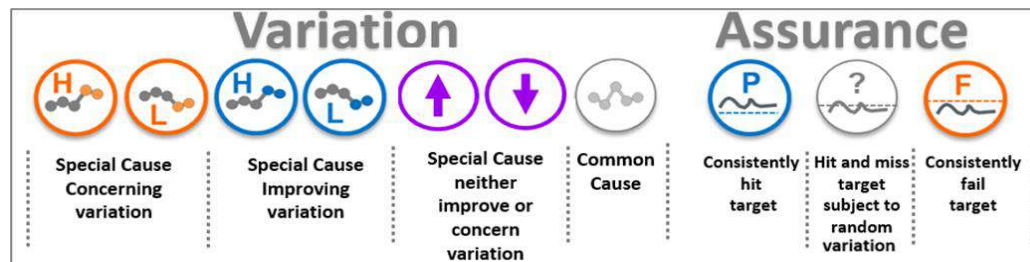


## Oversight Framework Performance for 2022-23

The metrics detailed below relate to the Mandate to Manx Care 2022-23 <https://www.gov.im/media/1376433/mandate-2022-23-01-april-2022.pdf>. It should be noted that Manx Care have undertaken significant work to establish a programme to enhance the integrity and validation of performance data, from a baseline of very little accurate data being available to report. This work-stream is ongoing and is likely to take most of 2023/24 to complete. The metrics and methods for measuring Manx Care's organisational performance continue to mature. This is a position accepted by the Department in understanding the longer term journey of continuous improvement. Figures provided show performance data from 2022-23, and 2021-22, for yearly trend analysis. Source data for service year of 2022-23 is reported on Pages 9-16.

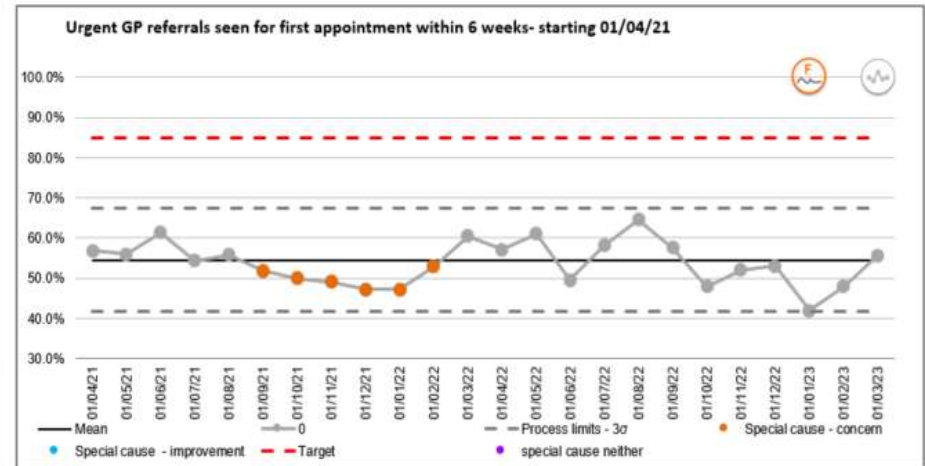
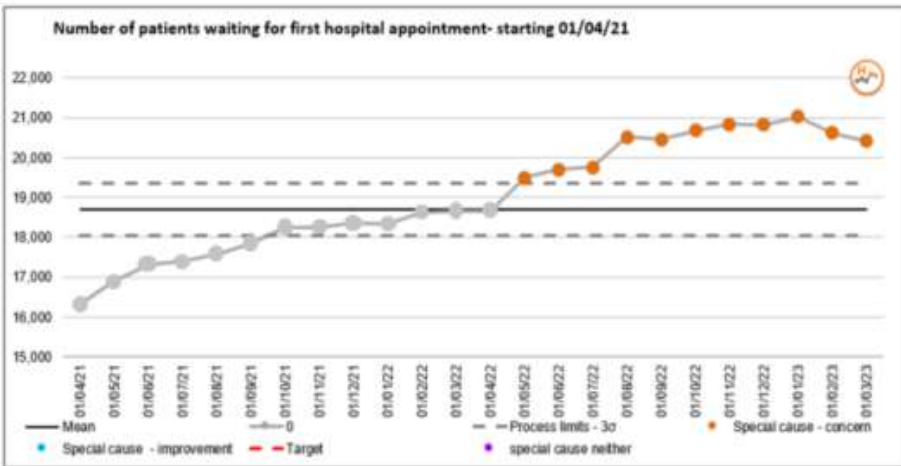
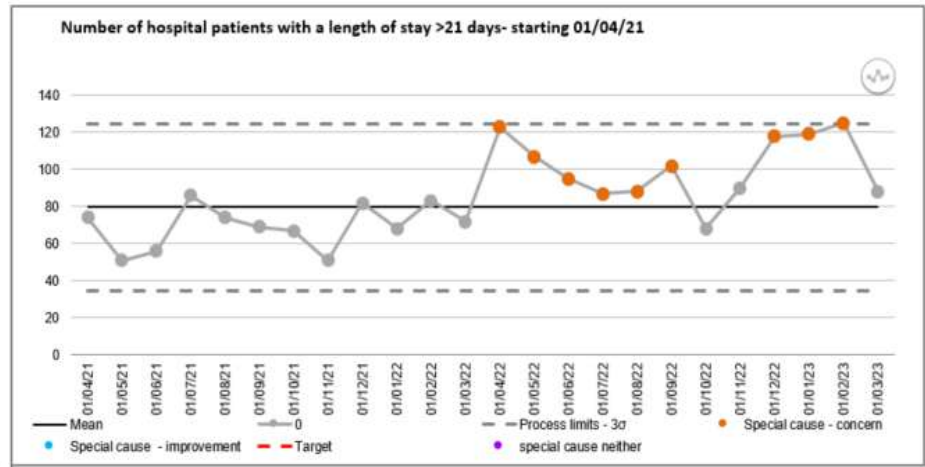
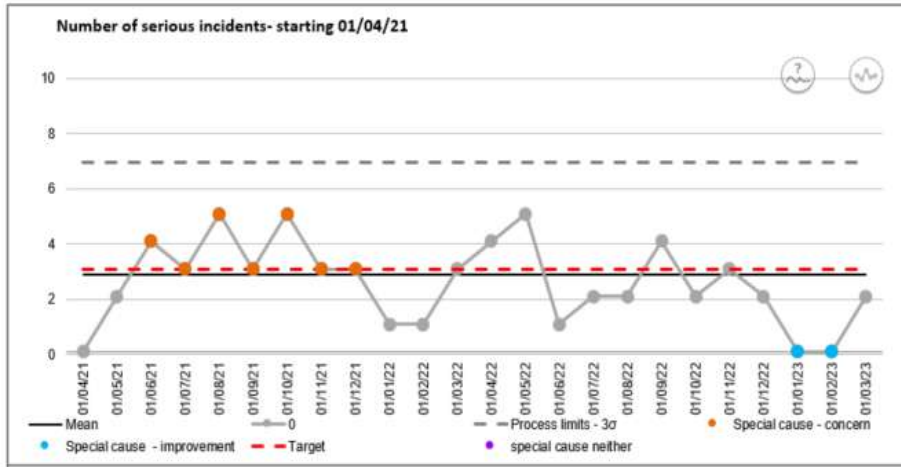
### Methodology

