

# NHS Shetland

<b>Meeting:</b>	<b>NHS Board Meeting</b>
<b>Meeting date:</b>	<b>15<sup>th</sup> February 2022</b>
<b>Agenda reference:</b>	<b>Board Paper 2021/22/62</b>
<b>Title:</b>	<b>Performance Report Quarter 3: October – December 2021</b>
<b>Responsible Executive/Non-Executive:</b>	<b>Michael Dickson, Chief Executive</b>
<b>Report Author:</b>	<b>Elizabeth Robinson, Public Health and Planning Principal</b>

## 1 Purpose

**This is presented to the Board for:**

- Awareness

**This report relates to:**

- Remobilisation Plan/Annual Operating Plan

**This aligns to the following NHSScotland quality ambition(s):**

- Safe
- Effective
- Person Centred

## 2 Report summary

### 2.1 Situation

The Board is provided with a Quarterly Report on key performance indicators up to December 2021.

### 2.2 Background

The Board adopted a Performance Management Framework in 2019, ([Performance Management Framework 2019 - 2024 \(scot.nhs.uk\)](https://www.scot.nhs.uk/performance-management-framework-2019-2024)) which described the following responsibilities; that the Board should:

- Drive a culture of performance
- Ensure performance against Strategic Objectives
- Review performance; challenge and problem solve actions being proposed to address problems

- Address cross-functional issues
- Adjust resource inputs to meet priority targets / measure

It is recognised that the Quarterly Performance report, in its current form, does not enable this level of scrutiny and assurance, and work is being undertaken to address this; meanwhile the Board is asked to note and comment on any issues they see as significant to sustaining and progressing NHS Shetland's performance.

## **2.3 Assessment**

The ongoing COVID pandemic continues to impact on delivery of services, and the organisation continues to develop its staffing and service models in order to meet existing and developing needs of the population.

### **2.3.1 Quality/ Patient Care**

Patient care is being maintained by the use of locum and agency staff at present, in order to maintain safe staffing models in essential services. Long term sustainable staffing models remain a top priority in order to provide more effective and efficient use of resources. This should improve the ability to create our objective of patient centred care through ensuring sufficient organisational capacity and resilience.

### **2.3.2 Workforce**

A comprehensive programme of staff health and wellbeing support is ongoing, but our teams are often small with wide-remits, which creates fragility. The transmissibility of the Omicron variant of COVID continues to contribute to this fragility.

### **2.3.3 Financial**

The 2021-22 Financial Performance Management Report Update – Month 9, December 2021 provides information on the Remobilisation Plan funding received to date. However, there will still be a need to balance ongoing demand for higher levels of service provision with the ending of Remobilisation funding in March 2022.

### **2.3.4 Risk Assessment/Management**

Risk is managed via the Executive Management Team as part of the Board's Risk Management Strategy.

### **2.3.5 Equality and Diversity, including health inequalities**

A formal impact assessment was not completed on this year's Annual Operational Plan (Remobilisation Plan); however tackling inequalities is a theme which underpins and runs through our remobilisation and annual operational planning.

### **2.3.6 Other impacts**

NA.

### **2.3.7 Communication, involvement, engagement and consultations**

No communication and consultation has taken place prior to submission to the Board.

### **2.3.8 Route to the Meeting**

This report was not considered by other committees prior to submission to the Board.

## **2.4 Recommendation**

- **Awareness** – For Members' information only.

## **3 List of appendices**

The following appendix is included with this report:


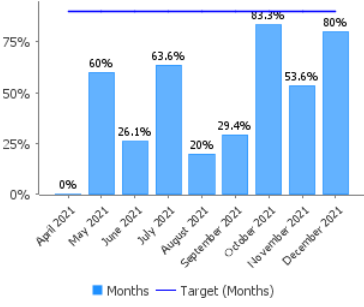

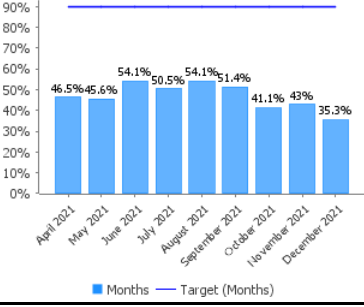

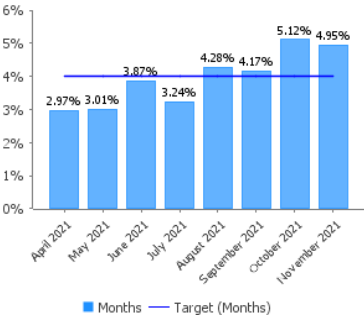
- Appendix 1 : NHS Shetland Performance Report 2021-22 Quarter 3




