

Southport & Formby Clinical Commissioning Group

Integrated Performance Report Summary – February 2021

Summary Performance Dashboard

									2020-21						
Metric	Reporting Level			Q1			Q2			Q3			Q4		YTD
	Level		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
E-Referrals - NB reporting suspended on this metric to	his month														
NHS e-Referral Service (e-RS) Utilisation Coverage		RAG	R	R	R	R	R	R	R	R	R	R			R
Utilisation of the NHS e-referral service to enable choice at first routine elective referral. Highlights	Southport & Formby CCG	Actual	68.8%	74.1%	53.1%	44.7%	47.3%	57.6%	60.2%	59.2%	59.5%	58.4%			58.3%
the percentage via the e-Referral Service.		Target	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Diagnostics & Referral to Treatment (RTT)			ı				1	I			I	I	l	I	
% of patients waiting 6 weeks or more for a diagnostic test		RAG	R	R	R	R	R	R	R	R	R	R	R		R
The % of patients waiting 6 weeks or more for a diagnostic test	Southport & Formby CCG	Actual	62.68%	63.67%	51.17%	32.35%	27.02%	22.43%	22.17%	16.74%	18.44%	21.10%	16.69%		
	Tomby Coo	Target	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%
% of all Incomplete RTT pathways within 18 weeks		RAG	R	R	R	R	R	R	R	R	R	R	R		R
Percentage of Incomplete RTT pathways within 18 weeks of referral	Southport & Formby CCG	Actual	79.96%	70.87%	58.29%	54.96%	61.68%	70.53%	77.73%	80.71%	80.69%	75.05%	73.14%		
		Target	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%
Referral to Treatment RTT - No of Incomplete Pathways Waiting >52 weeks		RAG	R	R	R	R	R	R	R	R	R	R	R		R
The number of patients waiting at period end for incomplete pathways >52 weeks	Southport & Formby CCG	Actual	6	10	17	36	62	85	71	99	112	226	401		
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
Cancelled Operations															
Cancellations for non clinical reasons who are treated within 28 days		RAG	R			R	R	R	R	R	R	R			R
Patients who have ops cancelled, on or after the day of admission (Inc. day of surgery), for non-	Southport & Ormskirk	Actual	2	0	0	4	3	5	4	10	1	1	0		30
clinical reasons to be offered a binding date within 28 days, or treatment to be funded at the time and hospital of patient's choice.	Hospital	Target	0	0	0	0	0	0	0	0	0	0	0	0	0
Urgent Operations cancelled for a 2nd time Number of urgent operations that are cancelled by	0 11 1.5	RAG	G	G	G	G	G	G	G	G	G	G	G		G
the trust for non-clinical reasons, which have already been previously cancelled once for non-	Southport & Ormskirk	Actual	0	0	0	0	0	0	0	0	0	0	0		0
clinical reasons.	Hospital	Target	0	0	0	0	0	0	0	0	0	0	0	0	0

Cancer Waiting Times															
% Patients seen within two weeks for an urgent GP referral for suspected cancer (MONTHLY)		RAG	G					R	R	R	R	R	R		R
The percentage of patients first seen by a specialist within two weeks when urgently referred by their GP	Southport & Formby CCG	Actual	94.39%	98.05%	99.3%	98.04%	93.17%	89.22%	84.81%	78.5%	74.74%	84.67%	88.67%		88.74%
or dentist with suspected cancer		Target	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%
% of patients seen within 2 weeks for an urgent referral for breast symptoms (MONTHLY)		RAG	G	R	R	R	R	G	G	R	R	R	R		R
Two week wait standard for patients referred with breast symptoms' not currently covered by two	Southport & Formby CCG	Actual	100%	91.67%	90.0%	90.32%	91.18%	94.44%	93.10%	37.14%	47.27%	64.10%	77.42%		72.73%
week waits for suspected breast cancer		Target	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%
% of patients receiving definitive treatment within 1 month of a cancer diagnosis		RAG	G	R	R	G	R	R	R	G	G	G	G		G
(MONTHLY) The percentage of patients receiving their first	Southport & Formby CCG	Actual	100%	94.87%	95.24%	98.41%	94.55%	93.15%	93.33%	96.05%	98.21%	96.51%	97.14%		96.21%
definitive treatment within one month (31 days) of a decision to treat (as a proxy for diagnosis) for cancer		Target	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%
% of patients receiving subsequent treatment for cancer within 31 days (Surgery) (MONTHLY)		RAG	G	G	R	G	R	R	G	R	R	R	G		R
31-Day Standard for Subsequent Cancer Treatments where the treatment function is	Southport & Formby CCG	Actual	100%	100%	70.0%	100%	91.67%	85.71%	100%	88.89%	86.67%	88.89%	100%		91.51%
(Surgery)		Target	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%
% of patients receiving subsequent treatment for cancer within 31 days (Drug Treatments)	On other and O	RAG	G	G	R	G	G	R	G	G	G	G	G		G
(MONTHLY) 31-Day Standard for Subsequent Cancer	Southport & Formby CCG	Actual	100%	100%	87.50%	100%	100%	90.48%	100%	100%	100%	100%	100%		98.17%
Treatments (Drug Treatments) % of patients receiving subsequent treatment for		Target	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
cancer within 31 days (Radiotherapy Treatments) (MONTHLY)	Southport &	RAG	G	G	G	G	R	G	G	G	G	G	G		G
31-Day Standard for Subsequent Cancer Treatments where the treatment function is	Formby CCG	Actual	95.24%	100%	100%	100%	93.75%	100%	96.00%	95.24%	100%	100%	100%		98.09%
(Radiotherapy) % of patients receiving 1st definitive treatment		Target	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%
for cancer within 2 months (62 days) (MONTHLY) The % of patients receiving their first definitive	Southport &	RAG	R 74 000/	G	R 70, 470/	G	R 00.000	R 04.000/	R 04.000/	R 000/	R 04.040/	R 70.500/	R 70 500/		R 00.440/
treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer	Formby CCG	Actual Target	71.88% 85%	86.96% 85%	76.47% 85%	89.74% 85%	83.33% 85%	81.82% 85%	84.09% 85%	82.22% 85%	84.91% 85%	70.59% 85%	70.59% 85%	85%	80.14% 85%
% of patients receiving treatment for cancer		RAG	G	0370	R	0370	0376	0370	0370	G	8 R	G	G	0070	R
within 62 days from an NHS Cancer Screening Service (MONTHLY)	Southport &	Actual	100%	No pats	0%	No pats	No pats	No pats	No pats	100%	66.67%	100%	100%		75.83%
Percentage of patients receiving first definitive treatment following referral from an NHS Cancer	Formby CCG	Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
Screening Service within 62 days. % of patients receiving treatment for cancer	0 11 1 -	RAG			G	G		G	G	G	G	177	G		G
within 62 days upgrade their priority (MONTHLY) % of patients treated for cancer who were not	Southport & Formby CCG	Actual	84.21%	62.50%	88.24%	100%	83.33%	89.47%	87.50%	100%	87.50%	58.82%	89.47%		85.71%
originally referred via an urgent but have been seen by a clinician who suspects cancer, who has	(local target 85%)	Target	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%
upgraded their priority.	· - /	rarget	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%

