

# Stockport Locality Performance Report

October 2024

One Stockport Health and Care Board

30 October 2024

Required information	Details					
<b>Title of report</b>	Locality Performance Report					
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<b>Executive summary</b>	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.					
<b>The benefits that the population of Greater Manchester will experience</b>	Transparency of the performance at Stockport locality when compared to other Greater Manchester localities					
<b>How health inequalities will be reduced in Greater Manchester's communities</b>	Focus on performance against each Metric.					
<b>The decision to be made and/or input sought</b>	The One Stockport Health and Care Board is asked to note and discuss the content of the report.					
<b>How this supports the delivery of the strategy and mitigates the BAF risks</b>	Provides information relating to risk - Failure to achieve statutory duties including the NHS Constitutional targets.					
<b>Key milestones</b>	Continual monitoring					
<b>Leadership and governance arrangements</b>	Following discussion at the One Stockport Executive Group, an updated version of that presentation accompanies this report.					
<b>Engagement* to date</b>	None					
<p><b>*Engagement: public, clinical. Analysis: equality, sustainability, financial. Comments/ approval by groups/ committees.</b></p>						
Public engagement	Clinical engagement	Sustainability impact	Financial advice	Legal advice	Conflicts of Interest	Report accessible

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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 quarterly Locality Assurance Meetings, chaired by the NHS GM Deputy Chief Executive, have been put in place. The meetings for Stockport have thus far taken place in June and September with a third meeting expected to take place 1<sup>st</sup> November 2024. Prior to each meeting a pre-meet takes place in which the focus is on “Key Lines of Enquiry” and evidence gathered by the 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 Performance Improvement Assurance (PIA) report and are based on those that have recent data reported, and that have a national target assigned.
- 4.1 In September 2024, 5839 of the 9342 (62.5%) 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 4.4% decrease from August. A decrease from August to September is a trend that has occurred for the last few years. Performance remains 15.5% off the national target of 78%. (Slides 4 & 5)
- **Action:** The urgent and emergency care plan to achieve the national target of 78% which covers admissions avoidance, hospital flow and discharge elements is currently on track.
  - **Action:** All programme leads within the Urgent and Emergency Care Delivery Board are to bring specific, time bound detailed updates to support our ongoing assurance on this target.
- 4.2 The percentage of adult general and acute overnight beds occupied as an average was 93.5% in September 2024. This is a 2.1% increase on the previous month where occupancy was 91.4%.
- There had been a gradual decrease over the calendar year from peak occupancy in December 2023. The rise in bed occupancy in September is consistent with historic seasonal trends at the same time of year. The national target is 92%. (Slide 6)
- 4.3 The standard for achieving 75% of people on the Quality Outcomes Framework Learning Disability register receiving an annual health check is an annual target that Stockport has achieved over the last three years.
- As of July 2024, 25.6% have received an annual health check in Stockport. At this point in the year, (one third of the way through) this would be above an incremental target of 25%.

The performance to date shows that Stockport is performing better than the previous two years (2022-23, and 2023-24). (Slide 7)

- 4.4 As of August 2024, Stockport had 4080 children and young people accessing mental health services, 30 less than the previous month and 958 below the national median.

We are now beginning to see the contacts plateau which will continue during holiday season reporting period due to the Mental Health Support Teams in schools only operating in term time only not operating. (Slide 8)

- **Action:** Expanded capacity in Mental Health support teams in schools will mean the activity is expected to increase from September 2024.

- 4.5 Stockport continue to have a high proportion of people with dementia aged 65 and over being recorded in primary care with 76%; exceeding the national target of 66.7%.

Stockport have the 3rd highest rate in Greater Manchester and 9th in the country which is positive. (Slide 9)

- 4.6 The number of inappropriate adult acute mental health Out of Area Placement (OAP) bed days reported in March 2024 for the previous 3 months (January to March) was 790. The national target is 0.

