

# **Integrated Care Board**

Date of meeting	15 January 2025
Title of paper	Integrated Performance Report
Presented by	Asim Patel, Chief Digital Officer
Author	Glenn Mather, Neil Holt and Damian Nelson (Performance Team)
Agenda item	15
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

<u>Elective Recovery</u> – There has been a small reduction in the overall number of patients waiting although the number remains high (240,071). Delivery of the revised target for zero x 65 weeks waiters by the end of December 2024 is challenged in a couple of specialties.

<u>Diagnostics</u> – There has been a further deterioration in diagnostic performance against the 6 weeks diagnostic target (95%) in September 2024, with none of the 4 main providers meeting the target. The ICB continues to be below the North West and National performance. Latest performance for the ICB shows that 71.4% of people waited less than 6 weeks for a diagnostic test, with 69.4% waiting less than 6 weeks at our 4 main providers. There has been an increase in the waiting list during the last month.

<u>Cancer</u> – In September 2024, the faster diagnosis standard was met across the ICB (77.6%) with all providers, except Blackpool Teaching Hospitals meeting the 75% target. Performance against the 31-day standard deteriorated further away from the 95% target. The number of patients waiting over 62-days for cancer treatment reduced to 496 and is below the target threshold of 569.

<u>Urgent and Emergency Care (UEC)</u> – Performance against the 4hr target in November 2024 was 76.1%, which was a deterioration on the previous period and below the 78% target for March 2025. 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 not achieved in November 2024 (36 minutes and 47 seconds), however 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 has met 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 and is just below plan for the new indicator of referrals finishing a course of treatment with 2 or more contacts.

<u>Children and Young People</u> – 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 23 in mid-December 2024. Despite a continuing fall in numbers the revised target of zero 65 weeks waits by the end of December looks unlikely to be met.

<u>Primary Care</u> - 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. The number of General Practice appointments provided in the first three months of the 2024-25 tracked close to the ICB plan for this metric, however the July to September 2024 provision was below planned levels. Lancashire & South Cumbria offers fewer general practice appointments per head of population than the national rates and has a lower general practice workforce per head of population 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.

11	in this report.													
Whic	h Strategic Objective/s	does	the re	port re	elate to:	Tick								
SO1	Improve quality, includir	ng safe	ety, clii	nical o	utcomes, and patient	✓								
	experience													
SO2	To equalise opportunitie	omes across the area	✓											
SO3	Make working in Lancas	mbria an attractive and												
	desirable option for exis	employees												
SO4	Meet financial targets a	nd deli	iver im	proved	d productivity	✓								
SO5	Meet national and locall	y dete	rmine	d perfo	rmance standards and	✓								
	targets													
SO6	To develop and implement	ent an	nbitiou	s, deliv	erable strategies	✓								
Impli	cations													
		Yes	No	N/A	Comments									
Assoc	ciated risks	✓				•								
Are a	ssociated risks detailed	✓												
on the	e ICB Risk Register?													

Financial Implications				
Where paper has been discudiscussed this paper)	issed	(list ot	her co	mmittees/forums that have
Meeting	Date			Outcomes
Finance & Performance Committee	6 Jar	nuary 2	2025	Committee notes the report.
Executive Team	7 Jar	nuary :	2025	Approved.
Conflicts of interest associa	ted wi	th thi	s repo	rt
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 – 15 January 2025**

## **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:

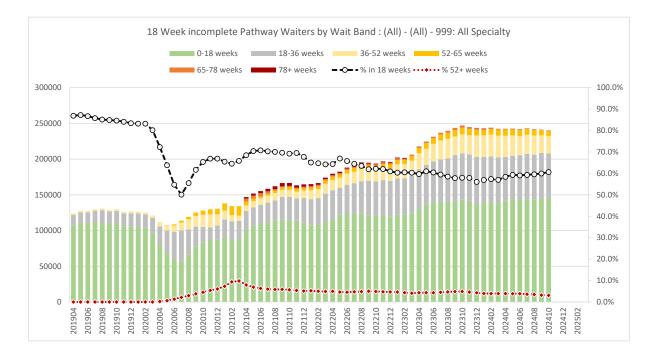
# Table: 12 Month Timeseries of ICB Key Performance Indicators

