

**NHS DORSET CLINICAL COMMISSIONING GROUP  
GOVERNING BODY MEETING  
PERFORMANCE REPORT**

<b>Date of the meeting</b>	20/11/2013
<b>Author</b>	P Dove, Head of Performance Intelligence
<b>Sponsoring GB member</b>	P Vater, Chief Finance Officer
<b>Purpose of report</b>	To note the progress against National and Local Performance Standards for 2013/14.
<b>Recommendation</b>	The Governing Body are asked to <b>Note</b> the report and make recommendations.
<b>Resource implications</b>	None
<b>Link to strategic principles</b>	<ul style="list-style-type: none"> <li>• Services designed around patients</li> <li>• Preventing ill health and inequalities</li> <li>• Sustainable healthcare services</li> <li>• Care closer to home</li> </ul>
<b>Risk assurance</b> Impact on high level risks	None.
<b>Outcome of equality impact assessment process</b>	No issues identified.
<b>Actions to address impact</b>	Not applicable.
<b>Legal implications</b>	None.
<b>Freedom of information</b>	Unrestricted information.
<b>Public and patient engagement</b>	N/A
<b>Previous Committees/Governing Body</b>	Performance meeting – 5 November 2013

## 1. Introduction

1.1 The Corporate Performance Report has been designed to incorporate all of the main performance targets of the Clinical Commissioning Group including the National Operating Framework Performance Measures. The detail below, and annexes attached, report on any significant underperformance for the Commissioner, and for the main NHS Foundation Trust providers.

## 2. Performance Summary 2013/14

2.1 Performance information for 2013/14, where known, is set out in Appendix 2. The performance concerns are noted below:

### 2.2 18 Week Referral to Treatment (Lead Director JP).

#### 18 Week Performance

The NHS Foundation Trusts within the Dorset Clinical Commissioning Group health community are achieving national 18 week standards at aggregate level. There is however variation in performance at speciality level as shown below.

The following performance is noted for Referral to Treatment Admitted Specialty Compliance at Provider level (and therefore subject to various commissioning organisations), for the period ending 30 September 2013:

RTT Specialty	RBH	Poole	DCH	Salisbury	Yeovil
No of Specialties	10	11	13	15	15
No of Specialties Achieving	7	11	12	15	15

Royal Bournemouth NHS Foundation Trust reported three specialties underperforming as at 30 September 2013 (General Surgery, Urology and Trauma & Orthopaedics) for admitted pathways. The NHS Foundation Trust had advised concerns in two of these speciality areas and provided details of their internal action plan and trajectory. Whilst performance in one of the above areas has improved (Urology) there are considerable concerns around other specialty performance such as Ophthalmology where 18 week backlog is increasing.

Poole Hospital NHS Foundation Trust achieved all admitted specialties for the period ending 30 September 2013.

Dorset County Hospital NHS Foundation Trust did not meet the 90% standard for admitted patients within Oral Surgery however this activity is commissioned by the National Commissioning Board and not Dorset CCG. The CCG continues to challenge the NHS Foundation Trust in relation to PTL performance across a number of specialties, most notably Ophthalmology, where 18 week breaches have increased notably.

# 8.1

The following performance is noted for Referral to Treatment Non Admitted Specialty Compliance at Provider level (and therefore subject to various commissioning organisations) for the period ending 30 September 2013:

RTT Specialty	RBH	Poole	DCH	Salisbury	Yeovil
No of Specialties	15	15	15	16	17
No of Specialties Achieving	15	14	15	16	17

All Local Providers achieved the Non Admitted specialty level standards with the exception of Poole Hospital NHS Foundation Trust who marginally underperformed in Ophthalmology.

