

# **QUALITY & PERFORMANCE REPORT**

**NHS HULL CCG BOARD**

**JANUARY 2022**

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## Executive Summary

## Financial Summary

Expenditure across the CCG's budget lines is shown in the financial position table below and include allowable variances. Variances relating to other expenditure lines are relatively insignificant and come to a net £70k underspend. These will be monitored throughout the rest of the year to ensure that the CCG achieves the required financial target.

## Performance

HUTHT Type 1 A&E 4 hour waiting time performance showed a slight deterioration in November 2021.

Referral to Treatment 18 weeks waiting times performance at HUTHT showed a slight improvement in November 2021, reporting 59.15% compared to 58.97% the previous month.

Hull CCG Diagnostic test 6-week waiting times performance improved compared to the previous month, reporting 35.40% of patients waiting longer than 6 weeks in November 2021 compared to 38.63% in October.

Hull CCG 62-day cancer waiting times performance deteriorated in November 2021, compared to the previous month. The standard continues to underperform against the national target.

## Safety, Quality and Patient Experience

### Hull University Teaching Hospitals NHS Trust (HUTHT)

- The Trust continue to be in a period of Enhanced Surveillance, following the commencement of the Quality and Risk Profile (QRP) process which is led by NHS Hull CCG. The Quality Delivery Group chaired by the CCG has been revised to include the wider health stakeholders and is focussed upon support for the Trust and system wide improvements, as identified within the Quality and Risk Process.
- The Trust have reported an increase in 12-hour Trolley Breaches during this reported period and continue to experience significant pressures in the Emergency Department, attributed in part to a reported increase in the acuity of patients presenting within the department.
- The Trust have now published the findings of the review by the Royal College of Physicians Cardiology Department report. The review which was requested by the Trust has now concluded and the Trust are actively working to achieve the outcomes of the associated action plan with the Cardiology team.

### Humber NHS Foundation Trust

- The Trust continue to implement their approach to the National Patient Safety Strategy with over 70 staff now having been trained on a system-based approach to Serious Incident investigations complaints/investigations, using level 1 PSS training.

### City Health Care Partnership (CHCP)

- CHCP continue to see an increase in attendance at the Out of Hours and Urgent Care centres, impacting on resources. Capacity continues to be reviewed, ensuring people are directed to appropriate services for support.

### Spire

- Spire have now piloted an informative patient discharge booklet, with the aim of reducing post-discharge calls and re-admissions. The booklet supports patients to safely manage their ongoing care and highlights when to request clinical help. The effectiveness of the booklet will be evaluated and has been shared through the patient safety specialist's network.
- In supporting the effectiveness of patient referrals and care Spire have implemented electronic processes for patient pre-assessments.

### Yorkshire Ambulance Service (YAS)

- YAS continue to report significant pressure within 999 and 111 services, due to increased demand and continued delays in category 1 and 2 response times. It is noted that they have seen a significant increase in the acuity of patient calls to the 999 service and increased handover times, resulting in lost hours for crews.

# Financial Position

## Achievement of Financial Duties / Plans

Based on information available up to the 30th November 2021. Achievement against the financial performance targets for 2021/22 are as follows

		<i>Performance Assessment</i>
<u>Other relevant duties/plans</u>	Not exceed Revenue Resource Limit (excluding allowable items)	Green
	Running Costs Envelope	Green
	Not exceed Cash Limit	Green
	Variance to planned Surplus	Green

## Financial Performance / Forecast

	Year To Date (000's)			Half Year 1 (000's)			Risk
	Budget	Actual	Var	Budget	FOT	Var	
20/21 Core Allocation	497,616	497,616	-	714,604	714,604	-	
Surplus			-			-	
Acute Services	256,677	256,717	(40)	377,789	377,856	(67)	Green
Prescribing & Primary Care Services	74,116	73,624	492	110,313	110,388	(75)	Green
Community Services	37,540	37,899	(359)	56,072	57,218	(1,146)	Amber
Mental Health & LD	45,473	46,346	(873)	68,735	68,735	-	Green
Continuing Care	18,113	18,328	(215)	27,168	27,168	-	Green
Other Including Earmarked Reserves	42,355	41,875	480	54,327	60,576	(6,249)	Green
Running Costs	3,199	3,199	0	4,798	4,798	-	Green
<b>TOTAL EXPENDITURE</b>	<b>477,471</b>	<b>477,988</b>	<b>(516)</b>	<b>699,202</b>	<b>706,738</b>	<b>(7,536)</b>	
<b>Under/(over)-spend against in year allocation</b>	<b>20,145</b>	<b>19,629</b>	<b>(516)</b>	<b>15,402</b>	<b>7,866</b>	<b>(7,536)</b>	Green
Reimbursed outside of envelope COVID fund	-	-	-	-	1,312	1,312	See above
Reimbursed Elective Recovery Fund	-	-	-	-	67	67	See above
Reimbursed Winter Access Fund	-	516	516	-	6,152	6,152	See above
Reimbursed Additional Roles Reimbursement	-	-	-	-	75	75	See above
Balance	20,145	20,145	(0)	15,402	15,472	70	Green

### KEY:

RED = negative variance of £2M or above

AMBER = negative variance between £500k - £2M

GREEN = positive variance or negative variance less than £500k

Exception: Other including earmarked reserves

## Summary Financial Position as at 30 November 2021.

The CCG is currently forecasting to achieve a Surplus of £7,796k against the annual allocation of £714,604k. This includes the historic surplus of £15,402k therefore the in year position is forecast to be a deficit of £7,536k.

