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**To: Renfrewshire Integration Joint Board**

**On: 27 January 2023**

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**Report by: Head of Strategic Planning and Health Improvement**

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**Subject: Performance Management Mid-Year Report 2022/23**

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Direction Required to Health Board, Council or Both	Direction to:	
	1. No Direction Required	X
	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	4. NHS Greater Glasgow & Clyde and Renfrewshire Council	

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## **1. Summary**

- 1.1 The purpose of this report is to update the IJB on mid-year performance for the financial year 2022/23. The full Scorecard updating all performance measures is attached as Appendix 1 and covers the period April to September 2022.
- 1.2 While this report is for the period April to September 2022, data is not yet available for all performance measures to September 2022. As such, the information provided in the report is the most up to date available at this point.
- 1.3 The report has 51 indicators of which 40 have targets set against them. Performance status is assessed as either Red, more than 10% variance from target; Amber, within 10% variance of target; or Green, on or exceeds target.
- 1.4 At the mid-year point 2022/23 the Scorecard shows a relatively stable position compared to year end 2021/22. The status of the 40 indicators that have targets set against them includes:
- 10 Red indicators (25%)
  - 12 Amber indicators (30%)
  - 18 Green indicators (45%)
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## **2. Recommendation**

It is recommended the IJB:





- Approves the Performance Management Mid-Year Report 2022/23 for Renfrewshire HSCP.

### 3. Performance for the period April to September 2022

- 3.1 The Performance Scorecard is included as Appendix 1. Section 5 of this paper shows the performance indicators that have improved and section 6 shows the indicators where performance has deteriorated. Section 7 gives an update on the unscheduled care indicators.

### 4. Performance Indicators Status

- 4.1 The following table shows the position of scorecard indicators as at 30.09.22. Due to the changes agreed at the September 2022 IJB Meeting, we have now increased the number of indicators with targets set against performance. The changes make it difficult to draw any direct comparisons to the overall performance position as at 2021/22 year end.

Performance Indicator Status	As at 30.09.22.
	Alert: 10
	Warning: 12
	Target achieved: 18
	No targets: 11

### 5. Improvements in Performance

#### Breastfeeding

- 5.1 The % of mothers **exclusively breastfeeding at 6-8 weeks (Outcome 1)** has increased from 19.7% at March 2022 to 22.3% at June 2022 against the 21.4% target. This improvement has seen the indicator status move from Amber to Green.
- 5.2 In addition, the % of mothers **exclusively breastfeeding at 6-8 weeks in the most deprived areas of Renfrewshire (Outcome 5)** has increased from 11.8% at March 2022 to 16.3% at June 2022. While status is still Red against the 19.9% target, we hope to continue to see an increase in performance in 2022/23.
- 5.3 One specific area the Health Improvement Team promotes and supports is the Breastfeeding Friendly Scotland Scheme in Renfrewshire. The team has engaged with a number of businesses and organisations in Renfrewshire and we now have 87 signed up to the scheme including One Ren facilities and all their community-based buildings. This includes 79 new establishments registered since August 2022 in addition to 8 establishments already registered from the previous Breastfeeding Welcome award last year.

- 5.4 Early in 2023, the team will also be working with Renfrewshire Council and the wider HSCP to ensure all buildings are breastfeeding friendly; this will include training managers, front facing and administration staff. Local businesses and organisations in the 3<sup>rd</sup> and private sector will also be targeted with support from Engage Renfrewshire and the Renfrewshire Employability Partnership. In addition, we have recently been approached by Glasgow Airport and will be supporting them to become Breastfeeding Friendly in 2023.
- 5.5 We continue to work closely with partners to explore creative and innovative ways to increase our exclusive breastfeeding rates at 6-8 weeks and support mums and families as best we can.

#### Child and Adolescents Mental Health Service (CAMHS)

- 5.6 There has been a substantial increase in the **% of patients seen within 18 weeks in our Child and Adolescents Mental Health Service (CAMHS) - (Outcome 3)**. Performance at September 2022 was 98.5% compared to 58.8% at March 2022, with the increase in performance resulting in the indicator status moving from Red to Green.
- 5.7 This increase in performance can be attributed to a range of initiatives being progressed by the service including:
- A waiting list initiative for initial assessment has been in place since January 2022. This has significantly increased the number of appointments available to our children, young people and their families
  - Weekend and evening appointments have been made available, providing greater flexibility
  - The introduction of an 'opt in' process allowing families to book an appointment at a time that suits them.