Key Performance Indicator	Oct-23	Nov-23	De c- 23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	TREND	NORTH WEST	NATIONAL
Total patients waiting more than 104 weeks to start consultant-led treatments	1	3	1	1	4	1	1	0	1	0	0	0	0		W	8	258
Total patients waiting more than 78 weeks to start consultant-led treatments	175	178	209	141	79	39	21	18	13	16	29	43	62		1	198	2874
Total patients waiting more than 65 weeks to start consultant-led treatments	2985	2545	2620	2313	1785	745	786	960	1101	882	828	358	466		~	2371	21925
Total patients waiting more than 52 weeks to start consultant-led treatments	12084	11406	10439	9679	9514	9546	9448	9391	9408	8832	8574	7763	7495			39016	237512
Capped Theatre Utilisation	82.90%	82.00%	78.80%	78.30%	80.60%	79.80%	79.70%	83.30%	81.60%	82.35%	83.20%	84.00%	84.00%	86.10%	~~~	79.10%	79.70%
BADS Daycase Rates	83.40%	83.50%	83.70%	83.80%	83.50%	83.90%		84.40%	83.90%	83.50%	83.50%				~	83.00%	84.30%
Specialist Advice - Pre-Referral (Rate per 100 OP)	5.83	5.88	6.01	6.25	6.05	7.35	6.92	7.18	5.97	6.60	7.04	7.20	6.46		~M~	3.83	6.10
Specialist Advice - Post-Referral (Rate per 100 OP)	29.54	31.85	32.21	32.45	32.79	35.41	30.42	30.01	29.07	27.26	29.72	28.39	30.19		-1,	21.47	21.90
Patient Initiated Follow-Ups (PIFU)	3.92%	4.65%	4.32%	4.06%	3.96%	4.12%	3.71%	3.77%	3.81%	3.87%	4.29%	4.55%	4.47%		1	3.22%	3.67%
Number of Adults on Community Waiting Lists	15303	14744	14031	14810	15172	15460	15176	15519	15855	15460	18816	18563			~_/		
Number of Children on Community Waiting Lists	5210	5321	5896	6002	6279	6415	6477	6379	6527	6119	5958	5886			/		
% of patients that receive a diagnostic test within six weeks (March 2025 ambition of 95%)	75.19%	75.51%	69.22%	71.74%	75.94%	75.30%	73.53%	76.34%	74.36%	73.17%	71.02%	71.40%			W	82.61%	77.31%
People waiting longer than 62 days to start cancer treatment	545	491	528	522	411	358	400	434	531	505	504	483	451		~~		
31 Day First Treatment (96% Standard)	89.96%	90.21%	91.68%	88.45%	90.89%	92.04%	90.42%	93.35%	94.19%	92.69%	94.44%	92.94%			-v^^	93.42%	90.55%
62 Day referral to treatment (85% Standard)	65.29%	66.23%	65.71%	61.55%	65.03%	73.10%	65.94%	68.02%	70.87%	68.68%	68.59%	67.18%			~/^~	70.04%	67.26%
% meeting faster diagnosis standard (75% Standard)	74.13%	75.62%	75.90%	73.56%	80.67%	77.31%	75.24%	78.37%	78.29%	77.80%	77.64%	75.90%			~~~	73.25%	74.85%
A&E 4 Hour Standard (76% Recovery Target)	74.85%	74.61%	74.81%	74.59%	75.44%	76.05%	77.83%	77.86%	78.42%	78.33%	78.32%	77.00%	76.44%	76.06%		70.18%	72.14%
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%	61.93%	61.98%		54.52%	59.11%
Proportion of patients spending more than 12 hours in an emergency department	9.08%	8.82%	9.45%	10.42%	9.31%	9.98%	8.96%	7.66%	7.66%	7.57%	6.79%	8.79%	8.91%	8.48%	~~~	8.68%	
Average ambulance response time: Category 2	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	00:35:06	00:36:47	-^~		00:42:26
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%	37.12%		~~/		28.10%
Number / % of patients with a LOS exceeding 21 days [BCF]	9.05%	9.43%	8.76%	8.96%	9.23%	9.10%	9.20%	8.80%	8.67%	8.51%	7.80%	8.28%	8.44%		~~		7.09%
Proportion of patients discharged to usual place of residence [BCF]	93.27%	92.42%	92.71%	92.98%	92.94%	93.48%	92.66%	93.38%	93.27%	92.57%	93.17%	92.85%	93.29%		V~V~		92.89%
2 Hour Urgent Community Response (70% Target)	94.62%	94.41%	94.06%	94.26%	94.76%	95.50%	95.08%	95.11%	93.28%	93.98%	93.48%	94.74%	91.18%		-~m	88.53%	83.52%
Virtual Ward Occupancy (Snapshot)	57.50%	60.50%	58.50%	58.25%	53.60%	54.77%	50.83%	58.63%	46.46%	54.95%	57.08%	68.74%	71.39%		~~	66.57%	79.10%
Total Virtual ward capacity per 100k of adult population	26.74	26.74	26.74	26.74	26.94	27.34	22.84	22.84	22.89	22.89	22.89	22.62	20.95			22.94	20.26
% of people aged 14 and over with a learning disability on the GP register receiving an AHC	32.47%	38.04%	41.45%	54.81%	66.74%	79.82%	3.66%	7.31%	11.41%	16.83%	22.16%	27.60%	34.73%		1_	39.58%	37.53%
Estimated diagnosis rate for people with dementia	69.02%	69.25%	68.80%	68.47%	68.38%	68.34%	68.35%	68.48%	68.44%	68.89%	69.14%	69.33%	69.44%		11	70.62%	65.65%
Number of general practice appointments per 10,000 weighted patients	4763.9	4399.2	3599.0	4555.1	4266.0	4093.8	4137.7	4144.9	3885.5	4255.3	3821.2	4163.2	5451.8		V-W	4137.3	4824.9
% Same Day Appointments (ACC-08)	38.58%	42.31%	45.78%	44.26%	42.42%	42.55%	43.30%	42.92%	42.89%	41.65%	42.83%	41.47%	35.39%		1		
% of Appointments within 2 weeks of booking (ACC-08)	86.30%	88.30%	89.60%	89.50%	89.10%	88.30%	87.05%	87.62%	87.31%	87.15%	87.43%	87.08%	84.99%		$\sim$		
Percentage of resident population seen by an NHS dentist - ADULT				38.09%	38.24%	38.48%	38.08%	38.22%	38.32%	38.46%	38.54%	38.63%	38.78%	38.85%	N		
Percentage of resident population seen by an NHS dentist - CHILD				0.00%	0.00%	59.87%	59.61%	60.00%	60.20%	60.59%	60.77%	61.00%	61.39%	61.58%	/		
SO44b: Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care	7.53%	7.51%	7.65%	7.62%	7.56%	7.52%	7.45%	7.41%	7.38%	7.35%	7.35%	7.33%	7.30%		~		
High Dose Opioids: Opioids with likely daily dose of ≥120mg morphine equivalence per 1000 patients	1.160	1.229	1.203	1.167	1.103	1.109	1.150	1.169	1.019	1.126	1.091	1.010			$\sim_{\mathcal{N}}$		0.78

