



Birmingham and Solihull
Integrated Care System
Caring about healthier lives

Birmingham and Solihull ICS Headline Finance & Performance Report

Month 8 – 2023/24



Birmingham and Solihull
Integrated Care System
Caring about healthier lives

Finance

Month 8 Financial Performance

Revenue Position

Year to date: £29.9m deficit; £25.1m adverse compared to plan

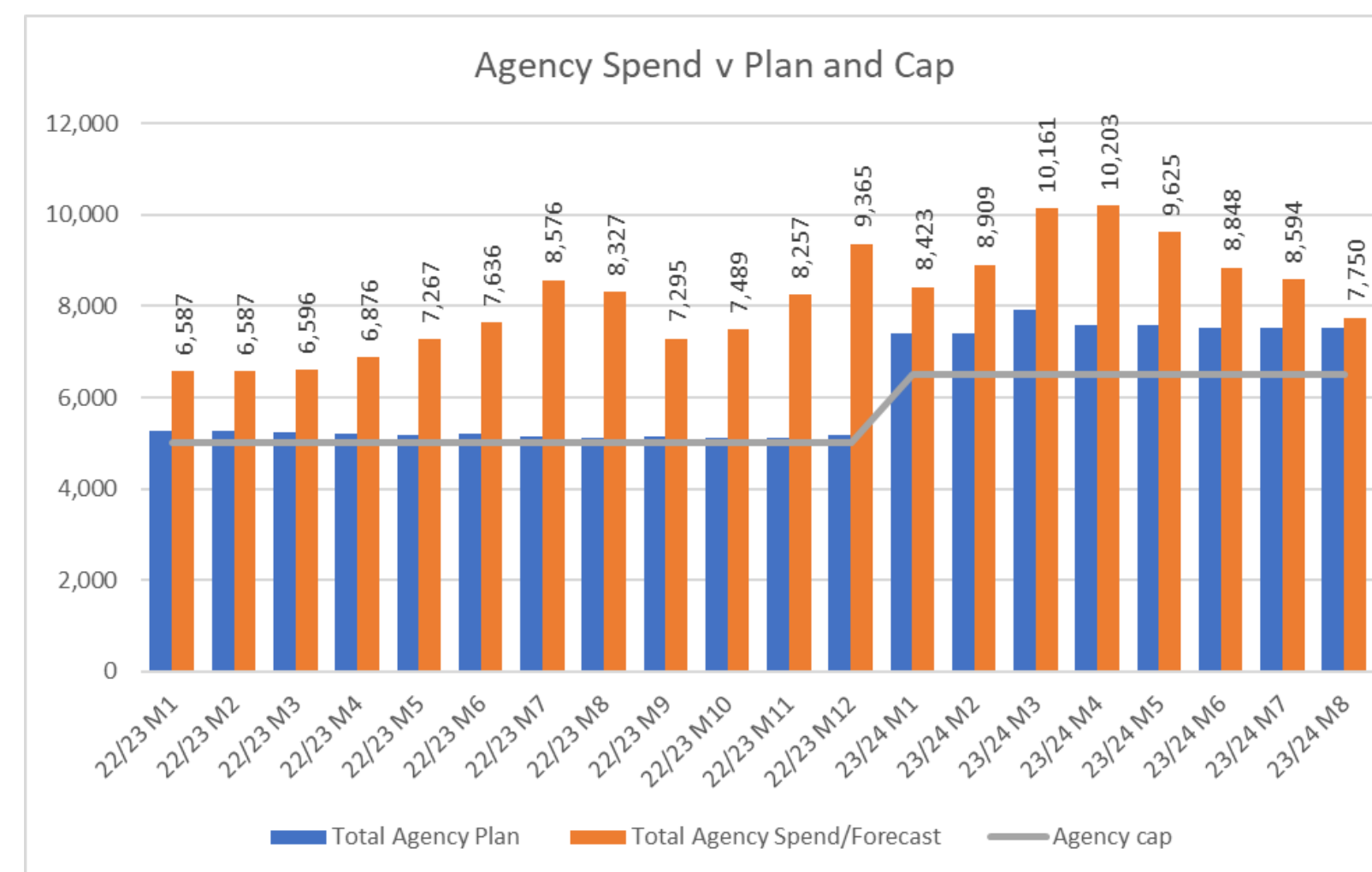
Forecast: Breakeven in line with original plan, with a revised trajectory agreed with NHSE during November 2023

Key Drivers:

- **Industrial Action** – direct cost £13m at M7, with no further IA costs seen in Month 8. System received additional allocation of £25.2m for Industrial Action and other inflationary pressures.
- **Temporary staffing pressures** – these remain significant, with a total pay overspend of £87m for the year to date (£74m in month 7). Spend on temporary staff improved in month.
- **MH Pressures** – continued impact for level/casemix of Out of Area beds
- **Slippage in developments** held to offset some pressures
- **Inflation:** Providers are seeing inflationary pressures of circa £33m,
- **ERF:** Income received for Months 1-5 overperformance relating to ICB commissioned activity with forecast additional overperformance for Months 6-8. System reflecting £13m benefit relating to ERF income.
- **Prescribing** £5m pressure being seen year to date.

Efficiencies: £4.4m ahead of plan at M8, forecast for £8.4m overperformance by year end. Significant reliance on non recurrent schemes.

		YTD			FOT		
		Plan £000s	Actual £000s	Variance £000s	Plan £000s	Actual £000s	Variance £000s
Recurrent Status	Recurrent	55,257	49,439	-5,818	87,194	86,938	-256
	Non Recurrent	35,915	46,118	10,203	70,641	79,299	8,658
	Total Efficiencies	91,172	95,557	4,385	157,835	166,237	8,402
	Recurrent % of total	61%	52%	-133%	55%	52%	-3%
Run Rate	Average per mth to date	11,396	11,945	548			
	Average per mth to go				16,666	17,670	1,004



- **Agency Spend** - £7.8m spend in November, compared to £7.6m plan
- Significant reduction since peak of £10.2m in July.
- Still above NHSE cap and 22/23 startpoint, but below equivalent month in 22/23

FINANCIAL RECOVERY TRAJECTORY FOR SYSTEM – NOVEMBER 2023

The system has submitted a financial recovery trajectory which will deliver a breakeven position by year end, following:

- An allocation of £25.2m in respect of the £800m national fund to cover industrial action costs
- An adjustment to the ERF target to reduce by an additional 2%, subject to a floor of 100% of the 19/20 activity. Alongside overperformance for additional elective activity deliver above our target levels, this is expected to generated £18m of additional income.
- Confirmation that systems could retain the underspend in Delegated Dental services, after overspends in pharmacy and optometry are covered. This improves the system position by £2.4m above the £7m already assumed in previous forecasts.
- Confirmation that systems could be flexible in the use of an identified range of Service Development Funding and programme allocations and could retain any resulting slippage on these

Programme slippage includes £1.8m on allocations to support prevention and long term conditions and £0.9m on new schemes to support learning disabilities and autism. No existing schemes were stopped as a result of this revised plan – all slippage relates natural slippage linked to the timing of planned schemes.

