



Southport and Formby
Clinical Commissioning Group

Southport & Formby Clinical Commissioning Group

Integrated Performance Report Summary – August 2021

Summary Performance Dashboard

Metric	Reporting Level		2021-22												YTD
			Q1			Q2			Q3			Q4			
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
E-Referrals - NB Reporting suspended on this metric currently															
NHS e-Referral Service (e-RS) Utilisation Coverage Utilisation of the NHS e-referral service to enable choice at first routine elective referral. Highlights the percentage via the e-Referral Service.	Southport & Formby CCG	RAG													
		Actual													
		Target													
Diagnostics & Referral to Treatment (RTT)															
% of patients waiting 6 weeks or more for a diagnostic test The % of patients waiting 6 weeks or more for a diagnostic test	Southport & Formby CCG	RAG	R	R	R	R	R								
		Actual	15.1%	18.41%	18.43%	17.37%	32.15%								
		Target	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	
% of all Incomplete RTT pathways within 18 weeks Percentage of Incomplete RTT pathways within 18 weeks of referral	Southport & Formby CCG	RAG	R	R	R	R	R								
		Actual	77.41%	79.17%	79.68%	79.32%	78.32%								
		Target	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	
Referral to Treatment RTT - No of Incomplete Pathways Waiting >52 weeks The number of patients waiting at period end for incomplete pathways >52 weeks	Southport & Formby CCG	RAG	R	R	R	R	R								
		Actual	412	355	335	320	342								
		Target	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 Patients who have ops cancelled, on or after the day of admission (Inc. day of surgery), for non-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.	Southport & Ormskirk Hospital	RAG	R	R	R	R	R							R	
		Actual	3	6	3	4	1							17	
		Target	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 the trust for non-clinical reasons, which have already been previously cancelled once for non-clinical reasons.	Southport & Ormskirk Hospital	RAG	G	G	G	G	G							G	
		Actual	0	0	0	0	0							0	
		Target	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) The percentage of patients first seen by a specialist within two weeks when urgently referred by their GP or dentist with suspected cancer	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		Actual	87.80%	85.52%	85.82%	81.23%	76.79%									83.25%
		Target	93%	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) Two week wait standard for patients referred with 'breast symptoms' not currently covered by two week waits for suspected breast cancer	Southport & Formby CCG	RAG	R	R	R	G	R								R	
		Actual	92.31%	83.33%	80%	100%	88.89%									88.37%
		Target	93%	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 (MONTHLY) The percentage of patients receiving their first definitive treatment within one month (31 days) of a decision to treat (as a proxy for diagnosis) for cancer	Southport & Formby CCG	RAG	R	G	G	G	R								R	
		Actual	95.35%	97.89%	97.80	97.56%	89.04%									95.78%
		Target	96%	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) 31-Day Standard for Subsequent Cancer Treatments where the treatment function is (Surgery)	Southport & Formby CCG	RAG	R	R	R	G	G								R	
		Actual	80%	85.71%	93.33%	100%	100%									91.04%
		Target	94%	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) (MONTHLY) 31-Day Standard for Subsequent Cancer Treatments (Drug Treatments)	Southport & Formby CCG	RAG	G	G	R	G	G								G	
		Actual	100%	100%	95.24%	100%	100%									98.95%
		Target	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
% of patients receiving subsequent treatment for cancer within 31 days (Radiotherapy Treatments) (MONTHLY) 31-Day Standard for Subsequent Cancer Treatments where the treatment function is (Radiotherapy)	Southport & Formby CCG	RAG	G	G	G	G	G								G	
		Actual	100.00%	100%	95.45%	100%	100%									99.14%
		Target	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%
% of patients receiving 1st definitive treatment for cancer within 2 months (62 days) (MONTHLY) The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		Actual	79.59%	76.60%	65.85%	70.73%	66.67%									72.43%
		Target	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%
% of patients receiving treatment for cancer within 62 days from an NHS Cancer Screening Service (MONTHLY) Percentage of patients receiving first definitive treatment following referral from an NHS Cancer Screening Service within 62 days.	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		Actual	50%	60%	86.67%	77.78%	28.57%									67.50%
		Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
% of patients receiving treatment for cancer within 62 days upgrade their priority (MONTHLY) % of patients treated for cancer who were not originally referred via an urgent but have been seen by a clinician who suspects cancer, who has upgraded their priority.	Southport & Formby CCG (local target 85%)	RAG	G	G	G										G	
		Actual	91.30%	100%	85.19%	84.21%	82.35%									89.29%
		Target	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%

Metric	Reporting Level		2021-22												YTD	
			Q1			Q2			Q3			Q4				
			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	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		Actual	84.02%	80.16%	80.33%	76.14%	76.11%									79.30%
		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%
MSA																
Mixed sex accommodation breaches - All Providers No. of MSA breaches for the reporting month in question for all providers	Southport & Formby CCG	RAG														
		Actual	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 FCE's)	Southport & Formby CCG	RAG														
		Actual	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 Bacteraemia Incidence of MRSA bacteraemia (Commissioner) cumulative	Southport & Formby CCG	RAG	G	G	G	R	R								R	
		YTD	0	0	0	1	2								2	
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	
Number of C.Difficile infections Incidence of Clostridium Difficile (Commissioner) cumulative	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		YTD	8	13	17	22	25								25	
		Target	3	5	7	9	11	14	16	19	22	25	28	30	30	
Number of E.Coli Incidence of E.Coli (Commissioner) cumulative	Southport & Formby CCG	RAG	G	G	G	G	G								G	
		YTD	8	17	24	32	44								44	
		Target	16	30	42	54	65	76	87	100	115	130	142	152	152	

Metric	Reporting Level		2021-22												YTD	
			Q1			Q2			Q3			Q4				
			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 The proportion of those patients on Care Programme Approach discharged from inpatient care who are followed up within 7 days	Southport & Formby CCG	RAG	G	G	G	G	R								G	
		Actual	100%	100%	100%	100%	80%									96%
		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%
Episode of Psychosis																
First episode of psychosis within 2 weeks of referral The percentage of people experiencing a first episode of psychosis with a NICE approved care package 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.	Southport & Formby CCG	RAG	G													
		Actual	80%												80%	
		Target	60%			60%			60%			60%			60%	
Eating Disorders																
Eating Disorders Service (EDS) Treatment commencing within 18 weeks of referrals	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		Actual	25.00%	29.40%	30.30%	30.3%	31.4%									30.17%
		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%
IAPT (Improving Access to Psychological Therapies)																
IAPT Access The proportion of people that enter treatment against the level of need in the general population i.e. the proportion of people who have depression and/or anxiety disorders who receive psychological therapies	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		Actual	0.48%	0.47%	0.57%	0.50%	0.63%									2.65%
		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%	1.59%	19%
IAPT Recovery Rate (Improving Access to Psychological Therapies) The percentage of people who finished treatment within the reporting period who were initially assessed as 'at caseness', have attended at least two treatment contacts and are coded as discharged, who are assessed as moving to recovery.	Southport & Formby CCG	RAG	R	G	R	G	R								R	
		Actual	42.40%	53.2%	40.9%	55.9%	40.0%									49.33%
		Target	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
IAPT Waiting Times - 6 Week Waiters The proportion of people that wait 6 weeks or less from referral to entering a course of IAPT treatment against the number who finish a course of treatment.	Southport & Formby CCG	RAG	G	G	G	R	G								G	
		Actual	98.00%	95.00%	88%	74.0%	80%									89%
		Target	75%	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 from referral to entering a course of IAPT treatment, against the number of people who finish a course of treatment in the reporting period.	Southport & Formby CCG	RAG	G	G	G	G	G								G	
		Actual	100%	100%	100%	100%	100%									100%
		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%