# NHS Shetland Performance Report - Monthly Indicators


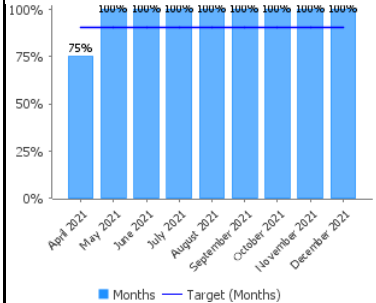

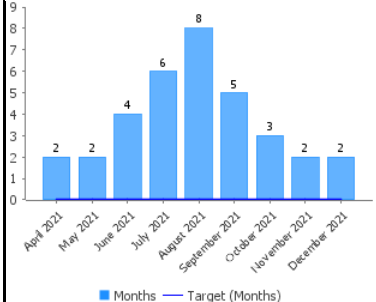

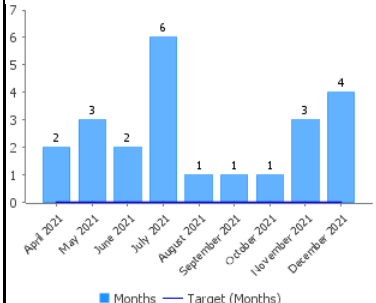
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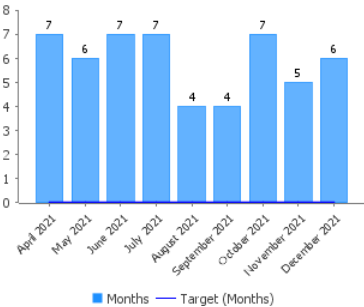

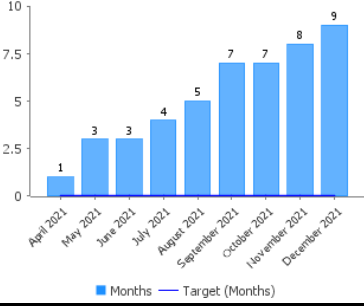

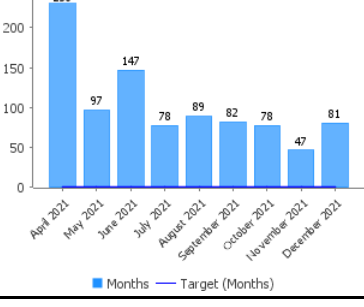


Indicator	Years		Quarters				Months			Target		Graphs	Note
	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	October 2021	November 2021	December 2021	December 2021			
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status		
CH-DD-01 Delayed Discharges - total number of people waiting to be discharged from hospital into a more appropriate care setting, once treatment is complete, excluding complex needs codes.	1	0	0	1	3	3	1	2	3	0			
CH-DD-02 Delayed Discharges - number of people waiting more than 14 days to be discharged from hospital into a more appropriate care setting, once treatment is complete, excluding complex needs codes.	1	0	0	0	2	1	0	0	1	0			


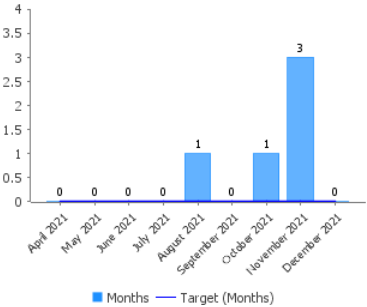

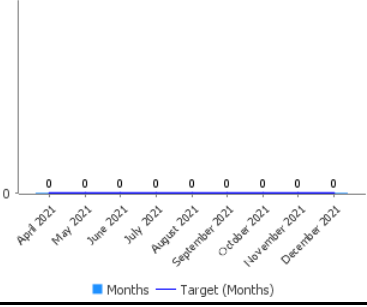

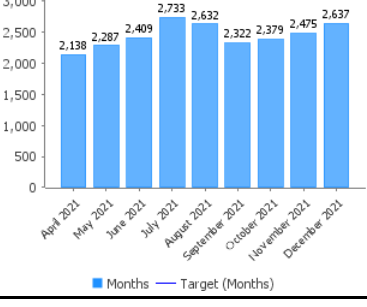
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	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status		
CH-MH-01 18 weeks referral to treatment for Psychological Therapies (percentage of completed waits less than 18 weeks)	29%	19%	28.6%	27.3%	39.4%	67.9%	83.3%	53.6%	80%	90%			09-Feb-2022 A Psychological Therapies Recovery plan has been submitted and approved by the NHS Health Board that sets out different ways of working that will enable the long waits to be addressed over the coming 6 months. Additional resources are currently being sought via the remobilisation plan. From October 2021 cCBT (online) waits are now being included in these figures. The wait is calculated from referral to date activation code received.
CH-MH-02 18 weeks referral to treatment for Psychological Therapies (percentage of ongoing waits less than 18 weeks)	35.1%	47.8%	47.8%	54.1%	51.4%	35.3%	41.1%	43%	35.3%	90%			09-Feb-2022 As above
HR-HI-01 NHS Boards to Achieve a Sickness Absence Rate of 4%	4.52%	3.39%	3.39%	3.87%	4.17%	4.95%	5.12%	4.95%	N/A	4%			14-Jan-2022 The monthly figure for Nov 21 shown is well below the Scottish average for the month but missing the 4% target. For the rolling 12 month period 1 Dec 20 to 30 Nov 21 the percentage absence rate is 3.7, which is well below the Scottish average and the 4% target. Short and long term absences are below the Scottish average for the month. We are


