

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

Date of the meeting	17/09/2014
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 2014/15
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 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 		
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	✓		✓
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 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 Foundation Trusts within the Dorset Clinical Commissioning Group health community are achieving national 18 week standards at aggregate level.

Jun-14	Aggregate Performance		
Provider	Admitted	Non-Admitted	Incomplete
Dorset County	91%	98%	93%
Poole	96%	97%	98%
Royal Bournemouth	90%	98%	95%
DHUFT	96%	99%	98%
Salisbury	93%	98%	97%
Yeovil	92%	97%	94%

- 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 30 June 2014:

18 wk RTT Admitted (Adj)	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	90.5%	95.6%	90.5%	92.9%	91.6%
No of Specialties	10	11	11	16	15
No of Specialties Achieving	6	10	10	15	11

- 2.5 Royal Bournemouth NHS Foundation Trust reported four specialties underperforming as at 30 June 2014 for admitted pathways (General Surgery 88.7%, Ophthalmology 85.9%, Trauma & Orthopaedics 89.1% and Gynaecology 86.7%). Significant challenges remain for the NHS Foundation Trust where at the aggregated position the NHS Foundation Trust reported 90.5%.
- 2.6 The weekly PTL for Royal Bournemouth NHS Foundation Trust continues to highlight high pressure within Trauma & Orthopaedics and Ophthalmology, with Cardiology, General Surgery and Gynaecology also reporting an increase in the backlog.
- 2.7 Poole Hospital NHS Foundation Trust achieved an overall percentage of 95.6%, achieving the 90% target for all admitted specialties (with the exception of Cardiology) for the period ending 30 June 2014.

9.2

- 2.8 Dorset County Hospital NHS Foundation Trust failed to achieve the 90% standard at specialty level where Ophthalmology achieved 77.5%. This is in line with guidance provided by the Trust. The recent priority targeted list (PTL) received from the Trust showed a reduction in adjusted admitted backlog (568 on 6th July to 394 on 17th August), a 30% reduction in that period, which supports implementation of the remedial action plan agreed previously with the Trust.
- 2.9 All organisations across Dorset CCG have submitted bids for funding to the Area Team as part of a national exercise to clear 18 week backlog. Funding has been agreed with the Wessex Area Team and providers are now clearing backlog with a view to reducing backlog to the levels seen in January 2013. This will have a detrimental effect on performance in July, August and September 2014 however performance should improve from October 2014.
- 2.10 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 June 2014:

RTT Specialty	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	98.1%	96.7%	97.8%	97.8%	96.5%
No of Specialties	15	16	15	16	17
No of Specialties Achieving	15	12	15	15	12

- 2.11 Performance for Non-Admitted pathways across Dorset against the 95% standard is good at aggregate level however performance varies at specialty level.
- 2.12 For the period ending 30 June 2014:
- Dorset County Hospital and Royal Bournemouth Hospital NHS Foundation Trusts and Dorset Healthcare NHS Foundation Trust achieved the 95% target for all specialties;
 - Poole Hospital NHS Foundation Trust failed to achieve target for Urology 92.3%, Trauma & Orthopaedics 90.7%, ENT 92.6% and Oral Surgery 92.8%.
- 2.13 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 30 June 2014.

RTT Specialty	RBH	Poole	DCH	Salisbury	Yeovil
Aggregate Performance	95.3%	97.5%	93.1%	96.6%	94.4%
No of Specialties	16	17	15	16	17
No of Specialties Achieving	15	17	14	16	14

- 2.14 Indicative local targets 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 – Waiting List	RBH	Poole	DCH	Salisbury	Yeovil
Target Number of Waits	14,520	9,366	10,661	9,776	6,387
Actual Number of Waits	14,915	9,414	11,260	12,131	6,039

- 2.15 Across Dorset CCG the waiting lists continue to grow reflecting a small growth in the referral rate seen this year. It is expected that the waiting list positions across all providers will reduce over the coming months as the providers seek to reduce waiting times in line with the national directive to improve waiting times.
- 2.16 Dorset Clinical Commissioning Group reported that two patients were waited over 52 weeks as at 30 June 2014: a Cardiology patient at Exeter Nuffield; and a Trauma & Orthopaedics patient at North Bristol Hospital NHS Foundation Trust. There is a further review of these individual cases being undertaken, with appropriate follow up action with the providers involved including fines. 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):

RTT – Over 35 weeks Wait	RBH	Poole	DCH	Salisbury	Yeovil
Target Number of Waits based on position at end of March 2014	28	0	36	0	10
Actual Number of Waits (Provider)	96	2	70	3	18

- 2.17 The performance of Dorset County Hospital NHS Foundation Trust and Royal Bournemouth Hospital NHS Foundation Trust for the period ending 30 June 2014 shows a significantly increasing number of patients waiting over 35 weeks for treatment. The additional funding requested through the Area Team is aimed at reducing the number of patients waiting over 18 weeks for treatment.

