

Meeting of Integrated Care Board

Date: 1st September 2022

Time: 11.00am

Location: University of the West of England, Enterprise Park 1, Lecture Theatre, Long Down Avenue, Stoke Gifford, BS34 8QZ

Agenda Number :	7.1
Title:	Performance Report and Operational Plan Metrics
Purpose: Discussion	
Key Points for Discussion:	
<p>The Paper outlines the current performance of the Integrated Care Board over a range of the Operational Plan and Performance Indicators:-</p> <ul style="list-style-type: none"> • Overall, BNSSG Trusts' 4hr A&E performance worsened from 61.8% to 57.1% in July and is similar to the national average for Type 1 EDs of 57%. NHSEI Support to BNSSG via UEC collaborative with whole system diagnostics, dynamic modelling and NHS111 first and an ambulance handover improvement plan focused on demand management, process improvement, improving flow and reverse queueing capacity. • For planned admissions, the total waiting list size for the BNSSG population worsened from 76,803 in May to 80,712 in June. BNSSG performance of 66.2% was ranked 35th out of 102 CCGs nationally (up from 46th in May) and ranked 2nd out of 6 CCGs in the South West (same as in May). • The number of BNSSG patients waiting 52 weeks or more for planned treatment increased from 4,164 in May to 4,763 in June – 5.9% of the total waiting list. The number increased at both NBT and UHBW. The BNSSG position is driven mainly by waits at NBT (1,995) and UHBW (2,081), with the remaining 687 breaches split across 45 other providers. Focused work to facilitate elective recovery ambitions are being implemented. • The number of BNSSG patients waiting over 78 weeks decreased from 801 in May to 744 in June. The number decreased at both NBT and UHBW. The BNSSG position is driven mainly by waits at NBT (347) and UHBW (242). The remaining 155 breaches are split across 22 other providers, with the majority at Sirona (71), Spire Bristol (25), Sulis Hospital (33) and Nuffield Health Bristol (11). • The number of BNSSG patients waiting over 104 weeks decreased from 112 in May to 69 in June. The number decreased at both NBT and UHBW. The BNSSG position continues to be driven mainly by waits at NBT (25) and UHBW (30). The remaining 14 breaches are split across 6 other providers, with the majority at Sirona (5), Sulis Hospital (4) and Spire Bristol (2). • 2 week wait cancer performance worsened in June to 48.9% for the BNSSG population. Performance worsened at both NBT and UHBW. The 93% national standard has not been achieved at population level since June 2020. 	



	<ul style="list-style-type: none"> • 28 day faster diagnosis standard for BNSSG cancer patients worsened in June to 69.3% for the BNSSG population. Performance worsened at both NBT and UHBW. The 75% national standard has not been achieved at population level since reporting started in April 2021. • 62 day referral to treatment time for BNSSG cancer patients worsened in June to 53.5%. Performance worsened at both NBT and UHBW. The 85% national standard has not been achieved at population level since April 2019. • For the year to date in June, there were there were reductions in activity across all areas compared to the same period in 19/20. From May to June, all activity decreased except total non-elective admissions +1 Los
Recommendations:	The Integrated Care Board is asked to note the current performance and the actions being taken to improve the system performance.
Previously Considered By and feedback :	Outcomes, Quality and Performance Committee
Management of Declared Interest:	N/A
Risk and Assurance:	The non-delivery of the National Performance standards and the corresponding impact on the population is recorded on the Corporate Risk Register.
Financial / Resource Implications:	The Funding to deliver the Operational plan and national performance standards has been identified as part of the ICB's budget in 2022/23.
Legal, Policy and Regulatory Requirements:	The delivery of the Operational Plan forms part of the Integrated Care Boards System Oversight with NHS England.
How does this reduce Health Inequalities:	A core component of the operational plan is to identify actions to address Health Inequalities.
How does this impact on Equality & diversity	N/A.
Patient and Public Involvement:	There has been no direct local engagement in developing the national performance standards. The current consultation with the public, will feed into future Operational plans.
Communications and Engagement:	This paper supports the communication with the public on the delivery of the NHS against the National Standards and Operational Plan.
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BNSSG Performance & Activity Report

August 2022

Created by

Gary Dawes

BI Performance Team

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1 Executive Summary – Headlines

- Overall, BNSSG Trusts' 4hr A&E performance worsened from 61.8% to 57.1% in July and is similar to the national average for Type 1 EDs of 57%. NHSEI Support to BNSSG via UEC collaborative with whole system diagnostics, dynamic modelling and NHS111 first and an ambulance handover improvement plan focused on demand management, process improvement, improving flow and reverse queueing capacity.
- For planned admissions, the total waiting list size for the BNSSG population worsened from 76,803 in May to 80,712 in June. BNSSG performance of 66.2% was ranked 35th out of 102 CCGs nationally (up from 46th in May) and ranked 2nd out of 6 CCGs in the South West (same as in May).
- The number of BNSSG patients waiting 52 weeks or more for planned treatment increased from 4,164 in May to 4,763 in June – 5.9% of the total waiting list. The number increased at both NBT and UHBW. The BNSSG position is driven mainly by waits at NBT (1,995) and UHBW (2,081), with the remaining 687 breaches split across 45 other providers. Focused work to facilitate elective recovery ambitions are being implemented.
- The number of BNSSG patients waiting over 78 weeks decreased from 801 in May to 744 in June. The number decreased at both NBT and UHBW. The BNSSG position is driven mainly by waits at NBT (347) and UHBW (242). The remaining 155 breaches are split across 22 other providers, with the majority at Sirona (71), Spire Bristol (25), Sulis Hospital (33) and Nuffield Health Bristol (11).
- The number of BNSSG patients waiting over 104 weeks decreased from 112 in May to 69 in June. The number decreased at both NBT and UHBW. The BNSSG position continues to be driven mainly by waits at NBT (25) and UHBW (30). The remaining 14 breaches are split across 6 other providers, with the majority at Sirona (5), Sulis Hospital (4) and Spire Bristol (2).
- 2 week wait cancer performance worsened in June to 48.9% for the BNSSG population. Performance worsened at both NBT and UHBW. The 93% national standard has not been achieved at population level since June 2020.
- 28 day faster diagnosis standard for BNSSG cancer patients worsened in June to 69.3% for the BNSSG population. Performance worsened at both NBT and UHBW. The 75% national standard has not been achieved at population level since reporting started in April 2021.
- 62 day referral to treatment time for BNSSG cancer patients worsened in June to 53.5%. Performance worsened at both NBT and UHBW. The 85% national standard has not been achieved at population level since April 2019.
- For the year to date in June, there were reductions in activity across all areas compared to the same period in 19/20. From May to June, all activity decreased except total non-elective admissions +1 Los

2 Activity – BNSSG ICB Position at M3, June 22/23 YTD

The position is outlined for the year to date at month 3 22/23, against the same period in 19/20 to highlight the comparison of the current position with the pre-Covid position.

- For the year to date in June, there were there were reductions in activity across all areas compared to the same period in 19/20. From May to June, all activity decreased except total non-elective admissions +1 Los
- Total referrals are 11.06% lower than the same period in 19/20. GP referrals are 16.48% lower than in 19/20.
- First outpatient appointments are 15.38% lower than in 19/20.
- Follow up appointments are 8.87% lower than in 19/20.
- Total A&E attendances are 14.01% lower than in 19/20, with 11,609 fewer attendances (averaging 128 fewer attendances per day).
- Total non-elective admissions are 14.46% lower than in 19/20. The +1 day lengths of stay (LoS) are 15.96% lower, whilst zero day stays are 12.09% lower.
- Total elective admissions are 7.56% lower than in 19/20. Day Case admissions are 6.74% lower, whilst Ordinary admissions are 13.64% lower.

Activity	Monthly volumes / variance				Year to date volumes / variance			
	Jun-19	Jun-22	Variance	Jun-22 as a % of Jun-19	Jun-19	Jun-22	Variance	Jun-22 as a % of Jun-19
Total Elective Admissions - Day Cases	9,147	8,578	-569	94%	27,255	25,417	-1,838	93%
Total Elective Admissions - Ordinary	1,250	1,081	-169	86%	3,652	3,154	-498	86%
Total Non-Elective Admissions - 0 LoS	3,411	3,074	-337	90%	10,615	9,332	-1,283	88%
Total Non-Elective Admissions - +1 LoS	5,359	4,787	-572	89%	16,718	14,050	-2,668	84%
Total A&E Attendances excluding Planned Follow Ups	27,441	24,090	-3,351	88%	82,840	71,231	-11,609	86%
Number of Completed Admitted RTT Pathways	5,765	3,408	-2,357	59%	17,432	10,182	-7,250	58%
Number of Completed Non-Admitted RTT Pathways	13,051	12,260	-791	94%	39,489	37,735	-1,754	96%
Number of New RTT Pathways (Clockstarts)	23,215	22,056	-1,159	95%	70,399	64,370	-6,029	91%
Total Referrals (General and Acute)	23,066	21,015	-2,051	91%	71,716	63,783	-7,933	89%
Total GP Referrals (General and Acute)	13,008	11,042	-1,966	85%	40,606	33,915	-6,691	84%
Consultant Led First Outpatient Attendances	19,091	16,079	-3,012	84%	57,682	48,813	-8,869	85%
Consultant Led Follow-Up Outpatient Attendances	38,694	35,212	-3,482	91%	117,363	106,952	-10,411	91%
Total Elective Admissions	10,397	9,659	-738	93%	30,907	28,571	-2,336	92%
Total Non-Elective Admissions	8,770	7,861	-909	90%	27,333	23,382	-3,951	86%

[Latest monthly and year to date comparisons](#)
This table shows the actual variance for each metric comparing the latest month and year to date positions as a proportion of the same periods in 19/20.