Metric	Reporting Level		2020-21												YTD	
			Q1			Q2			Q3			Q4				
			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	Southport & Formby CCG	RAG	R	R	R	R	R								R	
		Actual	64.54%	64.58%	65.23%	65.6%	66.2%									65.23%
		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%	66.70%
Learning Disability Health Checks																
No of people who have had their Annual LD Health Check cumulative	Southport & Formby CCG	RAG	R												R	
		Actual	12.09%												12.09%	
		Target	18%			35%			52%			70%			70%	
Severe Mental Illness - Physical Health Check																
People with a Severe Mental Illness receiving a full Physical Annual Health Check and follow-up interventions (%) Percentage of people on General Practice Serious Mental Illness register who receive a physical health check and follow-up care in either a primary or secondary setting.	Southport & Formby CCG	RAG	R												R	
		Actual	26.5%												26.5%	
		Target	50%			50%			50%			50%			50%	
Children & Young People Mental Health Services (CYPMH) Rolling 12 month																
Improve access rate to Children and Young People's Mental Health Services (CYPMH) Increase the % of CYP with a diagnosable MH condition to receive treatment from an NHS-funded community MH service	Southport & Formby CCG	RAG	G												G	
		Actual	22.1%												41.3%	
		Target	8.75%			8.75%			8.75%			8.75%			35% YTD	
Children and Young People with Eating Disorders																
The number of completed CYP ED routine referrals within four weeks The number of routine referrals for CYP ED care pathways (routine cases) within four weeks (QUARTERLY)	Southport & Formby CCG	RAG														
		Actual	Data suppressed due to less than 2 referrals in the quarter													
		Target	95%			95%			95%			95%			95%	
The number of completed CYP ED urgent referrals within one week The number of completed CYP ED care pathways (urgent cases) within one week (QUARTERLY)	Southport & Formby CCG	RAG														
		Actual	Data suppressed due to less than 2 referrals in the quarter													
		Target	95%			95%			95%			95%			95%	

Metric	Reporting Level		2021-22												YTD	
			Q1			Q2			Q3			Q4				
			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	Sefton	RAG	R	R	R	R	R								R	
		Actual	81.4%	62.5%	54.2%	56.5%	38.2%									58.6%
		Target	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%
Child and Adolescent Mental Health Services (CAMHS) - % referral to partnership within 18 weeks - Alder Hey	Sefton	RAG	R	R	R	R	R								R	
		Actual	57.1%	42.3%	72.2%	45.5%	25.0%									48.4%
		Target	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
Percentage of Autism Spectrum Disorder (ASD) assessments started in 12 weeks - Alder Hey	Sefton	RAG	G	G	G	G	G								G	
		Actual	96%	98%	100%	100%	100%									98.80%
		Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
Percentage of Autism Spectrum Disorder (ASD) assessments completed within 30 Weeks - Alder Hey	Sefton	RAG	R	R	R	R	R								R	
		Actual	85%	83%	77%	72%	62%									75.8%
		Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
Percentage of Attention Deficit Hyperactivity Disorder (ADHD) assessments started within 12 Weeks - Alder Hey	Sefton	RAG	G	G	G	G	G								G	
		Actual	99%	98%	100%	100%	100%									99.4%
		Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
Percentage of Attention Deficit Hyperactivity Disorder (ADHD) assessments completed within 30 Weeks - Alder Hey	Sefton	RAG	G	G	G	G	R								G	
		Actual	98%	93%	91%	90%	88%									92.00%
		Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
Average waiting times for Autism Spectrum Disorder (ASD) service <u>in weeks</u> (ages 16 - 25 years) - Mersey Care	Sefton	RAG														
		Actual	8.1	12.2	5.3	6.4	9.1									
		Target														
Average waiting times for Attention Deficit Hyperactivity Disorder (ADHD) service <u>in weeks</u> (ages 16 - 25 years) - Mersey Care	Sefton	RAG														
		Actual	90.5	77.0	78.4	63.8	62.9									
		Target														

Executive Summary

This report provides summary information on the activity and quality performance of Southport & Formby Clinical Commissioning Group at month 5 of 2021/22 (note: time periods of data are different for each source).

Constitutional Performance for August and Q1 2021/22	CCG	S&O
Diagnostics (National Target <1%)	32.15%	34.73%
Referral to Treatment (RTT) (92% Target)	78.32%	83.03%
No of incomplete pathways waiting over 52 weeks	342	132
Cancelled Operations (Zero Tolerance)	-	1
Cancer 62 Day Standard (Nat Target 85%)	66.67%	57.89%
A&E 4 Hour All Types (National Target 95%)	76.11%	77.19%
A&E 12 Hour Breaches (Zero Tolerance)	-	14
Ambulance Handovers 30-60 mins (Zero Tolerance)	-	50
Ambulance Handovers 60+ mins (Zero Tolerance)	-	8
Stroke (Target 80%) (July - reported a month in arrears)	-	65.6%
TIA Assess & Treat 24 Hrs (Target 60%) (July - reported a month in arrears)	-	15.8%
Mixed Sex Accommodation (Zero Tolerance)	Not Available	2
CPA 7 Day Follow Up (95% Target) 2021/22 - Q1	100.00%	-
EIP 2 Weeks (60% Target) 2021/22 - Q1	80.00%	-
IAPT Access (1.59% target monthly - 19% YTD)	0.63%	-
IAPT Recovery (Target 50%)	40.00%	-
IAPT 6 Weeks (75% Target)	80%	-
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 Mixed Sex Accommodation (MSA), Delayed Transfers of Care (DToc), cancelled operations, occupied bed days, 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 be 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 Southport & Formby COVID-19 vaccination programme continues to offer dose 1 and dose 2 vaccinations to Sefton residents and has now successfully fully vaccinated the majority of patients in cohorts 1-9. The two vaccination sites at Southport and Ainsdale Health & Well Being centres were brought to an end at the end of June having successfully administered Dose 1 & 2 vaccinations to the majority of patients in cohorts 1-9, along with care home residents and staff and the local homeless population. Seaforth village Surgery has been introduced as a vaccination site and continues to offer dose 1 & 2 vaccinations to the local population. The vaccination programme continues to offer vaccinations to eligible patients in cohorts 1-12 through community pharmacies, hospitals and national vaccination sites. Patients between the ages of 16-17 are now also eligible for the vaccine and included in cohort 12. At the end of Aug 2021 there have been 89,575 (or 79.5%) first dose vaccinations and 83,084 (73.7%) second dose vaccinations.

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.

In the context of responding to the ongoing challenges presented by COVID-19, while also restoring services, meeting new care demands and tackling health inequalities, Elective Recovery Funds (ERF) have been made available to systems that achieve activity levels above set thresholds. In Cheshire & Mersey Hospital Cell (established to co-ordinate acute hospital planning resulting from the COVID-19 pandemic the delivery of activity both at trust and system is being assessed against agreed trajectories for H1 (Half year 1).

