

QUALITY & PERFORMANCE REPORT

NHS HULL CCG BOARD

JANUARY 2018

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Executive Summary

Financial Summary

A number of variances are now presenting both under and overspends across different areas of the budget. Through the utilisation of identified contingency, all financial performance targets for 2017/18 are forecast to be achieved.

Performance and Contracting

A&E 4-hour waiting times deteriorated in November and local data for December and early January has seen continued challenges for this target.

RTT performance has deteriorated over recent months and is below the local improvement trajectory. Joint working by commissioners, providers and primary care on demand management continues to focus on implementing effective referral management procedures, alternative pathways and cost reduction which will ultimately result in decreases in elective referrals and overall waiting size. Alongside this there is significant work ongoing to improve the productivity of elective treatment.

62-day cancer waiting times continue to underperform. Some improvement was seen in October and has been largely maintained in November but remains below the local improvement trajectory and national standard. This underperformance is of significant concern and an area of focus for the local Cancer Alliance.

Performance against the 6-week waiting times target for diagnostic tests has remains an area of concern with endoscopy being an area of significant pressure in addition to CT imaging. Recovery for CT imaging is being mitigated through outsourcing.

Quality

Staffing recruitment remains a challenge for all Providers for nursing and clinical staff. Recruitment planning remains a priority focus.

A Quality Improvement Plan has been developed to include Hull and East Riding CCGs and all providers with the aim to bring key individuals together across the wider-community to work in collaboration. The Plan comprises 8 work streams:

- Reduce Out of Hospital acquired Pressure Ulcers
- Nutrition and Hydration
- Reduction in Gram-negative blood stream infections
- Dementia Care in the Community and Primary Care
- Transition Programme from the Children to Adult Care
- Medicines Optimisation
- People that attend Secondary Care frequently
- Review and development of Pathways between Mental Health and Substance Misuse Services across Hull and East Riding.

Financial Position

Achievement of Financial Duties / Plans

Based on information available up to the 31st December 2017. Achievement against the financial performance targets for 2017/18 are as follows:

| | | |
|------------------------------------|---|----------------------------|
| | Not exceed Revenue Resource Limit | Performanc Green |
| | Running Costs | Green |
| <u>Other relevant duties/plans</u> | | |
| | Not exceed Cash Limit | Green |
| | Variance to planned | Green |
| | Underlying Recurrent Surplus of 1% | Green |

Financial Performance/Forecast

| | Year To Date (000's) | | | Full Year (000's) | | | Risk |
|---|----------------------|------------------|----------------|-------------------|------------------|----------------|-------|
| | Budget | Actual | Var | Budget | FOT | Var | |
| 16/17 Core Allocation | (332,792) | (332,792) | - | (453,744) | (453,744) | - | |
| Use of prior years' surplus | - | - | - | - | - | - | |
| Acute Services | 153,682 | 155,126 | (1,443) | 204,910 | 206,910 | (2,000) | Red |
| Prescribing & Primary Care Services | 71,990 | 70,076 | 1914 | 95,955 | 94,188 | 1,767 | Amber |
| Community Services | 39,606 | 39,789 | (183) | 52,973 | 53,323 | (350) | Green |
| Mental Health & LD | 32,680 | 33,400 | (720) | 43,573 | 43,973 | (400) | Green |
| Continuing Care | 17,679 | 16,294 | 1386 | 23,572 | 22,072 | 1,500 | Amber |
| Other Including contingency | 4,108 | 5,372 | (1,264) | 15,363 | 16,063 | (700) | Green |
| Running Costs | 4,298 | 3,987 | 311 | 5,732 | 5,549 | 183 | Green |
| TOTAL | 324043 | 324043 | - | 442,078 | 442078 | - | |
| Under/(over)-spend against in year | - | - | - | - | - | - | Green |
| Balance of prior year surplus | (8,749) | (8,749) | - | (11,666) | (11,666) | - | Green |

KEY:

RED = Variance of £2M or above

AMBER = Variance between £500K - £2M

GREEN = Variance less and £500K

Exception: Other including contingency

Summary Financial Position as at 31st December 2017.

The CCG is currently forecasting to achieve a balanced position against the in-year allocation. There is therefore no impact on the CCG's historic surplus of £11.666m. This is in line with the 2017/18 financial plan submitted to NHS England.

