
To: Renfrewshire Integration Joint Board

On: 22 November 2019

Report by: Chief Officer

Subject: Performance Management Mid-Year Report 2019/20

1. Summary

- 1.1 The purpose of this report is to update the IJB on mid-year performance for the financial year 2019/20 and covers the period April to September 2019. The full Scorecard updating all performance measures is attached as Appendix 2.
- 1.2 While this report is for the period April 2019 to September 2019, data is not yet available for all performance measures to September 2019. Information provided in the report is the most up to date available at this point.
- 1.3 The report provides an update on indicators from the Performance Scorecard 2019/20. There are 67 indicators of which 42 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 above target.
- 1.4 At the mid year point for 2019/20 the Scorecard shows the status of the 42 indicators that have targets set against them as:
- 11 red indicators (26%)
 - 9 amber indicators (22%)
 - 22 green indicators (52%)
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2. Recommendation

It is recommended that the IJB:

- Approves the Performance Management Mid-Year Report 2019/20 for Renfrewshire HSCP.
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3. Performance Reporting in 2019/20

- 3.1 The Scorecard is structured on the nine National Health and Wellbeing Outcomes. Feedback from our performance reporting during 2018/19 has been taken into account to ensure a balanced coverage in terms of services, outcomes and performance measures.

- 3.2 We have compiled a Dashboard (Appendix 1) to give an overview of key performance indicators for monitoring purposes. It shows four green indicators, four amber indicators and four red indicators. The purpose behind the Dashboard is to see at a glance the indicators that have the potential to move from green to amber, amber to red or vice versa.
- 3.3 Exception reports are attached as Appendix 3 to provide more detail on service waiting times that are currently performing below target.
- 3.4 There has been improved performance in 2019/20 for the following key indicators:
- 3.4.1 At September 2019 **the number of emergency admissions (18+)** (Outcome 2) was 9,085 and while this is above the mid year target point of 8,751 it is an improved position on this time last year at 9,292.
- 3.4.2 **The percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks** has seen an improvement since March 2019 when 86.5% of patients were seen within the target of 4 weeks (Outcome 3). At the end September 2019, 94% of patients were seen within 4 weeks. The status for this indicator has changed from red to amber.
- 3.4.3 There has been a further reduction in **the rate of pregnancies for those under 16 years of age** in Renfrewshire (Outcome 4). We achieved target in 2017/2018 with a rate of 3.1 per 1,000 population. This reduced further to 2.4 at Quarter 1 2018/19 and the latest data shows a further decrease to 1.5 at Quarter 2 2019/20. The downward trend in teenage pregnancies is welcomed as teenage pregnancy is linked to deprivation. Rates of teenage pregnancy in deprived areas are more than treble those of the least deprived areas.
- 3.4.4 **The percentage of children seen within 18 weeks for Paediatric Speech and Language Therapy assessment** (Outcome 4) has increased from 63% at March 2019 to 86.7% at September 2019 against the target of 95%. The status for this indicator has therefore changed from red to amber.
- 3.4.5 **Exclusive breastfeeding at 6-8 weeks in the most deprived areas** (Outcome 5) has seen an increase from 17.7% at March 2019 to 20.5% at September 2019 against a target of 19.9%. The status for this indicator has changed from red to green.
- 3.5 Performance has deteriorated in 2019/20 for the following key indicators:
- 3.5.1 **The number of delayed discharge bed days** (Outcome 2) was 3,722 at September 2019, above the target of 2,250 for April to September 2019. The annual target for 2019/20 is challenging at 4,500. Annual performance for 2018/19 was 6,085 delayed discharge bed days.
- An Acute Delays Action Plan has been developed with input from all HSCPs in Greater Glasgow and Clyde. The Renfrewshire Plan specifically focuses on Care at Home and timely discharge from

hospital. Work is underway to review packages of support in order to free up internal resource provision, ensuring we are maximising our responsiveness to demand. Acute, HSCP and Care at Home staff meet 3 times a day to discuss discharge planning and review active cases/delayed discharges and agree appropriate actions.

