Leicestershire County Council

HEALTH AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE: 9 SEPTEMBER 2026

JOINT REPORT OF THE DIRECTORS OF CORPORATE RESOURCES, PUBLIC HEALTH, LAW AND GOVERNANCE AND THE ICB PERFORMANCE SERVICE

HEALTH AND COMMUNITIES' PERFORMANCE UPDATE

Purpose of Report

1. The purpose of the report is to provide the Committee with an update on public health, health system and the new communities theme performance in Leicestershire and Rutland based on the available data in late July 2026.

2. The report contains the latest available data for Leicestershire and Rutland and LLR on a number of key performance metrics (as available in July 2026) and provides the Committee with local actions in place.

Background

3. The Committee has, as of recent years, received a joint report on health performance from the County Council's Business Intelligence Service and the ICB Performance Service. The report aims to provide an overview of performance issues on which the Committee might wish to seek further reports and information, inform discussions and check against other reports coming forward. The Committee has recently taken on oversight of communities' service performance, and this has now been added to this report.

Future Changes to Performance Reporting Framework

4. In March 2025 NHS England (NHSE) published its NHS Performance Assessment Framework setting out a revised approach to assessing how success and areas for health performance improvement will be identified and how organisations will be rated. The framework replaced the NHS System Oversight Framework 2021/22. NHSE are testing ICS operational plan submissions against the new framework. The framework data was published on 26 June 2025 in an interactive web-based public accountability tool.

5. The approach is based on assessing performance metrics across four domains of an integrated care system for ICBs and acute care, mental health, community and ambulance providers. The extensive set of metrics cover a wide range of areas including national operating objectives in the NHS planning guidance, finance and productivity metrics, public health and patient outcome metrics, quality and inequalities metrics, and priority system metrics.

6. A number of national and local priorities have been set for the health system including: -

   - Improving referral to treatment to 65% nationally, with every trust expected to deliver a minimum 5% improvement. Improving performance against the cancer 62-day and 28-day Faster Diagnosis Standard to 75% and 80% respectively.
   - Improving Accident and Emergency waiting times with a minimum of 78% of patients seen within 4 hours. Category 2 ambulance response times should average no more than 30 minutes.
   - Improving patients' access to general practice, improving patient experience, and improving access to urgent dental care, providing 700,000 additional dental appointments.
   - Improving patient flow through mental health crisis and acute pathways, reducing average length of stay in adult acute beds, and improving access to children and young people's mental health services, to achieve the national ambition for 345,000 additional children and young people aged 0 to 25 compared to 2019.

7. Delivery of the national priorities will aim to be achieved by focusing on -
   - Reducing demand through developing Neighbourhood Service models;
   - Making full use of Digital Tools;
   - Addressing inequalities and shifting towards secondary prevention;
   - Living within budget, reducing waste and improving productivity; Providers will need to reduce their cost base by at least 1% and achieve 4% overall improvement in productivity.
   - Maintaining a focus on the overall quality and safety of services.

8. The following 4 areas form the main basis of current reporting to this Committee, and they will continue to be revised as the new performance assessment approach develops further:

   a. ICB/ICS NHS System Priorities - Headline Performance in July.
   b. Leicestershire Public Health Strategy outcome metrics and performance – Appendix 1.
   c. Performance against metrics/targets set out in the Better Care Fund plan.

d. Performance against new Communities outcomes in the Local Outcomes Framework – Appendix 2.

NHS System Oversight Framework

9. The NHS Oversight Framework describes a consistent and transparent approach to assessing integrated care boards (ICBs) and NHS trusts and foundation trusts, ensuring public accountability for performance and providing a foundation for how the National Health Service works with systems and providers to support improvement. The framework has been developed with the engagement and contributions from the NHS leadership and staff, representative bodies and think tanks, including through two public consultations.

10. ICB performance will be reported against the full suite of oversight metrics but will not have a comparative rating. ICBs will still be assessed through a statutory annual assessment, which reviews how well each ICB is performing its statutory duties. There will be a segmentation approach for ICBs in 2026/27.

Summary of ICB/ICS Performance

11. The brief performance update below aims to provide a high-level overview of key Leicester, Leicestershire and Rutland (LLR) performance issues. A fuller performance report is expected once the new LLR and Northants merged ICBs staff structure is embedded.

Performance Update – July 2026

12. **Alert**

- 4-hour wait Emergency Department performance for University Hospitals of Leicester (UHL) is behind plan. All sites have seen an increase in attendances which are partially believed to be heat related. Paediatric and working age adult attendances are up at all Emergency Departments.
- Kettering General Hospital diagnostic performance is behind plan with recovery actions being agreed. Both UHL and Northampton General Hospital performance exceed plan.
- Both Leicestershire Partnership Trust and Northamptonshire HFT are both behind plan for the majority of metrics in the quarterly Mental Health and Learning Disability table.
- Community waits of >52 weeks exceed the plan for both adults and Children and Young People in Northamptonshire but are on plan in LLR.

13. **Advise**

- Mental Health – Talking Therapies, reliable improvement performance continues to be strong.
- Continued improvement in delivery of the diagnostics plan.