#### Podiatry

- 5.8 There has been a good increase in the **% of new referrals to the Podiatry Service seen within 4 weeks in NHSGGC and % of new referrals to the Podiatry Service seen within 4 weeks in Renfrewshire (Clyde) (Outcome 9)** which has seen indicator status move from Red to Amber.
- 5.9 This improvement can be attributed to service investment in fixed term and secondment posts in waiting list administration, assistant practitioners and clinical sub specialties. Active management of waiting times and resource along with the use of virtual contact for new patients has allowed the service to maximise the use of clinical capacity. Early data for Quarter 3 (October to

December) shows that waiting time performance is being maintained in the context of consistent referral demand.

#### Emergency Admissions from Care Homes

- 5.10 Despite the introduction of a more ambitious target for **Emergency admissions from care homes (Outcome 4)** performance is on track to improve on the previous year's position with 182 admissions as at September 2022 compared to 201 admissions recorded at September 2021.
- 5.11 Care Home residents have access to nursing input where this is required, with regular review by Care Home Liaison Nurses/Advanced Nurse Practitioners. Additional input is sought from Community Psychiatric Nurses as required. District Nurses may also be involved with residents in HSCP Care Homes for diabetes management/wound management/palliative and end of life care.

#### Sickness Absence – NHS Staff

- 5.12 The **sickness absence rate for HSCP NHS staff (Outcome 8)** has decreased from 6.52% at March 2022 to 6.18% at September 2022, against the national NHS target of 4%. The rate across NHSGGC was 6.59% at September 2022.
- 5.13 Long term sickness absence rates reduced to 3.4% at September 2022 compared to a 4% average across April to September 2022. At September 2022, short term absence rates were at 2.8% compared to a 4% average across April to September 2022. The combined sickness absence rate for 2022/23 so far has averaged at 6%.
- 5.14 The recording of Covid related absence changed to sick leave absence from 1 September 2022. However, if staff have a positive Covid result, then special leave can be granted for a maximum of 10 days. We do still have a number of staff off with long Covid and expect an increase in short term illnesses over the winter months.
- 5.15 Work is ongoing to deliver training locally to service managers around managing absences and regular 'check ins' take place with Heads of Service to review named lists and identify where support may be required around instances of long term or repeat absences.

## **6. Areas for Improvement**

#### Alcohol and Drugs waiting times for referral to treatment

- 6.1 Performance has decreased for **Alcohol and Drugs waiting times for referral to treatment (Outcome 4)**. The % of patients seen within 3 weeks has dropped from 90.8% at March 2022 to 84.8% at September 2022.

- 6.2 The decrease in performance is partly due to service redesign and implementation which led to issues relating to compliance and data quality within recording systems. There are also ongoing challenges regarding the recruitment and retention of staff, as well as long term sickness absences. Performance has however improved from 76.2% of patients seen within 3 weeks at June 2022.

#### Smoking Cessation

- 6.3 Performance has changed from amber to red for **Smoking cessation - non-smokers at the 3-month follow-up in the 40% most deprived areas (Outcome 5)**. The most recent available data indicated that there were 28 quits at June 2022 compared to 48 at June 2021.
- 6.4 Smoking Cessation Services are now managed by NHSGGC rather than at local HSCP level. For Quarter one (April to June 2022), both the Quit Your Way (QYW) Specialist Services (Community, Acute, Maternity and Mental Health) and the QYW Pharmacy Services in NHSGGC experienced a large decline in quit attempts, impacting on the ability of the services to meet Local Delivery Plan (LDP) targets for quarter one. In Renfrewshire HSCP the QYW Pharmacy Services experienced a 45% drop in 3 month quits compared to quarter one 2021/22 while the QYW Specialist Services also saw a 39% drop.
- 6.5 There are likely to be several reasons for the reduction in quit attempts including:
- A lack of Varenicline, the most successful stop smoking medication available free on the NHS, has been unavailable since June 2021
  - Ongoing capacity challenges across pharmacies
  - Limited 'free' NHS venue access for face to face remobilisation of the QYW Community Services
- 6.6 The QYW Stop Smoking Services continue to link with key stakeholders to identify opportunities to raise the profile of the services. The QYW Pharmacy Service has recommenced pharmacy visits and pharmacy training, however the impact of these actions will not be realised until spring 2023.