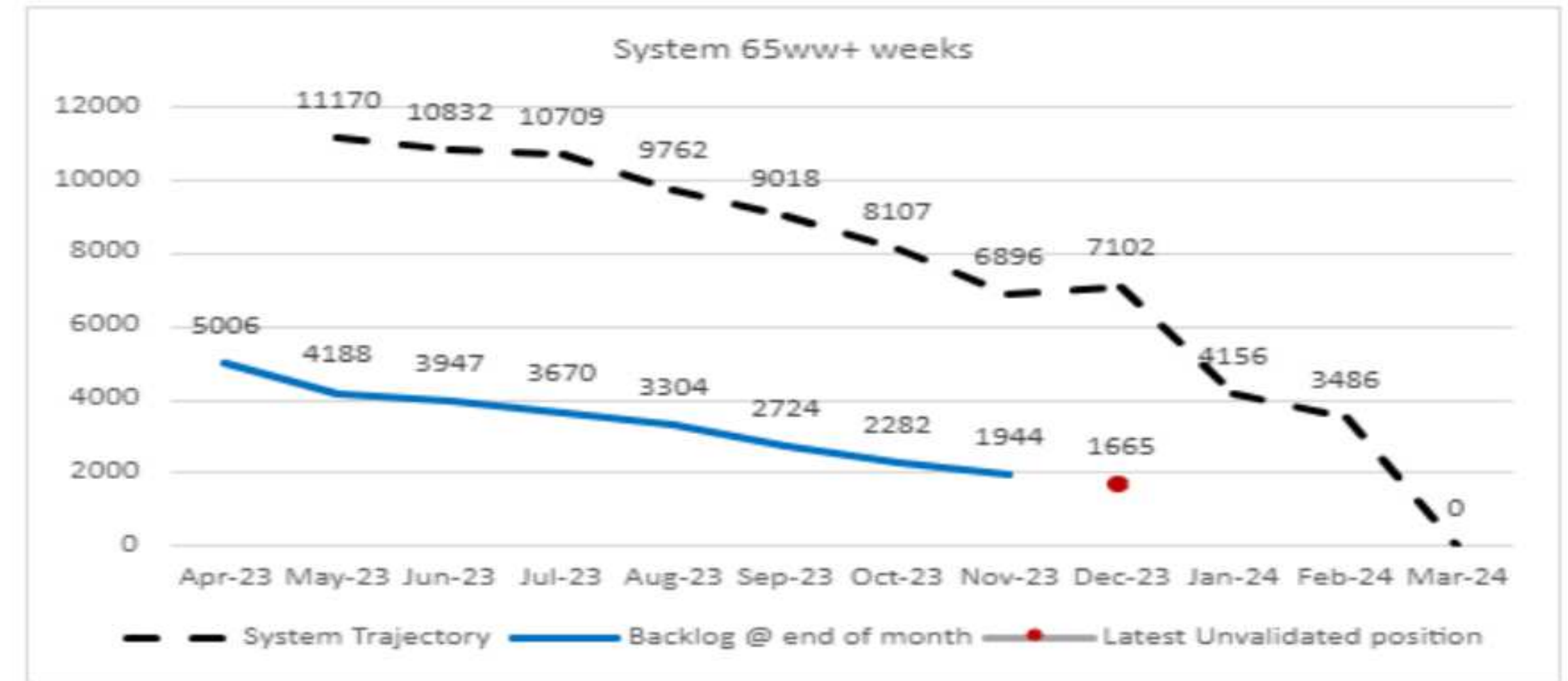
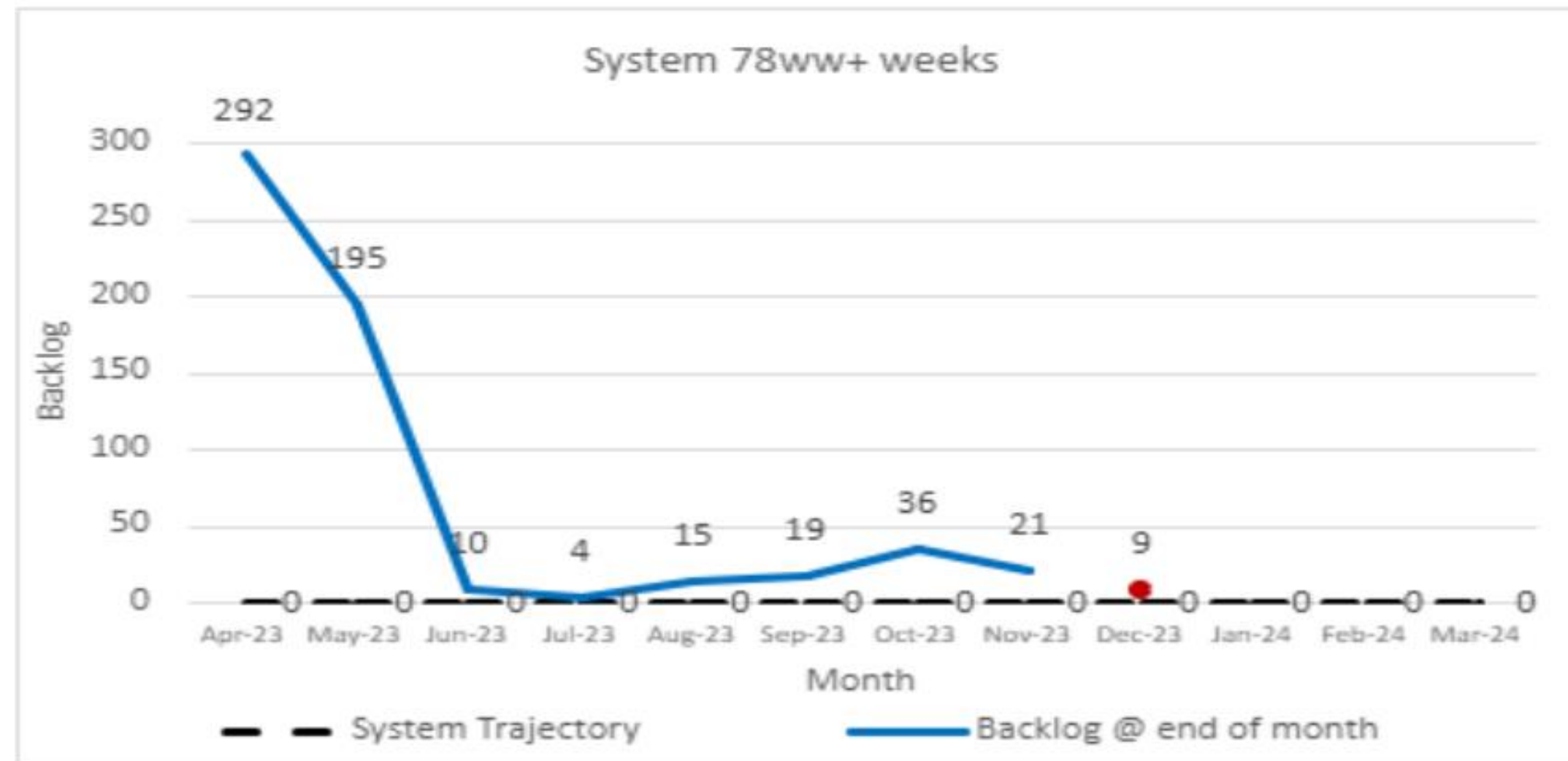
All schemes have been subjected to clinical review at an organisation and system level. These reviews have resulted in some initial proposals being adjusted or removed. As a result of these changes, the system does not expect any material impacts on the quality of patient care relating to short term slippage in investment. Any additional mitigating actions will continue to be reviewed through existing assurance routes to ensure that services are provided in a safe and effective manner.



