

Stockport Locality Performance Report

March 2025

One Stockport Health and Care Board

26 March 2025

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	Clinical	Sustainability	Financial	Legal	Conflicts of	Report
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engagement	engagement	impact	advice	advice	Interest	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. 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 meetings for Stockport have thus far taken place in June, September and November 2024. The Locality Assurance Meeting intended for March 2025 has been postponed.

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 February.
- 4.1 The proportion of cancers diagnosed at an early stage (stage 1 or 2) relative to the total cancers staged in Stockport was 56.9% based on a 12-month rolling average – June 2023 to May 2024).

Most specialties are showing a positive trajectory toward the 75% target. The most sustained positive trajectories include Lung (8 months), Urological (6 months), Gynaecological (3 months), and Haematological (3 months). (Slide 3)

Action: At the end of February, *This Van Can* for ovarian cancer campaign launched across GM. They attended 3 sites across Stockport providing information and talked to people to raise awareness.

- 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 December 2024, 65.4% have received an annual health check in Stockport. At this point in the year, this would be above an incremental target of 56.3%. (Slide 4)

- 4.3 As of December 2024, Stockport had 4105 children and young people accessing mental health services, 20 less than the previous month and 1328 below the national median. (Slide 5)

Action: We are 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 (76.2%); exceeding the national target of 66.7%.

Stockport have the 3rd highest rate in Greater Manchester and 9th in the country. (Slide 6)

- 4.5 The percentage of occupied beds by mental health patients who are ready to be discharged in February was 4.8%, the lowest in Greater Manchester and 1.7% lower than reported in November. (Slide 7)

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 7 patients who are clinically ready for discharge across acute mental health services in February, 3 less than in January. (Slide 8)

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

- 4.7 In December, 1650 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 an increase in the number reported for November (1615), the highest recorded to date, although 2090 below the national median of 3740. (Slide 9)

Action: A model has been proposed for the inclusion of the VCSFE organisations and will be shared with the Mental Health and Wellbeing Partnership on 19th March for approval. Once approved we are seeking mobilisation in June 2025.

- 4.8 In December, 485 people accessed talking therapies; a decrease from the 545 reported in November.

Stockport had the 3rd lowest rate of access per 1000 in Greater Manchester (1.5) and ranks 59th in the country. (Slide 10)

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 December 2024, 315 women accessed specialist community perinatal mental health services within a rolling 12 months. This was a slight increase on the 310 reported as of November.

Stockport have a rate of 5.1 per 1000 the highest in Greater Manchester and 64th in the country. (Slide 11)

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 December 2024 shows 37.5% of all discharges from adult acute and older acute beds with a length of stay of over 60 days: a considerable decrease from November (22.5%). (Slide 12)

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 84.8% in January.

Stockport has the third highest rate in Greater Manchester and ranks 33rd in the country. (Slide 13)

- 4.12 Stockport reported 246 E-Coli blood stream infections in the 12 month rolling counts to January 2024. This is most frequently the result of urinary tract infections or the result of lower respiratory infections. (Slide 14)

Action: case review of all community onset cases with root cause analysis, targeted work focussing on preventing urinary tract infections being undertaken both in hospital and community settings, a masterclass with a Stockport Foundation Trust Microbiologist in November 2024 focussing on antibiotic prescribing in UTI's and support to all practices from the locality Medicines optimisation team to improve antimicrobial stewardship.

- 4.13 The total number of antibiotics prescribed in Stockport locality remains above the national target of 87.1% at 99.8% for December the highest rate in Greater Manchester.

This is a 0.9% decrease in the rolling 12-month rate reported in September and the lowest rate reported in Stockport since December 2022. (Slide 15)

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

- 4.14 The proportion of broad-spectrum antibiotics prescribed in Stockport remained fairly stable at 7.4% for the last 3 months, and below the 10% national target.

Stockport ranks 7th in Greater Manchester and 52nd out of 111 services nationally. (Slide 16)

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

- 4.15 In February 2025, 69.7% of residents attending A&E departments 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 7.3% increase on that reported for January and is 8.3% off the national target of 78%. For the same period, there were 8183 attendances to Stockport NHS Foundation Trust, 69.5% being seen within 4 hours. (Slides 19 & 20)

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

- 4.16 The proportion of patients who were fit for discharge and had no need to reside in a hospital bed rose to 9.8% in February from 9.6% in January 2025. (Slide 21)

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.

- 4.17 In December 2024, 19.7% of Stockport residents waiting for a diagnostic test waited 6 weeks or more; an increase of 2.7% from the 17% reported in November.

In terms of number of people waiting over 6 weeks, the highest volume waiting over 6 weeks were for Audiology, Echocardiography, MRI and Sleep study assessments.

Stockport ranks 64th of 107 localities for diagnostic waits over 6 weeks. Waiting times have been falling since January 2024. (Slide 22)

- 4.18 At the beginning of December, 62 patients waiting from Stockport locality would not meet the 65-week target. This figure increased from November.

The long waits are for a range of specialities that include cardiology, dermatology, ENT, gastroenterology, general surgery, gynaecology, trauma and orthopaedics and urology. (Slide 23)

- 4.19 The proportion of patients told their cancer diagnosis outcomes within 28 days of a referral for suspected cancer was higher than the national target of 75% in Stockport in December 2024 (81.1%). The position is the highest since June 2024.

In terms of percentages, the biggest challenges in December were for Haematology (55.6%), Lower gastrointestinal (69.5%), Sarcoma (73.3%) and Urological (60.2%). (Slide 24)

- 4.20 Stockport continues to exceed the 70% target for a 2-hour urgent community responses (UCR) for all referrals (97.7%) in January. (Slide 25)