

**WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP
BOARD MEETING**

12 March 2019

Title of the report:	Assurance Report from the Provider Performance Assurance Group (PPAG) – February 2019
Section:	Board Pack for Information
Report by:	Jayshree Raval Commissioning Collaborative Support Officer ELR CCG
Presented by:	Caroline Trevithick, Interim Accountable Officer

Report supports the following West Leicestershire CCG's goal(s):			
Improve health outcomes	✓	Improve the quality of health-care services	✓
Use our resources wisely			

Equality Act 2010 – positive general duties:
<ol style="list-style-type: none"> 1. The CCG is committed to fulfil its obligations under the Equality Act 2010, and to ensure services commissioned by the CCG are non-discriminatory on the grounds of any protected characteristics. 2. The CCG will work with providers, service users and communities of interest to ensure any issues relating to equality of service within this report are identified and addressed.

Additional Paper details:	
Please state relevant Constitution provision	Governing Body functions: <ul style="list-style-type: none"> • Section 5.2.4: Act with a view to securing continuing improvement to the quality of services • Section 6.5.1(f): Monitoring Performance Against Plan
Please state relevant Scheme of Reservation and Delegation provision (SORD)	N/A
Please state relevant Financial Scheme of Delegation provision	N/A
Please state reason why this paper is being presented to the WLCCG Board	To update the Board on provider performance & areas of concern
Discussed by	Provider Performance Assurance Group
Alignment with other strategies	2017/2019 Operational Plan
Environmental Implications	None identified.



Has this paper been discussed with members of the public and other stakeholders? If so, please provide details	N/A
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EXECUTIVE SUMMARY:

This report is from the Provider Performance Assurance Group (PPAG); a meeting held in common of the 3 Leicester, Leicestershire and Rutland CCGs. This report provides the Governing Body with assurance about the arrangements in place to collaboratively monitor the contracts and performance of our key providers.

RECOMMENDATION:

The West Leicestershire Clinical Commissioning Group Board is requested to:

- **RECEIVE** the assurance report from PPAG.

WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP

GOVERNING BODY MEETING 12 March 2019

Assurance Report from the Provider Performance Assurance Group (PPAG) – February 2019

Introduction

1. The purpose of this report is for Provider Performance Assurance Group (PPAG) to provide the Governing Body with a summary of the assurance received from the Contract Leads in relation to performance across the collaborative contracts, and the respective providers' performance.
2. In addition, the report provides a summary of the items for escalation from PPAG during February 2019 for consideration by the Governing Body, and to ensure that the Governing Body is alerted to emerging risks or issues.
3. PPAG is a meeting held in common consisting of members from across each of the 3 Leicester, Leicestershire and Rutland CCGs. PPAG's role is to:
 - Receive assurance and hold to account the Contract Leads;
 - Advise, make suggestions and recommend actions on provider performance as appropriate; and
 - Provide onward assurance to the respective Governing Bodies.

Provider review and areas of concern

4. At the meeting in February 2019, PPAG received a report from each of the Contract Leads from across the 3 CCGs with the main focus on the University Hospitals of Leicester (UHL's) contractual performance.
5. This report provides an overview and update on key areas of discussion and highlights issues for escalation from PPAG to the Governing Body.

Deep –Dive report from Leicester City CCG:

University Hospitals of Leicester (UHL)

6. It was reported that there are a number of longstanding performance issues at UHL affecting the expected standards for access and quality of care. The purpose of the deep-dive was to review the position and outline further contractual actions required to improve the provider's performance. It was highlighted that in December 2018, UHL achieved 82.2% cancer 62day target against the 85% national standard. This has been an improvement to previous months performance. Monthly review of the remedial action plan (RAP) takes place via the Cancer Working Group and Cancer Pathway Programme Board.

7. The presentation highlighted the actions undertaken in developing to support cancer performance improvement. It was reported that writing of the Cancer Strategy for LLR is underway. In addition there is a joint system wide 90 day plan in respect of strengthening the governance and improvement of the cancer performance. Furthermore a joint 2ww joint Cancer audit is to be undertaken to understand the educational/support requirements. In addition the contract teams are looking to see if the actions from the 90 day plan could be incorporated into the 2019/20 contract the Service Development Improvement Plan (SDIP) to enable tightening up of the contractual requirements regarding cancer performance improvements.
8. **Waiting List Stabilisation:** PPAG noted that the a revised trajectory has been agreed by the Trust, CCGs and NHS Improvement to meet the refreshed 2018/19 planning guidance to ensure that the Trust waiting list is not larger at the end of 2018/19 than it was at the end of 2017/18. One element of the plan was for the Trust to transfer patients to the independent sector to support additional activity.
9. **Cancelled Operations:** It was reported that UHL have agreed to two local STP Commissioning for Quality and Innovation (CQUIN) schemes in theatres for 2018/19 and the achievements are reported through the Clinical Quality Review Group (CQRG). PPAG were made aware that the action plan for recovery has been reviewed and this indicates that the provider will be able to achieve the CQUIN schemes. It was however highlighted that a formal Contract Performance Notice would be issued if improvement to the trajectory is not met.. PPAG were assured that clinical priority is always at the forefront of any decision made by UHL.
10. **A&E 4 hours:** It was noted that performance continues to be below the required standard of 95%. The main root causes for this is the increased acuity of patients, internal process issues at UHL and increased attendances. Discharges are lower than normal which is impacting on the flow. PPAG were informed that the A&E Delivery Board (AEDB) have an oversight on the actions within the emergency recovery plan. Furthermore it was noted that the CCGs are conducting live audits of GP referrals to ED to prevent avoidable attendances.
11. **Ambulance handover delays:** It was reported that performance improvements observed earlier in the year have not been sustained. The system continues to be under significant pressure with handover delays with a high number of conveyances. One of the actions' the CCGs are taking is arranging Multi-agency admission avoidance days (MAAD events) to identify short, medium and long term actions to improve ambulance handover delays, and increasing options for non-conveyance to secondary care.
12. PPAG noted there is a renewed focus on contractually agreed RAPs, with improved contractual oversight via CQRG. There is an on-going focus on actions to recover performance through CQRG and dialogue with UHL. There is improved CQRG escalation route into Contract Performance meeting and approval process in the event of slippage on actions being delivered.