The following performance is noted for Referral to Treatment on Incomplete Pathway Compliance at Provider level (and therefore subject to various commissioning organisations) for the most recent reported month:

RTT Specialty	RBH	Poole	DCH	Salisbury	Yeovil
No of Specialties	15	15	15	16	17
No of Specialties Achieving	15	15	15	16	17

Indicative local targets have been set to ensure NHS Foundation Trust waiting list positions improve. The current position at the end of September 2013 indicates that the waiting list position across the local health community has deteriorated across the majority of providers with notable increases at Dorset County Hospital NHS Foundation Trust and Royal Bournemouth Hospital NHS Foundation Trust. The table below indicates the latest waiting list position compared with 31 March 2013.

RTT	RBH	Poole	DCH	Salisbury	Yeovil
Target Number of Waits	12,476	8,208	8,383	9,752	5,547
Actual Number of Waits	13,969	8,530	10,485	10,484	6,196

Dorset Clinical Commissioning Group reported no patient waiting over 52 weeks for treatment as at 30 September 2013. The following table shows the number of patients waiting in excess of 35 weeks for treatment at Provider level (and therefore subject to various commissioning organisations):

RTT	RBH	Poole	DCH	Salisbury	Yeovil
Actual Number of Waits (Provider)	12	1	11	5	7

The performance of Dorset County Hospital NHS Foundation Trust for the period ending 30 September 2013 remains disappointing with 11 patients waiting over 35 weeks for treatment compared with 7 as at 31 March 2013. The number of 35 week waiters across the remaining providers has improved compared to the reported position in March 2013.

## Stroke Performance and Reporting (Lead Director JP)

Dorset Clinical Commissioning Group maintains the importance of delivering improvement in Stroke Services through local providers and has ensured NHS contracts include better outcomes for patients. These however are not mandated national standards as reported in previous years.

## **Length of Stay Indicator (80% Target)**

Performance against the length of stay indicator, where 80% of patients should spend 90% of their time on an acute stroke unit improved notably over the past few months. All local acute providers are now achieving the quality standard for the period ending 30 September 2013.

## **TIA indicator, patients with higher risk TIA should be treated within 24 hours**

Performance against this indicator has improved. All local providers and providers on the Dorset CCG boundary achieved the 60% standard in the most recent month (Yeovil District Hospital – August 2013).

## **Stroke Reporting**

All Providers commenced recording on SSNAP from January 2013. The first output from SSNAP for the period ending 31 March 2013 was released in late July 2013. The CCG has maintained local reporting to support Clinical Commissioning Programmes in the absence of SSNAP data which is likely to be produced quarterly, potentially significantly in arrears.

## **Quality and Infection Control (Lead Director SR)**

For the period ending 30 September 2013 Dorset County Hospital NHS Foundation Trust Royal Bournemouth Hospital NHS Foundation Trust and Salisbury NHS Foundation Trust all reported one MRSA case, thus failing to achieve the national objectives

Performance against nationally set C DIFF objectives is currently disappointing. Dorset CCG has reported a 15% increase in the number of cases than in the corresponding period in 2012/13.

Dorset County Hospital NHS Foundation has reported 17 cases in the first six months of 2013/14, compared to the 2013/14 full year objective of 18 cases. Dorset CCG has issued the NHS Foundation Trust with a contract query notice with a view to seeking remedial action.

Dorset County Hospital NHS Foundation Trust (5) and Salisbury NHS Foundation Trust (3) both reported cases of Mixed Sex Accommodation in September 2013. Root cause analyses will be undertaken.