Birmingham and Solihull
Integrated Care System
Caring about healthier lives

Elective recovery

System Waiting Time Backlogs



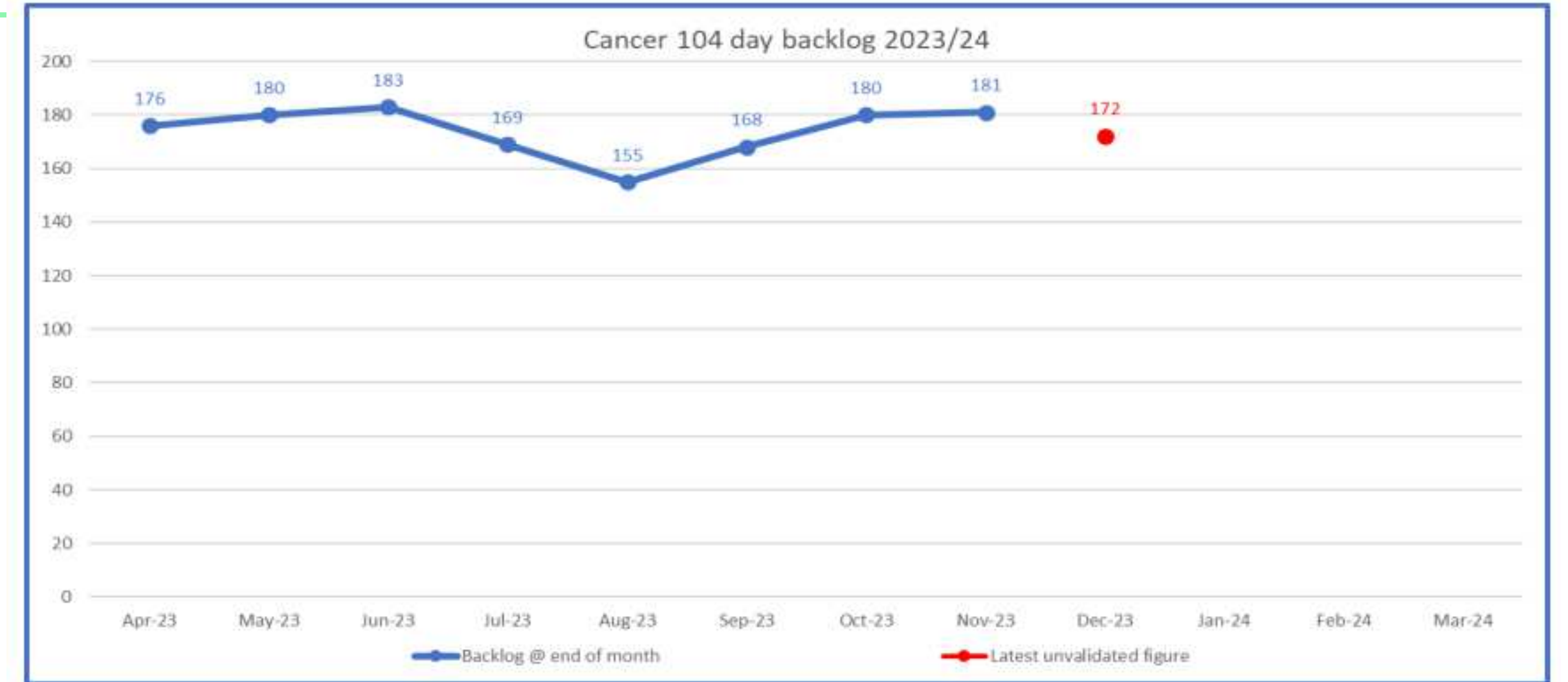
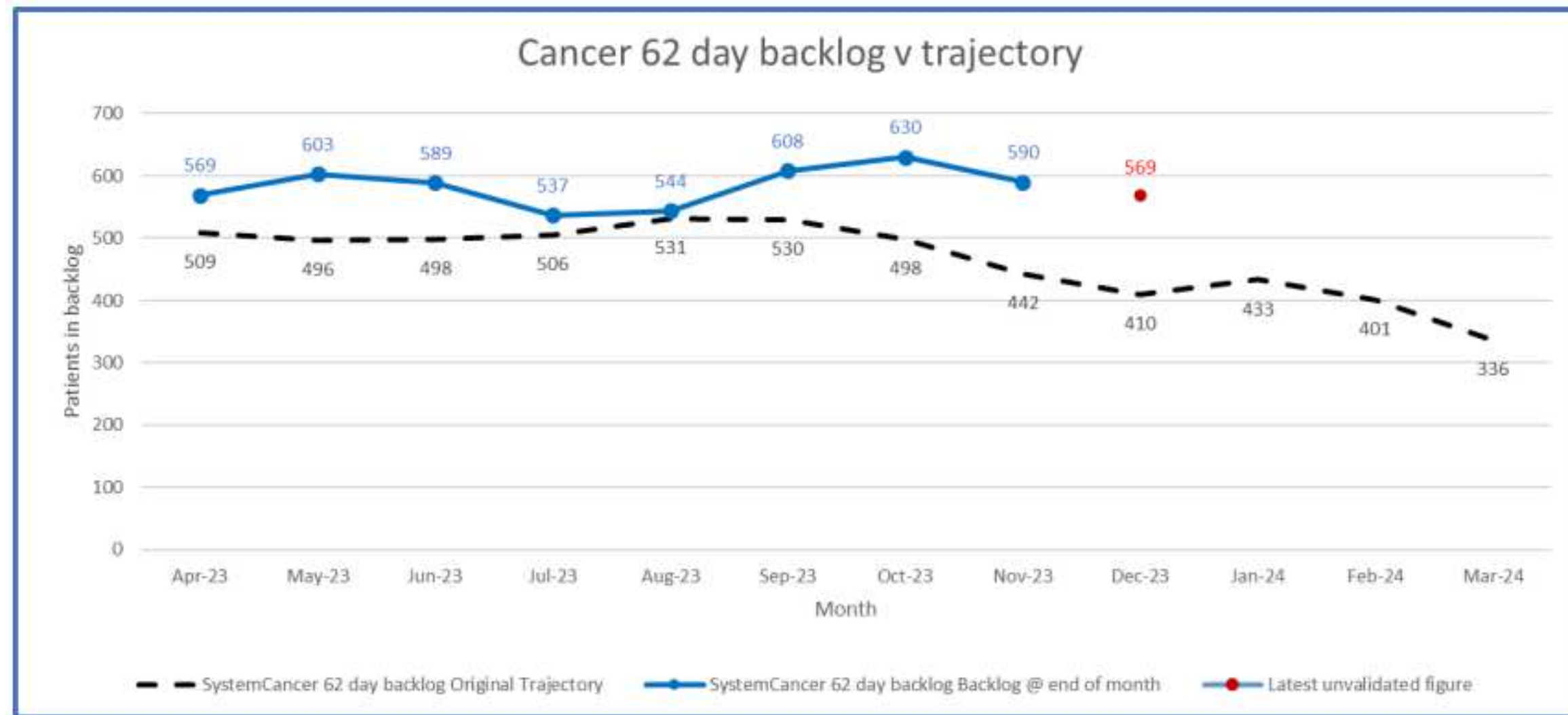
- 78 week wait numbers have reduced from 9,505 in May 2022 to 21 in November 2023. The above graph shows the latest in month December position available that was shared with ICB F&P – **subsequently the final numbers were released for December and showed that there were no 78 week waits across the system at the end of the month. Great progress is also being made in January to maintain this position.**
- 65 week waiters are significantly below the system’s target trajectory in 2023-24, and the system is still on track to reduce this figure to 0 by the end of March 2024, in line with national targets. A number of specialties have already removed any waiters over 65 weeks from their lists and continue to reduce their waiting times, the system remains confident in delivery zero breaches of 65 weeks for patients by the end of March 2024.
- As at the end of November, 11,025 patients have been waiting over 52 weeks for treatment. This has reduced from a peak of 34,833 in July 2022 and from 18,791 in April 2023.



