

System Performance and Quality Report

July 2019





Urgent and Emergency Care

Emergency Department Performance: Poole commenced national ED pilot in May 2019; performance against these new measures will be reported internally (only) when available. UEC board development sessions determining strategic priorities, including focused work on ED; and UEC team currently working up a proposal for approval.

Admissions: Admissions up 1.0% for the period to May 2019 (YTD – excluding DCH). Poole reported a reduction in demand while RBH reported a significant increase in demand. Activity reductions expected from each UEC project is part of the current UEC board work as part of the delivery plan for 19/21 and planning for STP2.

Stranded Patients: Stranded Patients (9th June) at 195, against a target of 171. New QI project agreed by the UEC board using evidence base from McKinsey & RAND report – final report and plan for the project being presented to the UEC board at the July meeting.

SWAST: Category 1 now being met due to the new investment and a performance improvement trajectory is now available for Categories 2, 3 & 4. Recent work done by SWASFT as part of their 'Our People Plan' if delivered will further improve this position. No upfront growth purchased due to demand management plans but activity is above plan so focused work is being done to address this including conveyance and handover.

Elective

Referrals & Waiting Lists: A 3.3% decrease in total referrals across all specialties and a 3.1% decrease in GP referrals compared to May last year. Routine referrals continue to reduce across all specialties; -4.9% reduction compared to -5% last month. Total waiting lists, compared to April 18, has seen growth of 9.9% across the system. DCH has seen largest growth of 26.6%. Further work underway re use of PhotoSAF in dermatology and perhaps more widely.

Activity, Inpatient and Outpatients:. There is an increased risk of further 52 week breaches within all STP providers. As of April '19 there are 271 patients waiting over 40 weeks on an admitted pathway and 188 on a non-admitted pathway. Agreement needed re approach.

Diagnostics: A slight decrease in overall performance across the system and all STP providers for patients receiving diagnostics within 6 weeks (1% target) – 95.2% in April '19 compared to 96.3% in the previous month. Actions underway re endoscopy and planned for audiology.

Cancer: Dorset delivered 62 days in April 2019, but likely Q1 has just been missed. Increased demand continues -2ww wait referrals up by 8% leading to significant pressure particularly at DCH for breast. Poole and RBCH approached to support DCH but due to workforce and the demand into those sites, do not have spare capacity. The Breast SSG is urgently discussing the clinical situation and the DCP Operations and Delivery group is assessing how the system can support DCH. However the current access time for Breast patients at DCH is over 3 weeks and a plan to recover this will be worked up. This will be placed on the risk register and GP practices notified.



Maternity

Dorset Local Maternity System stillbirths and neonatal deaths has reduced from a rate of 3.6 per 1000 in 2015 to 2.4 per 1000 in 2018. The proportion of women who were breastfeeding at the time of discharge from midwifery to health visiting has increased from an average rate of 14.3% in 17/18 to 40.4% in the first three quarters of 18/19. It is difficult to attribute this to any one single change and the LMS will review initiatives implemented across Midwifery and Health Visiting in the past year to understand success.

Dermatology

System away day held in June with good engagement and task and finish groups progressing to develop new proposed model for Dorset. Although uptake of the PhotoSAF app has been good, not all practices are making good use of the dermatology advice and guidance service. Dermatology newsletter and tele-dermatology video will help to promote the service. There are now 330 users of PhotoSAF (77 practices) with 6,393 images taken. Dermatology advice and guidance data has been incorrectly captured on the Dermatology Dashboard for PHFT. This is being rectified at the moment and updated figures will be available shortly.

Ophthalmology:

Pathway established to re-direct new patient referrals from DCH to Evolutio. Evolutio is being added to 111 Directory of Services as an option for patients with minor eye conditions to be seen within 48 hours. BMI Harbour and Winterbourne remain closed to cataract referrals but backlog clear by late Aug/ Sep. An opportunity to transfer existing patients to the care of BMI could improve overall RTT position. Gap in Corneal service provision remains at DCH for keratoconus patients requiring specialist lenses due to workforce issues. RBH not able to absorb additional activity for West Dorset patients. There is a current backlog of 100 patients.

ICPCS

As presented at the GB development session in June, overall there has been good progress against the trajectories set for the ICPCS key indicators for 2018/19. Noting that we have not fully recruited to all posts and therefore we are unlikely to see a noticeable difference in the performance at this time.

It has been agreed that a task and finish group will be established to further develop the performance metrics used by the system so that we can more fully report on the changes and impact in a more detailed way. Reporting will be by PCNs for 2019/20

Primary Care

PCNs will officially be in place on 1 July. Initial areas of focus include PCN development (including pop health management), clinical leadership, and quality improvement. With regards to delegated commissioning, we have some budgetary pressures with regards to resilience, GP retainers and phlebotomy, all of which is being actively monitored and managed.

