

Integrated Care Board

Date of meeting	13 November 2024
Title of paper	Integrated Performance Report
Presented by	Asim Patel, Chief Digital Officer
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Agenda item	18
Confidential	No

Executive summary

The purpose of the paper is to provide the Integrated Care Board (ICB) with the latest position against a range of published performance metrics.

Summary of key performance metrics

Elective Recovery – There has been a small reduction in the overall number of patients waiting although the number remains high (241,624). We continue to be behind our planning trajectory to deliver the zero 65+ week waiter target by the end of September 2024.

Diagnostics – There has been a further deterioration in diagnostic performance for all 4 main providers against the 6 weeks diagnostic target (95%) in August 2024, none of the 4 main providers met the target. The ICB continues to be below the North West and National performance. Latest performance for the ICB shows that 71% of people waited less than 6 weeks for a diagnostic test, with 69.6% waiting less than 6 weeks at our 4 main providers. There has been a fall in the waiting list for both the 4 main providers and the ICB in the last 2 months.

Cancer – In August 2024, the faster diagnosis standard was met across the ICB (77.6%) with all providers, with the exception of Blackpool Teaching Hospitals meeting the 75% target. Performance against the 31-day standard improved and narrowly missed the 95% target. The number of patients waiting over 62-days for cancer treatment reduced to 595 and exceeds the target threshold of 569.

Urgent and Emergency Care (UEC) – Performance against the 4hr target in September 2024 was 77%, which was a deterioration on the previous period and below the 78% target for March 2024. The percentage of patients spending more than 12 hours in an emergency department also deteriorated during the most recent period. Category 2 response times was achieved in September 2024 at 28 minutes and 53 seconds and continues to compare favourably to the national position.

Mental Health – The out of area placement target has been revised to people in beds out of area, rather than bed days. The latest data shows that there were 6 inappropriate out of area placements, slightly above plan. The dementia prevalence target continues to be met with L&SC ICB above the national position. The number of people receiving a health check on a Learning Disability (LD) register for the ICB is likely to meet the quarter 2 target. The local data flows for NHS Talking Therapies shows that the ICB is meeting both the reliable improvement and reliable recovery targets.

Children and Young People – The levels of smoking at time of delivery are higher than national levels and significantly above those levels in Blackpool, in line with the smoking prevalence of the population. The population vaccine coverage (MMR) for children under 5 continues to be above both the regional and national figure. The elective recovery for children shows that the number over 65 weeks waiters has fallen to 43 at the end of September 2024. Despite a significant fall in numbers the target of zero 65 weeks waits by the end of September has not been met.

Primary Care - There is a significant risk that the current national GP contract dispute and subsequent collective action (CA) will impact on patients' access to general practice services and therefore the ICB's access performance metrics. In August 2024, General Practice in L&SC delivered a lower volume of appointments than we had estimated in the 2024-25 plan. L&SC offers fewer general practice appointments per head of population than the national rates and has a lower general practice workforce per head of population than national average which will impact upon the number of appointments able to be provided.

Recommendations

The Board is asked to:

- Note achievement against key performance indicators for Lancashire and South Cumbria.
- Support the actions being undertaken to improve performance against metrics in this report.

Which Strategic Objective/s does the report relate to:		Tick
SO1	Improve quality, including safety, clinical outcomes, and patient experience	✓
SO2	To equalise opportunities and clinical outcomes across the area	✓
SO3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	
SO4	Meet financial targets and deliver improved productivity	✓
SO5	Meet national and locally determined performance standards and targets	✓
SO6	To develop and implement ambitious, deliverable strategies	✓

Implications

	Yes	No	N/A	Comments
Associated risks	✓			
Are associated risks detailed on the ICB Risk Register?	✓			The management of the associated risks held is detailed

				within the Board Assurance Framework (BAF-002, BAF-008) and the Operational Risk Register (ICB-009)
Financial Implications				
Where paper has been discussed (list other committees/forums that have discussed this paper)				
Meeting	Date			Outcomes
Finance & Performance Committee	28 October 2024			Committee notes the report.
Executive Team	5 November 2024			Approved.
Conflicts of interest associated with this report				
Not applicable				
Impact assessments				
	Yes	No	N/A	Comments
Quality impact assessment completed	✓			
Equality impact assessment completed	✓			
Data privacy impact assessment completed				

Report authorised by:	Asim Patel, Chief Digital Officer
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Integrated Care Board – 13 November 2024

Integrated Performance Report

1.0 Introduction

- 1.1 The Integrated Care Board (ICB) has statutory responsibilities for NHS Commissioned services across Lancashire and South Cumbria (L&SC) and will be held to account by NHS England (NHSE) for system delivery against key constitutional performance and quality targets. Therefore, it is essential there is a robust performance reporting function in place to provide the ICB with an overview and highlight risks and challenges.
- 1.2 The purpose of the paper is to provide the Board with the latest position against a range of published performance metrics.
- 1.3 The ICB Integrated performance framework continues to evolve to support an integrated performance report with appropriate balance scorecards to enable the Board to maintain oversight of progress against the ICB's strategic objectives and enable the Board to respond to identified and emergent risks.
- 1.4 Due to when updated data is received, this report provides the most recent position on a selection of indicators where available.