This is an allowable deficit as it relates to several schemes for which the CCG will receive additional allocation before the end of the financial year. These are Hospital Discharge Scheme (£1,312k), Elective Recovery Fund for additional Independent Sector costs (£67k), the primary care Winter Access Fund (£6,152k) and the Additional Roles Reimbursement Scheme (£75k).

The running cost allocation is £4,798k and the current forecast is that expenditure will be contained within this financial envelope.

Expenditure across the CCG's budget lines is shown in the above table and include the allowable variances described above. Variances relating to other expenditure lines are relatively insignificant and come to a net £70k underspend. These will be monitored throughout the rest of the year to ensure that the CCG achieves the required financial target.

**Statement of Financial Position**

At the end of November, the CCG was showing £58.0m excess of liabilities over assets. This is higher than usual due to the CCG receiving a system allocation of £23.3m of additional elective recovery funding that was not distributed until month 9.

**Revenue Resource Limit**

The H1 Limit for the CCG is £714,604k for both 'Programme' and 'Running' costs. This now includes the historic surplus of £15,402k. This is significantly higher than in previous years due to the level of system funding flowing through the CCG.

**Working Balance Management**

**Cash**

The closing cash for November was £6k. As in 2020/21 there is no requirement to manage cash to minimal levels, however the CCG is not retaining excess amounts of cash.

**Better Payment Practice Code:**

**Target 95% payment within 30 days**

**a. Non NHS**

For payments to Non NHS suppliers the performance for November was 96.13% on the value and 97.60% on the number of invoices, whilst the full year position is 96.68% achievement on the value and 96.46% on number.

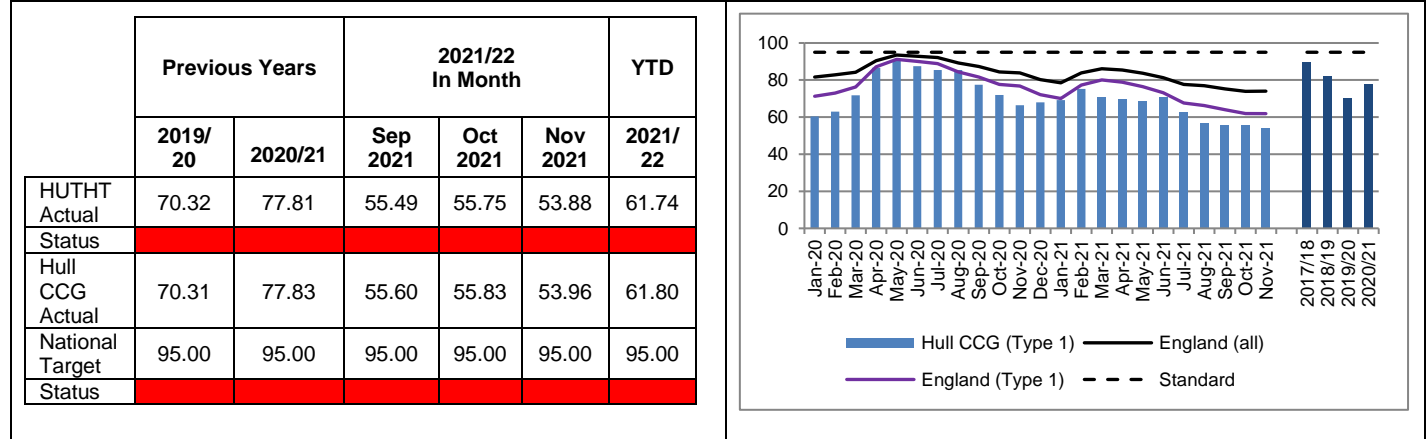
**b. NHS**

For payments to NHS suppliers the performance for November was 99.96% on the value and 94.59% on the number of invoices, whilst the full year position is 99.93% achievement on the value and 94.66% on number.

**CCG Constitutional Exceptions**

**Performance Indicator Exceptions**

**A&E waiting times – percentage of patients spending less than 4 hours total time in the A&E department (%)**  
 Lead Commissioner: Karen Ellis      Quality Lead: Deborah Lowe      Polarity: Bigger is better



HUTHT Type 1 A&E 4 hour waiting time performance recorded a deterioration in November 2021 at 53.88%. This is also a reduction in performance in the previous year, with November 2020 reporting 66.40%.

