



**South Sefton**  
Clinical Commissioning Group

# **South Sefton Clinical Commissioning Group**

## Integrated Performance Report November 2020 Summary

## Summary Performance Dashboard

Metric	Reporting Level		2020-21												YTD
			Q1			Q2			Q3			Q4			
			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
		Actual	52.3%	39.1%	28.5%	28.7%	30.1%	33.8%	33.9%	Not available					35.2%
		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
		Actual	65.46%	66.85%	53.45%	38.95%	39.38%	31.61%	27.67%	22.14%					
		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
		Actual	70.35%	59.72%	49.96%	47.24%	53.57%	59.74%	64.54%	65.78%					
		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
		Actual	8	46	106	171	198	247	349	503					
		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	R	G	G	R	R	R	R	R					R
		Actual	28	0	0	1	5	3	8	3					48
		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													
		Actual	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

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					G
		Actual	93.51%	99.72%	98.11%	96.45%	93.58%	93.60%	94.18%	83.14%					93.48%
		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	
		Actual	93.33%	100%	100%	96.55%	95.24%	100%	95.35%	43.48%					89.29%
		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	R	G					R	
		Actual	94.92%	90.48%	98.36%	97.78%	98.25%	97.18%	93.10%	97.83%					95.94%
		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				R	
		Actual	90.91%	100%	87.50%	80%	100%	91.67%	100%	78.57%					89.52%
		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	
		Actual	100%	93.33%	93.75%	100%	96.30%	100%	100%	100%					98.09%
		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	
		Actual	100%	100%	85.71%	100%	94.12%	100%	100%	100%					97.80%
		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	
		Actual	79.31%	73.91%	83.87%	85.71%	69.70%	78.79%	68.89%	62.79%					74.03%
		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	
		Actual	50%	66.67%	No patients	50%	0%	No patients	0%	100%					45.45%
		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%					83.12%
		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 (All Types)</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
		Actual	93.19%	96.37%	94.13%	92.81%	89.83%	85.16%	78.48%	85.32%					88.76%
		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					
		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					
		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					G
		YTD	0	0	0	0	0	0	0	0					0
		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
		YTD	4	6	7	9	11	17	19	23					23
		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					R
		YTD	9	23	35	39	56	67	76	86					86
		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
		Actual	97.3%			97.2%									97.3%
		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
		Actual	77.6%			85.2%									81.4%
		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
		Actual	39.8%	33.8%	44.3%	44.0%	47.3%	37.8%	46.6%	47.1%					42.71%
		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
		Actual	0.74%	0.46%	0.67%	0.77%	0.81%	1.03%	1.03%	0.78%					6.31%
		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%	
<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
		Actual	100%	95.71%	98.50%	98.6%	98.5%	95.7%	96.3%	95.1%					97.6%
		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
		Actual	100%	98.57%	100%	100%	100%	100%	100%	98.6%					100%
		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
		Actual	60.40%	59.42%	59.36%	59.53%	58.3%	58.5%	58.2%	57.1%					58.84%
		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%

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)</b>	South Sefton CCG	RAG	G	R										R	
		Actual	6.2%	12.4%											12.4%
		Target	5.4%	16.1%				33.6%					60.1%		60.1%
<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	
		Actual	19%	16.1%											35.1%
		Target	50%	50%				50%					50%		50%
<b>Children &amp; Young People Mental Health Services (CYPMH) <span style="float: right;">Rolling 12 months</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										G	
		Actual	14.6%	8.8%											35.6%
		Target	8.75%	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>Access Plan 100%, National Target 95%</b>	South Sefton CCG	RAG	Data being validated by Trust	Data being validated by Trust											
		Actual													
		Target	95%	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>Access Plan 100%, National Target 95%</b>	South Sefton CCG	RAG	Data being validated by Trust	Data being validated by Trust											
		Actual													
		Target	95%	95%				95%					95%		95%

## Executive Summary

This report provides summary information on the activity and quality performance of South Sefton Clinical Commissioning Group at month 8 of 2020/21 (note: time periods of data are different for each source).

