

Blackpool CCG Performance Report April 2021 - August 2021

Area	Indicator	Org.	Target	August 2020 YTD	August 2021 YTD	Performance	No. of Excess Breaches	Comments
RTT ©	Patients on incomplete pathways treated within 18 weeks	BCCG	92%	55.39%	64.77%	↑	24,714	<p>The Trust and Blackpool CCG did not achieve the 92% RTT open pathway standard between April and August 2021 with performance at 64.77% for Blackpool CCG. The number of patients on the waiting list at Blackpool Teaching Hospitals in August 2021 was 21,229; this is an increase of 1,710 patients from 19,519 in August 2020. Work continues to be focused at specialty level to reduce the number of long waiting patients. A continuous programme of audit and validation is supporting the Trust Patient Tracking List (PTL) 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 together with ongoing clinical triage at Consultant level to ensure that all patients are treated in order of clinical priority.</p> <p>The Fylde Coast CCGs have also continued to engage with Independent sector providers across Lancashire throughout 2021/22 to increase capacity and reduce waiting times for patients. This has focussed on equity of access with clinical priorities taking first place, followed by long waiting patients being treated in turn. There has also been a concerted focus on the timely discharge of patients to maximise all available bed stock and improve patient flow within Blackpool Teaching Hospitals.</p>
		BTH	92%	57.39%	72.34%	↑	21,229	<p>To support this further several schemes are in place to appropriately manage demand for Hospital services including: -</p> <ul style="list-style-type: none"> • Advice and guidance which enables GP's to contact Hospital consultants for advice prior to hospital referral. • Patient Initiated Follow Up (PIFU) which aims to manage out-patient follow up appointments. • Outpatient telephone or video consultations are now expected to take place at Blackpool Teaching Hospitals as the preferred method of consultation. • The Adapt and Adopt programme continues to be supported by Blackpool Teaching Hospitals. This North West led programme aims to accelerate access to outpatient appointments.

Area	Indicator	Org.	Target	August 2020 YTD	August 2021 YTD	Performance	No. of Excess Breaches	Comments
	Patients waiting for more than 52 weeks - Incomplete Pathways	BCCG	0	1,237	1,441	↓	1,441	There were one thousand four hundred and forty one (1,441) Blackpool patients waiting more than 52 weeks for treatment in August 2021; this has deteriorated from the August 2020 number of one thousand two hundred and thirty seven (1,237) patients. It is important to note not all these patients were being treated at Blackpool Teaching Hospitals but across hospitals throughout the UK.
		BTH	0	1,752	1,184	↑	1,184	Blackpool Teaching Hospitals had one thousand one hundred and eighty four (1,184) patients waiting more than 52 weeks in August 2021; this has improved from the August 2020 position of one thousand seven hundred and fifty two (1,752) patients waiting. This number has reduced further, and on the 18 th October 2021 an unvalidated position of one thousand and ninety seven (1,097) patients were waiting longer than 52 weeks for treatment. The Lancashire and South Cumbria Integrated Care Board (ICB) is working to recover pre-COVID-19 planned care waiting times by developing and managing plans at an ICB system level. This includes working with CCGs to maximise efficiencies and optimising the equity of access to services for patients by taking advantage of the local transformation priorities in Blackpool.
Diagnostic Test Waiting Times ©	Diagnostic Test Waiting Times - % of patients waiting 6 weeks or more	BCCG	1.00%	45.50%	30.41%	↑	4,874	Performance against the target for less than 1% of patients waiting less than 6 weeks for diagnostic tests has improved between April and August 2021 for Blackpool Teaching Hospitals and Blackpool CCG; however, performance remains below the target of less than 1% of patients waiting longer than 6 weeks for a diagnostic test. The longest waiting times were for endoscopic procedures. Three new Gastroenterologists have started in post at the Trust in September 2021 which will increase endoscopy capacity. An insourcing solution for endoscopy is in place and an outsourcing solution is being progressed working with Blackpool Council to secure an appropriate venue. An insourcing solution for ECG's is also being progressed to improve capacity and reduce waiting times.
		BTH	1.00%	42.10%	23.31%	↑	4,232	