Statistical process control (SPC) has been used to assess and visualise the data changes and to determine whether or not data remains in a state of control. In order to increase reliability, SPC charts require at least 20 data points. There are several metrics where data is only available for one year and therefore only the monthly data and mean are provided for these metrics. Targets (red line) are provided where applicable. Upper and lower control limits are displayed with 3 sigma ( $\sigma$ ) to check if data is within statistical control. Control limits are the standard deviations located above and below the mean. If the data points are within the control limits, it indicates that the process is in control (common cause variation). When a process is stable, it only experiences variation that is common, normal and inherent in the process. If there are data points outside of these control units, it indicates that a process is out of control (special cause variation). Special cause variation is any type of variation that can be attributed to a special cause or situation that's influencing the process. These special causes negatively impact process and result in instability and unpredictability. The figure below depicts the meanings for the icons displayed on the graphs.

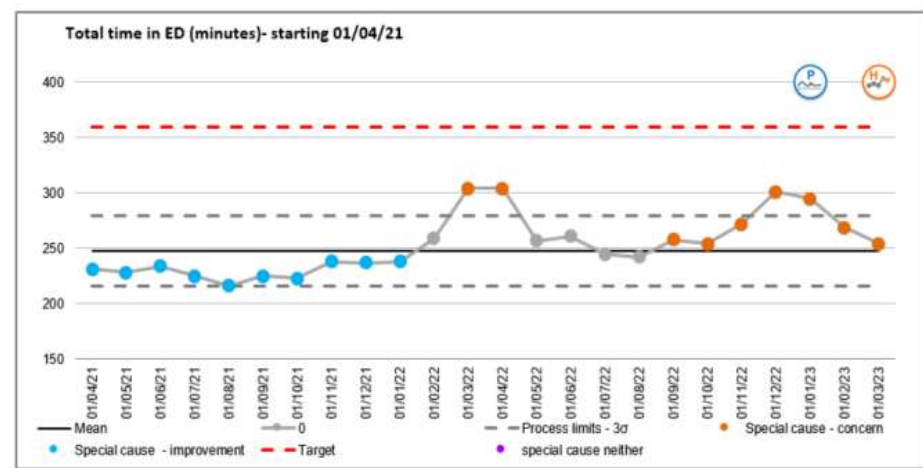
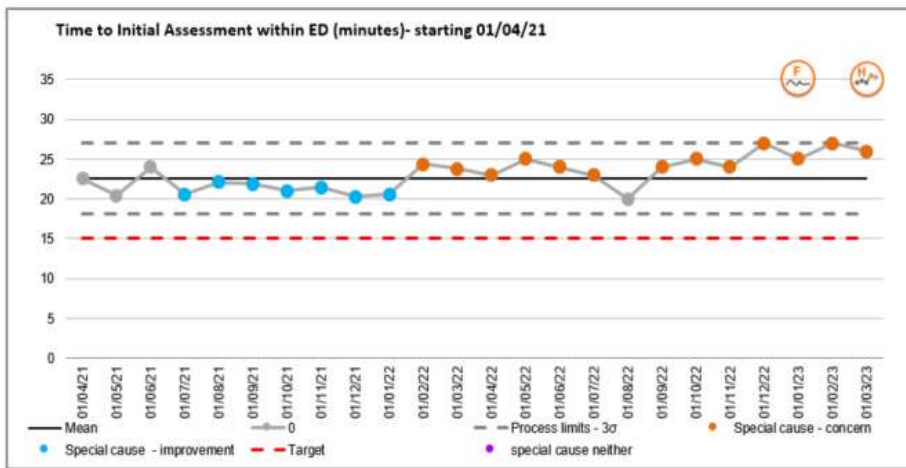
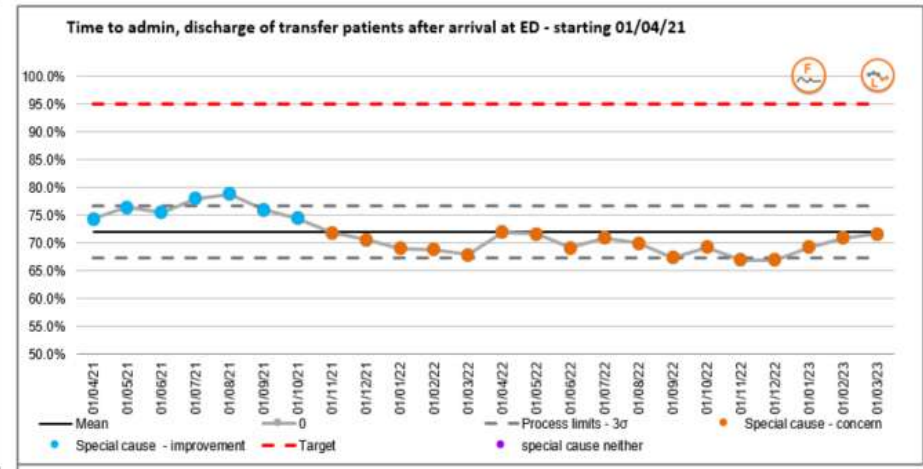
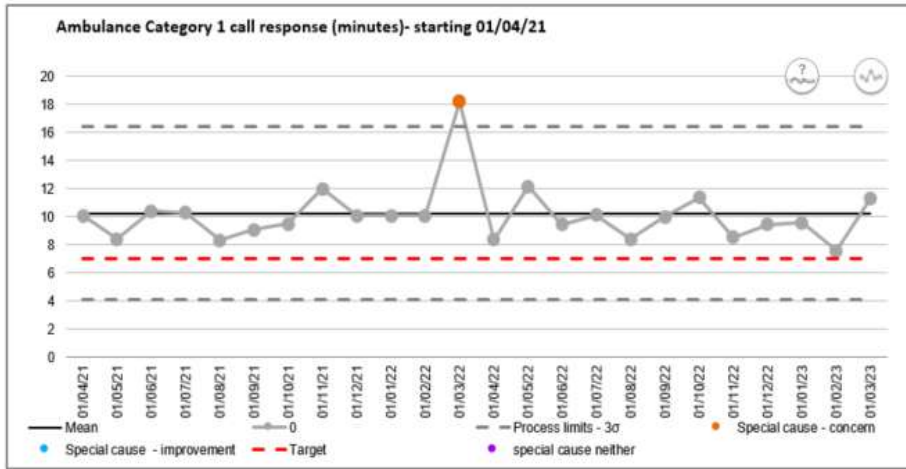


