## **BOB ICB BOARD MEETING**

Title	Performance and Quality Report								
Paper Date:	1 September 2025	Meeting Date:	9 September 2025						
Purpose:	Information / Discussion / Assurance	Agenda Item:	Performance and Quality Report						
Author:	Ben Gattlin Assoc. Dir. of Performance	Exec Lead/ Senior Responsible Officer:	Matthew Tait Chief Delivery Officer						

Executive Summary

As established in the previous board, the M3 report has been refreshed in line with 2025/26 update core metrics. SPC is not available for all data points while historic data is established, and plans numbers are finalised.

The report maintains focus on five key areas and continues to provide broader performance information.

The five areas of key focus are:

- Urgent and Emergency Care 4 Hour standard
- Elective Waiting times
- Learning Disabilities and Autism Reduction on impatient reliance for LDA.
- Cancer 62 days % of patients treated within 62 days.
- Primary care access

Note the report title page states M3 (June 2025) however the data contained within the report is provided as the latest publishable data, in some instances this could be February 2025 or as recent as July 2025.

The report gives a high-level overview of performance for NHS partners across the integrated care system and focuses on five key areas with additional wider performance oversight measures information.

**Urgent and Emergency Care** – 4 Hour standard – target 78% by end of March 2026

- Performance across Buckinghamshire, Oxfordshire, and Berkshire West (BOB) was 81% in July 2025, an improvement of 3.6% on July 2024.
- Alternatives to ED continue to be promoted to reduce the pressure on departments, including Urgent Community Response (UCR), Virtual Wards (VWs), 111, 111 online, and Urgent Care Centres (UCCs/UTCs/MIUs).
- System Single Point of Access (SPOA) group continues to work with partners to promote and increase utilisation to reduce ambulance conveyances where clinically appropriate.
- Teams continue to drive down delayed discharges/nCtR through the Transfer of Care Hubs.

- Work instigated to review Paediatric ED performance and potential improvement opportunities ahead of Winter.
- Baseline assessment undertaken against the UEC Care Plan 2025/26.
   published 6th June and captured within Winter plans as appropriate.
- ICB and Trust Winter plans in development in accordance with the NHSE prescribed Board Assurance Statements requirement for 25/26.

**Elective** – Long Waits – target zero over 52 week waits.

- BOB providers reported 64% of patients seen within 18 weeks in BOB which is slightly above the plan level
- The Acute Provider Collaborative (APC) continues to work with the ICB to minimise the volume of 52wk breaches and reduce the overall waiting list size.
- The second validation sprint exercise in underway to support cleansing of waiting lists to improve reporting accuracy.
- Work continues within the APC to agree load balancing initiatives to better align demand with capacity within challenged specialties e.g. urology and plastics.
- Trusts worked to minimise the impact of Industrial Action on planned care pathways.

**Learning Disabilities and Autism** – target; reduce reliance on mental health inpatient care for people with a learning disability and autistic people, delivering a minimum 10% reduction.

- BOB traditionally performs well for this metric, previously rated against a per million of population basis<sup>1</sup>.
- Note the executive summary page still displays the 2024/25 targets and per million calculations however the focused page has been updated and displays actual figures against our quarterly plan.
- BOB is showing a reduction in inpatient numbers in these categories against last year's position.

**Cancer waits** – target; percentage of patients treated for cancer within 62 days of referral (62-day standard)

- 62-day combined performance in June 2025, 66.4% which is below new target; to improve performance against the headline 62-day cancer standard to 75% by March 2026. This demonstrates a 6.3% improvement in performance from the previous month although regional oversight and support continues
- Performance of Faster Diagnosis Standard (FDS) 78.6% in June represents consistent strong performance and is above plan at this stage

**Primary Care access** – Target; patient satisfaction on ease of obtaining an appointment.

- A small increase has been seen in the number of GPs working in BOB, recruitment and retention remains a priority.
- Patient satisfaction is high across BOB.

<sup>&</sup>lt;sup>1</sup> 30 per million for adults and 15 per million for children

 889K appointments took place in M3, an increase on the previous reporting period.

**Maternity** – target; reduction in smoking at booking and time of delivery to less than 5%; increase breastfeeding initiation rates at 80% or more and halve neonatal death rates by 2025 (from 2010 baseline)

- There were 1433 total births across the system in June which is above average.
- Smoking disclosed at time of booking was 3.77% in June target whilst smoking at the time of delivery was 4.76%. Both are within the target range.
- Breastfeeding initiation rates remain above the mean of last two years.
- Neonatal deaths show common cause variation with data falling both above and below the mean. There were 1.3<sup>2</sup> still births across BOB in June 2025.

**Quality** – Target; Zero target for Never Events and to monitor the patient safety incident reporting framework (PSIRF) in acute and mental health trusts and CQC updates.

- The ICB awaits learning from never event patient safety incident investigation at BHT
- ICB to reach out to Trusts via Deputy Chief Nurses to revisit the plan to establish a system wide improvement collaborative with a focus on safer surgery/invasive procedures.
- Continue to await RBFT maternity insights visit report. Was due 16th August but not available yet.

## **Action Required**

The board is asked to:

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

# Conflicts of Interest:

Conflict noted: conflicted party can participate in discussion and decision

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.

<b>Date/Name of Committee/</b>
Meeting, Where Last
Reviewed:

Performance reviewed 26/06/2025. System Productivity Committee.

<sup>&</sup>lt;sup>2</sup> Rate per 1000 births





# NHS Performance and Quality Report

M3 - June 2025

Matthew Tait – Chief Delivery Officer

Sarah Bellars – Chief Nursing Officer

Ben Riley – Chief Medical Officer

# Scorecard - M3 - June 2025



		Period	Target	Value	Assurance	Variance
Urgent Care	Ambulance Response Times - Mean Category 2	Jun 25	00:30:00	00:32:32	(F)	<b>⊘</b> ^∞
	Percentage of attendances in A&E over 12 hours	Jul 25	6.5%	4.1%	P	<b>(1)</b>
	Percentage of patients who spent 4 hours or less in A&E	Jul 25	78.0%	81.0%	<b>P</b>	(H.

		Period	Target	Value	Assurance	Variance
Cancer	Cancer 28 days wait (faster diagnosis standard) - Commissioner	Jun 25	80.0%	78.6%	F.	٠/٠٠
	Cancer Referral/Upgrade to First Treatment Standard (62-day standard) - Commissioner	Jun 25	75.0%	66.4%	F.	@/\s
	Percentage of people treated beginning first or subsequent treatment of cancer within 31 days of receiving a decision to treat/earliest clinically appropriate date	Jun 25		86.8%	0	0,000

		Period	Target	Value	Assurance	Variance
Planned Care	Percentage of incomplete pathways waiting more than 52 weeks	May 25	1.0%	2.4%	Ę.	(T-)
	Percentage of incomplete pathways within 18 weeks for patients on incomplete pathways at the end of the period	Jun 25	92.0%	64.0%	E S	H
	RTT waiting list - The total number of incomplete RTT pathways	Jun 25		184,775	0	
	The percentage of patients waiting 6 weeks or more for a diagnostic test	May 25	1.0%	19.0%	E	<b>∞</b> Λ.∞
	Time to first appointment, waiting for first event and those waiting less than 18 weeks	Jun 25		65.6%	0	<b>⊘</b> \$∞

		Period	Target	Value	Assurance	Variance
Mental Health	Average length of stay for Adult Acute Beds	Jun 25		48.2	0	<b>(S)</b>
	Improve access rate to Children and Young People's Mental Health Services	May 25	26,531	26,040	0	
	Improve patient flow and work towards eliminating inappropriate out of area placements	May 25		15	0	e/ho
	Individual Placement Support access	May 25		1,405	0	

