

QUALITY & PERFORMANCE REPORT

NHS HULL CCG BOARD

MAY 2022

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Executive Summary

Financial Summary

The Annual Accounts for 2021/22 are in the process of being audited. Interim indications are that NHS Hull CCG will achieve its financial targets.

Performance

HUTHT Type 1 A&E 4 hour waiting time performance continues to underperform as in previous months. Activity levels increased during March 2022 to 9,705 from 8,156 in February 2022.

Referral to Treatment 18 weeks waiting times, 2021/22 final position for Hull CCG was 57.03%, an improvement on the 2020/21 final position of 52.99%. The number of patients waiting over 52 Weeks has also remained static in March at 2,321.

The CCG's final 2021/22 position for Diagnostic test 6-week waiting times showed an improvement at 31.45% when compared to the final position for 2020/21 of 36.33%.

Hull CCG 62-day cancer waiting times performance final position for 2021/22 was 57.88%, a reduction in performance when compared to 2020/21 (63.71%).

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, led by NHS Hull CCG. The Trust continues to provide ongoing evidence of positive and continual improvement and working with wider health partners across the system.

The Trust has now appointed to their first cohort of qualified QSIR Practitioners, who will support the delivery of Quality Improvement across this Trust. In building on their commitment to quality improvement the Trust have appointed 4 consultants as QI leads who will focus on:

- Effectiveness and VTE
- Experience and IPC
- Person Centred Care and AKI
- Safe Medication Management and PSIRF

Humber NHS Foundation Trust

Waiting lists for CAMHS are now seeing a reduction, following the commencement of the new Neurodiversity Service. The Trust remains committed to reducing waiting times and there is a focus upon Autism Spectrum Disorder Diagnosis (ASD) and Attention Deficit Hyperactivity Disorder (ADHD).

City Health Care Partnership (CHCP)

CHCP have successfully achieved the White Ribbon accreditation, a reaccreditation from previous years and in recognition of their supporting the prevention work for Domestic violence/ abuse.

Yorkshire Ambulance Service (YAS)

There continues to be significant pressure within 999 and NHS 111 services. The service has several supportive occupational health measures in place, to support staff working under pressure including mental health support.

Financial Position

Achievement of Financial Duties / Plans

Indicative year-end achievement (subject to audit) 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	Green
	Running Costs Envelope	Green
	Not exceed Cash Limit	Green
	Variance to planned Surplus	Green

CCG Constitutional Exceptions

Performance Indicator Exceptions

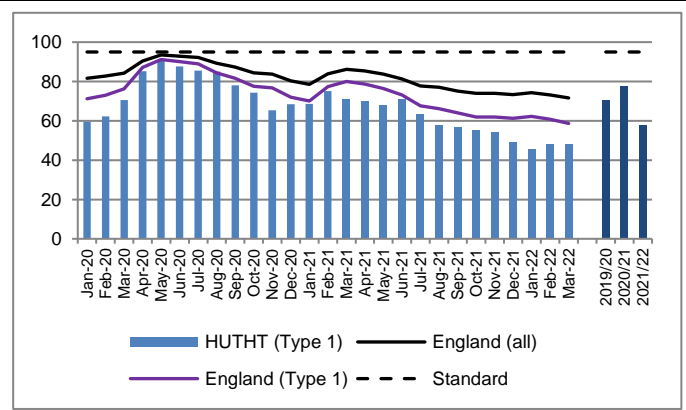
A&E waiting times – percentage of patients spending less than 4 hours total time in the A&E department (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
HUTHT Actual	70.30	77.61	45.63	47.83	47.99	57.92
Status						
National Target	95.00	95.00	95.00	95.00	95.00	95.00
Status						



*Due to changes in data and for consistency, A&E activity and performance is now using Provider Sitrep data.

HUTHT Type 1 A&E 4 hour waiting time performance continues to underperform, at 47.99%. This is a reduction in performance from the previous year, with March 2021 reporting 70.99%.

