

Vale of York CCG Core Performance Dashboard August 2013

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SUMMARY OF PERFORMANCE

Current assessment

Domain 1: Preventing people from dying prematurely



Domain 2: Enhancing Quality of Life for People with Long Term Conditions



Domain 3: Helping people recover from episodes of ill health or injury



Domain 4: Ensuring that people have a positive experience of care



Domain 5: Providing a safe environment and protecting from harm



Domain 6: Enhancing quality of life for people with Mental Health conditions (LYPFT)



Finance



QIPP



VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Domain	Indicator	Objective	Coverage	Period Covered	Planned Performance	Actual Performance	RAG Rating	Recovery plan in place	Recovery date	Assurance
Domain 1: Preventing people from dying prematurely	Ambulance response times: percentage of Red 1 999 calls responded to within 8 minutes.	Minimum of 75% during 2013-14	CCG	Jul-13	75%	74.2%	A			During the time period there were 93 Red 1 category calls of which 69 were responded to within 8 minutes. The 75% target was underachieved by 1 incident.
	Ambulance response times: percentage of Red 2 999 calls responded to within 8 minutes.	Minimum of 75% during 2013-14	CCG	Jul-13	75%	74.4%	A			During the time period there were 1205 incidents, 896 were responded to within 8 mins. 904 needed to achieve the target, therefore the target was breached by 8 incidents.
	Ambulance response times: percentage of Red 1 999 calls responded to within 19 minutes.	Minimum of 95% during 2013-14	CCG	Jul-13	95%	94.6%	A			Out of a total of 93 incidents, 88 were responded to within 19 mins. 89 were needed to achieve the target, therefore the target was breached by 1 incident.
	Percentage of patients referred by a primary care professional for treatment/investigation of breast symptoms (excluding those where cancer is suspected) who are seen by a specialist within 14 days.	Minimum of 93% during 2013-14	CCG	Jun-13	93%	92.4%	A			There were a total of 119 referrals to York Hospitals Foundation Trust (YHFT) of which 110 were seen within 14 days. There were 9 breaches. The data shows that 6 of these were due to patient choice. If these 6 had not been cancelled the target would have been met.
Domain 3: Helping people recover from episodes of ill health or injury	Emergency admissions for acute conditions that should not usually require hospital admission.	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Unknown	A			This indicator remains a local priority, however it has not been possible to refresh the position since last months performance dashboard due to issues relating to data flows. The data is currently being quality assured and therefore it is not available.
Domain 4: Ensuring that people have a positive experience of care	95th percentile for admitted patients that were on a RTT pathway	Maximum 23 weeks	CCG	Jun-13	23	26.1	R	To be approved	Trajectory to be agreed	This target has underachieved for the past two months. However, there is a month on month improvement. The historical long waits have reduced significantly.
	Number of patients still waiting for treatment where they have waited 52 weeks or more after referral by their GP or other healthcare professional.	Zero	CCG	Jun-13	0	2	R	n/a	achieved	The latest reported position for August is that there are no patients waiting over 52 weeks. The two patients waiting for procedures in June have now had their operations.
	Percentage of patients that waited over 6 weeks for a diagnostic test.	<1% of patients	CCG	Jun-13	<1%	1.02%	A			There were 39 breaches as follows:- 3 at Hull, 2 at Leeds, 34 at York.
	Percentage of patients that wait no longer than 4 hours in A&E from arrival to either discharge or admission.	Average of 95% over 2013-14	Host provider	Jul-13	95%	94.9%	A			A&E activity has increased in July & August which has impacted on performance. In comparison to the previous year there is a slight improvement. Four week average 105 breaches.
	Proportion of GP referrals to first outpatient appointments booked using Choose and Book	70%	CCG	Jun-13	70%	27.7%	R			Choose and book has been discussed in the Governing Body and while performance against the target for use of the choose and book system is poor, the CCG is reasonably assured that GPs do discuss and offer choice to patients. Development of a referral support service will further this commitment.
Domain 5: Providing a safe environment and protecting from harm	Number of patients the Provider is responsible for with Methicillin Resistant Staphylococcus Aureus (MRSA) bacteraemia infections.	No more than 0	CCG	Jun-13	No more than 0	1	R			One case of MRSA has been assigned to York Hospital Foundation Trust. Awaiting the outcome of the Route Cause Analysis.
	Total number of Clostridium difficile cases allocated to the CCG.	No more than 71	CCG	Jun-13	No more than 6	12	R			Up to the 14th August 2013, York Hospital Foundation Trust have reported 19 cases of C.Diff against the annual target of 43 (joint target with Scarborough Hospital who have 9 cases). There are 7 cases reported in the community.
	Number of hospital attributed Clostridium difficile cases allocated to York Hospitals Foundation Trust	No more than 43	Host Provider	Jun-13	No more than 4	9	R	To be approved	Trajectory to be agreed	As at 14th August 2013, York Hospital Foundation Trust had reported 28 cases of C.Diff against the annual target of 43.
Domain 6: Enhancing quality of life for people with Mental Health conditions (Leeds York Partnership Foundation Trust - LYFFT)	Delayed Transfers of Care.	Maximum Delay of 7.5%	CCG	Jun-13	7.5%	9.62%	A	Plan has been established by provider	To be agreed	Performance is above target, Leeds York Partnership Foundation Trust (LYFFT) report "Performance continues to improve within York and North Yorkshire (YNY) services". There are currently 12 service users in YNY services awaiting nursing home placements. The current cases indicate an issue with the provision of nursing home beds in York.
	Proportion of patients on Care Programme Approach (CPA) discharged from inpatient care who are followed up within 7 days.	95%	CCG	Jun-13	95%	91.3%	A			There were 5 breaches in Q1 in York and North Yorkshire (YNY) due to staff no being able to contact service-users despite numerous attempts made
	Proportion of people who have depression and/or anxiety disorders who receive psychological therapies (IAPT).	4.1% for 2013-14	NYU	Q1 13/14	1.03%	0.44%	R	To be approved	Trajectory to be agreed	Leeds York Partnership Foundation Trust (LYFFT) have undertaken an audit of the service from April 2012 to March 2013. The plan is to introduce a Single Point of Access and Referral point for the North Yorkshire Services. A comprehensive service improvement programme for 2013/14 is in development.

