

WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING

8 May 2018

REPORT TITLE:	PPAG Report Assurance Report from the Provider Performance Assurance Group (PPAG) – April 2018
MEETING DATE:	08 May 2018
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PRESENTER:	Mr Ket Chudasama, Director of Performance and Corporate Affairs

PURPOSE OF THE REPORT:

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 contract arrangements and performance of our key providers.

RECOMMENDATIONS:

The WLCCG Governing Body is requested to:

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

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**Assurance Report from the Provider Performance Assurance Group (PPAG) –
April 2018**

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 April 2018 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 April 2018, PPAG received a report from each of the Contract Leads from across the 3 CCGs. The detailed review on this occasion related to Leicestershire Partnership Trust's (LPT), with a focus on:
 - Mental Health Acute Care contract managed by East Leicestershire and Rutland Clinical Commissioning Group (ELR CCG); and
 - Child and Adolescent Mental Health Services (CAMHS) contract managed by Leicester City Clinical Commissioning Group (LC CCG).
5. This report provides an overview and update on key areas of discussion and highlights issues for escalation from PPAG to the Governing Body.

Detailed Report from East Leicestershire and Rutland CCG: Leicestershire Partnership Trust (LPT)

Mental Health Acute Care

6. Attention was drawn to the performance standards in mental health acute care, in particular: out of area placements, delayed transfers of care, length of stay and child and adolescent mental health services.
7. **Out of area placements:** the target is to eliminate all inappropriate out of area placements, however PPAG noticed the sharp increase in out of area placements

over the last 3 months, with 20 general psychiatry patients in out of area placements as at 25 April 2018. LPT have been asked to provide a response detailing reasons behind the increase.

8. **Delayed Transfers of Care (DToCs)** – the contract team highlighted the reduction in delayed transfers of care showing a positive trend, which were noted to be attributable to the oversight group and the proactive discharges that have had significant impact on this standard. .
9. **Average length of stay** indicator was noted to be above national benchmark and PPAG were informed that LPT had been tasked with reviewing and understanding the acuity of the patients.
10. PPAG members raised a number of concerns in relation to the following:
 - Psychiatric intensive care unit utilisation for men has increased;
 - The Crisis Service is not available as a step-down facility from the Bradgate Unit and hence the Bradgate Unit are having to keep patients in longer than required, which could potentially result in a deterioration in the health of the patients:
 - Data quality issues relating to the provider's performance information, noting that discussions are underway with LPT to ensure they resolve data quality issues;
 - Continued issue relating to staffing levels across the service.

Deep- Dive report on Child and Adolescent Mental Health Service (CAMHS)

11. The presentation provided PPAG with a summary of the current CAMHS performance. The contract team highlighted that commissioners have raised concerns with the CAMHS service in respect of reliability of the data. PPAG noted, as alluded to earlier, that discussions are underway with LPT to ensure they resolve data quality issues and improve the accuracy and reliability of the data. It was noted that the performance notice placed on LPT's Children and Young People's Crisis and Home Treatment service remains in place.
12. It was highlighted that the Care Quality Commission (CQC) has published its recent report and provided an overall rating of "requires Improvement" for LPT. One of the key findings of the CQC's inspection (that took place in November 2017) related to waiting times for treatment, specifically the number of waiting lists in place and volume of patients waiting on these lists. The contract team assured PPAG that work has taken place by the CAMHS service to reduce the number of patients waiting a long time, which has had an impact on the length of time to start intervention.
13. PPAG were informed that the service has also rationalised the number of waiting lists the provider is operating, however further work is required. PPAG asked that the contract team agree timescales as a matter of urgency to complete this work. It was noted that following the CQC visit a red, amber, green system has been used to monitor and regularly review patients on the waiting list to ensure the health of these patients has not deteriorated. It was also identified that the Future in Mind

programme is helping to alleviate pressure from CAMHS in terms of access and activity.

Exception report from East Leicestershire and Rutland CCG:

Leicestershire Partnership NHS Trust (LPT)

14. In relation to the general update on LPT, it was noted that the CCGs are working closely with LPT in relation to a redesign of community services.
15. In addition, PPAG members expressed their concern regarding the quality of data and the reliability therefore of the data contained within the reports received from the provider by the contract team. It was highlighted that PPAG has raised this concern repeatedly over the last couple of years and remained concerned that this issue had not been resolved by LPT. PPAG members requested that this matter be escalated via the Audit Committee Chairs of the respective CCGs to the Audit Committee Chair of the provider.

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

16. It was noted that the performance in the City is improving; however the performance in the County remains a challenge. NHS England is working with the CCGs to ensure that everything that can be done to improve performance is being implemented. Support has been provided to the provider to use the national demand and capacity tool which is used to determine the impact of different treatments, levels of staffing and skills required to meet the activity levels required and performance. PPAG noted that an outcome of this will be a plan of action which the contracts team will review with the provider in May 2018.

Personalised Commissioning including Continuing Health Care (CHC)

17. It was reported that the legacy reviews are progressing well and a revised trajectory is in place to take account of reduced activity in November 2017 and December 2017. In addition all reviews for fast track, new cases, and overdue reviews have been carried out. It was noted that a number of these cases are going through the quality assurance processes prior to being sent for ratification by the CCGs. PPAG were assured that all of these actions will be completed by the end of May 2018.
18. PPAG were informed that the CHC team have been able to provide a breakdown of Previously Unassessed Periods of Care (PUPoC) cases, Retrospective Review Dispute cases and CHC Current Dispute cases for the Leicester Leicestershire and Rutland (LLR) CCGs. This information will be shared with PPAG in due course. In addition it was noted that all 3 CCGs are currently ahead of plan for the 2020 national target for Personal Health Budgets (PHBs), with further expansion planned for 2018/19. It was highlighted that a national mandate is on the horizon which stipulates that PHBs to become a default offer for individuals eligible for CHC. The team will be working with the commissioning nurses to ensure they are fully supported in the delivery of this mandate.