2.0 Key Performance Indicators

- 2.1 The system remains subject to on-going pressure and increased demand which impacts on performance metrics and one part of the system does not operate in isolation.
- 2.2 The table below provides a timeseries of key indicators:

Table: 12 Month Timeseries of ICB Key Performance Indicators

Key Performance Indicator	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	TREND	NORTH WEST	NATIONAL
Total patients waiting more than 104 weeks to start consultant-led treatments	1	1	5	1	3	1	1	4	1	1	0	1	0	0			9	224
Total patients waiting more than 78 weeks to start consultant-led treatments	168	174	151	175	178	209	141	79	39	21	18	13	16	29			169	3722
Total patients waiting more than 65 weeks to start consultant-led treatments	2298	2779	2981	2985	2545	2620	2313	1785	745	786	960	1101	882	828			5314	46487
Total patients waiting more than 52 weeks to start consultant-led treatments	10746	11200	11874	12084	11406	10439	9679	9514	9546	9448	9391	9408	8832	8574			45529	285269
Capped Theatre Utilisation	75.20%	78.20%	80.40%	82.90%	82.00%	78.80%	78.30%	80.60%	79.80%	79.70%	83.30%	81.60%	82.35%	83.20%	84.00%		78.00%	79.00%
BADS Daycase Rates	83.30%	82.90%	82.50%	83.40%	83.50%	83.70%	83.80%	83.50%	83.90%		84.40%	83.90%					83.10%	84.00%
Specialist Advice - Pre-Referral (Rate per 100 OP)	6.49	6.10	5.87	5.83	5.88	6.01	6.25	6.05	7.35	8.06	7.63	6.34	7.14	7.03			4.10	6.10
Specialist Advice - Post-Referral (Rate per 100 OP)	32.97	31.42	30.40	29.54	31.85	32.21	32.45	32.79	35.41	35.42	31.92	30.91	29.69	31.56			23.60	20.10
Patient Initiated Follow-Ups (PIFU)	4.04%	4.19%	4.19%	3.92%	4.65%	4.32%	4.06%	3.96%	4.12%	3.84%	3.77%	3.84%	3.97%	4.43%			3.06%	3.53%
Number of Adults on Community Waiting Lists	15635	15405	15459	15303	14744	14031	14810	15172	15460	15176	15519	15855	15460	18816				
Number of Children on Community Waiting Lists	5879	5582	4415	5210	5321	5896	6002	6279	6415	6477	6379	6527	6119	5958				
% of patients that receive a diagnostic test within six weeks (March 2025 ambition of 95%)	78.63%	72.92%	75.51%	75.19%	75.51%	69.22%	71.74%	75.94%	75.30%	73.53%	76.34%	74.36%	73.17%	71.02%			80.81%	76.06%
People waiting longer than 62 days to start cancer treatment	578	605	631	545	491	528	522	411	358	400	434	531	505	504	483			
31 Day First Treatment (96% Standard)	87.48%	87.80%	89.37%	89.96%	90.21%	91.68%	88.45%	90.89%	92.04%	90.42%	93.35%	94.19%	92.69%	94.44%			94.01%	91.67%
62 Day referral to treatment (85% Standard)	61.63%	64.45%	61.41%	65.29%	66.23%	65.71%	61.55%	65.03%	73.10%	65.94%	68.02%	70.87%	68.68%	68.59%			71.63%	69.16%
% meeting faster diagnosis standard (75% Standard)	77.68%	74.83%	70.33%	74.13%	75.62%	75.90%	73.56%	80.67%	77.31%	75.24%	78.37%	78.29%	77.80%	77.64%			74.66%	75.55%
A&E 4 Hour Standard (76% Recovery Target)	77.49%	76.78%	75.94%	74.85%	74.61%	74.81%	74.59%	75.44%	76.05%	77.83%	77.86%	78.42%	78.33%	78.32%	77.00%		71.72%	74.22%
A&E 4 Hour Standard - Type 1 Only							58.94%	59.37%	60.22%	63.53%	63.72%	64.25%	64.64%	64.15%	62.54%		56.55%	59.80%
Proportion of patients spending more than 12 hours in an emergency department	7.50%	8.58%	8.19%	9.08%	8.82%	9.45%	10.42%	9.31%	9.98%	8.96%	7.66%	7.66%	7.57%	6.79%	8.79%		8.68%	
Average ambulance response time: Category 2	00:25:22	00:27:19	00:29:07	00:32:12	00:32:04	00:38:33	00:36:06	00:29:00	00:24:22	00:21:48	00:25:54	00:26:53	00:27:44	00:21:03	00:28:53			00:36:02
Ambulance handover delays over 30 minutes as a proportion of ambulance arrivals.						33.50%	37.89%	35.74%	33.68%	30.85%	32.90%	31.17%	30.43%	25.16%	32.64%			28.10%
Number / % of patients with a LOS exceeding 21 days [BCF]	9.02%	8.86%	8.81%	9.05%	9.43%	8.76%	8.96%	9.23%	9.10%	9.20%	8.80%	8.66%	8.52%	7.81%				6.83%
Proportion of patients discharged to usual place of residence [BCF]	91.23%	93.28%	93.09%	93.27%	92.42%	92.71%	92.98%	92.94%	93.48%	92.65%	93.38%	93.29%	92.56%	93.16%				93.15%
2 Hour Urgent Community Response (70% Target)	93.35%	93.98%	93.81%	94.62%	94.41%	94.06%	94.26%	94.76%	95.50%	95.08%	95.11%	93.28%	93.98%	93.48%			89.63%	85.11%
Virtual Ward Occupancy (Snapshot)	46.62%	49.25%	52.01%	57.50%	60.50%	58.50%	58.25%	53.60%	54.77%	50.83%	58.63%	46.46%	54.95%	57.08%	68.74%		63.31%	70.30%
Total Virtual ward capacity per 100k of adult population	27.68	26.61	26.61	26.74	26.74	26.74	26.74	26.94	27.34	22.84	22.84	22.89	22.89	22.89	22.62		22.94	19.80
% of people aged 14 and over with a learning disability on the GP register receiving an AHC	15.35%	20.55%	26.20%	32.47%	38.04%	41.45%	54.81%	66.74%	79.82%	3.66%	7.31%	11.41%	16.83%	22.16%			25.50%	24.16%
Estimated diagnosis rate for people with dementia	68.82%	68.99%	69.08%	69.02%	69.25%	68.80%	68.47%	68.38%	68.34%	68.35%	68.48%	68.44%	68.89%	69.14%			69.89%	65.01%
Number of general practice appointments per 10,000 weighted patients	3894.7	3961.2	4461.2	4763.9	4399.2	3599.0	4555.1	4266.0	4093.8	4137.7	4144.9	3885.5	4255.3	3821.2			3820.0	4444.4
% Same Day Appointments (ACC-08)	43.34%	43.26%	38.27%	38.58%	42.31%	45.78%	44.26%	42.42%	42.55%	43.30%	42.92%	42.89%	41.65%	42.83%				
% of Appointments within 2 weeks of booking (ACC-08)	87.50%	87.20%	85.80%	86.30%	88.30%	89.60%	89.50%	89.10%	88.30%	87.05%	87.62%	87.31%	87.15%	87.43%				
Percentage of resident population seen by an NHS dentist - ADULT							34.23%	34.52%	34.82%	34.84%	35.06%	35.25%						
Percentage of resident population seen by an NHS dentist - CHILD							56.67%	57.28%	57.89%	57.74%	58.35%	58.69%						
S044b: Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care	7.50%	7.51%	7.51%	7.53%	7.51%	7.65%	7.62%	7.56%	7.52%	7.45%	7.41%	7.38%	7.35%					
High Dose Opioids : Opioids with likely daily dose of ≥120mg morphine equivalence per 1000 patients	1.245	1.275	1.222	1.160	1.229	1.203	1.167	1.103	1.109	1.150	1.169	1.019	1.126					0.85