- The number of available primary care appointments exceeds plan in both counties.
- Delivery of the dental activity in LLR on track but behind plan in Northamptonshire.
- Better Care Fund submissions agreed with Local Authorities signed off by NHSE for both counties.
- Significant increase in the use of Pharmacy First within LLR, seeing the most improved position in the region.

14. **Assure**

- 12-hour Emergency Department performance is on-plan at both UHL and NGH.
- Ambulance handover times at UHL have improved with corresponding favourable impact on response times.
- All Health Partners engaged across the cluster in work to address performance concerns across the Urgent and Emergency Care pathway.
- Referral To Treatment – improvement noted in the 18 weeks and 52 weeks waiting, noting that both remain just under plan. Overall waiting list numbers at ICB level are close to plan.
- Cancer waiting times improved and exceed plan at Kettering General Hospital and UHL. Northampton General Hospital close to plan.

Risks

- Operational pressures due to the emergency demand impacting upon elective activity – both ICBs continue to see significant operational pressure.
- Impact of court of protection delays due to Ministry of Justice impact on timelines, adversely impacting on Length of Stay – particularly Learning Disability Adults and Autistic Adults.
- Planned GP Collective Action – awaiting further details – Information Governance and Digital leads assessing impact. Communication out to General Practice.
- Risks for Urgent and Emergency Care delivery and elements of elective care remain.

Public Health Outcomes Performance – Appendix 1

12. Appendix 1 sets out current performance against a range of outcomes set in the performance framework for public health. The Framework contains 42 indicators related to public health priorities and delivery. The dashboard sets out, in relation to each indicator, the statistical significance compared to the overall England position or relevant service benchmark where appropriate. A rag rating of ‘green’ shows those that Leicestershire is performing better than the England value or benchmark and ‘red’ worse than the England value or benchmark.

13. As a result of the publication of the Local Government Outcomes Framework the following new indicators have been added to the dashboard report: -
    - Initiation or continuation of PrEP among those with PrEP need;

- Air pollution: estimated fraction of mortality attributable to particulate air pollution;
- STI testing rate (exclude chlamydia aged 24 years and under) per 100,000;
- Alcohol specific mortality;
- Proportion of local smoking population who set a quit date; and
- Adults with substance misuse treatment need who successfully engage in community based structured treatment following release from prison.

14. Analysis shows that of the comparable indicators, 14 are green, 18 amber, and 5 red. There are 5 indicators that are not suitable for comparison or have no national data.

15. Of the fourteen green indicators: cancer screening coverage – breast cancer and cancer screening coverage - bowel cancer, have both shown significant improvement over the last five years. Cervical cancer screening coverage (25-49 years old) and cervical cancer screening coverage (50-64 years old) have both shown a significant declining (worsening) performance over the last five years.

16. Of the eighteen indicators that are amber: smoking status at time of delivery has shown significant improvement over the last 5 time periods. Successful completion of drug treatment: non opiate users, adults with substance misuse treatment need who successfully engage in community based structured treatment following release from prison and admission episodes for alcohol-related conditions have both shown a significant worsening performance over the last five years.

17. Of the five red indicators: for HIV late diagnosis in 2022-24, Leicestershire ranked 15th out of 16 when compared to its nearest statistical neighbours. For STI testing rate (excluding chlamydia aged 24 years and under) Leicestershire ranked 7th out of 16 in 2025. For the cumulative percentage of the eligible population aged 40 to 74 offered an NHS Health Check who received an NHS Health Check in 2021/22-25/26, Leicestershire ranked 12th out of 16. For breastfeeding prevalence at 6 to 8 weeks in 2024/25, Leicestershire ranked 5th out of 8 when compared to its nearest statistical neighbours. For overweight (including obesity) prevalence in adults in 2024/25, Leicestershire ranked 12th out of 16.

18. In 2023-25 life expectancy at birth increased in both males and females in Leicestershire. In 2022-24, inequality in life expectancy at birth for males in Leicestershire falls within the best quintile of the country, whilst for females in Leicestershire life expectancy at birth falls within the 2nd best quintile. Leicestershire and Rutland have combined values for the following two indicators - successful completion of drug treatment (opiate users) and successful completion of drug treatment (non-opiate users).

19. Further work is underway to progress improvement across the range of indicator areas.

Better Care Fund and Adult Care Health/Integration Performance

20. Nationally, the Better Care Fund (BCF) plan guidance for 2026/27 was published by NHS England (NHSE) in February 2026. Full Health and Wellbeing Board BCF Submissions were made by end of March 2026, with outcome letters in May 2025.

21. The BCF performance framework for 2026/27 is set out in the table below: -

Emergency Admissions	
Indicator	Emergency admissions to hospital for people aged 65+ per 100,000 pop.
Discharge Delays	
Indicator	Average length of discharge delay for all acute adult patients
Supporting Metric	Proportion of adult patients discharged from acute hospitals on their discharge ready date
Supporting Metric	For patients not discharged on their DRD, the average number of days from DRD to discharge.
Reablement Outcomes	
Indicator	The proportion of people aged 65 and over discharged from hospital into reablement who remained in the community for 12 weeks following discharge.
Supporting Metric	The proportion of people who received reablement during the year, where no further request was made for ongoing support.
Residential Admissions	
Indicator	Long-term support needs of older people (age 65 and over) met by admissions to residential and nursing care homes, per 100,000 population.
Supporting Metric	Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence.

