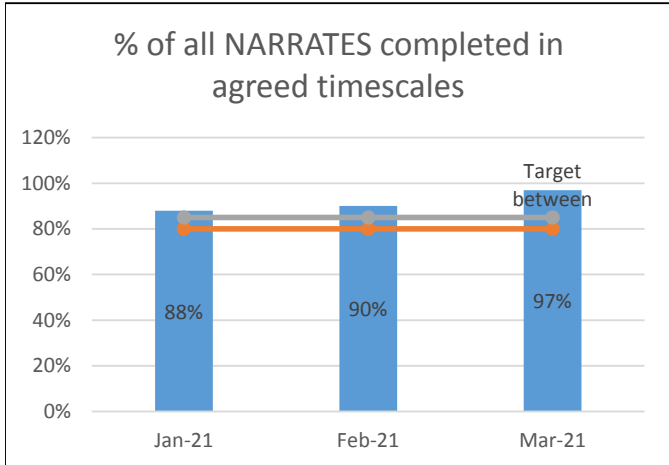
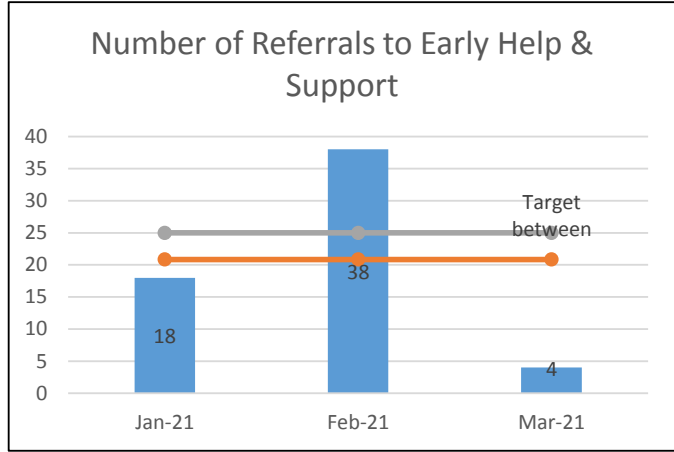
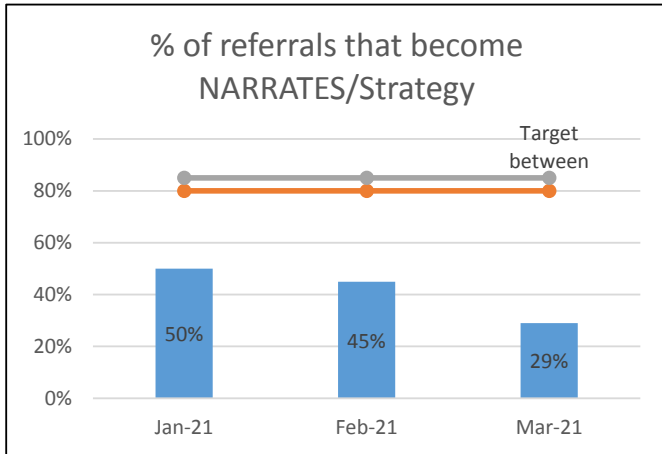
Number of Referrals



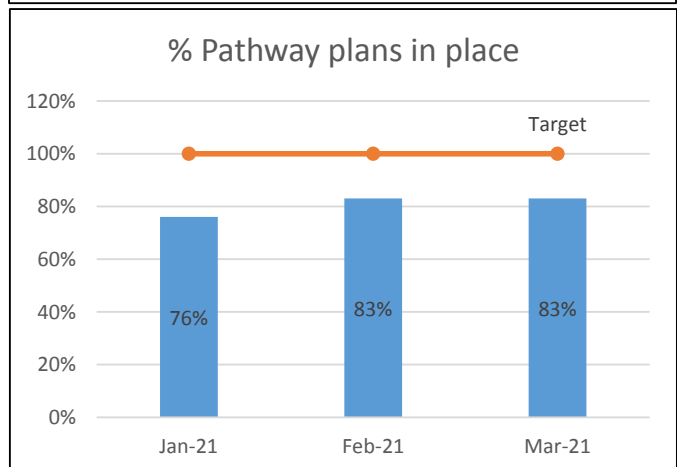
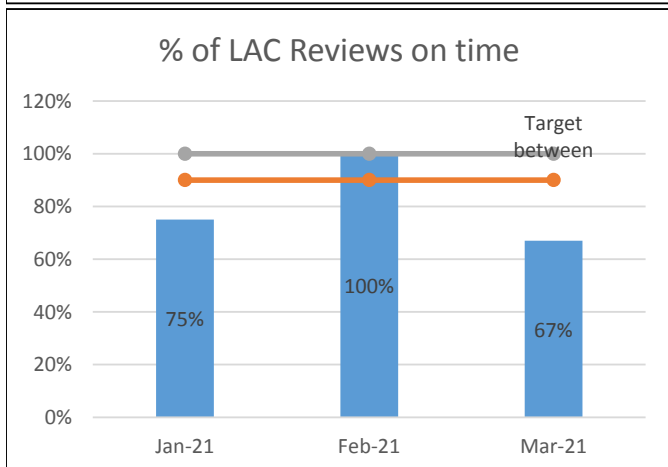
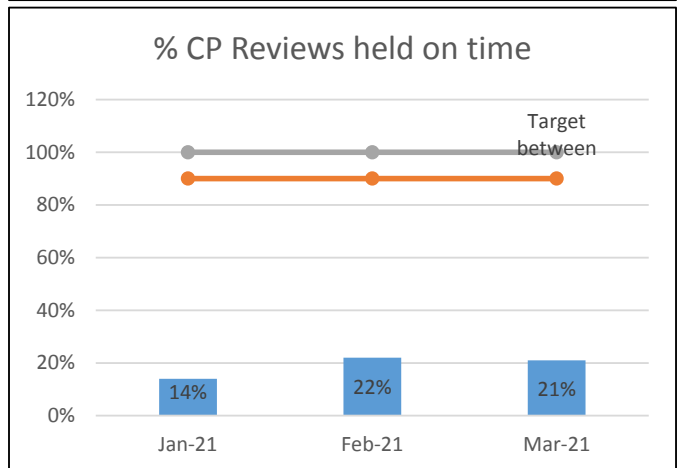
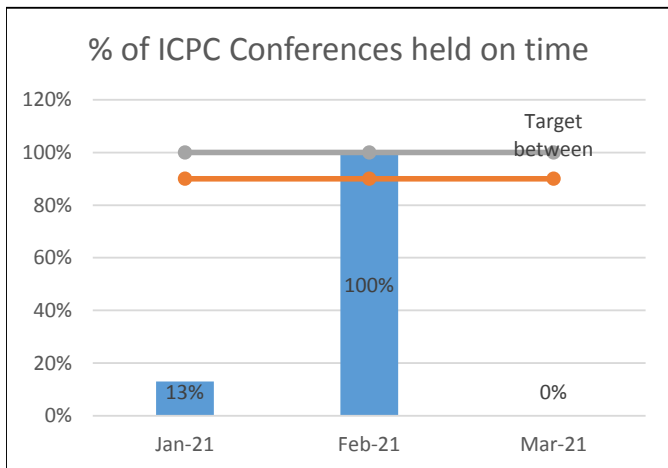
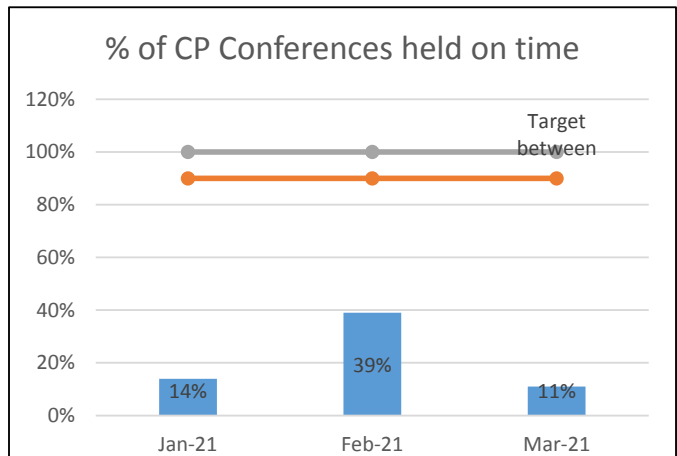
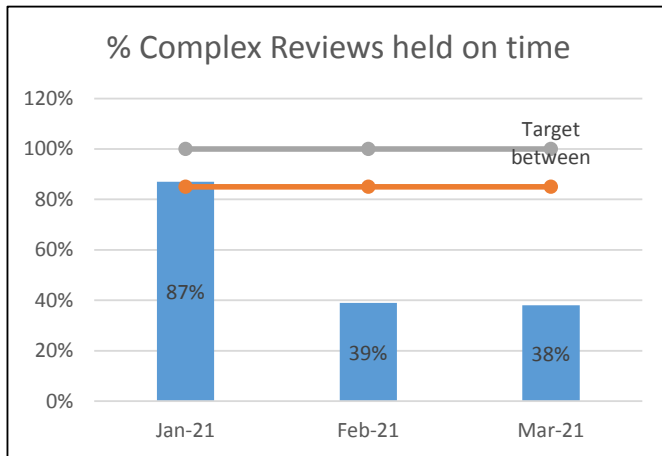
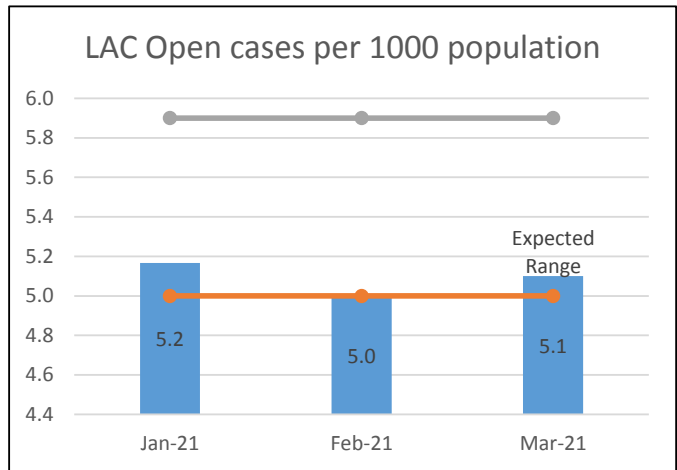
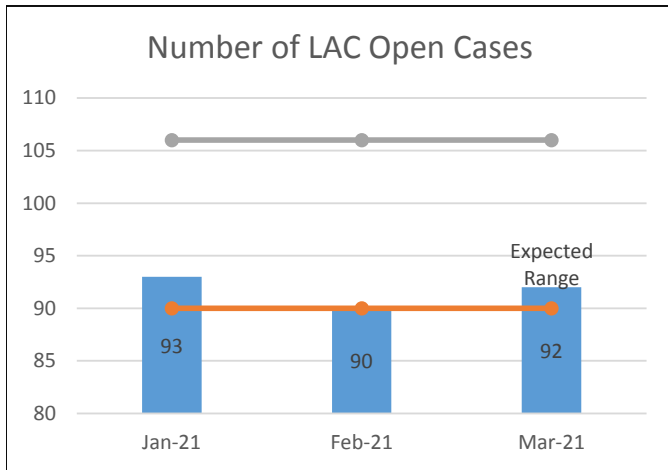
% of Re-Referrals in total Referrals