3.1 Urgent Care – Overall Summary

Drivers	Improvement Needs	Improvement actions
<ul style="list-style-type: none"> • Demand from ED ambulance conveyances, major acuity attendances and non-elective admissions remains below 2019/20 levels. The drivers behind performance challenges relate to: • Persistence of a very high number of No Criteria to Reside (NC2R) patients in acute beds effectively reduced the overall acute bed base and limits flow. In early August NC2R patients accounted for 46% of NBT and 33.7% of UHBW General & Acute beds. • Numbers of acute Pathway 0 (i.e. non-complex) discharges at weekends were below agreed standards at both UHBW and NBT. At the end of June, BRI and WGH reached weekend discharges rates of 52% and 34% of weekday rates respectively, against a target of 80%. NBT achieved 48.1% in the last week of July. • Discharges before noon were 16.1% in the last week of July at NBT, below the agreed standard of 33% ; UHBW achieved 34.6% at end of June. • Impact of covid on system flow, as a result of: • Covid sickness absences in all partners, which reached 499 by the start of July, in line with the covid wave in the community. This has reduced into August with 166 as at 15/8. This primarily impacted rates of simple and complex discharge, the ability to staff acute escalation beds, and capacity for admission avoidance and community services. • Persistently high acute covid inpatient numbers, flatlining with 73 on 15th August. Covid IPC, zoning and social distancing requirements continued to affect acute bed efficiency. • Significant staffing pressures in the 111 health advisor team (PPG) resulting from national contingency pressures on the Severnside/PPG service driven by virtual call centre consolidation in other parts of England, addition of new demand nationally to PPG from new contracts, and increased staffing absence. 	<ul style="list-style-type: none"> • Discharge to Assess (D2A) Pathways activity remains below required levels (see Integrated Care Performance Report) • Ambulance handover delays worsened in June: <ul style="list-style-type: none"> • NBT total time lost over 15 minutes worsened from 2,717 to 2,853 hours. • BRI total time lost over 15 minutes worsened from 1,859 to 2,950 hours. • WGH total time lost over 15 minutes worsened from 739 to 1,220 hours. • Handover delays continued to impact ambulance response times, including Cat 1 and Cat 2 performance which both worsened in July to mean 10:12s (against a 7 minute standard) and 1 hour 9mins (against an 18 minute standard) respectively, continuing to exceed standards with onward impact on quality / outcomes. • 12hr DTA breaches worsened from 873 to 1182 in BNSSG, this includes a large proportion in WGH due to bedding of patients overnight in ED to manage the take. • 111 validation of ED and 999 outcomes reduced due to staffing pressures. These factors also significantly increased call answering times and abandonment rates poor service levels in July. 	<ul style="list-style-type: none"> • D2A business case delivery and LGA peer review report and subsequent development of an action plan (or incorporation into existing plans). • Ambulance handover improvement plan focussed on ED-SWAST interface. Main actions focus on demand management, process improvement and reverse queueing capacity. • NBT sharing learning with UHBW nursing and ops teams regarding ED 'push' model and other actions which have reduced NBT handover delays. • Performance notice and remedial action plan in place with Severnside/PPG, forecast to recover Abandonment Rate <10% from second week of Sept 2022. Actions include: <ul style="list-style-type: none"> • Greater overtime rates • Recruitment and retention incentives and benefits inc. offering term time contracts • Increased training places, throughput and number of trainers • Increased targeted advertising of roles and streamlined recruitment process • Investigating support for call answering • Summer Bank Holiday operational planning session 19th August. • BNSSG UEC Collaborative merged with the UEC Steering Group to expand the remit to cover hospital flow. • Ongoing UEC Collaborative transformation programme. Prevention of Admission work now prioritised and brought together in new 'Specialised Networked Care Node'. Remote assessment transformation refocussed onto higher acuity patients and support to SWAST for CAT3_4 demand. Ongoing Community Emergency Medicine Pilot with ED consultant supporting SWAST crew. • NHSEI Support to BNSSG (IUEC team) via UEC collaborative with whole system diagnostics, dynamic modelling and NHS111 first. • UHBW (Every Minute Matters) and NBT initiatives are in place to increase weekend and pre-noon discharges.

3.1 Urgent Care – Summary Performance (including CRS measure set)

Theme	Ref	Indicator	Reporting level	Standard	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22
Pre hospital	1	Response times for ambulances (Category 2 Response time – 90th centile)	BNSSG ICB	0:40:00	2:49:42	1:55:00	3:00:12	3:59:06	3:36:36	3:47:36	2:38:24	4:06:36	5:01:42	3:06:18	1:28:54	2:17:36	2:47:00
	2	Reducing avoidable trips (conveyance rates) to Emergency Departments by 999 ambulances	BNSSG ICB	TBC	35.8%	39.6%	36.8%	35.6%	39.3%	39.6%	42.0%	37.8%	34.2%	37.7%	42.1%	40.0%	38.2%
	3	Proportion of contacts via NHS 111 that receive clinical input	BNSSG ICB	50%	58.0%	56.9%	54.9%	54.8%	55.1%	56.9%	59.6%	53.6%	50.4%	50.0%	48.5%	48.4%	
A&E	4	Percentage of Ambulance Handovers within 15 minutes	BNSSG Trusts	65%	30.02%	27.52%	25.37%	22.53%	23.60%	20.66%	19.44%	18.39%	16.95%	18.10%	22.60%	21.70%	15.85%
	5	Time to Initial Assessment – percentage of patients assessed within 15 minutes of arrival at A&E	NBT	TBC	54.4%	62.8%	52.7%	53.3%	62.8%	68.6%	72.4%	58.3%	50.7%	56.9%	68.5%	57.3%	47.2%
			BRI	TBC	60.7%	59.1%	56.0%	56.5%	60.3%	63.3%	68.3%	64.2%	54.1%	61.4%	54.3%	60.9%	60.5%
			Weston	TBC	52.4%	44.7%	40.9%	41.8%	42.4%	46.2%	42.2%	36.5%	34.9%	33.9%	32.3%	29.7%	30.1%
	6	Average (mean) time in Department – non-admitted patients (BNSSG patients only) (hh:mm)	NBT	TBC	4:24	4:03	4:02	4:04	4:03	3:54	4:02	4:54	5:06	4:37	3:54	6:19	6:05
			BRI	TBC	4:53	4:49	5:32	5:46	5:06	5:03	5:03	5:28	5:46	5:56	5:37	5:26	5:28
Weston			TBC	3:27	3:28	3:49	4:01	3:19	3:47	4:03	4:01	4:05	4:22	4:03	4:01	4:17	
Hospital	7	Hospital Average (mean) time in Department – admitted patients (BNSSG patients only) (hh:mm)	NBT	TBC	7:19	7:45	8:20	8:47	8:09	8:09	10:41	12:31	13:04	11:31	9:08	11:43	12:34
			BRI	TBC	7:59	8:01	9:51	10:02	9:50	9:55	10:22	11:41	12:20	11:28	9:25	8:54	10:20
			Weston	TBC	6:51	11:13	15:24	11:31	14:07	17:11	22:03	16:36	17:35	17:04	11:15	12:29	16:38
8	Clinically Ready to Proceed – time from ‘ready,’ to leaving ED	BNSSG patients	TBC	Awaiting further details													
Whole System	9	Patients spending more than 12 hours from Arrival in A&E	NBT		3.9%	4.5%	5.1%	6.0%	5.4%	5.9%	10.0%	12.7%	14.4%	11.6%	7.2%	16.0%	14.5%
			BRI	2%	7.4%	8.3%	12.3%	12.8%	12.5%	12.1%	14.0%	14.9%	15.3%	13.9%	10.9%	9.9%	13.3%
			Weston		7.4%	9.0%	8.0%	10.0%	12.0%	13.4%	14.5%	13.9%	13.9%	13.4%	10.8%	12.7%	15.8%
	10	Critical Time Standards (still in development)	TBC	TBC	Awaiting further details - measure still in development												

UEC CRS Measures

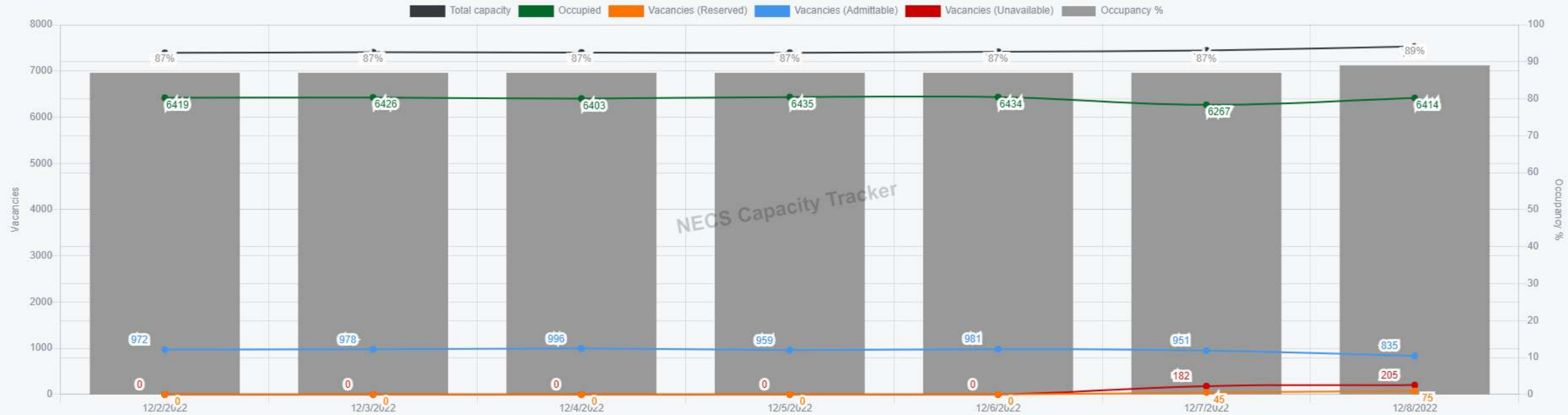
- This table represents the set of measures from the clinical review of access standards for urgent and emergency care.
- Technical definitions for two of the measures, are still to be published.

