



Board Report

NHS Golden Jubilee Board meeting

29 May 2025

Quality, Performance, Planning & Programmes



<div><div><div><div><div></div><div>NHS</div></div><div>Golden Jubilee</div></div></div></div>	Key Performance Indicators					
KPI	Last Reported Month	Target	Actual	RAG	SPC Position	Drilldown (hover over)
Stage 1 complaints response rate	Jan 25	75.0%	100%		Within Control Limits	Drilldown
Stage 2 complaints response rate	Jan 25	75.0%	25%		Within Control Limits	Drilldown
MRSA/MSSA bacteraemias per 100,000 Occ. Bed Days	Q3 2024/25	11.2	0.00		Within Control Limits	Drilldown
Clostridioides difficile infections (CDI) per 100,000 Occ. Bed Days	Q3 2024/25	1.9	0.00		Within Control Limits	Drilldown
PROMs Response Rate	New indicator in development					
Staff Sickness (Local)	Feb 25	5.4%	6.5%		Within Control Limits	Drilldown
Staff Sickness (National)	Jan 25	4.0%	6.2%		Eight Consecutive Points Above Cen...	Drilldown
Staff Turnover (12mth rolling average)	Feb 25	11.4%	7.0%		Within Control Limits	Drilldown
TURAS Appraisal	Feb 25	80.0%	65.0%		Within Control Limits	Drilldown
Medical Staff Appraisal	Feb 25	25.0%	39.3%		SPC Not Appropriate for thi...	Drilldown
Outpatients Seen within 12 weeks	Feb 25	90.0%	88.7%		Within Control Limits	Drilldown
Inpatient Admits within 12 weeks	Feb 25	99.9%	89.5%		Two Outer Third Points	Drilldown
Treated within 18 weeks of referral	Feb 25	90.0%	82.1%		Within Control Limits	Drilldown
Total Bed Occupancy	Feb 25	(Blank)	64.2%		Below Lower Control	Drilldown
Orthopaedic DOSA rate	Feb 25	70.0%	71.9%		Within Control Limits	Drilldown
Theatre Same Day Cancellation Rate	Feb 25	4.8%	5.9%		Within Control Limits	Drilldown
4 Joint Session Rate	Feb 25	72.7%	39.4%		Within Control Limits	Drilldown
Ophthalmology Procedures per List	Feb 25	7.3	6.70		Fifteen Central Points	Drilldown
% Same Day Hip Arthroplasty	Feb 25	4.3%	5.8%		Within Control Limits	Drilldown
% Same Day Knee Arthroplasty	Feb 25	2.7%	3.8%		Within Control Limits	Drilldown
31 Day Cancer (Lung)	Jan 25	95.0%	94.9%		Within Control Limits	Drilldown
Orthopaedic Mean Length of Stay	Feb 25	3.8	3.10		Within Control Limits	Drilldown



Stage 1 Complaints response rate

Indicator Construction: (National)

Stage 1 complaints responded to within 5 workings days measured as a percentage of the complaints received

Last reported month

Jan 25

RAG

Target
75.0%

Actual
100.0%

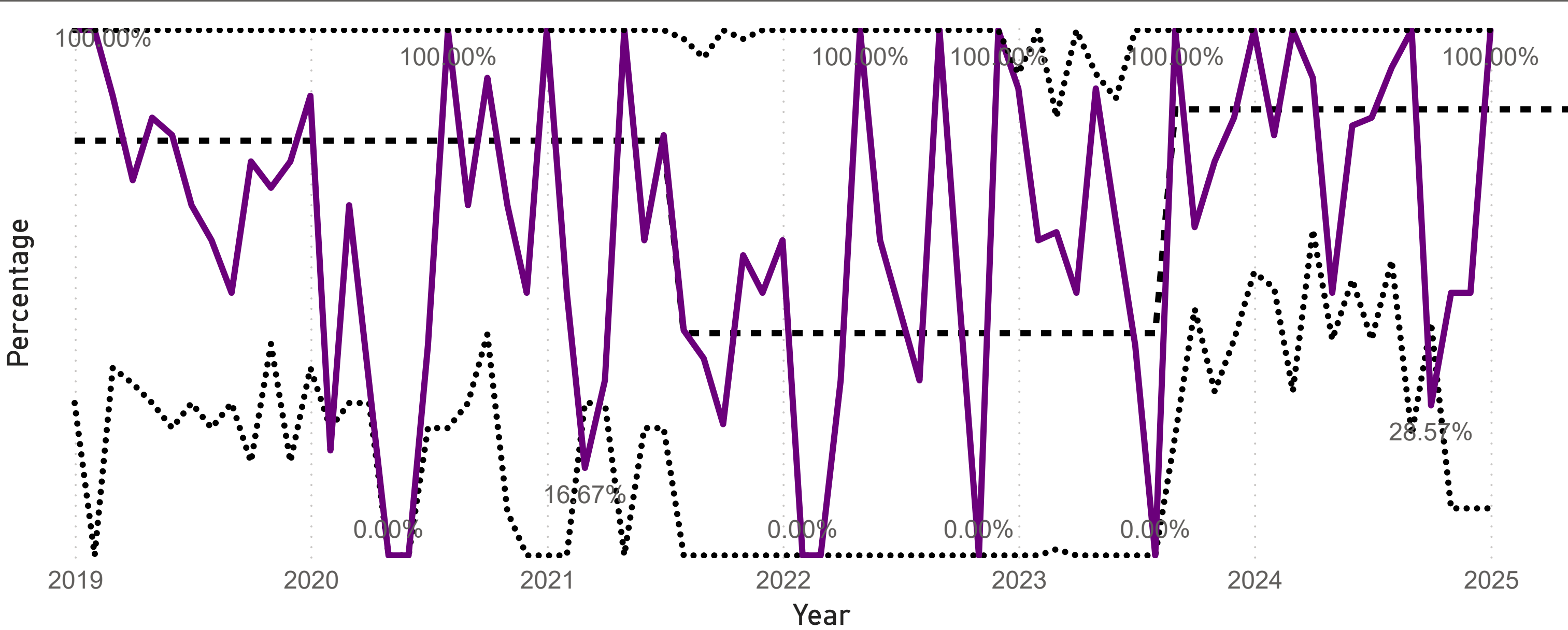
SPC Status

Within Control Limits

Level of Assurance

Limited Assurance: The Board can have some confidence in the control systems for managing risk, but there's still a significant level of risk that needs to be addressed.

Stage 1 Complaints response rate



National Comparator

No nationally comparable position available

Current Position

Month	Issues
Feb-25	In January 2025, there were zero Stage 1 complaints.

Actions

Month	Actions
Feb-25	Exec Medical Director and Exec Nurse Director commissioned an improvement project to review the challenges in the organisations complaint response performance. The focus is to: Support implementation of escalation process, Develop a training package, Provide direct oversight of the quality of responses

Stage 2 Complaints response rate

Indicator Construction: (National)

Stage2 complaints responded to within 20 days measured as a percentage of the complaints received

Last reported month

Jan 25

RAG

Target

75.0%

Actual

25.0%

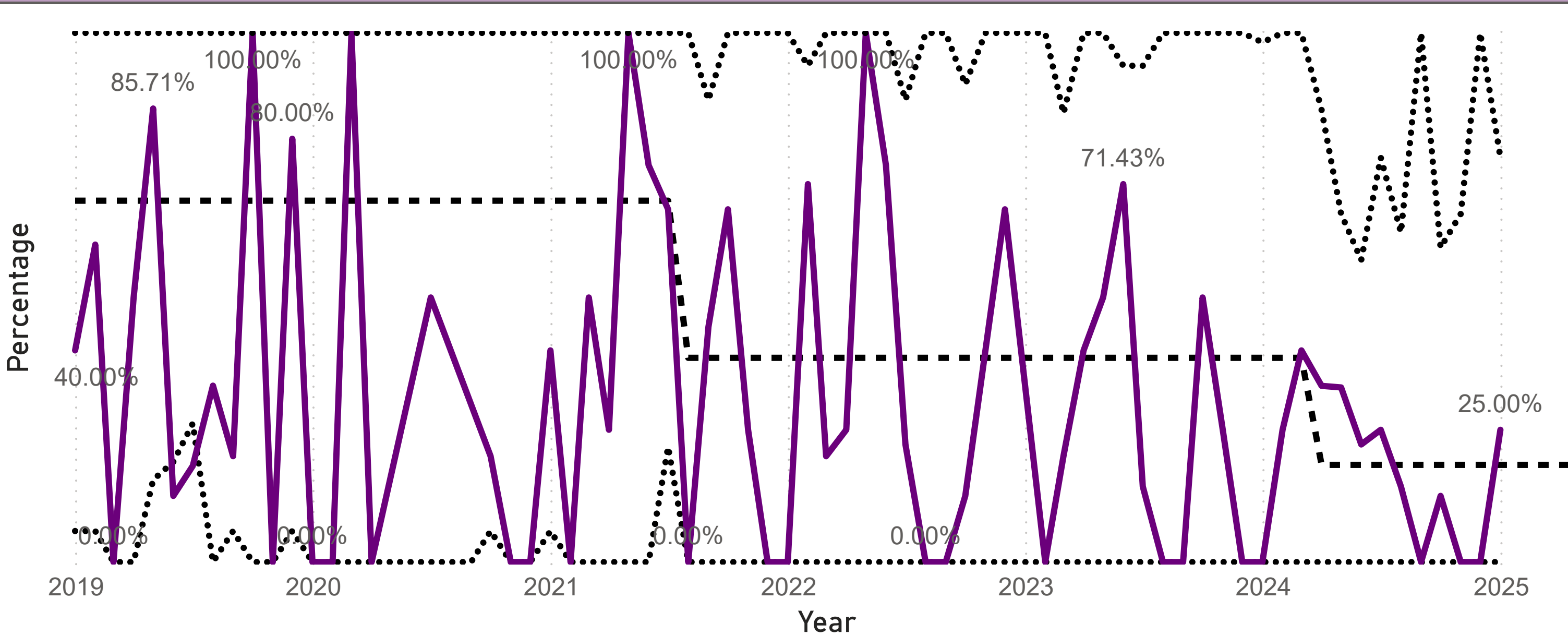
Level of Assurance

Limited Assurance: The Board can have some confidence in the control systems for managing risk, but there's still a significant level of risk that needs to be addressed.

SPC Status

Within Control Limits

Stage 2 Complaints response rate



National Comparator

No nationally comparable position available

Current Position

Month Issues

Feb-25 In January 2025, there were four Stage 2 complaints, and one was responded to within the 20-day target.

