



**South Sefton**  
Clinical Commissioning Group

# **South Sefton Clinical Commissioning Group**

## Integrated Performance Report January 2021 Summary

## Summary Performance Dashboard

Metric	Reporting Level		2020-21												
			Q1			Q2			Q3			Q4			YTD
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
<b>E-Referrals</b>															
<b>NHS e-Referral Service (e-RS) Utilisation Coverage</b> Utilisation of the NHS e-referral service to enable choice at first routine elective referral. Highlights the percentage via the e-Referral Service.	South Sefton CCG	RAG	R	R	R	R	R	R	R	R	R	No new data			R
		Actual	52.3%	39.1%	28.5%	28.7%	30.1%	33.8%	33.9%	34.4%	32.7%				34.8%
		Target	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
<b>Diagnostics &amp; Referral to Treatment (RTT)</b>															
<b>% of patients waiting 6 weeks or more for a diagnostic test</b> The % of patients waiting 6 weeks or more for a diagnostic test	South Sefton CCG	RAG	R	R	R	R	R	R	R	R	R	R			R
		Actual	65.46%	66.85%	53.45%	38.95%	39.38%	31.61%	27.67%	22.14%	15.84%	17.25%			
		Target	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%
<b>% of all Incomplete RTT pathways within 18 weeks</b> Percentage of Incomplete RTT pathways within 18 weeks of referral	South Sefton CCG	RAG	R	R	R	R	R	R	R	R	R	R			R
		Actual	70.35%	59.72%	49.96%	47.24%	53.57%	59.74%	64.54%	65.78%	63.96%	62.25%			
		Target	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%	92%
<b>Referral to Treatment RTT - No of Incomplete Pathways Waiting &gt;52 weeks</b> The number of patients waiting at period end for incomplete pathways >52 weeks	South Sefton CCG	RAG	R	R	R	R	R	R	R	R	R	R			R
		Actual	8	46	106	171	198	247	349	503	647	1025			
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Cancelled Operations</b>															
<b>Cancellations for non clinical reasons who are treated within 28 days</b> Patients who have ops cancelled, on or after the day of admission (Inc. day of surgery), for non-clinical reasons to be offered a binding date within 28 days, or treatment to be funded at the time and hospital of patient's choice.	Liverpool University Foundation Hospital Trust	RAG													
		Actual	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available			
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Urgent Operations cancelled for a 2nd time</b> Number of urgent operations that are cancelled by the trust for non-clinical reasons, which have already been previously cancelled once for non-clinical reasons.	Liverpool University Foundation Hospital Trust	RAG	G	G	G	R	G	G	G	G	G	G			R
		Actual	0	0	0	4	0	0	0	0	0	0			4
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0

Cancer Waiting Times															
<b>% Patients seen within two weeks for an urgent GP referral for suspected cancer (MONTHLY)</b> The percentage of patients first seen by a specialist within two weeks when urgently referred by their GP or dentist with suspected cancer	South Sefton CCG	RAG	G	G	G	G	G	G	G	R	R	R			R
		Actual	93.51%	99.72%	98.11%	96.45%	93.58%	93.60%	94.18%	83.14%	83.14%	84.54%			91.17%
		Target	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%
<b>% of patients seen within 2 weeks for an urgent referral for breast symptoms (MONTHLY)</b> Two week wait standard for patients referred with 'breast symptoms' not currently covered by two week waits for suspected breast cancer	South Sefton CCG	RAG	G	G	G	G	G	G	R	R	R			R	
		Actual	93.33%	100%	100%	96.55%	95.24%	100%	95.35%	43.48%	49.12%	62.90%			80.09%
		Target	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%
<b>% of patients receiving definitive treatment within 1 month of a cancer diagnosis (MONTHLY)</b> The percentage of patients receiving their first definitive treatment within one month (31 days) of a decision to treat (as a proxy for diagnosis) for cancer	South Sefton CCG	RAG	R	R	G	G	G	G	R	G	G	G		G	
		Actual	94.92%	90.48%	98.36%	97.78%	98.25%	97.18%	93.10%	97.83%	100%	98.80%			96.85%
		Target	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%
<b>% of patients receiving subsequent treatment for cancer within 31 days (Surgery) (MONTHLY)</b> 31-Day Standard for Subsequent Cancer Treatments where the treatment function is (Surgery)	South Sefton CCG	RAG	R	G	R	R	G	R	G	R	G	R		R	
		Actual	90.91%	100%	87.50%	80%	100%	91.67%	100%	78.57%	100%	92.31%			90.84%
		Target	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%
<b>% of patients receiving subsequent treatment for cancer within 31 days (Drug Treatments) (MONTHLY)</b> 31-Day Standard for Subsequent Cancer Treatments (Drug Treatments)	South Sefton CCG	RAG	G	R	R	G	R	G	G	G	G	G		G	
		Actual	100%	93.33%	93.75%	100%	96.30%	100%	100%	100%	100%	100%			98.60%
		Target	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
<b>% of patients receiving subsequent treatment for cancer within 31 days (Radiotherapy Treatments) (MONTHLY)</b> 31-Day Standard for Subsequent Cancer Treatments where the treatment function is (Radiotherapy)	South Sefton CCG	RAG	G	G	R	G	G	G	G	G	G	G		G	
		Actual	100%	100%	85.71%	100%	94.12%	100%	100%	100%	100%	100%			98.26%
		Target	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%	94%
<b>% of patients receiving 1st definitive treatment for cancer within 2 months (62 days) (MONTHLY)</b> The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer	South Sefton CCG	RAG	R	R	R	G	R	R	R	R	R	R		R	
		Actual	79.31%	73.91%	83.87%	85.71%	69.70%	78.79%	68.89%	62.79%	80%	65.71%			73.87%
		Target	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%
<b>% of patients receiving treatment for cancer within 62 days from an NHS Cancer Screening Service (MONTHLY)</b> Percentage of patients receiving first definitive treatment following referral from an NHS Cancer Screening Service within 62 days.	South Sefton CCG	RAG	R	R		R	R		R	G	R	G		R	
		Actual	50%	66.67%	No patients	50%	0%	No patients	0%	100%	85.71%	92.31%			74.19%
		Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
<b>% of patients receiving treatment for cancer within 62 days upgrade their priority (MONTHLY)</b> % of patients treated for cancer who were not originally referred via an urgent but have been seen by a clinician who suspects cancer, who has upgraded their priority.	South Sefton CCG (local target 85%)	RAG				G	G		G						
		Actual	80%	0%	75%	90.91%	100%	84.62%	87.50%	76.92%	80%	76.92%			81.90%
		Target	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%

