



Agenda Item No:

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Report to:	Humber and North Yorkshire Integrated Care Board
Date of Meeting:	11 September 2024
Subject:	ICB Performance Report
Director Sponsor:	Jane Hazelgrave, Deputy Chief Executive and Chief Operating Officer and Karina Ellis, Executive Director of Corporate Affairs
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STATUS OF THE REPORT:

Approve Discuss Assurance Information A Regulatory Requirement

SUMMARY OF REPORT:

The purpose of this paper is to provide the Board with the latest published performance position against the priority objectives in the 2024/25 HNY ICB Operational plan. This month's report continues the new format that was initiated last month. The report highlights how short term annual targets relate to longer term aims and objectives of the ICB, and the performance delivery against annual planning targets. The report will use the latest published data available.

For the priority indicators, the report includes a summary overview of performance for the latest reported month, as well as a monthly view to allow the board to see performance over time. There is also a one page summary of performance for each of the priorities with a time series chart where available, objective text regarding the performance delivery, and key actions that are being taken. There are also extra charts giving the latest performance for the indicators not prioritised in the report, and further text and charts related to performance aspects of the operational plan that relate to Quality, Finance and Workforce.

The Planning and Performance and Business Intelligence Teams are keen to work with the Board regarding the new format and in particular make sure that the priority indicators identified reflect the priorities of the Board. This cover sheet describes an executive summary of the report, and areas the Board may wish to review in more detail in the full report:

Urgent and Emergency Care

UEC 4-hour performance in July for the overall ICB system was 71.7% (end of year target 78%). The UEC plan being monitored by NHSE is for the acute providers only and was set at 68.2% for July with actual performance of 67.6%. HUTH (62.6%) and Y&SFT (65.6%) were lowest performing Trusts. UEC performance at HNY has been challenged by NHSE and the ICB is in national UEC Tier 2. The year-end target for the acute providers is 73.2%. Urgent and Emergency Care is an area of particular focus by operational and quality leads, and the subject of much attention and short term Recovery Plans across the ICB footprint.

Planned Care

The priority indicator for planned care is the 65-week breach number (patients waiting over 65 weeks for planned care), with the target being 0 patients by September 2024. The other key indicators in planned care are the Total Waiting List size and a new indicator related to the

proportion of total outpatients that are first appointments. After September the priority indicator in the attached report will change to Total Waiting List size. June performance improved from May but fell behind plan; actuals were 214 against a plan of 165. Performance is being managed at individual provider and specialty line level. The report gives further detail on which providers and specialties are driving this position. The secondary target related to Total Waiting List size continued to grow in June. Information suggests this is largely at HUTH and NLAG and relates to the non-admitted (Outpatient) part of the waiting list. The report describes key actions that are being taken by the Elective Care Programme Board that will support both indicators.

Diagnostic services

The priority indicator related to Diagnostic services is the percentage of patients waiting over 6 weeks for a diagnostic test (related to 9 key tests identified in the operating plan). Performance in June was 24.2% of patients waiting over 6 weeks, against a target of 23.9%, and so marginally did not achieve the Plan trajectory. Performance is demonstrating special cause variation of an improving nature. Within the report there is further detail of variation by test type and by provider; Audiology, DEXA and Echo are singled out of the nine key tests for particular focus, along with some key actions being undertaken by the programme board.

Cancer Services

The priority indicator related to Cancer services is 62 days from referral to treatment, with a target of 70% by March 2025. June performance was 65.4% against a target of 62%. This is delivery against plan, though performance trend over time is showing common cause variation no significant change, which reflects a fluctuating position around the mid-point, we have seen delivery of the target so far in 2024/25. The report describes variation by provider with a range in delivery between 54%-72% (reduced variation from last month) and gives a summary of key actions that are planned. Please note there is a more comprehensive annual cancer improvement plan that has been written by the Cancer Alliance and is available for the Board if required.

Primary Care

The priority indicator for primary care is the percentage of patients booked within 14 days of requiring an appointment (target of 85%). The other metrics in the annual operating plan for primary care are an increase in the delivery of primary care appointments and recovery of the provision of dental care appointments to pre-covid levels. Performance against the priority indicator (14-day booking) was 87.7% against the 85% target in June. The report describes variance in delivery across the system (83.4%-93.6%) and the performance trend is demonstrating special cause variation of an improving nature. This is also the case for delivery of increased primary care appointments; although increase in dental provision is showing no significant change. We will keep a close eye on the monitoring the potential impact on these targets in terms of the GP collective action.

Prevention and Health Inequalities

Prevention and Health Inequalities form a key part in the long term aims of the organisation; however the operating plan guidance also referenced some indicators to be monitored through the annual process that related to hypertension, CVD, and children's vaccinations, as well as CORE20Plus. Data was readily available for the hypertension indicator and so this has been identified as the priority indicator (though it is recognised this may change in the year). Also, the updates on progress of prevention and health inequalities will be made via the Population Health and Prevention Committee. In regard to the hypertension indicator; performance reduced in July to levels below plan – 73.1% against a target of 77%. A similar pattern was seen in the summer of 2023/24 and this needs to be closely monitored.

