

WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP
BOARD MEETING
8 August 2017

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

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 if 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 6.6.1(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 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.

**WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING**

8 August 2017

**Assurance Report from the Provider Performance Assurance Group (PPAG) –
July 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 July 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 July 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 were informed that a contract performance notice has been served to UHL relating to 3 Never Events that occurred in May 2017. A meeting took place with the Trust and a remedial action plan is to be agreed within 5 working days.
6. A review of the existing contract performance notice is also being undertaken to see if UHL have delivered on the expected level of improvement. If UHL have delivered then the contract performance notice will be closed as long as not further contract escalation is highlighted.
7. **Performance: Cancer standards:** In last month's report positive improvement in some areas of performance, was shared. For this month it was noted that although UHL had delivered the 2 week wait standard, they did not deliver on the 31 day first

definitive treatment, 31 day subsequent surgery and 62 day referral to treatment in May 2017.

8. **A&E 4 hour:** It was highlighted that performance in May 2017 was 76.7% which is significantly below the required standard of 95%. This was mainly attributed to the new Emergency Department (ED) which opened on the 26 April 2017 and the requirement for new systems and processes to be embedded. The A&E Delivery Board continues to focus on implementing the recovery plan.
9. **Ambulance handover delays:** PPAG were informed that the improvement in both volume and duration of handover delays has been sustained into April 2017. It was noted that performance in this area deteriorated in early May 2017 due to the new ED opening however performance has steadily been improving.
10. **Finance:** It was highlighted that the overall position at Month 2 is planned with an £6.6m overspend. It was highlighted that non-delivery of QIPP is the main driver of this and urgent action is needed to turn this around.
11. **Review Meeting with UHL:** PPAG members were updated on the recent Commissioner Quality Review meeting with UHL which took place on 18 July 2017. It was highlighted that the meeting was well attended by members of the UHL Board. At the meeting CCG colleagues shared their concerns in key areas including issues identified and raised in the following areas: ophthalmology, never events, RTT performance, cancer performance, A&E performance, and radiology.
12. UHL Board members were cognisant of the issues and an open dialogue took place in respect of the issues and putting measures in place to show improvement. It was noted that the overall meeting was positive.
13. It was agreed that a full deep dive on UHL would be presented at the PPAG meeting in August 2017.

Exception Report: West Leicestershire CCG: Non-Acute Contracts

14. **East Midlands Ambulance Service (EMAS):** the national standard response time was met in June for Red1. An improvement in month for Red 2 and Red A19 was also seen although these are not meeting national standards. PPAG were also informed that the programme for implementing the ambulance response programme has been announced by NHS England.
15. Following the CQC report publication and the subsequent quality summit EMAS have developed a Quality Improvement Plan to address the identified areas for improvement. The plan will be monitored by the Clinical Assurance and Delivery Group and at the monthly Commissioners contract meeting.
16. **ARRIVA - Non Emergency Patient Transport Service (NEPTS):** In last month's report it was noted that Arriva's performance in relation to their arrival and departure key performance indicators (KPI) continued to be poor despite activities

being lower than commissioned volumes. PPAG members were informed that a further notice has been served to Arriva for non-performance against KPIs and under-activity.

17. **NHS 111:** It was noted that a slight decrease in the number of calls were experienced in May 2017. PPAG members were informed that despite the decrease in calls, the performance against call-handling KPIs has dropped but this is still above threshold in the number of calls answered within 60 seconds.
18. **Derbyshire Health United (DHU):** PPAG members were informed that DHU have been affected by the recent cyber-attack which impacted upon their ability to produce timely and validated data. It has been acknowledged that DHU have experienced IT pressures as well as tight mobilisation periods however the contract leads have set out future expectations to receive timely and full data sets for all services delivered by DHU.

Exception Report: East Leicestershire and Rutland CCG:

Personal Health Budgets (PHBs), Previously Unassessed Periods of Care (PUPoCs)

19. **Personal Health Budgets (PHBs):** It was highlighted that a significant increase is seen in referrals from individuals impacted by the Help to Live at Home scheme (HTLAH).
20. **Previously Unassessed Periods of Care (PUPoC):** on a positive note all original tranche of 455 cases are now assessed and closed down.

Leicestershire Partnership NHS Trust (LPT)

21. **Children and Adolescent Mental Health Service (CAMHS):** The Care Quality Commissioner (CQC) visit identified a number of issues in relation to assessment to treatment waiting times, and that the care plans and risk assessments were not always in place. The contract lead informed that assurance has been sought and received through the Strategic Contract Performance Meeting (CPM) that all Risk Assessments and Care Plans are expected to be up to date by end of July 2017.
22. **Looked After Children (LAC):** it was noted that delays in Initial Health Assessments for Looked After Children provided by LPT remain a concern with improvements to waiting times and DNA required. It was highlighted that there is now a potential risk. The contracts lead confirmed that assurance has been provided through CQRG that LPT are working through the process to resolve the matter.

RECOMMENDATIONS

West Leicestershire CCG Governing Body is requested to:

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