

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

Date of the meeting	15/07/2015
Author	P Dove - Head of Performance Intelligence
Sponsoring Board member	P Vater – Chief Finance Officer
Purpose of Report	To note the progress against National and Local Performance Standards for 2015/16
Recommendation	The Governing Body is asked to note the report.
Stakeholder Engagement	N/A
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Strategic Principles	<ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
I confirm that I have considered the implications of this report on each of the matters above, as indicated	✓		

Initials : PD

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 Report 2015/16

- 2.1 Performance information for 2015/16, where known, is set out in Appendix 1. The performance concerns are noted below:

18 Week Referral to Treatment (Lead Director – Jane Pike)

- 2.2 The performance of providers within the Dorset Clinical Commissioning Group health community is shown below at aggregate level for the period ending 31 May 2015.

	Admitted	Non Admitted	Incomplete
Dorset County	90.1%	97.3%	90.2%
Poole	92.2%	95.5%	96.7%
Royal Bournemouth	91.3%	94.0%	94.0%

- 2.3 The following performance is noted for Admitted 18 Week Referral to Treatment at aggregate level for the period ending 31 May 2015:

18 wk RTT Admitted (Adj)	RBH	Poole	DCH
Aggregate Performance	91.3%	92.2%	90.1%

- 2.4 All main acute providers across Dorset CCG achieved the 90% standard in May 2015 in line with expectation. Dorset County Hospital NHS Foundation has provided forward guidance in respect of this standard and expects performance to fall notably in June and July 2015 as the Ophthalmology backlog position is recovered.

- 2.5 The following performance is noted for Non Admitted 18 Week Referral to Treatment at aggregate level for the period ending 31 May 2015:

18 wk RTT Non Admitted	RBH	Poole	DCH
Aggregate Performance	94.0%	95.5%	97.3%

- 2.6 Royal Bournemouth Hospital NHS Foundation Trust failed to achieve the 95% standard in May 2015. The NHS Foundation Trust recently implemented a new 18 week RTT reporting module which highlighted inconsistencies in previous models. The NHS Foundation Trust reported a significant increase in the number of patients waiting in excess of 18 weeks on the Non Admitted pathway. The 18 week RTT backlog for Non Admitted patients has reduced notably in April and May 2015 which has had a detrimental impact on performance in the short term.

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2.7 The following performance is noted for Incomplete Pathway 18 Week Referral to Treatment at aggregate level for the period ending 31 May 2015:

18 wk Incompletes	RTT	RBH	Poole	DCH
Aggregate Performance		94.0%	96.7%	90.2%

2.8 Dorset County Hospital failed to achieve the 92% standard in May 2015 following a significant rise in the reported backlog (see below). The backlog clearance planned over the coming months will ensure this standard is achieved.

2.9 The table below identifies the weekly PTL backlog for the most recent period compared with the backlog as at 29th March 2015.

Weekly PTL Backlog	29 Mar	24 May	31 May	7 Jun	14 Jun	21 Jun
DCH Admitted	524	676	696	658	592	530
Poole Admitted	130	105	104	99	106	109
RBH Admitted	794	585	596	600	590	612
DCH Non Admitted	359	388	422	472	504	534
PHT Non Admitted	219	201	205	208	207	213
RBH Non Admitted	1,181	792	786	537	553	509

2.10 The information highlighted in the above table highlights an improved position across Dorset in terms of the number of patients waiting in excess of 18 weeks, with a few exceptions noted below:

- Significant recent improvement in admitted backlog at DCH where Ophthalmology backlog has reduced notably. It should be noted the backlog position is currently 1% higher than the position as at 29th March 2015 despite the recent improvement.
- Non Admitted backlog at DCH has increased by 50% since 29th March 2015 with ENT accounting for 40% of the total non admitted backlog;

Diagnostic Performance

2.11 The table below shows the performance of organisations across Dorset and those providers on the health community boundary. The percentages detailed below show the percentage of patients waiting over 6 weeks for treatment against the total waiting list for the period ending 31 May 2015:

