

Performance, Quality and Outcomes Report: Position Statement

Governing Body Update

Item 2

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Purpose of Paper	
To update Governing Body on key performance, quality and outcomes measures.	
Key Issues	
<p>1. <u>Areas of concern, which remain under review</u></p> <p><u>Cancer waiting times</u></p> <p>The following national waiting time standards for Cancer were not met on a CCG basis in July: 31 day wait for subsequent treatment of radiotherapy or surgery, 62 day wait from urgent GP referral to first treatment and the 62 day wait from consultant upgrade.</p> <p>The Cancer Alliance is addressing the capacity and demand issues which affect STH and neighbouring providers' issues through joint action. Despite concerted work to manage capacity across the system, and additional support from the Cancer Alliance, it is likely that these issues will not be fully resolved until Quarter 3 of 2019/20. Workforce shortages, theatre capacity and availability of equipment continue to be challenging issues across the areas covered by the Alliance (South Yorkshire, Bassetlaw and North Derbyshire).</p> <p><u>Improving Access to Psychological Therapies (IAPT)</u></p> <p><i>Access:</i> The performance measure for the rollout of IAPT services has been updated for 2019/20 – the expectation is that by the end of 2019/20, 22% of the estimated people with an unmet need (of depression and/or anxiety disorder) will access IAPT services. Published data for the first quarter of the year shows that the target is not being achieved. The IAPT service carried out a "deep dive" into its performance in July to look at capacity gaps and to analyse any differences across the city. The data from the deep dive will be scrutinised in the October Contract Monitoring Group and the actions reported here.</p> <p><i>Recovery:</i> Governing Body members will be aware that SHSC has struggled to deliver the national standard on a consistent basis for 50% of patients moving towards recovery. The target had been achieved for 4 consecutive months, however the latest month (for June) shows a slight drop in performance to below 49.37%.</p>	

2. Performance and quality highlights

Diagnostics

During July, STH met the waiting times target for Diagnostics – 99.98% patients received their diagnostics test within 6 weeks. This is after 2 months of being below target due to workforce issues within Ultrasound – these have now been resolved.

Delayed Transfers of Care

The previous five months of data show continued reduction since last year in the volume of days where patients are experiencing delays in their transfer of care out of hospital. In July, Sheffield met the national target.

Ambulance Response Times

During July, the Ambulance response times for 3 out of the 4 types of calls achieved the national standard – this was for Category 1 (Life Threatening), Category 3 (Urgent) and Category 4 (Less Urgent). Previous figures in this report showed incorrectly that the target for category 4 was not being achieved, however when the correct data is used, it shows that, 90% of calls were responded to in 1 hour, 41 minutes, 39 seconds (against the target of 3 hours).

Education Health Care Plans (EHCPs)

Encouraging progress is being made in reducing the length of time taken to produce EHCPs; of the 41 agreed in August, 38 were issued with the national required timescale of 20 weeks.

GP Patient Survey 2019

Results from the GP Patient Survey were published in July 2019; this survey provides information on patients' overall experience of primary care services and their overall experience of accessing these services. 84% Sheffield respondents rated their GP practice as "good". This was a slight improvement on 2018 (83%) and slightly above the national score of 83%. For the majority of questions relating to satisfaction with services, Sheffield scores were at or above the national average and were the same as, or improved from, 2018. Exceptions were ease of getting through on the phone, satisfaction with appointment times available, healthcare professionals being good at recognising mental health needs, and some aspects of care related to long term conditions.

National Cancer Patient Experience Survey 2018

The survey was published in September 2019, for Sheffield CCG, the average rating given by respondents when asked to rate their care on a scale of zero (very poor) to 10 (very good) was 8.8 - this was the same as the national score. The survey includes 58 questions about patients' experiences of their care and treatment in primary and secondary care. Sheffield CCG scored outside the expected range on six questions. The CCG scored **above** the expected range for "Hospital staff gave information about support groups," "Overall the administration of the care was very good / good," and "Taking part in cancer research discussed with patient." The CCG scored below expected range for "Patient completely understood the explanation of what was wrong," "Patient given easy to understand written information about the type of cancer they had," and "All staff asked patient what name they preferred to be called by."