In November 2021 the Trust reported 10,812 A&E attendances, an increase on the previous year with November 2020 reporting 8,615 A&E attendances.

[Statistics » A&E Attendances and Emergency Admissions 2021-22 \(england.nhs.uk\)](https://www.england.nhs.uk/statistics/a-and-e-attendances-and-emergency-admissions-2021-22/)

## A&E waiting times – Number of patients spending more than 12 hours total time in the A&E department (Trolley waits)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month								YTD
	2019/20	2020/21	Apr 2021	May 2021	Jun 2021	Jul 2021	Aug 2021	Sep 2021	Oct 2021	Nov 2021	2021/22
HUTHT Actual	0	3	0	0	0	0	1	5	2	1	9
Status											
Hull CCG Actual	0	1	0	0	0	0	0	3	2	1	6
National Target	0	0	0	0	0	0	0	0	0	0	0
Status											

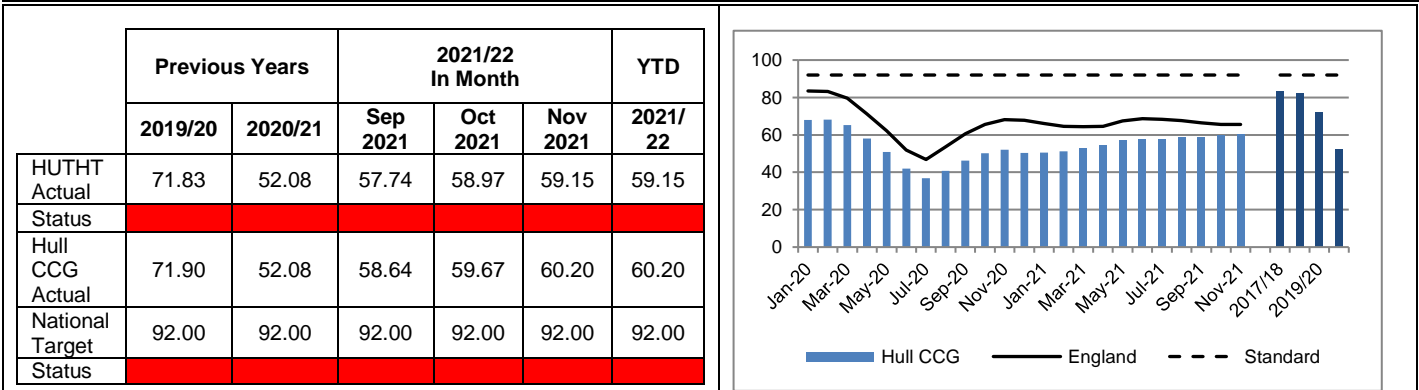
Hull CCG reported 1 trolley breach in November 2021, relating to a Hull CCG patient waiting for a Mental Health bed to become available.

## Referral to Treatment incomplete pathways: percentage of incomplete pathways within 18 weeks (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better



Referral to Treatment 18 weeks waiting times performance at HUTHT reported 59.15% in November 2021, showing a slight improvement on the previous few months.

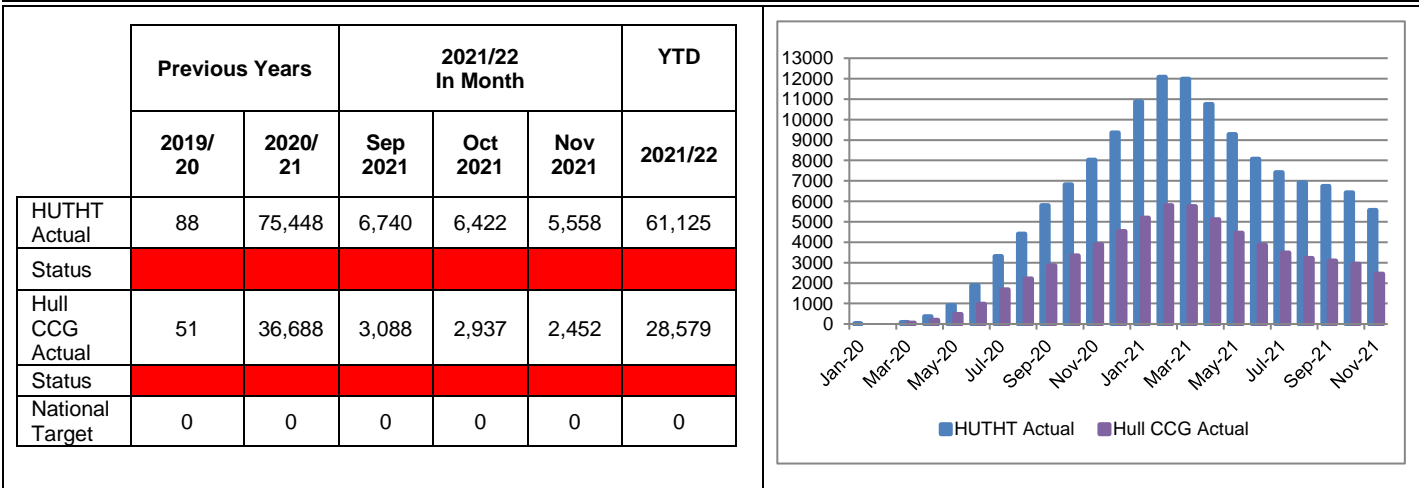
[Statistics » Consultant-led Referral to Treatment Waiting Times Data 2021-22 \(england.nhs.uk\)](https://www.england.nhs.uk/statistics/consultant-led-referral-to-treatment-waiting-times-data-2021-22/)