A comparison with the national picture shows that Renfrewshire HSCP continues to perform well in terms of delayed discharges.

- 3.5.2 **The average number of clients on the Social Work Occupational Therapy waiting list** has increased to 365 at September 2019 which is above the target of 350 (Outcome 2). There has been an upward trend in referrals which has impacted on service capacity. All Occupational Therapy cases are allocated in priority according to assessed risk. New referrals are screened within our duty system at the initial point of referral and then re-screened every 6 weeks to ensure there is no change in their level of need. Three posts are in the recruitment process and once in post we expect to see a positive impact on the waiting times list over the next three months.
- 3.5.3 Performance on **the percentage of long term care clients receiving intensive home care** (national target: 30%) was 25% at September 2019 (Outcome 2). The service is currently reviewing all service users to ensure that services are appropriate to meet individual needs.
- 3.5.4 There has been a reduction on **the percentage of patients seen within the 18 weeks target by the Renfrewshire Child and Adolescent Mental Health Service** from 82.5% at March 2019 to 64.2% at September 2019 (Outcome 3). An exception report for CAMHS is included within appendix 3 which details our actions to address performance.
- 3.5.5 At June 2019 **the percentage of children vaccinated against MMR at 24 months** was 94.7%, down from 96% at March 2019 and just under the target of 95% (Outcome 4). Renfrewshire's performance is above the Scotland rate of 93.9% and the NHSGGC rate of 94.4%.
- 3.5.6 There has been an increase in **the percentage of babies with a low birth weight (<2500g)** from 6.3% at March 2019 to 7.1% at June 2019 against the 6% target. (Outcome 4). The indicator's status has therefore moved from amber to red.

Smoking during pregnancy can cause a baby to be born too early or to have a low birth weight. It is also more likely the baby will be sick and have to stay in hospital longer. Smoking during and after pregnancy is also a risk factor of Sudden Infant Death Syndrome (SIDS). Taking account of this, we continue to increase awareness of the 'Quit Your Way' NHSGGC specialist Stop Smoking Service amongst HSCP Services and with our partner organisations. As part of this service a store card gift incentive programme is available to eligible pregnant

women who smoke tobacco and would like to stop. Research has shown that pregnant women are more likely to quit smoking and remain stopped when incentives are used together with stop smoking support.

In 2018/19, 253 referrals were made to the Royal Alexandra Hospital Service. 101 appointments were made with 73 attending (29% of all referrals). 61 set a quit date and 29 successfully stopped (48% quit rate). The service is now also provided in Johnstone Health Centre and Linwood Health Centre.

3.5.7 Reducing **sickness absence** remains a challenge for the HSCP (Outcome 8). The absence rate for NHS staff has increased from 5.39% at March 2019 to 6.38% at September 2019, above the 4% target. Renfrewshire Council HSCP staff registered 4.64 days lost per full time equivalent (FTE) at June 2019 against a quarter one target of 2.4 days.

Measures have been adopted to challenge and curtail absence levels including:

- A monthly top level absence report with performance trends against monthly targets produced and shared with the Senior Management Team
- Managers and staff are aware of the relaunched comprehensive guide to Attendance Management website which provides information, tools and resources
- Working closely with management teams to identify areas that require greater support, and employing strategies to support employees in those areas to return to work
- Promotion of the Healthy Working Lives initiative which includes health improvement activities such as flu jabs, and a toolkit for managers to promote staff resilience and mental health and wellbeing

3.5.8 **Waiting times across Podiatry Services** have dipped during the last quarter due to a combination of factors, including the availability of Podiatry bank staff to cover maternity leave, long term sickness absence and service vacancies. There have been higher than normal levels of long term sickness due to fractures, injuries and serious long term conditions including stroke, cancer and pulmonary fibrosis. We also continue to see a rise in the number of referrals into the Podiatry Service.