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A&E ©	12 Hour DTA waits in A&E	BTH	0	16	167	↓	167	<p>There has been a total of one hundred and sixty seven (167) 12 hour decision to admit breaches at Blackpool Teaching Hospitals between April and August 2021; one hundred and two (102) of these breaches were Medically related and sixty four (64) were Mental Health related.</p> <p>The Trust is working closely with system partners to improve system flow, avoid unnecessary admissions and support hospital discharges as discussed with the Blackpool Council Health and Scrutiny Committee on the 14th October 2021.</p> <p>Additional measures include: -</p> <ul style="list-style-type: none"> • Commissioning twelve (12) additional beds in a Fylde Coast nursing home which enables patients who no longer require high acuity care to be stepped down to nursing care in preparation for returning home. • Safety summits are routinely held to review all patients waiting within the ED • There is regular liaison with the end of life team to ensure patients are placed appropriately for palliative care in line with their wishes. • The Trust reviews all patients daily with a hospital stay of over three (3) days to ascertain whether the patients are placed appropriately in line with their care needs. • Clifton Hospital is being utilised as a step down facility with the Trust and also the recently commissioned nursing home beds. • The Trust are using a flex and flip approach to safely manage wards in line with COVID-19 pressures. • Same day emergency care (SDEC) pathways for patients who enter A&E with surgical and cardiac requirements are now in place at the Trust. This means that patients requiring this specialty care are diverted from A&E into the required specialism rather than waiting in A&E.

Area	Indicator	Org.	Target	August 2020 YTD	August 2021 YTD	Performance	No. of Excess Breaches	Comments
	A&E 4 Hour waits	BCCG	95%	90.13%	83.46%	↓	12,571	A&E performance for patients to be seen within 4 hours has not achieved the target of 95% between April and August 2021 and has slightly deteriorated at 83.46% compared to 90.13% in August 2020.
		BTH	95%	90.13%	83.46%	↓	12,571	The Trust ensures all infection prevention and control (IPC) guidelines are followed for patients entering A&E which clearly does impact upon the time taken between patients. The 111 clinical assessment service diverts patients away from A&E and streaming takes place for all patients entering A&E to ensure their condition requires admission to A&E. If not, there are several schemes in place to treat them appropriately without entering the department. These include: <ul style="list-style-type: none"> • A minor injuries service co-locate at the Trust whose hours have been extended. • Deflecting unheralded patients from A&E to a pilot community pharmacy consultation service • Attendance at the local urgent treatment centre (UTC) or an alternative if required within a different locality.
Cancer Waiting Times ©	% seen within 2 weeks of referral	BCCG	93.00%	88.64%	91.97%	↑	36	Performance against the 2 week Cancer waiting times target has improved between April and August 2021 for Blackpool CCG at 91.97%; however, whilst unfortunately the year to date target has not been achieved it is important to note that that target was achieved for three out of the five months so far in 2021/22.
		BTH	93.00%	98.63%	92.26%	↓	55	Similarly, although BTH performance against the 93% target has deteriorated to 92.26% between April and August 2021 from 98.63% between April and August 2020, the target was achieved for two out of the five months so far in 2021/22.
	% seen within 2 weeks of referral – breast symptoms	BCCG	93.00%	88.64%	73.42%	↓	62	Performance against the 2 week breast symptomatic target of 93% has not been achieved by either Blackpool CCG or the Trust between April and August 2021. Performance has deteriorated from 88.64% between April and August 2020 for Blackpool CCG to 73.42% between April and August 2020. Trust performance has also deteriorated to 73.14% between April and August 2021 from 87.18% between April and August 2020.
		BTH	93.00%	87.18%	73.41%	↓	108	It is important to note that both the Trust and the CCG did achieve the breast symptomatic target of 93% in June, July and August 2021; unfortunately, in April and May 2021 radiology capacity affected performance. This issue has now been resolved, as reported to Blackpool Council Health Scrutiny Oversight Committee on the 1 st July 2021 performance has achieved the constitutional target of 93% since June 2021.

