

BOARD MEETING

Date of Meeting: 21 March 2023	Agenda item: 08
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Title of Paper: Performance and Quality Report

Paper is for: (Please ✓)	Discussion	✓	Decision		Information	✓
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Executive Summary

The report gives a high-level overview of performance for NHS partners across the Integrated Care System.

The report focuses on five key areas but also includes additional broader performance information in an appendix.

The five areas of key focus are:

- Urgent and Emergency Care – 4 Hour standard
- Elective – Long Waits
- Mental Health – Out of Area placements
- Cancer - 62 days - % and total number of patients waiting over 62-days.
- Primary care access – (all patients given appointment within 2 weeks)

The rationale for the above is based on the priorities listed within the ICP strategy, the present operational pressures within the programmes and the national focus outlined within 2022/23 planning guidance.

The updated monthly pack consists of published data (mostly up to the end of December 2022 with some more up to date). The effect of extreme winter pressures during December is seen across all areas.

Ambulance handover performance deteriorated dramatically. The 7-day average at the beginning of December was c. 13.5 hours per day; this more than doubled towards the end of December to c.45 hrs per day. The system providers compared well regionally at the end of November but were the second worst performing system in relation to hours lost through ambulance handover delays. This does appear to have abated over the past two months with exceptions across the Southeast driven by industrial action and volume of arrivals in short spaces of time.

Emergency Department (ED) 4-hour performance fell from regularly over 60% at the end of November to regularly under 60% by the end of December. Patients spending more than 12 hours in ED also shifted from a steady state of under 100 to more than 150 a day across the four EDs. Buckinghamshire Healthcare saw the biggest increase, although the pattern across the system was the same.

The system has been challenged in cancer 62-day performance for some months. Through M9 the position deteriorated further from c.12% of patients waiting longer than 62 days at the end of November to more than 16% at the beginning of January. The position has significantly improved during January and February through focused recovery and improvement work.

Within elective (planned care) the system maintained the number of patients waiting more than 78 weeks through December starting at 360 and ending with 355 although above plan this was impressive in the face of extreme winter pressures, increased ED attendances, increased non-elective admissions and higher staff absences. All three Trusts forecast achieving the system's plan and national ambition to reach zero patients waiting over 78 weeks for elective treatment. The total waiting list reduced from c.147k patients to c.139k by the end of December. Reducing the number of patients waiting longer than 65 weeks by 400 to 1.6k this is the second lowest number in the southeast region.

At week ending 8 January across Buckinghamshire Healthcare Trust and Oxford University Hospitals Trust there were 22,163 patients waiting for a diagnostic test, with 5,810 waiting more than six weeks (26.2%). The last monthly submission demonstrated Royal Berkshire Foundation Trust had the most challenged position, with 37% of patients waiting longer than six weeks. Magnetic Resonance Imaging continues to be highest volume with the highest number of patients waiting more than six weeks, while endoscopy remains extremely challenged.

Action Required

The board are asked to:

- Note the contents of the report and comment on coverage and presentation.

Date and Name of Committee/meeting at which Paper Reviewed: Population Health and Patient Experience 28 February 2023; Executive Management Committee

Author: Ben Gattlin, Head of Planning and Performance

Executive Lead/Senior Responsible Officer: Matthew Tait, Interim Chief Delivery Officer and Rachael Corser, Chief Nursing Officer

Date of Paper: 8 March 2023

Conflicts of Interest

This report contains information including the performance of organisations led by members of the Board. The perspective of these members is an important aspect for enable the Board to focus on where the ICB (Integrated Care Board) and system contribute to improvement.

No conflict identified	
Conflict noted: conflicted party can participate in discussion and decision	✓
Conflict noted, conflicted party can participate in discussion but not decision	
Conflict noted, conflicted party can remain but not participate in discussion	
Conflict noted, supported paper withheld from conflicted party e.g., pecuniary benefit	
Conflicted party is excluded from discussion	



**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

NHS Performance and Quality Dashboard

Matthew Tait – Chief Delivery Officer

Rachael Corser – Chief Nursing Officer

1. UEC – 4 Hour standard (Operational Planning by March 2024 minimum standard 76%)
2. Elective – Long Waits (Operational Planning by March 2024 reach 0 patients waiting over 65 weeks)
3. Mental Health – Out of Area Placements
4. Cancer - 62 days - % and total number of patients waiting over 62-days
5. Primary care access – (Operational Planning - All patients given appointment within 2 weeks); this is a new metric with DQ issues)
6. Annex
 - Wider Performance Measures

1. Urgent and Emergency Care -

- In common with Trusts and systems within the South East Region, UEC providers across all care settings remain under significant pressure.

Accident and Emergency 4 hour and Type 1 Performance

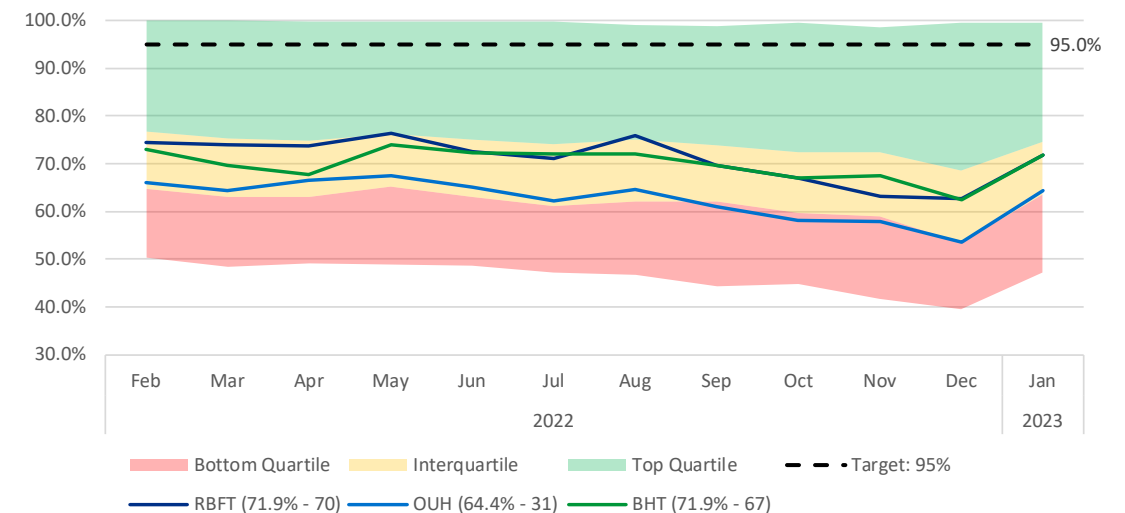
- UEC pressures remain significant across the system despite a reduction in the Emergency Department (ED) attendance volumes and an improvement against the 4hr performance standard.
- BOB delivered 69.4% against the 4hr standard in January (M10), an improvement against the 59.5 % reported for December (M9). This is below the regional average of 72.4% and regional performance of 76%

Ambulance Handovers delays

- The number of handover delays remains an area of priority recognising the direct impact on the ability for South Central Ambulance Services (SCAS) to improve category 2 waiting times
- Stoke Mandeville and RBFT remained our most pressured sites in relation to handover delays
- For M8 there has been an in-month improvement in the percentage of >60mins handover delays reported for BHT (4.6%) and RBFT (3.4%)

- The Reading Urgent Care Centre opened 5 December with a capacity to offer 100 appointments a day. Following work to optimise utilisation since opening the service has opened to direct bookings from ED with avg. 89 patients seen by UCC
- Discharges - Following announcement of the additional funding available to systems to support additional discharge capacity, with tranche 1 expected to provide an additional 80 beds and 90 care packages per week supporting approximately 150 discharges
- Trusts continue to work with SCAS to mitigate handover delays through the provision of queue nurses and instigation of HALOs where required.

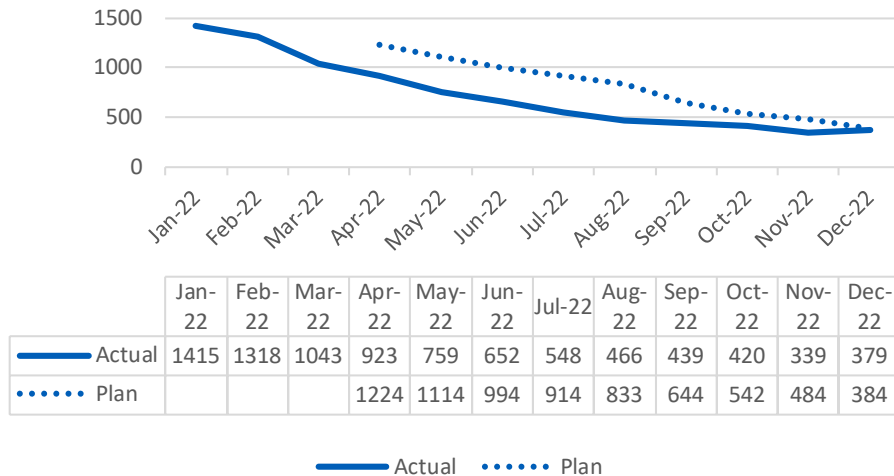
A&E 4 Hour Performance Benchmarked against NHS Acute Trusts



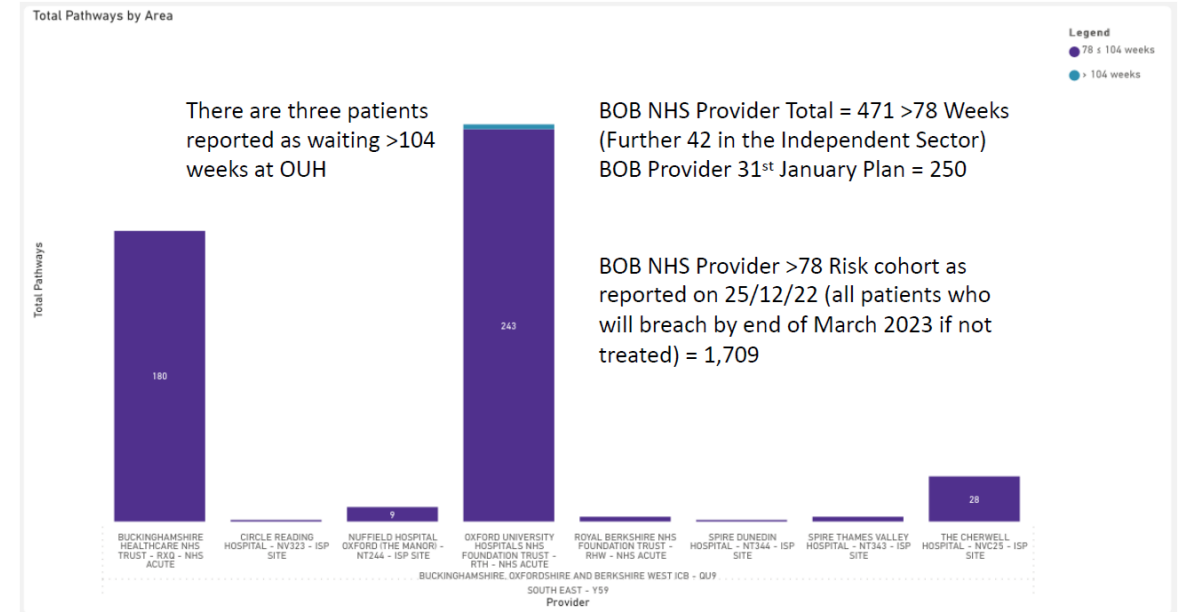
2. Planned Care

- Overall elective activity levels remain below planned levels in both episodes treated and the financial value weighting of activity.
- Despite activity levels remaining below plan BOB is still achieving a steady reduction in patients waiting over 78 weeks with a trajectory to achieve 0 patients waiting over 78 weeks as per national ambition.

BOB (3 main NHS trusts) - 78 Week Waits



Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board

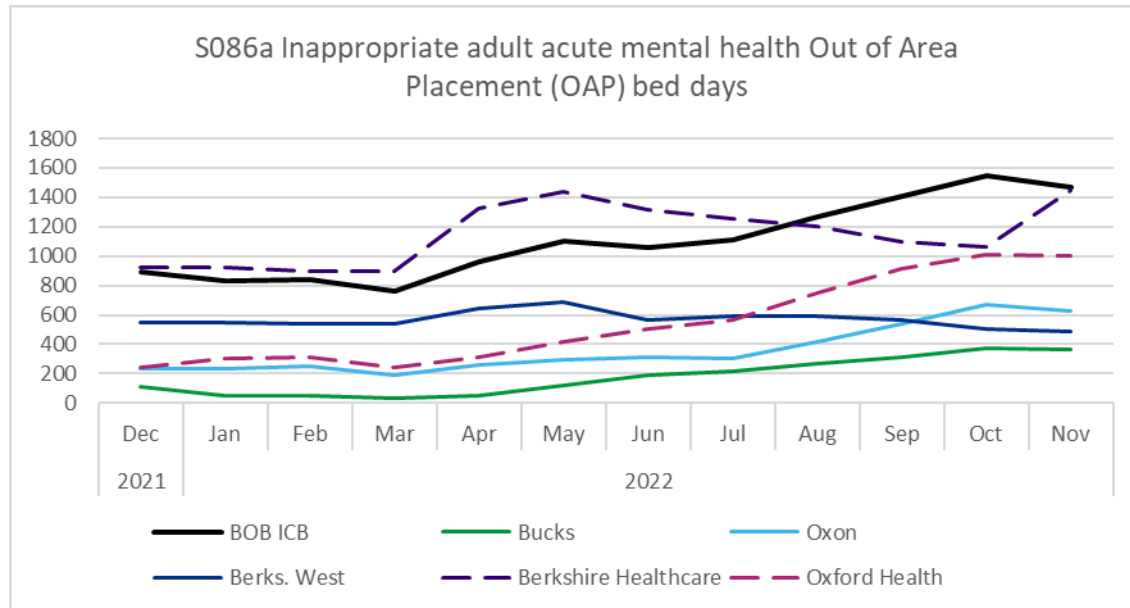


- BOB Elective Care Board is tracking delivery of the 0 patients >78 weeks on a weekly basis
- Major risk to delivery is a national shortage corneal graft implant material and the impact of industrial action

3. Mental Health Services

Inappropriate adult acute Mental Health Act Out of Area Placement (OAP) bed days

- This was 1470 within the 2 months to Nov 22, against the ambition on 0. We would however note that in some cases, an out of area placement may be a patients preferred option (this may be due to family circumstances, patient choice The figure was 1410 in the 3 months to January 22
- Buckinghamshire: During the time period there was significant pressure for female bed requests, so even with discharges we till were unable to meet demand with our usual capacity. Usually there were also 3 older adult OAPs. There was a significant challenge in finding placements for current inpatient during this time with at least 6 patients who were challenging to discharge.



- Oxfordshire: Over the last few months we have continued to experience significant demand on female beds, which led to an increased number of OAPs. However, with the enhancement of the Patient flow team this has enabled a clear focus on flow both in and out of the inpatient setting and enabled significant oversight of patients in OAPS leading to reduced length of stay. We have held 2 ‘focus on flow’ weeks since December which have supported the reduction of patients in OAPS and no further OAPS since December
- BHFT: Over the past few months has continued to experience significant demand for acute beds which have resulted in the use of inappropriate OAPs.
- BHFT has embraced the 100 challenge alongside our existing focus on patient flow and clinically ready for discharge through the bed optimisation programme. Despite increased demand for OPMH beds we have not sent any patient to an OAP bed.

