

Black Country ICB System Assurance Report

ICB Board 30th November 2023



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Performance by Exception



The data within this report focuses primarily on assessing the ICB / ICS Performance against the agreed target / standard alongside the making data count methodology.

For clarity the following definitions apply to the differing uses of data.

ICB (Integrated Care Board) : Performance is based on the registered population associated with our ICB.

ICS (Integrated Care System) : Performance is based on the aggregate performance across the relevant providers within our system.

On some tabs in the pack it will show no data available, this is due to the specific measure being ICB / ICS specific

Frequency of Reporting

While the report aims to use the most up to date publicly available / validated data there may be occasions where due to reporting timelines there is a delay. More current / non validated data will support the data within this report however may differ to the final published position.

For any queries regarding the content of this report please contact : bcicb.businessintelligence@nhs.net

Report Statistical Overview : Making data count



This performance report is developed around the nationally recognised making data count methodology, as part of this it incorporates Statistical Process Control (SPC) charts, which plot data over time around a centre line (the average)

They help us to understand variation which guides us to make appropriate decisions.

The Upper Control Limit (UCL) and Lower Control Limit (LCL) are derived by the variability of the data, it is expected that almost all of the data points will fall within these limits as long as the process remains in-control.

Special Cause Concerning – This indicates that special cause variation is occurring in a metric, with the variation being in an adverse direction.

Special Cause Improving – This indicates that special cause variation is occurring in a metric, with the variation being in an favourable direction.

Consistently missing target - This indicates three or more consecutive data points where the indicator is not meeting the required target.

Consistently Hitting target - This indicates three or more consecutive data points where the indicator is meeting the required target.

Further detail on the methodology utilised can be accessed by visiting the below link



















<https://improvement.nhs.uk/resources/making-data-count>

Summary Matrix Overview



		Assurance		
		Pass	Hit & Miss	Falling Below
V a r i a t i o n	Special Cause - Improvement  	1	16	4
	Common Cause - Random 	4	118	14
	Special Cause - Concern  	0	13	9

Key Indicators

Special Cause Concern Missing Target

Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target
Adult Acute LoS Over 60 Days % of total discharges	BC ICS	NOF 23/24	June 2023	18%	%		
Antimicrobial resistance: total prescribing of antibiotics in primary care	BC ICB	NOF 23/24	June 2023	108%	87%		
Clostridium difficile infection rate	BC ICB	NOF 23/24	July 2023	130%	100%		
Clostridium difficile infection rate	BC ICS	NOF 23/24	July 2023	158%	100%		
E. coli bloodstream infection rate	BC ICB	NOF 23/24	July 2023	109%	100%		
Percentage of Incomplete RTT pathways within 18 weeks of referral	BC ICB	NOF 23/24	August 2023	53%	92%		
Percentage of Incomplete RTT pathways within 18 weeks of referral	BC ICS	NOF 23/24	August 2023	54%	92%		
The % of patients waiting 6 weeks or more for a diagnostic test	BC ICB	NOF 23/24	August 2023	41%	15%		
The % of patients waiting 6 weeks or more for a diagnostic test	BC ICS	NOF 23/24	August 2023	43%	15%		

Special Cause Improvement Hitting Target

Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target
Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care	BC ICB	NOF 23/24	June 2023	6%	10%		

Domain:

Select Indicator :

Antimicrobial resistance: total prescribing of antibiotics in primary care

Rank Quartile	Rank
Lowest performing quartile	32/42

Not reported at this level

Assurance

Variation

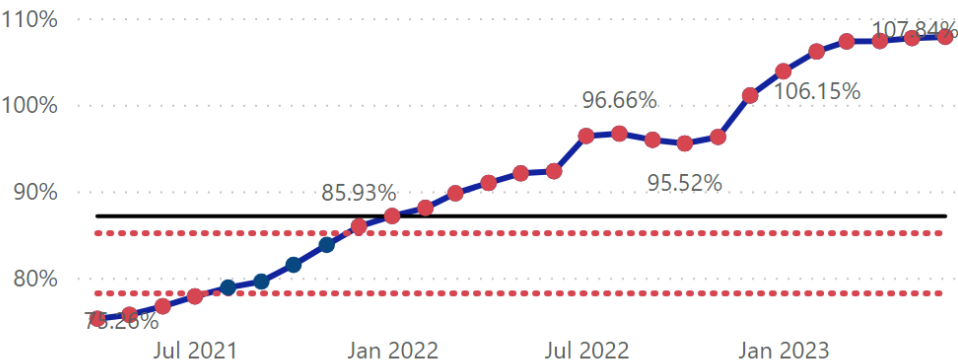
Key

- .- Actual
- Plan
- Target

Latest Period

Source

BC ICB : Antimicrobial resistance: total prescribing of antibiotics in primary care



Latest Period

June 2023

Source

NHS Oversight Framework

Assurance



Variation



Key

- .- Actual
- Plan
- Target

Summary

This measure looks to promote the reduction of prescribing of antibiotics to reduce resistance for when they are needed. Total volume antibiotic prescribing per STAR-PU (target at/below 0.871) has been increasing month on month but is now slowing down (1.078 June 2023 data). Only 6 out of 42 organisations nationally are at or below target, none of which are within the Midlands region. The effects of the invasive group A strep (iGAS) outbreak on future health seeking behaviour for this and subsequent winters is unknown.

Actions

- Plans to reduce prescribing rates include:
- An incentive scheme in place to encourage reduction in prescribing over the coming year which will be supported by education events for all prescribers and specific support for higher prescribing practices.
 - Engagement with LAs to help with messaging to patients along with work in schools and our local university.
 - Continuing to provide specialist support to the national vaccination campaigns and Covid-19 therapeutic pathways.
 - Using Antibiotic awareness week 2023/2024 to raise awareness across the system using UKHSA provided resources and local initiatives.

Assurance

The consumption targets for acute trusts and Primary care were both not met across the system for 2022/23. Achieving a total reduction enough to achieve the 2023/24 target will be very challenging and will be dependent on the following assumptions: Supply chain will remain stable, no further Pandemic or mass outbreaks negatively impacting consumption data, enough AMS workforce to deliver the targets both local and national and additional funding to improve the workforce will have a positive impact on the delivery. Antibiotics consumption across primary and secondary care will be continuously monitored with emphasis on finding ways to achieve the set targets. This will be done via the ICS Antimicrobial Stewardship group. It is also a regular item at the ICB Quality and Safety Committee.

Clostridium difficile infection rate

Domain:

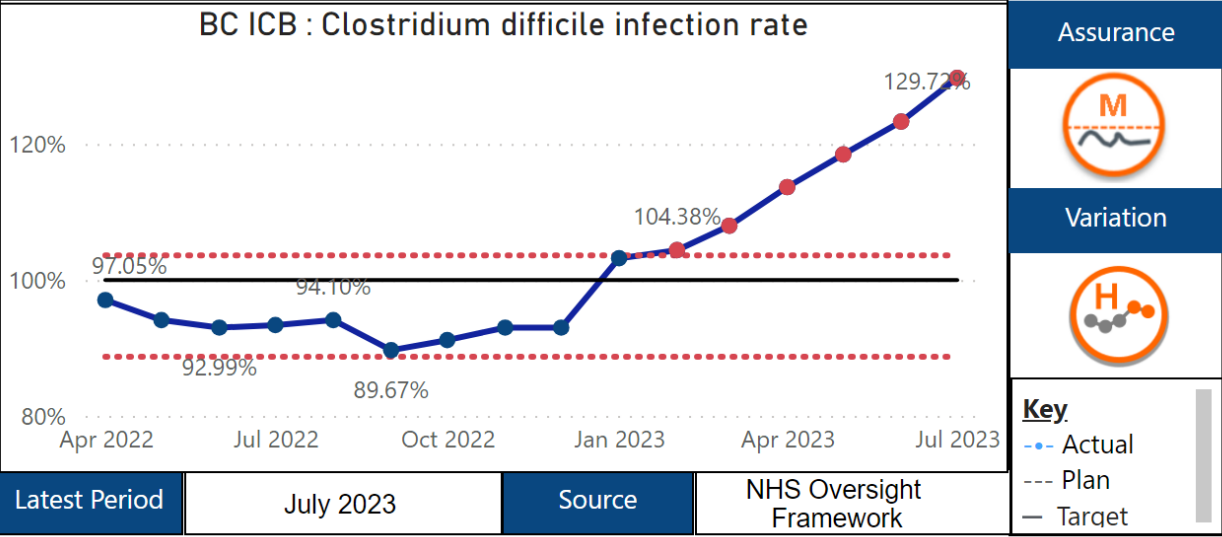
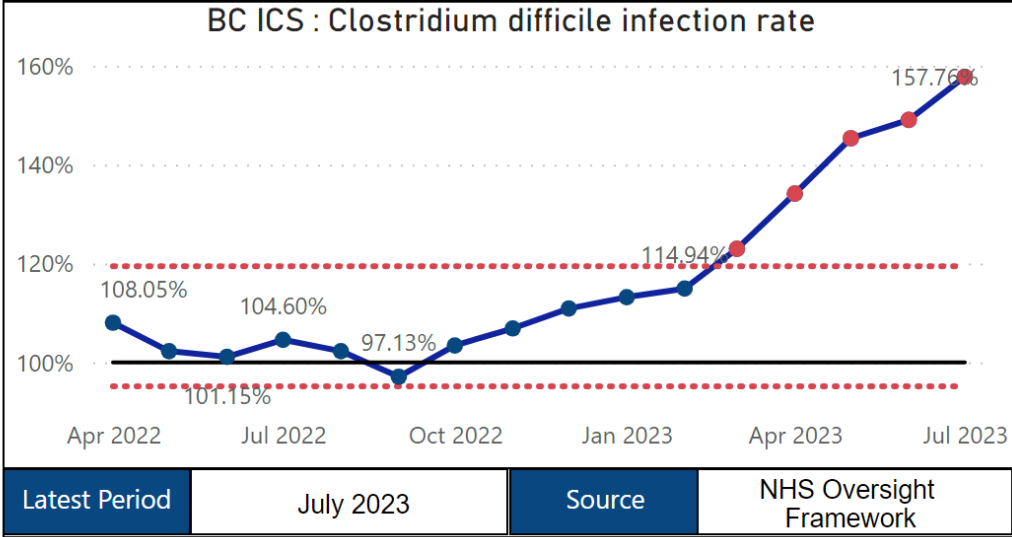
Select Indicator :

Clostridium difficile infection rate

Rank Quartile

Rank

Lowest performing quartile 35/42



Summary

Performance at or below 100% is better for this measure as it assesses the actual number of infections reported against targets set by NHSE.

BC ICS July 2023 performance of 157.8% reported 254 infections across the four BC Trusts against an aggregated target of 161 - this ranks BC ICS performance 35th out of 42 systems nationally, with the national average being 131%.

At an ICB level, there were 323 infections reported against a target of 249, giving a July performance of 129.7% which also ranks the ICB 35th out of 42.

Actions

The Health Protection, Prevention and Improvement Q1 Report presented to the ICB Quality and Safety Committee identified the following trends for 2023/24 HCAIs and Outbreaks;

- Inappropriate prescribing of antibiotic therapy linked to avoidable CDI cases.
- Increased capacity issues impacting on the timely placement of infectious patients, resulting in bay cohorting.
- Audits identified hand hygiene compliance across all Trusts continues to be an issue and possibly a contributing factor.
- Identified gaps in environmental cleanliness Trust wide, due to capacity pressures, is a potential source of cross contamination.
- Delays in specimen sampling .

Assurance

The ICB has limited assurance that 2023/24 targets will be achieved.