To address this, slot conversions have been reviewed across the service to ensure that new patient capacity is maximised at all tiers of the service, with specialist and advanced clinic slots being converted into generic new patient slots.

All sickness absence is being proactively managed appropriately via escalation and within process. In addition, all staff have been offered

additional hours and the further advertisement for bank staff is backed up with a marketing programme for the NHSGGC Podiatry Service.

The 'Attend Anywhere' pilot has also commenced in Renfrewshire.

Implications of the Report

1. **Financial** – None
2. **HR & Organisational Development** – None
3. **Community Planning** – None
4. **Legal** – Meets the obligations under clause 4/4 of the Integration Scheme.
5. **Property/Assets** – None
6. **Information Technology** – None
7. **Equality & Human Rights** – The recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement have been identified arising from the recommendations contained in the report. The downward trend in teenage pregnancies is welcomed as teenage pregnancy is linked to deprivation. Rates of teenage pregnancy in deprived areas are more than treble those of the least deprived areas.
8. **Health & Safety** – None
9. **Procurement** – None
10. **Risk** – None
11. **Privacy Impact** – None

List of Background Papers – None.

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Any enquiries regarding this paper should be directed to Frances Burns, Head of Strategic Planning and Health Improvement (Frances.Burns@renfrewshire.gov.uk / 0141 618 7656)




Dashboard Indicators








Appendix 1

	Perf.	Target
Reduce the rate of pregnancies for those under 16 years (rate per 1,000 population)	1.5	3.1
Number of carers accessing training	139	110
Uptake rate of child health 30-month assessment	95.5%	80%
At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation	94.4%	80%
Average number of clients on the Occupational Therapy waiting list	365	350
Percentage of staff who have passed the Fire Safety LearnPro module	86.2%	90%
Percentage of new referrals to the Podiatry Service seen within 4 weeks in Renfrewshire	85.6%	90%
Percentage of children seen within 18 weeks for paediatric SLT assessment to appointment	86.7%	95%
Child and Adolescents Mental Health (CAMHS) - % of patients seen within 18 weeks	64.2%	80%
Number of delayed discharge bed days	3,722	2,250
Sickness absence rate for HSCP NHS staff	6.38%	4%
Sickness absence rate for Adult Social Work staff (work days lost per FTE)	4.64	2.4










Renfrewshire Integration Joint Board Scorecard 2019-2020

Performance Indicator Status		Direction of Travel		Target Source	
	Target achieved		Improvement	N	National Target
	Warning		Deterioration	B	NHSGGC Board Target
	Alert		Same as previous reporting period	L	Local Target
	Data only			M	MSG Target

National Outcome 1 People are able to look after and improve their own health and wellbeing and live in good health for longer							
Performance Indicator	17/18 Value	18/19 Value	19/20 Value	Target	Direction of Travel	Status	Target Source
Exclusive breastfeeding at 6-8 weeks	23.4%	24.4%	Jun 19 23.0%	21.4%			B
Number of Alcohol brief interventions	549	306	Data not yet available	-	-		-

National Outcome 2 People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community							
Performance Indicator	17/18 Value	18/19 Value	19/20 Value	Target	Direction of Travel	Status	Target Source
Percentage of clients accessing out of hours home care services (65+)	89%	89%	Sep 19 89%	85%			L
Average number of clients on the Occupational Therapy waiting list	302	349	Sep 19 365	350			L
People newly diagnosed with dementia have a minimum of 1 year's post-diagnostic support	100%	100%	Sep 19 100%	100%			N
% waiting for dementia post-diagnostic support within 12 week standard	-	-	Sept 19 91.8%	2019-20 data will establish baseline	-		N