# **Primary Care**

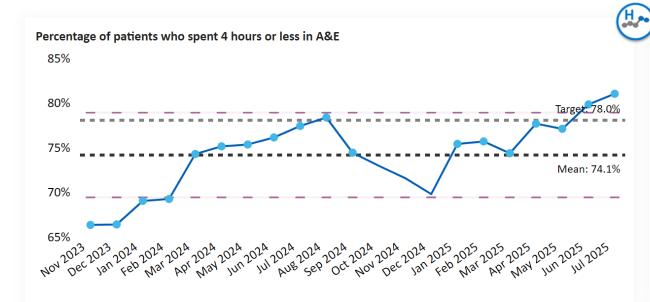


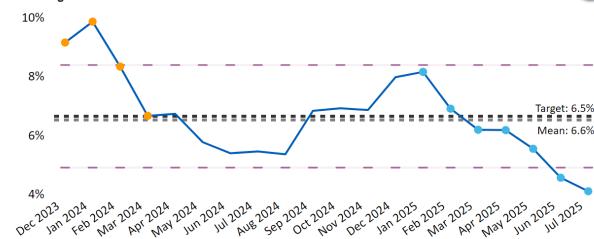
			Target	Curr Month	Plan	Variance (Actual - Plan)	Performance vs Plan	Curr Month Prev Year	Variance (Curr Month - Prev Year)	Performance
Appointments in general practice	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		889,640	885,531	4,109	0	822,534	67,106	0
Friends and Family Test Recommend (FFT) recommend - GP Practices	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	May 2025		93.4%				91.1%	2.3%	0
Friends and Family Test Recommend (FFT) recommend - GP Practices - Berkshire West	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	May 2025		93.3%				91.2%	2.1%	0
Friends and Family Test Recommend (FFT) recommend - GP Practices - Buckinghamshire	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	May 2025		94.0%				91.5%	2.5%	0
Friends and Family Test Recommend (FFT) recommend - GP Practices - Oxfordshire	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	May 2025		93.2%				90.6%	2.6%	0
GP Appointments by Month split by modality - Face-to-Face	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		532,722				497,291	35,431	0
GP Appointments by Month split by modality - Home Visit	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		10,411				10,656	-245	0
GP Appointments by Month split by modality - Telephone	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		284,193				268,269	15,924	0
GP Appointments by Month split by modality - Unknown	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		15,276				19,973	-4,697	0
GP Appointments by Month split by modality - Video Conference/Online	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		47,038				26,331	20,707	0
No. GPs per 1000 population	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		55				54	1	0
No. GPs per 1000 population - Berkshire West	15A - WEST BERKSHIRE	Jun 2025		47				46	1	0
No. GPs per 1000 population - Buckinghamshire	14Y - BUCKINGHAMSHIRE	Jun 2025		56				53	3	0
No. GPs per 1000 population - Oxfordshire	10Q - OXFORDSHIRE	Jun 2025		60				60	1	0
Percentage of patients identified as having 20% or greater 10-year risk of developing CVD are treated with statins	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Mar 2025	45.0%	59.2%				57.7%	2.9%	0

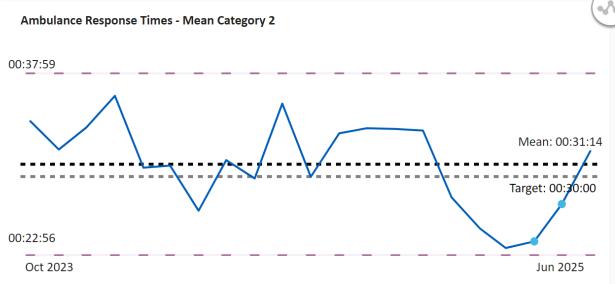
# **Urgent and Emergency Care**



Integrated Ca







## Actions and risks

Percentage of attendances in A&E over 12 hours

- All three acutes have ED improvement plans in place to support recovery of all types with delivery overseen at place UEC Boards.
- Alternatives to ED continue to be promoted to reduce the pressure on departments, including;
   Urgent Community Response (UCR), Virtual Wards (VWs), 111, 111 online, and Urgent Care Centres (UCCs/UTCs/MIUs).
- System Single Point of Access (SPOA) group continues to work with partners to promote and increase utilisation to reduce ambulance conveyances where clinically appropriate
- Teams continue to drive down delayed discharges/nCtR through the Transfer of Care Hubs
- Work instigated to review Paediatric ED performance and potential improvement opportunities ahead of Winter
- Baseline assessment undertaken against the UEC Care Plan 2025/26 published 6th June and captured within Winter plans as appropriate.
- ICB and Trust Winter plans in development in accordance with the NHSE prescribed Board Assurance Statements requirement for 25/26
- Threat of further industrial action well developed and proven plans in place to mitigate impact

# **Urgent and Emergency Care**



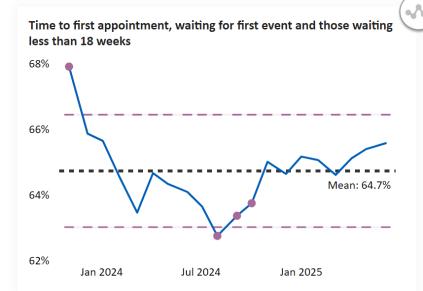
**Integrated Care Board** 

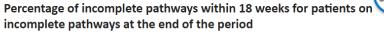
			Target	Curr Month	Variance (Actual - Plan)	Performance vs Plan	Curr Month Prev Year	Variance (Curr Month - Prev Year)	Performance
Ambulance Response Times - Mean Category 2	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025	00:30:00	00:32:32			00:29:49	00:02:43	0
	RYE - SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST	Jul 2025	00:30:00	00:35:03			00:40:00	00:04:57	0
Friends and Family Test Recommend (FFT) recommend - AE	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	May 2025		81.3%			83.3%	-2.0%	0
(TT) recommend //L	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	May 2025		81.4%			82.1%	-0.8%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	May 2025		68.8%			66.1%	2.8%	0
Friends and Family Test Recommend (FFT) recommend - Ambulance	RYE - SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST	May 2025		0.0%			83.3%	-83.3%	0
Percentage of attendances in A&E over 12 hours	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jul 2025	6.5%	4.1%			5.4%	-1.4%	0
OVEL 12 HOULS	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Jul 2025	5.0%	2.8%	1.5%	0	3.7%	-1.0%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Jul 2025	4.6%	0.7%	-3.7%	0	3.0%	-2.3%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Jul 2025	7.3%	7.0%	0.4%	0	7.1%	-0.1%	0
Percentage of patients who spent 4 hours or less in A&E	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jul 2025	78.0%	81.0%			77.4%	3.6%	0
nodis of less in Aug	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Jul 2025	78.0%	78.1%	7.5%	0	73.6%	4.5%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Jul 2025	78.0%	82.1%	6.2%	0	78.7%	3.4%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Jul 2025	78.0%	78.2%	-2.2%	0	72.6%	5.6%	0

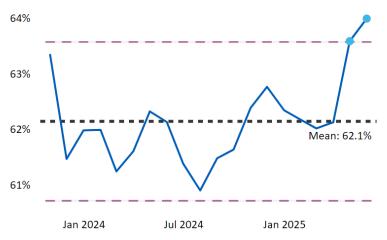
## **Planned Care**

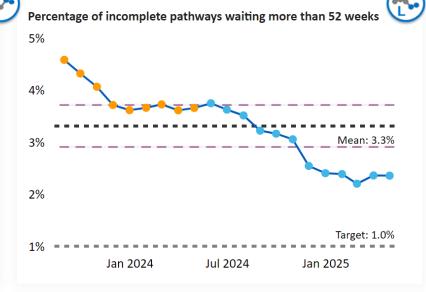


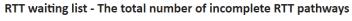
Integrated Care













## Actions

- The Acute Provider Collaborative (APC) continues to work with the ICB to minimise the volume of 52wk breaches and reduce the overall waiting list size
- The second validation sprint exercise in underway to support cleansing of waiting lists to improve reporting accuracy
- Work continues within the APC to agree load balancing initiatives to better align demand with capacity within challenged specialties e.g. urology and plastics
- Mitigating actions undertaken to minimise the impact of Industrial Action on planned care pathways

#### Risks

- Displacement of elective activity resulting from peaks in UEC demand
- Staff sickness
- Longer term actions on workforce and capacity (e.g. in theatres) will take time to have an impact.
- Patients choosing to stay with their local provider despite offers of quicker treatment at other sites resulting in slower recovery of waiting times
- Industrial Action