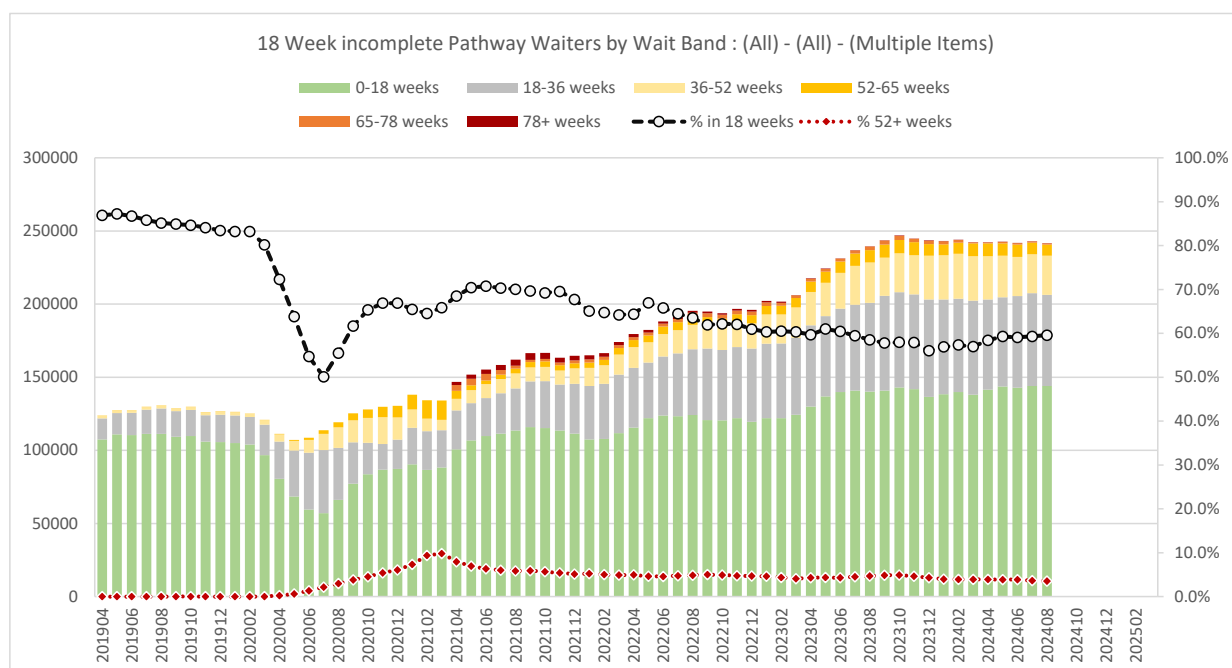
2.3 The following narrative outlines current performance against other key NHS metrics within the balanced scorecard that are identified as 'at risk' of delivery with supporting commentary regarding actions being taken to improve and mitigate risk.

2.4 Indicators have been aligned to the strategic objectives within the updated balanced scorecard (Appendix A).

2.5 Information on the balanced scorecard is reported at a 'level' that is readily available from national reporting.

3.0 Domain 1 – Elective Recovery

3.1 The number of patients waiting for treatment has reduced marginally this month to a total of 241,624 patients waiting for treatment at the end of August 2024 at ICB level.