In March 2022 the Trust reported 9,705 A&E attendances, an increase on March of the previous year, 8,573 A&E attendances (March 2021).

The final annual 2021/22 position for HUTHT was 57.92%, a reduction in performance when compared to 2020/21, 77.61%.

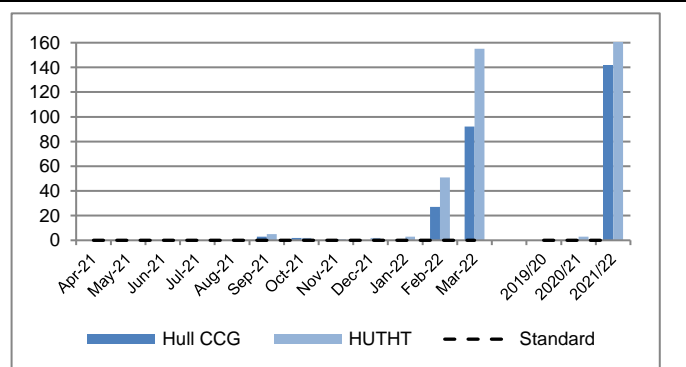
A&E waiting times – Number of patients spending more than 12 hours total time in the A&E department (Trolley waits)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
HUTHT Actual	0	3	3	51	155	220*
Status						
Hull CCG Actual	0	1	1	27	92	142
National Target	0	0	0	0	0	0
Status						



Hull CCG reported 92 trolley breaches in March 2022.

The 2021/22 final position for Hull CCG was 142 trolley breaches, an increase of 141 when compared to the annual 2020/21 position.

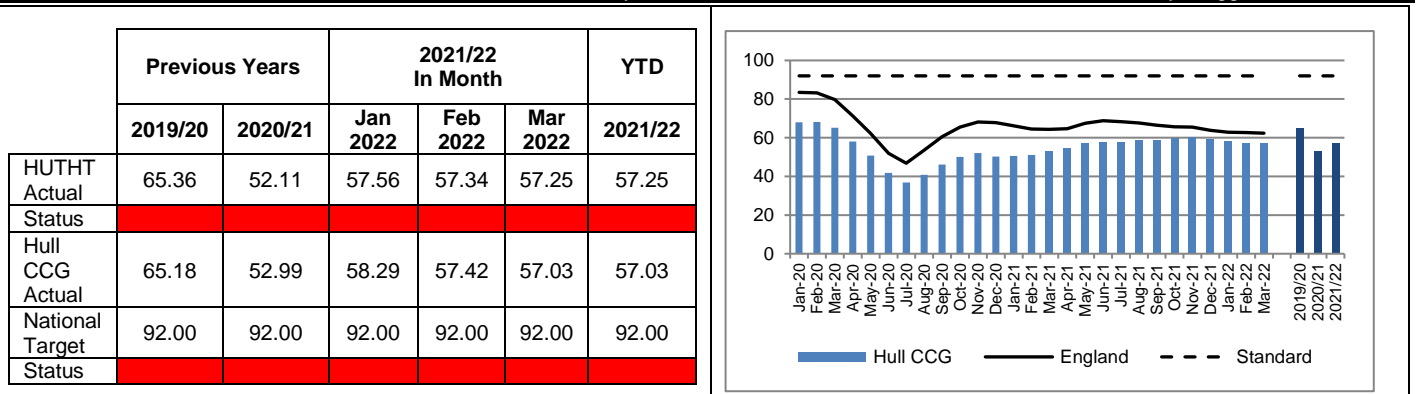
*December 2021 data was reported to NHSE incorrectly as 2 breaches. HUTHT have confirmed this should have been 1 breach which was not a Hull CCG patient.

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 has been consistent over the year and shows an overall improvement in 2021/22 when compared to 2020/21.

Hull CCG position at March 2022 was 57.03%, an improvement on the March 2021 position, 52.99%.