Work is underway to implement the following quality improvements;

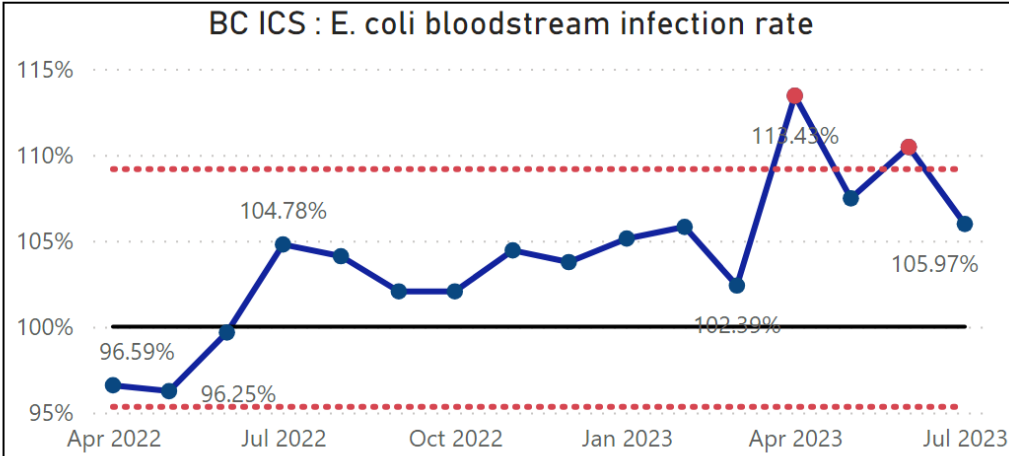
- Monthly system meetings are in progress with Acute Trust IPC leads to discuss, highlight, and update on any IPC issues, concerns, or national guidance changes to ensure aligned collaborative system working.
- Bi-monthly HPP Group meetings to aid collaborative system working.
- Quarterly system meetings with LA HP leads are in progress.
- A monthly IPC bulletin produced covering topical issues/hot topics and seasonal IPC issues such as UTI and hydration and summer illnesses. These have been shared with Primary Care via Primary Care bulletin, Care Home newsletter and Care Home app as well as Care Home webinar.

Domain:

Select Indicator :

E. coli bloodstream infection rate

Rank Quartile	Rank2
Highest performing quartile	5/42



Assurance

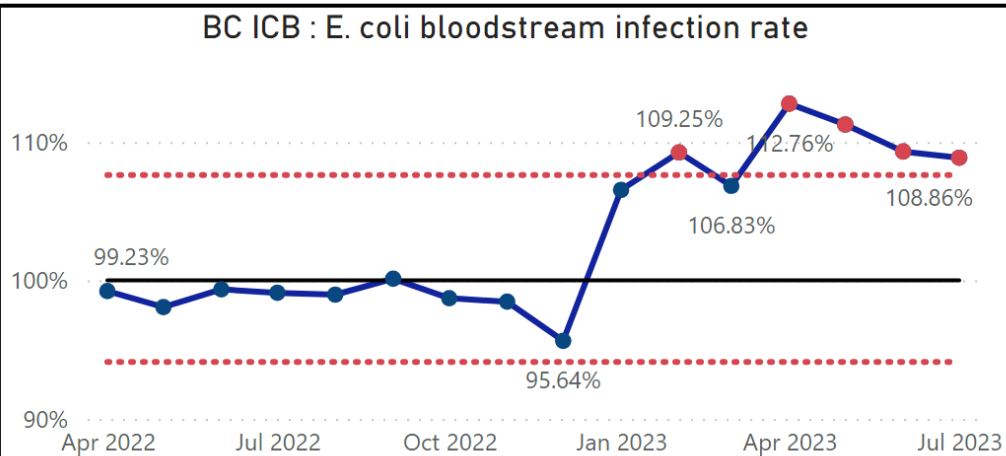


Variation



Key

--- Actual
--- Plan
--- Target



Assurance



Variation



Key

--- Actual
--- Plan
--- Target

Latest Period

July 2023

Source

NHS Oversight Framework

Latest Period

July 2023

Source

NHS Oversight Framework

Summary

Performance at or below 100% is better for this measure as it assesses the actual number of infections reported against targets set by NHSE. BC ICS July 2023 performance of 106% reported 284 infections across the four BC Trusts against an aggregated target of 268. Despite this ranking BC ICS performance 4th out of 42 systems nationally (with the national average being 124.4%), the system remains in special cause variation for this measure. At an ICB level, there were 725 infections reported against a target of 666, giving a July performance of 108.9% which ranks the ICB 5th out of 42.

Actions

The Health Protection, Prevention and Improvement Q1 Report presented to the ICB Quality and Safety Committee identified the following trends for 2023/24 HCAs and Outbreaks;

- Inappropriate prescribing of antibiotic therapy linked to avoidable CDI cases.
- Increased capacity issues impacting on the timely placement of infectious patients, resulting in bay cohorting.
- Audits identified hand hygiene compliance across all Trusts continues to be an issue and possibly a contributing factor.
- Identified gaps in environmental cleanliness Trust wide, due to capacity pressures, is a potential source of cross contamination.
- Delays in specimen sampling .

Assurance

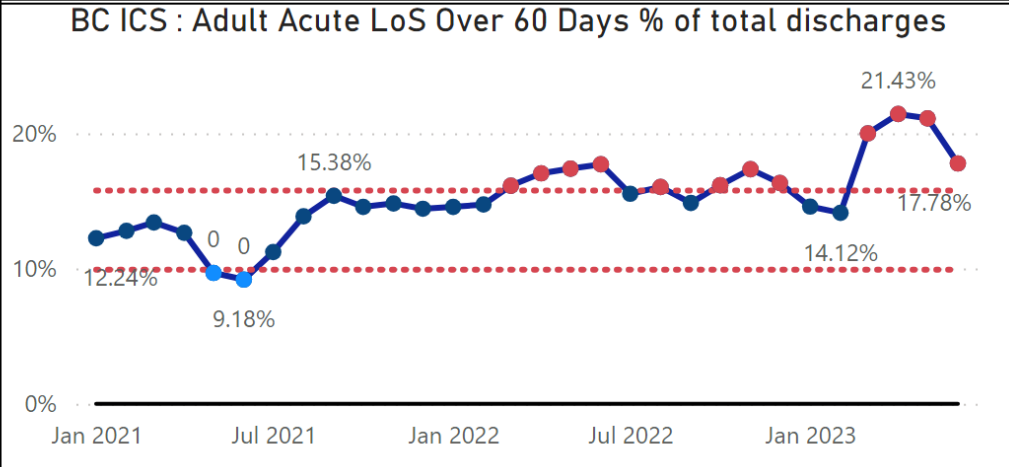
The ICB has limited assurance that 2023/24 targets will be achieved, although this is clearly a challenge nationally as BC ICS and BC ICB rank highly nationally. Work is underway to implement the following quality improvements;

- Monthly system meetings are in progress with Acute Trust IPC leads to discuss, highlight, and update on any IPC issues, concerns, or national guidance changes to ensure aligned collaborative system working.
- Bi-monthly HPP Group meetings to collaborative system working.
- Quarterly system meetings with LA HP leads are in progress.
- A monthly IPC bulletin produced covering topical issues/hot topics and seasonal IPC issues such as UTI and hydration and summer illnesses. These have been shared with Primary Care.

Domain:

Select Indicator :

Adult Acute LoS Over 60 Days % of total discharges



Assurance



Variation



Key

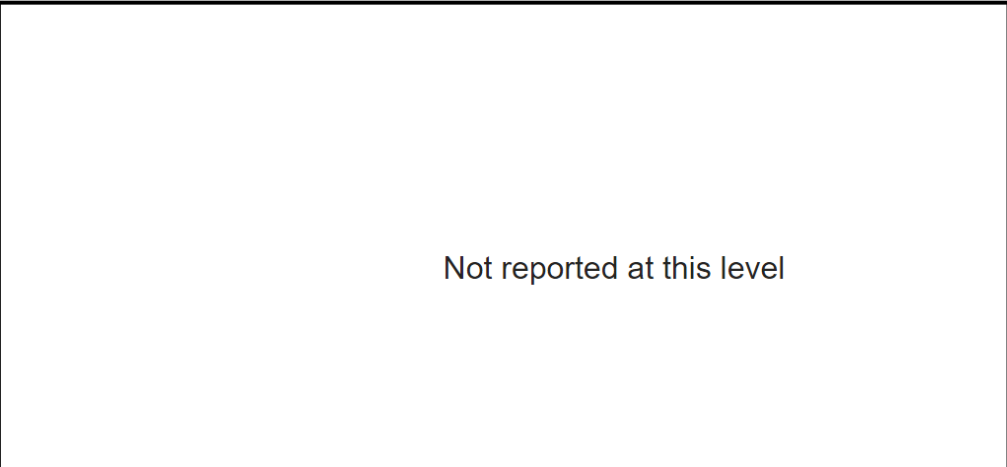
-- Actual
--- Plan
— Target

Latest Period

June 2023

Source

NHS Oversight Framework



Assurance

Variation

Key

-- Actual
--- Plan
— Target

Latest Period

June 2023

Source

NHS Oversight Framework

Summary

This measure aims to achieve a reduction in the number of patients who have been in hospital for over 60 days in adult acute mental health beds. During the 3 month period beginning June 2023, 80 of the 450 patients discharged from acute adult beds had spent 60 days or more in hospital (17%). This ranked the ICS 11th nationally. Although a relatively small number of patients, reducing their length of stay is likely to bring clinical benefits and also release bed capacity.

Actions

Following the implementation of multi-agency meetings the Trust successfully discharged a number of people in March/April/May with long LoS.

This was, and continues to be, supported by monthly analysis of inpatient stays over 60 and 90 days to identify appropriate/inappropriate stays, enable appropriate action where required, trend analysis to inform discharge planning and the inpatient transformation programme.

Assurance

It was anticipated that following the implementation of multi-agency meetings that performance would decline in the short term as the performance metric only measures LoS for inpatients once they are discharged. Following this we are now starting to see improvements in performance as improved processes become established. The most recently published data supports that anticipated position and it is hoped that the improved position in the last two sets of data will continue for future months.

Percentage of Incomplete RTT pathways within 18 weeks of referral

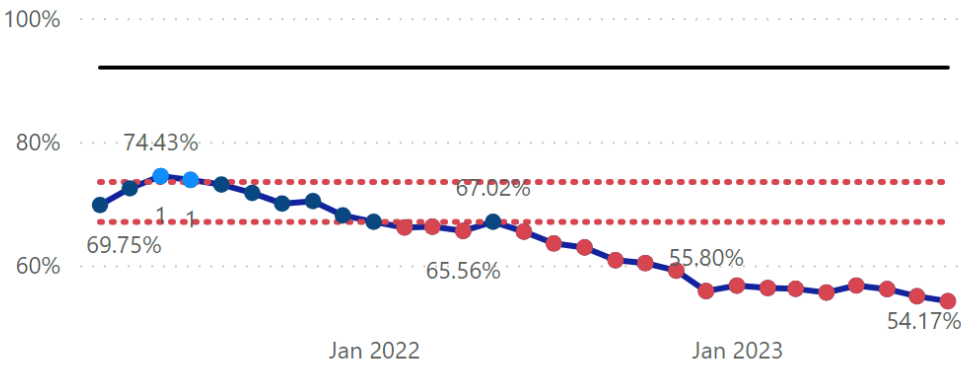
Domain:

Select Indicator :

Percentage of Incomplete RTT pathways within 18 weeks of referral



BC ICS : Percentage of Incomplete RTT pathways within 18 weeks of referral



Latest Period

August 2023

Source

(Blank)

Assurance



Variation



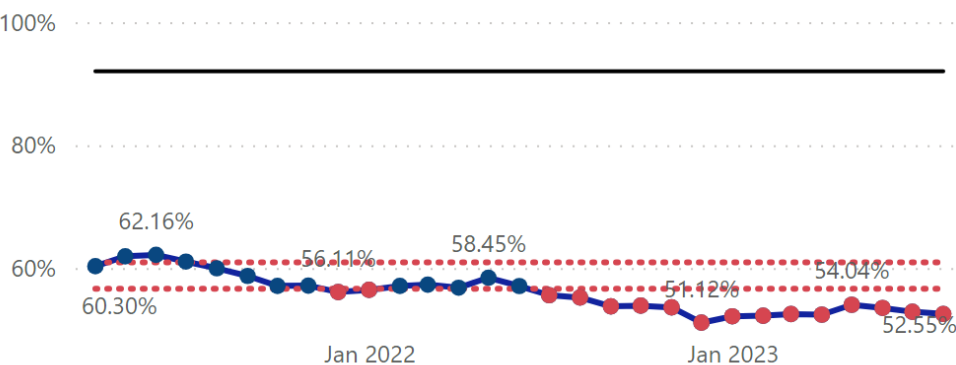
Key

--- Actual

--- Plan

— Target

BC ICB : Percentage of Incomplete RTT pathways within 18 weeks of referral



Latest Period

August 2023

Source

(Blank)

Assurance



Variation



Key

--- Actual

--- Plan

— Target

Summary

Higher is better for this measure.
Currently missing target and performance continues to remain largely static.
The NHS Constitution sets out that patients should wait no longer than 18 weeks from GP referral to treatment. The national target is that 92% of patients should receive treatment within 18 weeks.
The cancellation of a significant volume of procedures due to the COVID-19 pandemic has substantially affected this measure.
ICS Performance during August 2023 was 54.17%, and ICB performance was 52.55% compared against national performance of 58%

Actions

Following the build up of long-wait patients during the COVID-19 pandemic, a national recovery plan was introduced with the priority of clearing the longest waiting patients . This plan required Trusts to prioritise 104ww and 78ww patients alongside those with most clinical need, with the expectation that all 104ww patient breaches were cleared by end of May 2023. Following the impact of Industrial Action Trusts nationally are still working to clear all 78ww patient breaches.
Clearing longer wait patients has a negative impact upon the % cleared within 18 weeks.