Percentage of 6 week breaches	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15
Dorset County	0.1%	0.5%	0.4%	0.2%	0.3%	1.4%	0.5%
Poole	0.2%	0.5%	0.9%	0.8%	1.4%	1.2%	1.5%
Royal Bournemouth	1.1%	3.1%	5.8%	5.2%	2.0%	5.2%	2.5%
Dorset Healthcare	0.0%	5.6%	9.7%	0.0%	1.9%	3.2%	0.6%
Salisbury	0.0%	0.0%	0.0%	0.0%	0.0	4.9%	TBC
Yeovil	1.0%	2.1%	1.1%	0.6%	1.3%	0.5%	TBC

2.12 Poole Hospital NHS Foundation Trust reported non achievement against the six week threshold following an increase in cardiac imaging referrals received from Dorset County Hospital NHS Foundation in January 2015 however expect performance to be achieved in June 2015.

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2.13 Royal Bournemouth Hospital NHS Foundation Trust reported that 2.5% of patients were waiting in excess of 6 week for their test as at 31 May 2015. The majority of patients were waiting for Endoscopy tests. The Trust has set a trajectory to deliver the 1% threshold in July 2015 onwards.

Cancer Standards (Lead Director Jane Pike)

- 2.14 Dorset County Hospital NHS Trust failed to achieve the 14 day standard in April 2015. The Trust reported 46 breaches of which 22 were due to capacity constraints and 17 which related to patient choice. Despite the Trust providing additional capacity in April 2015 this did not offset the increased referrals seen through March and April 2015. The Trust expects to deliver the national standard in May 2015.
- 2.15 Dorset County Hospital NHS Trust failed to achieve the 14 day breast symptom standard in April 2015 where the Trust reported 3 breaches (all patient choice).
- 2.16 Royal Bournemouth Hospital NHS Foundation Trust achieved both 14 day standards in April 2015 which represented a significant improvement compared to performance in 2014/15.
- 2.17 All providers achieved all 31 day standard in April 2015.
- 2.18 Poole Hospital NHS Foundation Trust and Dorset County Hospital NHS Trust both failed the 62 day standard in April.
- 2.19 Poole Hospital NHS Foundation Trust noted an increase in Head and Neck referrals which has been identified as a complex pathway with a high level of breaches and in addition a number of breaches due to patient choice, complex pathways and late referrals from other providers.
- 2.20 Dorset County Hospital NHS Foundation Trust expects to deliver the 62 day standard from Quarter 2. The Trust has now recovered the template biopsy backlog and the Trust is now reporting better waiting times in this area.

Urgent and Emergency Care (Lead Director Jane Pike)

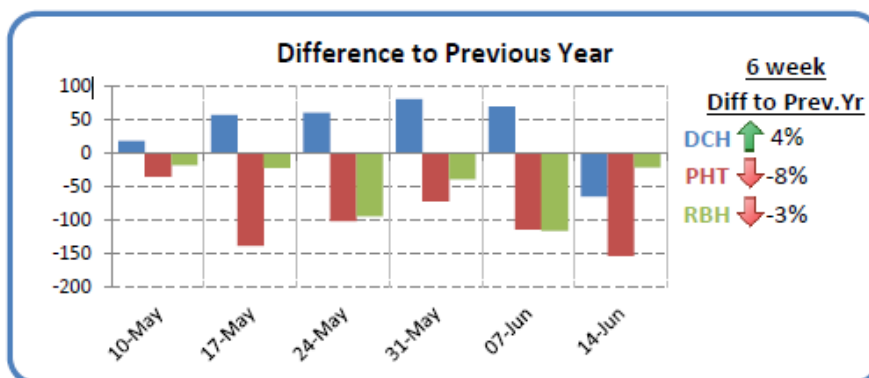
2.21 All providers across Dorset CCG failed to achieve the 95% four hour standard in Quarter 4 however significant improvements can be seen in Quarter 1, 2015/16. Both Dorset County Hospital NHS Foundation and Poole Hospital NHS Foundation Trust are close to target as at 14th June 2015. Royal Bournemouth Hospital NHS Foundation Trust continues to miss the four hour standard despite recent improvements.

