



South Sefton
Clinical Commissioning Group

South Sefton Clinical Commissioning Group

Integrated Performance Report November 2018

Summary Performance Dashboard

Metric	Reporting Level		2018-19												YTD
			Q1			Q2			Q3			Q4			
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
E-Referrals															
2142: NHS e-Referral Service (e-RS) Utilisation Coverage Utilisation of the NHS e-referral service to enable choice at first routine elective referral. Highlights the percentage via the e-Referral Service.	South Sefton CCG	RAG	R	R	R	R	R	R	R					R	
		Actual	32.129%	32.129%	47.013%	50.703%	62.07%	73.26%	73.12%						52.3%
		Target	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%
Diagnostics & Referral to Treatment (RTT)															
1828: % of patients waiting 6 weeks or more for a diagnostic test The % of patients waiting 6 weeks or more for a diagnostic test	South Sefton CCG	RAG	R	R	R	R	R	R	R	R				R	
		Actual	2.733%	2.066%	2.254%	3.161%	3.009%	3.728%	3.76%	3.08%					2.95%
		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%
1291: % of all Incomplete RTT pathways within 18 weeks Percentage of Incomplete RTT pathways within 18 weeks of referral	South Sefton CCG	RAG	R	R	R	R	R	R	R	R				R	
		Actual	90.112%	90.458%	89.959%	89.296%	88.554%	87.882%	87.87%	89.32%					89.19%
		Target	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%
1839: Referral to Treatment RTT - No of Incomplete Pathways Waiting >52 weeks The number of patients waiting at period end for incomplete pathways >52 weeks	South Sefton CCG	RAG	R	R	R	R	R	R	R	R				R	
		Actual	3	3	10	9	6	1	3	4					39
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
Cancelled Operations															
1983: Urgent Operations cancelled for a 2nd time Number of urgent operations that are cancelled by the trust for non-clinical reasons, which have already been previously cancelled once for non-clinical reasons.	AINTREE	RAG	G	G	G	G	G	G	G	G				G	
		Actual	0	0	0	0	0	0	0	0					0
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0

Metric	Reporting Level		2018-19												YTD
			Q1			Q2			Q3			Q4			
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Cancer Waiting Times															
191: % Patients seen within two weeks for an urgent GP referral for suspected cancer (MONTHLY) The percentage of patients first seen by a specialist within two weeks when urgently referred by their GP or dentist with suspected cancer	South Sefton CCG	RAG	R	R	R	R	G	R	R	R					R
		Actual	90.40%	90.41%	88.6%	92.69%	93.84%	92.6%	88.9%	92.25%					91.24%
		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%
17: % of patients seen within 2 weeks for an urgent referral for breast symptoms (MONTHLY) Two week wait standard for patients referred with 'breast symptoms' not currently covered by two week waits for suspected breast cancer	South Sefton CCG	RAG	R	G	G	G	R	R	G	G					G
		Actual	92.06%	94.32%	96.1%	94.00%	87.84%	89.83%	100%	96.43%					93.6%
		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%
535: % of patients receiving definitive treatment within 1 month of a cancer diagnosis (MONTHLY) The percentage of patients receiving their first definitive treatment within one month (31 days) of a decision to treat (as a proxy for diagnosis) for cancer	South Sefton CCG	RAG	R	G	G	G	G	G	G	G					G
		Actual	95%	100%	96.0%	97.26%	97.37%	96.9%	100%	98.8%					97.8%
		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%
26: % of patients receiving subsequent treatment for cancer within 31 days (Surgery) (MONTHLY) 31-Day Standard for Subsequent Cancer Treatments where the treatment function is (Surgery)	South Sefton CCG	RAG	G	G	R	G	G	G	R	G					G
		Actual	100%	100%	84.6%	100%	100%	100%	92.9%	100%					97.2%
		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%
1170: % of patients receiving subsequent treatment for cancer within 31 days (Drug Treatments) (MONTHLY) 31-Day Standard for Subsequent Cancer Treatments (Drug Treatments)	South Sefton CCG	RAG	G	G	G	G	G	G	G	G					G
		Actual	100%	100%	96.30%	100%	100%	100%	100%	100%					99.49%
		Target	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%
25: % of patients receiving subsequent treatment for cancer within 31 days (Radiotherapy Treatments) (MONTHLY) 31-Day Standard for Subsequent Cancer Treatments where the treatment function is (Radiotherapy)	South Sefton CCG	RAG	G	G	G	G	G	G	G	G					G
		Actual	96.43%	100%	100%	100%	94.4%	100%	100%	96.77%					98.43%
		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%