Area	Indicator	Org.	Target	August 2020 YTD	August 2021 YTD	Performance	No. of Excess Breaches	Comments
31 Days	% of patients receiving definitive treatment	BCCG	96.00%	94.23%	95.38%	↑	3	Blackpool CCG did not achieve the 96% target for patients receiving definitive treatment within 31 days between April and August 2021; however, performance has improved slightly to 95.38% by August 2021 from 94.23% between April and August 2020.
		BTH	96.00%	96.45%	98.63%	↑	0	There were three (3) patients not treated within this timeframe between April and August 2021; the reasons for delay vary but include inadequate capacity and treatments being delayed for medical reasons.
	% of patients waiting no more than 31 days for subsequent treatment – surgery	BCCG	94.00%	81.58%	87.36%	↑	6	Blackpool CCG did not achieve the 94% target for the % of patients waiting no more than 31 days for surgery between April and August 2021. Performance has improved with Blackpool CCG achieving 87.36% between April and August 2021 compared to 81.58% between April and August 2020.
		BTH	94.00%	80.00%	96.25%	↑	0	Six (16) patients between April and August 2021 were not treated within the 31 days, spread across various Hospitals in Lancashire. The reasons for the breaches vary but include inadequate capacity and delayed due to medical reasons.
	% of patients waiting no more than 31 days for subsequent treatment – drug therapy	BCCG	98.00%	98.53%	98.78%	↑	0	Achieved.
		BTH	98.00%	99.21%	100.00%	↑	0	
	% of patients waiting no more than 31 days for subsequent treatment – radiotherapy	BCCG	94.00%	95.24%	100.00%	↑	0	Achieved.
	* % of patients waiting no more than 62 days from urgent GP referral to first definitive treatment	BCCG	85.00%	78.89%	72.55%	↓	32	Performance against the 62 day for urgent GP referral to first definitive treatment standard has deteriorated for Blackpool CCG between April and August 2021 to 72.55% from 78.89% between April and August 2020 and remains below the target of 85%. Performance at the Trust has improved to 78.38% between April and August 2021 from 77.82% between April and August 2020.
		BTH	85.00%	77.82%	78.38%	↑	38	Thirty two (32) Blackpool CCG patients were not treated within the 62 day timeframe between April and August 2021 spread across various Hospitals in Lancashire. The reasons for the breaches vary but include patient choice, complex diagnostic pathways, and inadequate capacity. The Lancashire and South Cumbria Cancer Alliance works with all the providers of cancer care and CCGs within the region to improve care and patient outcomes. They work specifically with providers to tailor their improvement work to target the needs of the

							<p>local population. Recovery and restoration of services is the top priority in Lancashire and South Cumbria Cancer Alliance together with long term plan ambitions to improve early diagnosis for patients.</p> <p>Currently the following improvement measures are being implemented:</p> <ul style="list-style-type: none"> • All patients have and are continuing to be treated in order of clinical prioritisation as per national guidance. • Continual processes are in place for the clinical review of long waiting patients. • Trusts have continued to offer advice and support, co-ordinated through Macmillan Information Centres and by Trust teams for cancer patients. • Diagnostic capacity is a major issue, particularly for Endoscopy, CT and MRI with specific work programmes in place to improve capacity. • Cancer referrals have been above baseline since September 2020, but with gaps in some pathways such as Lung. The first definitive treatments are currently running just below baseline • Targeted work is focussing on addressing inequalities and improving access for those patients who have been slower to come forward. • There is a focus on patient backlog reduction with investment in additional measures to increase diagnostic capacity and protect elective activity. • A 6 point improvement plan is in place in collaboration with NHSE/I Improvement Support Team which encompasses governance, reporting, escalation, access policies, pathway analyser, capacity and demand. • Investment in cancer teams is taking place including patient trackers, improved systems and a comprehensive training package to improve. • Working closely with Primary care to reduce inappropriate referrals and ensure safety netting.
% of patients waiting no more than 62 days from referral from an NHS screening service to first definitive treatment.	BCCG	90.00%	42.86%	62.96%	↑	7	<p>Performance for Blackpool CCG for waiting no more than 62 days from referral from an NHS screening service to first definitive treatment has improved between April and August 2021 to 62.96% from 42.86% between April and August 2020. The Trust's performance has deteriorated to 28.05% between April and August 2021 from 29.41% between April and August 2020. Whilst both indicators remain below their respective targets it is important to highlight that the number of patients referred via this pathway is very low, only seven (7) Blackpool patients have not been seen within the timeframe between April and August 2021 for reasons which include complex pathways and inadequate capacity. BTH host the Lancashire bowel screening programme, the majority of the breaches relate to bowel screening, and are working with the other Trusts in Lancashire to increase bowel screening capacity.</p>
	BTH	90.00%	29.41%	28.05%	↓	25	

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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%	82.58%	85.96%	↑	0	Achieved.	
		BTH	85.00%	84.19%	88.41%	↑	0		
e	Category 1	Category 1 Mean Performance	NWAS	00:07:00	00:07:10	00:08:21	↓	Breach information not currently available	<p>The COVID-19 pandemic has continued to have an unprecedented impact on NWAS in terms demand placed on the service, the impacts on its operational delivery and on staff working within the services. The NHS England command and control arrangements that set aside formal contracting and performance management regimes have continued but management of quality has continued throughout the year through the clinical quality assurance committees. NWAS has worked with urgent and emergency care systems throughout the pandemic through regional and local gold command arrangements</p> <p>Over the course of 2021 NWAS have continued to embed alternative ways of working. Whilst this has not delivered the performance levels expected through the Ambulance Response Programme or meeting contractual KPIs it has sought to</p>
		Category 1 90th Centile Performance	NWAS	00:15:00	00:11:55	00:14:05	↓		
	Category 2	Category 2 Mean Performance	NWAS	00:18:00	00:21:22	00:39:02	↓		
		Category 2 90th Centile Performance	NWAS	00:40:00	00:43:44	01:22:08	↓		