Funding for Improved Access to General Practice for 2019/20 has now been confirmed.

Mental Health

Dementia diagnosis rate: Work commenced to review diagnosis rates in care homes.

SMI health check: action plan in place. Population health intelligence used to identified key PCN areas to focus initial improvement rates.

CYP Access: Discrepancy between local intelligence and national reported data – working with BI to identify / resolve source of discrepancy



This report provides an overall exception report of the quality of health and some care services across Dorset.

Areas requiring improvement are:

- the impact on quality of operational pressures on overall performance in the providers
- SWASFT call stacking
- Ambulance handover delays
- Initial Health Assessments compliance rates.
- Quality Scorecards are included for information as appendix 2.



Mortality

DCH remains an outlier with a SHMI value of 1.20. The actions in response to the recent mortality review has been agreed with NHSI and CCG.

MRSA bacteraemia

One community onset MRSA bacteraemia case identified in Quarter 4, where learning has been identified and actioned.

Never Events

One Never Event was reported at RBCH in April 2019 in relation to medicine administered via the wrong route (IV not oral).

Complaints

Responses to complaints at RBCH continue to not meet their internally agreed timescales and performance thresholds.

CQUIN

The 4 main providers will collaborate at system level to achieve the 2019/20 CQUINs for Staff flu vaccination, screening and brief advice for tobacco and alcohol use in inpatient settings and key falls prevention actions. Proposals have been shared with NHSE to agree how progress is measured.

CQC inspections:

CQC have published the report of the April visit to Poole theatre. Although some of the requirements had been met, change was ongoing and there was further work needed to continue the improvements specifically in Infection Prevention and Control and the temperature of the theatre environment.

Looked After Children

Performance for Q4 saw IHAs remaining variable against the indicator of 95%. The current trends are still showing that LA statutory responsibility is not being met and sustained

Safeguarding training compliance

Compliance with level 3 Safeguarding children training at all acute Trusts will be explored with the health leads group to see if a collaborative approach may help improve this position. Each provider reports difficulty accessing the relevant course.

Primary Care

No practices are currently rated as inadequate. Further final published reports are awaited showing a current Requires Improvement practice has now moved to Good and two practices who had been good are now requiring improvement.

SWAST

Call stack risk rating has now decreased to 20. Both RBH and DCH will be subject to an NHSI/E intervention programme due to ambulance handover performance concerns.

Dorset Quality Surveillance Group – Items for note

- SWAST remain in enhanced surveillance
- Children's services – ASD Pathway
- Closure of Glenside
- Looked After Children's conference
- Dorset Nursing Conference
- System thinking – Learning Disabilities
- TB Homeless screening programme



Performance Metrics

****Elective and Non-Elective Admissions:** Due to coding issues, DCH Inpatient activity has been excluded for M2. Therefore System values for IPs are estimated.

For RAG rating explanation see back page

● National Targets
■ Local Targets

Responsible To	ToR	Area of Concern	BiD Link	NHSEI Threshold	System Threshold	Provider	System		PHT	DCH	RBH	SWAST
						Date	Value	Value	Value	Value	Value	
Quality		Infection Control				Mar19		●				
		Mortality				Mar19		●				
		Never Events				Mar19		●				
		Safeguarding				Mar19		●				
		Sepsis				Mar19		●				
		Serious Incidents				Mar19		●				
		VTE				Mar19		●				
Urgent & Emergency Care Board		Category 1 Ambulance Response Times (mins)	🔗		7 mins	May19	6.2	●				6.2
		Category 2 Ambulance Response Times (mins)	🔗		18 mins	May19	29.0	●				29.0
		Category 3 Ambulance Response Times (mins)	🔗			May19	96.7	■				96.7
		Category 4 Ambulance Response Times (mins)	🔗			May19	107.8	■				107.8
	🔗	4 hour A&E Wait	🔗		95%	May19	94.1%	●		95.5%	92.8%	
		Ambulance Conveyances vs previous financial year (YTD)	🔗			May19	1.1%	■	1.3%	0.7%	1.0%	
		ED Demand vs Contract Plans (YTD)	🔗			May19	4.8%	■	1.1%	5.5%	7.4%	
		NHS111 vs previous financial year (YTD)	🔗			May19	4.4%	■				4.4%
		Non-Elective Admissions** vs Contract Plans (YTD)	🔗			May19	-2.3%	■	-8.9%		5.6%	
	🔗	Delayed Transfers of Care	🔗		3.5%	Apr19	3.8%	●	3.5%	6.7%	2.7%	
	Stranded Patients - those waiting over 21 days	🔗			as at: 23/06/19	221.0	■	84.0	49.0	88.0		