#### Anticipatory Care Plans (ACPs)

- 6.7 The **number of adults with a new Anticipatory Care Plan (Outcome 2)** was 52 at September 2022 compared to 106 at September 2021.
- 6.8 The HSCP is currently developing local action plans to increase the number of Anticipatory Care Plans and Key Information Summaries (KIS) for patients which requires collaboration with local General Practitioners.

- 6.9 The newly formed Renfrewshire HSCP Anticipatory Care Plan (ACP) Implementation Group will also provide practical implementation and co-ordination of activity to achieve the ACP ambition outlined in the NHSGGC Unscheduled Care Joint Commissioning Plan.
- 6.10 We will also review our recording processes across KIS and Clinical Portal as we work to streamline the recording pathways. We will also consider how ACP conversations in care settings should be captured.

#### TURAS/Personal Development Plans – NHS Staff

- 6.11 The **% of health staff with a completed TURAS Profile/PDP (Outcome 8)** has decreased from 50.5% at March 2022 to 42.4% at September 2022. However, the data has just been updated to December 2022 and has increased to 51.09%.
- 6.12 Action is ongoing to increase TURAS compliance across the HSCP. As at July 2022, 7 HSCP Services were less than 40% compliant and as such were targeted to take lead responsibility on improving compliance towards the HSCP target of 80%. The trajectory that the HSCP is currently working towards is to improve overall compliance to 54% or higher by March 2023.
- 6.13 It should be noted that for services with a high turnover of staff, there is a direct impact on the maximum percentage of compliance that is possible, as new staff will not be included in the compliance totals until a review has been signed off. The percentage compliant does not occur until a member of staff has completed a full year in post and therefore limits the actual percentage of compliance a service can achieve.

#### Paediatric Speech & Language Therapy

- 6.14 There has been a reduction in the **% of children seen within 18 weeks for Paediatric Speech & Language Therapy assessment to appointment (Outcome 4)** from 52.7% at March 2022 to 35.4% at September 2022.
- 6.15 Speech & Language Therapy performance has been affected by staff vacancies and maternity leave, resulting in fewer appointments available for service users. Service demand is however returning to a more manageable level with the service averaging around 30 referrals per month for the financial year to date, compared to 41 per month for the financial year 2021/22. The service is also maintaining a 100% rate of first contact and triage waiting times within 8 weeks of referral target.

#### Sickness Absence – Adult Social Work Staff

- 6.16 The **sickness absence rate for HSCP Adult Social Work staff (work days lost per FTE) (Outcome 8)** was 11.54 days from April to September 2022 against a full year target of 15.3 days and currently has Red status.
- 6.17 Human Resources, Organisational Development and the Business World Team are working to improve the absence information available to managers. The improvements will streamline attendance related processes which will facilitate prompt absence recording and reporting across Council Services.
- 6.18 The Council is currently redesigning the current supporting attendance training courses, ensuring managers are fully equipped to manage staff absence and take accountability for their absence statistics.
- 6.19 To support employees with psychological absences, the council provides a range of support services that employees can be referred to at an early stage for assistance, such as the Council's Occupational Health Service and the Time for Talking employee counselling service.
- 6.20 Addressing absence management is a key priority for the Senior Management Team. Human Resources and Organisational Development Managers from NHSGGC and Renfrewshire Council continue to support Heads of Service and Service Managers with absence management

#### **7. Unscheduled Care Indicators**

- 7.1 At the 2022/23 mid-year position Scottish Government Ministerial Strategic Group (MSG) unscheduled care indicators have seen an improvement in performance relative to the 2021/2022 year end position.

