

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

<b>Date of the meeting</b>	19/11/2014
<b>Author</b>	P Dove, Head of Performance Intelligence
<b>Sponsoring Clinician/Member</b>	P Vater, Chief Financial Officer
<b>Purpose of Report</b>	To note the progress against National and Local Performance Standards for 2014/15
<b>Recommendation</b>	The Governing Body is asked to <b>Note</b> the report and make recommendations.
<b>Stakeholder Engagement</b>	N/A
<b>Previous GB / Committee/s, Dates</b>	N/A

**Monitoring and Assurance Summary**

<b>This report links to the following Strategic Principles</b>	<ul style="list-style-type: none"> <li>• Services designed around people</li> <li>• Preventing ill health and reducing inequalities</li> <li>• Sustainable healthcare services</li> <li>• Care closer to home</li> </ul>		
	<b>Yes</b> [e.g. ✓]	<b>Any action required?</b>	
		<b>Yes</b> Detail in report	<b>No</b>
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	✓		✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	✓		

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 2014/15

- 2.1 Performance information for 2014/15, 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.

	Admitted	Non Admitted	Incomplete
Dorset County	79.3%	97.1%	95.5%
Poole	94.3%	95.0%	96.9%
Royal Bournemouth	86.8%	97.4%	94.1%
Dorset Healthcare	99.1%	100.0%	98.7%
Salisbury	90.0%	97.6%	97.0%
Yeovil	86.7%	95.7%	95.3%

- 2.3 There is however variation in performance at speciality level as shown below.

- 2.4 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 31 August 2014:

18 wk RTT Admitted (Adj)	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	79.3%	94.3%	79.3%	90.0%	86.7%
No of Specialties	10	11	11	15	16
No of Specialties Achieving	5	9	4	13	10

- 2.5 Performance across a number of Providers fell notably in August 2014 in line with expectations during the national backlog clearing exercise. Providers are expected to be compliant at specialty level in December 2014. The table below identifies the weekly PTL backlog for the most recent period compared with the backlog as at 30<sup>th</sup> March 2014.

- 2.6 Significant challenges remain across the health community against a backdrop of increase waiting lists and increasing referrals across a number of specialties.

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 31 August 2014:

18 wk RTT Non Admitted	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	97.4%	95.0%	97.1%	97.6%	95.7%
No of Specialties	15	15	15	16	17
No of Specialties Achieving	13	9	15	15	11

# 10.2

- 2.7 Performance for Non-Admitted pathways across Dorset against the 95% standard was better than expected in August 2014. Performance has deteriorated however less so than expected during the backlog clearance exercise.
- 2.8 There is significant variation at specialty level however we expect compliance in December 2014 and beyond.
- 2.9 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 period ending 31 August 2014.

<b>18 wk RTT Incompletes</b>	<b>RBH</b>	<b>Poole</b>	<b>DCH</b>	<b>Salisbury</b>	<b>Yeovil</b>
Aggregate Performance	94.1%	96.9%	95.5%	97.0%	95.3%
No of Specialties	16	17	15	16	17
No of Specialties Achieving	13	17	14	16	15

- 2.10 Indicative local targets have been set to ensure NHS Foundation Trust waiting list positions improve. The current position at the end of August 2014 indicates that the waiting list position across the local health community have increased notably. The table below indicates the latest waiting list position compared with 31 March 2014.

<b>RTT – Waiting List</b>	<b>RBH</b>	<b>Poole</b>	<b>DCH</b>	<b>Salisbury</b>	<b>Yeovil</b>
Target Number of Waits	14,520	9,366	10,661	9,776	6,387
Actual Number of Waits	16,207	9,950	11,936	12,166	6,809

- 2.11 Across Dorset CCG the waiting lists continue to grow reflecting a small growth in the referral rate seen this year.
- 2.12 The table below identifies the weekly PTL backlog for the most recent period compared with the backlog as at 30<sup>th</sup> March 2014.

<b>Weekly PTL Backlog</b>	<b>30 Mar</b>	<b>14 Sep</b>	<b>21 Sep</b>	<b>28 Sep</b>	<b>5 Oct</b>	<b>12 Oct</b>
DCH Admitted	445	298	259	238	232	248
Poole Admitted	54	72	73	79	73	64
DCH Non Admitted	371	251	245	290	314	327
PHT Non Admitted	193	174	171	155	146	146
RBH Total	679	784	790	717	680	682

- 2.13 The information highlighted in the above table highlights that significant improvements can be seen by each provider in a number of areas throughout the backlog clearance exercise however further challenges remain at speciality level.