## Number of >52 week Referral to Treatment in Incomplete Pathways

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better



Hull CCG reported 2,452 patients waiting over 52+ weeks at the end of November 2021, a reduction of 485 when compared to the previous month (October 2021 2,937).

In November 2021 the Trust had 5,558 52+ Week breaches, an improvement of 864 patients when compared to those reported in October 2021 (6,422).

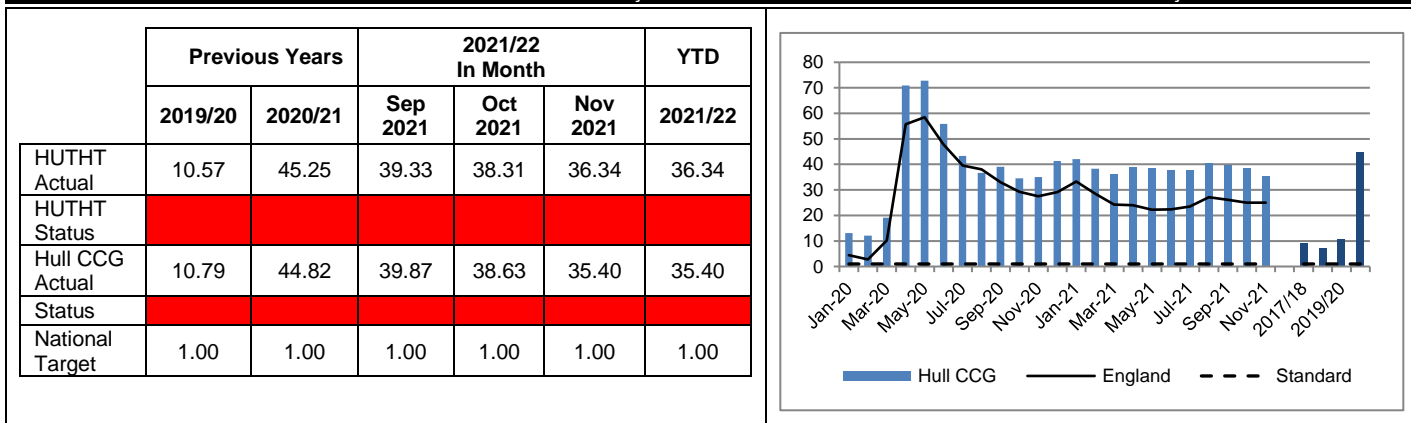
Most of the breaches relate to Ear Nose and Throat (ENT), General Surgery, Plastic Surgery, Gynaecology and Urology.

## Diagnostic test waiting times (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better



Hull CCG Diagnostic test 6-week waiting times performance showed a slight improvement in November 2021 compared to the previous month, reporting 36.34% of patients waiting longer than 6 weeks in November compared to 38.31% in October.

The CCG reported 2,108 breaches during November 2021, 50.43% (1,063) of the total breaches were Endoscopy, with Gastroscopy (334) and Colonoscopy (327) combined accounting for 62.18% of the total Endoscopy breaches.

Endoscopy continues to remain a challenge due to the pause in the service during COVID-19, a trend seen nationally.

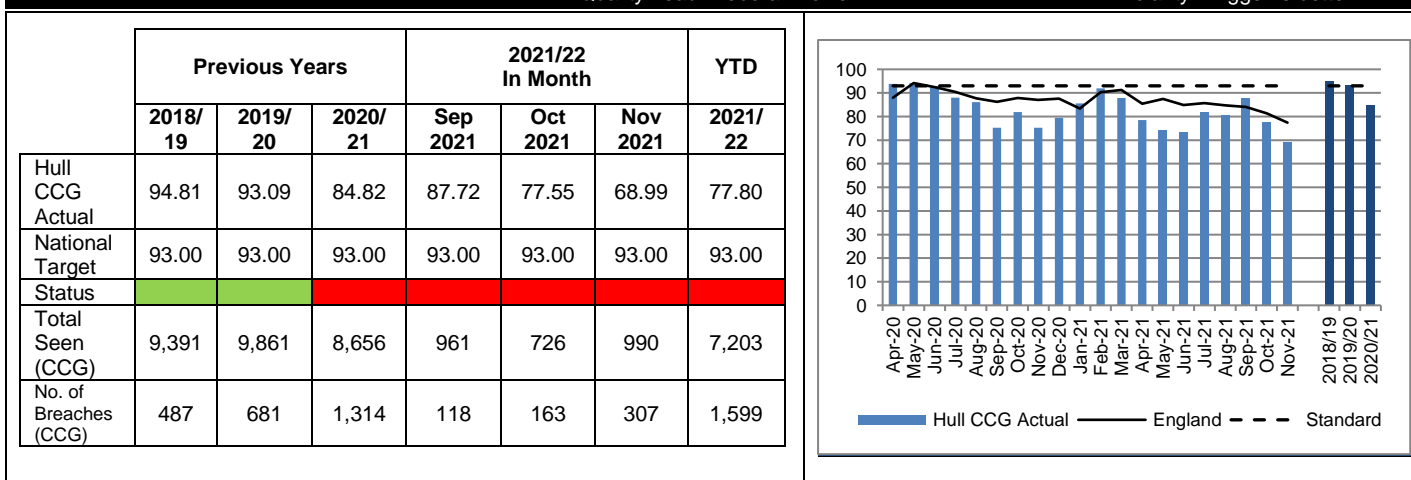
[Statistics » Monthly Diagnostic Waiting Times and Activity \(england.nhs.uk\)](https://www.england.nhs.uk/statistics/monthly-diagnostic-waiting-times-and-activity/)

