### **NHS** Southport and Formby Clinical Commissioning Group

# Southport & Formby Clinical Commissioning Group

Integrated Performance Report August 2014

### Contents

1.	Exe	ecutive Summary	4
2.	Re	ferrals	6
3.	Pla	anned Care	8
3	3.1 AI	II Providers	8
3	3.2 So	outhport and Ormskirk Hospital NHS Trust	8
3	3.3	Planned Care Key Issues	9
3	3.3.1	Southport and Ormskirk Hospital NHS Trust	9
3	3.3.2	The Royal Liverpool and Broadgreen University Hospitals NHS Trust	9
4.	Un	planned Care	9
2	4.1 AI	II Providers	9
2	4.2 So	outhport and Ormskirk Hospital NHS Trust	10
4	1.3 U	Inplanned Care Key Issues	10
2	1.3.1	Southport & Ormskirk Hospital	10
5.	Me	ental Health	11
Ę	5.1	Mersey Care contract	11
Ę	5.1.1	Key Issues	11
Ę	5.2	Key Performance Indicator CPA follow up	12
Ę	5.2.1	Improving Access to Psychological Therapies (IAPT) Inclusion Matters Sefton	12
6.	Liv	verpool Community Health Performance	13
6	6.1 Ke	ey Issues	13
6	6.2 Tł	hird Sector Contracts	13
7.	Qu	ality and Performance	14
7	7.1	Southport & Formby CCG Performance Dashboard	14
7	7.2	Friends and Family – Southport and Ormskirk NHS Trust	19
7	7.3	Complaints	19
7	7.4	Serious Untoward Incidents (SUIs)	21
7	7.4.1	NHS Southport and Formby CCG	21
7	7.4.2	Southport and Ormskirk Hospital NHS Trust	21

### Tables

Table 1 Patients waiting (in bands) on incomplete pathway for the top 5 providers	7
Table 2 All Providers	8
Table 3: Month 4 Planned Care - Southport and Ormskirk Hospital	8
Table 4: Month 4 Planned Care - Southport and Ormskirk Hospital 13/14 – 14/15 Comparison	9
Table E: Month 4 Unplanned Care - All Providers	9
Table F: Month 4 Unplanned Care - Southport and Ormskirk Hospital NHS Trust	.10
Table G: Month 4 Planned Care - Southport and Ormskirk Hospital NHS Trust 13/14 – 14/15 Comparison	.10
Table H NHS Southport & Formby CCG – PBR Cluster Activity	.11
Table I- NHS Southport & Formby CCG Performance CPA follow up within 7 days of discharge           from psychiatric inpatient care	.12
Table J NHS Southport & Formby CCG Performance CPA follow up within 2 days (48 hrs) for         higher risk groups	.12
Table K PHQ13_6 The Proportion of People who complete treatment who are moving to recover	•
Table L Serious Untoward incidents NHS Southport & Formby CCG Patients by Trust	
Table M Reported Serious Untoward incidents - Southport and Ormskirk Hospital NHS Trust	.21

### 1. Executive Summary

This report provides summary information on the activity and quality performance of Southport & Formby Clinical Commissioning Group at August 2014 (note: time periods of data are different for each source).

### CCG Key Performance Indicators

NHS Constitution Indicators	Footprint	
Ambulance Category A Calls (Red 1)	CCG	
RTT 18 Week Incomplete Pathway	CCG	
Cancer 2 Week GP Referral	CCG	
Percentage of patients who spent 4 hours or less in A&E	CCG	
Other Key Targets	•	
Ambulance Category A Calls (Red 1)	NWAS	
Ambulance Category A Calls (Red 2)	CCG	
Ambulance Category A Calls (Red 2)	NWAS	
Ambulance Category 19 Transportation	CCG	
MRSA	CCG	
MRSA	S&ORM	
C.Diff	CCG	
C.Diff	S&ORM	
Cancer 2 Week Breast Symptoms	CCG	
Cancer 31 Day Radiotherapy	CCG	
Mixed Sex Accommodation	CCG	
Mixed Sex Accommodation	S&ORM	
RTT 52 Week Waiters (Non-Admitted)	S&ORM	

### Key information from this report

Cdifficile Target - Southport and Formby CCG reported a year to date July 2014 figure of 15 cases against a tolerance of 13. There were 4 cases reported during the month of July 2014, 3 of the 4 were at Southport and Ormskirk Hospital NHS Trust (2 Acute and 1 Community) and 1 at Aintree Hospitals NHS Foundation Trust.

Southport and Ormskirk Hospital NHS Trust has reported 3 new cases in July 2014, taking the cumulative total to 13 cases against a year to date tolerance of 9. All cases are undergoing Root Cause Analysis (RCA).

MRSA - In July 2014, the first 2 cases of MRSA were reported for Southport and Formby CCG patients for 2014/15, this is against a tolerance of zero. Both cases have been recorded against Southport and Ormskirk NHS Trust, 1 Trust acquired and the other community. Southport and Ormskirk Hospital NHS Trust has recorded 1 case of MRSA in July 2014.

A&E 4 hour wait - Southport and Formby CCG achieved this target cumulatively to July 2014 with 97.53% against the 95% target. Year to date, of the 16,351 patients attending, 15,947 were seen within 4 hours. Performance cumulatively to July 2014 at Aintree University Hospitals NHS Foundation Trust was below the target of 95% with 91.88 %, a further fall from the figure recorded in June (92.14%) 2014. Year to date, of the 39,091 patients attending, 35,915 were seen within 4 hours. Key actions are currently taking place to review this. Southport and Ormskirk Hospital NHS Trust achieved this target with performance cumulatively to July 2014 at 97.30%, up from 97.07% in June.

Southport and Formby CCG have reported 6 mixed sex accommodation breaches year to date, July 2014. All breaches were recorded against Southport and Ormskirk Hospital NHS Trust.

Southport and Formby CCG did not achieve the targets in all Ambulance Clinical Quality indicators cumulatively at July 2014. For Category A (Red 1 and 2) 8 minute response time indicators. Please note the CCG is measured on the NWAS figures which are also under target for the above 2 indicators For Category 19 transportation time, performance was 90.11% for July, giving a year to date figure of 89.96%, below the 95% target.

#### Provider Trust Performance Issues Continued ......

Cancer Targets - Maximum two-week wait for the first outpatient appointment for patients referred urgently with breast symptoms. In the year to date, June 2014 Southport and Formby CCG marginally failed to achieve target, recording 92.36%.