4h Waits in A&E	Jul-22	Jun-22	Variance	Change	Jul-19	Variance	Change	>12hr Waits in A&E from DTA	Jul-22	Jun-22	Variance	Change	Jul-19	Variance	Change
BNSSG	57.10%	61.80%	-4.7%	▼	77.71%	-20.6%	▼	BNSSG Trusts	1182	873	309	▲	18	1164	▲
NBT	50.99%	59.32%	-8.3%	▼	72.49%	-21.5%	▼	NBT	304	297	7	▲	0	304	▲
UHBW	60.15%	63.04%	-2.9%	▼	80.40%	-20.3%	▼	UHBW	878	576	302	▲	18	860	▲

Ambulance Handovers Time Lost >15 mins (Hours)	Jul-22	Jun-22	Variance	Change	Jul-19	Variance	Change
NBT	2,853	2,717	136	▲	167	2,686	▲
BRI	2,950	1,859	1,091	▲	98	2,852	▲
Weston	1,220	739	481	▲	55	1,165	▲

- Variance between latest month and previous month or latest month and same period in 19/20
- Change: Is the latest month better (Green Icon) or worse (Red icon) when compare to the previous month or same period in 19/20.
- RAG colours are based on comparison to national standards: **GREEN** = Achieved, **RED** = not achieved

3.1 Urgent Care – Care Homes Occupancy Report



NHS Region	Maximum Capacity	Vacancies (Total)	Vacancies (Admittable)	Vacancies (Unavailable)	Vacancies (Reserved)	Occupied	Admittable %	Unavailable %	Reserved %	Occupied %
South West (275 / 275 / 277)	7565	1122	842	205	75	6443	11%	3%	1%	85%
General Residential	1804	358	313	32	13	1446	17%	2%	1%	80%
General Nursing	1901	304	194	83	27	1597	10%	4%	1%	84%
Dementia Residential	1538	230	176	47	7	1308	11%	3%	0%	85%
Dementia Nursing	1179	138	80	34	24	1041	7%	3%	2%	88%
Learning Disability Residential	573	58	50	5	3	515	9%	1%	1%	90%
Mental Health Residential	281	25	21	3	1	256	7%	1%	0%	91%
Mental Health Nursing	166	7	7	0	0	159	4%			96%
Transitional	3	1	1	0	0	2	33%			67%
Learning Disability Nursing	74	1	0	1	0	73		1%		99%
YPD - Young Physically Disabled	22	0	0	0	0	22			6	100%
Community Care	24	0	0	0	0	24				100%

3.2 Planned Care – Drivers and Priority Actions

Top Improvement Drivers: August

Priority actions: August – September 2022

RTT

- 1. **104ww clearance** – capacity breaches to zero by end Aug (Complex/choice clearance drive by end Sept)
- 2. **78ww operational plan trajectory maintenance**
- 3. **Expansion of capacity** to support delivery.
- 4. Develop **opportunities for a collaborative system approach to drive improvement** in challenged pathways

- (1) Daily tracking and brokering of mutual aid by Trusts and via Region mutual aid process; Review of all 104ww choice – aim to TCI by end Sept or asap thereafter
- (1&2) Revision of Access Policy – inc. IST recommendations, paed transition and strengthen application of ‘choice’
- (3) Deliver weekend working, WLI’s and extended working days to increase capacity/ activity delivery
- (3) Progress capacity opportunities with existing and new ISP for long waiters and HVLC directed at source.
- (4) Progress system collaboration for future of derm (inc. cancer) and ENT pathways.

Diagnostics

- 5. Diagnostic **workforce capacity pressures** across system.
- 6. **Progress against regional ambitions** - to reduce to zero people waiting >26weeks & no more than 25% of people waiting >6 weeks by 31/03/23. Endoscopy performance (DM01) triggered Regional visit in Sept.
- 7. **Increase capacity (immediate/backlogs & sustained /future need)**- National visit highlighted need to focus on capacity (inc. whole pathways). Demand outstripping capacity, backlogs persist across all high volume modalities, esp Echo, Endoscopy. Demand modelling has identified need for sustained additional capacity.

- (5) Deep dive into key workforce challenges - scope and map current mitigations (successes, challenges and learning) and utilise workforce transformation expertise to identify alternative solutions
- (5) Progress at pace via Task and Finish Group implementation of a proof of concept project with local ISP to expedite training lists for endoscopists –collab partnership between ICB, NHSE, InHealth, HEE, NBT and UHBW
- (6) Improve DQ within WLMDS
- (6) Preparation for Regional visit – Endoscopy
- (6&7) Expanding endoscopy capacity – IS providers/additional sites; Developing EOI/BC for capital allocation
- (6&7) Increase system echo capacity – inc. exploration of further opportunities for overseas recruitment
- (6&7) WLIS /weekend working.
- (7) CDC business case progression (NHS and NHS/IS partnership options in development concurrently pending outcomes of National/Regional IS progression).

Outpatients

- 8. **Reducing, validating and prioritising** patients on outpatient waiting lists
- 9. **Halting growth / reducing the volume of overdue follow ups**
- 10. Increasing availability and utilisation of **advice and guidance**.

- (8) Super September planning - accelerate current Outpatient care initiatives (>78ww focus) as per locally identified priorities; Technical/administrative/clinical validation (78ww+) to identify suitable for MA and/ or virtual consultation; Outpatient waiting list validation and reduction at pace/scale via SCW support model – opportunity scoped /progressed;
- (9) Planning for follow up reductions; Pathway attention / system approach – e.g. ENT pathways, physio services; PIFU roll out to all specialities where clinically appropriate; Direct patients to PIFU pathway where appropriate
- (10.) Standardising processes to ensure consistent provision of A&G across all major specialities via eRS; A&G development - various inc. conversion to referral pilot (paed and rheumatology); expediting go-live for endocrinology and exploring derm development

Cancer

- 11. **Workforce capacity pressures**
- 12. **Max backlog position** (63+day recovery metric) deteriorating since Q1 – now Tier 1
- 13. **Pathways of challenge** –I (inc. focus on capacity/demand modelling, workforce, access to Diagnostics, referral management, space)

- (11) Deep dive into key workforce challenges in cancer services across the Trusts to scope and map current mitigations (successes, challenges and learning) and utilise workforce transformation expertise to identify alternative solutions
- (12) Increasing capacity through WLI’s, recruitment (substantive & locum)
- (12) Cleansing of PTL DQ issues.
- (13) Review of all speciality / divisional action plans (to inc. newly allocated SWAG funding)
- (13) Skin pathways mapping and review to identify opportunities for improvement, coordinated by ICB & driven by clinical design group (inc.A&G/AI/Telederm)
- (13) FIT Pathway & Colorectal 28 days Pathway focus – inc. application of new BSG Guidance

3.2 Planned Care – Summary Performance – June

BNSSG Population Level

NBT Total Provider

UHBW Total Provider

RTT 18 week Incomplete	Latest	Previous	Variance	Change	19/20	Variance	Change	Latest	Previous	Variance	Change	19/20	Variance	Change	Latest	Previous	Variance	Change	19/20	Variance	Change
Total Waiting List	80,712	76,803	3,909	▲	51,761	28,951	▲	42,326	40,634	1,692	▲	28,590	13,736	▲	60,404	57,940	2,464	▲	36,432	23,972	▲
No. >18 weeks	27,307	26,299	1,008	▲	6,132	21,175	▲	14,899	15,189	-290	▼	4,280	10,619	▲	24,910	24,149	761	▲	4,551	20,359	▲
No. >52 weeks	4,763	4,164	599	▲	22	4,741	▲	2,675	2,424	251	▲	17	2,658	▲	5,298	4,654	644	▲	13	5,285	▲
No. >78 weeks	744	801	-57	▼	N/A	N/A	N/A	443	473	-30	▼	N/A	N/A	N/A	926	975	-49	▼	N/A	N/A	N/A
No. >104 weeks	69	112	-43	▼	N/A	N/A	N/A	34	48	-14	▼	N/A	N/A	N/A	236	293	-57	▼	N/A	N/A	N/A
52ww as % of WL	5.9%	5.4%	0.5%	▲	0.0%	5.9%	▲	6.3%	6.0%	0.4%	▲	0.1%	6.3%	▲	8.8%	8.0%	0.7%	▲	0.0%	8.7%	▲
% Performance	66.17%	65.76%	0.4%	▲	88.15%	-22.0%	▼	64.80%	62.62%	2.2%	▲	85.03%	-20.2%	▼	58.76%	58.32%	0.4%	▲	87.51%	-28.7%	▼

Diagnostics	Latest	Previous	Variance	Change	19/20	Variance	Change	Latest	Previous	Variance	Change	19/20	Variance	Change	Latest	Previous	Variance	Change	19/20	Variance	Change
Total Waiting List	31,975	31,592	383	▲	21,896	10,079	▲	17,504	17,166	338	▲	11,158	6,346	▲	16,042	15,819	223	▲	11,682	4,360	▲
No. >6 weeks	12,297	12,049	248	▲	1,340	10,957	▲	7,177	6,889	288	▲	759	6,418	▲	6,221	6,311	-90	▼	761	5,460	▲
No. >13 weeks	7,598	7,539	59	▲	124	7,474	▲	4,897	4,780	117	▲	84	4,813	▲	3,616	3,697	-81	▼	57	3,559	▲
% Performance	38.46%	38.14%	0.3%	▲	6.12%	32.3%	▲	41.00%	40.13%	0.9%	▲	6.80%	34.2%	▲	38.78%	39.90%	-1.1%	▼	6.51%	32.3%	▲