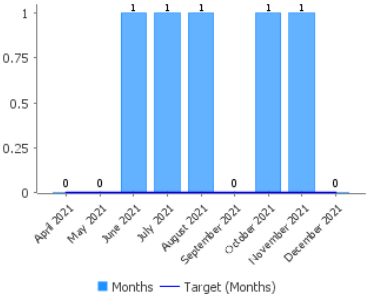

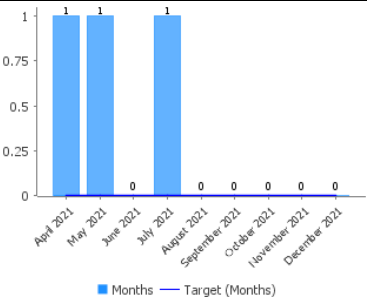

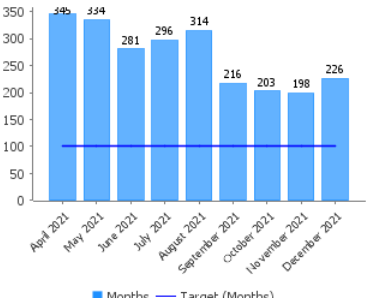
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													also below the Scottish average for long and short term rolling year.																														
HR-IT-01 The percentage of freedom of information requests due a response in the month which received a response within 20 working days	92.2%	86%	87.4%	91.4%	85.6%	86.8%	88.2%	94.9%	79.2%	90%		<table border="1"> <caption>HR-IT-01 Performance Data</caption> <thead> <tr> <th>Month</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>April 2021</td><td>90.9%</td><td>90%</td></tr> <tr><td>May 2021</td><td>80%</td><td>90%</td></tr> <tr><td>June 2021</td><td>100%</td><td>90%</td></tr> <tr><td>July 2021</td><td>92.3%</td><td>90%</td></tr> <tr><td>August 2021</td><td>86.1%</td><td>90%</td></tr> <tr><td>September 2021</td><td>78.6%</td><td>90%</td></tr> <tr><td>October 2021</td><td>88.2%</td><td>90%</td></tr> <tr><td>November 2021</td><td>94.9%</td><td>90%</td></tr> <tr><td>December 2021</td><td>79.2%</td><td>90%</td></tr> </tbody> </table>	Month	Value	Target	April 2021	90.9%	90%	May 2021	80%	90%	June 2021	100%	90%	July 2021	92.3%	90%	August 2021	86.1%	90%	September 2021	78.6%	90%	October 2021	88.2%	90%	November 2021	94.9%	90%	December 2021	79.2%	90%	09-Feb-2022 Of the 10 requests not completed in time in December, 5 were completed late, 4 are still open and 1 required clarification from the requester. This was sought, but has not been received so this request will be closed.
Month	Value	Target																																									
April 2021	90.9%	90%																																									
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MD-EC-01 Emergency bed days rates for people aged 75+	4,309	3,578	932	764	1,097	1,062	316	370	376	500		<table border="1"> <caption>MD-EC-01 Performance Data</caption> <thead> <tr> <th>Month</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>April 2021</td><td>296</td><td>500</td></tr> <tr><td>May 2021</td><td>197</td><td>500</td></tr> <tr><td>June 2021</td><td>271</td><td>500</td></tr> <tr><td>July 2021</td><td>402</td><td>500</td></tr> <tr><td>August 2021</td><td>365</td><td>500</td></tr> <tr><td>September 2021</td><td>330</td><td>500</td></tr> <tr><td>October 2021</td><td>316</td><td>500</td></tr> <tr><td>November 2021</td><td>370</td><td>500</td></tr> <tr><td>December 2021</td><td>376</td><td>500</td></tr> </tbody> </table>	Month	Value	Target	April 2021	296	500	May 2021	197	500	June 2021	271	500	July 2021	402	500	August 2021	365	500	September 2021	330	500	October 2021	316	500	November 2021	370	500	December 2021	376	500	
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MD-MH-01 People with a diagnosis of dementia on the dementia register	216	212	212	207	208	204	209	212	204	184		<table border="1"> <caption>MD-MH-01 Performance Data</caption> <thead> <tr> <th>Month</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>April 2021</td><td>209</td><td>184</td></tr> <tr><td>May 2021</td><td>211</td><td>184</td></tr> <tr><td>June 2021</td><td>207</td><td>184</td></tr> <tr><td>July 2021</td><td>205</td><td>184</td></tr> <tr><td>August 2021</td><td>206</td><td>184</td></tr> <tr><td>September 2021</td><td>208</td><td>184</td></tr> <tr><td>October 2021</td><td>209</td><td>184</td></tr> <tr><td>November 2021</td><td>212</td><td>184</td></tr> <tr><td>December 2021</td><td>204</td><td>184</td></tr> </tbody> </table>	Month	Value	Target	April 2021	209	184	May 2021	211	184	June 2021	207	184	July 2021	205	184	August 2021	206	184	September 2021	208	184	October 2021	209	184	November 2021	212	184	December 2021	204	184	
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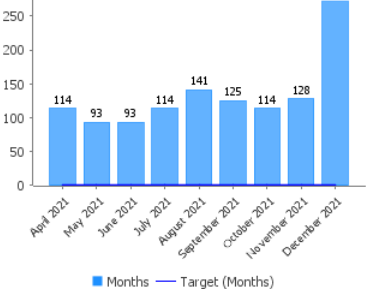

