1 Background

Patient activity is reported on a monthly basis, both by month and year to date. Data is primarily measured in episodes of care. However, data is also captured to reflect the number of procedures being carried out by Board, by specialty. This information is particularly relevant to referring Boards who are allocated activity and measure their activity/throughput at the Golden Jubilee National Hospital (GJNH) in numbers of procedures.

Appendix A to this document is provided for information purposes and reflects the number of patients treated against an annual plan of 16,589 (patients).

Appendix B to this document is adjusted to represent theatre slots used (as opposed to numbers of patients) in both orthopaedic surgery and plastic surgery. This allows us to more accurately reflect actual theatre utilisation and allows us to focus on maximising the theatre capacity that is available to us.

This paper is intended to monitor and report on the national waiting times activity allocated to Boards across Scotland. High level Regional Heart and Lung Centre activity is also provided for information purposes. This activity is reported in more detail on the Divisional Performance and Planning Reports which are then summarised for presentation to the Board.

Referring Boards receive a monthly monitoring document which provides a detailed breakdown of the number of patients referred, their complexity and the number of theatre slots used to treat them.
2 Operational Governance

Inpatient/Day Case/Diagnostic Imaging Activity Analysis March 2018

Activity for inpatients/day case procedures measured against a projection of 16,589 (which excludes cardiothoracic/cardiology activity) was ahead of plan by 10.6% for the month of January when activity is adjusted to reflect complexity (Appendix B) and 4.8% ahead of the year to date plan.

Measured against a total activity projection of 48,419, the combined inpatient/day case and imaging activity at the end of January was ahead of plan by 6.1% for the month of January when adjusted to reflect complexity (Appendix B) and 6.8% ahead of the year to date plan.

3 Analysis of Performance Against Plan at End of March 2018

3.1 Orthopaedic Surgery

The annual target for orthopaedic joint replacements for 2018/19 is based on 3,803 primary joint replacements. This number is calculated on the basis of one patient to one theatre slot. Each session equals two primary joint theatre slots. However, based on experience in recent years, we have made the assumption that the number of complex joint replacements likely to be referred for treatment would be approximately 9%. These procedures typically take the equivalent theatre space of 1.5-2 primary joint replacements.

In addition to the 3,803 primary joint replacements, there is a target of 681 orthopaedic ‘non-joint’ procedures and 550 foot and ankle procedures for the year. This equates to a total of 5034 orthopaedic theatre slots per annum (as documented in Appendix B).

At the end of January, orthopaedic joint activity was ahead of plan for the month of January by 29 joint replacements, 5 foot and ankle procedures and 17 ‘non joint’ procedures. The year to date plan has been exceeded by 233 primary joint replacements, 40 foot and ankle procedures and 53 ‘non joint’ procedures (which consists of intermediate/minor procedures such as Anterior Cruciate Ligament (ACL) repair, arthroscopy etc). Overall, orthopaedic surgery is currently ahead of the year to date by 355 procedures/theatre slots.

3.2 Ophthalmic Surgery

Ophthalmology activity was ahead of the monthly plan by 56 procedures for January and 150 procedures behind the year to date plan.

3.3 General Surgery

General surgery performed slightly behind the monthly plan in January by three procedures and is slightly behind the year to date plan by seven procedures.
3.4 Plastic Surgery

For reporting purposes, plastic surgery has been split and will be monitored throughout 2018/19 as hand surgery and minor plastic surgery. Major plastic surgery is no longer carried out at GJNH. Hand surgery was behind plan for the month of January by 33 procedures. Minor plastic surgery procedures were 14 procedures behind plan.

3.5 Endoscopy

The endoscopy service performed ahead of plan by 89 procedures in the month of January and is 712 ahead of the year to date plan.

3.6 Diagnostic Imaging

The annual diagnostic imaging target has increased from 29,450 to 31,830 (8% increase) in 2018/19 to take account of the additional activity that will be carried out on the new MRI scanners. The monthly target was exceeded by 98 examinations in January.

4 Current Situation

- Despite losing two operating days due to public holidays over the New Year period, inpatient and day case surgery activity performed 10.6% ahead of plan. Additionally, despite losing two imaging days due to public holidays, the diagnostic imaging target was exceeded by 98 examinations. Collectively, performance remains ahead of the year to date plan at the end of January.

- Hand surgery referrals are predominantly received from one NHS Board. This Board experienced challenges around the provision of local specialist post-operative physiotherapy for these patients and therefore cancelled a number of hand surgery theatre sessions.

- The same Board has had challenges identifying appropriate patients to utilise their minor plastic surgery allocation. This trend has continued throughout the year and consequently only 53% of the expected activity has been carried out. Discussions have taken place with this Board and agreement has been reached that their allocation will be reduced by 50% in 2019/20.

- A bid has been made to the Scottish Government for recurring activity in general surgery (200 procedures per full year), endoscopy (1,200 procedures per full year), ophthalmology (600 per full year) and orthopaedic surgery (200 joint replacements per full year).

- Additionally, funding was requested (and supported) to procure a mobile cardiac catheterisation laboratory (cath lab) to support the pressure on the
interventional cardiology waiting lists. The cath lab arrived on site on 7 January and to date is working very well with no adverse comments from patients or staff.

- Installation of a second Computer Tomography (CT) scanner was completed in line with plan and has been operational since mid February. An additional 1,320 examinations will be carried out on this scanner by the end of March 2019.

5 Recommendation

Board Members are asked to discuss and note the report.

June Rogers
Director of Operations
March 2019