Assurance

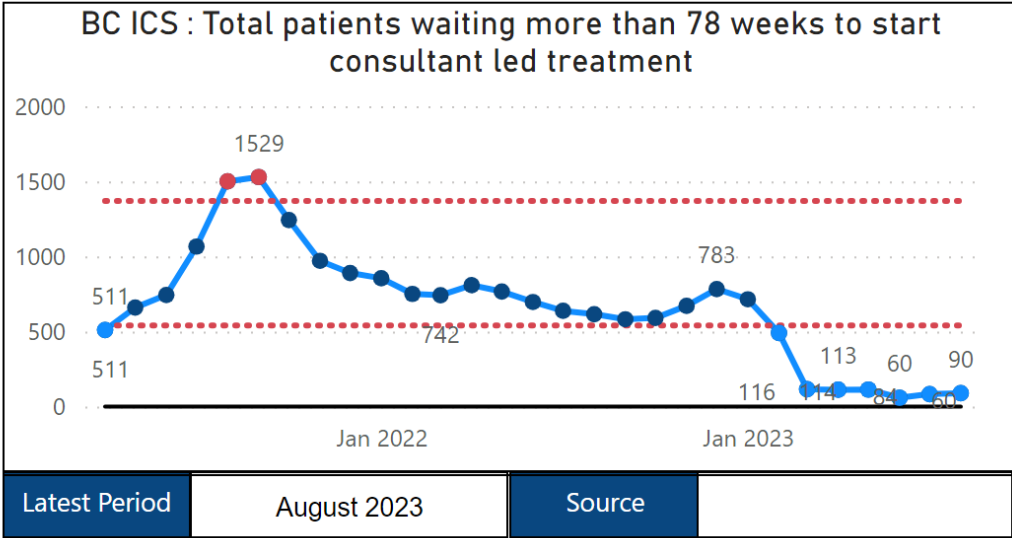
Due to the system focus on the required national priority of clearing longer waiting patients, the ICS Elective Care and Diagnostics Board committed to clearing 104ww and 78ww in line with NHSE targets. Beyond that, the ICS has a trajectory to clear all 65ww breaches by the end of March 2024, in line with national expectations. As a result the ICB is not assured that the 92% NHS Constitution target will be achieved during 2023/24.

Total patients waiting more than 78 weeks to start consultant led treatment

Domain:

Select Indicator :

Total patients waiting more than 78 weeks to start consultant led treatment



Assurance

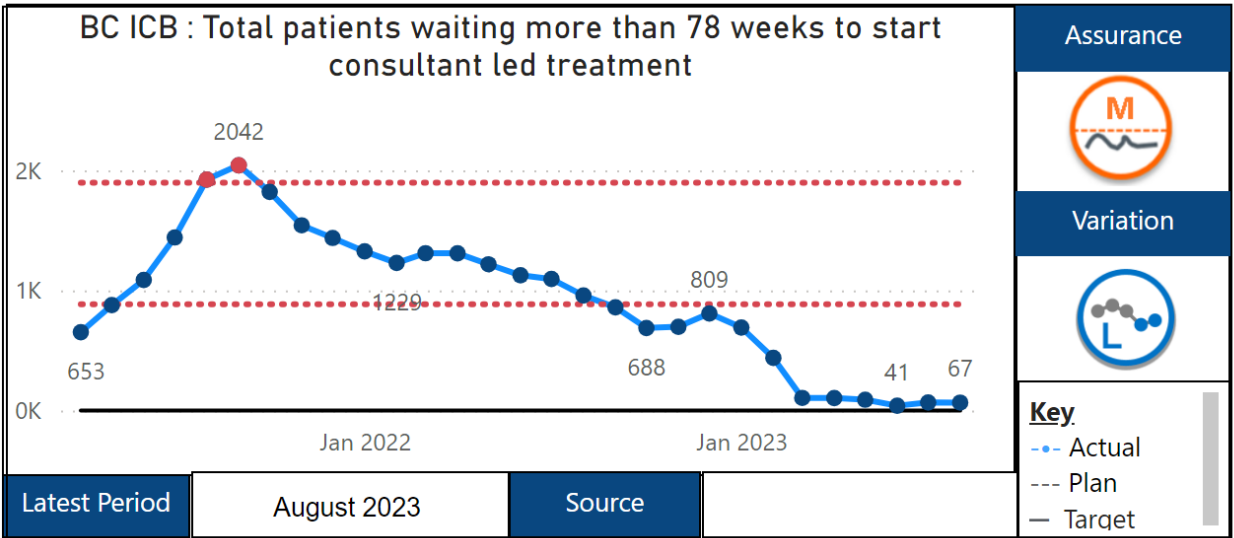
Variation

Key

Actual

Plan

Target



Assurance

Variation

Key

Actual

Plan

Target

Summary

Lower is better for this measure and BC Trusts continue to reduce the number of patients waiting over 78 weeks for treatment. The national aim remains to clear all 78ww patients, although the original timescales have been significantly impacted by ongoing industrial action across the NHS.

Actions

A sub-committee of the ICS Elective Care Board continues to meet weekly to review long wait performance with all Black Country Trusts, along with frequent Exceptional Elective Care Boards to ensure all potential options to treat patients are explored. Trusts are currently working on a 'route to zero' for November. Areas of risk are being addressed collaboratively through potential use of independent sector providers, and mutual aid both within the BC ICS and on a wider basis through use of the national Digital Mutual Aid System (DMAS). Reviews are taking place to ensure all options are explored in order to support the remaining 78-week pathways.

Assurance

The ICB cannot currently be fully assured that all 78ww patients will be cleared by November 23. It is, however, acknowledged that work to address this continues, is prioritised, and that significant progress has and continues to be made being made to clear all 78ww patients as quickly as possible.

The % of patients waiting 6 weeks or more for a diagnostic test

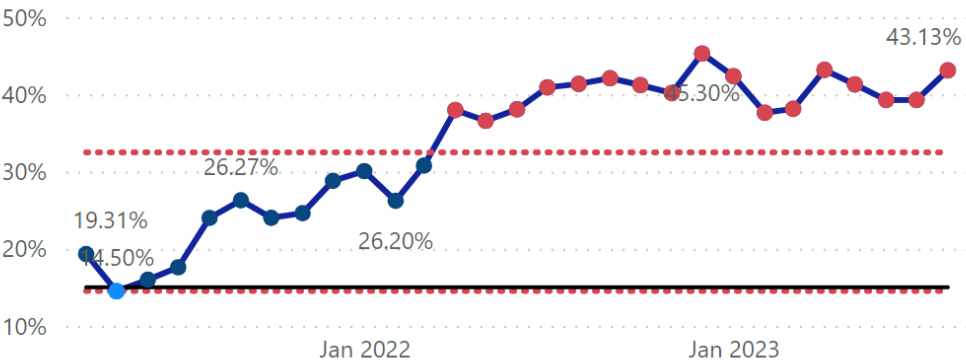
Domain:

Select Indicator :

The % of patients waiting 6 weeks or more for a diagnostic test



BC ICS : The % of patients waiting 6 weeks or more for a diagnostic test



Assurance



Variation



Key

--- Actual
--- Plan
--- Target

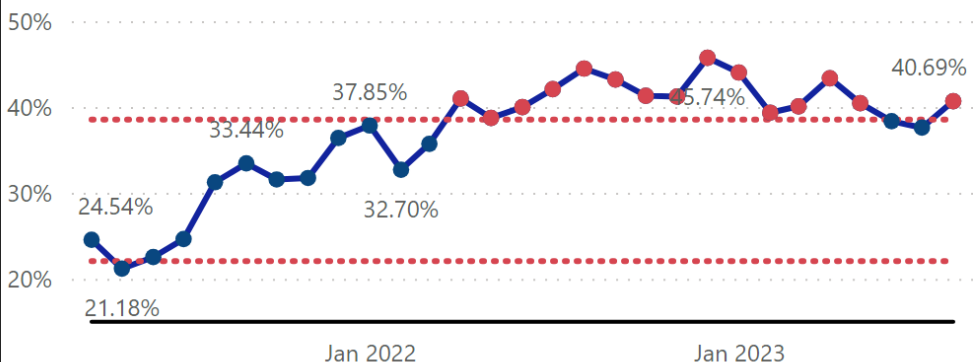
Latest Period

August 2023

Source

Planning Data

BC ICB : The % of patients waiting 6 weeks or more for a diagnostic test



Assurance



Variation



Key

--- Actual
--- Plan
--- Target

Latest Period

August 2023

Source

Planning Data

Summary

Lower is better for this measure.
Currently missing target, with both ICS and ICB performance deteriorating during August - the latest published data available. ICS performance was 43.13% and ICB 40.69%. Reduced capacity reported in August due to peak leave, sickness and industrial action.
National performance also deteriorated during the month to 27.5%.
In particular, BCICS continues to report high waits in non-obstetric ultrasound (NOUS), especially at SWB and RWT. Of the total 31,668 patients waiting for NOUS at the four BC Trusts, 16,629 have been waiting over 6 weeks (52.5%).
The total August ICS waiting list stood at 69,722 with 30,068 waiting over 6 weeks.

Actions

Mitigations are in place to achieve trajectory plans for March 2024 and recovery plans have been developed with specific actions listed by Trust and individual diagnostic test as required. These have been shared with NHSE Regional Team at a BC Diagnostic Deep Dive.
Recovery plans include; waiting list initiatives, completion of training into fully substantive roles, ongoing recruitment, hybrid lists, mutual aid.
The requirement nationally is for all Trusts to reduce the number of patients waiting over 6 weeks down to 15% by the end of March 2024.
Validation exercises are being undertaken due to seeing an increase in patient DNAs.

Assurance

The ICB currently has limited assurance that the NHS target of 15% will be met for all tests at all BC Trusts by March 2024.
Recovery plans and trajectories continue to be monitored and reviewed through the ICB Diagnostic Ops Steering Group and plans are in place locally to adhere to the 15% requirement. Updates on progress are reported through the ICS Elective Care and Diagnostics Board.

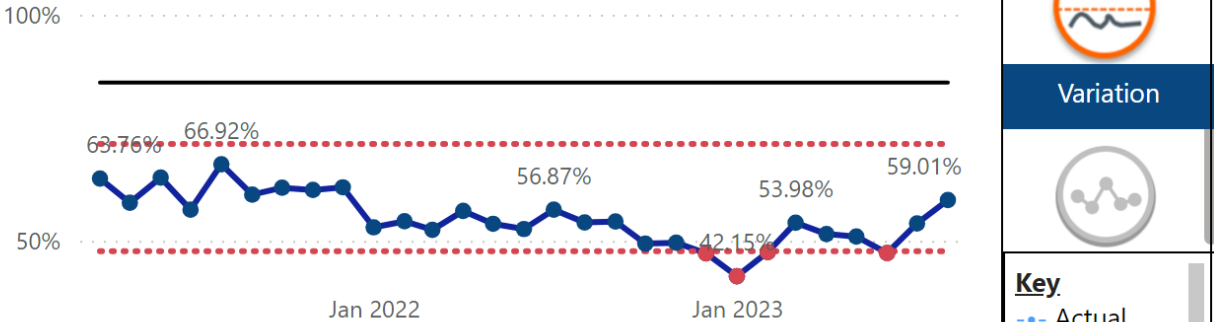
The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer

Domain:

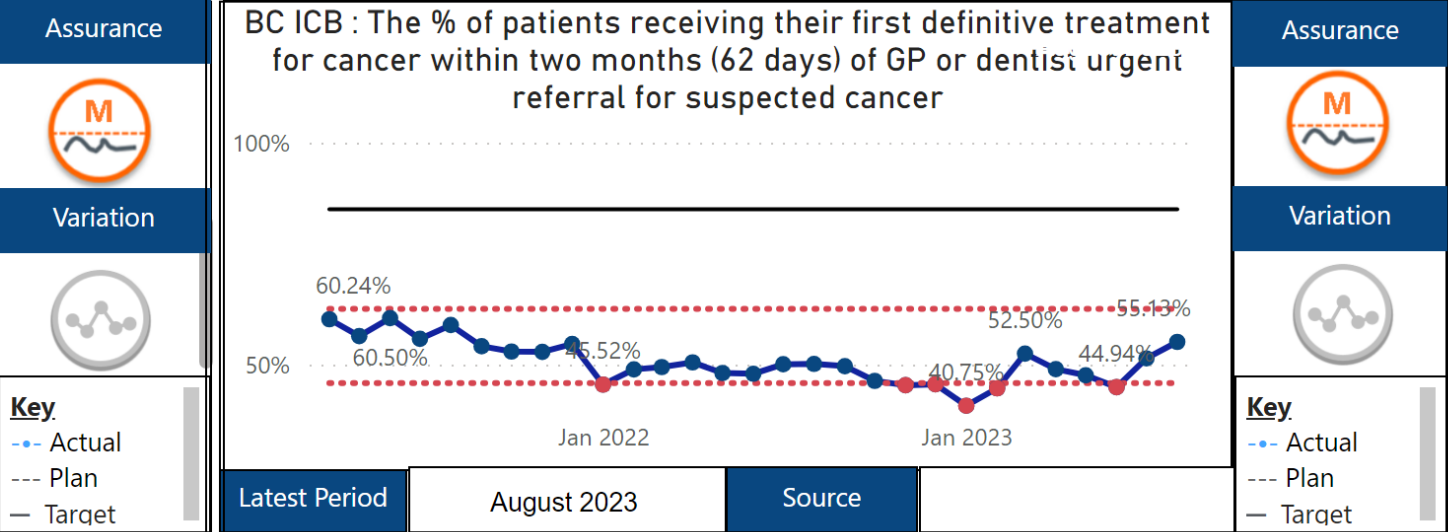
Select Indicator :

The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent refe... ▾

BC ICS : The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer



Latest Period	August 2023	Source	
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Summary

Higher is better for this measure. Currently missing target, although ICS performance has improved to 59.01% during August, with ICS performance improving to 55.13%.

The NHS Constitution sets out that 85% of patients should wait no longer than 62 days to receive their first treatment following urgent GP or dentist referral with suspected cancer.

For context, national performance during August was 62.8%.

Actions

In-line with national requirements, local focus has been on clearing longer wait patients. This has a negative impact upon the % treated within 62 days.

NHSE have recently confirmed the consolidation of three existing 62-day cancer measures into one from October 2023, with an expectation that Trusts improve to 70% by March 2024.

BC Trusts are now starting to shift focus from clearing backlog numbers to improving performance against the new combined 62-day measure.

Assurance

The ICS Cancer Board has previously approved that the Black Country system focus on clearing longer waiting patients in line with national requirements.

Focus will now begin to shift towards improving performance under the consolidated 62-day cancer standard, due to be introduced from October 2023, when reporting against this old 62-day measure will cease.

Local shadow monitoring for July suggests RWT are the only BC Trust currently falling below the 70% threshold required under the new standard, partially due to the tertiary referral work they undertake. Tumour site improvement trajectories are currently being worked upon and will be reviewed at the ICS Cancer Ops Group before submission to the ICS Cancer Board.

ICS Financial Performance Summary

Month 6 2023/24



System Oversight Framework Summary

- The ICS is off target against key financial and efficiency indicators at month 6

- Organisations are reporting a £79m deficit at month 6, £27m adverse to plan.

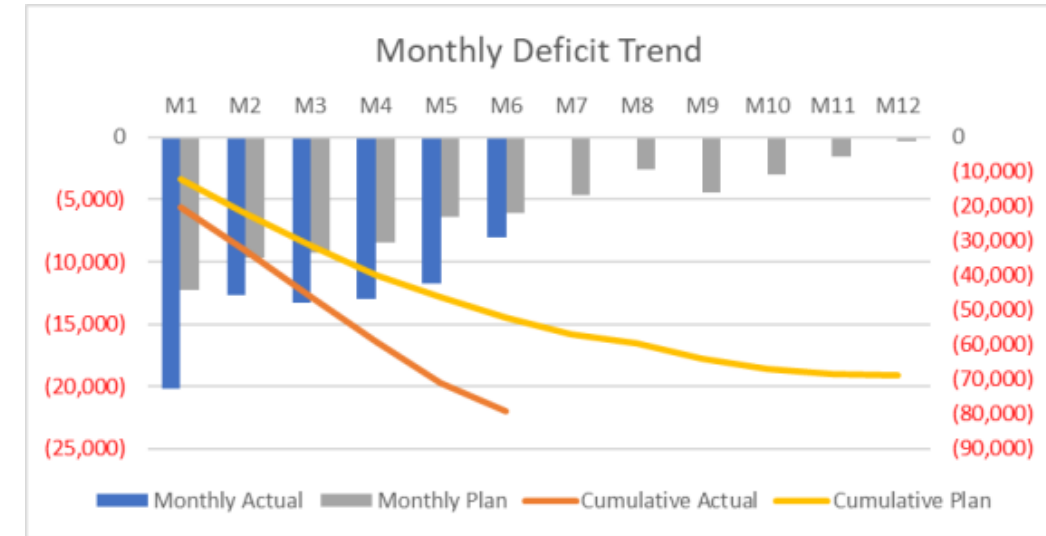
- At month 6 organisations are reporting a £6m shortfall against their efficiency plans, with 3 out of 8 organisations off plan despite efficiency plans being weighted towards later months.

Organisation	Distance from Break-even		Distance from Financial Plan		Distance from Efficiency Plan		Distance from Agency Cap*		MHIS Achievement
	YTD £'000	Forecast £'000	YTD £'000	Forecast £'000	YTD £'000	Forecast £'000	Forecast £'000	Run Rate £'000	Forecast Y/N
BC ICB	2,100	5,000	-400	0	0	0			Y
BCH	-1,555	3,900	-3,505	0	-3,615	0			
DIHC	501	-9	29	0	0	0			
SWB	-21,241	-18,823	-9,229	0	-6,100	0			
DGFT	-13,186	-19,174	803	0	1,946	0			
RWT	-28,797	-26,750	-4,352	0	1,723	0			
WHT	-20,800	-14,018	-12,980	0	-1,509	0			
WMAS	3,764	0	2,580	0	1,329	2			
ICS	-79,214	-69,873	-27,054	0	-6,226	2	26,051	16,668	Y

- Trusts are £3m above plan for agency costs at month 6, but have dipped below plan in the previous two months, with costs in the current month being £350k below plan and accounting for just 1.8% of gross pay costs. The ICS remains on target to underspend against the system agency cap, by £26m on a forecast basis or £17m on an extrapolated run rate.
- The system remains forecast to achieve the MHIS in full

Revenue Position - Summary

- The ICS is reporting a YTD deficit of £79m (6.3% of turnover), £27m adverse to plan (2.3%).
- This represents a further deterioration from month 5, at which point the deficit was £71m, £25m adverse to plan, however this is a significant improvement in run-rate deficit and variance to plan.
- The exception to this improvement is at Walsall Healthcare where the YTD position has deteriorated by a further £4m in-month deficit has worsened and variance to plan has increased by 46% (from £8.9m to £13.0m) in month 6

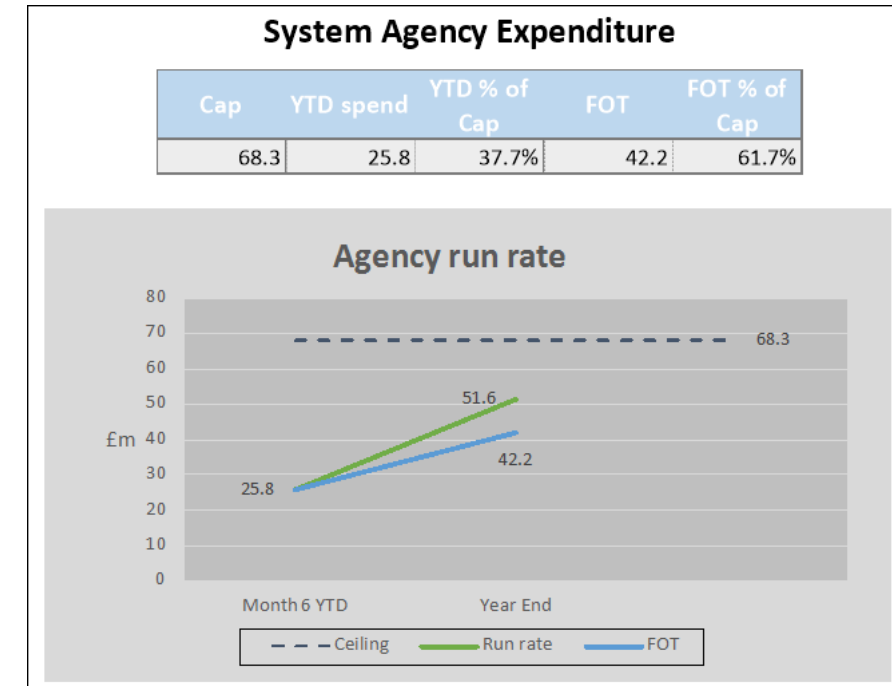


Organisation	YTD Revenue Position					Variances by Category				Prior Month		Prior Month	
	Plan	Actual		Variance		Income	Pay	Non-Pay	Non Operatin	Comparative		Comparative	
	YTD £'000	YTD £'000	YTD % *	YTD £'000	YTD % *	YTD £'000	YTD £'000	YTD £'000	YTD £'000	M5 Actual £'000	Difference £'000	M5 Variance £'000	Difference £'000
BCICB	2,500	2,100	0.2%	(400)	(0.0%)					(417)	2,517	(2,500)	2,100
BCH	1,950	(1,555)	(1.0%)	(3,505)	(2.2%)	8,077	(3,302)	(9,321)	1,041	(2,522)	967	(4,147)	642
DIHC	472	501	3.7%	29	0.2%	(210)	885	(705)	60	415	86	22	7
SWBH	(12,012)	(21,241)	(6.2%)	(9,229)	(2.7%)	(5,933)	(3,376)	(717)	797	(18,323)	(2,918)	(7,838)	(1,391)
DGFT	(13,989)	(13,186)	(5.1%)	803	0.3%	2,948	356	(3,411)	910	(11,607)	(1,579)	380	423
RWT	(24,445)	(28,797)	(6.9%)	(4,352)	(1.0%)	7,948	(15,548)	2,690	557	(25,442)	(3,355)	(4,690)	338
WHT	(7,820)	(20,800)	(11.5%)	(12,980)	(7.2%)	8,023	(11,042)	(10,272)	311	(16,860)	(3,940)	(8,882)	(4,098)
WMAS	1,184	3,764	1.8%	2,580	1.3%	(6,179)	6,690	1,554	515	3,842	(78)	2,853	(273)
ICS	(52,160)	(79,214)	(6.8%)	(27,054)	(2.3%)	14,674	(25,337)	(20,182)	4,190	(70,913)	(8,301)	(24,802)	(2,253)

Agency Expenditure

- Trusts are reporting agency expenditure of £25.8m YTD against a plan of £22.9m, £2.9m adverse to the plan. However, in-month agency expenditure is under plan, having fallen by over £1m since month 4.
- YTD expenditure equates to 2.4% of staff costs, and in-month expenditure just 1.9%, against the national 3.7% target.
- Run rate projected expenditure at year-end is £52 on a straight-line basis, £16m favourable to the £68m system agency cap and likely to be an over-estimate based on recent run-rates.