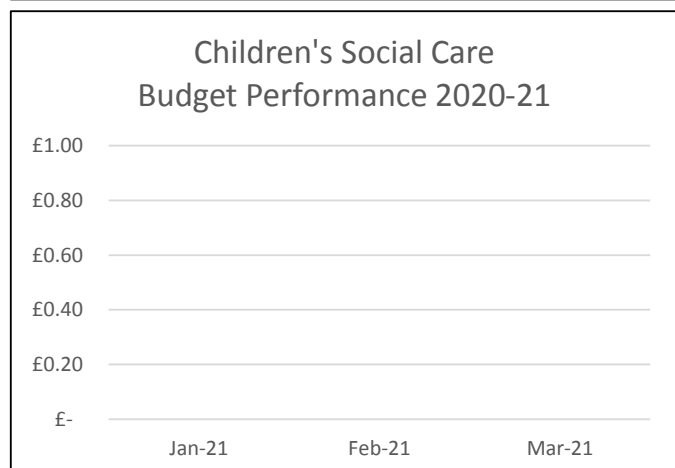
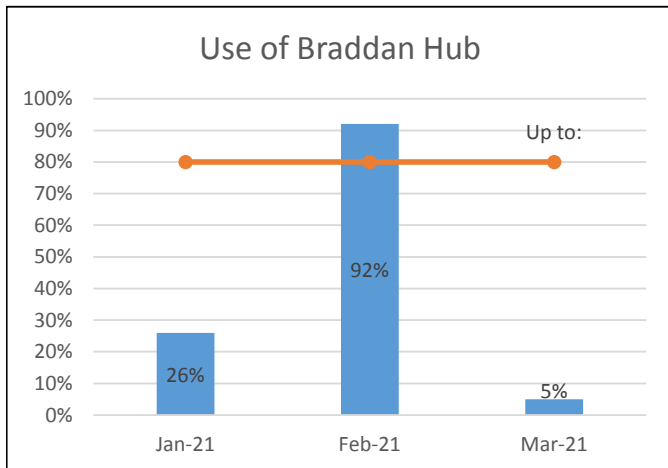
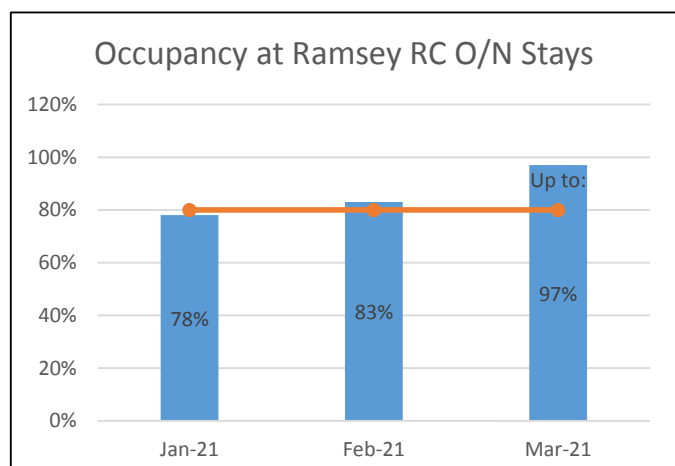
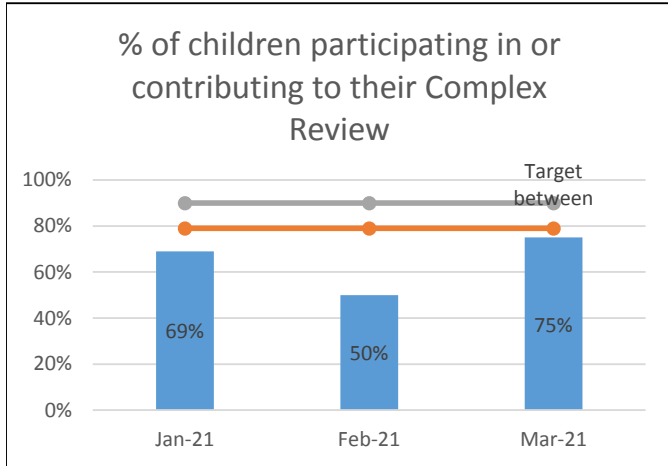
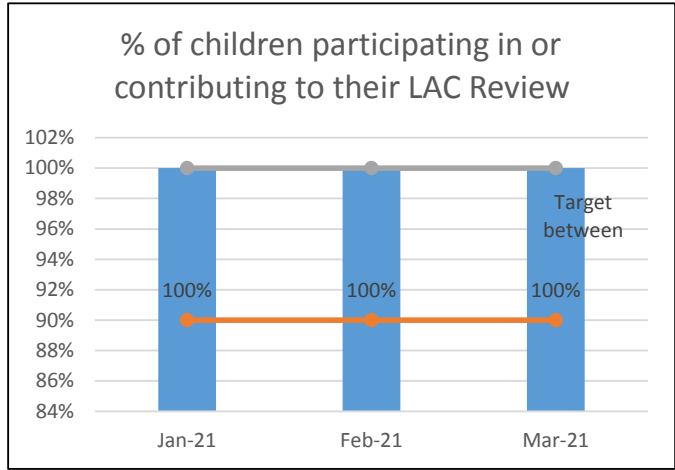
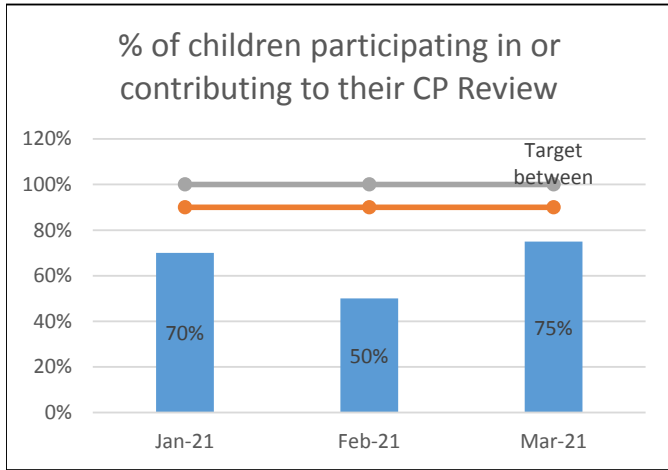
Children Families Social Care - 2020-21



Children Families Social Care - 2020-21



Children Families Social Care - 2020-21



Children Families Social Care - 2020-21

Children & Families - Narrative - March 2021

S46 Enquiries - March performance is outside of the monthly target range of 17-21. The service is undertaking a dip sample audit of those enquiries that did not proceed to a conference to test threshold to determine whether we are appropriately entering Sec 46 enquiries given that we are above target range.

Social Work Caseloads - The average caseload is 14 when based on the service's establishment, and 16 based on current staffing numbers. It should be noted that these figures represent the overall case numbers only, and do not reflect the caseload capacity of the individual workers which is based on their role and experience.

Complaints - One Stage 1 complaint was raised and responded to within March within the required timescales.

Currently have 1 Stage 3 complaint awaiting publication of the external investigator report, and 1 Stage 1 complaint that is being addressed and is currently within timescale.

Referrals - The cumulative position to the end of March is 1,121. The 51 referrals received in March is lower than trend, the hypothesis is that during this lockdown period schools have been closed which means that children have been less visible within the usual systems and within the community. This may have impacted on the number of referrals into the service. The service will continue to monitor the monthly referral rates to see if a return to previous volumes (or a short term increase) occurs post lockdown.

Re-Referrals - The high level of re-referrals remains a concern for the service. Further investigation of this performance is being undertaken through the regular audit of the re-referrals to look at the appropriateness of the referrals being received, and the thresholds for service being applied. This indicator may also be impacted on by lockdown periods when the service focus was on critical functions and certain referrals may not have been acted upon if an immediate response was not required. The referral rate as noted above may also impact this figure.

Referrals progressing to Narrates S46/Strategy - The cumulative position for the year is 33%. The service is carrying out further analysis of this performance which includes taking a detailed look at the conversion rates at each stage of the pathways across the whole system in order to fully understand the drivers for the low conversion rate between each process, such as issues relating to threshold within the multi agency arena. The service will also review the appropriateness of the current target to see if this is still a suitable benchmark at it's current level.

Child Protection Cases - There has been a steady increase in CP numbers since March 2020, which is likely in part impacted by the periods of lockdown. During those periods, for reasons of safety children were not stepped down from CP plans and meetings were prioritised and agreed with families where they could take place virtually. The service will undertake further review of the CP case numbers, and will monitor the position over the post lockdown period to ensure that any backlog in the stepping down of CP plans has been addressed.