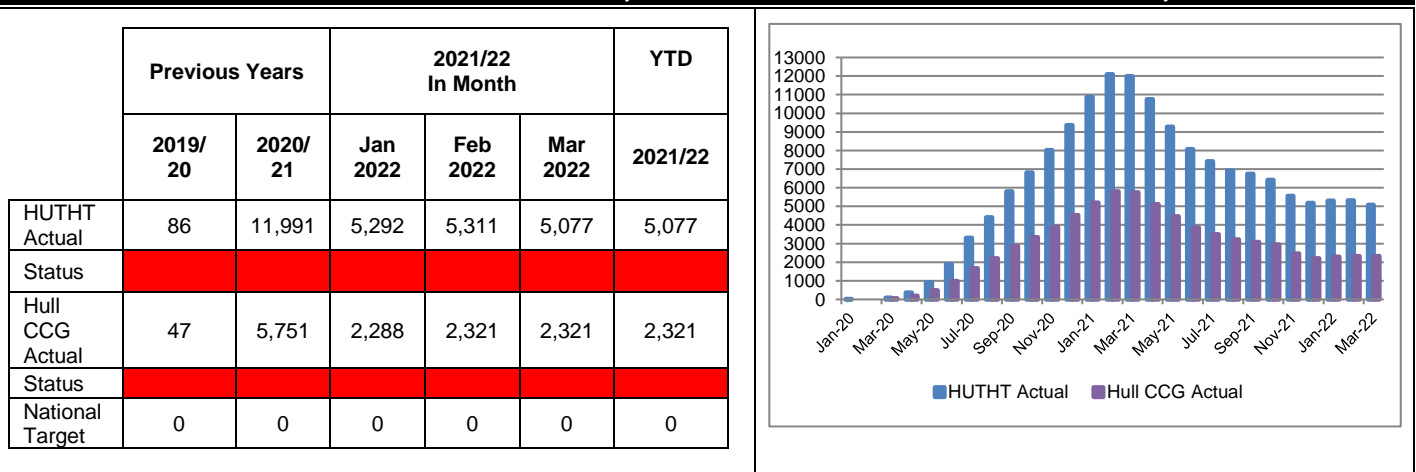
[Statistics » Consultant-led Referral to Treatment Waiting Times Data 2021-22 \(england.nhs.uk\)](#)

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 2,321 patients waiting over 52+ weeks at the end of March 2022. There has been no change in the reported total when compared to those reported in February 2022.

In March 2022 the Trust had 5,077 patients waiting over 52+ weeks, a reduction of 234 patients when compared to the previous month, 5,311 in February 2022.

Most of the breaches relate to Ear Nose and Throat (ENT), General Surgery, Plastic Surgery, Gynaecology and Other – Surgical Services.

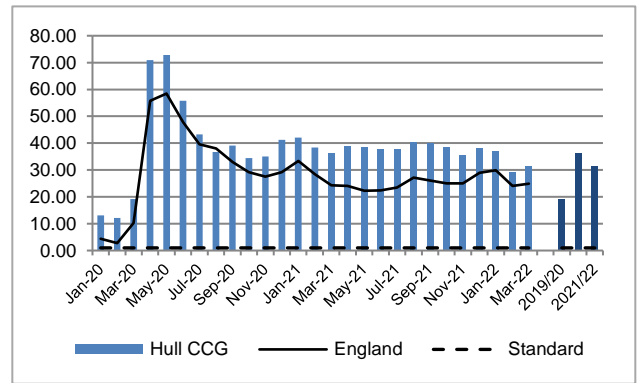
Diagnostic test waiting times (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
HUTHT Actual	20.26	37.02	37.94	30.47	32.96	32.96
HUTHT Status						
Hull CCG Actual	19.16	36.33	36.87	29.31	31.45	31.45
Status						
National Target	1.00	1.00	1.00	1.00	1.00	1.00



Hull CCG performance showed no improvement in March 2022 when compared to the previous month, reporting 31.45% of patients waiting longer than 6 weeks compared to 29.31% in February 2022.