Metric	Reporting Level		2020-21												YTD
			Q1			Q2			Q3			Q4			
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
<b>Accident &amp; Emergency</b>															
<b>4-Hour A&amp;E Waiting Time Target</b> % of patients who spent less than four hours in A&E	South Sefton CCG	RAG	R	G	R	R	R	R	R	R	R	R			R
		Actual	93.19%	96.37%	94.13%	92.81%	89.83%	85.16%	78.48%	85.32%	82.66%	75.75%			86.80%
		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%
<b>MSA</b>															
<b>Mixed sex accommodation breaches - All Providers</b> No. of MSA breaches for the reporting month in question for all providers	South Sefton CCG	RAG													
		Actual	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available			
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Mixed Sex Accommodation - MSA Breach Rate</b> MSA Breach Rate (MSA Breaches per 1,000 FCE's)	South Sefton CCG	RAG													
		Actual	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available	Not available			
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>HCAI</b>															
<b>Number of MRSA Bacteraemias</b> Incidence of MRSA bacteraemia (Commissioner) cumulative	South Sefton CCG	RAG	G	G	G	G	G	G	G	G	R	R			R
		YTD	0	0	0	0	0	0	0	0	0	1	2		2
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Number of C.Difficile infections</b> Incidence of Clostridium Difficile (Commissioner) cumulative	South Sefton CCG	RAG	G	G	G	G	G	G	G	G	G	G			G
		YTD	4	6	7	9	11	17	19	23	27	34			34
		Target	6	11	15	20	24	28	34	40	46	51	55	60	60
<b>Number of E.Coli</b> Incidence of E.Coli (Commissioner) cumulative	South Sefton CCG	RAG	G	R	R	G	R	R	R	R	G	G			G
		YTD	9	23	35	39	56	67	76	86	91	100			100
		Target	11	21	32	42	53	63	75	85	96	108	125	128	128

Metric	Reporting Level		2020-21												YTD
			Q1			Q2			Q3			Q4			
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
<b>Mental Health</b>															
<b>Proportion of patients on (CPA) discharged from inpatient care who are followed up within 7 days</b> The proportion of those patients on Care Programme Approach discharged from inpatient care who are followed up within 7 days	South Sefton CCG	RAG	G			G			G						G
		Actual	97.3%			97.2%			100%						98.16%
		Target	95%			95%			95%			95%			95%
<b>Episode of Psychosis</b>															
<b>First episode of psychosis within two weeks of referral</b> The percentage of people experiencing a first episode of psychosis with a NICE approved care package within two weeks of referral.	South Sefton CCG	RAG	G			G			G						G
		Actual	77.6%			81.8%			100%						86.5%
		Target	60%			60%			60%			60%			
<b>IAPT (Improving Access to Psychological Therapies)</b>															
<b>IAPT Recovery Rate (Improving Access to Psychological Therapies)</b> The percentage of people who finished treatment within the reporting period who were initially assessed as 'at caseness', have attended at least two treatment contacts and are coded as discharged, who are assessed as moving to recovery.	South Sefton CCG	RAG	R	R	R	R	R	R	R	R	R	R			R
		Actual	39.8%	33.8%	44.3%	44.0%	47.7%	37.8%	44.4%	44.6%	46.1%	44.0%			42.6%
		Target	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
<b>IAPT Access</b> The proportion of people that enter treatment against the level of need in the general population i.e. the proportion of people who have depression and/or anxiety disorders who receive psychological therapies	South Sefton CCG	RAG	R	R	R	R	R	R	R	R	R	R			R
		Actual	0.74%	0.46%	0.67%	0.77%	0.81%	1.03%	1.03%	0.79%	0.60%	0.35%			7.25%
		Target	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%	1.59%
<b>IAPT Waiting Times - 6 Week Waiters</b> The proportion of people that wait 6 weeks or less from referral to entering a course of IAPT treatment against the number who finish a course of treatment.	South Sefton CCG	RAG	G	G	G	G	G	G	G	G	G	G			G
		Actual	100%	95.71%	98.50%	98.6%	98.5%	95.7%	96.2%	95.1%	97.1%	100%			98%
		Target	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
<b>IAPT Waiting Times - 18 Week Waiters</b> The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment, against the number of people who finish a course of treatment in the reporting period.	South Sefton CCG	RAG	G	G	G	G	G	G	G	G	G	G			G
		Actual	100%	98.57%	100%	100%	100%	100%	100%	98.6%	100%	100%			99%
		Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%
<b>Dementia</b>															
<b>Estimated diagnosis rate for people with dementia</b> Estimated diagnosis rate for people with dementia	South Sefton CCG	RAG	R	R	R	R	R	R	R	R	R	R			R
		Actual	60.40%	59.42%	59.36%	59.53%	58.3%	58.5%	58.2%	57.1%	57.7%	57.6%			58.61%

		Target	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%
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Metric	Reporting Level		2020-21												YTD
			Q1			Q2			Q3			Q4			
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
<b>Learning Disability Health Checks</b>															
<b>No of people who have had their Annual LD Health Check – local data (cumulative) National Target 67% by Q4</b>	South Sefton CCG	RAG	R	R	R										R
		Actual	6.8%	12.5%	25.8%										25.8%
		Target	17%	34%	50%										67%
<b>Severe Mental Illness - Physical Health Check</b>															
<b>People with a Severe Mental Illness receiving a full Physical Annual Health Check and follow-up interventions (%)</b> Percentage of people on General Practice Serious Mental Illness register who receive a physical health check and follow-up care in either a primary or secondary setting.	South Sefton CCG	RAG	R	R	R										R
		Actual	19%	16.1%	12.3%										
		Target	50%	50%	50%										50%
<b>Children &amp; Young People Mental Health Services (CYPMH) <span style="float: right;">Rolling 12 month</span></b>															
<b>Improve access rate to Children and Young People's Mental Health Services (CYPMH)</b> Increase the % of CYP with a diagnosable MH condition to receive treatment from an NHS-funded community MH service	South Sefton CCG	RAG	G	R	R										G
		Actual	14.6%	8.8%	6.2%										37.0%
		Target	8.75%	8.75%	8.75%										35%
<b>Children and Young People with Eating Disorders</b>															
<b>The number of completed CYP ED routine referrals within four weeks</b> The number of routine referrals for CYP ED care pathways (routine cases) within four weeks (QUARTERLY) <b>National Target 95%</b>	South Sefton CCG	RAG	R	G	G										R
		Actual	80%	100%	97.5%										92.53%
		Target	95%	95%	95%										95%
<b>The number of completed CYP ED urgent referrals within one week</b> The number of completed CYP ED care pathways (urgent cases) within one week (QUARTERLY) <b>National Target 95%</b>	South Sefton CCG	RAG	Data suppressed due to	less than 2 referrals	G										G
		Actual			100%										100%
		Target	95%	95%	95%										95%