4. Cancer

Percentage of Total Backlog Waiting Over 62 Days

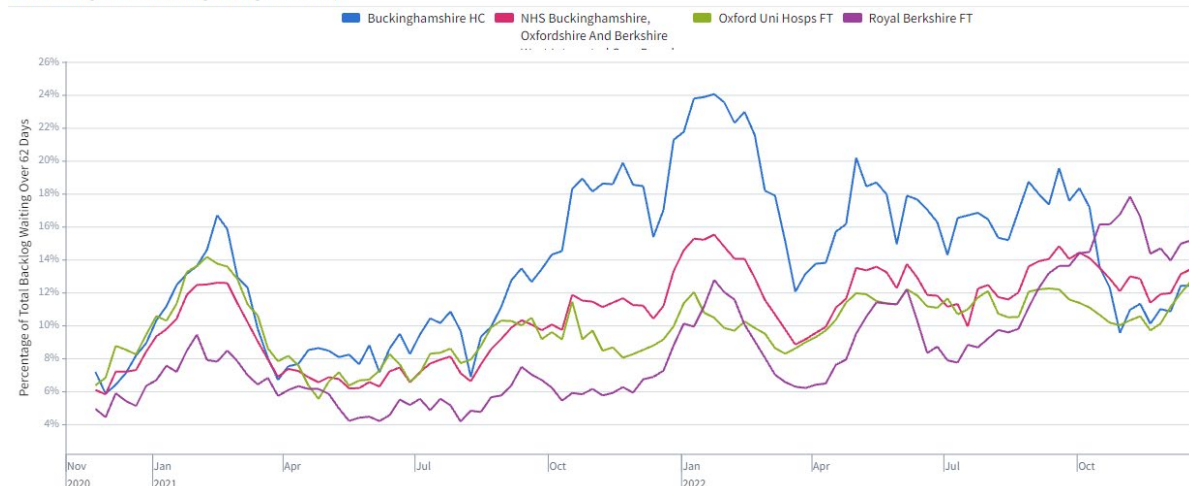


Fig. 1

Total Waiting List By Geography

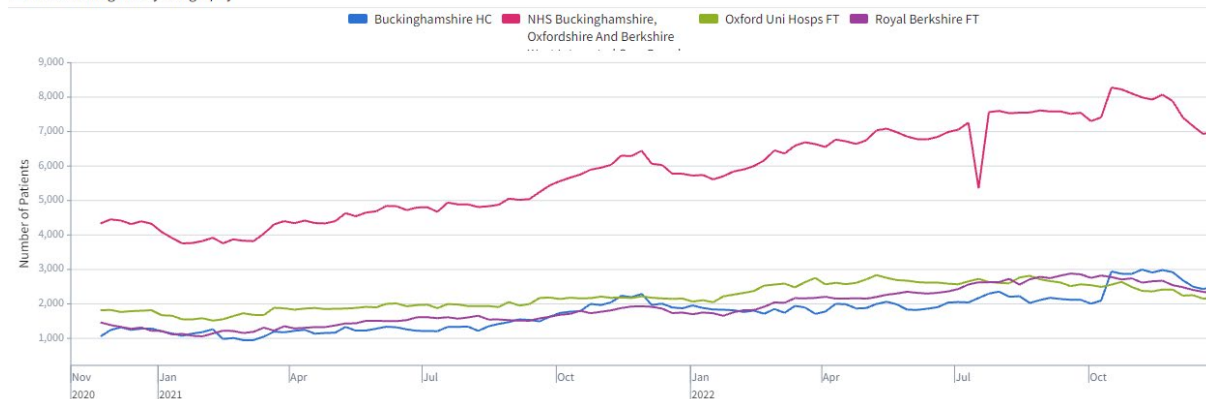


Fig. 2

- The number of patients waiting over 62 days on the cancer PTL as a percentage of the total waiting list grew through December (fig. 1)
- However, this is against the backdrop of a reduction in the total cancer PTL of over 1000 patients more than 14% (fig. 2)
- BOB are still tracking above of plan to recover the cancer backlog position, an improving position has been observed over recent months.

BHT Key Points

- Working towards 178 patients end of March and presently on trajectory present position 225 (9.6%)
- Site specific trajectories in place - bi-weekly performance meeting in place
- Urology / Head and Neck / Lower GI are the biggest challenges
- *Endoscopy capacity is being prioritised for Cancer*

OUH Key points

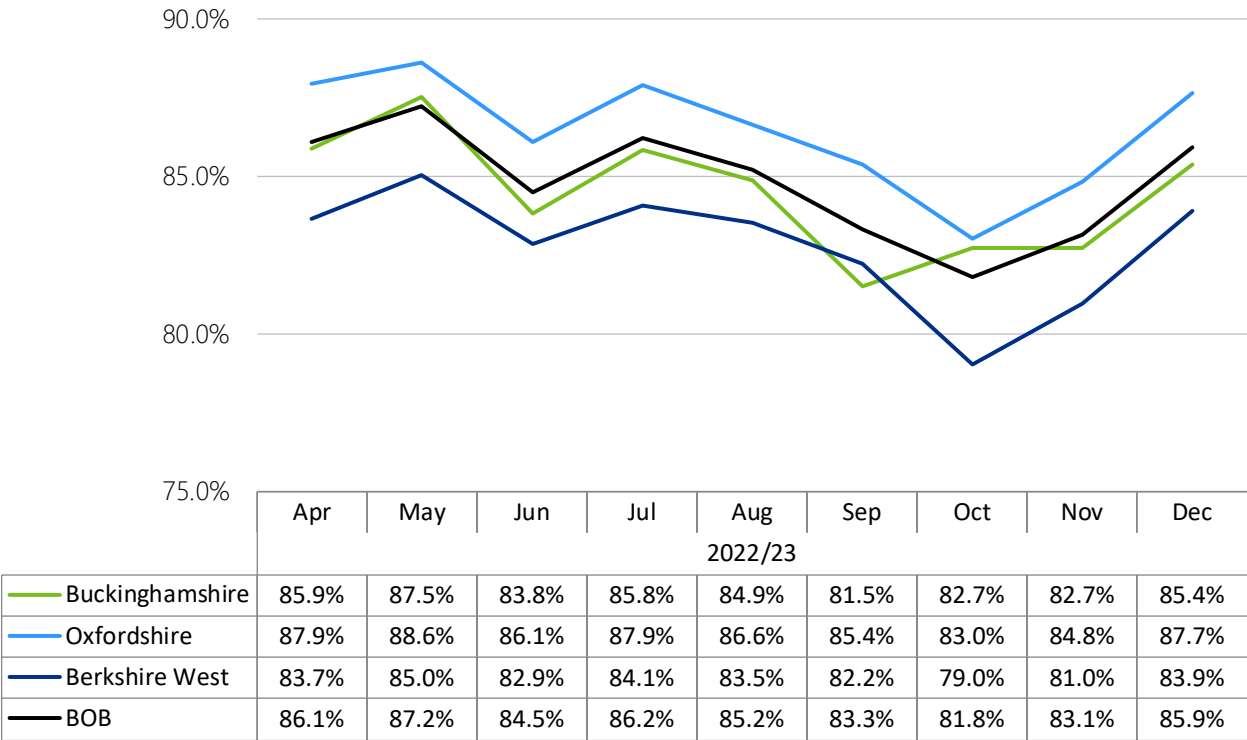
- Revised position expected to reach 231 at the end of March (297 latest numbers)
- Most challenged areas Urology / Gynae / Upper GI

RBFT Key points

- Histopathology tests 3000 outsourced
- Patient Tracking List has seen a large reduction in long waiters
- FIT 63% reasonable and improving
- Outsourcing 40 MRI to and this will increase to 80
- Scope plan for 5th Room awaiting update on funding
- Working with GP on some of the key patients n Gynaecology to support earlier discharge
- 400 is the year end forecast

5. Primary Care Access

Percentage of General Practice Appointments seen within 14 days of Being Booked



- Both October and November saw sustained high levels of activity. This eased in December, acknowledging the impact of Christmas and New Year but the proportion of same day appointments increased to 50.6% an improvement on previous months. 86% were seen within 2 weeks, again this is an improved position
- Measure includes all appointment types. Practices with high proportion seen within 2 weeks generally have higher proportion of virtual & telephone appointments. Working hypothesis is that those practices have lower patient satisfaction levels
- Next monthly report will seek to link these data sets and prove/disprove hypothesis including applicable actions

6. Appendix

Wider Performance and Quality Oversight Measures

Executive Summary

	Indicator	Month	Standard	BHT	OUH	RBFT
UEC	A&E Performance (All Types)	Jan 23	95%	71.9%	64.4%	71.9%
	Ambulance Handover Delays (> 30 mins)	Jan 23		14.8%	0.0%	15.8%
Planned Care	Incomplete Pathways over 52 weeks at month end	Dec 22	Rated against plan	2994	1851	420
	Incomplete Pathways over 65 weeks at month end			970	594	23
	Incomplete Pathways over 78 weeks at month end			153	221	5
Cancer	Percentage meeting faster diagnosis standard	Dec 22	75%	65.2%	82.0%	72.1%
	Percentage of patients seen within two weeks of an urgent GP referral for suspected cancer		93%	94.4%	79.1%	92.4%
	Percentage of patients receiving first definitive treatment within two months (62 days) of an urgent GP referral for suspected cancer		85%	52.2%	61.0%	60.7%

	Indicator	Report Period	Standard	BOB ICS (3 CCG)	Bucks	Oxon	Berks W
Mental Health	Talking Therapies - Total Accessing in Period	Rolling 3 months to Nov 22		5.7%	6.8%	5.4%	5.3%
	Talking Therapies - Moving to Recovery	Nov 22	50%	51.6%	50.9%	52.2%	51.4%
	Dementia Diagnosis Rate	Dec 22	67%	60.0%	56.8%	61.7%	61.3%
	CYP Eating Disorders - Urgent (1 week)	Rolling 12 months to Nov 22	95%	68.7%	70.0%	28.6%	74.0%
	CYP Eating Disorders - Routine (4 weeks)		95%	41.0%	33.3%	15.8%	77.9%
	Severe Mental Illness (SMI) 6 Health Checks	2022/23 Q3	60%	43.4%	44.0%	40.2%	48.1%

Urgent and Emergency Care

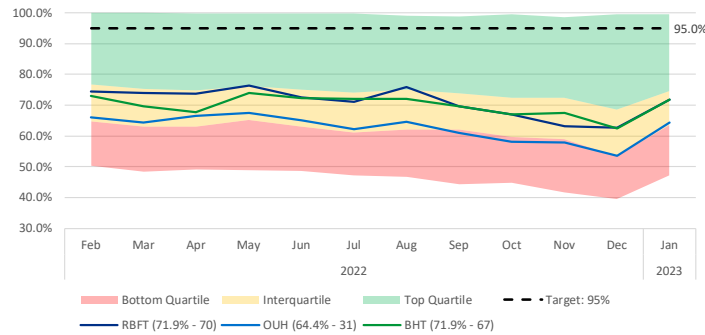
Indicator	OF Flag		Standard	England	South East	BOB Acutes	BHT	OUP	RBFT
A&E Performance (All Types)		Jan 23	95%	72.44% ↑	75.98% ↑	69.35% ↑	71.85% ↑	64.42% ↑	71.94% ↑
A&E Attendances				1,962,511 ↓	284,900 ↓	39,526 ↓	12,652 ↓	13,498 ↓	13,376 ↓
Breaches				482,638 ↓	60,809 ↓	12,116 ↓	3,561 ↓	4,802 ↓	3,753 ↓
Emergency Admissions				508,743 ↓	79,880 ↓	16,152 ↓	5,022 ↓	7,579 ↓	3,551 ↑
Over 12 hour waits from dta to admission			0	42,735 ↓	3,614 ↓	291 ↓	288 ↓	3 →	0 →
Ambulance Handover Delays (>30 Minutes)	S019a						14.8% ↓	0.0% ↓	15.8% ↓
Average Hours Lost on Handover Delays per day at BOB Acute Trusts							4:17:40 ↓	2:53:31 ↓	6:53:53 ↓

Ambulance Response Time (hours:minutes)	OF Flag		Standard	England	South East	SCAS
Ambulance Response Times (Category 1 Incidents Mean)	S020a	Jan 23	0:07:00	0:08:30 ↓	0:08:12 ↓	0:07:50 ↓
Ambulance Response Times (Category 1 Incidents 90th Percentile)			0:15:00	0:15:11 ↓	0:14:55 ↓	0:13:54 ↓
Ambulance Response Times (Category 2 Incidents Mean)	S020b		0:18:00	0:32:06 ↓	0:23:00 ↓	0:21:36 ↓
Ambulance Response Times (Category 2 Incidents 90th Percentile)			0:40:00	1:08:01 ↓	0:45:46 ↓	0:42:07 ↓
Ambulance Response Times (Category 3 Incidents Mean)	S020c			1:26:09 ↓	1:22:28 ↓	1:03:41 ↓
Ambulance Response Times (Category 3 Incidents 90th Percentile)			2:00:00	3:17:28 ↓	3:00:55 ↓	2:18:37 ↓
Ambulance Response Times (Category 4 Incidents Mean)	S020d			1:48:46 ↓	1:37:11 ↓	1:20:41 ↓
Ambulance Response Times (Category 4 Incidents 90th Percentile)			3:00:00	4:16:35 ↓	3:50:00 ↓	3:13:27 ↓

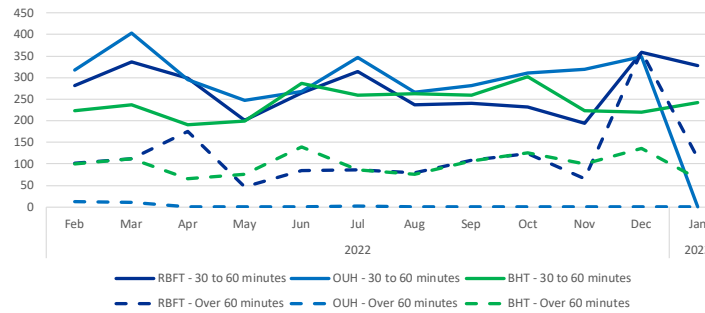
Please note that the arrows in the tables above indicate the numerical change against the previous month and not necessarily the change in performance.

