

Governing Body – Part I

Report Details	
Meeting Date	4 July 2017
Report Title	Performance Summary – Month 12
Presented By/Title	David Bonson, Chief Operating Officer
Prepared By/Title	Kate Newton, Performance and Quality Manager
Report Requirements	Receive

Improvement and Assessment Framework Objectives	
• Better Health	Yes
• Better Care	Yes
• Sustainability	Yes
• Well-led	Yes

CCG Corporate Objectives	
• Through better commissioning, improve local health outcomes by addressing poor outcomes and inequalities	Yes
• To work collaboratively to deliver safe, high quality health and care services	Yes
• To ensure financial balance and improve efficiency and productivity	Not applicable
• To deliver a step change in the NHS preventing ill health and supporting people to live healthier lives	Yes
• To maintain and improve performance against core standards and statutory requirements	Yes
• To commission improved and effective out of hospital care	Yes
• To support research, innovation and growth	Not applicable

Committee Discussion	
Committee/Governing Body and Date	Executives and Deputies Team - Date
	Clinical Leadership Team – Date
	Quality and Engagement Committee – Date
	Finance and Performance Committee – 2nd May 2017
	Audit Committee – Date
	Primary Care Commissioning Committee – Date
	Recommend to CCG Governing Body – Part I – 4 July 2017

Internal Assurance Process (indicate if not applicable)	
Clinical Lead	N/A
Senior Lead Manager	Kate Newton
Finance Manager	N/A
Quality Impact Assessment completed	N/A
Equality Impact and Risk Assessment completed	N/A
Patient and Public Engagement completed	N/A
Financial Implications	Discussed at the meeting
Risk Identified	Discussed at the meeting
Report Authorised by Executive Lead	Janet Barnsley

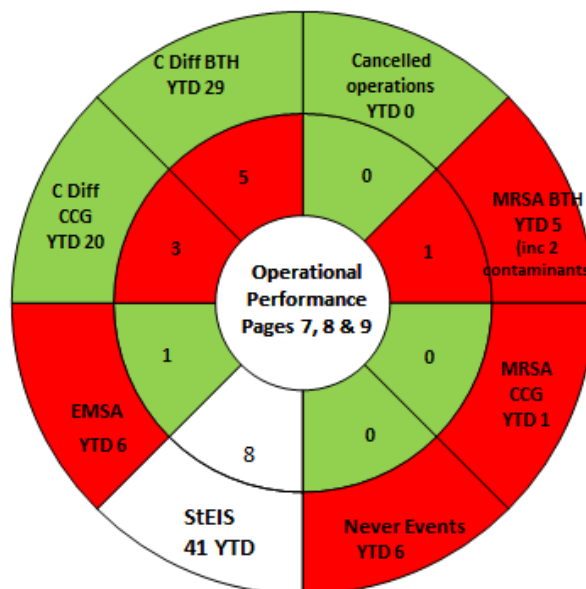
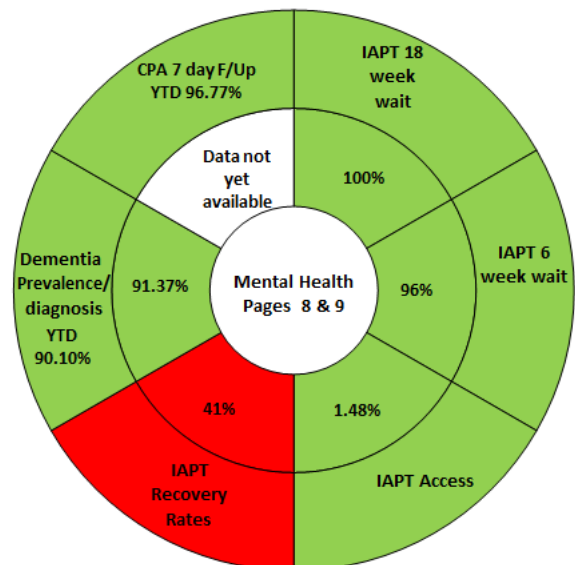
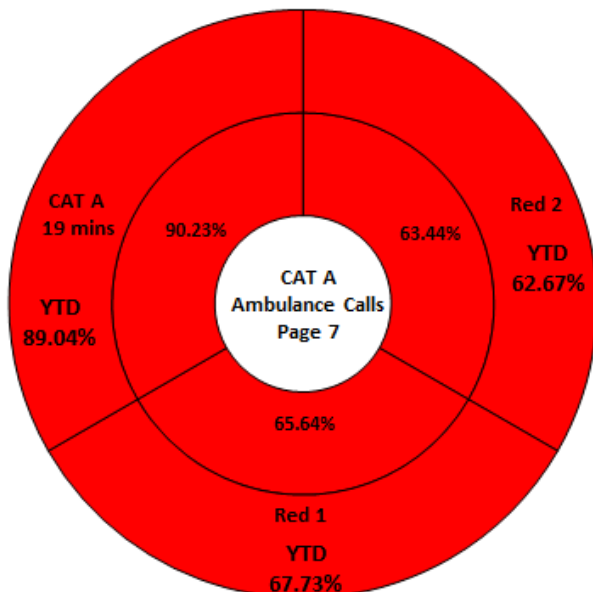
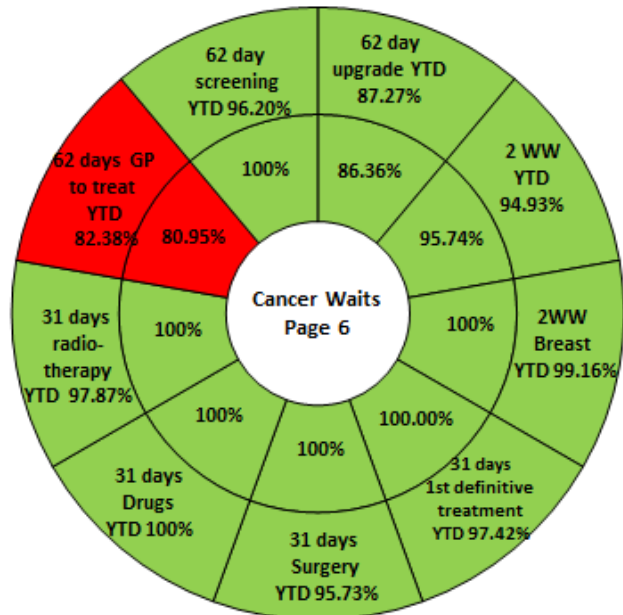
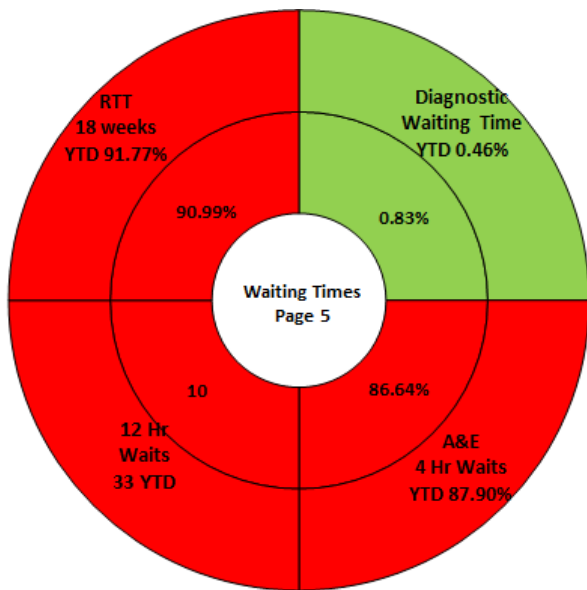
Blackpool Clinical Commissioning Group