ICPC Timescales - The service has endeavoured to ensure that all ICPC are held despite the lockdown. These have been prioritised due to the risks involved when CP status is not in place, which requires the initial meeting to have taken place. Whilst timeliness of the meetings has been impacted upon during the lockdown period, 12 of the 17 were held within 5 working days of the statutory due date. The remaining 5 cases (2 families) have had their meetings re-scheduled (1 family in consultation and at the request of the family) but they had not been held at the time of reporting.

CPC Timescales - CP Plans are already in place for these young people and so each case was risk assessed to determine which reviews could be undertaken post lockdown. Meetings went ahead via virtual means where the level of risk required it, and the family agreed. The social work teams have maintained regular contact with the service users throughout the lockdown period.

Looked After Cases - Pathway Planning - The shortfall equates to 4 young people, 2 of whom have the initial part of the assessment completed and are awaiting completion of the 2nd part. 1 young person only became eligible for a pathway plan during March.

Complex Needs Cases - Complex Needs reviews were not considered a critical function for the service during the lockdown period and were therefore deprioritised in March. Due to the Covid situation it would not have been appropriate to hold these meetings face to face, and reviews were therefore only carried out 'virtually' where such arrangements could be made with the family. The service will catch up with any rescheduled reviews over the coming months.

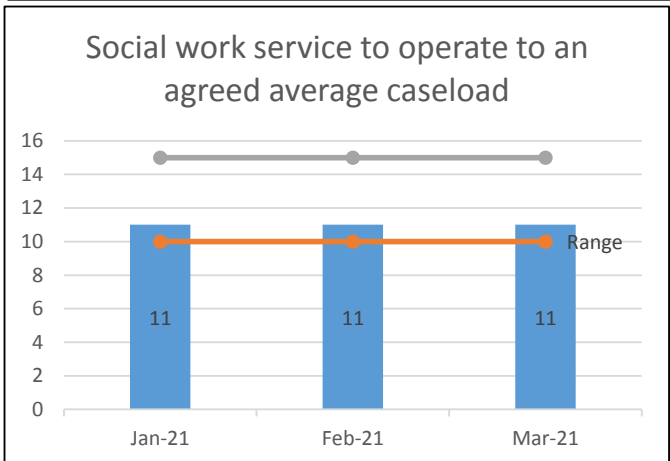
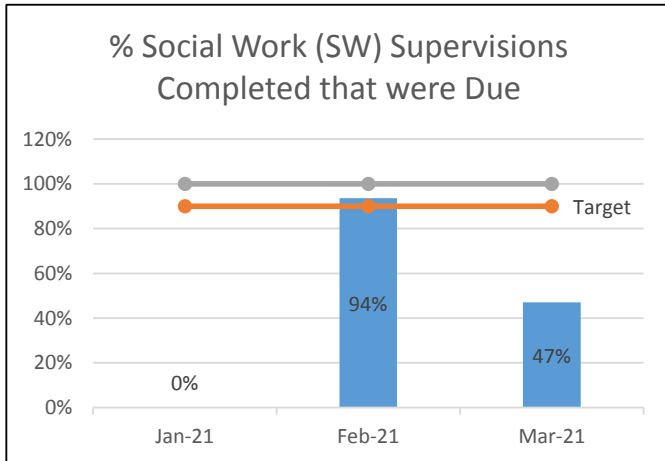
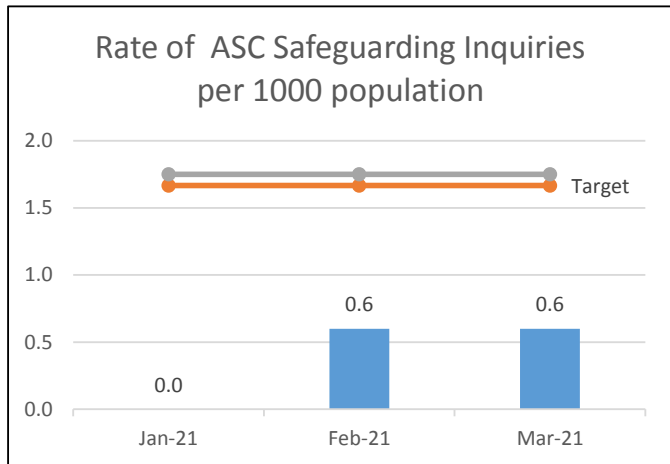
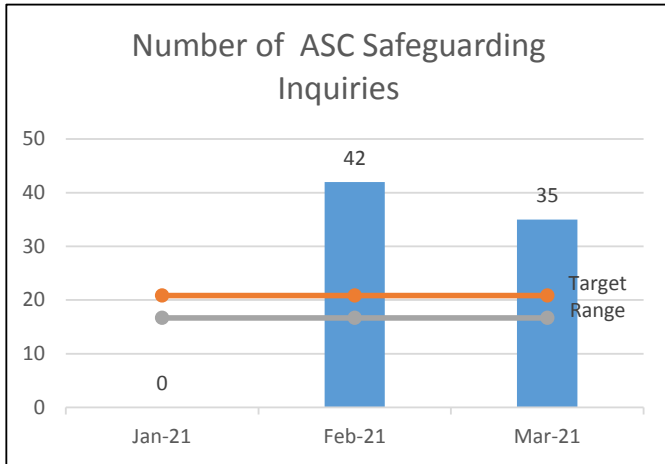
Making participation arrangements is more challenging during lockdown periods as young people cannot be invited to attend in person - and therefore this relies on them having suitable virtual means to enable their participation.

Occupancy at Ramsey - The March occupancy rate is based on the fact that the centre is closed to "respite" in line with COVID safety position taken by the service, however, 2 beds have remained open for full time residents who could not be cared for at home during the lockdown period without the provision of respite.

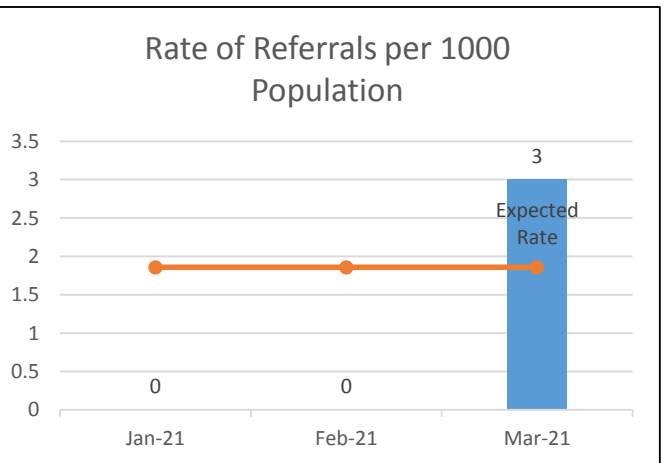
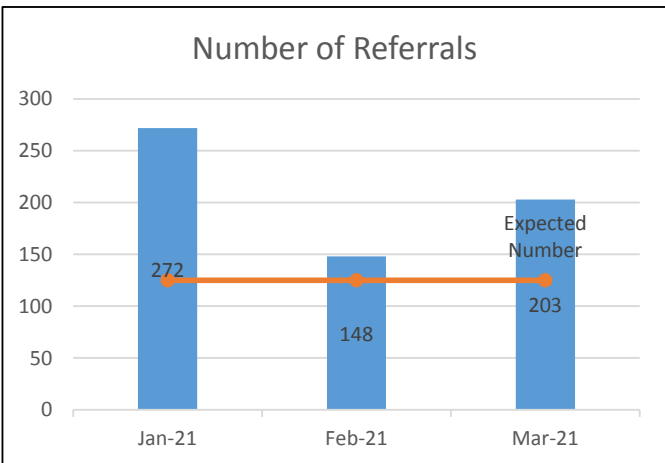
Use of Braddan Hub - Due to the lockdown and Covid restrictions, Braddan Hub has been closed to day support cases.