3.2 At the end of August 2024, L&SC ICB commissioned activity included:

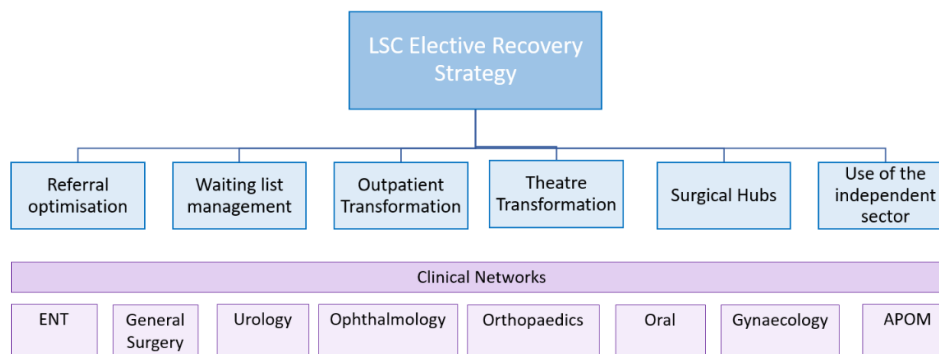
- 29 x 78+ week breaches for L&SC ICB registered patients; 10 of which were waiting at either Independent Sector (IS) providers within our area or at NHS providers outside of Lancashire and South Cumbria.
- 65+ week waiter numbers have reduced to the end of August 2024 position (828 patients) though we continue to be adrift from our planned reduction trajectory. 166 of these ICB patients (20.1%) were waiting at Independent Sector providers or at NHS providers outside of the Lancashire and South

Cumbria area. More timely local reporting identifies that we did not deliver zero 65+ week waiters by the end of September 2024.

3.3 The end of August 2024 position for the 4 main NHS providers within L&SC reported:

- 0 x 104+ week waiters
- 20 x 78+ week waiters
- 678 patients (0.35%) waiting 65+ weeks
- 193,662 patients awaiting treatment.

3.4 The L&SC Elective Recovery Strategy has identified six key areas of focus that will maximise and optimise elective capacity while building on our system-wide approach to the management of waiting times and capacity.



3.5 Model Hospital metrics highlight a subset of circa 200 procedures identified by the British Association of Day Surgery (BADS) as most suited to being undertaken as a day case (or outpatient procedure based on the updated definition). Latest information shows L&SC was performing at 83.9% (Apr-Jun 2024), which is in line with national averages.

3.6 L&SC ICB latest performance (29th September 2024) on theatre capped utilisation is 84% which is above the national and regional average

3.7 Patient Initiated Follow-Ups (PIFU) remain above the North West and National averages although our performance is tracking below our 2024-25 planning trajectory. However, there are wide variations between providers.

3.8 Improvements in reporting of activity for pre-and post-referral specialist advice have increased our utilisation above national and regional levels. Pre-referral diversion rates for August 2024 were 36.5% which was higher than the national diversion rate. However, post referral diversions (10.4%) were lower than regional and national averages. There is a risk that the GP collective action on specialist advice might lead to a reduction in utilisation.

3.9 Across community services the number of 52 weeks waiters has increased in adult services and decreased for children's services. The reduction in the children's services waiting list is mainly due to working continuing to reduce long waiters for Speech and Language Therapy in LSCFT. The August 2024 position for adults is reporting a total of 128 x 52+ week waiters which are mainly waiting for Musculoskeletal (MSK) and Weight Management services at Blackpool Teaching Hospitals and Speech and Language therapy services at University Hospitals Morecambe Bay. The ICB had planned on having no 52 weeks waiters in Adult Community Services by the end of this financial year.

4.0 Domain 2 – Diagnostics

4.1 The performance for the 6 weeks diagnostic target is now the lowest (69.6%) for the 4 main providers across L&SC since January 2023. All providers saw a fall in their performance in August 2024 compared to the previous month. The performance for L&SC ICB also fell in the month to 71%. The national performance (76.1%) and the North West performance (80.8%) are both significantly above the figures for the 4 main providers and the ICB.

4.2 The total waiting list for the 4 main providers fell for the second consecutive month in August 2024 and now stands at 45,982 for the 4 main providers and 51,333 for the ICB. The waiting list at Blackpool Teaching Hospital fell significantly month on month, this was offset by increases in the list at Lancashire Teaching Hospitals and East Lancashire Hospitals. The North West waiting list continues to fall.

4.3 The most challenged performance at Lancashire Teaching Hospitals Trust is mainly due to consistently high number of patients waiting over 6 weeks for non-obstetric ultrasound (NOUS) and echocardiography, which for August 2024 had 3,186 patients and 3,944 patients waiting over 6 weeks respectively, with a further 1,789 waiting over 6 weeks for Endoscopy. Performance fell in all trusts with University Hospitals of Morecambe not meeting the 95% target for the first time since December 2022.

4.4 Lancashire Teaching Hospitals have developed a recovery plan through the Tier 1 monitoring with NHS England. The plan has a trajectory which recover the performance of 95% by year end, which is dependent on increases in activity for Endoscopy and radiology.

4.5 The latest data suggests activity at the Community Diagnostic Centres (CDC) has remained at a constant level however does remain below plan by around 39,000 tests year to date, 32% below plan. There are some tests that are consistently overperforming such as NOUS, Gastroscopy and Colonoscopy.

4.6 The level of activity against plan for diagnostics tests shows that endoscopy procedures and echocardiography are under plan year to date.