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date
			Period Covered	Planned Performance	Actual Performance	RAG Rating	
Domain 1: Preventing people from dying prematurely							
Ambulance response times: percentage of Red 1 999 calls responded to within 8 minutes.	Minimum of 75% during 2013-14	CCG	Jul-13	75%	74.2%	A	71.4%
Ambulance response times: percentage of Red 2 999 calls responded to within 8 minutes.	Minimum of 75% during 2013-14	CCG	Jul-13	75%	74.4%	A	74.5%
Ambulance response times: percentage of Red 1 999 calls responded to within 19 minutes.	Minimum of 95% during 2013-14	CCG	Jul-13	95%	94.6%	A	97.3%
Ambulance response times: percentage of Red 2 999 calls responded to within 19 minutes.	Minimum of 95% during 2013-14	CCG	Jul-13	95%	95%	G	95.2%
Percentage of patients urgently referred by a primary care professional for suspected cancer that are seen by a specialist within 14 days.	Minimum of 93% during 2013-14	CCG	Jun-13	93%	95.4%	G	94.9%
Percentage of patients referred by a primary care professional for treatment/investigation of breast symptoms (excluding those where cancer is suspected) who are seen by a specialist within 14 days.	Minimum of 93% during 2013-14	CCG	Jun-13	93%	92.4%	A	95.4%
Percentage of patients that wait no more than 31 days from the date of the decision to undergo treatment to receive their first stage of treatment for cancer.	Minimum of 96% during 2013-14	CCG	Jun-13	96%	98.2%	G	98.7%
Percentage of patients that wait no more than 31 days to receive their second or subsequent stage of treatment for cancer where that treatment is drug therapy.	Minimum of 98% during 2013-14	CCG	Jun-13	98%	100%	G	99.3%
Percentage of patients that wait no more than 31 days to receive their second or subsequent stage of treatment for cancer where that treatment is surgery.	Minimum of 94% during 2013-14	CCG	Jun-13	94%	96.8%	G	95.8%
Percentage of patients that wait no more than 31 days to receive their second or subsequent stage of treatment for cancer where that treatment is radiotherapy.	Minimum of 94% during 2013-14	CCG	Jun-13	94%	100%	G	99.2%
Percentage of patients urgently referred by a primary care professional that wait no more than 62 days from the date of referral to receive their first stage of treatment for cancer.	Minimum of 85% during 2013-14	CCG	Jun-13	85%	86.5%	G	87.4%
Percentage of patients referred by an NHS Screening Service that wait no more than 62 days from the date of referral to receive their first stage of treatment for cancer.	Minimum of 90% during 2013-14	CCG	Jun-13	90%	100%	G	100%
Percentage of patients that have their priority upgraded by a consultant that suspects cancer that wait no more than 62 days to receive their first stage of treatment.	Minimum of 90% during 2013-14	CCG	Jun-13	90%	n/a	G	n/a
Domain 1 - Overall Red/Amber/Green (RAG) rating						A	

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date
			Period Covered	Planned Performance	Actual Performance	RAG Rating	
Domain 2: Enhancing Quality of Life for People with Long Term Conditions							
Proportion of people with a LTC who are "supported by people providing health and social care services to manage their condition".	Top Quartile	CCG	Q4 12/13	Top Quartile	88.6%	G	-
Unplanned hospitalisation for chronic ambulatory care sensitive conditions (adults).	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Same	G	-
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19's	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Same	G	-
Domain 2 - Overall RAG rating						G	

Domain 3: Helping people recover from episodes of ill health or injury							
Emergency admissions for acute conditions that should not usually require hospital admission.	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Worse	A	-
Percentage of stroke patients that spend at least 90% of their time in hospital on a dedicated stroke ward.	Minimum of 80%	Host ProvComm	Q4 12/13	80%	83.9%	G	85.7%
Percentage of non-admitted patients, who have a Transient Ischaemic Attack and a higher risk of stroke, who are treated (including all relevant investigations) within 24 hours of contacting a healthcare professional.	Minimum of 60%	Host ProvComm	Q4 12/13	60%	77.6%	G	80.8%
Domain 3 - Overall RAG rating						A	