ADULT SOCIAL CARE SOCIAL WORK SERVICE 2020-21

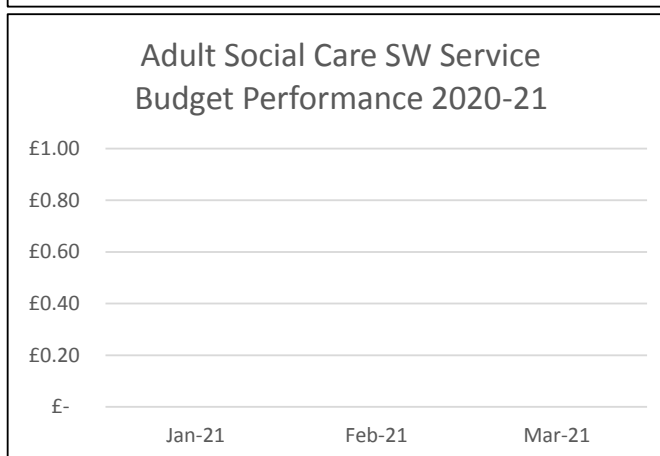
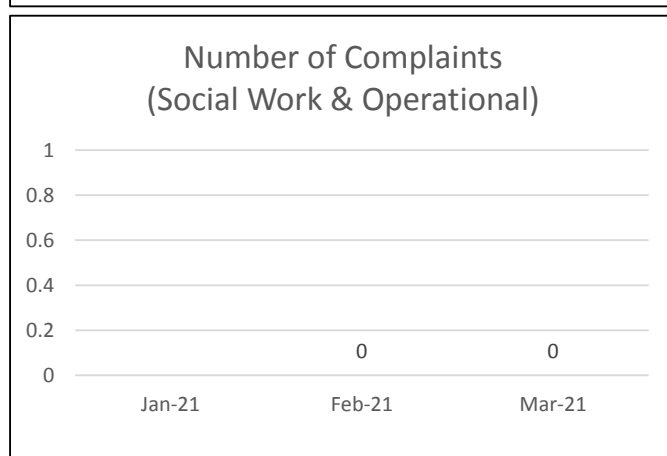
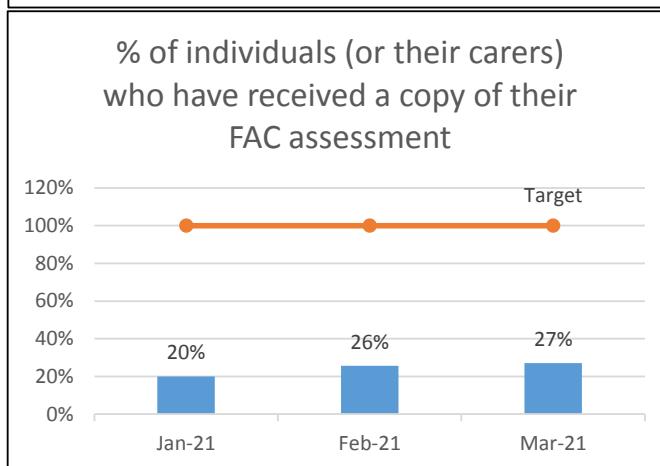
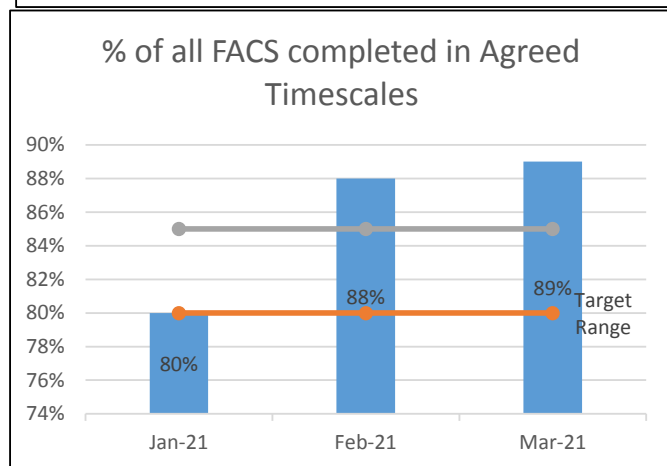
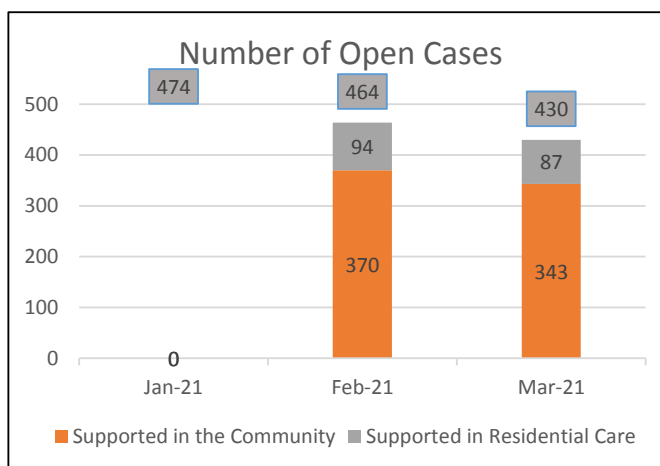
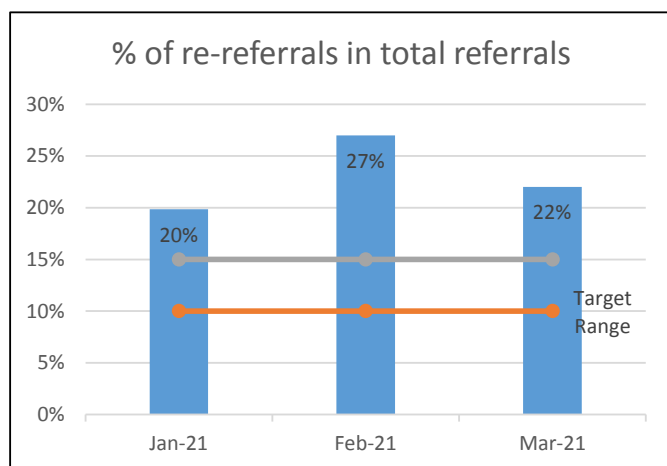
QUALITY INDICATORS 2020-21



PERFORMANCE INDICATORS 2020-21



ADULT SOCIAL CARE SOCIAL WORK SERVICE 2020-21



Adult Social Care - Social Work Service - Narrative - March 2021

Safeguarding Inquiries - Further breakdown of information requested, in order to complete appropriate analysis.

Supervisions - This indicates poor performance and action is required in this area.

Agreed caseload - Information on individual team's average caseload will be collated for April, to allow a more detailed understanding of this indicator.

New Referrals - 203 indicates a busy month, well above average. We need to understand the baseline.

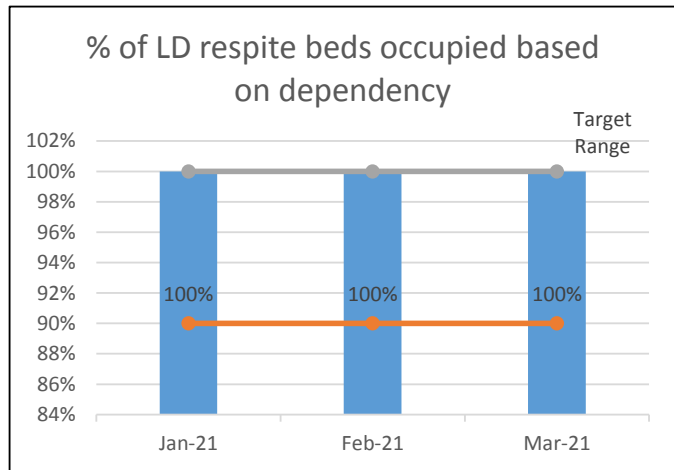
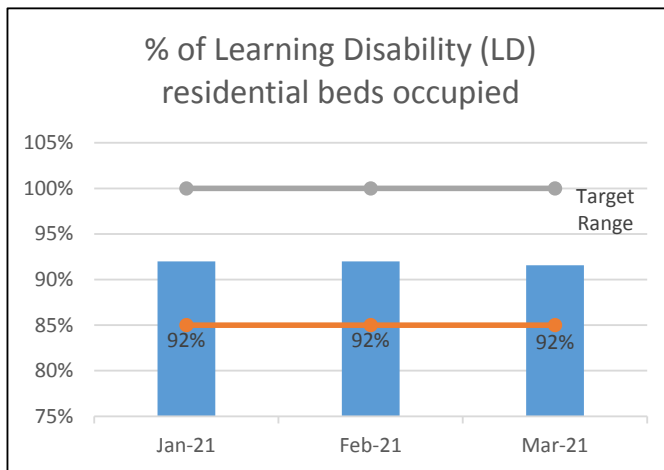
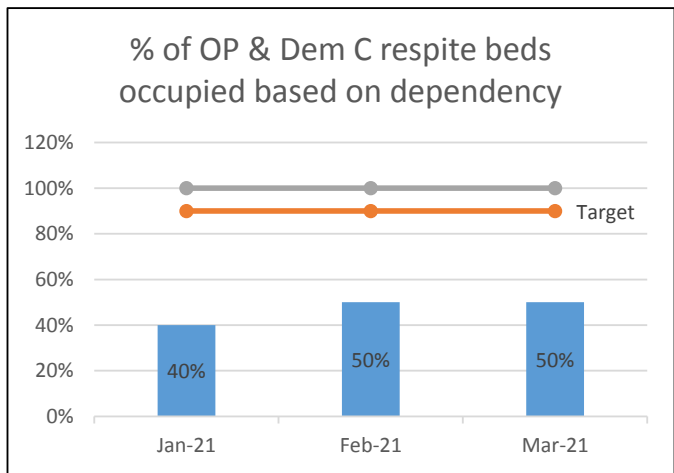
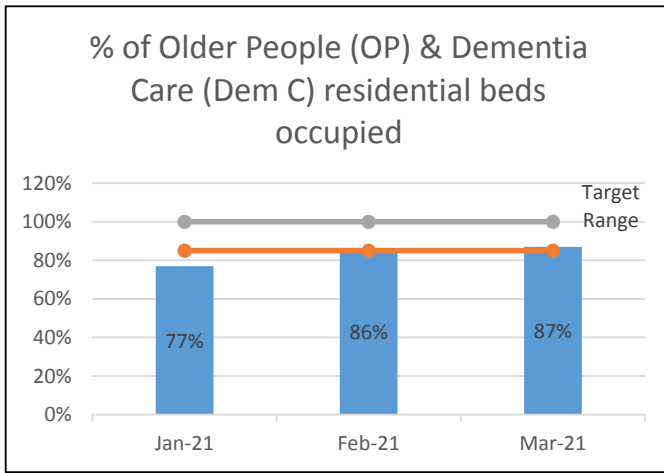
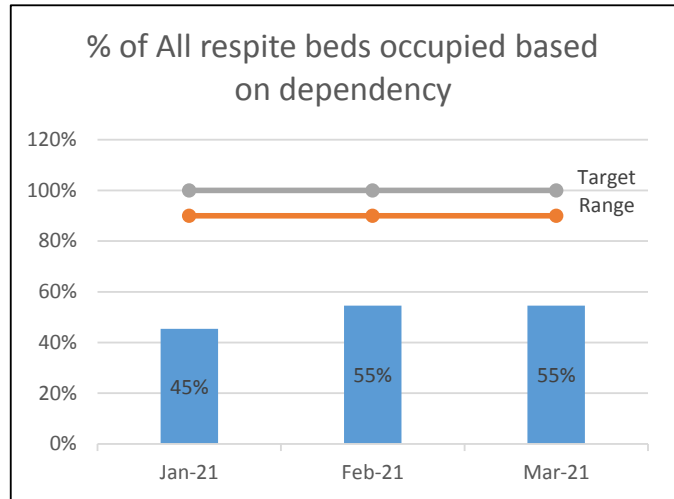
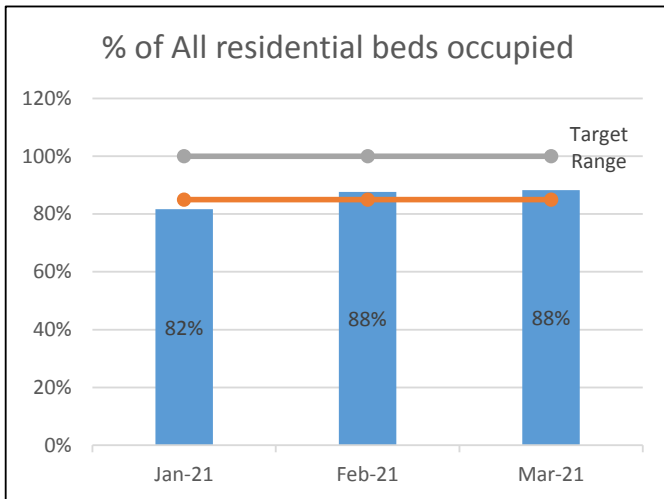
Re-Referrals - This is very high and suggests an audit is required so we understand the amount of re-referrals.