Appendix 2







Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Number of unscheduled hospital bed days; acute specialties (18+)	130,409	131,451	Sept 19 72,234	123,976			M
Number of emergency admissions (18+)	19,681	18,584	Sep 19 9,085	17,502			M
Percentage of long term care clients receiving intensive home care (national target: 30%)	28%	28%	Sep 19 25%	30%			N
Number of delayed discharge bed days	4,680	6,085	Sep 19 3,722	4,500			M
Homecare hours provided - rate per 1,000 population aged 65+	459	444	Annual indicator available June 2020	-	-		-
Percentage of homecare clients aged 65+ receiving personal care	99%	99%	Sep 19 99%	-	-		-
Population of clients receiving telecare (75+) - Rate per 1,000	39.47	40.17	Annual indicator available June 2020	-	-		-
Percentage of routine OT referrals allocated within 9 weeks	-	52%	Sep 19 46%	-	-		-
Number of adults with a new Anticipatory Care Plan	257	185	Sep 19 91	-	-		-

National Outcome 3		People who use health and social care services have positive experiences of those services, and have their dignity respected					
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Percentage of deaths in acute hospitals (65+)	41.9%	42.7%	Q1 data available Nov 19	42%			L
Percentage of deaths in acute hospitals (75+)	40.7%	41.6%	Q1 data available Nov 19	42%			L
Percentage of patients who started treatment within 18 weeks of referral to Psychological Therapies	100%	94%	Sep 19 94.9%	90%			N
Child and Adolescents Mental Health (CAMHS) - % of patients seen within 18 weeks	100%	82.5%	Sep 19 64.2%	80%			N
A&E waits less than 4 hours	84.9%	89.5%	Jul 19 87.6%	95%			N
Percentage of staff who have passed the Fire Safety LearnPro module	67%	45.6%	Sep 19 86.2%	90%			B
Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks.	79%	86.5%	Sep 19 94%	100%			B
Number of routine sensitive inquiries	178	249	Sep 19 148	-	-		-
Number of referrals made as a result of the routine sensitive inquiry being carried out	8	1	Sep 19 1	-	-		-






National Outcome 4		Health and social care services are centred on helping to maintain or improve the quality of life of service users					
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Reduce the rate of pregnancies for those under 16 years of age (rate per 1,000 population)	3.1	2.4	1.5	3.1	↑	✓	N
At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation	85.1%	93%	Jun 19 94.4%	80%	↑	✓	N
Uptake rate of child health 30-month assessment	89%	93%	Sep 19 95.5%	80%	↑	✓	N
Percentage of children vaccinated against MMR at 5 years	97.0%	97.2%	Jun 19 98.4%	95%	↑	✓	N
Percentage of children vaccinated against MMR at 24 months	95.5%	96.0%	Jun 19 94.7%	95%	↓	⚠	N
Reduction in the rate of alcohol related hospital stays per 1,000 population	9.0	8.8	Q1 data available Nov 19	8.9	↑	✓	N
Emergency admissions from care homes	-	-	Sep 19 349	-	-	📊	-
Percentage of paediatric Speech & Language Therapy wait times triaged within 8 weeks	100%	100%	Sep 19 100%	100%	▬	✓	B
Alcohol and Drugs waiting times for referral to treatment. % seen within 3 weeks	84.9%	71.4%	Sep 19 96% (Data to be verified)	91.5%	↑	✓	N






Appendix 2











Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Reduce drug related hospital stays - rate per 100,000 population	156.1	2018/19 data not available until 2020	2019/20 data not available until 2021	170			N
Reduce the percentage of babies with a low birth weight (<2500g)	7.0%	6.3%	Jun 19 7.1%	6%			B
Percentage of children seen within 18 weeks for paediatric Speech & Language Therapy assessment to appointment	73%	63%	Sept 19 86.7%	95%			B
Emergency bed days rate 65+ (rate per 1,000 population)	263	262	Aug 19 113	-	-		-
Number of readmissions to hospital 65+	1,337	1,368	Aug 19 575	-	-		-