Performance Summary for the Governing Body

Month 12: March 2017

Key	↑	Improving and within target	↑	Improving and below target	↑	Upward trend / activity (no target)
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Executive Summary for March 2017



Key

Outer ring: Year to Date performance unless otherwise stated

Inner ring: In month performance

Introduction











This report is to provide the Governing Body with assurance in relation to the indicators outlined in NHS Guidance for Commissioners under the policy document “Supplementary information for commissioner planning 2016/17”.










The measures reported in the guidance include those in the CCG Assurance Process for 2016/17 and a number of additional indicators. This report is currently subject to review; all indicators reported previously as “Awaiting data sources” will be investigated on a monthly basis and added to the report once data becomes available. All new indicators associated with planning for 2017/18 will also be added to this report as the data sources become available. This report has been updated this month with the addition of the performance RAG rated charts and these will also continue to be developed in line with the indicators.

Summary for March 2017

Metric	Performance	Exception
NHS Constitution Measures		
Accident & Emergency (Commissioner)		
Patient should be admitted, transferred or discharged within 4 hours of their arrival at an A&E department.	↑ 86.64% (BTH)	Finance & Performance Committee Month 12
Cat A Ambulance (Provider)		
Category A calls resulting in an emergency response arriving within 8 minutes – Red 1.	↑ 65.64%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Category A calls resulting in an emergency response arriving within 8 minutes – Red 2.	↑ 63.44%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Category A calls resulting in an ambulance arriving at the scene within 19 minutes.	↑ 90.23%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Diagnostic test waiting time (Commissioner)		
Patients waiting for a diagnostic test should have been waiting less than 6 weeks from referral.	↓ 0.83% (CCG)	Finance & Performance Committee Month 12
Cancer Waits (Commissioner)		
Percentage (%) seen within 2 weeks of referral.	↓ 95.74%	Finance & Performance Committee Month 12
Percentage (%) seen within 2 weeks of referral – breast symptoms.	↔ 100.00%	Finance & Performance Committee Month 12
Maximum 31-day wait from diagnosis to first definitive treatment for all cancers.	↑ 100.00%	Finance & Performance Committee Month 12
Maximum 31-day wait for subsequent treatment where that treatment is an anti-cancer drug regimen.	↔ 100.00%	Finance & Performance Committee Month 12