									2020-21							
Metric	Reporting Level			Q1			Q2			Q3			Q4		YTD	
	Level		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Accident & Emergency																
4-Hour A&E Waiting Time Target % of patients who spent less than four hours in A&E		RAG	R	G		R	R	R	R	R	R	R	R		R	
	Southport & Formby CCG	Actual	92.74%	95.78%	95.62%	93.27%	89.02%	89.61%	80.47%	82.96%	81.74%	77.76%	83.14%		87.329	
		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	
MSA						I				I						
Mixed sex accommodation breaches - All Providers		RAG														
No. of MSA breaches for the reporting month in question for all providers	Southport & Formby CCG	Actual	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available			
	·	Target	0	0	0	0	0	0	0	0	0	0	0	0	0	
Mixed Sex Accommodation - MSA Breach Rate MSA Breach Rate (MSA Breaches per 1,000		RAG														
FCE's)	Southport & Formby CCG	Actual	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available			
	,	Target	0	0	0	0	0	0	0	0	0	0	0	0	0	
HCAI																
Number of MRSA Bacteraemias Incidence of MRSA bacteraemia (Commissioner)		RAG	G	R	R	R	R	R	R	R	R	R	R		R	
cumulative	Southport &	YTD	0	1	1	1	1	1	1	1	1	2	2		2	
	Formby CCG		0	0	0	0	0	0	0	0	0	0	0	0	0	
Number of C.Difficile infections		Target												0		
Incidence of Clostridium Difficile (Commissioner) cumulative	Southport 8	RAG	G	R	R	R	R	R	R	R	R	R	R		R	
	Southport & Formby CCG		YTD	3	7	12	12	17	19	20	24	27	30	33		33
		Target	3	5	7	9	11	14	16	19	22	25	28	30	30	
Number of E.Coli Incidence of E.Coli (Commissioner) cumulative		RAG	G		R		R	R	R	R	R	R	R		R	
	Southport & Formby CCG	YTD	4	18	30	38	53	66	77	89	96	104	110		104	
	·	Target	9	18	27	39	48	57	66	75	83	91	100	109	109	

									2020-21						
Metric	Reporting Level			Q1			Q2			Q3			Q4		YTD
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Mental Health															
Proportion of patients on (CPA) discharged from inpatient care who are followed up within 7 days		RAG													G
The proportion of those patients on Care Programme Approach discharged from inpatient care who are	Southport & Formby CCG	Actual		97.3%			97.2%			100%					98.20%
followed up within 7 days		Target		95%			95%			95%			95%		95%
Episode of Psychosis															
First episode of psychosis within two weeks of referral		RAG													G
The percentage of people experiencing a first episode of psychosis with a NICE approved care package	Southport & Formby CCG	Actual		77.6%			72.7%			90%					80.10%
within two weeks of referral. The access and waiting time standard requires that more than 50% of people do so within two weeks of referral.	Tomby GGG	Target		60%			60%			60%			60%		60%
Eating Disorders															
Eating Disorders Service (EDS) Treatment commencing within 18 weeks of referrals		RAG	R	R	R	R	R	R	R	R	R	R	R		R
٠	Southport & Formby CCG	Actual	56.96%	48.70%	33.75%	25.88%	31.61%	35.71%	30.77%	37.93%	40.74%	37.93%	30.30%		38.10%
		Target	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%
IAPT (Improving Access to Psychological Ther	apies)														
IAPT Recovery Rate (Improving Access to Psychological Therapies)		RAG	R					R				R	R		G
The percentage of people who finished treatment within the reporting period who were initially assessed	Southport & Formby CCG	Actual	37.66%	56.25%	58.56%	55.36%	54.55%	49.11%	50.00%	50.00%	53.23%	38.30%	47.20%		51.88%
as 'at caseness', have attended at least two treatment contacts and are coded as discharged, who are assessed as moving to recovery.	Tolling GGG	Target	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
IAPT Access The proportion of people that enter treatment against		RAG	R	R	R	R	R	R	R	R	R	R	R		R
the level of need in the general population i.e. the proportion of people who have depression and/or	Southport & Formby CCG	Actual	0.63%	0.42%	0.70%	0.73%	0.72%	0.89%	0.88%	0.64%	0.49%	0.25%	0.93%		7.28%
anxiety disorders who receive psychological therapies		Target	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	
IAPT Waiting Times - 6 Week Waiters The proportion of people that wait 6 weeks or less from		RAG													G
referral to entering a course of IAPT treatment against the number who finish a course of treatment.	Southport & Formby CCG	Actual	98.61%	97.44%	99.10%	97.14%	98.86%	98.10%	91.96%	96.80%	98.50%	98.10%	96.00%		97.30%
		Target	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
IAPT Waiting Times - 18 Week Waiters The proportion of people that wait 18 weeks or less		RAG	G	G	G	G	G	G	G	G	G	G	G		G
from referral to entering a course of IAPT treatment, against the number of people who finish a course of	Southport & Formby CCG	Actual	100%	100%	100%	100%	100%	98.9%	99.1%	100%	100%	100%	100%		100%
treatment in the reporting period.		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%