Urgent and Emergency Care - Charts

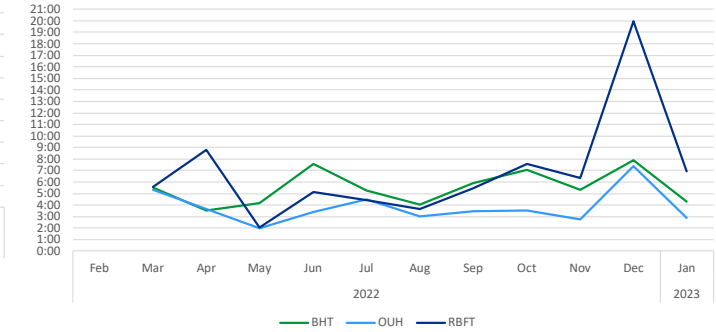
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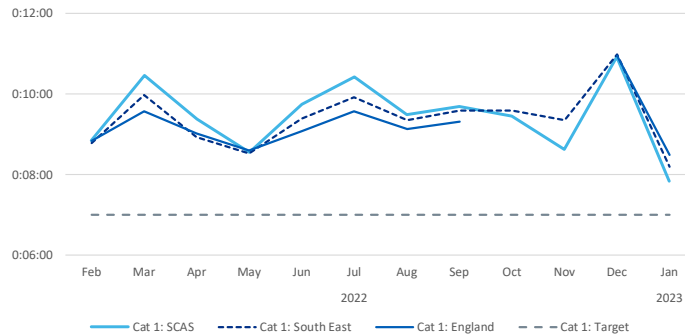
NHS Trusts - Ambulance Handover Delays



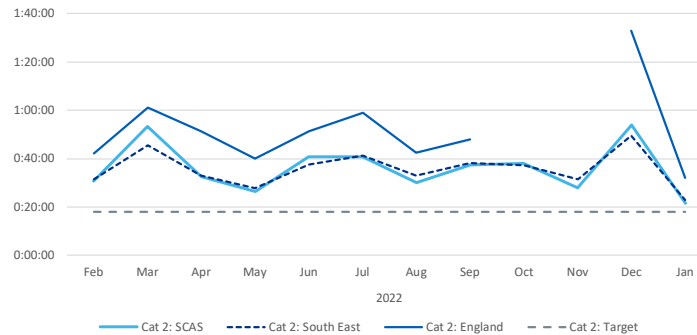
Average Hours Lost on Handover Delays per day at BOB Acute Trusts



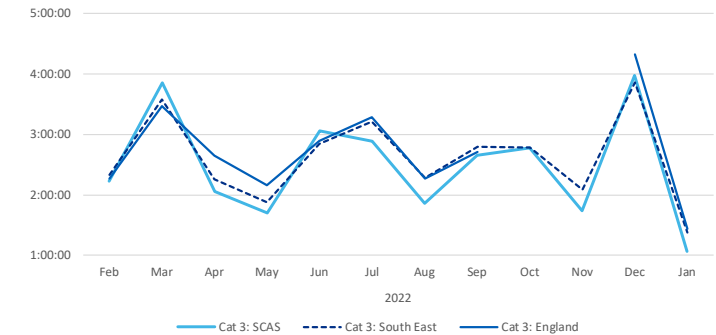
Ambulance Response Times: Category 1 Mean



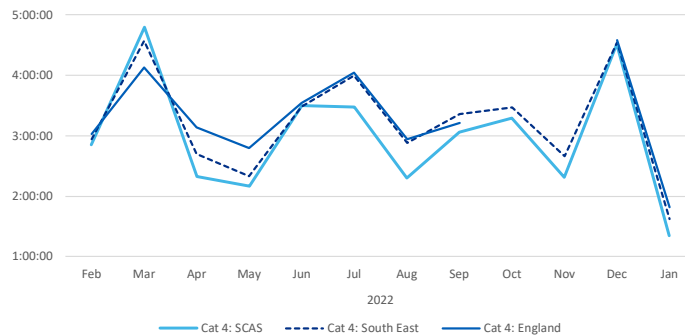
Ambulance Response Times: Category 2 Mean



Ambulance Response Times: Category 3 Mean

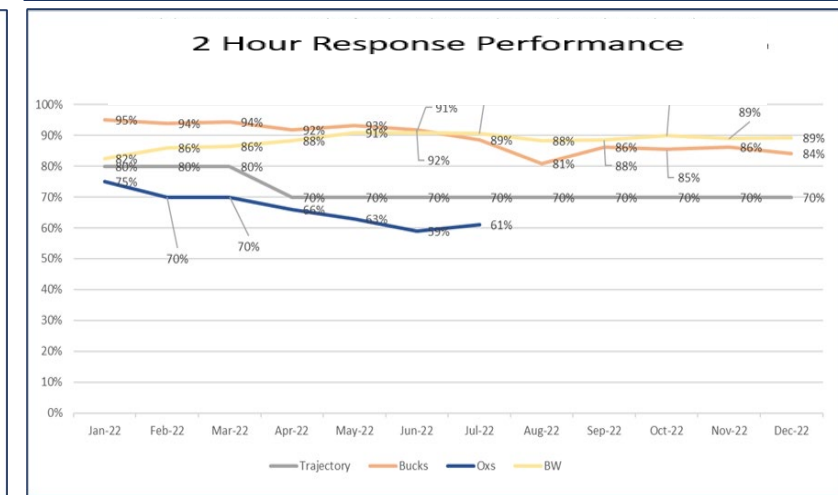
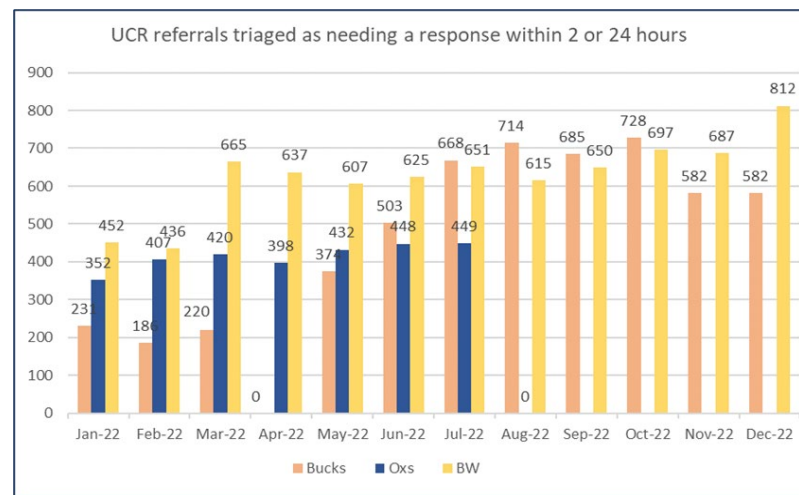
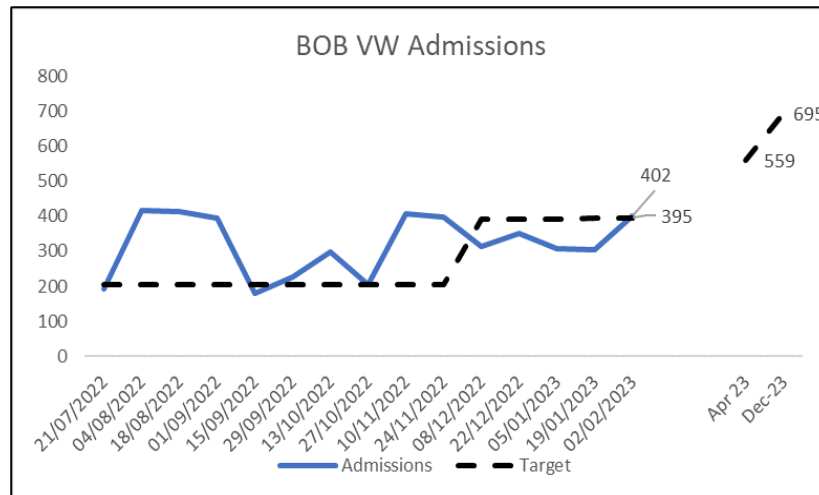
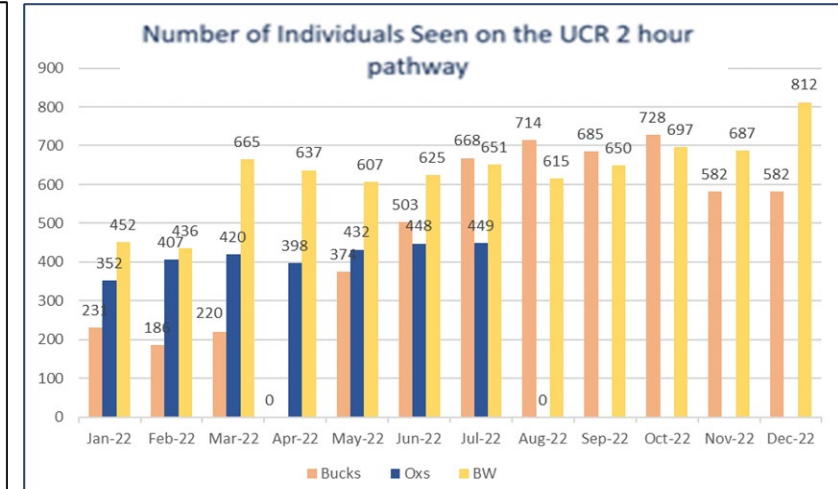
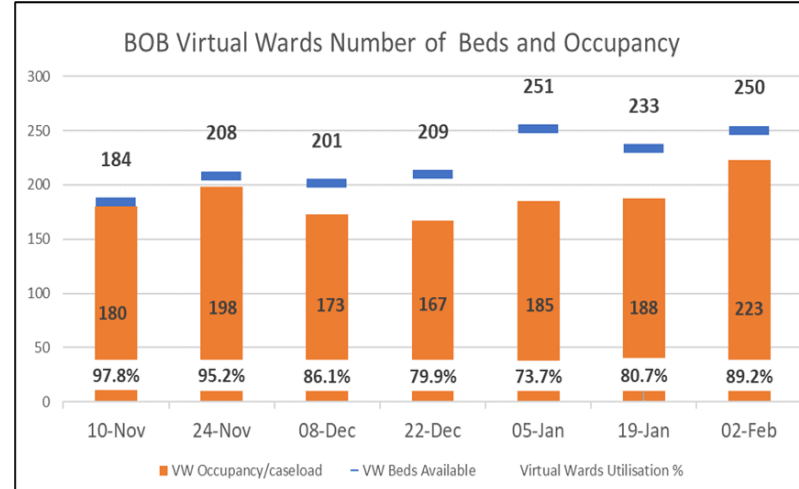
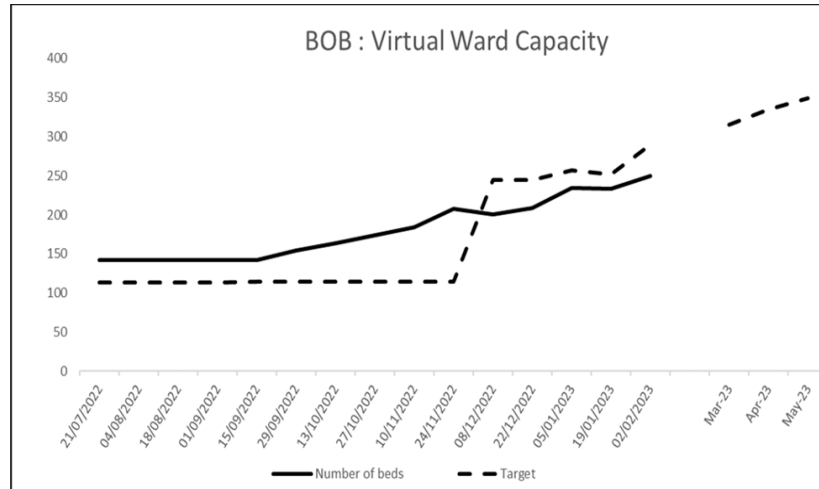


Ambulance Response Times: Category 4 Mean



Please note: Due to a data quality issue there is no data for Ambulance Response times for the "England" position in October or November 2022

Virtual Wards (VW) and Urgent Community Response (UCR)



There is no data for Oxford Health until the new EPR system is implemented. Estimated date January 2023

Virtual Wards (VW) and Urgent Community Response (UCR)

Virtual Wards

BOB VW bed capacity by end of December 2022 was 237 beds, just short of our target of 252. The shortfall was due to recruitment issues in Royal Berkshire Hospitals. We have been informed of recruitment issues across all Virtual Wards which is impacting the ability to further increase our VW capacity.

Our VW providers submit data to NHS Foundry every two weeks which informs national and regional NHSE reports. We have averaged 75% occupancy in December, however data quality issues e.g. late submissions due to operational pressures and inability to report Oxford Health data, mean that BOB ICS's VW capacity and occupancy looks comparatively and erroneously low on these reports compared to other providers across the South East. We have now instigated daily local reporting via our UEC sitrep to support better oversight and implemented a new system for entering Foundry data at an earlier time point to mitigate any issues.

We were due to increase our VW bed capacity further to 335 beds by April 2023, but due to system pressures, we are now aiming to increase this to 402 beds by end of March 2023.

To this end and as part of BOB ICS's Enhanced Operating Response to the system OPEL 4 status a Virtual Ward Cell, chaired by Ross Fullerton, Exec Lead for Virtual Wards, is now meeting twice weekly. Key focus includes maximising current VW bed utilisation routinely to 90% and above and expanding capacity by 50 VW beds per month in Quarter 4. All Virtual Ward providers are being offered any support they need to support increases to their capacity and utilisation.

Urgent Community Response

BOB ICS continues to exceed UCR operational targets, i.e. numbers of individuals seen on the two hour pathway and number of those seen within two hours. We are still currently unable to report Oxford Health data into the national UCR dashboard, but are now receiving data through our updated UEC daily sitrep report. Once this is in place benchmarking against National and Regional performance will be included

Key actions upcoming for UCR programme:

- Streamlining single points of access at place
- Further developing Point of Care testing capability
- Further increasing referrals from care homes
- Further increasing referrals from SCAS and 111

Criteria to Reside (CTR) – Acute

All values below for the latest day - 12 February 2023*

*The time series show a wider range of dates with each week starting on a Monday. To change the start date for the time series use this filter →

Period - time series

Last 5 weeks

All patients

Patients who meet the criteria to reside
1,521

Patients who **no longer** meet the criteria to reside
375

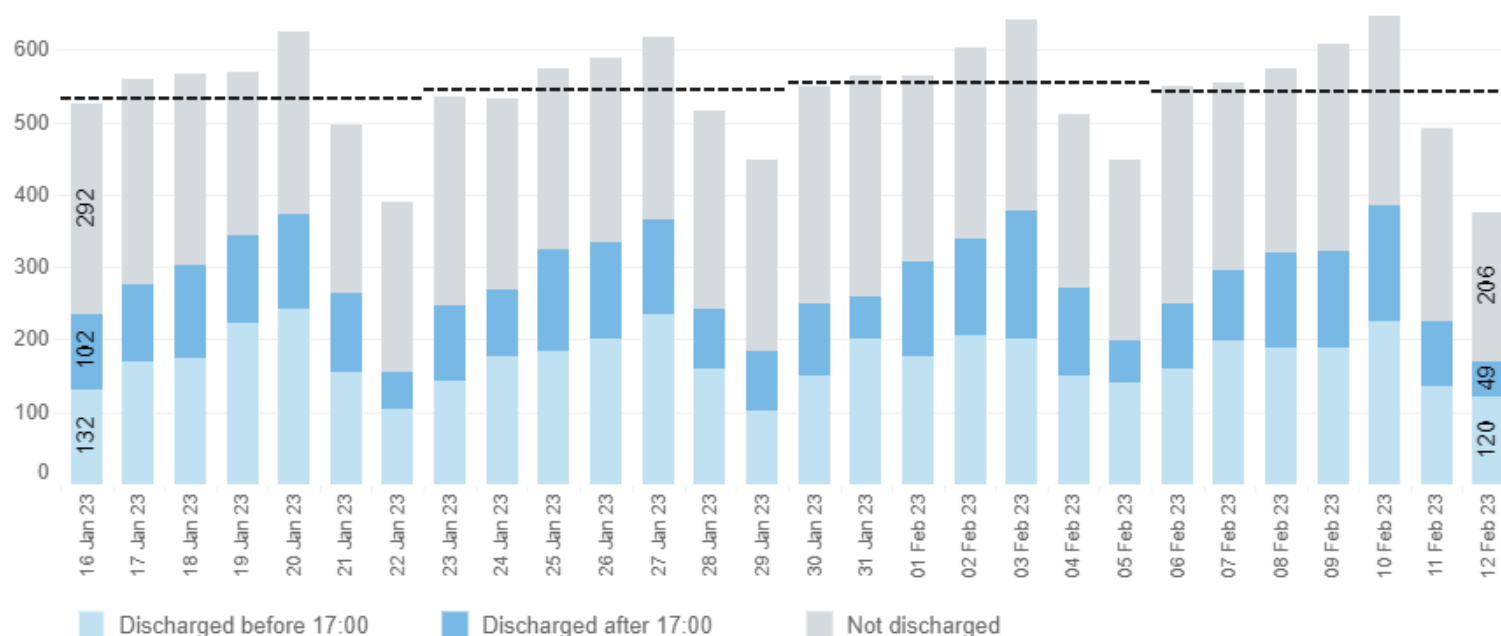
Patients discharged by 17:00
120
32%

Patients discharged **after** 17:00
49
13%

Patients **not** discharged
206
55%

All patients who **no longer** meet the criteria to reside

Total



Discharge pathways

Click the + button to expand into detailed pathways

Pathway 0 **162** (96%)