## Maximum 2 week wait (%) for first outpatient appointment when referred urgently by GP with suspected cancer

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better



November 2021 performance was 68.99% for Hull CCG with 990 patients seen and 307 breaches, 255 (83.06%) of the breaches were due to inadequate out-patient capacity, 48 breaches due to patient choice, 3 breaches due to clinic cancellation and 1 due to administrative delay.

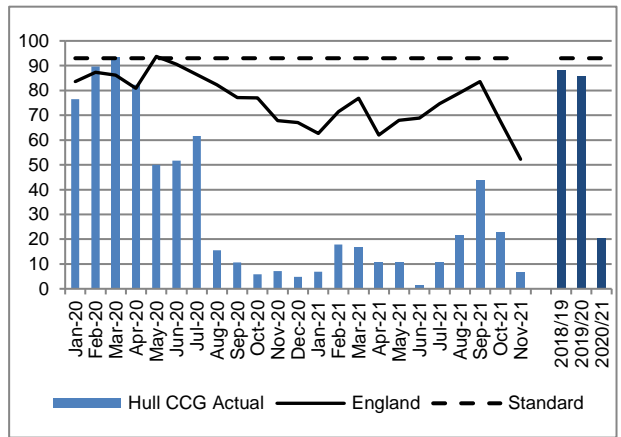
## Maximum 2 week wait (%) for first outpatient appointment when referred urgently with breast symptoms

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/ 20	2020/ 21	Sep 2021	Oct 2021	Nov 2021	2021/22
Hull CCG Actual	85.54	20.35	43.75	22.68	6.72	14.71
National Target	93.00	93.00	93.00	93.00	93.00	93.00
Status						
Total Seen (CCG)	1,604	850	80	97	134	775
No. of Breaches (CCG)	232	677	45	75	125	661



There were 125 breaches in November 2021, 101 (80.80%) due to inadequate outpatient capacity, 19 breaches due to patient choice, 4 breaches due to clinic cancellation, and 1 due to 'other reason (not listed)'.

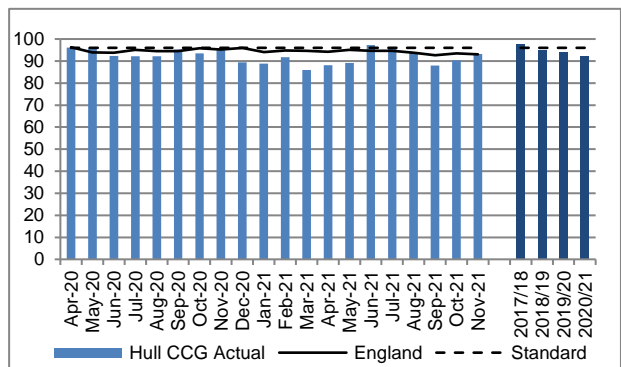
## Cancer 31 day waits: Diagnosis to first definitive treatment within 31 days (all cancers) (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/ 20	2020/ 21	Sep 2021	Oct 2021	Nov 2021	2021/ 22
Hull CCG Actual	94.25	92.16	87.97	90.32	93.22	92.12
National Target	96.00	96.00	96.00	96.00	96.00	96.00
Status						
No. of Breaches (CCG)	87	99	16	12	8	81



November 2021 performance improved, reporting 93.22% against the 96% target. 118 patients were seen with 8 breaches of the 31-day standard.