The CCG reported 2,232 breaches during March 2022, 39% (861) of the total breaches were Endoscopy, with Colonoscopy (333) and Gastroscopy (313) combined accounting for 75% of the total Endoscopy breaches.

The final 2021/22 position for Hull CCG (31.45%) showed improvement when compared to the previous year, 2020/21 position of 36.33%.

[Statistics » Monthly Diagnostic Waiting Times and Activity \(england.nhs.uk\)](#)

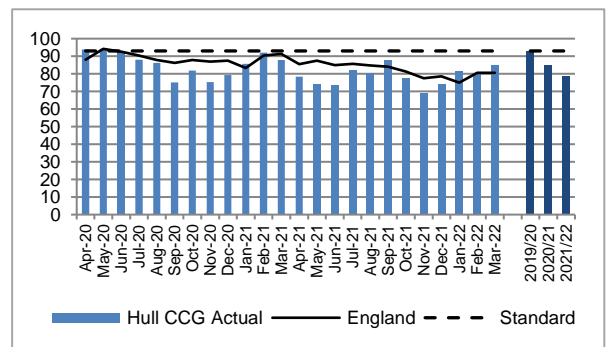
Maximum 2 week wait (%) for first outpatient appointment when referred urgently by GP with suspected cancer

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	93.09	84.82	81.63	80.45	85.01	78.70
National Target	93.00	93.00	93.00	93.00	93.00	93.00
Status						
Total Seen	9,861	8,656	800	793	994	10,589
Breaches	681	1,314	147	155	149	2255



March 2022 performance was 85.01% for Hull CCG with 994 patients seen and 149 breaches. 103 (69%) breaches were due to inadequate out-patient capacity, 40 breaches were due to patient choice, 3 breaches due to clinic cancellation, and 3 breaches were due to administrative delays.

The 2021/22 final position for Hull CCG was 78.70%, a reduction in performance from the 2020/21 final position of 84.82%

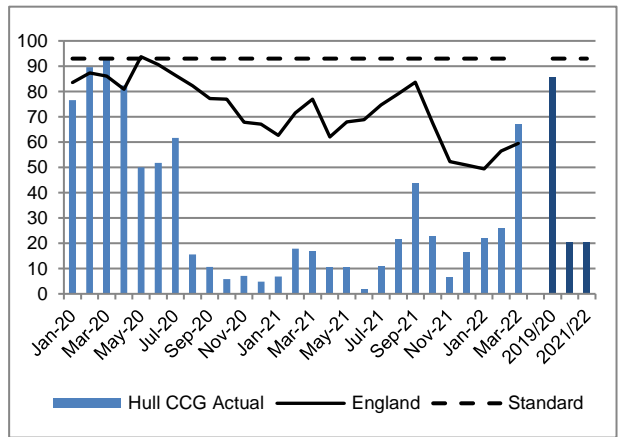
Maximum 2 week wait (%) for first outpatient appointment when referred urgently with breast symptoms

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	85.54	20.35	22.09	25.88	67.02	20.52
National Target	93.00	93.00	93.00	93.00	93.00	93.00
Status						
Total Seen (CCG)	1,604	850	86	85	94	1155
No. of Breaches (CCG)	232	677	67	63	31	918



March 2022 performance was 67.02% for Hull CCG with 94 patients seen and 31 breaches. 22 (71%) of the breaches were due to inadequate outpatient capacity, 8 breaches due to patient choice, and 1 breach due to administrative delay.