Issues to note

NHS Oversight Framework

NHS England and NHS Improvement have recently published the new NHS Oversight Framework. This document outlines the joint approach that NHSE and NHSI will take to oversee organisational performance for CCGs and providers. This new framework will replace the Improvement and Assessment Framework (IAF) previously used to monitor CCGs. It will be used to assess CCG performance for the current year. The Framework contains most of the metrics from the IAF with the addition of 6 new indicators, which address: evidence based interventions, waiting times, expenditure on children and young people's eating disorders; low priority prescribing and timeliness of reviews of the unexpected deaths of people with learning disabilities.

Is your report for Approval / Consideration / Noting

Consideration.

Recommendations / Action Required by Governing Body

The Governing Body is asked to discuss and note:

- Sheffield performance on delivery of the NHS Constitution Rights and Pledges
- Key issues relating to Quality, Safety and Patient Experience

What assurance does this report provide to the Governing Body in relation to Governing Body Assurance Framework (GBAF) objectives?

Which of the CCG's Objectives does this paper support?

1. To improve patient experience and access to care
2. To improve the quality and equality of healthcare in Sheffield

Specifically, the risks:

- 1.2 System wide or specific provider capacity problems emerge in secondary and / or primary care to prevent delivery of statutory requirements of the NHS Constitution.
- 2.1 Providers delivering poor quality care and not meeting quality targets particularly in a period of system wide organisational changes.

Description of Assurances for Governing Body

- Quality & Outcomes Report to Governing Body
- A&E Delivery Board Minutes
- Operational Resilience Group
- PMO assurance documentation and delivery plans
- Contracting Monitoring Board minutes
- Primary Care escalation meetings (supporting Primary Care Framework)
- Quality Assurance Committee minutes
- Commissioning for Quality Strategy
- Safeguarding and Serious Incident reports
- CQC inspection review of providers and provider action plans

- Clinical Audit reports

Are there any Resource Implications (including Financial, Staffing etc)?

Not applicable at this time.

Have you carried out an Equality Impact Assessment and is it attached?

Not completed; the attached report is a position statement on quality and performance standards and describes work being taken forward to address any shortcomings in CCG core business.

Have you involved patients, carers and the public in the preparation of the report?

This paper reports on the achievement of quality and performance measures of our providers, including contractual and national Constitutional requirements. Reporting is based on nationally agreed data sets and standards. Patient views are addressed in the Quality dashboard, in the patient reported outcome measures (PROMS), and in the coverage of Trust performance relating to complaints and the Friends and Family Test.

Highest Quality Health Care - Provider CQC Ratings

The following table provides an overview of CQC (Care Quality Commission) inspection ratings for the 3 largest providers within Sheffield CCG locality. (Sheffield Teaching Hospitals, Sheffield Children's Hospital and Sheffield Health and Social Care The CQC monitors, inspects and regulates health and social care services.

Organisation Name	Date of latest inspection report	Specialism / Services	CQC rating	CQC Rating	Comments
Sheffield Health and Social Care NHS Foundation Trust https://www.cqc.org.uk/provider/TAH	05/10/2018	Overall Rating	Requires Improvement	Is the service safe? – Requires Improvement Is the service effective? – Good Is the service caring? – Good Is the service responsive? – Good Is the service well-led? – Requires Improvement	The Trust has an action plan in place to address key areas of concern. The CCG took some actions to gain further assurance, including a Board to Board meeting. The Trust are making progress against the CQC action plan and working closely with CQC. A further CQC inspection is anticipated after October. The CCG continues to have ongoing concerns relating to staffing levels and complaints management.
		Wards for people with a learning disability or autism	Good		
		Long stay or rehabilitation mental health wards for working age adults	Good		
		Community mental health services with learning disabilities or autism	Good		
		Acute wards for adults of working age and psychiatric intensive care units	Requires Improvement		
		Community-based mental health services for adults of working age	Good		
		Community-based mental health services for older people	Outstanding		
		Forensic inpatient/secure wards	Requires improvement		
		Mental health crisis services and health-based places of safety	Requires improvement		
		Substance misuse services	Good		
Wards for older people with mental health problems	Good				