Metric	Reporting Level	2020-21													
		Q1			Q2			Q3			Q4			YTD	
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
<b>SEND Measures</b>															
Child and Adolescent Mental Health Services (CAMHS) - % Referral to choice within 6 weeks	Sefton	RAG	R	R	R	R	R	R	G	R	R	R			R
		Actual	36.8%	35.4%	58.9%	75.5%	72.4%	86.9%	93.2%	87.3%	85.0%	54.7%			68.6%
		Target	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%
Child and Adolescent Mental Health Services (CAMHS) - % referral to partnership within 18 weeks	Sefton	RAG	R	R	R	R	R	R	R	R	R	R			R
		Actual	64.2%	61.4%	56.3%	40.0%	36.0%	63.6%	62.5%	51.9%	50.0%	52.2%			53.8%
		Target	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%
Percentage of Autism Spectrum Disorder (ASD) assessments started in 12 weeks	Sefton	RAG	G	G	G	G	G	G	G	G	G	R			G
		Actual	100%	100%	98%	95%	95%	96%	93%	93%	90%	87%			95.00%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
Percentage of Autism Spectrum Disorder (ASD) assessments completed within 30 Weeks	Sefton	RAG	G	G	G	G	G	G	G	G	G	G			G
		Actual	100%	100%	100%	100%	100%	100%	99%	98%	97%	93%			99.00%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
Percentage of Attention Deficit Hyperactivity Disorder (ADHD) assessments started within 12 Weeks	Sefton	RAG	G	G	G	R	R	R	G	G	R	G			G
		Actual	100%	100%	100%	88%	81%	89%	100%	100%	85%	100%			94.00%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
Percentage of Attention Deficit Hyperactivity Disorder (ADHD) assessments completed within 30 Weeks	Sefton	RAG	G	G	G	G	G	G	G	G	G	G			G
		Actual	100%	100%	100%	100%	100%	100%	98%	96%	96%	95%			99.00%
		Target	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%

## 1. Executive Summary

This report provides summary information on the activity and quality performance of South Sefton Clinical Commissioning Group at month 10 of 2020/21 (note: time periods of data are different for each source).

Constitutional Performance for Jan and Quarter 3 2020/21	CCG	LUHFT
<b>Diagnostics (National Target &lt;1%)</b>	17.25%	25.01%
<b>Referral to Treatment (RTT) (92% Target)</b>	62.25%	63.86%
<b>No of incomplete pathways waiting over 52 weeks</b>	1,025	3,395
<b>Cancer 62 Day Standard (Nat Target 85%)</b>	65.71%	66.53%
<b>A&amp;E 4 Hour All Types (National Target 95%)</b>	75.75%	74.55%
<b>A&amp;E 12 Hour Breaches (Zero Tolerance)</b>	-	0
<b>Ambulance Handovers 30-60 mins (Zero Tolerance)</b>	-	460
<b>Ambulance Handovers 60+ mins (Zero Tolerance)</b>	-	125
<b>Stroke (Target 80%)</b>	-	Not Available
<b>TIA Assess &amp; Treat 24 Hrs (Target 60%)</b>	-	Not Available
<b>Mixed Sex Accommodation (Zero Tolerance)</b>	Not Available	Not Available
<b>CPA 7 Day Follow Up (95% Target) 2020/21 - Q3</b>	100.0%	-
<b>EIP 2 Weeks (60% Target) 2020/21 - Q3</b>	100.0%	-
<b>IAPT Access (1.59% target monthly - 19% YTD)</b>	0.35%	-
<b>IAPT Recovery (Target 50%)</b>	44.0%	-
<b>IAPT 6 Weeks (75% Target)</b>	100.0%	-
<b>IAPT 18 Weeks (95% Target)</b>	100.0%	-

### To Note:

Due to the COVID-19 pandemic and the need to release capacity across the NHS to support the response, the decision was made to pause the collection and publication of several official statistics. These include Friends and Family Test (FFT), Mixed Sex Accommodation (MSA), Delayed Transfers of Care (DToc), cancelled operations, occupied bed days, CQC inspections, Oversight Framework (OF), Better Care Fund (BCF) and NHS England monthly activity monitoring. These measures will be updated as soon as the data becomes available and incorporated back into the report.

Data quality issues due to the impact of COVID-19 remain within the data flows for referrals and contract monitoring.

### COVID Vaccination Update

As part of an ambitious national COVID-19 vaccination programme South Sefton introduced two vaccination hub sites. The first, set up at Maghull Town Hall and the second at North Park Health Centre, have spent January inviting and vaccinating patients in Joint Committee on Vaccination and Immunisation (JCVI) cohorts 2-4. They are on target to successfully administer first dose vaccinations to this target population by the national deadline of 15<sup>th</sup> February 2021. The hubs have proven to be very successful and a combination of staff from GP practices, PCNs, CCGs, GP federation and community organisations have contributed to the daily running of the PCN sites. As part of the targeted approach to patients in priority groups, PCN, CCG and community colleagues also visited all care home patients and nursing home residents, where possible, administering first dose vaccinations to both staff and resident in the JCVI cohort 1.



## Planned Care

Local providers have continued to undertake urgent elective treatments during the COVID-19 pandemic period and this has been clinically prioritised. There is a focus on delivering greater theatre capacity utilising on site theatres and that of the independent sector. This will include use of nationally agreed independent sector contracts following clinical assessment in terms of triage and prioritisation.

In conjunction with the Cheshire & Mersey Hospital Cell (established to co-ordinate acute hospital planning resulting from the COVID-19 pandemic) demand and capacity is being assessed and increased levels of elective activity is being delivered. A greater proportion of activity is being delivered via virtual systems (i.e. attend anywhere) in line with phase 3 requirements. Restrictions on outpatients and theatre capacity due to COVID is reflected in increased waiting list numbers and patients waiting longer than 52 weeks, which has led to considerable pressure on waiting list position, despite targeting of patients in greatest need. Cheshire and Merseyside Hospital Cell has set out principles for elective restoration with a proposed recovery approach. This approach will look to focus on development of system level waiting list management to maximise the capacity available and to standardise waiting times where possible, with priority given to clinically urgent patients (P2) and long waiters (52 week plus) in the first instance, as well as developing feasibility assessments and plans, to sequence organisational recovery plans. Elective recovery is expected to be supported by independent sector facilitated by the procurement of service via the increasing capacity framework (ICF).