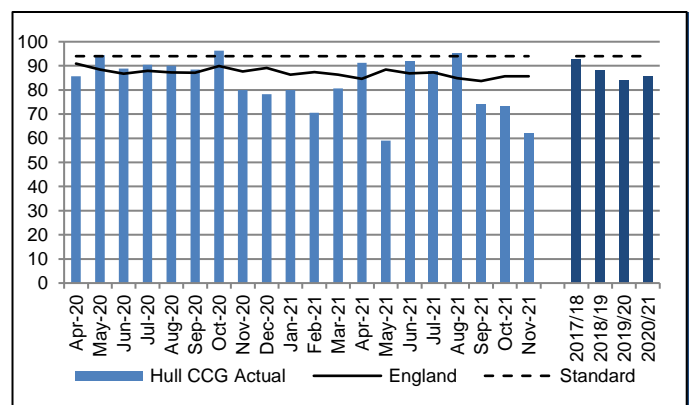
## Cancer 31 day waits: 31 day wait for subsequent treatment - surgery (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/ 20	2020/ 21	Sep 2021	Oct 2021	Nov 2021	2021/ 22
Hull CCG Actual	83.76	85.60	74.19	73.08	61.90	78.80
National Target	94.00	94.00	94.00	94.00	94.00	94.00
Status						
No. of Breaches (CCG)	44	36	8	7	8	39



Performance has continued to show reduced performance (21 patients were seen, 8 breaches) 4 due to inadequate elective capacity with a wait time of between 38 and 49 days, 2 due to a health care provider-initiated delay with waits of 36 and 45 days, 1 due to a complex diagnostic pathway (wait of 69 days) and a further breach due to patient choice with a wait time of 82 days.



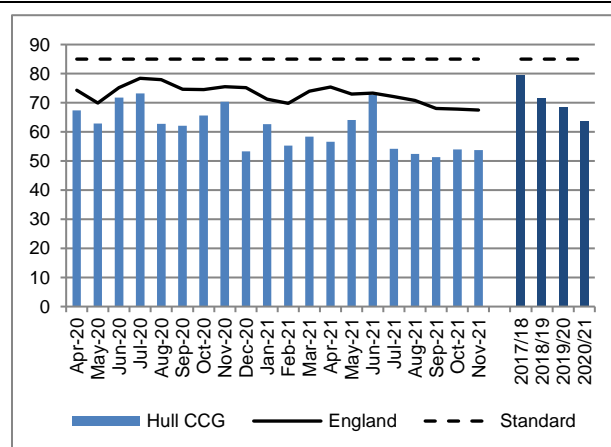
# Cancer 62 day waits: first definitive treatments following urgent GP referral for suspected cancer including 31 day rare cancers (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Sep 2021	Oct 2021	Nov 2021	2021/22
HUTHT Actual	68.78	61.12	56.81	55.70	65.41	60.32
Status						
Hull CCG Actual	68.49	63.71	51.35	53.97	53.70	57.40
Status						
National Target	85.00	85.00	85.00	85.00	85.00	85.00
No. of Breaches (CCG)	236	233	36	29	25	219



Hull CCG performance was 53.70% in November 2021 (54 patients with 25 breaches).

Breach details are as follows:

Breach Reason	Number of Breaches	Tumour Type	Wait (Days)
Complex diagnostic pathways (many, or complex, diagnostic tests required)	12	Lung x 4 Breast x 2 Lower Gastrointestinal x2 Urological (excluding testicular) Gynaecological Skin Upper Gastrointestinal	Between 84 and 152 days 77 and 88 days 96 and 97 days 75 days 105 days 135 days 93 days
Health care provider-initiated delay to diagnostic test or treatment planning	7	Lower Gastrointestinal x 6 Gynaecological	Between 63 and 114 days 118 days
Elective capacity inadequate (patient unable to be scheduled for treatment within standard time) for treatment in an admitted care setting	2	Skin x 2	69 and 73 days
Diagnosis delayed for medical reasons (PATIENT unfit for diagnostic episode, excluding planned recovery period following diagnostic test)	1	Lung	143 days
Inconclusive diagnostic result	1	Gynaecological	94 days
PATIENT Did Not Attend an APPOINTMENT for a diagnostic test or treatment planning event (no advance notice)	1	Upper Gastrointestinal	80 days
PATIENT choice delay relating to first Out-Patient Appointment	1	Urological (Excluding Testicular)	130 days

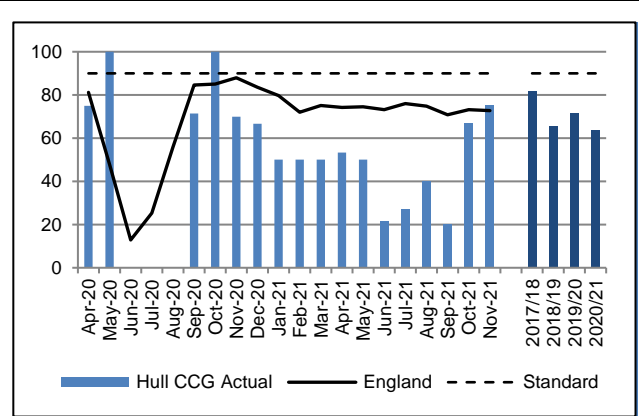
## Cancer 62 day waits: first definitive treatment for cancer within 62-days of referral from an NHS Cancer Screening Service (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Sep 2021	Oct 2021	Nov 2021	2021/22
Hull CCG Actual	71.68	63.53	20.00	66.67	75.00	40.63
National Target	90.00	90.00	90.00	90.00	90.00	90.00
Status						
No. of Breaches (CCG)	32	31	4	2	1	38



4 patients were seen during November 2021, with 1 breach of the standard. The breach was due to inadequate elective capacity and related to a breast tumour patient with a wait of 126 days.

