

PIA Locality Report

Activity up to September 2024

File created on: 10/8/2024 11:09:33 AM

Stockport - Oversight Metrics											Show Definitions
Domain	Code	Measure	Frequency	Date	Latest	Previous	Change	Target/Median	Numerator	Denominator	Quartile
Urgent Care	N/A	A&E 4 hour performance	Monthly	Sep 24	62.5%	66.9%	↘	76.0%	5,839	9,342	N/A
	N/A	A&E Attendances	Monthly	Sep 24	9,342	8,917	↗	N/A	N/A	N/A	N/A
	S123a	Adult general & acute bed occupancy adjusted for void beds (Type 1 Only) (Stockport FT)	Monthly	Mar 24	94.8%	96.4%	↘	92.0%	588	620	Inter
	N/A	No Reason/Criteria To Reside patients (NCTR) as % of occupied beds	Monthly	Sep 24	9.1%	8.4%	↗	N/A	1,626	17,893	N/A
	EM11	Total number of specific acute non-elective spells	Monthly	Sep 24	3,294	3,433	↔	N/A	N/A	N/A	Lower
	EM30a	Average number of adult G&A overnight beds available (Stockport FT)	Monthly	Sep 24	93.5%	91.4%	↗	N/A	577	617	Inter
Elective Care	EM07a	GP Referrals Made (General and Acute)	Monthly	Mar 24	5,878	6,139	↘	5,744	N/A	N/A	Inter
	EM07	Total Referrals Made (General and Acute)	Monthly	Mar 24	9,564	9,712	↘	10,411	N/A	N/A	Inter
Cancer	N/A	Cancers Diagnosed At Early Stage using Full Registration Data	Annual	Dec 21	53.3%	53.5%	↘	75.0%	807	1,515	Inter
Mental Health & Learning Disabilities	S030a	% of patients aged 14+ with a completed LD health check	Monthly	Jul 24	25.6%	16.2%	↗	75.0%	424	1,659	Upper
	EH09	Access to Children and Young Peoples Mental Health Services	Monthly	Aug 24	4,080	4,110	↔	5,080	N/A	N/A	Inter
	EAS01	Dementia: Diagnosis Rate (Aged 65+)	Monthly	Aug 24	76.0%	75.5%	↗	66.7%	3,231	4,250	Upper
	S086a	Inappropriate adult acute mental health Out of Area Placement (OAP) bed days	Monthly	Mar 24	790	695	↗	0	N/A	N/A	Lower
	N/A	Number of MH patients with no criteria to reside (NCTR)	Monthly	Sep 24	9	8	↗	N/A	N/A	N/A	Inter
	N/A	Percentage of MH patients with no criteria to reside (NCTR)	Monthly	Sep 24	6.0%	5.6%	↗	N/A	9	150	Inter
	S110a	Overall Access to Community MH Services for Adults and Older Adults with Severe Mental Illnesses	Monthly	Jul 24	1,450	1,445	↗	3,648	N/A	N/A	Lower
	S081a	Talking Therapies: Access Rate	Monthly	Jul 24	380	390	↘	N/A	N/A	N/A	Lower
	S131a	Women Accessing Specialist Community Perinatal Mental Health Services	Quarterly	Jul 24	275	265	↗	N/A	N/A	N/A	Inter
	S125a	Long length of stay for adults (60+ days)	Monthly	Jul 24	42.9%	62.5%	↘	0.0%	15	35	Inter
Community	N/A	% 2-hour Urgent Community Response (UCR) first care contacts	Monthly	Aug 24	96.1%	96.4%	↘	N/A	171	178	N/A
Primary Care	S053b	% of hypertension patients who are treated to target as per NICE guidance	Annual	Mar 23	73.3%	64.7%	↗	77.0%	36,567	49,866	Upper
	S053c	% of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins	Quarterly	Mar 24	63.7%	62.6%	↗	62.1%	9,755	15,320	Inter
	S129a	GP appointments - percentage of regular appointments within 14 days	Monthly	Aug 24	84.4%	84.2%	↗	82.0%	120,044	142,173	Inter
Quality	S042a	E. coli blood stream infections	Monthly	Aug 24	249	251	↘	N/A	N/A	N/A	Inter
	S044a	Antimicrobial resistance: total prescribing of antibiotics in primary care	Monthly	Jul 24	104.3%	104.2%	↗	87.1%	N/A	N/A	Lower
	S044b	Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care	Monthly	Jul 24	7.3%	7.2%	↗	10.0%	14,976	205,915	Inter

Stockport - Oversight Metrics

The below metrics are currently missing from the report due to lack of locality level reporting or the measure is currently being built.

Theme	Indicator	
Urgent and Emergency Care	Reduce adult general and acute bed occupancy below 92%	Currently available in the scorecard at trust level but not locality
Primary Care and Community Services	Proportion of Urgent Community Response referrals reached within two hours	Currently available in the scorecard at trust level but not locality
	% patients describing their overall experience of making a GP appointment as good	Build in progress
	Proportion of virtual ward beds occupied	Currently unavailable at locality level due to inaccurate reporting

Stockport

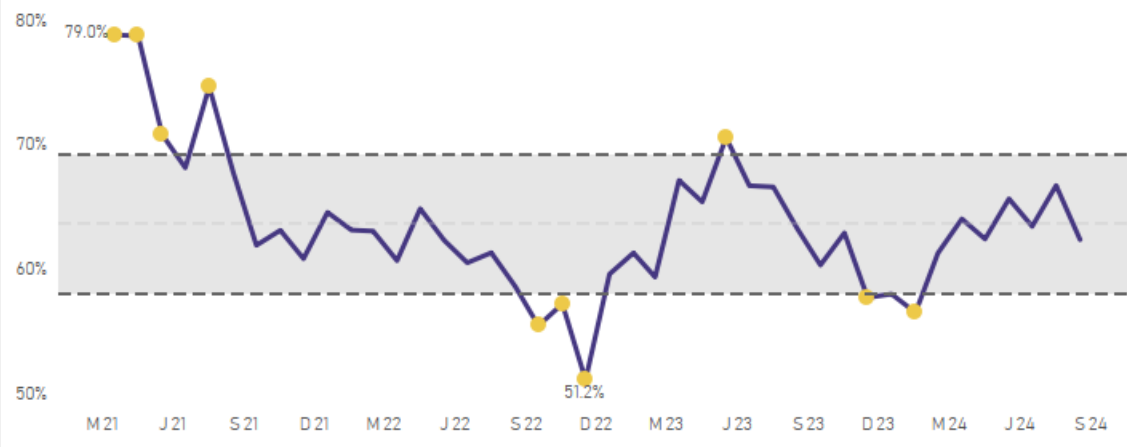
A&E 4 hour performance

Number of attendances at A&E departments, and of these, the number of attendances where the patient spent less than 4 hours from time of arrival to time of admission, or discharge, or transfer.

Source: Emergency Care Dataset (ECDS) (Monthly)



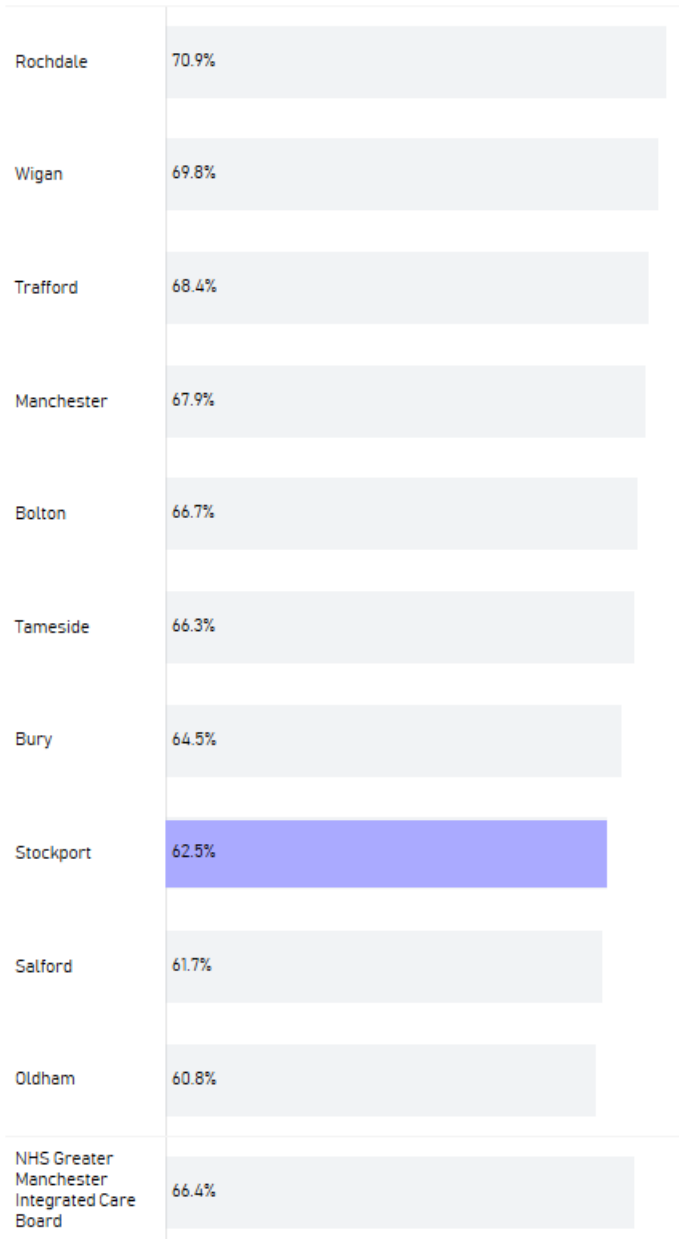
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	79.0%	78.9%	71.0%	68.3%	74.8%	67.9%	62.0%	63.3%	61.0%	64.7%	63.3%	63.2%
2022-23	60.8%	65.0%	62.5%	60.6%	61.5%	58.7%	55.6%	57.3%	51.2%	59.7%	61.4%	59.5%
2023-24	67.3%	65.5%	70.7%	66.8%	66.7%	63.4%	60.5%	63.0%	57.8%	58.1%	56.6%	61.4%
2024-25	64.2%	62.6%	65.8%	63.6%	66.9%	62.5%						

Selected measure at September 2024 has continuously **decreased** for **1** period(s) of time

Latest Value GM Benchmarking



Updated: 9th October 2024

In September 2024, 62.5% of those 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%.

There is an urgent and emergency care plan that covers admission avoidance, hospital flow and discharge elements.

A jointly agreed Performance Improvement Plan is submitted monthly to GM and NHS England. It contains agreed actions from the Trust and the Locality across 13 workstreams, each contributing to reach the 78% performance target .e.g. Intermediate care, brokerage, Home First, Reducing long lengths of stay in community beds etc.

These workstreams report through internal trust governance and the Locality Safe and Timely Discharge Group, highlights of which are received by the Stockport Urgent and Emergency Care Delivery Board.

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.

A&E Attendances

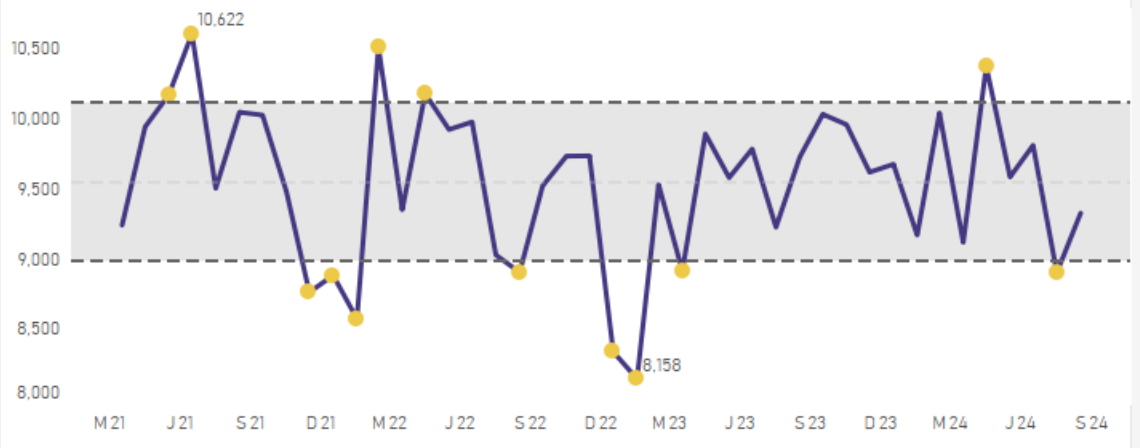
Number of attendances at A&E departments

Source: Emergency Care Dataset (ECDS) (Monthly)

9,342
September 2024

8,917
August 2024

Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	9,256	9,958	10,189	10,622	9,519	10,063	10,042	9,498	8,776	8,898	8,586	10,528
2022-23	9,366	10,195	9,939	9,993	9,043	8,919	9,537	9,749	9,751	8,351	8,158	9,546
2023-24	8,930	9,908	9,595	9,800	9,241	9,742	10,048	9,974	9,634	9,691	9,185	10,058
2024-25	9,133	10,389	9,600	9,826	8,917	9,342						

Selected measure at September 2024 has continuously **increased** for **1** period(s) of time

Latest Value GM Benchmarking

Attendances Rate per 1000 population & Count



Narrative

Updated: 9th October 2024

In September, there were 9342 attendances in A&E (5839 being seen within 4 hours).

The number of attendances in September 2024 increased by 425 from August.

Stockport had the lowest rate of attendances per 1000 population in Greater Manchester (28.6 per 1000 population).

Stockport FT

Trust level - not locality

Average number of adult G&A overnight beds available

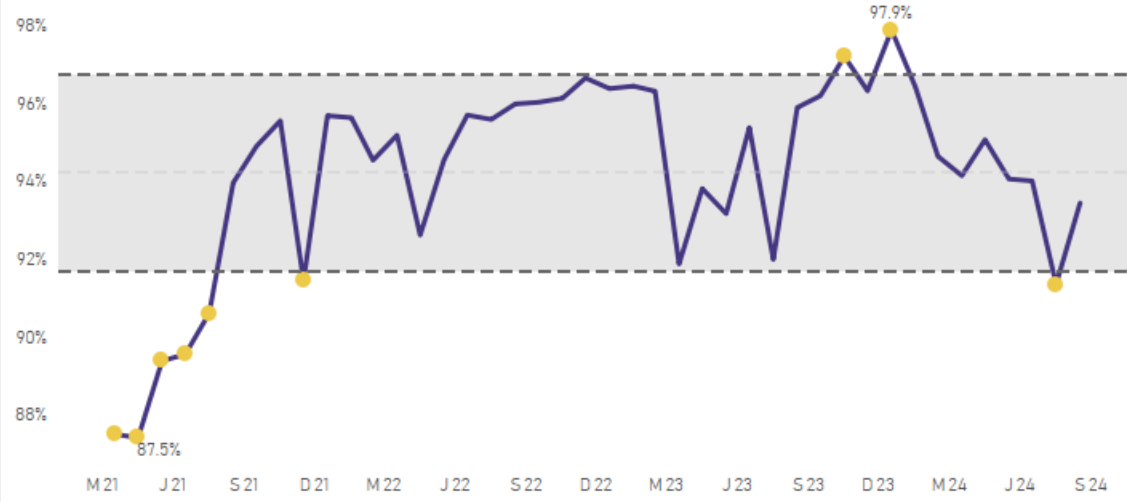
The percentage of adult general and acute (G&A) overnight beds that are occupied, as an average over a monthly period. This uses the UEC daily sitrep definition of a general and acute bed open/occupied as at 8am each day. They exclude maternity and mental health beds.

Source: UEC Daily Sitrep (Monthly)

93.5%
September 2024

91.4%
August 2024

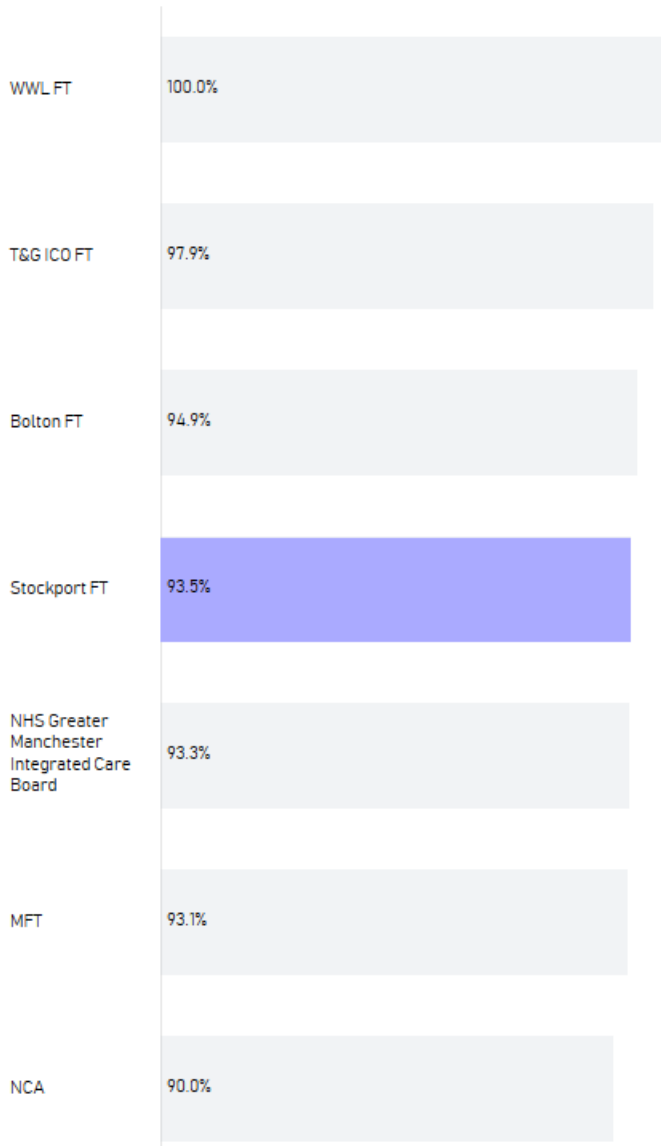
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2022-23	95.2%	92.7%	94.6%	95.7%	95.6%	96.0%	96.1%	96.2%	96.7%	96.4%	96.5%	96.4%
2023-24	91.9%	93.9%	93.2%	95.4%	92.0%	95.9%	96.2%	97.3%	96.4%	97.9%	96.5%	94.7%
2024-25	94.2%	95.1%	94.1%	94.1%	91.4%	93.5%						

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024

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.

% of patients aged 14+ with a completed LD health check

The % of people on the QOF Learning Disability Register who received an annual health check between the start of the financial year and the end of the reporting period

Source: Learning Disabilities Health Check Scheme (Monthly)

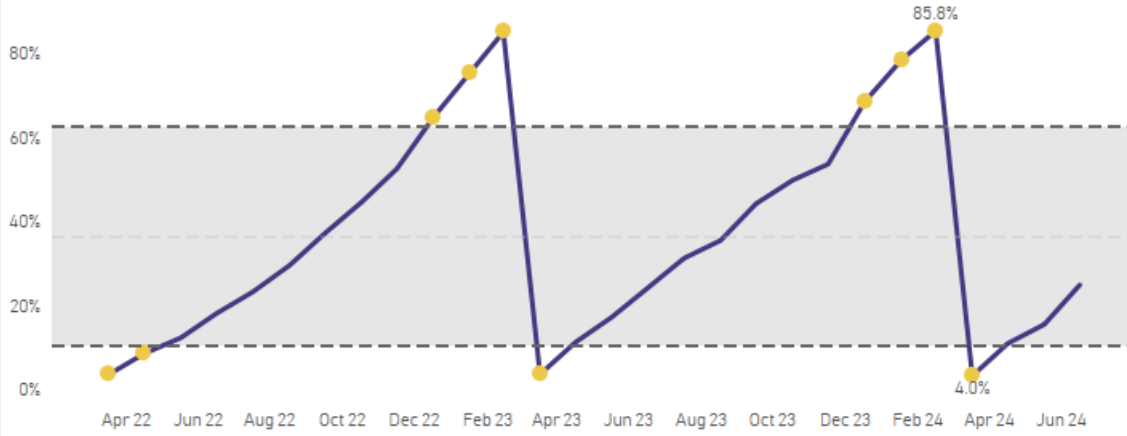
25.6%
July 2024

16.2%
June 2024

6/106
National Rank
Upper Quartile

75%
National Target

Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2022-23	4.3%	9.3%	13.0%	18.8%	23.9%	30.2%	37.8%	45.2%	53.2%	65.4%	76.0%	85.6%
2023-24	4.3%	11.9%	17.9%	24.8%	31.9%	36.1%	44.8%	50.4%	54.2%	69.1%	78.9%	85.8%
2024-25	4.0%	11.7%	16.2%	25.6%								

Selected measure at July 2024 has continuously **increased** for **3** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities

1	Trafford	32.0%
6	Stockport	25.6%
7	Bolton	25.2%
10	Wigan	24.7%
29	Manchester	20.1%
32	Bury	19.8%
33	Rochdale	19.5%
41	Oldham	18.7%
55	Tameside	18.0%
89	Salford	15.4%
4	NHS Greater Manchester Integrated Care Board	21.6%

Narrative

Updated: 9th October 2024

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).