Cancer	Latest	Previous	Variance	Change	19/20	Variance	Change	Latest	Previous	Variance	Change	19/20	Variance	Change	Latest	Previous	Variance	Change	19/20	Variance	Change
2 week waits	48.91%	57.06%	-8.1%	▼	86.89%	-38.0%	▼	39.21%	46.16%	-6.9%	▼	78.4%	-39.2%	▼	57.22%	67.99%	-10.8%	▼	95.9%	-38.7%	▼
2ww breast	22.83%	52.86%	-30.0%	▼	76.83%	-54.0%	▼	18.95%	46.03%	-27.1%	▼	78.65%	-59.7%	▼	N/A	N/A	N/A	N/A	N/A	N/A	N/A
28 day FDS (All Routes)	69.30%	72.62%	-3.3%	▼	N/A	N/A	N/A	70.87%	72.83%	-2.0%	▼	N/A	N/A	N/A	67.40%	73.19%	-5.8%	▼	N/A	N/A	N/A
31 day first treatment	91.31%	89.02%	2.3%	▲	93.38%	-2.1%	▼	85.53%	83.77%	1.8%	▲	88.03%	-2.5%	▼	92.88%	90.61%	2.3%	▲	95.08%	-2.2%	▼
31 day - Surgery	68.48%	70.91%	-2.4%	▼	86.21%	-17.7%	▼	51.85%	57.29%	-5.4%	▼	77.88%	-26.0%	▼	80.00%	76.27%	3.7%	▲	89.66%	-9.7%	▼
31 day - Drugs	95.83%	100.00%	-4.2%	▼	99.03%	-3.2%	▼	100.00%	100.00%	0.0%	◀▶	100.00%	0.0%	◀▶	94.77%	100.00%	-5.2%	▼	97.89%	-3.1%	▼
31 day - Radiotherapy	98.87%	100.00%	-1.1%	▼	91.88%	7.0%	▲	N/A	N/A	N/A	N/A	N/A	N/A	N/A	99.48%	100.00%	-0.5%	▼	91.89%	7.6%	▲
62 day	53.53%	57.96%	-4.4%	▼	76.02%	-22.5%	▼	48.40%	50.15%	-1.8%	▼	76.99%	-28.6%	▼	61.83%	70.95%	-9.1%	▼	84.06%	-22.2%	▼
62 day - Screening	43.48%	82.14%	-38.7%	▼	83.87%	-40.4%	▼	51.02%	82.14%	-31.1%	▼	95.56%	-44.5%	▼	25.00%	33.33%	-8.3%	▼	83.33%	-58.3%	▼

Key to Tables

- Latest month = **June** Previous month = **May** 19/20 = **June 2019** (pre-covid comparison)
- Variance: between latest month and previous month or latest month and same period in 19/20
- Change: Is the latest month better (Green Icon) or worse (Red icon) when compare to the previous month or same period in 19/20.
- RAG colours are based on comparison to national standards: **GREEN** = Achieved, **RED** = not achieved

3.3 Mental Health – Summary Performance

Mental Health, LD & Autism Metrics	Period	Standard	Latest	Previous	Variance	Change	19/20	Variance	Change
Dementia Diagnosis Rate	Jun-22	66.7%	65.4%	65.3%	0.1%	▲	68.5%	-3.1%	▼
EIP - 2ww Referral	May-22	60%	70.0%	76.9%	-6.9%	▼	85.0%	-15.0%	▼
IAPT Roll out (rolling 3 months)	May-22	6.25%	4.7%	4.4%	0.2%	▲	3.6%	1.1%	▲
IAPT Recovery Rate	May-22	50%	51.8%	50.6%	1.2%	▲	N/A	N/A	N/A
IAPT Waiting Times - 6 weeks	May-22	75%	92.4%	93.6%	-1.2%	▼	N/A	N/A	N/A
IAPT Waiting Times - 18 weeks	May-22	95%	99.5%	100%	-0.5%	▼	N/A	N/A	N/A
CYPMH Access Rate - 2 contacts (12m Rolling)	May-22	34%	30.5%	28.1%	2.5%	▲	5.4%	25.2%	▲
CYP with Eating Disorders - routine cases within 4 weeks	Q1 22-23	95.0%	91.4%	88.5%	2.8%	▲	80.2%	11.2%	▲
CYP with Eating Disorders - urgent cases within 1 week	Q1 22-23	95.0%	91.7%	83.3%	8.3%	▲	67.9%	23.8%	▲
SMI Annual Health Checks (12 month rolling)	Q1 22-23	60.0%	56.8%	45.7%	11.1%	▲	42.5%	14.3%	▲
Total Inappropriate Out of Area Placements (Bed Days)	May-22	N/A	470	450	20	▲	643	-173	▼
Percentage of Women Accessing Perinatal MH Services	May-22	8.6%	6.1%	5.8%	0.3%	▲	N/A	N/A	N/A
Reliance on inpatient care for people with a LD and/or autism - Adults in CCG beds	Jul-22	9	14	16	-2	▼	N/A	N/A	N/A
Reliance on inpatient care for people with a LD and/or autism - Adults in NHSE beds	Jul-22	13	19	21	-2	▼	N/A	N/A	N/A
LD Annual Health Checks delivered by GPs aged 14+	Jul-22	1275	795	581	214	▲	N/A	N/A	N/A
AWP Delayed Transfers of Care	Jul-22	3.5%	12.4%	10.6%	1.8%	▲	3.4%	9.0%	▲
AWP Early Intervention	Jul-22	60%	85.0%	63.1%	21.9%	▲	89.0%	-4.0%	▼
AWP 4 week wait referral to assessment	Jul-22	95%	84.33%	76.87%	7.5%	▲	96.30%	-12.0%	▼

Key to Table

- Latest = **Period** Previous = **Previous month / quarter** 19/20 = **same month or period in 19/20** (pre-covid comparison), where available
- Standard = National Standard, where available
- Variance: between latest period and previous period or latest period and same period in 19/20
- Change: Is the latest period better (Green Icon) or worse (Red icon) when compare to the previous period or same period in 19/20.
- RAG colours are based on comparison to national standards: **GREEN** = Achieved, **RED** = not achieved

4.1 South West Performance Benchmarking

Measure	Performance/Activity								South West Ranking							
	Recent Period	BSW	Dorset	Glos	Kernow	Somerset	BNSSG	Devon	National	BSW	Dorset	Glos	Kernow	Somerset	BNSSG	Devon
Diagnostics	Jun-22	38.70%	21.20%	19.50%	41.80%	27.80%	38.50%	35.60%	27.50%	6	2	1	7	3	5	4
A&E 4 Hour Performance	Jul-22	71.10%	69.30%	69.30%	77.60%	76.50%	66.30%	63.90%	71.00%	3	4	4	1	2	6	7
A&E 12 Hour Trolley Waits	Jul-22	55	104	629	645	66	1182	1145	29317	1	3	4	5	2	7	6
RTT Incomplete 18 Weeks	Jun-22	64.00%	59.30%	73.10%	62.00%	62.90%	66.20%	52.90%	62.20%	3	6	1	5	4	2	7
RTT Incomplete Total	Jun-22	85,734	91,839	61,210	59,621	54,427	80,749	158,252	6,725,633	54.0%	66.7%	18.6%	67.6%	50.9%	58.8%	87.1%
RTT Incomplete 52 Week Plus	Jun-22	3,207	5,686	1,422	3,793	2,892	4,764	14,666	355,774	3	6	1	4	2	5	7
Cancer 2 Week (All)	Jun-22	80.80%	62.30%	86.30%	822.00%	55.30%	48.90%	68.50%	77.70%	3	5	2	1	6	7	4
Cancer 2 week (Breast)	Jun-22	81.60%	92.80%	94.80%	11.90%	54.10%	22.80%	53.10%	66.10%	3	2	1	7	4	6	5
Cancer 31 Day Wait First Treatment	Jun-22	94.10%	98.10%	92.00%	92.10%	89.90%	91.30%	92.60%	91.80%	2	1	5	4	7	6	3
Cancer 31 Day Wait - Surgery	Jun-22	77.60%	92.60%	87.10%	87.10%	77.30%	68.50%	82.50%	80.50%	5	1	2	2	6	7	4
Cancer 31 Day Wait - Drug	Jun-22	96.50%	99.00%	100.00%	99.40%	100.00%	95.80%	100.00%	97.90%	6	5	1	4	1	7	1
Cancer 31 Day Wait - Radiotherapy	Jun-22	94.40%	99.30%	78.10%	100.00%	100.00%	98.90%	95.50%	91.20%	6	3	7	1	1	4	5
Cancer 62 Wait Consultant	Jun-22	82.40%	80.40%	76.00%	63.60%	88.00%	78.00%	67.50%	74.90%	2	3	5	7	1	4	6
Cancer 62 Wait Screening	Jun-22	80.60%	82.20%	88.00%	82.10%	58.30%	43.50%	74.10%	67.10%	4	2	1	3	6	7	5
Cancer 62 Wait Standard	Jun-22	70.00%	73.10%	56.20%	70.70%	60.60%	53.50%	56.20%	59.90%	3	1	5	2	4	7	5
Cancer 28 FDS	Jun-22	72.60%	68.50%	78.30%	72.50%	65.90%	69.30%	73.80%	70.40%	3	6	1	4	7	5	2