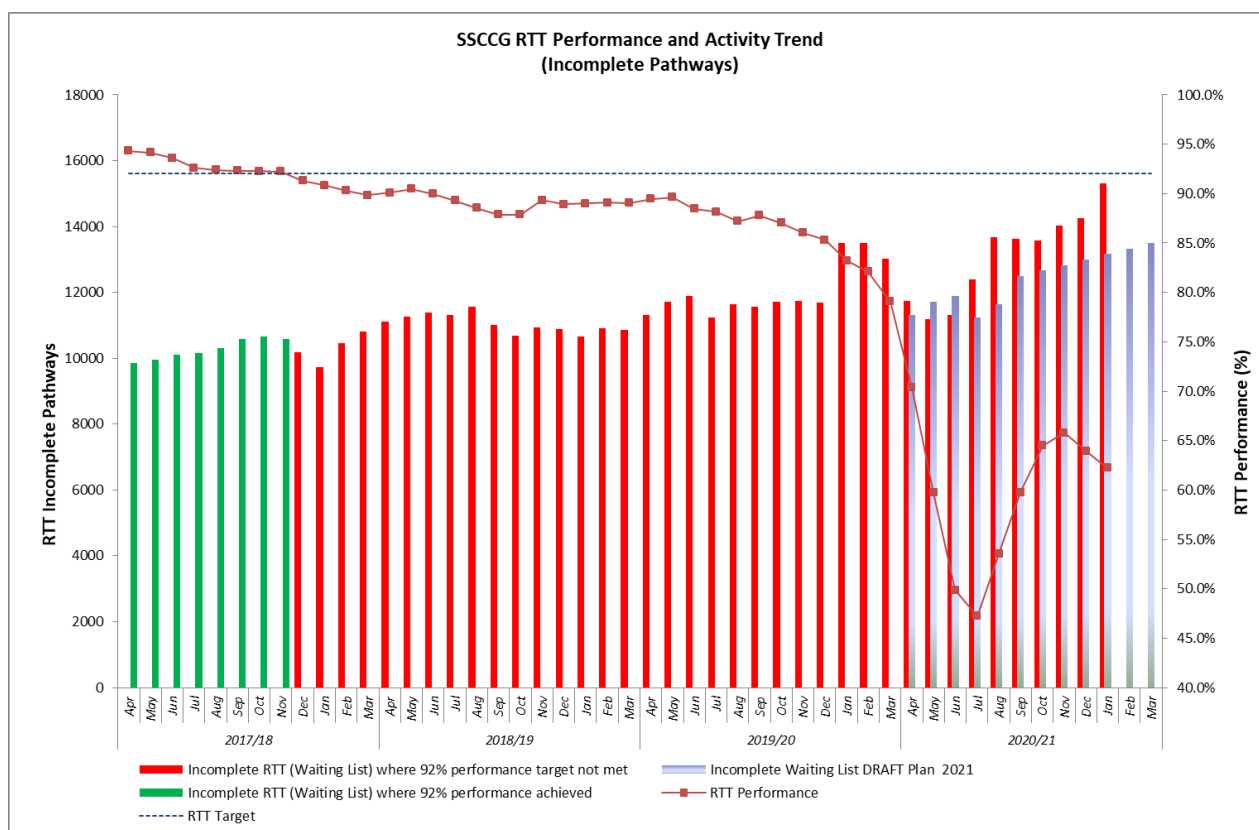
Secondary care referrals remain below historic levels across all referral sources. GP referrals have shown a year to date decrease of -33.5% compared to 2019/20. Also, taking into account working days, further analysis has established there have been approximately 9 fewer GP referrals per day in January when comparing to the previous month. This may be a result of the third national lockdown initiated on 6th January-21. At provider level, Aintree Hospital has seen a -30.6% decrease in total referrals received compared to previous year. When viewing referral priority groups, analysis suggests a recovery of two week wait referrals with numbers exceeding those seen in 2019/20 from June-20 onwards. The 978 two week wait referrals reported in October-20 represent the highest monthly total of the last two years. Referrals to the Breast Surgery speciality make up the majority of this increase with Gastroenterology also contributing significantly.

In December (the latest available information), the CCG's performance for E-Referrals remained stable at 32.7%, significantly below the 100% target. In December, Liverpool University Hospitals NHS FT reported 1,518 Appointment Slot Issues (ASIs) out of a total 5,161 direct bookings; an ASI rate of 29.41%. This shows an increase in the proportion of ASIs compared to December 2019, when 2,464 ASIs of 10,099 direct bookings (24.4%) were reported. Although the proportion of ASI's has increased, the number of direct bookings has significantly reduced.

The CCG has failed the target of less than 1% of patients waiting 6 weeks or more for their diagnostic test with 17.25% in January. A small decline in performance in month, after steady improvements and a decrease in patients waiting over 6 weeks was seen from August 2020. Despite failing the target, the CCG is measuring well below the national level of 33.3%. Liverpool University Hospital Foundation Trust (LUHFT) performance was 25.01% in January, again a small decline in performance from last month after showing a steady improvement.

For patients on an incomplete non-emergency pathway waiting no more than 18 weeks, the CCG's performance in January was 62.25%, a slight decline on last month's performance (63.96%). Unfortunately the CCG is reporting below the national level of 66.16%. LUHFT reported 63.86% which also shows a slight decline from 64.70% in December.

**Figure 1 – CCG RTT Performance and Activity (Incomplete Pathways)**



There were a total of 2,512 South Sefton CCG patients waiting over 36+ weeks, the majority at LUHFT. Of the total long waiters, 1,025 patients were waiting over 52 weeks, a significant increase on last month when 647 breaches were reported. This is over the plan of 537 patients put in as part of the phase 3 response. Overall waiters continue to grow with a total 15,308 South Sefton patients now on the RTT waiting list. LUHFT had a total of 3,395 52 week breaches in January, again showing a significant increase from 2,327 reported last month. 52+ week waits for the CCG represent 6.7% of the total waiting list in January which is slightly above the national level of 6.6%.

**Figure 2 – RTT Incomplete Pathways, 52 weeks waiters v Plan**

**South Sefton CCG - New plans**

Total Incomplete Pathways	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Plan v Latest
New Plans from Sept 2020	11,309	11,727	11,880	11,234	11,648	12,500	12,666	12,832	12,998	13,164	13,330	13,496	13,496
2020/21	11,751	11,179	11,311	12,389	13,682	13,626	13,657	14,029	14,265	15,308			15,308
<b>Difference</b>	<b>442</b>	<b>-548</b>	<b>-569</b>	<b>1,155</b>	<b>2,034</b>	<b>1,126</b>	<b>991</b>	<b>1,197</b>	<b>1,267</b>	<b>2,144</b>			<b>1,812</b>
52 week waiters - Plan	0	0	0	0	0	212	221	226	306	537	833	1,007	
52 week waiters - Actual	8	46	106	171	198	247	349	503	647	1,025			
<b>Difference</b>	<b>8</b>	<b>46</b>	<b>106</b>	<b>171</b>	<b>198</b>	<b>35</b>	<b>128</b>	<b>277</b>	<b>341</b>	<b>488</b>			

**LUHFT**

Total Incomplete Pathways	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Plan v Latest
Plan (last year's actuals)	45,889	46,813	48,329	47,884	49,373	48,901	48,859	48,679	48,886	48,135	48,377	46,013	46,013
2020/21	41,822	39,838	39,096	41,292	42,299	40,417	42,570	43,605	44,536	46,052			43,605
<b>Difference</b>	<b>-4,067</b>	<b>-6,975</b>	<b>-9,233</b>	<b>-6,592</b>	<b>-7,074</b>	<b>-8,484</b>	<b>-6,289</b>	<b>-5,074</b>	<b>-4,350</b>	<b>-2,083</b>			<b>-2,408</b>

The CCG is achieving 3 of the 9 cancer measures year to date, whilst LUHFT are achieving just 1 out of the 9 measures.