National Outcome 5 Health and social care services contribute to reducing health inequalities							
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Smoking cessation - non-smokers at the 3 month follow up in the 40% most deprived areas	201	165	Jun 19 47	Q1 45			N
Exclusive breastfeeding at 6-8 weeks in the most deprived areas	14.5%	17.7%	Sep 19 20.5%	19.9%			B
Number of staff trained in sensitive routine enquiry	-	94	0	-	-		-
Number of staff trained in Risk Identification Checklist and referral to MARAC.	-	133 (Mental Health, Addictions, Children's Services Staff)	0 Training is arranged for Nov/Dec/ Feb	-	-		-

Appendix 2

National Outcome 6		People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing					
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Number of carers accessing training	242	229	Sep 19 139	220			L
Number of adult support plans completed for carers (age 18+)	-	93	Q1 25 Q2 late Nov 19	-	-		-
Number of adult support plans declined by carers (age 18+)	-	78	Q1 5 Q2 late Nov	-	-		-
Number of young carers' statements completed	-	78	Q1 19 Q2 late Nov	-	-		-

National Outcome 7		People using health and social care services are safe from harm					
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Number of suicides	23	13	Data available 2020	-	-		-
Number of Adult Protection contacts received	2,830	2,723	Sep 19 1,542	-	-		-
Total Mental Health Officer service activity	200	723	Sep 19 319	-	-		-
Number of Chief Social Worker Guardianships (as at position)	117	113	Sep 19 118	-	-		-
Percentage of children registered in this period who have previously been on the Child Protection Register	23%	24%	Sep 19 28%	-	-		-

National Outcome 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							
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
% of health staff with completed TURAS profile/PDP	75.8%	48.7%	Sept 19 62.6%	80%			B
Improve the overall iMatter staff response rate	59%	64%	Annual indicator, due Mar 2020	60%			B
% of complaints within HSCP responded to within 20 days	76%	81%	Sep 19 82%	70%			B
Sickness absence rate for HSCP NHS staff	5.5%	5.39%	Sep 19 6.38%	4%			N
Sickness absence rate for HSCP Adult Social Work staff (work days lost per FTE)	15.71	17.43	Jun 19 4.64	Annual 15.3 days (Q1) 2.4 days			L

National Outcome 9 Resources are used effectively in the provision of health and social care services							
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Formulary compliance	79.7%	78.5%	Jun 19 78.4%	78%			L
Prescribing cost per treated patient	£83.70	£83.23	Jun 19 £83.87	£86.63			L
Total number of A&E attendances	56,681	61,175	Jul 19 21,060	56,119			M
Total number of A&E attendances (18+)	-	-	Sep 19 24,827	45,123	-		