Community Services

The priority indicator for Community Services is the number of patients waiting over 52 weeks, and there is a secondary target for the overall waiting list size. The latest validated data available is June 2024, which saw 1,206 patients wait over 52 weeks for community services against a plan of 1,138. The data is showing special cause variance of a concerning nature, and the report gives provider and service level information. This shows the long wait position is predominantly

centered around a single service for Children and Young People Speech and language, although there is an emerging risk for Nursing Therapy Support for LTC: Respiratory/COPD service. The overall waiting list size performance has shown no significant change (no improvement or deterioration in the last twelve months). The report gives further detail on actions that are being taken.

Mental Health Services

There are a number of indicators related to mental health services in the operating plan; performance against all of them is included in slides 23 to 25. For this month's report, the priority indicators that have been identified are Dementia Diagnosis rates, Out of Area Placements and Access to CYP services. Some of the actual measures have changed definition and so comparison and trend data is not available. Key messages from the report are:

Dementia Diagnosis rates in June were 59.2%, which is below the ICB plan target of 60.2%. Performance since September 2023 has been above or at the upper control limit and therefore demonstrating special cause variation of an improving nature. However, even with the improved performance, the ICB remains adrift from the national target. There is variation across the system which has been identified down to Primary Care Network level and individual GP practice.

Out of Area Placements are part of the ten key priorities for the ICB in regard to productivity and finance expectations. The measure in this report now reflects the operating plan measure of placements rather than bed days. Performance in June was 18 against a plan of 16. There is variation at Place with NE Lincs at 0 and North Lincs at 7, Hull and East Riding at 5. North Lincs is showing a deterioration. Further detail and some key actions are described in the report.

Access to CYP Mental Health services is measured via available appointments, which in June was 21,260 against a plan of 21,690, and therefore below target. The provision made available has shown special cause variation of an improving nature but is below the increased plan for 2024/25. Place level performance is variable against plan, however all areas except North Yorkshire and York are showing special cause variation of an improving nature. North Yorkshire is showing no significant change and York is showing special cause variation of a concerning nature. The report describes actions that are being taken.

Workforce

The performance expectations for workforce set out in the operating plan refer to actions on working lives of doctors and clinical placements that would be better updated via other routes. Workforce numbers played a key part in the operating plan in relation to delivery of the financial plan, and so information regarding numbers of WTE in post and bank and agency spend, along with staff sickness and retention against plan, are included in the report on slides 18-20.

Quality

It must be noted that the quality agenda has a large number of metrics that sit outside of the operating plan. The operating plan guidance referenced the following indicators:

- Implement 3 year plan for maternity and neonates
- Develop at least one women's Health Hub
- Implement the patient safety incident response framework (PSIRF)

Progress against these indicators will be made via the quality agenda, with periodic updates in this report. Brief updates have been left in from last month. These will be updated quarterly with the next update due at the October Board.

The full complete report is attached for your consideration.

RECOMMENDATIONS:

Members are asked to:

- i. Note the development of the Board performance report in terms of its content, length and presentation.
- ii. Consider and discuss the performance report: - in particular, the issues highlighted in the cover sheet.
- iii. Provide feedback to support the further development and evolution of the Board Performance Report.

ICB STRATEGIC OBJECTIVE

Leading for Excellence	<input checked="" type="checkbox"/>
Leading for Prevention	<input type="checkbox"/>
Leading for Sustainability	<input type="checkbox"/>
Voice at the Heart	<input type="checkbox"/>

IMPLICATIONS

Finance	Use of resources is a theme in the operational plan with a priority around system financial balance. This will be covered through a separate report to the Board on the financial position.
Quality	Identifying quality and safety risks and deploying our resources in a way that manages quality and safety risks and supports improvement.
HR	Workforce is a theme in the operational plan with a priority around retention and staff attendance. Updates will be provided through the workforce reports to the Board.
Legal / Regulatory	Progress against performance is linked to the system oversight framework.
Data Protection / IG	There are no direct data protection/IG implications relating to this paper, however data protection/IG controls and mitigations will be considered, as relevant, for the production of the report.
Health inequality / equality	The ICB has a responsibility and accountability in relation to reducing inequalities and improving outcomes for the population. The 32 priorities set out in the planning guidance and the ICB operational plan has a theme of prevention and health inequalities. Where these are specific measures, these are included in the report.
Conflict of Interest Aspects	No conflicts of interest are identified in relation to the Performance Report: however, it is noted that COIs will continue to be monitored on a case-by-case basis given the broad scope of the report's contents and the professional/organisational diversity of the Board membership.
Sustainability	There are no sustainability implications relating to this paper, however sustainability controls and mitigations will be considered on a case-by-case basis, as appropriate.

ASSESSED RISK:

MONITORING AND ASSURANCE:

ENGAGEMENT:

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No Yes

If yes, please detail the specific grounds for exemption.