Maximum 31-day wait for subsequent treatment where the treatment is a course of radiotherapy - Southport and Formby CCG achieved 100% during June 2014, but the year to date figure of 93.85% remains marginally below the 94% target. This underperformance is due to the previous month's figures.

Stroke Indicators - These 2 indicators were both achieved for Southport and Formby CCG patients during July 2014 recording 90%. Southport and Ormskirk Hospital NHS Trust achieved the stroke target of 80% recording 84.62% in July.

Both Aintree University Hospital NHS Trust and Southport and Ormskirk Hospital NHS Trust achieved the 60% TIA target in July, performance was 100% at Aintree and 83.33% at Southport and Ormskirk demonstrating that they are now compliant.

Friends and Family Test Score The indicator comprises two elements: the test score and the % of respondents who would recommend the services to friends and family – for Inpatient Services and A&E. Providers are now measured against these separately and not combined as previously measured.

Southport and Ormskirk Hospital Trust -

- Inpatient test score in July 70 compared to England average of 74
- A&E test score in July 40 compared to England average of 53
- Inpatient % response rate in July 37.1% compared to a target of 20%
- A&E % response rate in July 8.4% compared to a target of 20%.

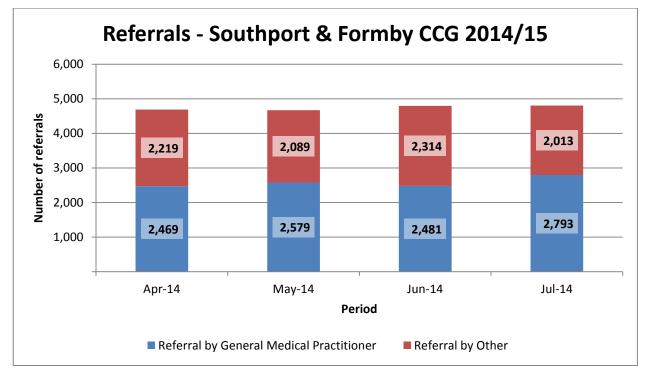
There have been 2 Serious Incidents reported in July 2014 reported at Southport & Ormskirk Hospital NHS Trust relating to NHS Southport and Formby CCG patients, 14 incidents reported year to date. There has been 1 repeated incident reported year to date relating to 2x suspected suicides.

### 2. Referrals

The following section provides an overview of referrals to secondary care to July 2014.

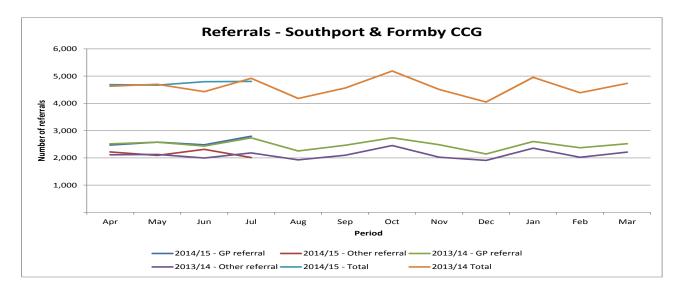
2.1 Referrals by source

Chart A Number of GP and 'other' referrals for the CCG across all providers for 2014/15.



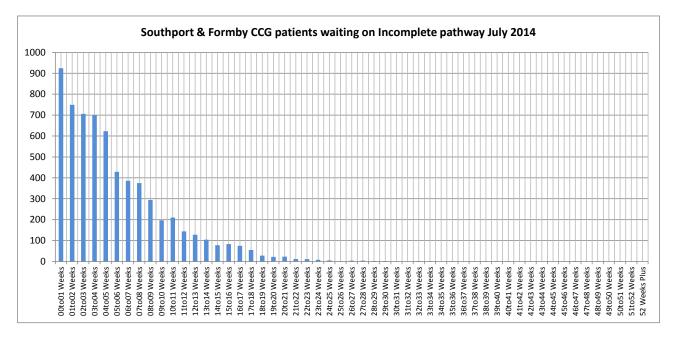
Evidence suggests increase in GP referrals but overall referral in numbers remaining consistent. NHS Southport & Formby CCG to review Primary Care dashboard and explore referral activity by locality and practice.





### 2.2 NHS Southport & Formby CCG patients waiting

Chart C - Patients waiting on an incomplete pathway at the end of July 2014 by weeks waiting



There were 132 patients (2.1%) waiting on incomplete pathways at the end of July 2014 waiting over 18 weeks. There are no 52 week waiters present.

### **Top 5 Providers**

 Table 1 Patients waiting (in bands) on incomplete pathway for the top 5 providers.

Trust	Oto10 wks	10to18 wks	18to24 wks	24to30 wks	<b>30+ wks</b>	Total
SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST						
(RVY)	3903	495	69	9	1	4477
RENACRES HOSPITAL (NVC16)	462	158	0	0	0	620
AINTREE UNIVERSITY HOSPITAL NHS FOUNDATION						
TRUST (REM)	244	58	3	0	0	305
ROYAL LIVERPOOL AND BROADGREEN UNIVERSITY						
HOSPITALS NHS TRUST (RQ6)	259	58	15	3	7	342
ALDER HEY CHILDREN'S NHS FOUNDATION TRUST						
(RBS)	93	36	4	0	0	133

### 3. Planned Care

### **3.1 All Providers**

Performance to Month 4 against planned care elements of the contract shows an over plan of £677k (6%). This is in the main driven by over performance at Southport & Ormskirk Hospital NHS Trust (£294k), Royal Liverpool and Broadgreen University Hospitals NHS Trust (£59k) and St Helens & Knowsley (£53k).

