**ITEM NO: 11.00** 

Wokingham Clinical Commissioning Group Performance Outcomes Report June 2013 **TITLE** 

Health Overview and Scrutiny Committee on FOR CONSIDERATION BY

29 July 2013

None Specific **WARD** 

Paper No: Wok 2013/33

# REPORT OF THE NHS WOKINGHAM CCG GOVERING BODY – 2 JULY 2013

Title	June 2013 Performance Outcomes Report
Sponsoring Director	Janet Meek (CFO)
Author(s)	Debbie New
Purpose	To inform the board of the performance against CCG Clinical Indicators
Previously considered by	None
Risk and Assurance	As detailed within report
Legal implications/regulatory requirements	None
Public Sector Equality Duty	N/A
Links to the NHS Constitution (relevant patient/staff rights) All NHS organisations are required by law to take account of the NHS Constitution in performing their NHS functions	All
Consultation, public engagement & partnership working implications/impact	N/A

# **Executive Summary**

Under performance:		High performance & improvement	
		to green:	
6	MRSA	Bowel cancer screening	
9	Cdiff	<ul><li>% of patients who spent 4</li></ul>	
•	RTT treatment functions/specialties	hours or less in A&E	
	not achieved		
0	Diagnostics % waiting 6 weeks or		
	more		
9	Cancer 31 day pathway		
9	Cancer 31 day subsequent surgery		
9	Cancer 62 day pathway		
9	Ambulance response and		
	transportation times		
9	Ambulance handover delays		

•	A&E 12 hour trolley waits	
	Choose & Book Utilisation	

#### Recommendation

Note the level of compliance with the operating targets and support the actions being taken to improve performance where necessary

## Bowel Cancer Screening

Current period YTD

Green Green

The bowel cancer screening data has a 6 month time lag. The latest data available is up until November 2012 and Wokingham CCG achieved a 65.9% uptake rate in the 12 months up until November. This is a marked improvement on the June position which was used to set the Quality Premium baseline of 60.3%. This means that unless there is any deterioration in performance, the quality premium standard of 62% is expected to be achieved for the year.

### MRSA

YTD
Red

Wokingham CCG had one community based MRSA bacteraemia case reported during April 2013 and one acute case. The acute case was a Wokingham patient who acquired MRSA at the Chelsea and Westminster Hospital NHS Foundation Trust. As a result of these two cases the annual limit of zero has been breached and this also means that the CCG is no longer eligible to qualify for 12.5% of the quality premium.

#### Cdiff

YTD	
Red	

Wokingham CCG had 5 Clostridium Difficile cases reported during April 2013 against a trajectory of 4 for April and an annual limit of 42. A community Infection Control Nurse is in the process of being appointed and this individual will be responsible for reviewing Cdiff cases and also training individuals in the community, including care homes.

# Referral to Treatment (RTT) within 18 Weeks: treatment functions/specialties not achieved



Wokingham CCG achieved all RTT aggregate standards in April. The CCG did not achieve all referral to treatment targets for all individual specialities. Cardiothoracic Surgery, Ophthalmology, Neurosurgery and Plastic Surgery were not achieved for admitted pathways. All of these breaches bar Ophthalmology were due to 1 or 2 breaches so very small numbers. For Ophthalmology, 83.9% of patients on an admitted pathway were treated within 18 weeks against a target of 90%. These breaches were mainly at RBFT, although as a provider RBFT achieved the standard for Ophthalmology and therefore no action can be taken against the trust at this stage. Performance will be monitored closely to ensure there isn't an on-going issue for Wokingham CCG.

General Medicine was not achieved for non-admitted pathways and this was as a result of 3 patients being treated in total, of which 1 was a breach. There were 2 breaches for incomplete pathways and these were Ophthalmology and Cardiothoracic Surgery. The Cardiothoracic breaches were due to very small numbers being treated under this specialty. An action plan is in the process of being developed at RBFT for Ophthalmology.

#### Diagnostics % waiting 6 weeks or more

Current period	YTD	
Red	Red	

The national diagnostic wait time target is that less than 1% of people should have to wait longer than six weeks for a diagnostic test. In the month of April, 2.5% of Wokingham patients waited longer than six weeks. There were 25 breaches at RBFT and 6 at Oxford University Hospitals (OUH). The majority of the breaches related to radiology tests. OUH have an agreed action plan in place with Oxfordshire CCG for recovery by the end of June. A notice of fine has been served against RBFT and this will be reconciled at the end of the financial year.

# • % of patients who spent 4 hours or less in A&E





During May, 97.2% of patients spent 4 hours or less in Accident and Emergency (A&E) at RBFT and the target for this indicator stands at 95%. The YTD position for RBFT is 93.4% due to significant underperformance in April. Performance is expected to continue to perform above 95% for June; however the quarter position is likely to remain below the 95% target.