Domain 4: Ensuring that people have a positive experience of care							
95th percentile for admitted patients that were on a RTT pathway	Maximum 23 weeks	CCG	Jun-13	23	26.1	R	-
95th percentile for non-admitted patients that were on a RTT pathway	Maximum 18.3 weeks	CCG	Jun-13	18.3	17.2	G	-
95th percentile for patients still on a 18 week pathway	Maximum 28 weeks	CCG	Jun-13	28	19.8	G	-
Percentage of patients admitted for hospital treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 90% during 2013-14	CCG	Jun-13	90%	91.3%	G	-
Percentage of non-admitted patients treated by a consultant (or consultant led service) within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 95% during 2013-14	CCG	Jun-13	95%	96.2%	G	-
Percentage of patients still waiting for treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 92% during 2013-14	CCG	Jun-13	92%	93.7%	G	-
Number of patients still waiting for treatment where they have waited 52 weeks or more after referral by their GP or other healthcare professional.	Zero	CCG	Jun-13	0	2	R	-
Percentage of patients that waited over 6 weeks for a diagnostic test.	<1% of patients	CCG	Jun-13	<1%	1.02%	A	-
Percentage of patients that wait no longer than 4 hours in A&E from arrival to either discharge or admission.	Average of 95% over 2013-14	Host provider	Jul-13	95%	94.9%	A	-
Mixed Sex Accommodation Breaches per 1000 FCEs (No of breaches)	<1 per 1000 FCEs	CCG	Jun-13	<1	0.0 (0)	G	-
Patient Experience survey (IP 2012 Q41) involved satisfactorily in decisions about care and treatment	Same or Best Perf Category	Host provider	2012	Same or Best Perf Category	Same	G	-

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date
			Period Covered	Planned Performance	Actual Performance	RAG Rating	
Patient Experience survey (IP 2012 Q73) overall level of respect and dignity	Same or Best Perf Category	Host provider	2012	Same or Best Perf Category	Same	G	-
Proportion of GP referrals to first outpatient appointments booked using Choose and Book	70%	CCG	Jun-13	70%	27.7%	R	-
Domain 4 - Overall RAG rating						A	

Domain 5: Providing a safe environment and protecting from harm							
Total number of Methicillin Resistant Staphylococcus Aureus (MRSA) bacteraemia cases allocated to the CCG.	No more than 0	CCG	Jun-13	No more than 0	1	R	2
Total number of Methicillin Sensitive Staphylococcus Aureus (MSSA) bacteraemia cases allocated to the CCG.	-	CCG	Jun-13	-	7	G	23
Total number of Clostridium difficile cases allocated to the CCG.	No more than 71	CCG	Jun-13	No more than 6	12	R	26
Number of hospital attributed Clostridium difficile cases allocated to York Hospitals Foundation Trust	No more than 43	Host Provider	Jun-13	No more than 4	9	R	21
Percentage of adult inpatients who have a Venous Thrombosis Embolism (VTE) risk assessment on admission.	90%	Host provider	Apr-13	90%	93.2%	G	93.2%
Summary Hospital Mortality Index	As expected or better	Host provider	Q3 12/13	As expected or better	As expected	G	As expected
Total Never Events reported	0	CCG	Jul-13	0	0	G	0
Total Number of Serious Incidents	-	CCG	Jul-13	-	6		16
Domain 5 - Overall RAG rating						R	

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date
			Period Covered	Planned Performance	Actual Performance	RAG Rating	
Domain 6: Enhancing quality of life for people with Mental Health conditions (Leeds York Partnership Fo							
Delayed Transfers of Care.	Maximum Delay of 7.5%	CCG	Jun-13	7.5%	9.62%	A	10.3%
Number of newly diagnosed cases of first episode psychosis for whom early intervention is provided.	Minimum of 34 in 2013/14	CCG	Jun-13	34	NOT REPORTED	-	
Proportion of admissions to inpatient services that were gate kept by the crisis resolution home treatment teams.	95%	CCG	Jun-13	95%	95.0%	G	92.4%
Proportion of patients on Care Programme Approach (CPA) discharged from inpatient care who are followed up within 7 days.	95%	CCG	Jun-13	95%	91.3%	A	94.3%
Cumulative Adult inpatient Bed Occupancy rate (including home leave).	Maximum safety compliance of 90%	CCG	Jun-13	90%	91%	A	94.2%
Cumulative rate of re-admissions to adult inpatient beds within 28 days of discharge (excluding Forensic Services in line with national codes).	Decreasing with Maximum of 4%	CCG	Jun-13	4%	3.85%	G	9.1%
Proportion of people who have depression and/or anxiety disorders who receive psychological therapies (IAPT).	4.1% for 2013-14	CCG	Q1 13/14	1.03%	0.44%	R	
Proportion of those referred to IAPT services that enter treatment.	Minimum of 50%	CCG	Q1 13/14	50%	50.6%	G	
Proportion of IAPT service users who complete treatment who are moving to recovery.	Minimum of 50%	CCG	Q1 13/14	50%	69.6%	G	
Number of Mental Health episodes of Mixed Sex Accommodation (MSA).	0	CCG	Jun-13	0	0	G	0
Number of Mental Health Never events.	0	CCG	Jun-13	0	0	G	0
Domain 6: - Overall RAG rating						R	

KEY PERFORMANCE INDICATORS (KPI's) - SUPPORTING NOTES

RAG (red/amber/green) rated performance for latest performance

Green = achieved planned performance for current period

Amber = within 5% of planned performance for current period

Red = under-performing against planned performance by more than 5%

For items based on quartiles, Green = Upper quartile, Amber = Inter-quartile range, and Red = Lower quartile

For items based on trend, Green = gradient in line with objective, Amber = gradient is "flat", Red = gradient is opposite to objective.

For mortality, Green = either "as expected" or "lower than expected", Red = "higher than expected".

Key Performance Indicator (KPI) level scoring

The RAG rating for each indicator is converted into a score for each item: Green = 3 points, Amber = 1 point, and Red = 0 points.

However, in some cases the indicators are grouped to provide a better balance between different areas. The scoring matrix column indicates where groups exist.