# Quality Care

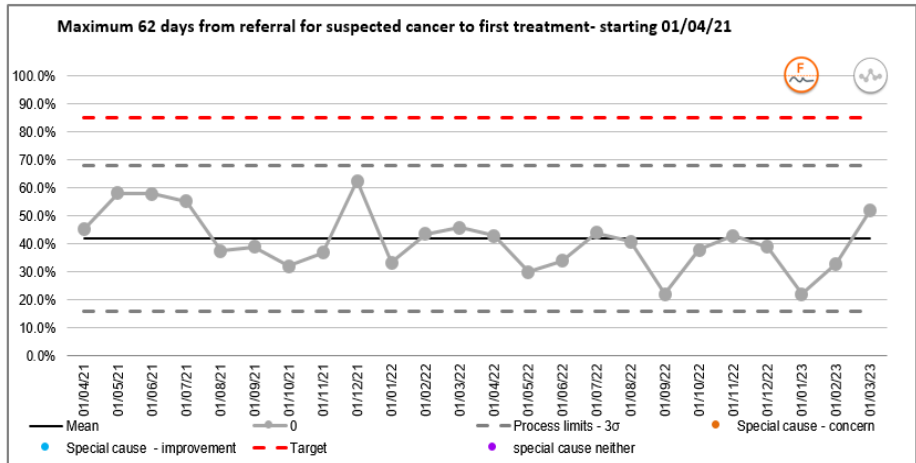
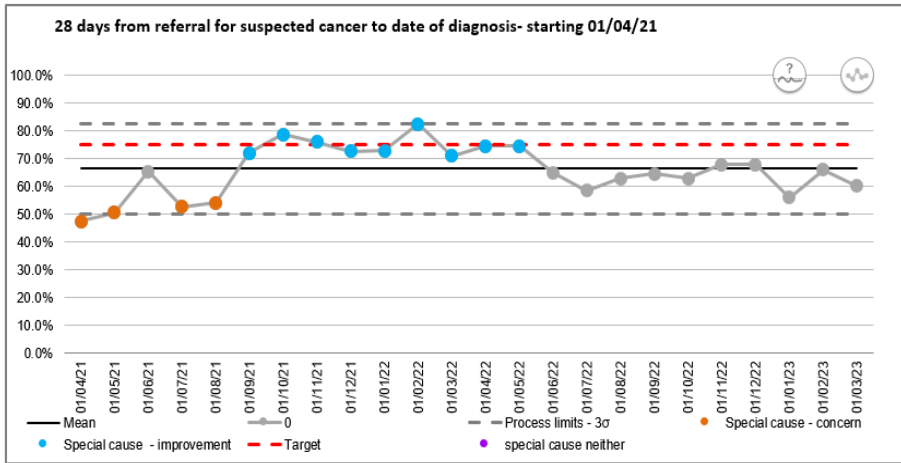
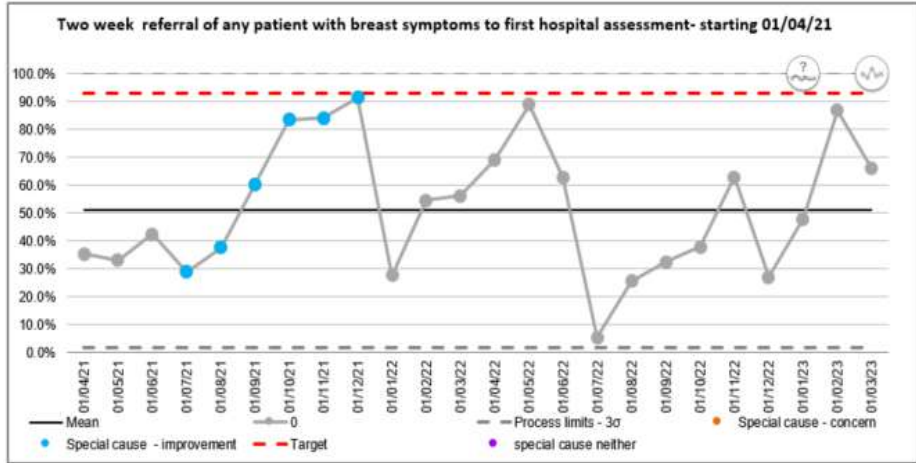
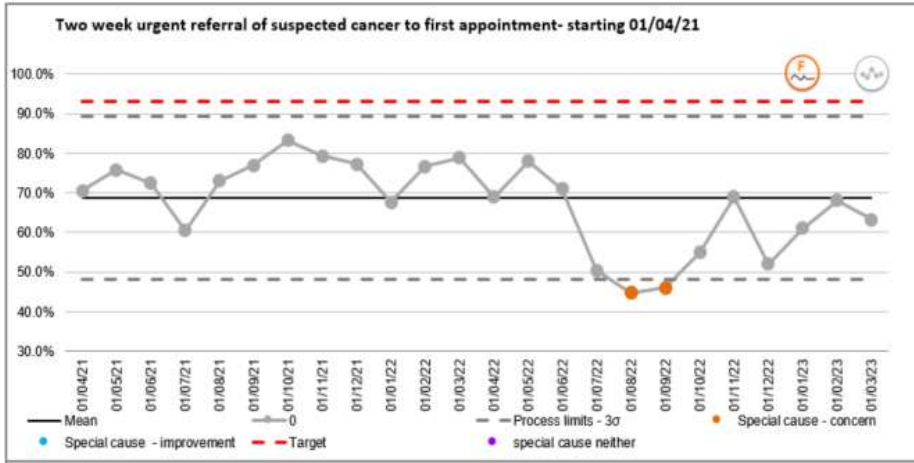
## Elective Care