- 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.

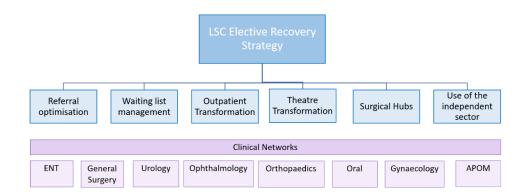
### 3.0 Domain 1 – Elective Recovery

3.1 The number of patients waiting for treatment has reduced marginally this month to a total of 240,071 patients waiting for treatment at the end of October 2024 at ICB level.



- 3.2 At the end of October 2024, Lancashire & South Cumbria ICB commissioned activity included:
  - 62 x 78+ week breaches for L&SC ICB registered patients; 42 of these are waiting under Gynaecology – the majority of which at Blackpool Teaching Hospitals; 5 of these 78 weeks waiters are at either Independent Sector (IS) providers within our area or at NHS providers outside of Lancashire and South Cumbria.

- 65+ week waiter numbers increased to the end of October 2024 position (466 patients). 90 of these ICB patients (19.9%) were waiting at Independent Sector providers or at NHS providers outside of the Lancashire and South Cumbria area. More timely local reporting identifies further improvements in the 65 weeks position though zero x 65 weeks waiters by the end of December 2024 is challenged in a couple of key specialties (including Gynaecology and Orthodontics).
- 3.3 The end of October 2024 position for the 4 main NHS providers within L&SC reported:
  - 0 x 104+ week waiters
  - 57 x 78+ week waiters
  - 382 patients (0.20%) waiting 65+ weeks
  - 190,904 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 83.5% (Jun-Aug 2024), which is broadly in line with regional and national averages.
- 3.6 L&SC ICB latest performance (17<sup>th</sup> November 2024) on theatre capped utilisation is 86.1% which is the second ranked ICB in the country and is well 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 October 2024 were 34.6% which was higher than the national diversion rate. However, post referral diversions (9.8%) were lower than regional and national averages.
- 3.9 Across community services the number of 52 weeks waiters has increased in adult services and decreased in line with plan for children's services. The reduction in the children's services waiting list is mainly due to work continuing to reduce long waiters for Speech and Language Therapy in Lancashire & South Cumbria Foundation Trust. The September 2024 position for adults is reporting a total of 177 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 deteriorated once more (69.4%) for the 4 main providers across L&SC, with only Blackpool Teaching Hospitals seeing an increase in their performance during September 2024 compared to the previous month. The performance for L&SC ICB saw a slight improvement in the month to 71.4%. The national performance (77.3%) and the North West performance (82.6%) are both significantly above the figures for the 4 main providers and the ICB.
- 4.2 The total waiting list for the ICB, which is the 4 main providers, ICB patients being treated out of areas and within the independent sector, has increased to 52,400 in the month ( the 4 main providers increased in September 2024 from the previous month and now stands at 46,498). Both the North West and National waiting lists have also increased in month.
- 4.3 The most challenged performance remains at Lancashire Teaching Hospitals Trust and is mainly due to consistently high number of patients waiting over 6 weeks for non-obstetric ultrasound (NOUS) and echocardiography, which for September had 3,171 patients and 4,046 patients waiting over 6 weeks respectively, with a further 1,897 waiting over 6 weeks for Endoscopy.
- 4.4 The recovery plan developed by Lancashire Teaching Hospitals continues to be monitored through the Tier 1 meetings led by NHS England. The plan has a trajectory which will recover the performance to 95% by year end.
- 4.5 The latest data shows an improvement in Community Diagnostic Centres (CDC) activity versus plan, which is due to both a reprofiling for H2 (second half year)

of the plan and the impact Westmorland going live at the end of August. Current position shows we are approximately 12,000 behind plan.

