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Report to the: Board of the Integrated Care Board

Item 10.1: BLMK Quality and Performance Report – Annexes

1.0 Executive Summary

1.1 This paper includes the annexes referred to within the main BLMK Quality and Performance Report

- Annex 1 – Month 3 – BLMK ICB Performance Dashboard [Pages 2-5](#)
- Annex 2 – BLMK Place Dashboard [Pages 6-11](#)
- Annex 3 – SPC Charts/Interpreting SPC Charts [Pages 12-17](#)

Annex 1 - Month 3 BLMK Performance Dashboard - This dashboard is restricted as it contains local unvalidated data and is subject to change. This information is not for onward sharing.

ICB Performance Dashboard													
Area	Performance Metric	Reporting Frequency	Measure	202504			Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month Against Previous 6 Points Average)	YTD	Regional Ranking (as at latest data)	National Ranking (as at latest data)	Latest Data
				202504	202505	202506							
Elective Recovery	RTT - Incomplete Pathway (Waiting List)	Monthly	Achievement	143,793	136,470	133,824		Low	↑	●	3 / 6	18 / 42	Jun-25
			Threshold	144,881	141,394	139,686							
			Regional Performance	157,137	155,580	154,823							
			National Performance	172,483	171,823	172,177							
	RTT - % Patients Waiting 18 Weeks or less	Monthly	Achievement	53.94%	57.26%	58.22%		High	↑	●	2 / 6	32 / 42	Jun-25
			Threshold	50.91%	51.02%	50.54%							
			Regional Performance	54.96%	56.65%	57.01%							
			National Performance	59.72%	60.93%	61.53%							
	RTT - Number of 78+ Week Waits	Monthly	Achievement	12	13	12		Low	↑	●	3 / 6	24 / 42	Jun-25
			Threshold	0	0	0							
			Regional Performance	26	35	38							
			National Performance	29	26	24							
	RTT - Number of 65+ Week Waits	Monthly	Achievement	108	145	174		Low	↑	●	4 / 6	26 / 42	Jun-25
			Threshold	0	0	0							
Regional Performance			276	373	356								
National Performance			214	268	244								
RTT - Number of 52+ Week Waits	Monthly	Achievement	4,263	4,120	3,953		Low	↑	●	1 / 6	22 / 42	Jun-25	
		Threshold	4,412	4,100	3,762								
		Regional Performance	5,999	6,185	6,068								
		National Performance	4,423	4,583	4,468								
Diagnostics Tests - 6 Week Waits (%)	Monthly	Achievement	32.29%	32.56%	31.52%		Low	↑	●	5 / 6	37 / 42	Jun-25	
		Threshold	15.00%	15.00%	15.00%								
		Regional Performance	28.13%	29.98%	29.21%								
		National Performance	21.25%	22.05%	21.33%								
Diagnostics Tests - 13 Week Waits (%)	Monthly	Achievement	10.98%	11.00%	11.49%		Low	↑		5 / 6	33 / 42	Jun-25	
		Threshold											
		Regional Performance	10.39%	11.84%	12.88%								
		National Performance	6.38%	6.90%	7.49%								
Patient-Initiated Outpatient Follow-Up (PIFU) Pathway	Monthly	Achievement	2.40%	2.40%	2.36%		High	↑		5 / 6	34 / 42	Jun-25	
		Threshold											
		Regional Performance	3.80%	3.80%	3.90%								
		National Performance	3.60%	3.60%	3.70%								
Cancer Care	Cancer - 28 Day Faster Diagnosis Standard	Monthly	Achievement	76.76%	73.71%	77.13%		High	↑	●	3 / 6	25 / 42	Jun-25
			Threshold	73.88%	74.73%	75.78%							
			Regional Performance	74.09%	70.93%	72.04%							
			National Performance	76.74%	74.80%	76.85%							
	Cancer - 31 Day Combined	Monthly	Achievement	88.82%	87.58%	86.65%		High	↓	●	4 / 6	36 / 42	Jun-25
			Threshold	90.22%	92.75%	92.15%							
			Regional Performance	89.27%	88.64%	89.16%							
			National Performance	91.30%	90.94%	91.73%							
	Cancer - 62 Day Combined	Monthly	Achievement	66.94%	61.19%	69.12%		High	↑	●	2 / 6	16 / 42	Jun-25
Threshold			65.96%	67.71%	69.65%								
Regional Performance			66.29%	62.19%	62.06%								
National Performance			69.85%	67.74%	67.05%								

Trend Arrows:

If performance is better than the average of the previous 6 data points



If performance is worse than the average of the previous 6 data points



If performance is the same as the average of the previous 6 data points



Flagging:

If performance is better than the threshold - Green

If performance is worse than the threshold - Red

Annex 1 - Month 3 BLMK Performance Dashboard - This dashboard is restricted as it contains local unvalidated data and is subject to change. This information is not for onward sharing.

Area	Performance Metric	Reporting Frequency	Measure	202504	202505	202506	202507	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month Against Previous 6 Points Average)	YTD	Regional Ranking (as at latest data)	National Ranking (as at latest data)	Latest Data
Urgent Emergency Care	A&E 4 Hour Waits	Monthly	Achievement	77.46%	77.49%	75.72%	75.88%		High	↑	●	3 / 6		Jul-25
			Threshold	78.00%	78.00%	78.00%	78.00%							
			Regional Performance	74.36%	74.74%	75.51%	76.22%							
			National Performance	74.77%	75.39%	75.55%	76.40%							
	% A&E 12 hour journey time	Monthly	Achievement	2.01%	2.56%	2.27%	2.19%		Low	↑				Jul-25
			Threshold	5.00%	5.00%	5.00%	5.00%							
			Regional Performance											
			National Performance											
	% ED Attendances that result in emergency admission	Monthly	Achievement	27.98%	27.50%	26.27%	27.49%		High	↓		4 / 6		Jul-25
			Threshold											
			Regional Performance	28.51%	28.76%	28.61%	28.73%							
			National Performance	27.98%	27.59%	27.53%	27.93%							
Primary Care	Number of appointments in General Practice	Monthly	Achievement	526,235	534,859	555,599			High	↓	●	5 / 6	27 / 42	Jun-25
			Threshold	486,218	493,322	468,996								
			Regional Performance	570,824	568,363	594,546								
			National Performance	695,170	693,326	726,202								
	% Same Day Appointments in General Practice	Monthly	Achievement	44.79%	44.74%	44.62%			High	↑		3 / 6	20 / 42	Jun-25
			Threshold											
			Regional Performance	43.72%	43.79%	43.75%								
			National Performance	44.19%	44.23%	44.17%								
	% of Appointments With Health Professional Other Than GP	Monthly	Achievement	55.76%	55.71%	55.50%			High	↑		5 / 6	15 / 42	Jun-25
			Threshold											
			Regional Performance	56.51%	56.09%	56.07%								
			National Performance	52.96%	52.59%	52.57%								
	Appointments in GP Practice - % Seen Within 2 Weeks	Monthly	Achievement	80.93%	81.70%	82.00%			High	↑		2 / 6	18 / 42	Jun-25
			Threshold											
			Regional Performance	79.03%	79.74%	80.01%								
			National Performance	80.85%	81.77%	81.92%								
	Pharmacy First Consultations	Monthly	Achievement	7,380	7,280	7,678			High	↑	●			Jun-25
			Threshold	7,213	7,273	7,334								
			Regional Performance											
			National Performance											