Diagnostic Performance

- 2.18 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 30 June 2014:

KPI	Provider	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	2014-15 Target
6 Week Active Diagnostic Breaches	Dorset County	12.5%	12.0%	10.2%										1%
	Poole	1.0%	0.9%	0.2%										1%
	Royal Bournemouth	0.6%	3.1%	0.7%										1%
	DHUFT	0.8%	0.0%	0.0%										1%
	Salisbury	0.0%	0.0%	0.2%										1%
	Yeovil	1.8%	0.8%	0.6%										1%

- 2.19 Dorset County Hospital NHS Foundation Trust reported that 10.2% of all patients were waiting over 6 weeks for treatment as at 30 June 2014, against a 1% threshold. Provisional information for the period ending 31 July 2014 indicates significant improvement with 6.9% of patients waiting in excess of 6 weeks.
- 2.20 Significant improvements can be seen in the number of patients waiting over 6 weeks for a DEXA scan. The NHS Foundation Trust has provisionally reported 162 patients waiting over 6 weeks for their scan compared with approximately 400 in June 2014. Several positive aspects occurred in July 2014 including commencement of a replacement practitioner and additional capacity provided within Trust by an external provider (InHealth). Further work is required to ensure the 1% threshold is met however the NHS Foundation Trust is ahead of their recovery trajectory supplied in Quarter 1.

- 2.21 Of concern however is the situation in Non Obstetric Ultrasound. The Trust reported 71 patients waiting over 6 weeks for their diagnostic test. The NHS Foundation Trust has identified a number of reasons for deteriorating performance, such as staff vacancies, sickness and an increase in demand. The Trust has appointed to a number of roles, some of whom commenced in June 2014. A vascular technologist has been appointed but has yet to commence employment. This however still leaves vacancies within the department and therefore it is expected that further breaches will be seen in August and September 2014.
- 2.22 Royal Bournemouth Hospital NHS Foundation Trust reported that 0.7% of patients waited over 6 weeks for treatment in June 2014. This is a significant improvement from the reported position last month of 3.1%. The NHS Foundation Trust reported that 17 patients were waiting over 6 weeks for an MRI scan, which is a considerable improvement on the figure of 98 reported for May 2014.

Urgent and Emergency Care (Lead Director Jane Pike)

- 2.23 Performance remained positive across Emergency Departments throughout June 2014 with all local providers achieving the 95% standard. Royal Bournemouth Hospital NHS Foundation Trust however failed to achieve the 95% standard throughout Quarter 1. Current performance remains resilient despite unprecedented demand however Royal Bournemouth Hospital NHS Foundation Trust again are failing to achieve the 95% for Quarter 2.
- 2.24 South West Ambulance Services NHS Foundation Trust achieved all key national standards for the period ending 30 June 2014.
- 2.25 South West Ambulance Services NHS Foundation Trust however failed to achieve two key NHS111 standards in April, May, June and July 2014. The aggregated position of calls answered within 60 seconds (following completion of the initial answerphone message) was below the 95% standard, and triaged calls resulting in advice to attend an Emergency Department was over the 4% standard, in all four months. The service continues to deliver the required performance throughout the week however issues remain over the weekend and holiday periods. South West Ambulance Service Foundation Trust has recruited additional staffing who have undergone training and commenced call handling in late June 2014.

Dorset Healthcare University Foundation Trust (Lead Director Jane Pike)

Mental Health Services

- 2.26 As at May 2014, DHUFT are reporting that 67% 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 May at 14.84% (10.72% in April) against a target of 7.5%. The percentage of responses to emergency referrals achieved by the crisis response service within 3-4 hours achieved 80% against a 90% target. & out of 30 patients were not seen within the required timescale. A breakdown of the breaches is detailed in the monthly performance report from Dorset Healthcare. An improvement plan to address the performance exceptions has been requested at the contract review meeting on 21 August 2014.

Children and Young People Services

- 2.27 As at May 2014, DHUFT are reporting that 89% 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

- 2.28 As at May 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

- 2.29 As at May 2014, DHUFT are reporting that 83.13% of Community Health Services targets are being met. Exceptions include , Acute care closer to home – percentage of discharge plans in place within 24hours of referral, percentage of referrals contacted by community matrons within 24 hours, percentage of stroke patients accepting a review, Delayed Transfers from community hospitals was 7% against a 3.5% 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 measures as follows.
- 2.32 **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.
- 2.33 **Improving access to psychological therapies** (15% per cent of quality premium): one of the objectives for Domain 2 of the NHS Outcomes Framework.
- 2.34 **Reducing emergency admissions for long term conditions** (25 per cent of quality premium); the primary objectives of Domains 2 and 3.
- 2.35 **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 **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 **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 An early assessment of Dorset CCG's performance for the period ending 30 June 2014 is shown in Appendix 2.

2.39 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, Emergency Department and SWAST Response times.
- On target to achieve the 14 day cancer standard although concerns remain across acute organisations delivering this standard on a regular basis.
- 25% of the total funding is achievable through reducing emergency admissions against the 2013/14 baseline. Current indications across the cohort of areas which form this indicator show an increase of 4% when compared to the 2013/14 baseline period.

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