5.0 Domain 3 – Children & Young People

- 5.1 The levels of smoking at time of delivery remain higher than national levels and significantly above in Blackpool. The ICB has a number of ongoing initiatives to address this including in house smoking cessation services. In line with national guidance East Lancashire Hospitals Trust and Lancashire Teaching Hospitals Trust will deliver smoking cessations services in maternity before the end of this financial year.
- 5.2 The population vaccination coverage for 5 year olds compares favourably with the North West and national levels. The Primary Care Networks (PCNs) continue to work with the Improving Immunisation Uptake Team (IIUT) to increase uptake in vaccinations for 0-5 year olds.
- 5.3 The data for stillbirth rate per 1,000 shows that the ICB is slightly above last year's figure year to date and above the national figure. The data for neonatal deaths per 1,000 year to date shows that the figure is above last year's figure but still below the national figure. Currently East Lancashire Hospitals Trust are flagging for neonatal deaths and as a result are undertaking a deep dive to understand the increase in neonatal deaths year to date in 2024. The outcome of this deep dive will be presented to the next Patient Safety Learning and Oversight Group in December 2024.
- 5.4 The community waits for children show there are 237 children waiting over 52 weeks across the 4 main providers, which is down significant from the previous month's information. The largest number of waits are now at Blackpool Teaching Hospitals, mainly for the Paediatric Community Service. There has been a significant fall in the number of children waiting over 52 weeks for Lancashire & South Cumbria Foundation Trust, as they recover their position for speech and language therapy.
- 5.5 For elective waits in children, the latest position shows a significant fall in the number waiting over 52 weeks to 43. The majority of these waits are for Orthodontics services at Blackpool Teaching Hospitals.

6.0 Domain 4 – Cancer

- 6.1 In August 2024, the faster diagnosis standard was met across the ICB (77.6%) with all providers, except Blackpool Teaching Hospitals achieving the 75% target. Overall, this was a slight deterioration on the previous period, although performance was better than both the North West and national position.
- 6.2 Performance against the 31-day standard improved and narrowly missed the 95% target. Achievement was above regional and national levels in August 2024. Only Lancashire Teaching Hospitals failed to achieve the 95% target.

6.3 Achievement against the 62-day standard was less favourable. Overall, performance across the ICB in August 2024 was 68.6%, with none of our providers achieving the target.

Provider Performance against 3 core cancer standards (June 2024)

PROVIDER	FDS	31 Days	62 Day
Blackpool Teaching Hospitals NHS Foundation Trust	73.1%	96.1%	71.3%
East Lancashire Hospitals NHS Trust	78.4%	97.5%	71.2%
Lancashire Teaching Hospitals NHS Foundation Trust	76.9%	93.5%	61.4%
University Hospitals of Morecambe Bay NHS Foundation Trust	83.7%	96.3%	74.2%
L&SC AGGREGATE (4 x Providers)	77.6%	94.4%	68.6%
TARGET	75.0%	96.0%	85.0%

L&SC Cancer Alliance Performance against 3 core cancer standards (June 2024)

Cancer Alliance	FDS	31 Days	62 Day
L&SC Cancer Alliance (CCG TOTAL)	77.8%	95.3%	69.2%
TARGET	75.0%	96.0%	85.0%

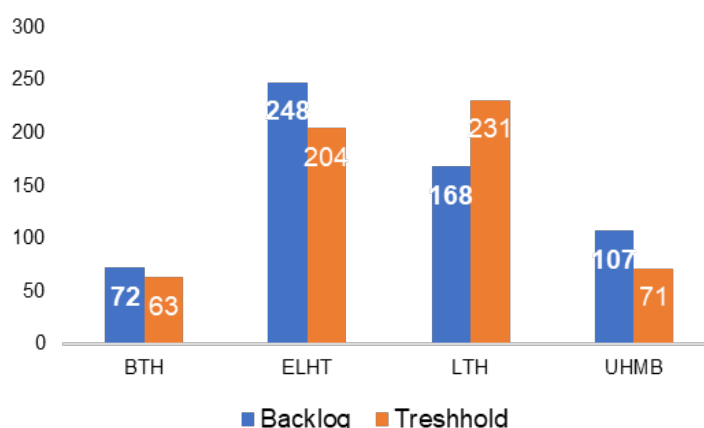
6.4 Setting these measures in context:

- 6/20 Alliance nationally for FDS standard (deteriorated position).
- 4/20 Alliances nationally for 31 day standard (improved position).
- 11/20 Alliances for 62 day standard (deteriorated position).

6.5 Reducing the 62 Day Cancer backlog is a key aim of the NHS. Currently Lancashire Teaching Hospitals is a Tier 1 Trust (for diagnostics and cancer).

6.6 The number of patients waiting over 62-days for cancer treatment reduced up to 7 October 2024 (595 actual vs 569 threshold). Lancashire Teaching Hospitals remains the only provider below threshold.

>62-day Backlog, Provider vs Threshold,
PTL Date: 07/10/2024



6.7 There is a robust and wide-ranging cancer improvement plan for 2024-2025 with detailed actions aiming to improve performance by:

- Reducing the 62-day backlog
- Improving performance against the faster diagnosis standard
- Reducing diagnostic delays
- Increasing surgical capacity.

7.0 Domain 5 – Urgent & Emergency Care

7.1 Performance against the 4hr target in September 2024 was 77.0%, which was a slight deterioration on the previous period and below the 78% target within the planning guidance for March 2025. L&SC performed better than the North West and national average. Both East Lancashire Hospitals and Blackpool Teaching Hospital achieved the target with University Hospitals Morecambe Bay being slightly below. Lancashire Teaching Hospitals at 70.3% was significantly below the other providers and reported a deterioration from the previous month.

7.2 The percentage of patients spending more than 12 hours in an emergency department deteriorated during the most recent period. For the week ending 13 October 2024, the aggregated position across the four L&SC providers was 8.91%. (although there is provider variation from 6.32% at University Hospitals Morecambe Bay to 10.41% at Lancashire Teaching Hospitals). L&SC performed better than the North West average.

7.3 There is a requirement to minimise handover delays between ambulance and hospital, allowing crews to get back on the road and contribute to achieving the ambulance response standards.

7.4 Category 2* response times in the planning guidance is an average of 30 minutes across the year. This was achieved again in September 2024 at 28 minutes and 53 seconds and continues to compare favourably to the national achievement of 36 mins and 2 seconds, although a deteriorating position from the previous period.

