ITEM NO: 67.00

Wokingham Clinical Commissioning Group Performance Outcomes Report February 2014 TITLE

Health Overview and Scrutiny Committee on 24 March 2014 FOR CONSIDERATION BY

None Specific WARD

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REPORT OF THE WOKINGHAM CCG GOVERNING BODY 4 MARCH 2014

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Title	February 2014 Performance Outcomes Report
Sponsoring Director	Janet Meek (CFO)
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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
 Number of patients recorded as a carer Cdiff RTT treatment functions/specialties not achieved Diagnostics % waiting 6 weeks or more % of patients who spent 4 hours or less in A&E Cancer Wait Times Ambulance response times Ambulance handover delays Number of Trolley Waits in A&E >12 hours Choose & Book Utilisation 	 Diabetes 9 care processes Bowel Cancer Screening MRSA Mental Health CPA follow up in 7 days

Recommendation

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

Diabetes 9 care processes

Current Period

YTD

In the 12 months up until the end of December 2013, 42.8% of Wokingham diabetes patients received all of the 9 care processes against a target for 13/14 of 35%.

Number of patients recorded as a carer

Current Period

YTD

Red

Red

There are currently 1530 patients recorded as carers on GP practice systems in Wokingham CCG against a target of 1557. Therefore only 27 more patients need to be coded as a carer in 2013/14 for this standard to be achieved by the end of the year. This is therefore expected to be achieved.

Bowel Cancer Sercening

Current Period

YTD

In the 12 months up to July 2013, 65.5% of eligible patients responded to bowel screening invitations against a target of 62%.

MRSA

Current Period

YTD

Red

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

Cdiff

Current Period

YTD

Red

Red

Wokingham CCG had three Clostridium Difficile cases reported during December 2013 against a trajectory of 2 meaning 36 cases have been reported year to date against a trajectory of 35. The CCG Council of Practices has reviewed processes for root cause analyses of Cdiff cases and these RCAs are now being completed for each new case of Cdiff reported.

Referral to Treatment (RTT) within 18 Weeks. Period YTD Treatment Eunctions/Specialties Not Achieved Red Red

Wokingham CCG achieved all RTT aggregate standards in December. There were 4 breaches at speciality level across the 3 RTT areas. There was one breach for admitted pathways in Ophthalmology and 3 incomplete breaches in Ophthalmology, Plastic Surgery and Neurosurgery. Of these breaches, the main concerns are the Ophthalmology speciality breaches and contractual action has been taken for these breaches and an action plan is in place to clear the backlog of patients waiting by the end of January meaning performance would in February. RBFT are currently not on track to achieve this and recovery is now expected in March. The next level of contractual action is now being considered as a result of this non-achievement of recovery milestones.

	Current Period	YTD
THROUGHS A WARRING WERS OF HOTE	Red	Red

During December, 4.5% of Wokingham CCG patients waited longer than 6 weeks for diagnostic tests against a target of 1%. This drop in performance is as a result of building works to install a new MRI scanner at RBFT. The CCG has served the appropriate contractual fine for this breach and is meeting the Trust to understand why this was not escalated sooner and to agree a remedial action plan with clear timescales.

% of Patients Who Spent 4 Hours or Less in A&E Red Red

During January, 89.2% of patients spent 4 hours or less in Accident and Emergency at RBFT and the target for this indicator is 95%. This was a deterioration on December when it was 90.3%. The Quarter 4 to date position up until 9th February 2014 is 88.5%, therefore not on track to be achieved. Regular system wide meetings and teleconferences are taking place to ensure appropriate action is being taken to improve patient flow through the hospital. The Urgent Care Programme Board has set up a subgroup that focuses on the operational performance and day ti day actions to improve performance. An A&E system wide recovery plan has been submitted to NHS England and Monitor to support improvements in performance.

Current Period YTD Cancer Wait Times Red Green

One of the 9 cancer wait time standards was not achieved for Wokingham CCG in December. This was the 62 day standard from a GP referral. RBFT achieved this standard and therefore no contractual action can be taken. On a YTD basis, all standards are being achieved.

Ambulance response filmes Current Period YTD Red Red

Two of the three ambulance response time indicators were not achieved for Wokingham CCG in December and these were the 8 minute response time targets for Red 1 and Red 2 calls. The Red 1 standard has deteriorated since November although the Red 2 standard has shown improvement. The SCAS contract states that performance only needs to be achieved on a Thames Valley wide basis and as a result no contractual action can be taken although it has been raised at contractual meetings as a concern.

Mental Health CPA follow up in 7 days	Current Period	YTD
	Court	G Gen
During Q3, 100.0% of mental health patients on a care programup within 7 days of discharge against a target of 95%.	nme approach	were followed

	Current	VTD
Ambulance bandover delays	Period	YID
	Red	Red

During December, 54 ambulances were delayed longer than 30 minutes and one ambulance over an hour for handover to the A&E department at RBFT. Each of the breaches resulted in a fine to RBFT. This deterioration in performance was as a result of increased pressure in A&E at RBFT during December which also impacted on the A&E 4 hour performance above. The recovery plan to address the 4 hour performance in A&E will also result in a reduction in the number of ambulance delays at the hospital.

	Current Period	YTD
Number of Broney Wars in Acce > 12 rours	Red	Red

During December, 1 patient waited longer than 12 hours in A&E from a decision to admit to be admitted. This occurred on a day when RBFT were on black status. A root cause analysis of this patient delay is still awaited and chased regularly from the Trust. The appropriate fine of £1000 has been served against RBFT for this delay.

G b			Current Period	YTD
G1100	SE & EVOUR D		Red	g Red

A local proxy measure for Choose & Book utilisation is now in place that measures performance at CCG level. This shows that in December, 70.7% of Wokingham CCG patients were booked via Choose & Book against an 80% target. This drop in performance is consistent with previous years for December due to the holiday season. Early indicative data for January suggests performance has improved.

Glossary

CCG	Clincial Commissioning Group
CON	Contract Query Notice
RTT	Referral to Treatment
COUIN	Commissioning for Quality and Innevation
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
JAPT	Improved Access to Psychological Therapies
GOPD	Chronic Obstructive Pulmonary Disease
VTE	Venous Thrombus Embolism
TA	Fransient schemic Attack
C&B or CaB	Choose & Book
OP	- Outpatient
RBFT	Royal Berkshire Foundation Trust
GWH	Great Western Hospital (Swindon)
HHFT	Hampshire Hospitals Foundation Trust