

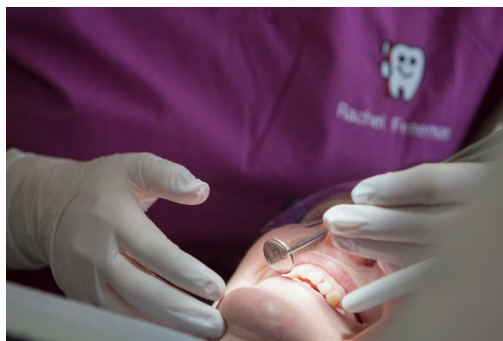


Llywodraeth Cymru
Welsh Government



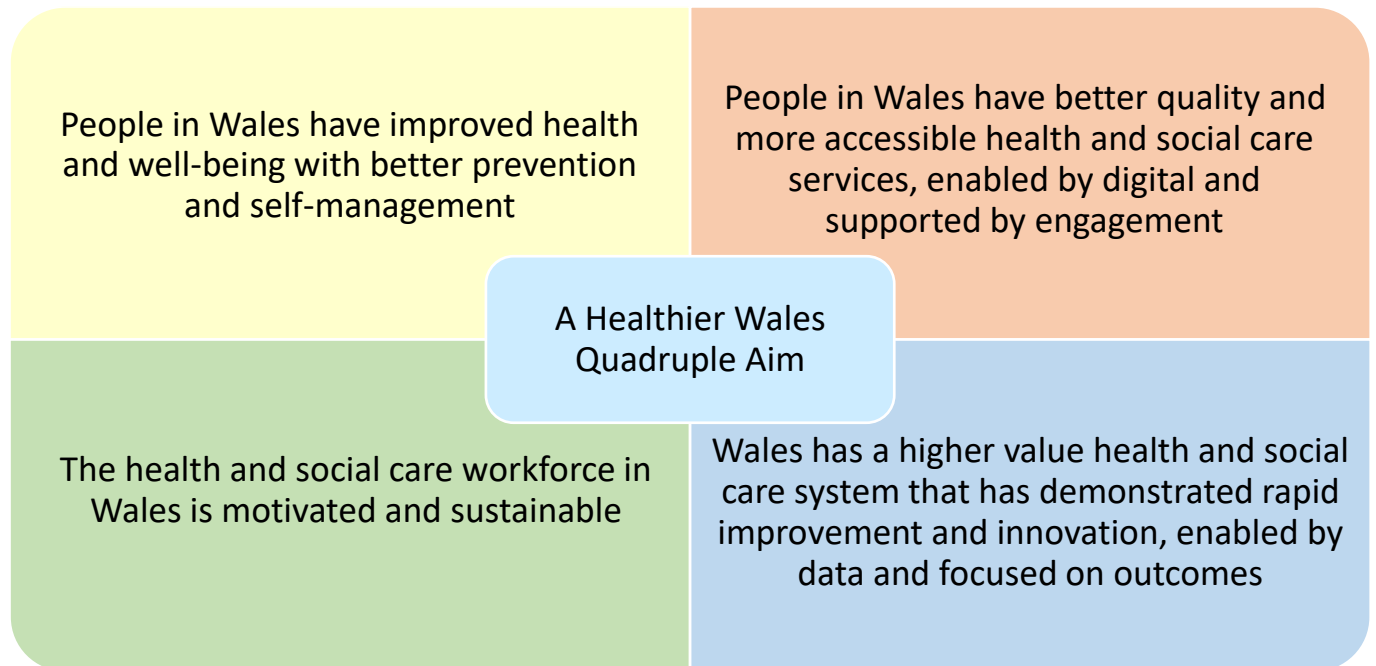
NHS Wales Performance Framework 2022-2023

June 2022



NHS Performance Framework 2022-2023

All of the measures in the NHS Performance Framework for 2022-2023 have been mapped to 'A Healthier Wales' quadruple aim and reflect the Ministerial priority areas of focus.



This is an interim framework whilst further work is undertaken to identify outcome focused measures that deliver the priorities outlined in the NHS Planning Framework and the Health and Social Care Outcomes Framework (in development). This work will be co-produced in conjunction with NHS Wales Health Boards and Trusts.

NHS Wales Performance Measures

Quadruple Aim 1: People in Wales have improved health and well-being with better prevention and self-management.

People will take responsibility, not only for their own health and well-being, but also for their family and for people they care for, perhaps even for their friends and neighbours.

There will be a whole system approach to health and social care, in which services are only one element of supporting people to have better health and well-being throughout their whole lives. It will be a 'wellness' system, which aims to support and anticipate health needs, to prevent illness, and to reduce the impact of poor health.