Category 3	Category 3 90th Centile Performance	NWAS	02:00:00	02:26:04	06:48:08		<p>ensure that the risk to patients is minimised as far as possible.</p> <p>This has included and continues to include:</p> <ul style="list-style-type: none"> • Over recruitment of staff for front line and call centre duties utilising additional NHS funding / recruitment of staff and accepting the financial risk to the organisation. • Early recruitment of Paramedic Emergency Service (PES) staff utilising final year students in Emergency Technician (EMT1) roles. • Recruitment of additional clinicians to manage some patients without the need to deploy ambulances, and to provide support to Paramedics on front line duties with advice and support. • Procuring voluntary and 3rd party resource to deploy additional hours to front line duties. • Utilisation of Military Aid to Civil Authorities (MACA) arrangements in the early part of 2021. • Redeployment of Patient Transport Service (PTS) staff and vehicles to provide additional support to PES, including retraining some clinical staff and has supported rapid, safe discharge from hospital. Social distancing measures have meant that fewer patients can travel together. • Retention of vehicles at the end of their leases to supplement frontline responses. • Management of attrition rates in the NHS111 service by on-going recruitment and ensuring staff wellbeing in the face of continued demand through 111. • On-going work with Acute Trusts across the system to manage Handover & Turnaround of patients at the ED. • Provision of additional capacity through Clinical Assessment Services (CAS) to triage and manage lower acuity patients without the need to attend an ED. <p>Commissioners, working in conjunction with NWAS and NHS England / Improvement are now embedding a detailed plan to manage expected demands and pressures over the winter period. This provides for focussed targeted action on:</p> <ul style="list-style-type: none"> • Handover & Turnaround • Management of patients with mental health needs • Development of alternative pathways for patients away from ED and Paramedic referral rights for services offered in the Directory of Services • Development of Same Day Emergency Care provision across the system • Further extended capacity in Clinical Assessment Services • Increasing the number of blue light trained drivers • Reducing conveyance to ED where appropriate • Reducing hours lost to the system
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Area	Indicator	Org.	Target	August 2020 YTD	August 2021 YTD	Performance	No. of Excess Breaches	Comments
Mental Health ©	% of Mental Health patients on Care Programme Approach (CPA) discharged from hospital and followed up within 7 days	BCCG	95.00%	98.04%	95.21%	↓	0	Achieved.
Dementia ©	CCG's estimated prevalence for people over 65 with dementia against the CCG's actual dementia diagnosis rate	BCCG	66.70%	74.76%	70.39%	↓	0	Achieved.
Mental Health IAPT ©	IAPT access proportion rate	BCCG	1.71% in 20/21 427 in 21/22	1.21%	337		Breach information not currently available	<p>The Improving Access to Psychological Therapies (IAPT) access proportion targets were altered to the number of clients accessing the service rather than the proportion of the population due to the deferment of the access target for a year as a result of the COVID-19 pandemic. Blackpool CCG has not achieved the target of 427 patients attending in August 2021 with 337 patients accessing the service.</p> <p>The number of referrals to the service in Blackpool and regionally and nationally have decreased during the COVID-19 pandemic.</p> <p>The following actions are being taken to increase patient referrals and access to the IAPT service:</p>
	IAPT recovery rate (50% monthly)	BCCG	50.00%	53.13%	53.46%	↑		
	The proportion of people that wait 6 weeks or less from referral to their first IAPT treatment appointment	BCCG	75.00%	93.61%	95.60%	↑	0	<ul style="list-style-type: none"> Regular leaflet and poster distribution is being undertaken to shops, takeaways, public buildings, public transport, as well as door to door leaflet delivery. Regular promotion of online courses is taking place as well as improved access to this via online self-referral. Supporting Mind banners are being utilised at South Shore Primary Care Centre and Whitegate Drive Health Centre to promote the service. Regular communication is taking place with all BTH line managers to provide details of early support available for staff through Supporting Minds as well as promotion of online groups. Regular liaison with Occupational Health and HR to ensure that staff who are struggling with mild to moderate mental health problems get the support they need in a timely fashion. Development of a resilience course utilising Silver cloud for staff as a response to the BTH staff survey. Regular communication with large employers in Blackpool with information and course start dates. Regular promotion via social media and targeted promotion through local radio and press releases to local newspaper and other publications Links and referral pathways are being shared with local colleges and the