This year's running cost allocation is £6.223m and the current forecast is that expenditure will be contained within this financial envelope.

Spire Healthcare: There has been a greater than planned number of referrals into Spire Healthcare resulting in a forecast overspend of £2m. The areas of consistent overspend are orthopaedics, neurosurgery and dermatology. A working group has been established as part of the aligned incentive contract to monitor and manage the expenditure with Spire and the MSK triage pathway that started in October is expected to have a significant impact on this. Information for November 2017 shows that overall GP referrals were down by more than 40% compared to November 2016. It is not yet clear whether this is a one off occurrence or the start of a trend and it will take a number of weeks before this impacts on the charging due to waiting list time and the fact that billing information is received 2 months in arrears.

Continuing Healthcare: The CCG's expenditure in the last financial year was significantly under budget due to a decline in the number of patients being eligible for CHC. The budget for this year was reduced to reflect this. The forecast underspend of £1.5m this year reflects the full year effect of the reduction in 2016/17.

Community Based (forecast £0.35m overspend): The most significant area of overspend relates to individual / bespoke packages of care. The commissioning team are working with specialised commissioners and major trauma network to identify an improved model to care for these patients (i.e. case managers / accreditation of providers). This is expected to increase the speed of recovery and reduce the length of stay.

Prescribing (forecast underspend £1.2m): This is based on the central reports received for month 7 expenditure and assumes that approximately £0.5m of price reduction from Category M adjustments will be retained by NHS England. Across the country there have been a large volume of price concessions approved by the BSA (e.g. due to a shortage of drugs) meaning that some payments have been higher than the specified drugs tariff. It is forecast that this will cost the CCG approximately £2m and this is included in the forecast position, however it is very difficult to predict these additional costs from one month to the next meaning that the position could be volatile.

Primary Care Delegated Commissioning (forecast underspend £767k): Based on information provided by NHS England compared to the budget received as part of the primary care delegation process. This reflects the level of contingency that has not yet been committed. The CCG Finance team continue to work with NHS England to understand these budgets and ensure that the impact of the primary care incentive scheme is fully reflected.

Mental Health (forecast overspend £400k): Expenditure on the mental health issues for looked after children is forecast to be approximately half the value in 2016/17. This is being investigated to identify any specific reason for this however there are currently fewer children being funded through this budget. This area has traditionally been very volatile due to the small number of high cost patients. Out of area mental health costs also share this trait but are overspending due to a lack of capacity to meet the demand within Humber FT. This issue is being taken forward through the contract management Board and solutions are being explored.

Potential Risks: The CCG is party to two significant risk sharing arrangements. The first is with Hull City Council and relates to the Better Care Fund and the council are reporting an associated overspend on adult social care. The second arrangement is the Aligned Incentive Contract with Hull & East Yorkshire Hospitals NHS Trust and East Riding of Yorkshire CCG. This is a much larger risk share and should our partner organisations fail to achieve their control totals at the end of the year it could impact on the position of Hull CCG.

In order to manage the financial position and achieve the balance required by NHS England the CCG accessed the contingency reserve that was set aside in the financial plan as well as slippage on reserves.

Statement of Financial Position

At the end of December the CCG was showing £19.9m excess of liabilities over assets. This is expected for an NHS commissioning organisation and is in line with the previous financial year.

Revenue Resource Limit

The annual Revenue Resource Limit for the CCG was £453,774k for both 'Programme' and 'Running' costs. This has increased by £58k in December. This included £59k for the Diabetes Transformation Fund and (£1K) GP WIFI correction to previous allocation.

Working Balance Management

Cash

The closing cash for December was £981k which was above the 1.25% target of £316k. The reason for this non-achievement relates to invoices from NHS Property Services being placed on hold due to a lack of information provided to validate them against. This issue has now largely been resolved.

Better Payment Practice Code:

Target 95% payment within 30 days

a. Non NHS

The Non NHS performance for December was 99.63% on the value and 99.31% on the number of invoices, whilst the full year position is 98.28% achievement on the value and 96.06% on number.

b. NHS

The NHS performance for December was 99.77% on the value and 93.48% on the number of invoices, whilst the full year position is 99.90% achievement on the value and 97.64% on number.