115

47

Pathway 1 **5** (3%)

4

Pathway 2 **2** (1%)

Pathway 3 **0** (0%)

Criteria to Reside (CTR) – Community

Buckinghamshire, Oxfordshire
and Berkshire West

All values below for the latest day - 12 February 2023*

*The time series show a wider range of dates with each week starting on a Monday. To change the start date for the time series use this filter →

Period - time series

Last 5 weeks

All patients - Community Discharge

Patients who meet the criteria to reside
185

Patients who **no longer** meet the criteria to reside
48

Patients discharged by **23:59**
1
2%

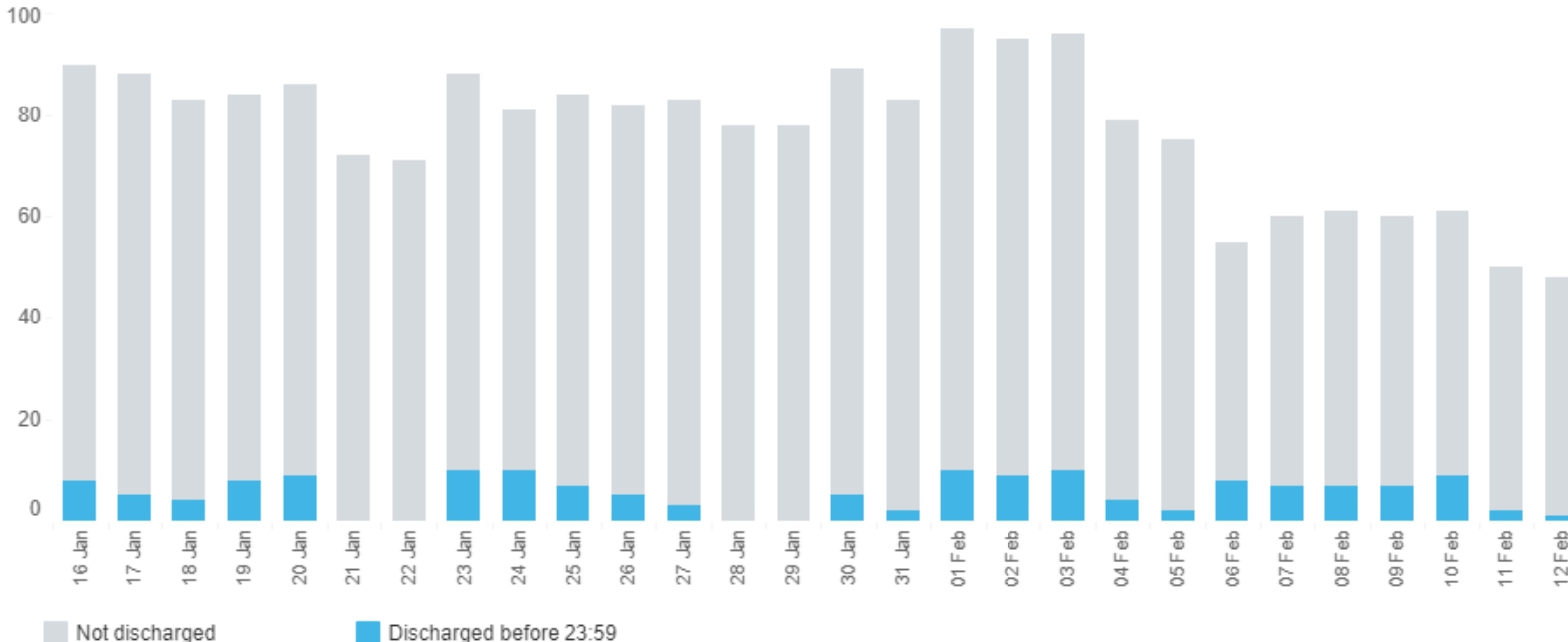
Patients **not** discharged
47
98%

All patients who **no longer** meet the criteria to reside

To view time series data before 17 Oct 22, please select from drop down list >>

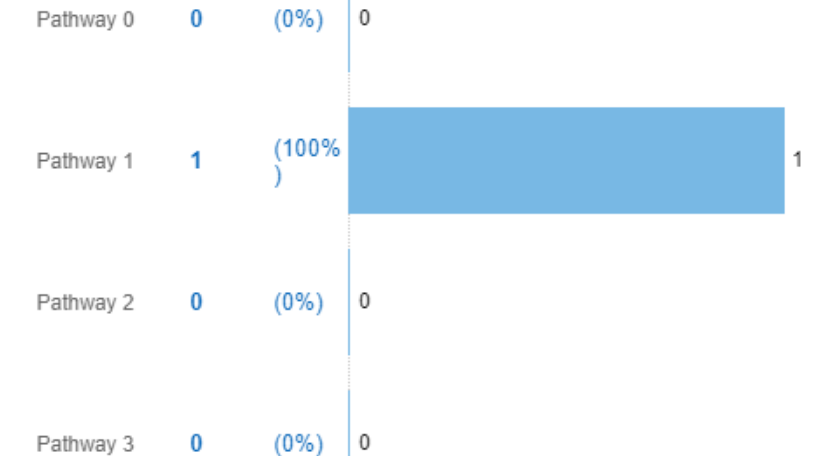
After 17 Oct 2022

Total



Community discharge pathways

Click the + button to expand into detailed pathways



Planned Care

Indicator	Month	ICB BOB		Sub ICB Bucks		NHS Trust OUH		BHT		RBFT		
		Activity	Plan	Activity	Oxford Activity	Berks W Activity	Activity	Plan	Activity	Plan	Activity	Plan
Incomplete pathways at month end	Dec 22	135,609		48,548	55,518	31,543	72,620	57,506	37,883	36,700	25,716	28,000
Incomplete Pathways over 52 weeks at month end		6,031		3,259	1,869	903	1,851	964	2,994	3,300	420	150
Incomplete Pathways over 65 weeks at month end		1,895		1,058	619	218	594		970		23	
Incomplete Pathways over 78 weeks at month end		422		189	184	49	221	74	153	310	5	0
Total GP Referrals against 2019/20		97.6%	102%	79.0%	107.4%	102.5%	102.0%	112%	73.9%	110%	100.8%	121%
Total Other Referrals against 2019/20		123.3%	100%	101.9%	115.3%	144.7%	102.4%	116%	76.5%	113%	145.8%	193%
Total All Referrals against 2019/20		106.2%	101%	86.5%	109.6%	119.3%	102.2%	114%	74.7%	111%	119.7%	151%
Total First Attendances against 2019/20		105.8%	104.8%	105.5%	106.4%	105.4%	108.7%	154.5%	108.9%	122.1%	103.8%	133.5%
Total Follow-up Attendances against 2019/20		102.4%	90.9%	101.9%	105.8%	99.6%	107.1%	143.9%	97.3%	119.8%	89.8%	120.7%
Total Attendances against 2019/20		103.7%	96.1%	103.2%	106.1%	101.7%	107.6%	147.6%	101.9%	120.7%	95.2%	125.6%
Percent Day Case Admissions against 2019/20		90.9%	101.3%	95.3%	89.4%	87.4%	87.5%	130.9%	87.7%	125.8%	86.3%	98.1%
Percent Ordinary Elective Admissions against 2019/20		89.0%	107.6%	81.0%	85.8%	101.5%	79.0%	216.1%	73.3%	141.9%	92.0%	111.5%
Percent Total Elective Admissions against 2019/20		90.6%	102.1%	93.5%	88.9%	89.3%	86.4%	141.6%	86.4%	127.3%	87.0%	99.6%

(Includes all APC except Regular Attenders)												
Indicator	Month	ICB BOB		Sub ICB			NHS Trust		BHT		Royal Berkshire	
		Activity	2019/20	Bucks Activity	Oxford Activity	Berks West Activity	OUH Activity	2019/20	Activity	2019/20	Activity	2019/20
Proportion of patients discharged to usual place of residence	Dec 22	90.4%	91.8%	94.6%	89.5%	88.4%	89.1%	91.9%	95.1%	94.9%	90.1%	92.5%

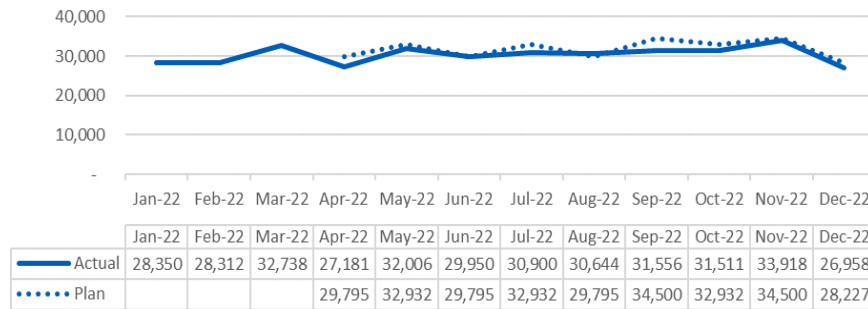
		ICB BOB		Sub ICB Bucks		NHS Trust OUH		BHT		Royal Berkshire		
Indicator	Month	Activity	Plan	Activity	Oxford Activity	Berks West Activity	Activity	Plan	Activity	Plan	Activity	Plan
Diagnostic activity levels – Imaging	Dec 22	43,648	38,231	14,360	20,862	8,426	23,909	22,136	9,434	11,969	7,882	6,661
Diagnostic activity levels – Physiological Measurement		2,500	2,506	1,019	1,180	301	1,565	1,769	399	670	182	219
Diagnostic activity levels – Endoscopy		3,260	3,264	568	1,995	697	1,514	1,486	347	645	653	741
Diagnostic activity levels – CT (Imaging)		19,341	14,217	5,429	10,000	3,912	12,027	9,552	4,135	4,201	3,705	2,400
Diagnostic activity levels – MRI (Imaging)		9,168	8,028	3,128	3,817	2,223	4,942	4,974	1,726	2,172	2,035	1,860
Diagnostic activity levels – Non-Obstetric Ultrasound (Imaging)		15,139	15,986	5,803	7,045	2,291	6,940	7,610	3,573	5,596	2,142	2,401
Diagnostic activity levels – Echocardiography (Physiological Measurement)		2,500	2,506	1,019	1,180	301	1,565	1,769	399	670	182	219
Diagnostic activity levels – Colonoscopy (Endoscopy)		1,368	1,173	214	859	295	638	601	146	182	284	264
Diagnostic activity levels – Flexi Sigmoidoscopy (Endoscopy)		458	717	85	249	124	230	291	63	202	112	195
Diagnostic activity levels – Gastroscopy (Endoscopy)		1,434	1,374	269	887	278	646	594	138	261	257	282

Planned Care

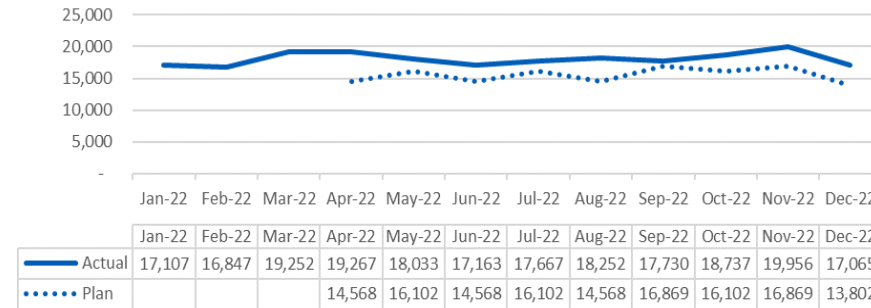


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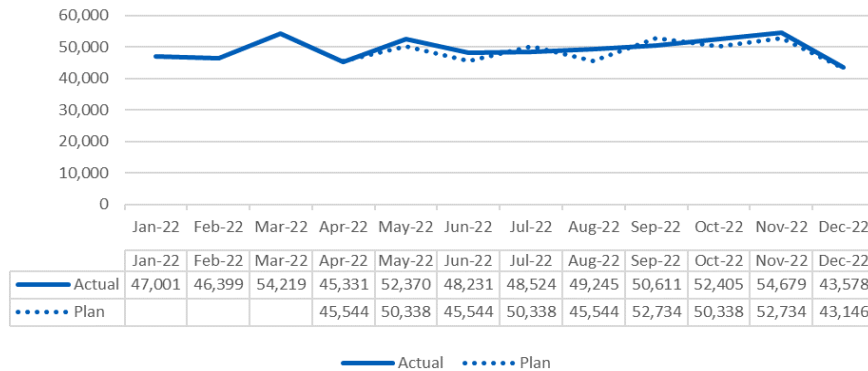
BOB ICB - GP referrals



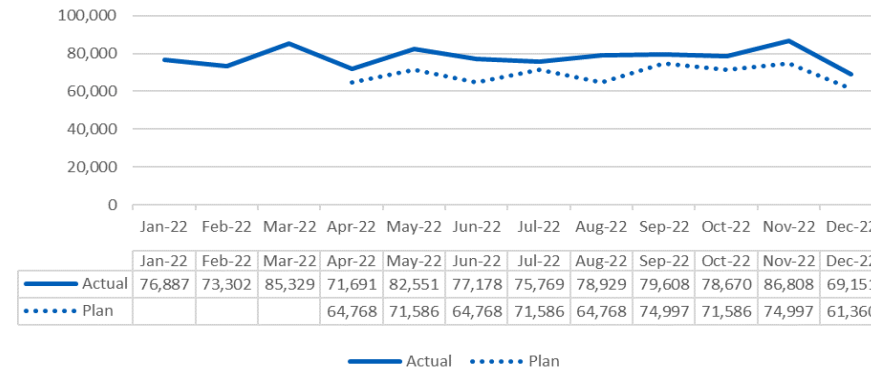
BOB ICB - Other Referrals



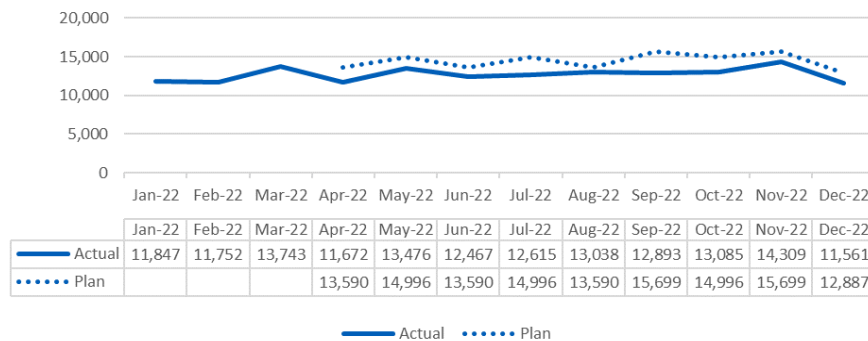
BOB ICB - Consultant-led first outpatient attendances (Spec acute)