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. Cheshire and Merseyside Hospital Cell has set out principles for elective recovery with a proposed recovery approach. The approach is focused on development of system level waiting list management both in diagnostic and surgical waits to maximise the capacity available and to standardise waiting times where possible and with priority given to clinically urgent patients and long waiters (52 week plus). Outpatient validation is another expected area of focus to support Elective recovery over the coming months. Elective recovery will continue to be supported by the independent sector facilitated by the procurement of service via the Increasing Capacity Framework (ICF).

Secondary care referrals were below historic levels across all referral sources for the majority of 2020/21. With a focus on elective restoration, referrals in 2021/22 are significantly higher than in the equivalent period of the previous year. At provider level, trends show that total secondary care referrals in August-21 have decreased by -12.5% when compared to the previous month at Southport Hospital. However, referrals in the previous month had increased to the highest levels since February-20 and year to date referrals at Southport Hospital in 2021/22 are 47.3% higher than in the previous year. GP referrals are reporting a -4.2% decrease when comparing to the previous month. When considering working days, further analysis has established there have been approximately 2 fewer GP referrals per day in August-21 when comparing to the previous month. In terms of referral priority, all priority types have seen an increase at month 5 of 2021/22 when comparing to the equivalent period in the previous year. The largest variance has occurred within routine referrals with an increase of 66.6%. Analysis suggests a recovery of two week wait referrals, which began during 2021/22 following the initial national lockdown. The 635 two week wait referrals reported in Jul-21 represent the highest monthly total since May-19. Referrals to the Breast Surgery speciality make up much of this increase with Gastroenterology also contributing significantly.

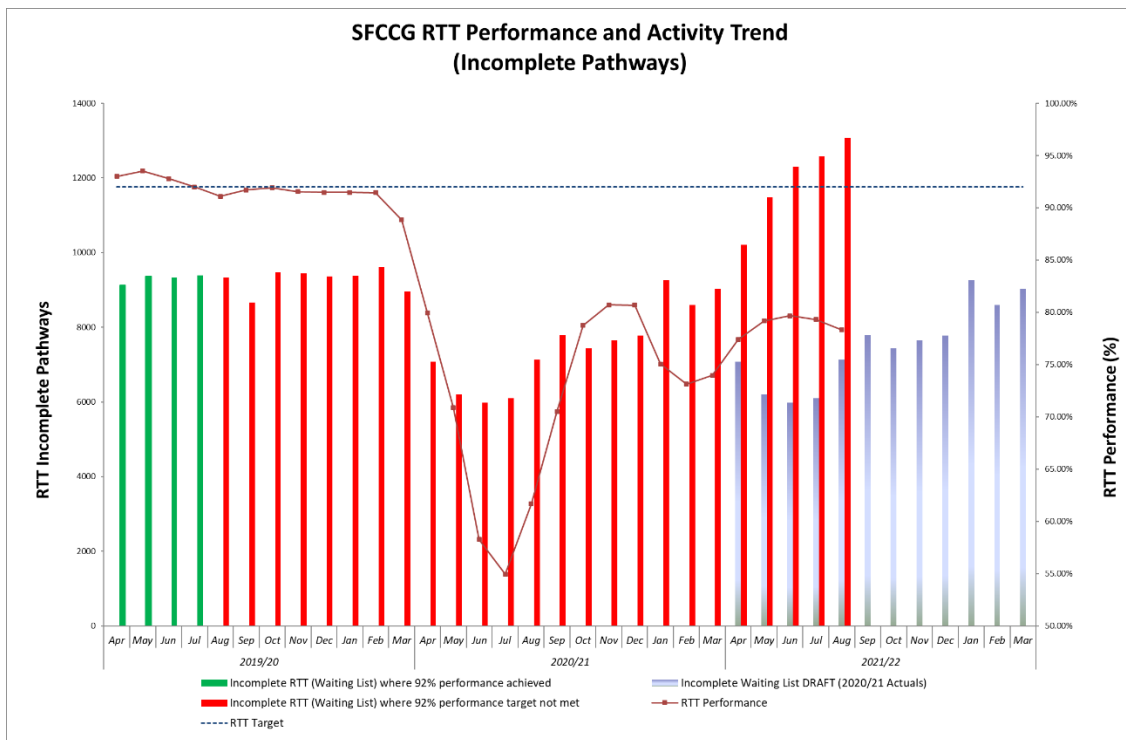
Reporting has been suspended on the e-Referral Service (e-RS) metric as e-RS capacity has been removed to ensure equity of provision. The current e-RS pathway is for all patients to be referred via the Appointment Slot Issue (ASI) functionality or via a Referral Assessment Service (RAS) for Trusts to manage the waiting lists fairly and according to clinical need. Therefore, reporting of e-RS utilisation will show a low conversion rate to bookings, as patients will be booked outside of e-RS. As system waiting lists reduce, there will need to be a transition plan to open capacity for direct booking via e-RS. However, until that point, e-RS reporting will be suspended.

The CCG failed the less than 1% target for Diagnostics in August, recording 32.15%, a decline in performance from last month when 17.37% was reported. Along with failing the national target, the CCG is measuring above the national level of 27.1%. Southport and Ormskirk reported 34.73%, which is a significant decline compared to last month when 20.49% was reported. The decline in performance is across all modalities. This has been impacted by increased demand and changes to the urgency of requests. Capacity and demand reviews are ongoing and the Trust has successfully recruited to an MRI Specialist Radiographer post. The Trust is also currently utilising imaging network capacity at St Helens & Knowsley, a weekly session at The Walton Centre for CT and additional

capacity at Renacres for non-obstetric ultrasound. Staff are continuing to carry out additional sessions of an evening and weekend where possible. A detailed piece of work will be completed with the Directorate to analyse and develop an improvement plan. 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 August was 78.32%, a 1% decline on last month's performance (79.32%). The CCG is also reporting well above the national level of 67.63%. Southport & Ormskirk Hospital reported 83.03%, also similar last month's performance when 83.76% was recorded. As with diagnostics, continued collaborative working with North West Outpatient Transformation Programme and Health Care Partnership to establish recovery and innovation for longer term sustainability is on-going.

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



There were a total of 972 Southport & Formby CCG patients waiting over 36+ weeks, the majority at Southport & Ormskirk Hospitals. Of the total long waiters, 342 patients were waiting over 52 weeks, an increase on last month when 320 breaches were reported. Included in the long waiters there are 4 patients waiting over 104 weeks. The CCG meet on a bi-weekly basis with the provider to receive an update on the 104-day breaches. The CCG met with the Trust in September to gain assurance and clarity regarding the process in place by the provider to monitor long waiters in general and are due to receive the Root Cause Analyses (RCAs) for 104 breaches. The RCAs will be reviewed at the CCGs Performance & Quality Investigation Review Panel (PQIRP) group and will assess any impact on patients and ensure actions taken by the provider are appropriate.

Of the 342 breaches for the CCG, there were 80 at Southport & Ormskirk, 97 at LUHFT and 165 at 19 other Trusts. The 342 52+ week CCG breaches represent 2.62% of the total waiting list, which is well below the national level of 5.11%.