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Area	Performance Metric	Reporting Frequency	Measure					Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month Against Previous 6 Points Average)	YTD	Regional Ranking (as at latest data)	National Ranking (as at latest data)	Latest Data
				202504	202505	202506	202507							
Adult Mental Health	CPA 72-Hour Follow Ups	Monthly	Achievement	88.00%	91.00%	87.00%			High	↑	●	1 / 6	5 / 42	Jun-25
			Threshold	80.00%	80.00%	80.00%								
			Regional Performance	66.00%	71.64%	74.43%								
			National Performance	72.32%	72.99%	73.46%								
	Dementia Diagnosis Rate	Monthly	Achievement	69.19%	69.16%	69.31%			High	↓	●	1 / 6	9 / 42	Jun-25
			Threshold	66.70%	66.70%	66.70%								
			Regional Performance	64.01%	64.23%	64.38%								
			National Performance	65.52%	65.57%	65.80%								
	Early Intervention in Psychosis (EIP)	Monthly	Achievement	73.00%	75.00%	96.00%			High	↑	●	1 / 6	3 / 42	Jun-25
			Threshold	60.00%	60.00%	60.00%								
			Regional Performance	78.18%	75.92%	70.85%								
			National Performance	66.93%	70.64%	71.29%								
	Inappropriate Out Of Area Bed Days	Quarterly	Achievement			2,290			Low	↓		5 / 6	26 / 42	Jun-25
			Threshold											
			Regional Performance			2,070								
			National Performance			2,859								
	Inappropriate Out Of Area Placements	Monthly	Achievement	20	15	20			Low	↑	●	3 / 6	19 / 42	Jun-25
			Threshold	6	6	5								
			Regional Performance	24	22	22								
			National Performance	34	32	33								
SMI Healthchecks (Rolling 12 months)	Quarterly	Achievement			60.23%			High	↑				Jun-25	
		Numerator			4900									
		Denominator			8135									
		Threshold												
		National Performance			60.05%									
NHS Talking Therapies - number receiving a course of treatment	Monthly	Achievement	1,030	850	925			High	↑		5 / 6	28 / 42	Jun-25	
		Threshold												
		Regional Performance	1,140	1,113	1,131									
		National Performance	1,366	1,322	1,356									
NHS Talking Therapies - Reliable Recovery	Monthly	Achievement	49.49%	46.88%	47.75%			High	↓	●	4 / 6	18 / 42	Jun-25	
		Threshold	48.68%	48.79%	48.90%									
		Regional Performance	50.04%	48.87%	48.61%									
		National Performance	48.39%	47.99%	47.06%									
NHS Talking Therapies - Reliable Improvement	Monthly	Achievement	69.90%	68.24%	69.73%			High	↓	●	1 / 6	11 / 42	Jun-25	
		Threshold	68.00%	68.00%	68.00%									
		Regional Performance	67.98%	67.44%	66.99%									
		National Performance	68.71%	68.29%	67.80%									

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Area	Performance Metric	Reporting Frequency	Measure	202504	202505	202506	202507	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month Against Previous 6 Points Average)	YTD	Regional Ranking (as at latest data)	National Ranking (as at latest data)	Latest Data	
Learning Disability & Autism	Learning Disability Healthchecks (Cumulative)	Monthly	Achievement	2.84%	7.89%	12.58%	18.90%		High	↓	●			Jul-25	
			Threshold	6.25%	12.50%	18.75%	25.00%								
			Regional Performance												
			National Performance												
Children and Young People (CYP) & Maternity	Number of CYP accessing mental health services (Rolling 12 months)	Monthly	Achievement	13,545	13,415	13,580			High	↑	●	5 / 6	28 / 42	Jun-25	
			Threshold	13,295	13,458	13,621									
			Regional Performance	15,501	15,499	15,558									
			National Performance	20,056	20,088	20,192									
	CYP Eating Disorders - Routine	Monthly	Monthly	Achievement	0.00%	0.00%	26.00%			High	↓	●	6 / 6	41 / 42	Jun-25
				Threshold	95.00%	95.00%	95.00%								
				Regional Performance	62.17%	60.83%	71.17%								
				National Performance	76.90%	74.92%	72.23%								
	CYP Eating Disorders - Urgent	Monthly	Monthly	Achievement	0.00%	0.00%	0.00%			High	↓	●	0 / 6	0 / 42	Jun-25
				Threshold	95.00%	95.00%	95.00%								
				Regional Performance	39.17%	33.67%	28.67%								
				National Performance	68.46%	68.85%	63.74%								
Perinatal Mental Health Access (YTD)	Monthly	Monthly	Achievement	1,370	1,375	1,400			High	↓	●	4 / 6	20 / 42	Jun-25	
			Threshold	1,440	1,440	1,440									
			Regional Performance	1,468	1,470	1,477									
			National Performance	1,543	1,543	1,559									
Community Services	Urgent Community Response - 2 hour Standard	Monthly	Achievement	88.11%	86.40%				High	↑	●			May-25	
			Threshold	70.00%	70.00%										
			Regional Performance												
			National Performance												
	Urgent Community Response - Referrals	Monthly	Monthly	Achievement	1455	1251				High	↓	●			May-25
				Threshold	1760	1834									
				Regional Performance											
				National Performance											
	Virtual Wards Occupancy	Monthly	Monthly	Achievement	81.60%	60.90%	62.10%	71.50%		High	↑	●	5 / 6	25 / 42	Jul-25
				Threshold	80.00%	80.00%	80.00%	80.00%							
				Regional Performance	83.91%	85.70%	88.30%	82.79%							
				National Performance	73.40%	75.00%	77.60%	71.60%							
Virtual Wards Capacity	Monthly	Monthly	Achievement	315	235	235	235		High	↓	●	2 / 6	21 / 42	Jul-25	
			Threshold	235	235	235	235								
			Regional Performance	235	219	222	222								
			National Performance	303	297	299	299								
Virtual Wards Utilisation	Monthly	Monthly	Achievement	257	143	146	168		High	↓		2 / 6	25 / 42	Jul-25	
			Threshold												
			Regional Performance	197	188	196	184								
			National Performance	222	222	232	214								
Quality & Safety	Infection Control - C-Difficile	Monthly	Achievement	17	13	17			Low	↑		1 / 6	6 / 42	Jun-25	
			Threshold												
			Regional Performance	28	26	30									
			National Performance	35	33	34									
	Infection Control - MRSA	Monthly	Monthly	Achievement	1	2	1			Low	↑	●	2 / 6	6 / 42	Jun-25
				Threshold	0	0	0								
				Regional Performance	1	2	2								
				National Performance	2	2	2								
	Infection Control - E Coli	Monthly	Monthly	Achievement	37	47	34			Low	↑		1 / 6	3 / 42	Jun-25
Threshold															
Regional Performance				59	66	65									
National Performance				88	91	90									

Annex 2 – Month 3 - BLMK Place Dashboard - This dashboard is restricted as it contains local unvalidated data and is subject to change. This information is not for onward sharing.