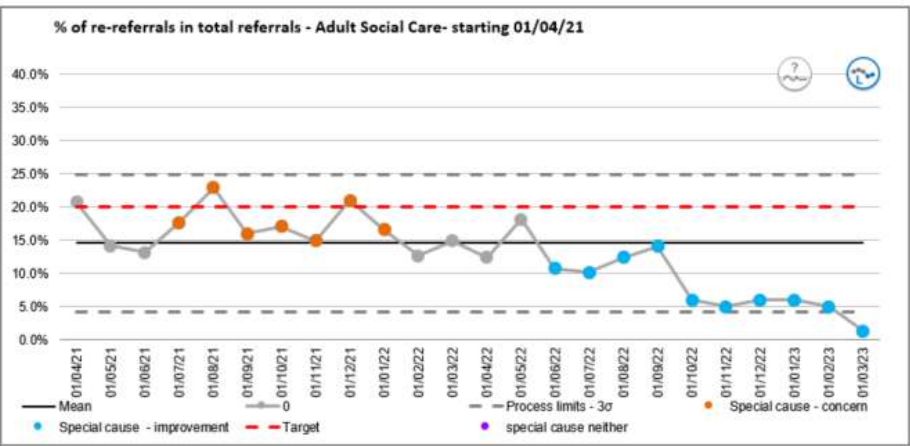
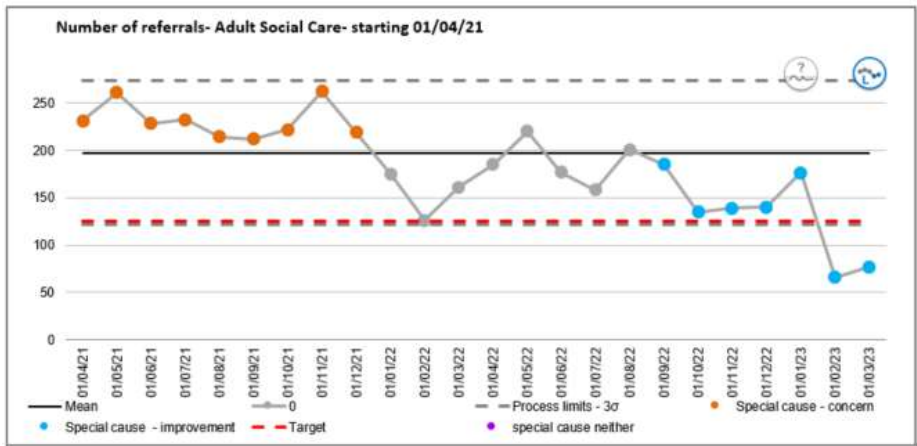
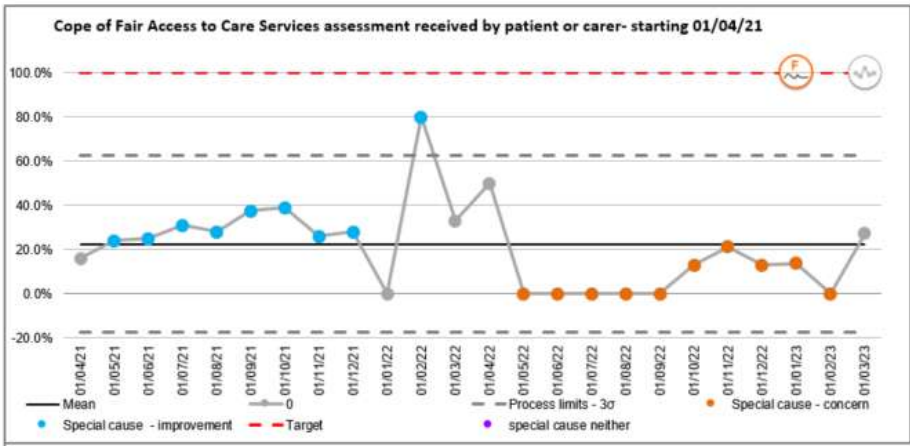
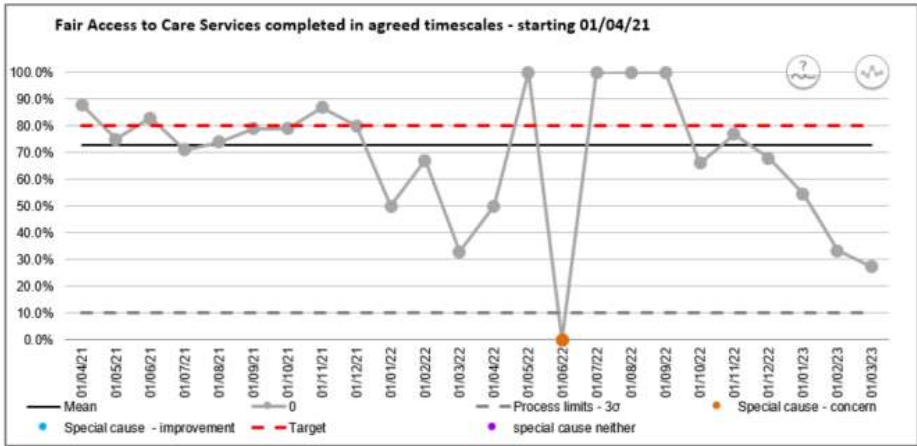
## Amulance and Emergency Care



## Cancer services

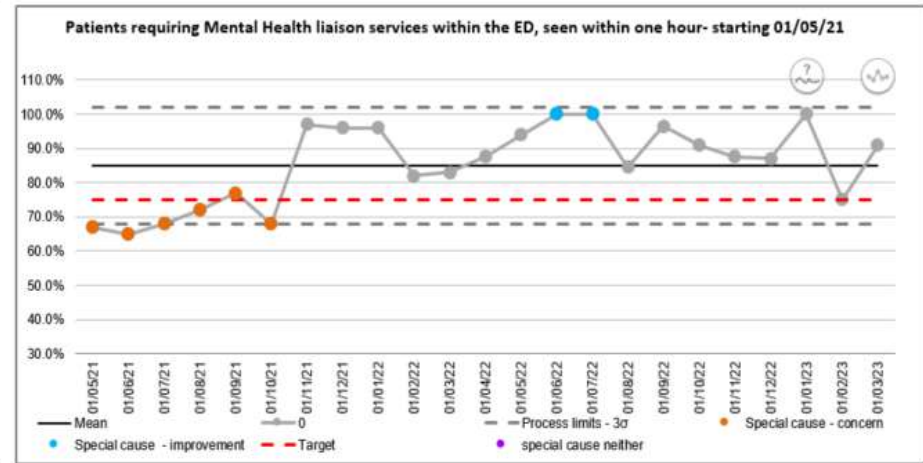
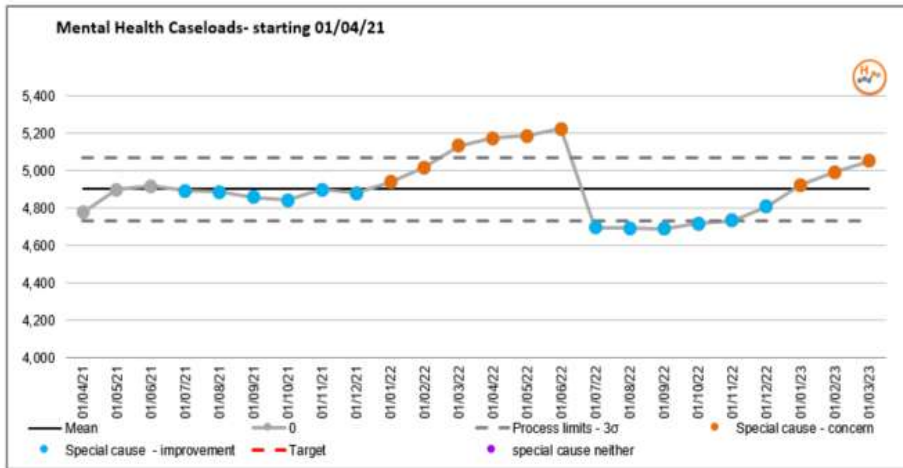