[Statistics » Monthly Commissioner Based Data and Summaries \(england.nhs.uk\)](#)

Note: Access to cancer reporting data nationally has changed and become more challenging. The CCG is increasingly dependent on providers supplying information to explain breaches of waiting time standards.

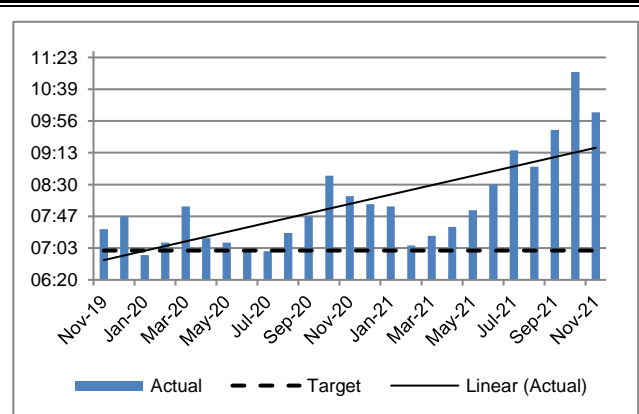
## Ambulance clinical quality – Category 1 mean response time (mins)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Sep 2021	Oct 2021	Nov 2021	2021/22
YAS Actual	07:12	07:37	09:44	11:03	10:08	10:08
YAS Target	07:00	07:00	07:00	07:00	07:00	07:00
Status						



The indicators are being monitored at operational level and reported through the A&E Delivery Board chaired by HUTHT.

Ambulance handover and Crew Clear delays are monitored against zero-tolerance targets and reported at provider level.

YAS at HUTHT performance for +30 minute and +60 minute handovers, as a proportion of total number of handovers, is 42.61% and 19.61% respectively. YAS at HUTHT performance for +30 minute and +60 minute crew clears is 5.46% and 0.46% respectively for November 2021.

## % of people entering treatment (%) - Improving Access to Psychological Therapies (IAPT)

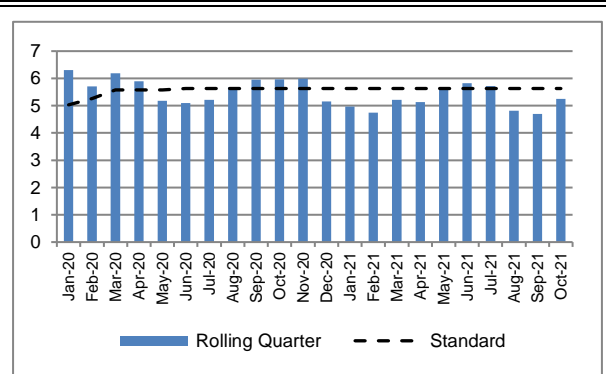
Lead: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous years			In month position			Rolling Qtr
	2018/19	2019/20	2020/21	Aug 2021	Sep 2021	Oct 2021	
Hull CCG Actual	20.14	23.05	23.05	1.20	1.88	2.17	5.25*
National Target	20.04	19.89	22.50	1.88	1.88	1.88	5.64
Status							

\* 'Rolling Quarter' covers 3-month interval, August 2021 – October 2021. The national target is for achievement of a 'rolling quarter'.



The overall rolling quarter position against the national target was not achieved. The indicator continues to be monitored by NHS England and the CCG. (Note: latest reporting data is October 2021).

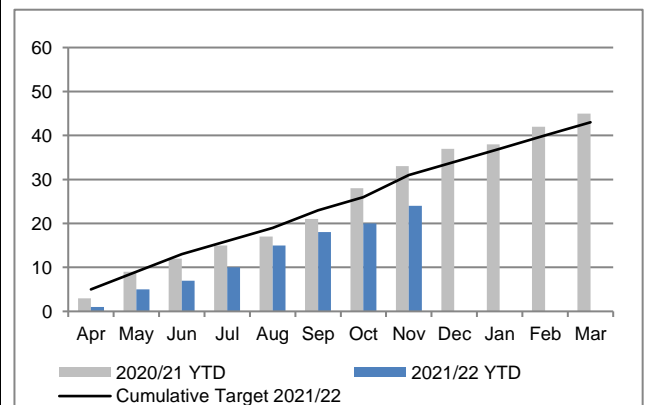
## Quality Indicator Exceptions

### Incidence of healthcare associated infection (HCAI): Clostridium difficile (C.difficile)

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Sep 2021	Oct 2021	Nov 2021	2021/22
Hull CCG Actual	50	45	3	2	4	24
Target	56	56	5	3	5	31
Status						