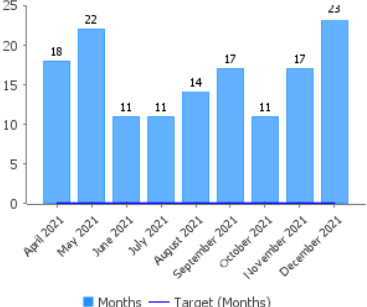

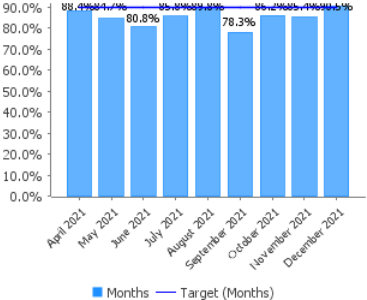
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	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status			
NA-CF-01 18 weeks referral to treatment for specialist Child and Adolescent Mental Health Services (percentage of completed waits less than 18 weeks)	94.52%	60.29%	42.86%	89.29%	100%	100%	100%	100%	100%	100%	90%			
NA-DI-01 Number of cases where the Upper GI endoscopy ongoing waiting time was greater than 6 weeks	0	3	3	4	5	2	3	2	2	0				
NA-DI-02 Number of cases where the Lower endoscopy (excluding colonoscopy) ongoing waiting time was greater than 6 weeks	2	2	2	2	1	4	1	3	4	0			07-Feb-2022 Ongoing reduction in capacity due to issues with the endoscope washer disinfecter, which is due for replacement in 2022 - Q1	



Indicator	Years		Quarters				Months			Target		Graphs	Note
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	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status		
NA-DI-03 Number of cases where the colonoscopy ongoing waiting time was greater than 6 weeks	1	5	5	7	4	6	7	5	6	0			07-Feb-2022 Remobilisation of services has seen this service fully delivered locally, albeit with reduced throughput due to covid precautions. Additional reduction in capacity due to ongoing issues with endoscope washer disinfectant, will be resolved when the washer is replaced in Q1 2022.
NA-DI-04 Number of cases where the cystoscopy ongoing waiting time was greater than 6 weeks	0	2	2	3	7	9	7	8	9	0			07-Feb-2022 Remobilisation of services has seen this service fully delivered locally, albeit with reduced throughput due to covid precautions and also ongoing issues with the endoscope washer disinfectant, which is due to be replaced in 2022 - Q1.
NA-DI-05 Number of cases where the non-obstetric ultrasound scan ongoing waiting time was greater than 6 weeks	14	150	150	147	82	81	78	47	81	0			10-Feb-2022 Meeting the two-week wait target for urgent ultrasound requests. Negotiating with NHS Grampian to see if Shetland patients can be seen at ARI if radiologist visits are not possible.