## Social Care services

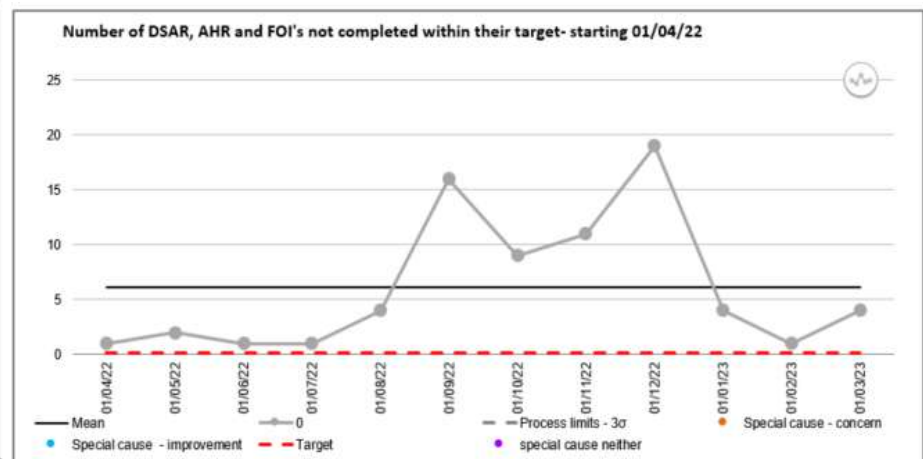
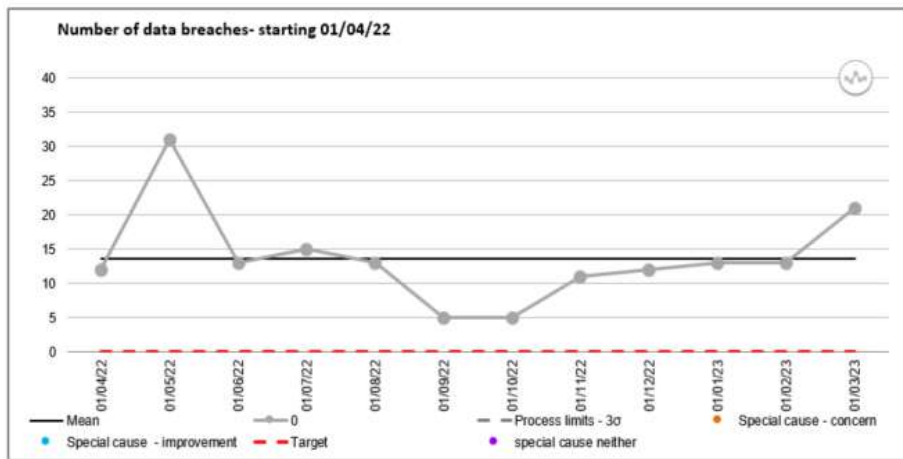


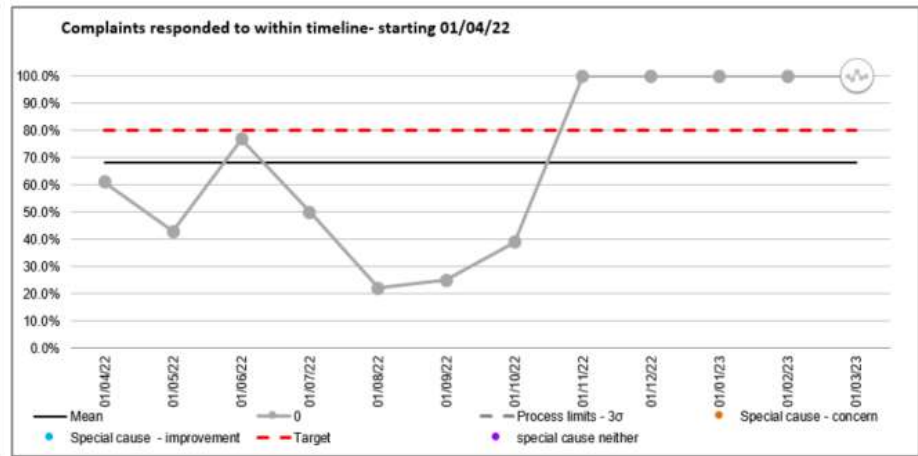
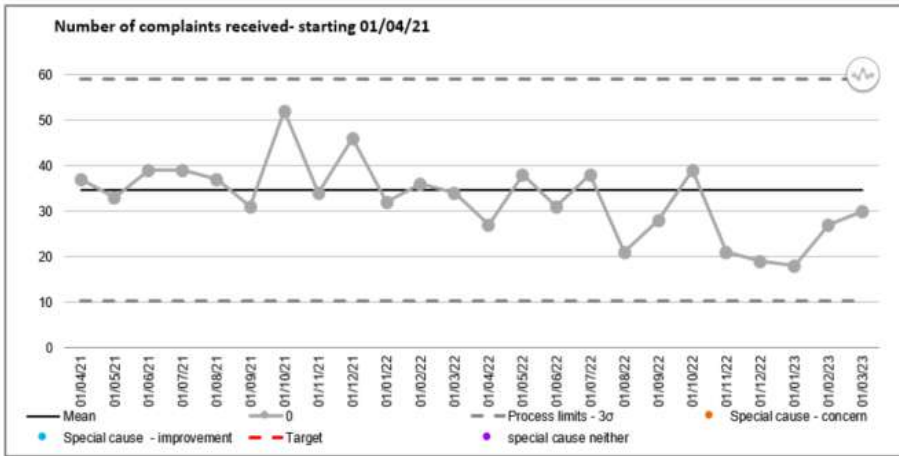