# **Planned Care**



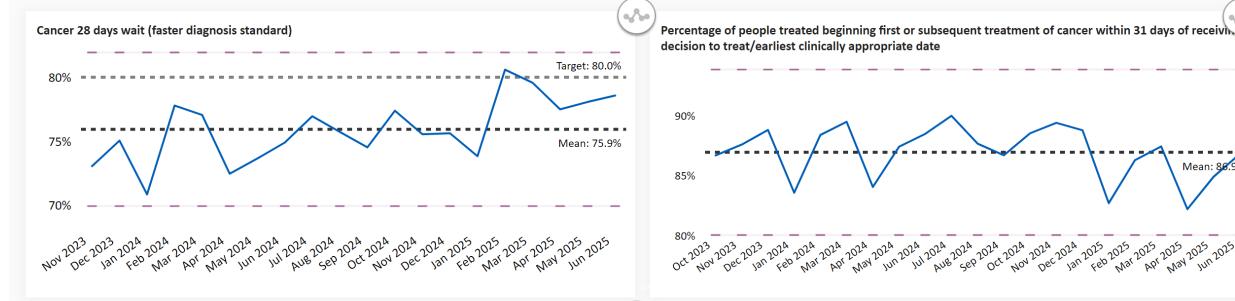
			Target	Curr Month	Plan	Variance (Actual - Plan)	Performance vs Plan	Curr Month Prev Year	Variance (Curr Month - Prev Year)	Performance
Percentage of incomplete pathways waiting more than 52 weeks	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	May 2025	1.0%	2.4%	2.4%	-0.1%	0	3.7%	-1.3%	0
waiting more than 32 weeks	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	May 2025	1.0%	0.1%	0.1%	0.0%	0	0.1%	0.0%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	May 2025	1.0%	3.3%	3.6%	-0.3%	0	4.5%	-1.2%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	May 2025	1.0%	2.7%	2.8%	-0.1%	0	4.3%	-1.6%	0
within 18 weeks for patients on ncomplete pathways at the end of	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025	92.0%	64.0%	63.1%	0.9%	0	62.1%	1.9%	0
	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Jun 2025	92.0%	79.9%	80.0%	-0.1%	0	83.0%	-3.1%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Jun 2025	92.0%	59.0%	58.5%	0.5%	0	58.0%	1.0%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Jun 2025	92.0%	58.0%	60.5%	-2.5%	0	55.2%	2.9%	0
RTT waiting list - The total number	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		184,775	177,926	6,849	0	167,986	16,789	0
of incomplete RTT pathways	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Jun 2025		36,524	36,500	24	0	33,633	2,891	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Jun 2025		86,825	88,923	-2,098	0	84,287	2,538	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Jun 2025		49,406	44,800	4,606	0	50,088	-682	0
Time to first appointment, waiting for first event and those waiting less than 18 weeks	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		65.6%					65.6%	0
	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Jun 2025		77.9%				82.5%	-4.7%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Jun 2025		65.6%				63.8%	1.8%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Jun 2025		53.9%				54.5%	-0.6%	0

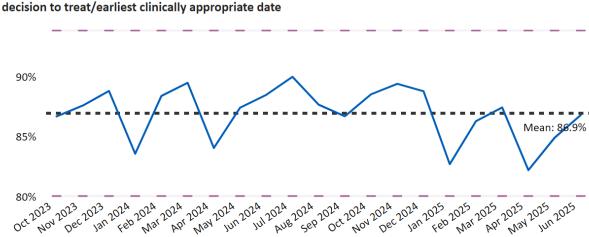
# **Planned Care**

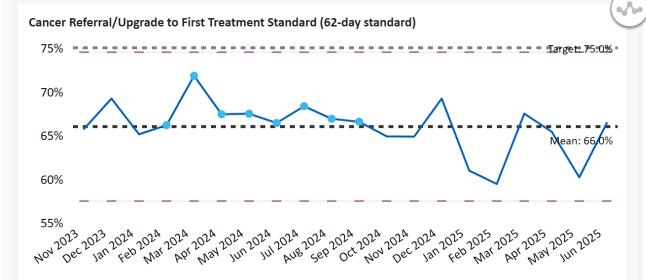


			Target	Curr Month	Plan	Variance (Actual - Plan)	Performance vs Plan	Curr Month Prev Year	Variance (Curr Month - Prev Year)	Performance
Cancelled Operations	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Mar 2025		100				68	32	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Mar 2025		85				80	5	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Mar 2025		94				96	-2	0
Friends and Family Test Recommend	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	May 2025		95.6%				95.8%	-0.3%	0
(FFT) recommend - Inpatient	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	May 2025		95.4%				95.4%	0.0%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	May 2025		89.2%				89.6%	-0.4%	0
(FFT) recommend - Outpatient	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	May 2025		94.8%				95.6%	-0.8%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	May 2025		93.8%				93.7%	0.1%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	May 2025		93.0%				92.5%	0.5%	0
Mixed Sex Accommodation	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	May 2025		280				410	-130	0
Breaches	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	May 2025		187				343	-156	0
	RNU - OXFORD HEALTH NHS FOUNDATION TRUST	May 2025		0				0	0	
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	May 2025		94				93	1	0
	RWX - BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST	May 2025		0				0	0	
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	May 2025		0				0	0	
Proportion of discharges from adult acute beds eligible for 72 hour follow up - followed up in the reporting period	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	May 2025		541				298	243	0

## Cancer







#### Actions and risks

- •28-Day FDS: 78.6% (up 0.5% vs May).
- •OUH 77% (up 0.4%), BHT 80% (up 1.2%), RBH 78.9% down 0.6%).
- •31-Day Combined: 86.9% (up 2% vs May).
- •OUH 80.4% (up 2.9%), RBH 93.3% (up 4.2%), BHT 80.8% (down 4.6%).
- •62-Day Combined: 66.4% (up 6.2% vs May).
- •OUH 61.8% (up 10.3%), RBH 70.2% (up 1.5%), BHT 67% (up 3.3%).
- •BHT's position driven by LGI, Gynae and Lung. Endoscopy and theatre delays to be supported with additional funding from TVCA
- •OUH's position driven by Gynae, H&N and Lung. Long endoscopy waits and admin teams under pressure due to long term sickness and vacancies. Recruitment for nurse navigator ongoing •RBH's position driven by Gynae, LGI and Urology. Recruitment underway in radiotherapy but new staff
- will require 6-8 weeks induction. New CAG meetings set up for Radiology and Pathology alongside tumour site CAGs

# Cancer

			Target	Curr Month	Plan	Variance (Actual - Plan)	Performance vs Plan	Curr Month Prev Year	Variance (Curr Month - Prev Year)	Performance
Cancer 28 days wait (faster diagnosis standard)	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025	80.0%	78.6%	74.6%	3.9%	0	74.9%	3.7%	0
,	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Jun 2025	80.0%	78.9%	75.0%	3.9%	0	64.6%	14.3%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Jun 2025	80.0%	77.0%	77.6%	-0.6%	0	81.1%	-4.1%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Jun 2025	80.0%	80.0%	75.0%	5.0%	0	76.9%	3.1%	0
Cancer Referral/Upgrade to First Treatment Standard (62-day	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025	75.0%	66.4%	68.7%	-2.3%	0	66.4%	0.0%	
standard)	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	Jun 2025	75.0%	70.4%	72.2%	-1.8%	0	72.4%	-2.0%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	Jun 2025	75.0%	61.8%	60.6%	1.1%	0	59.9%	1.8%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	Jun 2025	75.0%	62.4%	63.1%	-0.6%	0	61.3%	1.2%	0
Percentage of people treated beginning first or subsequent	QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST	Jun 2025		86.8%	87.2%	-0.4%	0	88.5%	-1.7%	0
treatment of cancer within 31 days of receiving a decision to treat/earliest clinically appropriate date	RHW - ROYAL BERKSHIRE NHS FOUNDATION TRUST	May 2025		89.1%	93.1%	-4.0%	0	90.7%	-1.6%	0
	RTH - OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	May 2025		77.5%	80.5%	-2.9%	0	84.9%	-7.4%	0
	RXQ - BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	May 2025		85.2%	84.2%	1.1%	0	83.9%	1.4%	0

# **Patient Experience**

All



## **Quality Scorecard**

Metric	Period	Target	BOB ICB	RBFT	ОН	OUH	BHFT	ВНТ
Friends and Family Test Recommend (FFT) recommend - Community	Jun 2025	Higher is Better			94.9%		95.8%	92.5%
Friends and Family Test Recommend (FFT) recommend - Dental	Jun 2025	Higher is Better	97.8%					
Friends and Family Test Recommend (FFT) recommend - Maternity (Q1)	Jun 2025	Higher is Better		90.9%		89.4%		88.3%
Friends and Family Test Recommend (FFT) recommend - Maternity (Q2)	Jun 2025	Higher is Better		100.0%		93.8%		90.9%
Friends and Family Test Recommend (FFT) recommend - Maternity (Q3)	Jun 2025	Higher is Better		96.9%		82.6%		84.4%
Friends and Family Test Recommend (FFT) recommend - Maternity (Q4)	Jun 2025	Higher is Better		0.0%		0.0%		91.7%

## **Maternity Questions**

- Q1. How likely are you to recommend our antenatal service to friends and family if they needed similar care or treatment?
- Q2. How likely are you to recommend place of birth to friends and family if they needed similar care or treatment?
- Q3. How likely are you to recommend our postnatal ward to friends and family if they needed similar care or treatment?
- Q4. How likely are you to recommend our postnatal community service to friends and family if they needed similar care or treatment?