*CAT 2 - A serious condition, such as stroke or chest pain, which may require rapid assessment and/or urgent transport

7.5 Adult General & Acute (G&A) bed occupancy rates (adjusted for void beds) increased slightly in September 2024 to 94.6%, and compared between averages across the North West (94.4%) and England (94.7%).

7.6 Once people no longer need hospital care, being at home or in a community setting (such as a care home) is the best place for them to continue recovery. However, unnecessary delays in being discharged from hospital are a problem that too many people experience. To track the scale and extent of this issue a

measure in the System Oversight Framework (SOF) that looks at the average number of beds occupied by patients who no longer meeting the criteria to reside (NMC2R) as a percentage of the average number of occupied adult (G&A) beds available during the month.

- 7.7 L&SC ICB is ranked 5/42 ICB for performance nationally, with 9.12% of all adult G&A beds occupied by NMC2R patients. These can fluctuate on a daily basis (and a weekly cycle) while there is variability at provider level.
- 7.8 The Virtual Ward Programme across L&SC is predominantly designed to deliver 'step up' community capacity to support admission avoidance. Local data as at 12 September 2024 reports a capacity of 419 beds which is marginally below the revised bed capacity of 425 beds. Occupancy of 68.7% for the September snapshot improve significantly but remained below the revised plan for September 2024 of 80%.
- 7.9 In L&SC there are five providers of place based 2-hour Urgent Community Response services. All five are currently delivering 8am-8pm, 7 days a week and offer all nine Clinical Conditions covering the full geographic footprint. Responses to referrals within the 2 hour time frame have been consistently above 90% since May 2022 (the national threshold is 70%) putting L&SC within the upper quartile for performance.
- 7.10 The Urgent and Emergency Care (UEC) Delivery Boards have provided an update on the status of their improvement plans which are at different levels of maturity in terms of delivery and impact. All plans have yet to be fully mobilised.
- 7.11 Work is underway to standardise the reporting of the delivery, impact, exceptions and de-escalation cost reductions of the place-based improvement plans. However, systems remain under considerable pressure and therefore there is a risk that they will not be able to de-escalate as intended and/or UEC performance will deteriorate.
- 7.12 The ICB is applying greater focus and rigour on the delivery and impact of the UEC improvement plans through the Collaborative Improvement Board. A set of UEC de-escalation metric have been agreed that will be monitored in support of this.

8.0 Domain 6 – Mental Health and Learning Disabilities

- 8.1 The local information from Lancashire & South Cumbria Foundation Trust performance report is that there are currently 6 patients with an inappropriate out of area placement (OAPs) at month end in August 2024, which is a significant fall from the start of the financial year and just above plan. The Trust

has a detailed plan to recover to zero inappropriate out of area placements by the end of the financial year.

- 8.2 There remains no national reporting of NHS talking therapy access. The latest local data shows that the ICB is meeting 96.8% of the planned access. All providers are meeting their target apart from Lancashire & South Cumbria Foundation Trust. The reliable recovery and reliable improvement targets are being met by the ICB year to date.
- 8.3 Dementia diagnosis rates remain above target and also above national levels, although in the latest month it is below the North West level.
- 8.4 L&SC is presently on target to meet the quarter 2 milestone of 25% of people aged 14 and over with a learning disability receiving their annual health check.

9.0 Domain 7 – Primary Care

- 9.1 There are a number of key metrics pertaining to primary care identified in the System Oversight Framework (SOF) and highlighted within the 2024-2025 operating priorities.
- 9.2 In August 2024, General Practice in L&SC delivered a lower volume of appointments than we had estimated in the 2024-25 plan. The reduction in appointments during August was also seen regionally and nationally. L&SC offers 14% fewer general practice appointments per head of population than national rates.
- 9.3 87.4% of General Practice appointments were offered within 2 weeks of booking in August 2024 (for the 8 specific appointment types) and 53.4% of these appointments were offered on the same day. Although performance is broadly in line with the regional and national averages, there remain variations at sub-ICB (and lower) levels with same day appointments ranging from 43.2% to 60.9%.
- 9.4 There is a significant risk that the current national GP contract dispute and subsequent collective action (CA) will impact on patients' access to general practice services and therefore the ICB's access performance metrics. System-wide shadow Emergency Preparedness, Resilience and Response (EPRR) arrangements are in place for the GP Collective Action with 20 high impact mitigations being actioned and ICB and Place level risk assessments are under constant review as intelligence is gained on what Practices are taking which actions and when.
- 9.5 The NHS Long Term Plan (NHSLTP) includes a major ambition to prevent 150,000 strokes, heart attacks and dementia cases over the next 10 years. To complement the NHSLTP, the National Cardiovascular Disease Prevention

System Leadership Forum (CVDPSLF) has agreed specific ambition for management of high blood pressure.

- 9.6 The latest data for June 2024 from CVDPrevent reported that 67.9% of L&SC hypertension patients were treated to target as per NICE guidance. This is marginally above the North West and national position. However, further progress will need to be made to achieve the revised target of 80% by March 2025.
- 9.7 Additional plans were submitted in 2024-25 identifying the number of unique adults and children that would be seen by NHS dentists as a proportion of the resident population. The June 2024 position is now available and can be viewed against the Q1 2024-25 planning milestone. The latest position for 'unique adults' (seen within 24 months) is 35.3% against a milestone of 38.5%. For 'unique children' (seen within 12 months) the June position is 58.7% against a milestone of 59.9%. There has been a steady increase in dental access, with some areas now back at pre-covid levels of access.