Performance in two week wait breast services remain under target for the third consecutive month due to breaches within LUHFT and the majority of breaches due to 'inadequate outpatient capacity'. The maximum wait for patients seen was 63 days for two week wait breast services. Breast services

high demand is impacting on performance for both the breast symptomatic pathway and contributing to a decline in performance for the overall suspected cancer pathway. Increased demand is a combination of, natural growth, people coming forward after lockdown and pause of screening programmes. The median wait for South Sefton breast patients in January was 14 days compared to December when it was 21 days showing a significant improvement. Plans to equalise breast waiting times across the two LUHFT hospital sites are in progress. The assurance is given by risk stratification of all patients across both the suspected cancer and symptomatic breast pathways to ensure those at greatest risk of cancer are given priority investigation. The CCG has also followed up with the lead commissioner for LUHFT on a recovery date.

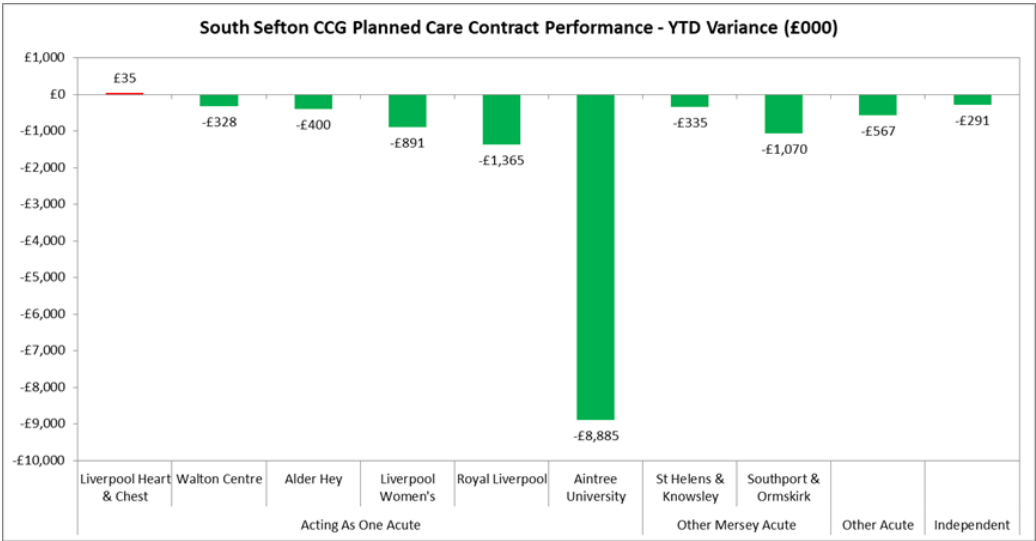
For Cancer 62 Day standard the CCG is measuring below the national level of 71.18% recording 65.71%.

The numbers of CCG patients waiting over 104 days is 16 patients in January is the same are recorded last month. The average total days waited in January for patients who had breached 104 days at LUHFT was 151 days, compared to 133 in December.

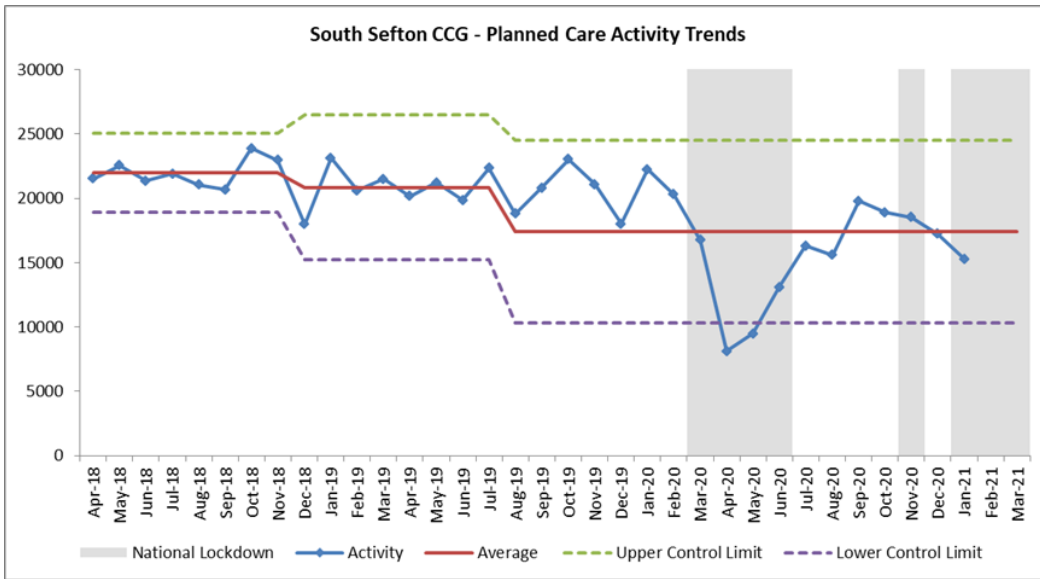
There are 3 faster cancer diagnosis measures with target of 75% expected to be implemented in 2021. In January and year to date, the CCG performed above the proposed target for the 2 week breast symptom indicator. However, the two week and screening referral indicators performed below target.

For planned care, month 10 of the financial year 2020/21 continues to show significant reductions in contracted performance levels across the all providers for South Sefton CCG. This is a direct consequence of the COVID-19 pandemic and subsequent NHS first phase response to postpone all non-urgent elective operations so that the maximum possible inpatient and critical care capacity would be available to support the system. Although some recovery of activity has been apparent following the first phase of the NHS response, year to date activity levels remain well below historical averages. A further increase in elective capacity was anticipated as part of the phase three NHS response to the pandemic. Plans were developed in conjunction with providers and the CCG will continue to monitor activity against these plans on a monthly basis for the remainder of 2020/21. Data suggests that the second and third national lockdowns (5<sup>th</sup> Nov-20 to 2<sup>nd</sup> Dec-20 and 6<sup>th</sup> Jan-21 onwards) has resulted in a further decrease in planned care activity at lead providers for the CCG. At individual providers, Aintree Hospital is showing the largest under performance with a variance of -£8.8m/-39% against the previous year. Across all providers, South Sefton CCG has underperformed by -£14m/-35.2%.