GWH achieved 94.3% during May and the YTD position is 92.3%. HHFT achieved 93.9% during May and the YTD position is 91.1%. NHS England has requested extensive action plans from all Trusts to ensure actions are put in place to improve performance in A&E departments.

## Cancer 31 day pathway from diagnosis to treatment

During April 92.7% of Wokingham CCG cancer patients received treatment within 31 days of diagnosis against a target of 96%. Unfortunately it is not possible to see a breakdown of these breaches by provider so it is not possible to know exactly where any breaches occurred. It is known however that RBFT did achieve this standard and as a result this breach is either as a result of very small numbers skewing the figures or as a result of a different provider.

#### Cancer 31 day pathway from diagnosis to treatment for Subsequent Surgery



Current period

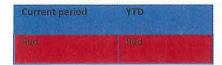
During April 83.3% of Wokingham CCG cancer patients received a subsequent treatment for cancer within 31 days from diagnosis against a target of 94%. This breach was as a result of underperformance at RBFT and a notice of a yearend fine is going to be served against the Trust for this breach. Action plans to ensure improvement will also be requested from RBFT.

### Cancer 62 day pathway

YTD	
Red	

During April 82.6% of Wokingham CCG cancer patients received their treatment within 62 days of their referral. Unfortunately it is not possible to see a breakdown of these breaches by provider so it is not possible to know exactly where any breaches occurred. It is known however that RBFT did achieve this standard and as a result this breach is either as a result of very small numbers skewing the figures or as a result of a different provider.

#### Ambulance response and transportation times



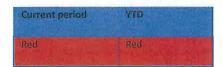
During April, the 8 minute ambulance response time standard was not achieved for Wokingham CCG. The performance for the Red 1 category was 71.4% and the Red 2 category performance was 72.9%, against a target of 75% for both categories. The contract with the ambulance service states that all standards are to be achieved on a Thames Valley basis rather than an individual CCG. When performance is reviewed across the 4 CCGs in Berkshire West, the target was achieved and therefore it is thought to be due to small numbers of patients being seen meaning that a small number of breaches can skew the % performance. If performance does not improve, SCAS will be approached to determine if there is some specific reason why ambulances within Wokingham are not achieving the 8 minute standard.

# Ambulance handover delays

Current po	eriod	YTD	
Red		Red	

During April, 20 ambulances were delayed longer than 30 minutes for handover to the A&E department at RBFT. None of these were delayed longer than 60 minutes. Each of the 30 minute breaches resulted in a fine of £200. As part of the action plan that has been put in place for urgent care, as improvements are seen in A&E 4 hour performance, improvements should also be seen with ambulance handover delays.

# A&E 12 hour trolley waits



During April there was 1 patient who waited longer than 12 hours in A&E from decision to admit at GWH. Such breaches are subject to significant penalties within the contract. The breach was a Devon CCG patient. There were also 2 breaches at HHFT and the Trust has been asked to inform the CCG which CCG the patients sit within. There were no breaches at RBFT.

# Choose & Book Utilisation

Current period	OTY

During April and May 77% of outpatient appointments were booked using Choose & Book (C&B) across the 4 CCGs in Berkshire West. This is an improvement on 2012/13 where performance was 74%; however the 80% target is yet to be achieved. The C&B leads within the CCGs have been asked to ensure each practice has a lead to monitor C&B usage. A new process has also been designed for all practices to follow to ensure that the system is being used appropriately so that all referrals are counted appropriately.

#### Glossary

CCG	Clincial Commissioning Group	
CQN	Contract Query Notice	
RTT	Referral to Treatment	
CQUIN	Commissioning for Quality and Innovation	
CQRG	Clinical Quality Review Group	
EPR	Electronic Patient Record	
CVD	Cardiovascular Disease	
NEL	Non-Elective	
HCAI	Healthcare Acquired Infection	
CDiff	Clostridium Difficile	
MRSA	Methicillin-Resistant Staphylococcus Aureus	
A&E	Accident & Emergency	
2ww	Two week wait	
MSA	Mixed Sex Accommodation	
CPA	Care Programme Approach	
ООН	Out of Hours	
IAPT	Improved Access to Psychological Therapies	
COPD	Chronic Obstructive Pulmonary Disease	
VTE	Venous Thrombus Embolism	
TIA	Transient Ischemic Attack	
C&B or CaB	Choose & Book	
OP	Outpatient	
RBFT	Royal Berkshire Foundation Trust	
GWH	Great Western Hospital (Swindon)	
HHFT	Hampshire Hospitals Foundation Trust	