

# Wirral Performance Report





## **Report Context:**

- This report in intended to provide oversight of Key (Strategic Oversight Framework) SOF and constitutional measures at Sub ICB (Place) level
- The report is an interim measure whilst the official Cheshire & Merseyside ICB performance reporting measures are defined
- The data used is all nationally published data, unless otherwise stated
- NHS England are in the process of moving from 22/23 to 23/24 metrics. This will result in periodic changes to the list of metrics available to use to be presented here.
- There are some differences in published date between the SOF Measures and the new performance slide. This is due to the differing data sources, the metrics reported in this pack may change in subsequent months dependent on discussion with executive and place leads
- Performance Reporting based on Month 3 (June), 2023-24. SOF is latest available data on publication of this report
- Any queries about the pack should be directed to your Business Intelligence Networked Intelligence Leadership team

## **Key lines of enquiry – Wirral (sub-ICB)**

Where provider performance is below the National average/Target with latest trend (red indicates deteriorating trend in performance)

Below National Average / Target	Latest Trend / (* National Average)
Clostridium difficile infection rate	Slight improvement from previous snapshot (July): 144%, compared to 100% target
E coli bloodstream infection rate	Slight improvement from previous snapshot (July): 140%, compared to 100% target
Antimicrobial resistance total prescribing of antibiotics in primary care	Minimal improvement from previous snapshot (July): 115%, compared to target of 87.1%
Proportion of People over 65 receiving a seasonal flu vaccination	Improving: 81.1% compared to target of 85%
Cervical Screening Coverage - % Females ages 25 – 64 Attending Screening Within the Target Period	Improving: 71.7% compared to target of 75%
Hypertension patients treated to NICE guidance targets	Improving: 57.7% compared to target of 80%
Access rate for IAPT services	Improving: 77.1% compared to Target of 100%

## Key lines of enquiry – Provider

Where provider performance is below the National average/Target with latest trend (red indicates performance is below national average/target and worsening)

Below National Average / Target	Latest Trend
Cancer 62 Day Backlog	133.8% compared to National average of 114%
Clostridium difficile infection rate	194.4% Wirral Hospital (WUTH) performance against the 100% target, and is above the national Average (132%)
E. Coli bloodstream infection rate	164.2% Wirral Hospital (WUTH) against the 100% target, and performance is deteriorating
Sickness absence rate	Wirral Hospital (WUTH) is showing a rate of 5.76%, a (small improvement from July 6.5%) but higher than compared to National average of 5.5%
Percentage of beds occupied by patients who no longer meet criteria to reside	Wirral Hospital (WUTH) performance is currently 21.8% a (deterioration trend) compared to National Average of 13.3%



GP appointments - percentage of regular appointments within 14 days.

Women accessing specialist community perinatal mental health services

### **Aristotle**×

Dementia diagnosis rate

# NHS System Oversight Framework Metrics on a Page



Regio	Region Organisation Type Organ			Organisation	Categories					Apply colour coding for National Averages				
North	West	SubICB	~	Wirral (Sub Icb)	~	All		~	Yes				~	
		Indicate	or		Aggregation Source	n Latest Period	Previous	Latest		Good Is	Target / Nat Ave*	National Value	Rank	
S012a	Proportion of patients meeting the faste	r cancer diagnosis stand	ard		SubICB	2023 06	76.2%	78.0%	- 7	High	75%		23/106	
S040a	Methicillin-resistant Staphylococcus aure	eus (MRSA) bacteraemia	infection rat	te	SubICB	2023 06	4	4		Low	0	812	36/106	
S041a	Clostridium difficile infection rate				SubICB	2023 06	145.0%	144.3%	7	Low	100%	119.0%	87/106	
S042a	E. coli bloodstream infection rate				SubICB	2023 06	143.3%	140.4%	7	Low	100%	116.9%	99/106	
S044a	Antimicrobial resistance: total prescribing	g of antibiotics in prima	ry care		SubICB	2023 05	115.9%	115.4%	7	Low	87.1%	98.6%	86/106	
S044b	Antimicrobial resistance: proportion of b	oroad-spectrum antibioti	c prescribing	g in primary care	SubICB	2023 05	9.4%	9.3%	7	Low	10%	7.7%	96/106	
S047a	Proportion of people over 65 receiving a	a seasonal flu vaccination	1		SubICB	2023 02	81.0%	81.1%	- /	High	85%	79.9%	54/106	
S050a	Cervical screening coverage - % females	aged 25 - 64 attending	screening w	ithin the target period	SubICB	22-23 Q4	70.9%	71.7%	1	High	75%	69.7%	59/106	
S053b	% of hypertension patients who are treat	ted to target as per NICI	guidance (	5053b)	SubICB	2022-23	57.7%	65.5%	- /	High	80%	68.2%	85/106	
S053c	% of patients identified as having 20% o	r greater 10-year risk of	developing	CVD are treated with statins (S053c)	SubICB	22-23 Q4	60.7%	61.6%	1	High	45%	60.0%	33/106	
S081a	Access rate for IAPT services				SubICB	2023 03	69.3%	77.1%	/	High	100%		32/106	
S086a	Inappropriate adult acute mental health	placement out -of-area	placement b	ed days	SubICB	2023 05	1,040	1,460	- /	Low	0		94/106	