Place Level Performance Dashboard															
Area	Performance Metric	Reporting Frequency	Place	Measure	202504	202505	202506	202507	202508	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month/Week Against Previous 6 Points Average)	YTD	YTD RAG	Latest Data
Elective Recovery	RTT - Incomplete Pathway (Waiting List)	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	100,415	92,036	88,282				Low	↑	●	Green	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Threshold	101,044	97,161	95,725				Low	↓	●	Red	Jun-25
Elective Recovery	RTT - % Patients Waiting 18 Weeks or less	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	31,769	32,108	33,513				High	↑	●	Green	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Threshold	31,664	32,320	32,455				High	↑	●	Green	Jun-25
Elective Recovery	Number of 52+ Week Waits	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	53.29%	57.92%	59.04%				Low	↑	●	Red	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Threshold	49.79%	49.90%	48.70%				Low	↑	●	Green	Jun-25
Elective Recovery	Number of 65+ Week Waits	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	46.84%	49.11%	50.74%				Low	↑	●	Red	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Threshold	47.90%	48.10%	49.40%				Low	↑	●	Green	Jun-25
Elective Recovery	Number of 78+ Week Waits	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	2,774	2,492	2,195				Low	↑	●	Red	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Threshold	2,114	1,792	1,470				Low	↑	●	Green	Jun-25
Elective Recovery	RTT - % Patients Waiting 18 Weeks or less	Weekly	Bedford Borough	Achievement	1,554	1,624	1,678				Low	↑	●	Red	Jun-25
		Weekly	Milton Keynes - Provider Trust Wide	Threshold	1,773	1,826	1,850				Low	↑	●	Green	Jun-25
Elective Recovery	Number of 65+ Week Waits	Weekly	Bedford Borough	Achievement	31	16	10				Low	↑	●	Red	Jun-25
		Weekly	Milton Keynes - Provider Trust Wide	Threshold	0	0	0				Low	↓	●	Red	Jun-25
Elective Recovery	Number of 78+ Week Waits	Weekly	Bedford Borough	Achievement	68	126	164				Low	↑	●	Red	Jun-25
		Weekly	Milton Keynes - Provider Trust Wide	Threshold	0	0	0				Low	↑	●	Green	Jun-25
Elective Recovery	RTT - % Patients Waiting 18 Weeks or less	Weekly	Bedfordshire and Luton - Provider Trust Wide	Achievement	7	10	12				Low	↑	●	Red	Jun-25
		Weekly	Milton Keynes - Provider Trust Wide	Threshold	0	0	0				Low	↑	●	Green	Jun-25
Elective Recovery	RTT - % Patients Waiting 18 Weeks or less	Weekly	Bedford Borough	Achievement	55.54%	59.20%	58.80%	58.66%	58.19%		High	↓			10/08/2025
		Weekly	Central Bedfordshire	Achievement	55.12%	59.05%	58.90%	59.03%	58.81%		High	↑			10/08/2025
		Weekly	Luton	Achievement	52.62%	58.81%	59.74%	60.57%	60.32%		High	↑			10/08/2025
		Weekly	Bedfordshire Care Alliance	Achievement	54.57%	59.01%	59.15%	59.43%	59.13%		High	↑			10/08/2025
		Weekly	Milton Keynes Care Alliance	Achievement	49.03%	49.34%	51.29%	50.85%	51.34%		High	↓			10/08/2025
Elective Recovery	Number of 52+ Week Waits	Weekly	Bedford Borough	Achievement	1,259	710	599	573	610		Low	↓			10/08/2025
		Weekly	Central Bedfordshire	Achievement	1,126	901	886	908	940		Low	↓			10/08/2025
		Weekly	Luton	Achievement	832	803	842	792	763		Low	↑			10/08/2025
		Weekly	Bedfordshire Care Alliance	Achievement	3,217	2,414	2,327	2,273	2,313		Low	↓			10/08/2025
		Weekly	Milton Keynes Care Alliance	Achievement	921	1,006	1,116	1,427	1,665		Low	↓			10/08/2025
Elective Recovery	Number of 65+ Week Waits	Weekly	Bedford Borough	Achievement	8	13	4	6	8		Low	↓			10/08/2025
		Weekly	Central Bedfordshire	Achievement	16	29	15	27	41		Low	↓			10/08/2025
		Weekly	Luton	Achievement	9	18	0	4	11		Low	↓			10/08/2025
		Weekly	Bedfordshire Care Alliance	Achievement	33	60	19	37	60		Low	↓			10/08/2025
		Weekly	Milton Keynes Care Alliance	Achievement	57	91	93	100	126		Low	↓			10/08/2025
Elective Recovery	Number of 78+ Week Waits	Weekly	Bedford Borough	Achievement	0	0	0	0	0		Low	↔			10/08/2025
		Weekly	Central Bedfordshire	Achievement	0	0	1	2	2		Low	↔			10/08/2025
		Weekly	Luton	Achievement	2	1	0	0	0		Low	↔			10/08/2025
		Weekly	Bedfordshire Care Alliance	Achievement	2	1	1	2	2		Low	↔			10/08/2025
		Weekly	Milton Keynes Care Alliance	Achievement	5	7	6	12	14		Low	↓			10/08/2025

Bedfordshire Care Alliance Providers: Bedfordshire Hospital NHS Foundation Trust / East London NHS Foundation Trust - Mental Health and Community Indicators / East of England Ambulance Service - Ambulance Indicators / Cambridgeshire Community Services - Community

Milton Keynes Care Alliance Providers: Milton Keynes University Hospital NHS Foundation Trust / Central North West London NHS Foundation Trust - Mental Health and Community / South Central and West Ambulance Service - Ambulance Indicators.

Trend Arrow Key:

- If performance is **better** than the average of the previous 6 data points ↑
- If performance is **worse** than the average of the previous 6 data points ↓
- If performance is **the same** as the average of the previous 6 data points ↔