Performance Metrics

***Elective and Non-Elective Admissions: Due to coding issues, DCH Inpatient activity has been excluded for M12. Therefore System values for IPs are estimated.*

Responsible To	ToR	Area of Concern	BiD Link	NHSEI Threshold	System Threshold	Provider	System		PHT	DCH	RBH	DHC
						Date	Value	.	Value	Value	Value	Value
Elective Care Board	🔗	Consultant-Led RTT Performance: 18 week wait	🔗		83.5%	Apr19	81.4%	●	82.5%	75.1%	84.0%	94.9%
		Consultant-Led RTT Performance: Numbers waiting >26 weeks	🔗			Apr19	4721.0	■	1353.0	1660.0	1698.0	10.0
		Consultant-Led RTT Performance: Numbers waiting >52 weeks	🔗		0.0	Apr19	1.0	■	0.0	0.0	1.0	0.0
		Consultant-Led RTT Performance: Waiting List Growth-compared to March 19	🔗			Apr19	2.0%	●	1.6%	4.5%	0.9%	3.4%
		Consultant-Led RTT Performance: Waiting List Total (current)	🔗		57460.0	Apr19	57581.0	■	14842.0	15178.0	26641.0	920.0
		Criteria Based Access activity vs previous financial year (YTD)	🔗			Apr19	-0.1%	■	16.3%	-27.1%	9.7%	
		Diagnostics: 6 week wait	🔗		>92.8%	Apr19	95.2%	●	97.8%	88.2%	98.3%	100.0%
		Diagnostics: Total List	🔗		13388.0	Apr19	13959.0	■	3620.0	4297.0	4975.0	1067.0
		Elective Admissions** vs Contract Plans (YTD)	🔗			May19	0.1%	■	2.0%		-0.9%	
		GP Referrals (all specialties) vs previous financial year (YTD)	🔗			May19	-3.1%	■	-7.2%	-0.8%	-1.8%	
		OP 1st Attendances vs Contract Plans (YTD)	🔗			May19	-1.5%	■	-9.8%	11.9%	-1.9%	
OP FUp Attendances vs Contract Plans (YTD)	🔗			May19	0.5%	■	6.1%	3.1%	-5.6%			
Dorset Cancer Partnership	🔗	Cancer: 2 week wait - GP Urgent Referral to First Consultant Appointment	🔗		93%	Apr19	87.9%	●	93.4%	68.7%	94.5%	
		Cancer: 31 day wait for First Treatment	🔗		96%	Apr19	98.6%	●	96.4%	100.0%	99.5%	
		Cancer: 62 day GP Urgent Referral to First Treatment	🔗		85%	Apr19	85.6%	●	84.5%	84.7%	86.9%	



Performance Metrics

Responsible To	ToR	Area of Concern	BiD Link	NHSEI Threshold	System Threshold	Provider	System	DHC
						Date	Value	Value
Primary & Community Care		Community Health Contacts vs previous financial year (YTD)	🔗			Mar19	-2.2%	■ -2.2%
		Electronic Repeat Dispensing	🔗			Apr19	4.0%	■
		GP online consultation (% practices)	🔗			Apr19	52.0%	■
		ICPCS recruitment against target	🔗			Apr19	64.3%	■
		Improving Access to GP Services: utilisation	🔗			Apr19	75.0%	■
		Occupied Beds	🔗			Apr19	91.6%	■ 91.6%
		Over 65s Admissions (Elective, Emergency and Non-Elective Non Emergency) Rolling 12 months	🔗			Apr19	46545.0	■
		Re-Admissions within 30 days (all Emergency Admissions)	🔗			Apr19	15.1%	■
		Workforce GP numbers against target	🔗		512.0	Apr19	521.0	■
Mental Health Board		CYP - Access Rate	🔗		34%	Sep18	34.5%	■
		CYP Eating Disorder Waiting time - Routine 4 weeks	🔗		74.3%	Apr19	75.0%	● 75.0%
		CYP Eating Disorder Waiting Time - Urgent 1 week	🔗		100%	Apr19	100.0%	● 100.0%
		Dementia Diagnosis Rate	🔗		61.1%	May19	62.2%	■ 62.2%
		EIP standard and services - NICE concordance	🔗		60%	Apr19	63.0%	● 63.0%
		IAPT - Access Rate	🔗		4.8%	Sep18	4.7%	■ 4.7%
		IAPT - Moving to Recovery	🔗		50%	Apr19	52.0%	● 52.0%
		IAPT - Treated within 18 weeks	🔗		95%	Apr19	100.0%	● 100.0%
		IAPT - Treated within 6 weeks	🔗		75%	Apr19	97.0%	● 97.0%
		Out of Area Placement bed days	🔗			Q4	171.0	■ 171.0
		SMI Physical Health Checks	🔗		20%	Dec18	16.9%	■ 16.9%