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								<p>university. In-house provision of Stress Control to these organisations where possible. First course due to run in November at Blackpool Sixth form.</p> <ul style="list-style-type: none"> • Long Term Condition (LTC) lead networking/building relationships and developing referral pathways with physical health services. • Planned pilot to increase access by Care Home residents. • Widening access to Mindfulness in LTCs • Promotion at children's centres and play groups to target young parents. • There is further work taking place at ICB level to consider shared learning from other areas with the ICS IAPT lead.
	The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment.	BCCG	95.00%	99.81%	98.93%	↓	0	Achieved.
HCAI	Clostridium Difficile (C.Diff.)	BCCG	82	20	46	↓	0	<p>There has been an increase in the number of C-Difficile cases reported in Blackpool CCG between April and August 2021 compared to the same period in 2020; however, incidents remain below the targets.</p> <p>Potential causation may have some relation to the reduced number of face to face appointments during earlier pandemic that might have promoted earlier sampling or challenges of prescribing of antibiotics via telephone assessment as well as increasing frailty among the elderly / infirm.</p>
		BTH	104	41	53	↓	0	<p>The CCG has sent reminders to practices around antibiotic prescribing and revised guidance has been issued via NICE earlier in 2021 which was also circulated to practices.</p>
	MRSA	BCCG	0	0	0	↔	0	All three (3) of the MRSA cases recorded for BTH between April and August 2021 relate to the same patient.
		BTH	0	1	3	↓	3	<p>This patient is a complex medical patient who had a deep seated infection which proved very difficult and challenging to treat.</p> <p>Extensive discussions have taken place within the Trust about this patient and their complex and on-going care needs. The Trust has taken forward and completed any actions which were highlighted by this case.</p>

Appendix 1: Performance Scorecard

Performance Dashboard

Abbreviations Key:
UHMBT – University Hospitals of Morecambe Bay
LTH – Lancashire Teaching Hospitals
FWCCG – Fylde and Wyre CCG
BCCG – Blackpool CCG

Indicator	Level	Target YTD	Target	2020-21			2021-22					Latest Month/Quarter	2021-22 YTD
				Q4			Q1		Q2				
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug		

Integrated Primary & Community Care (Out of Hospital)

IAPT access (Local)	Fylde Coast	4083	825	499	415	559	654	627	563	624	610	610	3078
	FWCCG	1967	398	272	183	268	264	218	231	298	273	273	1284
	BCCG	2116	427	227	232	291	390	409	332	326	337	337	1794
IAPT recovery rate (Local)	Fylde Coast	50.0%	50.0%	53.8%	55.9%	57.7%	54.8%	52.7%	55.7%	50.2%	53.2%	53.2%	53.3%
	FWCCG	50.0%	50.0%	56.8%	53.8%	58.0%	53.0%	52.0%	61.3%	49.2%	50.0%	50.0%	53.1%
	BCCG	50.0%	50.0%	51.5%	58.1%	57.4%	56.3%	53.3%	52.1%	50.9%	54.9%	54.9%	53.5%
IAPT 6 wk waits (Local)	Fylde Coast	75.0%	75.0%	93.4%	93.0%	91.9%	91.7%	88.7%	92.8%	94.9%	89.9%	89.9%	91.6%
	FWCCG	75.0%	75.0%	90.4%	87.0%	87.6%	87.4%	88.9%	85.0%	90.3%	76.1%	76.1%	85.8%
	BCCG	75.0%	75.0%	95.6%	99.3%	96.4%	95.3%	88.6%	97.5%	98.3%	97.6%	97.6%	95.6%

Indicator	Level	Target YTD	Target	2020-21			2021-22					Latest Month/Quarter	2021-22 YTD
				Q4			Q1			Q2			
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug		
IAPT 18 wk waits (Local)	Fylde Coast	95.0%	95.0%	98.7%	97.8%	97.7%	98.4%	99.0%	99.1%	99.7%	99.1%	99.1%	99.0%
	FWCCG	95.0%	95.0%	97.0%	96.4%	96.6%	98.6%	99.2%	98.3%	100.0%	100.0%	100.0%	99.2%
	BCCG	95.0%	95.0%	100.0%	99.3%	98.8%	98.3%	98.9%	99.5%	99.4%	98.5%	98.5%	98.9%
Dementia Diagnosis Rate	Fylde Coast	66.7%	66.7%	65.0%	64.7%	65.0%	65.3%	65.3%	65.1%	64.7%	64.3%	64.3%	64.9%
	FWCCG	66.7%	66.7%	61.7%	61.1%	61.3%	61.2%	61.5%	61.3%	61.3%	60.8%	60.8%	61.2%
	BCCG	66.7%	66.7%	69.8%	69.9%	70.5%	71.2%	71.0%	70.7%	69.8%	69.3%	69.3%	70.4%

