

Report of Wokingham CCG Governing Body – 3 November 2015

Title	M5 2015-16 Performance Outcomes Report
Sponsoring Director	Debbie Daly, Nurse Director
Author(s)	Debbie New, Head of Performance
Purpose	To inform the Governing Body 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

Under performance:	High performance & improvement to green:
<ul style="list-style-type: none"> • Referral to treatment 18 and 52 week weeks • Cancer wait times • Ambulance response times • Ambulance handover and crew clear delays • 111 Call Answer Time • Antibiotic Prescribing • Mixed Sex Accommodation • Cdifff 	<ul style="list-style-type: none"> • Diagnostics % waiting 6 weeks or more • % of patients who spent 4 hours or less in A&E • MRSA

Recommendation

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

Elective Care

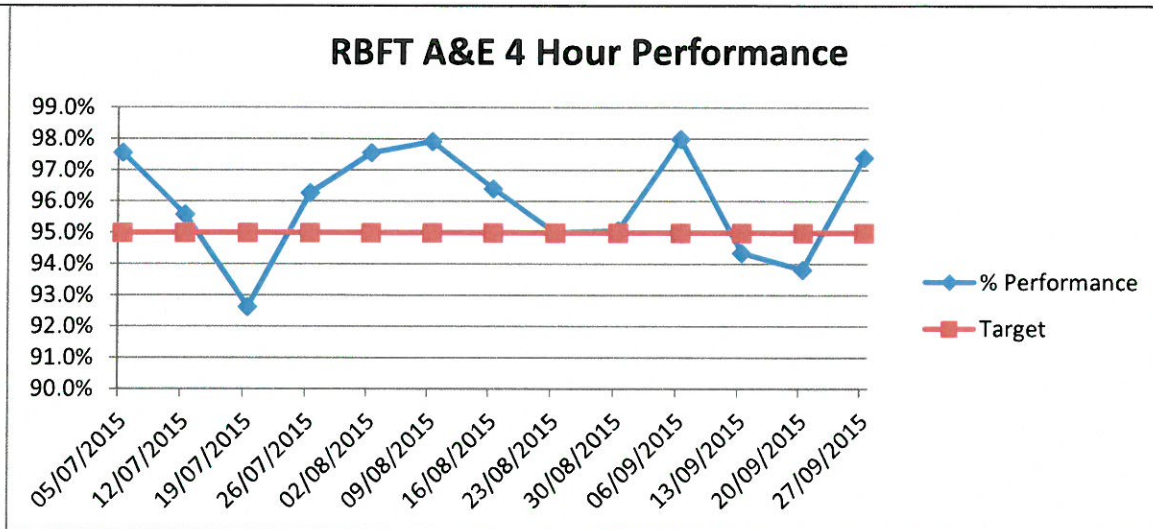
NHS Constitution and Quality Premium Pre-requisite	Referral to Treatment (RTT) within 18 and 52 Weeks	Current Period	YTD
		Red	Red
<p>Wokingham CCG did not achieve the admitted RTT standard in August. The admitted standard was 87.7% against a target of 90%. This was due to continued under performance at RBFT against the RTT standards, although performance is improving at the Trust month on month. The recovery trajectory was due to recover in August once the backlog of patients waiting was cleared but this was not achieved. The Trust has submitted a draft recovery plan to the CCG which is currently being refined following comments and questions from the CCG. The admitted RTT standard has now been removed from the national requirements to ensure the focus is on incomplete pathways where patients are still waiting. Therefore the focus of the recovery plan with RBFT is also focusing on backlog clearance to ensure the number of patients waiting beyond 18 weeks reduces.</p> <p>There continues to also be a number of 52 week wait breaches at RBFT and the Trust reported that 11 patients were still waiting at the end of August who had waited longer than 52 weeks. The CCG reviews the patients one by one with RBFT on a regular basis and there is a plan for each patient with the expectation that all 52 week waits will be cleared by the end of November.</p>			

NHS Constitution	Cancer Wait Times	Current Period	YTD
		Red	Red
<p>Although the CCG is held to account on quarterly performance of cancer waiting times and therefore the performance figures have not been updated in the detailed performance report, it is important that the Governing Body receives an update on the latest cancer wait times position at RBFT. A remedial action plan was agreed in August which included a monthly trajectory for the 2ww standard from GP referral, the 2ww standard for symptomatic breast referrals and the 62 day standard from GP referral. Performance has now been reviewed against these trajectories for August and the 2ww for symptomatic breast and the 62 day from GP referrals standards were on track with the trajectory. The 2ww standard from GP referral was not on track with the trajectory with 62.6% of patients having an appointment in 2 weeks against a trajectory of 85.7%. This under performance primarily relates to issues within the Dermatology pathway as RBFT has had Consultant vacancies that have not been filled due to a national shortage. There was a locum Consultant who was in post but left at short notice during August. The CCG is therefore working very closely with RBFT to determine what can be done in the short term to increase capacity for dermatology and there is also a more strategic meeting planned to look at a longer term solution.</p>			

NHS Constitution	Diagnostics % waiting 6 weeks or more	Current Period	YTD
		Green	Green
<p>At the end of August, 0.97% of the Wokingham CCG patients waiting for a diagnostic test had waited longer than 6 weeks against a target of 1%. YTD performance is 0.7%.</p>			