The final 2021/22 position for Hull CCG was 20.52%, showing no improvement in performance from the 2020/21 final position at 20.35%

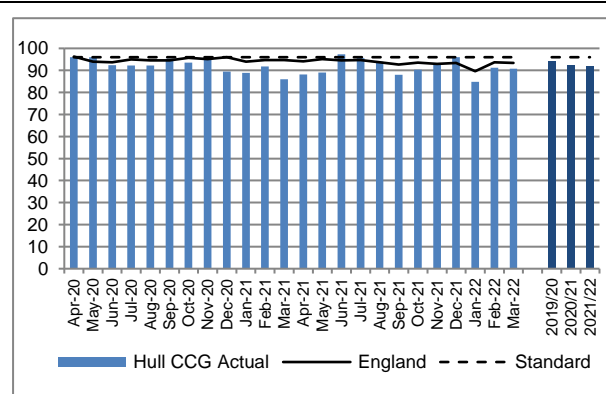
Cancer 31 day waits: Diagnosis to first definitive treatment within 31 days (all cancers) (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	94.25	92.16	84.87	91.23	90.76	91.71
National Target	96.00	96.00	96.00	96.00	96.00	96.00
Status						
No. of Breaches (CCG)	87	99	18	10	11	125



March 2022 performance reported 90.76% against the 96% target. 119 patients were seen with 11 breaches of the 31-day standard: 6 breaches due to inadequate elective capacity, 3 breaches due to complex diagnostic pathway, 1 breach due to elective cancellation, and 1 breach due to patient did not attend.

The final 2021/22 position for Hull CCG was 91.71%, a reduction in performance when compared to the 2020/21 final position at 92.16%

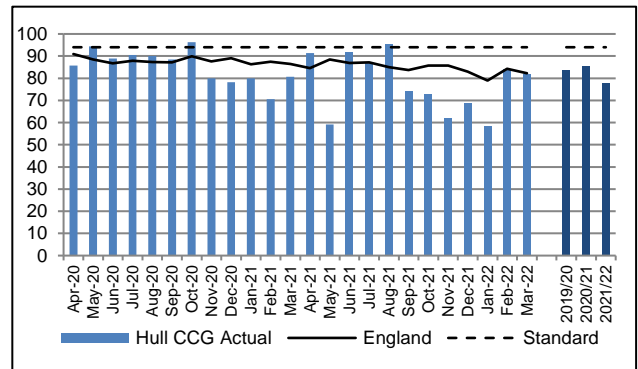
Cancer 31 day waits: 31 day wait for subsequent treatment - surgery (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	83.76	85.60	58.33	84.21	81.82	77.87
National Target	94.00	94.00	94.00	94.00	94.00	94.00
Status						
No. of Breaches (CCG)	44	36	5	3	4	56



Performance in March 2022 reported 81.82% (22 patients were seen with 4 breaches of the standard). 2 breaches were due to inadequate elective capacity with a wait time of 18 and 60 days, 1 breach due to treatment delayed for medical reasons with wait of 48 days, and 1 breach due to patient choice with a wait of 68 days.

The final position for 2021/22 was 77.87%, a reduction in performance when compared to the 2020/21 final position, 85.60%.

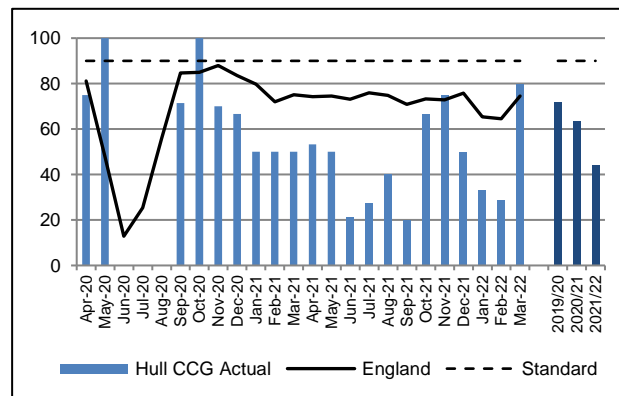
Cancer 62 day waits: first definitive treatment for cancer within 62-days of referral from an NHS Cancer Screening Service (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	71.68	63.53	33.33	28.57	80.00	44.32
National Target	90.00	90.00	90.00	90.00	90.00	90.00
Status						
No. of Breaches (CCG)	32	31	2	5	2	49



Performance in March 2022 reported 80%, an improvement when compared to 28.57% reported in February 2022. 10 patients were seen with 2 breaches of the standard. 1 breach due to complex diagnostic pathway for a breast tumour at a wait of 99 days, and 1 breach due to health care provider-initiated delay for a gynaecological tumour at a wait of 105 days.