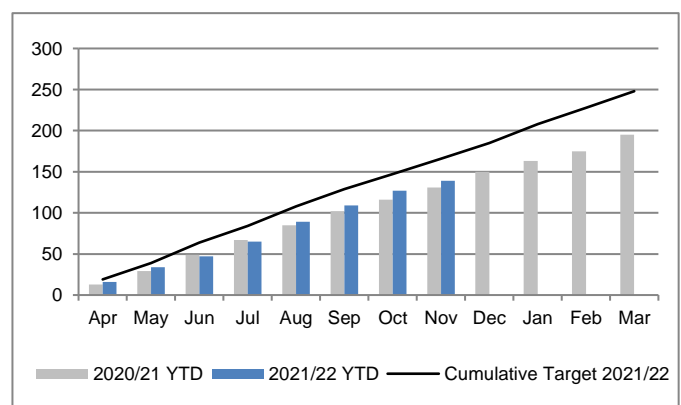
In November 2021 the CCG are reporting 24 cases of C.difficile YTD, 9 fewer compared to the previous year, November 2021 (33 cases YTD). The objective for 2021/22 is 43 cases, currently the CCG are 19 cases below the annual objective.

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

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Sep 2021	Oct 2021	Nov 2021	2021/22
Hull CCG Actual	250	195	20	18	12	139
Target	211	211	21	18	19	166
Status						



In November 2021 the CCG are reporting 139 cases of E. Coli YTD, 8 more than reported in the same period last year (November 2020, 131 cases YTD). The objective for 2021/22 is 248 cases, currently the CCG are 109 cases below the annual objective.

## Incidence of healthcare associated infection (HCAI): Methicillin-Resistant Staphylococcus Aureus (MRSA)

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years				2021/22 In Month				YTD
	2017/18	2018/19	2019/20	2020/21	Aug 2021	Sep 2021	Oct 2021	Nov 2021	2021/22
Hull CCG Actual	2	2	2	1	0	0	1	0	1
Target	0	0	0	0	0	0	0	0	0
Status									

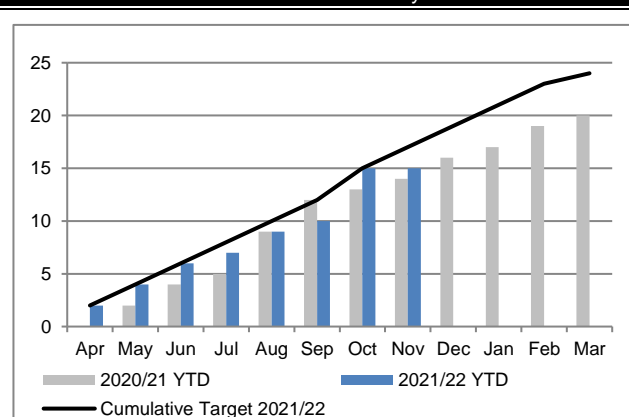
2021/22 YTD the CCG are reporting a single case of MRSA, reported in October 2021.

## Incidence of healthcare associated infection (HCAI): Pseudomonas

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Sep 2021	Oct 2021	Nov 2021	2021/22
Hull CCG Actual	26	20	1	5	0	15
Target			2	3	2	17
Status						



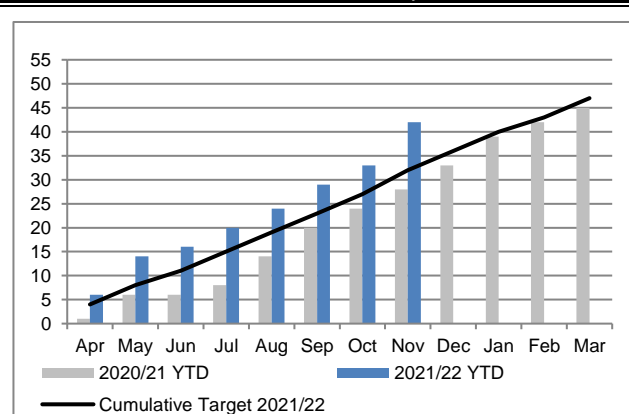
In November 2021 the CCG are reporting 15 cases of Pseudomonas YTD, 1 more when compared to the previous year, November 2020 (14 cases YTD). The objective for 2021/22 is 24 cases, currently the CCG are 9 cases below the annual objective.

## Incidence of healthcare associated infection (HCAI): Klebsiella

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Sep 2021	Oct 2021	Nov 2021	2021/22
Hull CCG Actual	52	45	5	4	9	42
Target			4	4	5	32
Status						



In November 2021 the CCG are reporting 42 cases of Klebsiella YTD, 14 more compared to the previous year, November 2020 (28 cases YTD). A total of 9 cases were reported in the month of November 2021. The objective for 2021/22 is 47 cases, currently the CCG are 5 cases below this annual objective.