Constitutional Performance for Nov and Quarter 2 2020/21	CCG	LUHFT
Diagnostics (National Target <1%)	22.14%	25.21%
Referral to Treatment (RTT) (92% Target)	65.78%	65.05%
No of incomplete pathways waiting over 52 weeks	503	1,778
Cancer 62 Day Standard (Nat Target 85%)	62.79%	60.76%
A&E 4 Hour All Types (National Target 95%)	85.32%	84.74%
A&E 12 Hour Breaches (Zero Tolerance)	-	2
Ambulance Handovers 30-60 mins (Zero Tolerance)	-	90
Ambulance Handovers 60+ mins (Zero Tolerance)	-	7
Stroke (Target 80%)	-	Not Available
TIA Assess & Treat 24 Hrs (Target 60%)	-	Not Available
Mixed Sex Accommodation (Zero Tolerance)	Not Available	Not Available
CPA 7 Day Follow Up (95% Target) 2020/21 - Q2	98.0%	-
EIP 2 Weeks (60% Target) 2020/21 - Q2	85.2%	-
IAPT Access (1.59% target monthly - 19% YTD)	0.78%	-
IAPT Recovery (Target 50%)	47.1%	-
IAPT 6 Weeks (75% Target)	95.1%	-
IAPT 18 Weeks (95% Target)	98.6%	-

### 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.

### Planned Care

Local providers have continued to undertake urgent elective treatments during the COVID-19 pandemic period and this has been clinically prioritised. Work is underway locally in the Liverpool system to increase the available capacity to support urgent elective activity. 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. System wide waiting list management is being considered to maximise the capacity available and to standardise

waiting times where possible. There have been increases in waiting list numbers and patients waiting longer than 52 weeks. These patients are being prioritised for treatment. At this stage there are no estimates to indicate when the waiting lists and waiting times will return to pre-COVID-19 levels.

Secondary care referrals remain below historic levels across all referral sources. GP referrals have shown a year to date decrease of -37.7% compared to 2019/20. In November 2020, Aintree Hospital saw a -34.5% decrease in total referrals received compared to November 2019. Trauma & Orthopaedics was the highest referred to speciality for South Sefton CCG in 2019/20. Referrals to this specialty in November 2020 are -8.7% lower than in November 2019. Decreases in referrals are also evident in other specialties, notably Gynaecology, ENT, Dermatology, Respiratory Medicine and Ophthalmology. All referral priorities have seen a reduction, the largest being routine referrals by -42.7%. However, analysis of two week wait referrals suggests recovery to more expected levels, with November 2020 seeing 6.6% more referrals than in November 2019.

In October 2020 (the latest available information), the CCG's performance for E-Referrals remained stable at 33.9%, significantly below the 100% target. Liverpool University Hospitals NHS FT reported 1,809 Appointment Slot Issues (ASIs) out of a total 5,716 direct bookings; an ASI rate of 31.65%. This shows an increase in the proportion of ASIs compared to October 2019, when 3,644 ASIs of 12,881 direct bookings (28.29%) were reported.

The CCG has failed the target of less than 1% of patients waiting 6 weeks or more for their diagnostic test with 22.14% in November. However, a steady decrease in patients waiting over 6 weeks can be seen from August 2020. Liverpool University Hospital Foundation Trust (LUHFT) performance was 25.21% in October, again showing a steady improvement.

For patients on an incomplete non-emergency pathway waiting no more than 18 weeks, the CCG's performance in November was 65.78%, a slight decline on last month's performance (64.54%). LUHFT reported 65.05% which also shows a slight decline from 61.94% in October. There were a total of 2,851 South Sefton CCG patients waiting over 36+ weeks, the majority at LUHFT (2,398). Of the total long waiters, 503 patients were waiting over 52 weeks, a significant increase on last month when 349 breaches were reported. Overall waiters continue to grow with a total 14,029 South Sefton patients now on the RTT waiting list. LUHFT had a total of 1,778 52 week breaches in November, again showing a significant increase from 1,298 reported last month.

In November 2020, LUHFT reported 3 patients having their planned operation cancelled on or the day after admission for non-clinical reasons, and not having another date offered within 28 days. This shows an improvement on the 8 reported in October 2020.