RBFT and OUH Maternity FT results are nationally published, but data is being investigated locally due to 100% and 0% being highly unlikely

# **Patient Safety and Quality**



## **Quality Scorecard**

Metric ▼	Target	BOB ICB	RBFT	OUH	ВНТ
SHMI	Lower is Better		1.0764	0.8943	0.8051
Never Events	0	0			

#### Actions

Await learning from never event patient safety incident investigation at BHT and any CQC follow up.

ICB to reach out to Trusts via Deputy Chief Nurses to revisit the plan to establish a system wide improvement collaborative with a focus on safer surgery/invasive procedures.

Continue to await RBFT maternity insights visit report. Was due 16th August but not available yet.

#### These metrics measure:

Never Events our objective is to have 0 never events

The Summary Hospital-level Mortality Indicator (SHMI) reports on mortality at trust level across the NHS in England. The SHMI is not a measure of quality of care and a higher or lower number than expected should not be interpreted as good/poor performance, it should be viewed as a "smoke alarm" which requires further investigation

CQC updates

Progress with the implementation of the national patient safety strategy

### How are we performing?

There has been 1 Never Event declared by BHT.

Date of incident: 25 April 2025 Date reported: 22 June 2025

The incident relates to a 35-year-old patient who underwent Surgical Management of Miscarriage on 25 April 2025.

On 21 June 2025, the patient re-presented to hospital having self-expelled a retained surgical swab vaginally.

Clinical photographs taken at the time has confirmed the item was a theatre swab with a visible radio-opaque marker.

This incident meets the criteria for a Never Event under the category retained foreign object post procedure.

CQC Improvement Notice served to RBFT on 25/07/25 in relation to nuclear medicine services and the Ionising Radiation (Medical Exposure) Regulations 2017, Regulation 6 Employer's duties: establishment of general procedures, protocols and quality assurance programmes



# Wider Performance Oversight Measures

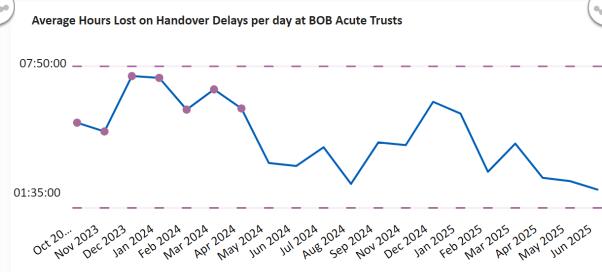


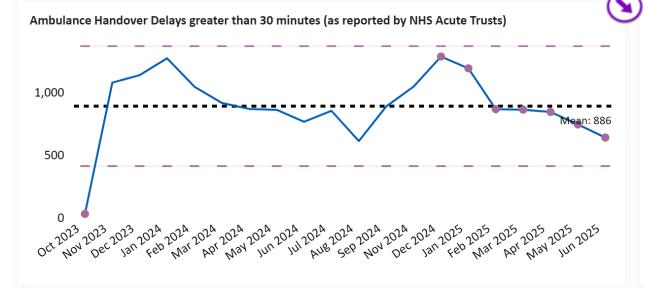
# **Ambulance and Urgent and Emergency Care**

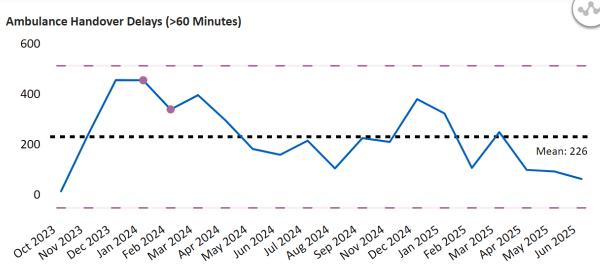


**Integrated Care** 







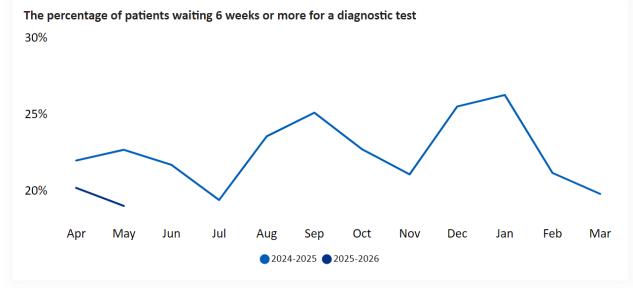


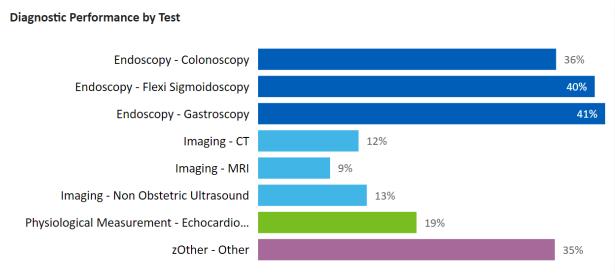
# Diagnostics

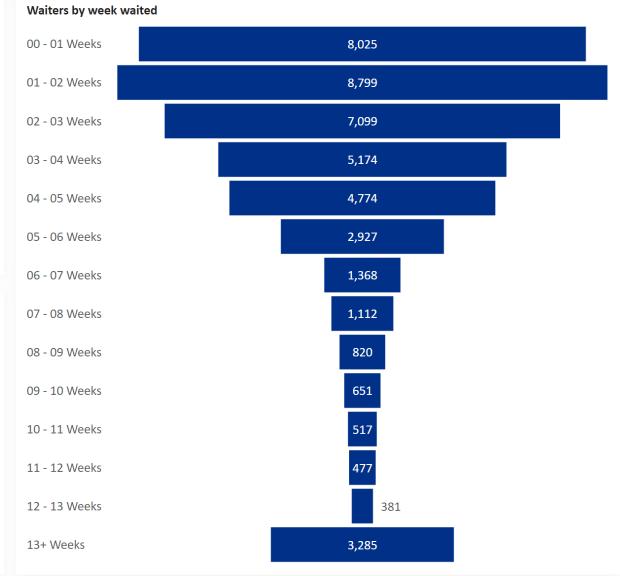
# May 2025











## **Mental Health Scorecard**



Variance Performance Target Plan Variance | Performance Curr Curr (Actual -Month vs Plan Month (Curr Month Plan) Prev Year - Prev Year) Average length of stay for Adult QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST 48 49 56 -8 Jun 2025 -1 0 **Acute Beds** Early Intervention Psychosis (EIP) 25.0% RNU - OXFORD HEALTH NHS FOUNDATION TRUST May 2025 60.0% 79.0% 54.0% 0 Proportion entering treatment waiting 2 weeks or less 89.0% RWX - BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST May 2025 60.0% 89.0% 0.0% 0 Estimated Diagnosis rate for QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST 66.7% 62.1% 62.2% -0.1% Jun 2025 0 people with dementia Friends and Family Test RNU - OXFORD HEALTH NHS FOUNDATION TRUST May 2025 85.6% 85.6% 0 Recommend (FFT) recommend -MHS RWX - BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST May 2025 88.5% 85.4% 3.1% 0 QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST May 2025 26,531 26,040 22,395 3,645 Improve access rate to Children and Young People's Mental Health Services Improve patient flow and work QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST May 2025 15 15 0 11 0 towards eliminating inappropriate out of area placements Individual Placement Support QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST May 2025 1,405 1,031 374 850 555 0 access Number of women accessing May 2025 1,379 201 QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST 1,580 1,335 245 specialist perinatal mental health services Talking Therapies access (total 2,490 -190 QU9 - BUCKINGHAMSHIRE, OXFORDSHIRE AND BERKSHIRE WEST May 2025 3,914 2,680 0 numbers accessing services)