FACS Completed in Timescale - This indicates good performance to the timescale.

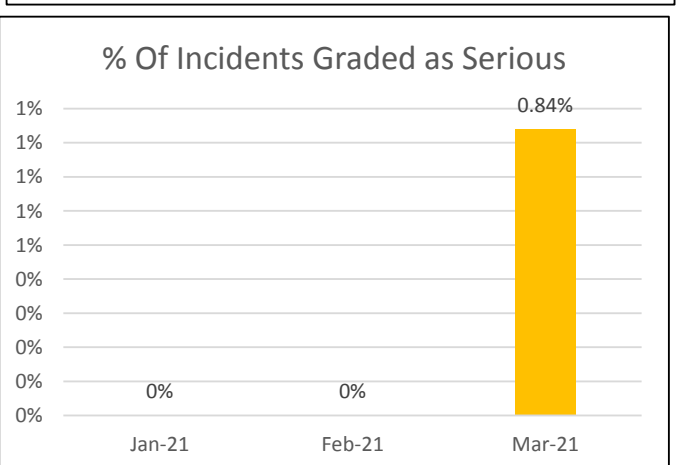
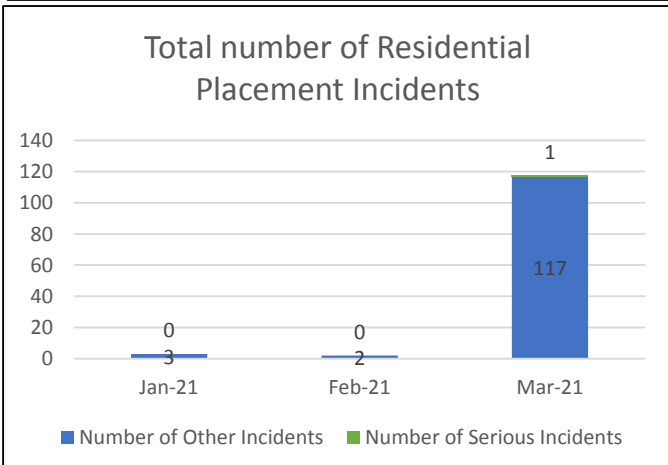
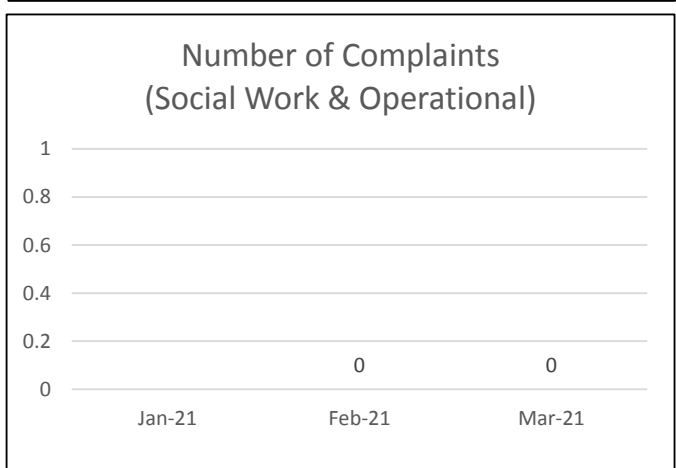
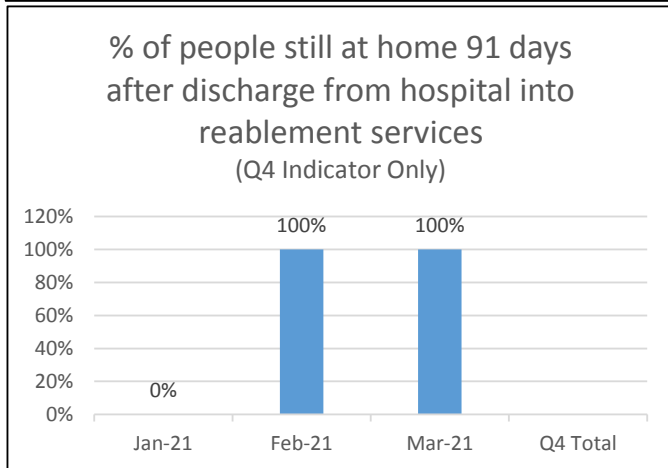
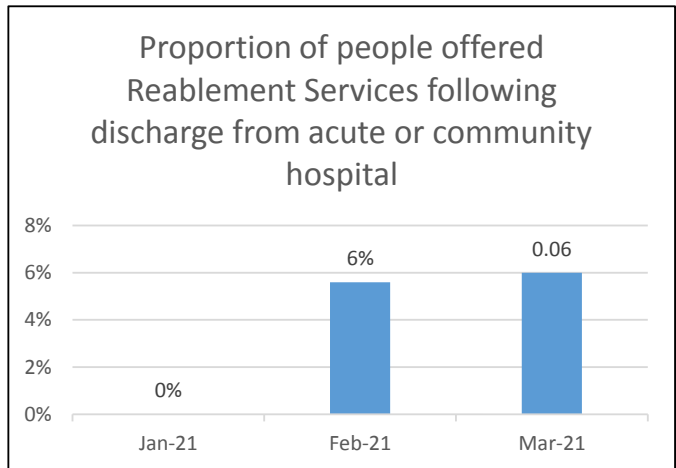
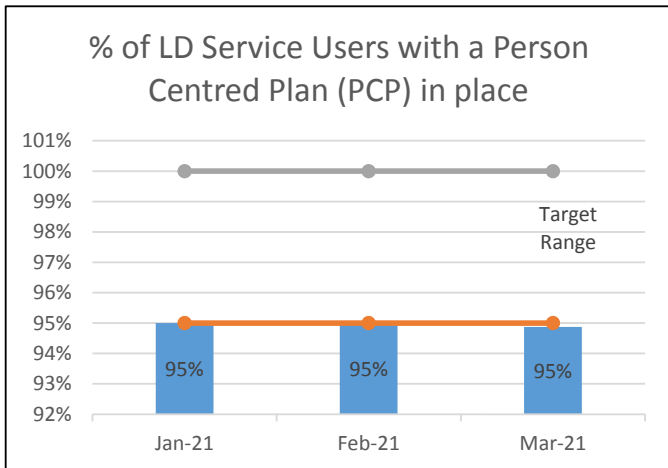
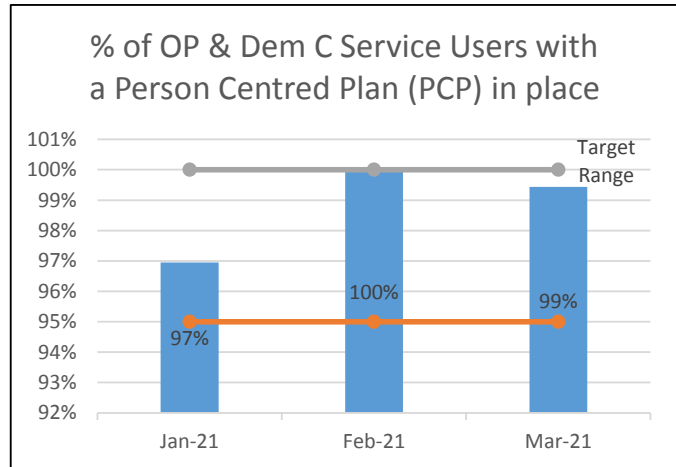
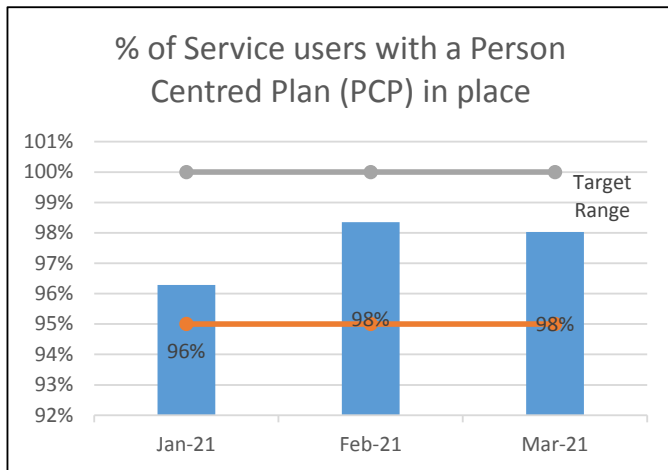
Number of Cases supported in the community - A large proportion of open cases appear to be located in residential/nursing placements and further exploration of the data is required to understand why this is the case.

FAC's Shared with Service User/Family - This indicates very poor performance but it is unclear if the way in which the information is being pulled off the system or way this is captured on rio provides an accurate position and further analysis is required.