SubICB

SubICB

SubICB

87.1%

63.6%

81.9%

2023 06

2023 06

2023 04

87.5%

64.2%

224.1%

86.1%\*

63.5%\*

215.6%\*

30/106

57/106

66/106



# **Provider Summary**

New

RWW

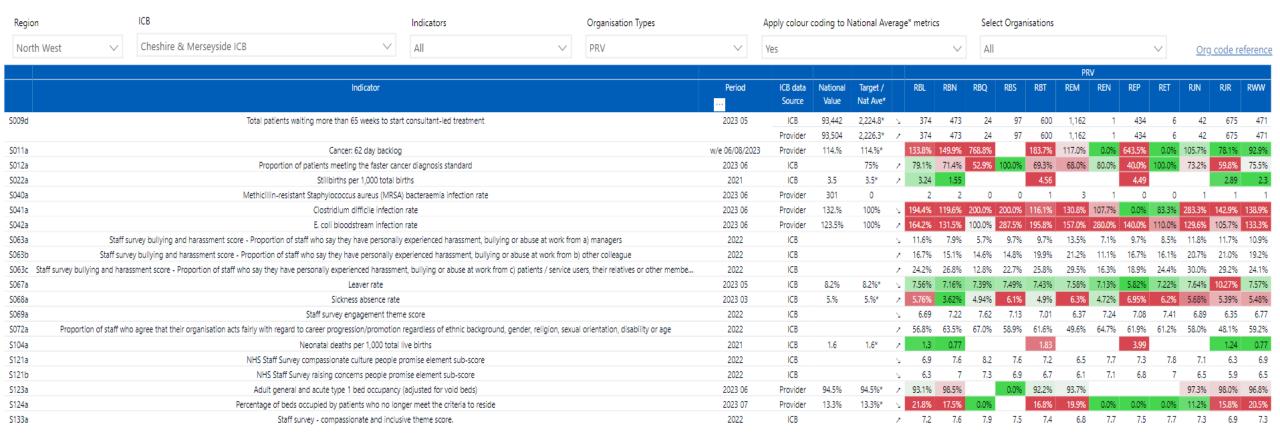
**RBL** Wirral University Teaching Hospital NHS Foundation Trust RBN St Helens And Knowsley Teaching Hospitals NHS Trust RBO Liverpool Heart And Chest Hospital NHS Foundation Trust RBS Alder Hey Children's NHS Foundation Trust RBT Mid Cheshire Hospitals NHS Foundation Trust REM Liverpool University Hospitals NHS Foundation Trust REN The Clatterbridge Cancer Centre NHS Foundation Trust REP Liverpool Women's NHS Foundation Trust RET The Walton Centre NHS Foundation Trust RJN East Cheshire NHS Trust RIR Countess Of Chester Hospital NHS Foundation Trust RVY Southport And Ormskirk Hospital NHS Trust