									2020-21						
Metric	Reporting Level			Q1			Q2			Q3			Q4		YTD
	Feaci		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Dementia															
Estimated diagnosis rate for people with dementia Estimated diagnosis rate for people with dementia		RAG	R	R	R	R	R	R	R	R	R	R	R		R
	Southport & Formby CCG	Actual	65.20%	63.94%	63.68%	64.00%	63.97%	63.96%	63.50%	63.50%	63.72%	62.84%	62.00%		63.66%
	., .,	Target	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%
Learning Disability Health Checks				I		I			ı		I				
No of people who have had their Annual LD Health Check		RAG					R								G
	Southport & Formby CCG	Actual		18.6%			26.4%			59.0%					59%
		Target		17%			34%			50%			67%		67%
Severe Mental Illness - Physical Health Check															
People with a Severe Mental Illness receiving a full Physical Annual Health Check and follow-up		RAG		R			R			R					R
interventions (%) Percentage of people on General Practice Serious	Southport &	Actual		32.10%			28.00%			25.40%					28.50%
Mental Illness register who receive a physical health check and follow-up care in either a primary or secondary setting.	Formby CCG	Target		50%			50%			50%			50%		50%
Children & Young People Mental Health Services	s (CYPMH)													Rolling	12 month
2471: Improve access rate to Children and Young People's Mental Health Services (CYPMH)		RAG					R			R					G
Increase the % of CYP with a diagnosable MH condition to receive treatment from an NHS-funded community MH	Southport & Formby CCG	Actual		17.80%			8%			6.10%					37.80%
service	·	Target		8.75%			8.75%			8.75%			8.75%		35% YTD
Children and Young People with Eating Disorder	rs .														
The number of completed CYP ED routine referrals within four weeks		RAG		R											R
The number of routine referrals for CYP ED care pathways (routine cases) within four weeks	Southport & Formby CCG	Actual		86.70%			96.00%			96.70%					93.10%
(QUARTERLY)	,	Target		95.00%			95.00%			95.00%			95.00%		95.00%
The number of completed CYP ED urgent referrals within one week		RAG		G			G			G					G
The number of completed CYP ED care pathways (urgent cases) within one week (QUARTERLY)	Southport & Formby CCG	Actual		100%			100%		100%					100%	
		Target		95%			95%			95%			95%		95%

Wheelchairs							
Percentage of children waiting less than 18 weeks for a wheelchair The number of children whose episode of care was closed within the		RAG					R
reporting period, where equipment was delivered in 18 weeks or less of	Southport & Formby CCG	Actual	100%	100%	100%		100%
being referred to the service.		Target	92%	92%	92%	92%	92%

									2020-21						
Metric	Reporting Level			Q1			Q2			Q3			Q4		YTD
	Level		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
SEND Measures															
Child and Adolescent Mental Health Services (CAMHS) - % Referral to choice within 6 weeks - Alder Hey		RAG	R	R	R	R	R	R		R	R	R	R		R
	Sefton	Actual	36.8%	35.4%	58.9%	75.5%	72.4%	86.9%	93.2%	87.3%	85.0%	54.7%	39.20%		65.9%
		Target	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%
Child and Adolescent Mental Health Services (CAMHS) - % referral to partnership within 18 weeks - Alder Hey		RAG	R	R	R	R	R	R	R	R	R	R	R		R
,	Sefton	Actual	64.2%	61.4%	56.3%	40.0%	36.0%	63.6%	62.5%	51.9%	50.0%	52.2%	41.20%		52.7%
		Target	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%
Percentage of Autism Spectrum Disorder (ASD) assessments started in 12 weeks - Alder Hey		RAG	G	G	G	G	G	G	G	G	G	R	R		G
,	Sefton	Actual	100%	100%	98%	95%	95%	96%	93%	93%	90%	87%	83%		94.0%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
Percentage of Autism Spectrum Disorder (ASD) assessments completed within 30 Weeks - Alder Hey		RAG	G	G	G	G	G	G	G	G	G	G	G		G
assessments completed within 50 Weeks Audi Hey	Sefton	Actual	100%	100%	100%	100%	100%	100%	99%	98%	97%	93%	91%		98.0%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
Percentage of Attention Deficit Hyperactivity Disorder (ADHD) assessments started within 12 Weeks - Alder		RAG	G	G	G	R	R	R	G	G	R	G	G		G
Hey	Sefton	Actual	100%	100%	100%	88%	81%	89%	100%	100%	85%	100%	99%		95.0%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
Percentage of Attention Deficit Hyperactivity Disorder (ADHD) assessments completed within 30 Weeks -		RAG	G	G	G	G	G	G	G	G	G	G	G		G
Alder Hey	Sefton	Actual	100%	100%	100%	100%	100%	100%	98%	96%	96%	95%	91%		98.0%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
Average waiting times for Autism Spectrum Disorder (ASD) service in weeks (ages 16 to 25 years) - Mersey		RAG													
Care	Sefton	Actual					85.2	89.4	89.2	66.2	23.1	10.5	10.7		
		Target													

Executive Summary

This report provides summary information on the activity and quality performance of Southport & Formby Clinical Commissioning Group at month 11 (note: time periods of data are different for each source).

