

**WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP  
BOARD MEETING**

**13 June 2017**

<b>Title of the report:</b>	Assurance Report from the Provider Performance Assurance Group (PPAG) – May 2017
<b>Section:</b>	Performance – How are we doing?
<b>Report by:</b>	Jayshree Raval, Commissioning Collaborative Support Officer
<b>Presented by:</b>	Ray Harding, Independent Lay Member

<b>Report supports the following West Leicestershire CCG's goal(s):</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> <li>• Section 6.6.1(f): Monitoring Performance Against Plan</li> </ul>
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 in May 2017
Alignment with other strategies	2017/18 and 2018/19 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

**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 is requested to:

**RECEIVE** the Assurance Report from PPAG.

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**13 June 2017**

**Assurance Report from the Provider Performance Assurance Group (PPAG) –  
May 2017**

**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 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 May 2017 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 May 2017, PPAG received a report from each of the Contract Leads from across the 3 CCGs, and would like to draw the Governing Body's attention to the areas of performance highlighted below.

**Exception Report: Leicester City CCG:**

**University Hospitals of Leicester (UHL) NHS Trust**

5. **Quality:** PPAG members were informed that delays in sending clinical correspondence to primary care continues and further discussions are underway with UHL. There is slow progress on the response to the Contract Performance Notice and this remains under scrutiny.
6. PPAG members were informed of a recent Never Event that occurred in UHL at the beginning of May 2017. This was categorised as a wrong connection involving epidural and intravenous. It was noted that learning from the incident has been requested from UHL.
7. **Performance:** PPAG members were informed that since the opening of the new ED there have been some operational issues due to changes in patient pathways. One reason is the impact of all ED walk-in and previous urgent care centre activity going through the one front door. The new process to manage the entirety of this activity at one reception desk is taking time to embed. Furthermore, it was noted that due to

some delays in flow through the ED to inpatient beds, this has impacted on increasing the number of ambulance handovers and also being able to deliver to the 4 hour target. The Contracts Lead informed that they are working with the ED team in improving their performance.

8. **Cancer standards:** PPAG noted positive improvements in some areas of performance, in particular: the 2 week wait, 31 day first definitive treatment, 31 day subsequent surgery and 62 day referral to treatment all of which were achieved in March 2017.
9. **18 week referral to treatment (RTT):** is still underperforming as the standard has not been achieved since November 2016. For March 2017, performance was 91.81% which is mainly due to the pause in electives undertaken during January, February and March 2017.
10. **52 week breaches:** There were 24 patients who breached the 52 week target in March 2017. It was forecasted that there may potentially be 16 patients who breach this target in April 2017.
11. **Finance:** It was highlighted to PPAG members, that month 12 data shows a consolidated year-to-date position of an £8.7m overspend. This is an adverse movement of £2m from the last report and most of this is difficult to challenge due to all service areas showing an increase in activity and spend. Work continues to ensure that CCGs are being appropriately charged.

### **Exception Report: East Leicestershire and Rutland CCG**

#### **Continuing Healthcare (CHC); and Previously Unassessed Periods of Care (PUPoCs)**

12. **Continuing Healthcare (CHC):** Following the change of provider from Arden and Greater East Midlands Commissioning Support Unit (AGEM CSU) to Midlands and Lancashire Commissioning Support Unit (MLCSU) on 1 April 2017, it was highlighted that ML CSU are experiencing a number of challenges, including a backlog of CHC assessments and fast track reviews. PPAG members were assured that ML CSU are working through these challenges.
13. Further work has been requested of MLCSU to allow the LLR CCGs to have a clear understanding of the clinical and financial risks due to the back log of CHC reviews, specifically the length of time they have been outstanding.

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

14. **Data Quality:** Following the completion of the data quality audit, the actions set out in the Service Development and Improvement Plan have now been completed, and assurance provided. PPAG members were informed that there are continued discussions about data quality, reporting quality and achievement of access targets via all contractual meeting. The Contracts lead assured PPAG members that quality of data has improved significantly and continues to see improvement.

15. **Out of County Placements:** it was noted that the weekly Delayed Transfers of Care (DTC) meetings; and quarterly meetings have enabled the review of patients at risk of breaching the target. As a result no patients have been placed out of county and the Governing Body is asked to note the positive position.

#### **AHPs/Section 117 contracts**

16. Concerns were highlighted in relation to the lack of information provided by AGEM CSU. This has led to patient reviews and assessments being delayed. Actions are being taken to mitigate the risks. PPAG noted that a letter has been sent to the national Director of CSU Transition Programme highlighting the CCGs' experience and concerns in relation to the service provision by AGEM CSU.

17. **Financial Risk:** It was raised that a large number of invoices have appeared following the transfer of services between AGEM CSU and ML CSU. The Contracts team are working with providers to investigate and resolve these invoice issues.

#### **Improving Access to Psychological Therapies (IAPT) Service (Nottinghamshire Healthcare NHS Foundation Trust)**

18. The contract team highlighted the concerns in relation to the performance of the IAPT service provider. It was noted that the provider is experiencing difficulties in improving performance. There appeared to be differing views between the commissioners and the provider regarding the issues affecting the performance. PPAG members noted that the provider believed that there was a lack of referrals into the service, whereas the commissioners noted appointment slots were vacant and that the provider was reporting that waiting times had increased. PPAG noted that a board-to-board meeting was yet to take place, following which this would be subject to a detailed review.

#### **Exception Report: West Leicestershire CCG – Non-Acute Contracts**

19. **East Midlands Ambulance Service (EMAS):** PPAG members were informed that performance figures across the majority of standards remain below the national target, with the exception of Red 1 activity which has shown continued improvement and has met the national target.

20. EMAS has been subject to a demand and capacity review, indicating problems with flexibility of staff, resource mix and hospital turnaround. The Ambulance Response Programme is being finalised.

21. **ARRIVA (NEPTS)-Non Emergency Patient Transport Service:** It was noted that Arriva's performance in relation to their arrival and departure KPIs continues to be poor despite activities being lower than commissioned volumes. Arriva accepted KPI penalties for Q1 and Q2 activities. In addition, Arriva continue to work through the issues in line with their Recovery Action Plan (RAP).

22. PPAG members were informed that the Arriva contract has been extended for 3 months until end September 2017 to allow for safe mobilisation to the new preferred provider.

## **RECOMMENDATIONS**

West Leicestershire Clinical Commissioning Group is asked to:

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