Table 2 All Providers

	Annual Activity	Plan to Date	Actual to date	Variance to date	Activity YTD	Annual Plan Price	Price Plan to Date	Price Actual to	Price variance to	Price YTD %
Provi de r Na me	Plan	Activity	Activity	Activity	% Var	(£000s)	(£000s)	Date (£000s)	date (£000s)	Var
Aintree University Hospitals NHS F/T	10,166	3,375	3,753	378	11.19%	£2,239	£743	£819	£76	10.19%
Alder Hey Childrens NHS F/T	4,509	1,512	1,681	169	11.17%	£720	£250	£210	-£40	-16.09%
Central Manchester University Hospitals Nhs Foundation Trust	0	0	102	102	0.00%	£0	£0	£27	£27	0.00%
Countess of Chester Hospital NHS Foundation Trust	0	0	30	30	0.00%	£0	£0	£2	£2	0.00%
East Cheshire NHS Trust	0	0	4	4	0.00%	£0	£0	£0	£0	0.00%
Fairfield Hospital	61	20	29	9	42.62%	£13	£4	£11	£7	159.63%
ISIGHT (SOUTHPORT)	2,518	839	1,005	166	19.74%	£582	£194	£247	£53	27.42%
Liverpool Heart and Chest NHS F/T	1,243	412	459	47	11.52%	£783	£259	£283	£24	9.43%
Liverpool Womens Hospital NHS F/T	2,085	694	658	-36	-5.23%	£730	£243	£240	-£3	-1.23%
Renacres Hospital	7,308	2,436	3,346	910	37.35%	£2,302	£767	£754	-£13	-1.73%
Royal Liverpool & Broadgreen Hospitals	11,947	3,967	4,376	409	10.32%	£2,636	£875	£935	£59	6.78%
Southport & Ormskirk Hospital	103,405	34,379	44,641	10,262	29.85%	£22,026	£7,376	£7,670	£294	3.99%
SPIRE LIVERPOOL HOSPITAL	480	160	267	107	66.88%	£128	£43	£62	£20	46.42%
ST Helens & Knowsley Hospitals	3,540	1,154	1,332	178	15.47%	£822	£269	£322	£53	19.69%
University Hospital Of South Manchester Nhs Foundation Trust	191	64	53	-11	-17.65%	£35	£12	£8	-£3	-29.25%
Wirral University Hospital NHS F/T	0	0	93	93	0.00%	£0	£0	£26	£26	0.00%
Wrightington, Wigan And Leigh Nhs Foundation Trust	1,927	642	900	258	40.11%	£748	£249	£344	£95	38.13%
	149,381	49,655	62,729	13,074	26.33%	£33,764	£11,286	£11,963	£677	6.00%

Above table is highlighting an over performance for Southport & Ormskirk Hospital year to date. However, a proportion of this over performance is reflected in the block contract and consequently this value is over stated. Further details are provided in the Finance report.

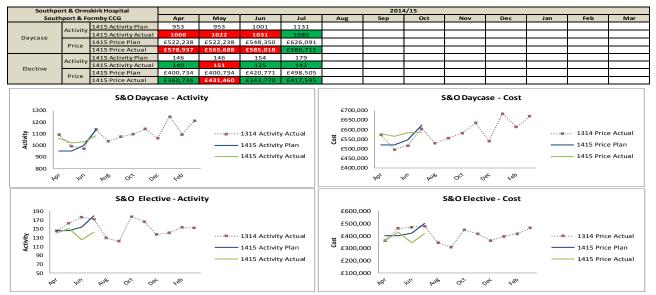
An increase in day cases is evident at the Royal Liverpool and Broadgreen Hospitals NHS Trust and an increase in elective activity in St Helens and Knowsley Trust. The CCG needs to look at this in the context of Southport & Ormskirk Hospital elective and day case performance position. Both of these providers have outstanding contract queries in place relative to the above.

### **3.2 Southport and Ormskirk Hospital NHS Trust**

S&O Hospital	Annual Activity	Plan to Date	Actual to date	Variance to date	Activity YTD	Annual Plan Price	Price Plan to Date	Price Actual to	Price variance to	Price YTD %
Planned Care PODS	Plan	Activity	Activity	Activity	% Var	(£000s)	(£000s)	Date (£000s)	date (£000s)	Var
Daycase	12,058	4,038	4,198	160	3.96%	£6,606	£2,219	£2,261	£42	1.90%
Elective	1,851	625	558	-67	-10.78%	£5,069	£1,721	£1,544	-£176	-10.26%
Elective Excess BedDays	392	132	88	-44	-33.19%	£90	£30	£21	-£9	-30.76%
OPFAMPCL - OP 1st Attendance Multi-Professional Outpatient First. Attendance (Consultant Led)	1,054	350	447	97	27.73%	£150	£50	£65	£15	30.39%
OPFASPCL - Outpatient first attendance single professional consultant led	23,023	7,644	7,607	-37	-0.48%	£3,355	£1,114	£1,085	-£29	-2.57%
OPFUPMPCL - Outpatient Follow Up Multi-Professional Outpatient Follow. Up (Consultant Led).	2,156	716	930	214	29.92%	£210	£70	£91	£21	30.47%
OPFUPSPCL - Outpatient follow up single professional consultant led	48,179	15,996	18,445	2,449	15.31%	£4,137	£1,374	£1,554	£180	13.12%
Outpatient Procedure	14,692	4,878	11,894	7,016	143.83%	£2,407	£799	£1,049	£250	31.25%
Grand Total	103,405	34,379	44,641	10,262	29.85%	£22,026	£7,376	£7,670	£294	3.99%

#### Table 3: Month 4 Planned Care - Southport and Ormskirk Hospital





### 3.3 Planned Care Key Issues

### 3.3.1 Southport and Ormskirk Hospital NHS Trust

Further investigation into increases in A&E attendances and non-elective admissions. Joint discussions to take place between Trust and NHS Southport & Formby CCG and NHS West Lancashire CCG as agreed at Contract and Quality Review meeting on the 3<sup>rd</sup> September 2014. Work will also be carried out between Cheshire and Merseyside Commissioning Support Unit and the Trust to ensure activity and finance are being allocated to correct PODS across the contract avoiding any false values due to block items.

#### 3.3.2 The Royal Liverpool and Broadgreen University Hospitals NHS Trust

The Trust has been issued with an activity query notice relating to over-performance reported in Month 3. In keeping with the terms of the contract, a meeting has been arranged between the Trust and commissioners to discuss this issue (date to be arranged). The outcome of discussions will be reported in a future report.