Warrington And Halton Hospitals NHS Foundation Trust



NHS System Oversight Framework
ICB Benchmarking

Midlands and Lancashire
Commissioning Support Unit



# **System Performance Reporting – Wirral**



## System Performance Reporting Metrics on a Page



Region		Organisation Type	e	Organisation		Metric (	Categories					Colour	Code again:	st: S	how:	
NHS England No	orth West 🗸	Sub ICB	~	Wirral - 12F	~	All					~	Targets (d	default)	V .	All	~
Category			Metric			Latest Period	Previous Value	Latest Value	i	Rank	Target	National Average	ICB Value	Region Value	National Value	Source
Cancer Waits	% receiving 1st definitive	treatment within 2 mths	(62 days) U	Irgent Referral		lun 2023	73.9%	74.6%	7	6/106	85%	59.3%	62.4%	59.4%	59.3%	@
Cancer Waits	% receiving definitive trea	tment within 1 mth of di	agnosis			lun 2023	93.8%	97.2%	1	4/106	96%	91.4%	94.5%	91.3%	91.4%	@
Cancer Waits	% receiving subsequent t	reatment within 31 days (	(Drug)			lun 2023	98.6%	100%	1	1/106	98%	98%	99%	98.5%	98%	@
Cancer Waits	% receiving subsequent to	reatment within 31 days (	(Radiothera	ipy)		lun 2023	98.6%	98.7%	1	25/106	94%	86.6%	99.8%	96%	86.6%	@
Cancer Waits	% receiving subsequent to	reatment within 31 days (	(Surgery)			lun 2023	93.3%	90.7%	5	16/106	94%	78.9%	87.4%	82.2%	78.9%	@
Cancer Waits	% receiving treatment wit	hin 62 days - NHS CSS				lun 2023	66.7%	72.7%	1	31/105	90%	62.2%	55.3%	55.8%	62.2%	@
Cancer Waits	% receiving treatment wit	hin 62 days - Upgrade Pr	riority			lun 2023	77.8%	75%	5	37/106		72.8%	79.1%	75%	72.8%	@
Cancer Waits	% seen within 2 wks - Urg	ent GP Referral - Suspec	ted Cancer			lun 2023	93.1%	88.4%	5	35/106	93%	80.6%	86.3%	84.5%	80.5%	@
Cancer Waits	% seen within 2 wks - Urg	ent Referral - Breast sym	ptoms			lun 2023	83.3%	80%	S .	66/105	93%	74.7%	85.6%	80.7%	74.7%	@
Cancer Waits	No. of patients receiving	first definitive treatment (	(62 Days) -	Urgent GP referral		lun 2023	102	94	S	42/106		90	463	1,174	9,553	@
Cancer Waits	Number urgently referred	with suspected Cancer (	2wk Waits	Numerator)		lun 2023	1,773	1,708	5	42/106		1,974.5	11,751	31,107	209,564	@
Diagnostics	% of patients waiting >6	wks for a diagnostic test				lun 2023	5.7%	4.8%	5	2/106	5%	25.2%	21.2%	25.5%	25.2%	@
Diagnostics	Diagnostic Test Activity -	Colonoscopy				lun 2023	361	315	S .	62/106		510.7	2,499	8,202	54,344	@
Diagnostics	Diagnostic Test Activity -	Computed Tomography				lun 2023	3,528	3,751	1	64/106		6,314.3	30,711	83,448	674,738	@
Diagnostics	Diagnostic Test Activity -	Flexi Sigmoidoscopy				lun 2023	109	93	5	63/106		166.2	956	2,648	17,686	@
Diagnostics	Diagnostic Test Activity -	Gastroscopy				lun 2023	569	555	S .	39/106		582.2	3,546	9,907	61,834	@
Diagnostics	Diagnostic Test Activity -	Magnetic Resonance Ima	ging			lun 2023	1,575	1,764	1	68/106		3,330.1	16,320	46,514	355,943	@
Diagnostics	Diagnostic Test Activity -	Non-Obstetric Ultrasound	d			lun 2023	4,913	4,446	5	53/106		6,586.9	31,709	96,120	699,593	@
Diagnostics	Number of Diagnostic Tes	sts/Procedures (excluding	Endoscop	y)		lun 2023	11,849	11,976	1	57/106		19,448.5	95,143	273,213	2,075,113	@
Diagnostics	Total number of Diagnost	ic Tests/Procedures				lun 2023	13,218	13,184	5	56/106		20,976.2	103,435	298,227	2,237,516	@
Diagnostics	Total number of Endosco	by Diagnostic Tests/Proce	dures			lun 2023	1,369	1,208	5	50/106		1,527.7	8,292	25,014	162,403	@
MRR Referrals	Total GP Referrals (Writter	n) - 1st OP appointment				lun 2023	4,094	4,030	5	86/106		10,542.7	33,360	121,695	1,154,012	@
MRR Referrals	Total Other Referrals - 1st	OP appointment				lun 2023	4,937	4,519	5	58/106		7,174.1	31,600	90,469	799,102	@
MRR Referrals	Total Referrals (Written &	Other) - 1st OP appoints	nent			lun 2023	9,023	8,544	S .	69/106		17,075.8	64,514	207,338	1,884,905	@
MSA	Number of MSA Breaches					lun 2023	3	2	5	13/93		39.1	19	192	3,641	@
RTT	% all Incomplete RTT path	nways within 18 wks				lun 2023	60.3%	59.9%	5	49/106	92%	59.2%	56.6%	55%	59.2%	@
RTT	% of Completed Admitted	d pathways within 18 wks				lun 2023	61.2%	60.5%	5	49/106		60.8%	60.9%	61.2%	60.7%	@
RTT	% of Completed Non-Adı	nitted pathways within 1	8 wks			lun 2023	72.7%	71.9%	5	40/106		69%	67.5%	66%	68.9%	⊚ ,
RTT	% of patients with a DTA	on Incomplete Pathways	waiting 0-1	8 wks		lun 2023	38%	38.5%	1	98/106		45.8%	45.5%	45.5%	45.8%	@