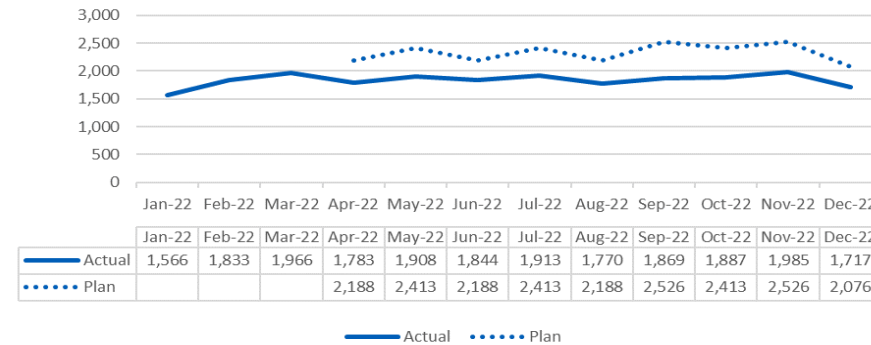
BOB ICB - Consultant-led follow-up outpatient attendances (Spec acute)



BOB ICB - Total number of Specific Acute elective day case spells in the period



BOB ICB - Total number of Specific Acute elective ordinary spells in the period

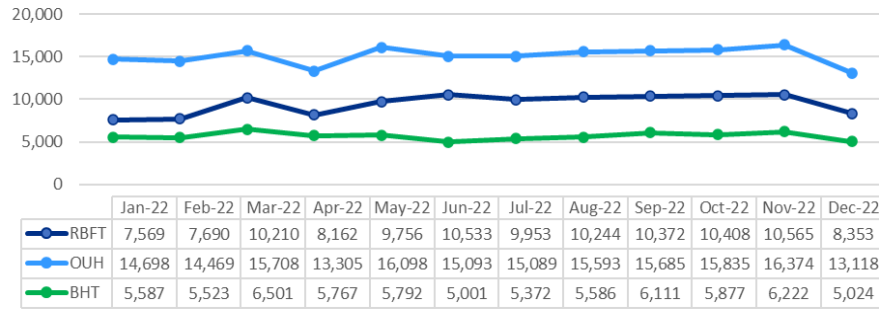


Planned Care

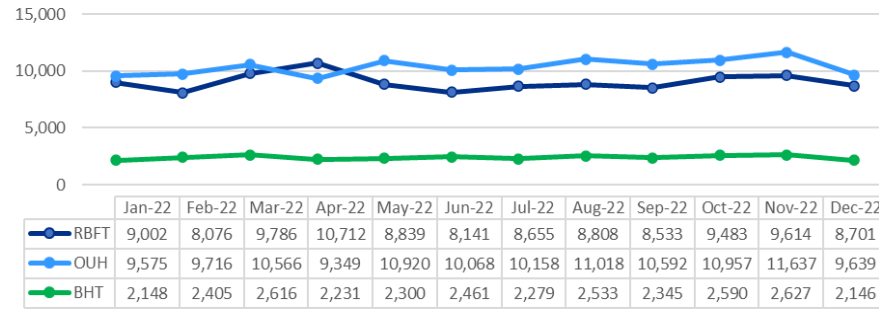


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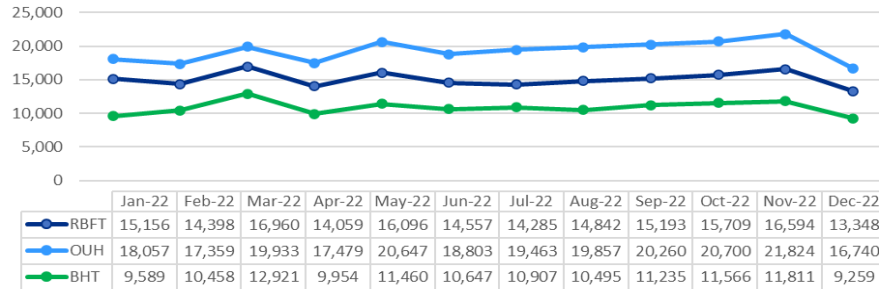
NHS Trusts - GP referrals



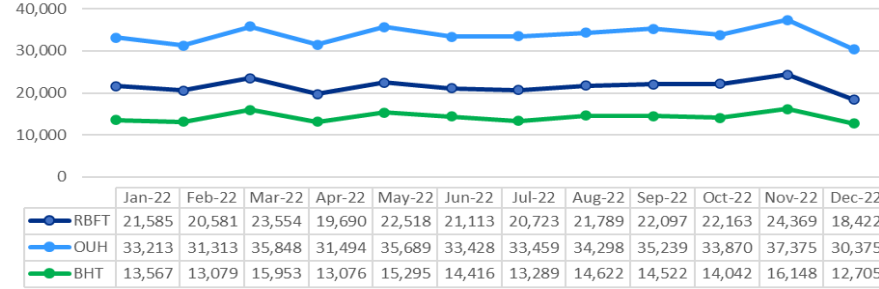
NHS Trusts - Other Referrals



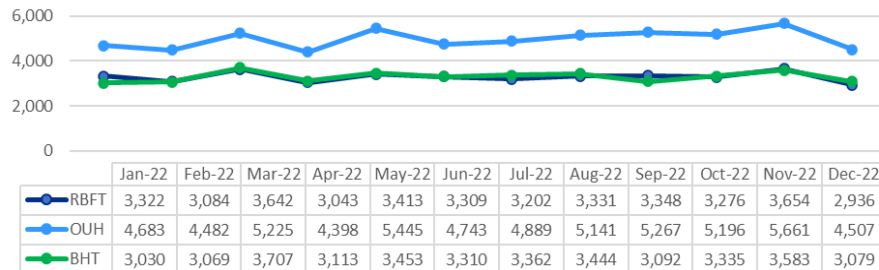
NHS Trusts - Consultant-led first outpatient attendances (Spec acute)



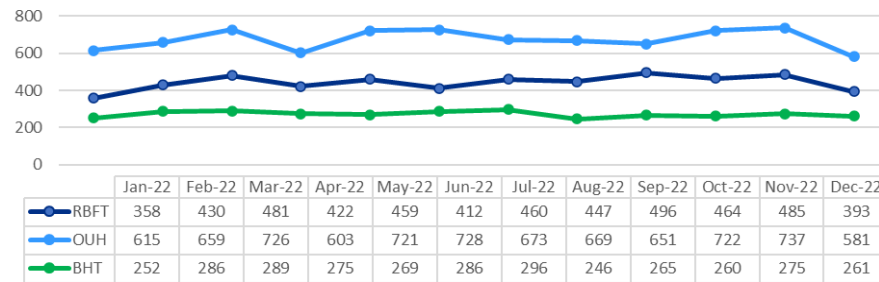
NHS Trusts - Consultant-led follow-up outpatient attendances (Spec acute)



NHS Trusts - Total number of Specific Acute elective day case spells in the period



NHS Trusts - Total number of Specific Acute elective ordinary spells in the period



RBFT OUH BHT

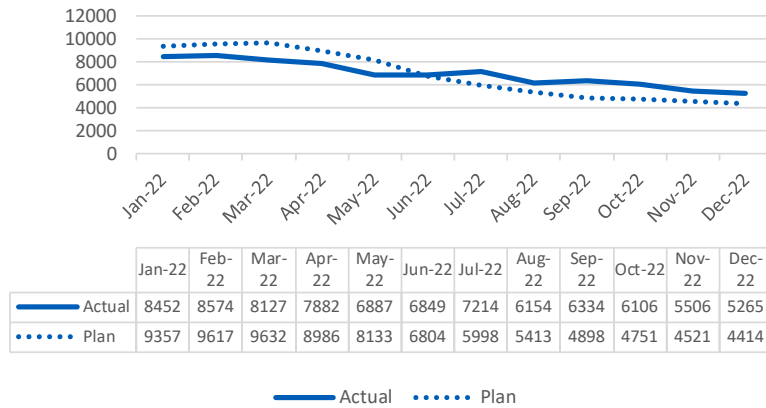
RBFT OUH BHT

Planned Care – RTT (Referral to Treatment)

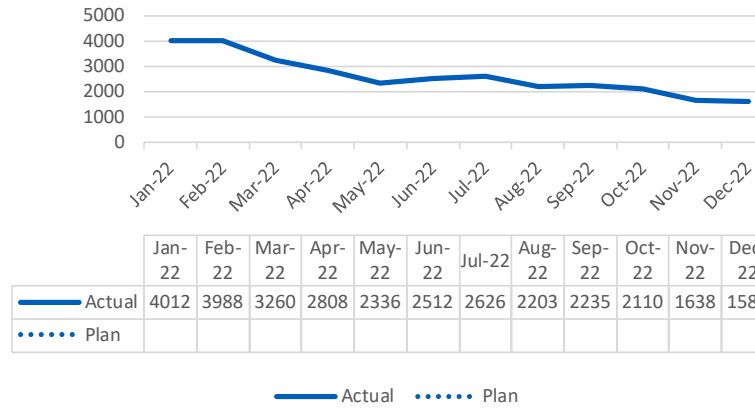


Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board

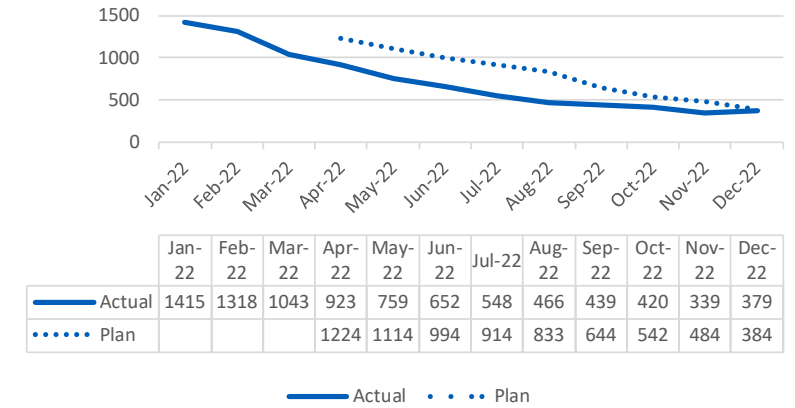
BOB (3 main NHS trusts) - 52 Week Waits



BOB (3 main NHS trusts) - 65 Week Waits

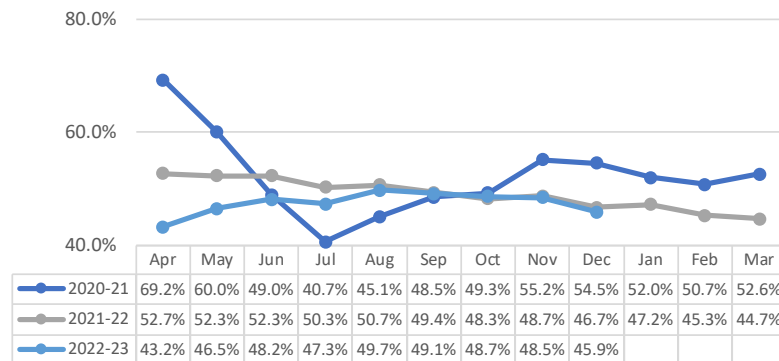


BOB (3 main NHS trusts) - 78 Week Waits

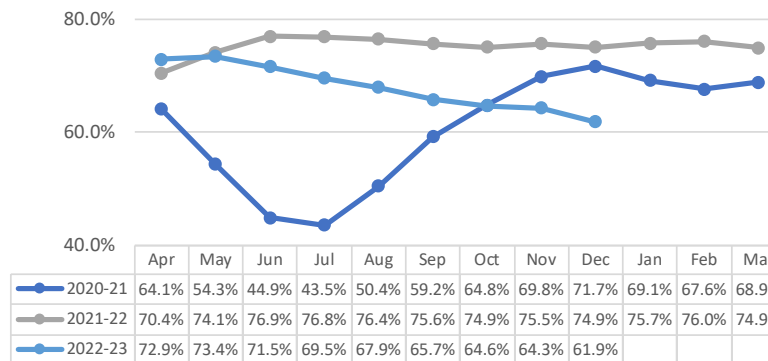


Please note:- The above charts give the combined position for Buckinghamshire Healthcare, Oxford University Hospitals and Royal Berkshire Foundation Trusts (whole provider - all commissioner)

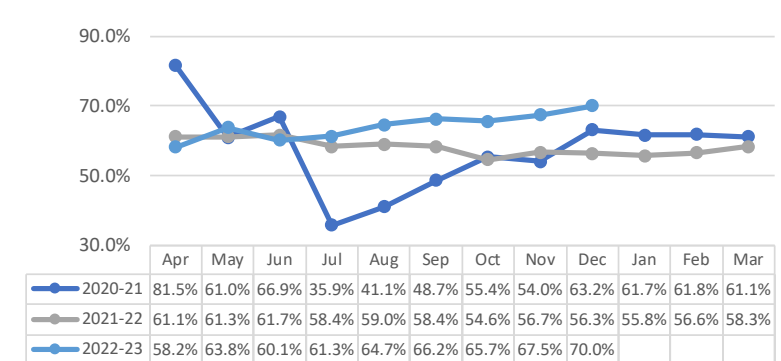
BHT - RTT Incomplete Pathways (% within 18 Weeks)



OUHFT - RTT Incomplete Pathways (% within 18 Weeks)



RBFT - RTT Incomplete Pathways (% within 18 Weeks)