Actions

Month Actions

Feb-25 Exec Medical Director and Exec Nurse Director commissioned an improvement project to review the challenges in the organisations complaint response performance. The focus is to: Support implementation of escalation process, Develop a training package, Provide direct oversight of the quality of responses

MRSA/MSSA bacteraemias per 100,000 Occupied Bed Days

Indicator Construction: (National)

SAB instances per 100,000 total occupied bed days

Last reported month

Q3 2024/25

RAG

Target
11.2

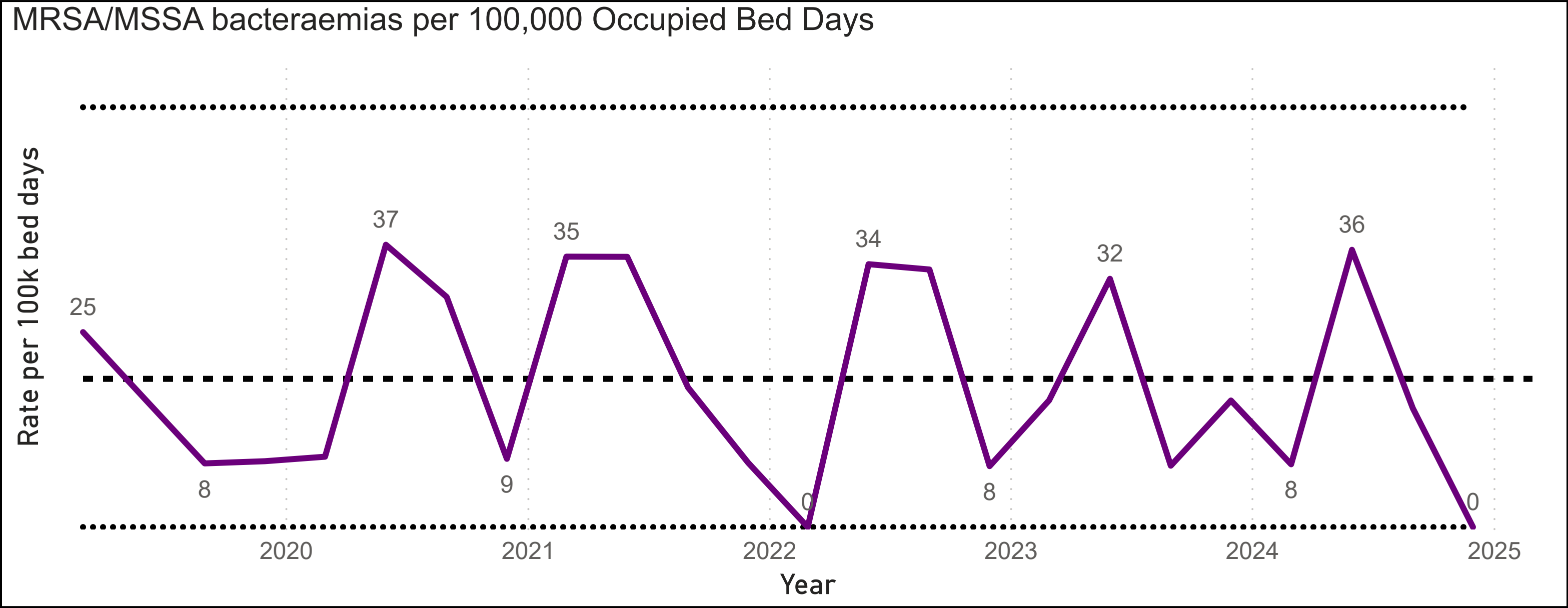
Actual
0.0

SPC Status

Within Control Limits

Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.



National Comparator

The last reported position of Q3 2024 was 21.5 per 100,000 TOBD.

Current Position

Month	Issues
Feb-25	This is measured Qtrly, zero instances in Q3 2024/25 and two identified instances of MRSA/MSSA so far in Q 4 2024/25. New SAB targets are being developed nationally based on 2023/24 performance.

Actions

Month	Actions
Feb-25	Hand Hygiene compliance monitoring MRSA screening at pre-assessment clinics and admission Compliance with National Cleaning Standards Specifications Audit of the environment and practices

Clostridioides difficile infections (CDI) per 100,000 Occupied Bed

Indicator Construction: (National)

CDI instances per 100,000 total occupied bed days

Last reported month

Q3 2024/25

RAG

Target
1.9

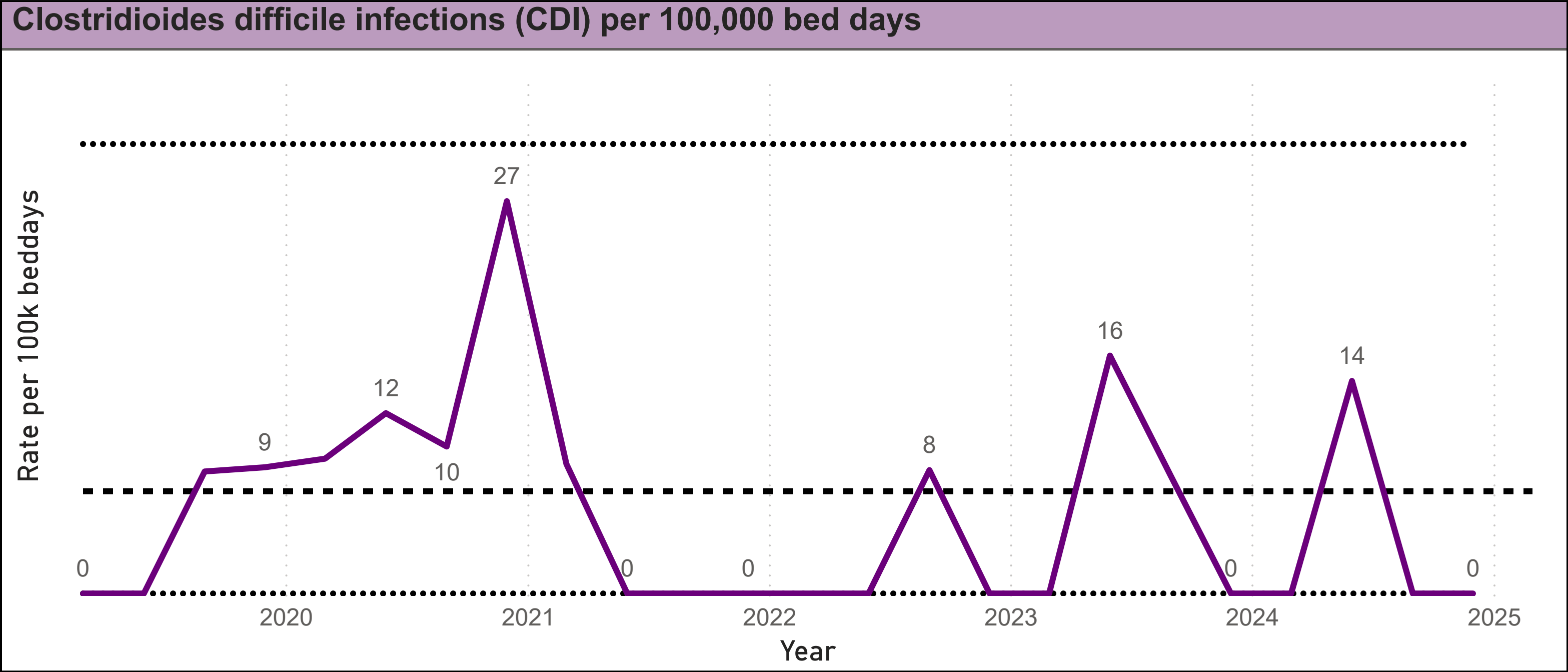
Actual
0.0

SPC Status

Within Control Limits

Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.



National Comparator

The last reported position of Q3 2024 was 0.0 per 100,000 TOBD. Our numbers of CDI cases are low in c...

Current Position

Month	Issues
Feb-25	C. Diff is measured quarterly, and there were zero instances reported in Quarter 3 of 2024/25 and zero so far in Quarter 4 of 2024/25. New C. Diff targets are being developed nationally based on 2023/24 performance.

Actions

Month	Actions
Feb-25	<ul style="list-style-type: none">• Ongoing alert organism surveillance and close monitoring of the severity of cases by the PCIT.• Unit specific reporting and triggers.• Implementation of severe case investigation tool if the case definition is met.• Typing of isolates when two or more cases occur within 30 days in one unit.

Local Sickness Absence Rate

Indicator Construction

Local eESS sickness absence hours as a percentage of contracted hours

Last reported month

Feb 25

RAG

Target

5.4%

Actual

6.5%

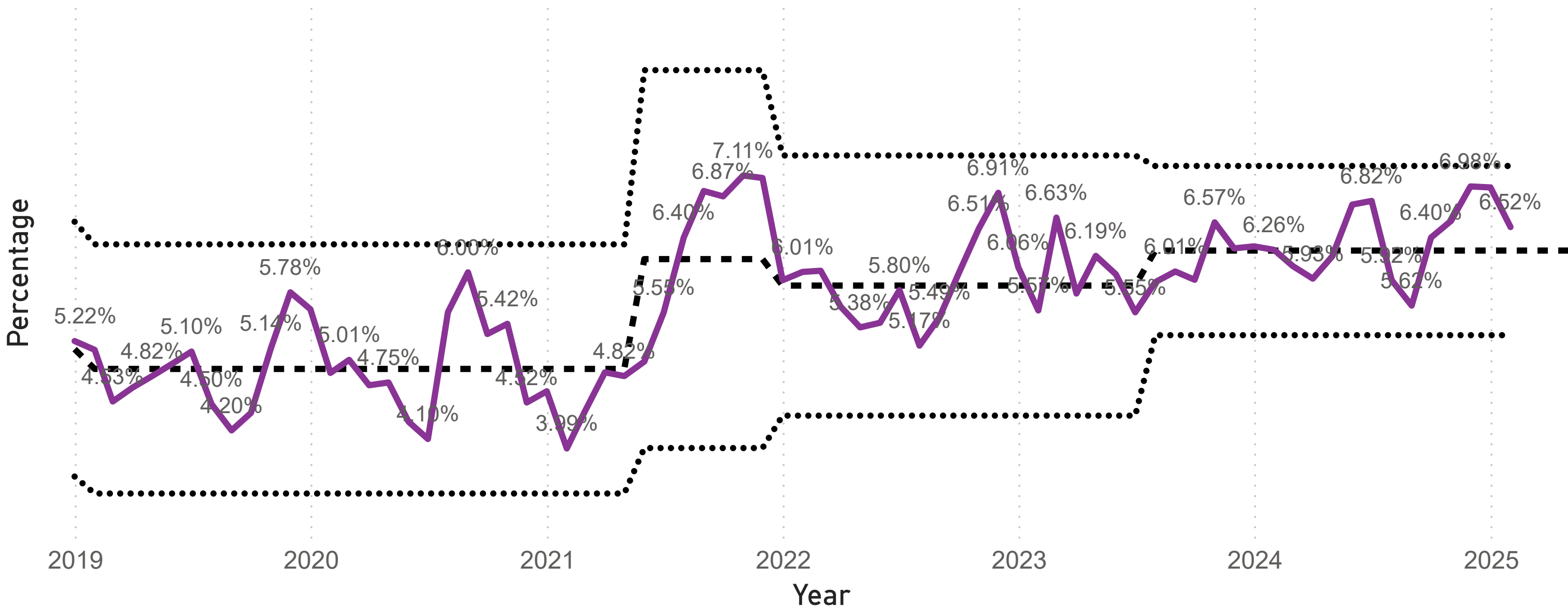
Level of Assurance

Limited Assurance: The Board can have some confidence in the control systems for managing risk, but there's still a significant level of risk that needs to be addressed.