Planned Care

18 Wk RTT Incomplete	Fylde Coast	92.0%	92.0%	60.3%	60.4%	61.8%	64.0%	66.0%	65.8%	65.1%	65.3%	65.3%	65.3%
	FWCCG	92.0%	92.0%	60.8%	60.7%	62.4%	64.6%	66.7%	66.5%	65.4%	65.5%	65.5%	65.7%
	BCCG	92.0%	92.0%	59.8%	60.1%	61.2%	63.4%	65.2%	65.2%	64.9%	65.2%	65.2%	64.8%
	BTH	92.0%	92.0%	65.4%	66.3%	67.6%	69.9%	72.4%	73.4%	73.3%	72.7%	72.7%	72.3%
	LTH	92.0%	92.0%	55.1%	54.3%	55.1%	55.5%	56.6%	56.8%	56.8%	55.1%	55.1%	56.1%
	UHMB	92.0%	92.0%	59.9%	60.3%	62.0%	63.6%	67.7%	69.9%	71.1%	71.5%	71.5%	68.7%
	SPIRE	92.0%	92.0%	31.3%	38.4%	46.1%	52.6%	54.5%	50.9%	45.2%	48.0%	48.0%	50.3%

Number of patients on a 18 wk incomplete pathway	Fylde Coast	0	0	28859	28576	29240	30054	29986	30775	31413	32431	32431	NA
	FWCCG	0	0	14891	14728	15082	15579	15597	16060	16381	16979	16979	NA
	BCCG	0	0	13968	13848	14158	14475	14389	14715	15032	15452	15452	NA
	BTH	0	0	18924	18451	18808	18836	18913	19425	19791	21229	21229	NA
	LTH	0	0	43348	44334	47107	48976	49188	51011	52546	54134	54134	NA
	UHMB	0	0	24605	24009	23950	24549	25072	25041	24054	24037	24037	NA
	SPIRE	NA	NA	3020	3329	3556	3916	3832	3866	3873	3155	3155	3155

RTT 52 wk waits	Fylde Coast	0	0	2958	3518	3728	3388	3015	2947	2902	2875	2875	15127
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				Q4			Q1			Q2			
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug		
	FWCCG	0	0	1469	1732	1855	1694	1507	1449	1439	1434	1434	7523
	BCCG	0	0	1489	1786	1873	1694	1508	1498	1463	1441	1441	7604
	BTH	0	0	1469	1672	1717	1471	1244	1199	1214	1184	1184	6312
	LTH	0	0	5937	6998	7588	7208	6765	6564	6604	6863	6863	34004
	UHMB	0	0	1862	2345	2496	2029	1646	1369	1256	1188	1188	7488
	SPIRE	0	0	897	1089	1172	1079	983	935	874	827	827	4698
Diagnostic test waiting times	Fylde Coast	1.0%	1.0%	33.2%	30.2%	28.7%	27.1%	25.4%	28.6%	29.6%	32.1%	32.1%	28.4%
	FWCCG	1.0%	1.0%	31.5%	28.6%	26.8%	25.7%	23.2%	27.0%	27.3%	30.1%	30.1%	26.6%
	BCCG	1.0%	1.0%	34.8%	31.8%	30.6%	28.5%	27.6%	30.2%	32.1%	34.3%	34.3%	30.4%
	BTH	1.0%	1.0%	26.8%	23.1%	21.3%	20.6%	18.9%	23.5%	25.3%	29.5%	29.5%	23.3%
	LTH	1.0%	1.0%	46.3%	43.5%	43.7%	39.4%	39.2%	39.1%	39.1%	46.6%	46.6%	40.9%
	UHMB	1.0%	1.0%	8.2%	3.7%	3.2%	3.0%	2.5%	2.7%	3.5%	3.6%	3.6%	3.0%
Cancer 2 wk waits	Fylde Coast	93.0%	93.0%	93.1%	95.8%	94.1%	85.6%	92.2%	96.2%	94.5%	92.6%	92.6%	92.3%
	FWCCG	93.0%	93.0%	91.7%	95.0%	92.6%	87.2%	91.2%	96.7%	94.0%	93.3%	93.3%	92.5%
	BCCG	93.0%	93.0%	95.2%	97.1%	96.1%	83.2%	93.6%	95.6%	95.1%	91.6%	91.6%	92.0%
	BTH	93.0%	93.0%	96.0%	97.6%	94.2%	85.1%	92.0%	96.6%	94.8%	92.5%	92.5%	92.3%
	LTH	93.0%	93.0%	72.0%	85.2%	92.6%	92.3%	97.6%	95.8%	95.1%	93.6%	93.6%	94.9%
	UHMB	93.0%	93.0%	56.4%	72.2%	83.8%	81.9%	92.4%	91.0%	92.0%	91.7%	91.7%	90.0%
Cancer 2 wk waits - breast	Fylde Coast	93.0%	93.0%	87.9%	87.9%	62.6%	40.0%	51.7%	96.0%	95.9%	97.4%	97.4%	73.9%
	FWCCG	93.0%	93.0%	86.0%	79.2%	58.3%	38.0%	50.8%	94.7%	96.6%	95.3%	95.3%	74.4%
	BCCG	93.0%	93.0%	89.8%	95.2%	65.3%	41.4%	52.5%	97.1%	95.2%	100.0%	100.0%	73.4%
	BTH	93.0%	93.0%	94.4%	98.1%	65.0%	40.5%	49.6%	96.6%	95.5%	97.2%	97.2%	73.4%