Organisation	Plan YTD £'000	Actual YTD £'000	Variance YTD £'000	Proportion of Gross Staff Costs %	Plan Year Ending £'000	Reported Forecast £'000	Run Rate Projection £'000
BCH	6,558	6,374	184	5.7%	11,614	11,659	12,748
DIHC	417	472	(55)	4.5%	835	818	944
SWBH	6,565	8,377	(1,812)	3.7%	12,740	12,744	16,754
DGFT	1,587	1,625	(38)	0.9%	2,842	2,418	3,250
RWT	3,100	4,246	(1,146)	1.5%	5,991	5,991	8,493
WHT	4,705	4,734	(29)	3.5%	8,645	8,645	9,468
WMAS	0	0	0	0.0%	0	0	0
ICS	22,932	25,828	(2,896)	2.4%	42,667	42,274	51,657
System Cap						68,325	68,325
Variance						26,051	16,668



Efficiencies

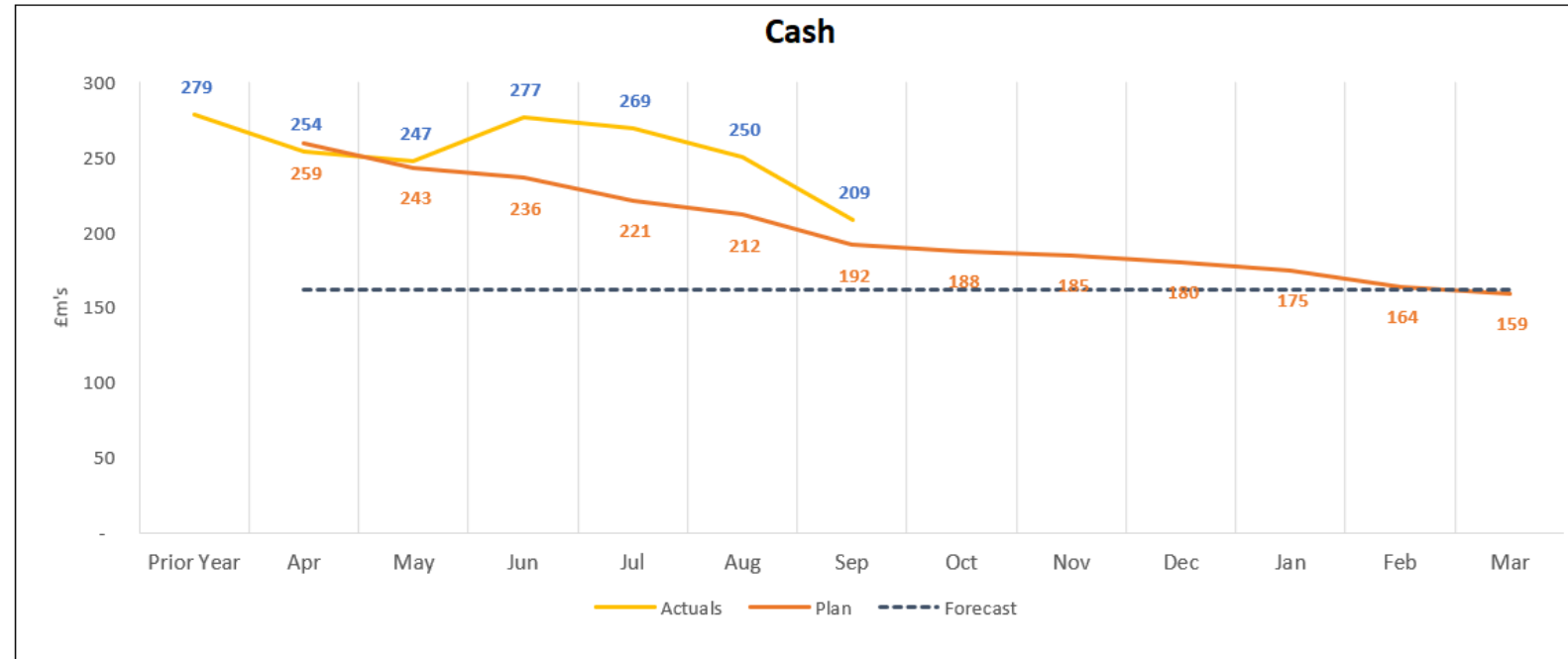
- The System is reporting £74m of efficiencies at M6, £6m behind plan.
- Organisations overachieved the M6 efficiency plan.
- All organisations continue to forecast full delivery of efficiencies however this is a significant challenge as efficiency plans are back-ended into later months.
- Forecast efficiencies make up 5.6% of operating costs, ranging from 3.2% to 8.6%.
- Recurrent Efficiencies make up 42% (£31m) of total YTD efficiencies.
- The level of the efficiency target that is unidentified or at the opportunity stage has reduced from 32% to 17% of the total at M6. This is due to an improvement from 69% to 33% at The Royal Wolverhampton, offset by a reporting error at DIHC that results in all efficiency being noted as opportunity.
- SWB and WHT continue to have over 40% (RWT 69%) of their plans as unidentified or at opportunity stage



Organisation	YTD Efficiencies				YTD Split		Forecast as % of Operating Costs	Forecast Efficiencies Breakdown					Total £'000	Unidentified /Opportunity % of Total	Prior Month % of Total
	Plan YTD £'000	Actual YTD £'000	Variance					Developed In Delivery £'000	Developed Not Started £'000	Plans in Progress £'000	Opportunity £'000	Unidentified £'000			
			YTD £'000	YTD %	REC £'000	NREC £'000									
BCICB	18,072	18,072	0	0.0%	10,530	7,542	N/A	32,690	9,100	22,176	0	0	63,966	0%	0%
BCH	8,160	4,545	(3,615)	(44.3%)	683	3,862	5.3%	2,619	3,826	7,765	2,105	0	16,315	13%	0%
DIHC	867	867	0	0.0%	732	135	8.6%	0	0	0	2,244	0	2,244	100%	0%
SWBH	19,372	13,272	(6,100)	(31.5%)	7,979	5,293	6.7%	24,443	0	2,481	1,651	17,575	46,150	42%	44%
DGFT	8,788	10,734	1,946	22.1%	5,282	5,452	5.1%	21,280	923	84	3,209	737	26,233	15%	16%
RWT	12,180	13,903	1,723	14.1%	2,720	11,183	5.4%	23,630	0	6,795	256	14,470	45,151	33%	69%
WHT	6,403	4,894	(1,509)	(23.6%)	485	4,409	7.3%	4,527	2,058	7,630	3,396	8,839	26,450	46%	46%
WMAS	6,360	7,689	1,329	20.9%	2,882	4,807	3.2%	12,625	0	97	0	0	12,722	0%	0%
ICS	80,202	73,976	(6,226)	(7.8%)	31,293	42,683	5.6%	121,814	15,907	47,028	12,861	41,621	239,231	17%	32%

Cash Position

- Current cash balances at M5 are £17m above planned levels, at £209m.
- However, this positive overall position masks significant cash challenges at The Dudley Group and Walsall Healthcare.
- Due to their deficit positions both Trusts are short of cash and are currently in receipt of short-term cash support from the ICB
- A system cash protocol is currently being finalised and both Trusts are preparing to submit requests to DHSC for national deficit funding in Q4.
- Should deficits continue into the 24/25 financial year, it is likely that further support will be required by these Trusts and potentially others within the system.



Financial Oversight and Assurance Update

- In response to the challenged financial position, the ICB has put in place alongside NHS England an enhanced oversight regime and a range of additional expenditure controls at system level.
- The System Investment Committee (SIC) is now fully operational and providing an additional level of scrutiny of new investment proposals made by organisations, including oversight of new non-pay expenditure over £10,000.
- Detailed provider financial and workforce assurance meetings are taking place, to oversee financial performance, delivery of workforce objectives and compliance with enhanced financial and workforce controls, with outputs reported through SIC.
- Where organisations are off track against key trajectories recovery plans have been requested and formal escalation meetings were held with Trust Chairs and Chief Executive officers in September, with follow-up meetings being held during November.
- The Trusts where the ICB has the greatest level of concern are currently Walsall Healthcare, which is £13m (7.2% of turnover) adverse to plan at month 7, and the Royal Wolverhampton, which although only £4m (1%) adverse to plan YTD, is reporting a significant challenge in meeting its efficiency target and hitting year-end financial targets.
- Performance at these Trusts is being actively monitored and challenged through executive oversight meetings.

ICB Financial Performance Month 7 2023/24



At a Glance

- The ICB is currently failing its year to date expenditure target as it has a year to date deficit against plan of £917k.
- The ICB is forecasting that it will meet, or exceed, key statutory and other financial performance targets, as summarised in the table to the right.
- The ICB is not meeting the overall agency spend target, however, this relates to clinical roles. The non clinical agency spend is below the local target of 3% of pay cost.
- ICB is reporting that it will achieve the planned £5m surplus target.
- MHIS target is forecast to be achieved by year end.
- A more detailed explanation of the BPPC position in month 11 is given on slide 31.

	Year-to-Date			Forecast		
	Target £000s / %	Actual £000s / %	Achieved	Target £000s / %	Actual £000s / %	Achieved
Statutory Financial Performance Targets						
Expenditure not to exceed income	1,651,580	1,652,497	NO	2,852,468	2,847,468	YES
Capital resource use does not exceed the amount specified in Directions	N/A	N/A	N/A	N/A	N/A	N/A
Revenue resource use does not exceed the amount specified in Directions	1,651,580	1,652,497	NO	2,852,468	2,847,468	No
Capital resource use on specified matter(s) does not exceed the amount specified in Directions	N/A	N/A	N/A	N/A	N/A	N/A
Revenue resource use on specified matter(s) does not exceed the amount specified in Directions	N/A	N/A	N/A	N/A	N/A	N/A
Revenue administration resource use does not exceed the amount specified in Directions	13,678	13,044	YES	23,730	23,270	YES
Other Key Targets						
Net (Risk) / Mitigation	N/A	N/A	N/A	-	-	N/A
Efficiency	37,314	37,314	YES	63,966	63,966	YES
MHIS (Full Year)	-	-	YES	219,325	219,491	YES
Cash Limit	<=1.25%	0.06%	YES	<=1.25%	<=1.25%	YES
BPPC - NHS - Number	=>95%	97.11%	YES	=>95%	=>95%	YES
BPPC - NHS - Value	=>95%	99.37%	YES	=>95%	=>95%	YES
BPPC - Non-NHS - Number	=>95%	98.73%	YES	=>95%	=>95%	YES
BPPC - Non-NHS - Value	=>95%	97.23%	YES	=>95%	=>95%	YES
Agency Spend as a % of Pay Cost - Running Cost	<3%	0.05%	YES			N/A
Agency Spend as a % of Pay Cost - Programme Cost	<3%	15.42%	NO			N/A
Agency Spend as a % of Pay Cost - Total ICB	<3%	6.82%	NO			N/A
Non Clinical Agency Spend as a % of Pay Cost - Total ICB	<3%	1.50%	YES			N/A

Allocations

- The ICB has received allocations totalling £2.852bn up to month 7.
- Elective recovery funding has not yet been received in full but is included in the expenditure.
- Service development funding and mental health spending review funding has been received to cover cost of the implementation of new community diagnostic hubs; primary care initiatives including improving access; diagnostics; additional ambulance funding; etc.
- Other funding received relates to separate bids.
- The ICB has not yet received its historic accumulated surplus relating to the legacy CCG's of £30.1m. This cannot be spent in year unless explicit permission has been obtained from NHSE. This will be carried forward into future periods.

In-Year	Prog £000s	Del Comm £000s	RCA £000s	Total £000s
ICB				
CCG Baseline	2,253,423	355,863	22,680	2,631,966
System Funds	33,344	0	0	33,344
Elective Recovery Funding	46,772	0	0	46,772
Service Development Funding	62,630	0	0	62,630
Other Funding - Primary Care	1,554	0	0	1,554
Other Funding	63,407	5,834	1,050	70,291
Discharge Funding	5,911	0	0	5,911
In Year Allocations	2,467,041	361,697	23,730	2,852,468
Surplus	0	0	0	0
Total ICB Allocations	2,467,041	361,697	23,730	2,852,468

Summary Financial Performance

- The ICB has received allocations to cover the cost of:
 - NHS and other non-NHS services;
 - Delegated primary care services;
 - Running the CCG;
 - Transformational system development schemes;
- As at month 7 the ICB has reported a year-to-date surplus of £2m which is £0.9m behind plan and a forecast planned surplus of £5m for the year.
- The ICB is incurring a significant overspend within prescribing (£12m forecast by year end) which is driving the financial risk associated with meeting the surplus target.

	Year-to-Date			Forecast		
	Plan £000s	Actual £000s	Fav/(Adv) Variance £000s	Plan £000s	Forecast Outturn £000s	Fav/(Adv) Variance £000s
Revenue Resource Limit (RRL)						
Programme	1,430,002	1,430,002	-	2,467,041	2,467,041	-
Delegated Commissioning	210,798	210,798	-	361,697	361,697	-
Running Costs	13,697	13,697	-	23,730	23,730	-
Total In-year RRL	1,654,497	1,654,497	-	2,852,468	2,852,468	-
Programme Expenditure						
Acute Services	870,188	871,998	(1,811)	1,483,402	1,485,364	(1,962)
Mental Health Services	178,666	177,411	1,254	304,826	304,443	384
Community Health Services	155,858	156,346	(488)	279,754	280,081	(327)
Continuing Care Services	59,181	59,725	(544)	102,277	103,253	(976)
Primary Care Services	149,939	156,247	(6,309)	257,197	269,362	(12,164)
Other Programme Services	10,190	8,125	2,064	34,585	13,501	21,084
Total Programme Expenditure	1,424,021	1,429,854	(5,834)	2,462,041	2,456,004	6,037
Delegated Commissioning	213,881	209,598	4,283	361,697	368,195	(6,498)
Running Costs	13,678	13,044	634	23,730	23,270	460
Total ICB Expenditure	1,651,580	1,652,497	(917)	2,847,468	2,847,468	0
ICB (combined) Surplus/Deficit	2,917	-	2,917	5,000	-	5,000
Total ICB Expenditure	1,654,497	1,652,497	2,000	2,852,468	2,847,468	5,000

Mental Health Investment Standard (MHIS)

- The CCG worked with Black Country Healthcare NHS Foundation Trust (BCH), and others, to develop and submit a mental health financial plan for the 2023/24 financial year.
- The ICB is required to invest in mental health services in-line with the growth in core programme allocation, as a minimum, which is 8.93% in 2023/24. This will be monitored by NHSE against the ICB.
- Over-and above this, the ICB has been in receipt of additional mental health Service Development Funding (SDF) and Spending Review monies, which are ring-fenced for specific services and to meet long-term plan ambitions.