**Birmingham and Solihull
Integrated Care System**
Caring about healthier lives

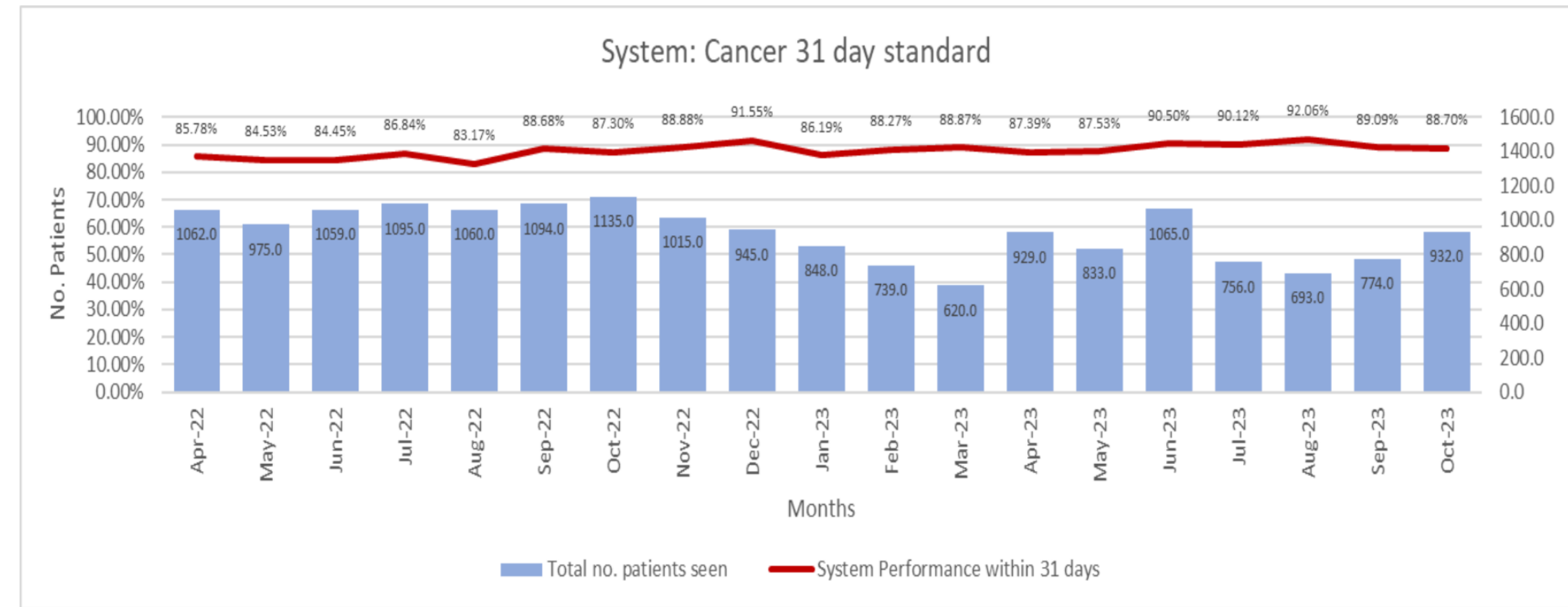
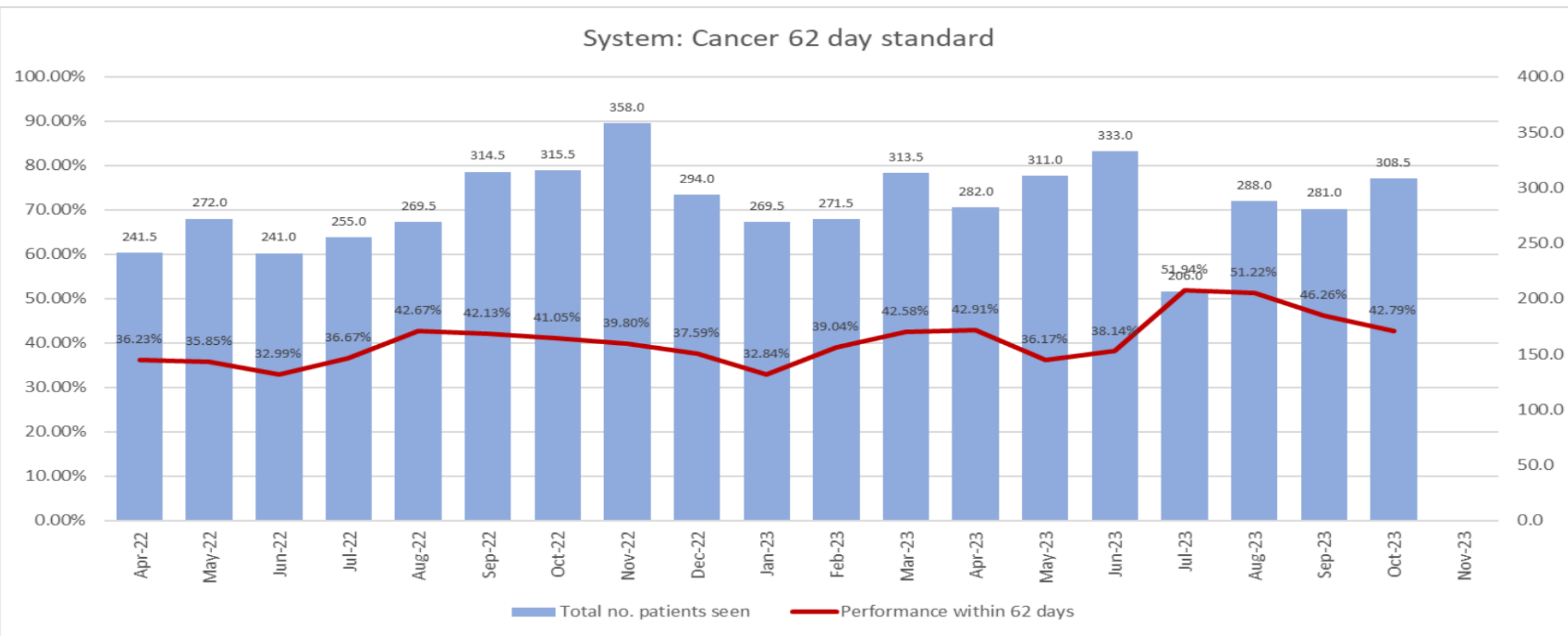
Cancer

Cancer treatment backlogs

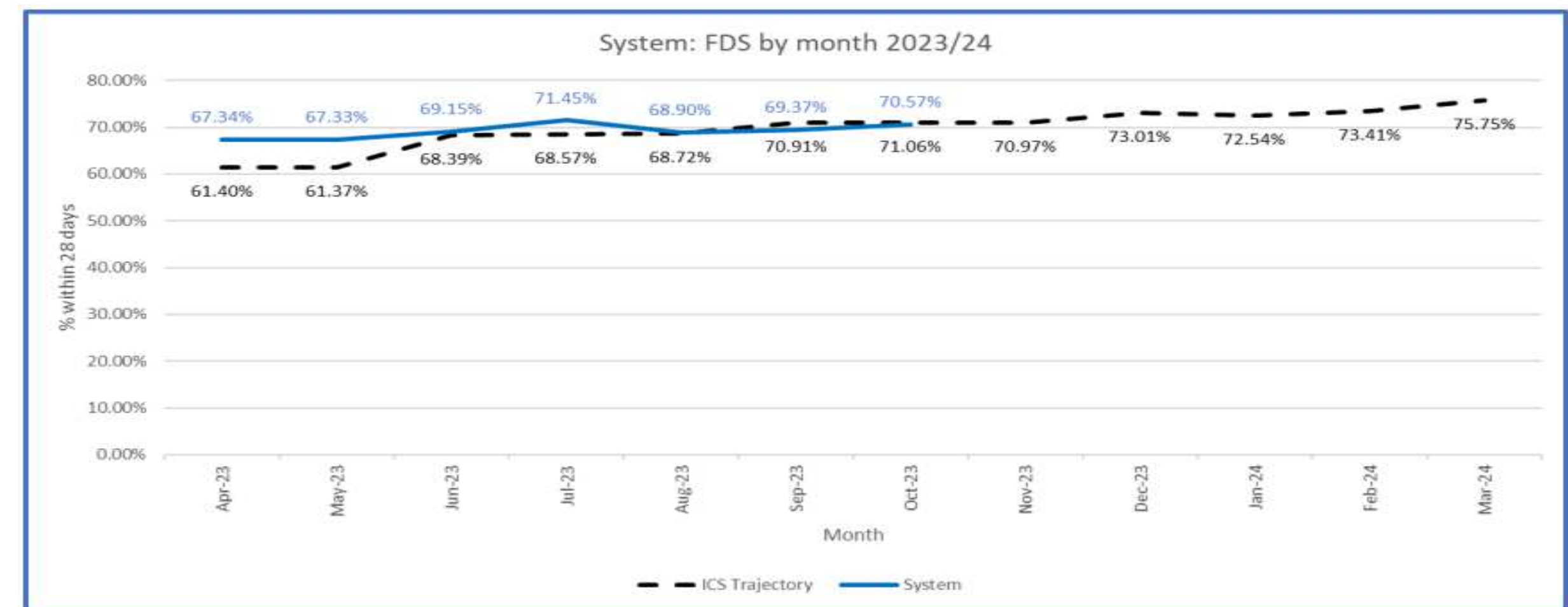


- Improvement in Cancer 62 day backlogs has been variable across 2023/24, with peaks during spring late summer. Backlog numbers have showed some level of improvement in November and early December, and are considerably below the peak of 1,524 in July 2022.
- The most challenged specialties are Urology, Gynaecology and Colorectal in the latest data. There is regular weekly oversight across the system on the key challenges and how the system can effectively and efficiently work together to reduce the overall backlog. There is ongoing locum recruitment that will increase Gynaecology capacity and support the reduction in waiting times for patients. Focus on diagnostics capacity to support cancer treatment and reducing any delays to diagnostic turn around times that will further support backlog reduction.
- Cancer 104 day backlogs have deteriorated since the improvements made in July & August. The patients in the 104 day backlog are in proportion to the overall 62 day backlog, with plans to reduce the overall backlog during Q4 this is planned to have a positive impact on reducing the 104 day backlog as well.