Performance Measure

<p>Weight Management</p>	<ol style="list-style-type: none"> 1. Percentage of adults losing clinically significant weight loss (5% or 10% of their body weight) through the All Wales Weight Management Pathway 2. Qualitative report detailing progress against the Health Boards' plans to deliver the NHS Wales Weight Management Pathway 3. Percentage of babies who are exclusively breastfed at 10 days old
<p>Smoking</p>	<ol style="list-style-type: none"> 4. Percentage of adults (aged 16+) reporting that they currently smoke either daily or occasionally 5. Percentage of adult smokers who make a quit attempt via smoking cessation services 6. Implementing Help Me Quit in Hospital smoking cessation service and to reduce smoking during pregnancy
<p>Diabetes</p>	<ol style="list-style-type: none"> 7. Percentage of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes 8. Percentage of patients (aged 12 years and over) with diabetes achieving all three treatment targets in the preceding 15 months: <ul style="list-style-type: none"> • Blood pressure reading is 140/80 mmHg or less • Cholesterol values is less than 5 mmol/l (<5) • HbA1c equal or less than 58 mmol/mol or less

Performance Measure

Substance Misuse

9. European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales (episode based)
10. Percentage of people who have been referred to health board services who have completed treatment for alcohol misuse

Vaccinations

11. Percentage of children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1
12. Percentage of children who received 2 doses of the MMR vaccine by age 5
13. Percentage uptake of autumn 2022 booster dose of the COVID-19 vaccinations in all eligible Wales residents by health board
14. Percentage uptake of 2022-23 influenza vaccination in all eligible Wales residents by health board

Screening

15. Cancer screening coverage for:
 - Percentage of eligible people aged 25-49 will have participated in the cervical screening programme within the last 3.5 years and eligible people aged 50-64 within the last 5.5 years
 - Percentage of eligible people will have participated in the bowel screening programme within the last 2.5 years
 - Percentage of women resident and eligible for breast screening at a particular point in time will have been screened in the previous three years

Quadruple Aim 2: People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement.

There will be an equitable system, which achieves equal health outcomes for everyone in Wales. It will improve the physical and mental well-being of all throughout their lives, from birth to a dignified end.

Services will be seamless and delivered as close to home as possible. Hospital services will be designed to reduce the time spent in hospital, and to speed up recovery. The shift in resources to the community will mean that when hospital-based care is needed, it can be accessed more quickly.

Performance Measure

Primary & Community Care

16. Percentage of GP practices that have achieved all standards set out in the National Access Standards for In-hours
17. Number of Urgent Primary Care Centres (UPCC) established in each Health Board footprint (i.e., both UPPC models)
18. Number of new patients (children aged under 18 years) accessing NHS dental services
19. Number of new patients (adults aged 18 years and over) accessing NHS dental services
20. Number of existing patients accessing NHS dental services

Urgent & Emergency Care

21. Percentage of 111 patients prioritised as P1CHC that started their definitive clinical assessment within 1 hour of their initial call being completed
22. Percentage of total conveyances taken to a service other than a Type One Emergency Department
23. Qualitative report detailing progress against the Health Boards' plans to deliver a Same Day Emergency Day Care Service (12 hours a day, 7 days a week) across all acute sites
24. Percentage of patients who are diagnosed with a stroke who have a direct admission to a stroke unit within 4 hours of the patient's clock start time
25. Percentage of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge
26. Number of patients who spend 12 hours or more in all hospital major and minor emergency care facilities from arrival until admission, transfer, or discharge
27. Median time from arrival at an emergency department to triage by a clinician
28. Median time from arrival at an emergency department to assessment by a senior clinical decision maker

Performance Measure

Urgent & Emergency Care

29. Percentage of patients (aged 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours
30. Percentage of stroke patients who receive mechanical thrombectomy
31. Percentage of emergency responses to red calls arriving within (up to and including) 8 minutes
32. Number of ambulance patient handovers over 1 hour

Patient Flow & Discharge

33. Number of people admitted as an emergency who remain in an acute or community hospital over 21 days since admission
34. Percentage of total emergency bed days accrued by people with a length of stay over 21 days
35. Percentage of people assigned a D2RA pathway within 48 hours of admission
36. Percentage of people leaving hospital on a D2RA pathway
37. Percentage of stroke patients that receive at least 45 minutes of speech and language therapy input in 5 out of 7 days

Elective Planned Care

38. Percentage of patients starting their first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)
39. Number of pathways waiting over 8 weeks for a diagnostic endoscopy
40. Number of pathways waiting 8 weeks for specific diagnostic
41. Number of pathways waiting over 14 weeks for therapy services
42. Number of patients waiting over 52 weeks for a new outpatient appointment
43. Number of patients waiting for a follow-up outpatient appointment who are delayed by over 100%
44. Percentage of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date
45. Number of patients waiting more than 104 weeks for referral to treatment
46. Number of patients waiting more than 36 weeks for referral to treatment
47. Percentage of patients waiting less than 26 weeks for referral to treatment

