

Stockport Locality Performance Report

January 2025

One Stockport Health and Care Board

22 January 2024

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

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

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, September and 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.
- 2.3. The letter following the last Locality Assurance Meeting acknowledges Stockport is below target with its access to Community Mental Health due to the hold up in funds to allow implementation of the full Living Well model. We have had positive discussions regarding possible options to progress mobilisation of the Voluntary, Community & Social Enterprise Living Well elements this year and can confirm we are aiming to mobilise for February 2025.
- 2.4. It was acknowledged there were a number of appointments in train to improve the Talking Therapies access rate and this will be discussed in the next Locality Assurance Meeting.
- 2.5. For Early Diagnosis in Cancer, it was clear that there are robust plans in place for all cancer types and there is collaborative working across Stockport with all partners. Stockport flagged concerns about the data issue with Manchester NHS Foundation Trust which is impacting across GM and needs to be resolved. It was suggested that the issue would benefit from GM support.
- 2.6. In summary the outcome letter stated that there was high assurance in terms of Early Diagnosis Cancer and moderate assurance in terms of the other performance areas

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 and Assurance (PIA) report and are based on those that have recent data reported (within the last 3 months). The most recent activity is up to and including December.
- 4.1 The proportion of cancers diagnosed at an early stage (stage 1 or 2) relative to the total cancers staged in Stockport was 56.8% based on a 12-month rolling average – April 2023 to March 2024).

Several specialties are showing a positive trajectory toward the 75% target, however, the 12-month rolling position of all tumours staged within Rapid Cancer Registration Data as of March 2024, decreased fractionally from 57.0% to 56.8%. The position is affected by the decline in performance in colorectal and pancreatic cancer. (Slide 4)

Action: This month (January) there is the 'This van can' initiative. This is focussing on bowel cancer and will be visiting 3 sites across Stockport over several weeks. This public

engagement is designed to increase awareness of the signs/symptoms of colorectal cancer. There will also be the opportunity for bowel screening kits to be ordered for eligible people who may not have completed the test.

Action: The Public Health team will be commencing a targeted piece for work with Brinnington contacting non-participants in the bowel screening programme.

- 4.2 The standard for 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 October 2024, 48.3% have received an annual health check in Stockport. At this point in the year, this would be above an incremental target of 43.7% (Slide 5)

- 4.3 As of October 2024, Stockport had 4110 children and young people accessing mental health services, 20 more than the previous month and 1265 below the national median. (Slide 6)

Action: 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.

- 4.4 Stockport continue to have a high proportion of people with dementia aged 65 and over being recorded in primary care (77.2%); exceeding the national target of 66.7%.

Stockport have the 3rd highest rate in Greater Manchester and 8th in the country. (Slide 7)

- 4.5 The percentage of occupied beds by mental health patients who are ready to be discharged in December was 5.8%, the third lowest in Greater Manchester and 0.3% lower than reported in November. (Slide 8)

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 and will be a focus across GM for the Q4 LAMs.

- 4.6 There were 9 patients who are clinically ready for discharge across acute mental health services in December, the same as that reported in November. (Slide 9)

Action: Patients are discussed at both weekly bed meetings and locality escalation meetings.

- 4.7 In October 1610 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 considerable increase in the number reported for September (1475), the highest recorded to date, although 2113 below the national median of 3723. (Slide 10)

Action: The transformed Mental Health PCN Living Well Teams (Pennine Care element) has been mobilised but the full model of the VCSFE will not be mobilised until February.

- 4.8 In October, 450 people accessed talking therapies; an increase from the 410 reported in September.

Stockport had the 3rd lowest rate of access per 1000 in Greater Manchester (1.4) and ranks 79th in the country. (Slide 11)

Action: GM ICB approved funding 3 Whole Time Equivalent Psychological Wellbeing Practitioner trainees, who came in to post at the end of September 2024. They will contribute to the delivery of performance whilst completing their training and become qualified in August 2025.

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

Action: 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.

These actions will be a focus in the next LAM meeting.

- 4.9 As of October 2024, 300 women accessed specialist community perinatal mental health services within a rolling 12 months. This was a slight increase on the 265 reported as of September.

Stockport have a rate of 4.9 per 1000 that is 4th in Greater Manchester and 66th in the country. (Slide 12)

Action: Greater Manchester commissioners with providers are exploring options for working differently and will continue the work to consolidate the integrated pathway. The Stockport Perinatal Forum will continue to monitor the access rate for this service pathway.