### 4. Unplanned Care

#### 4.1 All Providers

#### Table E: Month 4 Unplanned Care - All Providers

	Annual Activity	Plan to Date	Actual to date	Variance to	Activity YTD	Annual Plan	Price Plan to	Price Actual to	Price variance	Price YTD %
Provider Name	Plan	Activity	Activity	date Activity	% Var	Price (£000s)	Date (£000s)	Date (£000s)	to date (£000s)	Var
Aintree University Hospitals NHS F/T	1,467	490	419	-71	-14.55%	£826	£276	£286	£10	3.73%
Alder Hey Childrens NHS F/T	664	222	243	21	9.67%	£277	£94	£144	£49	52.57%
Countess of Chester Hospital NHS Foundation Trust	0	0	9	9	0.00%	£0	£0	£1	£1	0.00%
East Cheshire NHS Trust	0	0	4	4	0.00%	£0	£0	£0	£0	0.00%
Liverpool Heart and Chest NHS F/T	157	53	41	-12	-22.72%	£370	£124	£132	£8	6.57%
Liverpool Womens Hospital NHS F/T	207	69	77	8	11.37%	£179	£60	£58	-£2	-2.88%
Royal Liverpool & Broadgreen Hospitals	1,285	430	380	-50	-11.53%	£724	£242	£212	-£30	-12.22%
Southport & Ormskirk Hospital	51,197	17,213	18,757	1,544	8.97%	£26,149	£8,762	£9,492	£730	8.33%
ST Helens & Knowsley Hospitals	292	99	146	47	46.94%	£163	£56	£71	£15	27.06%
Wirral University Hospital NHS F/T	0	0	26	26	0.00%	£0	£0	£8	£8	0.00%
Central Manchester University Hospitals Nhs Foundation Trust	0	0	42	42	0.00%	£0	£0	£9	£9	0.00%
University Hospital Of South Manchester Nhs Foundation Trust	47	16	12	-4	-24.78%	£8	£3	£3	£0	10.59%
Wrightington, Wigan And Leigh Nhs Foundation Trust	62	21	22	1	6.45%	£53	£18	£8	-£9	-51.77%
Grand Total	55,378	18,613	20,178	1,565	8.41%	£28,748	£9,634	£10,427	£792	8.22%

The CCG is currently reviewing non-elective activity at Southport & Ormskirk Hospital NHS Trust.

### 4.2 Southport and Ormskirk Hospital NHS Trust

S&O Hospital	Annual Activity	Plan to Date	Actual to date	Variance to	Activity YTD	Annual Plan	Price Plan to	Price Actual to	Price variance	Price YTD %
Urgent Care PODS	Plan	Activity	Activity	date Activity	% Var	Price (£000s)	Date (£000s)	Date (£000s)	to date (£000s)	Var
A and E	32,878	11,247	12,026	779	6.93%	£3,429	£1,173	£1,260	£87	7.43%
Non Elective	10,554	3,444	4,004	560	16.25%	£18,636	£6,202	£6,597	£395	6.36%
Non Elective Non-Emergency	1,181	407	691	284	69.63%	£1,947	£681	£733	£52	7.66%
Non Elective Non-Emergency Excess Bed Day	169	96	45	-51	-52.94%	£49	£26	£15	-£10	-40.38%
Non Elective Short Stay	1,436	493	583	90	18.24%	£995	£345	£389	£44	12.74%
Non Elective Excess Bed Day	4,979	1,526	1,408	-118	-7.74%	£1,093	£335	£312	-£23	-6.91%
Grand Total	51,197	17,213	18,757	1,544	8.97%	£26,149	£8,762	£9,307	£544	6.21%

#### Table F: Month 4 Unplanned Care - Southport and Ormskirk Hospital NHS Trust

Table G: Month 4 Planned Care - Southport and Ormskirk Hospital NHS Trust 13/14 – 14/15 Comparison



### 4.3 Unplanned Care Key Issues

### 4.3.1 Southport & Ormskirk Hospital

Further investigation into increases in A&E attendances and non-elective admissions. Joint discussions to take place between Trust and NHS Southport & Formby CCG and NHS West Lancashire CCG as agreed at Contract and Quality Review meeting on the 3<sup>rd</sup> September 2014.

### 5. Mental Health

### 5.1 Mersey Care contract

The 2014/15 Expected Annual Contract Value for Mersey Care NHS Trust is £12,231,420 inclusive of CQUIN. A number of Contract Variations are being progressed and an updated Expected Annual Contract Value 2014/15 will be provided at Month 5.

	NHS S	Southport a	nd Formb	y CCG
PBR Cluster	2014/15 Plan	Caseload (May-2014)	Variance from Plan	% Variance
0 Variance	32	17	(15)	-47%
1 Common Mental Health Problems (Low Severity)	35	37	2	6%
2 Common Mental Health Problems (Low Severity with greater need)	45	33	(12)	-27%
3 Non-Psychotic (Moderate Severity)	162	167	5	3%
4 Non-Psychotic (Severe)	128	136	8	6%
5 Non-psychotic Disorders (Very Severe)	29	24	(5)	-17%
6 Non-Psychotic Disorder of Over-Valued Ideas	25	20	(5)	-20%
7 Enduring Non-Psychotic Disorders (High Disability)	96	119	23	24%
8 Non-Psychotic Chaotic and Challenging Disorders	62	73	11	18%
10 First Episode Psychosis	52	70	18	35%
11 On-going Recurrent Psychosis (Low Symptoms)	282	283	1	0%
12 On-going or Recurrent Psychosis (High Disability)	151	154	3	2%
13 On-going or Recurrent Psychosis (High Symptom & Disability)	105	109	4	4%
14 Psychotic Crisis	18	14	(4)	-22%
15 Severe Psychotic Depression	7	5	(2)	-29%
16 Psychosis & Affective Disorder (High Substance Misuse & Engagement)	6	6	-	0%
17 Psychosis and Affective Disorder – Difficult to Engage	35	32	(3)	-9%
18 Cognitive Impairment (Low Need)	365	318	(47)	-13%
19 Cognitive Impairment or Dementia Complicated (Moderate Need)	465	620	155	33%
20 Cognitive Impairment or Dementia Complicated (High Need)	159	203	44	28%
21 Cognitive Impairment or Dementia (High Physical or Engagement)	50	56	6	12%
Reviewed Not Clustered	30	37	7	23%
No Cluster or Review	46	98	52	113%
Total	2,385	2,631	246	10%

#### Table H NHS Southport & Formby CCG – Shadow PbR Cluster Activity

#### 5.1.1 Key Issues

- **Crisis Resolution Home Treatment and Assertive Outreach Teams –** Reporting over performance, Activity Plan set at a national level.
- **ADHD Service** Sefton CCGs recurrently commissioned additional service capacity in 2013/14 to reduce the size of the Sefton commissioned ADHD service waiting list. Commissioners are monitoring waiting times, waiting list and DNAs.
- **Care Home In reach** Commissioners reviewing the current configuration of the service and service delivery model.
- **Rathbone Rehabilitation Service** 2 patients delayed discharge, one of which has been delayed since February 2013 awaiting suitable further placement and the second who is also currently delayed awaiting a financial appointee before they can be transferred.
- **Delayed Bed Days** 199 Delayed Bed Days attributed to awaiting nursing home placement (122 days) public funding (30 days), patient/family choice (15 days) and Housing patients not covered by NHS & Community Care Act (32 days) for Sefton Local Authority area at Month 4.