4.2 BNSSG ICB Scorecard

Theme	Indicator	Standard	21/22	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	22/23	
Urgent Care	A&E 4hr Waits - BNSSG Footprint	95%	73.03%	76.20%	72.61%	73.92%	73.50%	70.83%	70.71%	70.55%	71.55%	67.04%	67.44%	65.76%	72.74%	69.21%	66.32%	68.65%	
	A&E 4hr Waits - BNSSG Trusts	95%	64.98%	68.14%	62.71%	64.39%	64.22%	61.86%	62.65%	63.04%	64.19%	60.27%	59.73%	59.46%	65.46%	61.80%	57.10%	61.00%	
	>12hr DTA breaches in A&E - BNSSG Trusts	0	7139	150	352	271	494	623	765	696	1071	1211	1401	1169	755	873	1182	3979	
Planned Care	RTT Incomplete - 18 Weeks Waits	92%	65.39%	71.70%	71.66%	70.80%	69.74%	68.09%	67.98%	66.04%	65.53%	65.93%	65.39%	65.75%	65.76%	66.17%		66.17%	
	RTT Incomplete - Total Waiting List Size		74,505	67,485	68,886	70,942	70,914	71,292	71,134	70,653	70,869	71,772	74,505	75,720	76,803	80,712		80,712	
	RTT Incomplete - 52 Week Waits		3779	2676	2750	3138	3353	3664	3791	3902	4020	3864	3779	4052	4164	4763		4,763	
	RTT Incomplete - % of WL > 52 Weeks		5.07%	3.97%	3.99%	4.42%	4.73%	5.14%	5.33%	5.52%	5.67%	5.38%	5.07%	5.35%	5.42%	5.90%		5.90%	
	Diagnostic - 6 Week Waits	1%	37.90%	35.26%	36.72%	39.57%	38.73%	38.09%	36.09%	40.13%	40.79%	36.86%	37.90%	41.09%	38.14%	38.46%		38.46%	
	Diagnostic - Total Waiting List Size		32,024	27,402	27,382	26,949	27,673	27,987	28,809	29,304	30,640	30,517	32,024	32,109	31,592	31,975		31,975	
	Diagnostic - Number waiting > 6 Weeks		12,136	9,661	10,056	10,664	10,719	10,659	10,398	11,760	12,498	11,250	12,136	13,193	12,049	12,297		12,297	
Diagnostic - Number waiting > 13 Weeks		6,623	4,408	4,441	4,454	4,997	5,394	5,118	5,875	6,345	6,465	6,623	7,543	7,539	7,598		7,598		
Cancer	Cancer 2 Week Wait - All	93%	64.91%	58.32%	66.86%	75.87%	64.64%	60.99%	64.50%	67.27%	54.62%	70.34%	70.70%	61.38%	57.06%	48.91%		55.63%	
	Cancer 2 Week Wait - Breast symptoms	93%	28.22%	17.43%	72.95%	84.62%	75.37%	26.23%	6.25%	11.84%	8.82%	16.87%	17.86%	21.35%	52.86%	22.83%		30.68%	
	Cancer 28 day faster diagnosis standard (All Routes)	75%	66.40%	58.45%	69.83%	70.87%	64.38%	67.40%	69.69%	65.99%	55.43%	73.56%	73.09%	67.96%	72.62%	69.30%		70.12%	
	Cancer 31 Day first treatment	96%	92.45%	97.21%	97.29%	95.58%	95.31%	92.04%	88.51%	84.56%	87.44%	91.57%	88.79%	86.60%	89.02%	91.31%		89.02%	
	Cancer 31 day subsequent treatments - surgery	94%	81.11%	88.89%	91.00%	78.57%	82.35%	79.57%	79.66%	70.83%	69.42%	81.37%	75.21%	71.00%	70.91%	68.48%		70.20%	
	Cancer 31 day subsequent treatments - anti-cancer drugs	98%	98.97%	100.00%	99.35%	99.34%	99.36%	99.38%	98.68%	100.00%	95.89%	99.32%	97.99%	97.66%	100.00%	95.83%		97.84%	
	Cancer 31 day subsequent treatments - radiotherapy	94%	99.68%	99.39%	99.38%	100.00%	100.00%	100.00%	99.42%	100.00%	99.37%	99.44%	100.00%	100.00%	100.00%	98.87%		99.57%	
	Cancer 62 day referral to first treatment - GP referral	85%	68.74%	72.94%	71.05%	70.82%	60.16%	65.90%	74.47%	69.33%	61.43%	58.30%	65.99%	61.21%	57.96%	53.53%		57.37%	
	Cancer 62 day referral to first treatment - NHS Screening	90%	59.57%	71.43%	88.46%	46.15%	68.42%	46.43%	61.36%	47.22%	39.47%	68.00%	63.89%	55.56%	82.14%	43.48%		60.92%	
Quality	Total Number of C.diff Cases		303	48	26	24	25	26	10	24	26	22	17	23	20	25		68	
	Total Number of MRSA Cases Reported	0	38	6	5	1	2	1	3	6	7	0	3	4	2			7	
	Total number of Never Events	0	4	0	1	0	1	0	0	0	0	0	0	0				0	
	Eliminating Mixed Sex Accommodation (BNSSG CCG)	0	2	Reporting suspended due to Covid-19					1	0	0	0	0	1	1	0	2		3
	Eliminating Mixed Sex Accommodation (BNSSG Trusts)	0	0	Reporting suspended due to Covid-19					0	0	0	0	0	0	0	0	0		0
Mental Health	Dementia Diagnosis Rate - People 65+	66.7%	65.39%	64.79%	64.81%	64.17%	64.27%	63.94%	64.35%	64.16%	64.33%	64.79%	65.39%	65.34%	65.40%	65.40%		65.40%	
	EIP - 2ww Referral	60%	54.55%	63.64%	50.00%	25.00%	33.33%	37.50%	50.00%	60.00%	50.00%	54.55%	61.54%	76.92%	70.00%			70.00%	
	IAPT Roll out (rolling 3 months)	6.25%	4.33%	4.77%	4.76%	4.50%	4.23%	4.24%	4.88%	4.50%	4.80%	4.33%	4.73%	4.44%	4.66%			4.66%	
	IAPT Recovery Rate	50%	53.22%	52.54%	53.89%	52.30%	48.82%	52.83%	52.27%	45.06%	53.07%	53.22%	54.73%	50.60%	51.81%			51.81%	
	IAPT Waiting Times - 6 weeks	75%	91.53%	80.98%	87.37%	90.50%	87.43%	90.18%	87.36%	88.62%	89.67%	91.53%	90.34%	93.60%	92.42%			92.42%	
	IAPT Waiting Times - 18 weeks	95%	99.44%	98.37%	98.48%	98.88%	98.86%	99.39%	98.90%	98.80%	99.46%	99.44%	99.52%	100.00%	99.49%			99.49%	
	CYPMH Access Rate (rolling 12m)	34%	26.41%	25.01%	24.60%	24.60%	24.95%	24.83%	25.04%	25.24%	25.94%	26.41%	26.73%	28.08%	30.54%			30.54%	
	CYP with ED - routine cases within 4 weeks (quarterly)	95%	88.52%	86.97%	83.88%			86.09%			88.52%			91.35%			91.35%		
	CYP with ED - urgent cases within 1 week (quarterly)	95%	83.33%	80.36%	79.66%			79.17%			83.33%			91.67%			91.67%		
	SMI Annual Health Checks (quarterly)	60%	45.67%	12.07%	15.94%			31.44%			45.67%			56.81%			56.81%		
	Out of Area Placements (Bed Days)		420	650	820	879	595	475	450	465	465	420	465	450	470			470	