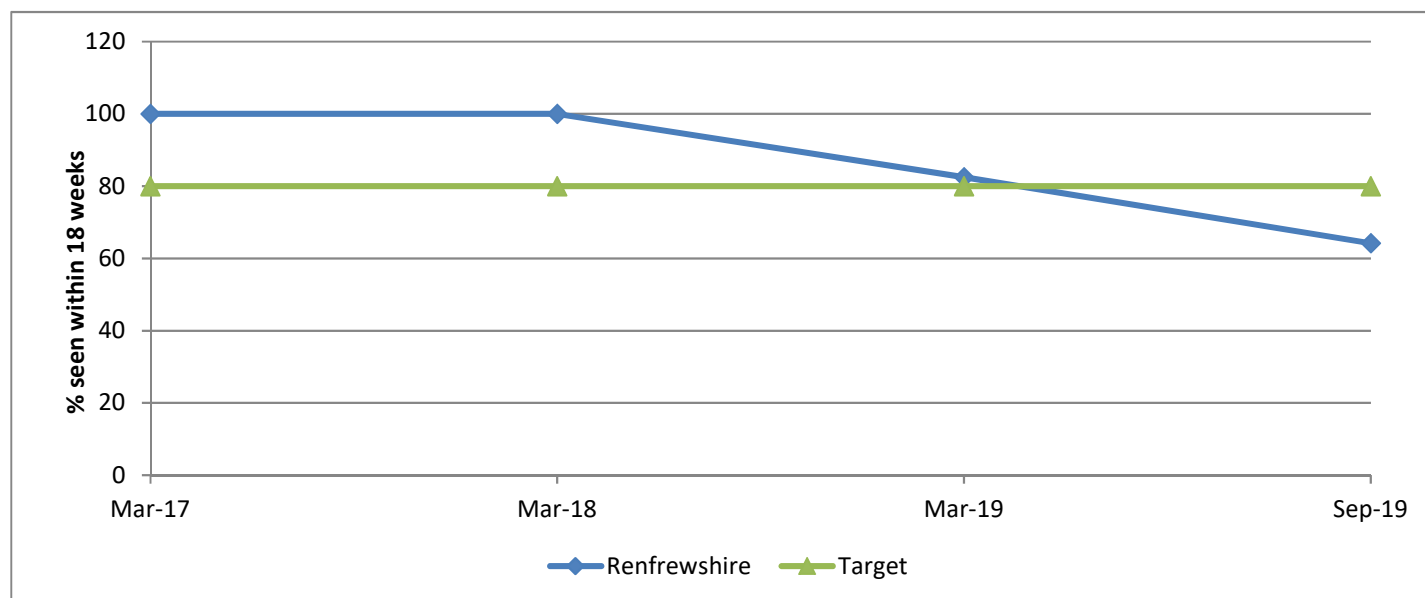
Appendix 2

Performance Indicator	17/18	18/19	18/19	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Care at Home costs per hour (65 and over)	£22.40	Annual Indicator Due early 2020	Annual Indicator Due early 2021	-	-		-
Direct Payment spend on adults 18+ as a % of total social work spend on adults 18+	4.25%	Annual Indicator Due early 2020	Annual Indicator Due early 2020	-	-		-
Net residential costs per week for older persons (over 65)	£414	Annual Indicator Due early 2020	Annual Indicator Due early 2020	-	-		-
Prescribing variance from budget	3.95% over budget	0.5% over budget	2.00% under budget (projected figure)	-	-		-
% of new referrals to the Podiatry Service seen within 4 weeks in Renfrewshire	96.6%	95.4%	85.6%	90%			B
% of new referrals to the Podiatry Service seen within 4 weeks in NHS GG&C	97.4%	93.5%	90%	90%			B
% of diabetic foot ulcers seen within 4 weeks in Renfrewshire (Clyde)	93.7%	91.1%	79.4%	90%			B
% of diabetic foot ulcers seen within 4 weeks in NHS GG&C	90.5%	87.4%	92.5%	90%			B

Exception Report:

Child and Adolescents Mental Health (CAMHS) – Percentage of patients seen within 18 weeks – Outcome 3

Measure	Child and Adolescents Mental Health (CAMHS) – % of patients seen within 18 weeks
Current Performance	At September 2019, 64.2% of patients were seen within 18 weeks
Lead	Jackie Dougall, Head of Primary Care and Community Services, West Renfrewshire

**Commentary**

The graph above shows a decline in performance from March 2019 when 82.5% of patients were seen within 18 weeks compared to 100% at March 2018. Renfrewshire is below the NHS GGC rate of 73.8%.