In these cases, the combined score is derived from a matrix of possible combinations of RAG. The combinations are as follows:

Red in any individual indicator results in Red overall for the group

If two indicators are grouped, then a Green and Amber combination results in Amber overall.

If three indicators are grouped, then if two indicators are Amber the group is Amber, if one indicator is Amber, the group is Green.

Groups where the individual indicators are wholly Green, Red or Amber, retain the same overall RAG.

Domain Level Scoring

The scores are summed across the Performance and Quality categories and expressed as a percentage of the total maximum possible score for each domain.

As there are a varied number of indicators within each domain, it is necessary to apply different scoring criteria to attribute an overall RAG rating which is presented in the summary assessment.

The scoring criteria is as follows:-

Domains 1, 4 & 6 **Green** = 90% or higher
 Amber = 75% or higher, but less than 90%
 Red = Less than 75%

Domains 2, 3 **Green** = 80% or higher
 Amber = 65% or higher, but less than 80%
 Red = Less than 65%

Domain 5 **Green** = 85% or higher
 Amber = 70% or higher, but less than 85%
 Red = Less than 70%

Coverage

The data presented is available in a number of formats regarding coverage. The following sets out a brief explanation of the terms used:

CCG - the data are based on the registered patients of the relevant CCG practices, regardless of provider.

Patch - this is an area that approximates to the CCG geographical coverage, normally based on the former PCG/PCT "patches" e.g. Selby & York.

Host Provider - this data relates to all the patients of a provider "hosted" by the CCG regardless of which practice they are registered with e.g. YHFT is hosted by VoYCCG.

Host ProvComm - this data relates to the Host provider as described above, but is limited to patients that are the responsibility of NHS North Yorkshire and York (not exclusively the CCG).

FINANCE - EXECUTIVE SUMMARY

Finance Dashboard for the Vale of York CCG: MONTH 4 (July)

This report presents the financial position for Vale of York CCG to the end of July 2013 (Month 4).

Allocations

The table below records the changes to allocations since start point allocations were notified by NHS England in December 2012: There have been no changes to allocations in month, however the CCG has actioned a transfer from Running Costs to Programme Costs.

	Programme Costs £'000	Running Costs £'000
Initial allocation	357,831	8,333
Subsequent changes		
Deficit 2012/13	-3,466	
Specialised services adjustment	2,236	
Military Health	-26	
Adjustment to Running costs		-3
Allocation at Month 3	356,575	8,330
Changes notified by NHS England In month	0	0
VoY transfer of resources from Running Costs to Programme Costs	1,733	-1,733
Allocation at Month 4	358,308	6,597

Expenditure – Programme Costs

Following conclusion of negotiations with Providers re. the 2013/14 contracts, the financial plan has been updated to reflect actual contract values as opposed to forecast contract values which were based on performance to month 8, 2012/13. The opportunity has also been taken to review progress against delivery of this years QIPP target (£10.7m).

The review identified challenges in delivering a balanced financial plan: The issue has been discussed with the Local Area Team and the Governing Body, and with appropriate corrective action, financial balance has been re-established and a position close to breakeven at the end of the financial year is currently forecast.

Fundamental to re-establishing financial balance has been the following action;

- Contingency reserve – the reserve has been reduced by £2.17m to £1.04m (0.3% of turnover) to reflect the higher than anticipated value of Provider Contracts.
- 1% recurrent Surplus – the CCG had planned to hold a recurrent reserve of 1% (£3.5m), however, to offset part of the slippage on the QIPP target, this has been reduced to £2.1m (0.6%).

There remains an assumption that the CCG will also deliver a further £1.47m of QIPP savings by the year end; this is in addition to the £5.7m of schemes already identified.

Although these actions re – establish a balanced financial plan, achievement of financial balance by the year end will remain challenging. The financial position to month 4 and challenges facing the CCG are discussed further below.

Acute Services – Overall, these services are overspent by £412k. York Acute Foundation Trust is overspent by £909 and Non Contracted Activity underspent by £621k. In regard to York Acute FT, the contract year to date in over performing in;

- Emergencies
- Electives
- 1st Out Patients
- Outpatient Procedures.

The CSU now have access to SUS data for month 2 and once validated, will be further analysed to gain a greater understanding of the over performance.

The underperformance on Non Contracted Activity is unexpected as the CCG budgets were set on the basis of the month 8 forecast outcome: Further analysis is needed to confirm the current level of underperformance and year end forecast.

Other services – underspent by £1,124k overall with Continuing Care underspent by £1,450k. The expenditure position on Continuing Care for month 4 is based upon data held within the QA Database and should therefore reflect the full cost of services provided to date (Full accruals basis).

This underspend is however surprising, given that on a PCT wide basis, the Continuing Care budget overspent in 2012/13. The recorded position for month 4 must therefore be treated with caution and further investigation will be undertaken for month 5. Even if the position for Vale of York is proven to be correct, existence of a risk share arrangement for this service across the Health Community may require the sharing of over / under spends across the four North Yorkshire CCG's and may lead to the need to revise the Vale of York position.

Community Services – Harrogate and District Foundation Trust overspent by £255k due to the cost of the GP Out Of Hours Service; a reserve exists for this service and will be released to the budget line in month 5.

Primary Care – Prescribing is over spent to date by £588k and further work is being undertaken to confirm the recorded position and year end forecast. In particular, it is unclear at this stage which elements of the prescribing budget were transferred with the Public Health function to the Local Authority and the expenditure currently charged to the CCG which needs re-charging to the Local Authority to reflect this transfer of function.