22. The table below shows the BCF metrics for the 2025/26 financial year, the targets and end year actuals:

Metric	Target	Actual	Commentary
Emergency hospital admissions for people aged 65+ per 100,000 population	1661	1469.	Achieved.
Proportion of adult patients discharged from acute hospitals on their discharge ready date (DRD)	89%	86.2%	End year data shows that we were off target against planned performance. Throughout 2025-26, Leicestershire performance has been below target for the 'Proportion of adult patients discharged from acute hospitals on their discharge ready date' indicator requirements. The target was to achieve 89% by the end of the financial year. This has not been achieved, with the best individual monthly performance in June of 86.2%. In 2025-26, Leicestershire consistently performed better than the East Midlands average.
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	867	858 (forecast of 972)	Residential admissions have increased during 2025/26, and the current forecast figure for total admissions during the twelve-month period is 972 (note this is based on the old reporting system logic, and not the newer client level data method). More detailed analysis is in progress to try to better understand the reasons for this increase.

Communities Performance – Appendix 2

23. The Cabinet at its meeting on 21 July 2026 approved a new draft Strategic Plan to 2031, as a basis for consultation. The Strategic Plan sets out the Council's shared vision for the county; a place that is strong and resilient, where communities thrive, the economy grows and people are supported to live well.

24. To achieve the vision the Council has set out four main aspirations - a Better Leicestershire for residents, Better Leicestershire for communities, Better Leicestershire economy and Better Leicestershire County Council. A range of outcomes have been set against these aspirations, with supporting measures. The Council's communities work will play a main role in relation to the Better Leicestershire for communities' theme but will also play an important corporate and cross-cutting role in relation to the other themes.

25. The main outcome aim for the communities' theme is that **Leicestershire is safe, connected and our communities look out for one another.** Areas of priority include supporting communities to be safe and resilient, bringing people together, helping them to be healthier and encouraging people to help one another. Also celebrating our county, culture and environment. Success includes more people engaged in volunteering and community activity and there are opportunities to create locally led support networks, residents/visitors accessing and enjoying spaces and increased access to preventative health and wellbeing support, with residents reporting good levels of physical and mental health.

26. The government when under Sir Keir Starmer published a new Local Outcomes Framework setting out the outcomes that the government wanted to see happen. The framework establishes a shared focus on the most important outcomes that contribute to raising living standards across England. The outcomes represent many of the most important responsibilities of local government. The Framework is structured around 16 priority outcomes including a number relevant to the communities' theme such as health and wellbeing, adult independence, neighbourhoods (where people feel safe and included in their local community and are satisfied with their local area as a place to live).

27. The government have set out a number of metrics in the neighbourhoods (communities) outcome theme to indicate whether people feel safe and included in their local community and are satisfied with their local area as a place to live. Seven of the metrics are to be sourced from the Community Life Survey, which is a nationally representative annual survey of adults with questions relating to social action and empowering communities. From 2025/26 the Community Life Survey was merged into a new Community and Engagement Survey. In 2023/24 and

2024/25 DCMS partnered with MHCLG to boost the Community Life Survey to be able to produce meaningful estimates at the local authority level.

28. The outcomes include 1 placeholder metric where an issue is important, and the government is looking to provide appropriate local authority level data but is not currently reportable. The full LOF communities metrics are: -

- *Percentage of people who agree adults in their communities can be trusted;*
- *Percentage of people who feel they can influence local decisions;*
- *Percentage of people who are satisfied with community/cultural facilities in their local area;*
- *Percentage of people who reported in-person cultural engagement within the past 12 months;*
- *Percentage of people who are satisfied with their local area as a place to live;*
- *Percentage of people who agree that people from different backgrounds get on well together in their local area;*
- *Percentage of people experiencing loneliness;*
- *Percentage of people who have engaged in volunteering recently;*
- *Access to green and blue spaces;* ***Placeholder***

29. Set out in Appendix 2 is a draft dashboard of the currently available outcome metrics for communities covering the LOF metrics and other available data. Looking at the data there have been improvements this year in those satisfied with the area as a place to live, respondents giving unpaid help, number of and volunteers managed. An area with lower performance includes people from different backgrounds getting on well together. Percentage of people experiencing loneliness is in the third quartile of comparable authorities.

List of Appendices

Appendix 1 – Public Health Outcomes – Key Metrics
Appendix 2 – Draft Communities Outcome Indicators - Performance

Background papers

University Hospitals Leicester Trust Board meetings can be found at the following link:
http://www.leicestershospitals.nhs.uk/aboutus/our-structure-and-people/board-of-directors/board-meeting-dates/

LLR Integrated Care Board meetings can be found at the link below
https://leicesterleicestershireandrutland.icb.nhs.uk/about/board-meetings/

NHS Performance Assessment Framework

UK Government: Local Outcomes Framework

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