SPC Status

Within Control Limits

Local Sickness Absence



National Comparator

The last reported position for Dec-24 was 6.32%, the NHS Scotland position was 7.07%.

Current Position

Month Issues

Feb-25 The target for staff sickness absence is 5.4%, but it was last met in August 2022. In February, the sickness absence rate for NHS GJ was 6.5%: HLD 5.7%, NES 8.5%, Corporate 5.3%, Hotel 5.6%

Actions

Month Actions

Feb-25 Absence clinics for employees
Absence management clinic for managers
Health and wellbeing and promotion of attendance
Promotion of Employee support

National Sickness Absence Rate

Indicator Construction: (National)

National (SWISS, Scottish Workforce Information Standard System) sickness absence hours as a percentage of contracted hours

Last reported month

Jan 25

RAG

Target

4.0%

Actual

6.2%

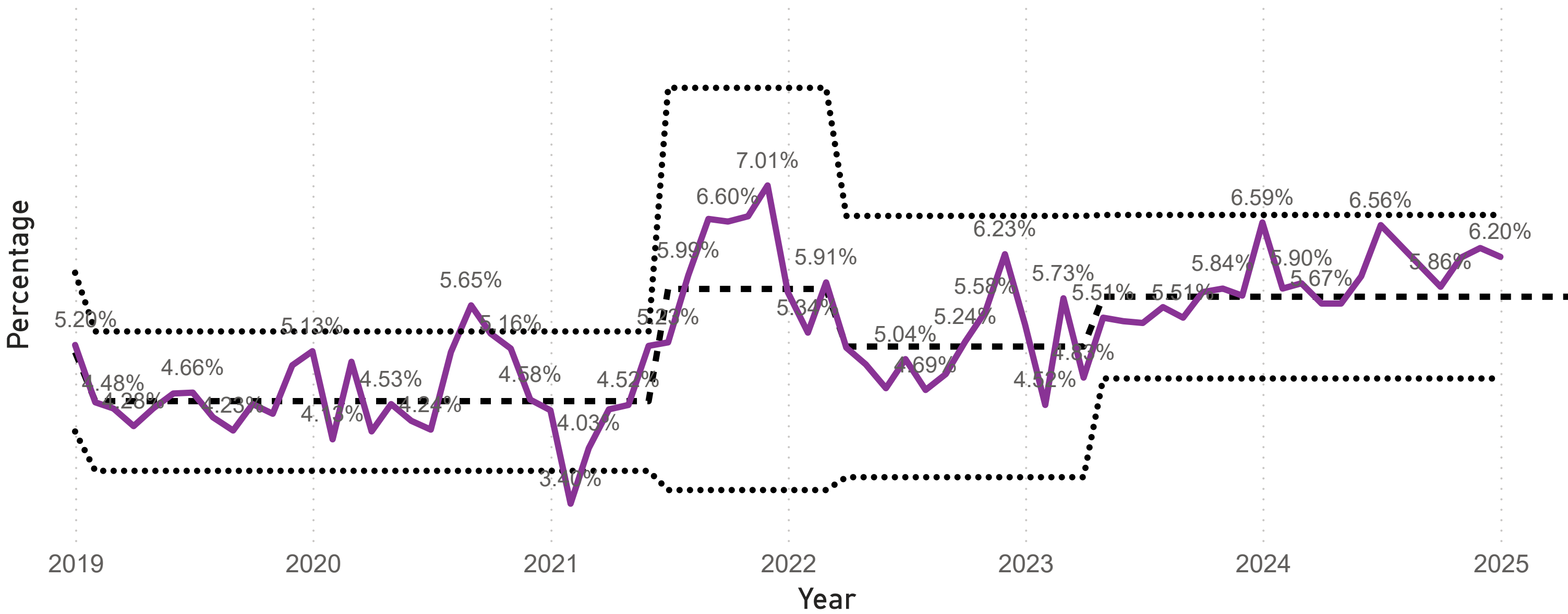
Level of Assurance

No Assurance: The Board should have no confidence in the information provided. There's a significant level of risk that the target won't be achieved.

SPC Status

Eight Consecutive Points Above Centre

National Sickness Absence



National Comparator

The last reported position for Dec-24 was 6.32%, the NHS Scotland position was 7.07%.

Current Position

Month Issues

Feb-25 The national target for staff sickness absence is 4.0%, and it has been difficult to achieve. The 4.0% target has only been met once since the beginning of 2019.

Actions

Month Actions

Feb-25 Absence clinics for employees
Absence management clinic for managers
Health and wellbeing and promotion of attendance
Promotion of Employee support

Staff Turnover Rate (12 month rolling average)

Indicator Construction: (Local)

The number of leavers in a rolling twelve month period as a percentage of the average headcount over the same period.

Last reported month

Feb 25

RAG

Target

11.4%

Actual

7.0%

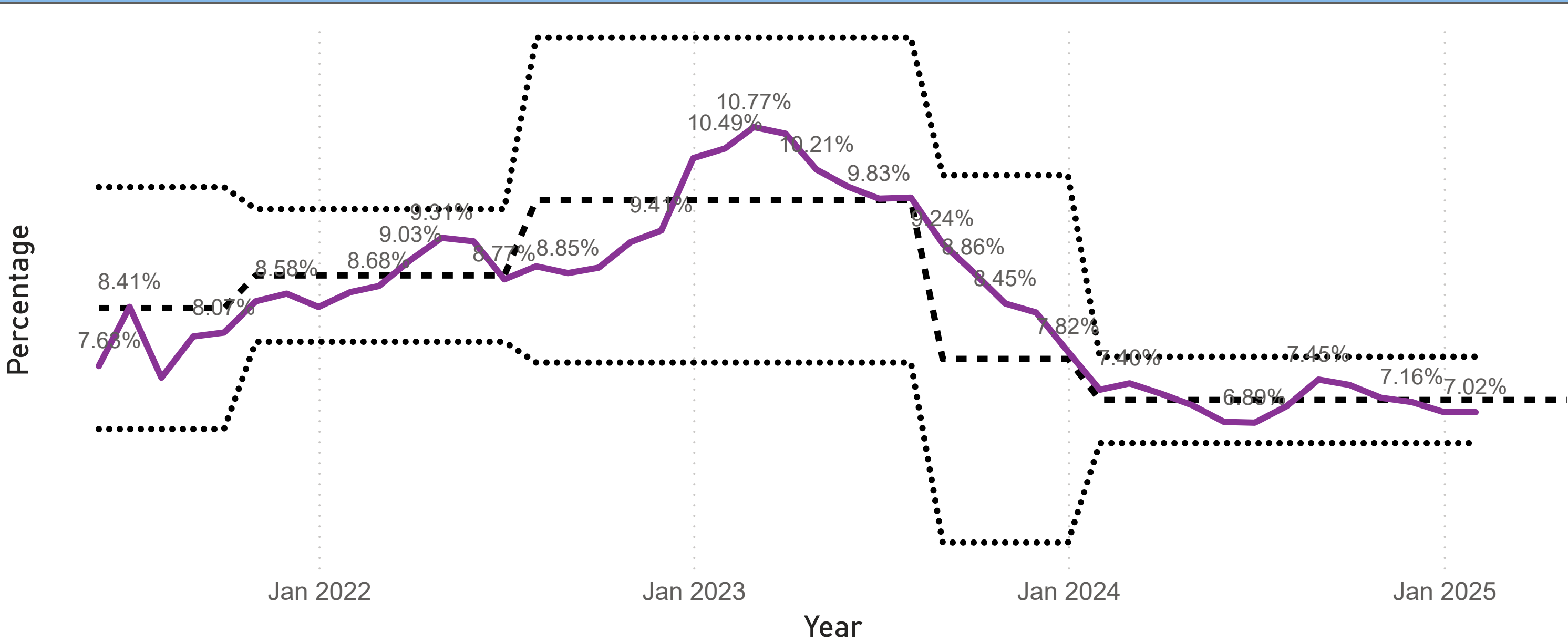
Level of Assurance

Substantial Assurance: The Board can have strong confidence that the control system is achieving or will achieve its intended purpose.

SPC Status

Within Control Limits

Staff Turnover



National Comparator

No nationally comparable position available

Current Position

Month **Issues**

Feb-25 Staff turnover has started to stabilize after a sharp increase that happened when the expansion opened. The February turnover rate for NHS GJ was 7.0%: HLD 5.7%, NES 7.5%, Corporate 7.2%

Actions

Month **Actions**

Feb-25 Staff turnover is currently at an acceptable level and is not a concern for the board. However, it is monitored monthly. Previously, projects were conducted to understand why turnover increased in certain areas

TURAS Appraisal Rate

Indicator Construction:

Percentage of staff with a completed TURAS PDR appraisal

Last reported month

Feb 25

RAG

Target

80.0%

Actual

65.0%

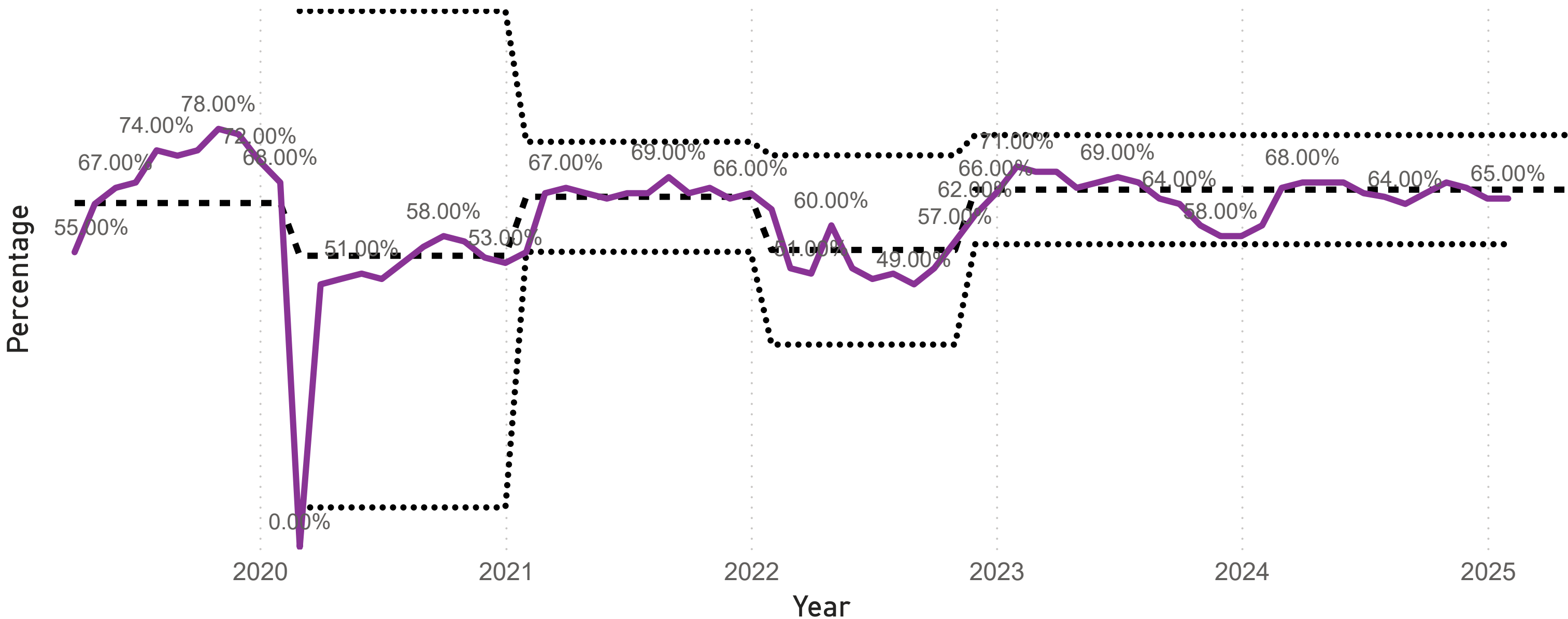
Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

SPC Status

Within Control Limits

TURAS Appraisal rate



National Comparator

No nationally comparable position available

Current Position

Month Issues

Feb-25 The February TURAS appraisal position was reported at 65%: HLD 66%, NES 73%, Corporate 55%

Actions

Month Actions

Feb-25 Improvements to reporting
Review of process to support new guidance materials
Reviewee and reviewer training

Medical Appraisal Rate

Indicator Construction: (Local)

Doctors with a completed medical appraisal interview and Form 4 as a percentage of all doctors requiring a medical appraisal at the GJNH.

Last reported month

Feb 25

RAG

Target

25.0%

Actual

39.3%

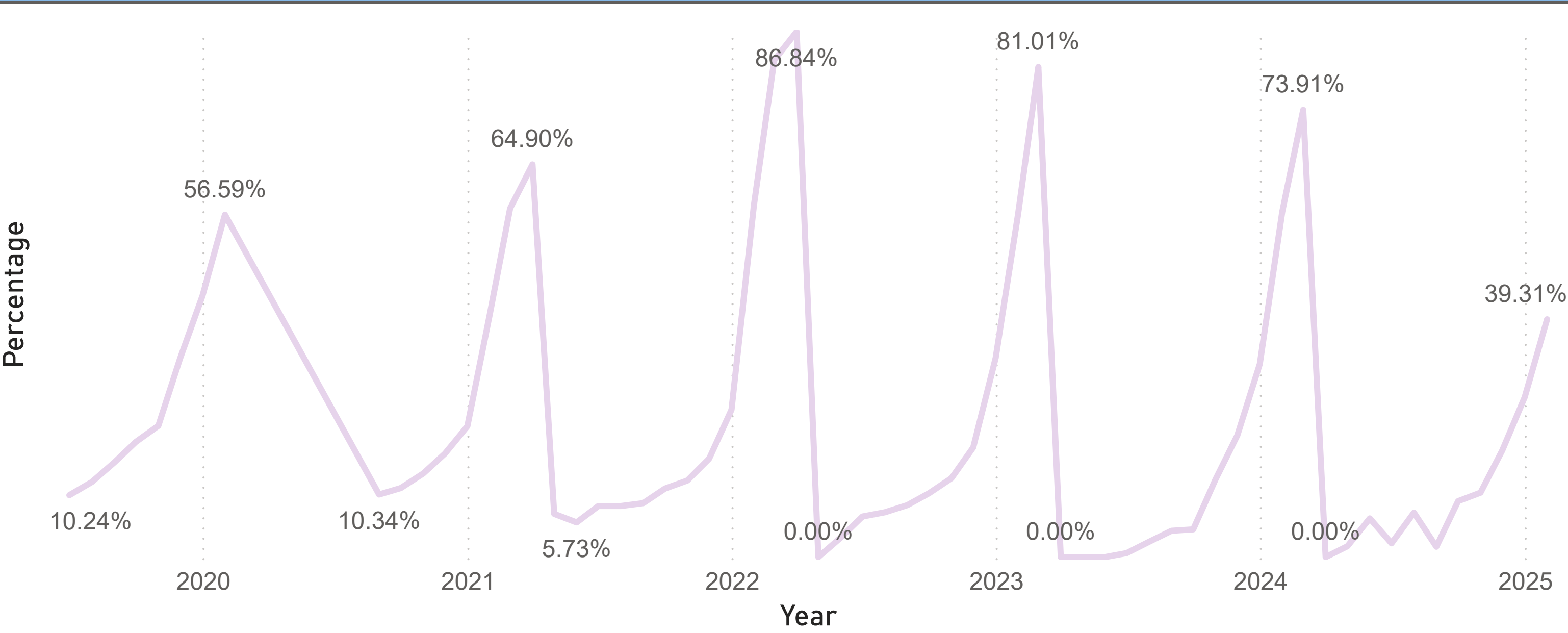
Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

SPC Status

SPC Not Appropriate for this Measure

Medical Appraisal rate



National Comparator

No nationally comparable position available

Current Position

Month Issues

Feb-25 In February, 64.8% (68/105) of medical staff had completed their medical appraisal: HLD 62.3%, NES 68.6%

Actions

Month Actions

Feb-25 The way Medical Staff Appraisal rates are measured will change from a year-to-date completion rate to a rolling 12-month completion rate. This will align with other NHS GJ appraisal reporting methods

Outpatients seen within 12 weeks

Indicator Construction: (National - LDP Standard)

Percentage of applicable patients who receive a new outpatient appointment within 12 weeks of referral.

Last reported month

Feb 25

RAG

Target

90.0%

Actual

88.7%

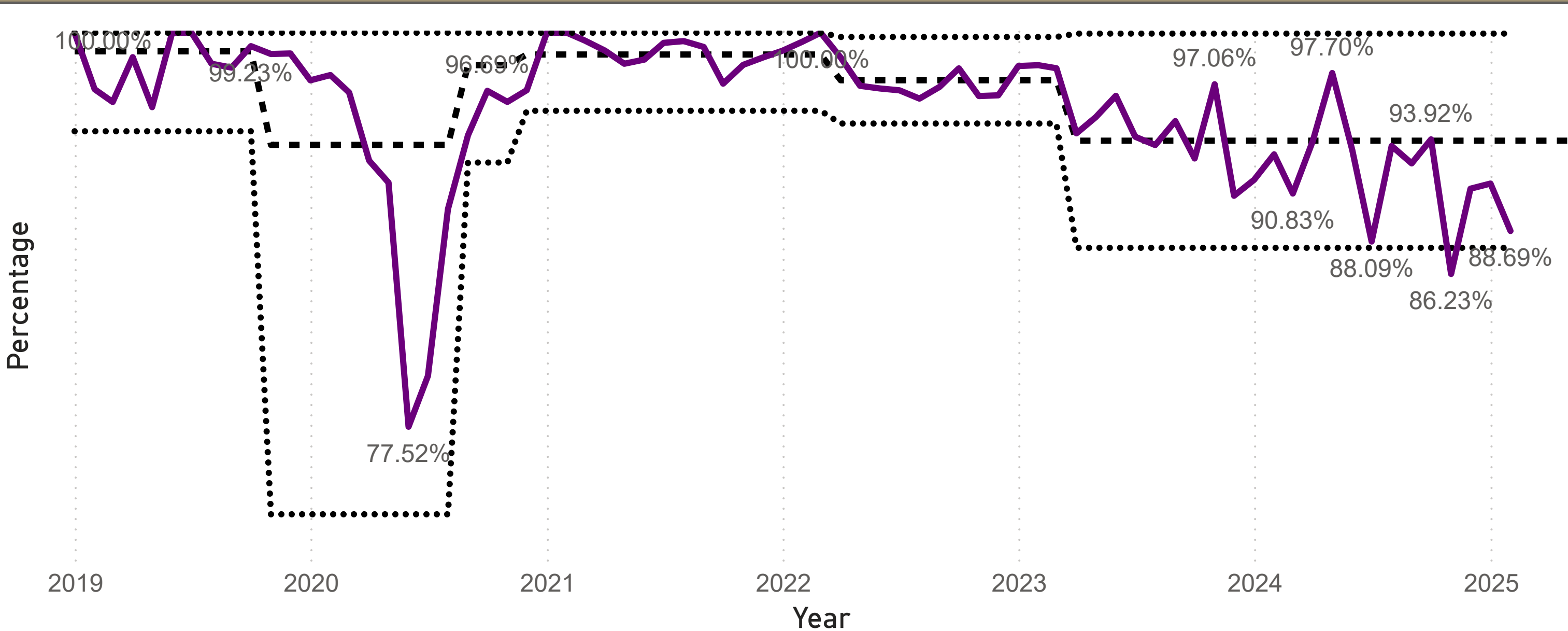
Level of Assurance

No Assurance: The Board should have no confidence in the information provided. There's a significant level of risk that the target won't be achieved.

SPC Status

Within Control Limits

Outpatients seen within 12 weeks



National Comparator

The last reported position for Dec-24 was 18.6%, the NHS Scotland position was 64.0%.

Current Position

Month	Issues
Feb-25	In February, 25 out of 225 HLD reportable outpatients were seen after the 12-week target.

Actions

Month	Actions
Feb-25	Monitoring impact of additional reported specialties which may add additional long waits due to referral pathway (Ophthalmology now, future potential for Orthopaedic waits to be added) Continual monitoring and validation of waiting lists

Inpatients seen within 12 weeks

Indicator Construction: (National - LDP Standard)

Percentage of applicable patients admitted within 12 weeks of decision to treat.