#### A&E Attendances

- 7.2 At September 2022, A&E attendance figures were approximately 7.3% lower than for the same period in 2021. If performance continues at a similar rate until March 2023, the full 2022/23 year A&E attendance figures will be similar to 2020/21. NHSGGC continues to urge people to only attend A&E if their condition is serious.

#### Acute Delayed Discharge Bed Days Lost

- 7.3 The number of Acute delayed discharge bed days lost for April to September 2022 was 3,752 which was approximately a 14% decrease on the numbers recorded for the same period in 2021/22.

- 7.4 The split for the 3,752 Acute delayed discharge bed days lost in 2022/23 so far was 1,033 for standard delays and 2,719 for Code 9s. Examples of those patients included in Code 9s are Adults with Incapacity (AWI) going through a Guardianship process; patients delayed awaiting availability of a place in a specialist facility, where no facilities exist and an interim move would not be appropriate; patients delayed due to infection control measures; and patients for whom an interim move is not possible or reasonable.
- 7.5 While timescales for AWI/Guardianships are not within our control, we have a pro-active approach with families and solicitors on a case-by-case basis. Cases are regularly reviewed and solicitors are contacted frequently to ensure cases are progressed as swiftly as possible.
- 7.6 A number of patients recorded as Code 9 delays have very specific care needs requiring highly specialised individual care. There is a limited number of service providers at both a local and national level which, at current available capacity, is insufficient to meet the present demand for care packages.
- 7.7 Within a national context, at September 2022, Renfrewshire was the highest performing Local Authority area in Scotland for the financial year 2022/23 for Acute standard delays with 1,033 bed days lost, equating to a rate of 706.0 per 100,000 population. The national average rate at September 2022 for the financial year to date was 5,265.69 and the NHS Greater Glasgow and Clyde average was 3,606.3 per 100,000 population.

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## Implications of the Report

1. **Financial** – None
  2. **HR & Organisational Development** – None
  3. **Strategic Plan and Community Planning** – None
  4. **Wider Strategic Alignment** – None
  5. **Legal** – Meets the obligations under clause 4/4 of the Integration Scheme.
  6. **Property/Assets** – None
  7. **Information Technology** – None
  8. **Equality & Human Rights** – No EQIA has been carried out as this report does not represent a new policy, plan, service or strategy.
  9. **Fairer Duty Scotland** – None
  10. **Health & Safety** – None
  11. **Procurement** – None
  12. **Risk** – None
  13. **Privacy Impact** – None
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**List of Background Papers** – None.

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## Renfrewshire Integration Joint Board Scorecard 2022-2023







National Health and Wellbeing Outcomes	
1	People are able to look after and improve their own health and wellbeing and live in good health for longer
2	People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community
3	People who use health and social care services have positive experiences of those services, and have their dignity respected
4	Health and social care services are centred on helping to maintain or improve the quality of life of service users
5	Health and social care services contribute to reducing health inequalities
6	People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing
7	People using health and social care services are safe from harm
8	People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged in the work they do
9	Resources are used effectively in the provision of health and social care services









Performance Indicator Status		Direction of Travel		Target Source	
	Alert:		Improvement	<b>N</b>	National
	Warning:		Deterioration	<b>B</b>	NHSGGC Board
	Target achieved:		Same as previous reporting period	<b>L</b>	Local
	No targets:			<b>M</b>	MSG

This Performance Scorecard is for the financial Year 2022/23 and contains data for the period April to September 2022.









As previously outlined to the IJB, while the Scorecard Report continues to highlight how the Partnership has performed against the measures normally used for comparison year on year, it is difficult to draw direct comparisons to previous performance data due to the pandemic. The HSCP will therefore continue to proactively monitor performance trends to assess the impact of the pandemic throughout 2022/23.