Quality Premium – 2017/18

The quality premium paid to CCGs in 2018/19 – to reflect the quality of the health services commissioned by them in 2017/18 – will be based on measures that cover a combination of national and local priorities.

Gateways:

Finance - means delivery of financial plans and NHS England business rules. Failure in this area means that regardless of performance in any other area the CCG will not be awarded any of the Quality Premium funding.

Quality - NHS England reserves the right not to make any quality premium payments to a CCG in cases of serious quality failure.

Constitution - some providers will continue to have agreed bespoke trajectories, as part of the operation of the Sustainability and Transformation Fund, for delivery of four hour A&E waiting times, 62 day cancer waits and 18 week RTT.

Gateway 1: Finance

Gateway 2: Quality

Gateway 3:
Constitution:
a) A&E Waiting Times

Gateway 3:
Constitution:
b) Cancer 62 Day
Waiting Times

Gateway 3:
Constitution:
c) Referral to
Treatment Waiting
Times

| National Indicators | | | | | | |
|---|---|-----------|-------------|-----------------------|---------------------|---------------|
| Title | Indicator | Value (%) | Value (£) | Latest position | Target | Latest status |
| Early cancer diagnosis | Cancers diagnosed at stages 1 & 2 | 17% | £249,558.30 | 80.1% (Dec-15) | 85% (2016) | (Jun-18) |
| GP Access & Experience | Overall experience of making a GP appointment | 17% | £249,558.30 | 69.3% (Jan-Mar 17) | 72.3% | (Jul-18) |
| Continuing Healthcare | NHS CHC checklist decisions within 28 days | 8.5% | £124,816.12 | 96% (July-Sep 17) | 80% | |
| | Reduce the number of NHS CHC assessments which take place in an acute hospital setting | 8.5% | £124,816.12 | 0% (July-Sep 17) | <15% | |
| Mental Health | Equity of Access and outcomes in to IAPT services | 17% | £249,558.30 | | 14% increase or 32% | |
| Reducing Gram Negative Bloodstream Infections | Incidence of E coli BSI reported | 5.95% | £87,345.41 | 174 (Apr-Dec 17) | <210 | |
| | Collection and reporting of a core primary care data set for E coli | 1.7% | £24,955.83 | | Yes | |
| | Reduction in Trimethoprim : Nitrofurantoin prescribing ratio | 3.825% | £56,150.62 | 1.890 (Nov 16-Oct 17) | <2.265 | |
| | Reduction in the number of Trimethoprim items prescribed to patients aged 70 years or greater | 3.825% | £56,150.62 | 6,166 (Nov 16-Oct 17) | <6,110 | |
| | Sustained reduction of inappropriate prescribing in primary care | 1.7% | £24,955.83 | 1.187 (Nov 16-Oct 17) | <1.161 | |
| Local Indicator | | | | | | |
| Local Measures: | 0-1 year non elective admissions for respiratory tract | 7.5% | £110,099.25 | | | |
| | BAME Access: Recovery rate of people accessing IAPT | | | | | |
| | Older People's Access proportion of people accessing IAPT services aged 65+ | 7.5% | £110,099.25 | | | |

NOTE: blue status signifies data not currently available but will be updated once published.

CCG Performance Indicator Exceptions

A&E waiting time – percentage of patients spending less than 4 hours total time in the A&E department (%)

Lead: Karen Billany

Framework: A Forward View into Action Annex B

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|-----------------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| HEYHT Actual | 85.34 | 87.30 | 82.75 | 82.03 | 94.61 | 93.78 | 92.49 | 93.59 | 91.69 | 91.97 | 86.46 | 90.51 | 89.14 | 91.25 |
| STF Trajectory | 95.10 | 92.10 | 93.20 | 94.00 | 95.10 | 95.10 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| STF Status | | | | | | | | | | | | | | |
| Hull CCG Actual | 87.52 | 88.89 | 85.32 | 84.83 | 95.47 | 94.79 | 93.75 | 94.70 | 93.21 | 93.51 | 89.03 | 92.46 | 91.29 | 92.85 |
| National Target | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| Status | | | | | | | | | | | | | | |

A&E waiting times have deteriorated to 88.3% in November with 1,283 breaches and this trend has continued with performance remaining challenged through December and early January. The trust did not deliver the STF trajectory and the CCG continues to work closely with the provider including undertaking face to face meetings or teleconferences both in the working week and out of hours period to understand operational issues affecting patient flow and coordinate wider system responses. There are a number of reasons reported for this, predominantly patients waiting to be transferred to a bed on a ward, staffing issues, bed closures due to gastro-enteritis and the availability of senior personnel to review cases at point of entry into A&E.