The final position for 2021/22 was 44.32%, a reduction in performance when compared to 2020/21, reporting 63.53%.

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

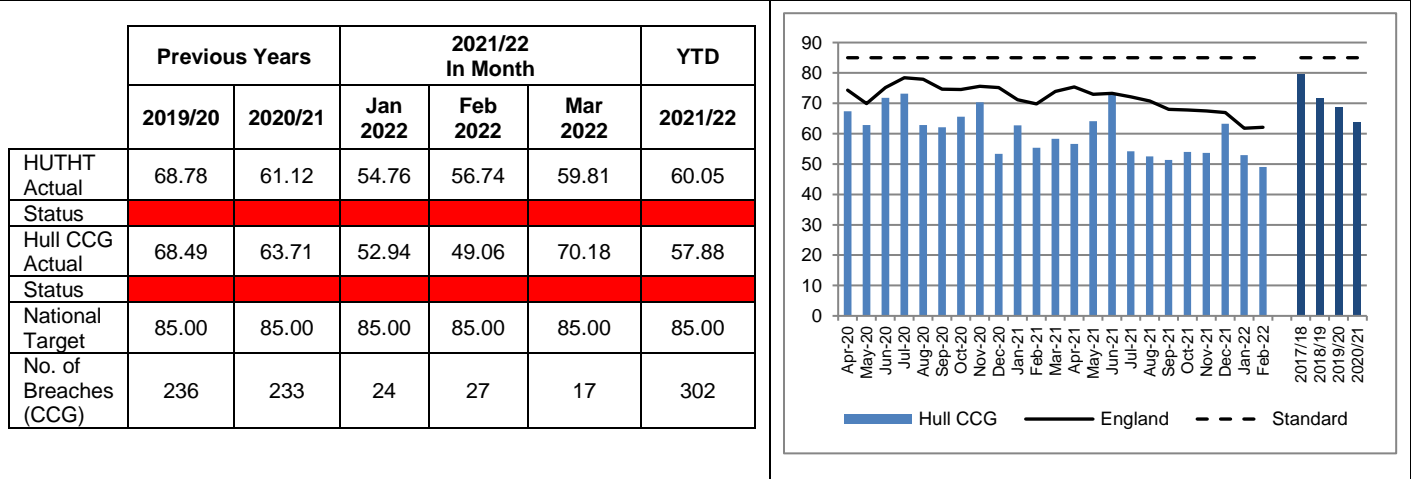
Note: Access to cancer reporting data nationally has changed and become more challenging. The CCG is increasingly dependent on providers supplying information to explain breaches of waiting time standards.

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



Hull CCG final position for 2021/22 was 57.88%, a reduction in performance when compared to the 2020/21 final position at 63.71%

Hull CCG performance in March 2022 reported 57 patients seen with 17 breaches of the standard. Breaches are summarised below:

Breach Reason	Number of Breaches	Tumour Type	Wait (Days)
Complex diagnostic pathways (many, or complex, diagnostic tests required)	7	Lower Gastrointestinal x5 Breast Upper Gastrointestinal	Between 77 & 164 days 85 days 63 days
Health care provider-initiated delay to diagnostic test or treatment planning	5	Gynaecological x2 Head & Neck Breast Haematological (excluding Acute Leukaemia)	81 and 158 days 96 days 110 days 110 days
Diagnosis delayed for medical reasons (patient unfit for diagnostic episode, excluding planned recovery period following diagnostic test)	2	Head & Neck Lung	69 days 69 days
Elective capacity inadequate (patient unable to be scheduled for treatment within standard time) for treatment in an admitted care setting	1	Urological (excluding Testicular)	73 days
Inconclusive diagnostic result	1	Urological (excluding Testicular)	73 days
Administrative delay	1	Urological (excluding Testicular)	70 days