Daily reports on OAPs are received by Locality and although Stockport are not at 'zero OAPs' we maintain a good position in Greater Manchester, with 3 OAPs currently active and patients are admitted to an inpatient unit outside of Greater Manchester for Stockport as of 9th October 2024. (Slide 10)

- **Action:** Weekly Locality escalation meetings 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.

- 4.7 The position as of July 2024 shows 42.9% of all Mental Health discharges from adult acute and older acute beds with a length of stay of over 60 days; a significant decrease compared with June (62.5%). (Slide 11)

- **Action:** Twice weekly bed meetings are in place where there is a focus on patients who are in an acute mental health bed 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.

- 4.8 The percentage of occupied beds by mental health patients who are ready to be discharged in September was 6.0%, the second lowest in Greater Manchester although 0.4% higher than reported in August. (Slide 12)

- **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. The Performance Improvement Plan for Clinically Ready for Discharge is being monitored in the weekly Locality Escalation Meeting.

4.9 Stockport continues to exceed the 70% target for 2-hour urgent community responses (UCR) for all referrals (96.1%) in August. (Slide 13)

**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.

4.10 The percentage of GP appointments where the time between booking and attendance was within 14 days was above the national median in Stockport (84.4%) according to August's figures.

Stockport has remained above the national median since October 2023, has the third highest rate in Greater Manchester and ranks 30th in the country. (Slide 14)

4.11 The total number of antibiotics prescribed in Stockport locality is above the national target (87.1%) at 104.3% for July, the highest rate in Greater Manchester.

This is a 0.1% increase in the rate since June. Over the previous 2 years there has been increase in prescribing of antibiotics which peaked at 107.1% in Nov 2023. (Slide 15)

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

4.12 The proportion of broad-spectrum antibiotics prescribed in Stockport remained below the 10% national target in July 2024 at 7.3%.

Stockport ranks 45th out of 112 services nationally and maintaining a steady trajectory by remaining low on this metric. (Slide 16)

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

4.13 In July 2024, 24.5% of people waited 6 weeks or more for a diagnostic test; an increase of 1.1% from June. Stockport have the highest rate waiting above 6 weeks in Greater Manchester and are ranked 76th out of 107 services in the country.

The areas with the longest times are ECHO, CT Sleep studies (respiratory physiology) and MRI. (Slide 19)

- **Action:** Stockport Foundation 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.

- 4.14 As of the beginning of September, there were 65 patients who would not meet the 65-week target at Stockport NHS Foundation Trust. This is considerably lower than the June figure currently reported and has been decreasing since September 2022.

The un-finalised position for Stockport waiters at Stockport Foundation trust in September was 42, as per Stockport NHS Foundation Trust's submission. The Speciality with the longest waits is Ear Nose and Throat. (Slide 20)

**Action:** Stockport NHS Foundation Trust are using sub-contracting arrangements with Community Health and Eye Care for Ophthalmology and Beacon Medical for Ear, Nose and Throat (ENT).

- 4.15 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 July 2024 (76.7%). Stockport were the 4th highest performing locality in Greater Manchester, and the 52nd highest in the country. (Slide 21)

**Action:** Stockport NHS Foundation Trust is working with the individual tumour groups to support them in achieving the 28 Day Faster Diagnosis Standard.

**Action:** Weekly meetings with the tumour groups to discuss individual patients on the Patient Targeting List and what is needed to support providing a definitive diagnosis. e.g. a specific diagnostic.

**Action:** There is a member of staff who is responsible for providing an overview of these patients and following up with individual clinicians/departments to support achievement of the 28 Day Faster Diagnosis Standard.

- 4.16 The proportion of the population who have received two Measles, Mumps, Rubella (MMR) doses is reported quarterly at present. (Slide 22)

Data reported for the end of June 2024 shows Stockport as having the highest uptake in Greater Manchester, and 11th in the country. However, this is still 2.6% below the national target of 95%.

**Action:** The Stockport Public Health team are supporting general practice to identify and engage those who have not previously presented for an MMR.