Indicator	Level	Target YTD	Target	2020-21			2021-22					Latest Month/Quarter	2021-22 YTD
				Q4			Q1			Q2			
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug		
	LTH	93.0%	93.0%	7.1%	38.2%	58.5%	57.3%	95.7%	96.4%	100.0%	92.7%	92.7%	86.0%
	UHMB	93.0%	93.0%	1.6%	4.2%	22.0%	20.3%	87.0%	66.7%	83.7%	87.0%	87.0%	70.3%

Cancer 31 day waits	Fylde Coast	96.0%	96.0%	95.5%	90.5%	94.8%	94.3%	94.7%	96.5%	93.8%	93.8%	93.8%	94.7%
	FWCCG	96.0%	96.0%	95.5%	88.1%	95.7%	93.5%	93.0%	96.3%	92.6%	94.9%	94.9%	94.2%
	BCCG	96.0%	96.0%	95.5%	93.5%	93.5%	95.2%	97.0%	96.8%	95.5%	92.2%	92.2%	95.4%
	BTH	96.0%	96.0%	97.4%	96.6%	97.9%	98.4%	98.9%	99.6%	97.4%	98.8%	98.8%	98.6%
	LTH	96.0%	96.0%	85.9%	85.5%	92.2%	85.4%	87.8%	84.3%	85.6%	86.3%	86.3%	85.9%
	UHMB	96.0%	96.0%	94.8%	96.1%	92.1%	91.0%	97.8%	92.3%	95.8%	89.9%	89.9%	93.2%

Cancer 31 day waits - Surgery	Fylde Coast	94.0%	94.0%	85.2%	88.9%	87.1%	80.0%	90.0%	77.1%	71.1%	88.9%	88.9%	81.9%
	FWCCG	94.0%	94.0%	83.3%	89.5%	84.2%	80.0%	88.9%	68.4%	65.2%	84.6%	84.6%	77.4%
	BCCG	94.0%	94.0%	88.9%	88.2%	91.7%	80.0%	90.9%	87.5%	80.0%	94.7%	94.7%	87.4%
	BTH	94.0%	94.0%	100.0%	87.5%	100.0%	88.2%	95.5%	100.0%	100.0%	100.0%	100.0%	96.3%
	LTH	94.0%	94.0%	62.7%	68.7%	79.4%	69.9%	78.7%	73.0%	63.7%	71.8%	71.8%	70.9%
	UHMB	94.0%	94.0%	72.7%	90.0%	75.0%	100.0%	100.0%	88.9%	100.0%	76.9%	76.9%	90.9%

Cancer 31 day waits - Drugs	Fylde Coast	98.0%	98.0%	100.0%	100.0%	100.0%	100.0%	97.6%	100.0%	100.0%	100.0%	100.0%	99.5%
	FWCCG	98.0%	98.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	BCCG	98.0%	98.0%	100.0%	100.0%	100.0%	100.0%	95.0%	100.0%	100.0%	100.0%	100.0%	98.8%
	BTH	98.0%	98.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	LTH	98.0%	98.0%	98.0%	97.5%	100.0%	100.0%	99.1%	100.0%	99.1%	100.0%	100.0%	99.6%
	UHMB	98.0%	98.0%	98.7%	100.0%	100.0%	100.0%	100.0%	98.9%	98.7%	98.6%	98.6%	99.3%