### 5.2 Key Performance Indicator CPA follow up

## Table I- NHS Southport & Formby CCG Performance CPA follow up within 7 days of discharge from psychiatric inpatient care

				Apr-14	May-14	Jun-14	Jul-14
	Follow up from inpa	threshold					
	the % of people under adult mental illness specialties who were followed up within 7 days of						
CB_B19	discharge from psychia	atric inpatient care	95%	100%	93.75%	93.75%	100.00%

The Trust reports this KPI on a monthly basis but the consequence of the breach is based on the quarterly response. At Quarter 1 Mersey Care NHS Trust reported a catchment position of 98.3% which is above the threshold.

#### Table J NHS Southport & Formby CCG Performance CPA follow up within 2 days (48 hrs) for higher risk groups

			Apr-14	May-14	Jun-14	Jul-14
		threshold				
	CPA Follow up 2 days (48 hrs) for higher risk groups are					
	defined as individuals requiring follow up within 2 days					
	(48 hrs) By Crisis Resolution Home Treatment, Early					
	Intervention, Assertive outreach or Homeless Outreach					
MH_KPI.40	Team	95%	100%	100%	100%	100%

### 5.2.1 Improving Access to Psychological Therapies (IAPT) Inclusion Matters Sefton

Access to evidence-based psychological therapies is required to increase to 15% by Quarter 4 2014/15. We are currently reviewing the data from our provider around this measure.

Providers of Improving Access to Psychological Therapies (IAPT) are expected to achieve a recovery rate of 50% by Quarter 4 2014/15. Inclusion Matters Sefton are reporting a recovery rate of 46.6% for NHS Southport & Formby CCG patients at Month 4.

#### Table K PHQ13\_6 The Proportion of People who complete treatment who are moving to recovery

Period	Completed (KPI5)	Entered Below Caseness (KPI6b)	Moved to recovery (KPI6)	Recovery
Apr-14	289	31	107	41.5%
May-14	324	22	154	51.0%
Jun-14	249	17	100	43.1%
Jul-14	374	26	162	46.6%

### 6. Liverpool Community Health Performance

The 2014/15 Expected Annual Contract Value for Liverpool Community Health NHS Trust is  $\pounds 2,898,262$  including CQUIN. A number of Contract Variations are being progressed and an updated Expected Annual Contract Value 2014/15 will be provided at Month 5.

### 6.1 Key Issues

- The Trust has reported that over and under performances related to one of or a combination of factors; data quality issues relating to reporting onto electronic systems and staffing levels.
- Cheshire and Merseyside Commissioning Support Unit have highlighted a number of issues relating to performance, non-reported activity against service lines and omitted services with the Contract Statement. They have been discussed with the Trust and issues are currently being addressed.

### 6.2 Third Sector Contracts

- NHS Standard Contracts 2014/15 issued for signature. Cheshire and Merseyside Commissioning Support Unit are progressing sign off
- Quarter 1 Activity Monitoring submissions are being reviewed and outstanding submissions progress chased
- Commencement of Contract Review Meetings. The following issues have been raised so far; difficulties capturing electoral ward information, support required to complete NHS Information Governance Toolkit assessment and achievement of Level 2 Compliance. Support to address these issues is being discussed.

### 7. Quality and Performance

### 7.1 Southport & Formby CCG Performance Dashboard

#### Baseline os at 08/09/2014

			<u>a</u>	Direction of	Carrent Period	100
erformance indicators	Data Period	Target	Actual	Travel	Exception Commentary	Actions
PM reating and caring for people in a safe enviro	) 					<i>//</i> /
realing and caring for pappin in a care shorts					Southport & Formby CCG reported 4 new cases of	
ncidence of healthcare associated infection (HCAI) difficile (Cumulative) (CCG)	14/15 - July	1.0	<u>1</u>		C.difficile, 15 cases year to date. 2 cases acute aquired and 2 community, 1 of the community acquired cases relates to Aintree with the other community and acute	
ncidence of bealthcare associated infection (HEAI) difficile (Cumulative) (Southport & Ormskins)	14/15 - JUIV	×	H	Ţ	recorded against Southport & Ormskirk Trust.	There are no common themes arising from the cases and r Periods of increased incidence (Pil) have been recorded in 2014/5. All prescribing targets are now reliably being met. West Lancashire CCG has looked at the RCAs from five of the cases to date and have agreed that there have been no lapses in care. The Trust has a detailed action plan around this area including the following elements: • Rolling programme of bay closure to enable essential maintenance, deep cleaning and fogging • Replacement of all ward pillows with a robust, cleanable filtered pillow to prevent internal contamination and ingress of body fluids. • Reassessment of the Trust position against the ARHAI Prescribing toolkit. • Instigation of a monthly high-level (CEO, EMD, DNQ) C, difficile oversight group. • Use of VitalPAC to monitor for patients at risk of C, difficile by the use of pressure ulcer prediction scores.
ncidence of healthcare associated infection (HCAI) IRSA (Cumulative) (CCO)	34/15 - July	0	i.	Ţ	Southport & formby CCG reported 2 new cases of MRSA in July, one acute apportioned and one non-acute apportioned, bath cases at Southport & Ormsbirk.	
ncidence of healthcare associated infection (HCAI) IRSA (Cumulative) (Sauthport & Ormskirk)	14/15 - July	0	<b>8</b> . 1	Ť	Southport & Ormskirk reported 1 new case of MB5A in July, the first for 2018/15	The Trust recorded a first attributable MRSA bacteraemia to over two and a half years in July. At a Root Cause Analysis and subsequent Post-Infection Review with senior representatives of both CCGs it was not possible to determine the exact source of the infection. However there were two contributory factors: • The patient initially refused to be screened as he was confused and agressive on admission. This was not followed up on and this was only discovered when the infection Prevention Team ran a search. Trust screening complication screening is in excess of 92%. • The cannuls care plan was incomplete though there was no sign of a complication from any medical device.
						The Trust has implemented a range of actions including: • Changes to admission documentation for screening • Weekly checks by the infection Prevention Team into missed admission screens • Use of ViatPAC to supersede care plans to further strengthen monitoring
nhancing quality of life for people with long	term condition	ons				
atient experience of primary care IJ GP Services	Jan Mar 14 Jul-Sept 13 and		2.86%	New Measure		
hvices hplanned hospitalization for asthma, diabetes and	Jan-Mar 14		13.01%	New Measure		
planned hospitalisation for asthma, diabetes and plepsy in under 19s(cumulative) planned hospitalisation for chronic ambulatory care	14/15 - July		170.85	¥		
ensitive conditions(Cumulative)	14/15 - July		366.77	<b>v</b>		
mergency Admissions Composite Indicator(Cumulative)	14/15 - July		101210-020	New Measure		