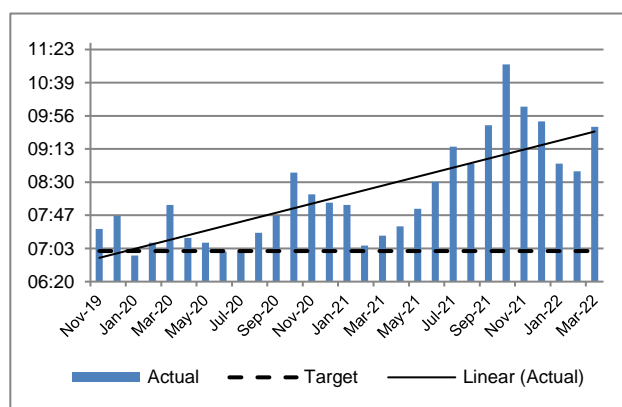
Ambulance clinical quality – Category 1 mean response time (mins)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years		2021/22 In Month			YTD
	2019/20	2020/21	Jan 2022	Feb 2022	Mar 2022	2021/22
YAS Actual	07:12	07:37	08:54	08:44	09:42	09:15
YAS Target	07:00	07:00	07:00	07:00	07:00	07:00
Status						



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 to HUTHT), for March 2022 were 48.92% and 27.08% respectively. YAS at HUTHT performance for 30+ minute and 60+ minute crew clears for March is 5.42% and 0.59% respectively.

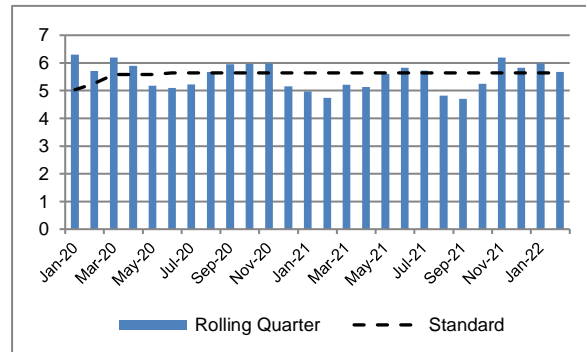
% of people entering treatment (%) - Improving Access to Psychological Therapies (IAPT)

Lead: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous years			In month position			Rolling Qtr
	2018/19	2019/20	2020/21	Dec 2021	Jan 2022	Feb 2022	
Hull CCG Actual	20.14	23.05	23.05	1.51	2.34	1.83	5.68*
National Target	20.04	19.89	22.50	1.88	1.88	1.88	5.64
Status							



* 'Rolling Quarter' covers 3-month interval, December 2021 – February 2022. The national target is for achievement of a 'rolling quarter'.

The overall rolling quarter position against the national target was achieved. The indicator continues to be monitored by NHS England and the CCG.

Note: latest reporting data is February 2022.

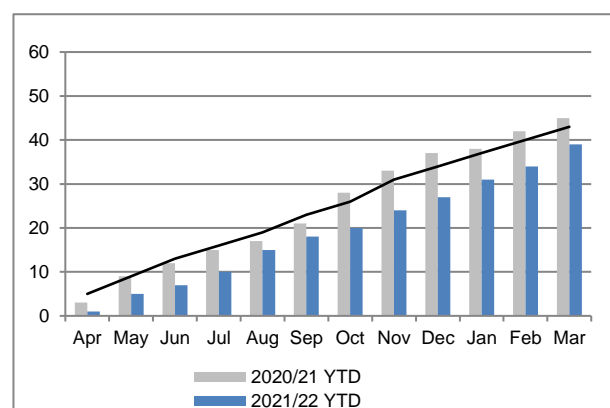
Quality Indicator Exceptions

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	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	50	45	4	3	5	39
Target	56	56	3	3	3	43
Status						