### 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 several ongoing initiatives to address this including in house smoking cessation services, which will be delivered to East Lancashire Hospitals Trust and Lancashire Teaching Hospitals Trust 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 There are currently 228 children waiting over 52 weeks for Community Services in Lancashire and South Cumbria. The largest number of waits continue to be at Blackpool Teaching Hospitals, mainly for the Paediatric Community Service. There continues to be a fall in the number of children waiting for speech and language therapy at Lancashire and South Cumbria Foundation Trust, however there is emerging pressures on waits for Occupational Therapy.
- 5.4 For elective waits in children, the latest position shows a significant fall in the number waiting over 65 weeks to 23. The largest number of these waits are for the Maxillofacial service at Lancashire Teaching Hospitals.

#### 6.0 Domain 4 – Cancer

- 6.1 In September 2024, the faster diagnosis standard was met across the ICB (75.9%) with all providers, except Blackpool Teaching Hospitals achieving the 75% target. Overall, this was a slight deterioration on the previous period, although performance remains better than both the North West and national position.
- 6.2 Performance against the 31-day standard deteriorated and moved further below the 96% target. The performance fell below North West levels, but remains above national levels in September 2024. Only University Hospitals Morecambe Bay achieved the 96% target.
- 6.3 Achievement against the 62-day standard remains challenged. Overall, performance across the ICB in September 2024 was 67.2%, a deterioration from the previous month with none of our providers achieving the target.

Provider Performance against 3 core cancer standards (September 2024)

		31	62
PROVIDER	FDS	Days	Day
Blackpool Teaching Hospitals NHS Foundation Trust	74.1%	95.6%	64.3%
East Lancashire Hospitals NHS Trust	75.2%	95.8%	67.9%
Lancashire Teaching Hospitals NHS Foundation Trust	76.7%	90.7%	62.7%
University Hospitals of Morecambe Bay NHS Foundation Trust	80.1%	96.3%	76.4%
L&SC AGGREGATE (4 x Providers)	75.9%	92.9%	67.2%
TARGET	75.0%	96.0%	85.0%

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

		31	62
Cancer Alliance	FDS	Days	Day
L&SC Cancer Alliance (CCG TOTAL)	76.4%	93.5%	67.4%
TARGET	75.0%	96.0%	85.0%

- 6.4 Setting these measures in context:
  - 7/20 Alliance nationally for FDS standard (deteriorating position).
  - 6/20 Alliances nationally for 31 day standard (deteriorating position).
  - 12/20 Alliances for 62 day standard (deteriorating position).
- The number of patients waiting over 62-days for cancer treatment reduced up to 1 December 2024 (496 actual vs 569 threshold). Both Lancashire Teaching Hospitals and University Hospitals Morecambe Bay are below threshold.

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>62-day Backlog, Provider vs Threshold,

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

■ Backlog ■ Threshold

LTHT

UHMB

Reducing the 62-day backlog

BTH

0

Improving performance against the faster diagnosis standard

**ELHT** 

- Reducing diagnostic delays
- Increasing surgical capacity.

#### 7.0 Domain 5 – Urgent & Emergency Care

- 7.1 Performance against the 4hr target in November 2024 was 76.1%, 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, although none of the four providers achieved the target. Lancashire Teaching Hospitals at 69.9% was significantly below the other providers and reported a deterioration from the previous month as did University Hospitals Morecambe Bay.
- 7.2 The percentage of patients spending more than 12 hours in an emergency department deteriorated during the most recent period. There continues to be variation by provider, although L&SC performed better than the North West average in the latest period (w/e 11 December 2024).
- 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. As we enter the winter period, we have seen response times deteriorate and the target has not been achieved since September 2024. Average response time in November 2024 was 36 minutes and 47 seconds, however, continues to compare favourably to the national achievement of 42 mins and 26 seconds.
  - \*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) reduced slightly in November 2024 to 94.4%, and compared favourably to averages across the North West (94.9%) and England (95.2%).
- 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 6/42 ICB for performance nationally, with 8.41% 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. Virtual ward capacity across L&SC was temporarily reduced to 388 beds. The occupancy of 65.7% for the November 2024 snapshot shows a deterioration from the previous month and was below the North West position.
- 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 hours 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 Work continues to standardise the reporting of the delivery, impact, exceptions and de-escalation cost reductions of the place-based Urgent and Emergency Care improvement plans.