Actions to Address Performance

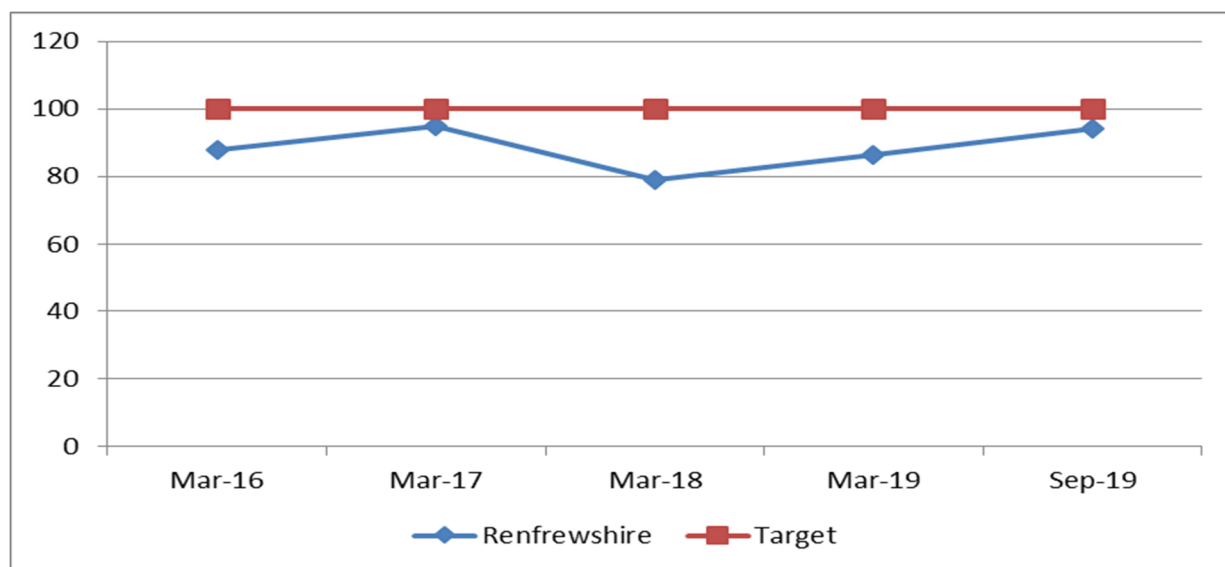
CAMHS Waiting Times has shown an increase due to the requirement to reduce the percentage of rejected referrals from around 40% to 18-22%, in keeping with the Scottish Government target. The service rejected referral rate has been consistently around 10-12%, for the past six months. This has required an increase in the number of appointments offered by the team. The CAMHS team will address this by streamlining the first appointments by increasing the range of options for partnership appointments. In addition, two temporary posts are being recruited to in order to assist with the increased volume of referrals and allow implementation of the new processes.

Timeline For Improvement

The recruitment process for the additional posts should be completed by the end of the year, thus improving capacity within the service. In the meantime, the service is offering additional hours to available staff utilising the vacancy funding to mitigate any extended delays and a planned improvement in waiting times is expected to be seen in early 2020.

Exception Report: % of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks – Outcome 3

Measure	% of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks
Current Performance	At the end of September 2019, 94% of patients were seen within 4 weeks
Lead	Christine Lavery, Head of Mental Health, Learning Disabilities and Addiction Services



Commentary

At year end March 2019 we reported an increase in performance to 86.5% from 79% at March 2018. We are pleased to report a further increase to 94% at September 2019. Although still below the target of 100%, this indicator's status has changed from red to amber,

Actions to Improve Performance

The Nurse Team Leader will carry out the following to mitigate performance:

- Continue to review demand on service from GP and self-referrals
- Utilise resources appropriately to meet demand
- Screen referrals on a daily basis to ensure prompt action is taken and consider correct patient pathway for treatment
- Where possible, cover any staff annual leave impacting on telephone assessment clinic
- Support staff in facilitating face to face assessments at community venues and GP practices
- Ensure recruitment is facilitated promptly as and when required.