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Area	Performance Metric	Reporting Frequency	Place	Measure	202504	202505	202506	202507	202508	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month/Week Against Previous 6 Points Average)	YTD	YTD RAG	Latest Data
Elective Recovery	Diagnostics Tests - 6 Week Waits (%)	Weekly	Bedford Borough	Achievement Threshold	28.30%	31.70%	35.28%	35.97%	39.00%		Low	↓	●	Red	10/08/2025
		Weekly	Central Bedfordshire	Achievement Threshold	15.00%	15.00%	15.00%	15.00%	15.00%		Low	↑	●	Red	10/08/2025
		Weekly	Luton	Achievement Threshold	36.12%	34.25%	31.96%	32.23%	31.72%		Low	↑	●	Red	10/08/2025
		Weekly	Bedfordshire Care Alliance	Achievement Threshold	15.00%	15.00%	15.00%	15.00%	15.00%		Low	↑	●	Red	10/08/2025
		Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	37.53%	34.97%	35.34%	32.52%	29.93%		Low	↑	●	Red	10/08/2025
		Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	28.28%	29.70%	30.54%	15.00%	15.00%		Low	↑	●	Red	Jun-25
		Weekly	Milton Keynes Care Alliance	Achievement Threshold	15.00%	15.00%	15.00%	15.00%	15.00%		Low	↓	●	Red	10/08/2025
Elective Recovery	Diagnostics Tests - 13 Week Waits (%)	Weekly	Bedford Borough	Achievement Threshold	35.18%	33.91%	33.57%	33.14%	32.80%		Low	↑	●	Red	10/08/2025
		Weekly	Central Bedfordshire	Achievement Threshold	33.03%	32.57%	26.15%	15.00%	15.00%		Low	↑	●	Red	Jun-25
		Weekly	Luton	Achievement Threshold	11.32%	10.94%	10.28%	9.57%	11.54%		Low	↓			10/08/2025
		Weekly	Bedfordshire Care Alliance	Achievement Threshold	11.58%	11.35%	11.43%	9.50%	10.13%		Low	↓			10/08/2025
		Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	16.71%	15.15%	15.71%	15.62%	12.65%		Low	↑			10/08/2025
		Weekly	Milton Keynes Care Alliance	Achievement Threshold	13.15%	12.57%	12.26%	11.08%	11.13%		Low	↓			10/08/2025
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	2.64%	3.10%	4.96%				Low	↑			Jun-25
Elective Recovery	Patient-Initiated Outpatient Follow-Up (PIFU) Pathway	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	13.68%	14.25%	14.06%	12.27%	11.79%		Low	↑			10/08/2025
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	17.34%	17.87%	14.86%				Low	↑			Jun-25
Cancer Care	Cancer - 28 Day Faster Diagnosis Standard	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	2.70%	2.50%	2.50%				High	↑	●	Red	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	2.17%	2.45%	2.73%				High	↑	●	Red	Jun-25
Cancer Care	Cancer - 31 Day Combined	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	2.10%	2.40%	2.40%				High	↑	●	Red	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	2.50%	2.60%	2.70%				High	↑	●	Red	Jun-25
Cancer Care	Cancer - 62 Day Combined	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	77.34%	75.65%	77.87%				High	↑	●	Green	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	76.37%	74.57%	74.54%				High	↑	●	Red	Jun-25
Cancer Care	Cancer - 63+ day backlog	Weekly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	75.84%	76.25%	76.64%				High	↑	●	Green	Jun-25
		Weekly	Milton Keynes - Provider Trust Wide	Achievement Threshold	94.92%	96.81%	95.64%				High	↓	●	Red	Jun-25
Cancer Care	Cancer - 63+ day backlog	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	92.21%	92.99%	91.93%				High	↓	●	Red	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	96.22%	96.12%	96.09%				High	↑	●	Green	Jun-25
Cancer Care	Cancer - 63+ day backlog	Weekly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	67.95%	65.76%	72.29%				High	↑	●	Green	Jun-25
		Weekly	Milton Keynes - Provider Trust Wide	Achievement Threshold	66.38%	67.16%	68.90%				High	↑	●	Red	Jun-25
Cancer Care	Cancer - 63+ day backlog	Weekly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	65.80%	61.64%	66.45%				High	↑	●	Red	Jun-25
		Weekly	Milton Keynes - Provider Trust Wide	Achievement Threshold	69.07%	69.71%	70.59%				High	↑	●	Red	Jun-25
Cancer Care	Cancer - 63+ day backlog	Weekly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	275	228	212	219			Low	↓			10/08/2025
		Weekly	Milton Keynes - Provider Trust Wide	Achievement Threshold	123	120	113	110			Low	↑			10/08/2025

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Area	Performance Metric	Reporting Frequency	Place	Measure	202504	202505	202506	202507	202508	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month/Week Against Previous 6 Points Average)	YTD	YTD RAG	Latest Data
Urgent Emergency Care	Ambulance - Cat 1 Mean Response Times (7 day average)	Weekly	Bedfordshire Care Alliance	Achievement Threshold	00:07:44	00:07:57	00:08:54	00:07:11			Low	↑	●	Red	10/08/2025
		Weekly	Milton Keynes Care Alliance	Achievement Threshold	00:07:37	00:06:27	00:08:38	00:06:44			Low	↑	●	Green	10/08/2025
Urgent Emergency Care	Ambulance - Cat 2 Mean Response Times (7 day average)	Weekly	Bedfordshire Care Alliance	Achievement Threshold	00:28:06	00:31:07	00:34:23	00:30:01			Low	↑	●	Red	10/08/2025
		Weekly	Milton Keynes Care Alliance	Achievement Threshold	00:21:10	00:22:51	00:49:11	00:30:32			Low	↓	●	Red	10/08/2025
Urgent Emergency Care	Ambulance - Average Handover Times	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	00:19:11	00:18:54					Low	↑	●	Green	May-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	00:17:44	00:19:06					Low	↓	●	Green	May-25
Urgent Emergency Care	A&E 4 Hours Waits	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	73.45%	75.98%	73.25%	73.07%			High	↑	●	Red	Jul-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	80.28%	76.02%	76.24%	77.25%			High	↑	●	Green	Jul-25
Urgent Emergency Care	% A&E 12 hour journey time	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	1.28%	1.32%	0.95%	1.39%			Low	↑	●	Green	Jul-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	6.79%	5.92%	5.65%	5.46%			Low	↑	●	Green	Jul-25
Urgent Emergency Care	System Flow - % of people with no criteria to reside who are discharged	Weekly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	70.44%	58.30%	62.13%	70.28%			High	↑			27/07/2025
		Weekly	Milton Keynes - Provider Trust Wide	Achievement Threshold	44.45%	41.80%	42.96%	41.26%			High	↓			27/07/2025
Urgent Emergency Care	System Flow - Bed Occupancy (Total Overnight G&A Beds)	Weekly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	94.99%	95.18%	94.10%	91.96%			Low	↑	●	Red	27/07/2025
		Weekly	Milton Keynes - Provider Trust Wide	Achievement Threshold	87.53%	87.05%	85.92%	86.71%			Low	↓	●	Green	27/07/2025
Primary Care	NHS 111 Proportion of Calls Abandoned	Monthly	Bedfordshire Care Alliance	Achievement Numerator Denominator Threshold	2.97% 692 23,301 3.00%	4.08% 951 23,282 3.00%	3.83% 809 21,141 3.00%				Low	↓	●	Red	Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Numerator Denominator Threshold	0.89% 71 7,947 3.00%	0.74% 57 7,731 3.00%	0.78% 58 7,413 3.00%				Low	↓	●	Green	Jun-25
Primary Care	NHS 111 Average Call Answering Time	Monthly	Bedfordshire Care Alliance	Achievement Numerator Denominator Threshold	47 16 1,452 70.00%	71 17 1,413 70.00%	60 7 1,206 70.00%				Low	↓	●	Red	Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Numerator Denominator Threshold	14 16 1,452 70.00%	11 17 1,413 70.00%	10 7 1,206 70.00%				Low	↓	●	Green	Jun-25
Primary Care	NHS 111 - % of calls recommended to attend ED given a booked ED time slot	Monthly	Bedfordshire Care Alliance	Achievement Numerator Denominator Threshold	1.10% 16 1,452 70.00%	1.20% 17 1,413 70.00%	0.58% 7 1,206 70.00%				High	↑	●	Red	Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Numerator Denominator Threshold	6.43% 55 856 70.00%	11.14% 97 871 70.00%	8.07% 62 768 70.00%				High	↑	●	Red	Jun-25