New Cancer Standards



- The new cancer standards see a reduction in the previous multiple measures to merge the KPI's so that there is a single 31 day and 62 day standard as well as monitoring the new Faster Diagnosis Standard.
- Delivery against these merged standards is intrinsically linked with the cancer backlog – to consistently deliver against these standards the backlog will need to improve

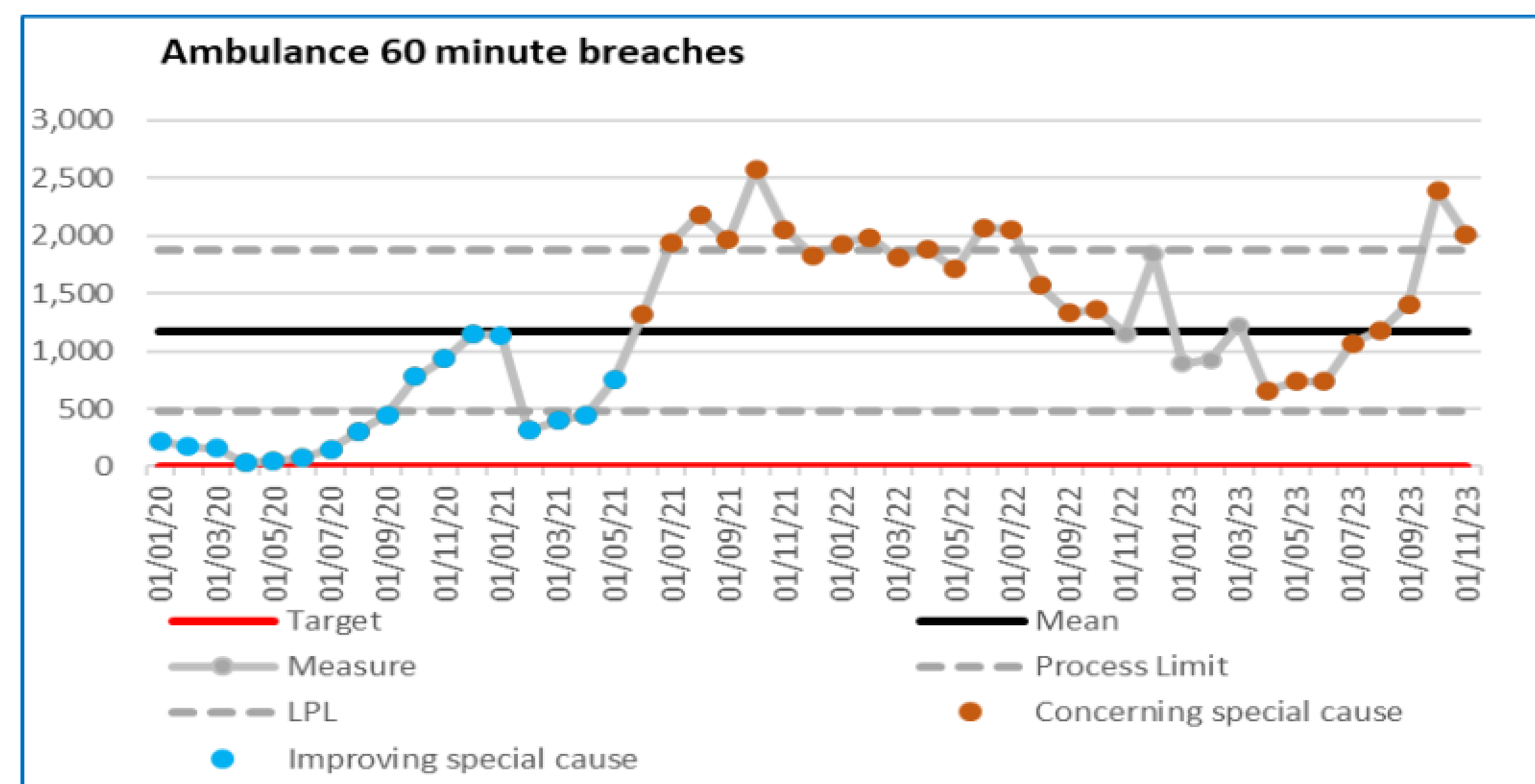
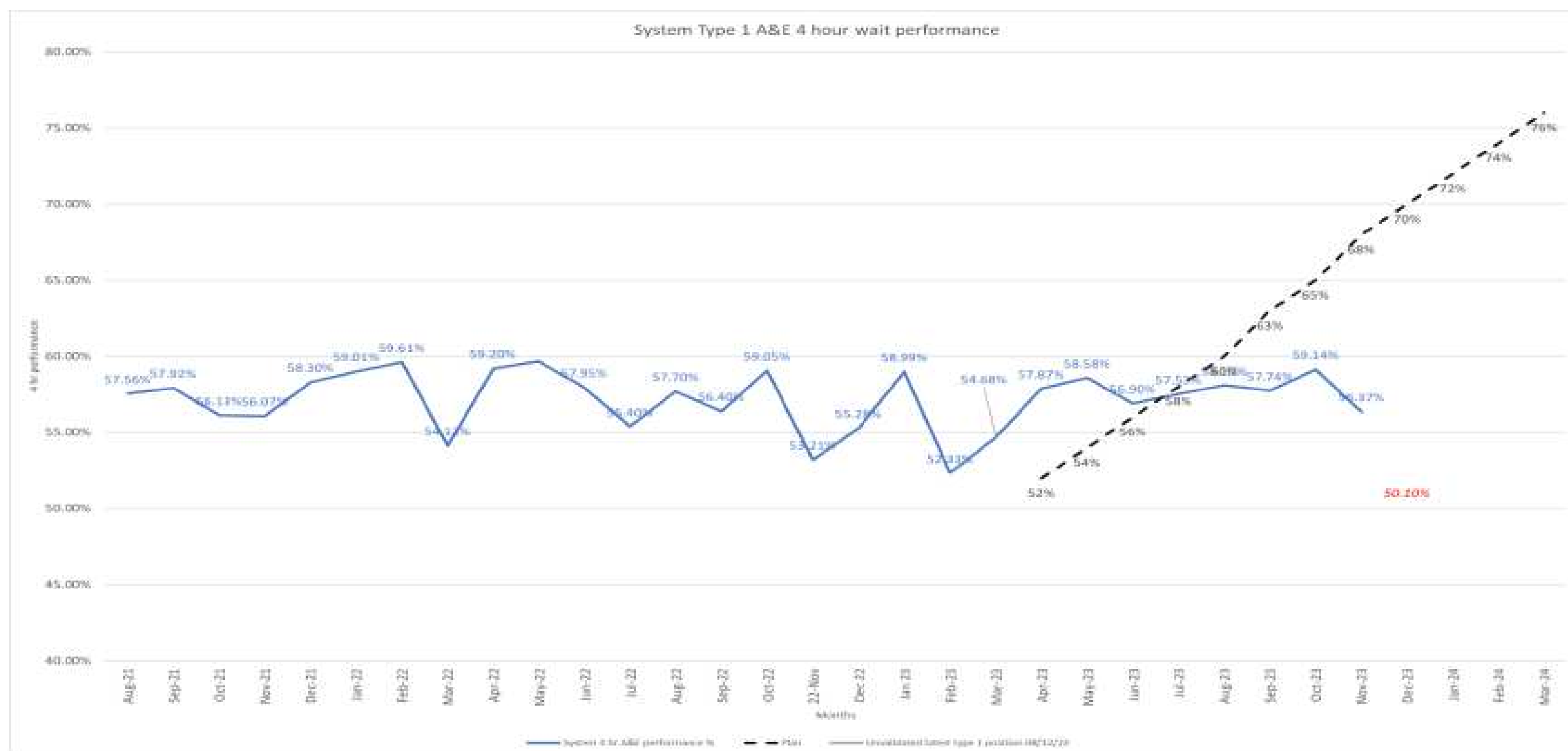