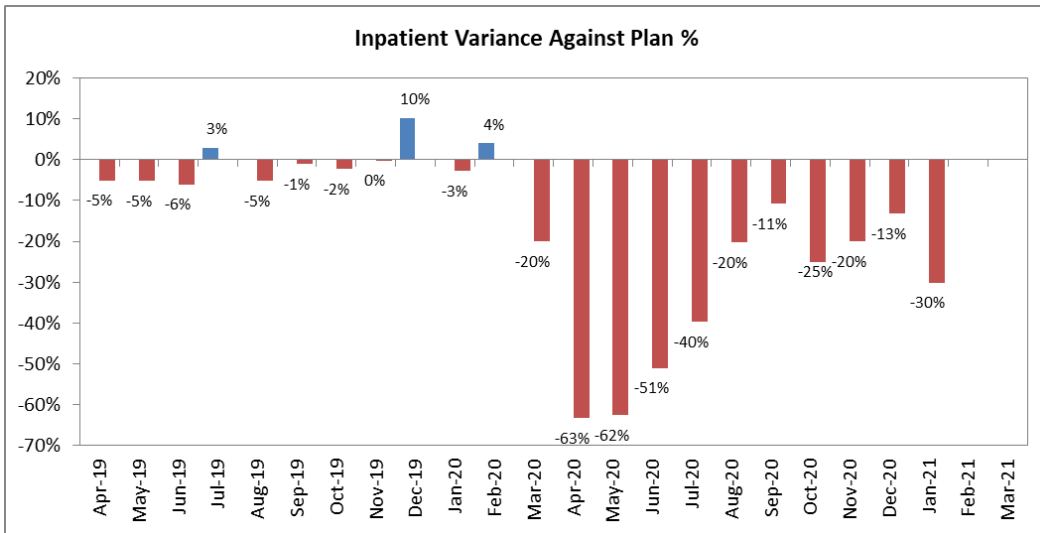
**Figure 3 – Planned Care All Providers**



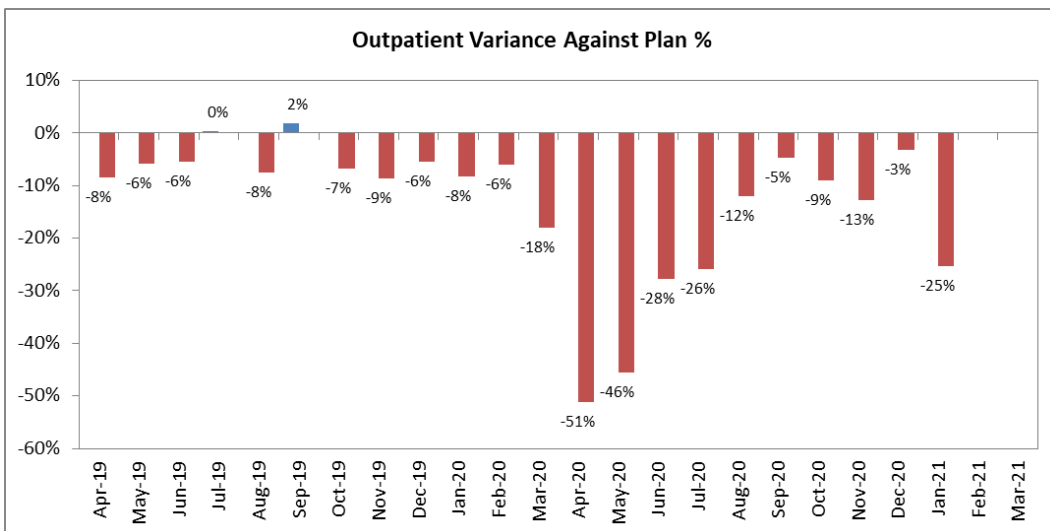
**Figure 4 - Planned Care Activity Trends**



**Figure 5 – Elective Inpatient Variance against Plan**



**Figure 6 - Outpatient Variance against Plan**



## Unplanned Care

In relation to A&E 4-Hour waits for all types, the CCG and Trust have failed the 95% target in January, reporting 75.75% and 74.55% respectively. Each are below the nationally reported level of 78.5%. Actions previously reported in relation to the North Mersey capacity and flow group, patient flow (admission and discharge), NHS 111 First, winter plan and urgent treatment centre continue. These actions are all critical now with increased emergency admissions and A&E attendances at previous levels. This month saw high COVID admissions which have now reduced significantly with A&E performance improving supported by bed capacity and lower occupancy rates and discharge flow.

The original target to meet all of the ARP (Ambulance Response Programme) standards by Q1 2020/21 has not been met and was severely adversely impacted upon by COVID-19, which began to hit service delivery in Q4 2019/20 and then all the way through 2020/21 up to Q3. In January 2021 there was an average response time in South Sefton of 8 minutes 11 seconds, achieving the target of 7 minutes for category 1 incidents. However, category 2 incidents had an average response time of 57 minutes 35 seconds against a target of 18 minutes. The CCG also failed the category 3 and 4 90th percentile with significant increases in response times. South Sefton is yet to achieve the targets in category 3 since the introduction of the ARP system. Performance is being addressed through a range of actions including increasing number of response vehicles available, reviewing call handling and timely dispatch of vehicles as well as ambulance handover times from A&E to release vehicles back into system. The introduction of a Sefton Emergency Response Vehicle to support category 3 and 4 calls remains under review.

All ambulance handovers between ambulance and A&E must take place within 15 minutes. LUHFT reported a decline in ambulance handover times in January 2020. Handovers between 30 and 60 minutes increased from 227 to 430, and those above 60 minutes increased from 35 to 125. Work continues in collaboration with NWS to improve processes to support achievement of the handover targets. There have been changes to processes since April and a need for patients to enter ED through revised estate reconfigurations due to COVID and Infection Prevention Control (IPC) restrictions. We are seeing performance in regard to this target vary in line with activity and pressures within A&E and patient flow.

The CCG's lead provider LUHFT has not reported stroke information due the pressures of the pandemic and is currently reporting constitutional measures only.

The CCG reported 1 new case of MRSA in January (2 year to date) and has failed the target for the year. This case was at LUHFT who have now reported 4 year to date so have also failed the zero tolerance threshold for 2020/21. The 1 reported case of MRSA bacteraemia in January on the Aintree site and is subject to a post infection review and review with the CCG.

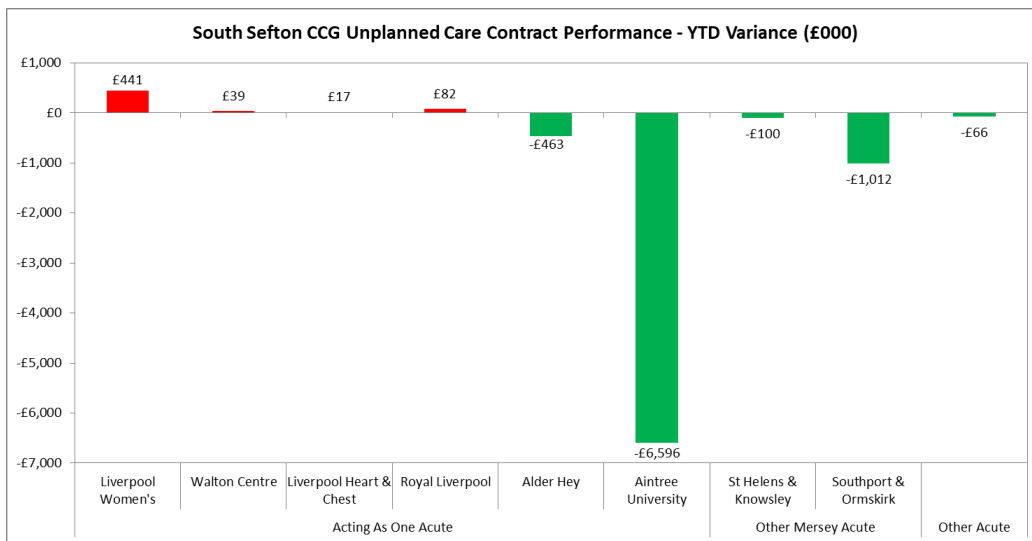
For C difficile, the CCG reported 7 new cases of C difficile cases in January (34 year to date) and are achieving the year to date target of 51. LUHFT reported 13 new cases in January (93 YTD) so are also failing their objective of no more than 91 cases. National objectives have been delayed due to the COVID-19 pandemic and therefore the CCG are measuring against last year's objectives and are achieving the standard.