# **System Performance Reporting – Wirral (Continued)**



# System Performance Reporting Metrics on a Page



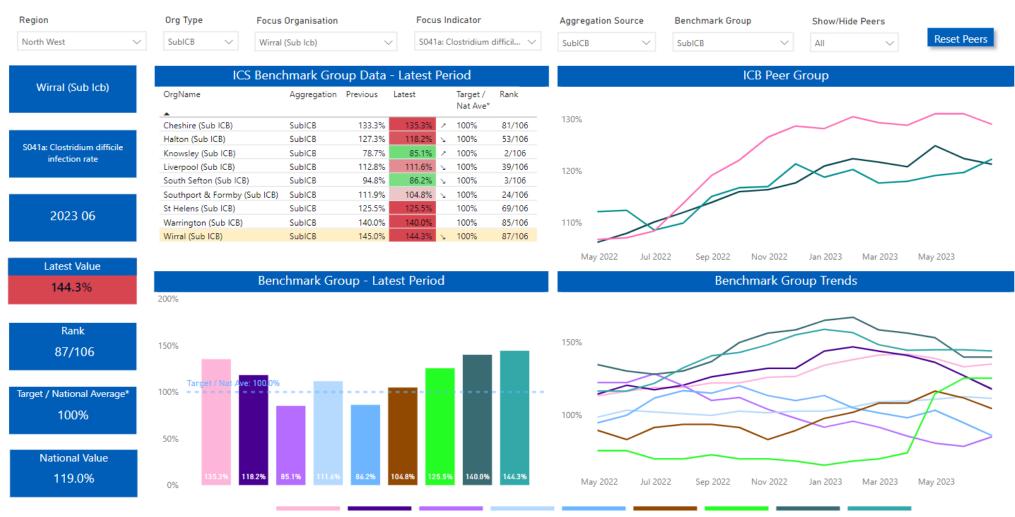
Region	Organisation Type Organisation			Metric Categories						Colour Code against:			
NHS England North	West ✓ Sub ICB ✓	✓ Wirral Sub-ICB ×		✓ All ✓				Targets (default)		~			
Category	MetricN	ame	Latest Period	Previous Value	Latest Value i	Rank	Target	National Average	ICB Value	Region Value	National Value	Source	
RTT	Number of all Incomplete RTT pathways within 18 wks		Jun 2023	27,677	27,034 🔻	57/106		41,329.9	205,155	592,672	4,483,361	@	
RTT	Number of Completed Admitted RTT Pathways		Jun 2023	2,045	2,181 /	47/106		2,748.3	14,529	37,962	302,760	@	
RTT	Number of Completed Non-Admitted RTT Pathways		Jun 2023	7,003	7,356 /	55/106		11,126.4	61,513	153,527	1,217,525	@	
RTT	Number of Incomplete RTT Pathways Waiting > 104 wks		Jun 2023	1	0 😼	1/106		2.7	6	27	314	@	
RTT	Number of Incomplete RTT Pathways Waiting > 78 wks		Jun 2023	13	21 /	43/106		64.8	204	848	7,177	@	
RTT	Number of Incomplete RTT Pathways Waiting >52 wks		Jun 2023	1,675	1,686	39/106	0	3,511.6	19,780	73,056	383,083	@	
RTT	Number of Incomplete RTT Pathways Waiting >65 wks		Jun 2023	420	407 🕥	38/106		889.2	4,528	18,973	97,275	@	
RTT	Number of New RTT Pathways (Clock Starts)		Jun 2023	11,118	11,429 /	55/106		16,954	86,100	235,456	1,833,668	@	
RTT	Total Number of Incomplete RTT Pathways		Jun 2023	45,863	45,146	52/106		69,815.4	362,417	1,076,641	7,574,649	® ∨	
· SMI	% People with a SMI receiving a full Physical Annual Heal	h Check & follow-up interventions	Q1 2023-24	47.2%	41% 😼	92/106		51.9%	45%	40.1%	51.9%	@	