Indicator	Years		Quarters				Months			Target		Graphs	Note	
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	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status			
NA-DI-06 Number of cases where the CT scan ongoing waiting time was greater than 6 weeks	3	0	0	0	0	0	1	3	0	0	0			
NA-DI-07 Number of cases where the Barium enema test ongoing waiting time was greater than 6 weeks	0	0	0	0	0	0	0	0	0	0	0			
NA-EC-02 Rate of attendance at A&E (per 100,000 pop.)	1,954	1,867	1,867	2,409	2,322	2,637	2,379	2,475	2,637	3,061	3,061			

Indicator	Years		Quarters				Months			Target		Graphs	Note	
	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	October 2021	November 2021	December 2021	December 2021				
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status			
NA-IC-28 Number of Staphylococcus aureus bacteraemia infections (including MRSA)	7	4	0	1	2	2	1	1	0	0	0			
NA-IC-29 Number of C Diff Infections	5	6	1	2	1	0	0	0	0	0	0			
NA-PL-01 Number of patients waiting more than 12 weeks from referral to a first outpatient appointment (consultant led services)	1,737	5,437	1,179	960	826	627	203	198	226	100	100			07-Feb-2022 Remobilisation of local and visiting services from NHS Grampian now see services delivered in a hybrid model of face to face, NearMe and telephone clinics.

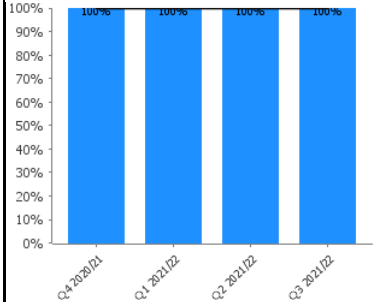
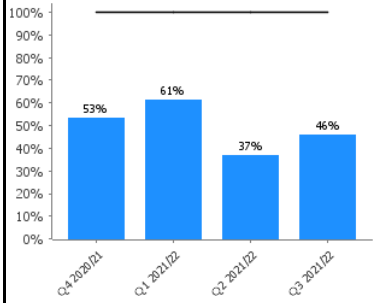
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	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status		
NA-PL-03 Treatment Time Guarantee - 12 weeks from being added to Inpatient waiting list to having procedure	319	1,702	305	300	380	513	114	128	271	0		 <p>07-Feb-2022 All local and visiting services are being delivered locally, albeit with reduced capacity. Clinical prioritisation ensures that patients are treated based on their clinical need. Also some lower limb orthopaedics have also been able to be repatriated from the mainland to be seen locally in a Vanguard theatre.</p>	
NA-PL-04 Number of patients waiting more than 12 weeks from referral to a first outpatient appointment (Orthodontic Service)	60	314	33	51	42	51	11	17	23	0		 <p>07-Feb-2022 As remobilisation continues for this service, appointments are still being provided remotely by a long term locum, therefore capacity is still reduced. Clinical prioritisation utilised to ensure patients seen by clinical need.</p>	
NA-PL-05 18 Weeks Referral to Treatment: Combined Performance	86.9%	83.6%	82.8%	84.6%	84.4%	87.1%	86.2%	85.4%	90.5%	90.0%			


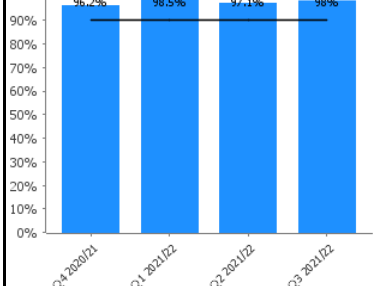

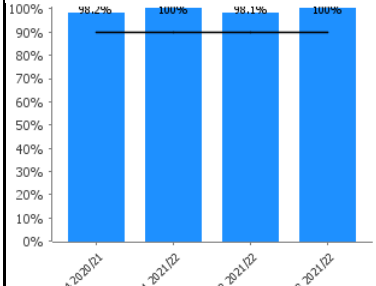

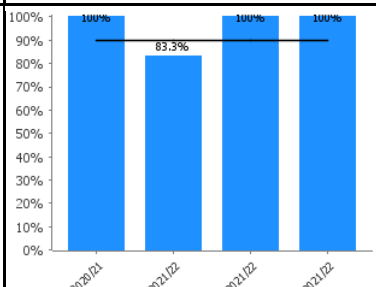
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PH-HI-05 Number of successful smoking quits at 12 weeks post quit for people residing in the 60 per cent most-deprived datazones in Shetland	21	24	24	11	18	19	19	N/A	N/A	21			09-Feb-2022 October data latest available due to 12 week follow up period.