Southport & Ormskirk had a total of 132, 52-week breaches in August, showing a decline from 101 reported in the previous month. The overall good performance in the low numbers of 52-week waiters is due to the continuation of services during the COVID surges at the Trust.

Overall, the number of patients waiting on an incomplete pathway for the CCG increased to 13,069 in August (July reported 12,576).

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

Southport & Formby CCG

Total Incomplete Pathways	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Plan v Latest
Plan (last year's actuals)*	7,072	6,204	5,983	6,101	7,135	7,794	7,723	7,646	7,782	9,254	8,601	9,036	6,101
2021/22	10,203	11,474	12,290	12,576	13,069								12,576
Difference	3,131	5,270	6,307	6,475	5,934								6,475
52 week waiters - Plan (last year's actuals)*	6	10	17	36	62	85	71	99	112	226	401	519	
52 week waiters - Actual	412	355	335	320	342								
Difference	406	345	318	284	280								

S&O

Total Incomplete Pathways	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Plan v Latest
Plan (last year's actuals)	7,603	6,485	6,140	6,463	6,903	7,796	8,105	6,558	7,800	8,078	8,615	9,896	6,903
2021/22	10,351	11,104	11,636	11,810	12,591								12,591
Difference	2,748	4,619	5,496	5,347	5,688								5,688

*NB. Plans were not required for 2021/22 Operational Planning. Therefore, previous year being used for comparative purposes.

The Trust has reported 1 cancelled operation in August, an improvement in cancelled operations after reporting 4 in July. The Trust indicated the cancelled operation was in emergency trauma. For all patients who have had their operation cancelled, on or after the day of admission for non-clinical reasons are to be offered a binding date within 28 days, or treatment to be funded at the time and hospital of patient's choice.

The CCG and Trust are achieving 3 of the 9 cancer measures year to date and 3 in August. The Trust are achieving 4 measures year to date and 1 in August.

Southport and Ormskirk Hospital continues to fail the 2-week standard. Referral numbers remain high and planning trajectories have factored in 120% of pre-pandemic activity for this standard. Pressures in endoscopy continue to impact on the straight to test diagnostic pathways under 2-week services and capacity for gynaecology outpatient services remains a concern. The provider reports an increase in patients converting to 62 days for the gynaecology tumour site.

For 2 week wait breast services, performance declined again to 88.89% in August and is under the 93% target for the CCG. Liverpool University Hospitals Foundation Trust (LUHFT), which is the main provider for breast services, is reporting 92.31% under target in August, with 17 breaches out of a total of 221 patients seen.

For Cancer 62 Day standard the CCG is measuring below the national level of 70.74% recording 66.67% in August and failing the 85% operational target.

For patients waiting over 104 days, the CCG reported 6 patients. Of the 6 patients, 2 were lower gastrointestinal, 1 gynaecology, 1 haematological, 1 head & neck and 1 lung. The CCG receives Root Cause Analyses (RCAs) and harm reviews for long waiting patients which are discussed at the Performance, Quality & Incident Review Panel (PQIRP) meeting.

The 2021/22 Priorities and Operational Planning Guidance: October 2021 to March 2022 sets the following objectives:

1. Return the number of people waiting for longer than 62 days to the level we saw in February 2020 (based on the overall national average) by March 2022.
2. To meet the Faster Diagnosis Standard (FDS) from Q3, ensuring at least 75% of patients will have cancer ruled out or diagnosed within 28 days of referral for diagnostic testing.

In August, the CCG performed above the proposed target for the 2-week breast symptom FDS indicator. However, for 2 week wait FDS and the screening referral indicator performed below target.

Performance against recovery trajectories demonstrates that in August the CCG is exceeding plan for numbers of first outpatients seen following an urgent referral and for patients receiving a first cancer treatment within 31 days of a decision to treat.

For Southport & Ormskirk Friends and Family Inpatient test response rate is above the England average of 19.6% in July 2021 at 27.2%. The percentage of patients who would recommend the service has increased to 92%, which is below the England average of 94% and the percentage who

would not recommend has decreased to 4% but still above the England average of 3%. The COVID-19 pandemic resulted in substantially fewer patients and visitors attending the Trust. The CCG Quality Team continue to monitor trends and request assurances from providers when exceptions are noted. The Trust are due to present their bi-annual Patient Experience update to the Patient Experience Group (PEEG) in the new year and a wider PEEG Provider focussed Patient Experience workshop is planned for January 2022.

For planned care finance and activity, 2020/21 saw significant reductions in contracted performance levels across the majority of providers for Southport & Formby CCG. This was a direct consequence of the COVID-19 pandemic and subsequent 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. For 2021/22 there is a focus on restoration of elective services as set out in the NHS Operational Planning Guidance. This has resulted in a considerable increase in planned care activity of 64% when compared to the equivalent period in the previous year. Total planned care activity (incorporating day case, elective and outpatient attendances) during August-21 also represents an increase of 1% to that in August-19 with 2019/20 activity being the applied baseline to operational planning levels for H1 2021/22. CCGs were expected to plan for 85% of 2019/20 activity levels being completed from July-21 and available contracting data suggests this has been achieved.

NB. Southport & Ormskirk Hospital Trust have informed the CCG that internal system issues have resulted in a lack of month 5 contracting data, which had a particular impact on planned care points of delivery. Contract performance reported has been sourced via a local data flow from the Trust.