## SOF: S041a - Clostridium difficile infection rate

**Aristotle**×

NHS System Oversight Framework



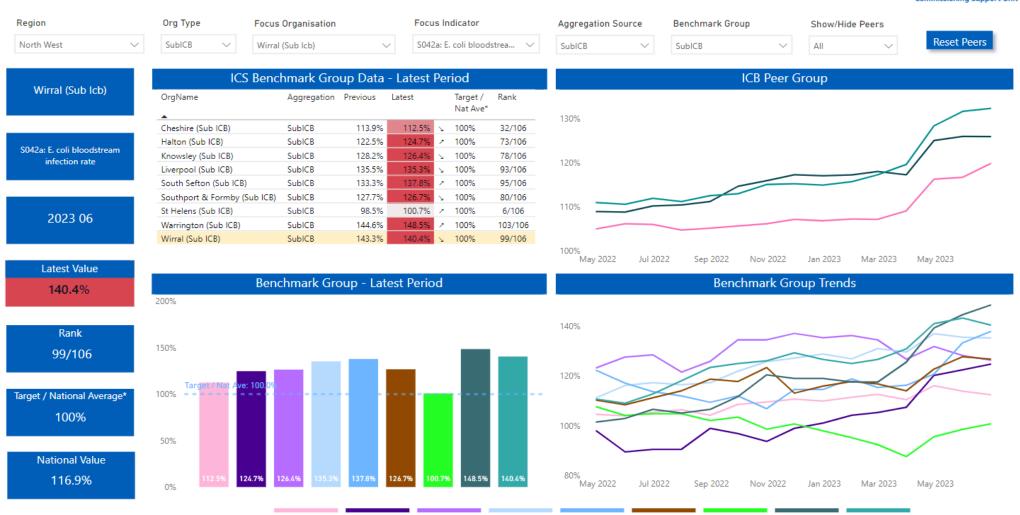


## SOF: S042a - E. Coli bloodstream infection rate



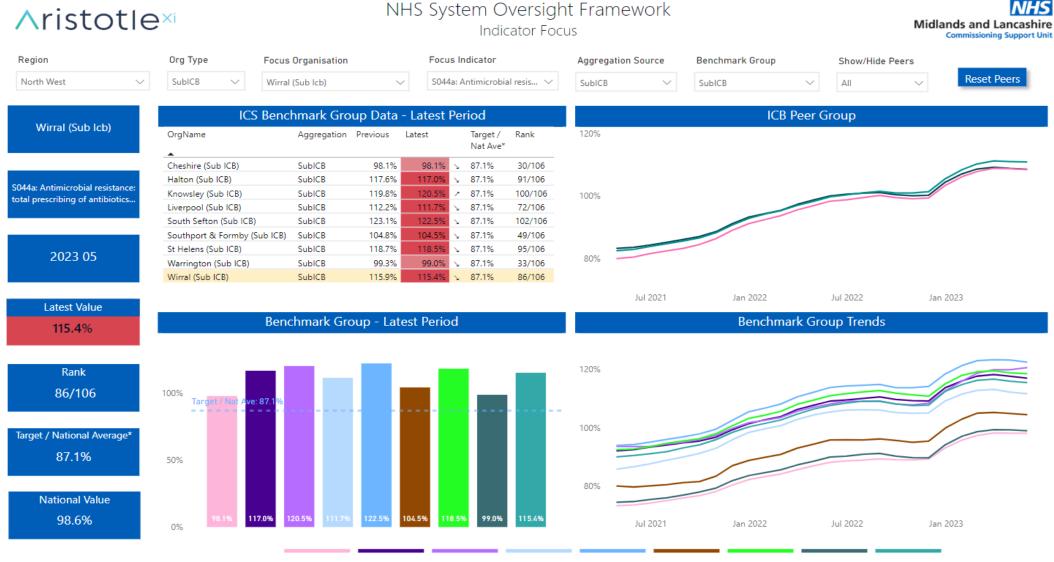
NHS System Oversight Framework
Indicator Focus