Last reported month

Feb 25

RAG

Target
99.9%

Actual
89.5%

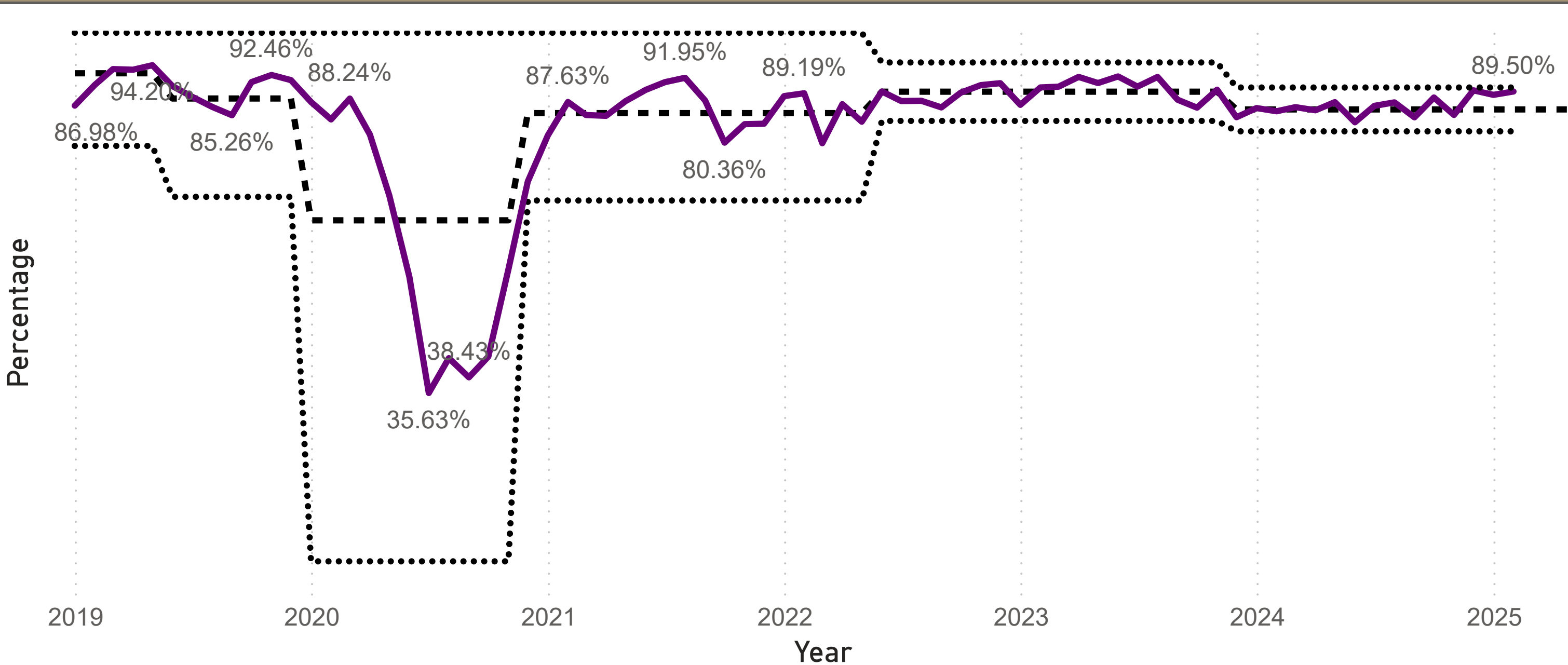
Level of Assurance

No Assurance: The Board should have no confidence in the information provided. There's a significant level of risk that the target won't be achieved.

SPC Status

Two Outer Third Points

Inpatients seen within 12 weeks



National Comparator

The last reported position for Dec-24 was 91.8%, the NHS Scotland position was 58.7%.

Current Position

Month	Issues
Feb-25	In February, 161 of 1534 reportable admissions were admitted after the 12-week target.

Actions

Month	Actions
Feb-25	Monitoring impact of additional reported specialties which may add additional long waits due to referral pathway (Ophthalmology now, future potential for Orthopaedic waits to be added) Continual monitoring and validation of waiting lists

Patients seen within 18 weeks of referral (RTT)

Indicator Construction: (National - LDP Standard)

The number of patients who started their treatment within 18 weeks of referral by GP as a percentage of all patients who started their treatment.

Last reported month

Feb 25

RAG

Target

90.0%

Actual

82.1%

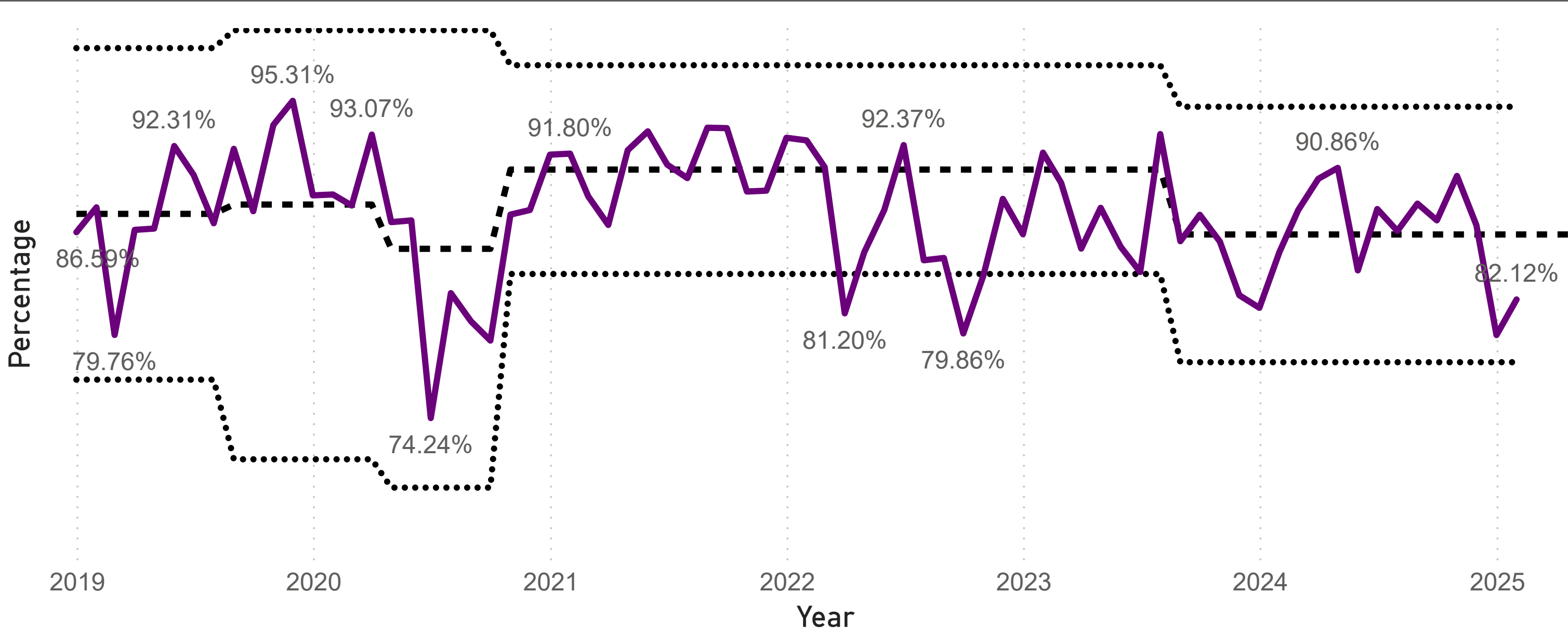
Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

SPC Status

Within Control Limits

Patients seen within 18 weeks of referral (RTT)



National Comparator

The last reported position for Dec-24 was 87.1%, the NHS Scotland position was 68.0%.

Current Position

Month	Issues
Feb-25	27 of 151 reportable patients in February were treated within 18 weeks of referral.

Actions

Month	Actions
Feb-25	The submission and reporting of the 18-week referral to treatment (RTT) standard is being paused nationally, which may affect the ability to report locally on this indicator.

Hospital Bed Occupancy

Indicator Construction: (Local)

Number of beds classified as active and occupied as a percentage of beds classified as available. Data taken from Trak Care and based on midnight census.

Last reported month

Feb 25

RAG

Target
(Blank)

Actual
64.2%

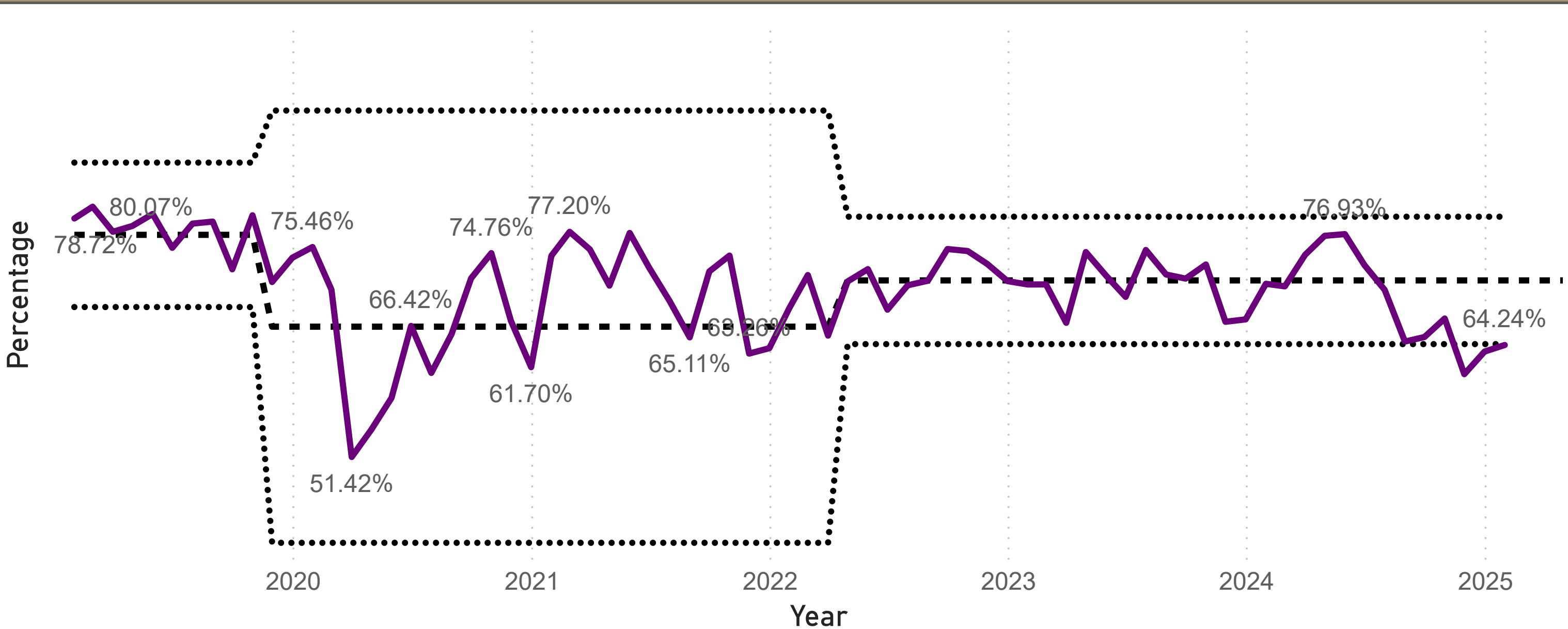
Level of Assurance

Substantial Assurance: The Board can have strong confidence that the control system is achieving or will achieve its intended purpose.