4.3 Provider Scorecard – NBT

Theme	Indicator	Standard	21/22	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-21	May-21	Jun-21	Jul-21	22/23
Urgent Care	A&E 4hr Waits - Trust	95%	61.48%	64.38%	54.36%	61.47%	61.75%	60.82%	60.17%	61.80%	60.78%	51.53%	52.74%	55.54%	72.71%	59.32%	50.99%	59.83%
	A&E 4hr Waits - Footprint	95%	69.58%	72.57%	65.50%	70.83%	70.96%	69.31%	68.10%	68.82%	68.03%	59.36%	61.25%	61.71%	77.70%	66.62%	60.85%	67.03%
	>12hr DTA breaches in A&E	0	1378	4	97	14	38	29	59	20	295	367	449	360	176	297	304	1137
Planned Care	RTT Incomplete - 18 Weeks Waits	1%	64.71%	74.98%	73.78%	73.16%	71.87%	70.37%	69.68%	66.67%	65.61%	65.17%	64.71%	64.23%	62.62%	64.80%		64.80%
	RTT Incomplete - Total Waiting List Size	Op Plan	39,101	32,946	34,315	35,794	36,787	37,268	37,297	37,264	37,210	38,498	39,101	39,819	40,634	42,326		42,326
	RTT Incomplete - 52 Week Waits	Op Plan	2242	1473	1544	1770	1933	2068	2128	2182	2284	2296	2242	2,454	2,424	2,675		2,675
	RTT Incomplete - % of WL > 52 Weeks		5.73%	4.47%	4.50%	4.94%	5.25%	5.55%	5.71%	5.86%	6.14%	5.96%	5.73%	6.16%	5.97%	6.32%		6.32%
	Diagnostic - 6 Week Waits	1%	40.25%	36.13%	38.91%	42.55%	42.83%	41.80%	40.32%	44.30%	45.45%	40.00%	40.25%	43.61%	40.13%	41.00%		41.00%
	Diagnostic - Total Waiting List Size		17,111	14,124	14,329	14,130	14,818	15,176	15,768	15,872	16,790	16,469	17,111	17,114	17,166	17,504		17,504
	Diagnostic - Number waiting > 6 Weeks		6,888	5,103	5,575	6,013	6,346	6,343	6,357	7,031	7,631	6,588	6,888	7,464	6,889	7,177		7,177
	Diagnostic - Number waiting > 13 Weeks		4,097	2,054	2,183	2,180	2,724	3,029	2,913	3,501	3,948	3,951	4,097	4,664	4,780	4,897		4,897
Cancer	Cancer 2 Week Wait - All	93%	51.63%	36.44%	53.40%	66.58%	51.22%	42.70%	53.75%	58.38%	41.42%	66.47%	69.78%	57.66%	46.16%	39.21%		47.22%
	Cancer 2 Week Wait - Breast symptoms	93%	27.21%	17.19%	71.23%	84.35%	74.64%	28.13%	6.15%	11.54%	6.90%	14.55%	16.78%	14.94%	46.03%	18.95%		24.49%
	Cancer 28 day faster diagnosis standard (All Routes)	75%	60.77%	43.56%	65.46%	66.77%	56.07%	59.95%	66.29%	57.52%	47.10%	72.01%	72.93%	66.82%	72.83%	70.87%		70.31%
	Cancer 31 Day first treatment	96%	89.09%	95.48%	95.77%	93.00%	91.89%	88.51%	86.94%	79.59%	79.18%	89.91%	80.99%	81.82%	83.77%	85.53%		83.72%
	Cancer 31 day subsequent treatments - surgery	94%	74.28%	84.62%	90.80%	72.84%	80.90%	69.62%	65.77%	65.59%	55.66%	80.68%	65.49%	62.77%	57.29%	51.85%		57.56%
	Cancer 31 day subsequent treatments - anti-cancer drugs	98%	97.90%	100.00%	100.00%	100.00%	95.45%	96.30%	100.00%	100.00%	92.31%	100.00%	83.33%	100.00%	100.00%	100.00%		100.00%
	Cancer 62 day referral to first treatment - GP referral	85%	64.36%	62.74%	68.59%	68.60%	56.98%	57.14%	74.07%	67.52%	56.88%	51.17%	58.66%	56.48%	50.15%	48.40%		51.38%
	Cancer 62 day referral to first treatment - NHS Screening	90%	64.40%	73.33%	86.36%	52.54%	75.00%	41.67%	68.75%	53.25%	50.00%	72.22%	70.59%	63.64%	82.14%	51.02%		66.08%
Quality	Total Number of C.diff Cases		62	10	6	2	5	4	1	6	6	1	6	7	4	5		16
	Total Number of MRSA Cases Reported	0	0	0	0	0	0	0	0	0	0	0	0	4	1	1		6
	Total Number of E.Coli Cases		48	4	1	6	3	6	3	2	6	3	5	5	4	3		12
	Number of Klebsiella cases		24	1	1	2	3	2	4	3	2	2	3	1	3	3		7
	Number of Pseudomonas Aeruginosa cases		10	0	3	1	2	0	0	0	2	1	0	2	0	0		2
	Eliminating Mixed Sex Accommodation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0
	Number of Never Events	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0		1
	VTE assessment on admission to hospital	95%		95.42%	95.59%	94.91%	94.90%	94.53%	93.84%	94.55%	93.80%	93.99%	92.63%	93.37%	92.50%			

4.4 Provider Scorecard – UHBW

Theme	Indicator	Standard	21/22	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-21	May-21	Jun-21	Jul-21	22/23
Urgent Care	A&E 4hr Waits - Trust	95%	66.79%	70.09%	66.97%	65.91%	65.47%	62.38%	63.90%	63.69%	66.01%	64.83%	63.26%	61.51%	61.69%	63.04%	60.15%	61.60%
	A&E 4hr Waits - Footprint	95%	74.75%	77.99%	76.07%	75.46%	74.73%	71.57%	71.98%	71.41%	73.34%	70.88%	70.46%	67.81%	70.28%	70.47%	68.96%	69.45%
	>12hr DTA breaches in A&E	0	5761	146	255	257	456	594	706	676	776	844	952	809	579	576	878	0
Planned Care	RTT Incomplete - 18 Weeks Waits	1%	59.17%	63.63%	63.13%	62.97%	61.76%	60.20%	60.25%	58.60%	58.73%	59.50%	59.17%	58.65%	58.32%	58.76%		58.76%
	RTT Incomplete - Total Waiting List Size	Op Plan	55,021	51,198	52,718	53,855	53,697	53,743	53,328	53,253	53,909	54,305	55,021	57,019	57,940	60,404		60,404
	RTT Incomplete - 52 Week Waits	Op Plan	3,920	3,114	2,893	2,925	3,110	3,248	3,318	3,558	3,599	3,604	3,920	4,362	4,654	5,298		5,298
	RTT Incomplete - % of WL > 52 Weeks		7.12%	6.08%	5.49%	5.43%	5.79%	6.04%	6.22%	6.68%	6.68%	6.64%	7.12%	7.65%	8.03%	8.77%		8.77%
	Diagnostic - 6 Week Waits	1%	39.05%	36.07%	35.38%	36.92%	35.53%	36.73%	34.60%	38.86%	39.45%	37.48%	39.05%	42.11%	39.90%	38.78%		38.78%
	Diagnostic - Total Waiting List Size		16,610	14,387	14,119	13,661	14,049	14,125	14,307	14,525	15,154	15,576	16,610	16,521	15,819	16,042		16,042
	Diagnostic - Number waiting > 6 Weeks		6,486	5,190	4,996	5,044	4,992	5,188	4,950	5,644	5,979	5,838	6,486	6,957	6,311	6,221		6,221
	Diagnostic - Number waiting > 13 Weeks		3,372	2,819	2,746	2,776	2,930	3,169	2,949	3,180	3,240	3,349	3,372	3,799	3,697	3,616		3,616
Cancer	Cancer 2 Week Wait - All	93%	82.37%	86.80%	87.66%	87.08%	82.33%	86.39%	80.30%	78.30%	71.03%	75.41%	66.51%	63.02%	67.99%	57.22%		62.96%
	Cancer 28 day faster diagnosis standard (All Routes)	75%	76.33%	78.37%	77.42%	76.72%	76.16%	77.64%	75.68%	78.65%	70.03%	77.86%	73.83%	72.02%	73.19%	67.40%		71.07%
	Cancer 31 Day first treatment	96%	92.90%	96.21%	97.19%	96.07%	97.73%	93.04%	84.18%	89.51%	91.11%	89.62%	93.50%	89.58%	90.61%	92.88%		91.06%
	Cancer 31 day subsequent treatments - surgery	94%	85.07%	91.23%	92.73%	88.14%	85.96%	88.00%	84.21%	86.00%	73.53%	80.00%	82.09%	83.33%	76.27%	80.00%		79.76%
	Cancer 31 day subsequent treatments - anti-cancer drugs	98%	99.28%	100.00%	99.37%	99.32%	100.00%	100.00%	98.72%	100.00%	97.28%	99.33%	99.35%	97.67%	100.00%	94.77%		97.45%
	Cancer 31 day subsequent treatments - radiotherapy	94%	99.53%	99.48%	99.41%	100.00%	100.00%	100.00%	99.47%	98.65%	97.89%	100.00%	100.00%	99.38%	100.00%	99.48%		99.62%
	Cancer 62 day referral to first treatment - GP referral	85%	76.05%	80.56%	76.18%	76.67%	69.75%	75.80%	80.00%	73.12%	68.09%	70.18%	78.05%	67.81%	70.95%	61.83%		66.85%
	Cancer 62 day referral to first treatment - NHS Screening	90%	50.28%	57.89%	86.67%	41.67%	33.33%	66.67%	23.08%	55.56%	39.13%	60.00%	55.56%	0.00%	33.33%	25.00%		16.67%
Quality	Total Number of C.diff Cases (HOHA)	89	82	14	7	4	6	7	3	6	6	8	2	6	4	10		20
	Total Number of MRSA Cases Reported	0	7	0	1	0	0	0	0	2	3	0	1	0	0	0		0
	Total Number of E.Coli Cases	119	75	5	5	8	8	8	8	2	7	5	9	13	10	5		28
	Number of Klebsiella cases		48	0	5	5	9	9	4	2	3	1	1	3	4	3		10
	Number of Pseudomonas Aeruginosa cases		15	1	1	2	4	0	2	2	1	0	0	1	1	1		3
	Eliminating Mixed Sex Accommodation	0	0	Reporting suspended due to Covid-19					0	0	0	0	0	0	0	0		0
	Number of Never Events	0	3	0	1	0	1	0	0	0	0	0	0	0	0			0
	Rate of slips, trips and falls per 1,000 bed days	4.8	4.83	4.41	4.59	4.76	4.87	4.80	4.57	5.20	5.54	4.85	5.50	5.54	4.78	4.09		4.80
	No. of Pressure Ulcers grade 2, 3 & 4 per 1,000 bed days	0.4	0.174	0.132	0.128	0.224	0.132	0.187	0.159	0.255	0.256	0.1	0.3	0.248	0.089	0.093		0.142
VTE assessment on admission to hospital (Bristol)	95%	83.3%	82.5%	82.1%	83.9%	85.7%	83.7%	84.3%	83.2%	83.8%	82.60%	82.20%	81.3%	81.9%	82.4%		81.9%	