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		Q1			Q2			Q3			Q4			YTD
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	

541: % of patients receiving treatment for cancer within 62 days upgrade their priority (MONTHLY) % of patients treated for cancer who were not originally referred via an urgent GP/GDP referral for suspected cancer, but have been seen by a clinician who suspects cancer, who has upgraded their priority.	South Sefton CCG	RAG	R	R	R	G	R	R	R	R					R	
		Actual	70%	63.636%	83.333%	88.889%	77.778%	75.00%	66.67%	66.7%						73.97%
		Target	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85%	85%	85%	85%	85%	85%
540: % of patients receiving treatment for cancer within 62 days from an NHS Cancer Screening Service (MONTHLY) Percentage of patients receiving first definitive treatment following referral from an NHS Cancer Screening Service within 62 days.	South Sefton CCG	RAG	G	R	R	G	G	G	R	G					R	
		Actual	-	66.667%	0.00%	100.00%	100.00%	100.00%	83.33%	100%						88.57%
		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%
539: % of patients receiving 1st definitive treatment for cancer within 2 months (62 days) (MONTHLY) The % of patients receiving their first definitive treatment for cancer within two months (62 days) of GP or dentist urgent referral for suspected cancer	South Sefton CCG	RAG	R	R	R	R	G	R	R	R					R	
		Actual	82.759%	83.784%	82.927%	71.795%	88.235%	66.667%	79.41%	70.37%						78.34%
		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%

Accident & Emergency																
2123: 4-Hour A&E Waiting Time Target (Monthly Aggregate based on HES 15/16 ratio) % of patients who spent less than four hours in A&E (HES 15/16 ratio Acute position from Unify Weekly/Monthly SitReps)	South Sefton CCG	RAG	R	R	R	R	R	R	R	R					R	
		Actual	86.6%	87.39%	88.3%	87.27%	89.76%	87%	83.5%	81%						86.39%
		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%
1928: 12 Hour Trolley waits in A&E Total number of patients who have waited over 12 hours in A&E from decision to admit to admission	AINTREE	RAG	G	G	G	R	G	G	G	G					R	
		Actual	0	0	0	1	0	0	0	0						1
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0	0

EMSA															
1067: Mixed sex accommodation breaches - All Providers No. of MSA breaches for the reporting month in question for all providers	South Sefton CCG	RAG	G	R	R	G	R	G	G	R					R
		Actual	0	2	2	0	1	0	0	2					7
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
1812: Mixed Sex Accommodation - MSA Breach Rate MSA Breach Rate (MSA Breaches per 1,000 FCE's)	South Sefton CCG	RAG	G	R	R	G	R	G	G	R					R
		Actual	0	0.30	0.30	0.00	0.20	0	0	0.3					
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0

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		Q1			Q2			Q3			Q4				
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		

HCAI															
497: Number of MRSA Bacteraemias Incidence of MRSA bacteraemia (Commissioner) (Cumulative)	South Sefton CCG	RAG	G	G	G	R	R	R	R	R					R
		YTD	0	0	0	1	1	1	1	1					1
		Target	0	0	0	0	0	0	0	0	0	0	0	0	0
24: Number of C.Difficile infections Incidence of Clostridium Difficile (Commissioner) (Cumulative)	South Sefton CCG	RAG	R	G	R	R	R	R	R	R					R
		YTD	6	9	16	22	26	35	39	44					44
		Target	5	9	14	18	22	26	31	35	40	44	49	53	9

Mental Health																
138: Proportion of patients on (CPA) discharged from inpatient care who are followed up within 7 days The proportion of those patients on Care Programme Approach discharged from inpatient care who are followed up within 7 days	South Sefton CCG	RAG	G	G										G		
		Actual	100%	96.774%												
		Target	95.00%	95.00%		95.00%		95.00%		95.00%		95.00%		95.00%		
Episode of Psychosis																
2099: First episode of psychosis within two weeks of referral The percentage of people experiencing a first episode of psychosis with a NICE approved care package within two weeks of referral. The access and waiting time standard requires that more than 50% of people do so within two weeks of referral.	South Sefton CCG	RAG	G	G	G	G	G	G	G	R					G	
		Actual	80.00%	100.00%	57.14%	100%	75.00%	66.67%	75.00%	50%						70.27%
		Target	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%	53.00%