Access to Children and Young Peoples Mental Health Services

Access to Children and Young Peoples Mental Health Services

Source: Published MHSDS (Monthly)

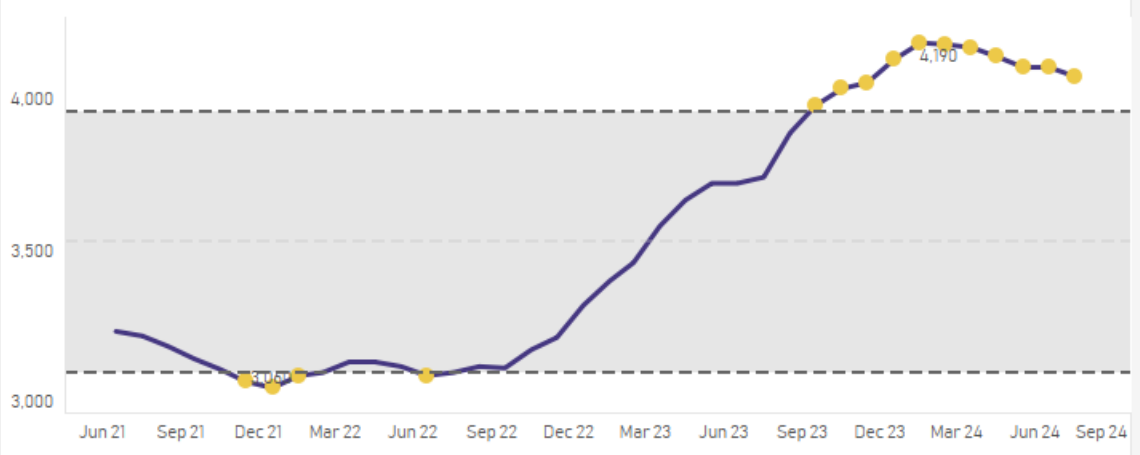
4,080
August 2024

4,110
July 2024

71/106
National Rank
Inter Quartile

5,038
National Median

Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22				3,245	3,230	3,195	3,155	3,120	3,080	3,060	3,100	3,110
2022-23	3,145	3,145	3,130	3,100	3,110	3,130	3,125	3,185	3,225	3,330	3,410	3,470
2023-24	3,590	3,675	3,730	3,730	3,750	3,895	3,985	4,040	4,060	4,135	4,190	4,185
2024-25	4,175	4,145	4,110	4,110	4,080							

Selected measure at August 2024 has continuously **decreased** for **1** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 | Count (National Rank based on count)

Locality	Rate per 1000	Count (National Rank)
Manchester	106.0	15,890 (11)
Tameside	95.2	4,570 (61)
Rochdale	79.7	4,630 (60)
Trafford	78.6	4,280 (69)
Bury	77.7	3,520 (79)
Salford	73.9	4,840 (55)
Wigan	62.1	4,355 (66)
Stockport	61.0	4,080 (71)
Oldham	58.6	3,760 (76)
Bolton	56.5	4,320 (67)

The rate is calculated using the 0-17 population figure for each locality | Stockport: 66,937

Narrative

Updated: 9th October 2024

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.

There has been a general increase in access from September 2022 that coincides with the mobilisation of Mental Health Support Teams in schools.

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 but is expected to increase from September onward.

CAMHS are almost fully recruited to their workforce and staff are at capacity. We will see a steady increase from the Mental Health Support Teams in Schools as the teams expand and increase their offer.

We are also exploring how we report to the Mental Health Services Data Set from Stockport NHS Foundation Trust to capture the 1,000 Children and Young People on the ADHD pathway. This was an action agreed in September's Quarter 2 Locality Assurance Meeting.

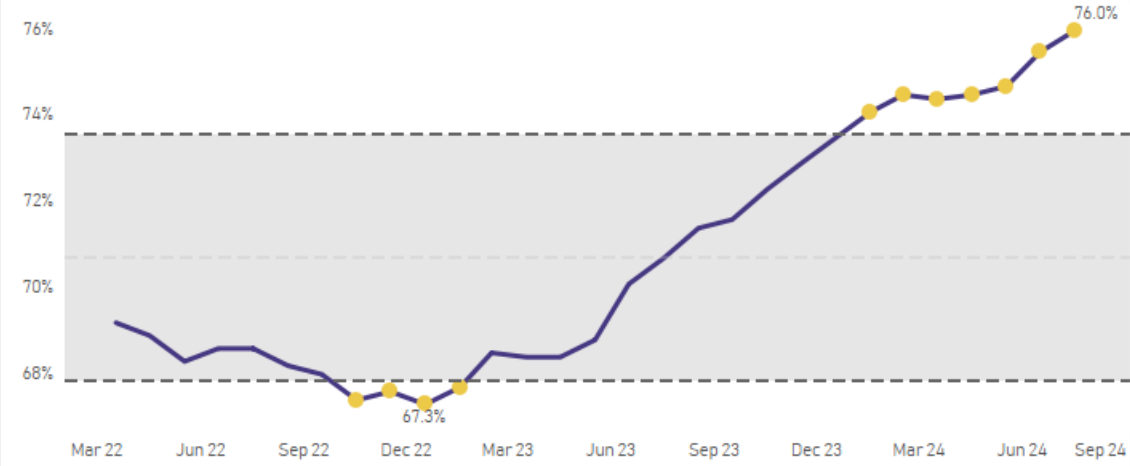
Dementia: Diagnosis Rate (Aged 65+)

Diagnosis rate for people aged 65 and over, with a diagnosis of dementia recorded in primary care, expressed as a percentage of the estimated prevalence based on GP registered populations.

Source: Primary Care Dementia Data (Monthly)



Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2022-23	69.2%	68.9%	68.3%	68.6%	68.6%	68.2%	68.0%	67.4%	67.6%	67.3%	67.7%	68.5%
2023-24	68.4%	68.4%	68.8%	70.1%	70.7%	71.4%	71.6%	72.3%	72.9%	73.5%	74.1%	74.5%
2024-25	74.4%	74.5%	74.7%	75.5%	76.0%							

Selected measure at August 2024 has continuously increased for 4 period(s) of time

Latest Value GM Benchmarking

National Rank against other localities

4	Salford	81.6%
5	Rochdale	78.8%
9	Stockport	76.0%
10	Bury	75.9%
12	Oldham	74.8%
15	Wigan	74.0%
17	Manchester	73.9%
23	Tameside	72.6%
25	Bolton	72.5%
66	Trafford	65.0%
2	NHS Greater Manchester Integrated Care Board	74.3%

Narrative

Updated: 9th October 2024

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.

Please note direction of travel over and above target is positive.

Inappropriate adult acute mental health Out of Area Placement (OAP) bed days

Number of inappropriate OAP bed days for adults that are either 'internal' or 'external' to the sending provider

Source: Out of Area Placements in Mental Health Services Official Statistics (Monthly)

790

March 2024

695

February 2024

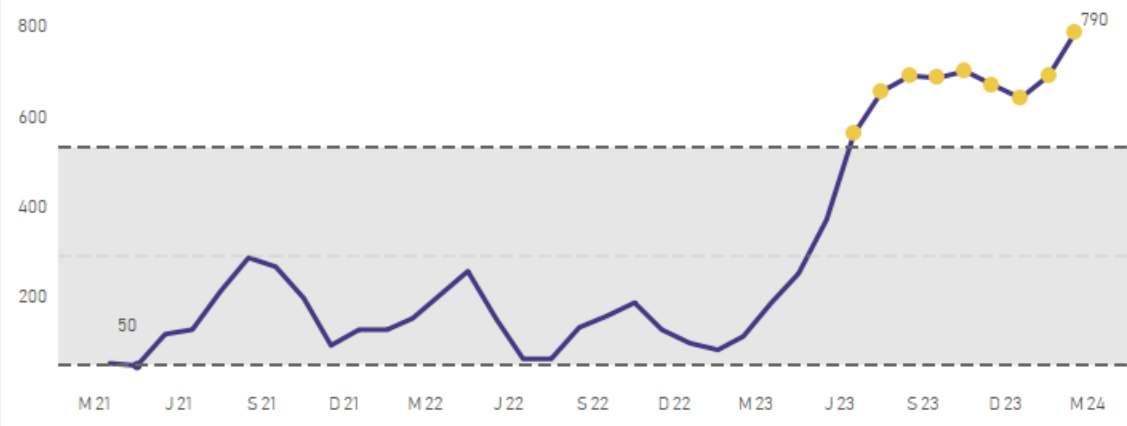
87/107

National Rank
Lower Quartile

0

National Target

Outliers more than 1 standard deviation from the mean

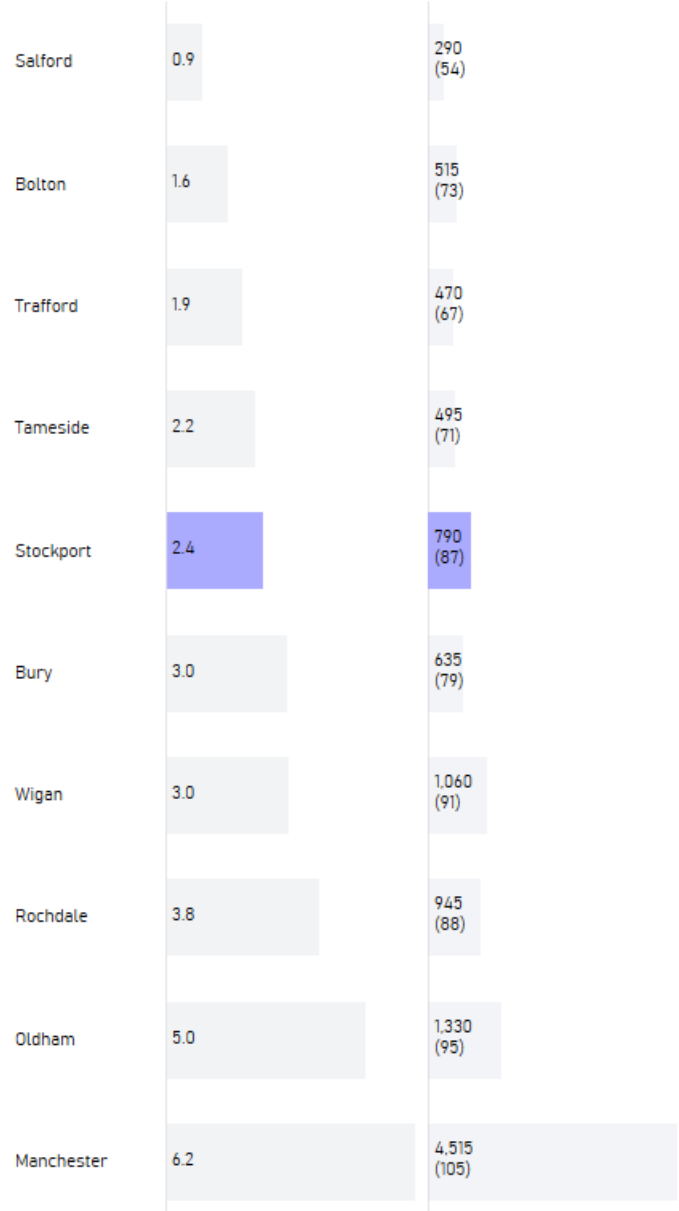


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	55	50	120	130	215	290	270	200	95	130	130	155
2022-23		260	155	65	65	135	160	190	130	100	85	115
2023-24	190	255	375	565	660	695	690	705	675	645	695	790

Selected measure at March 2024 has continuously **increased** for **2** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 | Count (National rank)



Narrative

Updated: 9th October 2024 – no data since March 2024

The total number of inappropriate adult acute mental health out of area placement bed days is not reported monthly on Tableau at present.

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.

The performance reported as of March 2024 shows an increased in bed days for acute mental health out of area placements.

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.

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.

Long length of stay for adults (60+ days) - Mental Health Patients

Proportion of all discharges from adult acute and older adult acute beds, with a length of stay of over 60 days

Source: Published MHSDS (Monthly)

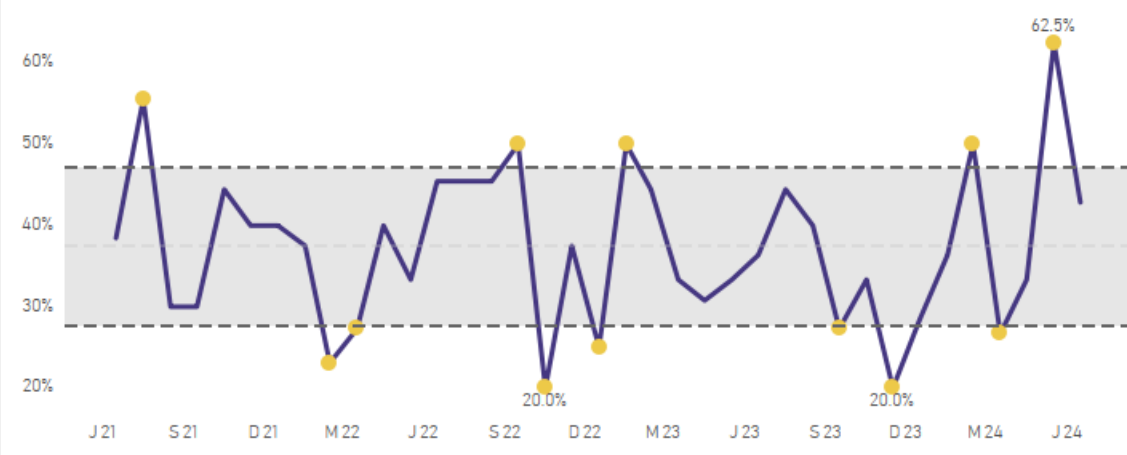
42.9%
July 2024

62.5%
June 2024

56/87
National Rank
Inter Quartile

0%
National Target

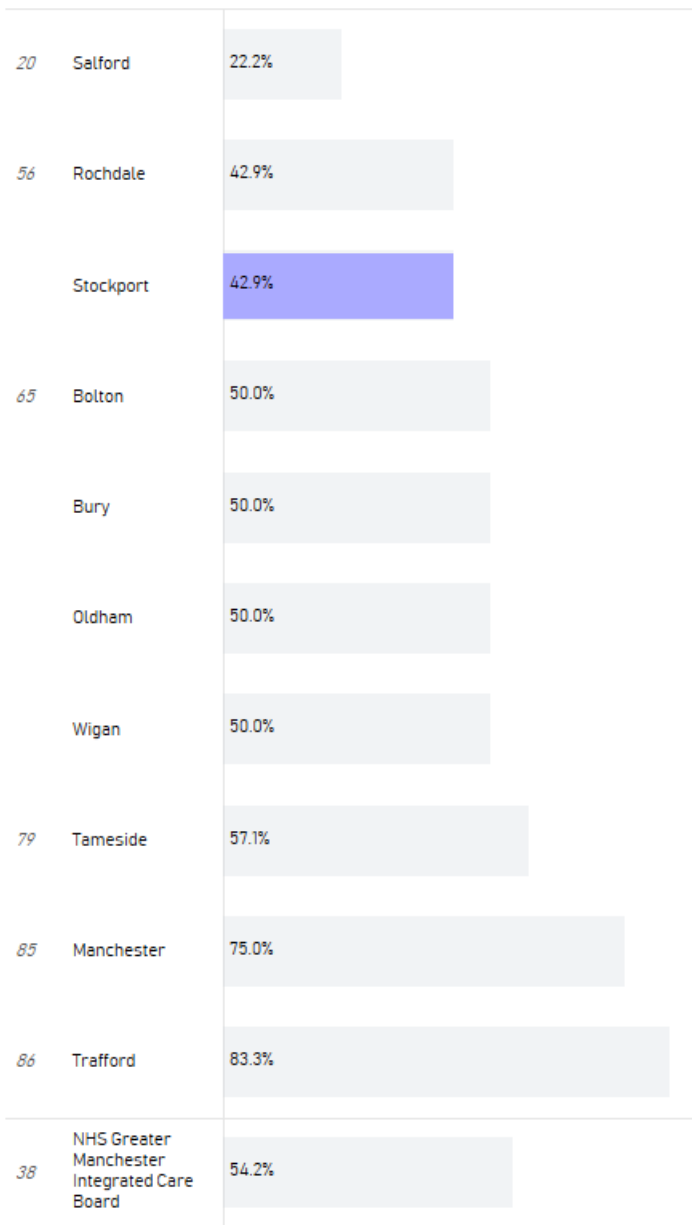
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22				38.5%	55.6%	30.0%	30.0%	44.4%	40.0%	40.0%	37.5%	23.1%
2022-23	27.3%	40.0%	33.3%	45.5%	45.5%	45.5%	50.0%	20.0%	37.5%	25.0%	50.0%	44.4%
2023-24	33.3%	30.8%	33.3%	36.4%	44.4%	40.0%	27.3%	33.3%	20.0%	28.6%	36.4%	50.0%
2024-25	26.7%	33.3%	62.5%	42.9%								

Selected measure at July 2024 has continuously **decreased** for **1** period(s) of time

Latest Value GM Benchmarking National Rank against other localities



Narrative

Updated: 9th October 2024

The position as of July 2024 shows 42.9% of all 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%).

Twice weekly bed meetings are in place where there is a focus on patients who are in acute mental health wards over 60 days.

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.

The national target of 0% is a significant challenge.

Percentage of MH patients with no criteria to reside (NCTR)

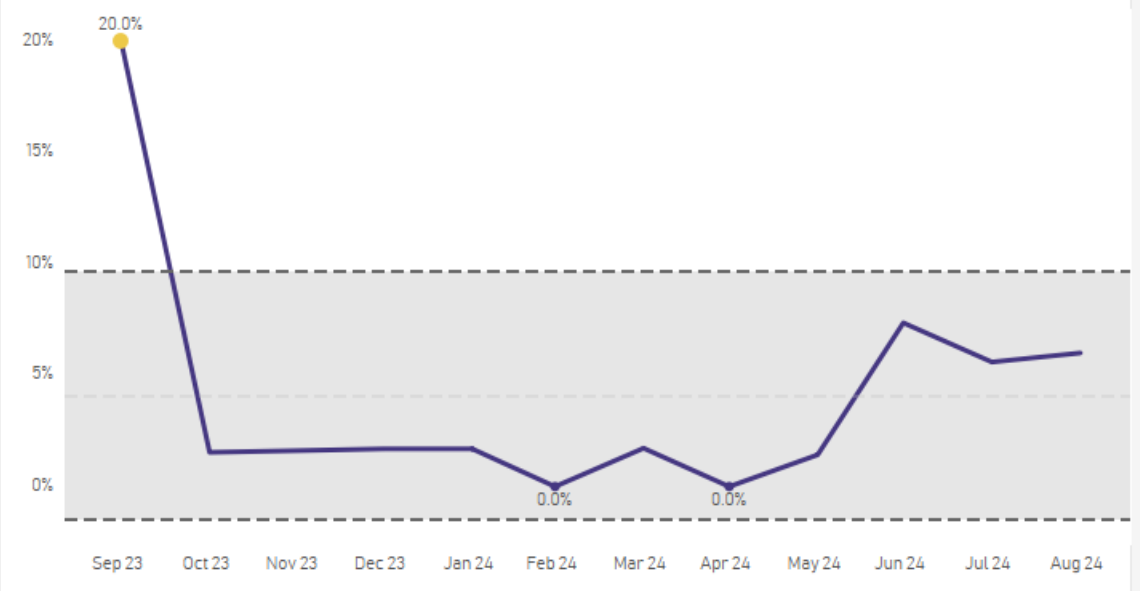
Percentage of beds occupied by MH patients who are ready to be discharged

Source: GM Admissions - Local (Monthly)

6.0%
September 2024

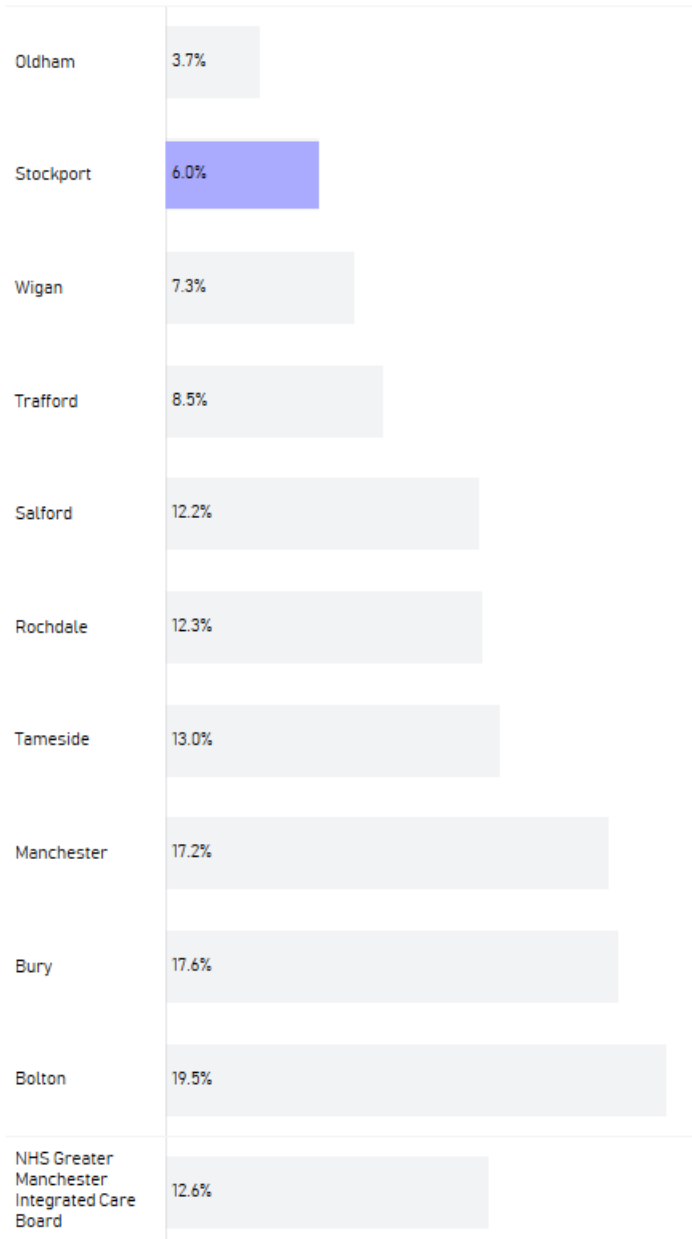
5.6%
August 2024

Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2023-24							20.0%	1.5%	1.6%	1.7%	1.7%	0.0%
2024-25	1.7%	0.0%	1.4%	7.4%	5.6%	6.0%						

Latest Value GM Benchmarking



Narrative

Updated: 9th October 2024

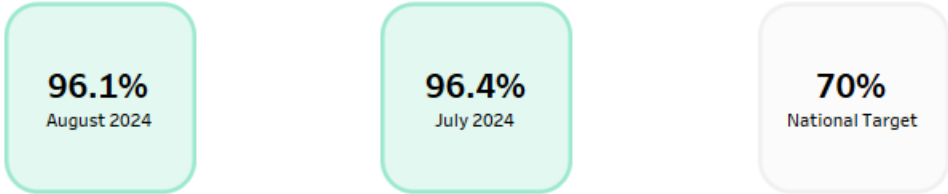
The percentage of occupied beds by mental health patients who are ready to be discharged in September was 6.0%, the second lowest in Greater Manchester although 0.4% higher than reported in August.