the last second s	In a state set of the				
Helping people to recover from episodes of ill	health or fol		iry		
Patient reported outcomes measures for elective	2012/13	Eng Ave	0.08	Refreshed data	
procedures: Groin hernia	,	0.085			
Patient reported outcomes measures for elective	2012/13	Eng Ave	0.43	Refreshed data	
procedures: Hip replacement		0.438			
Patient reported outcomes measures for elective procedures: Knee replacement	2012/13	Eng Ave 0.318	0.31	Refreshed data	
Emergency readmissions within 30 days of discharge from hospital (Cumulative)	14/15 - July		16.93		
Emergency admissions for children with Lower Respiratory Tract Infections (LRTI)(Cumulative)	14/15 - July		29.90	$\leftrightarrow$	
Emergency admissions for acute conditions that should not usually require hospital admission(Cumulative)	14/15 - July		578.81	¥	
SQU06_01 - % who had a stroke & spend at least 90% of their time on a stroke unit <b>(CCG)</b>	14/15 - July	80%	90.00%	1	
SQU06_01 - % who had a stroke & spend at least 90% of their time on a stroke unit (Southport & Ormskirk)	14/15 - July	80%	84.62%	$\downarrow$	
SQU06_02 - % high risk of Stroke who experience a TIA are assessed and treated within 24 hours (CCG)	14/15 - July	60%	100%	$\leftrightarrow$	
SQU06_02 - % high risk of Stroke who experience a TIA are assessed and treated within 24 hours (Southport & Ormskirk)	14/15 - July	60%	83.33%	1	
Mental health					
Mental Health Measure - Care Programme Approach (CPA) - 95% (Cumulative) <b>(CCG)</b>	14/15 - Qtr1	95%	97.67%	$\downarrow$	
Preventing people from dying prematurely					
Under 75 mortality rate from cancer	2012		131.16		
Under 75 mortality rate from cardiovascular disease	2012		67.21		
Under 75 mortality rate from liver disease	2012		14.40		
Under 75 mortality rate from respiratory disease	2012		24.59		
Rate of potential years of life lost (PYLL) from causes considered amenable to healthcare (Males)	2012	2,778.45	2,870.30		Southport & Formby CCG achieved a rate of 2870.30 in 2012 which failed the planned target of 2778.45
Rate of potential years of life lost (PYLL) from causes considered amenable to healthcare (Females)	2012	2,091.36	2,160.50		Southport & Formby CCG achieved a rate of 2160.50 in 2012 which failed the planned target of 2091.36

Cancer waits – 2 week wait						
Maximum two-week wait for first outpatient						
appointment for patients referred urgently with	14/15 - June	93%	97.56%	$\leftrightarrow$		
suspected cancer by a GP – 93% (Cumulative) (CCG)						
Maximum two-week wait for first outpatient						
appointment for patients referred urgently with		000/	07.400/	$\leftrightarrow$		
suspected cancer by a GP – 93% (Cumulative) (Southport &	14/15 - June	93%	97.19%			
Ormskirk)						
				I	The CCG achieved 92.36% YTD marginally failing the 93%	
					target. 7 out of 29 patients where not seen within 2	
Maximum two-week wait for first outpatient					weeks in June which shows 85.7% of patients where seen	
appointment for patients referred urgently with breast	14/15 - June	93%	92.36%		within 2 weeks. The main reason for breaching was	
symptoms (where cancer was not initially suspected) –	14/15 June	5570	52.5070		unable to attend/re-arranged consultations. All of the	
93% (Cumulative) <b>(CCG)</b>					patient's waiting over 2 weeks where seen within 20	
				•	days. 3 of the 7 patients where at Southport & Ormskirk	
					Trust.	
Maximum two-week wait for first outpatient						
appointment for patients referred urgently with breast	14/15 - June	93%	96.05%			
symptoms (where cancer was not initially suspected) –				↓ ↓		
93% (Cumulative) (Southport & Ormskirk)						
Cancer waits – 31 days						
Maximum one month (31-day) wait from diagnosis to						
first definitive treatment for all cancers – 96%	14/15 - June	96%	99.53%	$\leftrightarrow$		
(Cumulative) (CCG)						
Maximum one month (31-day) wait from diagnosis to						
first definitive treatment for all cancers – 96%	14/15 - June	96%	100%	$\leftrightarrow$		
(Cumulative) (Southport & Ormskirk)						
Maximum 31-day wait for subsequent treatment where		0.494	00.054	1	The CCG did not achive the 94% target, marginally failing	
the treatment is a course of radiotherapy – 94%	14/15 - June	94%	93.85%		with 93.85% year to date. In month the CCG achived 100%.	
(Cumulative) <b>(CCG)</b> Maximum 31-day wait for subsequent treatment where				•		
the treatment is a course of radiotherapy – 94%	14/15 - June	94%	100%	$\leftrightarrow$		
(Cumulative) (Southport & Ormskirk)	14/13 - Julie	5470	10076			
Maximum 31-day wait for subsequent treatment where				٨		
that treatment is surgery – 94% (Cumulative) (CCG)	14/15 - June	94%	97.44%	T T		
Maximum 31-day wait for subsequent treatment where				•		
that treatment is surgery – 94% (Cumulative) (Southport &	14/15 - June	94%	97.22%	↑		
Ormskirk)	_,, 10 00.00	5.70				
Maximum 31-day wait for subsequent treatment where						
that treatment is an anti-cancer drug regimen – 98%	14/15 - June	98%	100%	$\leftrightarrow$		
(Cumulative) (CCG)						
Maximum 31-day wait for subsequent treatment where						
that treatment is an anti-cancer drug regimen – 98%	14/15 - June	98%	100%	$\leftrightarrow$		
(Cumulative) (Southport & Ormskirk)						