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
Metric	Performance	Exception
Maximum 31-day wait for subsequent treatment where that treatment is surgery.	 100.00%	Finance & Performance Committee Month 12
Maximum 31-day wait for subsequent treatment where the treatment is a course of radiotherapy.	 100.00%	Finance & Performance Committee Month 12
Maximum 62-day wait from urgent GP referral to first definitive treatment for cancer.	 80.95%	Finance & Performance Committee Month 12
Maximum 62-day wait from referral for an NHS screening service to first definitive treatment for all cancers.	 100.00%	Finance & Performance Committee Month 12
Maximum 62-day wait for first definitive treatment following a consultant's decision to upgrade the priority of the patient (all cancers) – no operational standard set.	 86.36%	Finance & Performance Committee Month 12
NHS Constitution Support Measure		
Mental Health (Commissioner)		
CPA 7-day followed up.	 (Q4 94.12%)	Finance & Performance Committee Month 12
RTT (Commissioner)		
Zero tolerance 52-weeks.	 0 (5 YTD)	Finance & Performance Committee Month 12
EMSA (Commissioner)		
Minimise breaches.	 0 (6 YTD)	Finance & Performance Committee Month 12
Cancelled Operations (Provider)		
All patients who have operations cancelled, on or after the day of admission (including the day of surgery), for non-clinical reasons to be offered another binding date within 28 days, or the patient's treatment to be funded at the time and hospital of the patient's choice.		Q4 (2016/17) Finance & Performance Committee Month 12
No urgent operation to be cancelled for a second time.		Finance & Performance Committee Month 12
A&E Waits (Provider)		

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Metric	Performance	Exception
No waits from decision to admit to admission over 12 hours.	↓ 10 in March	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Ambulance Handovers (Provider)		
All handovers between ambulance and A&E must take place within 15 minutes and crews should be ready to accept new calls within a further 15 minutes. Financial penalties, in both cases, for delays over 30 minutes and over 60 minutes.	↓	Quality & Engagement Committee Month 1
Activity Measures (2014/15 against 2015/16 comparison)		
Referrals (Provider)		
Written referrals from GPs for a first outpatient appointment in general and acute specialties.	↓ -11.61%	2015/16 Comparison
Other referrals for a first outpatient appointment in general and acute specialties.	↑ 12.32	2015/16 Comparison
Total referrals in general and acute specialties.	↓ -7.53%	2015/16 Comparison Referrals include: GP and Other but excludes acute
Health Care Acquired Infection (Commissioner / Provider)		
Number of clostridium difficile infections.	↔ BCCG (3)	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
	↓ BTH (5)	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
MRSA zero tolerance	↔ BCCG (0)	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
	↓ BTH (1)	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12

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Mental Health		
Dementia (Provider)		
Percentage (%) diagnosis rate.	 91.6%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Mental health access waits		
Improving Access to Psychological Therapies (IAPT)		
Access proportion.	 1.48% Target 1.25%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Recovery rate.	 42% Target 50%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
The proportion of people that wait 6 weeks or less from referral to their first IAPT treatment appointment.	 96%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment.	 100%	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Early Intervention in Psychosis (Commissioner)		
More than 50% of people experiencing a first episode of psychosis will be treated with a NICE approved care package within two weeks of referral.	 62.5% (Target 50%)	Quality & Engagement Committee Month 1 & Finance & Performance Committee Month 12
Better Care Fund (BCF)		
Transfers		
Delayed transfers of care - Patients	 - NHS  - Social Care  - Both  - Total 38	March 2017

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Metric	Performance	Exception
Reablement		
Effectiveness of reablement.	↓ 78.1%	HSCIC Annual Report published November 2016 next version due November 2017 Indicator 3.6.i
Outcome Measures		
Composite indicator comprised of: GP services, GP Out of Hours.	↑	Publication date July 2017
Patient experience of inpatient care (FFT)	↓ 96.26% would recommend (25.1% response rate, BTH, Mar 17)	Quality & Engagement Committee Month 12
Mortality HSMR/SHMI	↓	HSMR 112 (Dec 16 Rolling 12 months) SHMI 123 Nov16 Rolling 12 months)
Health related quality of life for people with long-term conditions.	↑	65.9% of people feel they receive enough support from local services or organisations to manage their conditions. The national average is 64.3% (2015/16)
Never Events	↑ ↔	6 BTH YTD (at M12) 0 Spire YTD (at M12)
Strategic Executive Information System (StEIS)	↓	3 reported by BTH in Month 12 (1 requested to be stepped down to non-Trust incident)
Primary Care		
Patient satisfaction		
Satisfaction with the quality of consultation at the GP practice.	88.54%	GP Patient Survey Published July 2016
Satisfaction with the overall care received at the surgery.	86.3%	GP Patient Survey Published July 2016
Satisfaction with accessing primary care.	76%	GP Patient Survey Published July 2016
Friends & Family Test		
Friends & Family Test Community	↑ Month 12	99% would recommend (BTH)
Friends & Family Test Mental Health	↓ Month 12	89% would recommend (BTH)
	↑ Month 12	90% would recommend (LCFT)

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