## Section 1 – Performance Indicators with Targets

10 Red Indicators	Performance is more than 10% variance from target						
Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
1. Number of adults with a new Anticipatory Care Plan (Outcome 2)	201	185	52 (Sept 22)	221	↓		L
2. Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks (Outcome 3)	89.0%	88%	87.5% (Sept 22)	100%	↓		B
3. A&E waits less than 4 hours (Outcome 3)	88%	67.1%	70.1% (Sept 22)	95%	↑		N
4. Percentage of NHS staff who have passed the Fire Safety LearnPro module (Outcome 3)	84.4%	80.2%	78% (Sept 22)	90%	↓		B
5. Percentage of children seen within 18 weeks for paediatric Speech & Language Therapy assessment to appointment (Outcome 4)	63%	52.7%	35.4% (Sept 22)	95%	↓		B
6. Exclusive breastfeeding at 6-8 weeks in the most deprived areas (Outcome 5)	23.3%	11.8%	16.3% (June 22)	19.9%	↑		B

Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
7. Smoking cessation - non-smokers at the 3-month follow-up in the 40% most deprived areas (Outcome 5)	161	176	28 (June 22)	182			B
8. % of health staff with completed TURAS profile/PDP (Outcome 8)	41.7%	50.5%	42.4% (Sept 22)	80%			B
9. Sickness absence rate for HSCP NHS staff (Outcome 8)	5.65%	6.52%	6.18% (Sept 22)	4%			N
10. Sickness absence rate for HSCP Adult Social Work staff (work days lost per FTE) (Outcome 8)	13.5	17.79	11.54 (Sept 22)	15.3			L













12 Amber Indicators	Performance is less than 10% variance from target						
Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
11. Percentage of long term care clients receiving intensive home care (national target: 30%) (Outcome 2)	29%	29%	28% (Sept 22)	30%	↓	▲	N
12. Percentage of patients who started treatment within 18 weeks of referral to Psychological Therapies (Outcome 3)	86.8%	90.9%	84.3% (Sept 22)	90%	↓	▲	N
13. Alcohol and Drugs waiting times for referral to treatment. % seen within 3 weeks (Outcome 4)	98%	90.8%	84.8% (Sept 22)	Local Target 91.5% (National Target 90%)	↓	▲	L
14. Reduce the percentage of babies with a low birth weight (<2500g) (Outcome 4)	6.2%	6.8%	6.1% (Sept 22)	6%	↑	▲	B
15. Number of carers accessing training (Outcome 6)	165	282	122 (Sept 22)	257	↓	▲	L
16. Improve the overall iMatter staff response rate (Outcome 8)	Paused during COVID 19.	58%	59%	60%	↑	▲	B
17. Formulary compliance (Outcome 9)	77.6%	76.56%	76.98% (Sept 22)	78%	↑	▲	L
18. Prescribing cost per treated patient (Outcome 9)	£87.71	£88.28	£88.07 (Sept 22)	£86.63	↑	▲	L

Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
19. % of foot ulcers seen within 2 working days in NHSGGC (Outcome 9)	75.0%	83.7%	88.6% (Sept 22)	90%			B
20. % of foot ulcers seen within 2 working days in Renfrewshire (Clyde) (Outcome 9)	77.0%	84.6%	81.2% (Sept 22)	90%			B
21. % of new referrals to the Podiatry Service seen within 4 weeks in Renfrewshire (Clyde) (Outcome 9)	67.0%	41.4%	87.2% (Sept 22)	90%			B
22. % of new referrals to the Podiatry Service seen within 4 weeks in NHSGGC (Outcome 9)	62.0%	41%	82.4% (Sept 22)	90%			B