SPC Status

Below Lower Control

Hospital bed occupancy



National Comparator

No nationally comparable position available

Current Position

Month Issues

Feb-25 February bed occupancy was 64.2%.

Actions

Month Actions

Feb-25 Daily bed occupancy reported in Daily situation report. Demand and capacity modelling, including activity plans and length of stay underway for 25/26.

Orthopaedic Day of Surgery Rate (DOSA)

Indicator Construction: (Local)

Number of Orthopaedic primary joint patients admitted on the day of their procedure measured as a percentage of total primary joint patients. Cancellations are excluded.

Last reported month

Feb 25

RAG

Target
70.0%

Actual
71.9%

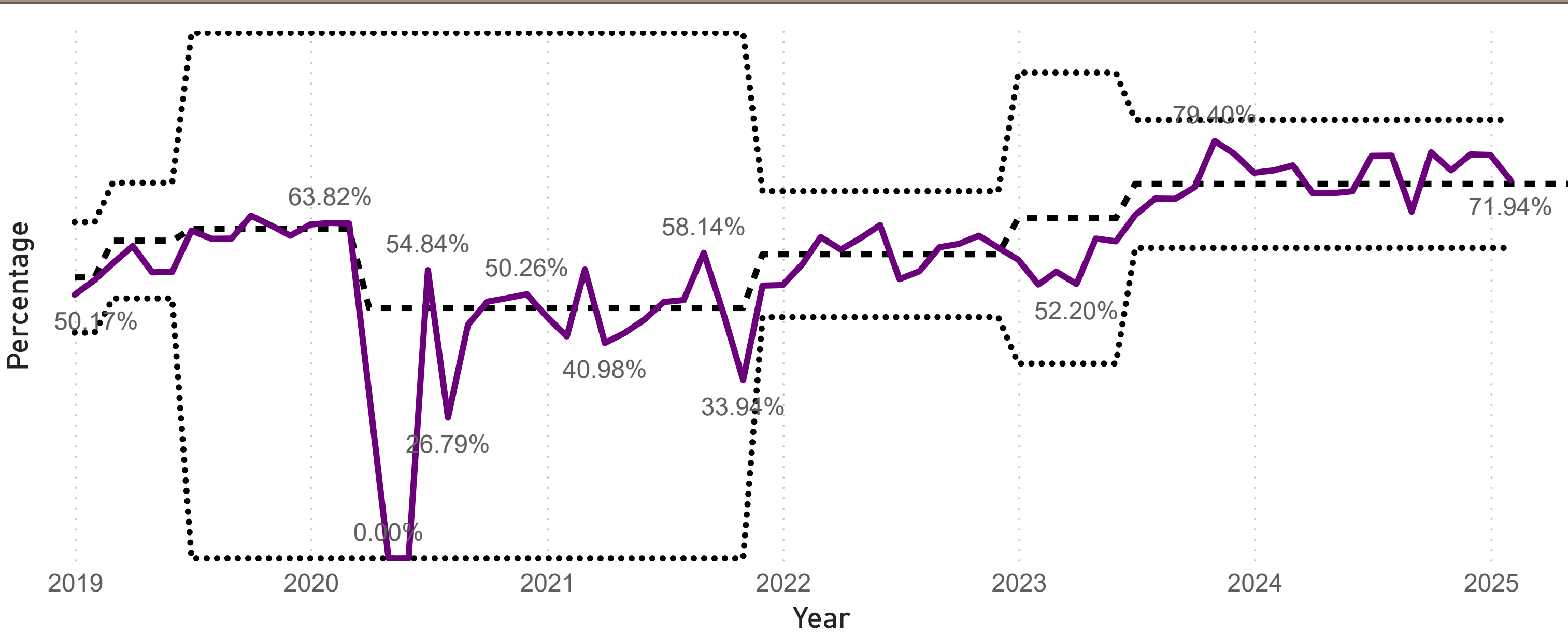
Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

SPC Status

Within Control Limits

Orthopaedic DOSA



National Comparator

No nationally comparable position available

Current Position

Month	Issues
Feb-25	In February, 200 of the 278 primary joint admissions were admitted on the day of surgery.

Actions

Month	Actions
Feb-25	Orthopaedic DoSA consistently meets the 70% target and is a routine part of the admission process for orthopaedic patients.

Same day Cancellation Rate

Indicator Construction: (Local)

The number of cancelled procedures on the OPERA theatre system as a percentage of the total number of scheduled procedures by specialty.

Last reported month

Feb 25

RAG

Target
4.8%

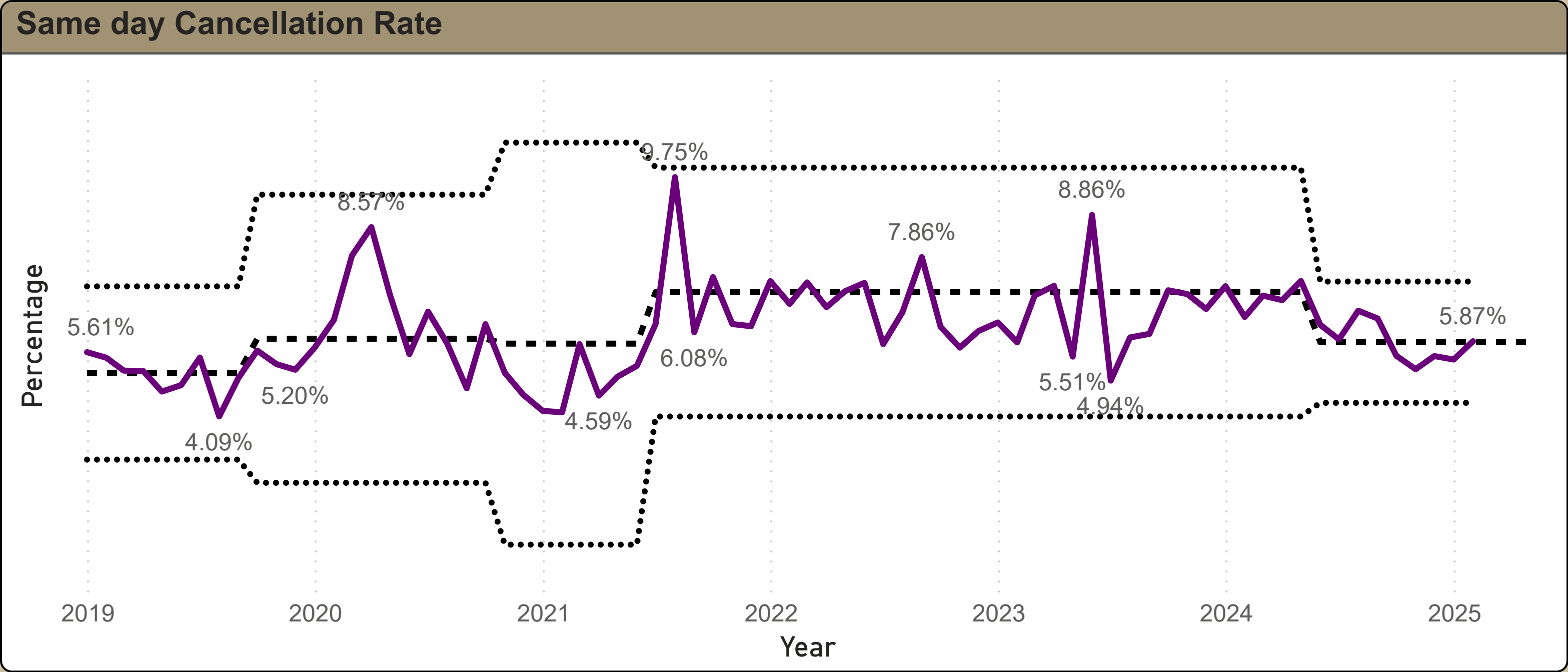
Actual
5.9%

Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

SPC Status

Within Control Limits



National Comparator

The last reported position for Jan-25 was 5.0%, the NHS Scotland position was 9.9%.

Current Position	
Month	Issues
Feb-25	In February, 177 out of 3014 planned cases were cancelled on the same day.

Actions	
Month	Actions
Feb-25	Specialty level monitoring and processes to minimise same say cancellations are in place Daily and weekly analysis of same day cancellations distributed to key stakeholders and reported through governance frameworks

4 Joint session rate

Indicator Construction: (Planned Care)

The number of theatre joint sessions (of all full day sessions with at least 1 joint) which had 4 joints in the sessions as a percentage of all theatre joint sessions.

Last reported month

Feb 25

RAG

Target

72.7%

Actual

39.4%

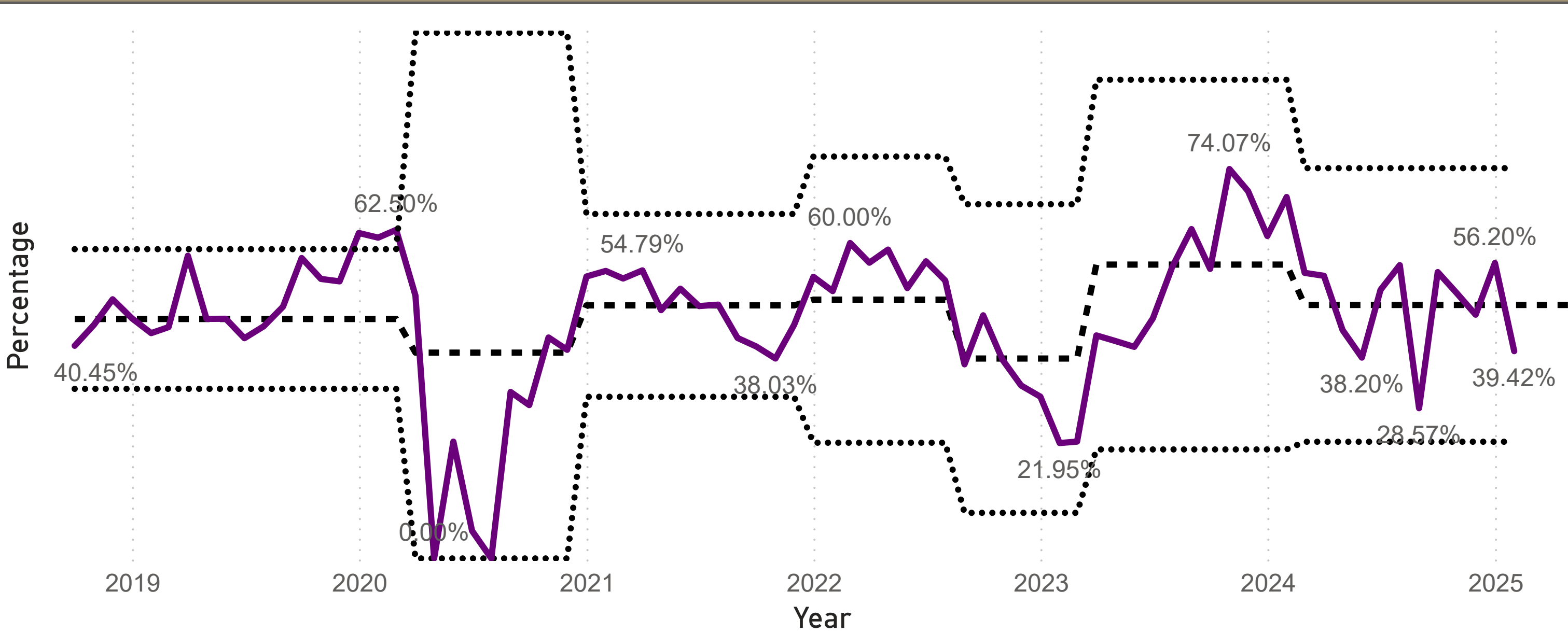
Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