4.5 Non-Acute Provider Scorecard

Provider	Indicator (BNSSG level - except ambulance handovers)	Standard	21/22	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	22/23
SWASFT	Category 1 - Average Duration (hr:min:sec)	0:07:00	0:08:48	0:08:06	0:08:00	0:09:18	0:10:12	0:09:30	0:10:18	0:09:00	0:09:48	0:11:06	0:09:54	0:08:48	0:09:24	0:10:12	0:09:36
	Category 1 - 90th Percentile Duration (hr:min:sec)	0:14:00	0:15:54	0:14:42	0:14:00	0:16:24	0:18:06	0:16:18	0:18:06	0:16:06	0:16:54	0:18:48	0:17:24	0:15:24	0:15:54	0:17:42	0:16:42
	Category 2 - Average Duration (hr:min:sec)	0:18:00	1:10:00	1:05:00	0:51:18	1:20:12	1:48:30	1:28:48	1:33:48	1:06:48	1:40:18	2:02:24	1:16:30	0:40:42	0:57:12	1:09:54	1:00:54
	Category 2 - 90th Percentile Duration (hr:min:sec)	0:40:00	2:54:24	2:49:42	1:55:00	3:00:12	3:59:06	3:36:36	3:47:36	2:38:24	4:06:36	5:01:42	3:06:18	1:28:54	2:17:36	2:47:00	2:24:18
	Category 3 - 90th Percentile Duration (hr:min:sec)	2:00:00	9:11:06	9:04:42	8:33:06	10:25:06	12:44:48	10:47:36	11:49:12	9:08:36	14:37:18	20:50:42	10:55:12	6:28:06	8:49:30	9:14:18	8:35:54
	Category 4 - 90th Percentile Duration (hr:min:sec)	3:00:00	8:00:06	7:27:54	6:56:12	6:38:54	12:16:18	12:06:48	5:58:30	4:39:30	14:06:36	30:34:36	13:58:36	6:02:18	5:44:00	10:35:54	8:56:48
	Ambulance Handovers - % within 15 minutes at NBT	65%	25.01%	24.12%	23.76%	23.89%	19.61%	20.98%	18.66%	16.38%	15.12%	14.73%	16.91%	21.04%	16.85%	13.60%	17.24%
	Ambulance Handovers - % within 30 minutes at NBT	95%	56.79%	54.90%	59.38%	55.13%	45.87%	53.00%	51.30%	44.66%	38.59%	38.26%	44.62%	54.07%	45.58%	42.95%	47.06%
	Ambulance Handovers - % within 60 minutes at NBT	100%	75.31%	72.53%	77.95%	75.08%	68.83%	73.17%	75.22%	64.96%	58.29%	57.20%	66.52%	77.46%	68.17%	67.86%	70.25%
	Ambulance Handovers - % within 15 minutes at BRI	65%	22.24%	24.31%	20.19%	15.53%	16.83%	14.43%	14.17%	14.10%	10.90%	11.67%	11.66%	13.95%	17.54%	9.66%	13.22%
	Ambulance Handovers - % within 30 minutes at BRI	95%	41.59%	41.16%	40.03%	31.71%	32.69%	32.08%	33.45%	29.21%	22.49%	23.34%	25.52%	34.80%	43.04%	26.27%	32.53%
	Ambulance Handovers - % within 60 minutes at BRI	100%	59.98%	59.45%	59.80%	50.30%	54.17%	54.51%	57.35%	47.63%	37.79%	39.27%	44.60%	56.17%	65.38%	48.33%	53.78%
	Ambulance Handovers - % within 15 minutes at WGH	65%	32.64%	42.46%	31.30%	25.63%	26.86%	22.69%	17.45%	19.49%	21.28%	17.58%	16.90%	24.97%	23.55%	15.07%	20.24%
	Ambulance Handovers - % within 30 minutes at WGH	95%	60.05%	71.03%	59.71%	53.75%	47.44%	46.53%	40.64%	48.35%	53.69%	40.90%	40.52%	52.37%	55.92%	36.42%	46.52%
Ambulance Handovers - % within 60 minutes at WGH	100%	75.17%	82.14%	73.66%	68.75%	62.79%	63.89%	63.83%	70.89%	74.47%	60.22%	58.19%	71.21%	72.74%	56.11%	64.78%	
SevernSide IUC	Average speed to answer calls (in seconds)	20 Sec	227	238	262	333	304	205	327	228	166	325	318	274	756		435
	% Triage Calls receiving Clinical Contact	50%	55.91%	54.34%	56.88%	54.85%	54.80%	55.12%	56.86%	59.56%	53.62%	50.36%	50.02%	48.54%	48.39%		49.04%
	% of callers allocated the first service offered by DOS	75%	67.51%	65.74%	65.12%	65.04%	68.99%	70.82%	72.24%	70.01%	69.95%	70.52%	70.03%	68.72%	69.25%		69.36%
	% of Cat 3 or 4 ambulance dispositions validated within 30mins	50%	59.52%	55.15%	64.04%	60.27%	58.17%	57.06%	64.83%	69.44%	51.29%	47.77%	53.07%	45.79%	38.01%		46.07%
	% of calls initially given an ED disposition that are validated	50%	61.69%	53.41%	73.13%	62.12%	59.99%	70.50%	73.31%	78.29%	49.31%	30.61%	24.18%	13.18%	13.78%		17.14%
AWP	Delayed Transfers of Care	3.5%	10.7%	7.5%	7.6%	10.8%	8.8%	8.5%	10.4%	11.4%	13.4%	11.1%	10.3%	13.4%	10.6%	12.4%	
	Early Intervention	60%	49.1%	45.0%	12.5%	44.4%	35.7%	57.8%	38.4%	33.3%	72.7%	61.9%	76.9%	55.0%	63.1%	85.0%	
	4 week wait Referral to Assessment	95%	80.72%	92.49%	84.39%	81.58%	83.50%	84.40%	81.05%	70.02%	80.63%	80.72%	78.92%	76.86%	76.87%	84.33%	

22/23 Operational Plan Key Performance Metrics

Progress against key metrics at August 2022

Contents

This report provide an update on the current progress against the key performance metrics which form part of the 22/23 Operational Plan.

Whilst most plans are set monthly, some plans are set quarterly and so progress cannot be currently assessed.

Additional metrics from the operational plan will be included in this report once data has been sourced.

- Urgent Care
- Planned Care – RTT
- Planned Care – Diagnostics
- Planned Care – Cancer
- Planned Care – Children’s wheelchairs
- Mental Health, Learning Disabilities and Autism
- Length of Stay >21 days
- Personalisation

Urgent Care

A&E attendances

- The table shows the number of A&E attendances at total provider level for NBT and UHBW compared to the 22/23 Operational Plan.

A&E Attendances		22/23 Operational Plan											Plan achieved in latest month?	
		Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23		Mar-23
NBT	Type 1&2	7,942	8,700	8,319	8,343									Yes
	Plan	7,919	8,492	8,290	8,908	8,639	8,692	8,587	8,168	8,516	8,603	8,078	8,445	
UHBW	Type 1&2	15,235	16,778	16,528	16,751									No
	Plan	15,680	16,202	15,680	16,202	16,202	15,680	16,202	15,680	16,202	16,202	14,634	16,202	

Worse than Plan

Better than Plan

Planned Care – RTT

RTT Incomplete Pathway

- The table shows the total waiting list and the number of patients waiting 52, 78 and 104 weeks or more at total provider level for NBT and UHBW compared to the 22/23 Operational Plan.

		22/23 Operational Plan												Plan achieved in latest period?
EB.3a	RTT Waiting List	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	
NBT	Total Waiting List	39,819	40,634	42,326										No
	Plan	39,865	40,755	40,881	41,023	40,105	39,255	39,389	37,977	37,231	37,959	38,024	39,224	
UHBW	Total Waiting List	57,019	57,940	60,404										No
	Plan	57,019	56,948	56,560	56,206	56,912	55,581	55,249	54,883	54,600	54,295	54,002	53,649	
EB.18 RTT 52+ week waits		Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	
NBT	52+ week waiters	2,454	2,424	2,675										No
	Plan	2,561	2,158	2,201	2,200	2,239	2,372	2,559	2,816	2,892	2,973	3,160	3,660	
UHBW	52+ week waiters	4,362	4,654	5,298										No
	Plan	4,362	4,478	4,829	4,652	4,631	4,608	4,585	4,559	4,539	4,518	4,497	4,472	
EB.18 RTT 78+ week waits		Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	
NBT	78+ week waiters	491	473	443										Yes
	Plan	420	489	479	469	469	458	443	438	470	502	542	568	
UHBW	78+ week waiters	944	975	926										Yes
	Plan	944	961	1,050	1,002	1,066	1,025	977	922	863	805	745	675	
EB.19 RTT 104+ week waits		Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	
NBT	104+ week waiters	71	48	34										Yes
	Plan	71	68	48	48	48	48	48	48	48	48	48	48	
UHBW	104+ week waiters	349	293	236										No
	Plan	349	281	197	182	167	138	109	87	72	50	33	29	

Worse than Plan
Better than Plan

Planned Care – Diagnostics

Diagnostic activity levels

- The table shows the monthly activity for specific diagnostic tests at total provider level for NBT and UHBW compared to the 22/23 Operational Plan

Diagnostics Activity Levels		22/23 Operational Plan											Plan achieved in latest month?		
		Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23		Mar-23	
NBT	MRI	2,804	3,154	3,024										No	
	Plan	2,836	3,392	3,266	3,179	3,214	3,207	3,340	3,506	2,927	3,526	3,132	3,652		
	CT	7,178	7,728	7,547											No
	Plan	7,286	8,362	8,051	7,838	7,925	7,906	8,236	8,644	7,216	8,692	7,721	9,003		
	Non-obstetric Ultrasound	7,849	8,526	7,510											No
	Plan	7,881	8,047	7,748	7,542	7,626	7,608	7,925	8,318	6,944	8,365	7,430	8,664		
	Colonoscopy	193	249	130											No
	Plan	194	175	157	245	266	294	195	241	216	180	203	293		
	Flexi Sigmoidoscopy	153	139	74											No
	Plan	155	195	226	280	314	341	297	273	293	206	203	338		
	Gastroscopy	268	292	155											No
	Plan	269	276	282	388	325	431	330	402	321	282	219	460		
Cardiology - Echocardiography	572	617	601											No	
Plan	573	610	620	715	702	717	736	717	681	696	680	736			
UHBW	MRI	2,499	2,657	2,522										No	
	Plan	3,175	2,962	3,312	3,348	3,341	3,361	3,218	3,488	2,598	2,771	2,863	3,625		
	CT	7,167	8,283	7,359											Yes
	Plan	6,901	7,065	6,919	6,863	6,742	6,795	6,960	6,937	6,470	6,320	6,133	7,259		
	Non-obstetric Ultrasound	4,430	5,341	4,766											No
	Plan	4,275	4,157	5,230	4,785	4,337	4,715	4,657	4,828	4,255	3,936	3,864	4,394		
	Colonoscopy	161	446	353											No
	Plan	373	306	372	382	330	489	448	485	288	320	382	501		
	Flexi Sigmoidoscopy	83	178	160											Yes
	Plan	186	130	119	119	133	145	172	163	116	153	153	181		
	Gastroscopy	289	384	422											Yes
	Plan	435	252	266	332	378	431	459	317	321	379	465	523		
Cardiology - Echocardiography	1,365	1,592	1,400											No	
Plan	1,666	1,785	1,762	1,773	1,795	1,795	1,578	1,901	1,594	1,662	1,661	1,945			

Worse than Plan

Better than Plan

better health

Planned Care – Wheelchairs

Children waiting less than 18 weeks for a wheelchair

- The table shows the % of children in BNSSG that waited less than 18 weeks for a wheelchair compared to the 22/23 Operational Plan.

