

**L & SC Integrated Care Board  
Primary Care Contracts Sub-committee**

<b>Date of meeting</b>	12 <sup>th</sup> February 2026
<b>Title of paper</b>	Integrated Primary Care Performance Report for January 2026
<b>Presented by</b>	Peter Tinson – Director of Primary and Community Commissioning
<b>Author</b>	Sarah Squires, Senior Delivery Manager Jenny Wright, Senior Delivery Officer
<b>Agenda item</b>	7
<b>Confidential</b>	No

**Purpose of the paper**

To update the Committee on the latest position against key strategic primary care published performance metrics,

**Executive summary**

The Integrated Primary Care Performance Report (IPPCR) is produced each month to provide the latest position against key strategic primary care published performance metrics. The January 2026 report contains the most recent data available at the time of writing, which does vary between metrics.

**To note:**

The IPPCR relies on metric figures and charts produced by Performance and Intelligence colleagues for the Quality & Outcomes Committee's performance report which is now produced on a bimonthly basis. Due to staff capacity, the full data set is unable to be produced for the IPPCR in the alternate months.

The Primary Care Team therefore propose to keep to a monthly reporting schedule, but provide a reduced report every other month (when the full suite of metric graphics is not available) which focuses on LES delivery performance only. It should be noted that for the reduced reporting months, metric leads will continue to monitor performance.

**Report content**

The report consists of a Summary and Benchmarking table on page 2, 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.

For the January 2026 report the following should be noted:

- The reduced performance reported in December for **Units of Dental Activity delivered as a proportion of all units of dental activity contracted and**

<p><b>Urgent Dental Appointments:</b> Performance in December is attributed to delays in recording activity and submissions by the NHS Business Service Authority (BSA). Both these indicators report lower than expected planning levels, with UDA activity delivery approximately 85k less than expected and 38k lower when compared to the same period in 2024/25.</p> <ul style="list-style-type: none"> <li>• <b>General Practice LES: long term condition holistic health assessment initial delivery:</b> A total of 48% of practices, have achieved over 75% of their annual target, This is an increase of 15% between Oct to Nov 25 and the number of practices reporting to have only achieved 0-10% of their target has reduced to 11. A reduction of 5 practice from the previous month.</li> <li>• <b>GP CQC ratings:</b> There has been an increase to six practices rated as 'inadequate' or 'requires improvement' by the CQC</li> </ul>							
<b>Recommendations</b>							
<p>The Committee is asked to:</p> <ul style="list-style-type: none"> <li>• Note achievement against key primary care performance indicators for Lancashire and South Cumbria.</li> <li>• Review and support the actions being undertaken to improve performance against metrics in this report.</li> </ul>							
<b>Governance and reporting</b> (list other forums that have discussed this paper)							
Meeting	Date	Outcomes					
Primary Care Quality Group	28.01.26	For review					
<b>Conflicts of interest identified</b>							
Not applicable							
<b>Implications</b>							
(If yes, please provide a brief risk description and reference number)	Yes	No	N/A	Comments			
Quality impact assessment completed			✓				
Equality impact assessment completed			✓				
Data 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 ICB Risk Register?	✓			Where applicable.			

<b>Report authorised by:</b>	Craig Harris, Chief Operating Officer
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