Constitutional Performance for Feb and Q3 2020/21	CCG	S&O
Diagnostics (National Target <1%)	16.69%	13.54%
Referral to Treatment (RTT) (92% Target)	73.14%	81.45%
No of incomplete pathways waiting over 52 weeks	401	155
Cancelled Operations (Zero Tolerance)	-	0
Cancer 62 Day Standard (Nat Target 85%)	70.59%	72.83%
A&E 4 Hour All Types (National Target 95%)	83.14%	83.28%
A&E 12 Hour Breaches (Zero Tolerance)	•	1
Ambulance Handovers 30-60 mins (Zero Tolerance)	•	13
Ambulance Handovers 60+ mins (Zero Tolerance)	•	1
Stroke (Target 80%) (January month in arrears)	•	63.60%
TIA Assess & Treat 24 Hrs (Target 60%)	•	28.60%
Mixed Sex Accommodation (Zero Tolerance)	Not Available	0
CPA 7 Day Follow Up (95% Target) 2020/21 - Q3	100.00%	-
EIP 2 Weeks (60% Target) 2020/21 - Q3	90.00%	-
IAPT Access (1.59% target monthly - 19% YTD)	0.93%	-
IAPT Recovery (Target 50%)	47.10%	-
IAPT 6 Weeks (75% Target)	96.0%	-
IAPT 18 Weeks (95% Target)	100%	-

To Note:

Due to the COVID-19 pandemic and the need to release capacity across the NHS to support the response the decision was made to pause the collection and publication of several official statistics, these include Friends and Family Test (FFT), Mixed Sex Accommodation (MSA), Delayed Transfers of Care (DToC), cancelled operations, occupied bed days, CQC inspections, wheelchair return (QWC1), Oversight Framework (OF), Better Care Fund (BCF) and NHS England monthly activity monitoring. These measures will be updated as soon as the data becomes available and will incorporated back into the report.

Data quality issues due to the impact of COVID-19 remain within the data flows for referrals and contract monitoring.

COVID Vaccination Update

The national COVID-19 vaccination programme continues to successfully provide dose one vaccinations for Southport & Formby residents. The two vaccination hub sites at Southport and Ainsdale Health & Well Being centres have spent January and February inviting and vaccinating patients in Joint Committee on Vaccination and Immunisation (JCVI) cohorts 2-4. The national target of 85% uptake in these cohorts was successfully achieved by the 15th February aspirational date and the programme expanded its remit to include patients in cohorts 5 & 6 at the end of February. The hubs have proven to be very successful and a combination of staff from GP practices, PCNs, CCGs, GP federation and community organisations have contributed to the daily running of the PCN sites. As part of the targeted approach to patients in priority groups, PCN, CCG and community colleagues also visited all care home patients and nursing home residents, where possible, administering first

dose vaccinations to both staff and resident in the JCVI cohort 1. At the end of February 2021 **36,428** or **92.7%** 1st dose vaccinations had been given to patients in cohorts 1-4.

Planned Care

Local providers have continued to undertake urgent elective treatments during the COVID-19 pandemic period and this has been clinically prioritised. Work is underway locally in the Southport & Ormskirk system to increase the available capacity to support urgent elective activity. This will include use of nationally agreed independent sector contracts following clinical assessment in terms of triage and prioritisation.

Southport and Ormskirk Trust have continued to deliver routine elective activity throughout the pandemic, with a focus on delivering greater theatre capacity utilising on site theatres and that of the independent sector. A greater proportion of outpatient activity is now being delivered via virtual systems (i.e. attend anywhere) in line with phase 3 requirements. Cheshire and Merseyside Hospital Cell has set out principles for elective recovery with a proposed recovery approach. This approach will look to focus on development of system level waiting list management to maximise the capacity available and to standardise waiting times where possible, with priority given to clinically urgent patients (P2) and long waiters (52 week plus) in the first instance, as well as developing feasibility assessments and plans, to sequence organisational recovery plans. Elective recovery is expected to be supported by the independent sector facilitated by the procurement of service via the increasing capacity framework (ICF). Additionally, operational planning guidance was received at the end of March. There was a particular focus on planned care, and prioritisation of collaborative working across the system and building upon the lessons learnt during the pandemic to transforming delivery of services and accelerate restoration of elective care. System transformation and recovery meetings are in operation, with the CCG participating in discussions regarding regional transformation schemes.

Secondary care referrals remain below historic levels across all referral sources since the beginning of 2020/21. GP referrals have shown a year to date decrease of -45.4% compared to 2019/20. At provider level, Southport Hospital has seen a -33.7% decrease in total referrals year to date at month 11. Consultant-to-consultant referrals at Southport Hospital are -22.3% lower than in the equivalent period of 2019/20. An increase in consultant-to-consultant referrals was previously noted during 2019/20 as a result of ambulatory care pathways implemented at the Trust. Ophthalmology was the highest referred specialty for Southport & Formby CCG in 2019/20. Year to date month 11 referrals to this speciality in 2020/21 are approximately -62.4% lower than the previous year. In terms of referral priority, all priority types have seen an increase at month 11 of 2020/21 when comparing to the previous month but remain well below historical levels. Although there remains a -17.4% year to date reduction in two week wait referrals when comparing to the previous year, analysis suggests a recovery for this priority grouping with the 708 referrals reported in July-20 representing the highest monthly total of the last 2 years. Referrals to General Surgery specialty as well as Breast Surgery, Dermatology and ENT are responsible for this increase.

Reporting has been suspended on the e-RS metric this month due to issues with the accuracy of the data, it remains part of the outpatient strategy and an update will be provided in the next report.

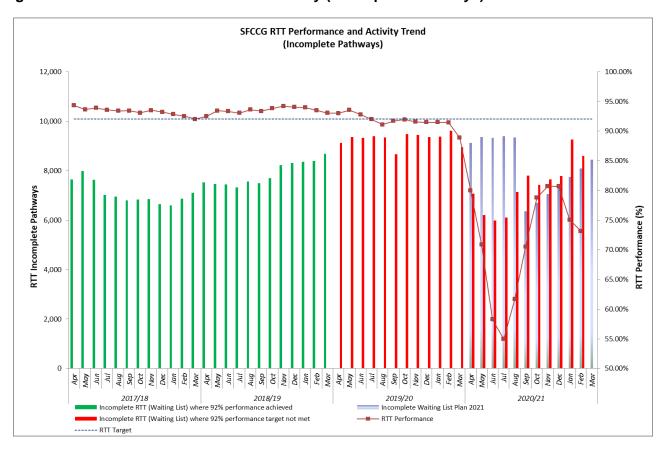
The CCG failed the less than 1% target for Diagnostics in February, recording 16.69%, an improvement of 4.4% compared with January's performance (21.1%). Despite failing the target the CCG is measuring well below the national level of 28.46%. Southport and Ormskirk reported 13.54% an improvement of 3.5% compared with 17.04% in January. The constitutional standard performance will continue to be challenging for the remainder of the year based on infection control, workforce constraints and the continued effect of COVID. Recovery trajectories are in place.