Dorset Clinical Commissioning Group reported that seven patients waited over 52 weeks as at 31 August 2014: three at the Royal Bournemouth Hospitals NHS Foundation Trust and four at North Bristol Hospital NHS Foundation Trust. The following table however shows the number of patients waiting in excess of 35 weeks for treatment at Provider level (and therefore subject to various commissioning organisations):

<b>RTT – Over 35 weeks Wait</b>	<b>RBH</b>	<b>Poole</b>	<b>DCH</b>	<b>Salisbury</b>	<b>Yeovil</b>
Target Number of Waits based on position at end of March 2014	28	0	36	0	10
Actual Number of Waits (Provider)	103	4	37	5	9

- 2.14 The three patients waiting at the end of August 2014 at Royal Bournemouth Hospitals NHS Foundation Trust were treated in September 2014. Further work needs to be undertaken with regard the patients waiting at North Bristol where they are awaiting complex spinal surgery. There is a shortage of spinal surgeons nationally which is leading to lengthy delays for all complex surgical procedures.

## Diagnostic Performance

- 2.15 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 August 2014:

Percentage 6 week breaches	Apr 14	May 14	Jun 14	Jul 14	Aug 14
Dorset County	12.5%	12.0%	10.2%	6.9%	9.3%
Poole	1.0%	0.9%	0.2%	0.3%	0.2%
Royal Bournemouth	0.6%	3.1%	0.7%	0.2%	0.2%
Dorset Healthcare	0.8%	0.0%	0.0%	0.1%	0.2%
Salisbury	0.0%	0.0%	0.2%	0.0%	0.0%
Yeovil	1.8%	0.8%	0.6%	0.5%	0.2%

- 2.16 Dorset County Hospital NHS Foundation Trust reported that 9.3% of all patients were waiting over 6 weeks for treatment as at 31 August 2014. Provisional information for the period ending 30 September 2014 indicates a notable improvement in DEXA scan (10 patients waiting over 6 weeks) and a small improvement in Non-Obstetric Ultrasounds (122 patients waiting over 6 weeks). The NHS Foundation Trust has appointed a locum to provide additional capacity prior to the commencement of additional staff in the new year. It is anticipated that the number of 6 week breaches will improve from the end of November 2014 however the CCG has requested an action plan and recovery trajectory to support this.

## Cancer Standards (Lead Director Jane Pike)

- 2.17 14 day standard: The performance of Royal Bournemouth Hospital NHS Foundation Trust is concerning. The NHS Foundation Trust reported that 69% of patients were seen with 14 days. Performance had been highlighted as a concern by the provider due to demand for services however the scale of the concern had not been highlighted. This will be addressed at the next contract review meeting with some urgency. This standard forms part of the NHS Constitution element within the Quality Premium.
- 2.18 14 day breast symptom standard: Dorset County Hospital NHS failed to achieve the standard in August 2014 with a number of breaches. The cause of underperformance is being investigated. Royal Bournemouth Hospital NHS Foundation Trust failed the target in August 2014 however there is some concern about data quality. The Foundation Trust reported 1 patient seen in August 2014 which is extremely low volume and is currently being investigated by the Provider.
- 2.19 31 Day Standard: Dorset County Hospital NHS Foundation Trust failed the respective standard marginally however is achieving the year to date standard.
- 2.20 62 Day Standard: Royal Bournemouth Hospital NHS Foundation Trust failed the respective standard marginally however is achieving the year to date standard.

## **Urgent and Emergency Care (Lead Director Jane Pike)**

- 2.21 Poole Hospital NHS Foundation Trust and Royal Bournemouth Hospital NHS Foundation Trust both failed to achieve the 95% standard in Quarter 2. Royal Bournemouth Hospital NHS Foundation Trust is currently failing the 95% standard in October 2014 and remains under considerable pressure.
- 2.22 South West Ambulance Services NHS Foundation Trust achieved all key national standards for the period ending 30 September and achieved, on aggregate the 111 key performance target of calls answered in 60 seconds for the first month. The Trust delivered 95.8% against the 95% standard.
- 2.23 The 111 service has seen a reduction in call volumes in September 2014 and October 2014 to date. This has seen recommendations to attend Emergency Department and Primary Care both fall. Conveyance rates however continue to rise with 11.6% of these patient conveyed.
- 2.24 An additional £3.32m of funding has been confirmed with the CCG on 24<sup>th</sup> October 2014 and the allocation of these funds will be confirmed by the System Resilience Board.