Figure 3 – Planned Care All Providers – Contract Performance Compared to 2019/20

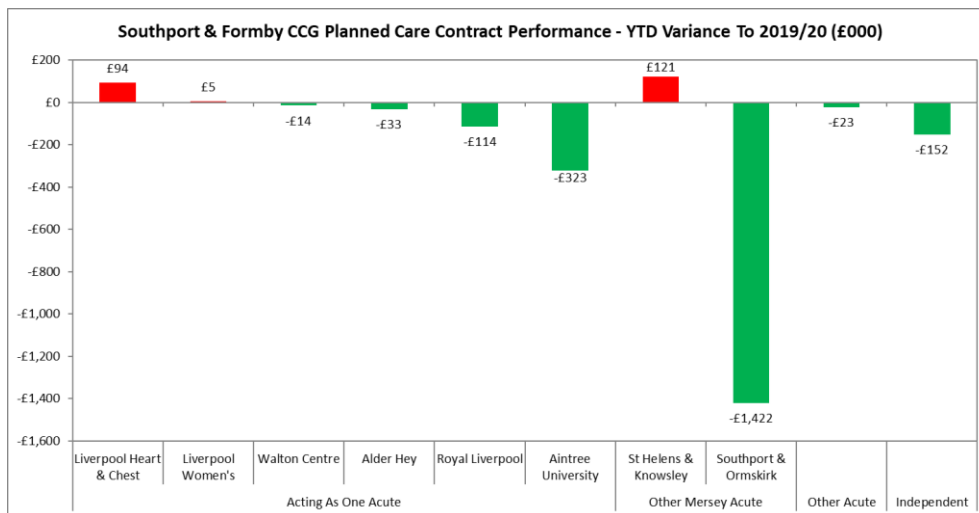


Figure 4 - Planned Care Activity Trends

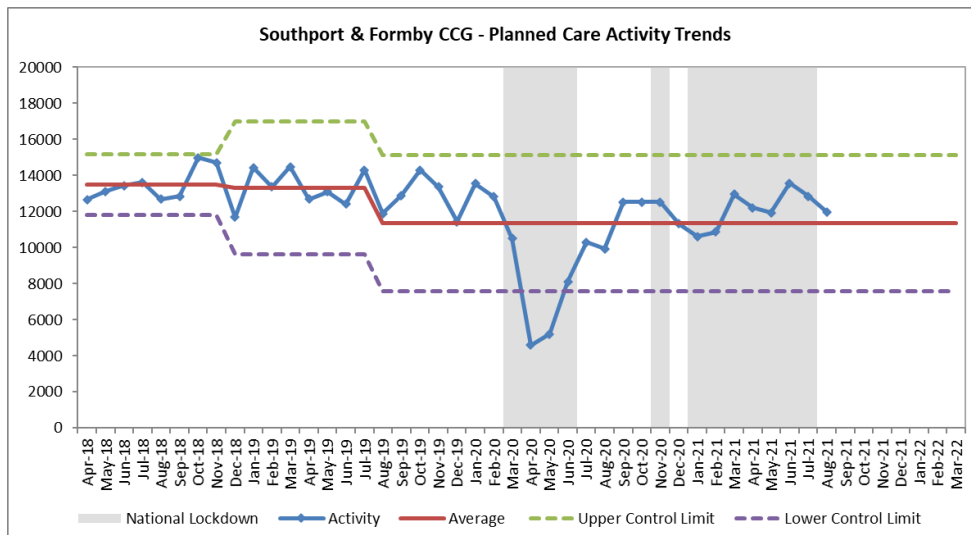


Figure 5 – Elective Inpatient Variance against Plan (Previous Year)

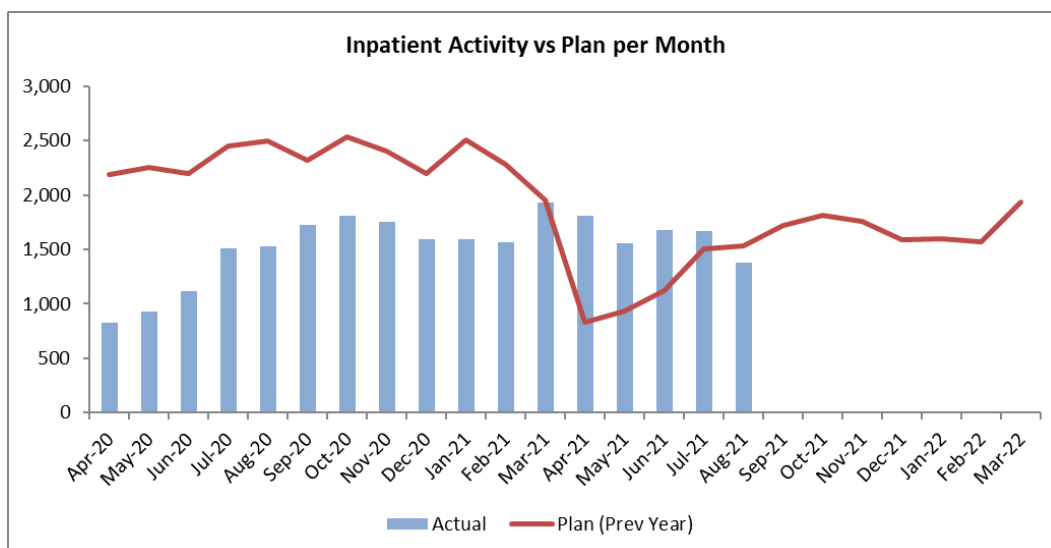
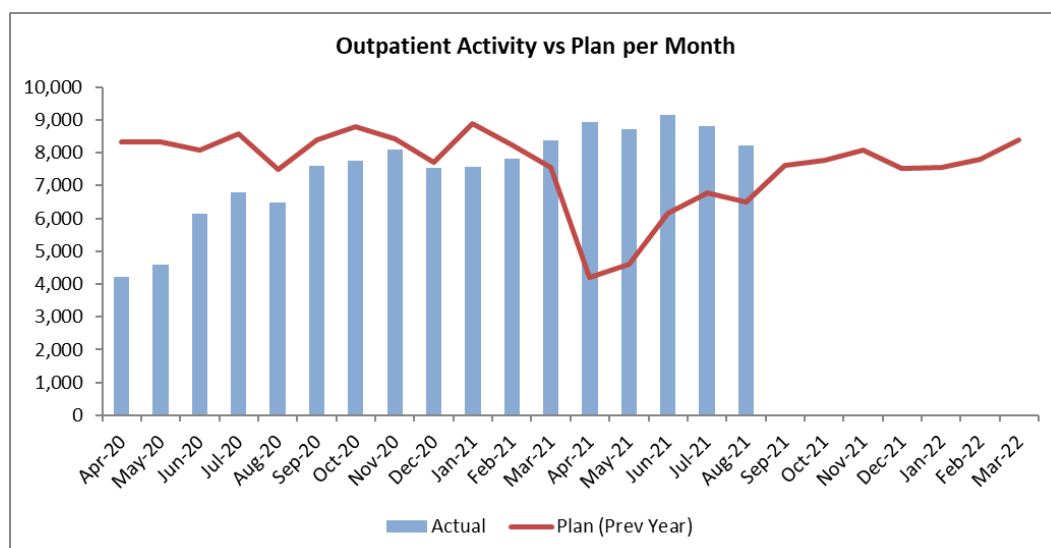


Figure 6 – Outpatient (First and Follow Up) Variance against Plan (Previous Year)



Unplanned Care

In relation to A&E 4-hour waits for all types, the CCG and Southport & Ormskirk have failed the 95% target in August, reporting 76.11% and 77.19% respectively which is similar to what was reported last month. The CCG is slightly below the nationally reported level of 77.01% with the Trust just over. The main issue remains increased attendances with public reporting difficulties in accessing alternatives to ED. This is causing overcrowding in the department and an inability to stream effectively to assessment areas, this is impacting on patient flow within the department. The focus has remained on admission versus discharge trajectories, however, there needs to be a greater emphasis on streaming at the front door. The system are working to implement care navigators utilising NHS digital streaming tool.

The Trust also reported 14, 12-hour breaches in August, an increase from July when 6 were reported. The Trust continue to submit 48-hour reviews within the agreed timescales. The CCG have reviewed all August breaches at the CCG Performance & Quality Investigation Review Panel (PQIRP) with no harm being identified and assurances received regarding patient management and safety. Key themes identified for the breaches include bed capacity on specialist wards, management and flow of COVID/Non-COVID patients, discharge delays due to COVID outbreaks in Care Homes and lack of appropriate Discharge Lounge due to ongoing refurbishment. It has been confirmed the Discharge

Lounge has now been completed and available for use. All Mental Health 12-hour breaches are being shared with Mersey Care Foundation Trust (MCFT) to support wider organisational learning.

For ambulance handovers, Southport & Ormskirk reported a decrease in ambulance handover times in August for handovers of 30 and 60 minutes from 54 to 50, along with those above 60 minutes decreased from 21 to 8. Work continues in collaboration with NWS to improve processes to support achievement of the handover targets.