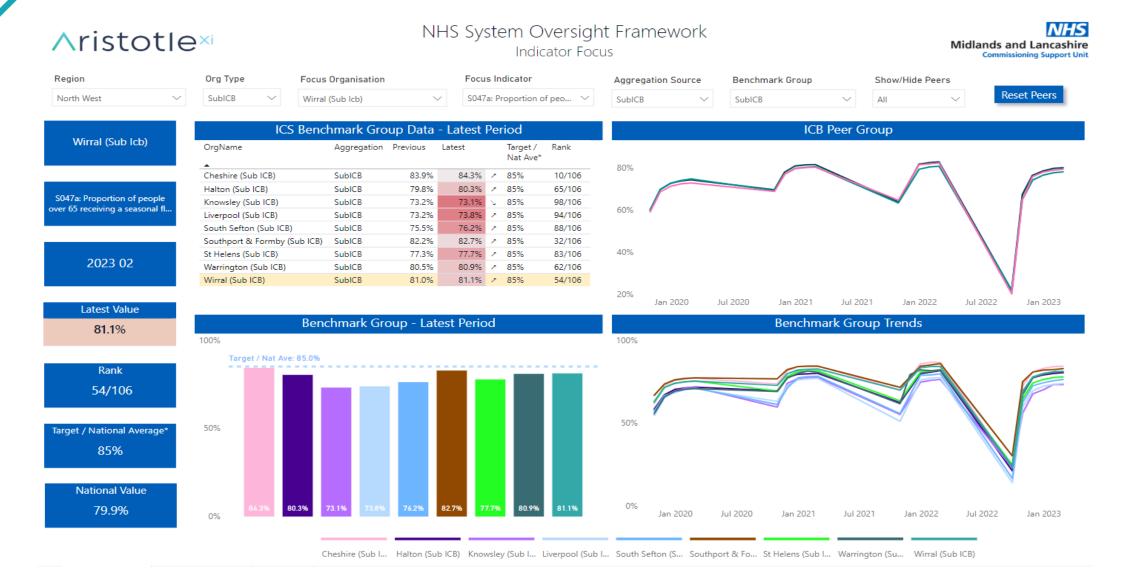
#### **Updated**

### SOF: S044a - Antimicrobial Resistance: Total antibiotic prescribing in Primary Care

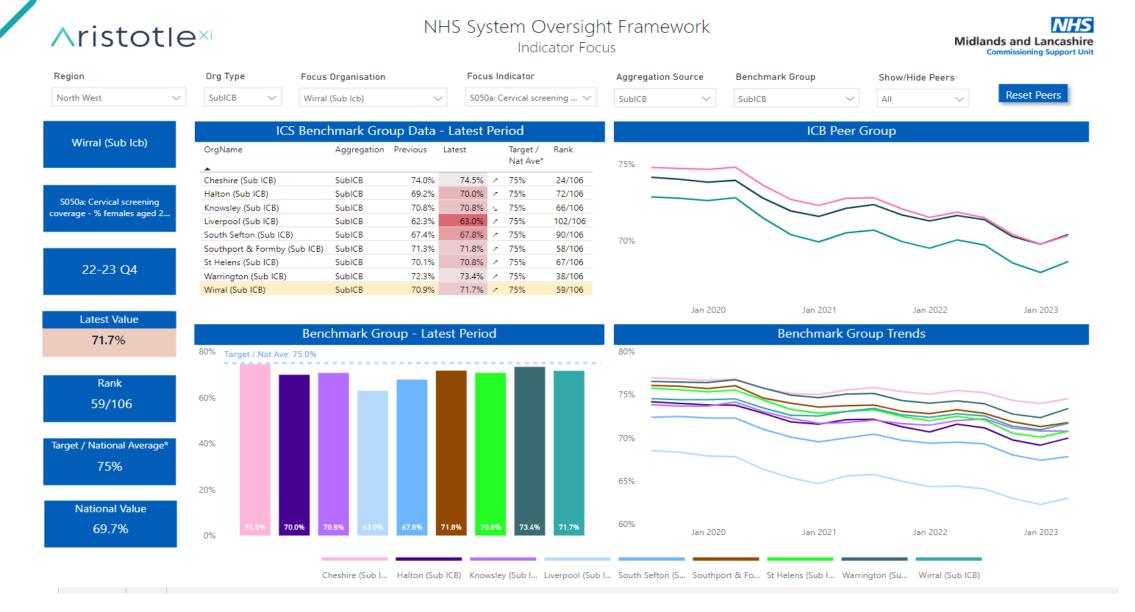


#### **Updated**

### SOF: S047a - Proportion of People over 65 Receiving a Seasonal Flu Vaccination



# SOF: S050a – Cervical Screening Coverage - % Females ages 25 – 64 Attending Screening Within the Target Period

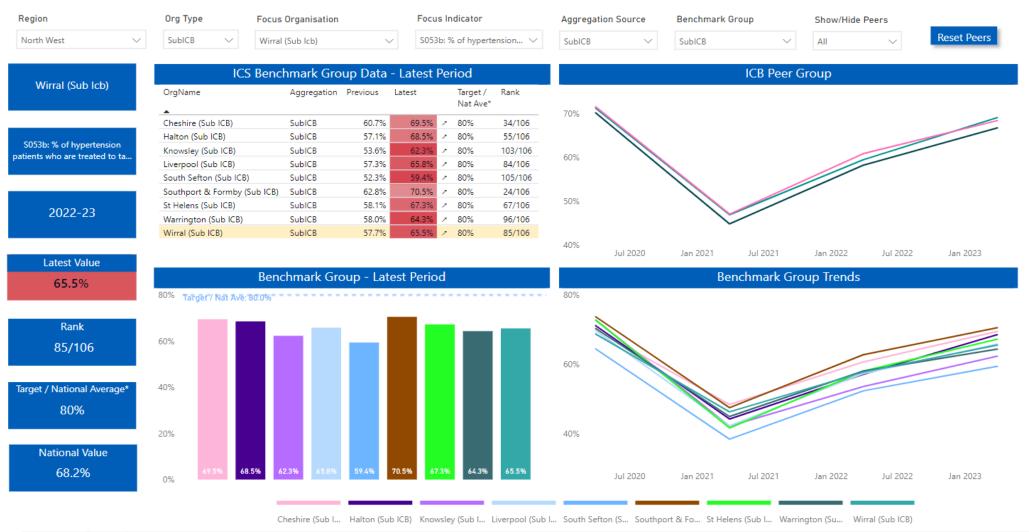


### SOF: S053b - Hypertension patients treated to NICE guidance targets

**Aristotle**×

NHS System Oversight Framework
Indicator Focus



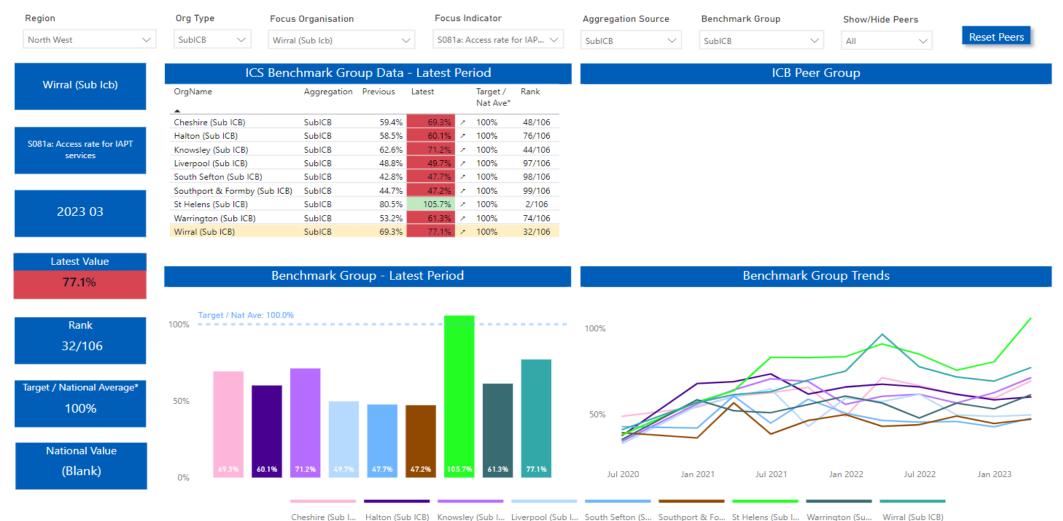


#### **SOF: S081a – Access rate for IAPT services**

#### **Aristotle**×i

## NHS System Oversight Framework Indicator Focus



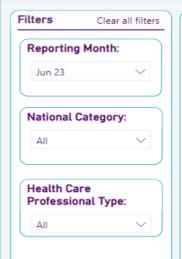


## **GP Appointments Summary – June 2023 (GPAD)**









	Cheshire East	Cheshire West & Chester	Halton	Knowsley	Liverpool	Sefton	St Helens	Warrington	Wirral	Total
Appointments	191,566	176,622	56,156	75,305	255,812	120,953	85,579	100,436	199,310	1,261,739
Appt per 1,000 Pop	454.57	457.50	413.87	440.50	441.96	424.02	426.03	442.78	583.03	459.19