For patients on an incomplete non-emergency pathway waiting no more than 18 weeks, the CCG's performance in February was 73.14%, a small decline from last month's performance (75.05%). But the CCG is reporting well above the national level of 64.5%. Southport & Ormskirk Hospital reported 81.45%, also a decline compared to last month (82.40%).

Trust actions include:

- The review of job plans to maximise capacity.
- Policy Approval Group (PAG) approval for additional sessions/staffing requirements. Service reviews, e.g. Ophthalmology.
- Improve utilisation of outpatients and theatres.
- Utilise Renacres theatre capacity. Increase utilisation in endoscopy.
- The planned theatre maintenance has been brought forward from May to early April to minimise disruption to theatre sessions. The review of diagnostics services to ensure capacity meets the demand.

Figure 1 – CCG RTT Performance and Activity (Incomplete Pathways)



There were a total of 822 Southport & Formby CCG patients waiting over 36+ weeks, the majority at Southport & Ormskirk Hospitals. Of the total long waiters, 401 patients were waiting over 52 weeks, an increase on last month when 226 breaches were reported. This is over the plan of 97 patients submitted as part of the phase 3 response. Overall waiters for the CCG decreased to 8,601 (January reported 9,254). Southport & Ormskirk had a total of 155, 52 week breaches in February, showing a further anticipated decline from 91 reported last month. The 401 52+ week CCG breaches reported represent 4.66% of the total waiting list, which is well below the national level of 8.26%. This good performance is due to the continuation of services continuing during the COVID surges at the Trust.

Figure 2 – RTT Incomplete Pathways, 52 weeks waiters v Plan

Southport & Formby CCG - new plans														
Total Incomplete Pathways	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Plan v Latest	
New Plans from Sept 2020	9,126	9,367	9,331	9,392	9,337	6,350	6,698	7,046	7,394	7,742	8,090	8,438	8,438	
2020/21	7,072	6,204	5,983	6,101	7,135	7,794	7,723	7,646	7,782	9,254	8,601		8,601	
Difference	-2,054	-3,163	-3,348	-3,291	-2,202	1,444	1,025	600	388	1,512	511		163	
52 week waiters - Plan	0	0	0	0	0	52	64	74	84	90	97	104		
52 week waiters - Actual	6	10	17	36	62	85	71	99	112	226	401			
Difference	6	10	17	36	62	33	7	25	28	136	304			

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Total Incomplete Pathways	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Plan v Latest
Plan (last year's actuals)	11,189	11,242	11,050	11,171	11,041	11,118	11,158	10,891	10,986	11,264	11,532	9,903	9,903
2020/21	7,603	6,485	6,140	6,463	6,903	7,796	8,105	6,558	7,800	8,078	8,615		8,615
Difference	-3,586	-4,757	-4,910	-4,708	-4,138	-3,322	-3,053	-4,333	-3,186	-3,186	-2,917		-1,288

The CCG and Trust are achieving 3 of the 9 cancer measures year to date. There has been an improvement in month on several indicators although still under target at year to date.

Performance in two week wait breast services remain under target for the fourth consecutive month due to breaches within LUHFT and the majority of breaches due to 'patient choice'. The maximum wait for patients seen was 60 days for two week wait breast services. Despite being under the 93% target there has been a big improvement in month with the CCG reporting 77.4% compared to 64.1% in January. Breast services high demand is impacting on performance for both the breast symptomatic pathway and contributing to performance for the overall suspected cancer pathway. Increased demand is a combination of, natural growth, people coming forward after lockdown and pause of screening programmes. The median wait for Southport and Formby breast patients in February remained at 13 days. The estimated position predicts recovery against the operational standard by March 2021. Plans to equalise breast waiting times across the two LUHFT hospital sites are in progress. The assurance is given by risk stratification of all patients across both the suspected cancer and symptomatic breast pathways to ensure those at greatest risk of cancer are given priority investigation.

For Cancer 62 Day standard the CCG is now measuring just above the national level of 69.75% recording 70.59%.

The numbers of CCG patients waiting over 104 days is 2 patients in February, 2 less than the number reported last month. The average total days waited in February has reduced for patients who had breached 104 days at S&O to 121 days, compared to 133 in January.

The 2021/22 Priorities and Operational Planning Guidance has a strong focus on full operational restoration of cancer services. Systems will be expected to meet the new Faster Diagnosis Standard (FDS) from Q3, to be introduced initially at a level of 75%. In February and year to date, the CCG performed above the proposed target for the 2 week breast symptom FDS indicator. However, the two week and screening referral indicators performed below target. The Guidance also states that Systems should, as soon as possible also ensure a renewed focus on improving performance against the existing Cancer Waiting Times standards. Cancer Alliances are asked to draw up on behalf of their ICS(s) an action plan for improving operational performance, with a particular focus on pathways which are most adversely affecting overall performance

For planned care, month 11 of the financial year 2020/21 continues to show significant reductions in contracted performance levels across the majority of providers for Southport & Formby CCG. This is a direct consequence of the COVID-19 pandemic and subsequent NHS first phase response to postpone all non-urgent elective operations so that the maximum possible inpatient and critical care capacity would be available to support the system. Although some recovery of activity has been apparent following the first phase of the NHS response, year to date activity levels remain well below historical averages. A further increase in elective capacity was anticipated as part of the phase three NHS response to the pandemic. Plans were developed in conjunction with providers and the CCG will continue to monitor activity against these plans on a monthly basis for the remainder of 2020/21. Data suggests that seasonal trends and the third national lockdown (initiated on 6th Jan-21) have resulted in a further decrease in planned care activity at lead providers for the CCG. At individual providers, Southport & Ormskirk Hospital is showing the largest under performance with a variance of £8.6m/-44% against plan. Across all providers, Southport & Formby CCG has underperformed by £12.8m/-35.5%.