The Trust have reported 2 mixed accommodation breaches locally to the CCG in August. The Trust report that all delays relate to transferring patients from Critical Care to ward beds due to bed capacity issues, which is escalated at the daily bed meetings.

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 has continued. The latest available data is for August 2021, when a small decline has been seen for Category 1 targets reporting 11 minutes against the 7 minute mean target. Performance also showed the Category 2 mean waits decreasing slightly from 1 hour to 59 minutes 20 seconds, and the Category 3 90th percentile has also shown an improvement of the target of less than or equal to 120 minutes reporting 7 hours 6 minutes. The biggest improvement being for Cat 4 90th percentile recording 13 hours 34 minutes after reporting almost 24 hours last month. Improvement work continues with the acute Trust and NWS, this issue of overcrowding in the ED department is causing delays in ambulance handovers however the estates changes, direct streaming initiatives are assisting with clearance times. The work with Patient Transport Service (PTS) and reducing aborted journeys continues. Southport are currently an outlier for the purchasing of alternative transport to support discharge.

NWS have also developed their North West Divert and Deflection policy to escalate and avoid delays to ensure swift resolution of critical delays.

The stroke indicator is currently 1 month in arrears. Southport & Ormskirk reported 65.6% of patients who had a stroke spending at least 90% of their time on a stroke unit in July, a decline of 3.6% from previous month. This is below the 80% target. Long length of stays in ED and site overall occupancy is hindering improvement in stroke. The Stroke Nursing Team are significantly challenged due to the absence at present, operating a significantly reduced service; due to training required, backfill cannot be easily identified. The Stroke Improvement Group continues to focus on quality improvement in other areas. There are two key areas of focus are ensuring ring fenced beds are available at all times on the Stroke ward and the Trust need to sign off the direct admission pathway from ED to Stroke ward.

TIA was reported at 15.8% against the 60% target with 6 out of a total of 38 patients treated within 24 hours, a decline in performance from last month when 34.9% was reported. The Trust presented a paper at Medicine and Emergency Care Performance Group in September, detailing the current pathway and Gap Analysis. The next steps include a review of the New Model of Care and opportunities to support TIA pathway, review of the skill mix including 7 day working and review of clinic room within space utilisation project. Validation of patients has identified referrals relating to seizures, migraine, postural hypertension and stroke. There are also patient DNA's and cancellations included. There have been no harms identified.

In terms of CCG actions, the extensive work of the Merseyside Stroke Board continues with recent presentations to local Oversight and Scrutiny Committees (OSCs) which to date have been received very positively. The programme has successfully passed NHSE stage 2 assurance, subject to a number of caveats and an expectation that the proposal will proceed to public engagement. The Early support Discharge (ESD) service is now staffed and the CCG has worked with West Lancashire CCG (WLCCG) to ensure provision in both with funding agreed recurrently.

The CCG and Trust reported 1 new case of MRSA in August following a first case in July, 2 year to date against a zero-tolerance plan so have failed for 2021/22. The case reported for the CCG was a hospital onset case at Southport & Ormskirk and is due to be reviewed at the Performance and Quality investigation review panel (PQIRP) to monitor if any lapses in care occurred and any lessons

can be learnt. The patient in August has a history of MRSA colonisation, however the admission screen was negative although not complete. The patient was successfully treated for their admission symptoms and their MRSA. All incidents are reviewed as part of the Infection Prevention Control (IPC) meeting on a monthly basis, which the CCG attend.

For *c. difficile*, the CCG reported 3 new cases in August (25 year to date) against a year-to-date plan of 11. The CCG now have the new objectives/plans for *C. Difficile* for 2021/22, year-end target is 30 cases. Southport & Ormskirk Trust is also failing with 3 new cases (25 year to date), against a year-to-date target of 18. To support this, twice weekly bronze meetings continue to be held with CCG attendance and a detailed specific action plan monitored, Post Infection Review (PIR) completed for each case and lessons learnt shared across the Trust. Joint working across the Trust and CCGs regarding the prescribing of antibiotics including the Trust attending a PLT event with plans to replicate this across in West Lancashire. It has been acknowledged nationally that this has in part due to the increased prescribing of antibiotics due to COVID and rates have risen in all acute Trusts.

NHS Improvement and NHS England (NHSE/I) originally set CCG targets for reductions in *E. coli* in 2018/19, the CCG have the new objectives/plans for *E. coli* for 2021/22 along with new Trust objectives to monitor. In August there were 12 cases (44 year to date) against a year-to-date target of 65 and achieving in month, year-end target 152 cases. Southport & Ormskirk reported 3 new cases in August (23 year to date) against their year to date plan of 29 and are also achieving.

Southport & Ormskirk Trust Friends and Family A&E test response rate is above the England average of 9.7% in July 2021 reporting 20.6% (latest data reported). The percentage of patients who would recommend the service decreased to 83% and remains above the England average of 76%. The percentage who would not recommend decreased to 12%, below the England average of 16%. The CCG Quality Team continue to monitor trends and request assurances from providers when exceptions are noted. The Trust are due to present their bi-annual Patient Experience update to EPEG in November 2021 and a wider EPEG Provider focussed Patient Experience workshop is planned for January 2022.

Southport & Ormskirk's Hospital Standardised Mortality Ratio (HSMR) was reported at 74.0 by the Trust in August, 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 finance and activity, 2020/21 saw 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 national response whereby the public guidance was to 'stay at home'. Recent trends from March-21 have shown considerable increases in total unplanned care activity, which incorporates A&E attendances and non-elective admissions. Year to date activity at month 5 of 2021/22 represents an increase of 38% when comparing to the equivalent period in the previous year. Focussing specifically on A&E type 1 attendances, activity during August-21 was also 3% above that in August-19 with 2019/20 activity being the applied baseline to operational planning levels for 2021/22. CCGs were expected to plan for 100% of 2019/20 activity levels being achieved during 2021/22.

Figure 7 – Unplanned Care All Providers– Contract Performance Compared to 2019/20

