

## Blackpool CCG Performance Report April 2018 - March 2019

Area	Indicator	Org.	Target	2017-18	2018-19	Performance	Comments
<b>RTT ©</b>	Patients on incomplete pathways treated within 18 weeks	BCCG	92%	87.38%	81.67%	↓	The Trust did not achieve the RTT open pathway standard in 2018/19 at 81.67% below the target of 92%. It is important to highlight that the Trust did manage to reduce the waiting list size from 18,885 in 2017/18 to 18,543 in 18/19. Integrated Care Provider (ICP) workstreams are in place which focus upon improving referral management, out-patient services, patient flow and theatre utilisation at the Trust. Work continues to be focused at specialty level to reduce the number of long waiting patients; this has been compromised by the impact of the winter pressures. A continuous programme of audit and validation is supporting the Trust Patient Tracking List management. This focuses across outpatient, diagnostic and waiting list elements of the pathway. Full Trust validation of the waiting lists continues to take place on a weekly basis.
		BTH	92%	87.32%	80.86%	↓	
	Patients waiting for more than 52 weeks - Incomplete Pathways	BCCG	0	10	50	↓	There were fifty (50) Blackpool patients waiting more than 52 weeks for treatment in 2018/19; however not all these patients were being treated at Blackpool Teaching Hospitals but across hospitals throughout the UK. This increase in number from the 2017/18 figure of ten (10) is indicative of the pressures of patient flow being experienced within the NHS. Blackpool Teaching Hospitals had one hundred and ninety seven (197) patients waiting more than 52 weeks in 2018/19; the vast majority of these patients were waiting for Electrophysiology procedures. Specialised Commissioning, which is managed by NHS England, commission this service. The Trust and Specialised Commissioning have worked together to plan and implement a modular lab on the BTH site to improve capacity and reduce waiting times for patients. The Trust were set a target to reduce the number of patients waiting more than 52 weeks from March 2018; this was achieved as there was one (1) patient waiting longer than 52 weeks at the end of the financial year against a trajectory of three (3) from 2017/18.
		BTH	0	4	197	↓	
<b>DT Waiting Times ©</b>	Diagnostic Test Waiting Times - % of patients waiting 6 weeks or more	BCCG	1.00%	0.60%	0.89%	↓	Achieved.
		BTH	1.00%	0.33%	0.59%	↓	

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A&E ©	12 Hour DTA waits in A&E	BTH	0	266	300	↓	There have been a total of three hundred (300) 12 hour decision to admit breaches at Blackpool Teaching Hospital in 2018/19. Two hundred and twelve (212) of these breaches were Mental Health related and eighty nine (89) were Medical. The Trust is focusing upon improving flow within the Hospital which will enable patients to be admitted earlier if necessary. A national project on extended length of stay has been implemented with a trajectory to reduce the numbers of long staying patients by 40%, a reduction in real terms of 75 patients in 2019/20. Multi agency discharge events (MADE) are taking place on a regular basis supported by a Clinical lead overseeing "Long stay Tuesday" which is supported by NHS England as a successful method for managing on the day delays and identifying common themes. Reducing 12 hour decision to admit breaches is one of the highest priorities for the Trust for 2019/20.
	A&E 4 Hour waits	BCCG	95%	84.43%	84.89%	↑	Although A&E performance for patients to be seen within 4 hours has improved in 2018/19, at 84.89% from 84.43% in 2017/18; it has not achieved the target of 95%. The Trust has been successful in reducing the length of stay for patients over 65, improving the speed of patient handovers and reducing the length of stay for patients at Clifton hospital but have plans in place to improve performance further which include additional nursing and decision makers to make earlier decisions for patients, defining the streaming of patients further to the ambulatory care centre or primary care streaming, increase the discharge of patients earlier in the day and increase planned weekend patient discharges.
		BTH	95%	84.43%	84.89%	↑	
Cancer Waits ©	% seen within 2 weeks of referral	BCCG	93.00%	94.58%	84.70%	↓	The deterioration in Cancer 2 week wait and breast symptomatic performance is attributed to physical capacity constraints within the breast service in terms of both imaging and clinic space. Whilst the Trust has been successful in providing additional sessions to meet the increased demand these have to be provided outside of core hours at evenings and weekends. The short to medium term plan is to continue these sessions to improve the position as well as following an action plan devised by the Trust in conjunction with NHS England and NHS Improvement. In the medium term a business case has been approved at Trust and Fylde Coast Executive level which will reconfigure the estates occupied by the breast service; therefore increasing capacity by providing extra space to house the additional mammography and ultrasound equipment included in the business case.
		BTH	93.00%	94.20%	85.02%	↓	
	% seen within 2 weeks of referral – breast symptoms	BCCG	93.00%	96.27%	34.15%	↓	
		BTH	93.00%	96.98%	32.04%	↓	

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Cancer Waits ©	% of patients receiving definitive treatment	BCCG	96.00%	96.20%	96.93%	↑	Achieved.	
		BTH	96.00%	98.31%	98.83%	↑		
	% of patients waiting no more than 31 days for subsequent treatment – surgery	BCCG	94.00%	96.02%	94.17%	↓	Achieved.	
		BTH	94.00%	97.51%	100.00%	↑		
	% of patients waiting no more than 31 days for subsequent treatment – drug therapy	BCCG	98.00%	100.00%	100.00%	↑	Achieved.	
		BTH	98.00%	100.00%	100.00%	↑		
	% of patients waiting no more than 31 days for subsequent treatment – radiotherapy	BCCG	94.00%	99.03%	98.44%	↓	Achieved.	
	62 Days	* % of patients waiting no more than 62 days from urgent GP referral to first definitive treatment	BCCG	85.00%	77.98%	80.36%	↑	Although performance against the 62 day for urgent GP referral to first definitive treatment standard has improved to 80.36% for Blackpool patients in 2018/19 from 77.98% in 2017/18 it remains below the target of 85%. Performance against this target has been affected by the issues experienced within the 2 week wait pathways; however internal meetings are taking place at Divisional level at the Trust to review waiting times and mitigate any avoidable delays with escalation to Divisional Directors when appropriate. Additional capacity is being resourced across outpatients, diagnostics and theatres to cope with increasing demand.
			BTH	85.00%	82.70%	82.18%	↓	
		% of patients waiting no more than 62 days from referral from an NHS screening service to first definitive treatment.	BCCG	90.00%	79.31%	87.50%	↑	
			BTH	90.00%	77.29%	78.35%	↑	