Forward Look – based upon the information available when the financial plan was re –stated, the CCG is planning to breakeven by the year end. Critically, this depends upon the following assumptions;

- That the over trading on York Acute can be held within £1m
- That neither Prescribing nor Continuing Healthcare Overspend.

Delivery of a balanced financial position at the year end will depend upon managing these risks.

Expenditure – Running Costs

The CCG is underspent on running costs at the end of month 4 by £74k attributable solely to the pay budgets. The contract with North Yorkshire and Humber CSU and balance of the non pay budgets are close to breakeven..

Aged Creditors

The CCG's compliance against the Code of Better Payment Practice is mixed. The target is to pay all non-NHS trade creditors within 30 days of receipt of goods or a valid invoice (whichever is later) unless other payment terms have been agreed. By invoice value, performance against the Better Payments Code of Practice remains above target. However, in regard to Non NHS Creditors only 87% of total invoices were paid within the target timescale.

FINANCE PROGRAMME COSTS

CUMULATIVE TO DATE AND FORECAST OUTTURN

Trading Position and Reserves

Area	Cumulative To Date			Forecast Outturn		
	Ledger					
	Budget £000	Actual £000	Variance £000	Budget £000	Actual £000	Variance £000
Commissioned Services						
Acute Services						
York Hospitals NHS Foundation Trust	55,368	56,277	909	166,105	167,105	1,000
York Hospitals NHS Foundation Trust - MSK	702	712	10	2,107	2,150	43
Leeds Teaching Hospitals NFT	2,411	2,478	67	7,234	7,503	269
Harrogate and District NHS Foundation Trust	422	388	(34)	602	1,125	523
Ramsay	2,656	2,803	147	7,968	8,116	148
Hull and East Yorkshire Hospitals NFT	1,265	1,143	(122)	3,796	3,796	0
Nuffield Health	913	1,047	134	2,740	2,855	115
South Tees NHS Foundation Trust	365	366	1	1,094	1,010	(84)
Other Acute Contracts - NHS & Private	719	595	(124)	2,157	2,580	424
Non Contracted Activity	1,662	1,041	(621)	4,987	4,987	0
Consortia and other arrangements	51	65	14	154	154	0
Yorkshire Ambulance Service NHS Trust	4,374	4,407	32	13,124	13,221	98
Sub Total	70,910	71,323	412	212,066	214,602	2,536
Mental Health Services						
Leeds Partnerships NHS Foundation Trust	10,668	10,710	43	32,003	32,154	151
Tees Esk and Wear Valleys NHS Foundation Trust	462	462	(0)	1,387	1,387	(0)
Humber NHS Foundation Trust	733	733	0	2,200	2,200	0
Mental Health Specialist Services	829	780	(49)	2,488	2,488	0
Other Mental Health	93	135	42	279	279	(0)
Sub Total	12,786	12,821	35	38,358	38,508	150
Community Services						
York Hospitals NHS Foundation Trust	5,841	5,841	0	17,522	17,522	0
Harrogate and District NHS Foundation Trust	2,430	2,685	255	7,954	7,954	0
Sub total	8,270	8,525	255	25,476	25,476	0
Other Services						
Partnerships	1,113	1,259	146	3,339	3,339	0
Continuing Care	7,864	6,415	(1,450)	23,593	23,593	(0)
Funded Nursing Care	1,486	1,532	46	4,457	4,457	0
NHS 111	88	222	134	264	665	401
Property Services	86	86	(0)	295	295	0
Sub total	10,637	9,513	(1,124)	31,948	32,349	401
Primary Care						
Prescribing	15,395	15,983	588	45,289	45,289	0
Local Enhanced services	482	482	(0)	1,445	1,445	0
Oxygen	100	88	(13)	301	301	0
Other Primary Care	100	100	(0)	965	965	0
Sub Total	16,077	16,653	576	48,000	48,000	0
Trading Position - Commissioned services	118,681	118,835	154	355,848	358,935	3,087
Reserves & Unallocated QIPP						
Reserves						
- allocated reserves	222	0	(222)	800	800	0
- balance on QIPP	(490)	0	490	(1,471)	(1,471)	(0)
Contingency	345	0	(345)	1,036	0	(1,036)
Total - Reserves & Unallocated QIPP	77	0	(77)	365	(671)	(1,036)
CCG Financial Position net of required recurrent surplus	118,758	118,835	77	356,213	358,264	2,051

Requirement to Generate Recurrent Surplus

Surplus - Recurrent	699	0	(699)	2,096	0	(2,096)
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Overall Financial Position

CCG Financial Position including Recurrent Surplus	119,456	118,835	(622)	358,308	358,264	(45)
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Reconciliation to Programme Allocation

Notified allocation at month 4 (budget £000)
 Plus - Resource transfer from Running Costs
Total available resources for commissioned services

