

**WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP  
BOARD MEETING**

**10 November 2015**

<b>Title of the report:</b>	Assurance Report from the Provider Performance Assurance Group (PPAG) – 29 October 2015
<b>Section:</b>	Performance – How are we doing?
<b>Report by:</b>	Julie Cockcroft, Collaborative Commissioning Support Officer, ELR CCG
<b>Presented by:</b>	Ray Harding, Independent Lay Member

<b>Report supports the following West Leicestershire CCG's goal(s) 2012 – 2015:</b>			
Improve health outcomes	✓	Improve the quality of health-care services	✓
Use our resources wisely			

<b>Equality Act 2010 – positive general duties:</b>
<ol style="list-style-type: none"> <li>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.</li> <li>2. The CCG will work with providers, service users and communities of interest to ensure if any issues relating to equality of service within this report are identified and addressed.</li> </ol>

<b>Additional Paper details:</b>	
Please state relevant Constitution provision	Governing Body functions: <ul style="list-style-type: none"> <li>• Section 5.2.4: Act with a view to securing continuing improvement to the quality of services</li> </ul> Section 6.6.1(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 on 29 October 2015.
Alignment with other strategies	2014/15 and 2015/16 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:**

The purpose of this report is for the Provider Performance Assurance Group (PPAG) to provide the Governing Body with a summary of the assurance received from the Contract Squares in relation to performance across the collaborative contracts, and the respective providers' performance.

**RECOMMENDATION:**

The West Leicestershire Clinical Commissioning Group is requested to:

**RECEIVE** the Assurance Report from PPAG.

**WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP**  
**GOVERNING BODY MEETING**  
**10 November 2015**

**Assurance Report from the Provider Performance Assurance Group (PPAG)**

**Introduction**

1. The purpose of this report is for the Provider Performance Assurance Group (PPAG) to provide the Governing Body with a summary of the assurance received from the Contract Squares 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 October 2015 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 Squares;
  - Advise and recommend actions on provider performance as appropriate; and
  - Provide onward assurance to the respective Governing Bodies.

**Board to Board meeting**

4. PPAG noted that the outcome of the Board to Board meeting with LPT was not clear and that no minutes had been produced. Therefore PPAG was not sufficiently assured that concerns relating to staffing issues and data quality were being addressed appropriately. It was agreed that when arranging future Board to Board meetings expectations would be clearly set out and articulated with an agenda. It was agreed that PPAG would review the situation in three months' time with a view to scheduling another Board to Board meeting with LPT. It was agreed that PPAG would be specific on what the priority areas for discussion would be and would lead on the agenda setting for the meeting, ensuring the meeting was minuted.

It was agreed that the Chair of ELR CCG would look to write to LPT to outline the items discussed at the Board to Board meeting and request actions are followed through. In addition, to inform LPT that PPAG members would be requesting a further Board to Board meeting in three months' time.

**Provider review and areas of concern**

5. At the meeting in October 2015, PPAG received a report from each of the Contract Squares and agreed to bring the following areas of performance to the Governing Body's attention.

## ***University Hospitals of Leicester (UHL)***

### **6. Cancer**

7. PPAG raised concerns regarding the 62 day back log still not being reduced but noted the establishment of a clinical working group of consultants and the GP Cancer leads to examine the backlog at a patient level to get a detailed understanding of the reasons for patients waiting. They will then liaise with the registered GP in those cases where discussion with the patient and their own GP may help to ensure they access treatment in a timely way. It was noted that a remedial action plan has been issued with respect to the Cancer 62 day target.
8. PPAG agreed that cancer would be the subject of a deep dive at its next meeting in November.

### **A&E**

9. PPAG noted that A&E performance for September 2015 was 90.3% which shows a continuing deterioration in the position. The year to date position is 85.7%. Following the summit with UHL, LLR CCGs and EMAS a remedial action plan has been issued in relation to A&E which will be monitored monthly at the Urgent Care Board and received on a quarterly basis at the Contract Performance Management meeting.

### **CNCS**

10. PPAG received assurance that work is progressing with the CQC Oversight Group and that performance was improving with KPIs being met. PPAG noted that CQC would be revisiting CNCS again to review progress. PPAG were assured that discussions are being held with regards to potential partnership work to strengthen governance and Board arrangements. PPAG were informed that there will be a Board to Board meeting with CNCS in November that will include PPAG representation.

### **DHU**

11. PPAG noted that there continued to be issues with performance and were informed there had been a whistle blower incident with regards to the Derbyshire call centre and areas of concern regarding staffing and access to clinical staff through call handlers was being reviewed. PPAG were informed that a visit to Leicester call centre had been undertaken with no concerns raised.

### **EMAS**

12. PPAG raised concerns regarding the unsatisfactory situation within EMAS and received assurance that a meeting took place on 6 October 2015 between the executives of EMAS and the coordinating commissioners which have resulted in the remedial action plan being updated to agree a revised trajectory for delivery.

PPAG raised concerns regarding performance and the recruitment of staff and received assurance that EMAS were working to recruit to additional posts and that they now only have 14 vacancies within Leicestershire.

## **ARRIVA**

13. PPAG noted that performance had deteriorated.

## **Leicestershire Partnership Trust (LPT)**

### **Staffing Issues**

14. PPAG noted that the additional intensive community support capacity has been contracted with the first 40 beds being contracted on a block contract deal. Concerns were raised that there was a risk that one problem could be fixed at the detriment of another service and asked that the quality of community nursing services across CCGs be monitored closely and that there be a matrix developed that gave assurance that we are not taking from one service to support another.

15. PPAG expressed ongoing concerns regarding staffing levels and data quality issues.

## **RECOMMENDATIONS**

West Leicestershire CCG Governing Body is requested to:

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