Children Wheelchairs 18 weeks or less	22/23 Operational Plan				Plan achieved in latest quarter?
	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23	
% within 18 weeks	75.0%				No
Plan - % in 18 weeks	80.23%	85.12%	89.80%	91.98%	
Number within 18 weeks	129				
Plan - Number within 18 weeks	138	143	132	149	
Total	172				
Plan - Total	172	168	147	162	

Worse than Plan

Better than Plan

Planned Care – Cancer

Cancer Activity

- The table shows the monthly cancer activity at BNSSG population level and total provider level for NBT and UHBW compared to the 22/23 Operational Plan.
- Please note there are some data quality issues with NBT's reported figures for E.B.32. The reported figures are higher than expected and will be updated once the data quality process has been completed.

		22/23 Operational Plan											Plan achieved in latest month?	
E.B.31	Treatment Volumes	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23		Mar-23
BNSSG	Number of receiving 1st treatment	403	410	426										Yes
	Plan	435	422	416	427	432	438	459	458	430	430	430	467	
NBT	Number of receiving 1st treatment	231	228	235										Yes
	Plan	233	240	233	245	251	258	282	281	249	249	249	291	
UHBW	Number of receiving 1st treatment	259	277	281										Yes
	Plan	280	280	280	280	280	280	280	280	280	280	280	280	
E.B.32	Number waiting 63 days or more	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	
NBT	Number waiting 63+ days	641	689	568	793									No
	Plan	546	410	345	345	345	345	345	345	345	345	345	345	
UHBW	Number waiting 63+ days	179	205	233	276									No
	Plan	179	205	235	220	200	180	180	180	180	180	180	180	

Worse than Plan

Better than Plan

Planned Care – Cancer

Cancer – 28 day Faster Diagnosis Standard (FDS) (All routes)

- The table shows the monthly performance for the 28 day FDS cancer standard at BNSSG population level and total provider level for NBT and UHBW compared to the 22/23 Operational Plan.

E.B.27 28 day FDS (All Routes)		22/23 Operational Plan											Plan achieved in latest month?	
		Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23		Mar-23
BNSSG	% Told within 28 days	68.0%	72.6%	69.3%										Yes
	Plan - % Told within 28 days	75.2%	71.5%	69.1%	71.6%	71.8%	69.5%	70.3%	73.0%	71.0%	73.0%	74.0%	74.2%	
	Number told within 28 days	2,219	2,822	2,246	0	0	0	0	0	0	0	0	0	
	Plan - Number told within 28 days	2,320	2,331	2,491	2,661	2,572	2,619	2,642	2,798	2,452	2,589	2,633	2,868	
	Total told	3,265	3,886	3,241	0	0	0	0	0	0	0	0	0	
	Plan - total Told	3,087	3,262	3,605	3,714	3,580	3,769	3,759	3,832	3,455	3,548	3,559	3,864	
NBT	% Told within 28 days	66.8%	72.8%	70.9%										Yes
	Plan - % Told within 28 days	65.1%	70.3%	66.9%	70.7%	71.0%	67.6%	68.8%	72.8%	69.6%	72.7%	74.2%	74.6%	
	Number told within 28 days	1,309	1,667	1,382	0	0	0	0	0	0	0	0	0	
	Plan - Number told within 28 days	1,180	1,489	1,655	1,831	1,739	1,788	1,812	1,973	1,615	1,757	1,802	2,046	
	Total told	1,959	2,289	1,950	0	0	0	0	0	0	0	0	0	
	Plan - total Told	1,813	2,119	2,475	2,588	2,449	2,645	2,635	2,711	2,319	2,416	2,427	2,744	
UHBW	% Told within 28 days	72.0%	73.2%	67.4%										No
	Plan - % Told within 28 days	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	
	Number told within 28 days	1,140	1,398	1,015	0	0	0	0	0	0	0	0	0	
	Plan - Number told within 28 days	1,050	1,050	1,050	1,050	1,050	1,050	1,050	1,050	1,050	1,050	1,050	1,050	
	Total told	1,583	1,910	1,506	0	0	0	0	0	0	0	0	0	
	Plan - total Told	1,400	1,400	1,400	1,400	1,400	1,400	1,400	1,400	1,400	1,400	1,400	1,400	

Worse than Plan
Better than Plan

Mental Health, LD & Autism 1

- The table shows the quarterly plans set out in the 22/23 Operational Plan.
- The publication of MH, LD & Autism data lags behind that of other data sets.

Mental Health	22/23 Operational Plan				Plan achieved in latest quarter?
	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23	
Mental Health Services Dataset - Data Quality Maturity Index Score					
Plan	94	94	95	95	
Adult mental health inpatients receiving a follow up within 72hrs of discharge					
Plan	80%	80%	80%	80%	
Inappropriate adult acute mental health Out of Area Placement (OAP) bed days					
Plan	2,293	1,350	1,076	756	
Inappropriate adult acute mental health Out of Area Placement (OAP) bed days					
Plan	1,665	927	764	567	
Total access to IAPT services					
Plan	7,101	7,320	7,658	7,856	
Estimated diagnosis rate for people with dementia	65.4%				No
Plan	66.7%	66.7%	66.7%	66.7%	
% of CYP with Eating Disorders - routine cases within 4 weeks (rolling 12 months)	91.4%				Yes
Plan	85.24%	85.24%	90.06%	90.06%	
% of CYP with Eating Disorders - urgent cases within 1 week (rolling 12 months)	91.7%				No
Plan	95.83%	95.83%	95.83%	95.83%	
People with SMI receiving a full annual physical health check and follow up interventions	4507				No
Plan	5,498	6,292	6,506	6,724	
Women Accessing Specialist Community Perinatal Mental Health Services					
Plan	275	549	824	1,099	
Access to Individual Placement and Support Services					
Plan	179	357	536	714	
Access to Core Community MH Services for Adults and Older Adults with SMI					
Plan	1,400	1,900	2,500	4,200	
First Episode Psychosis treatment within two weeks of referral					
Plan	60.29%	60.29%	60.29%	60.29%	
Access to CYP Mental Health Services - 1 contact (rolling 12 months)					
Plan	6,284	7,088	7,833	8,948	

Mental Health, LD & Autism 2

- The table shows the quarterly plans set out in the 22/23 Operational Plan.
- The publication of MH, LD & Autism data lags behind that of other data sets.

Learning Disability & Autism	22/23 Operational Plan				Plan achieved in latest quarter?
	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23	
Learning disability registers and annual health checks delivered by GPs					
Plan	530	596	1,119	1,580	
Reliance on inpatient care for people with a LD and/or autism - Adults in CCG beds	16				No
Plan	15	15	14	13	
Reliance on inpatient care for people with a LD and/or autism - Adults in NHSE beds	21				No
Plan	15	15	14	13	
Reliance on inpatient care for people with a LD and/or autism - Care for children					
Plan	3	3	3	3	

Worse than Plan
Better than Plan

Length of Stay >21 Days

Number of patients with a length of stay 21 days or over

- The table shows the number of patients in hospital for over 21 days at both NBT and UHBW compared to the 22/23 Operational Plan.
- The figure is a snapshot at the end of each month.
- July data was not available for NBT from the national data source. An alternative data source is being sought.

		22/23 Operational Plan											Plan achieved in latest month?	
LOS >21 Days		Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23		Mar-23
NBT	Number of patients with a LOS 21 days or over	220	212	218	N/A									No
	Plan	163	158	142	150	167	171	146	155	154	187	191	172	
UHBW	Number of patients with a LOS 21 days or over	215	171	184	194									No
	Plan	180	177	174	173	170	167	166	164	161	159	157	155	

Worse than Plan

Better than Plan

Personalisation

- The table shows the quarterly plans set out in the 22/23 Operational Plan.
- The Q1 national submission for PHBs was underreported at 659. The actual Q1 position is show in the table below.
- The difference will be included in the national submission for Q2.

Personal Health Budgets	22/23 Operational Plan				Plan achieved in latest quarter?
	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23	
Number of personal health budgets that have been in place, at any point during the financial year to date, per ICS	1,133				No
Plan	1,350	2,025	2,700	3,375	
Social Prescribing Referrals	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23	
Total number of FTE PCN Network Contract DES funded social prescribing link workers employed in a year					
Plan	50	52	54	56	
Personalised Care & Support Planning	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23	
Total number of active (new and reviewed) PCSPs that have been in place in the financial year to date.					
Plan	10,116	11,133	12,160	13,182	

Worse than Plan

Better than Plan