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.

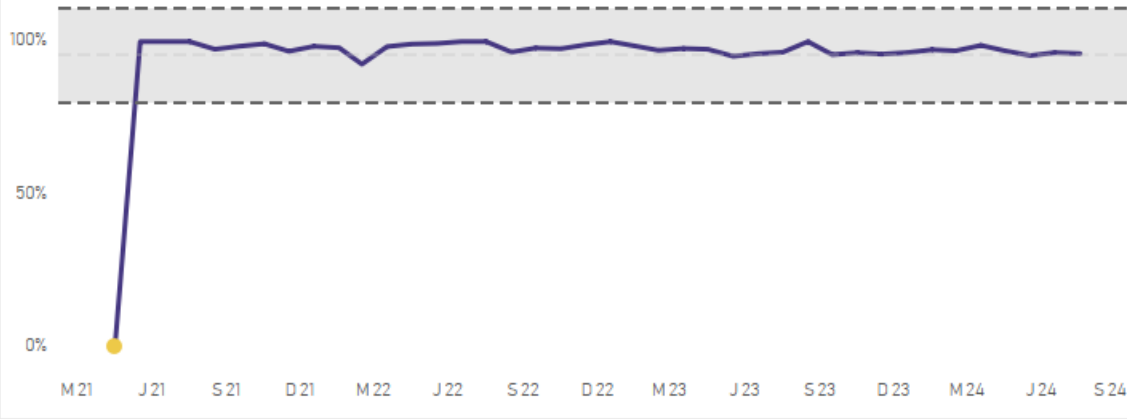
% 2-hour Urgent Community Response (UCR) first care contacts

Percentage of 2-hour UCR referrals subject to the 2-hour response standard (as specified in the UCR technical guidance), with an RTT end date in reporting month, that achieved the 2-hour response standards

Source: Community Services Data Set (CSDS) (Monthly)



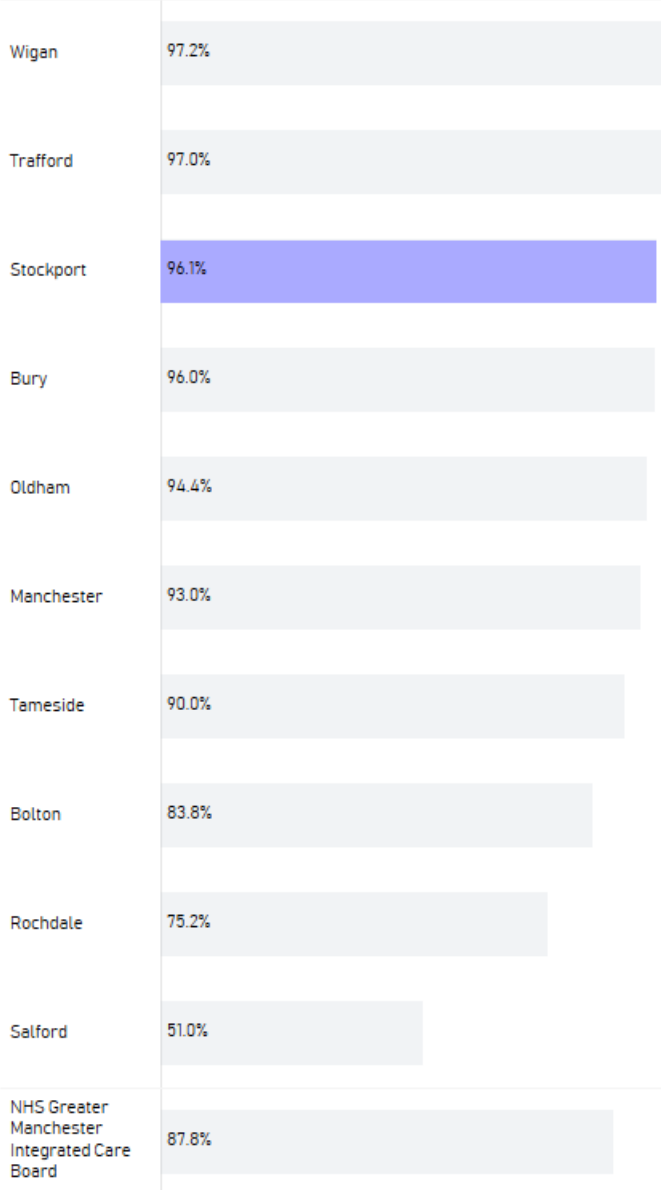
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22		0.0%	100.0%	100.0%	100.0%	97.5%	98.5%	99.3%	96.8%	98.5%	98.0%	92.6%
2022-23	98.4%	99.2%	99.4%	100.0%	100.0%	96.6%	97.9%	97.7%	99.0%	100.0%	98.5%	97.1%
2023-24	97.7%	97.5%	95.2%	96.0%	96.5%	100.0%	95.7%	96.4%	95.9%	96.4%	97.4%	97.0%
2024-25	98.8%	97.0%	95.4%	96.4%	96.1%							

Selected measure at August 2024 has continuously **decreased** for **1** period(s) of time

Latest Value GM Benchmarking



Narrative

Updated: 9th October 2024

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

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.

It should be noted this indicator only reflects outcomes of what is referred to the service. Low utilisation and lower acuity cases will mean we're more likely to achieve the national 2-hour performance trajectory.

Further work is being undertaken to explore whether we have similar utilisation rates to GM and mature services nationally and to identify any gaps in the system maturity matrix.

GP appointments - percentage of regular appointments within 14 days

Percentage of appointments where the time between booking and appointment was 'Same day', '1 day', '2 to 7 days' or '8 to 14 days'

Source: Appointments in General Practice (Monthly)

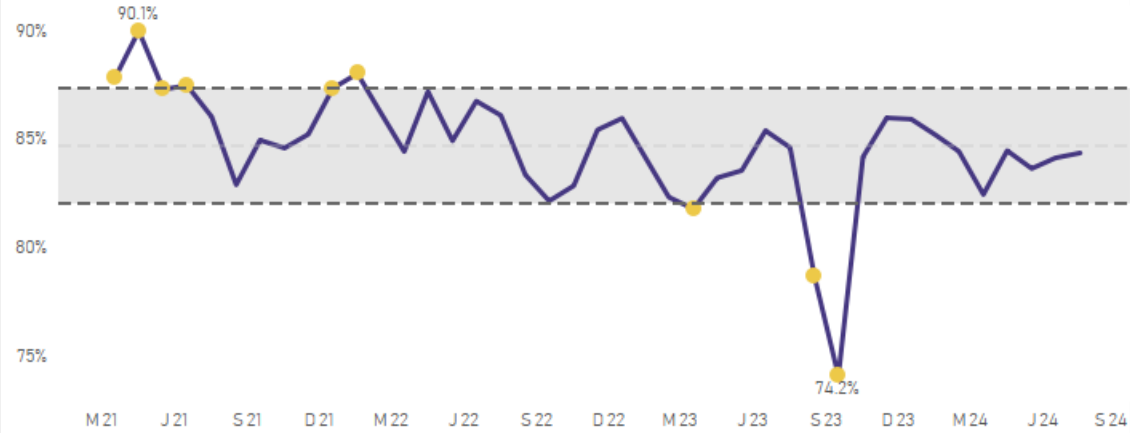
84.4%
August 2024

84.2%
July 2024

30/106
National Rank
Inter Quartile

82.0%
National Median

Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	87.9%	90.1%	87.4%	87.5%	86.1%	83.0%	85.0%	84.7%	85.3%	87.4%	88.1%	86.4%
2022-23	84.5%	87.3%	85.0%	86.8%	86.2%	83.4%	82.2%	82.9%	85.5%	86.0%	84.1%	82.4%
2023-24	81.9%	83.3%	83.6%	85.5%	84.7%	78.7%	74.2%	84.3%	86.1%	86.0%	85.3%	84.5%
2024-25	82.5%	84.5%	83.7%	84.2%	84.4%							

Selected measure at August 2024 has continuously **increased** for **2** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities

19	Manchester	86.2%
26	Trafford	84.8%
30	Stockport	84.4%
36	Wigan	84.0%
43	Oldham	83.1%
48	Rochdale	82.6%
59	Bury	81.7%
60	Salford	81.6%
66	Bolton	81.1%
67	Tameside	81.0%
74	NHS Greater Manchester Integrated Care Board	83.4%

Narrative

Updated: 9th October 2024

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.

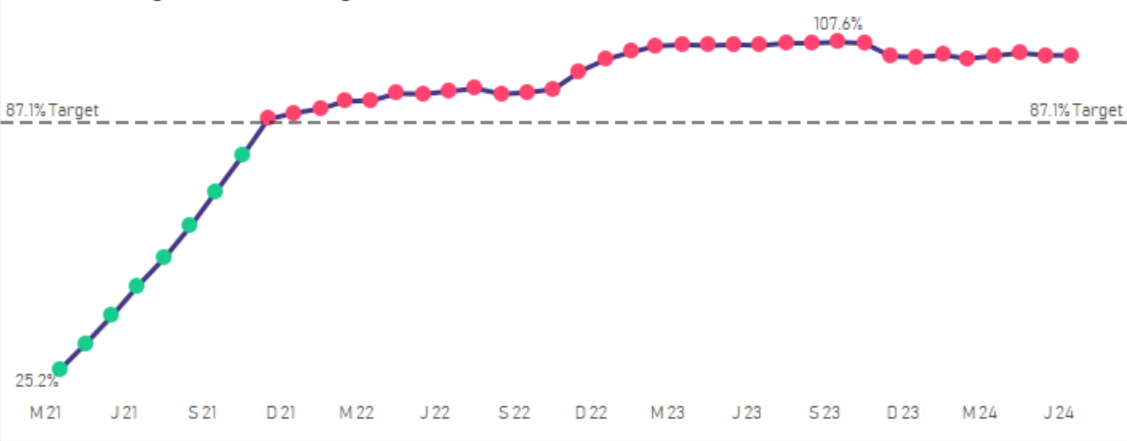
Antimicrobial resistance: total prescribing of antibiotics in primary care

The number of antibiotic (antibacterial) items prescribed in primary care, divided by the item-based Specific Therapeutic group Age-Sex related Prescribing Unit STAR-PU

Source: EPACK Prescribing Data (Monthly)



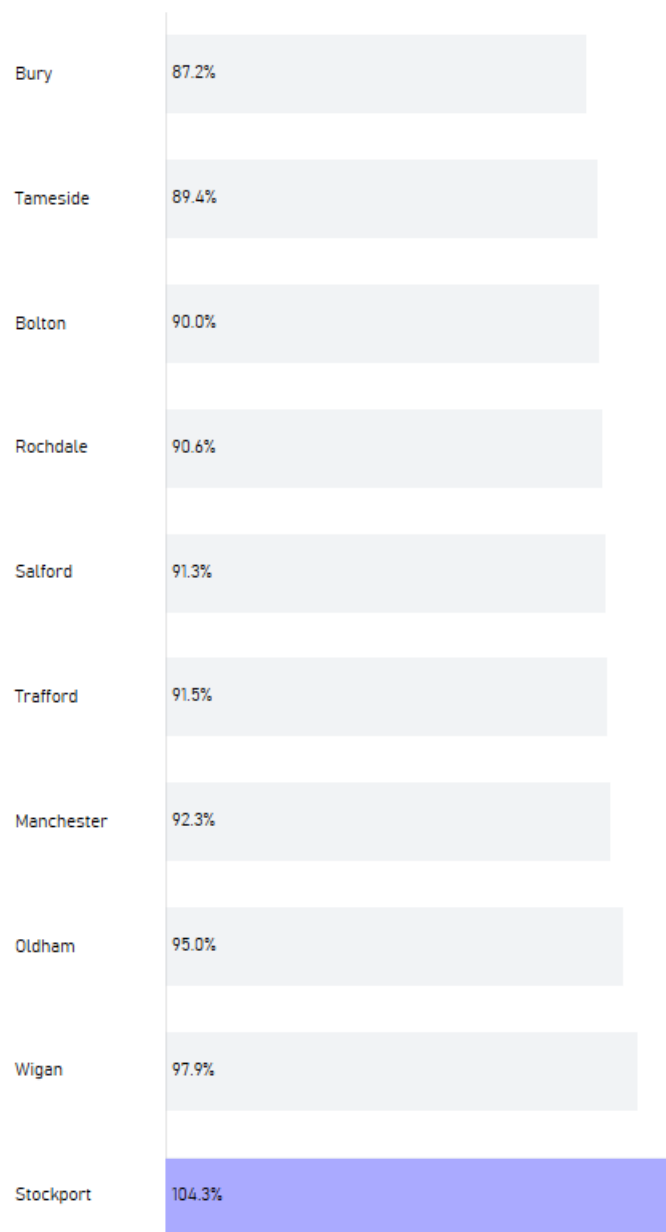
Performance Against National Target of 87.1%



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	25.2%	31.6%	38.7%	46.2%	53.1%	61.2%	70.0%	79.0%	88.2%	89.7%	90.8%	92.7%
2022-23	92.9%	94.6%	94.5%	95.2%	95.9%	94.5%	94.9%	95.7%	100.1%	103.2%	105.1%	106.6%
2023-24	106.9%	106.7%	106.9%	106.7%	107.3%	107.3%	107.6%	107.2%	104.0%	103.8%	104.3%	103.4%
2024-25	104.1%	104.8%	104.2%	104.3%								

Selected measure at July 2024 has continuously increased for 1 period(s) of time

Latest Value GM Benchmarking



Narrative: Updated: 9th October 2024

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.

Actions are being undertaken to reduce prescribing include:
Communicating to Stockport locality practices the details on the Antimicrobial stewardship GM Quality scheme standard in Primary Care on 18th October 2024.

- Asking Practices to:
- Complete baseline a GP Target self-assessment and identify a practice level Anti-microbial stewardship (AMS) Champion
 - Submit of a Quality Improvement project
 - Complete an AMS Peer-to-Peer review session

It's World Antibiotic Awareness week in November and practices must all participate in this as part of the quality scheme. We expect practice participation in the AMS quality standard to pick up after the communications have gone out as we've given practices 6 weeks to submit their plans.

Peer to peer support review sessions are being offered for the practices with the highest levels of broad-spectrum antibiotic prescribing. We're also linked into the GM AMS standard group which is meeting next month.

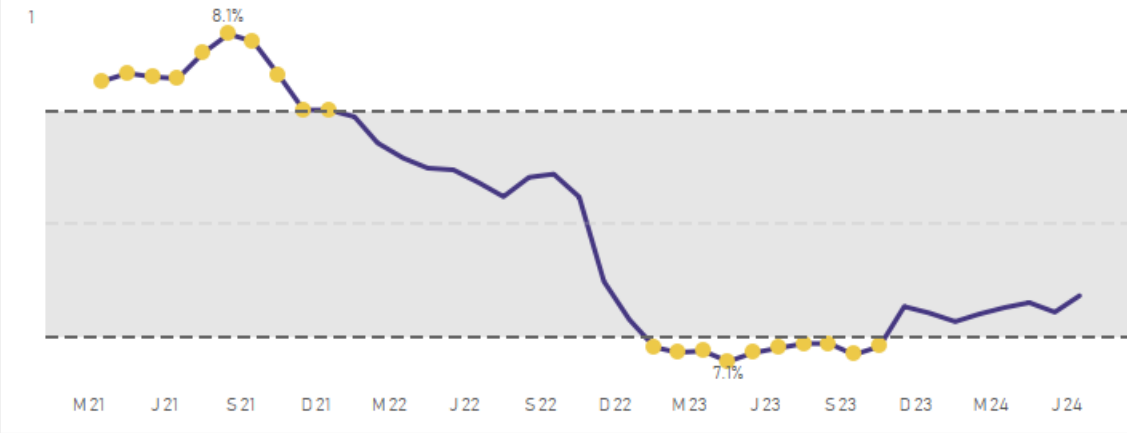
Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care

The number of broad-spectrum antibiotic (antibacterials) items from co-amoxiclav, cephalosporin class and fluoroquinolone class drugs as a percentage of the total number of antibacterial items prescribed in primary care.

Source: EPACK Prescribing Data (Monthly)



Outliers more than 1 standard deviation from the mean

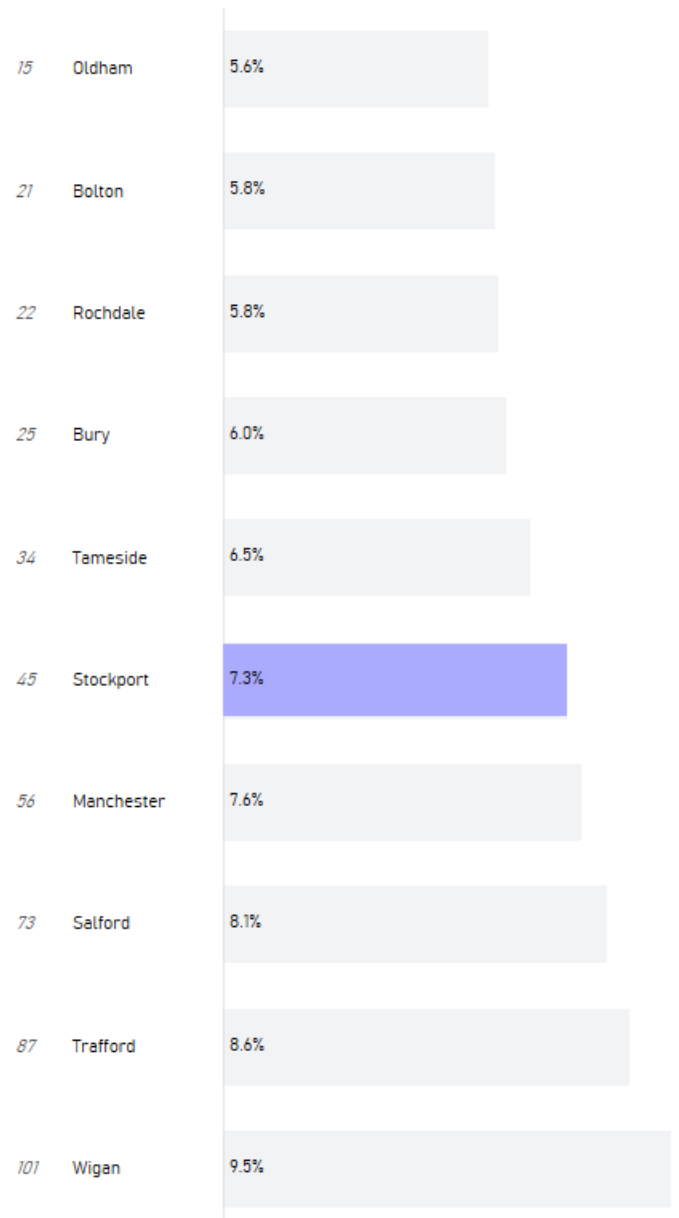


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	7.9%	8.0%	7.9%	7.9%	8.0%	8.1%	8.1%	7.9%	7.8%	7.8%	7.8%	7.7%
2022-23	7.7%	7.7%	7.7%	7.6%	7.6%	7.6%	7.6%	7.6%	7.3%	7.2%	7.1%	7.1%
2023-24	7.1%	7.1%	7.1%	7.1%	7.1%	7.1%	7.1%	7.1%	7.2%	7.2%	7.2%	7.2%
2024-25	7.2%	7.3%	7.2%	7.3%								

Selected measure at July 2024 has continuously **increased** for **1** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024

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.

For actions being undertaken, please refer to slide 15.