Figure 3 - Planned Care All Providers

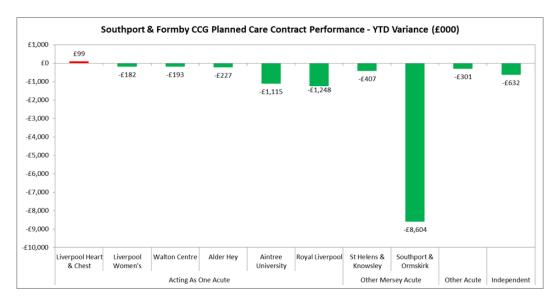


Figure 4 - Planned Care Activity Trends

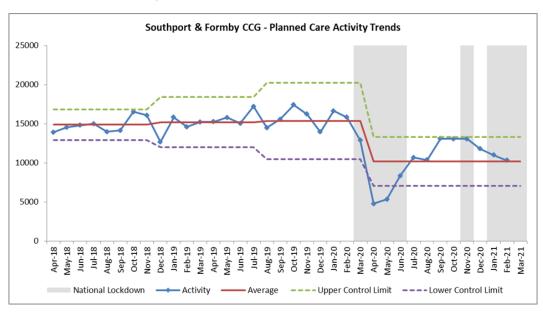


Figure 5 - Elective Inpatient Variance against Plan

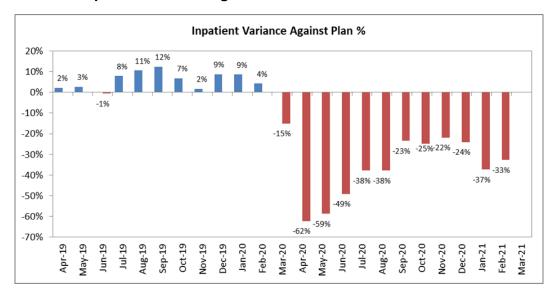
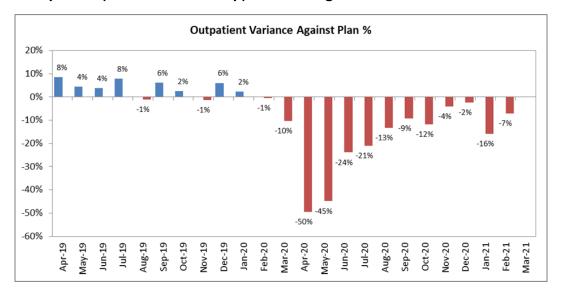


Figure 6 - Outpatient (First and Follow Up) Variance against Plan



Unplanned Care

In relation to A&E 4-hour waits for all types, the CCG and Southport & Ormskirk have failed the 95% target in February, reporting 83.14% and 83.28% respectively this being around a 5% improvement on last month. Both are just below the nationally reported level of 83.9%. At Trust level the A&E 4-hour compliance continues to show failing assurance but there has been a notable improvement in February. A number of actions have been developed to support recovery of the ED 4-hour standard which have been presented to the Finance Performance and Investment (FP&I) Committee. In addition the Southport & Ormskirk system coalition made a collective system-wide mission to deliver on 3 key Urgent Emergency Care (UEC) quality indictors:

- Eradicate corridor care No patients treated on Emergency Department corridor since March 2020.
- Improve ambulance handover times 8.6% increase in handovers less than 30 minutes (Q3 and Q4 20-19 vs 2020/21).
- Reduce super-stranded patients occupying an inpatient bed 38% reduction (Sep- Feb 2019 V 2020).

There have been significant improvements across all 3 quality indicators for UEC. A by-product of the improvement across the 3 quality indicators is a continued achievement to widen the gap from Southport & Ormskirk performance and the national average in relation to performance of the 4 hour standard.

Southport & Ormskirk reported just 1, 12-hour breach in February, a significant decrease on last month when 19 were reported. The avoidance of 12 hour breaches are a priority for the Southport and Ormskirk system and continue to be reviewed in accordance with the recently agreed processes with the CCG and NHSE/I. The provider submits a 48-hour review form to the CCG and NHSE/I to provide assurance of immediate actions taken and determine whether the patient has come to any harm. If the patient has come to moderate or severe harm as a result of the breach, then this will be declared as a serious incident and a full investigation undertaken to identify lessons learnt. No harms have been identified for the latest 12 hour breach, resulting in no serious incidents being reported. The CCG continue to receive and review 48 hour reports from providers following the declaration of a 12-hour breach.

The original target to meet all of the ARP (Ambulance Response Programme) standards by Q1 2020/21 has not been met and was severely adversely impacted upon by COVID-19, which began to hit service delivery in Q4 2019/20 and then all the way through 2020/21 up to Q3. In February 2021 there was an average response time in Southport & Formby of 7 minutes 45 seconds, just over the target of 7 minutes for Category 1 incidents. Following this, Category 2 incidents had an average response time of 25 minutes 31 seconds against a target of 18 minutes, the second quickset response time in Merseyside. The CCG also failed the category 2 90th percentile and Cat 4 90th percentile. Performance is being addressed through a range of actions including increasing number of

response vehicles available, reviewing call handling and timely dispatch of vehicles as well as ambulance handover times from A&E to release vehicles back into system.

All ambulance handovers between ambulance and A&E must take place within 15 minutes. Southport & Ormskirk reported improved ambulance handover times in February compared to January. Handovers between 30 and 60 minutes decreased to 13 from 28, and those above 60 minutes reported 1 from 5 last month.

