

Agenda Item No:	12
------------------------	-----------

Report to:	Humber and North Yorkshire Integrated Care Board
Date of Meeting:	9 April 2025
Subject:	ICB Performance Report
Director Sponsor:	Shaun Jones, Director of Planning and Performance and Karina Ellis, Executive Director of Corporate Affairs
Author:	Shaun Jones, Director of Planning and Performance Alex Bell, Deputy Director Business Intelligence Shaun Boffey, Assistant Director of Planning and Performance
STATUS OF THE REPORT: Approve <input type="checkbox"/> Discuss <input type="checkbox"/> Assurance <input checked="" type="checkbox"/> Information <input checked="" type="checkbox"/> A Regulatory Requirement <input type="checkbox"/>	

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 for 2024/25. 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 uses 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 month by month 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.

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. The report is largely concerned with M10 (M11 for UEC).

Urgent and Emergency Care

UEC 4-hour performance in February for the overall ICB system was 71% (end of year target 78%). The UEC plan being monitored by NHSE is for the acute providers only and was set at 69.9% for February with actual performance of 66.3%. HUTH (57.8%) and Y&SFT (66.2%) were lowest performing Trusts. UEC performance at HNY has been challenged by NHSE and the ICB is in national UEC Tier 2. Trend performance over time is variable which suggests no statistically significant improvement is being seen, however year to date data shows an improvement from 64.28% in February 2024.

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 – including focus on ambulance turnaround times which are showing improvement in performance in February, which in turn support the improvement seen in category 2 response times.

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. January performance saw an increase from 132 patients waiting over 65 weeks in the previous month to 177. Statistically, performance over time continues to show common cause variation of an improving nature due to the improvement over the last 12 months and has tracked closely to the recovery plan, however, the year-end position is being closely monitored at individual provider and specialty line level and is showing risks to delivery. The report gives further detail on which providers and specialties are driving this position. The secondary target related to Total Waiting List size saw a third consecutive month where the waiting list reduced. Waiting list pressure is predominantly at HUTH and NLAG and relate to the non-admitted (outpatient) part of the waiting list. The report describes key actions that are taken by the Elective Care Programme Board that will support both indicators. The Elective Care board have been looking at the causes of waiting list growth in more detail, to determine the necessary actions.

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 January was 25.6% of patients waiting over 6 weeks, against a target of 17.2%, and so were behind plan. Performance is demonstrating special cause variation of an improving nature over the long term but the last three months have seen performance worsening. The report includes further detail of variation by test type and by provider; growth in MRI and Non-Obstetric Ultrasound were highlighted in the main report. Key actions being undertaken by the Diagnostics Programme Board are also described.

Cancer Services

The priority indicator related to Cancer services is 62 days from referral to treatment, with a target of 70% by March 2025. January performance was 62.6% against a target of 66.3%. This is below plan though performance trend over time continues to show common cause variation of an improving nature. The report describes variation by provider with a range in delivery between 46.4% and 77.2% and gives a summary of key actions that are planned. The ICB as a whole, and HUTH and NLAG as individual providers, are in NHSE Tier 1 category for Cancer.

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 87.6% against the 85% target in January. The report describes variance in delivery across the system (83.8%-93.3%) and the performance trend is demonstrating special cause variation of an improving nature. This is also the case for the delivery of increased primary care appointments which also achieved performance above plan in January. Planned increase in dental provision is showing no significant change. These indicators continue to be monitored for the potential impact 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. Hypertension is seen as a key early indicator of other aspects of long term ill health and so has been identified as the priority indicator. Updates on progress of prevention and health inequalities will in the main be made via the Population Health and Prevention Committee. The hypertension indicator; performance in January improved from 75.3% to 76.2% against a target of 80% with the indicator showing a special cause variation of a variable nature. Further information available demonstrates that the volume of patients being treated (numerator) is higher than

previous years as is the number of diagnosed patients with hypertension (denominator) which has increased at a higher rate and therefore affects the performance. Increasing diagnosed prevalence of hypertension is a key objective of the CVD programme and the metric may be reflecting the success of projects that aim to improve opportunistic testing.

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 January, which saw 980 patients wait over 52 weeks for community services against a plan of 1,109. Although performance achieved in month, 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 a secondary risk for Nursing Therapy Support for LTC: Respiratory/COPD service. The overall waiting list size performance is showing significant change of a concerning nature. 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 24 to 26. 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 January were 60.3%, which is below the ICB plan target of 61.8%. 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 relates to the number of acute out of area placements (please note there are a large number of rehab patients who are also out of area placements but do not count in this metric, though information is provided to SOAG on both rehab and acute patients). Performance in January was 29 (worsened from 12 last month) against a plan of 6. There is variation at Place with the majority of placements being from North Lincs (13), East Riding (7) and Hull (7). Further detail and some key actions are described in the report.

Access to CYP Mental Health services is measured via available appointments, which in January was 20,075 against a plan of 21,690, and therefore below target. The provision made available is showing special cause variation of variable nature. Place level performance is variable against plan. 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 are captured via the separate Breakthrough programme update. In terms of workforce numbers, slides 18-23 provide an overview. Key messages and risks are summarized on slides 18 and 19 of the report, the headlines for February being that agency Whole time Equivalent (WTE) are below plan and lower than January levels. Bank and substantive WTE are above plan, and both are higher than January. The number of WTE overall has increased between January and February (34,302 to 34,479) and is 1,061 above plan.

SOAG

The March SOAG meeting was cancelled due to planning requirements.

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)

The authors of this report have checked and are assured that updates on progress are being made direct to the Board through either escalation from the Quality Committee or through specific papers on the Board agenda from responsible officers.

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.

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:

The report identifies the main performance and delivery risks associated with the ICB's Operational Plan priorities for 2024/25.

MONITORING AND ASSURANCE:

The report is the principal means through which the ICB monitors the delivery of its Operational Plan and provides assurance in relation to its position.

ENGAGEMENT:

The report has engaged a number of colleagues and stakeholders to formulate its content.

REPORT EXEMPT FROM PUBLIC DISCLOSURE

If yes, please detail the specific grounds for exemption.

No ☒ Yes ☐