## Mental Health services

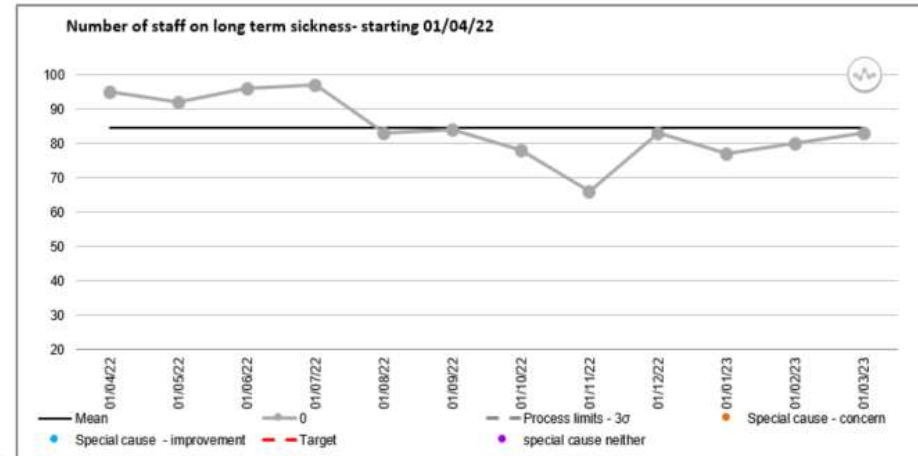
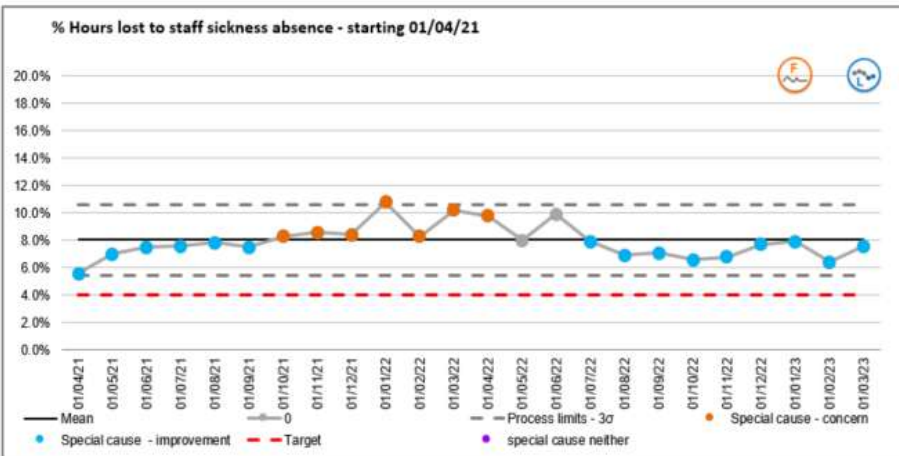


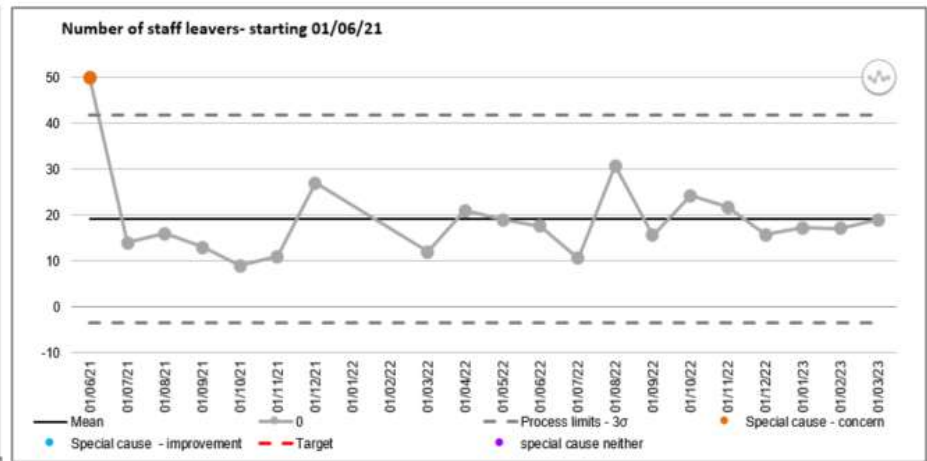
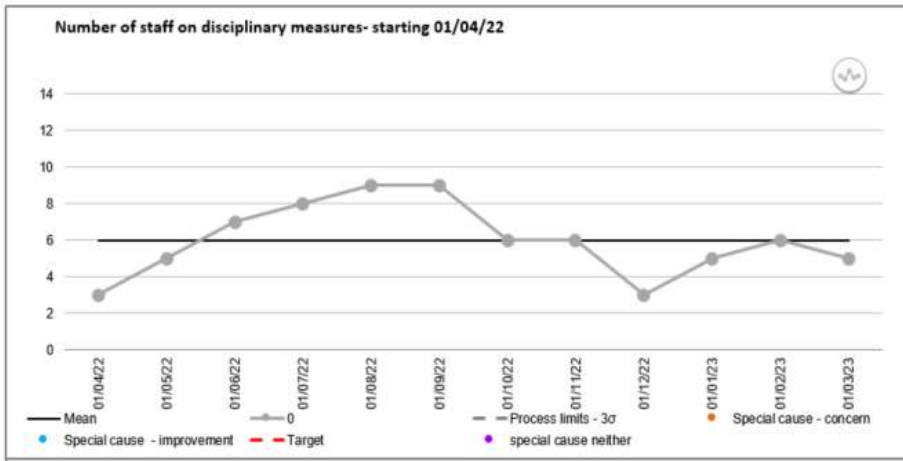
## Leadership



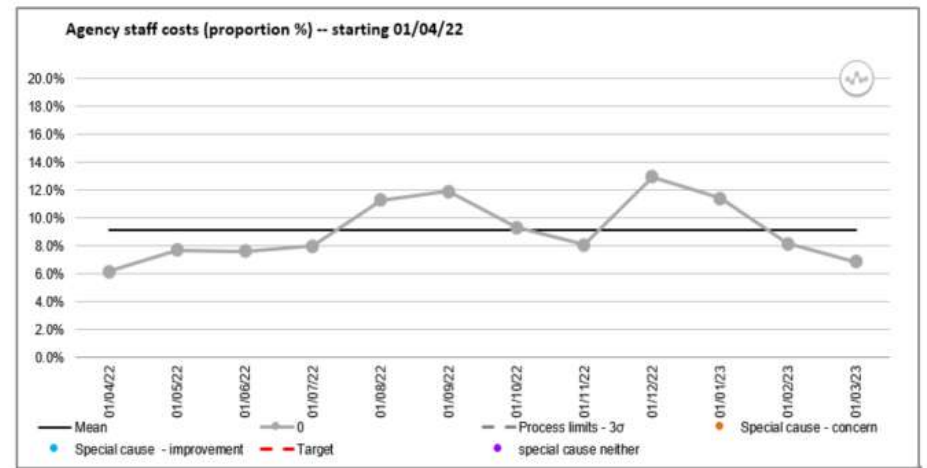
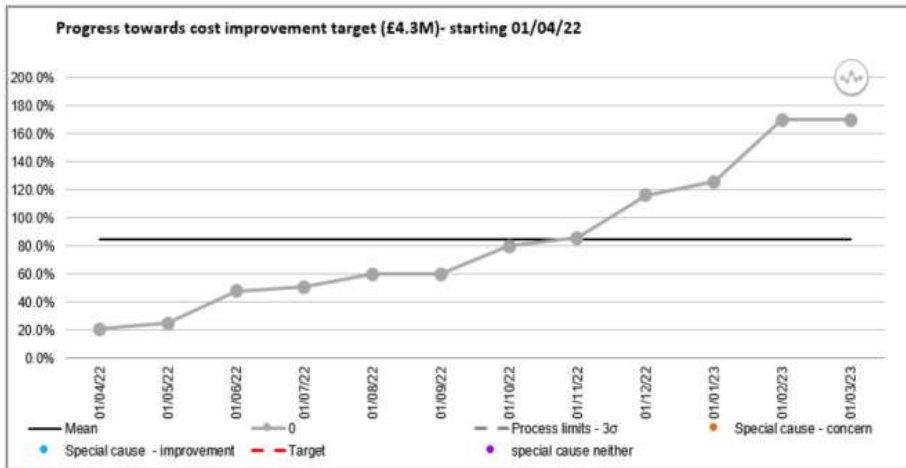