### 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) in September 2024, down from 35 at the start of the financial year. The Trust has a detailed plan to recover to zero inappropriate out of area placements by the end of the financial year, with a trajectory for closures of out of area placement beds.
- 8.2 The latest local data shows that the ICB is meeting both the reliable recovery and reliable improvement targets year to date. The new indicator of referrals finishing of course of treatment with 2 or more contacts is just under plan (2.6% below) 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. There are some concerns about long waits for Memory Assessment Services especially in the Pennine Lancs regions which are being addressed through the contract meetings.
- 8.4 L&SC has met 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 The number of General Practice appointments provided in the first three months of the 2024-25 tracked close to the ICB plan for this metric, however the July to September 2024 provision was below planned levels. The significant increase in appointments in October is also seen regionally and nationally and is likely to be due to the flu vaccination programme.
- 9.3 85.0% of General Practice appointments were offered within 2 weeks of booking in October 2024 (for the 8 specific appointment types) and 50.0% of these appointments were offered on the same day. Although performance is lower than the regional and national averages, there are also variations at sub-ICB / sub place levels with same day appointments ranging from 39.3% to 58.6%.
- 9.4 There remains a significant risk that the current national GP contract dispute and subsequent GPCA will impact on patients' access to general practice services and therefore the ICB's access performance.
- 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.
- 9.8 The latest position for 'unique adults' (seen within 24 months) is 38.9% against a planning target of 39.5%. For 'unique children' (seen within 12 months) the Nov-24 position is already in advance of our end of year target with current performance of position is 61.6% against a march 2025 target of 60%.
- 9.9 LSC continues to perform well on 'antimicrobial resistance: proportion of broadspectrum antibiotic prescribing in primary care' metric in aggregate with a steadily reducing trend that is at 7.30% for the most recent 12 months against a maximum threshold of 10%.

#### 10.0 Domain 8 - Palliative Care

- 10.1 L&SC had a practice population of 1,859,578 in September 2024. Of those patients registered with a GP as of September 2024, 13,800 (0.7%) are included on a Quality and Outcome Framework (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 49.6% of patients deceased in September 2024 on the QOF register for end of life, with Central Lancashire place achieving the highest performance at 56.2% of people registered and Morecambe Bay the lowest at 43.5%. The total number of people that have died and had a form of care planning was 40% in September 2024 with Morecambe Bay place achieving the highest performance at 50.2% and West Lancs the lowest at 23.6%.

#### 11.0 Conclusion

11.1 Even though performance was challenged during the latest reporting period, on the whole performance across the ICB continues to compare well with that of the North West and nationally. There is continuing pressures for Urgent and Emergency Care, on meeting the zero 65 week waits target and on community waiting list.