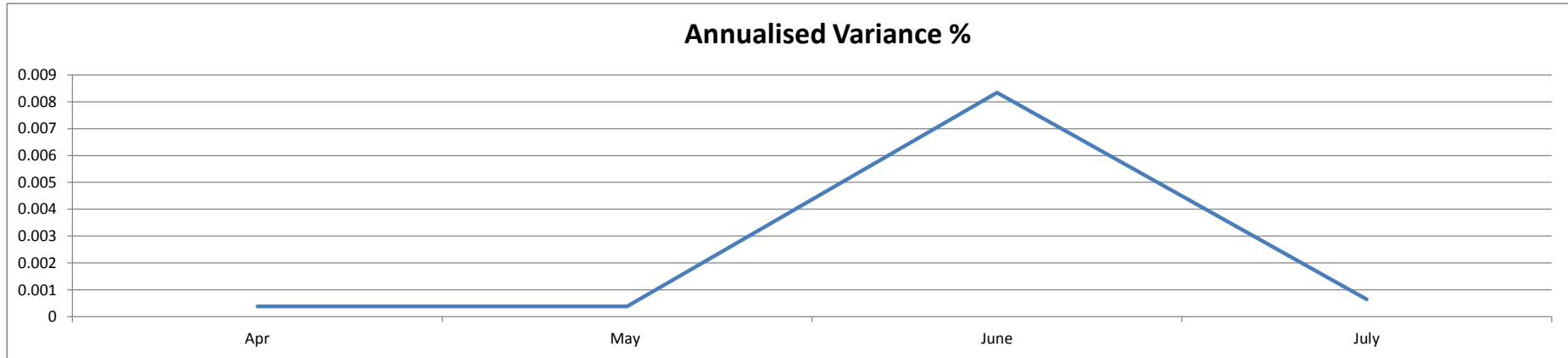
£'000
 356,575
 1,733
358,308

FINANCE PROGRAMME COSTS BY MONTH

CUMULATIVE TO 31ST JULY

Area	Cumulative actuals by month												
	Apr - 13	May - 13	Jun - 13	Jul - 13	Aug - 13	Sept - 13	Oct - 13	Nov - 13	Dec - 13	Jan - 14	Feb - 14	Mar - 14	Year to Date
	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Commissioned Services													
Acute Services													
York Hospitals NHS Foundation Trust	13,219	13,219	15,792	14,048									56,277
York Hospitals NHS Foundation Trust - MSK	166	166	195	185									712
Leeds Teaching Hospitals NFT	559	559	691	669									2,478
Harrogate and District NHS Foundation Trust	109	109	98	71									388
Ramsay	609	609	724	861									2,803
Hull and East Yorkshire Hospitals NFT	325	325	154	338									1,143
Nuffield Health	272	272	190	314									1,047
South Tees NHS Foundation Trust	102	102	54	108									366
Other Acute Contracts - NHS & Private	214	214	338	(172)									595
Non Contracted Activity	345	345	368	(18)									1,041
Consortia and other arrangements	93	93	(140)	19									65
Yorkshire Ambulance Service NHS Trust	1,064	1,064	1,154	1,126									4,407
Sub Total	17,077	17,077	19,618	17,549									71,322
Mental Health Services													
Leeds Partnerships NHS Foundation Trust	2,714	2,714	2,559	2,723									10,710
Tees Esk and Wear Valleys NHS Foundation Trust	116	116	116	115									462
Humber NHS Foundation Trust	91	91	369	183									733
Mental Health Specialist Services	0	0	0	780									780
Other Mental Health	7	7	62	59									135
Sub Total	2,927	2,927	3,106	3,860									12,820
Community Services													
York Hospitals NHS Foundation Trust	1,477	1,477	1,427	1,461									5,841
Harrogate and District NHS Foundation Trust	764	764	295	863									2,685
Sub Total	2,240	2,240	1,721	2,324									8,526
Other Services													
Partnerships	483	483	490	(198)									1,259
Continuing Care	1,938	1,938	1,967	571									6,415
Funded Nursing Care	371	371	371	418									1,532
NHS 111	0	0	0	222									222
Property Services	0	0	0	86									86
Sub Total	2,793	2,793	2,828	1,099									9,514
Primary Care													
Prescribing	3,999	3,999	3,541	4,445									15,983
Local Enhanced services / Other primary Care	144	144	72	221									582
Oxygen	25	25	25	13									88
Sub Total	4,168	4,168	3,638	4,679									16,653
Reserves	0	0	0	0									0
Sub Total	0	0	0	0	0	0	0	0	0	0	0	0	0
CCG Financial Position net of required recurrent surplus	29,206	29,206	30,912	29,511	0	0	0	0	0	0	0	0	118,835

FINANCE PROGRAMME RUN RATE



	Apr £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	Total £'000
Planned Spend													
Per Month	29,278	29,278	30,026	30,177									
Cumulative	29,278	58,555	88,581	118,758									356,213
Actual spend													
Per Month	29,289	29,289	30,746	29,511									
Cumulative	29,289	58,578	89,324	118,835									
Variance against plan													
Variance in month - £'000	<u>12</u>	<u>12</u>	<u>720</u>	<u>(666)</u>									
Cumulative Variance - £'000	<u>12</u>	<u>23</u>	<u>743</u>	<u>77</u>									
Variance in Month %	<u>0.04%</u>	<u>0.04%</u>	<u>2.47%</u>	<u>0.26%</u>									
Annualised Variance %	<u>0.04%</u>	<u>0.04%</u>	<u>0.83%</u>	<u>0.06%</u>									

FINANCE RUNNING COSTS & RUN RATE

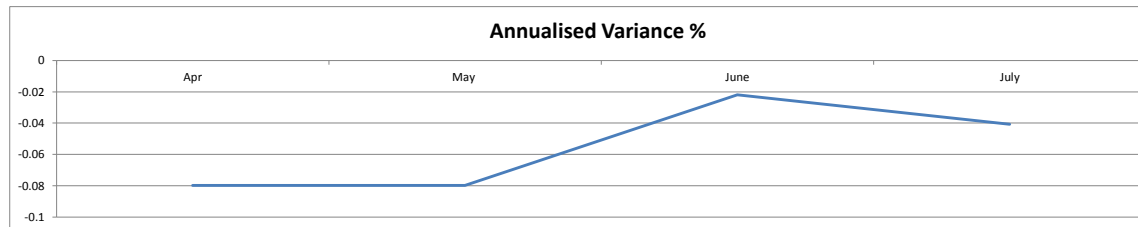
RUNNING COSTS TO JULY

Area	Cumulative to Date			Forecast		
	Budget £000	Actual £000	Variance £000	Budget £000	Actual £000	Variance £000
Expenditure						
Pay Budgets	905	824	(81)	2,744	2,744	0
Non Pay Budgets						
- North Yorkshire & Humber CSU	612	617	5	1,837	1,837	0
- Other Non Pay Budgets	279	281	2	836	836	0
- Contingency	0	0	0	0	0	0
Reserve	0	0	0	1,180	1,180	0
Total expenditure	1,796	1,722	(74)	6,597	6,597	0
Total	1,796	1,722	(74)	6,597	6,597	0

