**L & SC Integrated Care Board**

**Primary Care Contracts Sub-committee**

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| **Date of meeting** | Thursday 12th June | | | | |
| **Title of paper** | Integrated Primary Care Performance Report (FINAL DRAFT) | | | | |
| **Presented by** | Peter Tinson – Director of Primary and Community Commissioning | | | | |
| **Author** | Sarah Squires, Senior Delivery Manager – Primary Care  Jennifer Wright, Senior Delivery Officer – Primary Care | | | | |
| **Agenda Item** | 7 | | | | |
| **Confidential** | No | | | | |
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| **Purpose of the paper** | | | | | |
| The purpose of the paper is to **advise** the Committee with the latest position against key strategic primary care published performance metrics. | | | | | |
| **Executive Summary** | | | | | |
| The May 2025 Integrated Primary Care Performance Report contains the most current performance metric data available at the time of publication.  The report consists of a Summary and Benchmarking table on page 3, that provides a ‘snapshot’ overview of the ICBs current performance for the metrics, followed by a more detailed overview of each metric displayed on separate pages (page 4 onwards).  Due to resource pressures and sickness within the Primary Care Team it was not possible to provide an April report, hence this report focusing on two months data to include the missing month’s data. It should be noted that despite the lack of an April 2025 report all performance data was reviewed to ensure no significant or unwarranted deterioration of performance had occurred.  May 2025 report, points of note:   * The number of general practice appointments increased in February by 27,825 and LSC’s cumulative total from April 2024 – February 2025 is now 191,243 above plan. * The Acute Respiratory Infection (ARI) Hub scheme ceased at the end of March delivering a total of 82,400 appointments (94% of its planned activity) and achieving its objectives of increasing capacity in the System, treating individuals with mild to moderate chest infections and reducing attendance at Accident & Emergency departments. * Following a CQC review of quality at a practice within Chorley & South Ribble, the practice has been upgraded to requires improvement from inadequate. * The units of dental activity delivered as a proportion of UDA’s reduced in January and February below planned levels. The cause of this is unclear but will be reviewed in greater detail when the finalised March activity data is available. * January 2025 saw the highest number of Community Pharmacy clinical pathway consultations (8,966) delivered in LSC since the start of the service in January 2024, it is noted that activity levels have been starting to increase since November.   Over the coming months the reported metrics and content of the IPCPR report will change to ensure:   * inclusion and oversight of the ICB's new general practice Local Enhanced Services (LES) delivery data from July 2025.  The inclusion of the LES data will evolve over the next few months; further details of the monitoring and reporting arrangements are outlined in the appended paper “Local Enhanced Service Delivery Monitoring and Reporting Arrangements” which has been received by the Primary Care Delivery Unit and subsequently the Incident Management Team (IMT) on 3 June 2025. * alignment to new ICB governance arrangements. * alignment and consideration of the new national GP Dashboard, increased national focus for ICB's to reduce variation, and a review of the primary care strategic metrics. | | | | | |
| **Recommendations** | | | | | |
| The Committee is asked to:  • Note achievement against key performance indicators for Lancashire and South Cumbria.  • Review and support the actions being undertaken to improve performance against metrics in this report. | | | | | |
| **Governance and reporting\*** (list other forums that have discussed this paper and any other engagement that has taken place) | | | | | |
| **Meeting** | **Date** | | | | **Outcomes** |
| Primary Care Operational Services Group | 29.05.25 | | | | Paper was reviewed. |
| **Conflicts of interest identified** | | | | | |
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| **Implications** | | | | | |
| *If yes, please provide a brief risk description and reference number* | **YES** | **NO** | **N/A** | **Comments** | |
| Quality impact assessment completed | **🗸** |  |  |  | |
| Equality impact assessment completed | **🗸** |  |  |  | |
| Privacy impact assessment completed |  |  | **🗸** |  | |
| Financial impact assessment completed |  |  | **🗸** |  | |
| Associated risks | **🗸** |  |  | The risks which could affect metric performance and delivery are detailed within the report. | |
| Are associated risks detailed on the ICS Risk Register? | **🗸** |  |  | Where applicable. | |
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| **Report authorised by** | Craig Harris, Chief Operating Officer | | | | |