Cancer waits – 62 days						
Maximum 62-day wait for first definitive treatment						
following a consultant's decision to upgrade the priority	14/15 - June		89%	$\leftrightarrow$		
of the patient (all cancers) – no operational standard	14/15 June		0570			
set (Cumulative) (CCG)						
Maximum 62-day wait for first definitive treatment following a consultant's decision to upgrade the priority						
of the patient (all cancers) – no operational standard	14/15 - June		88.24%	$\leftrightarrow$		
set (Cumulative) (Southport & Ormskirk)						
Maximum 62-day wait from referral from an NHS						
screening service to first definitive treatment for all	14/15 - June	90%	100.00%	$\leftrightarrow$		
cancers – 90% (Cumulative) (CCG)						
Maximum 62-day wait from referral from an NHS						
screening service to first definitive treatment for all	14/15 - June	90%	100%	$\leftrightarrow$		
cancers – 90% (Cumulative) (Southport & Ormskirk)						
Maximum two month (62-day) wait from urgent GP						
referral to first definitive treatment for cancer – 85%	14/15 - June	85%	85.15%	$\leftrightarrow$		
(Cumulative) <b>(CCG)</b> Maximum two month (62-day) wait from urgent GP						
referral to first definitive treatment for cancer – 85%	14/15 - June	85%	85.32%			
(Cumulative) (Southport & Ormskirk)	14/13 - Julie	0370	63.3270	$\mathbf{V}$		
Mixed Sex Accommodation Breaches						
					The CCG had 6 breaches in July, all of the breaches relate	
Mixed Sex Accomodation (MSA) Breaches per 1000 FCE	14/15 - July	0.00	1.50	$\mathbf{V}$	to Southport & Ormskirk Trust. No breaches recorded for	
(CCG)	. ,				the previous 2 months.	
Mixed Sex Accomodation (MSA) Breaches per 1000 FCE	14/15 - July	0.00	1.00		The Trust had 6 Mixed Sex breaches in July, none in the	
(Southport & Ormskirk)	14/13 - July	0.00	1.00		previous 2 months.	
Referral To Treatment waiting times for non-u	irgent consul	tant-led ti	reatment			
The number of Referral to Treatment (RTT) pathways						
greater than 52 weeks for completed admitted pathways	14/15 - July	0	0	$\leftrightarrow$		
(un-adjusted) (CCG)						
The number of Referral to Treatment (RTT) pathways	14/15	0				
greater than 52 weeks for completed admitted pathways	14/15 - June	0	0	$\leftrightarrow$		
(un-adjusted) <b>(Southport &amp; Ormskirk)</b> The number of Referral to Treatment (RTT) pathways						
greater than 52 weeks for completed non-admitted	14/15 - July	0	0			
pathways (CCG)	1,15 July	Ū		$\leftrightarrow$		
The number of Referral to Treatment (RTT) pathways				1	The Trust has 1 patient breach over 52 weeks, this is the	
greater than 52 weeks for completed non-admitted	14/15 - June	0	1		first breach in 2014/15. This was not a Southport &	
pathways (Southport & Ormskirk)				$\mathbf{V}$	Formby CCG patient.	
The number of Referral to Treatment (RTT) pathways	14/15 - July	0	0	$\leftrightarrow$		
greater than 52 weeks for incomplete pathways. (CCG)	14/13 - July	U				
The number of Referral to Treatment (RTT) pathways						
greater than 52 weeks for incomplete pathways. (Southport & Ormskirk)	14/15 - June	0	0	$\leftrightarrow$		

Admitted patients to start treatment within a maximum of 18 weeks from referral – 90% (CCG)	14/15 - July	90%	93.18%	$\checkmark$		
Admitted patients to start treatment within a maximum of 18 weeks from referral – 90% (Southport & Ormskirk)	14/15 - June	90%	92.99%	$\downarrow$		
Non-admitted patients to start treatment within a maximum of 18 weeks from referral – 95% (CCG)	14/15 - July	95%	98.12%	$\leftrightarrow$		
Non-admitted patients to start treatment within a maximum of 18 weeks from referral – 95% <b>(Southport &amp; Ormskirk)</b>	14/15 - June	95%	98.53%	$\leftrightarrow$		
Patients on incomplete non-emergency pathways (yet to start treatment) should have been waiting no more than 18 weeks from referral – 92% <b>(CCG)</b>	14/15 - July	92%	97.93%	$\leftrightarrow$		
Patients on incomplete non-emergency pathways (yet to start treatment) should have been waiting no more than 18 weeks from referral – 92% <b>(Southport &amp; Ormskirk)</b>	14/15 - June	92%	98.10%	$\leftrightarrow$		
A&E waits						
Percentage of patients who spent 4 hours or less in A&E (Cumulative) (CCG)	14/15 - July	95.00%	97.53%	$\leftrightarrow$		
Percentage of patients who spent 4 hours or less in A&E (Cumulative) (Southport & Ormskirk)	14/15 - July	95.00%	97.30%	$\leftrightarrow$		
Diagnostic test waiting times						
% of patients waiting 6 weeks or more for a Diagnostic Test <b>(CCG)</b>	14/15 - July	1.00%	0.19%	$\checkmark$		
% of patients waiting 6 weeks or more for a Diagnostic Test <b>(Southport &amp; Ormskirk)</b>	14/15 - June	1.00%	0.08%	1		
Category A ambulance calls						
Ambulance clinical quality – Category A (Red 1) 8 minute response time <b>(CCG)</b> (Cumulative)	14/15 - July	75%	68.18%	$\downarrow$	The CCG achived 62% in July and as such the year to date figure is also below target. Only in May was the monthly target achieved.	
Ambulance clinical quality – Category A (Red 2) 8 minute response time <b>(CCG)</b> (Cumulative)	14/15 - July	75%	67.11%	$\downarrow$	The CCG achived 63% in July and as such the year to date figure is also below target. Only in May was the monthly target achieved.	
Ambulance clinical quality - Category 19 transportation time <b>(CCG)</b> (Cumulative)	14/15 - July	95%	89.96%	$\downarrow$	The CCG achived 90% in July and as such the year to date figure is also below target.Target yet to be achieved for 2014/15.	
Ambulance clinical quality – Category A (Red 1) 8 minute response time <b>(NWAS)</b> (Cumulative)	14/15 - July	75%	72.19%	Ŷ	68% was recorded in July, as such the year to date figure is below target. NWAS failed to achieved 75% for the past 3 months.	
Ambulance clinical quality – Category A (Red 2) 8 minute response time <b>(NWAS)</b> (Cumulative)	14/15 - July	75%	73.07%	$\downarrow$	69% was recorded in July, as such the year to date figure is below target. NWAS failed to achieved 75% for the past 3 months.	
Ambulance clinical quality - Category 19 transportation time <b>(NWAS)</b> (Cumulative)	14/15 - July	95%	95.35%	$\leftrightarrow$		