	2023/24
	£000s
2022/23 MHIS Outturn as at Month 12	201,337
2023/24 Growth in CCG Allocations	8.93%
2023/24 Target MHIS Spend	219,325
2023/24 Forecast MHIS Spend	219,491
2023/24 MHIS Achieved	Yes
2023/24 MHIS Planned Over/(Under) Achievement	166

- The ICB commenced the financial year with a planning gap of £20.3m.
- As at month 7, the remaining planning gap, inclusive of in year pressures has reduced to £7m.
- The cost pressures relate mainly to Prescribing expenditure – excess inflationary pressures above nationally stipulated growth rates, ICS Operating Model funding for ICS partners with no identified source of funding, WMAS NEPTS cost pressure and the remainder being cost pressures which have occurred across the remaining portfolio.
- Further work is ongoing to close the gap further, including the implications of the latest letter from Julian Kelly and the nationally stipulated potential flexibilities.
- A revised financial plan has to be submitted on 22nd November which is expected to close the residual gap and potentially (subject to Board sign off) increase the ICB's surplus to assist in the ICS achieving its planned deficit.

Statement of Financial Performance (SoFP)

- It is a requirement that the level of cash retained in the ICB's bank account at the end of each month is kept to a minimum. The ICB's cash balance at the end of month 7 is within the 1.25% target.
- See the next page regarding trade payables and receivables.

	Month 7		
	Current Month £000s	Prior Month £000s	2022/23 £000s
Non-current Assets			
Right of Use Assets	4,949	5,033	5,535
Total Non-current Assets	4,949	5,033	5,535
Current Assets			
Trade and Other Receivables	37,864	37,547	21,484
Cash and Cash Equivalents	89	610	73
Total Current Assets	37,953	38,157	21,557
Total Assets	42,902	43,190	27,092
Current Liabilities			
Trade and Other Payables	-	(123,476)	(165,821)
Provisions	(4,897)	(4,897)	(7,512)
Borrowings	(4,897)	(4,897)	(7,512)
Other Financial Liabilities	-	-	(1,005)
Total Current Liabilities	(4,897)	(128,373)	(174,338)
Net Current Assets / (Liabilities)	33,056	(90,216)	(152,781)
Total Assets less Current Liabilities	38,005	(85,183)	(147,246)
Non-current Liabilities			
Trade and Other Payables	-	(4,106)	(4,525)
Provisions	-	-	(1,114)
Total Non-current Liabilities	-	(4,106)	(5,639)
Assets less Liabilities	38,005	(89,289)	(152,885)
Finance by Taxpayers' Equity			
General Fund	(97,072)	(89,289)	(152,885)
Total Taxpayers' Equity	(97,072)	(89,289)	(152,885)

Working Capital and Better Payment Practice Code

Payables and Receivables

	Payables			Receivables		
	NHS £000s	Non-NHS £000s	Total £000s	NHS £000s	Non-NHS £000s	Total £000s
Not Yet Due	10,445	5,224	15,669	251	229	480
0-30	4,268	2,243	6,511	388	76	464
31-60	593	1,265	1,858	45	441	486
61-90	2,376	3,847	6,223	55	35	90
91-120	407	236	643	321	183	504
121-180	4,929	5,170	10,099	15	21	36
181-360	1,527	5,212	6,739	2,324	651	2,975
Over 360	473	7,889	8,362	4	2,426	2,430
Total Overdue	14,573	25,862	40,435	3,152	3,833	6,985
Total	25,018	31,086	56,104	3,403	4,062	7,465

As at month 7, the ICB's receivables balance is £7.4m. £6.9m of the balance is overdue.

As at month 7, the ICB's payables balance is £56.1m, of which £40.4m is shown as overdue.

Better Payment Practice Code (BPPC)

	In-month		Year-to-Date	
	Number	Value £000s	Number	Value £000s
NHS Payables Invoices				
% Paid Within Target	96.10%	99.93%	97.11%	99.37%
Non-NHS Payables Invoices				
Paid	4,112	44,651	29,214	340,680
Paid Within Target	4,066	44,310	28,842	331,241
% Paid Within Target	98.88%	99.24%	98.73%	97.23%
Total Payables Invoices				
Paid	4,317	215,494	31,150	1,525,165
Paid Within Target	4,263	215,036	30,722	1,508,319
% Paid Within Target	98.75%	99.79%	98.63%	98.90%

RAG Rating

G = Achieved/Above 95% Target

R = Below 95% Target

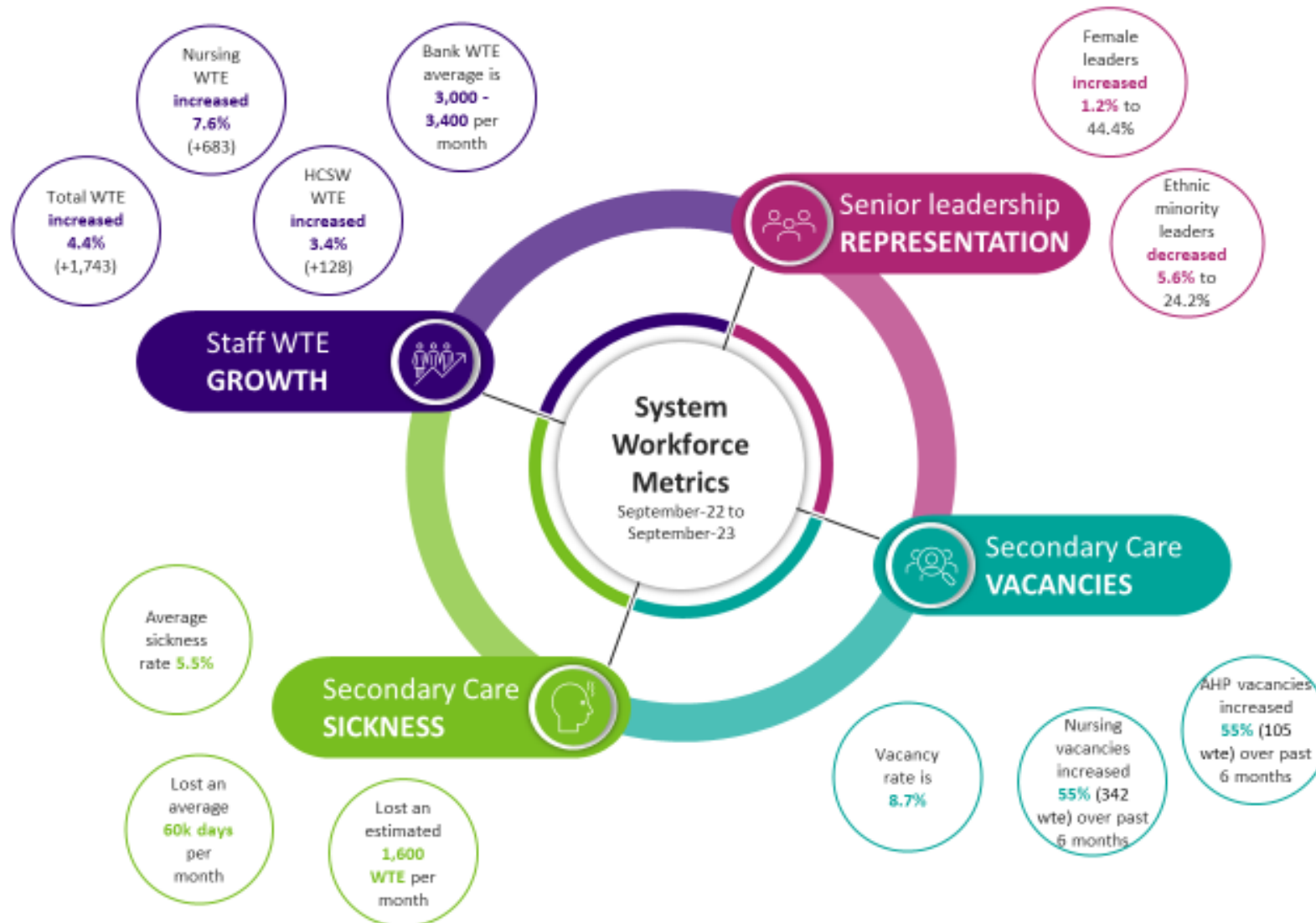
NHSE/I has imposed a target of 95% payment of invoices within 30 days by volume and by number.

The CCG has achieved this target for all payments.

People



People Dashboard *Based on M06 (September) data*



PRIORITIES

- Continue to develop infrastructure to deliver Oliver McGowan Training and build capacity to deliver across the system. A system task and finish group has been developed to support implementation, along with using national funding to recruit to key roles.
- A bid to develop an inclusive talent management strategy has been accepted by NHS England. A number of systems also submitted a similar bid, and therefore a workshop scheduled for December 2023, will explore how this can be developed collaboratively.
- A system health and wellbeing strategy is to be developed, aligned to the national Growing Occupational Health Strategy. This will be key to managing sickness absence and supporting with operational capacity.
- The OD programme in partnership with Deloitte to develop an ICB and ICS OD strategy had its first system workshop, with a second due in December to develop the way of working for the system.
- Developing our approach to support the 24/25 Planning Round.
- Roll out of Enhanced Workforce Reporting including Workforce Assurance Meeting, Vacancy Panel reviews and performance against 23/24 Plan.



HIGHLIGHTS

1. Progress continues across the two governance forums enable delivery and accountability of people priorities for 2023/24:
 - Workforce Transformation: task and finish group set up to deliver on objectives, example of work include Social Care Awards; development of Oliver McGowan Training for Tier 1, Social Care PA workforce event being held on 8 November, Menopause Champion Training set up for delivery in November.
 - Inclusive Culture: One of the six programmes is recommended to move to a complete status (OD collaborative) as it is now in operation. The HPS is suggested to be deferred to April 2024 to allow exploration with other systems in terms of delivery model.
2. The ICB OD strategy, in partnership with Deloitte, aims to be at draft by the end of December, with a small working group formed to support with developing content. The ICS OD strategy aims to be ready for April 2024.
3. Joint workforce and finance assurance meetings took place in October, leading to more richness in conversation and rigour around triangulation and spend.
4. A collaborative workshop, hosted by the Black Country, invited SSOT and STW to explore a collective approach to delivering High Potential Scheme leadership programme, recognising the opportunity of sharing capacity.



Black Country ICS Quality and Safety by Exception September & October 2023



Quality & Safety - Provider Updates by Exception

Black Country Healthcare NHS Trust (BCHFT)

- The Q&S Committee were updated on a quality visit conducted by 'Reach Out' (MH Provider Collaborative Commissioning Function) to Gerry Simon Clinic. Areas of improvement were identified, and an action plan is in development. Progress against the action plan will be monitored by a collaborative Quality Improvement Group which includes the ICB, BCHFT, NHSE and Reach Out.

Sandwell & West Birmingham Hospital Trust (SWBH)

- The ICB were chairing an Incident Management Team (IMT) meeting that had taken place following a cluster of staff sickness that occurred over a weekend on the Neonatal Unit at Sandwell Hospital. Initial findings saw some similarities in the symptoms in staff reporting in sick. A full investigation was conducted into the possible causation and factors related to the episodes of sickness and no cause or links were found. The incident was closed and IMT meetings stood down.

Local Authority Relationships with CHC

- Emerging risk in relation to challenging relationships with Local Authority (LA) partners in relation to funding of individual cases, including CHC. At a recent meeting between the LA Directors of Adult Social Care and the ICB CNO & Dep CNO, it was suggested that there were concerns from 3 of the LA's that the ICB was not compliant with CHC National Framework duties. The CNO requested the evidence to be provided to the ICB. A set of cases and detail from two of the LA's has now been shared and the ICB is undertaking a review of all detail shared, including a specialist independent review and a legal review of the challenge presented. To date there is no evidence to suggest that the ICB is not compliant in its application of the National framework.