Birmingham and Solihull
Integrated Care System
Caring about healthier lives

Urgent and emergency care

Accident & Emergency



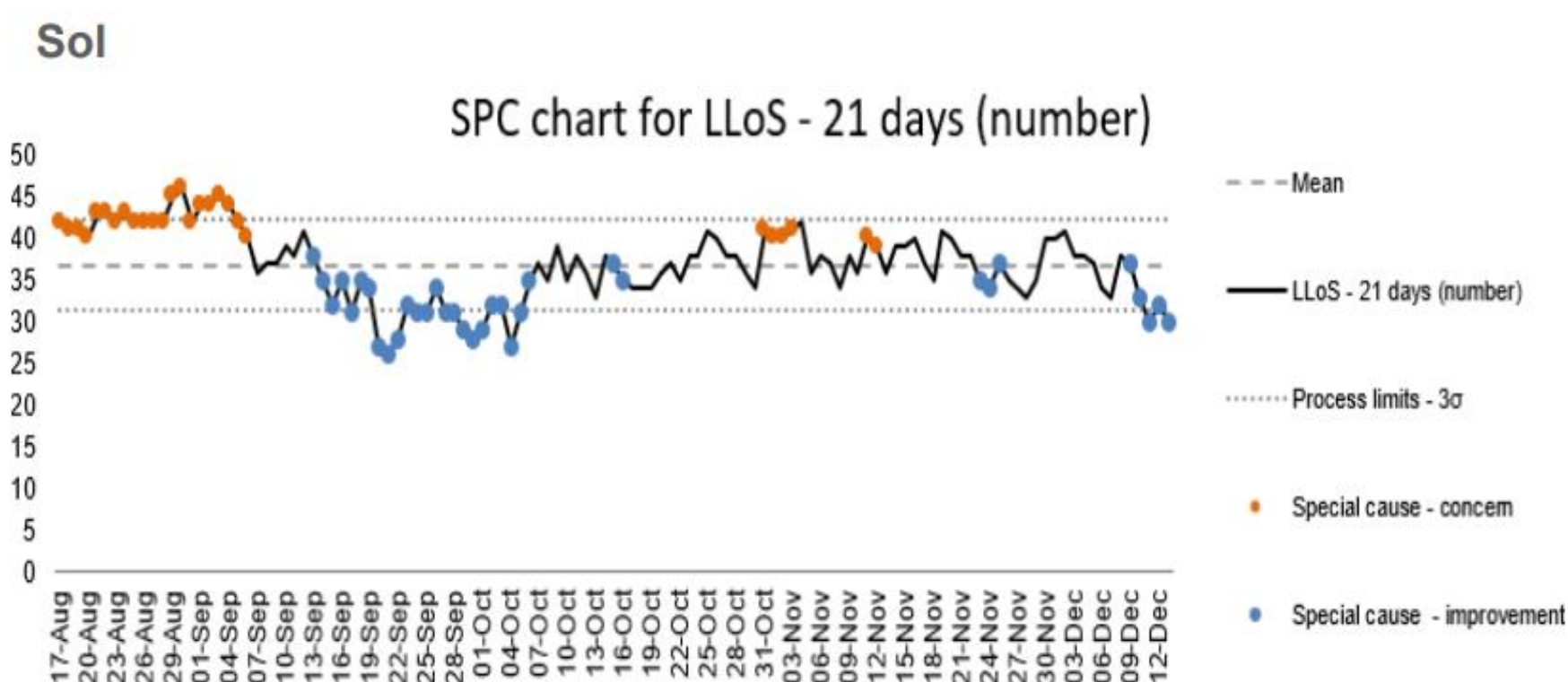
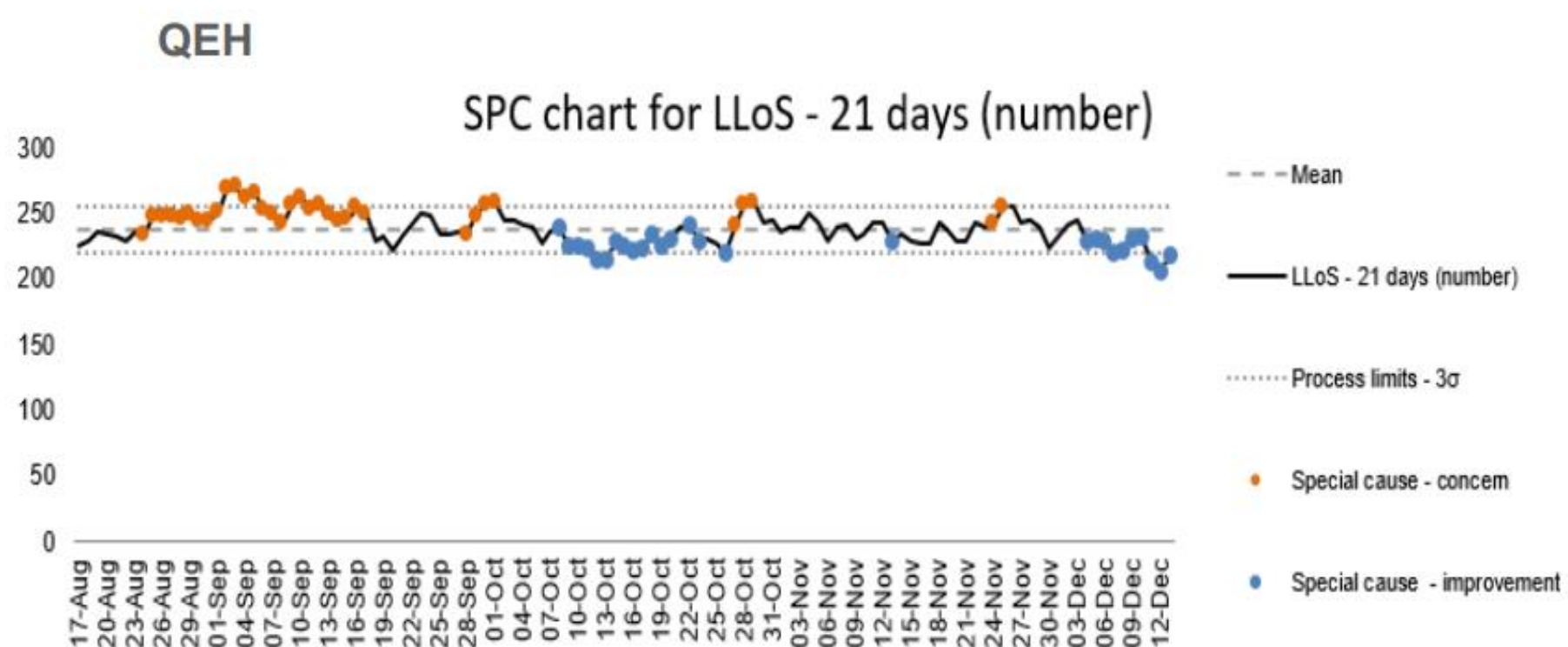
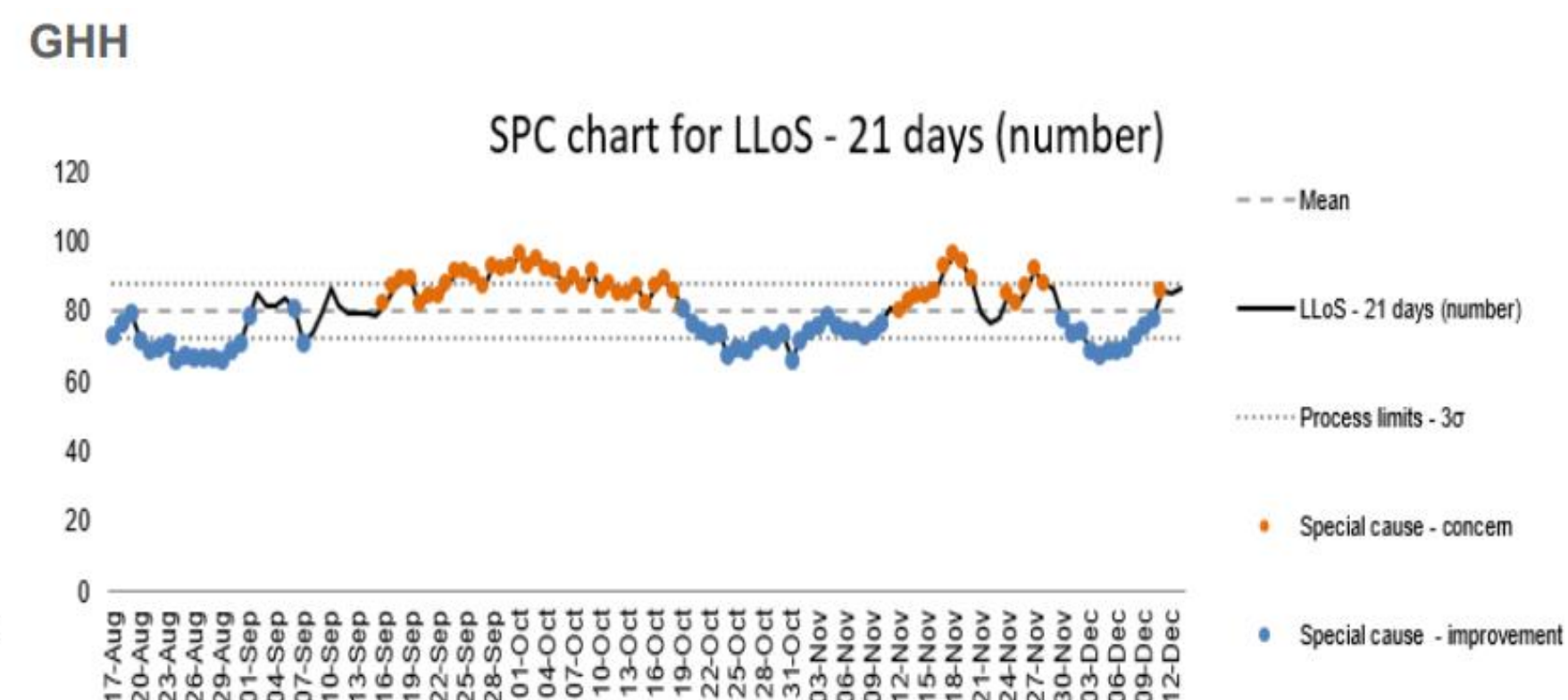
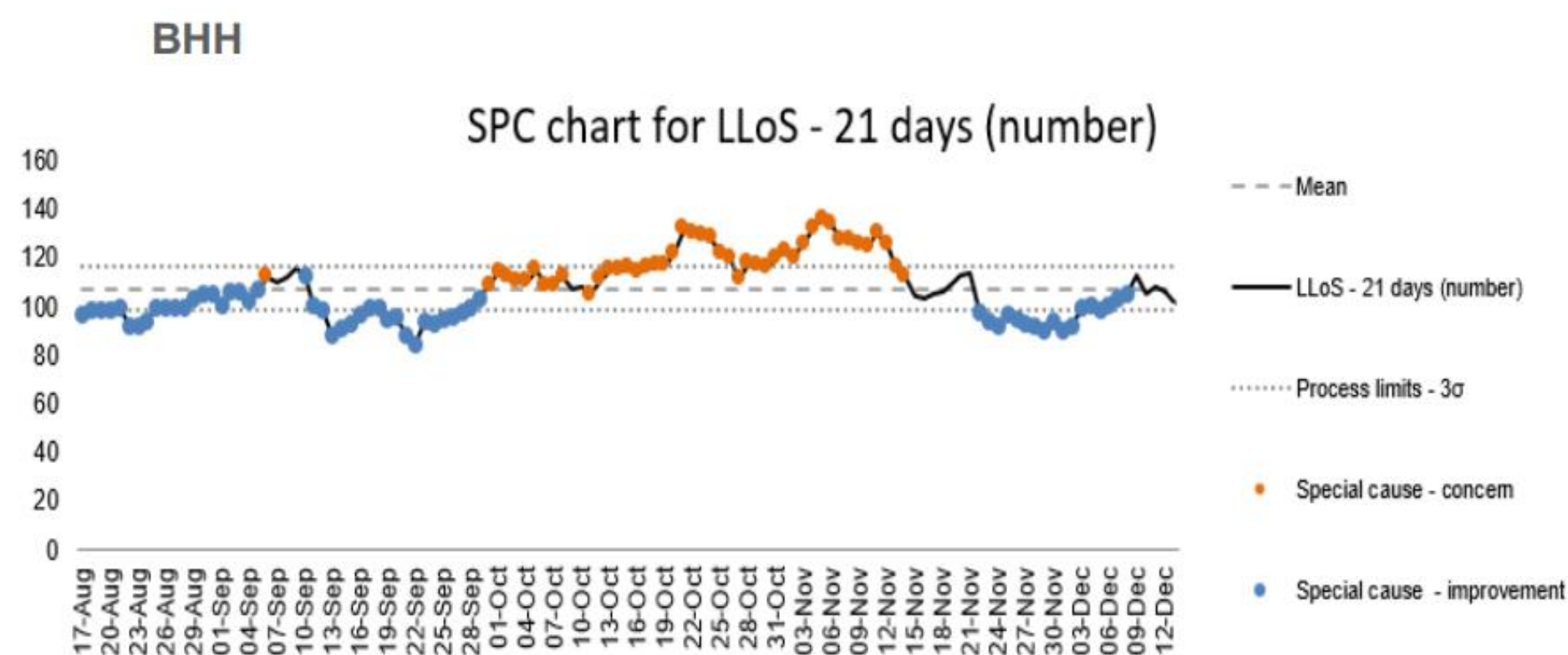
- Performance against the 4 hour A&E performance target had remained stable at just under 60% for the majority of 2022-23 and into 2023-24, however the system has seen a deterioration in this performance in November and into December. This corresponds with increases seen in ambulance handover delays.
- Ambulance handover delays have increase significantly since October, sitting at levels in line with the peaks that occurred during 2021 and 2022. The Christmas period was particularly pressurised but ambulances handovers taking more than 60 minutes have started to reduce in recent weeks.
- Additional community beds have been opened to support the number of patients that can be stepped down from an acute setting and increase the available capacity and flow on a daily basis. Focus on ensuring that patients who are medically fit for discharge are able to go to their appropriate onward destination at the earliest opportunity and not remain in hospitals when they no longer need to be. Length of stay is also receiving weekly review and oversight about continued reductions to support capacity. This work in discharging patients is key to support throughput and flow through the hospital sites allowing admissions and reducing time that patients spend in A&E.