## 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

January 2025

Appendix A – Performance Scorecard

S01 - Improve quality, including safety, clinical		S02 - Equalise opportunities and clinical oucomes across the area																					
outcomes, and patient experience			ICB COM	MISSIONEF	t .	Blackburn with Darwen	Blackpool	Lancashire - East	La	ncashi re - Cen	tral	Lancashire - Coastal	South Cumbria			PRO	VIDER			ICB P	PROVIDEF	R AGGRE	GATE
Key Performance Indicator	Date	Plan	Actual	In month	Direction	BwD (00Q)	Bpool (00R)	EL (01A)	CSR (00X)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)	втн	ELHT	LTHT	инмв	LSCFT	NWAS	Plan	Actual	In month	Direction
Smoking at time of delivery	Apr-Jun24	6.00%	8.00%	×	<b>1</b>	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)	Q2 24-25	95%	86.17%		Ψ.	80.7%	86.5%			86	.3%												
Reduce still birth	2022		2.90		<b>1</b>									1.96	3.25	4.12	1.11						
Reduce neonatal mortality	2022		2.18		Ψ.									3.53	2.40	1.95	1.11						
Bowel screening coverage, aged 60-74, screened in last 30 months	Q4 23-24		66.20%		<b>1</b>	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%		<b>1</b>																		
Cervical screening coverage - % females aged 25 - 49 attending screening within 3.5 Years	Q4 23-24	80.0%	67.91%		4	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%		Ψ.	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%		<b>1</b>	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 +	Sep24-Nov24	85%	70.85%			63.3%	67.9%	66.9%	73.6%	70.7%	74.4%	73.4%	74.3%										
Hypertension case-finding	2023-24	80%	79.57%		<b>1</b>	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%		Ψ	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	Jan23-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	Nov-24		38.85%		1																		
Percentage of resident population seen by an NHS dentist - CHILD	Nov-24		61.58%		1																		
GP CQC Ratings (no. practices inadequate or requiring improvement)	Nov-24		3			0	0	0	2	0	0	0	1										
S044a: Antimicrobial resistance : Antibacterial items by STAR-PU	Oct-24	0.871	1.017		4	1.088	1.149	0.953	0.974	1.100	0.958	1.093	0.939										
S044b: Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care	Oct-24	10%	7.30%	¥	<b>1</b>	5.38%	7.85%	5.46%	7.03%	7.74%	7.90%	8.37%	9.03%										
High Dose Opioids : Opioids with likely daily dose of ≥120mg morphine equivalence per 1000 patients	Sep-24		1.010		€->	1.261	1.705	0.669	0.736	0.518	1.588	1.679	0.850										
Environmental impact of inhalers - average carbon footprint per salbutamol inhaler	Sep-24		16.832		1	16.563	16.400	15.273	16.479	18.880	21.014	16.806	16.403										
MRSA Infections	Sep-24	0	4			0	1	0	0	1	1	0	1	0	0	0	0			0	0	<b>✓</b>	
S04 - Meet financial targets and deliver improved								S02 -	Equalis	e oppor	tunities	and clin	nical ouco	mes a	ross t	he are	a						
productivity		ICI	3 COMMIS	SIONER		Blackburn with Darwen	Blackpool	Lancashire - East	La	ncashi re - Cen	tral	Lancashire - Coastal	South Cumbria			PRO	VIDER			ICB P	PROVIDE	R AGGRE	GATE
Key Performance Indicator	Date	Plan	Actual	In month	Direction		Bpool (00R)	EL(01A)	CSR (00X)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)	втн	ELHT	LTHT	инмв	LSCFT	NWAS	Plan	Actual	In month	Direction
Capped Theatre Utilisation %: Touch time within planned session vs planned session time	we 17/11/2024													83.30%	90.40%	85.80%	82.80%				86.1%		4
RTT completed pathway activity as a percentage of 2019/20 baseline plus A&G diversions uplift	Oct-24		113.5%											121.37%	90.99%	99.93%	122.57%				†		
S03 - Make working in L&SC an attractive and desireable option								S	02 - Equa	lise oppo	ortunitie	s and clir	nical oucor	nes acro	ss the	area							
for exisiting and potential employees			ICB COM	MISSIONER	Blackburn with Darwen	Blackpool	Lancashire - East	La	ncashi re - Cen	tral	Lancashire - Coastal	South Cumbria			PRO	VIDER			ICB P	PROVIDE	RAGGRE	GATE	
Key Performance Indicator	Date	Plan	Actual	In month	Direction	BwD (00Q)	Bpool (00R)	EL(01A)	CSR (00X)	GP (01E)	WL (02G)	FW (02M)	M bay (01K)	втн	ELHT	LTHT	инмв	LSCFT	NWAS	Plan	Actual	In month	Dire ction
FTE doctors in General Practice per 10,000 weighted patients	Oct-24		5.46		4	5.08	4.67	5.26	5.78	6.68	5.49	4.52	5.99										
FTE Nurses in General Practice per 10,000 weighted patients	Oct-24		3.13		€->	2.17	3.35	2.94	3.43	2.78	2.81	4.00	3.39										
FTE Direct Patient Care staff in GP practices per 10,000 weighted patient population	Oct-24		2.67		←→	1.19	2.88	2.47	1.73	2.61	1.80	3.35	3.97										
FTE ALL CUNICAL staff in GP practices per 10,000 weighted patient population	Oct-24		11.26		4	8.43	10.90	10.67	10.94	12.07	10.11	11.87	13.35										
FTE ALL CLINICAL staff in GP practices per 10,000 weighted patient population	Oct-24		11.26		4	8.43	10.90	10.67	10.94	12.07	10.11	11.87	13.35										<u> </u>