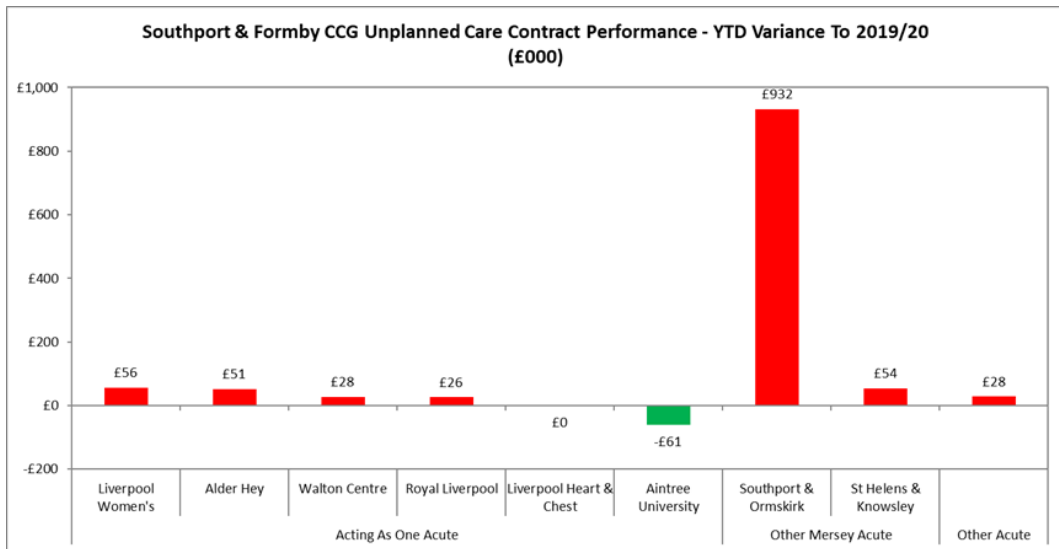


Figure 8 - Unplanned Care Activity Trends

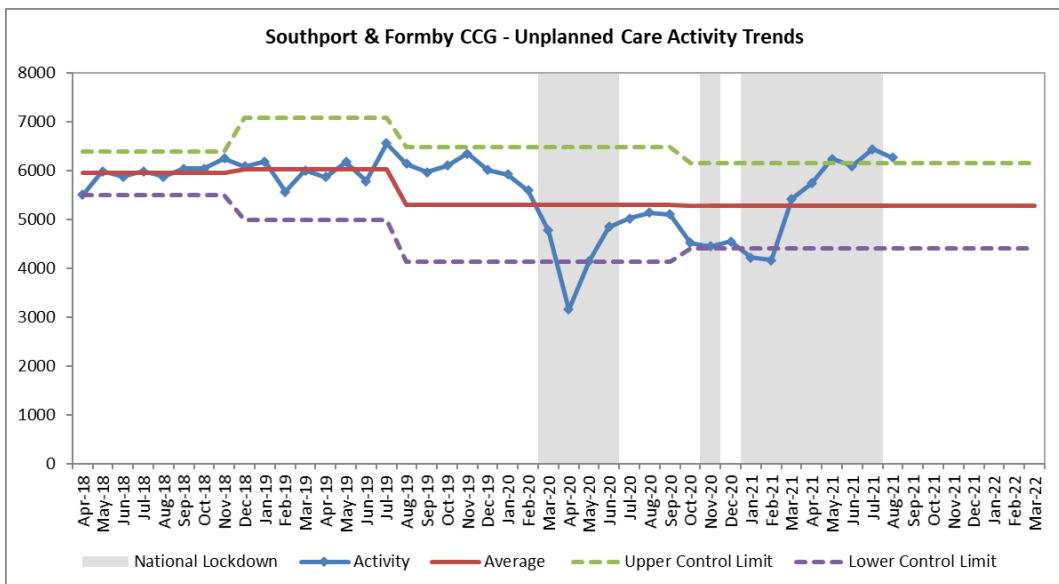


Figure 9 - A&E Type 1 against Plan (Previous Year)

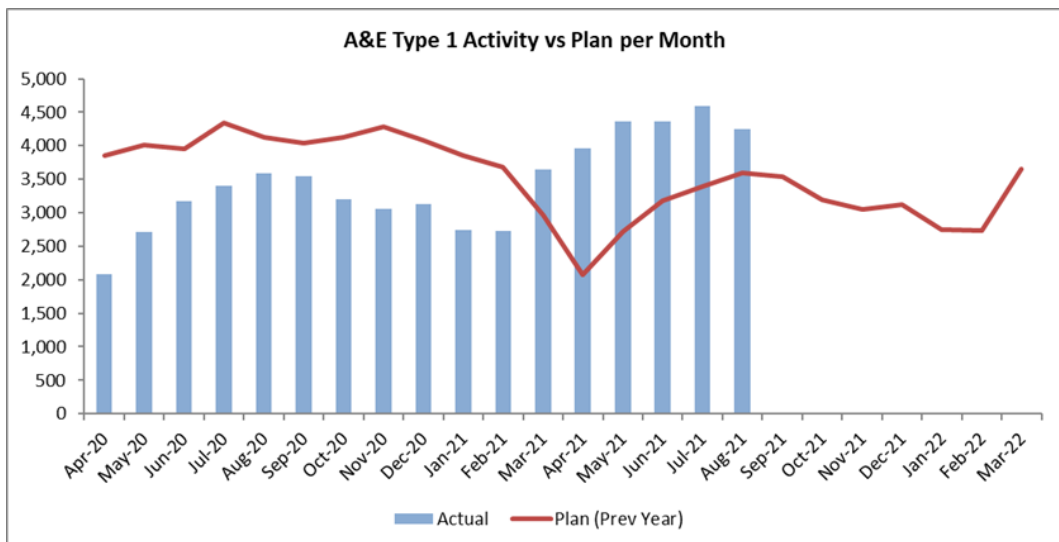
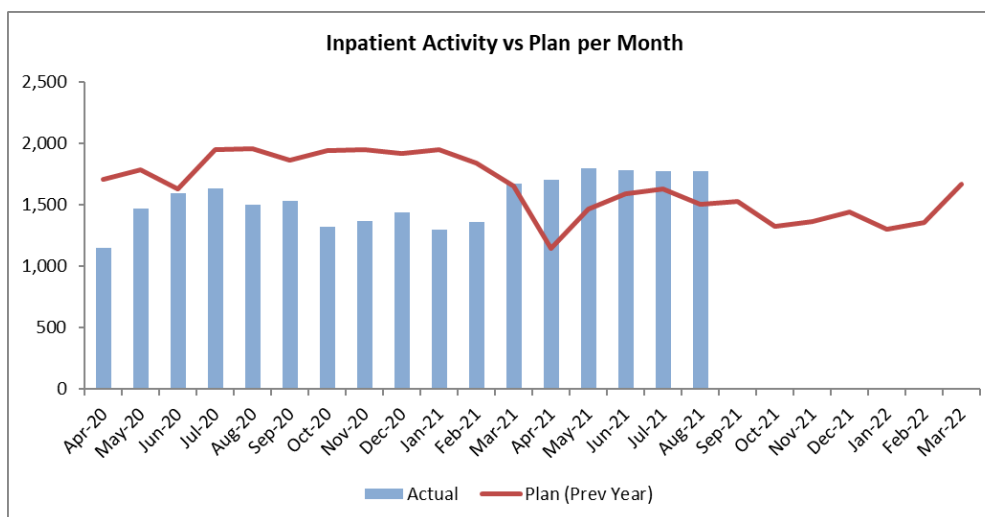


Figure 10 – Non-elective Inpatient Variance against Plan



Mental Health

Patients on CPA discharged from inpatient care followed up within 7 days reported below the 95% target in August for Southport & Formby CCG recording 80%. Out of the 10 patients 2 were not followed up within 7 days. The Trust stated 1 service user was discharged to a non-NHS run hospital, the process was unclear within the team that a follow up was still required.

The Eating Disorder service has reported 31.43% of patients commencing treatment within 18 weeks of referral in August, compared to a 95% target. Only 11 patients out of 35 commenced treatment within 18 weeks. This shows a small improvement from last month when 30.3% was reported. The CCG approved of £49k (£112k in total) of recurring investment within the Eating Disorder Service as part of its overall Mental Health LTP 2021 /22 investment plan. This investment is part of a 3-year phased approach (2021/22 – 2023/24) to developing a NICE compliant Eating Disorder Service. The service is planning to recruit for a dietician and psychology posts however recruitment for a First episode Rapid Early Intervention (FREED) clinical Psychologist has been successful as a part of the Trust’s Community Mental Health Transformation Programme.