	Fylde Coast	94.0%	94.0%	100.0%	100.0%	100.0%	100.0%	97.8%	100.0%	100.0%	100.0%	100.0%	99.6%
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Indicator	Level	Target YTD	Target	2020-21			2021-22					Latest Month/Quarter	2021-22 YTD
				Q4			Q1			Q2			
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug		
Cancer 31 day waits - Radiotherapy	FWCCG	94.0%	94.0%	100.0%	100.0%	100.0%	100.0%	96.2%	100.0%	100.0%	100.0%	100.0%	99.3%
	BCCG	94.0%	94.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	LTH	94.0%	94.0%	99.5%	100.0%	No data	99.5%	99.5%	98.6%	99.6%	100.0%	100.0%	99.4%
Cancer 62 day waits	Fylde Coast	85.0%	85.0%	73.6%	60.9%	74.6%	75.5%	75.2%	77.9%	67.7%	73.1%	73.1%	73.9%
	FWCCG	85.0%	85.0%	73.1%	65.1%	77.6%	73.7%	73.6%	79.6%	68.7%	77.2%	77.2%	74.7%
	BCCG	85.0%	85.0%	74.2%	55.3%	69.6%	77.8%	77.6%	75.0%	66.0%	67.3%	67.3%	72.5%
	BTH	85.0%	85.0%	72.9%	69.4%	73.1%	80.3%	79.2%	82.7%	72.3%	77.3%	77.3%	78.4%
	LTH	85.0%	85.0%	57.3%	52.8%	64.5%	61.4%	60.0%	58.2%	63.0%	58.7%	58.7%	60.2%
	UHMB	85.0%	85.0%	66.3%	68.3%	59.0%	56.0%	56.1%	62.0%	60.1%	59.4%	59.4%	58.7%
Cancer 62 day waits - screening	Fylde Coast	90.0%	90.0%	75.0%	77.8%	71.4%	66.7%	62.5%	77.8%	38.5%	66.7%	66.7%	60.4%
	FWCCG	90.0%	90.0%	100.0%	66.7%	80.0%	50.0%	66.7%	75.0%	50.0%	50.0%	50.0%	57.1%
	BCCG	90.0%	90.0%	33.3%	100.0%	50.0%	80.0%	60.0%	80.0%	33.3%	100.0%	100.0%	63.0%
	BTH	90.0%	90.0%	80.0%	63.6%	33.3%	37.5%	33.3%	23.5%	16.7%	40.0%	40.0%	28.0%
	LTH	90.0%	90.0%	100.0%	0.0%	85.7%	75.0%	66.7%	35.7%	71.4%	83.3%	83.3%	60.0%
	UHMB	90.0%	90.0%	61.5%	86.4%	63.6%	79.5%	67.5%	79.0%	74.5%	60.0%	60.0%	73.1%
Cancer 62 day waits - upgrade	Fylde Coast	NA	NA	89.8%	81.7%	86.7%	84.2%	87.3%	86.8%	88.6%	85.9%	85.9%	86.6%
	FWCCG	NA	NA	90.3%	75.9%	84.8%	77.8%	83.8%	83.9%	92.3%	88.6%	88.6%	86.0%
	BCCG	NA	NA	89.3%	87.1%	88.9%	90.0%	92.3%	89.2%	83.9%	81.5%	81.5%	87.4%
	BTH	NA	NA	84.7%	85.9%	92.6%	86.8%	91.2%	89.5%	86.8%	88.3%	88.3%	88.4%
	LTH	NA	NA	88.0%	78.5%	81.8%	76.0%	88.6%	75.8%	84.9%	74.2%	74.2%	79.9%
	UHMB	NA	NA	86.0%	84.6%	90.3%	90.2%	90.5%	78.9%	81.1%	84.3%	84.3%	85.3%

Indicator	Level	Target YTD	Target	2020-21			2021-22					Latest Month/Quarter	2021-22 YTD
				Q4			Q1			Q2			
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug		

Urgent & Emergency Care

A&E 4hr waits	Fylde Coast	95.0%	95.0%	78.4%	80.7%	82.0%	83.4%	83.68%	86.6%	82.7%	80.4%	80.4%	83.3%
	FWCCG	95.0%	95.0%	78.5%	80.9%	82.1%	83.5%	83.47%	86.1%	82.5%	80.2%	80.2%	83.1%
	BCCG	95.0%	95.0%	78.2%	80.6%	82.0%	83.4%	83.84%	87.0%	82.9%	80.5%	80.5%	83.5%
	BTH	95.0%	95.0%	78.2%	80.6%	82.0%	83.4%	83.84%	87.0%	82.9%	80.5%	80.5%	83.5%
	LTH	95.0%	95.0%	81.4%	81.5%	81.0%	83.3%	81.90%	79.8%	79.2%	79.5%	79.5%	80.7%
	UHMB	95.0%	95.0%	77.6%	86.1%	85.0%	86.5%	80.03%	82.8%	81.4%	76.3%	76.3%	81.3%
Trolley Waits Over 12 Hours (National)	BTH	0	0	16	22	9	33	32	29	12	61	61	167
	LTH	0	0	32	7	26	30	24	53	45	57	57	209
	UHMB	0	0	21	0	3	4	9	10	33	96	96	152
Trolley Waits Over 12 Hours - Medical (Local)	BTH	0	0	12	19	4	24	16	12	4	46	46	102
Trolley Waits Over 12 Hours - Mental Health (Local)	BTH	0	0	4	3	6	8	15	17	9	15	15	64