Metric	Reporting Level	2018-19												YTD
		Q1			Q2			Q3			Q4			
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IAPT (Improving Access to Psychological Therapies)															
2183: IAPT Recovery Rate (Improving Access to Psychological Therapies) The percentage of people who finished treatment within the reporting period who were initially assessed as 'at caseness', have attended at least two treatment contacts and are coded as discharged, who are assessed as moving to recovery.	South Sefton CCG	RAG	R		R										R
		Actual	48.065%		46.046%										45.837%
		Target	50.00%		50.00%		50.00%		50.00%		50.00%		50.00%		
2131: IAPT Access The proportion of people that enter treatment against the level of need in the general population i.e. the proportion of people who have depression and/or anxiety disorders who receive psychological therapies	South Sefton CCG	RAG	R		R										R
		Actual	3.66%		3.70%										7.37%
		Target	4.20%		4.20%		4.20%		4.20%		4.20%		4.74%		
2253: IAPT Waiting Times - 6 Week Waiters The proportion of people that wait 6 weeks or less from referral to entering a course of IAPT treatment against the number who finish a course of treatment.	South Sefton CCG	RAG	G		G										G
		Actual	99.4%		99.7%										99.5%
		Target	75.00%		75.00%		75.00%		75.00%		75.00%		75.00%		75.00%
2254: IAPT Waiting Times - 18 Week Waiters The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT	South Sefton CCG	RAG	G		G										G
		Actual	100%		100%										100%

treatment, against the number of people who finish a course of treatment in the reporting period.	Target	95.00%	95.00%	95.00%	95.00%	95.00%
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Metric	Reporting Level	2018-19												YTD
		Q1			Q2			Q3			Q4			
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	

Dementia

2166: Estimated diagnosis rate for people with dementia Estimated diagnosis rate for people with dementia	South Sefton CCG	RAG	R	R	R	R	R	R	R	R					R
		Actual	62.022%	62.05%	63.442%	63.796%	64.518%	64.706%	65.06%	64.7%					63.79%
		Target	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%	66.70%

Children and Young People with Eating Disorders

2095: The number of completed CYP ED routine referrals within four weeks The number of routine referrals for CYP ED care pathways (routine cases) within four weeks (QUARTERLY)	South Sefton CCG	RAG	G	G										G	
		Actual	100%	100%											100%
		Target	100%	100%				100%			100%				100%
2096: The number of completed CYP ED urgent referrals within one week The number of completed CYP ED care pathways (urgent cases) within one week (QUARTERLY)	South Sefton CCG	RAG	G	R										G	
		Actual	100%	100%											100%
		Target	100%	100%				100%			100%			100%	100%

Wheelchairs

2197: Percentage of children waiting less than 18 weeks for a wheelchair The number of children whose episode of care was closed within the reporting period, where equipment was delivered in 18 weeks or less of being referred to the service.	South Sefton CCG	RAG												
		Actual	Nil Return	Nil Return										
		Target	92.00%	92.00%				92.00%			92.00%			92.00%

1. Executive Summary

This report provides summary information on the activity and quality performance of South Sefton Clinical Commissioning Group at Month 8 (note: time periods of data are different for each source).

Financial position

This report focuses on the financial performance for South Sefton CCG as at 31 December 2018.

The year to date financial position is a deficit of £1.000m, which represents deterioration against the planned surplus of £0.200m.

As at 31 December 2018, the full year forecast financial position is £1m surplus. This position requires the QIPP plans to be achieved in full. It is important to recognise that significant risk exists in terms of delivering the plans in full.

The most likely financial outturn position for the CCG assessed at 31 December 2018 is a deficit of £4.000m before mitigation, this includes the predicted QIPP delivery during the year forecast to be £2.379m. Agreed mitigations of £2.000m will reduce this position to £2.000m deficit.

Planned Care

GP referrals for South Sefton CCG patients have now been below 2017/18 levels for four consecutive months. It is anticipated that the data quality issue identified at Aintree Hospital in month 6 may responsible for be partly this apparent reduction.

The CCG failed the target for less than 1% of patients waiting more than 6 weeks for a diagnostic test in November recording 3.1%, a slight improvement from last month when 3.76% was recorded. Aintree failed the under 1% of patients waiting over 6 weeks for a diagnostic test in November recording 3.3%, slightly higher than last month when 3.27% was reported.

In November, there were 4 South Sefton patients waiting on the incomplete pathway for 52+ weeks against the national zero tolerance threshold. Two of these patients were waiting for bariatric surgery at North Midlands and were treated in December. Two patients were waiting under gynaecology for treatment at Liverpool Women's Hospital; one patient's treatment completed on 19th December 2018, the other is yet to receive a TCI date.

The CCG continues to report performance below the 92% standard for patients on an incomplete non-emergency pathway waiting no more than 18 weeks, with 89.3% in November. This is an improvement on last month.