Mode % Face-to-Face Appts	64.0%	63.5%	74.6%	71.9%	60.7%	61.5%	65.5%	80.8%	72.7%	66.8%
Mode % Telephone Appts	30.1%	32.1%	23.6%	26.7%	37.8%	28.7%	26.7%	16.4%	23.3%	28.9%
Mode % Home Appts	2.2%	2.9%	1.7%	1.4%	1.2%	1.6%	1.8%	0.6%	2.5%	1.9%
Time % Same Day Appts	42.3%	44.0%	47.5%	42.4%	53.8%	50.8%	46.2%	48.2%	42.5%	46.7%
Time % 1 Day Appts	6.9%	7.7%	7.1%	10.3%	9.7%	8.4%	9.6%	9.2%	8.4%	8.5%
Time % 2 to 7 Day Appts	18.4%	19.4%	14.5%	21.0%	17.9%	18.0%	18.3%	17.1%	18.6%	18.3%
Time % 8 to 14 Day Appts	14.3%	13.7%	11.4%	12.0%	8.8%	10.2%	11.4%	11.1%	14.4%	12.0%
Time % 15 to 21 Day Appts	8.1%	6.8%	8.5%	7.2%	4.6%	6.5%	6.9%	6.6%	8.0%	6.8%
Time % 22 to 28 Day Appts	6.0%	4.7%	6.4%	4.1%	3.1%	3.4%	4.4%	4.0%	4.8%	4.4%
Time % > 28 Day Appts	4.0%	3.6%	4.4%	3.0%	2.0%	2.7%	3.1%	3.8%	3.3%	3.2%
Time % Unknown/Data Issues	0.1%	0.1%	0.1%	0.0%	0.1%	0.1%	0.1%	0.0%	0.1%	0.1%
HCP % GP Appointments	51.1%	48.2%	48.4%	47.0%	53.2%	56.3%	48.0%	50.4%	45.8%	50.2%
HCP % Other Appointments	47.5%	51.4%	48.9%	52.3%	42.1%	39.4%	51.1%	48.0%	46.9%	46.7%
HCP % Unknown Appointments	1.4%	0.4%	2.7%	0.7%	4.7%	4.3%	0.9%	1.6%	7.2%	3.1%