NHS Improvement and NHS England (NHSE/I) have not set new CCG targets for reductions in E.coli for 2020/21 so the CCG is reporting against last year's target of 128. In January there were 9 new cases, bringing the YTD total to 100 against a target of 108 so the CCG are now achieving the target. LUHFT reported 35 new cases in January, bringing the YTD total to 428. There are no targets set for Trusts at present.

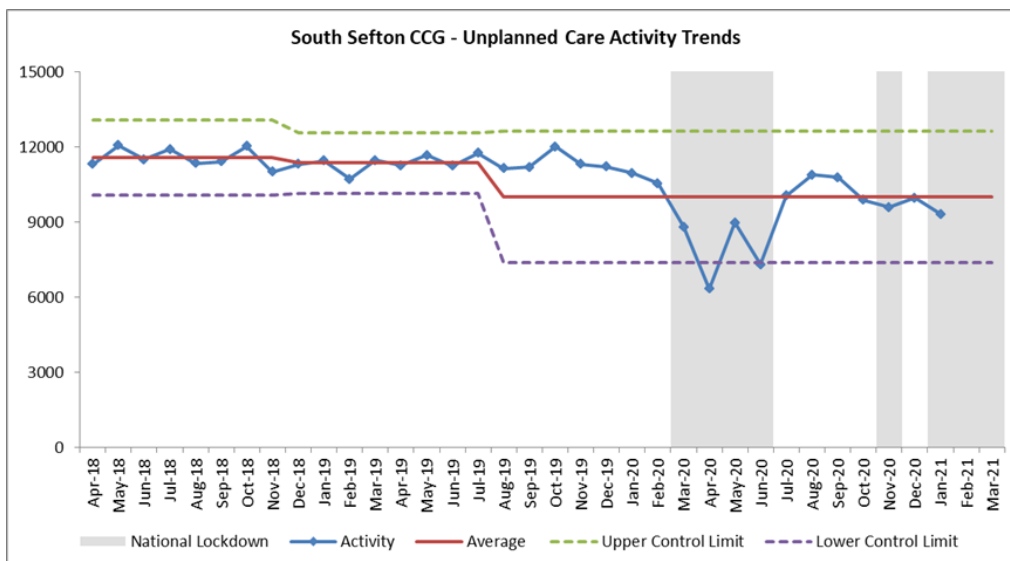
LUHFT's Hospital Standardised Mortality Ratio (HSMR) was 95.32 in January 2020, remaining under the 100 threshold. The ratio is the number of observed deaths divided by predicted deaths. HSMR looks at diagnoses which most commonly result in death.

For unplanned care, month 10 of the financial year 2020/21 continues to show reductions in contracted performance levels across the majority of providers for South Sefton CCG. This is a direct consequence of the COVID-19 pandemic and subsequent national response whereby the public advice was to 'stay at home'. Although some recovery of activity has been apparent following the first phase of the NHS response, year to date activity levels remain below historical averages and recent months suggest a levelling off of activity during/following the second national lockdown. This goes against the anticipated increases that formed part of CCG plans for the phase three NHS response to the pandemic. Plans were developed in conjunction with providers and the CCG will continue to monitor activity against these plans on a monthly basis for the remainder of 2020/21. Further decreases are likely as a result of the third national lockdown, which began on 6<sup>th</sup> January-21. At individual providers, Aintree Hospital is showing the largest under performance with a variance of -£6.5m/-16% against the previous year. Across all providers, South Sefton CCG has underperformed by -£7.6m/-14.9%.

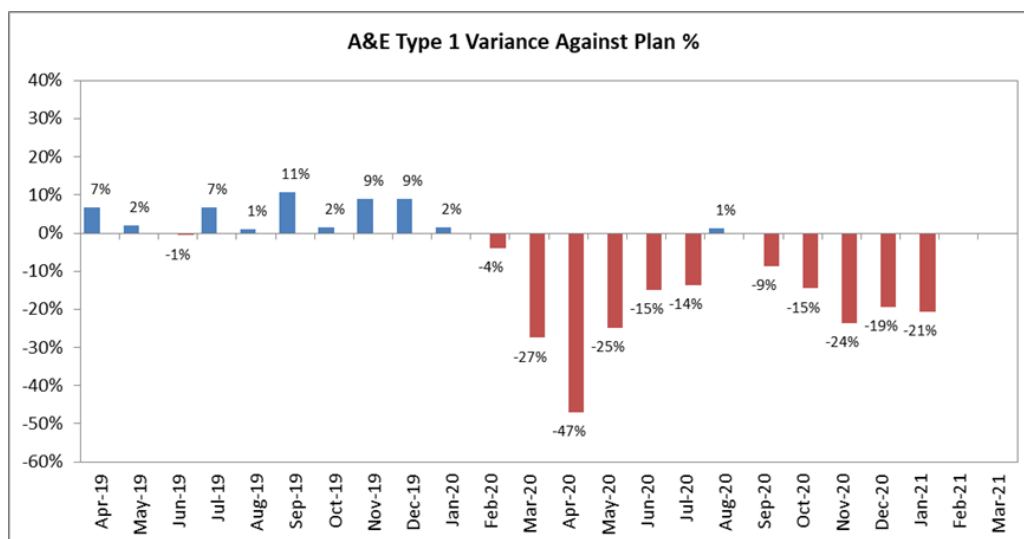
**Figure 7 – Unplanned Care All Providers**



