

**NHS DORSET CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING
PERFORMANCE AND QUALITY PREMIUM REPORT**

Date of the meeting	16/07/2014
Author	P Dove, Head of Performance Intelligence
Sponsoring Board Member	P Vater, Chief Financial Officer
Purpose of Report	To note the progress against National and Local Performance Standards for 2014/15 and note the progress against the 2014/15 Quality Premium
Recommendation	The Governing Body is asked to Note the report and make recommendations.
Stakeholder Engagement	N/A
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Assurance Domains	<ul style="list-style-type: none"> • Quality • Engagement • Outcomes • Governance • Partnership-Working • Leadership 		
I confirm that I have considered the implications of this report on each of the matters below, as indicated:	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	✓		✓

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 at Appendix 1. The performance concerns are noted below:

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

- 2.2 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.
- 2.3 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 April 2014:

18 week RTT Admitted	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	90.0%	95.0%	92.0%	91.6%	91.0%
No of Specialties	11	11	12	14	15
No of Specialties Achieving	7	11	11	13	11

- 2.4 Royal Bournemouth NHS Foundation Trust reported four specialties underperforming as at 30 April 2014 (General Surgery, Trauma & Orthopaedics, Ophthalmology and Gynaecology) for admitted pathways. The weekly PTL continues to highlight high pressure within Ophthalmology, Trauma & Orthopaedics and Dermatology.
- 2.5 Dorset County Hospital NHS Foundation Trust reported an underperformance in Ophthalmology for admitted pathways and the weekly PTL continues to show significant backlog issues within this specialty.
- 2.6 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 April 2014:

18 week RTT Non Admitted	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	98.6%	97.2%	96.5%	96.4%	96.3%
No of Specialties	15	15	15	16	17
No of Specialties Achieving	15	14	13	13	12

- 2.7 The following performance is noted for Referral to Treatment on Incomplete Pathway Compliance at Provider level (and therefore subject to various commissioning organisations) for April 2014:

9.2

18 week RTT Incomplete	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	94.7%	97.3%	93.7%	96.4%	96.7%
No of Specialties	16	15	15	16	17
No of Specialties Achieving	15	14	13	16	16

- 2.8 Indicative local targets based on the number of patients waiting at 31 March 2014 have been set to ensure NHS Foundation Trust waiting list positions improve. The current position at the end of April 2014 indicates that the waiting list position across the local health community has increased across the majority of providers with notable increases at Dorset County Hospital NHS Foundation Trust and Salisbury Hospital NHS Foundation Trust. The table below indicates the latest waiting list position compared with 31 March 2014.

RTT	RBH	Poole	DCH	Salisbury	Yeovil
Target Number of Waits	14,520	9,366	10,661	9,776	6,387
Actual Number of Waits	14,600	9,449	11,156	11,990	5,951

- 2.9 Dorset Clinical Commissioning Group reported no patients waiting over 52 weeks for treatment as at 30 April 2014. 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)	51	4	46	1	9

- 2.10 The performance of Royal Bournemouth Hospital NHS Foundation Trust and Dorset County Hospital NHS Foundation Trust ending 30 April 2014 remains disappointing with a total of 97 patients waiting over 35 weeks for treatment compared with 64 patients as at 31 March 2014. The number of over 35 week waiters across the remaining providers has not deteriorated significantly when compared to the reported position in March 2014.
- 2.11 There have been concerns raised nationally about the current level of 18 week RTT performance and subsequent increase in provider waiting lists and backlog. With this in mind NHS England and the Area Team have encouraged provider organisations to submit 'bids' aimed at tackling the rising backlog in July and August 2014. Each organisation across Dorset has submitted 'bids' to substantially reduce their backlog and the CCG awaits the final decision of NHS England and the Area Team with respect to this funding.