RECONCILIATION OF RUNNING COST ALLOCATION

	Annual Budget £000
Notified allocation at month 4	8,330
Less - Resource transfer to Programme Costs	
- Contingency	(833)
- Reserve	(900)
Total - Running Costs	6,597

Running Costs Run rate



	Apr £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'001	Oct £'002	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000
Planned Spend												
Per Month	454	454	454	433								
Cumulative	454	909	1,363	1,796								
Actual spend												
Per Month	418	418	497	389								
Cumulative	418	836	1,333	1,722								
Variance against plan												
Variance in month - £'000	36	36	43	44								
Cumulative Variance - £'000	36	73	30	74								
Variance in Month %	-7.98%	-7.98%	9.41%	-10.21%								
Annualised Variance %	-7.98%	-7.98%	-2.18%	-4.07%								

FINANCE COMPLIANCE WITH CODE OF BETTER PAYMENT PRACTICE

NON-NHS CREDITORS

Month	Total paid n	Invoices paid on time n	paid within target %	total paid £	value paid on time £	paid within target %
Apr-13	51	51	100.0%	985,004	985,004	100.0%
May-13	134	130	97.0%	1,070,939	1,059,594	98.9%
Jun-13	183	161	88.0%	2,068,828	2,014,690	97.4%
Jul-13	199	175	87.94%	2,184,748	2,099,334	96.09%
Aug-13						
Sep-13						
Oct-13						
Nov-13						
Dec-13						
Jan-14						
Feb-14						
Mar-14						

NHS CREDITORS

Month	Total paid n	Invoices paid on time n	paid within target %	total paid £	value paid on time £	paid within target %
Apr-13	12	12	100.0%	20,107,497	20,107,497	100.0%
May-13	18	14	77.8%	21,107,430	20,993,947	99.5%
Jun-13	35	29	82.9%	22,007,192	21,940,575	99.7%
Jul-13	182	175	96.15%	23,120,732	23,069,670	99.78%
Aug-13						
Sep-13						
Oct-13						
Nov-13						
Dec-13						
Jan-14						
Feb-14						
Mar-14						

OUTSTANDING CREDITORS AS AT MONTH 4 (as at 31st July)

1-4 weeks n	1-4 weeks £	5-8 weeks n	5-8 weeks £	Over 9 weeks n	Over 9 weeks £	Total n	Total £
199	613,104	116	449,040	87	338,119	402	1,400,263

FINANCE AGED DEBTORS REPORT

	Current	Days Overdue						Total
		0-30	31-60	61-90	91-180	181-360	361+	
	£	£	£	£	£	£	£	£
NHS English CCG'S								
NHS ENGLISH CCG's	56,958	0	0	0	0	0	0	56,958
Other Non NHS	0	0	0	0	0	0	0	0
	<u>56,958</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>56,958</u>
	Current	Days Overdue						Total
	£	£	£	£	£	£	£	£
Aged Debt by Organisation								
NHS Scarborough and Ryedale CCG	56,958	0	0	0	0	0	0	56,958
OTHER	0	0	0	0	0	0	0	0
	<u>56,958</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>56,958</u>