SPC Status

Within Control Limits

4 Joint Session rate



National Comparator

The last reported position for Dec-24 was 47%, the NHS Scotland position was 27%.

Current Position

Month	Issues
Feb-25	While still a national leader in 4 joint lists, recent performance has not been as good as previous levels.

Actions

Month	Actions
Feb-25	A seven-day closure of the PACU (Post-Anaesthesia Care Unit) resulted in 30 lists being reduced to three joint lists.

Ophthalmology Procedures per list

Indicator Construction: (Planned Care)

Average (mean) number of ophthalmology procedures per half day theatre list.

Last reported month

Feb 25

RAG

Target

7.3

Actual

6.7

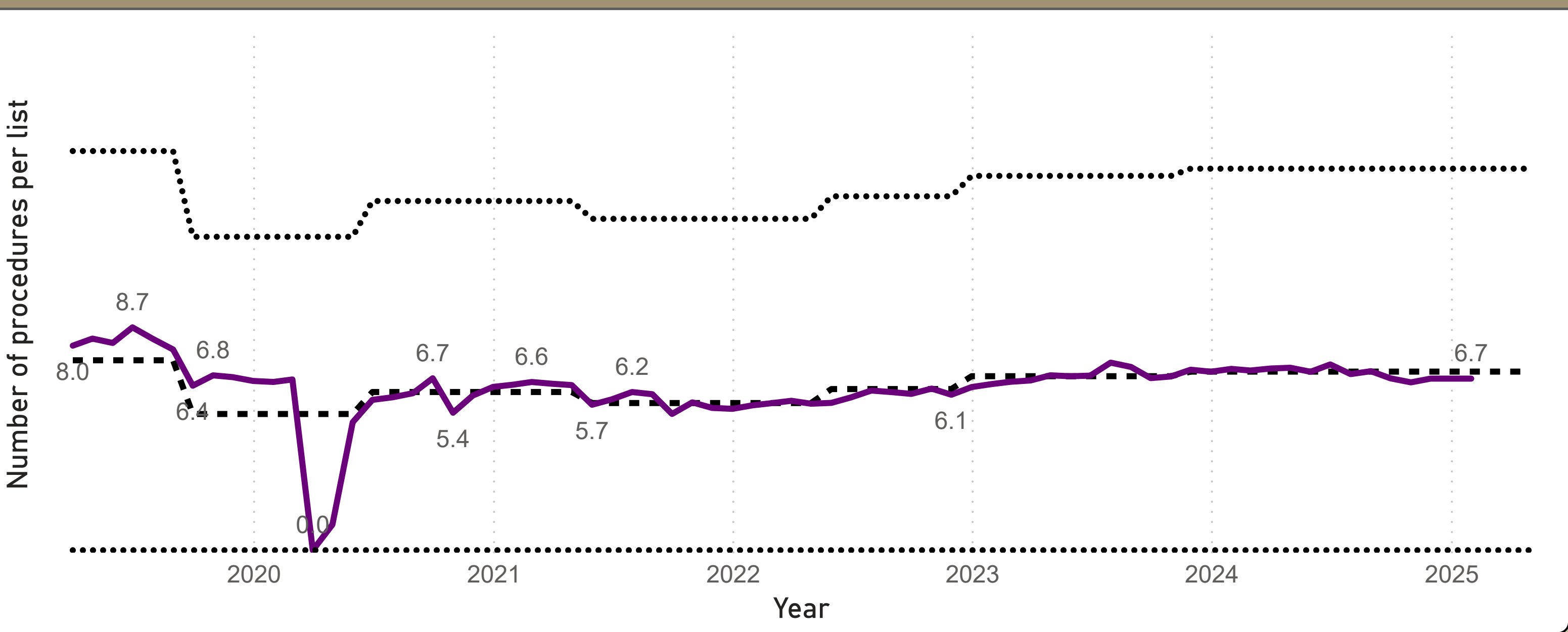
SPC Status

Fifteen Central Points

Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

Oph Procedures per list



National Comparator

The last reported Cataract Throughput for Dec-24 was 7.1 per 3.5hr session, the NHS Scotland position w...

Current Position

Month	Issues
Feb-25	There were 6.7 ophthalmology procedures per list in February, the same as in January and December.

Actions

Month	Actions
Feb-25	Increasing the availability of the double scrub model to support eight cataract surgeries per list.

Same Day Hip Arthroplasty rate

Indicator Construction: (Planned Care)

The number of hip arthroplasty procedures carried out on the same day as admission as a percentage of all hip arthroplasty procedures carried out.

Last reported month

Feb 25

RAG

Target
4.3%

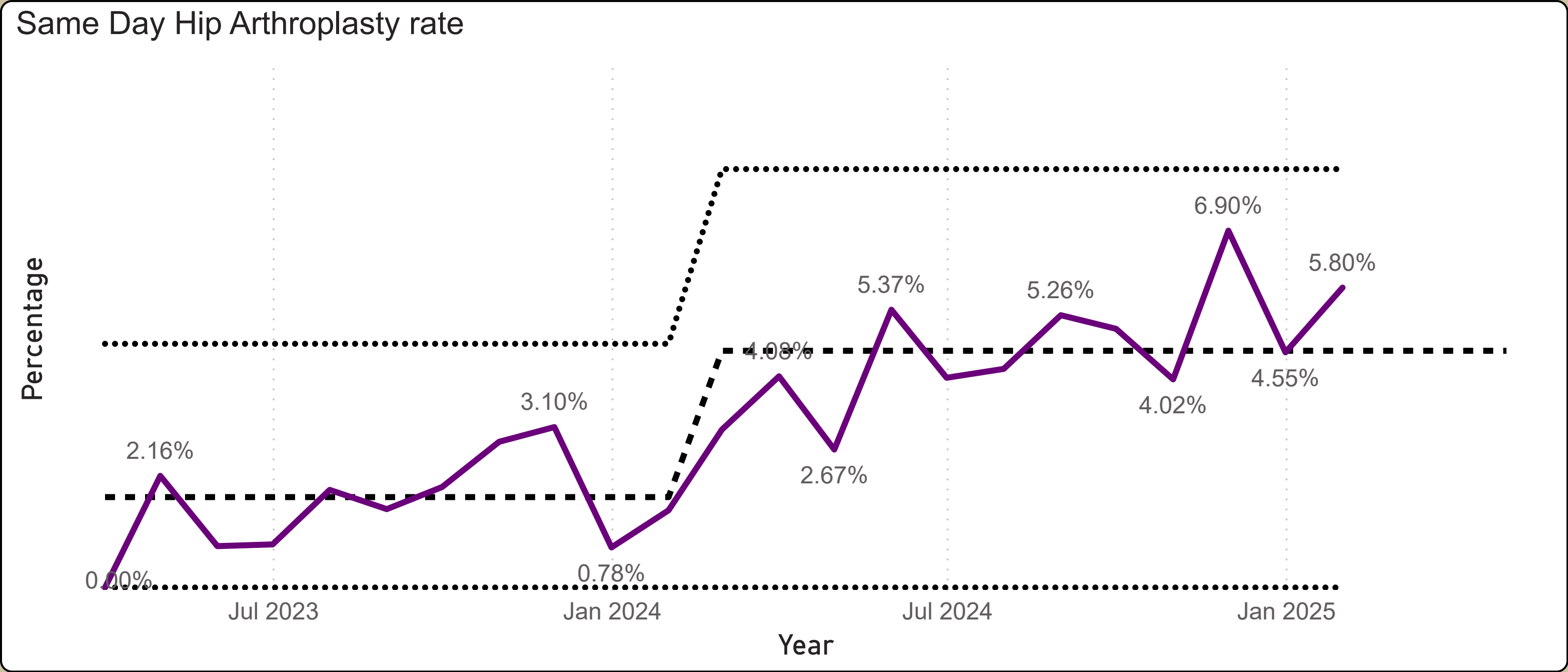
Actual
5.8%

Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

SPC Status

Within Control Limits



National Comparator

No nationally comparable position available

Current Position	
Month	Issues
Feb-25	There appears to be a general upward trend in same-day hip replacement activity.

Actions	
Month	Actions
Feb-25	This increased during Quarter 4 due to the ERAS (Enhanced Recovery After Surgery) improvement plan.

Same Day Knee Arthroplasty rate

Indicator Construction: (Planned Care)

The number of knee arthroplasty procedures carried out on the same day as admission as a percentage of all hip arthroplasty procedures carried out.

