

Stockport Locality Performance Report

September 2024

One Stockport Health and Care Board

25 September 2024

Required information	Details
Title of report	Locality performance reporting
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Executive summary	The purpose of this paper is to provide One Stockport Health and Care Board with an opportunity to review and discuss Stockport's latest position in relation to measures for which the Board has responsibility.
The benefits that the population of Greater Manchester will experience.	Transparency of the performance at Stockport locality when compared to other Greater Manchester localities
How health inequalities will be reduced in Greater Manchester's communities.	Focus on performance against each Metric.
The decision to be made and/or input sought	The One Stockport Health and Care Board is asked to note and discuss the content of the report.
How this supports the delivery of the strategy and mitigates the BAF risks	Provides information relating to risk - Failure to achieve statutory duties including the NHS Constitutional targets
Key milestones	Continual monitoring
Leadership and governance arrangements	Following discussion at the One Stockport Executive Group, an updated version of that presentation accompanies this report.
Engagement* to date	None
*Engagement: public, clinical. Analysis: equality, sustainability, financial. Comments/ approval by groups/ committees.	

Public engagement	Clinical engagement	Sustainability impact	Financial advice	Legal advice	Conflicts of Interest	Report accessible
N	N	N	N	N	N	Y

Table 1 - checklist of engagement carried out, advice sought, conflict of interest and accessibility of report

Introduction

The purpose of this paper is to outline to the One Stockport Health and Care Board the Stockport Locality Performance Report for each of the identified ‘Oversight’ metrics. The information provided has been downloaded from the GM Intelligence Hub (also known as Tableau / Curator).

The Greater Manchester Integrated Care System Operating model describes the delegation of responsibilities to the 10 Greater Manchester localities. One Stockport Health and Care Board is accountable for those delegated responsibilities and needs oversight of the relevant indicators, issues and recovery plans.

The full performance report arises from the responsibilities delegated to the locality by NHS Greater Manchester, and therefore primarily focuses on NHS indicators.

Report

- 1.0 The performance report shows the position against each of the metrics delegated to Stockport Locality and compares the latest and previous performance against national targets and shows benchmarking against other GM Localities.
- 1.1. Urgent Care, Elective Care, Cancer, Mental Health, Learning Disability and Autism, Primary Care and Community Services, Quality, Maternity, Screening and Immunisations indicators are included in the performance report and should be used as a tool to support system recovery.

Locality Assurance Meeting

- 2.0 NHS Greater Manchester has agreed the GM Place Assurance Model as part of the Integrated Care Board’s (ICB’s) system oversight and assurance process. Place assurance is focused on four domains – finance and contracting, performance, quality and safety and workforce. The performance report is used as the basis of the performance discussion.
- 2.1. To receive Place assurance a quarterly Locality Assurance Meeting, chaired by the NHS GM Deputy Chief Executive, has been put in place. The first Stockport meeting took place in early June 2024 and a second meeting covering quarter 1 position took place at the beginning of September 2024. Prior to the meeting a pre-meet took place in which it was agreed which areas of the locality’s responsibilities the meeting would

focus on, through “Key Lines of Enquiry” and evidence was gathered by Stockport team to provide supporting information and assurance.

- 2.2. Following the meetings a letter is prepared by the NHS GM Deputy Chief Executive which documents the key discussions and agreed actions.

Recommendations

- 3.0 The One Stockport Health and Care Board is asked to:

- Note and discuss the contents of the report.

Highlights

- 4.0 The following are highlights from the PIA report are based on those that have recent data reported, and that have a national target assigned.

- 4.1 In August 2024, 5904 of the 8878 (66.5%) who attended A&E, waited less than 4 hours from arrival to either the time of admission, the time of discharge or the time of transfer. This is a 2.9% improvement on the previous month and remains 11.5% below the national target of 78%. (Slides 4 & 5)

- A&E performance has continued in an upward trajectory since February 2024.
- Attendances in August 2024 were amongst the lowest recorded in recent years; lower than that recorded in the same period in August 2023 (-367), August 2022 (-165) and August 2021 (-641).
- **Action:** There is an urgent and emergency care plan which covers admissions avoidance, hospital flow and discharge elements.