# **Better Care Fund (BCF)**



			Target	Curr Month	Plan	Variance (Actual - Plan)	Performance vs Plan	Curr Month Prev Year	Variance (Curr Month - Prev Year)	Performance
BUCKINGHAMSHIRE	Average length of delay (days) by discharge pathway - Care Home	May 2025		18				9	9	0
	Average length of delay (days) by discharge pathway - Other	May 2025		4				2	2	0
	Average length of delay (days) by discharge pathway - Usual place of residence	May 2025		1				1	0	0
	Emergency hospital admissions due to falls in people over 65 (Quarterly)	Apr 2025		399				643	-244	0
	Hospital discharges to usual place of residence (Quarterly)	Apr 2025		93.2%				93.5%	-0.3%	0
	Percentage of patients discharged on discharge ready date	May 2025		87.7%				88.4%	-0.7%	0
	Unplanned hospital admissions for chronic ambulatory care sensitive conditions (Quarterly)	Apr 2025		628				1,123	-495	0
OXFORDSHIRE	Average length of delay (days) by discharge pathway - Care Home	May 2025		9				10	-2	0
	Average length of delay (days) by discharge pathway - Other	May 2025		3				2	1	0
	Average length of delay (days) by discharge pathway - Usual place of residence	May 2025		0				0	0	0
	Emergency hospital admissions due to falls in people over 65 (Quarterly)	Apr 2025		545				715	-170	0
	Hospital discharges to usual place of residence (Quarterly)	Apr 2025		92.2%				92.3%	-0.1%	0
	Percentage of patients discharged on discharge ready date	May 2025		87.1%				89.5%	-2.4%	0
	Unplanned hospital admissions for chronic ambulatory care sensitive conditions (Quarterly)	Apr 2025		949				1,534	-585	0

# **Better Care Fund (BCF)**



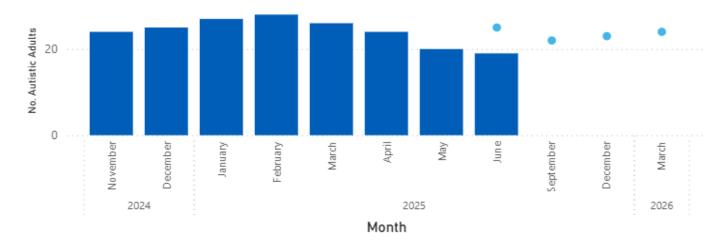
									inte	grated care bo
			Target	Curr Month	Plan	Variance (Actual - Plan)	Performance vs Plan		Variance (Curr Month - Prev Year)	Performance
READING	Average length of delay (days) by discharge pathway - Care Home	May 2025		4				3	0	O
	Average length of delay (days) by discharge pathway - Other	May 2025		3				3	0	0
	Average length of delay (days) by discharge pathway - Usual place of residence	May 2025		1				1	0	0
	Emergency hospital admissions due to falls in people over 65 (Quarterly)	Apr 2025		57				105	-48	0
	Hospital discharges to usual place of residence (Quarterly)	Apr 2025		91.7%				92.3%	-0.6%	0
	Percentage of patients discharged on discharge ready date	May 2025		77.7%				86.1%	-8.4%	0
	Unplanned hospital admissions for chronic ambulatory care sensitive conditions (Quarterly)	Apr 2025		127				345	-218	0
WEST	Average length of delay (days) by discharge pathway - Care Home	May 2025		5				9	-4	0
BERKSHIRE	Average length of delay (days) by discharge pathway - Other	May 2025		5				3	2	0
	Average length of delay (days) by discharge pathway - Usual place of residence	May 2025		1				1	0	0
	Emergency hospital admissions due to falls in people over 65 (Quarterly)	Apr 2025		92				131	-39	0
	Hospital discharges to usual place of residence (Quarterly)	Apr 2025		88.7%				89.9%	-1.2%	0
	Percentage of patients discharged on discharge ready date	May 2025		78.1%				83.5%	-5.4%	0
	Unplanned hospital admissions for chronic ambulatory care sensitive conditions (Quarterly)	Apr 2025		164				310	-146	0
WOKINGHAM	Average length of delay (days) by discharge pathway - Care Home	May 2025		6				6	0	0
	Average length of delay (days) by discharge pathway - Other	May 2025		2				5	-4	0
	Average length of delay (days) by discharge pathway - Usual place of residence	May 2025		1				1	0	0
	Emergency hospital admissions due to falls in people over 65 (Quarterly)	Apr 2025		81				135	-54	0
	Hospital discharges to usual place of residence (Quarterly)	Apr 2025		92.3%				92.5%	-0.2%	0
	Percentage of patients discharged on discharge ready date	May 2025		76.9%				81.0%	-4.1%	0
	Unplanned hospital admissions for chronic ambulatory care sensitive conditions (Quarterly)	Apr 2025		133				251	-118	0

# **Learning Difficulties and Autism (LDA)**



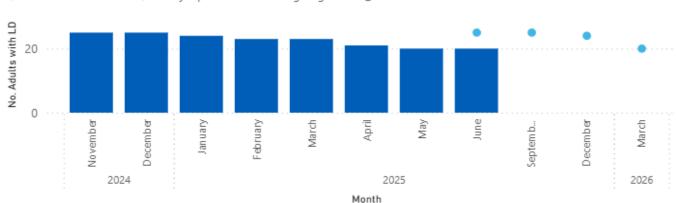
## **Autistic Adults by month**

No. Autistic Adults Quarterly Operational Planning targets - ASD



## Adults with Learning disabilities by month

■ No. Adults with LD ■ Quarterly Operational Planning targets - LD\_LDA



## Children and Young people inpatients by month



# **Health Inequalities**



Link to SCW Health Inequalties dashboard ©

This month's highlighted Health Inequalities metric is ethnic breakdown of patients waiting longer than 52 weeks by percentage of total wait list.



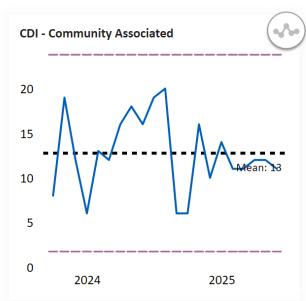
This chart shows the selected waiting list metric for the month selected at the top of this page, broken down by ethnic group. The percentage shown indicates the percentage of waiters in the selected metric (e.g. patients waiting longer than 52 weeks, as a percentage of all waiters in that demographic group).

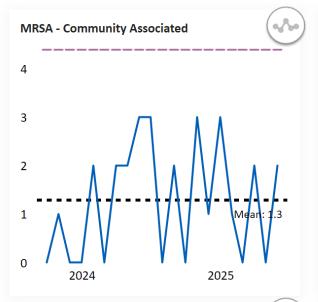
# Infection Prevention and Control - CDI, MRSA, MSSA

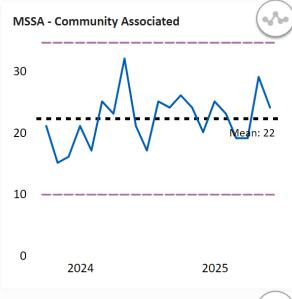
## June 25

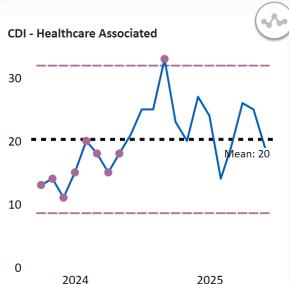
# Buckinghamshire, Oxfordshire and Berkshire West

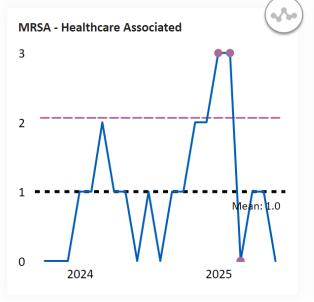
Integrated Care Board

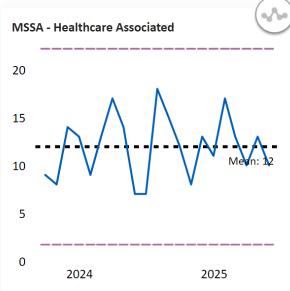












## How we are performing

Q1 June CDI cases reduced from 39 in May to 34 in June. Healthcare associated reduced from 25 to 19, whilst community CDI cases marginally increased by from 14 to 15. OUH have cited their CDI reduction as correlating with a steady reduction in antibiotic prescribing and improved cleaning scores. There has been two community MRSA bacteraemia reported in June, both in Berkshire West of which One Skin/Soft tissue source with chronic leg ulcers, the second Osteomyelitis with no prior GP input. MSSA bacteraemia decreased from 42 in May to 34 in June. The majority, 53% of cases have no known source, 31% of known sources was Skin/Soft tissue infection.