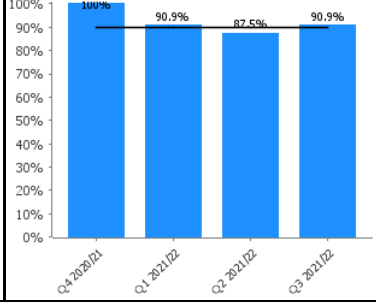

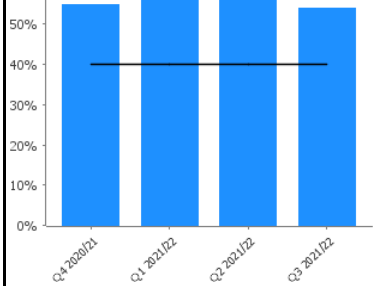

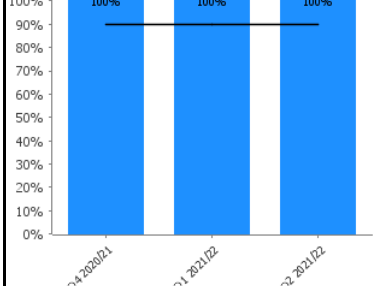
# NHS Shetland Performance Report - Quarterly Indicators


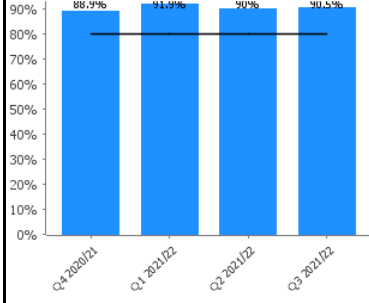

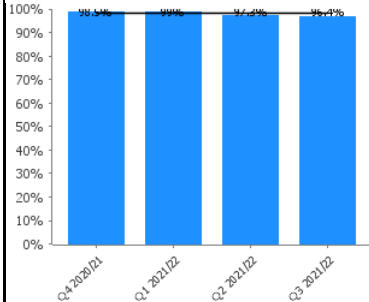

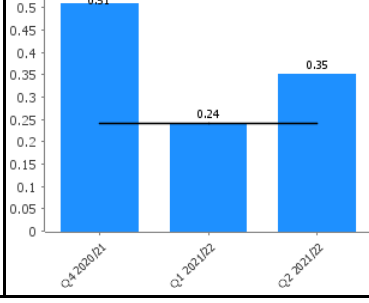
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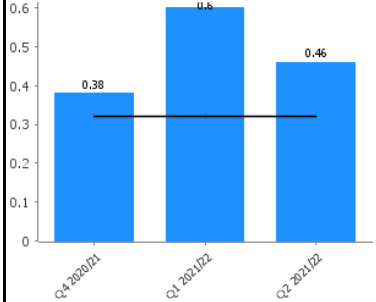

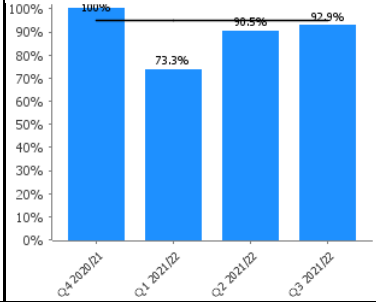

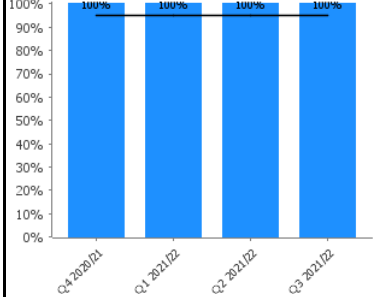
Indicator	Years		Quarters				Target		Graphs	Note
	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q3 2021/22			
	Value	Value	Value	Value	Value	Value	Target	Status		
CE-CS-05 Departmental Business Continuity Plans (BCPs) to be completed for all departments	100%	100%	100%	100%	100%	100%	100%			
CE-CS-06 Departmental Business Continuity Plans (BCPs) to be updated annually	78%	53%	53%	61%	37%	46%	100%			08-Feb-2022 We are currently embarking on the analysis phase of the BC lifecycle and a new Business Impact Analysis tool was launched in January. There is ongoing support for managers, in the completion of this tool, before moving into the design phase, which will hopefully lead to the creation of qualitatively better BCPs. We will be asking for an update on people's progress during February in order to improve compliance levels.


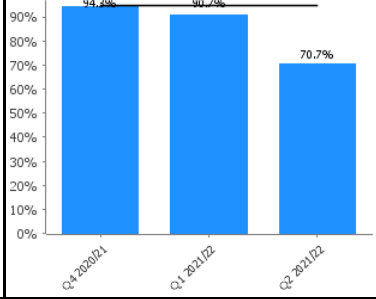
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	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q3 2021/22			
	Value	Value	Value	Value	Value	Value	Target	Status		
CE-IC-01 Cleaning Specification Audit Compliance	98.1%	96.2%	96.2%	98.5%	97.1%	98%	90%			
CH-AO-01 Maximum Waiting Time from Referral to First Consultation for Physiotherapy Services - %age of patients seen within 18 weeks	99.6%	98.2%	98.2%	100%	98.1%	100%	90%			
CH-DA-01 Clients will wait no longer than 3 weeks from referral received to appropriate drug treatment that supports their recovery.	96.7%	100%	100%	83.3%	100%	100%	90%			