## People





## Finance





## Performance for 2022/23

Metric Name	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
<b>Quality Care</b>													
Serious Incidents	3 (40 PA)	4	5	1	2	1	4	1	3	2	0	0	2
Never Events	0	0	0	0	0	0	0	0	0	0	0	0	0
Inpatient Falls with harm (per 1000 bed days)	< 2	0.2	0.4	0.0	0.4	0.0	0.3	0.0	1.2	0	0.5	0.4	0.5
Medication errors with harm	1 (10 PA)	1	1	0	0	0	1	1	0	0	0	0	0
Inpatient pressure ulcers (per 1000 bed days)	< 2.6	#	#	#	#	#	#	#	#	#	#	#	#
Number of patients with a length of stay - 0 days	Monitor	#	#	#	#	#	#	#	#	#	#	#	#
Number of patients with a length of stay - > 7 days		#	#	#	#	#	#	#	#	#	#	#	#
Number of patients with a length of stay - > 21 days		123	107	95	87	88	102	68	90	118	119	125	88
Number of patients waiting for first hospital appointment	Monitor	18,665	19,493	19,704	19,757	20,518	20,452	20,674	20,837	20,825	21,025	20,618	20,406
Patients waiting > 52 weeks to start consultant-led treatment	0	#	#	#	#	#	#	4,508	4,708	4,806	5,006	4,792	4,890
% of urgent GP referrals seen for first appointment in 6 weeks	85%	57%	61%	50%	58%	65%	58%	42%	52%	53%	42%	48%	56%
Number of patients in planned care exceeding 18 week RTT	0	#	#	#	#	#	#	#	#	#	#	#	#
Number of discharges - pre 1000	Monitor	#	#	#	#	#	#	#	#	#	#	#	#
Number of discharges - pre 1600	Monitor	#	#	#	#	#	#	#	#	#	#	#	#

Metric Name	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
Number of discharges - weekend	Monitor	#	#	#	#	#	#	#	#	#	#	#	#
Delayed transfers of care	Monitor	#	#	#	#	#	#	#	#	#	#	#	#
Amulance Category 1 call response time (min.sec)	7 minutes	8.39	12.15	9.44	10.13	8.42	10.00	11.37	8.56	9.45	9.59	7.58	11.32
Amulance Category 1 call response time (min.sec) at 90th percentile	15 minutes	18.05	27.42	19.09	17.53	17.10	19.07	19.53	19.01	22.33	19.47	14.37	28.14
Time for patients with CVA/Stroke symptoms to arrive at hospital after time of call	100% in 60 minutes	50%	70%	64%	39%	41%	65%	50%	41%	17%	35%	15%	36%
Time to admin, discharge of transfer patients after arrival at ED (Nobles and Ramsey)	95% within 4 hours	72%	72%	69%	71%	70%	67%	69%	67%	66%	69%	71%	72%
Total time spent in ED	<360 minutes	304	257	261	245	242	258	254	272	301	295	269	254
Time to Initial Assessment within ED	15 minutes	23	25	24	23	20	24	25	24	27	25	27	26
Wait time to see first Doctor in ED	< 60 minutes	59	65	67	80	71	77	77	77	70	74	72	62
Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14 years)	Monitor	#	#	#	#	#	#	#	#	#	#	#	#
Emergency re-admissions within 30 days of discharge from hospital	Monitor	#	#	#	#	#	#	#	#	#	#	#	#
Maximum 2-week week wait from urgent referral of suspected cancer to first outpatient appointment	93%	69%	78%	71%	50%	45%	46%	55%	69%	51%	61%	68%	63%
Maximum 2-week wait from referral of any patient with breast symptoms (where cancer is not suspected) to first hospital assessment.	93%	69%	89%	63%	5%	26%	32%	38%	63%	26%	48%	87%	66%
Maximum 28 days from referral for suspected cancer (via 2WW or Cancer Screening) to date of diagnosis	75%	75%	75%	65%	58%	63%	65%	63%	68%	67%	56%	66%	60%

Metric Name	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
Maximum 31 days from decision to treat or other appropriate date to start of second or subsequent treatment - Surgery	94%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Maximum 31 days from decision to treat or other appropriate date to start of second or subsequent treatment - Drug treatment	98%	100%	100%	75%	71%	86%	75%	100%	N/A	100%	83%	N/A	100%
Maximum 31 days from decision to treat or other appropriate date to start of second or subsequent treatment - Radiotherapy	94%	N/A	60%	89%	100%	N/A	N/A	100%	N/A	68%	N/A	100%	50%
Maximum 62 days from referral for suspected cancer to first treatment	85%	43%	30%	34%	44%	41%	22%	38%	43%	39%	22%	33%	52%
Maximum 62 days from urgent referral from a Cancer Screening Programme to first treatment	90%	86%	91%	100%	100%	100%	64%	100%	N/A	75%	57%	0%	67%
Maximum 31 days from decision to treat to first definitive treatment	96%	83%	83%	86%	90%	92%	75%	84%	84%	82%	80%	77%	92%
Number of patients waiting more than two weeks for diagnostic tests on an urgent or cancer pathway.	0	#	#	#	#	#	#	#	#	#	#	#	#
% of patients waiting 6 weeks or more for a diagnostics test	1%	69%	67%	70%	70%	72%	75%	72%	70%	75%	75%	70%	70%
Wait time to urgent diagnostics from referral - by test type	2 weeks	#	#	#	#	#	#	#	#	#	#	#	#
Wait time to routine diagnostics from referral - by test type	20 weeks	#	#	#	#	#	#	#	#	#	#	#	#
Average caseload per Social Worker - Adult Social Care	16 to 18	#	#	#	#	#	#	#	#	#	#	#	#
Average caseload per Social Worker - Children & Families	16 to 18	#	#	#	#	#	#	#	#	#	#	#	#
Number of referrals - Adult Social Care	125	185	220	177	158	201	185	135	139	140	176	66	77
% of re-referrals in total referrals - Adult Social Care	<15%	12%	18%	11%	10%	12%	14%	6%	5%	6%	6%	5%	1%
Number of referrals - Children & Families	74-78	#	#	#	#	#	#	#	#	#	#	#	#