13. PPAG members stated that they do not feel assured with UHL's overall performance. It was reported that due to concerns within certain areas there is a wider impact noticed on other areas and inevitably impacting patient care. Furthermore PPAG were unsure of how the 90 day system plan would assist in sustaining improvement. PPAG members reiterated from the last meeting that they are in support of a Board to Board meeting being held between UHL and the CCGs to focus on performance concerns and to agree a collective way-forward. PPAG were informed that discussions are underway between the Managing Directors of Leicester City CCG and UHL to agree a mutually convenient date to hold the meeting. It was noted that PPAG members will be kept informed of the progress.

Exception Report from West Leicestershire CCG: (Non- Acute Contracts)

East Midlands Ambulance Service (EMAS)

14. It was reported that there was a 1.6% reduction in the volume of calls received by EMAS in January 2019 in comparison to December 2018. However, despite the reduction in calls there was a 0.6% increase in See and Treat(S&T) and 0.3% increase in See, Treat and Conveyance (ST&C). It does indicate that although activity is increasing, EMAS are managing their capacity more effectively and aligning to the nature of demand.

15. **Ambulance Response Performance (ARP):** It was reported that performance for Leicester, Leicestershire and Rutland (LLR) improved in four out of six standards, but declined for category 2 90th centile. It was highlighted that the initial analysis of the January 2019 performance shows that EMAS are on track to achieve two of the six performance trajectories for Q4 for Category 1 and Category 4.

16. **Handovers:** It was reported that there was a 1.7% decrease in handovers from December 2018 but a 3% increase from January 2018. It was noted that despite the fall in handovers at UHL, only 38% of the handovers were completed within the national standards of 15minutes across the three sites. It was highlighted that Leicester Royal Infirmary (LRI) had the highest number of handovers in the region in January 2019 for the fifth consecutive months.

17. Furthermore it was noted that handover delays are a system issue, which is impacting on LLR performance as a result facing national scrutiny. PPAG were informed that CCGs have recently arranged Multi-agency admission avoidance days (MAAD events) to resolve these root cause problems across multiple parts of the system. It was highlighted that the action plan following these MAAD events have provided clear data along with patient stories to enable collaborative working within the system to improve the patient journey, experience and care.

Exception report from East Leicestershire and Rutland CCG:

Leicestershire Partnership NHS Trust (LPT)

18. It was reported that staffing remains a concern over all services with vacancies across all services. Concerns were specifically noted in Leicester City East Community Nursing Staffing. Furthermore gaps were identified in medical staffing across some of the services, primarily in the CAMHS service.
19. Furthermore PPAG was informed that the latest Care Quality Commission (CQC) report had been published which indicated overall rating as “requires improvement”.

Child & Adolescent Mental Health Service (CAMHS).

20. It was reported that concerns remain on increasing waiting times for access to the service and requires risk management of waiting children. The recent CQC report was presented at the Clinical Quality Review Group (CQRG) and discussions are underway to amend the current contractual quality schedule to incorporate reports to highlight that the care plans and risk assessments are completed and are of the required quality. Furthermore there is additional scrutiny scheduled through a separate CAMHS Quality and Performance meeting with LPT.
21. In terms of Data Quality, PPAG were assured that improvement was noted which supports in triangulating information across some of the service areas.

Personalised Commissioning including Continuing Health Care (CHC)

22. **CHC Quality Premium (QP):** It was reported that for the month of January 2019, West Leicestershire CCG did not achieve the 28 day standard however work is underway and should be able to achieve the 80% target.
23. **Joint Funded Reviews:** It was highlighted that following the review of these cohort received from CHS who were still in receipt of health funding; panels have commenced with both City and County Local Authorities (LAs) to agree the appropriate funding split.
24. The panels are planned to continue through February 2019 and March 2019 until an agreement has been reached on all cases. The issue for delays was noted due to the length of time taken to discuss each case and parties coming to an agreement in regards to who should be responsible for the future funding stream. It was reported that some reviews had identified gaps in services due to the County LA not necessarily aligning to the same framework implemented by City LA. These differences in interpretation of the regulations is impacting and thus taking longer to review each case. This has resulted in an increasing number of cases being set for an urgent re-review.

25. It was reported that Midlands and Lancashire (MLCSU) had identified a backlog of overdue reviews which required further analysis to understand how overdue they were, priority of cases and a timeframe for completion. During that time MLCSU had indicated requirement of additional funding to commence the backlog review. PPAG noted that funding had been approved and the reviews are underway.

RECOMMENDATIONS

West Leicestershire CCG Governing Body is requested to:

- **RECEIVE** the assurance report from the Provider Performance Assurance Group.