Quality & Safety - Provider Updates by Exception

Primary Care

- There are three GP practices that remain rated as 'Inadequate' overall following CQC inspections. The ICB quality team are providing ongoing support to all of the practices and CQC quality improvement action plans are in place. These are regularly reviewed and monitored by the Primary Care Quality Team.

Black Country Pathology Services

- ICB were chairing an IMT for BCPS following the delay in 3680 test results being sent to GP practices. The IMT was stood down on 12 October 2023. All patients have now been identified where further actions are required plans are in place. A review of governance processes is planned and the CNO is due to meet with RWT and BCPS colleagues to agree the Terms of Reference for the review.

WMAS





























- CQC conducted a 'Well Led' focussed inspection in from 3rd – 5th October 2023. Initial feedback was provided and CQC acknowledged the significant work the Trust does including in keeping staff trained, skilled, and in caring for patients. Staff were clearly passionate, proud, and loyal people full of innovative ideas and commitment. CQC also found some areas for improvement. A formal CQC report is awaited.
- During October the ICB also conducted a Quality & Safety 'Board to Board' meeting with executive and non-executive members following concerns raised by NHS England Workforce, Training & Education Team (formerly Health Education England) to WMAS in relation to student placements and concerns raised by students regarding sexual safety. At the meeting the ICB received assurance and evidence regarding the actions taken by WMAS to address the concerns and their approach to protecting staff in the organisation.

































Appendix – All Performance Measures



Indicator Appendix

Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
EB26c Diagnostic Tests - Non-Obstetric Ultrasound	BC ICS	Other	February 2023	16,742				Higher better
EB32 Cancer 62-day pathways waiting 63 days or more after an urgent suspected cancer referral at the end of the reporting period	BC ICS	Other	February 2023	147				Lower better
EM11 Non-elective spells	BC ICB	Other	March 2023	15,885				Lower better
EM11 Non-elective spells	BC ICS	Other	March 2023	20,085				Lower better
EM12b Type 3&4 A&E Attendances excluding Planned Follow Ups	BC ICB	Other	April 2023	6,225				Lower better
EM12b Type 3&4 A&E Attendances excluding Planned Follow Ups	BC ICS	Other	April 2023	12,015				Lower better
EM32b Total outpatient attendances (all TFC; consultant and non consultant led) - Telephone/virtual	BC ICB	Other	March 2023	24,177				Higher better
EM32b Total outpatient attendances (all TFC; consultant and non consultant led) - Telephone/virtual	BC ICS	Other	March 2023	33,426				Higher better
EM32f Outpatient attendances (all TFC; consultant and non consultant led) - Follow-up telephone or Video consultation	BC ICB	Other	March 2023	18,982				Higher better
EM32f Outpatient attendances (all TFC; consultant and non consultant led) - Follow-up telephone or Video consultation	BC ICS	Other	March 2023	26,253				Higher better
EM7a Total GP referrals (general and acute)	BC ICS	Other	February 2023	27,614				Higher better
GP appointments - percentage of regular appointments within 14 days.	BC ICB	NOF 23/24	June 2023	88%				Higher better
Handovers 30-60 Minutes	BC ICS	Other	July 2023	1,897	0			Lower better
Handovers 60+	BC ICS	Other	July 2023	765	0			Lower better































Indicator Appendix

Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
E. coli bloodstream infection rate	BC ICB	NOF 23/24	June 2023	109%	100%			Lower better
E. coli bloodstream infection rate	BC ICS	NOF 23/24	June 2023	110%	100%			Lower better
EM32d Outpatient attendances (all TFC; consultant and non consultant led) - Follow-up attendance face to face	BC ICB	Other	March 2023	84,069				Lower better
EM32d Outpatient attendances (all TFC; consultant and non consultant led) - Follow-up attendance face to face	BC ICS	Other	March 2023	112,495				Lower better
EM36d Vascular Surgery - Ordinary (TFC 107)	BC ICB	Other	March 2023	32				Higher better
EM36d Vascular Surgery - Ordinary (TFC 107)	BC ICS	Other	March 2023	38				Higher better
EM8b Consultant-led first outpatient attendances with a procedure (excluding diagnostic imaging)	BC ICB	Other	March 2023	3,961				Higher better
EM8b Consultant-led first outpatient attendances with a procedure (excluding diagnostic imaging)	BC ICS	Other	March 2023	5,675				Higher better
Handovers 60+	BC ICS	Other	July 2023	765	0			Lower better
Inappropriate adult acute mental health placement out -of-area placement bed days	BC ICS	NOF 23/24	May 2023	680				Lower better
Inappropriate adult acute mental health placement out -of-area placement bed days	BC ICB	NOF 23/24	May 2023	2,315				Lower better
NHS Staff Survey compassionate culture people promise element sub-score	BC ICB	NOF 23/24	December 2022	7				Higher better
NHS Staff Survey compassionate culture people promise element sub-score	BC ICS	NOF 23/24	December 2022	7				Higher better
Proportion of people over 65 receiving a seasonal flu vaccination	BC ICB	NOF 23/24	February 2023	74%				Higher better
Proportion of staff in senior leadership roles who are women	BC ICS	NOF 23/24	May 2023	53%	62%			Higher better

Indicator Appendix

Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer	BC ICS	NOF 23/24	June 2023	47%	85%			Higher better
% of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins (S053c)	BC ICB	NOF 23/24	March 2023	64%				Lower better
Adult general and acute type 1 bed occupancy (adjusted for void beds)	BC ICS	NOF 23/24	June 2023	95%	92%			Lower better
EB3a RTT Waiting List	BC ICS	Other	February 2023	223,703				Lower better
The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer	BC ICB	NOF 23/24	July 2023	55%	85%			Higher better
Units of Dental Activity delivered as a proportion of all Units of Dental Activity contracted	BC ICB	NOF 23/24	July 2023	90%	100%			Higher better
EB26f Diagnostic Tests - Gastroscopy	BC ICS	Other	February 2023	1,164				Higher better
EM11b Non-elective spells with a length of stay of 1 or more days	BC ICB	Other	March 2023	8,455				Lower better
EM11b Non-elective spells with a length of stay of 1 or more days	BC ICS	Other	March 2023	11,238				Lower better
EM32 Total outpatient attendances (all TFC; consultant and non consultant led)	BC ICB	Other	March 2023	154,384				Higher better
EM32 Total outpatient attendances (all TFC; consultant and non consultant led)	BC ICS	Other	March 2023	211,711				Higher better
EM36d Vascular Surgery - Ordinary (TFC 107)	BC ICB	Other	March 2023	32				Higher better
EM36d Vascular Surgery - Ordinary (TFC 107)	BC ICS	Other	March 2023	38				Higher better
Proportion of staff in senior leadership roles who are disabled	BC ICS	NOF 23/24	December 2022	4%	3%			Higher better































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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
Clostridium difficile infection rate	BC ICB	NOF 23/24	June 2023	124%	100%			Lower better
Clostridium difficile infection rate	BC ICS	NOF 23/24	June 2023	149%	100%			Lower better
Percentage of Incomplete RTT pathways within 18 weeks of referral	BC ICS	NOF 23/24	June 2023	56%	92%			Higher better
Percentage of Incomplete RTT pathways within 18 weeks of referral	BC ICB	NOF 23/24	July 2023	56%	92%			Higher better
% of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins (S053c)	BC ICB	NOF 23/24	March 2023	64%				Lower better
Consistency of reporting patient safety incidents	BC ICS	NOF 23/24	September 2022	88%	100%			Higher better
Cervical screening coverage - % females aged 25 - 64 attending screening within the target period	BC ICB	NOF 23/24	March 2023	67%				Higher better
EM10 Total Elective spells	BC ICB	Other	March 2023	14,112				Higher better
EM10 Total Elective spells	BC ICS	Other	March 2023	17,438				Higher better
EM10b Elective ordinary spells	BC ICB	Other	March 2023	1,567				Higher better
EM10b Elective ordinary spells	BC ICS	Other	March 2023	1,827				Higher better
EM32c Outpatient attendances (all TFC; consultant and non consultant led) - First attendance face to face	BC ICB	Other	March 2023	46,138				Higher better
EM32c Outpatient attendances (all TFC; consultant and non consultant led) - First attendance face to face	BC ICS	Other	March 2023	65,790				Higher better
EM36b Cardiology - Ordinary (TFC 320)	BC ICB	Other	March 2023	71				Higher better
EM36b Cardiology - Ordinary (TFC 320)	BC ICS	Other	March 2023	108				Higher better































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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
Children and young people (ages 0-17) mental health services access (number with 1+ contact)	BC ICB	NOF 23/24	May 2023	1				Higher better
The % of patients first seen by a specialist within two weeks when urgently referred by their GP or dentist with suspected cancer	BC ICB	NOF 23/24	June 2023	82%	93%			Higher better
The % of patients first seen by a specialist within two weeks when urgently referred by their GP or dentist with suspected cancer	BC ICS	NOF 23/24	June 2023	82%	93%			Higher better
EB30 Urgent Cancer Referrals	BC ICS	Other	February 2023	6,081				Higher better
EM10 Total Elective spells	BC ICB	Other	March 2023	14,112				Higher better
EM10 Total Elective spells	BC ICS	Other	March 2023	17,438				Higher better
EM10d Elective ordinary spells - Children under 18 years of age	BC ICB	Other	March 2023	1,567				Higher better
EM10d Elective ordinary spells - Children under 18 years of age	BC ICS	Other	March 2023	1,827				Higher better
EM12a Type 1&2 A&E Attendances excluding Planned Follow Ups	BC ICB	Other	April 2023	27,880				Lower better
EM12a Type 1&2 A&E Attendances excluding Planned Follow Ups	BC ICS	Other	April 2023	37,412				Lower better
EM25 Reducing length of stay for patients in hospital for 21 days and over	BC ICB	Other	March 2023	680				Lower better
EM25 Reducing length of stay for patients in hospital for 21 days and over	BC ICS	Other	March 2023	835				Lower better
Overall CQC rating	BC ICS	NOF 23/24	July 2023	3				Higher better
Sickness absence rate	BC ICB	NOF 23/24	March 2023	5%				Lower better
Sickness absence rate	BC ICS	NOF 23/24	March 2023	5%				Lower better





























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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
% of hypertension patients who are treated to target as per NICE guidance (S053b)	BC ICB	NOF 23/24	March 2023	67%				Higher better
Dementia diagnosis rate	BC ICB	NOF 23/24	June 2023	63%				Higher better
EB26e Diagnostic Tests - Flexi Sigmoidoscopy	BC ICS	Other	February 2023	411				Higher better
EB27 Cancer 28 day waits (faster diagnosis standard)	BC ICS	Other	February 2023	307				Lower better
EM10c Elective day case spells - children under 18 years of age	BC ICB	Other	March 2023	351				Higher better
EM10c Elective day case spells - children under 18 years of age	BC ICS	Other	March 2023	478				Higher better
EM19 Number of Completed Non-Admitted RTT Pathways	BC ICS	Other	March 2023	71,240				Higher better
EM33b Number of requests for post-referral specialist advice (including referral triage models)	BC ICB	Other	March 2023	13,049				Higher better
EM35f Solid organ Transplant - Day Case (TFC 102 or 174)	BC ICB	Other	March 2023	1				Higher better
EM7 Total referrals (general and acute)	BC ICS	Other	February 2023	49,467				Higher better
Sickness absence rate	BC ICB	NOF 23/24	March 2023	5%				Lower better
Sickness absence rate	BC ICS	NOF 23/24	March 2023	5%				Lower better
Staff survey bullying and harassment score - Proportion of staff who say they have personally experienced harassment, bullying or abuse at work from a) managers	BC ICB	NOF 23/24	December 2022	0				Lower better
Staff survey bullying and harassment score - Proportion of staff who say they have personally experienced harassment, bullying or abuse at work from a) managers	BC ICS	NOF 23/24	December 2022	0				Lower better
Total patients waiting more than 65 weeks to start consultant-led treatment	BC ICS	NOF 23/24	May 2023	2,154				Lower better
Total patients waiting more than 65 weeks to start consultant-led treatment	BC ICB	NOF 23/24	May 2023	1,852				Lower better

