Stockport - Sight Metrics

Domain	Code	Measure	Frequency	Date	Latest	Previous	Change	Target/Median	Numerator	Denominator	
Elective Care	EB28	Diagnostics: % waiting 6 weeks+	Monthly	Jul 24	24.5%	23.4%	↗	1%	2,049	8,363	Inter
	EB20	RTT incomplete: 65+ week waits	Monthly	Jul 24	354.0	435.0	↘	0.	354	N/A	Inter
Cancer	S012a	28 Day Wait from Referral to Faster Diagnosis: All Patients	Monthly	Jul 24	76.7%	82.2%	↘	75%	1,336	1,742	Inter
Maternity	S104a	Number of neonatal deaths per 1,000 total live births	Annual	Dec 22	1.0	1.9	↘	1.5	3	2,940	Inter
	S022a	Number of stillbirths per 1,000 total births	Annual	Dec 22	3.1	3.7	↘	3.2	9	2,940	Inter
Screening and Immunisations	S049a	Breast screening coverage, females aged 53-70, screened in last 36 months	Annual	Dec 23	67.9%	61.4%	↗	N/A	23,433	34,492	Inter
	S046a	COVER immunisation: MMR2 Uptake at 5 years old	Quarterly	Jun 24	92.4%	90.6%	↗	95%	763	826	Upper
	S050a	Females, 25-64, attending cervical screening within target period (3.5 or 5.5 year coverage, %)	Quarterly	Mar 24	77.3%	76.8%	↗	80%	65,085	84,155	Upper
	S047A	Seasonal Flu Vaccine Uptake: 65 years and over	Monthly	Feb 24	83.2%	83.0%	↗	85%	52,676	63,320	Upper

Stockport - Sight Metrics

The below metrics are currently missing from the report due to lack of locality level reporting or the measure is currently being built.

Theme	Indicator	
Cancer	Total patients waiting over 62 days to begin cancer treatment vs target	Build in progress
LD and Autism	Inpatients with a learning disability and/or autism per million head of population	Build in progress
Primary Care and Community Services	Units of Dental Activity delivered as a proportion of all Units of Dental Activity contracted	Build in progress
Screening and immunisation	Bowel screening, aged 60-74, screened in the last 30 months	DQ issues

Diagnostics: % waiting 6 weeks+

Percentage of patients waiting for a diagnostic test or procedure for 6 weeks or over.

Source: Monthly Diagnostics Waiting Times and Activity Return - DM01 (Monthly)

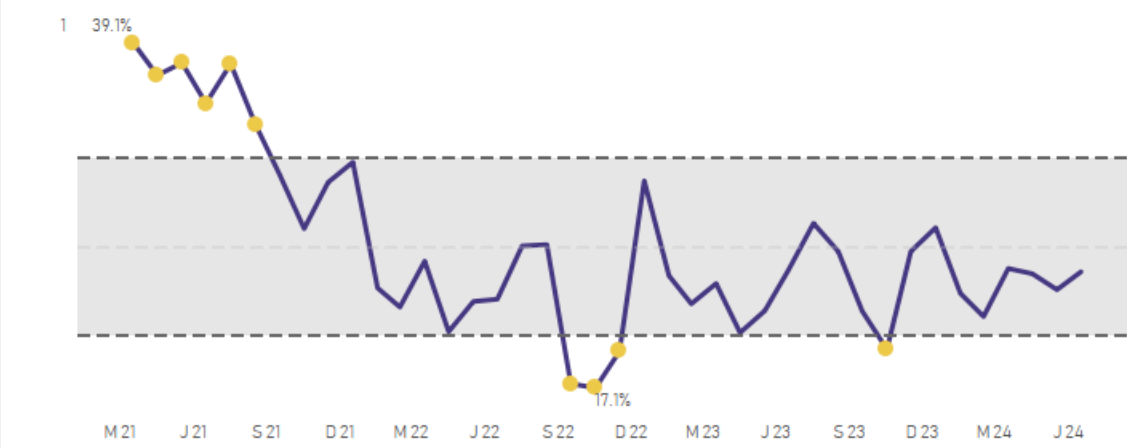
24.5%
July 2024

23.4%
June 2024

76/107
National Rank
Inter Quartile

1.0%
National Target

Outliers more than 1 standard deviation from the mean

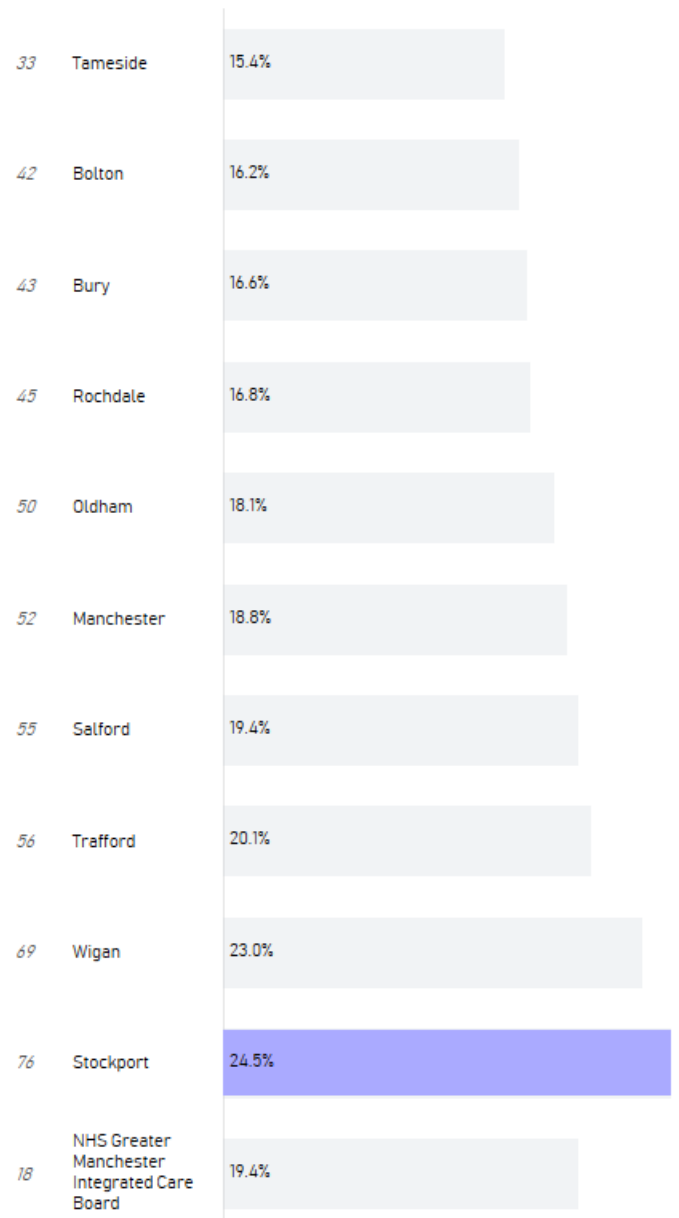


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	39.1%	37.0%	37.8%	35.2%	37.7%	33.9%	30.7%	27.2%	30.2%	31.5%	23.5%	22.3%
2022-23	25.2%	20.7%	22.6%	22.8%	26.1%	26.2%	17.4%	17.1%	19.4%	30.3%	24.3%	22.5%
2023-24	23.8%	20.6%	22.0%	24.6%	27.6%	25.8%	22.0%	19.6%	25.8%	27.3%	23.1%	21.7%
2024-25	24.7%	24.4%	23.4%	24.5%								

Selected measure at July 2024 has continuously **increased** for **1** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024

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.

The Stockport/Tameside Community Diagnostic Centre is now live (from 1st August 2024) with Stockport access to the following modalities which will have a direct improvement in patient wait times;

- MR Non-Contrast
- MR Contrast
- CT Non-Contrast
- CT Contrast
- ECHO

Alongside this the Trust have two MRI scanning units in place off-site and this should result in an improvement in wait times.

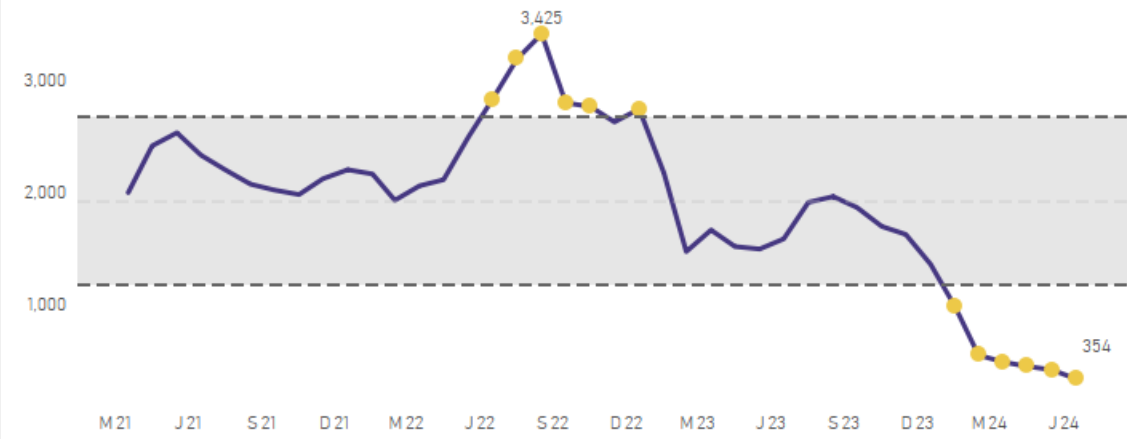
RTT incomplete: 65+ week waits

"The number of 65+ week incomplete RTT pathways based on data provided by NHS and independent sector organisations and reviewed by NHS commissioners via SDCS. The definitions that apply for RTT waiting times, as well as guidance on recording and reporting RTT data, can be found on the NHS England and NHS Improvement Consultant-led referral to treatment waiting times rules and guidance webpage."

Source: Consultant-led RTT Waiting Times data collection (National Statistics). (Monthly)



Outliers more than 1 standard deviation from the mean

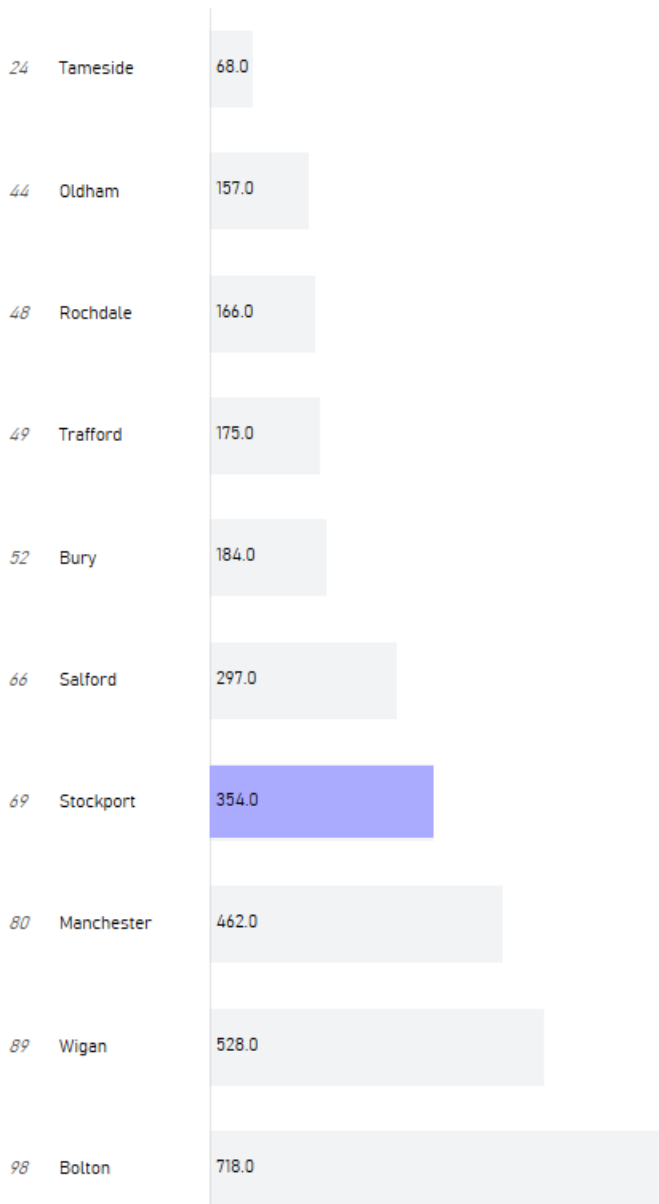


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	2,012	2,429	2,545	2,346	2,213	2,088	2,035	1,995	2,136	2,216	2,178	1,944
2022-23	2,073	2,127	2,506	2,839	3,202	3,425	2,811	2,778	2,641	2,756	2,187	1,487
2023-24	1,679	1,532	1,510	1,600	1,926	1,977	1,879	1,711	1,640	1,375	993	566
2024-25	504	465	435	354								

Selected measure at July 2024 has continuously **decreased** for **10** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024

As of the beginning of September, there were 65 patients would not meet the 65-week target at Stockport NHS Foundation Trust. This is considerably lower than the 354 reported at the end of July. The number 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 national target is zero 65+ week incomplete RTT pathways. The Speciality with the longest waits is Ear Nose and Throat.

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).

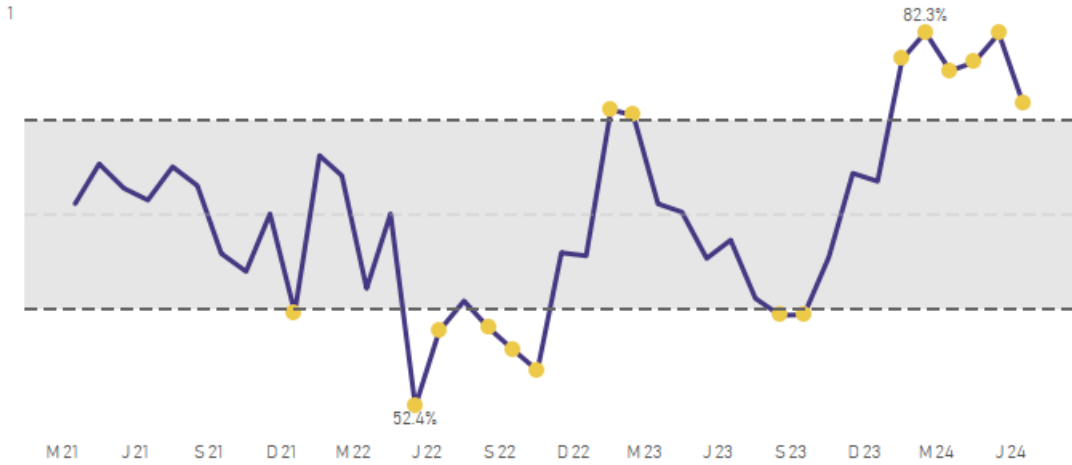
28 Day Wait from Referral to Faster Diagnosis: All Patients

Proportion of patients told cancer diagnosis outcome within 28 days of their TWW referral for suspected cancer, TWW referral for exhibited breast symptoms, or urgent screening referral

Source: National Cancer Waiting Times Monitoring Data Set (CWT) (Monthly)



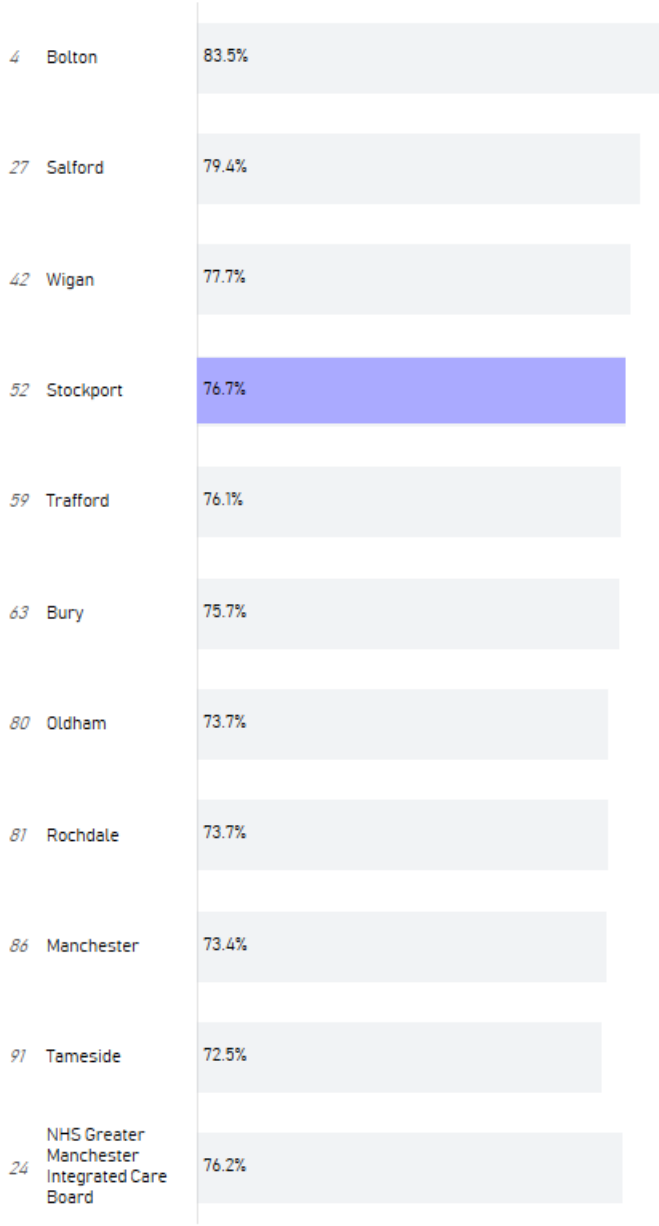
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	68.6%	71.8%	69.9%	68.9%	71.6%	70.1%	64.6%	63.2%	67.8%	59.9%	72.5%	70.9%
2022-23	61.8%	67.8%	52.4%	58.5%	60.8%	58.7%	57.0%	55.3%	64.7%	64.5%	76.1%	75.7%
2023-24	68.6%	68.0%	64.3%	65.7%	61.1%	59.7%	59.8%	64.4%	71.1%	70.4%	80.2%	82.3%
2024-25	79.2%	79.9%	82.2%	76.7%								

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024

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.

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

Actions have included 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.

In addition, 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.

There are still variations between individual tumour groups due to various factors including diagnostic capacity and external specialist diagnostics.

COVER immunisation: MMR2 Uptake at 5 years old

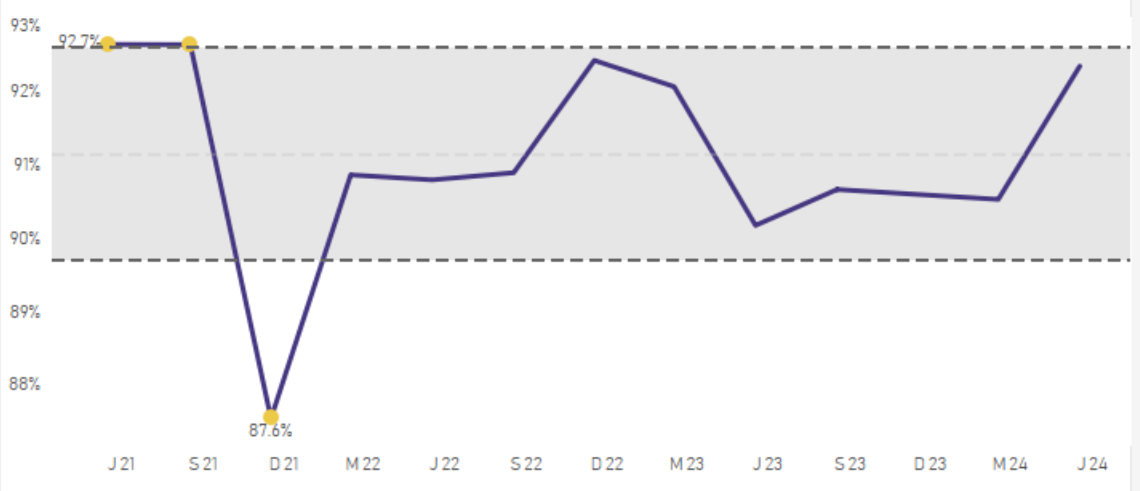
Population vaccination coverage – MMR for two doses (5 years old)

Source: Cover of vaccination evaluated rapidly (COVER) programme (Quarterly)

92.4%
June 2024

95%
National Target

Outliers more than 1 standard deviation from the mean



	Jun	Sep	Dec	Mar
2021-22	92.7%	92.7%	87.6%	90.9%
2022-23	90.8%	90.9%	92.5%	92.1%
2023-24	90.2%	90.7%		90.6%
2024-25	92.4%			

Latest Value GM Benchmarking

National Rank against other localities

11	Stockport	92.4%
12	Trafford	92.4%
24	Wigan	90.8%
49	Bolton	88.5%
84	Rochdale	83.7%
85	Tameside	83.6%
86	Bury	83.4%
93	Salford	80.7%
99	Oldham	77.5%
104	Manchester	72.1%
34	NHS Greater Manchester Integrated Care Board	83.0%

Narrative

Updated: 9th October 2024

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

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%.

NHS Greater Manchester are providing localities with a real time tracker to monitor uptake at practice level. August 2024 data shows Stockport at 94.41% for MMR1 & 90.47% for MMR2.