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Area	Performance Metric	Reporting Frequency	Place	Measure	202504	202505	202506	202507	202508	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month/Week Against Previous 6 Points Average)	YTD	YTD RAG	Latest Data
Primary Care	Appointments in General Practice - Number of Appointments	Monthly	Bedford Borough	Achievement Threshold	119,923	121,302	126,060				High	⬆️			Jun-25
		Monthly	Central Bedfordshire	Achievement Threshold	147,448	150,755	158,193				High	⬇️			Jun-25
		Monthly	Luton	Achievement Threshold	117,135	118,493	122,999				High	⬇️			Jun-25
		Monthly	Bedfordshire Care Alliance	Achievement Threshold	384,506	390,550	407,252				High	⬇️			Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Threshold	141,729	144,309	148,347				High	⬇️			Jun-25
Primary Care	% Same Day Appointments in General Practice	Monthly	Bedford Borough	Achievement Threshold	52.78%	52.00%	51.28%				High	⬆️			Jun-25
		Monthly	Central Bedfordshire	Achievement Threshold	40.45%	41.15%	41.07%				High	⬆️			Jun-25
		Monthly	Luton	Achievement Threshold	46.88%	46.70%	46.18%				High	⬆️			Jun-25
		Monthly	Bedfordshire Care Alliance	Achievement Threshold	46.26%	46.20%	45.78%				High	⬆️			Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Threshold	40.80%	40.79%	41.43%				High	⬇️			Jun-25
Primary Care	% Appointments with health professional other than GP	Monthly	Bedford Borough	Achievement Threshold	50.83%	51.48%	51.14%				High	⬆️			Jun-25
		Monthly	Central Bedfordshire	Achievement Threshold	60.03%	59.60%	59.42%				High	⬆️			Jun-25
		Monthly	Luton	Achievement Threshold	54.75%	54.92%	54.52%				High	⬆️			Jun-25
		Monthly	Bedfordshire Care Alliance	Achievement Threshold	55.55%	55.66%	55.38%				High	⬆️			Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Threshold	56.33%	55.84%	55.82%				High	⬆️			Jun-25
Primary Care	% of GP Appointments seen within 2 weeks	Monthly	Bedford Borough	Achievement Threshold	89.02%	89.83%	90.47%				High	⬆️			Jun-25
		Monthly	Central Bedfordshire	Achievement Threshold	78.14%	79.94%	79.80%				High	⬆️			Jun-25
		Monthly	Luton	Achievement Threshold	85.20%	85.77%	85.80%				High	⬆️			Jun-25
		Monthly	Bedfordshire Care Alliance	Achievement Threshold	83.68%	84.78%	84.92%				High	⬆️			Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Threshold	73.45%	73.35%	74.00%				High	⬇️			Jun-25
Adult Mental Health	SMI Healthchecks	Quarterly	Bedford Borough	Achievement Numerator Denominator Threshold			59.08%	1,155	1,955		High	⬆️			Jun-25
		Quarterly	Central Bedfordshire	Achievement Numerator Denominator Threshold			58.24%	1,095	1,880		High	⬆️			Jun-25
		Quarterly	Luton	Achievement Numerator Denominator Threshold			61.20%	1,325	2,165		High	⬆️			Jun-25
		Quarterly	Bedfordshire Care Alliance	Achievement Numerator Denominator Threshold			59.58%	3,575	6,000		High	⬆️			Jun-25
		Quarterly	Milton Keynes Care Alliance	Achievement Numerator Denominator Threshold			60.66%	1,295	2,135		High	⬆️			Jun-25