Indicator	Years		Quarters				Target		Graphs	Note
	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q3 2021/22			
	Value	Value	Value	Value	Value	Value	Target	Status		
CH-DA-02 Clients will wait no longer than 3 weeks from referral received to appropriate alcohol treatment that supports their recovery.	94%	100%	100%	90.9%	87.5%	90.9%	90%			
CH-SC-01 Percentage of people that require intensive care (over 10 hours per week) that receive it in their own home.	53%	55%	55%	57%	57%	54%	40%			24-Jan-2022 Enabling people to be as independent and safe as possible remains one of our primary aims. We continue to provide appropriate support in people's own home to assist in achieving this.
NA-CF-02 Eligible patients will commence IVF treatment within 12 months	100%	100%	100%	100%	100%	N/A	90%			04-Feb-2022 Q3 data to be published in Mar 22.

Indicator	Years		Quarters				Target		Graphs	Note
	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q3 2021/22			
	Value	Value	Value	Value	Value	Value	Target	Status		
NA-CF-05 At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation so as to ensure improvements in breast feeding rates and other important health behaviours.	89.3%	88.9%	88.9%	91.9%	90%	90.5%	80%			04-Feb-2022 Provisional figures from NSS Discovery for the year ending December 2021 show the rate for our lowest SIMD quintile is 90.5% meeting the 80% target. Our overall rate is 96.6%, which equates to 170 of 176 pregnant women having booked by the 12th week of gestation.
NA-EC-01 A&E 4 Hour waits (NIPI03b)	95%	98.1%	98.5%	99%	97.3%	96.4%	98%			
NA-IC-26 Staphylococcus aureus bacteraemia infections (including MRSA) (rate per 1,000 acute occupied bed days)	0.19	0.51	0.51	0.24	0.35	N/A	0.24			04-Feb-2022 These are the latest figures reported nationally (Quarter ending Sept 21). There were 2 SABs in this quarter. The overall rate for the preceding 12 months decreased to 0.35 per 1000 AOB (3 SAB infections), missing the target of 0.24. Next data available Apr 22.



Indicator	Years		Quarters				Target		Graphs	Note
	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q3 2021/22			
	Value	Value	Value	Value	Value	Value	Target	Status		
NA-IC-27 Clostridium difficile infections in patients aged 15 and over per 1,000 total occupied bed days	0.48	0.38	0.38	0.6	0.46	N/A	0.32			04-Feb-2022 These are the latest figures published nationally (Quarter ending Sept 21). There was one C Diff infection in this quarter. The overall rate for the preceding 12 months reduced to 0.46 per 1000 OBD (4 C Diff infections), missing the target of 0.32 but still well within our expected rate. Next data available Apr 22.
NA-PL-06 Urgent Referral With Suspicion of Cancer to Treatment Under 62 days	94.2%	94.6%	100%	73.3%	90.5%	92.9%	95%			
NA-PL-07 Decision to treat to first treatment for all patients diagnosed with cancer - 31 days	97.1%	98%	100%	100%	100%	100%	95%			


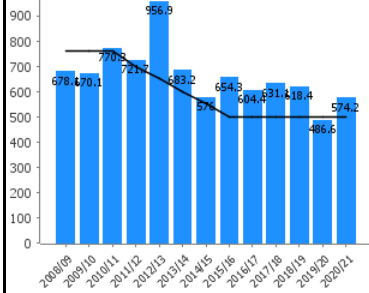

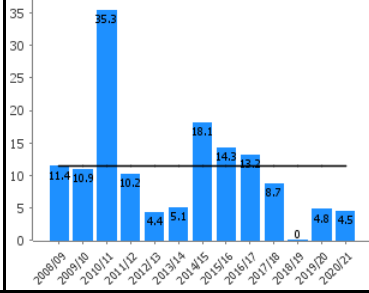

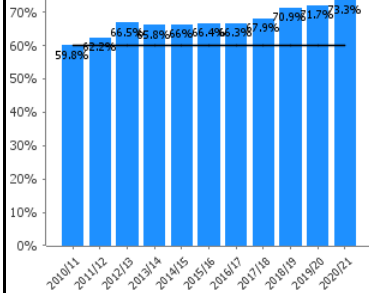
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	2019/20	2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q3 2021/22			
	Value	Value	Value	Value	Value	Value	Target	Status		
PH-HI-01 Immunisation Uptake - MMR1 at 2 yrs	90.9%	94.3%	94.3%	90.7%	70.7%	N/A	95%		 <p>04-Feb-2022 Q3 to be published Apr 22.</p>	