Birmingham and Solihull
Integrated Care System
Caring about healthier lives

Discharges

Length of Stay



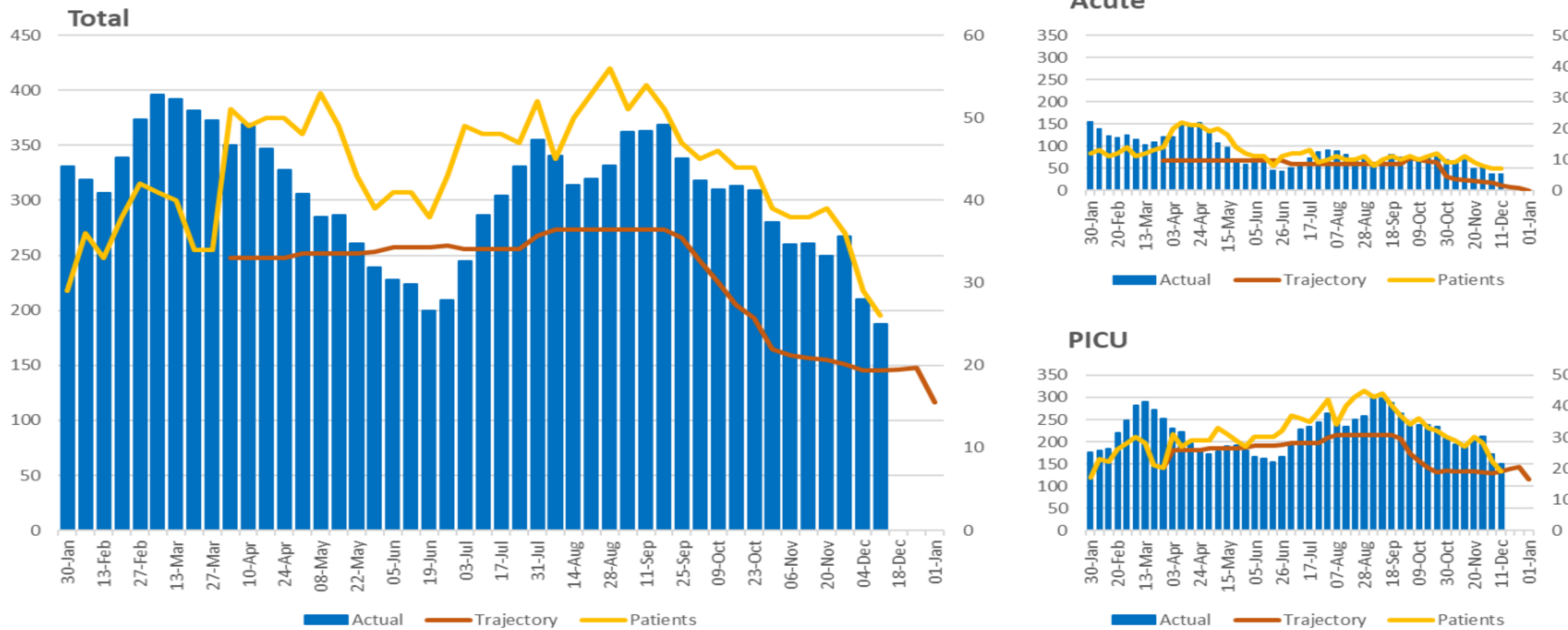
- Long length of stays across all UHB sites have reduced during November and December, with only Good Hope showing an increase since early December. This shows positive progress since the introduction of UHB's new site-based leadership model on 1st October.



Birmingham and Solihull
Integrated Care System
Caring about healthier lives

Mental Health

Mental Health – Out of Area Placements



- Out of Area bed days have dropped significantly since the peak in August 2023, which fewer than half of the number of patients now remaining in inappropriate out of area placements. Patients requiring an acute out of area bed are now down to 10, with a higher number of PICU beds remaining, although this also dropped significantly in recent months.
- Earlier in the year there were almost 60 patients who were placed out of area in a specific week, this number has continued to fall as is now down to 25 in the latest available weekly data. The system still has more work to do to meet the targets set out in the operational plan but the continued progress and reductions seen in the inappropriate out of area bed days remain positive.
- The system is moving towards a single governance arrangement for mental health patients through the 2024/25 plan and this will positively impact for patients as well as continuing to reduce the inappropriate out of area bed days with a more joined up system offer.