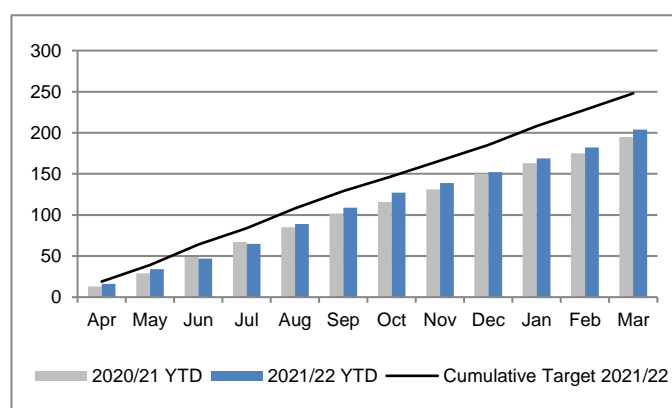
In 2021/22 the CCG reported 39 cases of C.difficile YTD, 6 fewer than compared to the previous year (45 cases), with the CCG achieving the target of less than 43 cases during the year.

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	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	250	195	17	13	22	204
Target	211	211	23	20	20	248
Status						



In 2021/22 the CCG reported 204 cases of E. Coli, 9 more than reported in the previous year (195 cases) with the CCG achieving the target of less than 248 cases during the year.

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

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years (YTD)				2021/22 In Month						YTD
	2017/18	2018/19	2019/20	2020/21	Oct 2021	Nov 2021	Dec 2021	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	2	2	2	1	1	0	1	1	0	1	4
Target	0	0	0	0	0	0	0	0	0	0	0
Status											

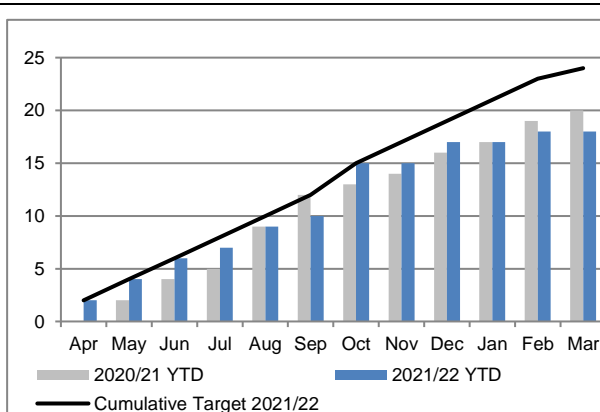
In 2021/22 the CCG reported 4 cases of MRSA, 3 more than reported in the previous year (1 case in 2020/21).

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	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	26	20	0	1	0	18
Target			2	2	1	24
Status						



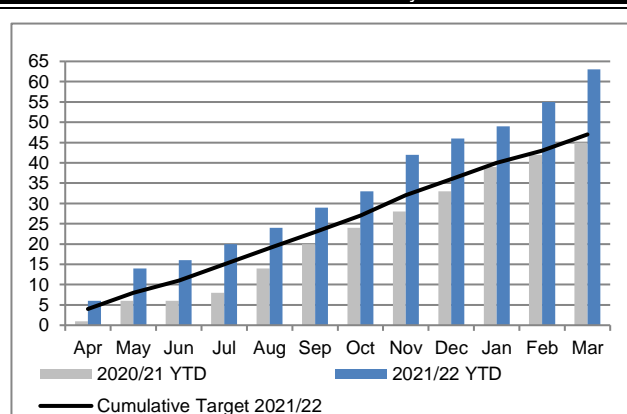
In 2021/22 the CCG reported 18 cases of Pseudomonas, 2 fewer than reported in the previous year (20 cases) with the CCG also achieving the target of less than 24 cases.

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	Jan 2022	Feb 2022	Mar 2022	2021/22
Hull CCG Actual	52	45	3	6	8	63
Target			4	4	4	47
Status						



In 2021/22 the CCG reported 63 cases of Klebsiella, 18 more than reported in the previous year (45 cases) with the CCG not achieving the target of less than 47 cases.