Referral to Treatment pathways: incomplete (%)

Lead: Karen Billany

Framework: A Forward View into Action Annex B

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|-----------------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| HEYHT Actual | 86.32 | 85.02 | 85.15 | 84.55 | 84.62 | 84.53 | 85.06 | 85.15 | 85.53 | 85.91 | 83.63 | 83.72 | 83.37 | 84.80 |
| STF Trajectory | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 84.54 | 84.81 | 85.13 | 85.51 | 85.94 | 86.46 | 87.06 | 87.71 | 86.46 |
| STF Status | | | | | | | | | | | | | | |
| Hull CCG Actual | 87.18 | 85.79 | 86.15 | 85.38 | 85.05 | 85.15 | 85.51 | 85.23 | 85.51 | 85.59 | 83.51 | 83.66 | 83.27 | 83.27 |
| National Target | 88.96 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 | 92.00 |
| Status | | | | | | | | | | | | | | |

Number of >52 week Referral to Treatment in Incomplete Pathways

Lead: Karen Billany

Framework: A Forward View into Action Annex B

Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|-----------------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| HEYHT Actual | 42 | 5 | 8 | 6 | 5 | 2 | 0 | 4 | 3 | 2 | 22 | 17 | 14 | 64 |
| STF Trajectory | 19 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| STF Status | | | | | | | | | | | | | | |
| CHCP Actual | 0 | 0 | 0 | 0 | 0 | 4 | 8 | 11 | 15 | 47 | 41 | 32 | 24 | 182 |
| National Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | | | | | | | | | | | | | | |
| Hull CCG Actual | 16 | 3 | 1 | 1 | 1 | 4 | 9 | 15 | 15 | 48 | 52 | 38 | 27 | 208 |
| National Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | | | | | | | | | | | | | | |

There were 14 x 52 week breaches at HEYHT, 3 were attributed to Hull CCG patients which have been recorded as: 1x Oral Surgery and 2 x Urology, root cause analysis has been requested.

In addition, there were 24 x 52 week breaches at CHCP for Hull CCG (182 YTD) for Tier 3 Weight Management. As reported last month, root cause analysis has been requested and further actions are being undertaken to minimise further breaches whilst additional capacity is fully embedded into the service to be completed by January 2018. It is expected that 52 week breaches should diminish by January 2018.

Breast Cancer 2 week waits (%)

Lead: Karen Billany

Framework: A Forward View into Action: Annex B

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 95.80 | 93.20 | 96.64 | 98.57 | 89.47 | 97.81 | 94.35 | 93.02 | 90.00 | 92.76 | 92.68 | 89.04 | 91.77 | 92.61 |
| Target | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 | 93.00 |
| Status | | | | | | | | | | | | | | |

Cancer 31 day waits: first definitive treatment (%)

Lead: Karen Billany

Framework: A Forward View into Action: Annex B

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 98.26 | 99.09 | 98.11 | 99.07 | 98.11 | 95.92 | 98.18 | 97.67 | 95.27 | 96.23 | 100.00 | 99.20 | 95.90 | 97.20 |
| Target | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 | 96.00 |
| Status | | | | | | | | | | | | | | |

Cancer 31 day waits: subsequent cancer treatments-surgery (%)

Lead: Karen Billany

Framework: A Forward View into Action: Annex B

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 91.47 | 89.47 | 88.24 | 94.44 | 93.10 | 100.00 | 95.00 | 90.91 | 92.86 | 100.00 | 90.00 | 88.24 | 95.24 | 93.75 |
| Target | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 | 94.00 |
| Status | | | | | | | | | | | | | | |

Cancer 62 day waits: first definitive treatments following urgent GP referral for suspected cancer including 31 day rare cancers (%)