Talking Therapies Access

Talking Therapies Accessing, BSOL CCG

October, 2023 Current In-Month Performance **2,895**

[Return to Contents](#)

Patients Entering First Treatment, In-Month, BSOL ICB



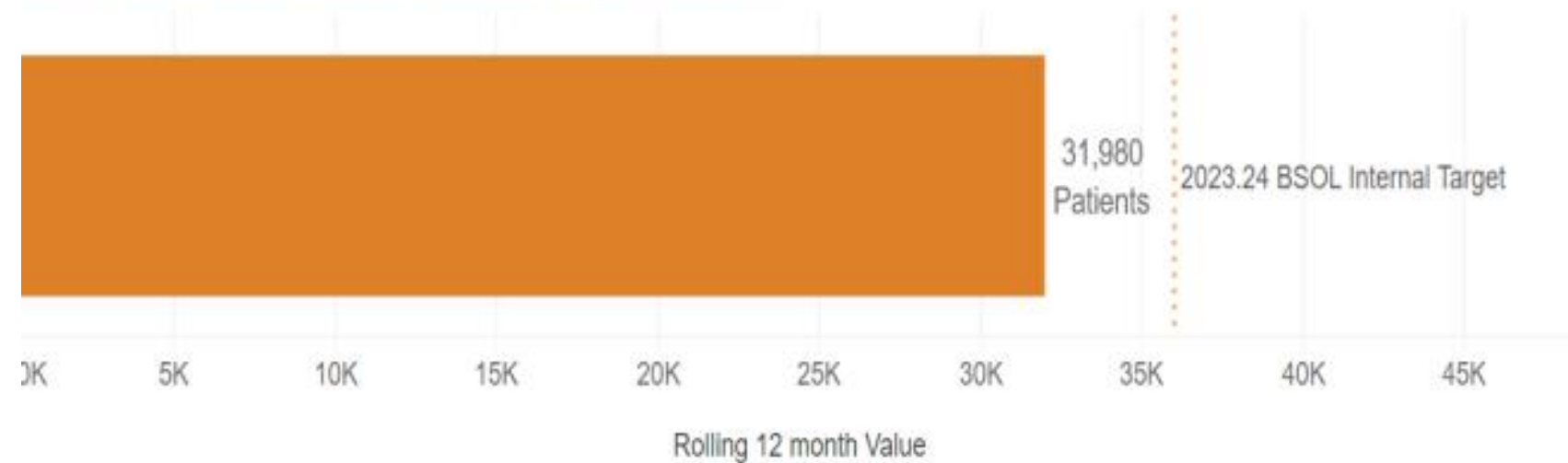
Count Accessing	2,395	1,910	2,580	2,340	3,680	2,400	2,655	2,820	2,850	2,710	2,745	2,895
Count Accessing FYTD	17,330	19,240	21,820	24,160	27,840	2,400	5,055	7,875	10,725	13,435	16,180	19,075
Count Accessing R12m	25,240	25,425	25,975	26,315	27,840	28,380	28,935	29,805	30,420	30,875	31,225	31,980

- Accessing targets are volumetric in the 2022.23 year and based on the numbers of patients reaching their first treatment appointment.
- In-Month trajectory target plotted is that submitted for the 22.23 planning round.
- Both planning round and NHS E Target plotted on rolling 12 month chart for 2022.23
- Volumetric targets replace prevalence accessing targets due to transition from 2000 to 2014 Adult Psychiatric Morbidity Survey as benchmark.
- 2023.24 BSOL target adjusted down to 42,462 (from 51,700) by NHS E in 2023.24 planning round.

Source: NHS Digital IAPT Monthly

Rolling 12 Months Patients Entering First Treatment

between November, 2022 and October, 2023



2022.23 BSOL Internal Target
36,289

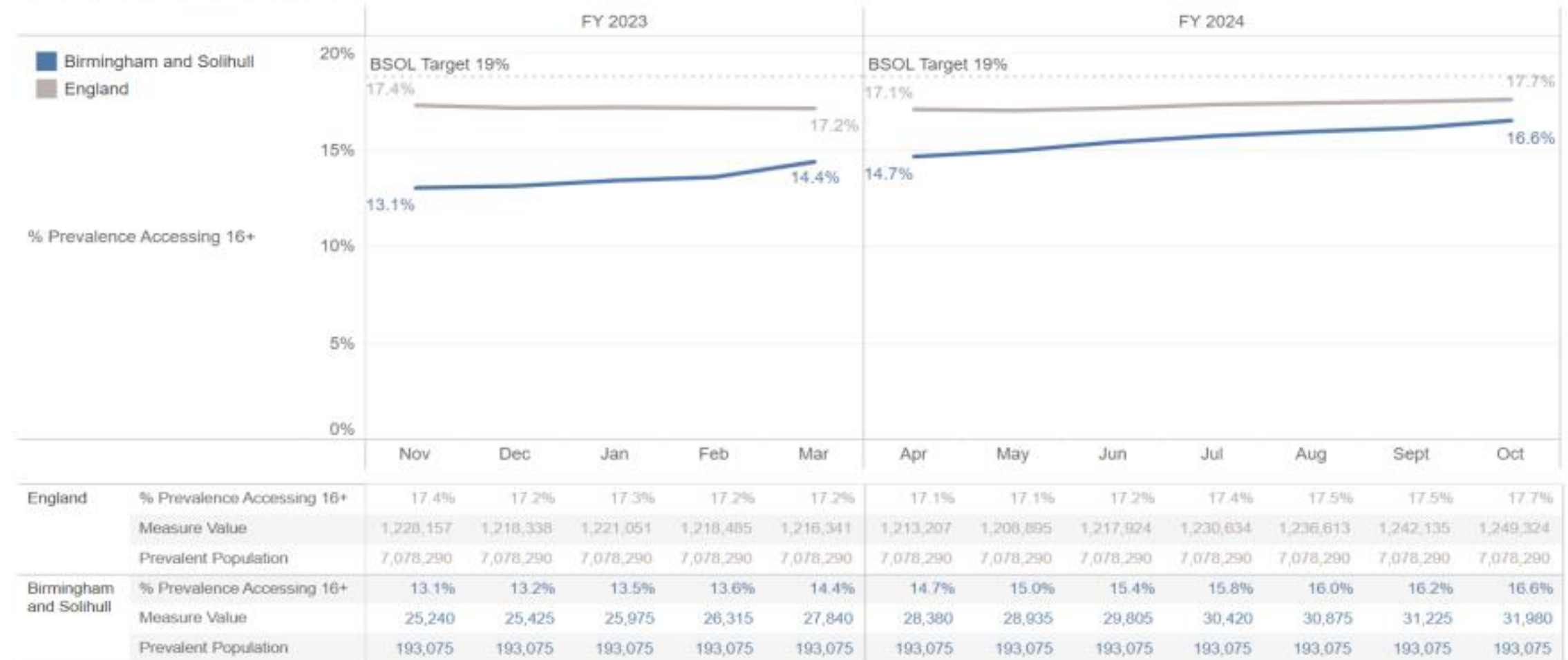
2022.23 NHS E Volume Target
47,538

2023.24 BSOL Internal Target
36,000

Common Mental Disorders, Proportion of prevalent population accessing Talking Therapies

[Return to Contents](#)

BSOL ICB and England Trend



Data Sources:
IAPT Accessing - NHS Digital
Common Mental Disorder Prevalence -
Fingertips Public Health Data
Population - Office for National Statistics,
Census 2021

Methodology:
Prevalence accessing is [IAPT Accessing] / [Prevalent
Population].
Prevalent population is calculated by applying prevalence rates
to population volumes. 16+ prevalent rate applied to 16-64
aged population. 65+ rate applied to 65+ population.

Common Mental Disorder Prevalence Rates:
England 16+ = 16.9%; 65+ = 10.2%
BSOL 16+ = 21.1%; 65+ = 12.7%
Solihull 16+ = 14.7%; 65+ = 9.2%

- 2,895 patients entered NHS funded treatment with Talking Therapies services in October 2023.
- BSol are targeting a prevalence of 19% across the year, this will be below the LTP target of 25%.