# NHS Shetland Performance Report - Annual Indicators

Generated on: 09 February 2022



Indicator	Years			Target		Graphs	Note																																				
	2018/19	2019/20	2020/21	2020/21																																							
	Value	Value	Value	Target	Status																																						
PH-HI-10 Reduce the proportion of children with their Body Mass Index outwith a healthy range (>=85th centile)	19.8	23.9	28.8	N/A	N/A	<table border="1"> <caption>PH-HI-10 BMI Values</caption> <thead> <tr><th>Year</th><th>Value</th></tr> </thead> <tbody> <tr><td>2008/09</td><td>19.5</td></tr> <tr><td>2009/10</td><td>22.9</td></tr> <tr><td>2010/11</td><td>21.8</td></tr> <tr><td>2011/12</td><td>23.6</td></tr> <tr><td>2012/13</td><td>21.2</td></tr> <tr><td>2013/14</td><td>17.7</td></tr> <tr><td>2014/15</td><td>27.2</td></tr> <tr><td>2015/16</td><td>22.3</td></tr> <tr><td>2016/17</td><td>26.1</td></tr> <tr><td>2017/18</td><td>25.3</td></tr> <tr><td>2018/19</td><td>19.8</td></tr> <tr><td>2019/20</td><td>23.9</td></tr> <tr><td>2020/21</td><td>28.8</td></tr> </tbody> </table>	Year	Value	2008/09	19.5	2009/10	22.9	2010/11	21.8	2011/12	23.6	2012/13	21.2	2013/14	17.7	2014/15	27.2	2015/16	22.3	2016/17	26.1	2017/18	25.3	2018/19	19.8	2019/20	23.9	2020/21	28.8	04-Feb-2022 Next data available Dec 22.								
Year	Value																																										
2008/09	19.5																																										
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2018/19	19.8																																										
2019/20	23.9																																										
2020/21	28.8																																										
PH-HI-11 Reduce mortality from Coronary Heart Disease among the under 75s	31.2	30.1	51.2	64.7	<table border="1"> <caption>PH-HI-11 Mortality Values</caption> <thead> <tr><th>Year</th><th>Value</th></tr> </thead> <tbody> <tr><td>2005/05</td><td>102.4</td></tr> <tr><td>2006/06</td><td>32.4</td></tr> <tr><td>2007/07</td><td>48.3</td></tr> <tr><td>2008/08</td><td>98.6</td></tr> <tr><td>2009/09</td><td>41.7</td></tr> <tr><td>2010/10</td><td>42.3</td></tr> <tr><td>2011/11</td><td>46.6</td></tr> <tr><td>2012/12</td><td>12.6</td></tr> <tr><td>2013/13</td><td>36.3</td></tr> <tr><td>2014/14</td><td>69.2</td></tr> <tr><td>2015/15</td><td>44</td></tr> <tr><td>2016/16</td><td>75.2</td></tr> <tr><td>2017/17</td><td>41.2</td></tr> <tr><td>2018/18</td><td>79.7</td></tr> <tr><td>2019/19</td><td>31.2</td></tr> <tr><td>2020/20</td><td>30.1</td></tr> <tr><td>2020/21</td><td>51.2</td></tr> </tbody> </table>	Year	Value	2005/05	102.4	2006/06	32.4	2007/07	48.3	2008/08	98.6	2009/09	41.7	2010/10	42.3	2011/11	46.6	2012/12	12.6	2013/13	36.3	2014/14	69.2	2015/15	44	2016/16	75.2	2017/17	41.2	2018/18	79.7	2019/19	31.2	2020/20	30.1	2020/21	51.2		04-Feb-2022 Small numbers mean we do fluctuate year on year. Next data available - Jan 23.
Year	Value																																										
2005/05	102.4																																										
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	2018/19	2019/20	2020/21	2020/21			
	Value	Value	Value	Target	Status		
PH-HI-13 Reduce alcohol related acute inpatient hospital discharges (European Age Standardised Rate per 100,000 pop.)	618.4	486.6	574.2	500			
PH-HI-19 Reduce mortality from Stroke among the under 75s	0	4.8	4.5	11.4			04-Feb-2022 Very small numbers mean we do fluctuate widely year on year. Next data available - Jan 23.
PH-SC-01 Bowel Screening Uptake (rolling 2 year invitation period)	70.9%	71.7%	73.3%	60%			08-Feb-2022 Highest rate in Scotland. Two-year reporting period is from 1st of May 2019 to 31st of March 2021.