18 Green Indicators	Performance is on or exceeds target						
Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
23. Exclusive breastfeeding at 6-8 weeks (Outcome 1)	26.8%	19.7%	22.3% (June 22)	21.4%	↑	✓	B
24. Percentage of clients accessing out of hours home care services (65+) (Outcome 2)	90%	93%	91% (Sept 22)	85%	↓	✓	L
25. Homecare hours provided - rate per 1,000 population aged 65+ (Outcome 2)	390	411	432 (Sept 22)	420	↑	✓	L
26. Population of clients receiving telecare (75+) - Rate per 1,000 (Outcome 2)	46	58	117* (Sept 22)	60	↑	✓	L
27. Percentage of routine OT referrals allocated within 9 weeks (Outcome 2)	42%	68%	91% (Sept 22)	45%	↑	✓	L
28. Number of clients on the Occupational Therapy waiting list (as at position) (Outcome 2)	315	143	170 (Sept 22)	350	↓	✓	L
29. Child and Adolescents Mental Health (CAMHS) - % of patients seen within 18 weeks (Outcome 3)	70.1%	58.8%	98.5% (Sept 22)	80%	↑	✓	N
30. Uptake rate of child health 30-month assessment (Outcome 4)	87%	94.9%	92% (Sept 22)	80%	↓	✓	N
31. Percentage of children vaccinated against MMR at 24 months (Outcome 4)	98.5%	97.3%	97.5% (June 22)	95%	↑	✓	N
32. Percentage of children vaccinated against MMR at 5 years (Outcome 4)	96.8%	96.8%	96.6% (June 22)	95%	↓	✓	N
33. Reduce the rate of alcohol related hospital stays per 1,000 population (now rolling year data) (Outcome 4)	6.3	6.8	6.3 (Sept 22)	8.9	↑	✓	N
34. Percentage of paediatric Speech & Language Therapy wait times triaged within 8 weeks (Outcome 4)	100%	100%	100% (Sept 22)	100%	—	✓	B






\*The Telecare number is higher than expected due to a change in the reporting methodology, arising from the move to the ECLIPSE information management system. Previous years have under-reported the rate of the 75+ population receiving a telecare service and only included service users with 'enhanced alarms' which is those with peripherals like door and fall monitors. This revised indicator is for all service users including basic and enhanced alarms which provides a fuller and more accurate picture of the extent of the services use and uptake in the 75+ population





Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
35. Emergency admissions from care homes (Outcome 4)	506	400	182 (Sept 22)	450			L
36. Reduce the rate of pregnancies for those under 16 years of age (rate per 1,000 population) (Outcome 4)	1.0 (2018)	1.1 (2019)	1.2 (2020)	1.6			L
37. At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation (Outcome 4)	94.4%	93.7%	94.6% (Sept 22)	80%			N
38. Number of adult support plans completed for carers (age 18+) (Outcome 6)	86	148	Data not yet available	145			L
39. Number of new Adult Carers supported (Outcome 6)	815	963	466 (Sept 22)	913			L
40. % of complaints within HSCP responded to within 20 days (Outcome 8)	82%	90%	92.9% (Sept 22)	70%			B

## Section 2 – Performance Indicators without Targets

Ministerial Scottish Government Indicators (5)							
Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
41. Number of unscheduled hospital bed days; acute specialties (18+) (Outcome 2)	112,609	129,987	61,782p (Sept 22)	-	↑		M
42. Number of emergency admissions (18+) (Outcome 2)	14,399	17,372	7,248p (Sept 22)	-	↑		M
43. Number of Acute delayed discharge bed days (Outcome 2)	8,759	9,117	3,752 (Sept 22)	-	↑		M
44. Total number of A&E attendances (Outcome 9)	39,432	54,111	27,226 (Sept 22)	-	↓		M
45. Number of A&E attendances (18+) (Outcome 9)	31,892	40,601	20,201 (Sept 22)	-	↑		M

Safe from Harm Indicators (5)							
Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
46. Number of suicides (Outcome 7)	22 (2020)	25 (2021)	N/A	-	-		-
47. Number of Adult Protection contacts received (Outcome 7)	3,487	4,263	277 (Sept 22)	-	-		-
48. Total Mental Health Officer service activity (Outcome 7)	627	1,222	706 (Sept 22)	-	-		-
49. Number of Chief Social Worker Guardianships (as at position) (Outcome 7)	115	125	128 (Sept 22)	-	-		-
50. Percentage of children registered in this period who have previously been on the Child Protection Register (Outcome 7)	29%	30.4%	28% (Sept 22)	-	-		-

Prescribing Indicator (1)							
Performance Indicator	20/21 Value	21/22 Value	22/23 Value	Target	Direction of Travel	Status	Target Source
51. Prescribing variance from budget (Outcome 9)	5.72% under budget	3.43% under budget	1.05% Over Budget (Sept 22)	-			-

### Notes

p Denotes provisional data