#### **Actions & Risks**

An operational planning day was held to review current Vaccination and IP&C issues and challenges, to prepare a forward plan in line with the ICB model blueprint and NHS 10-year plan.

BOB ICB continues to collaborate with NHS England and SE regional stakeholders on Flu vaccination for frontline healthcare staff programme 2025/26. Overall, there is a good level of assurance across the system, with mitigations in place where lower levels of assurance has been identified.

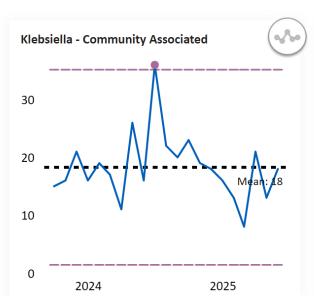
GPs were alerted to the importance of Penicillin Allergy De-labelling (PADL) of registered patients, 6% of patients in primary care and 10-20% in hospital are labelled as penicillin allergic. 90% are not allergic when formally assessed. A Penicillin allergy alert can compromise optimal antibiotic prescribing increasing the risk of AMR and CDI. Discussion underway with Acute Trusts to strengthen PADL data flows-patient medical records within primary care.

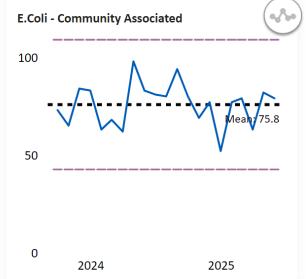
# Infection Prevention and Control - Kleb, E.Coli, Pseud

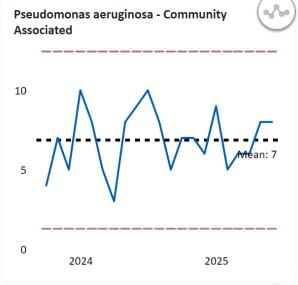
## June 25

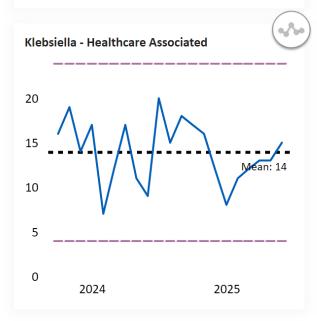
# Buckinghamshire, Oxfordshire and Berkshire West

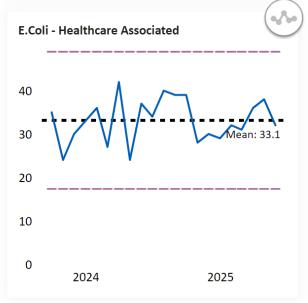
**Integrated Care Board** 

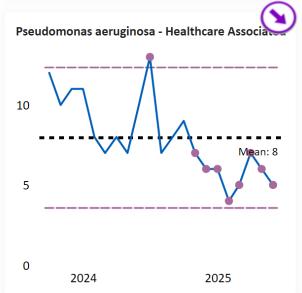












## How are we performing

Q1 June Klebsiella bloodstream infection (BSI) has increased from 26 in May to 34 in June, 19 community and 15 healthcare. 38% (8) of known sources were Hepatobiliary, 33% urinary tract infection. E.coli has decreased from 121 in May to 111 in June, 71% are community associated. Pseudomonas remains stable, reducing marginally from 14 to 13 in June, healthcare numbers show a steady reduction, 6 to 5 in June, although number are small.

#### **Actions & Risks**

Care Home outbreaks have reduced from 12 in May to 7 in June, of which; 1 respiratory, 1 Covid- 19, 4 Norovirus/D&V and one scabies. Care home stakeholders are actively preparing for the upcoming winter season by developing a comprehensive package of resources including; outbreak checklist and flowchart. These resources are designed to help mitigate risks and enable a prompt, co-ordinated response in the event of an outbreak.

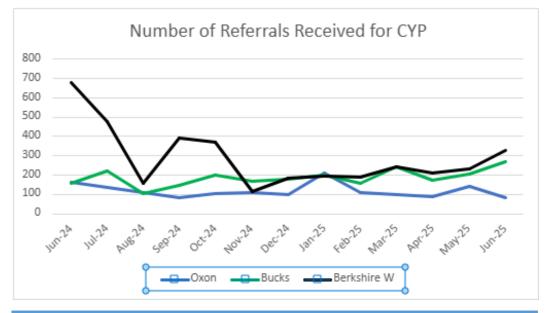
Public awareness has risen recently around the risk of rabies after the death of a UK tourist whilst abroad from an animal bite. Awareness has been raised in Primary Care, and a pathway for Rabies post exposure treatment/vaccination is in draft.

GP's were alerted to the changes to the routine childhood immunisation programme from 1 July 2025, with a suite of resources available to support healthcare professionals.

## **Autism and ADHD - CYP**

\*Data validation and alignment underway figures subject to change

Latest number of CYP waiting for assessment (waiting list)				
Oxfordshire CYP (Autism & ADHD)	4630 (Jun 2025)			
Buckinghamshire CYP (Autism & ADHD)	3558 (Jun 2025)			
Berkshire West (Reading, West Berks and Wokingham)	7315 (Jun 2025)			



Average (Mean) waiting time to assessment for CYP seen				
Oxfordshire CYP (Autism & ADHD)	100 weeks (Jun 2025)			
Buckinghamshire CYP (Autism & ADHD)	78 weeks (Jun 2025)			
Berkshire West (Reading, West Berks and Wokingham)	Autism – 68 weeks (Jun 2025)			
Berkshire West (Reading, West Berks and Wokingham)	ADHD – 73 weeks (Jun 2025)			

#### This metric measures

This measure seeks to highlight the number of patients referred for assessment for autism or ADHD. The number of children and young people currently awaiting an assessment and the mean waiting time to assessment. The data here relates to CYP (children and young people) only. Note tables contain previous months report data due to reporting timelines, chart shows latest referral numbers by Place.

#### How are we performing:

- The top table outlines the number of patients currently waiting for an assessment it displays 15,503 on the waiting list across BOB when using end-of-June 2025 figures for Buckinghamshire, Oxfordshire and Berkshire West.
- The chart provides an overview of the numbers of referrals received by month over the past 12 months.
- The final table highlights the mean wait time to assessment across BOB. This metric is of high importance as an indicator of demand and capacity across the System.
- Patient and carer experience here is challenged as it is unclear what level of support is required by individuals on the waiting list, there will be a differential in quality of experience whilst on the waiting list.

#### Actions:

- We have now agreed the proposed model of delivery for PINS with BHFT in Wokingham, and the delivery of learning walks will be starting in the end of September/beginning of October.
- Videos from the first year of delivery of PINS in Reading have been finalized, and they will be presented to SENCOs, school and parent carers on the 30<sup>th</sup> of September
- Rollout and expansion from April 2024 of BOB SHaRON Online Network pilot which provides support whilst waiting. 2631 new members from launch as of April 2025.
- SPENCER3D pilot in 20 schools across Berkshire and Bucks to promote informed strengths and needs led support.
- Two projects developing automated clinical decision-making tool and using AI for Autism & ADHD Assessment being explored and implemented. Piloting 'request for help' (from Q3 23/24) and 'BOB-NDQ' (from Q3 24/25 trial with families commenced September 2024). Expanding programme offer to incorporate early years (0-5) delivery.
- Scoping of support offer for families, children and young people while waiting for assessment taking place.
- Berkshire wide Neurodivergence event with over 180 attendees was held on 27th of June. The aim was to agree the preferred model for neurodivergent and strength oblique tool.