## **Dorset Healthcare University Foundation Trust (Lead Director Jane Pike)**

### **Mental Health Services**

- 2.25 As at August 2014, DHUFT are reporting that 52% of Mental Health Targets are being met, these exceptions are primarily around indicators relating to Memory Assessment Service, Crisis Response, Urgent Assessments, Adult and Older Persons discharge plan and delayed discharge days for mental health inpatients. A breakdown of the breaches is detailed in the monthly performance report from Dorset Healthcare.

### **Children and Young People Services**

- 2.26 As at August 2014, DHUFT are reporting that 91% of C&YPS targets are being met. Exceptions include, Smoking Quitters – four week quitters, Breastfeeding number of contacts, Medical Terminations of Pregnancy – number of attendances/procedures, sexual health number of student contacts, School Nursing contacts and Looked After Children number of contacts.

### **CAMHS**

- 2.27 As at August 2014, DHUFT are reporting exceptions in the 8 week referral time for Tier 2 services, DNA's and referral and discharge rates, Tier 3 waiting times and DNA rates.

### **Community Health Services**

- 2.28 As at August 2014, DHUFT are reporting that 84.81% of Community Health Services targets are being met.
- 2.29 A full list of all exceptions and actions being implemented to improve individual areas are detailed in the full Dorset Healthcare Performance report.

## Quality Premium Report 2014/15

- 2.30 The 'Quality Premium' reward to be paid to CCGs in 2014/15 will be subject to the CCG delivering financial targets within resources and managing performance across a range of NHS Constitution requirements, rights and pledges. In addition, the amount of reward will be based on performance across five national measures and one local measures as follows.
- 2.31 **Reducing potential years of lives lost through amenable mortality** (15 per cent of quality premium): the overarching objective for Domain 1 of the NHS Outcomes Framework.
- 2.32 **Improving access to psychological therapies** (15% per cent of quality premium): one of the objectives for Domain 2 of the NHS Outcomes Framework.
- 2.33 **Reducing emergency admissions for long term conditions** (25 per cent of quality premium); the primary objectives of Domains 2 and 3.
- 2.34 **Addressing issues identified in the Friends and Family test and ensuring that people have a positive experience of care** (15 per cent of quality premium); the overarching objective of Domain 4.
- 2.35 **Improved reporting of medication-related safety incidents** (15 per cent of the quality premium); whereby the objective of Domain 5 is to treat people in a safe environment and protect them from avoidable harm.
- 2.36 **Increasing the number of people diagnosed and the prevalence of dementia** is the agreed local measure for 2014/15, based on one of the measures in the NHS Outcomes Framework: (15 per cent of the quality premium).
- 2.37 An assessment of Dorset CCG's performance for the period ending 30 September 2014 is shown in Appendix 2.
- 2.38 The early highlights from this report are shown below:
- On target to achieve the pre qualifying NHS Constitution areas of 18 Week RTT waiting list and SWAST Response times.
  - On target to achieve the pre qualifying NHS Constitution area of Emergency Department performance however this remains a significant concern. Year to date performance is marginally higher than 95%.
  - Currently behind target to achieve the 14 day cancer standard for the period ending 31 August 2014 with significant performance concerns at Royal Bournemouth Hospital NHS Foundation Trust who delivered 69.6% in August 2014.
  - 25% of the total funding is achievable through reducing emergency admissions against the 2013/14 baseline. Current indication across the cohort of areas which form this indicator show an increase of 6% when compared to the 2013/14 baseline period.

## 10.2

- Provisional information has been released by HSCIC in relation to Dementia Diagnosis for the period ending 31 August 2014, this indicates CCG performance of 57%. (49% Dorset HWB and 68% across Bournemouth and Poole HWB). The current performance levels indicate the year end target will not be achieved.

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**:**

**Date : 30<sup>th</sup> October 2014**

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<b>APPENDICES</b>	
<b>Appendix 1</b>	<b>Corporate Performance Report</b>
<b>Appendix 2</b>	<b>Quality Premium 2014/15</b>