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

Oversight Metrics Glossary										
Domain	Code	Measure	Description	Data Source	Frequency	Latest	Updated	RAG rated against	Desired Direction	
Urgent Care	EM30a	Average number of adult G&A overnight beds available	The percentage of adult general and acute (G&A) overnight beds that are occupied, as an average over a monthly period.	UEC Daily Sitrep	Monthly	Sep 24	1st	No Target	Decrease	
	S123a	Adult general & acute bed occupancy adjusted for void beds (Type 1 Only)	Percentage of general and acute (G&A) day beds occupied (adjusted for covid void beds).	UEC Daily Sitrep	Monthly	Mar 24	1st	National Median	Decrease	
	EM11	Total number of specific acute non-elective spells	Count of spells	National Flows APC	Monthly	Sep 24	1st	National Median	Decrease	
	N/A	A&E Attendances	Number of attendances at A&E	Emergency Care Dataset (ECDS)	Monthly	Sep 24	1st	No Target	Decrease	
	N/A	A&E 4 hour performance	A&E attendances seen within 4hrs	Emergency Care Dataset (ECDS)	Monthly	Sep 24	1st	No Target	Increase	
	N/A	No Reason/Criteria To Reside patients (NCTR) as % of occupied beds	Null	GM Admissions - Local	Monthly	Sep 24	1st	No Target	Decrease	
Elective Care	EM07	Total Referrals Made (General and Acute)	Total GP & Other Referrals made for 1st Consultant led OP appointments in specific acute treatment functions	Monthly Referral Return (MRR)	Monthly	Mar 24	2nd Thursday	National Median	Increase	
	EM07a	GP Referrals Made (General and Acute)	Total GP Referrals made for 1st Consultant led OP appointments in specific acute treatment functions	Monthly Referral Return (MRR)	Monthly	Mar 24	2nd Thursday	National Median	Increase	
Cancer	N/A	Cancers Diagnosed At Early Stage using Full Registration Data	Count of cancers diagnosed at stages 1 and 2 divided by count of cancers diagnosed at stages 1, 2, 3, and 4	Cancer Early Staging Data Statistics via The National Disease Registration Servi..	Annual	Dec 21	2nd Thursday	National Median	Increase	
Mental Health & Learning Disabilities	S086a	Inappropriate adult acute mental health Out of Area Placement (OAP) bed days	Inappropriate Out of Area Placements	Out of Area Placements in Mental Health Services Official Statistics	Monthly	Mar 24	2nd Thursday	National Target	Decrease	
	S081a	Talking Therapies: Access Rate	Number of people accessing first treatment	Improving Access to Psychological Therapies Data Set	Monthly	Jul 24	2nd Thursday	No Target	Increase	
	EA051	Dementia: Diagnosis Rate (Aged 65+)	Dementia: Diagnosis Rate (Aged 65+)	Primary Care Dementia Data	Monthly	Aug 24	2nd Thursday	National Target	Increase	
	EAS01	Dementia: Diagnosis Rate (Aged 65+)	Dementia: Diagnosis Rate (Aged 65+)	Primary Care Dementia Data	Monthly	Aug 24	2nd Thursday	National Target	Increase	
	S030a	% of patients aged 14+ with a completed LD health check	% of patients aged 14+ with a completed LD health check	Learning Disabilities Health Check Scheme	Monthly	Jul 24	2nd Thursday	National Target	Increase	
	S110a	Overall Access to Community Mental Health Services for Adults and Older Adults with Severe Mental Illnesses	Number of people who receive two or more contacts from NHS or NHS commissioned community mental health services (in transformed and non-transformed PCNs) for adults and older adults with severe mental illnesses, in ..	Published MHSDS	Monthly	Jul 24	2nd Thursday	National Median	Increase	
	S125a	Long length of stay for adults (60+ days)	Number of people for a given CCG discharged from an adult acute inpatient bed with a hospital spell over 60 days (calculated from the point of admission to the point of discharge)	Published MHSDS	Monthly	Jul 24	2nd Thursday	National Target	Decrease	
	EH09	Access to Children and Young Peoples Mental Health Services	Number of CYP aged 0-17 supported through NHS funded mental health services receiving at least one contact.	Published MHSDS	Monthly	Jul 24	2nd Thursday	National Median	Increase	
	S131a	Women Accessing Specialist Community Perinatal Mental Health Services	Number of women accessing specialist community PMH and MMHS services in the reporting period	Published MHSDS	Quarterly	Jul 24	2nd Thursday	No Target	Increase	
	N/A	Number of MH patients with no criteria to reside (NCTR)	Number of MH patients with no criteria to reside	GM Admissions - Local	Monthly	Sep 24	1st	No Target	Decrease	
	N/A	Percentage of MH patients with no criteria to reside (NCTR)	Percentage of MH patients with no criteria to reside	GM Admissions - Local	Monthly	Sep 24	1st	No Target	Decrease	
Commun..	N/A	% 2-hour Urgent Community Response (UCR) first care contacts	Percentage of 2-hour Urgent Community Response referrals subject to the 2-hour standard where care was provided within two hours	Community Services Data Set (CSDS)	Monthly	Aug 24	2nd Thursday	National Target	Increase	
Primary Care	S053b	% of hypertension patients who are treated to target as per NICE guidance		NHS Quality Outcome Framework	Annual	Mar 23	2nd Thursday	National Target	Increase	
	S129a	GP appointments - percentage of regular appointments within 14 days	Percentage of appointments where the time between booking and appointment was 'Same day', '1 day', '2 to 7 days' or '8 to 14 days'	Appointments in General Practice	Monthly	Aug 24	Last Thursday	National Median	Increase	
	S053c	% of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins	% of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins	CVD Prevent	Quarterly	Mar 24	2nd Thursday	National Median	Increase	
Quality	S042a	E. coli blood stream infections	12-month rolling counts of E. coli	National Statistics: E. coli bacteraemia: monthly data by location of onset	Monthly	Aug 24	1st Wednesday	No Target	Decrease	
	S044b	Antimicrobial resistance: proportion of broad-spectrum antibiotic prescribing in primary care	The proportion of broad-spectrum antibiotic prescribing in primary care	EPACT Prescribing Data	Monthly	Jul 24	2nd Thursday	National Target	Decrease	
	S044a	Antimicrobial resistance: total prescribing of antibiotics in primary care	The proportion of antibiotic prescribing in primary care	EPACT Prescribing Data	Monthly	Jul 24	2nd Thursday	National Target	Decrease	

Sight Metrics Glossary

Domain	Code		Measure	Description	Data Source	Frequency	Latest	RAG rated against	Target/National
Elective Care	2	EB20	RTT incomplete: 65+ week waits		Consultant-led RTT Waiting Times data collection (National Statistics).	Monthly	Jul 24	National Target	0.
	146	EB28	Diagnostics: % waiting 6 weeks+	Number waiting over 6 weeks/Total waiting	Monthly Diagnostics Waiting Times and Activity Return - DM01	Monthly	Jul 24	National Target	1%
Cancer	62	S012a	28 Day Wait from Referral to Faster Diagnosis: All Patients	Count of patients told cancer diagnosis outcome within 28 days divided by total count of patients told cancer diagnosis outcome following their TWW referral for suspected cancer, TWW referral for exhibited breast symptoms, or urgent screening referral	National Cancer Waiting Times Monitoring Data Set (CWT)	Monthly	Jul 24	National Target	75%
Maternity	230	S022a	Number of stillbirths per 1,000 total births	Count of cancers diagnosed at stages 1 and 2 divided by count of cancers diagnosed at stages 1, 2, 3, and 4	MBRRACE-UK - Perinatal Mortality Surveillance Report	Annual	Dec 22	National Median	3
	460	S104a	Number of neonatal deaths per 1,000 total live births	Number of neonatal deaths per 1,000 total live births	MBRRACE-UK - Perinatal Mortality Surveillance Report	Annual	Dec 22	National Median	1
Screening and Immunisations	150	S047A	Seasonal Flu Vaccine Uptake: 65 years and over	number of people over 65 who received the seasonal influenza vaccination divided by the number of eligible people who are aged 65 and over	Seasonal influenza vaccine uptake in GP patients: monthly data, 2022 to 2023	Monthly	Feb 24	National Target	85%
	468	S046a	COVER immunisation: MMR2 Uptake at 5 years old	% children whose fifth birthday falls within the time period who have received two doses of MMR vaccination	Cover of vaccination evaluated rapidly (COVER) programme	Quarterly	Jun 24	National Target	95%
	473	S050a	Females, 25-64, attending cervical screening within target period (3.5 or 5.5 year coverage, %)	% of females, age 25-64 yrs, attending cervical screening within target period (3.5 yrs if aged 24-49 or 5.5 yrs if aged 50-64)	Cervical Screening Programme - Coverage Statistics [Management Information]	Quarterly	Mar 24	National Target	80%
	499	S048a	Bowel screening coverage, aged 60-74, screened in last 30 months	% of eligible men and women, age 60-74 yrs, with an adequate screening result in previous 30 mths	NHS population screening programmes: KPI reports	Quarterly	Dec 23	National Target	60%
	514	S049a	Breast screening coverage, females aged 53-70, screened in last 36 months	% women eligible for screening who have had a test with a recorded result at least once in the previous 36 months	Fingertips, Public Health Data, Public Health Outcomes Framework	Annual	Dec 23	No Target	

Appendices

Metrics that do not have data within the last 3 months, and/or a national target.

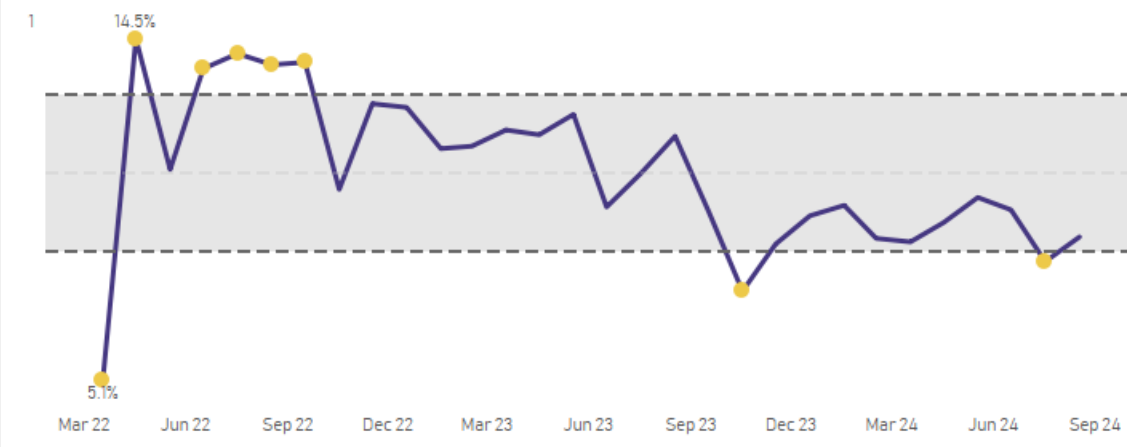
No Reason/Criteria To Reside patients (NCTR) as % of occupied beds

Total occupied beds, and of these, the number of patients who are fit for discharge and have no need to reside in a hospital bed

Source: GM Admissions - Local (Monthly)



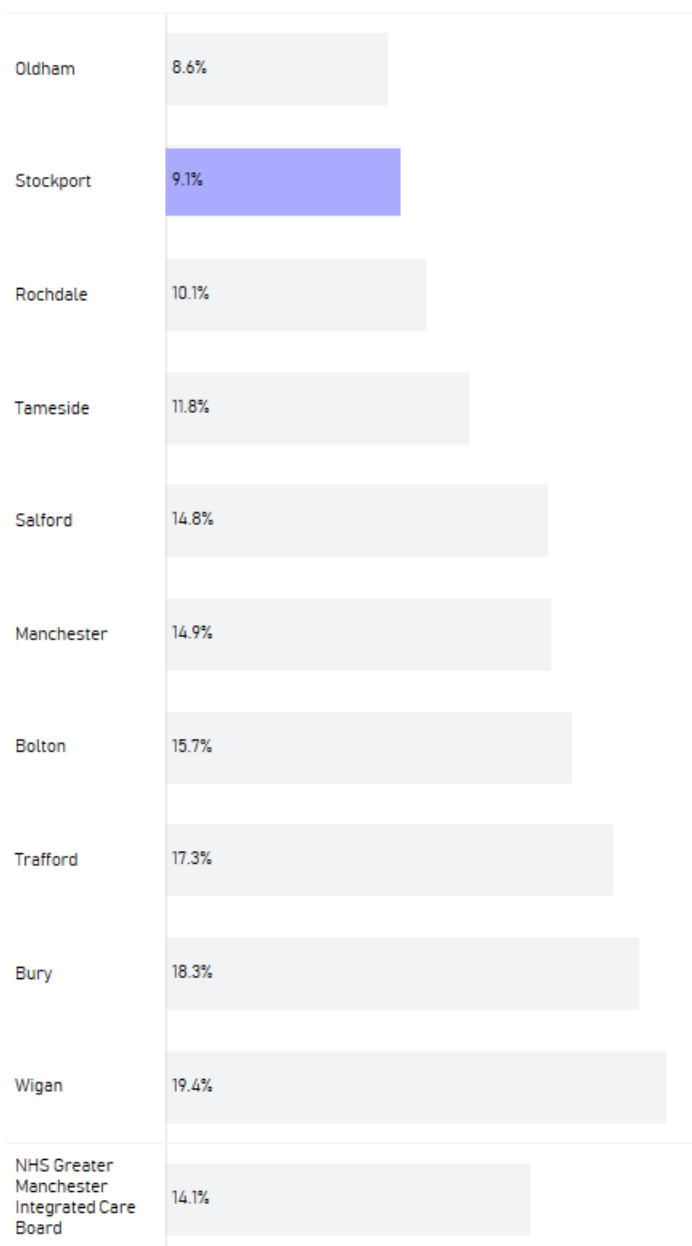
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2022-23	5.1%	14.5%	10.9%	13.7%	14.1%	13.8%	13.9%	10.4%	12.8%	12.7%	11.5%	11.6%
2023-24	12.0%	11.9%	12.5%	9.9%	10.8%	11.9%	9.8%	7.6%	8.9%	9.7%	10.0%	9.0%
2024-25	9.0%	9.5%	10.2%	9.8%	8.4%	9.1%						

Selected measure at September 2024 has continuously **increased** for **1** period(s) of time

Latest Value GM Benchmarking



Narrative

Updated: 9th October 2024 – no national target

The proportion of patients who were fit for discharge and had no need to reside in a hospital bed has increased from 8.4% in August to 9.1% in September 2024.

Stockport had the second lowest rate of beds occupied with patients fit for discharge in Greater Manchester in September, behind Oldham.

Total number of specific acute non-elective spells

Number of specific acute non-elective spells in the period (auto-calculated sum of E.M.11a and E.M.11b)

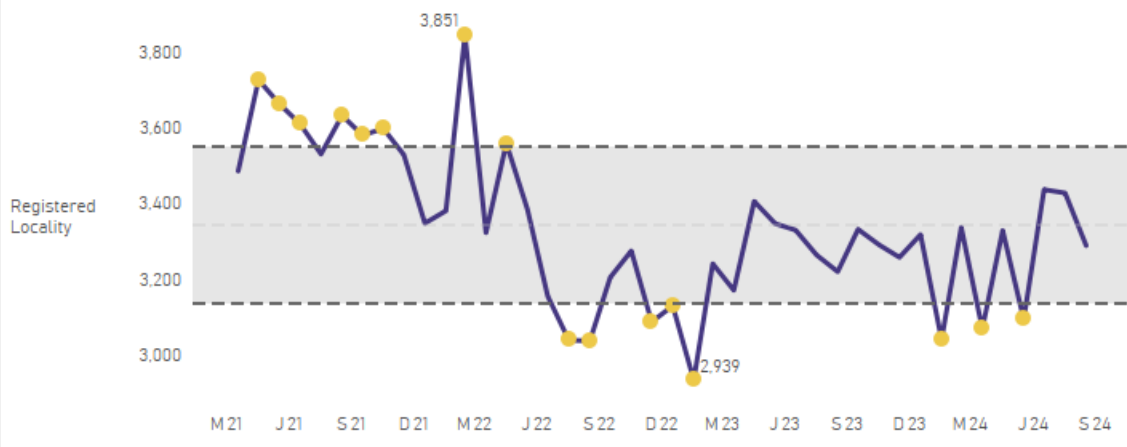
Source: National Flows APC (Monthly)

3,294
September 2024

3,433
August 2024

91/95
National Rank
Lower Quartile

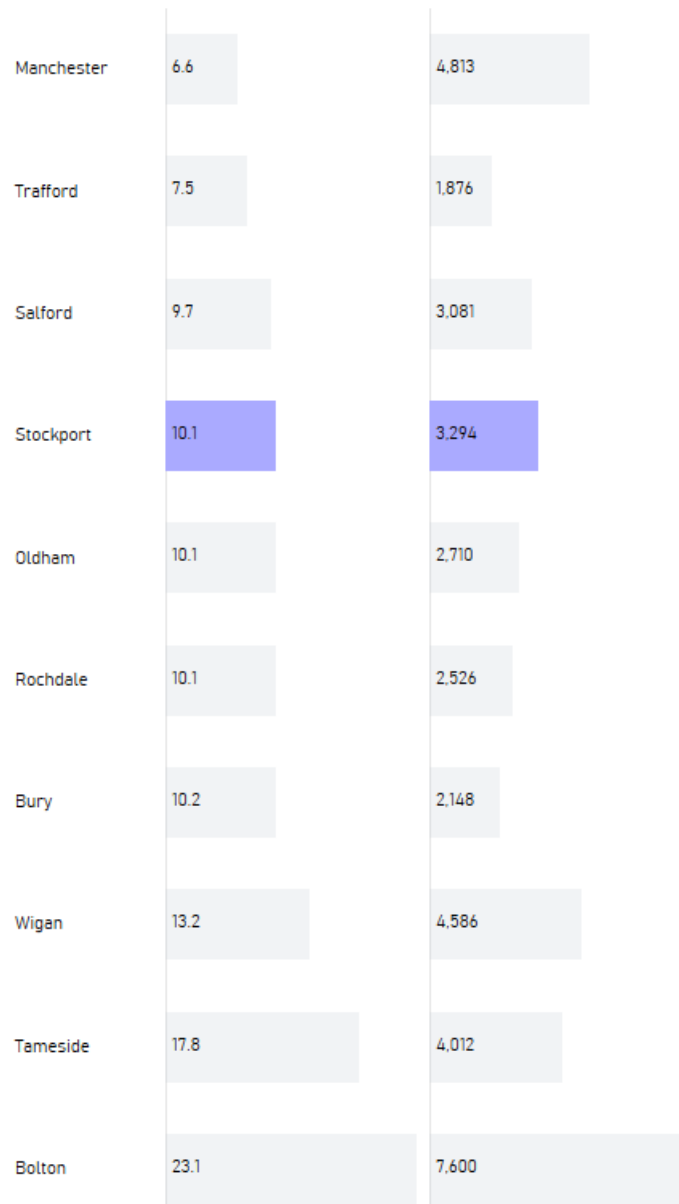
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	3,491	3,732	3,668	3,616	3,536	3,638	3,586	3,603	3,534	3,353	3,386	3,851
2022-23	3,328	3,564	3,390	3,160	3,044	3,042	3,210	3,280	3,092	3,135	2,939	3,246
2023-24	3,176	3,411	3,352	3,335	3,269	3,225	3,337	3,296	3,263	3,323	3,046	3,342
2024-25	3,074	3,334	3,099	3,442	3,433	3,294						

Selected measure at September 2024 has continuously **decreased** for **2** period(s) of time

Latest Value GM Benchmarking Count & Rate Per 1000 Population



Narrative

Updated: 9th October 2024 – no national target

The number of specific acute non-elective spells decreased by 139 in September to 3294. This would have been an increase in the number originally reported for August was 2881 and appears to have been updated.

Stockport has a rate of 10.1 per 1000 population (4th out of the 10 localities in Greater Manchester).

It should be noted that non-elective spells reflect the discharge picture in month and not the demand for non-elective admissions in month (many of those discharged could have been admitted prior to September). This means that a high number of non-elective spells (discharges) is not necessarily a negative measure, because discharges free up beds. A more appropriate measure of bed pressure would be non-elective admissions in month, or bed days occupied by non-elective admissions in month.