Metric Name	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
% of re-referrals in total referrals - Children & Families	<20%	#	#	#	#	#	#	#	#	#	#	#	#
Fair Access to Care Services completed in agreed timescales	80%	50%	100%	0%	100%	100%	100%	66%	77%	68%	55%	33%	27%
Copy of FACS Assessment received by Patient or Carer	100%	50%	0%	0%	0%	0%	0%	13%	21%	13%	14%	0%	27%
All Residential beds occupied	85-100%	79%	83%	83%	84%	83%	70%	80%	71%	69%	83%	68%	84%
All Respite beds occupied	90-100%	40%	78%	61%	42%	93%	79%	71%	50%	79%	96%	81%	81%
Service Users with a Person-Centered Plan in place (PCP)	95-100%	66%	74%	100%	100%	100%	100%	100%	100%	#	#	#	#
Complex Needs Reviews held on time	85%	#	#	#	#	65%	46%	48%	32%	63%	47%81%	43%	61%
Total Child Protection Conferences held on time	90%	#	#	#	#	92%	75%	54%	#	#	#	#	#
Total Initial Child Protection Conferences held on time	90%	#	#	#	#	#	#	100%	88%	100%	50%	50%	100%
Child Protection Reviews held on time	90%	#	#	#	#	59%	30%	54%	88%	71%	66%	86%	78%
Looked After Children reviews held on time	90%	#	#	#	#	86%	90%	100%	94%	92%	95%	100%	83%
Pathway Plan in place	100%	#	#	#	#	#	#	#	#	#	#	#	#
Children (of age) participating in, or contributing to, their Child Protection review	90%	#	#	#	#	#	#	#	#	#	#	#	#
Children (of age) participating in, or contributing to, their Looked After Child review	90%	#	#	#	#	#	#	#	#	#	#	#	#
Children (of age) participating in, or contributing to, their Complex Review	79%	#	#	#	#	#	#	#	#	#	#	#	#
Occupancy at Ramsey – overnight stays	up to 80%	#	#	#	#	#	#	#	#	#	#	#	#
Number of reported Safeguarding alerts in care homes	Monitor	24	23	32	46	61	56	70	49	49	43	50	54

Metric Name	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
Community Nursing Service response target met - Urgent	4 hours	#	#	#	#	#	#	#	#	#	#	#	#
Community Nursing Service response target met - Non urgent	24 hours	#	#	#	#	#	#	#	#	#	#	#	#
Community Nursing Service response target met - Routine	7 days	#	#	#	#	#	#	#	#	#	#	#	#
West Wellbeing Contribution to reduction in ED attendance	5% / 6 months	-4%	23%	10%	5%	-1%	-22%	7%	0%	9%	-12.7%	7%	25%
West Wellbeing Reduction in admission to hospital from locality	10% / 6 months	-11%	53%	18%	15%	12%	-46%	20%	-8%	18%	22.6%	-6%	89%
Clinical Assessment and Treatment Service waiting time from urgent referral	80%	#	#	#	53%	71%	49%	64%	55%	83%	79%	87%	74%
Clinical Assessment and Treatment Service waiting time from routine referral	80% in 12 weeks	69%	40%	11%	0%	21%	33%	68%	80%	69%	46%	63%	40%
Average wait time for a GP Appointment (days)	Monitor	4	4	4	4	4	4	4	4	4	4	4	4
Average wait time for a Dentist Appointment	Monitor	#	#	#	#	#	#	#	#	#	#	#	#
Patients requiring Mental Health liaison services within the ED, seen within one hour.	75%	88%	94%	100%	100%	85%	97%	91%	88%	87%	100%	75%	91%
Patients admitted to physical health wards requiring a Mental Health Assessment, seen within 24 hours.	75%	#	#	#	#	#	#	#	#	#	100%	100%	100%
Patients with a first episode of psychosis treated with a NICE recommended care package within two weeks of referral	75%	#	#	#	#	#	#	#	#	#	100%	100%	100%
Patients with Severe Mental Illness (SMI) who received a full physical	100%	#	#	#	#	#	#	#	#	#	#	#	#



Metric Name	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
health check in Primary Care every 12 months													
People under adult mental illness specialities on a Care Programme Approach, followed up in seven days of being discharged from psychiatric inpatient care.	100%	89%	68%	91%	#	#	#	#	91%	100%	94%	94%	100%
Total Mental Health Current Caseload	4500-5500	5176	5188	5226	4697	4694	4690	4718	4733	4809	4926	4995	5053
<b>Leadership</b>													
Number of Data Breaches	0	12	31	13	15	13	5	5	11	10	13	13	21
Number of Subject Access Requests (SAR)	Monitor	39	43	40	49	39	48	53	42	51	56	48	78
Number of Access to Health Record Requests (AHR)	Monitor	4	5	2	4	3	5	2	3	5	3	5	5
Number of Freedom of Information (FOI) Requests	Monitor	12	9	5	10	4	12	15	10	8	6	11	20
Number of Enforcement Notices from the ICO	0	0	0	0	0	0	0	0	0	0	0	0	1
Number of SAR, AHR and FOI's not completed within their target	0	1	2	1	1	4	16	9	11	19	5	6	18
Total number of complaints received	Monitor	41	38	31	38	21	28	39	21	19	18	27	30
Complaints responded to within timelines (%)	80% in 20 days	61%	43%	77%	50%	22%	25%	39%	100%	100%	100%	100%	100%
Complaints escalated to Independent Review Body (number)	Monitor	1	2	2	1	2	0	0	0	0	0	0	0
<b>People</b>													
Hours lost to staff sickness absence	4%	10%	8%	10%	8%	7%	7%	7%	7%	8%	8%	6%	8%
Number of staff leavers	Monitor	21	19	18	11	31	16	24	22	16	17	17	19
Number of staff on long term sickness	Monitor	95	92	96	97	83	84	78	66	83	77	#	83
Number of staff on disciplinary measures	Monitor	3	5	7	8	9	9	6	6	3	5	6	5
Number of suspended staff	Monitor	0	1	1	1	1	1	1	0	0	0	1	1
<b>Finance</b>													

Metric Name	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
Progress towards cost improvement target (% total)	Monitor	21%	25%	48%	51%	60%	60%	80%	86%	116%	126%	170%	170%
Total income (£)	Monitor	-1,122,208	-1,135,592	-1,201,460	-1,179,618	-1,107,601	-1,130,002	-1,189,570	1,169,900	-1,190,787	-1,141,775	-1,159,261	-2,136,829
Total staff costs (£)	Monitor	15,138,545	16,297,072	15,653,961	15,876,458	16,129,293	15,471,394	15,870,578	15,981,428	16,412,712	20,671,098	13,959,910	16,664,824
Total other costs (£)	Monitor	10,638,495	10,610,419	10,600,014	11,834,297	11,778,127	11,438,442	12,588,824	11,884,586	11,462,990	12,235,734	14,906,339	12,660,798
Agency staff costs (proportion %)	Monitor	6%	8%	8%	8%	11%	12%	9%	8%	13%	11%	8%	7%

**KEY** # No data available. N/A no work undertaken/required. Target guidelines: **Green**: within 5% of target. **Amber**: within 6-15% of target. **Red**: >15% of target.