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	% of patients waiting no more than 62 days for first definitive treatment following a consultant's decision to upgrade.	BCCG	85.00%	89.96%	91.28%	↑	Achieved.
		BTH	85.00%	91.07%	92.40%	↑	
North West Paramedic Emergency Service ©	Category 1 Mean Performance	BCCG	00:07:00	No Data available due to a change in reporting mid year	00:06:23		<p>NWAS performance remains a challenge, but this is also seen across the other ambulance trusts nationally. NWAS are making best efforts to maximise resources within the Emergency Operations Centres (EOC), Paramedic Emergency Service (PES) and Clinical Hub (CH) environments to improve performance against the ARP standards. NWAS has made improvements in performance against the C1 target (mean and 90th centile) and C2 (90th centile) since the beginning of the year although performance against the C2 mean and C3/C4 has not been as consistent. Commissioners have now agreed the contract with NWAS for 2019/20 which will see additional investment made into the Trust to deliver ARP performance standards and deliver step changes in the way activity is managed. This includes increases in the number of patients managed via Hear &amp; Treat and See &amp; Treat, delivering further reductions in the number of patients conveyed to A&amp;E depts. NWAS have provided initial trajectories based on the modelling work that was completed by Operational Research in Health (ORH) which will see the Trust deliver all standards with the exception of C1 by the end of March 2020, and the C1 standard shortly after this.</p>
		NWAS	00:07:00		00:07:54		
	Category 1 90th Centile Performance	BCCG	00:15:00		00:10:20		
		NWAS	00:15:00		00:13:19		
	Category 2 Mean Performance	BCCG	00:18:00		00:21:15		
		NWAS	00:18:00		00:24:14		
	Category 2 90th Centile Performance	BCCG	00:40:00		00:47:24		
		NWAS	00:40:00		00:52:28		
	Category 3 90th Centile Performance	BCCG	02:00:00		02:27:05		
		NWAS	02:00:00		02:43:15		

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Mixed Sex Accom. ©	Breaches of same sex accommodation	BCCG	0	17	41	↓	The number of mixed sex accommodation breaches for Blackpool patients has increased in 2018/19 to forty one (41) from seventeen (17) in 2017/18. The majority of these breaches occurred at Lancashire Teaching Hospitals due to the lack of availability of specialist beds to step down to from critical care. Challenges in reducing the number of breaches remain due to the impact of flow and capacity across the Trust. The critical care bed demand remains high and whilst the Trust try to mitigate against what are in essence very short (in timescale) breaches, they prioritise the needs of the patients to undergo their procedure over potential breaches for mixed sex accommodation.
		BTH	0	13	0	↑	
Cancelled Ops (p)	Patients whose operations are cancelled, on or after the day of admission (including the day of surgery), for non-clinical reasons to be offered another binding date within 28 days.	BTH	0	96	21	↑	The twenty one (21) cancelled operations not offered another binding date within 28 days in 2018/19 were due to the lack of available beds in scheduled care at Blackpool Teaching Hospitals as a result of the pressures of patient flow within the Hospital. All the work being undertaken to improve patient flow within the Hospital will also address this issue.
Mental Health ©	% of Mental Health patients on Care Programme Approach (CPA) discharged from hospital and followed up within 7 days	BCCG	95.00%	96.14%	96.51%	↑	Achieved.
Dementia ©	CCG's estimated prevalence for people over 65 with dementia against the CCG's actual dementia diagnosis rate	BCCG	66.70%	79.57%	80.06%	↑	Achieved.
Mental Health IAPT ©	IAPT access proportion rate (1.58% monthly)	BCCG	19.00%	17.90%	16.03%	↓	The IAPT access proportion rate for Blackpool CCG has not achieved the target of 17.90% in 2018/19 and is 16.03% in March 2019. The number of referrals to the service in Blackpool have decreased; however access rates vary across the neighbourhoods. Whilst waiting times are consistently achieved there are internal waits for some specialties. There are plans in place to increase access in line with national targets, specifically focussing on long term conditions, to work with neighbourhoods to improve equity of access and integrate delivery models and also to reduce internal waiting times for clients.
	IAPT recovery rate (50% monthly)	BCCG	50.00%	51.00%	53.52%	↑	
	The proportion of people that wait 6 weeks or less from referral to their first IAPT treatment appointment	BCCG	75.00%	94.00%	96.00%	↑	

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	The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment.	BCCG	95.00%	100.00%	100.00%	↑	
HCAI	C.Diff	BCCG	57	62	48	↑	Achieved.
		BTH	39	33	35	↓	
	MRSA	BCCG	0	2	1	↑	There was one (1) incident of MRSA bacteraemia in 18/19 for a Blackpool resident within a care home in the community. The Post Infection Review identified no contributory lapses in care relating to the this case in September, however some learning points were identified for GP Practices, Care Homes and Nursing Homes which were widely cascaded.
		BTH	0	1	0	↑	