GP Referrals Made (General and Acute)

Total GP Referrals made for 1st Consultant led OP appointments in specific acute treatment functions

Source: Monthly Referral Return (MRR) (Monthly)

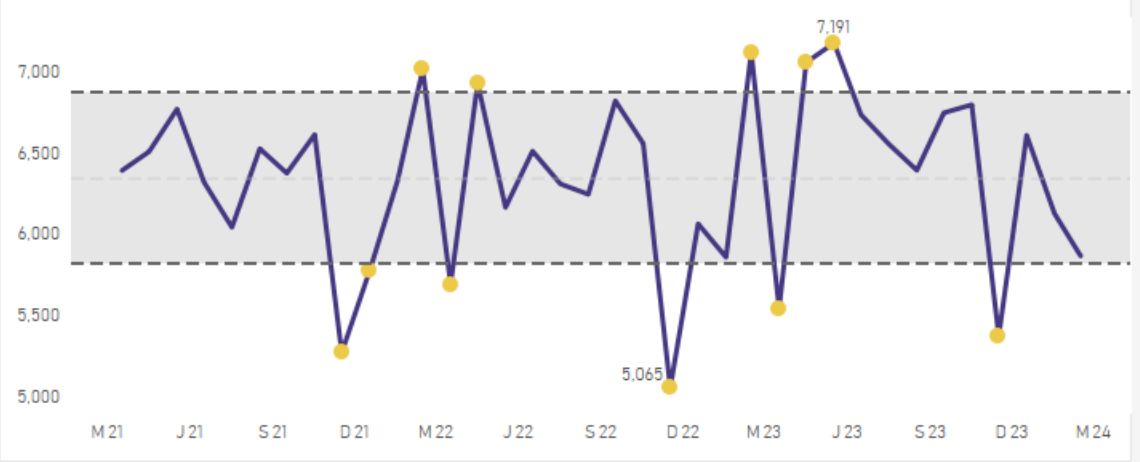
5,878
March 2024

6,139
February 2024

51/107
National Rank
Inter Quartile

5,744
National Median

Outliers more than 1 standard deviation from the mean

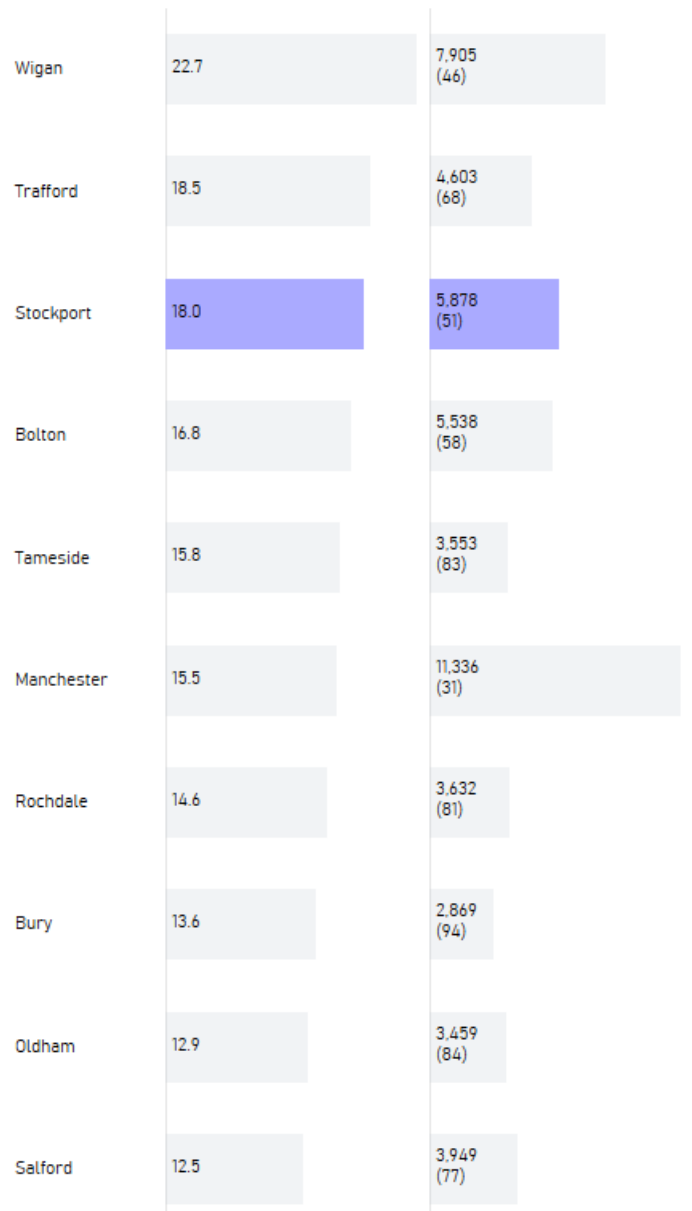


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	6,405	6,521	6,783	6,333	6,055	6,539	6,388	6,626	5,282	5,786	6,341	7,026
2022-23	5,703	6,942	6,177	6,524	6,322	6,258	6,834	6,571	5,065	6,076	5,870	7,132
2023-24	5,553	7,070	7,191	6,748	6,567	6,406	6,760	6,810	5,384	6,622	6,139	5,878

Selected measure at March 2024 has continuously **decreased** for **2** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 | Count (National Rank based on count)



Narrative

Updated: 9th October 2024 - no data since March 2024

The total number of GP referrals made for 1st consultant led outpatient appointments is not reported monthly on Tableau at present.

Stockport is at a positive position for total GP referrals made for 1st consultant led outpatient appointments for March 2024, when compared to the national median.

Further analysis will be undertaken to identify any areas within the specific acute specialities where this may be higher than the national median, with ongoing locality work to monitor and reduce activity where possible.

Total Referrals Made (General and Acute)

Total GP & Other Referrals made for 1st Consultant led OP appointments in specific acute treatment functions (EM07a + EM07b)

Source: Monthly Referral Return (MRR) (Monthly)

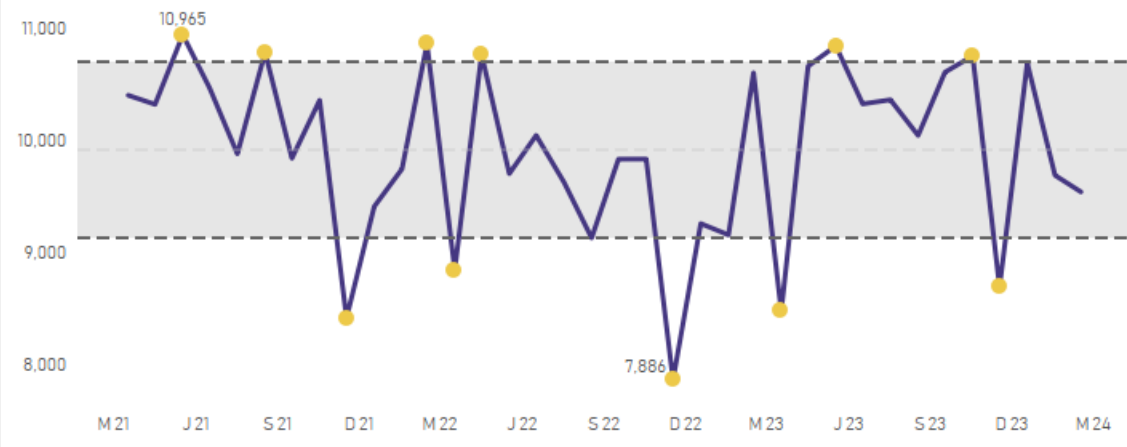
9,564
March 2024

9,712
February 2024

57/107
National Rank
Inter Quartile

10,411
National Median

Outliers more than 1 standard deviation from the mean

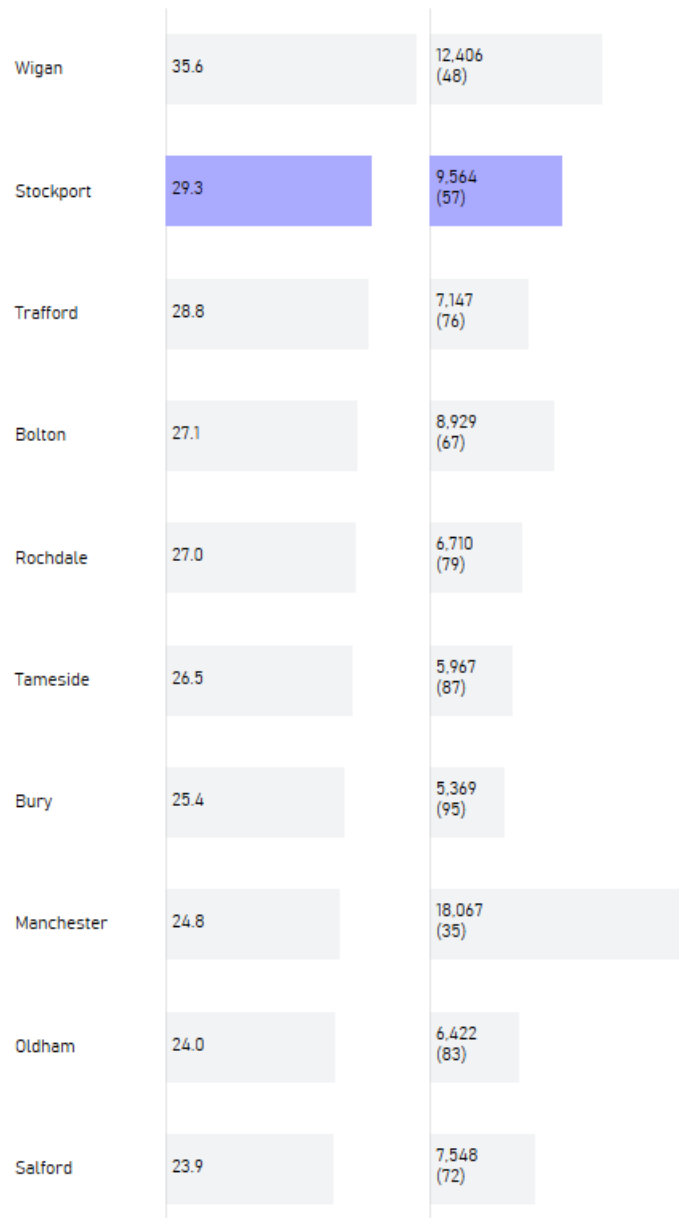


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	10,426	10,345	10,965	10,491	9,904	10,809	9,864	10,382	8,439	9,433	9,768	10,884
2022-23	8,867	10,790	9,727	10,068	9,652	9,153	9,856	9,857	7,886	9,281	9,180	10,627
2023-24	8,499	10,686	10,867	10,349	10,386	10,068	10,632	10,778	8,714	10,713	9,712	9,564

Selected measure at March 2024 has continuously **decreased** for **2** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 / Count (National Rank based on count)



Narrative

Updated: 9th October 2024 – no data since March 2024

The total number of GP and other referrals made for 1st consultant led outpatient appointments is not reported monthly on Tableau at present.

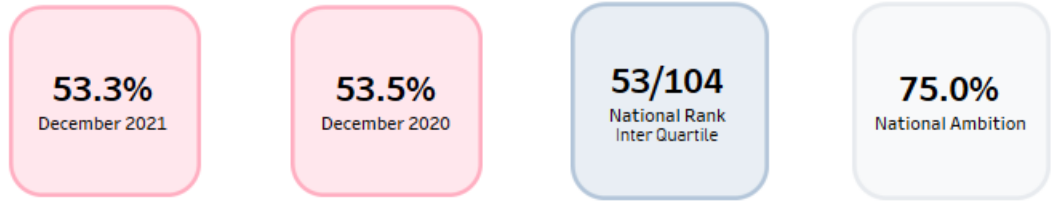
The last reported data shows 9564 referrals were made in March 2024. The under-performance (indicated by being in red) is how Stockport compares to the national median. However, the median may not be the most appropriate indicator or appropriate referrals given that:

- Every Trust does not have the same capacity and resource
- Catchment rates for hospital Trusts vary, and,
- Effective treatment may be offered in primary care and community settings negating the need to refer as much.

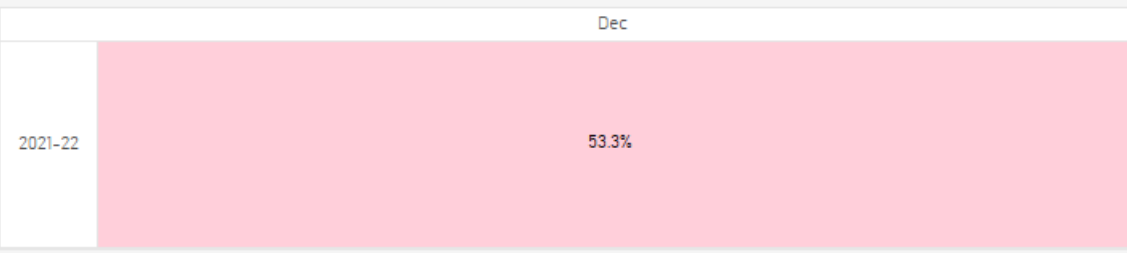
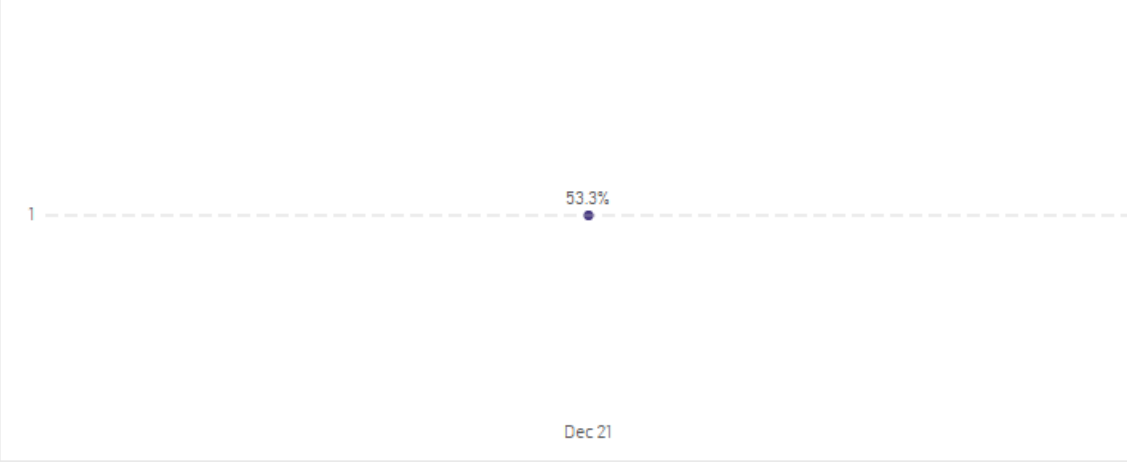
Cancers Diagnosed At Early Stage using Full Registration Data

Proportion of cancers diagnosed at stages 1 and 2 relative to the total cancers staged

Source: Cancer Early Staging Data Statistics via The National Disease Registration Service (NDRS) (Annual)



Outliers more than 1 standard deviation from the mean



Selected measure at December 2021 has continuously **decreased** for **1** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities

4	Rochdale	58.0%
13	Trafford	56.2%
36	Manchester	54.3%
41	Tameside	54.0%
48	Bury	53.7%
53	Stockport	53.3%
66	Wigan	52.6%
87	Oldham	51.1%
88	Bolton	51.0%
89	Salford	50.9%
28	NHS Greater Manchester Integrated Care Board	53.5%

Narrative

Updated: 9th October 2024 – no data since March 2022

Early Cancer diagnosis in Stockport stands at 55.1% at the end of November 2023. This is demonstrating a slow but steady increase since 2020.

There is ongoing engagement work from the Public Health team including 2 GM Cancer funded Cancer support workers. They work with practices to maximise screening uptake as well as running community events/workshops. They continue to engage with local organisations/businesses to promote 'Be seen be screened' to encourage them to allow staff time off to attend screening appointments.

Targeted Lung Health Checks ran in Tame Valley for 6 weeks during August into early September. With an uptake of 64% (above the GM average of 51%). This has resulted in 4 confirmed lung cancer diagnosis and a further 20+ patients being investigated on a suspected cancer pathway. We are awaiting the staging data. There has been an initiative in Brinnington to raise awareness of prostate cancer. This has included offering a PSA blood test. This has resulted in an increase in referrals onto a suspected cancer pathway. This has resulted in 16 men being diagnosed with prostate cancer. Whilst some of these were high grade cancers, they had not spread which should improve patient outcomes.

Number of MH patients with no criteria to reside (NCTR)

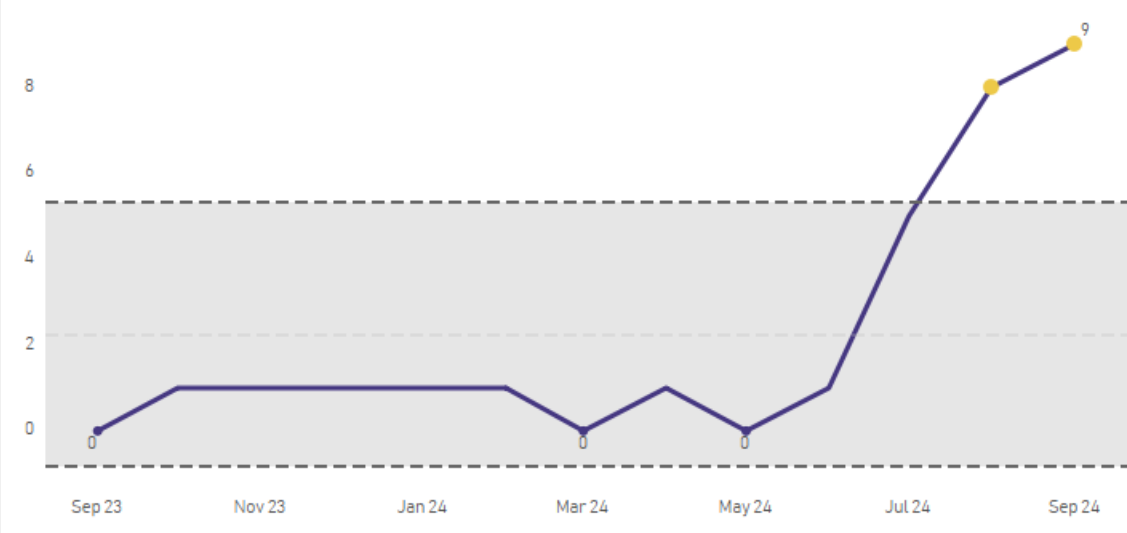
Number of beds occupied by MH patients who are ready to be discharged

Source: GM Admissions - Local (Monthly)

9
September 2024

8
August 2024

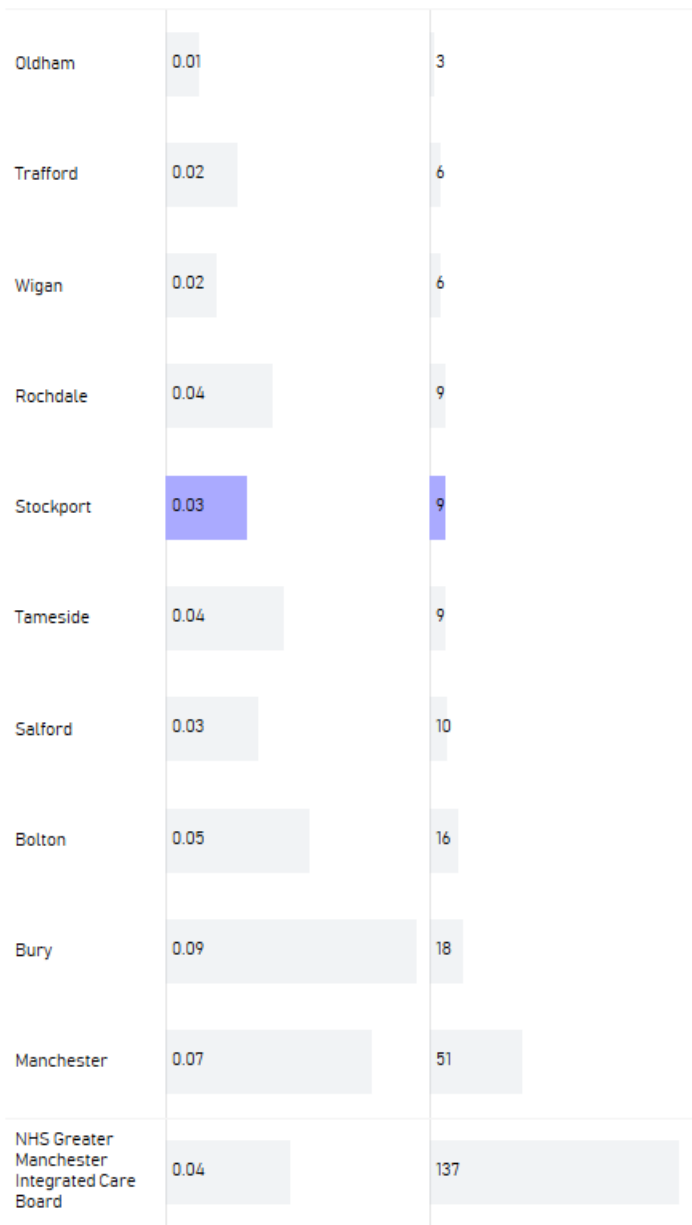
Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2023-24						0	1	1	1	1	1	0
2024-25	1	0	1	5	8	9						

Latest Value GM Benchmarking

Rate per 1000 | Count



Narrative

Updated: 9th October 2024 – no national target

The report shows that there are 9 patients who are clinically ready for discharge across acute mental health services, which is an increase on the 8 reported in August. Patients are discussed at both weekly bed meetings and locality escalation meetings. The locality is aware of patients who are awaiting formal discharge, where the reasons are out of the control of system partners.

Overall Access to Community Mental Health Services for Adults and Older Adults with Severe Mental Illnesses

Number of people who receive two or more contacts from NHS or NHS commissioned community mental health services (in transformed and non-transformed PCNs) for adults and older adults with severe mental illnesses, in a rolling 12 month period

Source: Published MHSDS (Monthly)

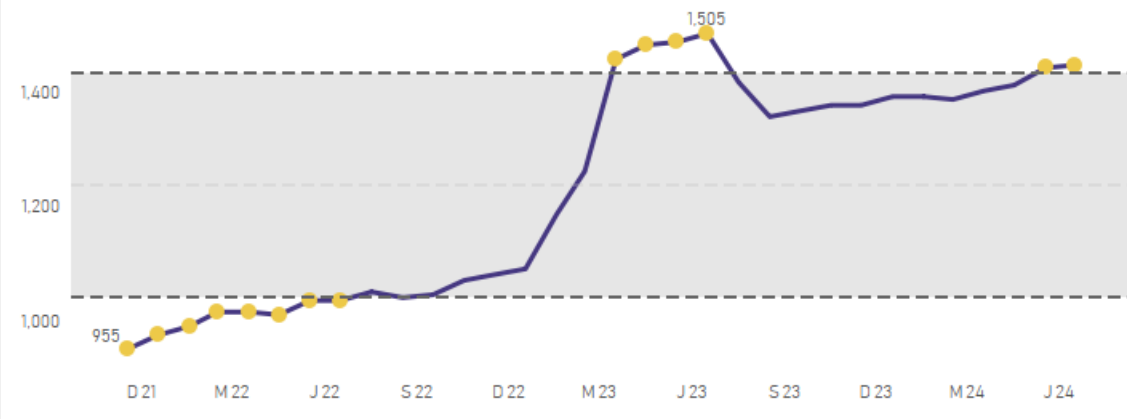
1,450
July 2024

1,445
June 2024

90/106
National Rank
Lower Quartile

3,648
National Median

Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22									955	980	995	1,020
2022-23	1,020	1,015	1,040	1,040	1,055	1,045	1,050	1,075	1,085	1,095	1,190	1,265
2023-24	1,460	1,485	1,490	1,505	1,420	1,360	1,370	1,380	1,380	1,395	1,395	1,390
2024-25	1,405	1,415	1,445	1,450								

Selected measure at July 2024 has continuously **increased** for **4** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 | Count (National Rank)



The rate is calculated using the 18+ population figure for each locality | Stockport: 260,055

Narrative

Updated: 9th October 2024 – no national target

In July, 1450 adults with severe mental illness received two or more contacts from NHS or NHS commissioned community mental health services in a rolling 12-month period. This is a slight increase in the number reported for June (1445) but 2198 below the national median of 3648.