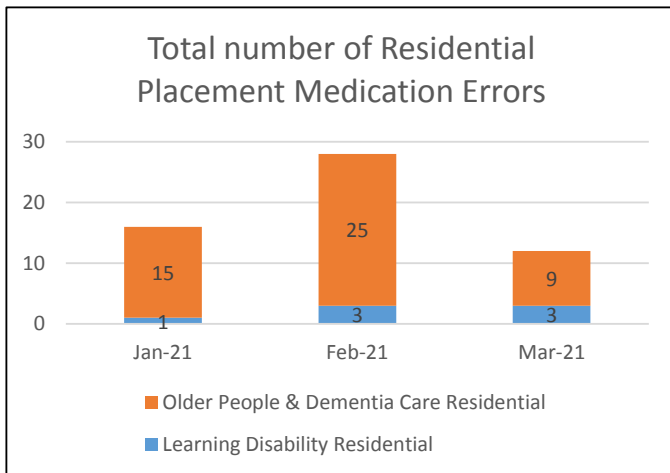
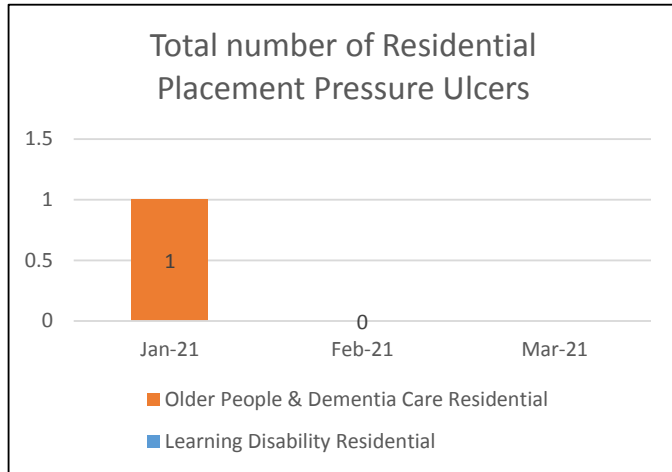
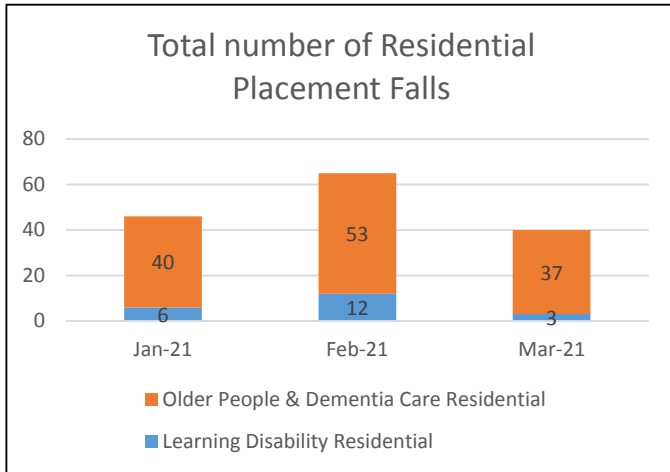
Adult Social Care - Operational Services - 2020-21



Adult Social Care - Operational Services - 2020-21



Adult Social Care - Operational Services - 2020-21



Adult Social Care - Operational Services - Narrative - February 2021

FALLS -

Older People & Dementia Care Residential (OP&DC): 23 recorded as 'no harm'; 9 as 'low harm' and 5 as 'moderate harm'. Further investigatory work to be undertaken to identify root causes/ trends and identification of remedial actions.

Learning Disability Residential (LD): 2 recorded as 'no harm' and 1 as 'low harm'.

PRESSURE ULCERS -

Nil Reported

MEDICATION ERRORS-

OP&DC: All reported as 'no harm' with exception of one which was reported as 'low harm'. Ongoing reports indicate a number of medication errors are related to the removal of medi-dose dispensing systems from some care homes/resource centres. System currently under review/subject to audit by ASC management and community pharmacist.

LD: All reported as 'no harm'.

INCIDENTS -

Adult Social Care (ASC): Top incident categories continue to be falls and medication errors. A CQS Coordinator for ASC will shortly be in post and will be tasked with undertaking a review in order to ascertain underlying root causes and the identification of risk mitigation/remedial action

One SI - Resident at Southlands Resource Centre sustained head injury from unwitnessed fall. Resident subsequently admitted to Noble's Hospital where brain scan identified significant brain trauma. Resident transferred to Hospice for end of life care.



Manx Care KPI Reporting

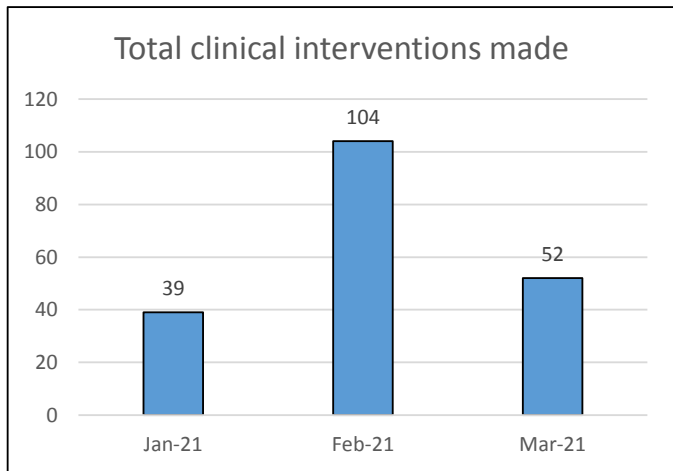
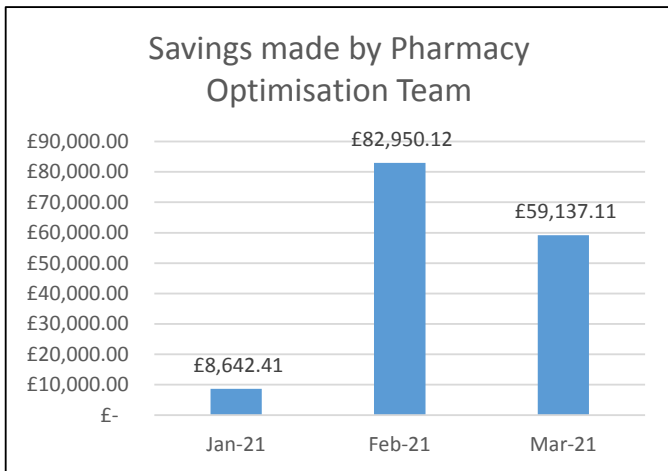
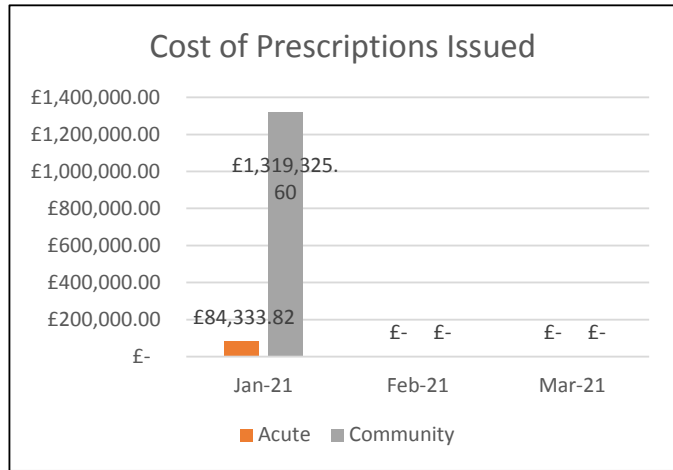
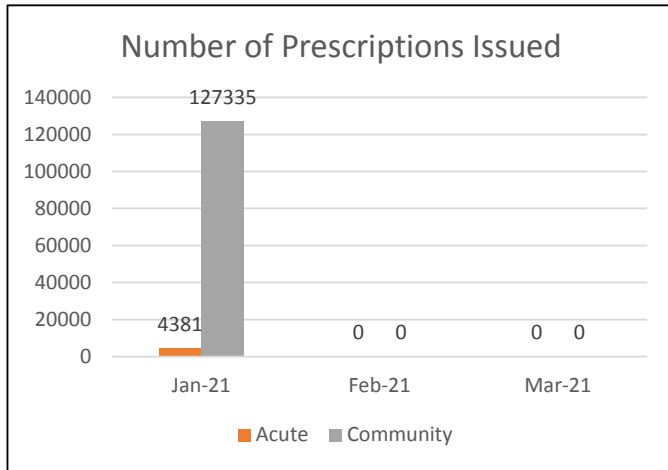
Pharmacy Services

Care Group Reporting

Contents:

Pharmacy Service KPI Dataset

PHARMACY DATASET 2020-21



Pharmacy - Narrative - March 2021

The Primary Care pharmacy team operate in 'normal' circumstances by physically working in the GP surgeries, the mental health teams and by visiting the care homes and learning disability homes; this not only builds up relationships with the teams but allows direct access to the clinicians in these settings. In addition, many surgeries have reduced their hours and therefore the 'tasks' and clinical queries made by the team re not being handled as quickly.

(In addition, Ramsey Group Practice does not permit remote working for the team – they are required to be on-site).

During the recent circuit break the team have not been permitted to work in their normal settings and some of the team have been redeployed to support the hospital pharmacy.

This has naturally resulted in less cost savings and clinical interventions for the month of March.

NB: Cost of prescriptions for the Acute Service excludes ward medicines. These are prescriptions issued by the hospital and processed by community pharmacies. Typically in the UK these would be dispensed by an outpatient pharmacy in the hospital. There is currently no process to gate keep these prescriptions and have prescriptions which are non-formulary or for large amounts of drugs –both of which are inappropriate (but current process doesn't allow for these to be stop at source).