- 4.10 The position as of October 2024 shows 50.0% of all discharges from adult acute and older acute beds with a length of stay of over 60 days: a steady increase from August (33.3%). Stockport has the third highest rate of long lengths of stays in Greater Manchester. (Slide 13)

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.

- 4.11 The percentage of GP appointments where the time between booking and attendance was within 14 days remains above the national median in Stockport with 82.3% in November.

Stockport has the fourth highest rate in Greater Manchester and ranks 36th in the country. (Slide 14)

- 4.12 The percentage of patients describing their overall experience of making a GP appointment as 'fairly good' or 'very good' as part of the annual GP Patient survey for 2024 was 84.3% for Stockport. This was the highest rate in Greater Manchester. (Slide 15)

- 4.13 Stockport reported 244 E-Coli blood stream infections in the 12 month rolling counts to October 2024. This is most frequently the result of urinary tract infections or the result of lower respiratory infections. (Slide 16)

Action: There is a case review of all community onset cases with root cause analysis, and targeted work focussing on preventing urinary tract infections currently being undertaken both in hospital and community settings. Also, a Masterclass took place with a Stockport Foundation Trust Microbiologist in November 2024 focussing on antibiotic prescribing in urinary tract infections.

- 4.14 The total number of antibiotics prescribed in Stockport locality remains above the national target of 87.1% at 102.1% for October the highest rate in Greater Manchester. This is a 0.5% decrease in the rolling 12 month rate reported in September and the lowest rate reported in Stockport since December 2022. (Slide 17)

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

- 4.15 The proportion of broad-spectrum antibiotics prescribed in Stockport remained below the 10% national target in October 2024 with a fractional increase from 7.3% to 7.4%.

Stockport ranks 49th out of 111 services nationally and maintains a steady trajectory by remaining low on this metric. (Slide 18)

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

- 4.16 In December 2024, 62.7% of Stockport residents attending any A&E department across GM (this includes outside of GM) waited less than 4 hours from arrival to either the time of admission, the time of discharge or the time of transfer.

This is the same percentage as reported in November and remains 15.3% off the national target of 78%. For the same period, there were 9262 attendances to Stockport NHS Foundation Trust, 63% being seen within 4 hours. (Slides 21 & 22)

Action: The urgent and emergency care plan to achieve the national standard of care of 78% which covers admissions avoidance, hospital flow and discharge elements is in place and monitored through Urgent and Emergency Care Delivery Board, GM system oversight and NHSE Tier 1 oversight meetings

- 4.17 The proportion of patients who were fit for discharge and had no need to reside in a hospital bed rose to 9.3% in December from 8.6% in November 2024. (Slide 23)

Action: Work is ongoing as part of our Safe and Timely Discharge collaboration to review and improve discharge, particularly the length of time someone is no criteria to reside.

- 4.18 The number of specific acute non-elective spells decreased considerably in December (-10%) according to the latest report. The decrease was from 3584 spells in November to 3230 in December. (Slide 24)

- 4.19 In October 2024, 16.9% of Stockport residents waiting for a diagnostic test waited 6 weeks or more; a decrease of 3.3% from the 20% reported in September.

In terms of number of people waiting over 6 weeks, the highest volume waiting over 6 weeks were for Echocardiography (2041), Non obstetric ultrasound (1929), MRI (1576) and Sleep study assessments (1212).

Stockport ranks 54th of 107 localities for diagnostic waits over 6 weeks. Waiting times have been falling since January 2024. (Slide 25)

- 4.20 At the beginning of October, 92 patients waiting from Stockport locality would not meet the 65-week target. This figure has since fallen to 47 in November.

The long waits are for a range of specialities that include cardiology, dermatology, ENT, gastroenterology, general surgery, gynaecology, ophthalmology, oral surgery, plastic surgery, trauma and orthopaedics and urology. (Slide 26)

- 4.21 The proportion of patients told their cancer diagnosis outcomes within 28 days of a referral for suspected cancer was lower than the national target of 75% in Stockport in October 2024 (73.5%).

However, this position has improved in November with 1419 out of 1801 (78.8%) people told their cancer diagnosis outcome within 28 days of their 2 week wait referral for suspected cancer. This is above the national target. (Slide 27)

- 4.22 Stockport continues to exceed the 70% target for a 2-hour urgent community responses (UCR) for all referrals (97.3%) in November. (Slide 28)