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Report to the: Board of the Integrated Care Board in Public

Item: BLMK Quality and Performance Report - Annexes

1.0 Executive Summary

- 1.1 This paper includes the appendices referred to within the main BLMK Quality and Performance Report
 - Annex 1 Month 9 BLMK Performance Dashboard

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• Annex 2 – NHS Oversights Improvement Plan

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Annex 1 - Month 9 - BLMK Performance Dashboard

Area	BLMK ICB	Threshold	Frequency	Latest Data	Achievement	Trend over last 6 data points	YTD	Ranking	Regional Average (ICB position vs region)
	RTT - % Patients Waiting 18 Weeks or less	92%	М	Dec-23	48.05%	Û	•	6/6	52.64%
	RTT - Number of 104+ Week Waits	0	М	Dec-23	0	Û	•	1/6	13
Elective Recovery	RTT - Number of 78+ Week Waits	0	М	Dec-23	163	Û	•	2/6	553
Elective Recovery	RTT - Number of 65+ Week Waits	584	М	Dec-23	2,295	Û	•	2/6	3,060
	RTT - Number of 52+ Week Waits	5,864	М	Dec-23	8,131	仓	•	3/6	9,235
	Diagnostics Tests - 6 Week Waits (%)	1%	М	Dec-23	44.78%	Û	•	6/6	33.19%
	Cancer - 28 Day Faster Diagnosis Standard	75%	М	Dec-23	71.65%	Û	•	3/6	70.40%
Cancer Care	Cancer - 31 Day Combined	96%	М	Dec-23	90.90%	Û	•	3/6	89.83%
	Cancer - 62 Day Combined	85%	М	Dec-23	67.80%	仓	•	3/6	62.97%
	A&E 4 hour waits	76.13%	М	Jan-24	75.36%	Û	•	1/6	68.66%
Urgent Emergency Care	A&E 12 Hour Decision to Admit	0	М	Jan-24	15	Û	•	1/6	657
	% ED Attendances that result in emergency admission		М	Jan-24	29.17%	仓		3/6	29.92%
	Number of appointments in General Practice		М	Dec-23	422,587	Û		6/6	496,692
Primary Care	% same day appointments in General Practice		М	Dec-23	40.03%	Û		5/6	44.44%
	% of Appointments With Health Professional Other Than GP		М	Dec-23	53.65%	⇧		5/6	54.14%
	CPA 72-Hour Follow Ups	80%	М	Dec-23	86.00%	Û	•	1/6	65.21%
	SMI Healthchecks (Rolling 12 months)	5,902	Q	Dec-23	4,185	Û	•	5/6	5,114
	Dementia Diagnosis Rate	67%	М	Jan-24	67.32%	仓	•	1/6	62.75%
Adult Mental Health	Talking Therapies (formerly IAPT) Access	2,260	М	Dec-23	1,580	Û	•	5/6	1,865
	Talking Therapies (formerly IAPT) Moving to Recovery	50%	М	Dec-23	46.25%	Û	•	4/6	46.94%
	Early Intervention in Psychosis (EIP)	60%	М	Dec-23	75.00%	Û	•	5/6	69.00%
	Inappropriate Out Of Area Bed Days	200	Q	Sep-23	680	Û	•	1/6	1,739
Learning Disability & Autism	Learning Disability Healthchecks (Cumulative)	50.37%	М	Dec-23	44.46%	仓	•		
	Number of CYP accessing mental health services (Rolling 12 months)	17,549	М	Dec-23	13,570	⇧	•	3/6	13,974
Children and Young People (CYP) & Maternity	CYP Eating Disorders - Routine	95%	М	Dec-23	81.0%	仓	•	4/6	74.88%
	CYP Eating Disorders - Urgent	95%	М	Dec-23					38.66%
	Perinatal Mental Health Access (YTD)	1032	М	Dec-23	905	仓	•	4/6	1065
Community Services	Childrens Wheelchairs - % received in 18 weeks	92%	Q	Dec-23	67.14%	仓	•	5/6	82.87%
	Infection Control - C-Difficile	12	М	Dec-23	7	Û	•	2/6	9.43
Quality & Safety	Infection Control - MRSA	0	М	Dec-23	2	⇔	•	6/6	0.79
	Infection Control - E Coli	32	М	Dec-23	39	仓		4/6	27