## **Urgent and Emergency Care (Lead Director JP)**

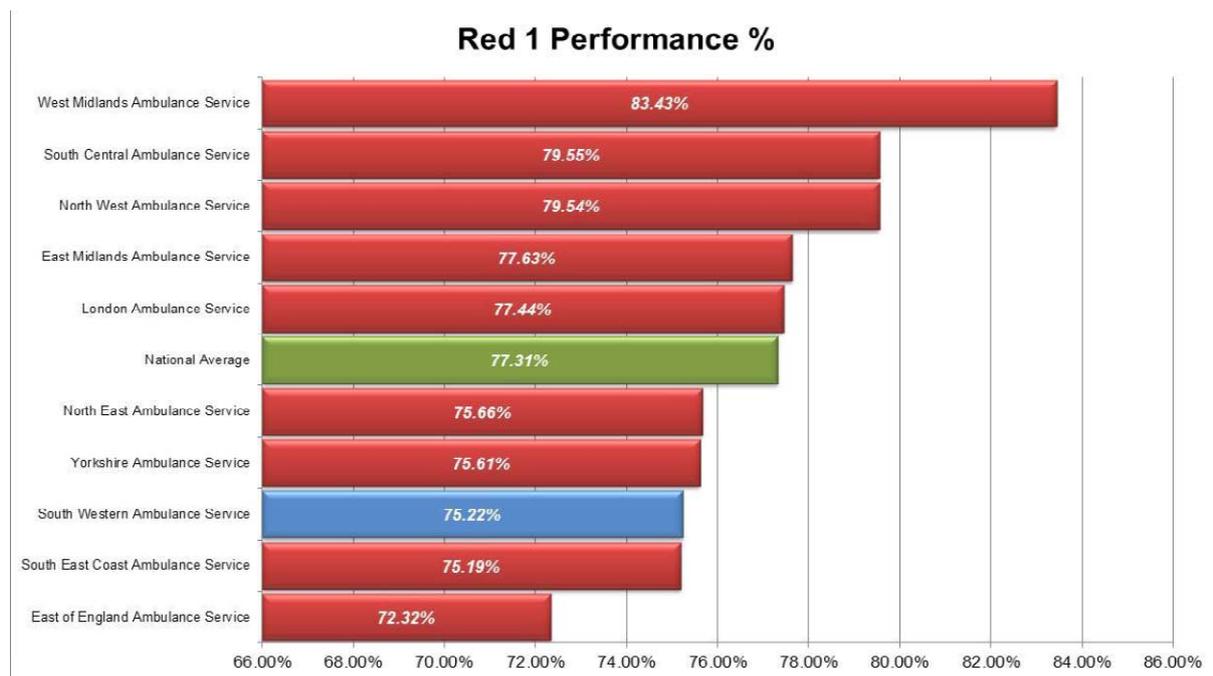
Performance remains strong across Emergency Departments and throughout September 2013 only Poole Hospital NHS Foundation Trust underperformed against the 95% standard.

Ambulance Handovers delays improved marginally in September 2013, however delays in excess of 1 hour are still reported.

South Western Ambulance Services NHS Foundation Trust failed to achieve a key national standard in April, June, July and August. The Dorset Clinical Commissioning Group has written to the Provider requesting longer term actions to ensure delivery of this standard. Performance for the year to date is below the 75% standard at 74.0%.

Further challenges remain in achieving this standard through 2013/14 and with no headroom built in prior to the winter period will likely result in the provider not achieving this standard and thus impacting on the CCG Quality Premium. Following the CCG raising this concern with SWAST a response has been received from their Deputy Chief Executive. This stated that due to the low number of Red 1 activations 40 out of 2100 (1.9%) per day in unpredictable locations, and with the area covered by the Trust largely rural, the achievement of this target is very challenging. Further discussions are required with Commissioners concerning the resource impact of this.

The chart below highlights the performance of SWAST in relation to 'Red 1' performance. The chart below provides benchmarking information for the month of June 2013 and indicates SWAST performance is notably below that of the national average.



The Urgent and Emergency Care Board continues to meet to discuss the priorities for 2013/14 and has agreed plans submitted by local 'hubs'. Further work has been undertaken with each 'hub' to ensure each plan has a timeframe for implementation, and to ensure each plan has agreed outcomes. The Clinical Commissioning Group continues to develop an overarching Urgent and Emergency Care dashboard aimed at supporting the group and to ensure agreed plans and programmes deliver the expected outcomes across Dorset.

### 3. Recommendation

Note the progress being made against National and Local quality standards.

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**Appendices**

**Appendix 1**

**Corporate Performance Report  
2013/14**

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