Following an MIAA audit, the recommendation is to report the stroke indicator one month in arrears. Refer to January for latest data. The decision to report one month in arrears will be discussed at the next sub-group and formally agreed through CCQRM. Southport & Ormskirk reported 63.6% of patients who had a stroke spending at least 90% of their time on a stroke unit in January. This is significantly below the 80% target but shows an improvement on previous month (56.3%). The Trust reported that performance against this metric continues to present challenges. There has been an incremental increase in month but this indicator continues to be impacted by COVID-19. COVID positive stroke patients cannot be admitted to the stroke unit or bed capacity issues due to the impact of limited numbers of non-COVID beds. In February TiA was reported at 28.6% against the 60% target with 5 patient breaches out of a total of 7 patients. Following an MIAA audit an action plan has been developed to review the reporting process for this indicator.

The CCG reported no news cases of MRSA in February (2 year to date) and has failed the target for the year. Southport & Ormskirk have also failed the target for the year (reporting 2 year to date). Any further incidents will be reviewed as part of the Infection Prevention Control (IPC) meeting on a monthly basis, which the CCG now attend.

For C difficile, the CCG reported 3 new cases in February (33 year to date) against a year to date plan of 28 so have failed the target for 2020-21. National objectives were delayed due to the COVID-19 pandemic and therefore the CCG is measuring performance against last year's objectives. Southport & Ormskirk Trust is also failing with 2 new cases in February, 33 year to date against a threshold of 14 and have also failed their year to date target for the year, further assurance will be requested at the Trust appears to be an outlier in comparison across Cheshire and Merseyside.

NHS Improvement and NHS England (NHSE/I) have not set new CCG targets for reductions in E.coli for 2020/21, therefore the CCG are reporting against last year's target of 109. In February there were 6 cases (110 YTD) against a year to date target of 100, therefore the CCG have failed the target for 2020-21. Southport & Ormskirk reported 12 new cases in February, bringing the YTD total to 169. There are no targets set for Trusts at present. The NHSE Gram Negative Bloodstream Infections (GNBSI) Programme Board Meetings reconvened, but to reduce duplication NHSE/I have had further discussions and this group will now merge with the Antimicrobial resistance (AMR) group to provide a more joined up approach.

Southport & Ormskirk's Hospital Standardised Mortality Ratio (HSMR) was 81.6 in February, remaining under the 100 threshold. The ratio is the number of observed deaths divided by predicted deaths. HSMR looks at diagnoses which most commonly result in death.

For unplanned care, month 10 of the financial year 2020/21 continues to show reductions in contracted performance levels across the majority of providers for Southport & Formby CCG. This is a direct consequence of the COVID-19 pandemic and subsequent national response whereby the public advice was to 'stay at home'. Although some recovery of activity has been apparent following the first phase of the NHS response, year to date levels remain below historical averages and recent months suggests a steady decrease in activity numbers leading to the lowest monthly total reported since April-20 in February-21. This is likely a result of the third national lockdown (6th Jan-21 onwards) and goes against the anticipated increases that formed part of CCG plans for the phase three NHS response to the pandemic. Plans were developed in conjunction with providers and the CCG will continue to monitor activity against these plans on a monthly basis for the remainder of 2020/21. At individual providers, Southport & Ormskirk Hospital is showing the largest under performance with a variance of -£6.8m/-17% against plan. Across all providers, Southport & Formby CCG has underperformed by -£7.4m/-16.4%.

Figure 7 - Unplanned Care All Providers

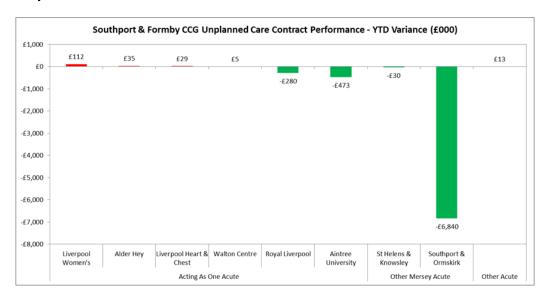


Figure 8 - Unplanned Care Activity Trends

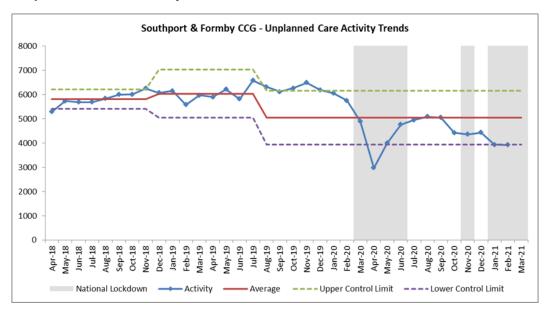


Figure 9 - A&E Type 1 against Plan

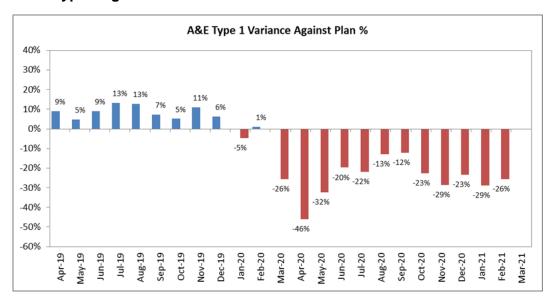
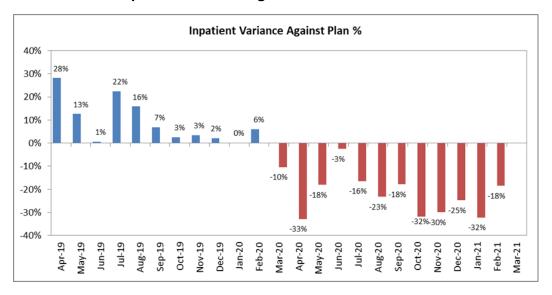


Figure 10 - Non-elective Inpatient Variance against Plan



Mental Health

The Eating Disorder service has reported 30.3% of patients commencing treatment within 18 weeks of referral in February, compared to a 95% target. 10 patients out of 33 commenced treatment within 18 weeks. This shows a decline on the previous month (37.9%). Demand for the service continues to increase and to exceed capacity. The Trust is working with Sefton and Liverpool Commissioners on a 3 year investment plan for Eating Disorders. It is recognise that since the initial service was commissioned that prevalence and demand for the service has increased. The Trust has actions to address the underperformance and continues to be responsive with patient's prioritised based on clinical need.