Diagnostic Performance

- 2.12 The following table shows the performance of organisations across Dorset and providers on the health community boundary. The percentages shown below highlight the proportion of patients waiting over 6 weeks for diagnostic:

9.2

6 Week Active Diagnostic Breaches	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Dorset County	12.5%											
Poole	1.0%											
Royal Bournemouth	0.6%											
DHUFT	0.8%											
Salisbury	0.0%											
Yeovil	1.8%											

- 2.13 Dorset County Hospital NHS Foundation Trust reported that a total of 436 patients were waiting over 6 weeks for treatment in April 2014 including, 330 DEXA Scans and 85 Non-Obstetric Ultrasounds against a 1% threshold. The NHS Foundation Trust has reported concerns for a number of months in relation to DEXA scans where the Trust has experienced an increase in referrals coupled with the sick leave followed by resignation of the DEXA practitioner. The NHS Foundation Trust has confirmed that securing a permanent recruitment has not been successful, but are hoping to recruit a joint post with radiology to improve the likelihood of recruitment.
- 2.14 The NHS Foundation Trust is still reporting a high number of 13 week breaches.
- 2.15 Yeovil NHS Foundation Trust reported that a total of 38 patients were waiting over 6 weeks for treatment in April 2014, against a 1% threshold. The majority of these were for cystoscopy procedures.

Quality and Infection Control (Lead Director Suzanne Rastrick)

- 2.16 For the period ending 30 April 2014 all local providers reported no cases of MRSA, with the exception of Poole Hospital NHS Foundation Trust who have reported 1 case, and have thus failed to achieve the national objective.
- 2.17 Performance against nationally set C DIFF objectives is currently disappointing at Salisbury NHS Foundation Trust who reported a total of 12 cases during April and May 2014 against an annual target of 18. Poole Hospital NHS Foundation Trust also reported 4 cases during May 2014 against an annual target of 13 cases. The number of C DIFF cases attributable to Dorset CCG for the period ending 31 May 2014 is 34 and unless performance improves in the following months the CCG's annual objective of 192 cases may prove to be challenging.
- 2.18 There were 4 cases of Mixed Sex Accommodation in April 2014 at Salisbury NHS Foundation Trust, but all providers achieved the target of zero breaches in May 2014.
- 2.19 NHS England continues to publish Friends and Family Test information, the most recent information published is up to April 2014.

Trust Name	Mar-14			Apr-14		
	Inpatient response rates	A&E response rates	Combined response rates	Inpatient response rates	A&E response rates	Combined response rates
England	34.8%	18.5%	24.0%	34.9%	18.6%	24.0%
Salisbury Hospital	49.7%	13.5%	25.4%	47.3%	15.0%	25.7%
Yeovil Hospital	47.6%	7.1%	20.0%	47.8%	6.8%	20.4%
Dorset County Hospital	42.0%	21.4%	29.6%	44.4%	22.4%	30.6%
Poole Hospital	49.6%	19.8%	28.5%	65.2%	14.7%	27.7%
Bournemouth Hospital	42.4%	11.3%	20.8%	47.3%	10.5%	21.5%

- 2.20 The following points can be noted from the above data;
- Dorset County Hospital NHS Foundation Trust recorded a combined response rate of 30.6% with both Inpatient and Accident & Emergency response rates higher than the national average.
 - All other trusts have recorded response rates above the national average for Inpatient admissions, but below the national average for A&E.

Urgent and Emergency Care (Lead Director Jane Pike)

- 2.21 There have been national A&E pressures experienced through April and May, and Dorset A&E departments continue to manage through surge and escalation arrangements however a review is taking place to further understand the ongoing pressures in A&E departments, to identify additional actions required.
- 2.22 Performance against the 95% four hour standard for the period ending 31 May 2014 continues to be under pressure across the majority of providers locally, however it is expected that most providers will achieve the 95% standard throughout quarter 1.
- 2.23 South Western Ambulance Services NHS Foundation Trust has achieved all key national standards throughout April and May 2014 despite notable increases in both response and conveyance rates across Dorset.