10.0 Domain 8 – Palliative Care

- 10.1 L&SC had a practice population of 1,857,613 in July 2024. Of those patients registered with a GP as of April 2024, 13,575 (0.7%) are included on a QOF palliative care register.
- 10.2 The aim is to have an ongoing 0.6% of the total population on the palliative care register, 60% of these identified as being in the last year of life by the time they have died and 60% to have had a care plan/EOL discussion by the time they have died.
- 10.3 L&SC performance is at 49.1% of patients deceased in July 2024 on the QOF register for end of life, with Morecambe place achieving the highest performance at 53.2% of people registered and Pennine Lancs the lowest at 44.4%. The total number of people that have died and had a form of care planning was 43.3% in July 2024 with Morecambe Bay place achieving the highest performance at 53.2% and West Lancs the lowest at 22.9%.

11.0 Conclusion

- 11.1 Performance remained consistent during the last reporting period with key national initiatives being met and the ICB position comparing well with the North West and National positions. However, there continues to be pressures areas across 65 week waits for Elective Care, diagnostic performance increases in community waits for adults. A few of the Urgent and Emergency Care metrics showed a deterioration in month. For each domain area, specialist leads provide details of action and mitigation plans to improve performance.

12.0 Recommendations

12.1 The Board is asked to:

- Note performance against key performance indicators for Lancashire and South Cumbria.
- Support the actions being undertaken to improve performance against metrics in this report.

Asim Patel
Chief Digital Officer

October 2024

Appendix A – Performance Scorecard

S01 - Improve quality, including safety, clinical outcomes, and patient experience	ICB COMMISSIONER					S02 - Equalise opportunities and clinical outcomes across the area								ICB PROVIDER AGGREGATE																											
						Blackburn with Darwen		Blackpool	Lancashire - East	Lancashire - Central			Lancashire - Coastal							South Cumbria	PROVIDER																				
						BwD (00Q)	Bpool (00R)	EL (01A)	CSR (00K)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)							BTH	ELHT	LTHT	UHMB	LSCFT	NWAS	Plan	Actual	In month	Direction												
Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction																						
Smoking at time of delivery	Apr-Jun24	6.00%	8.00%	*	↑	3.8%	17.2%	9.0%	6.8%	7.0%	4.4%	6.6%	8.2%																												
Population vaccination coverage - MMR for 2 doses (5yrs old)	Q1 24-25	95%	87.20%	*	↔	84.4%	86.8%							87.1%																											
Reduce stillbirth	2022		2.90		↑										1.96	3.25	4.12	1.11																							
Reduce neonatal mortality	2022		2.18		↓										3.53	2.40	1.95	1.11																							
Bowel screening coverage, aged 60-74, screened in last 30 months	Q4 23-24		66.20%		↑	56.1%	60.2%	63.1%	67.1%	64.9%	68.7%	71.9%	72.2%																												
Breast screening coverage - females aged 53 - 70 screened in the last 36 months	Q4 23-24		67.72%		↑																																				
Cervical screening coverage - % females aged 25 - 49 attending screening within 3.5 Years	Q4 23-24	80.0%	67.91%		↑	60.4%	64.0%	66.9%	75.1%	66.6%	73.2%	74.5%	67.8%																												
Cervical screening coverage - % females aged 50 - 64 attending screening within 5.5 Years	Q4 23-24	80.0%	74.07%		↓	71.2%	69.1%	73.4%	75.9%	75.5%	75.9%	76.5%	74.6%																												
Cervical screening coverage - females aged 25 - 64 attending screening within the target period	Q4 23-24	80.0%	70.20%		↔	63.8%	65.9%	69.2%	75.4%	69.6%	74.3%	75.4%	70.5%																												
% of cancers diagnosed at stages 1 and 2 (75% early diagnosis ambition by 2028)	2021	75%	51.80%	*	↑	51.3%	49.1%	51.9%	55.6%	52.0%	54.8%	54.0%	50.8%																												
Seasonal influenza vaccine uptake amongst GP patients in England 2022 to 2023 - 65 Years +	Sep19-Feb24	85%	77.52%	*	↑	71.5%	74.0%	74.8%	80.9%	75.6%	79.4%	79.6%	80.8%																												
Hypertension case-finding	2023-24	80%	79.57%		↑	95.5%	101.0%	76.2%	83.9%	78.7%	77.8%	74.4%	70.9%																												
% of hypertension patients who are treated to target : CVD Prevent	Jun-24	80%	67.88%	*	↓	65.2%	69.0%	67.3%	68.0%	67.8%	71.2%	71.3%	65.6%																												
Proportion of diabetes patients that have received all eight diabetes care processes	Jan13-Mar24		60.70%			69.5%	64.0%	56.3%	54.4%	56.8%	52.0%	70.0%	61.4%																												
Percentage of resident population seen by an NHS dentist - ADULT	Jun-24		35.25%		↑																																				
Percentage of resident population seen by an NHS dentist - CHILD	Jun-24		58.69%		↑																																				
GP CQC Ratings (no. practices inadequate or requiring improvement)	Oct-24		3			0	0	0	2	0	0	0	1																												
S044a: Antimicrobial resistance : Antibacterial items by STAR-FU	Jul-24	0.871	1.038		↔	1.111	1.176	0.975	0.988	1.123	0.967	1.115	0.958																												
S044b: Antimicrobial resistance : proportion of broad-spectrum antibiotic prescribing in primary care	Jul-24	10%	7.35%	✓	↑	5.46%	7.77%	5.46%	7.06%	7.66%	7.98%	8.51%	9.26%																												
High Dose Opioids : Opioids with likely daily dose of ≥120mg morphine equivalence per 1000 patients	Jul-24		1.126		↓	1.304	1.844	0.738	0.831	0.624	1.809	1.805	1.022																												
Environmental impact of inhalers - average carbon footprint per salbutamol inhaler	Jul-24		16.828		↑	16.847	16.534	15.145	16.525	18.743	21.563	16.940	16.064																												
MRSA Infections	Aug-24	0	2	*		1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		