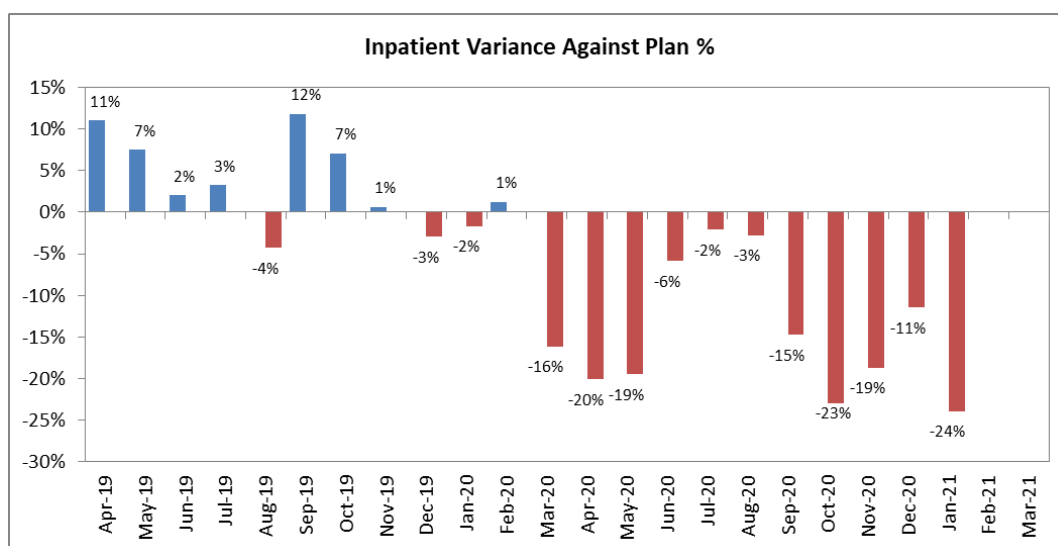
**Figure 8 - Unplanned Care Activity Trends**



**Figure 9 - A&E Type 1 against Plan**



**Figure 10 – Non-elective Inpatient Variance against Plan**



**Mental Health**

The Eating Disorder service has reported 40% of patients commencing treatment within 18 weeks of referral in January, compared to a 95% target. 12 patients out of 30 commenced treatment within 18 weeks. This shows a small decline on last on month (42.9%).

For Improving Access to Psychological Therapies (IAPT), Mental Health Matters reported 0.35% in January, below the target standard of 1.59%.

The following factors contributed to underperformance:

- Agreement from the CCG to deliver staff training in January, rather than impact on December performance.
- Honouring staff annual leave, booked prior to transfer.
- Clients requiring assessment not immediately identifiable at the point of the data migration, as previously explained, cases needed to be ‘manually moved’.
- Numbers of staff transferring less than expected.

In addition to recruiting staff the provider is planning focussed “assessment weeks” to improve performance.

The percentage of people who moved to recovery was 44% in January 2021, just below the 50% target and similar to previous month's performance. Year to date the CCG's performance is at 42.6%. Mental Health Matters is the new provider who took over the IAPT contract in January.

South Sefton CCG is recording a dementia diagnosis rate in January of 57.6%, which is under the national dementia diagnosis ambition of 66.7%. This is similar to last month's performance (57.7%).

The Sefton Autistic Spectrum Disorder (ASD) initiative commenced in November 2020. The initiative which is aimed at those aged 18-25 has resulted in waiting times reducing from 66.21 weeks in November to 11 weeks in January.

In quarter 3 2020/21 year to date, 25.81% of South Sefton CCG patients identified as having a learning disability received a physical health check. This is below the CCG's year to date target of 50%. To achieve the year-end target the CCG will need to complete 308 further learning disability physical health checks in quarter 4.

### **Adult Community Health Services**

Focus with the Trust remains on COVID-19 recovery/resilience planning and understanding service specific issues e.g. staffing, resources, waiting times. Assurance will be sought in regard to changes instigated in response to COVID-19 and an understanding of services that are not operating at pre-COVID levels. A joint CQPG for Sefton and Liverpool CCGs is now in place and working well. The joint Sefton and Liverpool Information Sub-Group has been stood down again at present due to COVID-19 pressures and business continuity arrangements.

Sefton CCGs have also requested that the Trust provides an expanded activity plan to mirror Liverpool CCG reports, which will include an expanded reporting of currencies (face to face, non-face to face) different modalities of service provision, introduction of virtual platforms etc. As part of month 10 assurance, the Trust has advised that AHP waiting times are showing improved positions with all services within the 18 week standard. The CCG continues to monitor these with close monitoring of the Speech & Language Therapy (SALT) service. Consideration will be given to reduce the waiting times targets in 2021/22 in recognition of the sustained improved performance in line with agreed transformation work by the Trust.

### **Children's Services**

In its ongoing response to the pandemic, Alder Hey continues to focus on sustaining pre-COVID levels of activity for community therapy services provision and Child and Adolescent Mental Health Services (CAMHS).

In respect of community therapy services provision, this has enabled services to focus on reducing the numbers of children and young people who have been waiting the longest whilst managing increases in referrals. Notably for SALT, there has been a steady increase in referrals since the schools initially reopened in September, and this is being closely managed along with the impact of the recent lockdown on delivery in school settings. The waiting time standard for all therapies continues to be maintained.

Notably, all community therapy service waiting times continue to achieve the SEND improvement plan average waiting time KPIs, with the exception of physiotherapy which just fell short of the target in January 2021, but is expected to be back on track next month.

The Alder Hey CAMHS team continues to address the ongoing impact of the pandemic on the increase in demand for the service and the increasing number of high risk and complex cases. The Trust estimates that there has been a 19% increase in referrals from April to December 2020 compared to the same period in 2019. Due to these challenges, the Trust has not been able to achieve and sustain the waiting time standards for assessment and treatment in the timeframes set out in the recovery plan, and there was a deterioration in the 6 week referral to choice target in January 2021.



In response, the CCGs have agreed some additional short term resilience investment and the service has additional staff starting in March 2021. It is anticipated that this will prevent any further deterioration in waiting times and support an improvement in the current position. In December, the Trust has also mobilised its new "COVID support team" to provide both individual and group support for CYP presenting with deteriorating mental health due to the pandemic.

The CAMHS waiting time position is being closely monitored by the Trust and the CCGs. The Trust is considering its response and is preparing a proposal for consideration by the CCGs later in Q4. Notably the Cheshire and Merseyside partnership has been undertaking further modelling work and is predicting a 30% increase in demand for mental health services over the next 2 years.

The quarterly mental health access data continues to show an improvement on the 2019/20 position and is on target to exceed the annual access target of 35%. This is in part due to the reporting of Venus and Kooth data through the national data set which commenced in 2019/20. There are also plans for third sector provider Parenting 2000 to start to flow their data in Q4 and it is noted that the increase in CAMHS provision and increased mental health provision will also positively impact on access rates.

In the main, ASD/ADHD performance continues to be on target and the waiting list management plan and trajectory to reduce the backlogs to zero by June 2021 remains on track. Due to the increase in referrals over the last three months, the ASD 12 week referral to assessment target was narrowly missed in January. As part of the ongoing programme of improvements in the service, the Trust has introduced some improvements to the triage process which will support improved compliance moving forward.

Overall there was a slight deterioration in SEND performance in January, with CAMHS, ASD and physiotherapy falling short of the SEND KPIs. The ongoing impact of the pandemic on the ability to achieve and sustain the targets is being closely monitored.