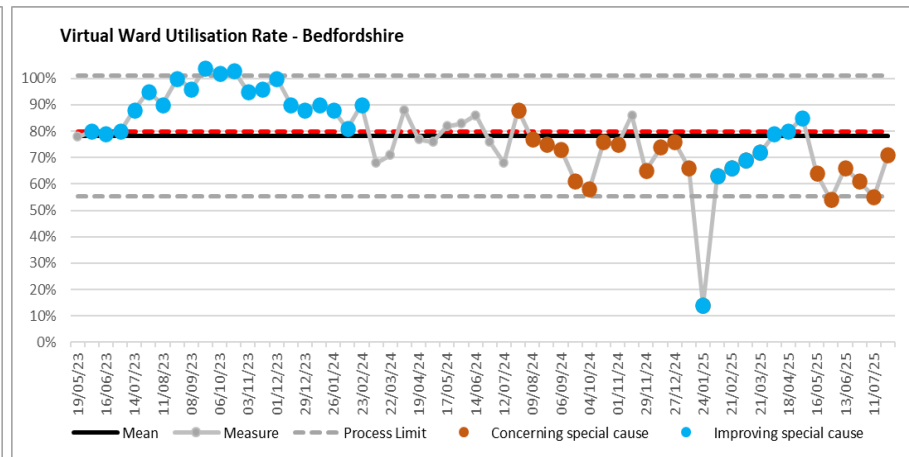
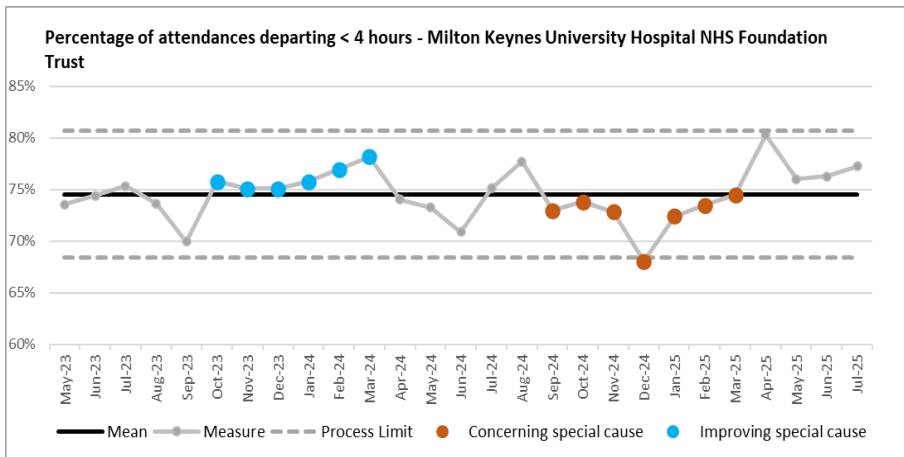
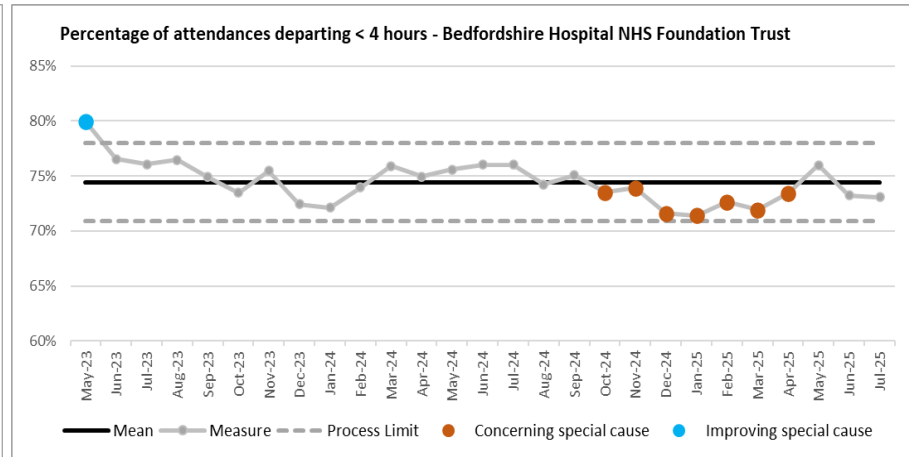
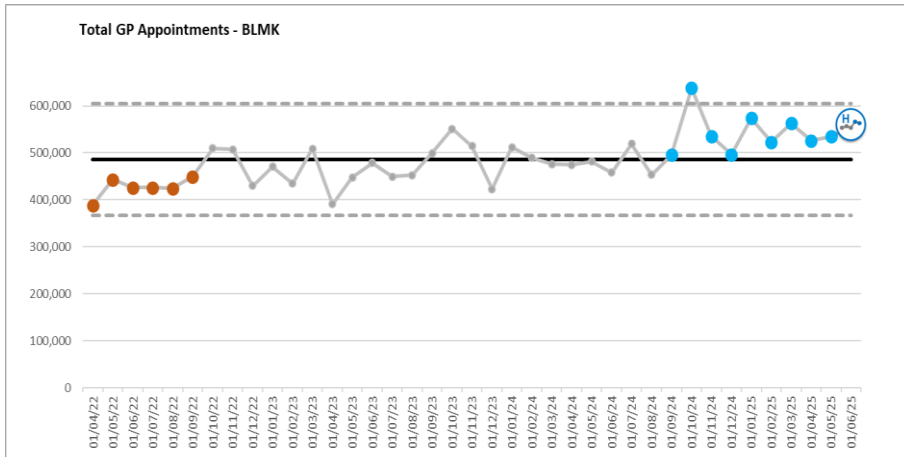
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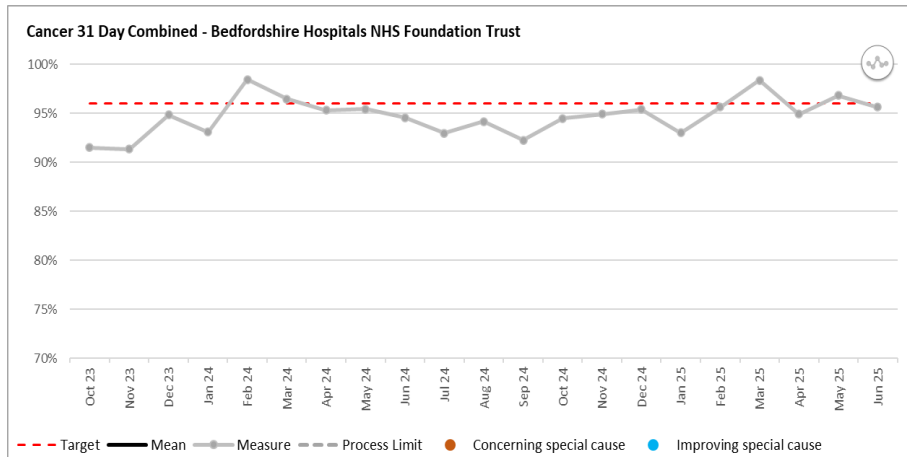
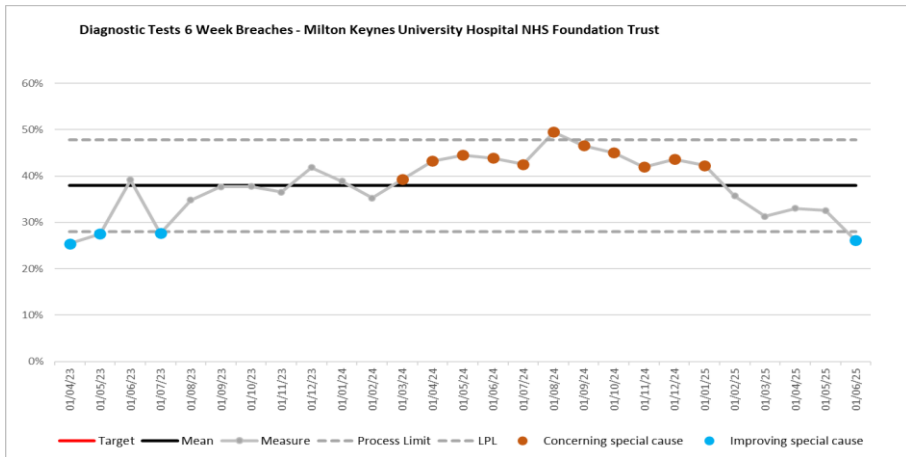
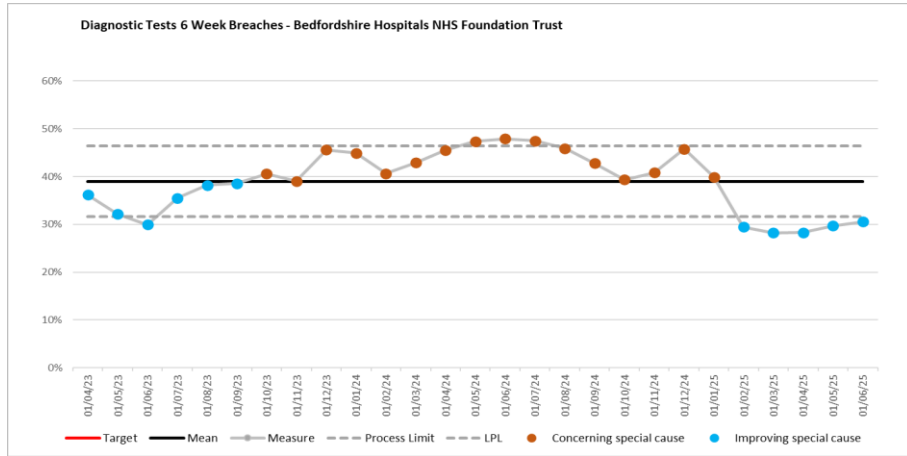
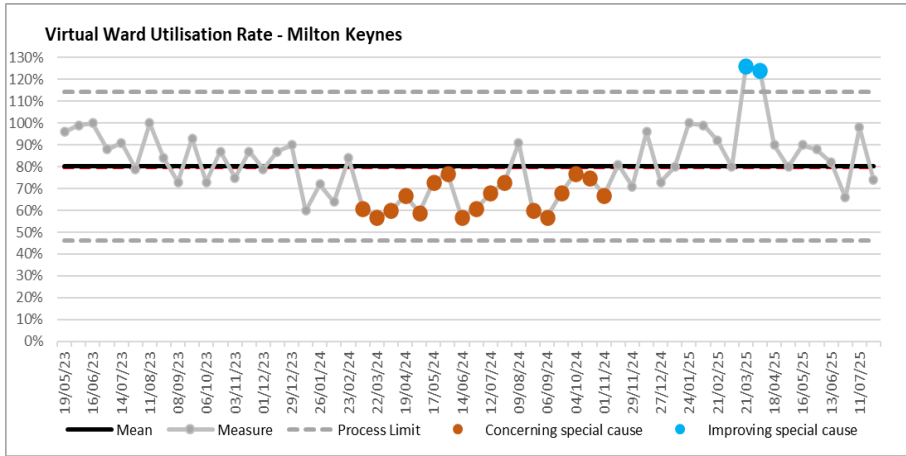
Area	Performance Metric	Reporting Frequency	Place	Measure	202504	202505	202506	202507	202508	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month/Week Against Previous 6 Points Average)	YTD	YTD RAG	Latest Data
Adult Mental Health	Dementia Diagnosis Rate	Monthly	Bedford Borough	Achievement Threshold	71.60%	71.70%	71.30%				High	↓	●	Green	Jun-25
		Monthly	Central Bedfordshire	Achievement Threshold	66.70%	66.70%	66.70%				High	↑	●	Red	Jun-25
		Monthly	Luton	Achievement Threshold	63.80%	63.60%	64.20%				High	↑	●	Green	Jun-25
		Monthly	Bedfordshire Care Alliance	Achievement Threshold	80.90%	80.70%	81.20%				High	↑	●	Green	Jun-25
		Monthly	Milton Keynes Care Alliance	Achievement Threshold	66.70%	66.70%	66.70%				High	↓	●	Red	Jun-25
Adult Mental Health	NHS Talking Therapies - number receiving a course of treatment	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	465	395	455				High	↑			Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	340	250	220				High	↑			Jun-25
		Monthly	Other Providers - Provider Trust Wide	Achievement Threshold	220	205	250				High	↑			Jun-25
Adult Mental Health	NHS Talking Therapies - Reliable Recovery	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	50.00%	50.00%	50.00%				High	↔	●	Green	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	48.68%	48.79%	48.90%				High	↔	●	Green	Jun-25
		Monthly	Other Providers - Provider Trust Wide	Achievement Threshold	50.00%	50.00%	50.00%				High	↓			Jun-25
Adult Mental Health	NHS Talking Therapies - Reliable Improvement	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	80.00%	70.00%	80.00%				High	↑	●	Green	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	68.00%	68.00%	68.00%				High	↑	●	Green	Jun-25
		Monthly	Other Providers - Provider Trust Wide	Achievement Threshold	70.00%	70.00%	70.00%				High	↓			Jun-25
Adult Mental Health	Early Intervention in Psychosis (EIP)	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold	73.00%	74.00%	0.00%				High	↓	●	Red	Jun-25
		Monthly	Milton Keynes - Provider Trust Wide	Achievement Threshold	60.00%	60.00%	60.00%				High	↓	●	Green	Jun-25
Adult Mental Health	Inappropriate Out Of Area Bed Days	Quarterly	Bedfordshire and Luton - Provider Trust Wide	Achievement Threshold			875				Low	↓			Jun-25
		Quarterly	Milton Keynes - Provider Trust Wide	Achievement Threshold			585				Low	↓			Jun-25