### 7.2 Friends and Family – Southport and Ormskirk NHS Trust

Clinical Area	Response Rate (RR) Target	RR Actual (July 2014)	RR - Trajectory From Previous Month (June 14)	Score Target (England Average)	Score Actual (July 2014)	Score - Trajectory From Previous Month (June 14)	Comments
Inpatients	20%	37.1%	Ļ	74	70	$\downarrow$	
A&E	20%	8.4%	Î	53	40	$\downarrow$	
Q1 - Antenatal Care	20%	-		62	79	1	
Q2 - Birth	20%	25.0%	Ļ	77	46	↓	
Q3 - Postnatal Ward	20%	-		65	68	$\downarrow$	
Q4 - Postnatal Community Ward	20%	-		75	75	$\downarrow$	

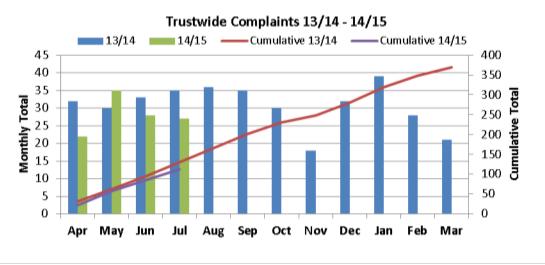
\* Patient responses are used to calculate a 'Net Promoter Score (NPS)', a figure which is reported nationally. To work out the 'net promoter score', the number of detractors is subtracted from the number of promoters and then divided by the total number of responses. The score can therefore the score can be as low as -100 (everybody is a detractor) or as high as +100 (everyone is a promoter). A score between -100 and-50 is considered to be in the lowest quartile, -50 t0+50 the middle quartiles, and +50 to +100 the upper quartile. There is no literature on what is considered an acceptable NPS, but trusts usually aim for +50 or higher

- Southport continues to score above the 15% CQUIN target for the combined response rate.
- They continue to score above the 15% response rate for Inpatients
- They continue to score below the 15% response rate in A&E.
- Their net promoter score is in the upper mid quartile for A&E
- The net promoter score is in the upper quartile for inpatients and for their combined results.

Work is ongoing with the Trust to review Friends & Family Performance, at the CQPG in September the Trust advised they were liaising with Aintree Hospital to share their A&E good practice, in addition 'incentivisation' through AQC (Alternative Quality Contract) to introduce a text reminder service.

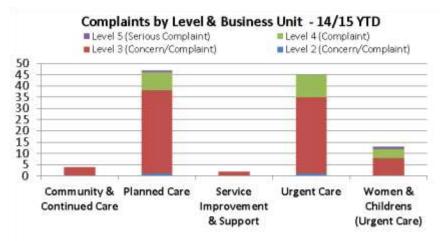
### 7.3 Complaints

The Graphs below highlights Southport & Ormskirk Hospital's number of complaints requiring investigation received by the Trust YTD compared to the same period last year. This information has gone to the Trust's Board.



The number of complaints received in July 14 was 27, similar to the 28 complaints received in June but 8 less than received in July 2013. Overall, for 14/15, the Trust has received **6% fewer formal complaints than were received for the same period in 13/14**.

The split of these complaints by Business Unit and Level is shown below.



Complaints to the Trust are dominated by those relating to clinical care, 44% of all complaints cite clinical treatment, although this has reduced significantly in July. Co-Ordination of medical treatment, poor nursing care and wrong diagnosis being the main reasons.

Oral communication continues to be an area of concern within the Trust, with 8 complaints in July citing this as an issue, the highest number this financial year. Patients are complaining about a lack of clear explananation around treatment, diagnosis, and communication with family members. 19 complaints received between April and July contain issues around staff attitude. These relate to both Doctors and Nurses, including Agency Nurses. Trust action plans are being monitored via Quality & Safty Committee and at the Board.

### 7.4 Serious Untoward Incidents (SUIs)

### 7.4.1 NHS Southport and Formby CCG

2 serious incidents reported in July 2014 relating to NHS Southport and Formby CCG patients, 14 incidents reported year to date. There has been 1 repeated incident reported year to date relating to 2x suspected suicides.

Row Labels	Apr	May	Jun	Jul	Aug	YTD
Alder Hey						
Surgical Error		1				1
Allegation against HC professional					1	1
Liverpool Community Health						
Child death					1	1
Mersey Care NHS Trust						
Suspected suicide		1			1	2
Unexpected death of community patient (in receipt)		1				1
Admission of under 18s to adult mental health ward	1					1
Attempted suicide by inpatient (in receipt)		1				1
Royal Liverpool & Broadgreen NHS Trust						
Serious Incident by Inpatient (not in receipt)			1			1
Southport & Ormskirk						
Radiology/Scanning incident	1					1
Confidential information leak				1		1
Safeguarding Vulnerable Child			1			1
Delayed diagnosis			1			1
Drug incident (general)				1		1
Grand Total	2	4	3	2	3	14

#### Table L Serious Untoward incidents NHS Southport & Formby CCG Patients by Trust

### 7.4.2 Southport and Ormskirk Hospital NHS Trust

1 serious incidents reported by the Trust in August 2014 affecting a NHS West Lancashire CCG patient. There have been 8 SUIs reported year to date, 2 of those categorised as never events (highlighted below in red).

Table M Reported Serious Untoward incidents - Southport and Ormskirk Hospital NHS Trust

Row Labels	Apr	May	Jun	Jul	Aug	YTD
Southport & Formby						
Radiology/Scanning incident	1					1
Confidential information leak				1		1
Safeguarding Vulnerable Child			1			1
Delayed diagnosis			1			1
Drug incident (general)				1		1
West Lancashire CCG						
Adverse media coverage or public concern about the					1	1
organisation or the wider NHS					-	-
Drug incident (chemotherapy)				1		1
Delayed diagnosis				1		1
Grand Total	1	0	2	4	1	8