For Improving Access to Psychological Therapies (IAPT), Mental Health Matters reported 0.63% in August and has therefore failed to achieve the 1.59% target. Actions to address the underperformance include:

- 1 Trainee Psychological Wellbeing Practitioner (PWP) commenced in September and 3 trainee PWP’s commenced in October 2021.
- 4 x High Intensity Therapists (HIT) recruited with 3 having commenced duties in June and 1 post due to commence in October 2021.
- Participation in Cheshire & Merseyside system level work to increase numbers of PWP and HIT trainees supported by a proposed Cheshire & Merseyside supervision hub and marketing of IAPT at local and planned regional level.

The percentage of people who moved to recovery was 40% in August, which is now below the 50% target a decline from 55.9% reported last. The provider is planning to allocate the recently recruited HIT resource to address a ringfenced cohort of internal waiters.

Southport & Formby CCG is recording a dementia diagnosis rate in August of 66.2%, which is under the national dementia diagnosis ambition of 66.7%, a small improvement to last month’s performance of 65.6%. The CCG approved a scheme to go into 2021/22 Local Quality Contract with primary care across Sefton to improve performance going forward. Recovery is unlikely to take place until face-to-face assessments can resume. In line with Cheshire & Merseyside Health Care Partnership expectations the CCG as is working with Mersey Care Foundation Trust to ensure that £57k of non-recurring Spending Review monies can be deployed to reduce Memory Assessment waits.

In November 2020 the CCGs agreed £100k non-recurring funding initially targeting those people with identified with SEND to be prioritised for diagnostic assessment. These individuals with SEND have had their diagnostic assessment undertaken and the residual funding is targeting the wider waiting list. The CCGs have acknowledged that long term investment in the ASD service is required and in July 2021 both CCGs agreed to fund £100k investment into the service and this will increase assessment capacity. The Trust have trained 5 staff across the service to undertake DISCO and AD-I-R / ADOS diagnostic assessment training and clarified that 2 of these staff face Sefton. These individuals commenced assessment duties in October 2021 and will add 90 assessments in addition to the 50 already commissioned. The service is also intending to remodel and the expectation is that this will generate additional assessment capacity. In addition, the service is recruiting an assistant psychologist to enhance existing post diagnostic support.

The Trust is developing a waiting list initiative aimed at reducing ADHD wait times which were reported as being 63 weeks in August 2021. The waiting list cleanse has been completed and the list is now 300 people having previously been recorded as being 547 people. All people on the waiting list have been contacted and have opted to remain on the list. The Trust is recruiting a nurse prescriber internally who will undertake reviews allowing the medical staff to undertake 12-14 new assessments per week. In addition, the Trust plans to outsource 100 assessments commencing in October 2021 by using some of the monies originally identified for agency staff. The Trust has been requested to provide more detail of the sub-contract arrangement for assurance purposes and that it should be under the aegis of the NHS Standard Contract.

Adult Community Health Services (Mersey Care NHS Foundation Trust)

Focus within the Trust remains on COVID-19 recovery/resilience planning and understanding service specific issues e.g., staffing, resources, waiting times. Assurance will be sought in regard to changes instigated in response to COVID-19 and an understanding of services that are not operating at pre-COVID levels. A single Clinical Quality Performance Group (CQPG) across the Mersey Care footprint of commissioned services including South Sefton, Southport and Formby and Liverpool CCGs has been introduced. The joint Sefton and Liverpool Information Sub-Group is supporting the ongoing development and performance monitoring with the Trust. The Trust in collaboration with CCG leads will be reviewing service specifications throughout 2021/22 following the mobilisation of the contract to Mersey Care NHS Foundation Trust.

Month 5 assurance supplied by the Trust indicates that across a number of community services 14 patients are waiting over 18 weeks (19-24 weeks) and 18 patients are waiting 24 weeks plus. The CCG continues to monitor waiting times and has requested that the Trust provide exception narrative for those patients waiting above 18 weeks.

Children's Services

In its ongoing response to the impact of 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. As previously reported, the SALT service has experienced a sustained increase in referrals following lockdown and the reopening of schools. Whilst referrals have reduced over the summer holiday period, the backlog of assessments and increased acuity and urgency of cases has meant that performance has continued to be challenged (August 18 weeks is at 43%). The position is being closely managed by the service and all referrals continue to be clinically triaged at the point of receipt and prioritised according to need. From mid-September, the service will be fully staffed and it is anticipated that if referral levels begin to return to pre-covid levels, improvements will be seen in subsequent months.

Occupational Therapy (OT), dietetics, physiotherapy and continence continue to meet the 92% waiting time target in August.

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 regionally and nationally. Current modelling across Cheshire and Merseyside suggests that demand for mental health services could increase by 30% over the next two years, with the majority of this demand in crisis and urgent mental health support. Notably the 30% figure is twice the initial 15% estimate modelled at the outset of the pandemic.

Due to these ongoing issues, waiting times for assessment and treatment continue to be challenged locally and there was a further dip in performance in August as referrals continue to increase and the trust focuses on those children and young people who have been waiting the longest for assessment and treatment. To mitigate, two new staff commenced in post in August and further additional capacity is being provided where possible. Recruitment to utilise the 21/22 mental health investment is progressing with multiple interview panels taking place in September and October. A detailed trajectory will be provided when staff are appointed to demonstrate when capacity and waiting times are expected to improve.

Sefton has also been successful in its joint bid with Liverpool CCG to be a pilot site for the mental health 4 week wait initiative which will also positively impact waiting times.

In the meantime, the CAMHS waiting time position continues to be closely monitored by the CCGs and the Trust, and the local CAMHS partnership and third sector providers continue to offer additional support and capacity.

As with CAMHS, the impact of COVID has led to an increase in demand for the Eating Disorders Young People's Service (EDYS) and a number of new and existing patients continue to present to the service at physical and mental health risk, a position that is reflected nationally. Consequently, during COVID-19 the service has seen the highest number of paediatric admissions for young people with an eating disorder since the service commenced.

Referral rates for ASD/ADHD services continue to increase at a rate significantly higher than what is currently commissioned. This is impacting on capacity within the diagnostic pathway and leading to delays in completion of assessment pathways within agreed timescales. ADHD waiting times are increasing and have fallen below target for completed assessments within 30 weeks reporting 88% against the 90% target. Also due to the increasing number of referrals and the pressure on service capacity, the ASD 30 week to completion of assessments was not achieved in August and fell to 62%. The Trust has a number of mitigating actions in place to manage this and is undertaking a deep dive of the drivers for the increase which will be concluded by the end of October 2021. The CCGs will review the outcomes from the deep dive alongside the Trust's paper which details the current position, mitigations and options for consideration.

CQC Inspections

Previously halted due to the COVID-19 pandemic. Practices in Southport & Formby CCG GP practices are visited by the Care Quality Commission and details of any inspection results are published on their website. The inspections have resumed, but no new inspections happened in August.