The CCG are failing 4 of the 9 cancer measures year to date. Aintree are failing 5 of the 9 cancer measures. The longest waiting patient in November at Aintree was 201 days.

Aintree Friends and Family Inpatient test response rates have fallen further below the England average of 24.9% in November at 20.3%; this is a decline from last month when 21% was recorded. The percentage of patients who would recommend the Trust has not improved and is therefore still below the England average of 96% with 94%. The proportion who would not recommend has fallen from 4% in October to 2% in November and now in line with the England average.

Performance at Month 8 of the financial year 2018/19, against planned care elements of the contracts held by NHS South Sefton CCG show a minor under performance of -£104k/-0.3%. However, applying a neutral cost variance for those Trusts within the Acting as One block contract arrangement results in there being an over spend of approximately £600k/1.8%.

Unplanned Care

Aintree have revised their Cheshire & Merseyside 5 year Forward View (STP) trajectory for 2018/19. The Trust have failed their STP target of 91.7% in November reaching 84.49% (YTD 86.33%). 2,120 attendances out of 13,673 were not admitted, transferred or discharged within 4 hours.

NWAS continues to be monitored in regard to service improvement and performance requirements in line with the Ambulance Response Programme. There have been significant improvements against many areas of the agreed Performance Improvement Plan which needed to be demonstrated by the end of Quarter 2. We have been advised that a summary report is being developed to share with CCG Governing Bodies in regard to the performance position at the end of Quarter 2. However, comparative performance data on other ambulance services across the country is still awaited for inclusion in the report.

The CCG had 5 new cases of C.Difficile in November 2018 bringing the year to date total to 44, against a year to date plan of 35 (17 apportioned to acute trust and 27 apportioned to community). The CCG had no new cases of MRSA in November but the 1 case of MRSA in July apportioned to the community has failed the zero tolerance threshold for 2018/19. Aintree had no new cases of MRSA in November but as they had a case in May they have also failed the threshold for 2018/19.

NHS Improvement and NHS England have set CCG targets for reductions in E.coli for 2018/19 NHS South Sefton CCG's year-end target is 128. In November there were 10 cases (112 YTD) against a year to date plan of 85. Aintree reported 25 cases in November (241 YTD). There are no targets set for Trusts at present.

Performance at Month 8 of financial year 2018/19, against unplanned care elements of the contracts held by NHS South Sefton CCG shows an over performance of circa £1.4m/5.2%. However, applying a neutral cost variance for those Trusts within the Acting as One block contract arrangement results in there being a reduced over spend of approximately £360k/1.1%.

Mental Health

Mersey Care has reported below the 95% CPA follow up within 48 hours target in November with just 1 breach. The 53% target for Early Intervention Psychosis (EIP) 2 week waits was also failed with 50% due to 3 breaches.

In terms of Improving Access to Psychological Therapies (IAPT), Cheshire and Wirral Partnership reported 299 patients entering treatment in Month 8, which is a 16.9% decrease from the 360 reported in Month 7. The access rate for Month 8 was 1.23% and therefore failed to achieve the standard. The percentage of people moved to recovery was 55.2% in Month 8, which is higher than the 45.9% for the previous month and achieving the target of 50%.

The latest data on the HSCIC website shows South Sefton CCG are recording a dementia diagnosis rate in November of 64.7%, which is under the national dementia diagnosis ambition of 66.7% and a slight decline on last month when 65.1% was reported.

Community Health Services

The information leads from the CCG and Mersey Care continue to meet on a monthly basis to discuss the current contract performance. Along with the performance review of each service, discussions regarding new ways of reporting for 2019/20 are being had. The service reviews are now complete and the Trust and CCG community contract leads have had a number of meetings to discuss outcomes and recommendations. It has been agreed that reporting requirements and activity baselines will be reviewed alongside service specifications and transformation.

Better Care Fund

A quarter 2 BCF performance monitoring return was submitted on behalf of the Sefton Health and Wellbeing Boards in November 2018. This reported that all national BCF conditions were met; progress against national metric targets for non-elective hospital admissions, admissions to residential care, Reablement and Delayed Transfers of Care; assessment against the High Impact Change Model; and narrative of progress to date.

CCG Improvement & Assessment Framework

A full exception report for each of the indicators citing performance in the worst quartile of CCG performance nationally or a trend of three deteriorating time periods is presented to Governing Body as a standalone report. This outlines reasons for underperformance, actions being taken to address the underperformance, more recent data where held locally, the clinical, managerial and SLT leads responsible and expected date of improvement for the indicators.