	Cheshire East	Cheshire West & Chester	Halton	Knowsley	Liverpool	Sefton	St Helens	Warrington	Wirral	Total
Total Appointments Over Time	<b>~~~</b>	•	•	<b>~~~</b>	•~~	<b>~~~</b>	<b>~~~</b>	~~~	<b>~~~</b>	<b>~~~</b>
Mode % Face-to-Face Appts by Over Time					•	_	-			<b></b>
Time % Same Day Appts Over Time	_		_	_	_	~		_		_
HCP % GP Appointments by Date of Appt.			<u></u>		_			_	<b>^</b>	

# CHC Summary – Wirral

# Wirral CCG

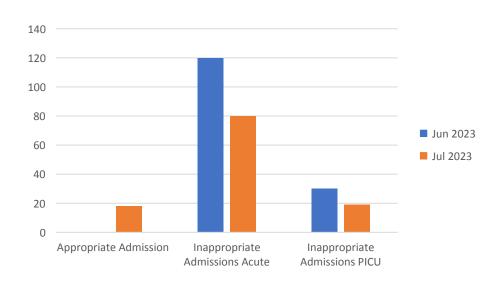
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<b>\$</b> (i)	<b>♦ Key Performance Indicator</b>	<b>♦</b> Period	Target	$\nabla$	SPC Last 12 Months		<b>♦</b> Centile
985	CHC Local Resolution per 50k	Q1 23/24	0.60	1.6			4
972	CHC New Standard Referrals per 50k	Q1 23/24	14.00	29.8			7
982	CHC Standard Assessed as No Longer Eligible per 50k	Q1 23/24	3.00	6.2			9
971	CHC New Referrals per 50k	Q1 23/24	40.00	68.1			15
981	CHC Assessed as No Longer Eligible per 50k	Q1 23/24	26.00	42.1	<del>4-</del>		16
979	CHC Standard Assessed as Eligible per 50k	Q1 23/24	3.00	5.5	<b>☆</b>		17
983	CHC Fast Track Assessed as No Longer Eligible per 50k	Q1 23/24	23.00	36.0	<b>#</b>		17
978	CHC Assessed as Eligible per 50k	Q1 23/24	28.00	44.0	<del>4-</del>		21
980	CHC Fast Track Assessed as Eligible per 50k	Q1 23/24	25.00	38.5	<del>4-</del>		22
975	CHC % Assessed as Eligible	Q1 23/24	75.0%	70.3%			31
973	CHC New Fast Track Referrals per 50k	Q1 23/24	26.00	38.3	€\sigma		31
974	CHC % Referrals Completed Within 28 Days	Q1 23/24	75.0%	76.8%	<b>₹</b>		44
987	CHC Std Assessment Conversion Rate	Q1 23/24	22.0%	22.7%	€\}-		48
976	CHC % Standard Assessed as Eligible	Q1 23/24	25.0%	22.7%			48
988	CHC Std Referral Conversation Rate	Q1 23/24	17.0%	18.3%	€		49
984	CHC DSTs Completed per 50k	Q1 23/24	12.00	22.0	<u>~</u>		88
986	CHC Local Resolution % Eligible	Q1 23/24	23.00%	0.0%	<b>-</b> √		100
977	CHC % Fast Track Assessed as Eligible	Q1 23/24	95.0%	100%	<b>!</b>		100

Source: public view

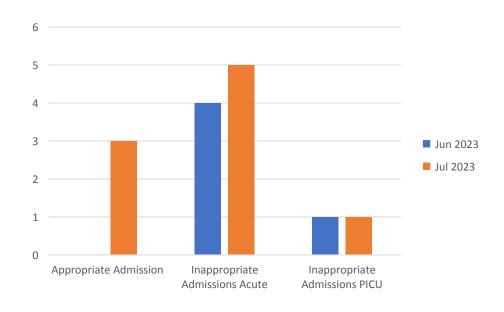
Everything • Headlines Board

### Mental Health out of area placement report – Wirral

#### Total Number of Bed Days



#### **Total Number of Patients**



Source: CWP