Key		YTD				
Trend Arrows						
Û	Improving	•	YTD On Track			
Û	Deteriorating		YTD Off Track			
⇔	No change		T TD Oil Tlack			
		Regional RAG				
On Track			ICS vs Regional Average			
	Off Track		ICS vs Regional Average			
	Off Track		ICS vs. Regional Average			

Annex 2 - NHS Oversights Framework Improvement Plan

Provider Level	Metric	Change from Previous Period	Ranking	Causes of under performance and expected improvement date
MKUH	KUH RTT Waiting lists - Total patients waiting more than 65 weeks to start consultant led MKUH Deterioration from Amber		112/135	 The ambition to eliminate 65 week waits remains a key target for the system but the ongoing industrial action and recent focus on prioritising financial balance has resulted in a revised trajectory of 203 65ww at the end of March 24. This is in addition to the small number of 78ww (20) that are anticipated through patients exercising their choice to remain at their current provider or with the preferred clinician. Outsourcing and insourcing will remain a mitigation within both Trusts however the need to maintain financial balance will be a rate limiting factor. Both Trusts remain committed to protecting elective beds during winter wherever possible and the newly implemented ICB System
ВНТ	treatment Control Centre will provide critical support.	Control Centre will provide critical support. • All actions are within the implementation phase and expected to be sustained to achieve the revised trajectory at the end of March 24 (65ww 203 across the system; 78ww 20 across the system)		
ВНТ	% cancer patients on the waiting list who have been waiting more than 62 days	Improvement	107/132	 Backlog volumes have reduced following the Tier one focus at BHT. BHT have made significant improved to the % of patients waiting more then 62 days since October moving from 13.1% of the PTL over 62 days to 9% in November 2023. MKUH have maintained backlog trajectories as agreed in operational plan. Recovery meetings established with all Providers to collate and update on recovery actions that will impact on performance and identify opportunities for support March 24
ВНТ	S012a Cancer – Proportion of patients meeting the faster cancer diagnosis standard	BHT Deterioration from Amber	105/133	Local performance data over Q4 has identified a risk to delivery of the 75% target by March.
BHT	Maternity – stillbirths per 1,000 total births	Deterioration	89/118	 Recent review have not shown anything outside what is expected. Reducing stillbirths and pre-term births is a priority for the LMNS. Trusts will be asked to work collaboratively with team to improve the quality of data through the DQIP for 2024/25
ICB	% patients describing their overall experience of making a GP appointment as good	Deterioration	42/42	 We understand that whilst most patients report a good experience once they access their practice team that residents experience of making contact requires improvement. The BLMK response to the NHS Delivery Plan for Recovering Access to Primary Care includes the transition of all practices to Cloud Based Telephony by Q1/2 24/25
ICB	Clostridium difficile infection rate - 12 month rolling total cases (ICB) hospital onset and	Deterioration	35/42	 Improving performance. A review of outcomes from both acute providers have shown no lapse in care. Expectation that the identified actions will support continued reduction in hospital associated infections and achievement of the yearly set trajectories - April 2024. IPC team continue to support Post infection Review (PIR) meetings. Monthly systemwide C.diff collaborative workstream meetings
Provider	community healthcare associated (Provider) / threshold	Deterioration	41/42	continue to be a platform of sharing best practices from all system wide partners. • MKUH Associate Chief Nurse, Infection Prevention Control (IPC) and Medical Director have robust plans in place.
MKUH	for 12 months ending March 23	Deterioration	133/135	
ICB		Deterioration	42/42	Sustained performance in E. coli over the last 6 months.
Provider	rate - 12 month rolling /	Deterioration	42/42	• A collaborative BLMK wide care home study day was held on 13 September 2023 with the Dietetics, IPC team and Quality improvement team.
BHT		Improvement	111/135	New IPC Strategic Lead BLMK ICB starting in December 2023 will assist in improving performance in IPC across the system
MKUH	MKUH March 23		131/135	• Roll out of the Bedford hydration programme to Milton Keynes care homes planned for December 2023 .