The CCG is achieving 3 of the 9 cancer measures year to date, whilst LUHFT are achieving 2 out of the 9 measures. The numbers of South Sefton CCG patients waiting over 104 days has decreased slightly to 13 patients in November 2020, 3 less than in October 2020. The longest waiting patient was at 317 days with delays due to a complex diagnostic pathway. Other delays were due to a health care provider initiated delay (2), complex diagnostic pathways (4), medical reasons (1) and other reasons not listed (5). Performance in two week wait breast services has decreased in the latest month due to increased breaches within LUFHT and the majority of breaches due to 'inadequate outpatient capacity'. The maximum wait for patients seen was 37 days for two week wait breast services. The Trust has provided assurance that it is prioritising patients at most clinical risk.

There are 3 faster cancer diagnosis measures with target of 75% expected to be implemented in 2021. In November 2020, the CCG performed above the proposed target across all 3 measures. However, due to lower performance seen in previous months, YTD the 2 week referral is marginally below 75% at 74.42% and the screening referral is significantly under with 40.45%.

For planned care, month 8 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. Indications are that the second national lockdown initiated on 5th November has resulted in a further decrease in planned care activity at lead providers for the CCG.

### **Unplanned Care**

In relation to A&E 4-Hour waits for all types, the CCG and Trust have failed the 95% target in November, reporting 85.32% and 84.74% respectively. 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 rising COVID patients within the Trust in October and November 2020.

LUHFT reported two 12-hour breaches in November 2020, an improvement on last month when 7 were reported. All breaches are followed up by a detailed Root Cause Analysis (RCA). The CCG quality team have set up a task and finish group to standardise the reporting of breaches and mechanisms for providing assurance of patient safety.

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 Q1 2020/21 and continuing into Q2 2020/21. However, November 2020 performance has shown significant improvements across all category types, particularly in category 1 with both the mean and 90th percentile achieving the targets. The South Sefton area does not have SERV car in place as in other neighbouring areas which would help to support category 3 and 4 work and alleviate wait times but also potential conveyances and admissions.

All ambulance handovers between ambulance and A&E must take place within 15 minutes. LUHFT reported a significant improvement in ambulance handover times in November 2020. Handovers between 30 and 60 minutes decreased from 384 to 90, and those above 60 minutes decreased from 99 to 7.

LUHFT reported 24.4% of patients who had a stroke spending at least 90% of their time on a stroke unit in October 2020 (the latest available information). This is significantly below the 80% target and a decline in performance can be seen across the previous three months. Actions continue in relation to the Trust gaining support from The Walton Centre and The Stroke Network.

The CCG reported no new cases of MRSA in November. LUHFT also reported no new cases but have had 3 year to date so have failed the zero tolerance threshold for 2020/21.

For C difficile, the CCG reported 4 new cases of C difficile cases in November (23 year to date). 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. LUHFT reported 8 new cases in November (69 YTD) so are also achieving their objective of no more than 73 cases.

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 November there were 10 new cases, bringing the YTD total to 86 against a target of 85 so the CCG are now failing the target by just 1 case. LUHFT reported 47 new cases in November, bringing the YTD total to 359. There are no targets set for Trusts at present.

LUHFT's Hospital Standardised Mortality Ratio (HSMR) was 87.79 in October 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 8 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. Further increases in activity levels were 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. Indications are that the second national lockdown initiated on 5th November 2020 has resulted in a further decrease in unplanned care activity at lead providers for the CCG.

### **Mental Health**

The Eating Disorder service has reported 40% of patients commencing treatment within 18 weeks of referral in November 2020, compared to a 95% target. 10 patients out of 25 commenced treatment within 18 weeks. This shows an improvement on the previous three months.

For Improving Access to Psychological Therapies (IAPT), Cheshire and Wirral Partnership performance was 0.78% in November, below the target standard of 1.59%. The percentage of people who moved to recovery was 47.1% in November 2020, just below the 50% target but an improvement from the previous two month's performance. Year to date the CCG's performance is at 42.71%.