### Risks:

- Inequality of experience whilst on waiting list focus of SEND inspections and how CYP waiting are supported as a system.
- Children and Young People, risk to transfer of care to adult services due to services being paused in Oxfordshire and Buckinghamshire.

# **Patient Experience**

## **Complaints and PALS June 2025**

- 225 new cases received, in line with the previous month:
- 19 formal ICB complaints, 7 POD complaints, 21 MP letters, 35 POD pals, 143 pals contacts.

Themes: PALS contacts received overall dropped slightly to 178, from 197 last month, although we are seeing an increasing number of enquiries regarding eligibility for weight loss injections.

Formal complaint themes included ADHD assessments, CHC eligibility, Right to Choose pathway, Care provided by GP practice.

## Healthwatch Report update: Empowering young women: improving sexual health awareness and services across Reading and Wokingham Boroughs

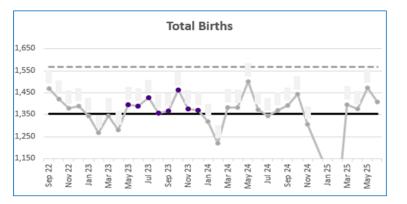
The ICB provided a response to Healthwatch thanking them for this report and the insights from these young women and people across the borough in raising awareness of the issues faced by them around their experiences of relationships and sexual education, and in accessing sexual health services to help understand the gaps and challenges that young people face in looking after their sexual health and wellbeing.

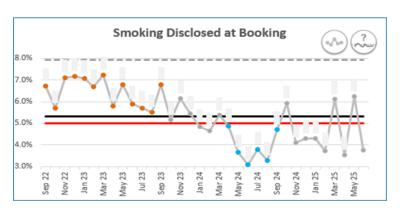
It is a timely report given the government has just published updated guidance on the provision of relationships and sex education (RSE) and health education for schools (published 15th July 2025), which is expected to be implemented in Sept 2026. This guidance for schools sets out the statutory legal duties of all schools and replaces previous DfE guidance but also supports other guidance produced in the interim period such as mental health in schools, sexual violence and sexual harassment in schools among others.

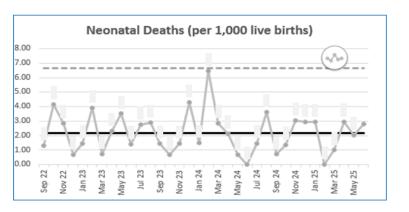
It is positive that most young people who fed into the report had received sex education and found it useful, but disappointing and concerning that young people are still reporting issues around the lack of inclusivity in RSE and health education, (especially in LGBTQ+ population), consent, and access issues.

The complex challenges young people face today, mean a personalised, inclusive approach to RSE and health education will be more meaningful. Key drivers for improving education and accessibility will require collaboration, between education, public health and local authority commissioned sexual health teams.

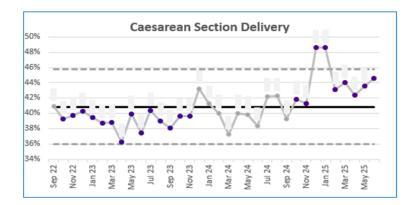
# **Maternity and Neonatal**

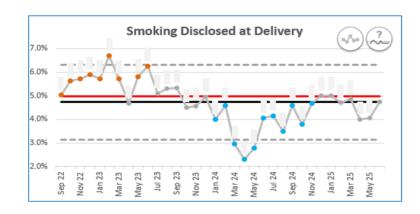


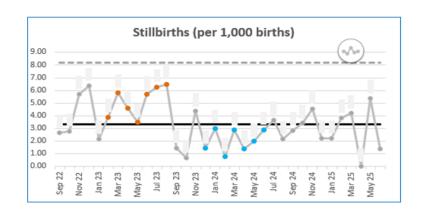




## **June 2025**







**Total births:** There were 1433 total births across the system in June which is about average.

**Breastfeeding initiation:** 80.88% of women and birthing people-initiated breastfeeding in June. This is above the 80% target for BOB above target.

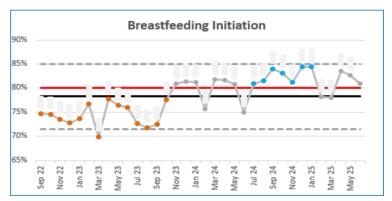
**Caesarean section delivery:** The percentage of births via c-section is 44.6% across the system. This indicator reflects both acuity and workload in each place.

**Neonatal deaths (rate per 1000 births):** 2.7 - there was 4 neonatal deaths in June which is within common cause variation.

Stillbirths (rate per 1000 births): there were

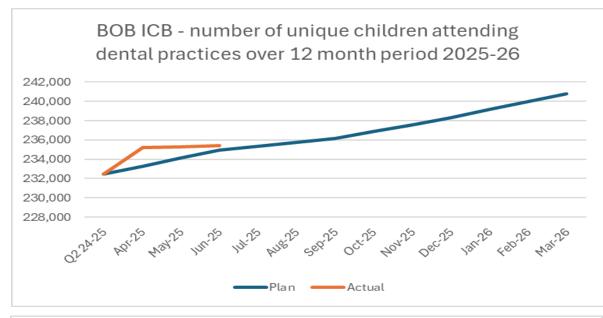
1.3 stillbirths across BOB in June. These will be reviewed in line with Trust perinatal mortality review processes. **Smoking at time of booking:** The percentage of women and birthing people smoking at booking was 3.77% in June is below the 5% target.

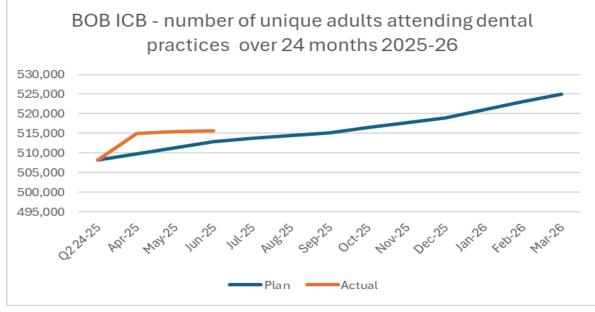
**Smoking at time of delivery:** The percentage of women and birthing people smoking at delivery was 4.76% in June and remains just below the 5% target.



# **Dentistry/High Street Dental Services – Access 2025-26**

# **June 25**





## Delivery against activity plan (M3)

As part of the ICB Operating Plan in 2025-26 there are targets to increase the number of children attending over a 12-month period and adults over 24 months. The baseline figures for the numbers are based on Q2 2024-25

Children 232,487Adults 508,290

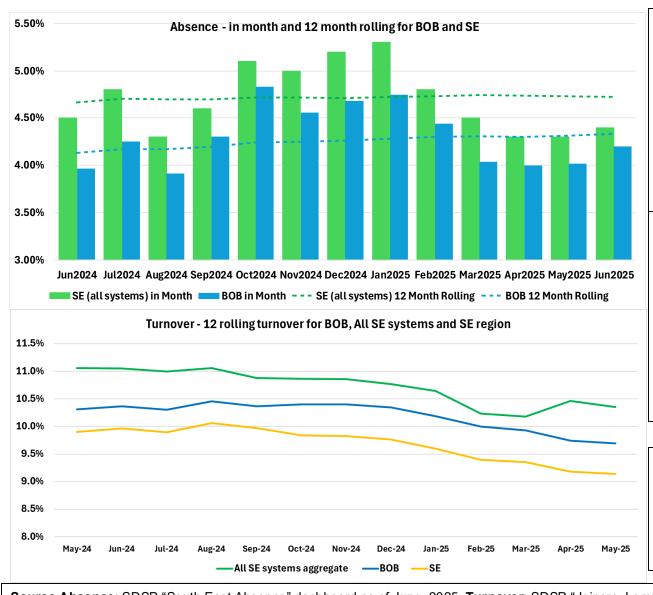
The targets for 2025-26 are:

Children 240,805Adults 525,011

At the end of June, the ICB was ahead of target. The ICB is pursuing the following initiatives to support improved access:

- 70,000 additional UDAs commissioned from April 2024
- Payment for contract overperformance up to 110% approved for 2025-26. 62 practices have advised of plans to overperform.
- Plans to commission a further 88,000 UDAs from 2025-26 with the additional activity to be commissioned from the autumn of 2025. The Contract Award Recommendation Report for 5 new practices has been approved with Preferred Bidders advised. Mobilisation commenced in May. The first practice is due to open in September.
- Flexible Commissioning for patients who have struggled to access NHS dental care 40
  practices taking part in the scheme. The practices saw 5,001 new patients to end of June with
  a total of 6,941 attendances
- In response to the new government manifesto commitment to commission an additional 700,000 urgent dental appointments nationally, practices started to provide these appointments from January. The ICB target of 15,454 Urgent and Unscheduled Dental Care appointments in 2025-26 with 36 practices providing additional appointments. By the end of June they had provided 2,842 urgent appointments with a total of 24,595 appointments delivered against a target of 110,458 for the year.