Dorset Healthcare University Foundation Trust (Lead Director Jane Pike)

Mental Health Services

- 2.24 As at April 2014, DHUFT are reporting that 75% of Mental Health Targets are being met, these exceptions are primarily around indicators relating to Memory Assessment Service – the percentage of initial assessments and treatments completed within 4 weeks of referral. The Trust has identified that there has previously been an under reporting of delayed transfers of care within Mental Health. As a result of the corrections being made the percentage of bed days is now reported for April at 10.72% (12% in March) against a target of 7.5%. In April there were 3 breaches to the emergency crisis response service 3-4 hour response. Dorset Healthcare have provided a breakdown of these breaches which are detailed in the main report.

Children and Young People Services

- 2.25 As at April 2014, DHUFT are reporting that 89% of C&YPS targets are being met. Exceptions include, Smoking Quitters, Sexual health partners screened and treated for chlamydia within 30 days, breastfeeding number of contacts, number of contacts for the Dorset Working Women's Project, School nursing contacts.

CAMHS

- 2.26 As at April 2014, DHUFT are reporting exceptions in the 8 week referral time for Tier 2 & 3 services, DNA's and referral and discharge rates.

Early Intervention in Psychosis

- 2.27 As at April 2014 DHUFT are reporting exceptions in number of cases discharged to CMHT active caseload.

Eating Disorders

- 2.28 As at April 2014 DHUFT are reporting the following exceptions – number of patients who commenced treatment in the month who agreed /identified a goal, number of patients who were discharged in the month who showed progress to achieving their goals (6/7 patients discharged dropped out of treatment prior to completion. DHUFT are to provide more information on the dropout rate.

Community Health Services

- 2.29 As at April 2014, DHUFT are reporting that 87.23% of Community Health Services targets are being met. Exceptions include Delayed Transfers from Community at 7.7% (23 patients), the percentage of patients contacted within 24 hours by a community matron is reporting 68.7% (90% target), the percentage of stroke patients accepting a review is 81% (95% target).
- 2.30 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

- 2.31 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 measure as shown below.

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 Information for the period ending 30 April 2014 is not currently available and the CCG continues to work with Public Health to address the reporting concerns

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 The CCG reported that 16.25% of patients who have depression and/or anxiety disorders received psychological therapies in April 2014. This is above the national target for IAPT access of 15% by March 2015.

Reducing emergency admissions for long term conditions: (25 per cent of quality premium): the primary objectives of Domains 2 and 3.

- 2.34 The CCG is reporting a decrease in Emergency admissions in the four defined areas as shown below:

9.2

NHS Outcomes Framework	Number of Admissions		
	2013/14 Full Year	May 13 to Apr 14	% Variance
Admissions for acute conditions that should not usually require admission	7,432	7,377	-0.7%
Unplanned hospitalisation for Chronic Ambulatory Care sensitive conditions	6,011	5,988	-0.4%
Unplanned hospitalisation for Asthma, Diabetes and Epilepsy in under 19s	486	480	-1.2%
Emergency Admissions for Children with Lower respiratory Tract Infections (LRTI)	554	551	-0.5%
Total	14,483	14,396	-0.6%

- 2.35 The CCG is reporting a reduction in Emergency admissions of 0.6% as at 30 April 2014 despite a notable increase in all Emergency admissions. The current reduction is based on a 12 month rolling average.

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.

- 2.36 Further work across the CCG is being undertaken to ensure delivery against 4 areas identified in the Quality Premium.

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.

- 2.37 Further work across the CCG is being undertaken to ensure delivery against 2 areas identified in the Quality Premium.

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).

- 2.38 The CCG based on local information achieved a minimum dementia diagnosis rate of 57% in 2013/14. It is therefore expected the 65% target for 2014/15 will be achieved.
- 2.39 An early assessment of Dorset CCG's performance is shown in Appendix 1. Where information for the period is not known an estimate of the CCGs performance/RAG has been undertaken.

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APPENDICES	
Appendix 1	Corporate Performance Report