The position in Stockport for increasing access for people with serious mental illness needs to improve. Currently the numbers for Stockport are the lowest in GM as the transformed Mental Health PCN Living Well Teams are not yet mobilised. Plans are in place to address this with the procurement of the VCFSE partners, but this has been delayed as we are awaiting approval from the STAR process.

Talking Therapies: Access Rate

This indicator tracks our ambition to expand Improving Access to Psychological Therapies (IAPT) services, also known as NHS Talking Therapies. The primary purpose of this indicator is to measure improvements in access to psychological therapy (via IAPT) for people with depression and/or anxiety disorders.

Source: Improving Access to Psychological Therapies Data Set (Monthly)

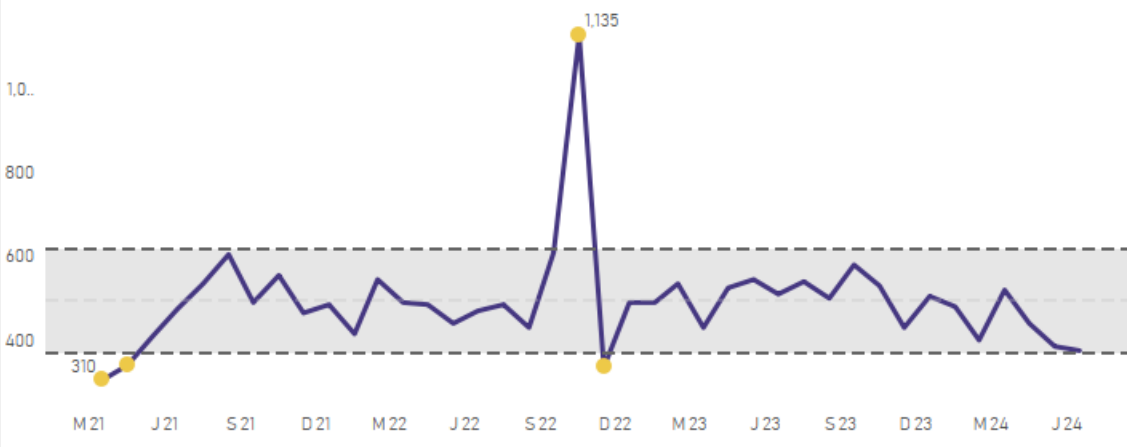
380
July 2024

390
June 2024

86/109
National Rank
Lower Quartile

No Target

Outliers more than 1 standard deviation from the mean



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	310	345	415	480	540	610	495	560	470	490	420	550
2022-23	495	490	445	475	490	435	615	1,135	340	495	495	540
2023-24	435	530	550	515	545	505	585	535	435	510	485	405
2024-25	525	445	390	380								

Selected measure at July 2024 has continuously **decreased** for **3** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 | Count (National rank)



Narrative

Update: 9th October 2024 – no national target

In July, 380 people accessed talking therapies in July; a slight decrease from the 390 reported in June.

Stockport had the lowest rate of access per 1000 in Greater Manchester (1.2) and ranks 86th in the country.

Action: GM ICB approved funding 3 Whole Time Equivalent Psychological Wellbeing Practitioner trainees, who will be in post end September 2024. They will be completing training, then once qualified (August 2025) will deliver towards the performance. The locality will not immediately see an increase in access. Pennine Care Foundation Trust staff returning from secondment, should improve access.

The Big Life Group staff consistently promote the service, new champions from the service have been allocated for older adults, male clients and Black, Asian and Minority Ethnic communities.

The service continue to work closely with Viaduct Social prescribing to generate new referrals. Pennine Care are working with the local authority, Neighbourhoods and community programme as another approach to generate referrals and increase access.

Women Accessing Specialist Community Perinatal Mental Health Services

Women Accessing Specialist Community Perinatal Mental Health Services (Rolling 12 mths)

Source: Published MHSDS (Quarterly)

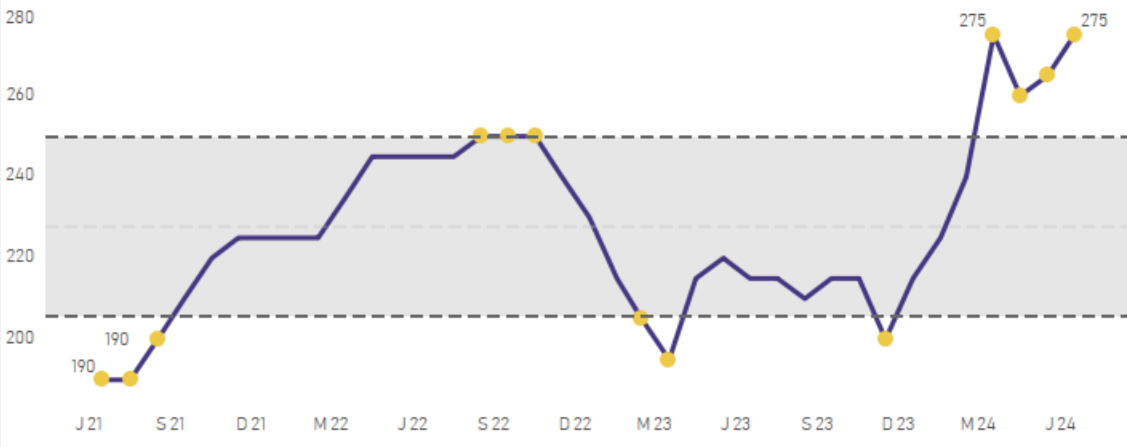
275
July 2024

265
June 2024

69/107
National Rank
Inter Quartile

No Target

Outliers more than 1 standard deviation from the mean

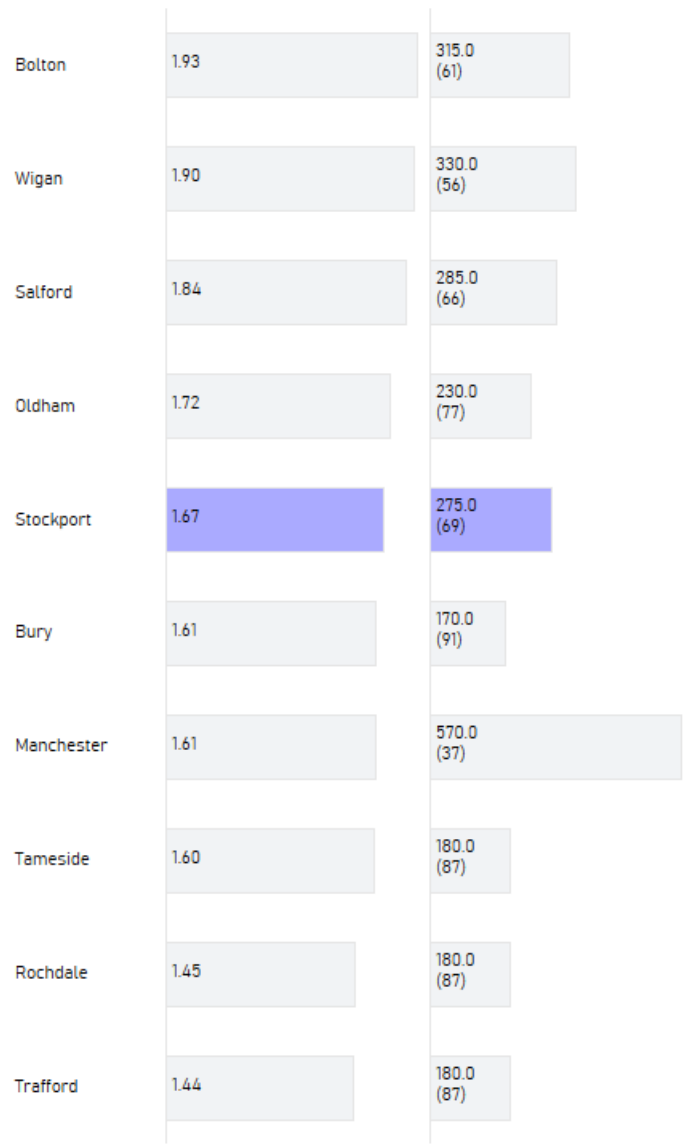


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22				190	190	200	210	220	225	225	225	225
2022-23	235	245	245	245	245	250	250	250	240	230	215	205
2023-24	195	215	220	215	215	210	215	215	200	215	225	240
2024-25	275	260	265	275								

Selected measure at July 2024 has continuously **increased** for **2** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 | Count (National Rank)



The rate is calculated using the female population figure for each locality | Stockport: 164,735

Narrative

Updated: 9th October 2024 – no national target

As of July 2024, 275 women accessed specialist community perinatal mental health services within a rolling 12 months. This was a slight increase on the 265 reported as of June. Stockport have a rate of 1.67 per 1000 that is 5th in Greater Manchester and 69th in the country.

This is a Greater Manchester specialist service who are currently not funded to meet the increased access indicated by NHS England. In the absence of limited funding, Greater Manchester commissioners with providers are exploring options for working differently and will continue the work to consolidate the integrated pathway.

It is worth noting that the Greater Manchester benchmarking data presented here is calculated using the female population figure, however the birth rate in each locality would be a better measure.

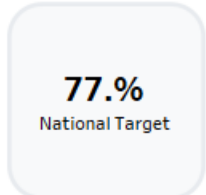
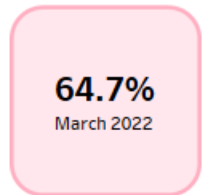
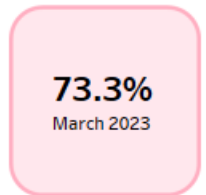
Indicative targets have not been set for individual localities as demand and access is largely dependent on locality birth rates. There has been an increase from the position reported March 2024 and the Stockport position in Greater Manchester has moved from position 8 to position 5.

Going forward the Stockport Perinatal Forum will continue to monitor the access rate for this service pathway.

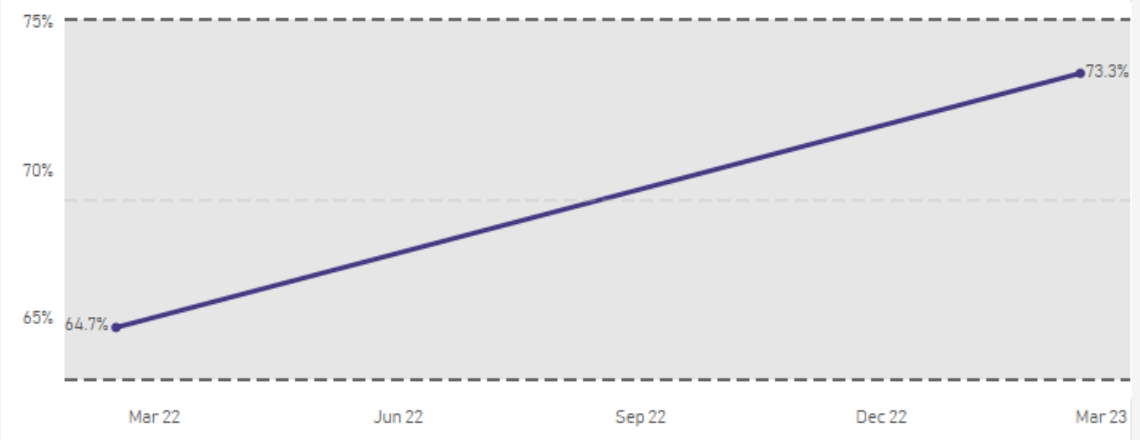
% of hypertension patients who are treated to target as per NICE guidance

% of hypertension patients who are treated to target as per NICE guidance

Source: NHS Quality Outcome Framework (Annual)



Outliers more than 1 standard deviation from the mean



Period	Percentage
2021-22	64.7%
2022-23	73.3%

Selected measure at March 2023 has continuously **increased** for **2** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities

5	Stockport	73.3%
11	Salford	72.3%
19	Wigan	71.6%
48	Bolton	69.4%
58	Rochdale	68.5%
62	Oldham	68.3%
63	Trafford	68.3%
82	Bury	66.6%
87	Tameside	65.9%
91	Manchester	65.4%
18	NHS Greater Manchester Integrated Care Board	69.0%

Narrative

Updated: 9th October 2024 – no data since March 2023

The proportion of people achieving their hypertension target is not reported monthly at present.

Stockport have the highest rate of people with hypertension who are treated to target as per NICE guidance in Greater Manchester. Stockport were 3.7% below the national target, although 5th highest performing locality in the country as of March 2023.

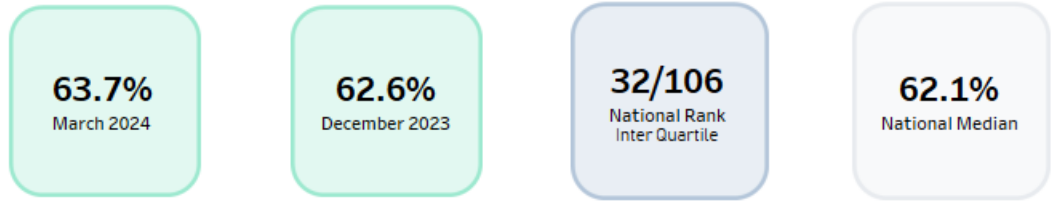
According to data from the national CVD PREVENT Audit, as of March 2024, 75.7% of people aged 18 and over, with GP recorded hypertension, in whom the last blood pressure reading (measured in the preceding 12 months) is below the age-appropriate treatment threshold. This is an improvement on the previous 12 months and 1.3% below the national target.

This metric has been identified as one of the locality CVD priorities. Funding has been allocated to two Stockport practices to support hypertension work with hard-to-reach groups. Use of the CVD PREVENT Audit data will give more grip and control of performance.

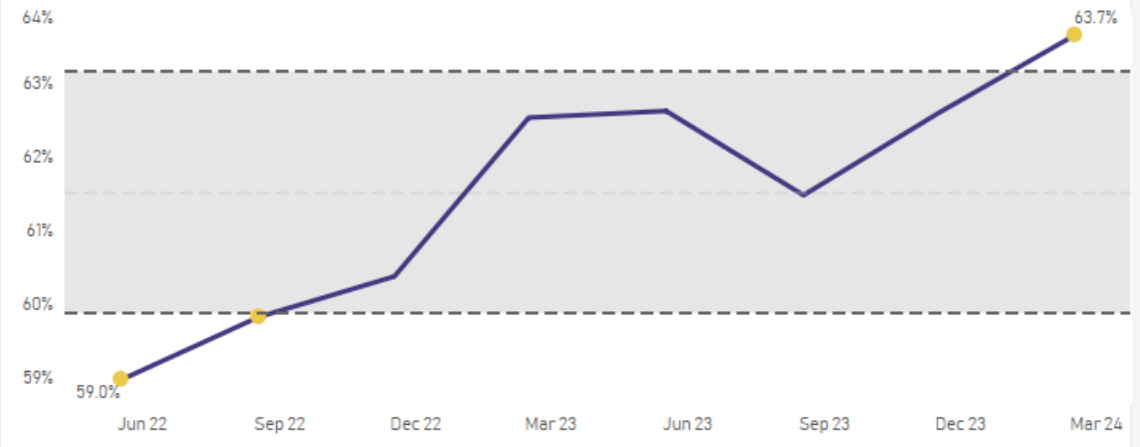
% of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins

% of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins

Source: CVD Prevent (Quarterly)



Outliers more than 1 standard deviation from the mean



	Jun	Sep	Dec	Mar
2022-23	59.0%	59.9%	60.4%	62.6%
2023-24	62.6%	61.5%	62.6%	63.7%

Selected measure at March 2024 has continuously **increased** for **2** period(s) of time

Latest Value GM Benchmarking

National Rank against other localities

4	Tameside	69.7%
5	Oldham	69.6%
7	Manchester	68.8%
13	Trafford	67.0%
14	Rochdale	66.9%
25	Salford	65.6%
32	Stockport	63.7%
39	Bury	63.1%
40	Wigan	63.0%
46	Bolton	62.6%
6	NHS Greater Manchester Integrated Care Board	66.0%

Narrative

Updated: 9th October 2024 – no data since March 2024.

The proportion of patients identified as having 20% or greater 10-year risk of developing cardiovascular disease treated with statins is not reported monthly on Tableau at present.

Stockport was 1.6% above the national median in March 2024 (63.7%).

The Stockport CVD oversight group have highlighted this as an area of focus, to undertake same further improvement work. We are therefore anticipating a further improved position in future months.

E. coli blood stream infections

12-month rolling counts of E. coli blood stream infections

Source: National Statistics: E. coli bacteraemia: monthly data by location of onset (Monthly)

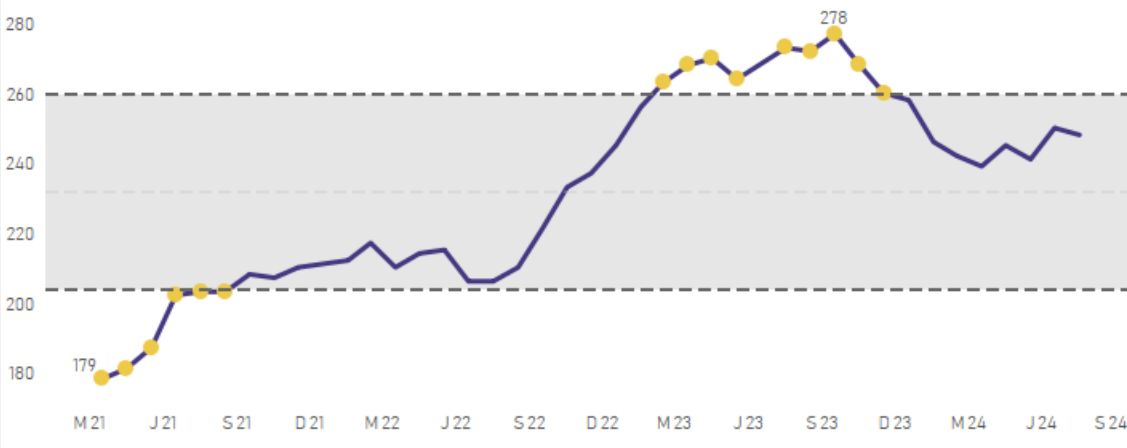
249
August 2024

251
July 2024

46/107
National Rank
Inter Quartile

No Target

Outliers more than 1 standard deviation from the mean

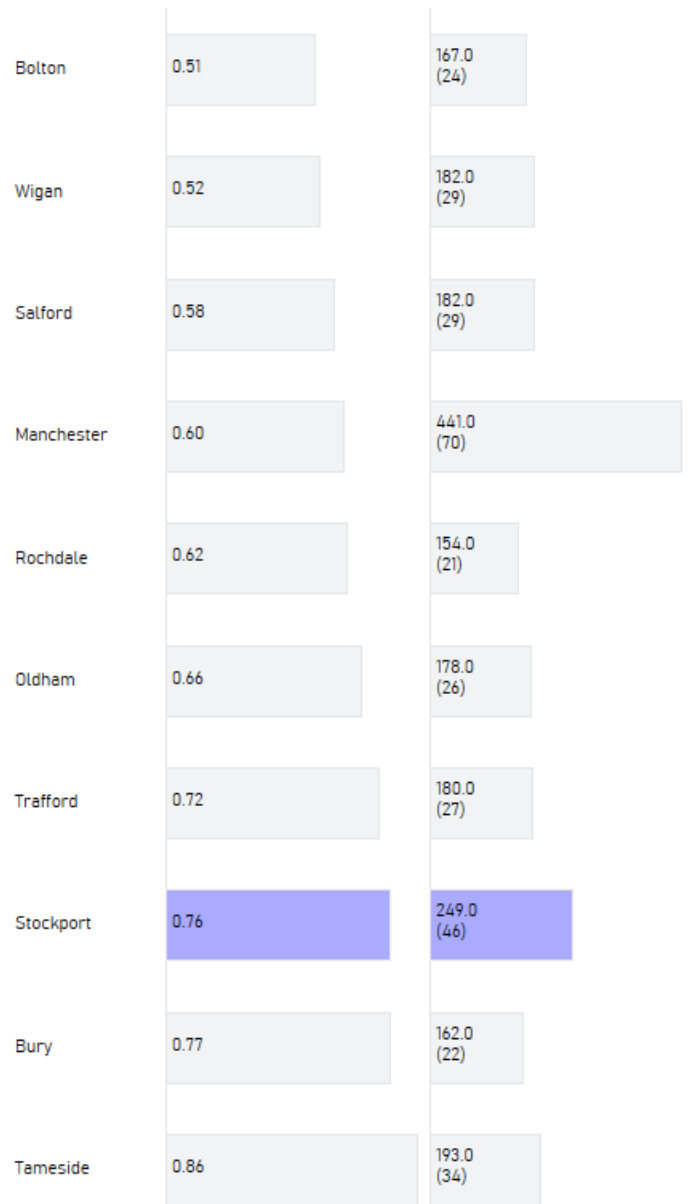


	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2021-22	179	182	188	203	204	204	209	208	211	212	213	218
2022-23	211	215	216	207	207	211	222	234	238	246	257	264
2023-24	269	271	265		274	273	278	269	261	259	247	243
2024-25	240	246	242	251	249							

Selected measure at August 2024 has continuously **decreased** for **1** period(s) of time

Latest Value GM Benchmarking

Rate per 1000 | Count (National Rank)



Narrative

Updated: 9th October 2024 – no national target

Stockport continues to see high numbers of E-Coli blood stream infection. This is most frequently the result of urinary tract infections or as a result of lower respiratory infections.