# Workforce – BOB ICS Absence and Turnover



## How are we performing?

#### **Absence**

Over the period April 2024 - April 2025, BOB's 12 month rolling absence rate was consistently below the rate for the SE systems, by approximately 0.5%. The in-month absence rate was also consistently lower than the SE. Both the BOB and 12 month rolling absence rate has risen very slightly over the same period.

#### Turnover

The rolling 12-month turnover rate has fallen slightly for BOB, the SE, and the SE overall, over the period May 2024 – May 2025, by between 0.6 - 0.8%.

Over the same period, BOB's 12 month rolling turnover rate was consistently below the aggregate rate for the combined SE systems, averaging 0.5% lower across the period.

### Actions

#### Absence .

There continues to be a focus on sickness absence as a key factor in workforce productivity. Providers have submitted 12-month sickness absence targets as part of their 2025/26 operational workforce plans, alignment to these targets are monitored via the monthly bilateral meetings. NHS E also reviews trust and system rates to identify outliers for interventions. The workstream focusing on staff health and well-being and financial health will also specifically focus on addressing sickness absence

#### Turnover

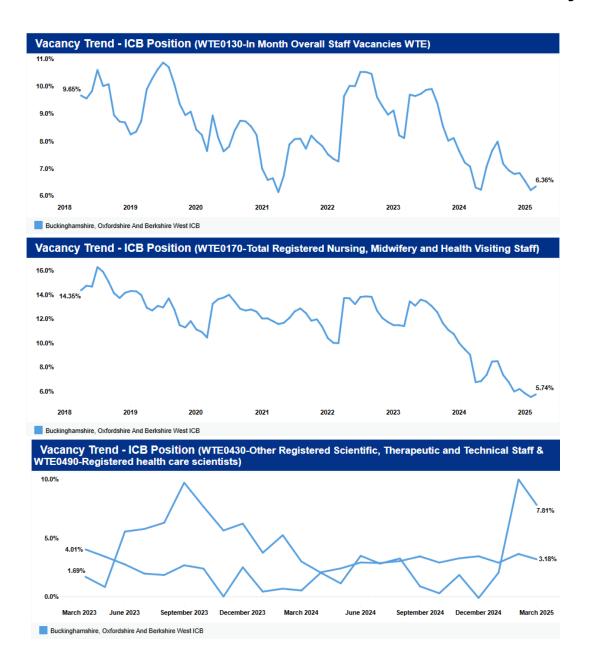
Trusts are now well established in their retention programmes following the creation of a network of retention and People Promise leads across the system to share good practice and strategies. We have two People Promise Exemplar sites to drive forward initiatives

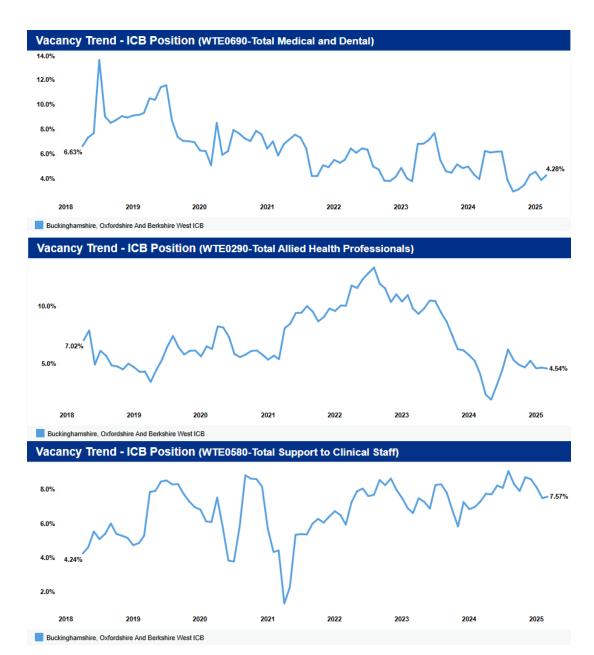
#### Risks:

- Absence and turnover remain a risk on the BAF and Trust Risk Registers for relevant organisations within the System.
- These risks are being mitigated by provider initiatives to promote health and well-being, to better understand and alleviate the impact of stress for the workforce, and to target retention activities for the areas most impacted by high turnover. These initiatives are supported by system wide workstreams

**Source Absence**: SDSP "South East Absence" dashboard as of June 2025. **Turnover**: SDSP "Joiners, Leavers and Turnover Dashboard" May 2025 "SE" Turnover measures the % of leavers who leave the region, and this will usually be lower than the leavers for individual ICBs as it ignores movement between systems in same region. "All SE systems aggregate" is the aggregate turnover rate of all the individual SE systems. ICBs are included in both Absence and Turnover rates.

# Workforce – Vacancies trend for major staff groups





# Glossary



## Glossary

Icon Description

 $\bigcirc$ 

Special cause variation of an increasing nature where UP is not necessarily improving nor concerning.



Special cause variation of an increasing nature where DOWN is not necessarily improving nor concerning.



Special cause variation of a CONCERNING nature where the measure is significantly HIGHER.



Special cause variation of a CONCERNING nature where the measure is significantly LOWER.



Common cause variation, NO SIGNIFICANT CHANGE.



Special cause variation of an IMPROVING nature where the measure is significantly HIGHER.



Special cause variation of an IMPROVING nature where the measure is significantly LOWER.



Low is good - Performance is declining



Low is good - Performance is improving



High is good - Performance is declining



High is good - Performance is improving



Performance has not changed

	Icon	Description
	P	This process is capable and will consistently PASS the target if nothing changes.
	?	This process will not consistently HIT OR MISS the target as the target lies between the process limits.
	(F)	This process is not capable and will consistently FAIL to meet the target.
	$\bigcirc$	This metric currently has no performance target set

## SPC chart data points

Special cause - concern

Special cause - improvement

Special cause - neither

#### Infection Prevention and Control

Long name

**Cancelled Operations** 

Clostridioides difficile (C. difficile) infections

Escherichia coli (E.coli) bacteraemia

Klebsiella species (Klebsiella spp.) bacteraemia

Methicillin resistant Staphylococcus aureus (MRSA) bacteraemia

Meticillin-susceptible Staphylococcus aureus (MSSA) bacteraemia

Mixed Sex Accommodation Breaches

Pseudomonas aeruginosa (P. aeruginosa) bacteraemia

## **Organisation Codes**

Code	Org •	Org Name
10Q	Oxfordshire	Oxfordshire sub-ICB
14Y	Buckinghamshire	Buckinghamshire sub-ICB
15A	Berkshire West	Berkshire West sub-ICB
QU9	BOB ICB	NHS Buckinghamshire, Oxfordshire and
		Berkshire West ICB
RHW	RBFT	Royal Berkshire NHS Foundation Trust
RNU	OH	Oxford Health NHS Foundation Trust
RTH	OUH	Oxford University Hospitals NHS Foundation
		Trust
RWX	BHFT	Berkshire Healthcare NHS Foudnation Trust
RXQ	BHT	Buckinghamshire Healthcare NHS Trust
RYE	SCAS	South Central Ambulance Service NHS
		Foundation Trust