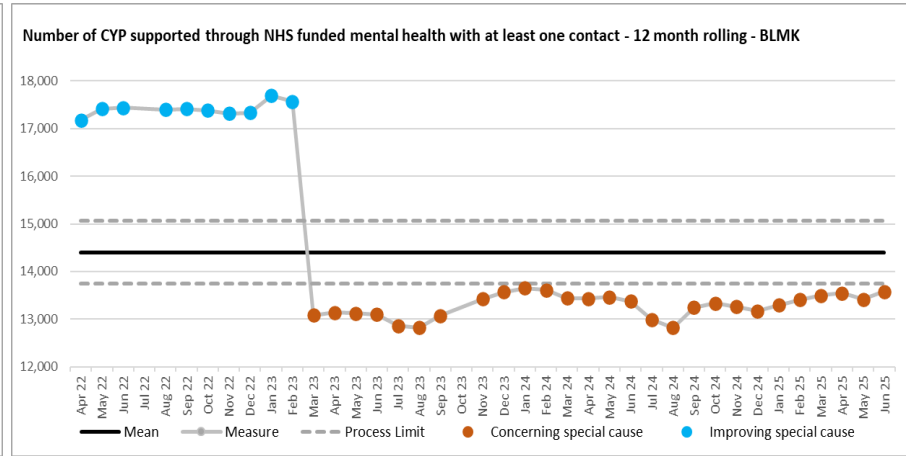
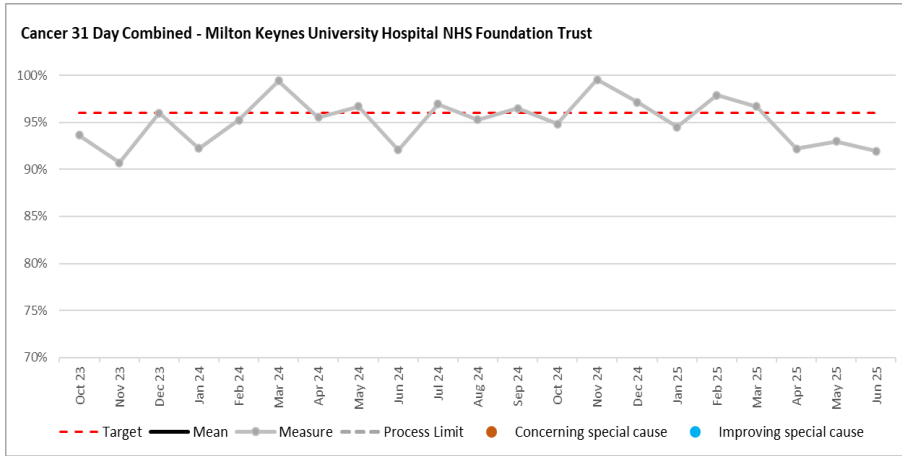
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Area	Performance Metric	Reporting Frequency	Place	Measure	202504	202505	202506	202507	202508	Spark Line (Rolling 12 Months)	What does good look like	Trend Arrows (Current Month/Week Against Previous 6 Points Average)	YTD	YTD RAG	Latest Data
Learning Disability & Autism	Learning Disability Healthchecks (cumulative position)	Monthly	Bedford Borough	Achievement	2.86%	7.80%	12.85%	21.56%			High	↓	●	Red	Jul-25
				Numerator	34	93	153	257							
				Denominator	1,190	1,193	1,191	1,192							
		Monthly	Central Bedfordshire	Achievement	2.73%	5.45%	10.51%	15.44%			High	↓	●	Red	Jul-25
				Numerator	36	72	140	207							
				Denominator	1,319	1,322	1,332	1,341							
		Monthly	Luton	Achievement	3.03%	8.64%	14.15%	20.76%			High	↓	●	Red	Jul-25
				Numerator	46	131	216	317							
				Denominator	1,519	1,517	1,527	1,527							
		Monthly	Bedfordshire Care Alliance	Achievement	2.88%	7.34%	12.57%	19.24%			High	↓	●	Red	Jul-25
				Numerator	116	296	509	781							
				Denominator	4,028	4,032	4,050	4,060							
		Monthly	Milton Keynes Care Alliance	Achievement	2.74%	7.89%	12.58%	18.03%			High	↓	●	Red	Jul-25
				Numerator	44	127	203	290							
				Denominator	1,606	1,610	1,611	1,608							
Children and Young People (CYP) & Maternity	CYP Eating Disorders - Routine	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	0.00%	0.00%	27.00%			High	↓	●	Red	Jun-25	
				Threshold	95.00%	95.00%	95.00%								
Children and Young People (CYP) & Maternity	CYP Eating Disorders - Urgent	Monthly	Milton Keynes - Provider Trust Wide	Achievement	80.00%	78.00%	77.00%			High	↑	●	Red	Jun-25	
				Threshold	95.00%	95.00%	95.00%								
Children and Young People (CYP) & Maternity	CYP Eating Disorders - Urgent	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	0.00%	0.00%	36.00%			High	↓	●	Red	Jun-25	
				Threshold	95.00%	95.00%	95.00%								
Community Services	Urgent Community Response - 2 hour Standard	Monthly	ELFT & CCS (Bedford and Luton)	Achievement	87.64%	86.63%	88.21%			High	↑	●	Green	Jun-25	
				Threshold	70.00%	70.00%	70.00%								
Community Services	Urgent Community Response - 2 hour Standard	Monthly	CNWL (Milton Keynes)	Achievement	89.53%	85.40%				High	↑	●	Green	May-25	
				Threshold	70.00%	70.00%									
Quality & Safety	Infection Control - C-Difficile - Acute Providers	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	12	7	12			Low	↑			Jun-25	
				Threshold											
Quality & Safety	Infection Control - C-Difficile - Acute Providers	Monthly	Milton Keynes - Provider Trust Wide	Achievement	2	5	4			Low	↓			Jun-25	
				Threshold											
Quality & Safety	Infection Control - MRSA - Acute Providers	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	1	2	1			Low	↓	●	Red	Jun-25	
				Threshold	0	0	0								
Quality & Safety	Infection Control - MRSA - Acute Providers	Monthly	Milton Keynes - Provider Trust Wide	Achievement	0	0	1			Low	↑	●	Red	Jun-25	
				Threshold	0	0	0								
Quality & Safety	Infection Control - E-Coli - Acute Providers	Monthly	Bedfordshire and Luton - Provider Trust Wide	Achievement	16	25	21			Low	↑			Jun-25	
				Threshold											
Quality & Safety	Infection Control - E-Coli - Acute Providers	Monthly	Milton Keynes - Provider Trust Wide	Achievement	23	23	16			Low	↓			Jun-25	
				Threshold											