Performance Measure

Mental Health

48. Rate of hospital admissions with any mention of intentional self-harm for children and young people (aged 10-24 years) per 1,000 population
49. Percentage of patients waiting less than 28 days for a first appointment for specialist Child and Adolescent Mental Health Services (sCAMHS)
50. Percentage of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral for people aged under 18 years
51. Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for people aged under 18 years
52. Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for people aged under 18 years
53. Percentage of children and young people waiting less than 26 weeks to start an ADHD or ASD neurodevelopment assessment
54. Qualitative report detailing progress to develop a whole school approach to CAMHS in reach services
55. Percentage of service users (adults aged 18 years and over) admitted to a psychiatric hospital between 09:00 and 21:00 hours that have received a gate keeping assessment by the CRHT service prior to admission
56. Percentage of service users (adults aged 18 years and over) admitted to a psychiatric hospital who have not received a gate keeping assessment by the CRHTS that have received a follow up assessment by the CRHTS within 24 hours of admission
57. Percentage of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral for adults aged 18 years and over
58. Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for adults aged 18 years and over
59. Percentage of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health
60. Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for adults aged 18 years and over
61. Qualitative report detailing progress to improve dementia care (providing evidence of learning and development in line with the Good Work – Dementia Learning and Development Framework) and increasing access to timely diagnosis

Performance Measure

Learning Disabilities

62. Qualitative report detailing progress against the priority areas to improve the lives of people with learning disabilities

Hospital Infection Control

63. Cumulative number of laboratory confirmed bacteraemia cases: Klebsiella sp and; Aeruginosa

64. Cumulative rate of laboratory confirmed bacteraemia cases per 100,000 population: E-coli; S. aureus bacteraemias (MRSA and MSSA) and C. difficile

65. Percentage of confirmed COVID-19 cases within hospital which had a definite hospital onset of COVID-19

66. Percentage of confirmed COVID-19 cases within hospital which had a probable hospital onset of COVID-19

Quadruple Aim 3: The health and social care workforce in Wales is motivated and sustainable.

New models of care will involve a broad multi-disciplinary team approach where well-trained people work effectively together to meet the needs and preferences of individuals.

Joint workforce planning will be in place with an emphasis on staff expanding generalist skills and working across professional boundaries. Strategic partnership will support this with education providers and learning academies focused on professional capability and leadership.

Performance Measure

Staff Resources

- 67. Agency spend as a percentage of the total pay bill
- 68. Percentage of sickness absence rate of staff
- 69. Percentage of staff who have recorded their Welsh language skills on ESR who have Welsh language listening/speaking skills level 2 (foundational level) and above

Training & Development

- 70. Percentage compliance for all completed level 1 competencies of the Core Skills and Training Framework by organisation
- 71. Percentage headcount by organisation who have had a Personal Appraisal and Development Review (PADR)/medical appraisal in the previous 12 months (including doctors and dentists in training)

Staff Engagement

- 72. Overall staff engagement score
- 73. Percentage of staff who report that their line manager takes a positive interest in their health and well-being

Quadruple Aim 4: Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes.

Delivering higher value in health and social care will focus on outcomes that matter to the individual and making our services safe, effective, people-centred, timely, efficient and equitable. This will bring the individual to the fore and consider the relative value of different care and treatment options, in line with Prudent Health.

Research, innovation and improvement activity will be brought together across regions – working with RPBs, universities, industries and other partners. Alignment of funding streams and integrated performance management and accountability across the whole system will be in place to accelerate transformation through a combination of national support, incentives, regulation, benchmarking and transparency.

Performance Measure

<p>De-Carbonisation</p>	<p>74. Emissions reported in line with the Welsh Public Sector Net Zero Carbon Reporting Approach 75. Qualitative report detailing the progress of NHS Wales’ contribution to de-carbonisation as outlined in the organisation’s plan</p>
<p>Foundational Economy</p>	<p>76. Qualitative report detailing evidence of NHS Wales advancing its understanding and role within the foundational economy via the delivery of the Foundational Economy in Health and Social Services 2021-22 Programme</p>
<p>New Ways of Working</p>	<p>77. Report detailing evidence of NHS Wales embedding Value Based Health and Care within organisational strategic plans and decision-making processes 78. Number of risk assessments completed on the Welsh Nursing Clinical Record by Health Board/Trust 79. Number of wards using the Welsh Nursing Clinical Record by Health Board/Trust 80. Percentage of episodes clinically coded within one reporting month post episode discharge end date</p>
<p>Clinically Effective Prescribing</p>	<p>81. Total antibacterial items per 1,000 specific therapeutic group age-sex related prescribing units (STAR-PU) 82. Percentage of secondary care antibiotic usage within the WHO Access category 83. Number of patients aged 65 years or over prescribed an antipsychotic 84. Opioid average daily quantities per 1,000 patients</p>