4 Hour Wait in ED % Seen in 4 Hours				
	DCH	PHT	RBH	England
2014-15 Q1	95.5%	95.4%	94.6%	95.1%
2014-15 Q2	96.6%	93.8%	93.9%	95.0%
2014-15 Q3	96.4%	92.0%	92.3%	92.6%
2014-15 Q4	90.9%	91.5%	92.6%	91.8%
Latest Quarter To Date & Week				
2015-16 Q1	94.6%	95.3%	92.7%	94.0%
14-Jun-15	92.1%	94.6%	93.2%	94.9%

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2.22 Dorset County Hospital NHS Foundation and Poole Hospital NHS Foundation Trust are both ranked in the top quartile nationally on ED performance as at 14th June 2015.

2.23 Emergency Department attendances remain high across Dorset CCG following a significant increase in activity in 2014/15 however the early indications highlight that activity has reduced across East Dorset throughout quarter 1 when compared to 2014/15 however West Dorset has seen a further increase. The table below identifies the latest six weeks of activity compared to the same six weeks the previous year.



2.24 Despite natural variation all three local acute providers have a higher conversion rate from attendance to admission than the national average however there are signs of improvement in this area.

2.25 South West Ambulance Services NHS Foundation Trust continues to achieve the Red 1 (8 minute) performance as a Provider and across Dorset CCG. All other indicators are not being achieved at either a provider or local level.

2.26 The tables below identify the performance for the period ending 31 May 2015 for both the aggregated provider performance and Dorset CCG performance.

SWAST (Provider Level)

Priority: Red	April 2015	May 2015	2015 YTD
Red (8) Performance	68.8%	66.7%	67.7%
Red 1 (8) Performance	78.9%	75.1%	77.0%
Red 2 (8) Performance	68.2%	66.3%	67.2%
A19 Performance	92.7%	91.8%	92.2%

Dorset CCG

Priority: Red	Apr 2015	May 2015	15/16 YTD
Red (8) Performance	73.2%	71.4%	72.3%
Red 1 (8) Performance	84.5%	83.6%	84.1%
Red 2 (8) Performance	72.5%	70.7%	71.6%
A19 Performance	94.6%	94.7%	94.6%

2.27 The aggregated monthly 111 service performance remains challenging. The following table identifies the monthly performance for answering calls within 60 seconds.

Month Ending	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15
% Calls answered within 60 seconds	68.3%	76.4%	74.4%	69.6%	73.2%	68.9%

2.28 Key challenges remain within the 111 service. The service is currently reporting:

- Non compliance against the 60 second call answer standard
- Non compliance against the call abandonment rate

Dorset Healthcare University Foundation Trust (Lead Director Jane Pike)

Mental Health Services

2.29 As at end May 2015, DHUFT are reporting that 72.0% of Mental Health Targets are being met compared with 75.0% as at 30 April 2015.

2.30 Contract Query

- Dorset Healthcare NHS Foundation Trust were compliant with their target for meeting assessment times in the Dorset A&E's in May 2015.
- Dorset Healthcare NHS Foundation Trust are now exceeding their targets for urgent referral assessment in both the adults and older persons CMHTs, and discharge planning rates are now surpassing their targets.
- The MAS service delivery continues to decrease, missing the improvement plan trajectory for meeting their waiting times. The CCG levied a fine on DHC as a result of continuing not to meet their revised trajectory for improvement. The CCG has requested that the targets are now met by end Q3, noting that the targets in the 15/16 contract have been amended to 75% within 4 weeks and 95% within 6 weeks (NB national best practice is 6 weeks). It is important to note that the MAS exceeded their target for diagnosis of dementia (1410 against a target of 1264).

2.31 The CCG continues to work with DHC on the DToC issues and market development, or skill level to manage complex dementia clients – work is being undertaken with partners to stimulate the market in this area.

2.32 The following table identifies the performance of the CCG and DHUFT against the national Care Programme Approach (CPA) target of 95% compared with organisations within the Wessex Area Team.