S05 - Meet national and locally determined	S02 - Equalise opportunities and clinical oucomes ac											nes acro	ss the a	irea										
performance standards and targets			ICB COM	MISSIONE	R	Blackburn with Darwen	Blackpool	Lancashire - East	Lai	ncashire - Cen	tral	Lancashire - Coastal	South Cumbria			PROV	/IDER			ICB PI	PROVIDER AGGREGATE			
Key Performance Indicator	Date	Plan	Actual	In month	Direction	BwD (00Q)	Bpool (00R)	EL (01A)	CSR (00X)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)	втн	ELHT	LTHT	UНМВ	LSCFT	NWAS	Plan	Actual	In month	Direction	
Total patients waiting more than 104 weeks to start consultant-led treatments	Oct-24	0	0	4		0	0	0	0	0	0	0	0	0	0	0	0			0	0	1	<b>←→</b>	
Total patients waiting more than 78 weeks to start consultant-led treatments	Oct-24	0	62	*	Ψ	1	21	2	4	6	1	22	5	53	0	0	4			0	57	×	Ψ.	
Total patients waiting more than 65 weeks to start consultant-led treatments	Oct-24	248	466	*	<b>^</b>	9	155	24	22	54	34	130	38	332	5	29	16			0	382	×	<b>^</b>	
Total patients waiting more than 52 weeks to start consultant-led treatments	Oct-24	6127	7495	*	<b>^</b>	947	958	2319	606	732	414	943	576	1682	2860	1662	430			4889	6430	×	<b>^</b>	
BADS Daycase Rates	Jun-Aug24				Ψ.									87.70%	79.10%	81.20%	85.80%				83.5%		<b>↑</b>	
Specialist Advice - Pre-Referral (Rate per 100 OP)	Oct-24		6.46		<b>←</b> →									4.96	4.83	8.50	8.17	38.10			6.46	1	<b>↑</b>	
Specialist Advice - Post-Referral (Rate per 100 OP)	Oct-24		30.19		<b>←</b> →									46.52	24.42	7.17	30.91				30.19		<b>←</b> →	
Patient Initiated Follow-Ups (PIFU)	Oct-24	5.24%	4.47%	*	Ψ									1.68%	1.57%	3.41%	11.00%			5.24%	4.47%	×	<b>↑</b>	
% of outpatient attendances that are for first appointments, or follow up appointments attracting a procedure tariff - ERF scope	Oct-24	46.56%	49.50%	1	<b>↑</b>									48.70%	56.80%	41.40%	52.40%				49.50%			
Number of Adults on Community Waiting Lists	Sep-24		18563		<b>↑</b>									5157	6962		4445	1999			18563		Ψ	
Number of Children on Community Waiting Lists	Sep-24		5886		<b>↑</b>									1169	1624		274	2819			5886		<b>↑</b>	
Number of Adults on Community Waiting Lists waiting 52+ weeks	Sep-24	48	177		Ψ.									151	0		26	0			177		•	
Number of Children on Community Waiting Lists waiting 52+ weeks	Sep-24	223	228		<b>←→</b>									134	11		1	82			228		<b>^</b>	
Diagnostic Tests - Magnetic Resonance Imaging	September 2024	68,865	70,429	4										11637	15700	15875	13336			54255	56548	1		
Diagnostic Tests - Computed Tomography	September 2024	117,952	119,402	1										27331	29698	25829	24540			102971	107398	1		
Diagnostic Tests - Non-Obstetric Ultrasound	September 2024	139,540	138,633	×										23014	40753	37874	22051			120303	123692	1		
Diagnostic Tests - Colonoscopy	September 2024	15,228	13,625											2969	4552	1547	3134			14452	12202	×		
Diagnostic Tests - Flexi Sigmoidoscopy	September 2024	3,919	3,419											650	797	385	946			3570	2778	×		
Diagnostic Tests - Gastroscopy	September 2024	14,236	13,624											2541	4822	768	3017			12492	11148	×		
Diagnostic Tests - Cardiology - Echocardiography	September 2024	33,130	31,685	×										6518	7206	8531	5292			28821	27547	×		
Diagnostic Tests - DEXA Scan	September 2024	8,490	9,103	4										1813	2041	1835	2011			7269	7700	1		
Diagnostics Tests - Audiology	September 2024	23,529	29,345	4										4150	3690	3718	5606			15702	17164	1		
% of patients that receive a diagnostic test within six weeks (March 2025 ambition of 95%)	Sep-24	95%	71.4%	×	<b>←→</b>	79.0%	88.8%	79.8%	50.3%	50.5%	88.3%	81.3%	89.7%	93.68%	79.39%	49.25%	92.64%			95%	69.4%	×	<b>←→</b>	
People waiting longer than 62 days to start cancer treatment	Oct-24		451		Ψ									55	207	134	55				451	×	+	
31 Day First Treatment (96% Standard)	Sep-24	96%	92.9%		Ψ.	92.09%	91.95%	94.72%	94.34%	91.75%	88.10%	93.16%	93.19%	95.6%	95.8%	90.7%	96.3%			96%	93.5%	×	<b>+</b>	
62 Day referral to treatment (85% Standard)	Sep-24	85%	67.2%		Ψ	66.67%	64.00%	64.00%	65.05%	63.55%	59.65%	70.73%	75.13%	64.3%	67.9%	62.7%	76.4%			85%	56.4%	×	+	
% meeting faster diagnosis standard	Sep-24	75%	75.90%	4	Ψ	72.15%	74.80%	74.69%	76.08%	76.68%	69.29%	77.72%	80.11%	74.1%	75.2%	76.7%	80.1%			75%	76.4%	1	<b>←→</b>	
Number of general practice appointments per 10,000 weighted patients	Oct-24	4523	5452	1	<b>↑</b>	4581	4690	5243	6049	5520	6227	6448	5469											
% Same Day Appointments (ACC-08)	Oct-24		49.96%		←→	58.6%	39.3%	47.7%	52.1%	56.5%	51.0%	48.3%	50.8%											
% of Appointments within 2 weeks of booking (ACC-08)	Oct-24		84.99%		←→	88.1%	82.4%	82.3%	89.6%	90.3%	85.7%	79.5%	85.7%											
General Practitioner appointments per FTE GP	Oct-24		386.01		<b>↑</b>	420.46	323.25	364.32	412.64	314.42	396.83	438.06	432.60											
Percentage of resident population seen by an NHS dentist - ADULT (Rolling 24 months)	Nov-24		38.85%		<b>↑</b>																	1		
Percentage of resident population seen by an NHS dentist - CHILD (Rolling 12 months)	Nov-24		61.58%		<b>↑</b>																			
Recover Dental Activity - Increase in Units of Dental Activity (UDA)	Apr-24		91.45%		<b>↑</b>																			
Pharmacy First Consultations by Type	Jul-24		15423																					
Optometrist - NHS Sight Tests	Nov-24		40110		<b>←</b> →																			