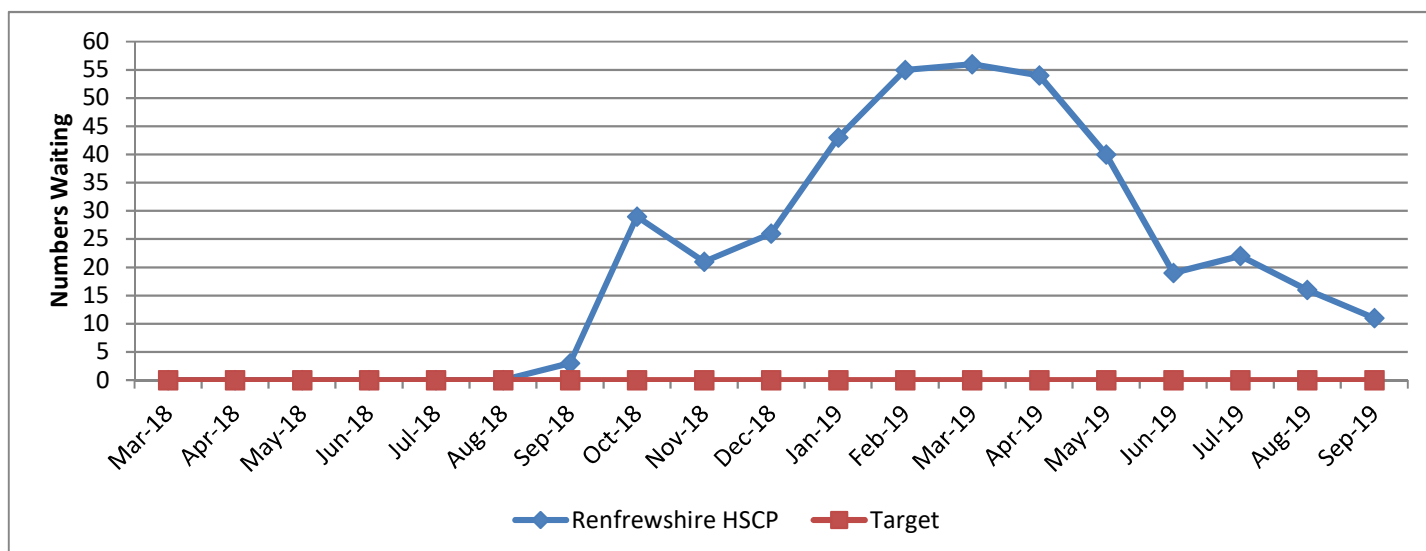
Timeline For Improvement

The Doing Well Service will strive to continue to improve performance of 94%. However future difficulties may be encountered as one part-time staff member has left (0.8wte), one full-time staff member has tendered their notice, and another has lodged their intention to retire within six months. October and November are historically the busiest months of the year in terms of referrals to the service, so the loss of these staff members may inhibit continued improvement.

Exception Report:

Number waiting more than 18 weeks for paediatric Speech & Language Therapy assessment to appointment – Outcome 4

Measure	Number waiting more than 18 weeks for paediatric Speech & Language Therapy assessment to appointment.
Current Performance	As at September 2019, 11 children were waiting more than 18 weeks for a Paediatric Speech & Language appointment following assessment.
Lead	Jackie Dougall, Head of Primary Care and Community Services, West Renfrewshire

**Commentary**

There were no children waiting over 18 weeks for an appointment following assessment for the period March-August 2018. Performance began to deteriorate at September 2018, with 56 children waiting over 18 weeks at March 2019. Performance has improved significantly during Quarters 1 and 2 of 2019/20, with 54 children waiting over 18 weeks at April 19, reducing to 19 by June, 16 at August and 11 at September 2019.

Actions to Address Performance

1. Background/context: 0.5 WTE (Whole Time Equivalent) maternity leave, 0.6 WTE long term sickness absence, 0.4 WTE Team Lead fixed term reduction in contract, 2.69 WTE permanent reduction in staffing following SLA reconfiguration.
2. 0.6 WTE vacancy has been filled and additional fixed term sessions agreed until 31/12/19 (within budget).
3. Support from Human Resources in line with policy to manage long term sickness.
4. Self-booking for initial appointments to minimise DNA (Did Not Attend) and CNA (Cannot Attend).

Timeline For Improvement

1. All children currently waiting more than 16 weeks have an appointment in October 2019. This will reduce the longest wait to 18 weeks by the end of October 2019.
2. Parents who cancel an appointment offered in October 2019 will wait longer than 18 weeks for a second re-arranged appointment.
3. Sustaining this waiting time will be challenging when fixed term additional sessions end in December 2019.