- 4.2 As of June 2024, Stockport had 4110 children and young people accessing mental health services: 1015 below the national median. (Slide 6)

- This number has been reducing each month since February but remains a challenge.
- The number of contacts is likely to reduce over the next two months due to summer holidays, where the Mental Health Support Teams were not operating due to school holidays.
- **Action:** Expanded capacity in Mental Health support teams will mean the activity is expected to increase from September 2024.

- 4.3 Stockport continue to have a high proportion of people with dementia aged 65 and over being recorded in primary care (75.5%); exceeding the national target of 66.7%. Stockport have the 4th highest rate in Greater Manchester and 10th best performing in the

country. (Slide 7)

4.4 62.5% of all discharges from adult acute in mental health beds were discharged following a length of stay over 60 days in June 2024. (Slide 8)

- **Action:** Twice weekly bed meetings are in place where there is a focus on patients who are in acute mental health wards over 60 days.
- **Action:** All patients now have an estimated date for discharge, however some patients experiencing longer lengths of stay tend to be due to complex treatment pathways, involving long stays in psychiatric intensive care units, medication changes, and often co-occurring conditions, rather than delays in discharge contributing to long length of stay.

4.5 The percentage of occupied beds by mental health patients who are ready to be discharged in August was 5.7%, the lowest in Greater Manchester. (Slide 9)

- **Action:** All patients now have an estimated date of discharge, any barriers to discharge are identified on admission and the system partners work closely to facilitate discharge.

4.6 Stockport continues to exceed the 70% target for a 2-hour urgent community response for all referrals (96.4%).

Action: Work is ongoing to increase referrals to the service in line with the national guidance on UCR referral trajectory which may impact the performance. However, response rates are still expected to exceed the national target. (Slide 10)

4.7 The percentage of GP appointments where the time between booking and attendance was within 14 days was above the national median in Stockport (84.2%) according to July's figures. (Slide 11)

4.8 The total number of antibiotics prescribed in Stockport locality is above the national target (87.1%) at 104.5% for June. This is a 0.5% improvement (decrease) in the rate since May. (Slide 12)

- **Action:** There are several actions being undertaken to reduce prescribing (please refer to the PIA report for more detail).

4.9 In June 2024, 23.4% of people waited 6 weeks or more for a diagnostic test; a decrease of 1% from May. The national target is 1%. (Slide 15)

- Stockport have the highest rate waiting 6 weeks or more in Greater Manchester. The most challenging areas for Stockport patients are for, ECHO, CT scans, and MRI scans.
- **Action:** The Trust have two MRI scanning units in place off-site and this should result in an improvement in wait times. The Stockport/Tameside Community Diagnostic Centre is now live (from 1st August 2024) with Stockport access to the modalities listed. This should also result in improved wait times.

- 4.10 As of the beginning of September, there was a risk 65 patients would not meet the 65-week target at Stockport Foundation Trust. This is considerably lower than the June figure currently reported. The number of 65 + week incomplete pathways has continued to decrease from September 2022. The national target is 0 patients. (Slide 16)
- 4.11 The proportion of patients told their cancer diagnosis outcomes within 28 days of a referral for suspected cancer was above the national target in Stockport in June 2024 (82.2%). (Slide 17)
- Stockport were the highest performing locality in Greater Manchester, and the 11th highest in the country.
- 4.12 The number of inappropriate adult acute mental health Out of Area Placement (OAP) bed days reported in March 2024 was 790, against the national target of 0. (Slide 18)
- **Action:** Daily reports on Out of Area Placements (OAPS) are received by Locality and although Stockport are not at 'zero OAPs' we maintain a good position in Greater Manchester, with only 2 patients in out of area PICU beds and consequently fewer bed days than reported in March.
 - **Action:** Weekly Locality escalation meetings based on last week's data continue to review all OAPs, and fortnightly GM Multi Agency Discharge Events (MADE) chaired by GM Chief Medical Officer – are in place for escalation for individual localities, these have now changed to be on a Trust footprint.