Annex 3 – SPC Charts – Some of the charts contain unvalidated data and is subject to change. This information is not for onward sharing.







– How to interpret SPS Charts

An **SPC chart** (Statistical Process Control chart), is a tool used for **quality control** and **process management**. It helps **track and monitor** a process (or performance) **over time** to ensure it remains **stable, predictable, and within desired limits**.

For the purpose of performance reporting, it does this by **analysing and identifying** “real” **variation in performance** (within set parameters). This allows us to **monitor** performance over time, **identify** when problems are occurring, supporting **early detection** and allowing **corrective or preventative action** to take place.

Variation is assessed against the mean, and we would expect all data points to sit within set boundaries either above or below the mean. This is also called the upper and lower **process control limits (UCL and LCL)**, and they are normally set at **2-3 standard deviations above and below** the mean figure.

SPCs show **performance over a period of time** (at least 20 data points are need for optimal representation – months, weeks, days etc.) **Fewer data points are less reliable** and accurate in the detection of variation.

Types of variation include:

- **Common cause variation** – natural and **normal variation** that occurs over time which is considered “stable” and predictable e.g. activity impacted by seasonal fluctuation; Christmas time and summer holidays can impact the number of patients attending and seen. These data points would fall **within the process control limits**.
- **Special cause variation** – unexpected or **abnormal variation** that might indicate a problem in the system or process e.g. activity impacted by staff shortage; this is unexpected variation different from the regular variation seen in activity across the year. These data points would fall **outside of the process control limits**.

Common cause variation	Special cause variation
Is inherent in the design of the process	Is due to irregular or unnatural causes that are not inherent in the design of the process
Is due to regular, natural or ordinary causes	Affect some, but not necessarily all aspects of the process
Affects all the outcomes of a process	Results in an “unstable” process that is not predictable
Results in a “stable” process that is predictable	Also known as non-random or assignable variation
Also known as random or unassignable variation	

Advantages of SPCs

- **Early identification of problems / reduce waste** – abnormal variation is quickly spotted allowing corrective or alternative action to take place before potential escalation and or waste of time and resources on ineffective courses of action.
- **Improved process control** – continuous monitoring facilitates consistent performance.
- **Data driven decision making** – supports objective and quantitative data based informative decisions to be made.
- **Continuous improvement** – allows longer term performance trend tracking, allowing predictable future performance and early change and intervention, promoting a continuous improvement culture.
- **Real-time monitoring** – shows immediate data and impact which supports quick decision making.

Disadvantages of SPCs

- **Requires sufficient data** – SPCs rely on historical data in order to be effective and accurate in performing its functions.
- **Complex to interpret** – SPCs can be challenging to interpret, they require interpretation of data, trends, shifts and outliers.
- **Resource intensive** – set up and maintenance is time consuming.
- **Can be misinterpreted** – small fluctuations or adjustments can be misinterpreted as either common or special cause variation.
- **Does not show why** – charts will show variation and further investigation is needed to clarify the root cause.

- **Quantitative data only** – do not show small changes that lead to improvement in patient satisfaction or assessments which are harder to quantify.
- **Control limits** – assume that we work within a stable process and the chart works within this parameter. If these change, then the chart will not accurately account for this change, and the process limits need to be re-calculated. The control limits might not capture smaller changes that may be significant for quality improvement but not statistically significant enough to impact the chart.
- **Not effective for highly variable processes OR static processes** – charts work best for stable processes that do not need regular recalculation. There also has to be enough variation for the components of the SPC to be present and to provide actionable insight. Therefore, not all metrics will have an associated SPC chart, and other more appropriate visualisations are used.

SPC Chart Annotation

Orange dots
Concerning Variation
 – several in the same direction is an adverse “shift” in performance and means something is going wrong – **INVESTIGATE**

Mean Performance
 (of data points entered into the chart)

Metric Target – **Where we want to be Target**

Grey dots
 Normal / Expected Variation – this means nothing significant is changing – **how long is this acceptable?**

Upper Control (process) limit (**UCL**) is set 3 standard deviations **above** the mean

Blue dots
Improving Variation – several going in the same direction is a positive “shift” in performance and means something good is happening – **CELEBRATE and REPLICATE**

Lower Control (process) limit (**LCL**) is set 3 standard deviations **below** the mean