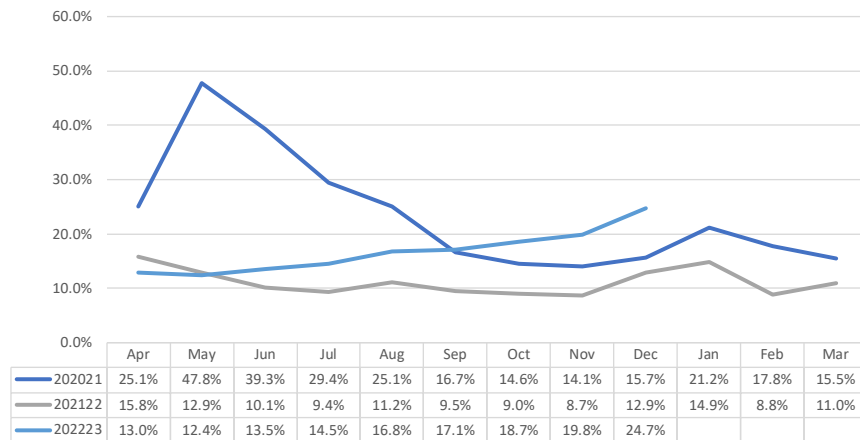


Planned care – Diagnostics

Indicator	SOF Flag	Month	ICB BOB Activity	ICB BOB Plan	Sub ICB Bucks Activity	Oxford Activity	Berks W Activity	NHS Trust OUH Activity	NHS Trust OUH Plan	BHT Activity	BHT Plan	RBFT Activity	RBFT Plan
Percent of Diagnostics Waiting list 6 weeks or more		Dec 22	26.9%	1.0%	40.4%	11.2%	31.0%	10.2%	1.0%	42.8%	1.0%	29.4%	1.0%
Percent of Diagnostic Tests against 2019/20			111.1%		104.9%	121.1%	100.7%	113.6%		101.3%		109.3%	
Percent of Current MRI list waiting 6 weeks or more			30.9%	1.0%	44.5%	8.1%	33.6%	5.9%	1.0%	59.5%	1.0%	35.1%	1.0%
Percent of MRI Tests against 2019/20			116.9%	102.4%	110.1%	134.3%	103.1%	107.6%	108.3%	107.1%	134.7%	113.4%	103.7%
Percent of Current CT list waiting 6 weeks or more			15.4%	1.0%	34.4%	1.9%	10.4%	0.7%	1.0%	26.6%	1.0%	8.3%	1.0%
Percent of CT Tests against 2019/20			134.0%	98.5%	119.1%	144.2%	133.0%	137.5%	109.2%	121.4%	123.3%	136.2%	88.2%
Percent of Current Non-obstetric Ultrasound list waiting 6 weeks or more			17.9%	1.0%	35.9%	3.9%	19.6%	2.9%	1.0%	30.0%	1.0%	8.9%	1.0%
Percent of Non-obstetric Ultrasound Tests Against 2019/20			95.9%	101.2%	90.9%	109.1%	77.6%	104.7%	114.8%	82.5%	129.1%	94.7%	106.1%
Percent of Current Colonoscopy list waiting 6 weeks or more			49.0%	1.0%	64.1%	15.6%	64.3%	3.2%	1.0%	70.4%	1.0%	66.6%	1.0%
Percent of Colonoscopy Tests Against 2019/20			111.3%	95.4%	103.9%	121.3%	93.7%	110.2%	103.8%	117.7%	146.8%	90.7%	84.3%
Percent of Current Flexi sigmoidoscopy list waiting 6 weeks or more			51.7%	1.0%	65.8%	19.0%	62.5%	2.8%	1.0%	75.5%	1.0%	66.9%	1.0%
Percent of Flexi sigmoidoscopy Tests Against 2019/20			53.2%	83.3%	43.8%	64.3%	44.3%	62.3%	78.9%	36.4%	116.8%	47.9%	83.3%
Percent of Current Gastroscopy list waiting 6 weeks or more			38.6%	1.0%	66.6%	10.6%	38.9%	10.5%	1.0%	72.5%	1.0%	39.3%	1.0%
Percent of Gastroscopy Tests Against 2019/20			105.1%	100.7%	97.1%	115.9%	86.3%	111.0%	102.1%	68.7%	129.9%	104.9%	115.1%
Percent of Current Echocardiography list waiting 6 weeks or more			32.2%	1.0%	35.8%	22.9%	37.7%	20.2%	1.0%	19.3%	1.0%	22.4%	1.0%
Percent of Echocardiography Tests Against 2019/20			99.7%	100.0%	107.6%	90.4%	118.5%	97.1%	109.7%	72.4%	121.6%	93.3%	112.3%

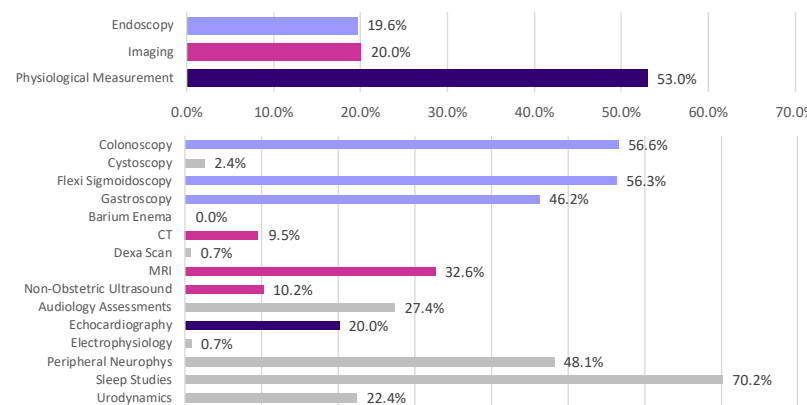
Diagnostic performance year on year

Percentage of patients on the waiting list at a BOB ICS Acute NHS Trust who have been waiting six weeks or more

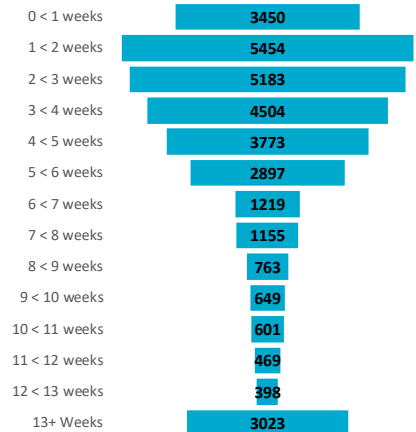


Latest diagnostics performance by test for December 2022

Percentage of patients on the waiting list at a BOB ICS Acute NHS Trust waiting six weeks or more

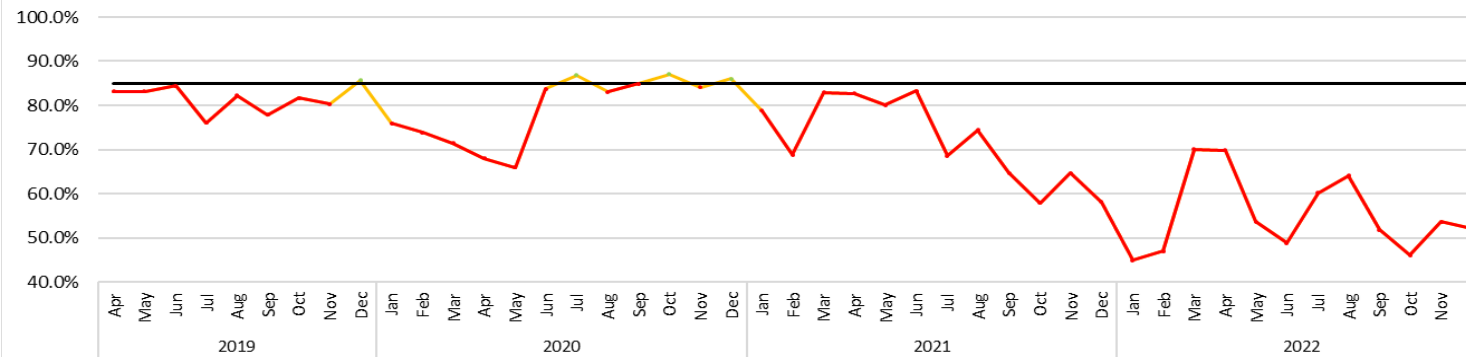


Waiters by weeks waited for December 2022

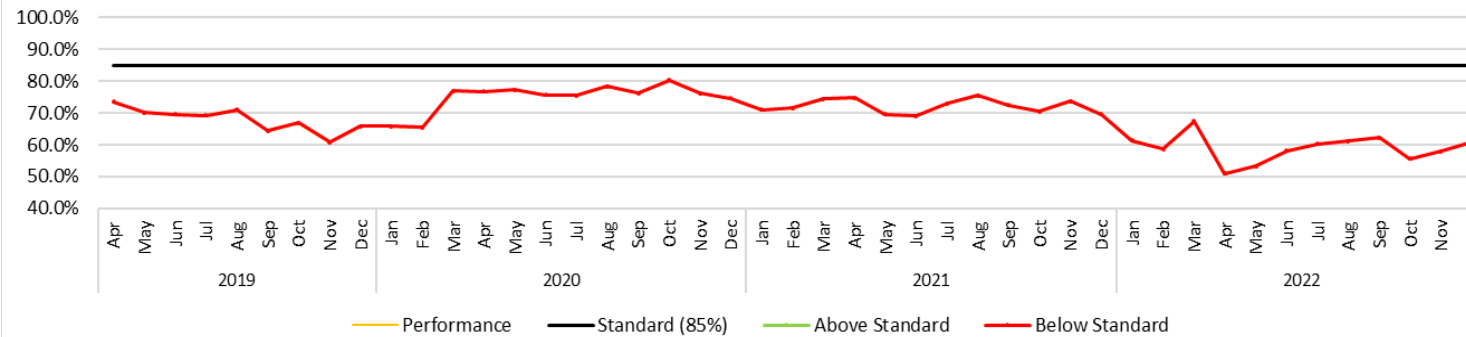


Code	Indicator	OF Flag		Standard	England	South East	BOB Acutes	BHT	OUH	RBFT
E.B.6	Percentage of patients seen within two weeks of an urgent GP referral for suspected cancer		Dec 22	93%	80.3% ↑	85.0% ↑	87.1% ↑	94.4% ↑	79.1% ↓	92.4% ↑
E.B.30	Cancer - urgent referral seen	S010a			213442 ↓	33398 ↓	6393 ↓	2003 ↓	2190 ↓	1826 ↓
E.B.31	Cancer - first treatments	S010b			25413 ↓	4293 ↓	825 ↓	195 ↓	430 ↓	205 ↓
E.B.7	Percentage of patients seen within two weeks of an urgent referral for breast symptoms where cancer was not initially suspected			93%	72.5% ↓	74.2% ↑	97.5% ↑		95.7% ↑	100.0% ↑
E.B.27	Percentage meeting faster diagnosis standard	S012a		75%	70.7% ↑	72.2% ↓	74.3% ↑	65.2% ↑	82.0% ↑	72.1% ↑
E.B.8	Percentage of patients receiving first definitive treatment within one month (31-days) of a cancer diagnosis (measured from 'date of decision to treat')			96%	92.7% ↑	93.6% ↑	88.6% ↑	82.6% ↑	84.9% ↑	97.1% ↑
E.B.9	Percentage of patients receiving first subsequent treatment within 31-day, where that treatment is Surgery			94%	81.9% ↑	84.9% ↑	75.3% ↓	53.2% ↓	75.3% ↓	85.7% ↓
E.B.10	Percentage of patients receiving first subsequent treatment within 31-day, where that treatment is an Anti-Cancer Drug Regimen			98%	97.9% ↓	97.8% ↓	98.7% ↓	100.0% ↑	98.1% ↓	100.0% →
E.B.11	Percentage of patients receiving first subsequent treatment within 31-day, where that treatment is a Radiotherapy Treatment Course			94%	90.7% ↑	85.9% ↑	95.9% ↑		97.9% ↑	87.1% ↑
E.B.12	Percentage of patients receiving first definitive treatment within two months (62 days) of an urgent GP referral for suspected cancer			85%	61.8% ↑	66.5% ↑	59.6% ↑	52.2% ↓	61.0% ↑	60.7% ↑
E.B.13	Percentage of patients receiving first definitive treatment within 62 days of referral from NHS Screening Service			90%	73.0% ↑	70.8% ↑	56.1% ↓	77.3% ↑	23.1% ↓	73.3% ↓
E.B.14	Percentage of patients receiving first definitive treatment within 62 days of a consultants decision to upgrade their priority status			86%	77.4% ↑	82.2% ↑	75.9% ↓	92.3% ↑	33.3% ↑	77.3% ↓

62 Day Standard - Performance (BHT)

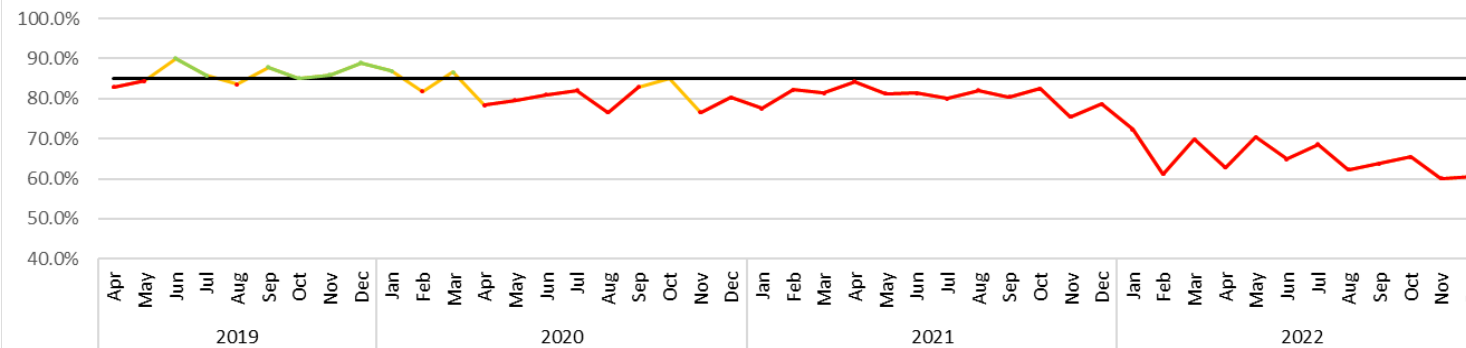


62 Day Standard - Performance (OUH)



— Performance — Standard (85%) — Above Standard — Below Standard

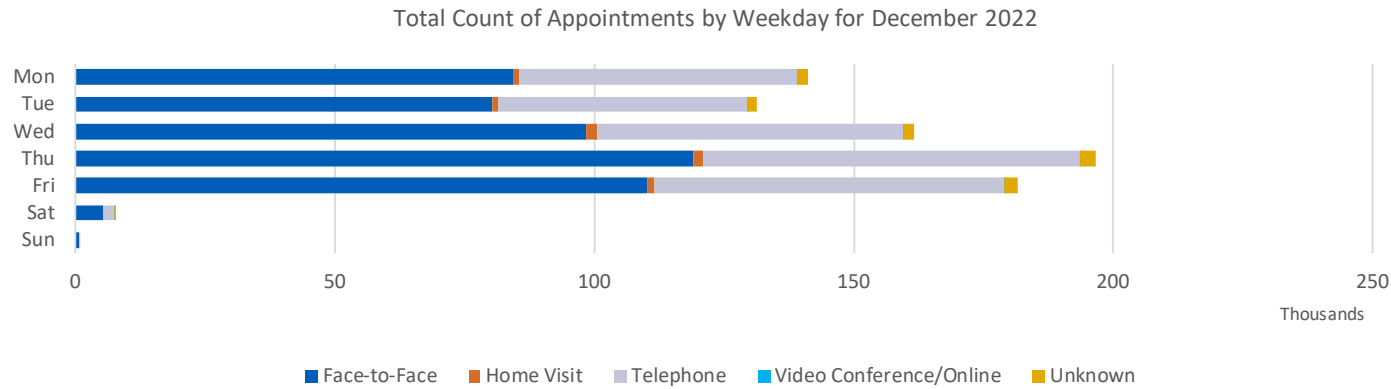
62 Day Standard - Performance (RBFT)