S05 - Meet national and locally determined						S02 - Equalise opportunities and clinical oucomes across the area																		
performance standards and targets			ICB COM	MISSIONEI	R	with Blacknool Lancashire - Central						Lancashire - Coastal	South Cumbria	PROVIDER							ROVIDER	AGGRE	GATE	
Key Performance Indicator	Date	Plan	Actual	In month	Direction	BwD	(00Q)	Bpool (00R)	EL (01A)	CSR (00X)	GP (01E)	WL (02G)	FW (02M)	Mbay (01K)	втн	ELHT	LTHT	инмв	LSCFT	NWAS	Plan	Actual I	n month	Direction
A&E 4 Hour Standard (76% Recovery Target)	Nov-24	76%	76.06%	1	Ψ.			` '							77.8%	76.8%	69.9%	75.1%			76%	75.21%	×	4
A&E 4 Hour Standard - Type 1 Only	Nov-24		61.98%												53.8%	64.4%	62.1%	66.3%				61.98%		
Proportion of patients spending more than 12 hours in an emergency department	December	2%													11.3%	10.6%	8.2%	7.7%			2%	9.78%	×	<b>↑</b>
Average ambulance response time: Category 2	Nov-24	00:30:00	00:36:47	×	•															00:36:47	00:30:00	00:36:47	×	•
Ambulance handover delays over 30 minutes as a proportion of ambulance arrivals.	Nov-24	5%	29.14%		Ψ.										46.8%	23.4%	25.8%	21.9%		37.1%	5%	29.14%		
Delayed Transfers of Care / No Medical Criteria to Reside	Nov-24														5.4%	5.3%	8.0%	21.1%				9.17%		
Adult G&A Bed Occupancy	Nov-24	92%													96.57%	97.45%	94.94%	87.21%			92%	94.36%	×	
G&A Bed Capacity	Nov-24														772	758	860	627				3017		
% G&A Beds Occupied by Patients patients with a length of stay of 7+ Days	Nov-24		47.3%												51.1%	46.6%	46.6%	44.4%				47.3%		
% G&A Beds Occupied by Patients patients with a length of stay of 14+ Days	Nov-24		26.1%												26.9%	25.4%	25.3%	26.9%				26.1%		
% G&A Beds Occupied by Patients patients with a length of stay of 21+ Days	Nov-24		16.0%												15.5%	15.9%	15.6%	17.6%				16.0%		
Number / % of patients with a LOS exceeding 21 days [BCF]	Oct-24		8.4%			9.4	18%	9.90%			8.19%			8.10%										
Proportion of patients discharged to usual place of residence [BCF]	Oct-24		93.29%			94.:	11%	93.04%			92.85%			95.31%										
AVOIDABLE ADMISSIONS : Indirectly standardised rate (ISR) of admissions per 100,000 population [BCF]	Oct23-Sep24					0.	70	1.78			1.04			0.94										
Emergency hospital admissions due to falls in people aged 65 and over (DSR per 100,000) [BCF]	2023-24 YTD					120	5.76	1940.79			1622.26			1932.21										
Reducing length of stay for patients in hospital for 21 days and over - Variance to Plan	November 2024														-19	3	21	-37			498	450	✓	<b>↑</b>
2 Hour Urgent Community Response (70% Target)	Oct-24	70%	91.18%	1	<b>←→</b>										91.11%	90.91%		97.92%	74.51%					
Virtual Ward Bed Capacity vs Plan	Nov-24		388		<b>←</b> →										71	160	80	47			425	388	×	
Virtual Ward Occupancy (Snapshot)	Nov-24	80%	65.72%	×	Ψ.										52.11%	97.50%	57.50%	27.66%			80%	65.72%		
Total Virtual ward capacity per 100k of adult population	Nov-24	20.14	20.95		<b>←</b> →																			

# **KEY**

DATA UPDATED WITHIN THIS REPORT

NO UPDATE AVAILABLE FOR THIS REPORT

UPDATE TO BE CONFIRMED