

<b>TITLE</b>	<b>Wokingham Clinical Commissioning Group Performance Outcomes Report October 2013</b>
<b>FOR CONSIDERATION BY</b>	Health Overview and Scrutiny Committee on 25 November 2013
<b>WARD</b>	None Specific

## REPORT OF THE WOKINGHAM BOARD 5<sup>th</sup> NOVEMBER 2013

Title	October 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) <i>All NHS organisations are required by law to take account of the NHS Constitution in performing their NHS functions</i>	All
Consultation, public engagement & partnership working implications/impact	N/A

### Executive Summary

<b>Under performance:</b>	<b>High performance &amp; improvement to green:</b>
<ul style="list-style-type: none"> <li>• RTT treatment functions/specialties not achieved</li> <li>• % of patients who spent 4 hours or less in A&amp;E</li> <li>• Cancer Wait Times</li> <li>• Ambulance response times</li> <li>• Ambulance handover and crew clear delays</li> <li>• C&amp;B Utilisation</li> </ul>	<ul style="list-style-type: none"> <li>• MRSA</li> <li>• Cdif</li> <li>• Diagnostics % waiting 6 weeks or more</li> </ul>

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NHS England undertakes quarterly checkpoints for assurance purposes and as part of this process produce a balanced scorecard of each CCG's performance. These balanced scorecards have now been published by NHS England for quarter 1 and below is a table showing the scorecard for Wokingham CCG. The first domain which was rated amber-green relates to the self-certification return that has previously been reported to the Governing Body. This represents a number of questions for the local providers; for example has the provider had any MRSA cases or Never Events. The second domain was rated amber-red and relates to CCG performance against the NHS Constitution indicators. The indicator that was rated red for quarter one was the 62 day cancer standard from a screening service. The third domain was rated red as the CCG has had 2 MRSA cases reported and is also not on trajectory for the number of Clostridium Difficile cases.

During the checkpoint meeting, NHS England determined with the CCG whether any support or further action was required for the amber and red domains and the individual red indicators. NHS England confirmed that they were assured with the actions that were in place with Wokingham CCG and as a result no support or further actions are required.

Domain Titles	Domain RAG Status	Domain RAG Summary
Are local people getting good quality care?	AMBER-GREEN	The number of indicators triggering a <span style="color: green;">AMBER-GREEN</span> 1
Are patient rights under the NHS Constitution being promoted?	AMBER-RED	The number of indicators triggering a <span style="color: orange;">AMBER-RED</span> 1 RED
Are health outcomes improving for local people?	RED	The number of indicators triggering a <span style="color: red;">RED</span> 2
Are CCGs delivering services within their financial plans?	GREEN	All indicators met 6
Are conditions of CCG authorisation being addressed and removed (where relevant)?	No RAG	Total number of outstanding conditions 0

**Recommendation**

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

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- MRSA

Current period	YTD
Green	Red

Wokingham CCG had no cases of MRSA bacteraemia reported during August 2013. This means there have been 3 cases year to date against a zero tolerance objective.

- Cdiff

Current period	YTD
Green	Red

Wokingham CCG had 7 Clostridium Difficile cases reported during August 2013 against a trajectory of 7 for the month. This means the YTD performance is 23 against a trajectory of 20. 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. In addition to this, RBFT have commissioned an external review of all acute and community cases by an independent microbiologist.

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

Current period	YTD
Red	Red

Wokingham CCG achieved all RTT aggregate standards in August. There were 3 breaches at speciality level across the 3 RTT areas. There was one admitted breach in General Surgery, one non-admitted breach in Thoracic Medicine and one incomplete breach in Ophthalmology. All of the breaches except the Ophthalmology incomplete breach were due to small numbers and all of these areas were achieved by RBFT. The Ophthalmology incomplete breach was due to breaches at RBFT where there is an action plan in place with recovery due in September.

During September, the Trust has highlighted to the CCG that the admitted performance in Ophthalmology will deteriorate from September onwards due to a backlog of breaches that need to be cleared. The CCG are arranging a meeting with RBFT to understand this further and to discuss mitigating actions going forward.

- Diagnostics % waiting 6 weeks or more

Current period	YTD
Green	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 August, 0.6% of Wokingham patients waited longer than six weeks and therefore the target was achieved for the first month this year.

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

Current period	YTD
Red	Red

During September, 92.6% of patients spent 4 hours or less in Accident and Emergency (A&E) at RBFT and the target for this indicator is 95%. This meant that the quarter two

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performance as a whole was only just above target at 95.0%. The YTD position remains off target at 94.8% due to the underperformance in quarter one.

- Cancer Wait Times

Current period	YTD
Red	Red

Three of the 9 cancer wait time standards were not achieved for Wokingham CCG in August. These were the two week wait standard from GP referral, the 31 day standard for subsequent drug treatment and the 62 day standard. All of these standards would have been achieved for the CCG if there was 1 less breach and they are being achieved on a YTD basis. RBFT and all other local providers achieved all cancer standards during August. The 62 day standard from a referral from a screening service continues to be below target on a YTD basis due to 1 breach that occurred in May and all other standards are being achieved on a YTD basis.

- Ambulance response times

Current period	YTD
Red	Red

During August, 2 of the 3 ambulance response time standards were below target. The YTD position is that both of the 8 minute response time standards are also below target. The federated position continues to be above target for all standards. The variation in performance CCG to CCG was raised at the last quality meeting with SCAS and early indications are that performance has improved in September following increased resource in those areas where response times were the longest.

- Ambulance handover and crew clear delays

Current period	YTD
Red	Red

During August, 14 ambulances were delayed longer than 30 minutes and 0 ambulances over an hour for handover to the A&E department at RBFT. Each of the breaches resulted in a fine to RBFT.

There were also some crew clear delays at RBFT. This is when the ambulance crews take longer than 30 minutes or an hour to be ready to take another call from the moment the previous patient is handed over to the A&E department. In August, there were 49 delays over 30 minutes and 3 over an hour. This is a reduction on July when there were 62 delays over 30 minutes and 4 over an hour. These delays also result in a fine to SCAS and this will be picked up via the contracting process.

- Trolley waits over 12 hours in A&E

Current period	YTD
Red	Red

During September there were 6 trolley waits over 12 hours at RBFT. This is the wait from decision to admit to admission rather than from the arrival time in A&E. These trolley waits were spread over 3 days from 16<sup>th</sup> – 18<sup>th</sup> September and were as a result of increased pressures in the A&E department and hospital as a whole. In the same week, RBFT declared black status which resulted in a number of system resilience calls with the on-call Director to support the whole health system.

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- Choose & Book Utilisation

Current period	YTD
Red	Red

During August, 74.6% of patients across Berkshire West were booked via Choose & Book. The national reporting for this data is only measured at old PCT level rather than CCG. Therefore, the CSU has been requested to calculate a local proxy measure that can be used to determine which GP practices are not using Choose & Book.

Glossary

CCG	Clinical 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
OOH	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