South Sefton CCG is recording a dementia diagnosis rate in November of 57.1%, which is under the national dementia diagnosis ambition of 66.7%. This is slightly lower than last month's performance.

Demand for Autistic Spectrum Disorder (ASD) assessment and diagnosis (270 approx. per year in Sefton) is in excess of assessment capacity. Commissioners are considering a business case for investment to address current waiting times. In the interim, the CCG has approved non-recurrent investment so support a waiting list initiative to reduce backlog numbers.

In quarter 2 2020/21 year to date, 12.4% of South Sefton CCG patients identified as having a learning disability received a physical health check. This is slightly below the CCG's target of 16.1%.

### **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 commissioners are also in the process of forming a joint Sefton and Liverpool Information Sub-Group.

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 8 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**

Alder Hey Trust raised queries with the CCG regarding the validity of the eating disorder referral and breaches data provided as part of the Q1 and Q2 2020/21 national mental health data set and this was withheld to allow sufficient time for the Trust to investigate. The CCG has reviewed the Q1 and Q2 data provided by the Trust and is assured that the service performed within the required targets with no breaches in the waiting times for urgent referrals, which were all seen within one week.

In quarter 2 2020/21, 8.8% of children and young people (CYP) with a diagnosable mental health condition received treatment from NHS funded services. Year to date performance is at 35.6% which

shows that performance is on track to achieve the annual plan of 35%. This is in large 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 in response to COVID-19 will also positively impact on access rates.

In November 2020, 93% of CYP on an ASD pathway started an assessment within 12 weeks and 98% completed an assessment within 30 weeks, above the 90% target. Likewise for CYP on an ADHD pathway, 100% started an assessment within 12 weeks and 96% completed an assessment within 30 weeks, against a 90% target.

For Child and Adolescent Mental Health Services (CAMHS), the 92% target for referral to choice within 6 weeks was not achieved in November with 87.3%, and the percentage referred to partnership within 18 weeks was 51.9%, below the 75% target. There continues to be an increase in demand for the service which is being closely monitored by the CCG. Given the increase in demand for the service and the potential impact of COVID-19 on staff absence, the CCG has agreed additional short term investment to support service resilience and to ensure no further deterioration in waiting times.

In its ongoing response to the impact of COVID-19, Alder Hey continues to focus on the restoration and recovery of community services and CAMHS, formally agreeing that no therapy or CAMHS staff will be redeployed to other services in response to the second or future waves of the pandemic. The Trust has increased delivery capacity to achieve pre-COVID levels of activity where possible, focusing specifically on the increase in face to face activity in clinic and school settings. This includes ensuring that relevant PPE is available and patient specific risk assessments are carried out.

Alder Hey Trust has revised current reporting to ensure consistency across the patch. This new information shows that, for South Sefton CCG patients, the percentage of patients on an open RTT pathway waiting within 18 weeks has improved consistently since July/August and is reporting above the national 92% target for the SALT, occupational therapy and continence services. Performance has remained at 100% for the dietetics service during 2020/21.

The positive increase in community therapy services provision has enabled services to focus on reducing the numbers of CYP who have been waiting the longest whilst managing increases in referrals. Services continue to carry out local risk assessments and prioritise caseloads and new referrals in accordance with the risk and needs of CYP.

In relation to SEND, Waiting times for therapies and ASD/ADHD services (0-18) continue to exceed SEND KPIs. In November 2020 (the latest available dataset), therapy services achieved SEND targets for the third month in a row. Notably waiting times for speech and language therapy had reduced from 25.6 weeks in December 2019 to 12.6 weeks in November 2020, despite the impact of the pandemic. Also relating to SEND, a revisit was held on 8th Dec-20 with national and regional representatives from DFE and NHSE/I to assess overall progress made with improvement notice findings as part of the by-12 month review process, and outline areas requiring focus on prior to next re-visit planned in June-21. Feedback was positive and inspectors acknowledged the progress with the needs led ASD/ADHD Pathway, including the reduction in waiting times, and the response to increasing numbers whilst ensuring clear routes for those on the waiting list.