Number & Cost of prescriptions data runs 6 weeks behind actual, due to delays in releasing the information on the UK Epat2 System



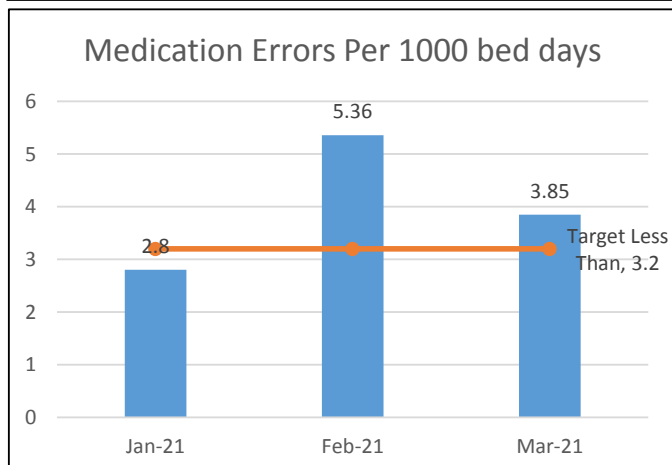
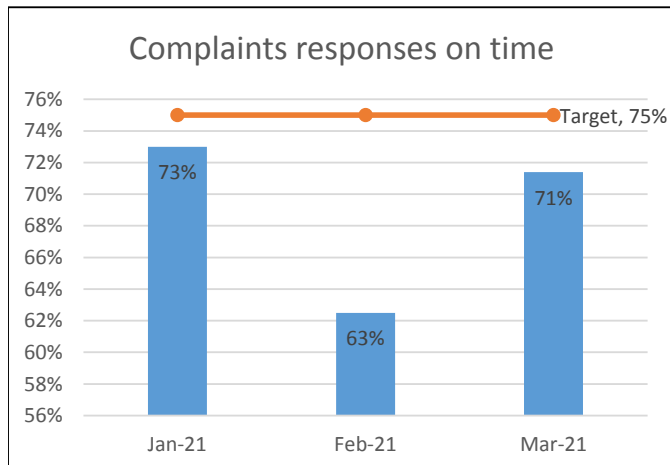
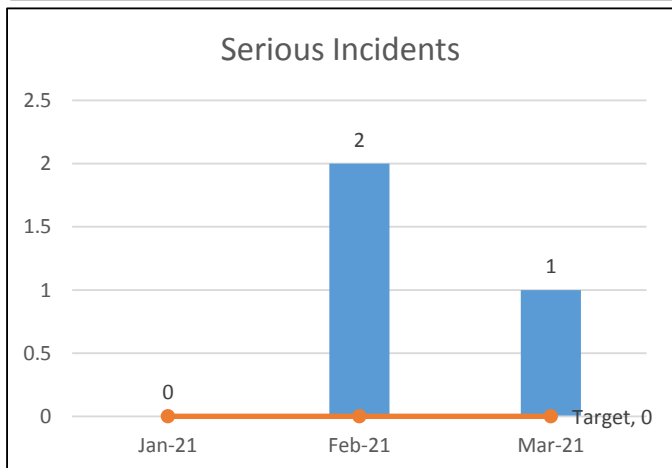
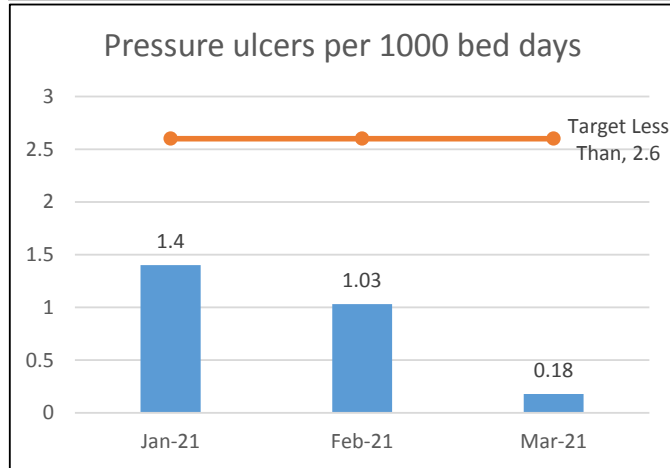
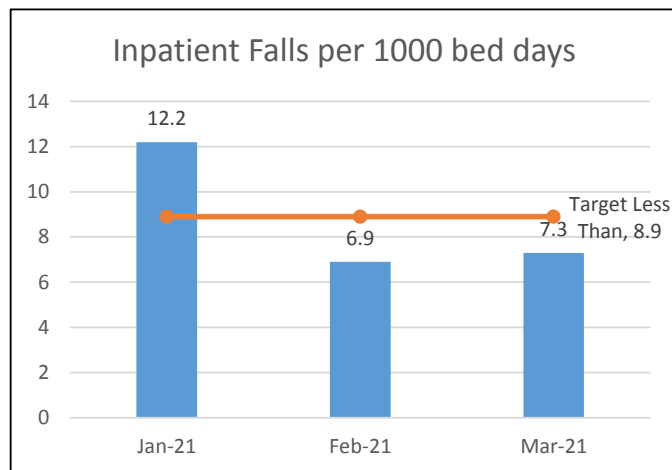
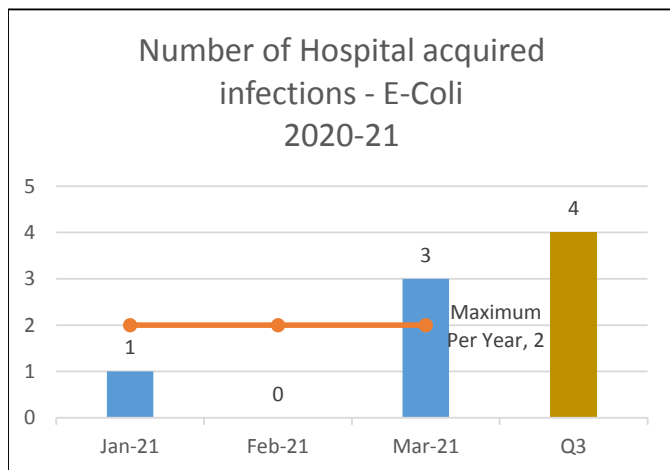
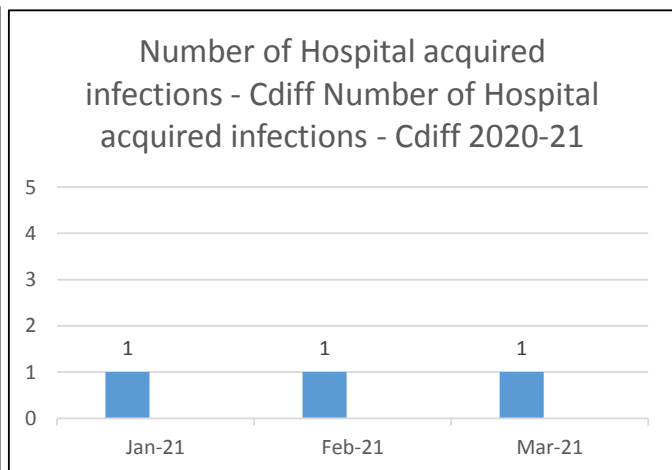
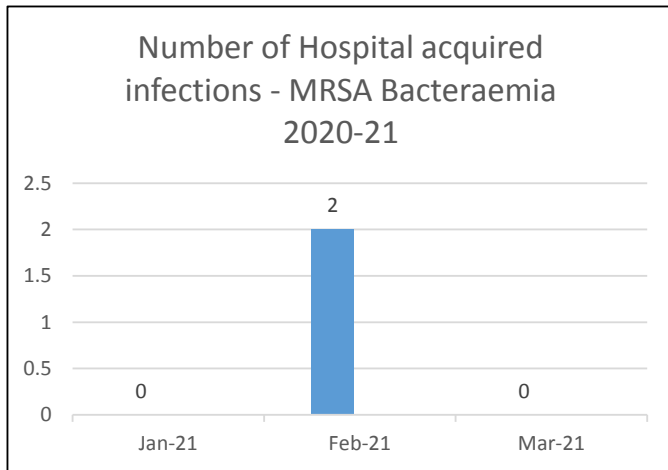
Manx Care KPI Reporting

Care Quality Services (March 2021)

Contents:

Hospital Care Quality Reporting
Community Care Quality Reporting

Hospital Care Quality Indicators - 2020-21



Hospital Care Quality Indicators - 2020-21

Hospital Care Quality - Narrative - March 2021

MRSA Infections - RCA meeting scheduled for April 2021

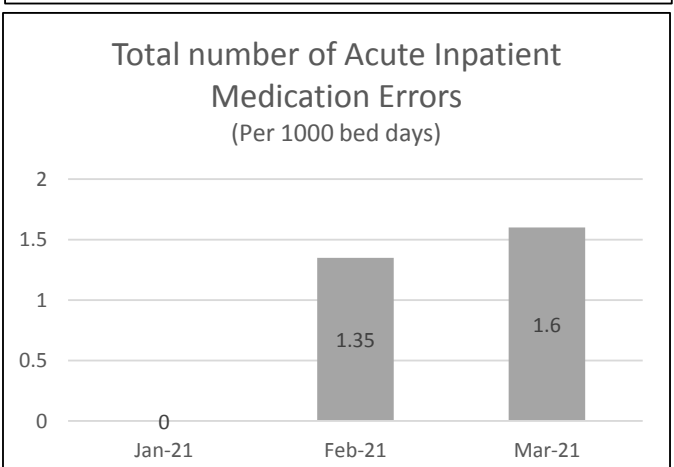
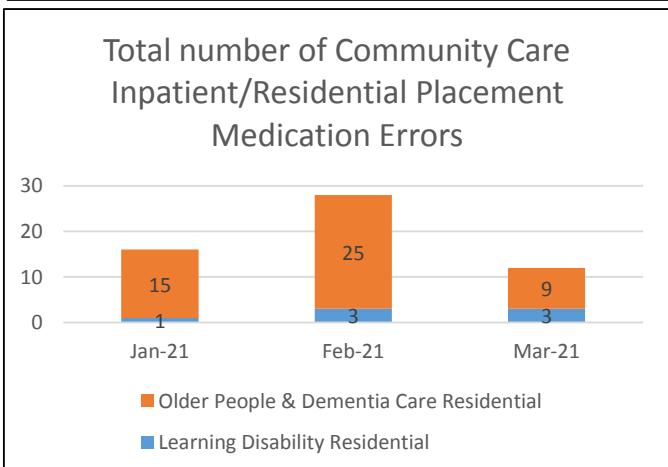
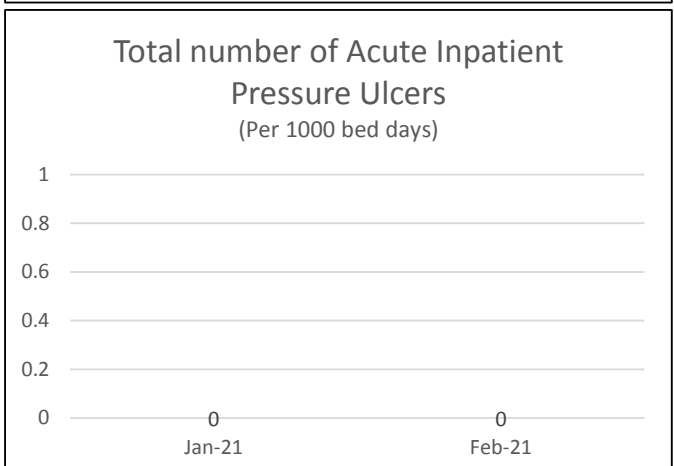
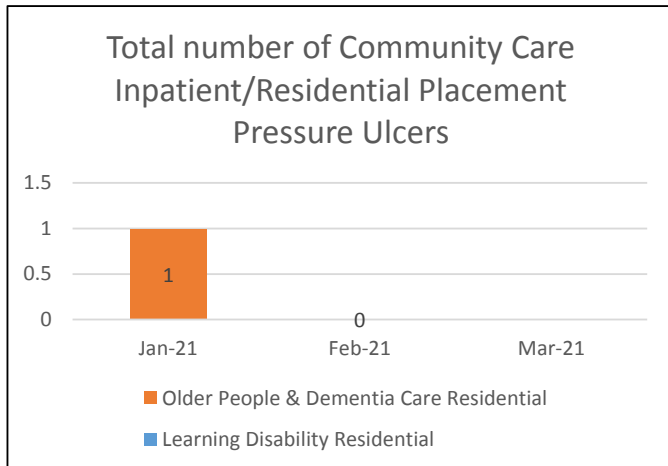
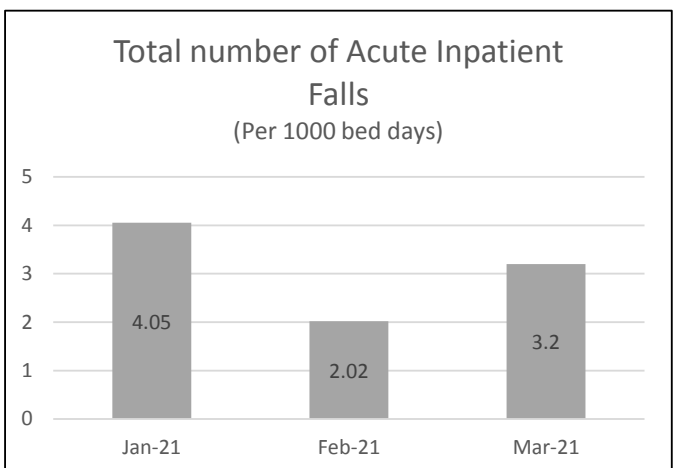
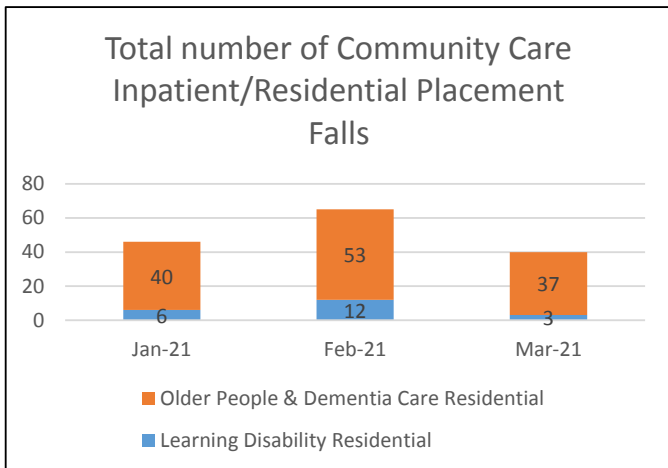
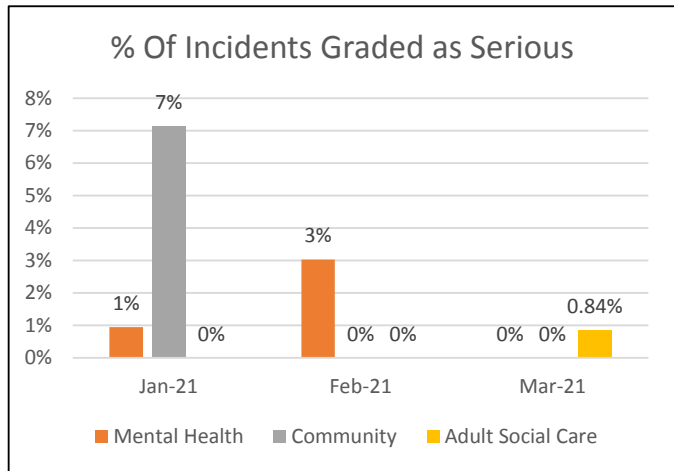
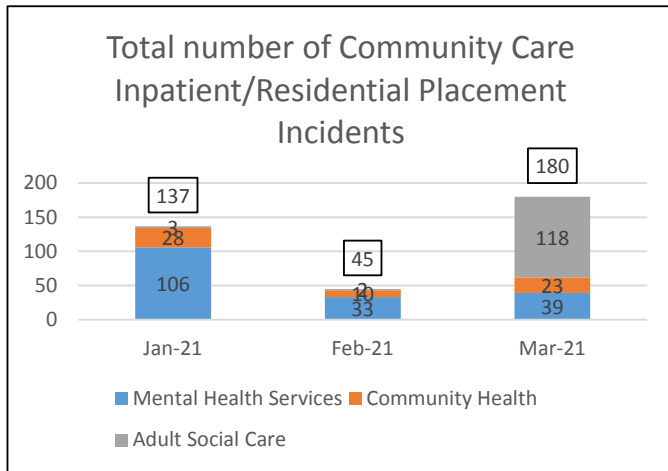
Cdiff Infections - Antimicrobial ward rounds in place, RCA's, and lessons learned distributed and followed up by the Infection Prevention and Control Team. Guidance on sending a stool to the lab to be distributed.

Number of Hospital acquired infections - E-Coli - 3 in hospital and 3 in community (6 in total). Work required in this area to be discussed at IPCC

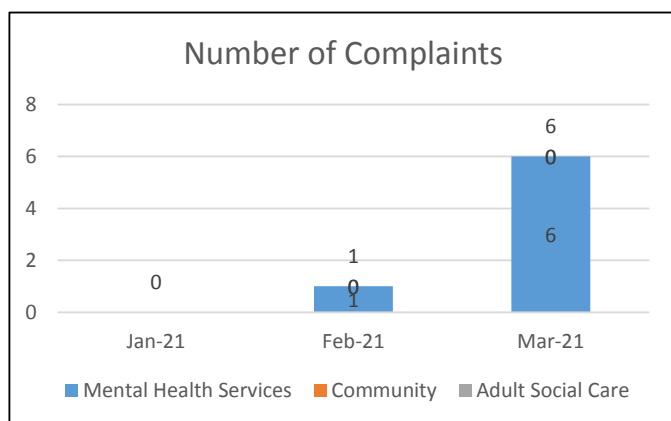
Serious Incidents - Unexplained outcome from caesarean section. Not considered adverse at this stage but, being subject to an RCA

Medication Errors - Acting Chief Pharmacist reviewing all medication errors from a patient safety perspective

Care Quality and Safety - Adult Social Care; Mental Health; Community.



Care Quality and Safety - Adult Social Care; Mental Health; Community.



Care Quality Narrative - March 2021

FALLS -

Mental Health (MH): 2 falls reported on Glen Suite; both categorised as 'no harm'.

Older People & Dementia Care Residential (OP&DC): 23 recorded as 'no harm'; 9 as 'low harm' and 5 as 'moderate harm'. Further investigatory work to be undertaken to identify root causes/ trends and identification of remedial actions.

Learning Disability Residential (LD): 2 recorded as 'no harm' and 1 as 'low harm'.

PRESSURE ULCERS -

Nil Reported

MEDICATION ERRORS-

MH: 3 errors reported; all reported as 'no harm'.

OP&DC: All reported as 'no harm' with exception of one which was reported as 'low harm'. Ongoing reports indicate a number of medication errors are related to the removal of medi-dose dispensing systems from some care homes/resource centres. System currently under review/subject to audit by ASC management and community pharmacist.

LD: All reported as 'no harm'.

INCIDENTS -

MH: 35 'no harm'; 2 'low harm' (documentation and service user altercation); 1 'moderate harm' (self-harm); 1 'expected death' (not considered a serious untoward incident due to nature of death, however recently open to DAT and long-term liver damage from alcohol use contributed to death in Noble's Hospital. Reviewed by senior managers with no further action required. Reviewed by Coroner with no inquest).

Community: 5 medication incidents arising at Prison (not related to administration of MEDS). Incidents reported regarding drug ordering/delivery and two involving controlled drug discrepancies - both of which have been accounted for by service leads. Care delivery incidents raised by S< in response to patients not being appropriately assessed on wards. Prison healthcare are most prolific reporters, followed by S<.

Adult Social Care (ASC): Top incident categories continue to be falls and medication errors. A CQS Coordinator for ASC will shortly be in post and will be tasked with undertaking a review in order to ascertain underlying root causes and the identification of risk mitigation/remedial action

One SI - Resident at Southlands Resource Centre sustained head injury from unwitnessed fall. Resident subsequently admitted to Noble's Hospital where brain scan identified significant brain trauma. Resident transferred to Hospice for end of life care.

COMPLAINTS -

MH: 4 CMHSA; 1 CAMHS; 1 CRHTT. Majority of complaints continue to be submitted by a third party. All complaints received in March remain under investigation and within target date with the exception of one, which has been resolved within the specified target date.

Community: No complaints logged.

ASC: No complaints logged.