Lead: Karen Billany

Framework: A Forward View into Action: Annex B

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|-----------------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| HEYHT Actual | 77.60 | 77.10 | 70.50 | 82.30 | 74.10 | 73.10 | 71.60 | 78.20 | 74.70 | 76.80 | 73.70 | 80.40 | 79.00 | 75.00 |
| STF Trajectory | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 80.00 | 81.00 | 81.80 | 83.00 | 83.80 | 81.90 | 85.20 | 85.30 | 85.00 |
| STF Status | | | | | | | | | | | | | | |
| Hull CCG Actual | 78.10 | 76.79 | 62.75 | 87.50 | 77.59 | 79.07 | 72.13 | 80.00 | 74.65 | 75.90 | 76.47 | 85.25 | 84.62 | 77.47 |
| National Target | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| Status | | | | | | | | | | | | | | |

Percentage of patients receiving first definitive treatment for cancer within 62-days of referral from an NHS Cancer Screening Service (%)

Lead: Karen Billany

Framework: A Forward View into Action: Annex B

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 87.06 | 66.67 | 75.00 | 83.33 | 100.00 | 100.00 | 77.78 | 83.33 | 100.00 | 68.18 | 80.00 | 58.33 | 87.50 | 80.65 |
| Target | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| Status | | | | | | | | | | | | | | |

Breast Cancer 2 week waits – 158 patients were seen with 13 breaches – all 13 patients cancelled offered appointments.

Cancer 62 day waits: Urgent GP referral for suspected cancer (Includes 31 day rare cancer) – 52 patients with 8 breaches – 7 breaches were due to lack of capacity and complexities with the remaining breach due to patient choice. The overall HEYHT performance was below target at 79% with the all-provider Hull CCG performance marginally below the target at 84.62%.

Cancer 62 days of referral from an NHS Cancer Screening Service – there were 16 patients seen and 2 breaches relating to patient choice (1 patient) and lack of capacity (1 patient).

Cancer 31 day waits: first definitive treatment – 122 patients seen with 5 breaches all due to lack of capacity.

Cancer 31 day waits: subsequent cancer treatment-surgery – the year to date position remains slightly below the 94% with

Diagnostic Test Waiting Times (%)

| Lead: Karen Billany | | | | | | | | | | | | | | |
|--|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Framework: A Forward View into Action: Annex B | | | | | | | | | | | | | | |
| Polarity: Smaller is better | | | | | | | | | | | | | | |
| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
| HEYHT Actual | 3.6 | 6.9 | 6.4 | 3.6 | 3.6 | 4.7 | 5.0 | 5.7 | 5.0 | 8.2 | 9.3 | 7.2 | 7.3 | 7.3 |
| STF Trajectory | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 | 1.0 |
| STF Status | | | | | | | | | | | | | | |
| Hull CCG Actual | 3.05 | 6.17 | 5.26 | 3.04 | 3.05 | 4.24 | 4.23 | 4.75 | 4.22 | 8.07 | 8.97 | 6.98 | 6.37 | 6.37 |
| National Target | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |
| Status | | | | | | | | | | | | | | |

Diagnostic performance in HEY has deteriorated slightly for November with 272 breaches. The majority of breaches were for endoscopies (186 - Colonoscopy (70) and Gastroscopy (67)) and Imaging (67 – CT (58)). HEYHT have reported actions taken to the planned care delivery group and CTIG to address the backlog and, Cardiac CT has been outsourced to Spire (36 per month). The trust continues to report the activity to commissioners through the AIC governance.

The CCG all-provider position is marginally improved.

Ambulance clinical quality – Category A (Red 1) 8 minute response time (%)

| Lead: Karen Billany | | | | | | | | | | | | | | |
|--|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Framework: A Forward View into Action: Annex B | | | | | | | | | | | | | | |
| Polarity: Bigger is better | | | | | | | | | | | | | | |
| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
| YAS Actual | 66.20 | 64.20 | 65.90 | 66.10 | 69.50 | 71.20 | 72.90 | 70.50 | 71.80 | 65.80 | | | | |
| YAS Target | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | | | | |
| YAS Status | | | | | | | | | | | | | | |
| Hull CCG Actual | 66.20 | 62.40 | 63.50 | 65.20 | 72.80 | 76.40 | 77.50 | 80.90 | 75.40 | 70.00 | | | | |
| National Target | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | | | | |
| Status | | | | | | | | | | | | | | |

Yorkshire Ambulance Service has moved to the new methodology for Category 1 from September 2017 and therefore will no longer report the 8 minute response time. This will be superseded by a 7-minute mean time for ambulance response which is detailed below.