Exception Report from Leicester City CCG:

University Hospitals of Leicester NHS Trust (UHL)

19. It was reported that a full Care Quality Commission (CQC) inspection report has been issued in March 2018 rating UHL as “Requires Improvement” overall. The Trust has developed an action plan to address the areas that require improvement and have agreed to share this with the commissioners once it has been agreed with CQC.
20. **Radiology** - PPAG were informed that improvements have been noted following issue of a Contracts Performance Notice (CPN) to the Trust. In addition the original backlog of unreported films has been cleared and as a result the Trust has requested that commissioner’s closure of the CPN. Furthermore new Key Performance Indicators (KPIs) have been negotiated as part of the 2018/19 contract.
21. In addition an increase has been noted in the staff sickness and absence levels over the year with the Trust consistently unable to meet the 3% threshold, with highest rate of 5.8% seen in February 2018. The Trust submits monthly staffing governance reports which evidences that risks are being identified and managed to mitigate the risk of harm to patients.
22. **A&E 4 hour:** PAAG were informed that performance in February 2018 was 71.5% which is significantly below the required standard of 95% and is the lowest performance level since summer 2017. The new Chief Operating Officer who has joined the Trust since January 2018 is focussing on eradicating minor breaches and is ensuring that the pathway is maintained.
23. **12 hour trolley breaches:** PPAG members raised a concern in respect of the high number of 12 hour trolley breaches; it was noted that UHL had reported that there had been 35 trolley breaches within a week in March 2018. PPAG members regarded UHL’s performance as inadequate in relation to this standard and requested for further details and an update on this matter to be presented at the next meeting.
24. **Ambulance handover delays:** It was noted that the performance has deteriorated in February 2018 against both handovers between 30-60 minutes and for handovers over 60 minutes.
25. **Cancer standards:** It was reported that UHL did not deliver on the 2 week wait, 31 day subsequent surgery or 62 day standards in February 2018 and actions are being taken to remedy performance. In addition it was noted that the investigation into the prospective cancer cancellations that took place at UHL in early January 2018 has not yet concluded and therefore an update will be provided at the next meeting.

Out of county acute providers

26. PPAG members received the performance report and noted that much of the performance issues across out of county acute providers were similar to that of UHL.

Exception Report from West Leicestershire CCG:

East Midlands Ambulance Service (EMAS)

27. **Performance:** It was reported that in March 2018 there was an increase of 11% in calls to EMAS, compared to February 2018 with increases across all four Categories. It was noted that there was improvement in the performance for Categories 3 and 4 for LLR, but a decline was seen in Categories 1 and 2.
28. PPAG were informed that the Ambulance Response Programme (ARP) performance data is now available by individual CCG and although performance is currently being monitored, the CCGs have now been informed that formal sanctions cannot be applied by CCGs until September 2018, previously CCGs were informed that they would not be able to apply formal sanctions until April 2018. Furthermore it was highlighted that EMAS has informed that in order to meet ARP standards EMAS would require additional funding from the commissioners. The lead commissioner is reviewing the matter.
29. PPAG members were not assured by the provider's performance and expressed their concern in the failure to meet the ARP standards. PPAG members raised that this was unacceptable and that harm to patients needs to be reviewed where the provider continues to fail to meet the standards.
30. **Handovers:** It was reported that an increase of 8.6% in handovers were seen in March 2018, however the percentage of patients handed over within the national 15 minute standard remained at just 30%, with the average pre-handover time remaining at 27mins.

Non-emergency patient transport service (NEPTS) – Thames Ambulance Service Limited (TASL)

31. **Performance:** It was highlighted that TASL has performed well against the Time on Vehicle Key Indicators (KPIs) however performance have fallen across a number of KPIs, in other areas.
32. It was reported that TASL's performance for collection of discharge patients fell in the month of March 2018, due to pressures from UHL. TASL has also noted an increase in out-of-county discharges, and a concern about patients being put onto the system and made ready within the hour, making it difficult for the TASL to analyse demand.
33. **Quality:** there was a concern about lack of reporting against the quality schedule. It was noted that no quality reports have been received to date in line with quality schedule. As a result of this a Contract Performance Notice (CPN) was issued in January 2018. A meeting has taken place with TASL and a more comprehensive organisational action plan has been produced to encompass the actions required.
34. PPAG members made a general observation in relation to performance across providers, including UHL, LPT and EMAS, and concluded that they were assured that the Contract Teams were doing all that they could in supporting the providers. However, despite all the efforts, support and innovative working methods, PPAG was not assured of the likely improvement in the performance of these providers. It

was therefore agreed to escalate the matter to the three CCG Governing Bodies. In addition, it was raised that there are different working methodologies between the regulators (i.e. NHS England and NHS Improvement) and their interpretation on how the CCGs as commissioners should be commissioning services and how and when the commissioners should be applying sanctions where performance standards have not been achieved. PPAG members agreed that this matter be highlighted to the Governing Bodies.

RECOMMENDATIONS

WLCCG Governing Body is requested to:

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