Urgent Care

NHS Constitution and Quality Premium Pre-requisite	% of Patients Who Spent 4 Hours or Less in A&E	Current Period	YTD
		Green	Green
<p>During August, 96.1% of patients spent 4 hours or less in Accident and Emergency at RBFT and the target for this indicator is 95%. YTD performance is 95.9%.</p>			



NHS Constitution and Quality Premium Pre-requisite	Ambulance response times	Current Period	YTD
		Red	Red
<p>The ambulance service contract requires the national performance standards for ambulance response times to be achieved on a Thames Valley basis annually. The 2015/16 contract also includes performance standards for each of the CCGs to improve the variation from CCG to CCG. The national standard for the Red 1 and Red 2 8 minute response time is 75% and the Wokingham CCG target is 73% for Red 1 calls and 70% for Red 2.</p> <p>During August neither the Thames Valley wide nor CCG level standards were achieved for Red 1, Red 2 or Red 19 calls. Performance in August continued to be affected by the IT system upgrade that took place in July. SCAS are undertaking a review to understand the gap in delivery as a result of the IT system versus resources on the road. The Thames Valley Commissioners met on 1st October to review the latest performance and to agree what action Commissioners would take to address the performance. Following this, a letter was sent to SCAS highlighting the CCG concerns and within this there was a contractual performance notice and financial withholding notice. A further meeting is now being arranged with all commissioners and SCAS so that SCAS can present their plans for recovery and provide assurance to Commissioners.</p>			

Supporting Measure for NHS Constitution	Ambulance Handover and Crew Clear Delays	Current Period	YTD
		Red	Red
<p>During August, 12 ambulances were delayed longer than 30 minutes and 1 ambulance over an hour for handover to the A&E department at RBFT. RBFT continue to work with SCAS to ensure the number of handover delays are minimised wherever possible. The CCG continue to serve the appropriate contractual fines of £1000 per delay over 60 minutes and £200 per delay over 30 minutes.</p> <p>During August, SCAS had 54 crew clear delays at RBFT over 30 minutes and 4 over an hour which was a deterioration from previous months. These breaches result in a fine to SCAS for the delay and these are being addressed via the contractual meetings with the Trust. SCAS has reported that these delays are due to extenuating circumstances, for example a trauma event where the crew spend more time with the hospital after handover to support the patient care and also the ambulance may take longer to complete the deep clean due to extenuating circumstances.</p>			

National Standard	111 Call Answer Times	Current Period	YTD
		Red	Green
<p>During September, 94.9% of 111 calls were answered within 60 seconds across Berkshire against a target of 95%. The YTD performance remains above standard at 96.4%. During September, SCAS has reported an altered demand profile in the evenings and early mornings resulting in staff numbers not always matching demand. SCAS are therefore re-profiling their forecasts and will amend staffing levels accordingly.</p>			

Other

Quality Premium	Antibiotic Prescribing	Current Period	YTD
		Red	Red
<p>The CCG is required to reduce the overall levels of antibiotics prescribed in primary care (including community services) and to also ensure that less than 11.3% of all antibiotics prescribed in primary care are broad spectrum antibiotics (aka 4 C's). The CCG has made an improvement in August on the 12 month rolling position for overall antibiotics prescribed and is currently below the target. The medicines optimisation team will now continue to work with practices to ensure this can be sustained going forward. There has been an increase in broad spectrum antibiotics prescribed during August to 11.9% against the 11.3% target. The medicines optimisation team will work with practices, and Westcall (who are included in Wokingham CCG figures), to support improvement.</p>			

NHS Constitution	Mixed Sex Accommodation Breaches	Current Period	YTD
		Red	Red
<p>Wokingham CCG had 12 mixed sex accommodation breaches at RBFT during August. This was due to RBFT reporting a number of breaches on the acute medical unit. These breaches occurred when RBFT had higher numbers of admissions late into the evening and</p>			

the department has identified this as a challenge relating to whether to move a patient late in the evening to avoid a mixed sex breach or not. The Trust has now implemented a new process during September to avoid this happening in the future whereby a better prediction of admissions is made in the evening at which point changes may take place to avoid moving patients in the night once settled. Each breach results in a £250 fine to RBFT.

Outcome Ambition Supporting Measure	MRSA	Current Period	YTD
		Green	Green
Wokingham CCG had zero MRSA bacteraemia cases reported during August 2015.			

Outcome Ambition Supporting Measure	Cdiff	Current Period	YTD
		Red	Green
Wokingham CCG had six Clostridium Difficile cases reported during August against a monthly trajectory of 4 meaning there have been 10 cases YTD against a trajectory of 14. The Community Infection Control Nurse is in the process of completing root cause analyses of the cases with the GP practices and will report findings of these to the CCG Quality Committee.			

Glossary

CCG	Clincial Commissioning Group
CQN	Contract Query Notice
RTT	Referral to Treatment
Admitted RTT Pathways	Patients whose RTT clock has stopped as a result of a treatment provided on admission, i.e. day case or elective procedure
Non-Admitted RTT Pathways	Patients whose RTT clock has stopped without the need for an admission. This could be treatment in outpatients or a decision in outpatients not to treat the patient
Incomplete RTT Pathways	Patients whose RTT clock has not stopped yet so the patients are still waiting for treatment or a decision not to treat
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