Actions currently underway include:

- 1) Case review of all community onset cases with root cause analysis, and,
- 2) Targeted work focussing on preventing UTI's currently being undertaken both in hospital and community settings.

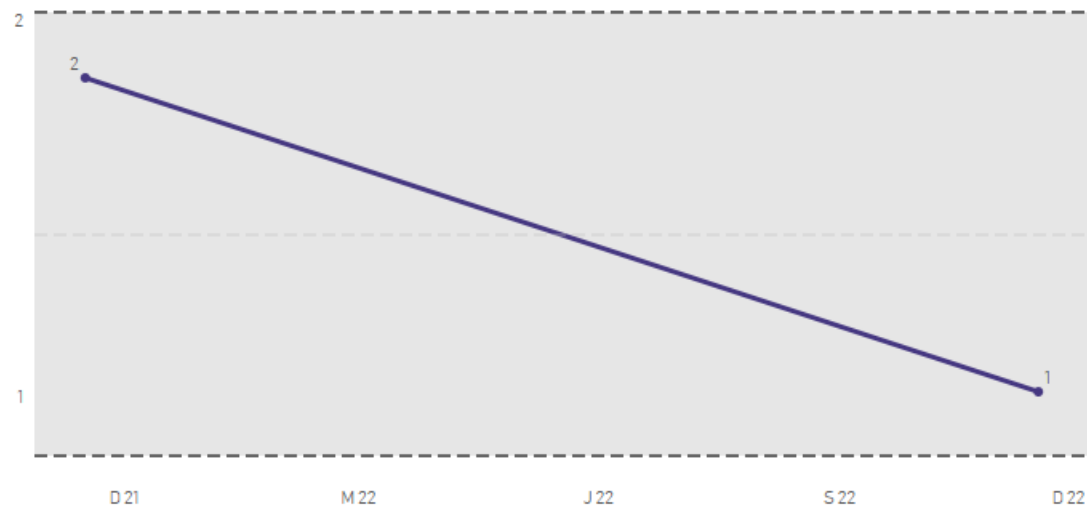
Number of neonatal deaths per 1,000 total live births

Number of neonatal deaths per 1,000 total live births

Source: MBRRACE-UK - Perinatal Mortality Surveillance Report (Annual)



Outliers more than 1 standard deviation from the mean



Period	Rate
2021-22	1.9
2022-23	1.0

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024 –

The latest published data through the MBRRACE-UK Perinatal Mortality Surveillance Report relates to births in 2022.

The number of neo-natal deaths is reported quarterly via the GM Maternity Quality Surveillance Dashboard

The national planning objectives for 2024/25 are to make progress towards the national safety ambition of reducing stillbirth, neonatal mortality, maternal mortality, and serious intrapartum brain injury.

The latest 12month position (July 2023 to June 2024) shows the rate of early neonatal deaths in Stockport was 1.7 deaths per 1,000 births . Which was below the GM average of 2.22 deaths per 1,000 births.

Stockport

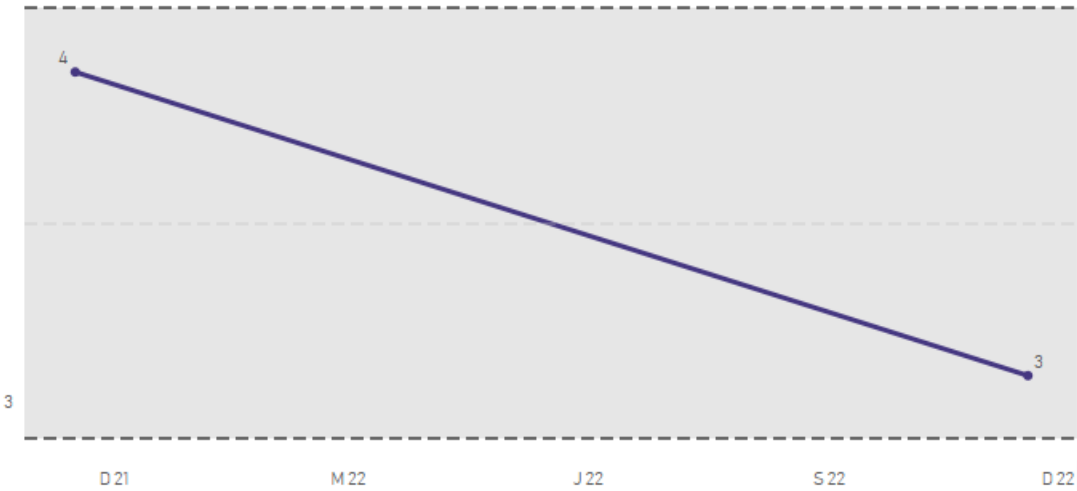
Number of stillbirths per 1,000 total births

Number of stillbirths per 1,000 total births

Source: MBRRACE-UK - Perinatal Mortality Surveillance Report (Annual)



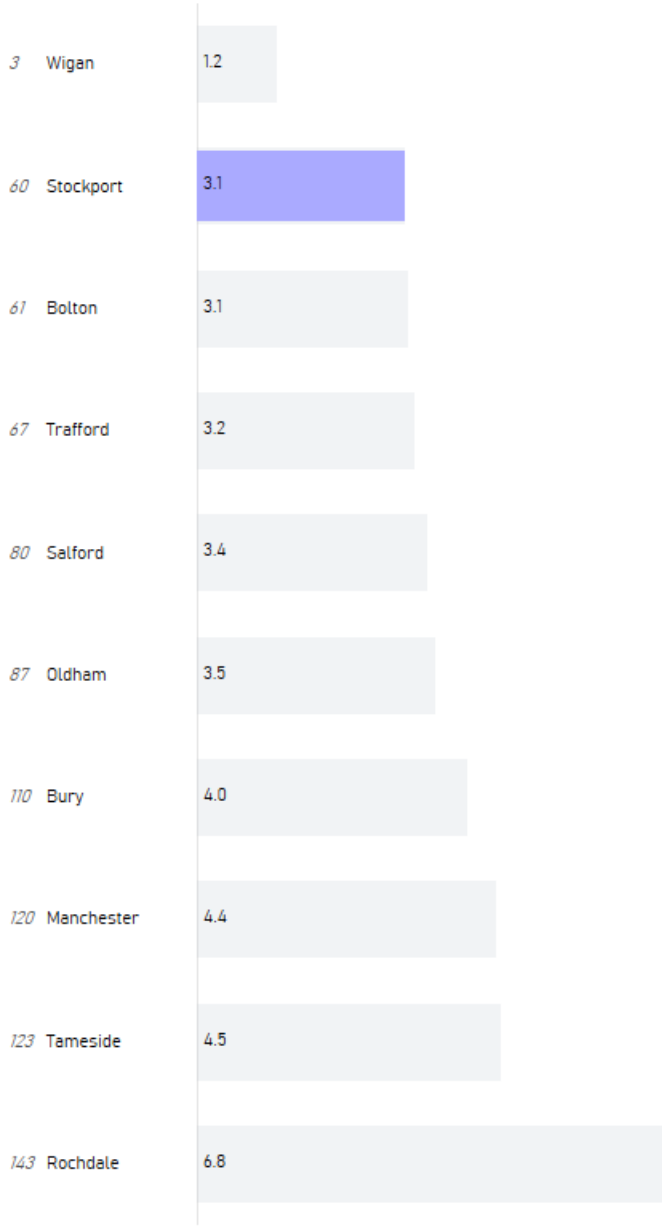
Outliers more than 1 standard deviation from the mean



Year	Rate
2021-22	3.7
2022-23	3.1

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024

The number of still births per 1000 births is reported quarterly via the Greater Manchester Maternity Quality Surveillance dashboard

The GM ambition is for a reduction in still birth rates to 3.5 per 1000 registrable births in 24/25.

The latest 12month position (July 2023 - June 2024) shows Stockport's position at 1.7 still births per 1000 births, which is lower than the Greater Manchester position of 4.63 per 1000 births.

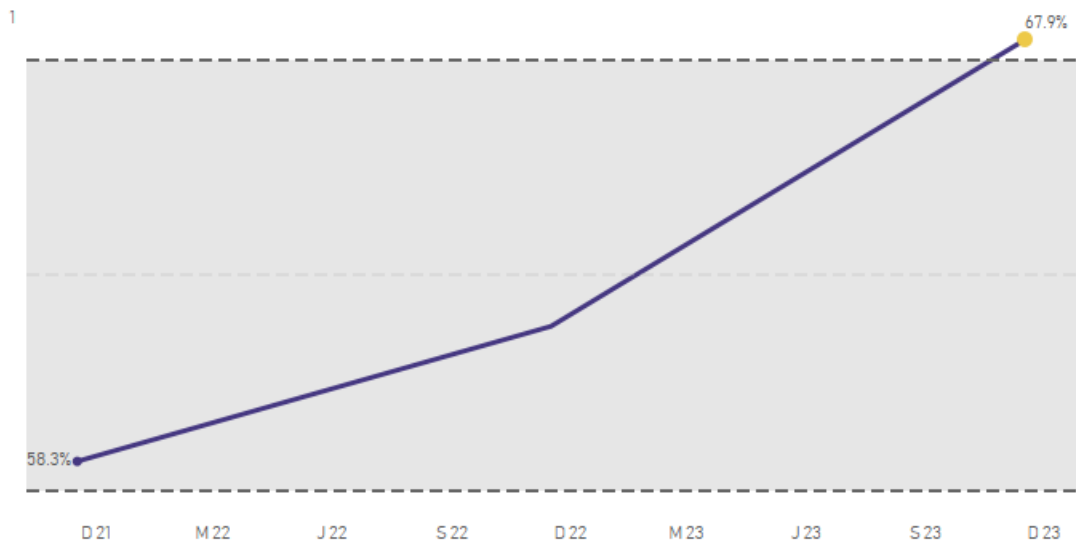
Breast screening coverage, females aged 53-70, screened in last 36 months

3-year screening coverage %: The number of females registered to the practice screened adequately in previous 36 months divided by the number of eligible females on last day of the review period

Source: Fingertips, Public Health Data, Public Health Outcomes Framework (Annual)



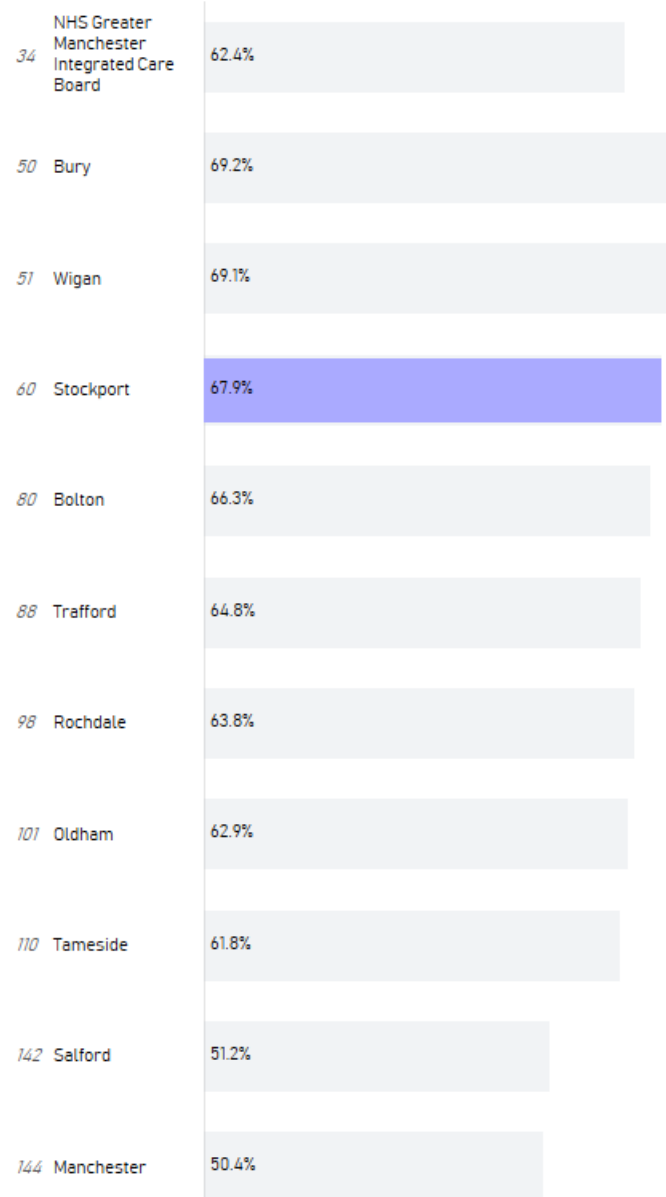
Outliers more than 1 standard deviation from the mean



Year	Coverage %
2021-22	58.3%
2022-23	61.4%
2023-24	67.9%

Latest Value GM Benchmarking

National Rank against other localities



Narrative

Updated: 9th October 2024 – no data since December 2023

There is ongoing work by the Public Health engagement Team with individual practices to ensure that uptake of breast screening is maximised. They work closely with our practices in our priority one areas as well as those who have a lower than the Stockport average screening rates to support them in contacting non-attenders/responders and rebooking /booking. Stockport is unique in that we have East Cheshire provide our breast screening.

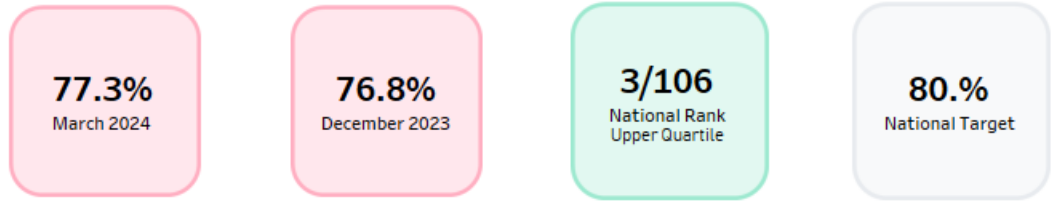
Historically, there were lots of issues with accessibility both to make an appointment and physically. For example, if you had a mobility issue the mobile unit wasn't accessible and women were expected to travel to Macclesfield Hospital for their screening. A barrier for someone reliant on public transport in terms of time/cost for some. There were also issues with ringing to make appointments and being able to speak to someone to do this.

The Public Health commissioner carried out public engagement and asked what the barriers were to attending breast screening appointments and provided feedback to the provider. They have worked closely with them, and the phone situation has been resolved. In addition, we there is now a new van which has a lift so is accessible reducing the need for women to travel to Macclesfield. This has resulted in increasing levels of screening.

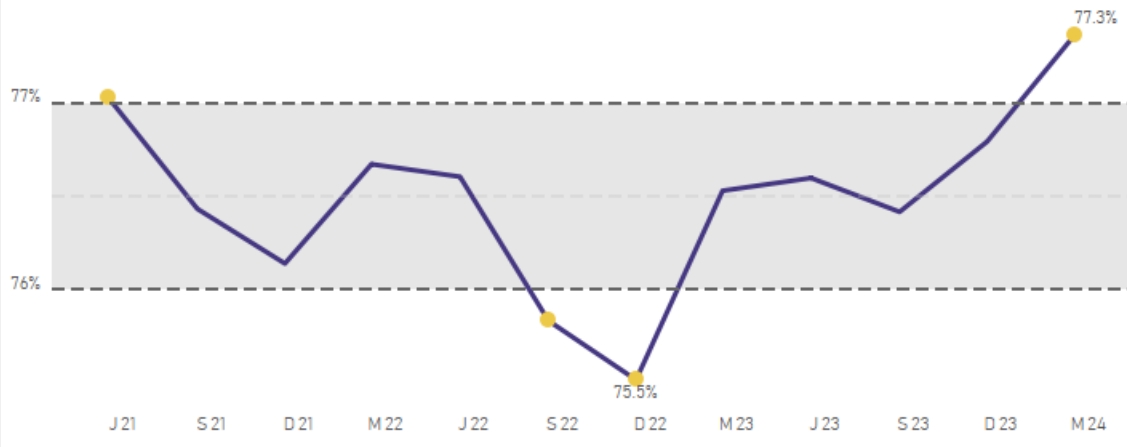
Females, 25-64, attending cervical screening within target period (3.5 or 5.5 year coverage, %)

The overall cervical screening coverage: the number of women screened adequately in the previous 42 months (if aged 24-49) or 66 months (if aged 50-64) divided by the number of eligible women on last day of review period.

Source: Cervical Screening Programme - Coverage Statistics [Management Information] (Quarterly)



Outliers more than 1 standard deviation from the mean



	Jun	Sep	Dec	Mar
2021-22	77.0%	76.4%	76.1%	76.6%
2022-23	76.6%	75.8%	75.5%	76.5%
2023-24	76.6%	76.4%	76.8%	77.3%

Selected measure at March 2024 has continuously **increased** for **2** period(s) of time

Latest Value GM Benchmarking National Rank against other localities

3	Stockport	77.3%
6	Trafford	76.1%
39	Wigan	73.7%
66	Rochdale	70.8%
69	Bury	70.6%
73	Tameside	70.2%
75	Oldham	69.8%
93	Bolton	67.6%
98	Salford	64.7%
104	Manchester	60.2%
32	NHS Greater Manchester Integrated Care Board	68.7%

Narrative

Updated: 9th October 2024 – no data since March 2024.

There is ongoing engagement work by the Public Health engagement Team with individual practices to ensure that uptake of screening is maximised. They work closely with our practices in our priority one areas as well as those who have a lower than the Stockport average screening rates to support them in contacting non-attenders/responders and rebooking /booking.

A stretch target for practices above their core contract is included in our Locally Commissioned Services (LCS) contract. This requires practices who are not achieving 80% uptake to increase in year. Practices are also asked to target vulnerable groups e.g. Learning Disabilities, to increase their uptake and report on this. A proactive approach is recommended including the use of enhanced access appointments to increase uptake. Practices are encouraged to share best practice between them to improve uptake across the whole Primary Care Network.

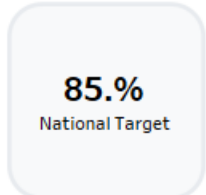
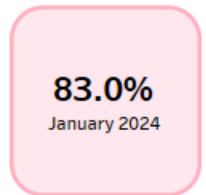
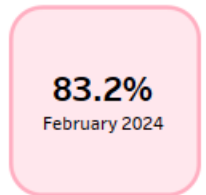
In addition, the Public Health Cancer engagement lead as well as the cancer support workers engage with and attend local community groups including speaking with religious leaders to understand and help deal with the barriers for screening.

This has resulted in increasing levels of screening.

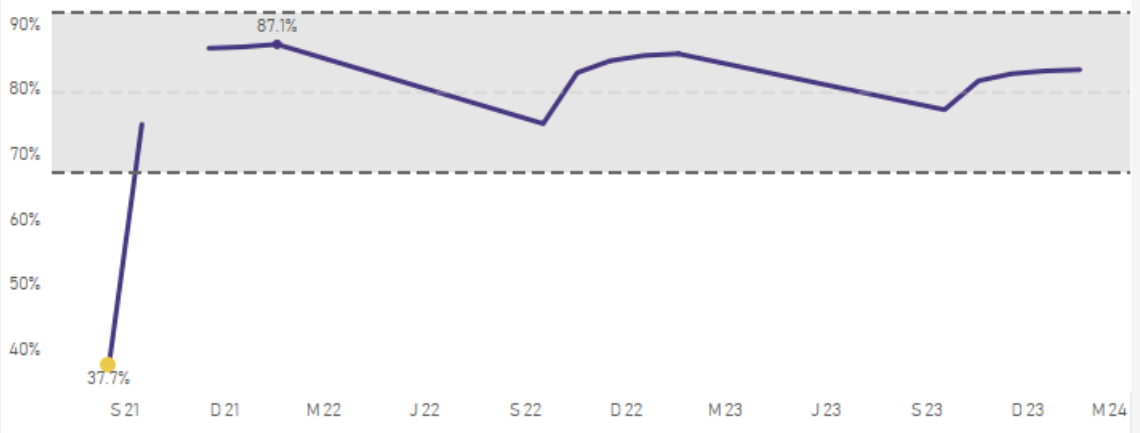
Seasonal Flu Vaccine Uptake: 65 years and over

The uptake of seasonal influenza vaccination among those aged 65 and over

Source: Seasonal influenza vaccine uptake in GP patients: monthly data, 2022 to 2023 (Monthly)



Outliers more than 1 standard deviation from the mean



	Sep	Oct	Nov	Dec	Jan	Feb
2021-22	37.7%	74.8%		86.5%	86.7%	87.1%
2022-23		74.9%	82.7%	84.6%	85.4%	85.6%
2023-24		77.1%	81.5%	82.6%	83.0%	83.2%

Selected measure at February 2024 has continuously **increased** for **4** period(s) of time

Latest Value GM Benchmarking National Rank against other localities

4	Stockport	83.2%
49	Trafford	79.3%
62	Wigan	78.5%
71	Bury	77.5%
77	Oldham	76.9%
79	Rochdale	76.1%
80	Bolton	76.1%
89	Tameside	73.4%
90	Salford	73.3%
102	Manchester	67.8%
34	NHS Greater Manchester Integrated Care Board	76.2%

Narrative

Updated: 9th October 2024 – no data since February 2024.

Stockport has strong historic delivery of the flu vaccination programme, always achieving top 4 in each cohort nationally, and consistently the highest performer when compared with other Greater Manchester localities for all cohorts.

Planning is underway for 2024/25 winter campaign, with this programme due to mobilise imminently.