CPA follow up within 7 days (by commissioner)	13-14 Q1	13-14 Q2	13-14 Q3	13-14 Q4	14-15 Q1	14-15 Q2	14-15 Q3	14-15 Q4
NHS North Hampshire CCG	98.3%	92.9%	98.6%	100.0%	100.0%	100.0%	98.6%	92.7%
NHS Fareham And Gosport CCG	98.5%	94.5%	98.6%	93.1%	96.3%	96.4%	97.0%	98.0%
NHS Isle Of Wight CCG	97.2%	90.7%	96.1%	97.3%	95.7%	98.2%	98.5%	96.5%
NHS Portsmouth CCG	100.0%	100.0%	98.8%	100.0%	100.0%	100.0%	100.0%	100.0%
NHS South Eastern Hampshire CCG	100.0%	100.0%	98.4%	98.6%	98.4%	98.6%	98.6%	100.0%
NHS Southampton CCG	94.8%	96.6%	97.5%	96.2%	93.7%	95.2%	95.7%	98.9%
NHS West Hampshire CCG	98.5%	98.0%	98.6%	99.2%	96.6%	99.1%	97.9%	98.8%
NHS Dorset CCG	96.1%	96.7%	97.6%	95.8%	96.9%	97.3%	99.6%	96.9%
NHS North East Hampshire And Farnham CCG	100.0%	97.6%	100.0%	97.4%	100.0%	97.6%	95.5%	97.7%

CPA follow up within 7 days (by provider)	13-14 Q1	13-14 Q2	13-14 Q3	13-14 Q4	14-15 Q1	14-15 Q2	14-15 Q3	14-15 Q4
Southern Health NHS FT	97.7%	96.6%	98.5%	97.9%	97.0%	98.1%	97.6%	98.4%
Dorset Healthcare University NHS FT	95.7%	96.2%	96.9%	96.0%	95.4%	96.8%	99.7%	97.0%
Solent NHS Trust	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Isle of Wight NHS Trust	97.2%	90.7%	96.1%	97.3%	95.6%	98.1%	98.5%	96.5%

Children and Young People Services

- 2.33 As at May 2015, DHUFT are reporting that 100% of monthly C&YPS targets are being met.

CAMHS (Emotional Health and Wellbeing)

- 2.34 As at May 2015, DHUFT are reporting exceptions in the 8 week referral time for Tier 2 services where the Trust reported 63 breaches compared to 46 breaches in April 2015. All waits of 17 weeks and over relate to the Bournemouth and Christchurch CAMHS team which continues to be an area of focus for DHUFT improvement work.

Community Health Services

- 2.35 As at May 2015, DHUFT are reporting that 91.59% of Community Health Services targets are being met compared to 89.92% as at 30 April 2015.
- 2.36 A full list of all exceptions and actions being implemented to improve individual areas are detailed in the full Dorset Healthcare Performance report. The main areas of concern are:
- 2.37 **Delayed Transfers of Care:** The snapshot day for patients whose discharge from Community Hospitals was delayed was 28th May 2015. There were a total of 21 reported patient delays giving a percentage of 7.1% to target 3.5%; an improvement on the position reported in April of 29 patient breaches. A total of 884 (858 in April) bed days lost to target 325.
- 2.38 **Stroke Services:** The percentage of Stroke patients accepting a review is reporting 82% to target 90%. The patient exceptions were due to death, moving out of the area, declining a review or not attending the service. Although still below target, the performance against this measure is improving.
- 2.39 **Musculo Skeletal Service (MSK) Pan Dorset:** The MSK service is reporting 73.3% to the target 90% for onward referrals to secondary care within 9 weeks. In May the number of patients referred on to secondary care was considerably lower than in previous months and as such this has impacted on the higher percentage figure for this month. The service is not yet benefitting from the full effect of outsourcing MRI requests to BMI The Harbour Hospital. Further rollout has been delayed whilst the

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service ensures with BMI The Harbour Hospital that all reports are uploaded to PACS at the same time as the scanned images. BMI The Harbour Hospital have undertaken steps to ensure this happens and the service therefore looks forward to further use of this site to give timely turnaround on MRI. The MSK service is undertaking some focused work on knee follow up and waits to first appointment to help improve performance. Wait time for ultrasound at Royal Bournemouth Hospital is currently 6 weeks.

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Date : 1st July 2015

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APPENDICES	
Appendix 1	Corporate Performance Report