ICB	Proportion of people over 65 receiving a seasonal flu vaccination	Improvement	32/42	 Late changes to the national guidance had an impact on potential for co-administration with Covid vaccination. Very low uptake in Luton negatively skews the data for BLMK as a whole. Short term improvements are expected by Feb 2024 with further improvements for the 2024 flu vaccination programme.
LA	Bowel Screening Coverage - Luton	Improvement	132/151	 Latest published data demonstrates the variation in uptake across Luton with 11/25 practices below the 60% uptake measure. Each PCN has been supported to develop an action plan to increase uptake in cancer screening and many of the PCNs have identified actions to support Bowel cancer Screening uptake.
LA	Breast Screening Coverage - Luton	Deterioration	124/149	 Latest published data demonstrates the variation in uptake across Luton. Each PCN has been supported to develop an action plan to increase uptake of Breast Screening.
ICB	Cervical screening coverage	Deterioration	35/42	• Latest published data demonstrates the variation in uptake across BLMK, this is a national challenge with many areas looking at innovative ways to increase uptake.
ICB	Hypertension patients treated to target as per NICE guidelines	No change	42/42	 BLMK ICB has the lowest performance for hypertension management of any ICB nationally, as well as a greater than average gradient of inequality by socioeconomic deprivation. The aim of the BLMK programme is to improve hypertension management across BLMK, with specific focus on people with hypertension living in the most socioeconomically deprived areas.
ICB	Staff experienced harassment, bullying or abuse at work from managers	Deterioration	33/42	 There is a Equality Diversity and Inclusion sub group of the people board focusing on the delivery of the equality improvement plan. The ICS has signed up to the Diversity in Health and Care Partners programme and these sessions are offered to all across the ICS. The regional EDI team is working with BLMK to roll out the anti racism strategy
ICB	Staff experienced harassment, bullying or abuse at work from patients/service users, relatives or members of the public	Improvement	34/42	Improvement expected by August 24
BHT	Staff in senior leadership roles who are women	Improvement	105/134	
BHT	Relative likelihood of white applicants being appointed compared to BME applicants	Deterioration	128/135	
ICB	Neonatal deaths per 1,000 total	Deterioration	39/42	The 2021 data increase has been reviewed by local clinical experts (no exceptional cause identified) and has been discussed with the ICB.
BHT	live births	Deterioration	105/118	
BHT	Adult general and acute type 1 bed occupancy	Improvement	103/122	Both BHT and MKUHT have improvement work streams in place to improve flow and minimise the use of escalation beds.
BHT		Deterioration	120/135	 Activity levels and 6ww performance impacted by Industrial Action and winter pressures. Whitehouse Park CDC (MKUH) - Live in July. However, notable underperformance caused due to issues around planning for portacabins
MKUH	Diagnostic Waiting Times -	Deterioration	112/135	to house MRI/Imaging, issues around habitat has delayed building works. Staffing issues continue • Echo at MKUH - Seeing an increase in inpatient referrals which is impacting on outpatient waiting times
ICB	more than 6 weeks	Deterioration	36/42	• Endoscopy Reconfiguration - New Olympus scopes for MK been delivered and Luton is in delivery. Trusts are working on logistics for the replacing on the Luton site which will create efficiency and increase productivity once complete.
Provider		Deterioration	38/42	 CDC Activity/Revenue plans for 24/25 submitted and approved by NHSE. Ensures provision of ongoing diagnostics capacity through CDC delivery to support achievement of diagnostics 6ww targets. NOUS - DNA rates still very high which impacts significantly on performance.