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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
Leaver rate	BC ICB	NOF 23/24	May 2023	8%				Lower better
Leaver rate	BC ICS	NOF 23/24	May 2023	8%				Lower better
The total number of incomplete RTT pathways in the reported period	BC ICB	Other	July 2023	193,798				Lower better
The total number of incomplete RTT pathways in the reported period - Provider	BC ICS	Other	June 2023	241,377				Lower better
Dementia diagnosis rate	BC ICB	NOF 23/24	June 2023	63%				Higher better
EB19 Number of 104+ week RTT waits	BC ICS	Other	February 2023	1				Lower better
EM32a Total outpatient attendances (all TFC; consultant and non consultant led) - Face to face	BC ICB	Other	March 2023	130,207				Higher better
EM32a Total outpatient attendances (all TFC; consultant and non consultant led) - Face to face	BC ICS	Other	March 2023	178,285				Higher better
EM32e Outpatient attendances (all TFC; consultant and non consultant led) - First telephone or Video consultation	BC ICB	Other	March 2023	5,195				Higher better
EM32e Outpatient attendances (all TFC; consultant and non consultant led) - First telephone or Video consultation	BC ICS	Other	March 2023	7,173				Higher better
EM33a Number of requests for pre referral specialist advice (including advice and guidance models)	BC ICB	Other	March 2023	3,511				Higher better
EM35e Neurology - Day Case (TFC 400)	BC ICB	Other	March 2023	20				Higher better
EM35e Neurology - Day Case (TFC 400)	BC ICS	Other	March 2023	21				Higher better
Staff survey bullying and harassment score - Proportion of staff who say they have personally experienced harassment, bullying or abuse at work from b) other colleague	BC ICB	NOF 23/24	December 2022	0				Lower better
Staff survey bullying and harassment score - Proportion of staff who say they have personally experienced harassment, bullying or abuse at work from b) other colleague	BC ICS	NOF 23/24	December 2022	0				Lower better

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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
Adult Acute LoS Over 60 Days % of total discharges	BC ICS	NOF 23/24	May 2023	21%	%			Lower better
The % of patients waiting 6 weeks or more for a diagnostic test	BC ICS	NOF 23/24	June 2023	39%	15%			Lower better
Access rates to community mental health services for adult and older adults with severe mental illness	BC ICB	NOF 23/24	May 2023	97%	100%			Higher better
Older Adult Acute LoS Over 90 Days % of total discharges	BC ICS	NOF 23/24	May 2023	35%	%			Lower better
The % of patients waiting 6 weeks or more for a diagnostic test	BC ICB	NOF 23/24	June 2023	38%	15%			Lower better
EB26a Diagnostic Tests - Magnetic Resonance Imaging	BC ICS	Other	February 2023	9,535				Higher better
EB26d Diagnostic Tests - Colonoscopy	BC ICS	Other	February 2023	1,155				Higher better
EM10a Elective day case spells	BC ICB	Other	March 2023	12,545				Higher better
EM10a Elective day case spells	BC ICS	Other	March 2023	15,611				Higher better
EM20 Number of New RTT Pathways (Clockstarts)	BC ICS	Other	March 2023	53,151				Higher better
EM33a Number of requests for pre referral specialist advice (including advice and guidance models)	BC ICB	Other	March 2023	3,511				Higher better
EM36c Cardiac Surgery - Ordinary (TFC 172)	BC ICB	Other	March 2023	3				Higher better
EM36c Cardiac Surgery - Ordinary (TFC 172)	BC ICS	Other	March 2023	35				Higher better
Percentage of beds occupied by patients who no longer meet the criteria to reside	BC ICS	NOF 23/24	July 2023	12%				Lower better































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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
The % of patients waiting 6 weeks or more for a diagnostic test	BC ICS	NOF 23/24	June 2023	39%	15%			Lower better
EM11a Non-elective spells with a length of stay of zero days	BC ICB	Other	March 2023	7,430				Lower better
EM11a Non-elective spells with a length of stay of zero days	BC ICS	Other	March 2023	8,847				Lower better
The % of patients waiting 6 weeks or more for a diagnostic test	BC ICB	NOF 23/24	June 2023	38%	15%			Lower better
CQC well -led rating	BC ICS	NOF 23/24	July 2023	3				Higher better
EM11d Non-elective spells with a length of stay of 1 or more days (Non-COVID)	BC ICB	Other	March 2023	8,370				Lower better
EM11d Non-elective spells with a length of stay of 1 or more days (Non-COVID)	BC ICS	Other	March 2023	11,138				Lower better
EM12 Type 1-4 A&E Attendances excluding Planned Follow Ups	BC ICB	Other	April 2023	34,111				Lower better
EM12 Type 1-4 A&E Attendances excluding Planned Follow Ups	BC ICS	Other	April 2023	49,428				Lower better
EM35c Cardiac Surgery - Day Case (TFC 172)	BC ICS	Other	February 2023	2				Higher better
EM35d Vascular Surgery - Day Case (TFC 107)	BC ICB	Other	March 2023	69				Higher better
EM35d Vascular Surgery - Day Case (TFC 107)	BC ICS	Other	March 2023	81				Higher better
EM9 Consultant-led follow-up outpatient attendances (excluding diagnostic imaging)	BC ICB	Other	March 2023	51,984				Lower better
EM9 Consultant-led follow-up outpatient attendances (excluding diagnostic imaging)	BC ICS	Other	March 2023	69,514				Lower better
The percentage of patients receiving their first definitive treatment within one month (31 days) of a decision to treat (as a proxy for diagnosis) for cancer	BC ICS	Other	June 2023	86%				Higher better
The percentage of patients receiving their first definitive treatment within one month (31 days) of a decision to treat (as a proxy for diagnosis) for cancer	BC ICB	Other	July 2023	89%				Higher better

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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
A&E - percentage of patients managed within 4 hours.	BC ICB	NOF 23/24	July 2023	74%				Higher better
Access rate for IAPT services	BC ICB	NOF 23/24	March 2023	58%	100%			Higher better
EM9b Consultant-led follow up outpatient attendances with a procedure (excluding diagnostic imaging)	BC ICB	Other	March 2023	5,550				Higher better
EM9b Consultant-led follow up outpatient attendances with a procedure (excluding diagnostic imaging)	BC ICS	Other	March 2023	7,991				Higher better
Summary Hospital -level Mortality Indicator	BC ICS	NOF 23/24	March 2023	2				Lower better
Adult inpatients with a learning disability and/or autism per million adult population	BC ICB	NOF 23/24	March 2023	0				Lower better
EB26b Diagnostic Tests - Computed Tomography	BC ICS	Other	February 2023	13,832				Higher better
EB31 Number of patients receiving first definitive treatment following a diagnosis within the month, for all cancers	BC ICS	Other	February 2023	566				Higher better
EM35b Cardiology - Day Case (TFC 320)	BC ICB	Other	March 2023	349				Higher better
EM35b Cardiology - Day Case (TFC 320)	BC ICS	Other	March 2023	479				Higher better
EM7b Total other referrals (general and acute)	BC ICS	Other	February 2023	21,853				Higher better
EM8 Consultant-led first outpatient attendances (excluding diagnostic imaging)	BC ICB	Other	March 2023	32,909				Higher better
EM8 Consultant-led first outpatient attendances (excluding diagnostic imaging)	BC ICS	Other	March 2023	45,968				Higher better

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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
EB18 Number of 52+ week RTT waits Monthly Provider	BC ICS	Other	February 2023	8,448				Lower better
Diagnostic activity waiting times - percentage of patients seen within 6 weeks.	BC ICB	NOF 23/24	May 2023	41%				hB
EB26g Diagnostic Tests - Cardiology - Echocardiography	BC ICS	Other	February 2023	3,320				Higher better
EM35a Neurosurgery - Day Case (TFC 150)	BC ICB	Other	March 2023	4				Higher better
EM36a Neurosurgery - Ordinary (TFC 150)	BC ICB	Other	March 2023	12				Higher better
EM36e Neurology - Ordinary (TFC 400)	BC ICS	Other	February 2023	1				Higher better
EM36e Neurology - Ordinary (TFC 400)	BC ICB	Other	March 2023	1				Higher better
EM36f Solid organ Transplant - Ordinary (TFC 102 or 174)	BC ICS	Other	April 2019	2				Higher better
EM36f Solid organ Transplant - Ordinary (TFC 102 or 174)	BC ICB	Other	February 2023	1				Higher better
EM7b Total other referrals (general and acute)	BC ICS	Other	February 2023	21,853				Higher better
Proportion of patients meeting the faster cancer diagnosis standard	BC ICB	NOF 23/24	June 2023	76%	75%			Higher better
Proportion of patients meeting the faster cancer diagnosis standard	BC ICS	NOF 23/24	June 2023	76%	75%			Higher better
Staff survey engagement theme score	BC ICB	NOF 23/24	December 2022	7				Higher better
Staff survey engagement theme score	BC ICS	NOF 23/24	December 2022	7				Higher better
Women accessing specialist community perinatal mental health services	BC ICB	NOF 23/24	April 2023	3				Higher better



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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
Antimicrobial resistance: total prescribing of antibiotics in primary care	BC ICB	NOF 23/24	May 2023	108%	87%			Lower better
Methicillin-resistant Staphylococcus aureus (MRSA) bacteraemia infection rate	BC ICB	NOF 23/24	June 2023	21				Lower better
Population vaccination coverage: MMR for two doses (5 year olds)	BC ICB	NOF 23/24	March 2023	82%	95%			Higher better
Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care	BC ICB	NOF 23/24	May 2023	6%	10%			Lower better
EM11c Non-elective spells with a length of stay of 1 or more days (COVID)	BC ICB	Other	March 2023	85				Lower better
EM11c Non-elective spells with a length of stay of 1 or more days (COVID)	BC ICS	Other	March 2023	100				Lower better
EM36a Neurosurgery - Ordinary (TFC 150)	BC ICB	Other	March 2023	12				Higher better
Methicillin-resistant Staphylococcus aureus (MRSA) bacteraemia infection rate	BC ICS	NOF 23/24	June 2023	5				Lower better
National Patient Safety Alerts not completed by deadline	BC ICS	NOF 23/24	August 2022	2				Lower better
NHS Staff Survey raising concerns people promise element sub-score	BC ICB	NOF 23/24	December 2022	7				Lower better
NHS Staff Survey raising concerns people promise element sub-score	BC ICS	NOF 23/24	December 2022	6				Lower better
Proportion of staff who agree that their organisation acts fairly with regard to career progression/promotion regardless of ethnic background, gender, religion, sexual orientation, disability or age	BC ICB	NOF 23/24	December 2022	58%				Higher better
Proportion of staff who agree that their organisation acts fairly with regard to career progression/promotion regardless of ethnic background, gender, religion, sexual orientation, disability or age	BC ICS	NOF 23/24	December 2022	56%				Higher better

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Indicator	ICB/ICS	Domain	Latest Period	Latest Value	Target	Variation	Target	Direction
Population vaccination coverage: MMR for two doses (5 year olds)	BC ICB	NOF 23/24	March 2023	82%	95%			Higher better
Proportion of people aged 14 and over with a learning disability on the GP register receiving an annual health check	BC ICB	NOF 23/24	June 2023	11%	100%			Higher better
Total patients waiting more than 78 weeks to start consultant led treatment	BC ICB	SOF 22/23	June 2023	41	0			Lower better
Total patients waiting more than 78 weeks to start consultant led treatment	BC ICS	SOF 22/23	June 2023	60	0			Lower better
Direct patient care staff in GP practices and PCNs per 10,000 weighted patients	BC ICB	NOF 23/24	December 2021	0				Higher better
EM18 Number of Completed Admitted RTT Pathways	BC ICS	Other	March 2023	14,366				Higher better
Neonatal deaths per 1,000 total live births	BC ICB	NOF 23/24	December 2021	0				Lower better
Neonatal deaths per 1,000 total live births	BC ICS	NOF 23/24	December 2021	0				Lower better
Percentage of patients describing their overall experience of making a GP appointment as good	BC ICB	NOF 23/24	December 2022	47%				Higher better
Proportion of staff in senior leadership roles who are from a BME background	BC ICS	NOF 23/24	December 2022	15%	12%			Higher better
Staff survey - compassionate and inclusive theme score.	BC ICB	NOF 23/24	December 2022	7				Higher better
Staff survey - compassionate and inclusive theme score.	BC ICS	NOF 23/24	December 2022	7				Higher better
Stillbirths per 1,000 total births	BC ICB	NOF 23/24	December 2021	0				Lower better
Stillbirths per 1,000 total births	BC ICS	NOF 23/24	December 2021	0				Lower better
Virtual ward - percentage capacity occupied.	BC ICB	NOF 23/24	July 2023	58%				Higher better