S04 - Meet financial targets and deliver improved productivity	ICB COMMISSIONER					S02 - Equalise opportunities and clinical outcomes across the area								ICB PROVIDER AGGREGATE																											
						Blackburn with Darwen		Blackpool	Lancashire - East	Lancashire - Central			Lancashire - Coastal							South Cumbria	PROVIDER																				
						BwD (00Q)	Bpool (00R)	EL (01A)	CSR (00K)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)							BTH	ELHT	LTHT	UHMB	LSCFT	NWAS	Plan	Actual	In month	Direction												
Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction																						
Capped Theatre Utilisation %: Touch time within planned session vs planned session time	19/22/2024													85.00%	84.00%	84.00%	84.00%																								
RTT completed pathway activity as a percentage of 2019/20 baseline plus A&G diversion uplift	Aug-24		118.7%											137.10%	104.00%	106.70%	123.90%																								

S03 - Make working in L&SC an attractive and desirable option for existing and potential employees	ICB COMMISSIONER					S02 - Equalise opportunities and clinical outcomes across the area								ICB PROVIDER AGGREGATE																										
						Blackburn with Darwen		Blackpool	Lancashire - East	Lancashire - Central			Lancashire - Coastal							South Cumbria	PROVIDER																			
						BwD (00Q)	Bpool (00R)	EL (01A)	CSR (00K)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)							BTH	ELHT	LTHT	UHMB	LSCFT	NWAS	Plan	Actual	In month	Direction											
Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction	Date	Plan	Actual	In month	Direction																					
FTE doctors in General Practice per 10,000 weighted patients	Aug-24		5.50		↑	5.02	4.63	5.24	6.04	6.78	5.52	4.69	6.00																											
FTE Nurses in General Practice per 10,000 weighted patients	Aug-24		3.14		↔	2.22	3.30	3.07	3.36	2.78	2.68	4.05	3.31																											
FTE Direct Patient Care staff in GP practices per 10,000 weighted patient population	Aug-24		2.65		↔	1.19	2.70	2.42	1.80	2.56	1.80	3.41	3.96																											
FTE ALL CLINICAL staff in GP practices per 10,000 weighted patient population	Aug-24		11.28		↑	8.42	10.63	10.74	11.20	12.12	10.01	12.15	13.27																											

S05 - Meet national and locally determined performance standards and targets	ICB COMMISSIONER					S02 - Equalise opportunities and clinical outcomes across the area											ICB PROVIDER AGGREGATE																																						
						Blackburn with Darwen						Blackpool		Lancashire - East		Lancashire - Central					Lancashire - Coastal	South Cumbria	PROVIDER																																
						BwD (00Q)	Bpool (00R)	EL (01A)	CSR (00X)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)	BTH	ELHT	LHHT					UHMB	LSCFT	NWAS	Plan	Actual	In month	Direction																												
Hour Standard (76% Recovery Target)	Sep-24	76%	77.00%	✓	↓																															76%	76.13%	✓	↓																
Hour Standard - Type 1 Only	Sep-24		62.54%																																																	62.54%			
Proportion of patients spending more than 12 hours in an emergency department	Sep-24	2%																																						2%	8.91%	✗	↑												
Average ambulance response time: Category 2	Sep-24	00:30:00	00:28:53	✓	↓																																		00:30:00	00:28:53	✓	↓													
Emergency handover delays over 30 minutes as a proportion of ambulance arrivals	Sep-24	5%	26.47%		↓																																		5%	26.47%															
Unplanned Transfers of Care / No Medical Criteria to Reside	Sep-24																																														9.43%								
GP&A Bed Occupancy	Sep-24	92%																																					92%	94.64%	✗														
Bed Capacity	Sep-24																																										3015												
% Beds Occupied by Patients patients with a length of stay of 7+ Days	Sep-24		48.2%																																								48.2%												
% Beds Occupied by Patients patients with a length of stay of 14+ Days	Sep-24		26.6%																																								26.6%												
% Beds Occupied by Patients patients with a length of stay of 21+ Days	Sep-24		16.3%																																								16.3%												
Number / % of patients with a LOS exceeding 21 days [BCF]	Aug-24		7.8%			9.50%	10.04%				7.41%					7.27%																																							
Proportion of patients discharged to usual place of residence [BCF]	Aug-24		93.16%			91.89%	93.46%				92.73%					96.17%																																							
DOUBLE ADMISSIONS : Indirectly standardised rate (ISR) of admissions per 100,000 population [BCF]	Aug19-AUG24					0.57	1.79				1.02					0.95																																							
Emergency hospital admissions due to falls in people aged 65 and over (OSR per 100,000) [BCF]	2023-24 YTD					1205.70	1929.90				1609.40					1928.90																																							
Average length of stay for patients in hospital for 21 days and over - Variance to Plan	19P-24																																														-10	33	21	-37					
Proportion of Urgent Community Response (70% Target)	Aug-24	70%	93.48%	✓	↔																																					92.04%	94.59%												
GP&A Ward Bed Capacity vs Plan	Sep-24	425	419	✗	↓																																					88	160	80	73										
GP&A Ward Occupancy (Snapshot)	Sep-24	80%	68.74%	✗	↑																																					37.50%	93.75%	71.25%	60.27%										
Virtual ward capacity per 100k of adult population	Sep-24	22.95	22.62	✗	↓																																																		

KEY

DATA UPDATED WITHIN THIS REPORT
NO UPDATE AVAILABLE FOR THIS REPORT
UPDATE TO BE CONFIRMED