Primary Care



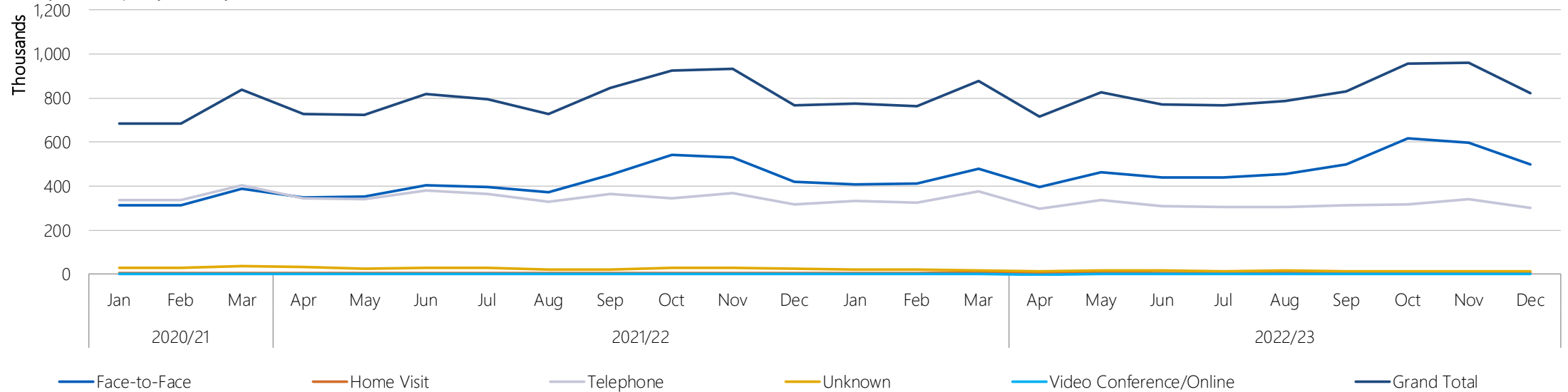
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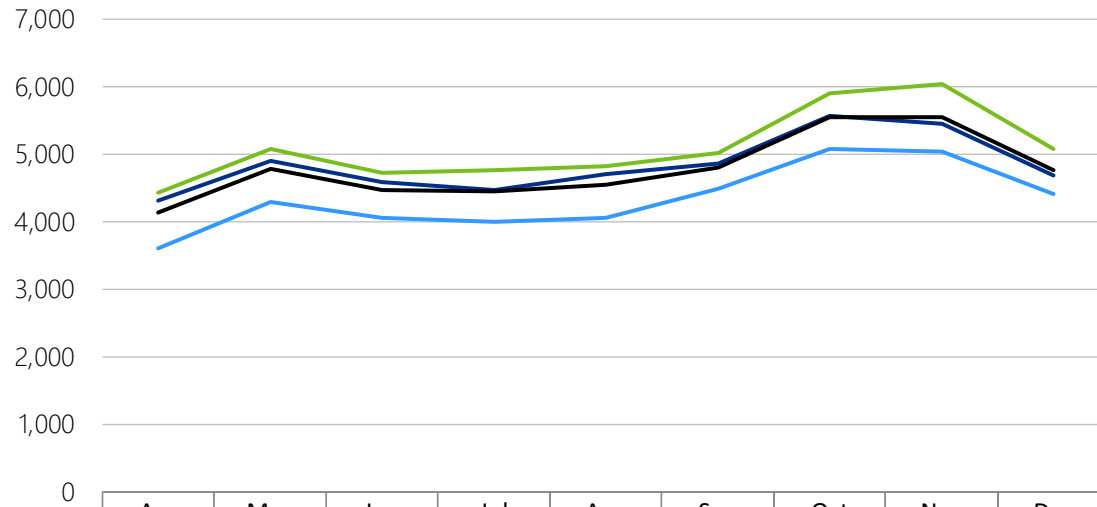
Face to Face	Home Visit	Telephone	Video / Online	Unknown
498K	8,144	302K	502	12K
Appointments for December 22				

Overall Consultation Levels

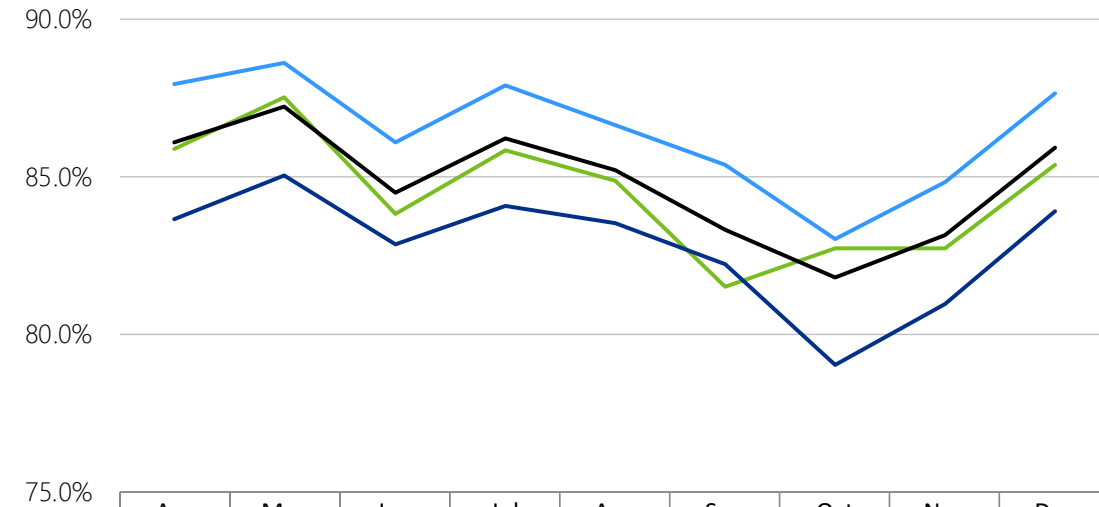
GP Appointments by Month split by modality



**S001a Number of General Practice Appointments per 10,000
Weighted Patients**



**Percentage of General Practice Appointments seen within 14
days of Being Booked**



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	2022/23								
Buckinghamshire	4,423	5,065	4,728	4,768	4,817	5,013	5,895	6,031	5,067
Oxfordshire	3,607	4,283	4,046	4,000	4,048	4,480	5,074	5,028	4,408
Berkshire West	4,312	4,895	4,576	4,472	4,700	4,865	5,572	5,440	4,682
BOB	4,137	4,773	4,472	4,444	4,544	4,805	5,546	5,549	4,751

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	2022/23								
Buckinghamshire	85.9%	87.5%	83.8%	85.8%	84.9%	81.5%	82.7%	82.7%	85.4%
Oxfordshire	87.9%	88.6%	86.1%	87.9%	86.6%	85.4%	83.0%	84.8%	87.7%
Berkshire West	83.7%	85.0%	82.9%	84.1%	83.5%	82.2%	79.0%	81.0%	83.9%
BOB	86.1%	87.2%	84.5%	86.2%	85.2%	83.3%	81.8%	83.1%	85.9%

Primary care services have faced significant pressure over the winter period with high levels of respiratory activity exacerbated by demand relating to Strep A. Both October and November saw sustained high levels of activity. This eased in December, acknowledging the impact of Christmas and New Year but the proportion of same day appointments increased to 50.6% an improvement on previous months. 86% were seen within 2 weeks, again this is an improved position. 60.7% of appointments took place face-to-face compared to 72.5% prior to the pandemic (noting data quality has improved over time). This is a slight reduction from recent months. LMC data suggests 3% of registered patients contact their practice on any given day and that there was an 18% increase in contacts following Strep A media coverage.

Current performance on **key access improvement workstreams** is as follows

- **Capacity and demand tool roll out** - 29 practices are part of the roll-out of the Apex with all practices being supported to implement where possible during Q4.
- **Enhanced Access** - All 50 PCNs continue to deliver enhanced access, with 8 arrangements due for review in January.
- **Roll-out of advanced telephony** – as at end of December, 91 practices live, further 51 due to go live by March 2023. 15 practices not participating.
- **Community Pharmacy Consultation Service** – 68% (109) practices are live and a further 24% (38) are engaged in the programme. There was a decrease from 2,786 referrals in December to 1,404 in January but note that December saw an 85% increase. Across BOB 10,828 referrals have been made since April 2022, which equates to approximately 1,805 hours of saved practice appointment time, with potential cost savings of £78,647 (based on GP average costs).
- **Digital access** - November 2022 58.8% of patients aged 13+ had the NHS App compared to 49.07% in April and 57.04% nationally.
- **Reading Urgent Care Centre** opened with capacity to see 100 patients/day (combination of self-presenters and patients referred from primary care and ED). Current activity circa 70 patients/day.
- **Winter comms** plans in place.

Additional mitigating actions taken to address winter pressures – December/January

- **Additional workforce capacity** – practices funded for additional session per 1000 patients in two tranches – up to 2,800 sessions
- **Acute Respiratory Hub** funding used to create virtual respiratory hubs and increase UCC/111 CAS capacity beyond 420 slots/day to include UCC provision at JR in Oxford. NHS 111 CAS launched in BW.
- Guidance issued on routine **workload prioritisation**
- **Primary & Community Care Cell** established to oversee response

Mental Health Services

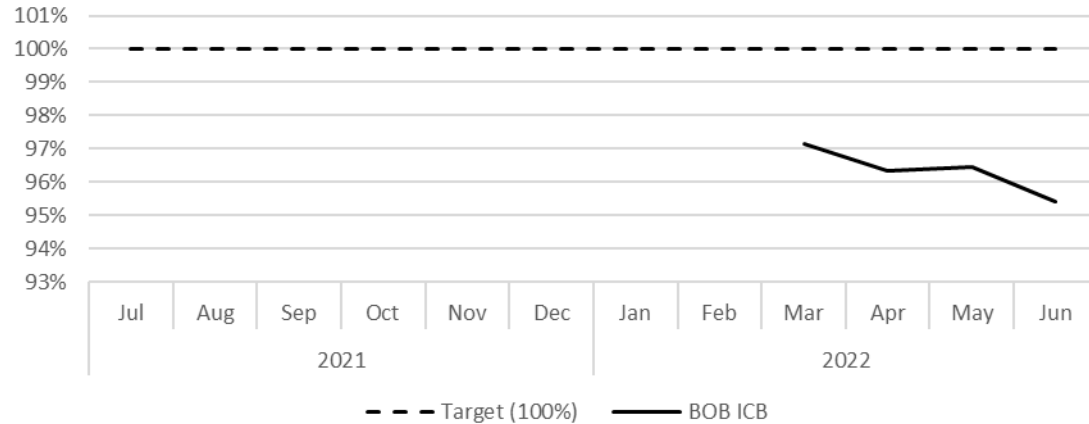
Indicator	OF Flag	Period	Standard	Plan	BOB ICB	Bucks	Oxon	Berks. West	Berkshire Healthcare	Oxford Health
Total access to Talking Therapies services		Rolling 3 months to Nov 22		9490	8745	2945	3305	2495	4670	6215
Talking Therapies - Access Rate			6.25%		5.7%	6.8%	5.4%	5.3%		
Talking Therapies - Moving to Recovery			50%		51.6%	50.9%	52.2%	51.4%	48.4%	48.6%
Talking Therapies - Treated within 6 Week		Nov 22	75%		97.1%	99.2%	100.0%	91.9%	94.2%	98.5%
Talking Therapies - Treated within 18 Week			95%		99.5%	100.0%	100.0%	98.4%	100.0%	100.0%
Dementia Diagnosis Rate		Dec 22	67%	64%	60.00%	56.8%	61.7%	61.3%		
Children and Young People (ages 0 - 17) Mental Health Services access (Number with 1+ Contact)	S084a	Jun 22	100%		99.8%					
CYP Eating Disorders - Urgent (1 week)		Rolling 12 months to Nov 22	95%	83%	68.66%	70.0%	28.6%	74.0%	68.9%	67.86%
CYP Eating Disorders - Routine (4 weeks)			95%	63%	40.99%	33.3%	15.8%	77.9%	78.6%	44.56%
Severe Mental Illness (SMI) 6 Health Checks completed Percent of Register		2022/23 Q3	60%		43.42%	44.0%	40.2%	48.1%		
People with severe mental illness receiving a full annual physical health check and follow up interventions	S085a	2022/23 Q3	100%		72.3%					
Inappropriate adult acute Mental Health Out of Area Placement (OAP) bed days	S086a	Three Months to Nov 22	0		1470	365	625	485	1445	1000
Overall Access to Community Mental Health Services for Adults and Older Adults with Severe Mental Illnesses	S110a	Jun 22	100%		95.4%					

Please Note: The accurate reflection of activity. In order to assist users until the cyber incident and its effects are resolved, NHS England has produced national level cyber incident has meant that national level data for CYP ED cannot be considered an estimates for Q2 2022-23 and Q3 2022-23, calculated through imputation.

Mental Health Services

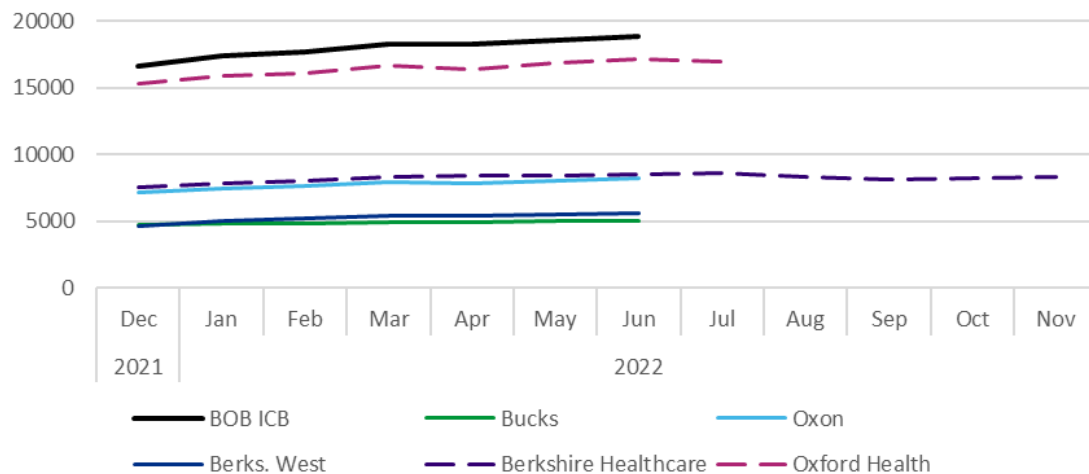
**Buckinghamshire, Oxfordshire
and Berkshire West
Integrated Care Board**

S110a Overall Access to Community Mental Health Services for Adults and Older Adults with Severe Mental Illnesses against trajectory

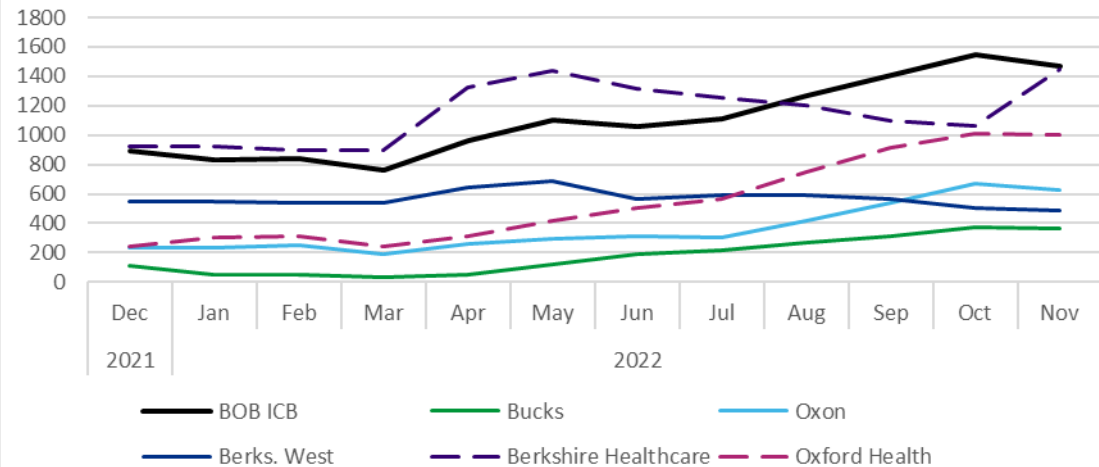


Trajectory denominator is defined as: LTP indicative trajectory (weighted share of national LTP ambition 2022/23)

People in contact with children and young people's mental health services at the end of the reporting period



S086a Inappropriate adult acute mental health Out of Area Placement (OAP) bed days



The ICB and SUB ICB Breakdown has not been available since June 2022. Additionally the latest data available for Oxford Health is for July 2022.