For Improving Access to Psychological Therapies (IAPT), Mental Health Matters reported 0.93% in February and has therefore failed to achieve the 1.59% target. The following factors contributed to underperformance:

- Staff who came across to the Mental Health Matters took annual leave in January 2021 having previously worked prior to the transfer to ensure service continuity.
- A total of 6.0 WTE clinical staff (including the clinical lead) chose not to TUPE across to the new provider thereby reducing the clinical capacity of within the new service to see new patients.
- Vacant posts were difficult to fill in the period leading up to the Mental Health Matters commencing the contract.
- The national COVID-19 lockdown restrictions in January 2021 impacted on face to face activity which had started to increase in the latter part of 2020.

Vacant posts are being recruited in addition to planned focussed "assessment weeks" to improve performance.

The percentage of people who moved to recovery was 47.2% in February, which is below the 50% target and a notable improvement on the previous month (38.3%). However, the CCG's year to date performance remains above the target at 51.9%. Mental Health Matters is the new provider who took over the IAPT contract in January.

Southport & Formby CCG is recording a dementia diagnosis rate in February of 62%, which is under the national dementia diagnosis ambition of 66.7%. This shows a small decline on last month's performance (62.8%). The Memory Assessment Service operated by NHS Mersey Care Foundation Trust (MCFT) has been suspended due to the Government's COVID-19 restrictions. This will have a severe impact on dementia assessments and dementia diagnosis ambition. Recovery is unlikely to take place until restrictions are lifted and face to face assessments can resume, no date identified. However, this could be April/May depending on the impact of vaccinations.

The Sefton Autistic Spectrum Disorder (ASD) initiative commenced in November 2020. The initiative which is aimed at those aged 18-25 has resulted in waiting times reducing from 66.21 weeks in November to 10.7 weeks in February with 135 on the list, which represents a slight waiting time increase from the January position of 10.5 weeks.

In quarter 3 2020/21 year to date, 59% of Southport & Formby CCG patients identified as having a learning disability received a physical health check. This is above the CCG's year to date target of 52.6%.

Adult Community Health Services (Lancashire & South Cumbria NHS FT)

Adult community services have been working hard restore community services via 2 weekly recover, restore and retain programme. The community service provider have completed Equality Impact Assessment's (EIA's) and Quality Impact Assessments (QIA's) on the restoration of 4 key services effected by the redeployment of resource during the pandemic, these services are:

- ICRAS Frailty service
- Treatment rooms
- Wheelchair services
- Stoma care

They continue to progress with the digital first programme and report efficiencies by utilising a virtual approach where possible and month 10 data shows a significant improvement across services to address any backlogs in activity and return to a zero position on baseline activity.

Funding to address short falls in district nursing service, therapies, extend treatment room access and support discharge will continue for 6 months into the 2021/22 contract.

Children's Services

In its ongoing response to the pandemic, Alder Hey continues to focus on sustaining and improving pre-COVID levels of activity for community therapy services and Child and Adolescent Mental Health Services (CAMHS).

In respect of community therapy services provision, this has enabled services to focus on reducing the numbers of children and young people who have been waiting the longest whilst managing increases in referrals. Notably for SALT, there has been a steady increase in referrals since the schools initially reopened in September, and this is being closely monitored along with the impact of the recent lockdown on delivery in school settings and the recent return to school. Overall, the waiting time standard for the therapies has been largely maintained in recent months; however, due to an increase in referrals the waiting time standard for SALT, continence services fell below plan again in February, these are being monitored.

Notably, all community therapy service waiting times continue to achieve the SEND improvement plan average waiting time KPIs, including physiotherapy which just fell short of the target last month but is back on track this month.

The Alder Hey CAMHS team continues to address the ongoing impact of the pandemic on the increase in demand for the service and the increasing number of high risk and complex cases, a position which is reflected nationally. The Trust estimates that there has been a 19% increase in referrals from April to December 2020. Due to these ongoing challenges, the Trust has not been able to achieve and sustain the waiting time standards for assessment and treatment in the timeframes set out in the recovery plan, and there was deterioration in the 6 week referral to choice target and referral to partnership within 18 weeks in February 2021.

The CCGs have agreed some additional short term resilience investment and the service has additional staff starting in March 2021. It is anticipated that this will help prevent any further deterioration in waiting times and support an improvement in the current position. In December 2020, the Trust also mobilised its new "COVID support team" to provide both individual and group support for CYP presenting with deteriorating mental health due to the pandemic.

The CAMHS waiting time position is being closely monitored and the Trust is preparing a proposal for an increase in CAMHS investment for consideration by the CCGs. Notably the Cheshire and Merseyside partnership has been undertaking further modelling work and is predicting a 30% increase in demand for mental health services over the next 2 years.

In response to the national increase in demand for CAMHS due to COVID, the government has announced an additional £79 million of investment in 2021/22 to support recovery. The CCGs are awaiting further details of the financial settlement for Sefton to facilitate the 2021/22 planning of these services locally. It is anticipated that the investment will support an increase in CAMHS capacity and a reduction in waiting times.

The quarterly mental health access data continues to show an improvement on the 2019/20 position and is on target to exceed the annual access target of 35%. This is in part due to the reporting of Venus and Kooth data through the national data set which commenced in 2019/20. There are also plans for third sector provider Parenting 2000 to start to flow their data in Q4 and it is noted that the increase in CAMHS provision and increased mental health provision will also positively impact on access rates.

In the main, ASD/ADHD performance continues to be on target and the waiting list management plan and trajectory to reduce the backlogs to zero by June 2021 remains on track. Due to the increasing number of referrals to the service, the ASD 12 week referral to assessment target has been missed in recent months but the overall 30 week completed assessment target continues to be achieved.

Whilst SEND performance for the community therapies is on track, there was deterioration in overall SEND performance in February as CAMHS and ASD fell short of the SEND KPIs. Given the ongoing impact of the pandemic and the increasing referral numbers, the ability of these services to achieve and sustain the targets is being closely monitored.