Ambulance clinical quality – Category 1 mean response time (mm:ss)

| Lead: Karen Billany | | | | | | | | | | | | | | |
|--|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Framework: A Forward View into Action: Annex B | | | | | | | | | | | | | | |
| Polarity: Smaller is better | | | | | | | | | | | | | | |
| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
| YAS Actual | | | | | | | | | | | 07:14 | 07:11 | 07:27 | 07:21 |
| YAS Target | | | | | | | | | | | 07:00 | 07:00 | 07:00 | 07:00 |
| YAS Status | | | | | | | | | | | | | | |

Ambulance handover time – Delays of +30 minutes

Lead: Karen Billany Framework: A Forward View into Action: Annex B Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 36,917 | 3,746 | 4,597 | 3,716 | 2,130 | 1,818 | 2,207 | 1,679 | 1,980 | 2,034 | 2,587 | 2,503 | 2,349 | 17,157 |
| Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | | | | | | | | | | | | | | |

Ambulance handover time – Delays of +1 hour

Lead: Karen Billany Framework: A Forward View into Action: Annex B Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 8,657 | 924 | 1,424 | 989 | 269 | 257 | 295 | 179 | 263 | 274 | 524 | 510 | 352 | 2,654 |
| Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | | | | | | | | | | | | | | |

Crew Clear Delays – Delays of +30 minutes – YAS

Lead: Karen Billany Framework: A Forward View into Action: Annex B Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 7,482 | 707 | 689 | 633 | 735 | 782 | 825 | 790 | 926 | 878 | 962 | 1,062 | 902 | 7,127 |
| Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | | | | | | | | | | | | | | |

Crew Clear Delays – Delays of +1 hour – YAS

Lead: Karen Billany Framework: A Forward View into Action: Annex B Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 447 | 32 | 43 | 36 | 32 | 32 | 39 | 31 | 45 | 42 | 43 | 47 | 36 | 315 |
| Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | | | | | | | | | | | | | | |

These are being monitored at operational level and reported through the A&E Delivery Board chaired by HEYHT.

IAPT: % of people who have depression and/or anxiety disorders who receive psychological therapies

Lead: Mel Bradbury Framework: A Forward View into Action: Annex A Polarity: Bigger is better

| Period | 2016/17 | Oct 2016 | Nov 2016 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|---------|
| Actual | 17.84 | 1.45 | 1.66 | 1.01 | 1.62 | 1.25 | 1.48 | 1.17 | 1.70 | 1.74 | 1.49 | 1.37 | 1.37 | 8.85 |
| Target | 15.00 | 1.25 | 1.25 | 1.25 | 1.25 | 1.25 | 1.25 | 1.58 | 1.58 | 1.58 | 1.58 | 1.58 | 1.58 | 8.83 |
| Status | | | | | | | | | | | | | | |

IAPT: % of people who are moving to recovery

Lead: Mel Bradbury Framework: A Forward View into Action: Annex A Polarity: Bigger is better

| Period | 2016/17 | Oct 2016 | Nov 2016 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|---------|
| Actual | 39.53 | 37.93 | 39.02 | 36.59 | 42.86 | 43.04 | 43.64 | 46.48 | 37.62 | 48.15 | 46.15 | 44.94 | 53.06 | 45.95 |
| Target | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| Status | | | | | | | | | | | | | | |

IAPT: % of people that wait 6 weeks or less from referral to entering a course of IAPT treatment against the number of people who finish a course of treatment

Lead: Mel Bradbury

Framework: A Forward View into Action: Annex A

Polarity: Bigger is better

| Period | 2016/17 | Oct 2016 | Nov 2016 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|---------|
| Actual | 83.27 | 89.25 | 87.06 | 89.41 | 88.89 | 89.16 | 87.83 | 82.67 | 81.13 | 75.86 | 76.04 | 70.21 | 71.57 | 76.07 |
| Target | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| Status | | | | | | | | | | | | | | |

Positive progress is now starting to be seen which is expected to continue aligned to the recovery plan by the end of the financial year. September is the latest published data which indicates the 50% recovery target has been achieved in-month, this is marginally higher performance than local data suggested and work is ongoing to replicate the NHS Digital outcome from the IAPT dataset.

The national target is for achievement for a 'rolling quarter' as presented in the Improvement and Assessment Framework (IAF).