Total access to Talking Therapies Performance

- The total access rate, 8,745 remains below the plan of 9,490 and access rate 5.7% is below the standard of 6.25%. Across the region access remains below target. Services are continuing with their recovery plans including active marketing (to increase referrals), including outreach to older adults and BAME groups. It is unlikely that services will be able to meet the planned access trajectory in 22/23, and further work will be needed to achieve the minimum access trajectory in 23/24.
- Oxfordshire: The access trajectory for 22/23 remains below the plan. The Service is continuing with its recovery plans including active marketing (to increase referrals), including outreach to older adults and BAME groups. It is unlikely the service will meet the planned access trajectory in 22/23, and further work will be needed to reach the minimum access targets in 23/24. The recovery rates quoted for November do not match local data of 53.7% in November
- Buckinghamshire: The access trajectory for 22/23 has risen from Q1 to Q3 but remain below the plan. The Service is continuing with its recovery plans including active marketing (to increase referrals), including outreach to older adults and BAME groups. It is unlikely the service will meet the planned access trajectory in 22/23, and further work will be needed to reach the minimum access targets in 23/24.
- Recovery rates for November do not match local data of 54.1% in November – this will be reviewed and reconciled
- BHFT: The access trajectory for 22/23 remains below target. The Service is continuing with their recovery plan, however, it is not anticipated that the service will achieve the access trajectory. A QI project focusing on increasing access has been agreed.

Dementia Diagnosis Rate(DDR) Performance

- This is showing as at 60.0%, which is a slight improvement on the previous, available figure 59.7% in the last report for (Sept) The plan is 64%, and thus the performance is below plan. We are awaiting updated calculations from the region on the DDR, resulting from changes to the way figures are collected and NHS Digital (NHSD)
- SWC CSU has secured funding to deliver a support programme across the South East and South West regions along the dementia pathway, and we are engaging with this. BOB ICS have also requested some specific Dementia Project support from the CSU, which is currently being scoped out
- Please note however within the data - OHFT data not available due to cyber incident with Carenotes, therefore no narrative
- BHFT is at 61.3% however this is still below plan. We are awaiting updated calculations from the region on the DDR.

Children and Young People (CYP) Eating Disorders - Urgent (1 week) Performance

- The rolling 12-month period to Nov 22, shows ICS performance at 68.66%, as compared with 56.6% rolling 12-month to Sept 22. The metric has been affected by the cyber attack within OHFT – with data for BOB thus incomplete and this will affect the regional aggregated figure. For the region access waiting times for urgent referrals have declined in quarter 3 2022/23 - 73.5% of young people with an urgent referrals. National comparison isn't available for Q3.
- Berkshire Healthcare: The 12-month rolling figure to Nov 22 was 68.9% and for Berks West was 74.0% compared to a plan of 83%. The main factors affecting achievement of targets are: Turnover & vacancies; Referrals not containing information that indicates the presence of an eating disorder so not transferred to BEDS CYP until late; Small numbers of referrals meaning that 1 case missing the target by 1 day can result in a breach. Countermeasures in place are: QI recruitment and retention project; The workforce position has improved significantly; CYPF Referral Project (Trust level) which aims to improve referral information & triage; CAMHS CPE QI driver metric to reduce waiting times for all referrals. ; 100% compliance achieved in month 10.
- Oxfordshire :Data not reportable via Carenotes due to cyber incident, but local intelligence suggests that all urgent referrals are being seen within 1 week unless patient choses otherwise.
- Buckinghamshire: The service has experienced a slow down of referrals and although not able to report via Carenotes, local manual count shows improvement from Oct onwards, and from Oct to Dec the 6 referrals have all met the WTS. Investment is planned for next FY to meet WTS and treatment expectations. Positive discussion started on rolling our ALPINE training in Stoke Mandeville.

CYP Eating Disorders - Routine (4 weeks) Performance

- Performance is 40.99% as compared with 34.0% for the rolling 12-month period to Sep 22. Again, noting the impact of the cyber attack on the regional figures, performance stands at 73.6% for a less urgent referral started treatment within 1 and 4 weeks (rolling 12 months) of referral, respectively, against a standard of 95%. National comparison isn't available for Q3
- Berkshire Healthcare: The 12- month rolling figure to Nov 22 was 78.6% and for Berks West was 77.9% compared to a plan of 63%. Root causes and countermeasures are as described for the Urgent performance target. 100% compliance achieved in month 10.
- Oxfordshire: Data not reportable via Carenotes due to cyber incident, but local intelligence suggests that the current waiting time for assessment and treatment is 4.5 weeks
- Buckinghamshire: Service has experienced a slowdown of referrals and although not able to report via Carenotes, local manual count shows improvement from Oct onwards, and from Oct to Dec the 16 referrals have all met the WTS. Investment is planned for next FY to meet WTS and treatment expectations. Progress continues with the PEACE programme to support YP with co-morbid ED and Neuro presentations. ICS working group supporting shared practise and joint work, e.g., on ARFID pilot

Severe Mental Illness (SMI) 6 Health Checks Performance

- ICS performance was 43.42%, against the 60% standard. This is an improvement on the figure for 41.39% for M7 Within the ICB, Point of Care Testing (PoC) for SMI health checks have an equality focus and is targeting deprived areas
- OHFT data not available due to cyber incident with Carenotes, therefore no narrative.
- BHFT: VCSE roles and POC testing has been implemented to support achievement of this standard, however we remain below target.
- **Inappropriate adult acute Mental Health Act Out of Area Placement (OAP) bed days NB this wasn't included in the last report however showing as red**
- This was 1470 within the 2 months to Nov 22, against the ambition on 0. We would however note that in some cases, an out of area placement may be a patients preferred option (this may be due to family circumstances, patient choice The figure was 1410 in the 3 months to January 22
- Buckinghamshire: During the time period there was significant pressure for female bed requests, so even with discharges we till were unable to meet demand with our usual capacity. Usually there were also 3 older adult OAPs. There was a significant challenge in finding placements for current inpatient during this time with at least 6 patients who were challenging to discharge.
- Oxfordshire: Over the last few months we have continued to experience significant demand on female beds, which led to an increased number of OAPs. However, with the enhancement of the Patient flow team this has enabled a clear focus on flow both in and out of the inpatient setting and enabled significant oversight of patients in OAPS leading to reduced length of stay. We have held 2 'focus on flow' weeks since December which have supported the reduction of patients in OAPS and no further OAPS since December

BHFT: Over the past few months has continued to experience significant demand for acute beds which have resulted in the use of inappropriate OAPs. BHFT has embraced the 100 challenge alongside our existing focus on patient flow and clinically ready for discharge through the bed optimisation programme. Despite increased demand for OPMH beds we have not sent any patient to an OAP bed.

Learning Disability and Autism Services



Buckinghamshire, Oxfordshire
and Berkshire West
Integrated Care Board

- Annual Health Checks (AHC) Update: 44.5% achievement in December which is slightly behind trajectory.
- Adult In-patients – over trajectory by 19 people. As predicted, we have seen an increase due to late notification from Mental Health wards, known complex community placement breakdown. . Admission avoidance interventions actively in place. 5 discharges achieved as planned in January and 2 new admissions, all appropriate
- Continued system pressures around inpatient activity and focus on length of stay over 5 years. Four with plans to move into community 22/23. Eleven in secure provision.
- Children and Young People (CYP) Inpatients – 2 admissions and 2 discharges in January. All admissions are appropriate to meet the severity and complexity of the young people. Projects with mental health re Tier 4 admission reduction pilot. No further discharges are planned for Q4 and therefore Q4 trajectory will not be achieved
- LeDeR - Bucks remain below compliance. South-West CSU resource identified to work through backlog with recovery expected by end of year. Mitigation in place through local reviews of all cases.
- A recovery plan is in development for the inpatients and will be completed by March 2023

Definitions

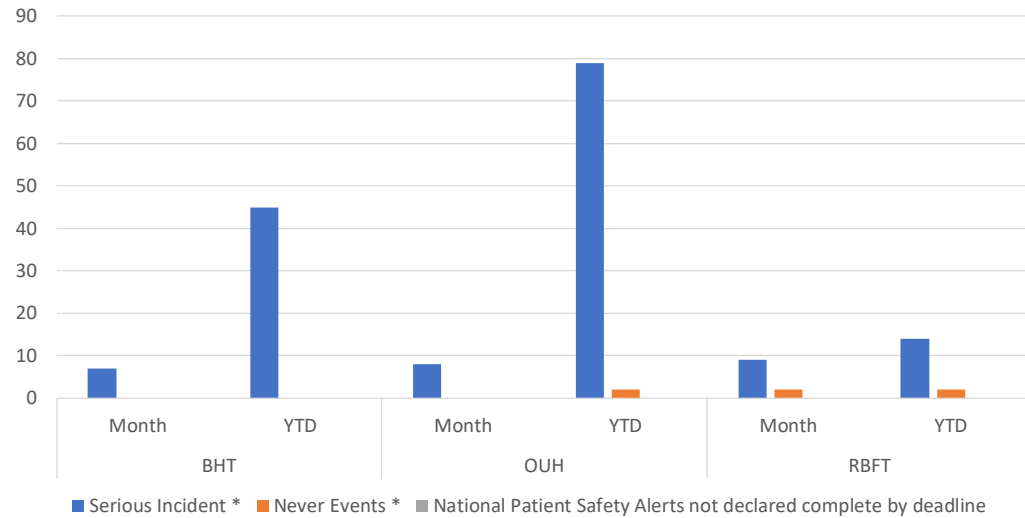
LeDeR (Learning from lives and deaths – People with a learning disability and autism people) Completion percentage of eligible notifications (> 6-month notification date)

Annual Health Checks (AHCs): Improving the uptake of AHCs in Primary Care for people with a learning disability, so that at by 2023/2024 at least 75% of those eligible (aged 14+) have a health check each year.

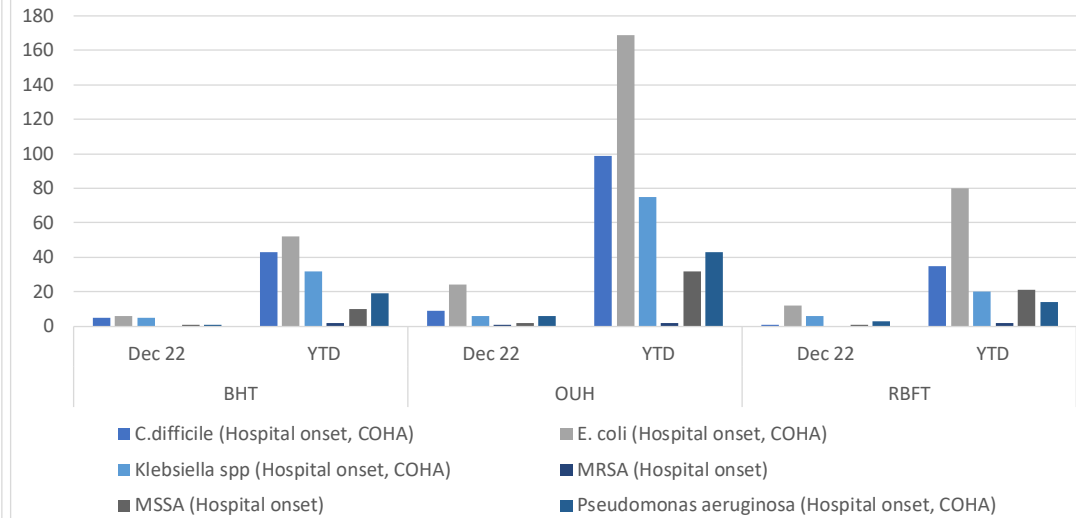
Adult In-patients: By 2023/24, no more than 30 adults per million with a learning disability or autism cared for in an inpatient unit. For BOB, that is 40 for the population target, and 37 as a Long Term Plan target

CYP In-patients: By 2023/24, no more than 12-15 children and young people (CYP) per million with a learning disability or autism cared for in an inpatient unit. For BOB, 5 for the population and Long Term Plan target

Serious Incidents/ Never Events and Safety Alerts



Infection Control



Quality							
Indicator	BHT		OUH		RBFT		
	Month	YTD	Month	YTD	Month	YTD	
Serious Incident *	7	45	8	79	9	14	
Never Events *	0	0	0	2	2	2	
National Patient Safety Alerts not declared complete by deadline	0	0	0	0	0	0	

* The Serious Incident and Never Events YTD figures for BHT are for April, May, June, August - December 2022. The data for Royal Berkshire are for April, May, June and August 2022. The latest National Patient Safety Alerts not declared data is for January 2023.

Infection Control							
Indicator	BHT		OUH		RBFT		
	Dec 22	YTD	Dec 22	YTD	Dec 22	YTD	
C.difficile (Hospital onset, COHA)	5	43	9	99	1	35	
E. coli (Hospital onset, COHA)	6	52	24	169	12	80	
Klebsiella spp (Hospital onset, COHA)	5	32	6	75	6	20	
MRSA (Hospital onset)	0	2	1	2	0	2	
MSSA (Hospital onset)	1	10	2	32	1	21	
Pseudomonas aeruginosa (Hospital onset, COHA)	1	19	6	43	3	14	

- There was only one Never Event for RBFT. The other for BW place was for BHFT - this was declared in January, incident in December - will be on Jan data
- Never Event at RBFT for "wrong site surgery" relating to an injection in the incorrect eye. This has been discussed at the weekly team huddle, with a current review of injection room processes.

Healthcare Associated Infections and Infection Prevention & Control

The slides show counts rather than rates, so important to put into context of population sizes.

All Places in BOB Integrated care Board (ICB), review cases at multidisciplinary meetings. Antimicrobial prescribing, preventative measures such as audits and training and appropriate management is reviewed at place across BOB.

The Infection Prevention & Control (IP&C) Leads across BOB have organised quarterly Infection Prevention & Control educational webinars to support practice improvement in Primary care.

- MRSA (BOB Providers) 8 patients locally, with 280 nationally, the ICB ranked 31/42
- C:Difficile is comparably performing well in the top decile, ranked 4/42
- Antimicrobial Resilience Total Prescribing in Primary Care is ranked 7/42
- Antimicrobial Resilience Broad Spectrum Prescribing in Primary Care ranked 33/42

Care Quality Commission Ratings – 1st Feb 2023



Buckinghamshire, Oxfordshire
and Berkshire West
Integrated Care Board

Bucks Place	
<i>Acute hospital - Independent non-specialist</i>	2
Requires improvement	2
<i>Community based adult social care services</i>	21
Inadequate	2
Requires improvement	19
<i>Residential social care</i>	38
Inadequate	6
Requires improvement	32

Oxfordshire Place	
<i>Community based adult social care services</i>	13
Inadequate	1
Requires improvement	12
<i>GP Practices</i>	1
Inadequate	1
<i>Residential social care</i>	15
Requires improvement	15

Berkshire West Place	
<i>Community based adult social care services</i>	15
Inadequate	2
Requires improvement	13
<i>GP Practices</i>	2
Inadequate	1
Requires improvement	1
<i>Residential social care</i>	17
Inadequate	2
Requires improvement	15

Additional assurance/oversight is in place for those organisations with Inadequate or Requires Improvement ratings.

A full list of all providers referenced above can be provided upon request.