Last reported month

Feb 25

RAG

Target

2.7%

Actual

3.8%

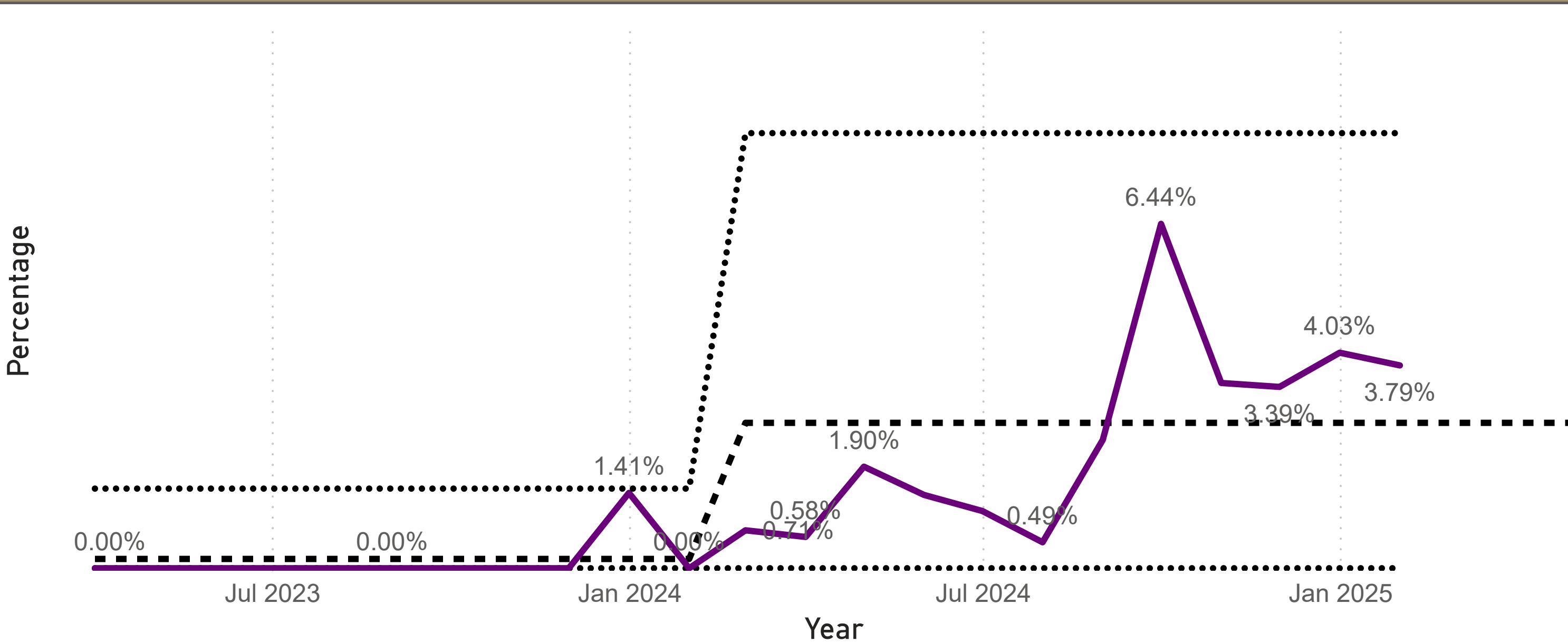
SPC Status

Within Control Limits

Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

Same Day Knee Arthroplasty rate



National Comparator

No nationally comparable position available

Current Position

Month	Issues
Feb-25	Same-day knee replacement activity has been above the center's average for the last five reported months.

Actions

Month	Actions
Feb-25	This increased during Quarter 4 due to the ERAS (Enhanced Recovery After Surgery) improvement plan.

Orthopaedics Average Length of Stay

Indicator Construction: (Local)

Orthopaedic average (mean) hospital length of stay in days

Last reported month

Feb 25

RAG

Target

3.8

Actual

3.1

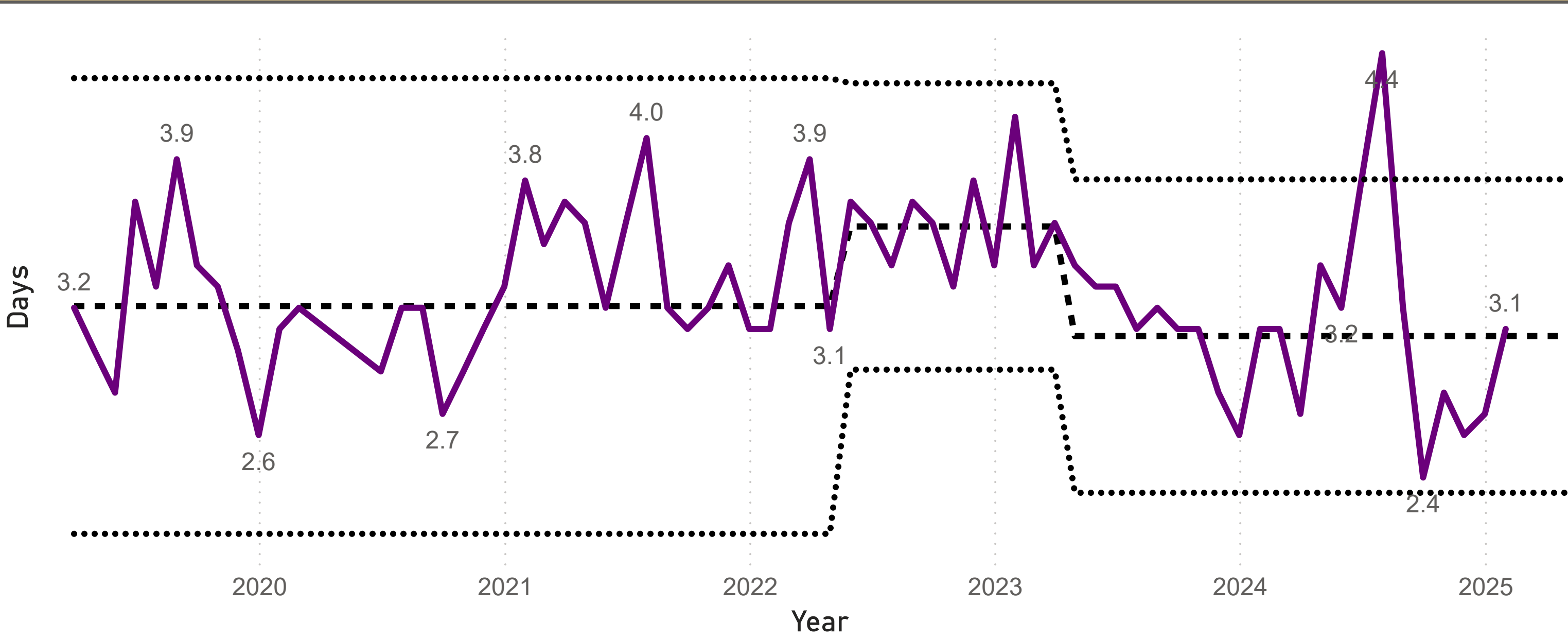
SPC Status

Within Control Limits

Level of Assurance

Moderate Assurance: The Board can have reasonable confidence that the controls to manage risk are generally well-designed and working effectively. There remains a moderate level of risk.

Orthopaedics Average Length of Stay



National Comparator

No nationally comparable position available

Current Position

Month	Issues
Feb-25	The average length of stay for orthopaedic admissions in February was 3.1 days.

Actions

Month	Actions
Feb-25	An increase in Day Zero patients has resulted in a decrease in the length of stay.

31 Day Cancer target (Lung)

Indicator Construction: (National - LDP Standard)

Number of patients admitted for cancer treatment within 31 days from decision to treat as percentage of patients admitted from a cancer treatment pathway. Lung cancer only.

Last reported month

Jan 25

RAG

Target
95.0%

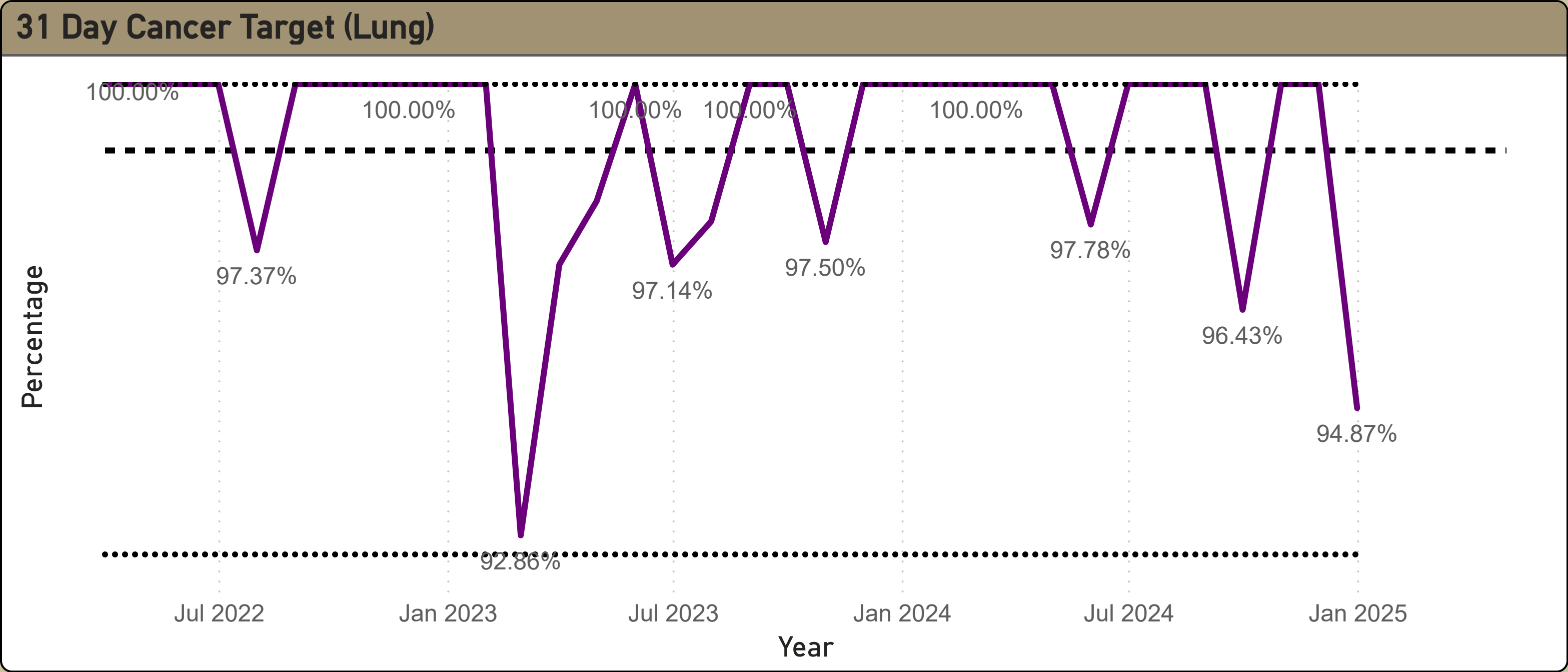
Actual
94.9%

Level of Assurance

Substantial Assurance: The Board can have strong confidence that the control system is achieving or will achieve its intended purpose.

SPC Status

Within Control Limits



National Comparator

The last reported position for Jan-25 was 94.9%, the NHS Scotland position was 96.4%.

Current Position	
Month	Issues
Feb-25	In January, 37 of the 39 lung cancer patients were seen within 31 days.

Actions	
Month	Actions
Feb-25	Breach analysis is conducted for each instance where the target was missed to identify the causes and learn from them.