Friends and Family Test for A&E: % recommended

Lead: Karen Martin

Framework: CCG Outcomes: Domain 4

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 88.00 | 84.80 | 91.70 | 97.60 | 82.40 | 78.30 | 74.60 | 74.30 | 86.20 | 84.80 | 85.10 | 85.70 | | 85.10 |
| Target | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 | 88.00 |
| Status | | | | | | | | | | | | | | |

No narrative provided.

Friends and Family Test for Postnatal Community: % recommended

Lead: Karen Martin

Framework: CCG Outcomes: Domain 4

Polarity: Bigger is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|------------|----------|---------|
| Actual | 99.0 | 100 | 100 | 99.2 | 100 | 100 | 0.0 | 100 | 100 | 100 | 0.0 | Nil Return | | 90.7 |
| Target | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 | 98.0 |
| Status | | | | | | | | | | | | | | |

No narrative provided.

Maternal smoking at delivery

Lead: Bernie Dawson

Framework: CCG outcomes: Domain 1

Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 22.90 | 22.76 | | | 23.15 | | | 21.29 | | | 22.79 | | | 21.64 |
| Target | 21.00 | 21.00 | | | 21.00 | | | 21.00 | | | 21.00 | | | 21.00 |
| Status | | | | | | | | | | | | | | |

Following the report of data quality issues in last month's report HEYHT have confirmed that steps have been made to change operational process within maternity to ensure reporting is accurate for Q3.

No urgent operations cancelled for a 2nd time

Lead: Karen Martin

Framework: CCG outcomes:
Domain 1

Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 4 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 0 | 1 | 4 |
| Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | Red | Green | Green | Red | Green | Red | Green | Green | Green | Red | Green | Green | Red | Red |

An increase in emergency admissions for Neurosurgery necessitated the cancellation. All cases were clinically prioritised and the patient has now been treated.

Incidence of healthcare associated infection (HCAI): MRSA

Lead: Karen Martin

Framework: CCG outcomes:
Domain 1

Polarity: Smaller is better

| Period | 2016/17 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | Dec 2017 | 2017/18 |
|--------|---------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|----------|---------|
| Actual | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | Red | Green | Green | Green | Green | Green | Green | Green | Green | Green | Green | Red | Green | Red |

No breaches in December. HEYHT laboratory reported 1 case in respect of an overseas resident in November. The case was assessed as 'third party attributable'. An arbitration panel has been set for 16 January 2018.

Incidence of healthcare associated infection (HCAI): E-Coli

Lead: Karen Martin

Framework: CCG outcomes:
Domain 1

Polarity: Smaller is better

| Period | 2016/17 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | Dec 2017 | 2017/18 |
|--------|---------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|----------|---------|
| Actual | 234 | 17 | 13 | 17 | 15 | 20 | 25 | 16 | 25 | 25 | 15 | 15 | 18 | 174 |
| Target | 210 | 18 | 14 | 13 | 13 | 20 | 15 | 18 | 23 | 20 | 22 | 21 | 15 | 167 |
| Status | Red | Green | Green | Red | Red | Green | Red | Green | Red | Red | Green | Green | Red | Red |

No narrative available

Number of mixed sex accommodation (MSA) breaches

Lead: Karen Martin

Framework: CCG outcomes:
Domain 1

Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Target | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Status | Green | Green | Green | Green | Green | Green | Green | Green | Green | Green | Green | Red | Green | Red |

Rate of mixed sex accommodation breaches (rate per 1,000 FCEs)

Lead: Karen Martin

Framework: CCG outcomes:
Domain 1

Polarity: Smaller is better

| Period | 2016/17 | Dec 2016 | Jan 2017 | Feb 2017 | Mar 2017 | April 2017 | May 2017 | June 2017 | July 2017 | Aug 2017 | Sep 2017 | Oct 2017 | Nov 2017 | 2017/18 |
|--------|---------|----------|----------|----------|----------|------------|----------|-----------|-----------|----------|----------|----------|----------|---------|
| Actual | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.1 | 0.0 | 0.1 |
| Target | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Status | Green | Green | Green | Green | Green | Green | Green | Green | Green | Green | Green | Red | Green | Red |

One Mixed Sex Accommodation breach, reported North Lincolnshire and Goole Hospitals. Details have been requested but as yet not received.