QUALITY INNOVATION PRODUCTIVITY & PREVENTION (QIPP) SUMMARY

PROGRAMMES	TRANSFORMATIONAL SCHEMES	Clinical Lead	Programme Manager	Delivery of Financial Benefits					Delivery of Financial Benefits 14/15			Delivery of Milestones				COMMENTS		
				Original PYE (000) 13/14	Revised PYE (£000's) 13/14	Forecast Start (Month)	Forecast PYE RAG	Month 2 plan	Month 2 savings (£000's)	Baseline FYE (000) 14/15	Forecast FYE (£000's) 14/15	Forecast FYE RAG	On Schedule	Risks to Delivery	Mitigation Plan in place		Mitigation Plan Delivering	
EXISTING SCHEMES	ELECTIVE CARE	Dermatology	SO	AB	188,563	31,019	11	G	0	0	186,115	186,115	G	G	A	Y	G	Existing provider creating barriers, mitigation effective.
		Pain Management Service	SO	AB	21,725	6,719	12	G	0	0	80,622	80,622	G	A	G			Awaiting final sign off of specification.
		Pathology	SO	AB	500,000	500,000	5	A	0	0	500,000	500,000	A	G	R	N		Tariff reduction to be agreed with the Trust.
		Post-Operative Cataract Service	SO	AB	187,146	32,625	10	G	0	0	130,500	130,500	G	G	G			
		Referral Services Scheme	SO	AB	111,162	-53,719	7	R	0	0	TBC	TBC	G	A	G			
		Diabetes	SO	AB	86,625	0	1		0	0	256,871	0		G	G			
	URGENT CARE	Heart Failure	AP	GB	35,400	35,400	7	G	0	0	70,800	70,800	G	G	G			
		Out Of Hours Procurement	AP	GB	0	0	13		0	0				G	G			
		Rapid Response- Cellulitis	AP	GB	105,075	0	6	G	0	0	0	0		A	G			
		YAS: Patient Transport Service	AP	GB	0	46,000	6	G	0	0	78,857	78,857	G	G	G			
		YAS: Frequent Callers	AP	GB	0	47,000	6	G	0	0	80,571	80,571	G	G	G			
		Home Oxygen	AP	GB	100,500	100,000	4	A	0	0	133,333	133,333	G	G	A			Savings dependent on agreed contract
	LONG TERM CONDITIONS	Neighbourhood Care Teams	FB	RI	0	0			0	0	0	0		G	G			
		Self Management	FB	RI	0	0			0	0	0	0		G	G			
		Risk Stratification	FB	RI	0	0			0	0	0	0		A	A	Y	G	
		Community Hospital Review	FB	RI	0	0			0	0	0	0		G	G			
	MENTAL HEALTH	Psychiatric Liaison	CS	BK	150,000	0	6	R	0	0	TBC	TBC	G	A	A			
		Prescribing	SO	RA	945,000	945,000	1	A	64,000	0	945,000	945,000	G	G	G			
Sub Total					£2,431,196	£1,690,044					£2,462,670	£2,205,799						
TRANSACTONAL	TRANSACTONAL SCHEMES (delivered in contract/ budget)	Contracting: Lucentis drug discount	SO	GW	100,000	400,000	1	G	100	107,000	400,000	400,000	G	G	G			
		Better Care Better Values First to Follow Up Ratios	SO	GW	3,901,511	3,901,511	1	G	0	0	3,901,511	3,901,511	G	G	G			
Sub Total					£4,001,511	£4,301,511					£4,301,511	£4,301,511						
CURRENT REVIEWS	ELECTIVE CARE	Smoking Thresholds	SO	CM	1,800,000	500,000	10	R			0	0	G	G	G			
		Neurology	SO	AB	300,000	0	Review		0	0	0	0		G	G			
	URGENT CARE	Frailty / Care Home Initiative	AP	GB	150,000	0	7		0	0	0	0		G	G			
		Urgent Care Review	AP	GB	300,000	0	Review		0	0	0	0		A	G			
		High Impact Users	AP	GB	200,000	0	Review		0	0	0	0		A	G			
		YAS: ECP	AP	GB	250,000		7		0	0	0	0		G	G			
		Respiratory Review	AP	RI	350,000		Review		0	0	0	0		A	R			
		Out Of Area	CS	BK	125,000		Review		0	0	0	0		A	R			
	Procedures of Limited Clinical Value	SO	CM	1,700,000	150,000	9	G				300,000	300,000	G	G	G			
	Sub Total					£5,175,000	£650,000					£300,000	£300,000					
Total					£11,607,707	£6,641,555					£7,284,181	£6,807,310						
PROGRESS	KEY PROGRESS: All projects are progressing to schedule. There are a few minor delays in a couple of schemes, however the delivery team remain confident that they will deliver to the original forecast date and there will be no impact on efficiencies. The RSS is reporting delay in the hard launch by a month, however the system will be up and running which enables the PLCV and smoking threshold schemes to go live. The current reviews are all in progress. The smoking threshold is being presented at Business Committee on 15th August, and due to go live on 1st September. The PLCV project will further go live on the 1st September. There is no data to demonstrate the impact of first to follow up ratios or prescribing, the first due to issues that CSU have in relation to quality of the SUS data. The CSU are working to reconcile, validate and address issues.																	
	RISKS/ISSUES	KEY ISSUES/ RISKS: A key risk to the RSS project is the inability to recruit GP Reviewers, a mitigation plan is in progress. The Dermatology procurement is progressing to schedule & tender submission date due to close on 19th August. The Delivery Team are experiencing significant barriers from the current provider and to mitigate this have engaged the Local Area Team to arbitrate in meetings. A key risk of the Pathology project is agreeing the tariff, the team are collecting evidence to challenge trust on to mitigate against this. The ability to obtain accurate SUS data remains an issue to demonstrate progress against current schemes and the broader overview of how the contract is performing.																
OPPORTUNITIES FOR 2014/15		Continuing healthcare				220,000	0					220,000						
	LONG TERM CONDITIONS Patient Decision Aids		FB	RI	173,438	0					173,438							
Sub Total					£220,000	£0					£220,000	£0						

Supporting notes for Q&P

Cancer: breast symptoms: additional information

For VoY CCG, only York trust data, no other Trusts for this indicator.

Data is as follows: 92.4% (target 93%)

Total referrals = 119, 110 seen within 14 days, 1 between 15&16 days, 6 between 17&21 days and 2 between 22&28 days

Delay reasons (mostly patient choice from the comments):

Wait Days	Delay Reason Comment
28	OSBC 29.05.13 CANC OSBC 12.06.13
26	18.05 -01.06 (Pt on holiday) OSBC 04.06.13 - CANC other commitments OSBC 12.06.13
21	OSBC 04.06.13 (Pt unavailable 15.05.13 until 01.06.13)
20	patient cancelled appointment
19	OSBC 29.05.13 CANC OSBC 05.06.13
19	OSBC 04.06.13 CANC too short notice OSBC 11.06.13
18	OSBC 05.06.13 - CANC OSBC 11.06.13
18	OSBC 19.06.13 CANC pt unavail OSBC 25.06.13
15	Patient on holiday from 31.05.13 to 14.06.13

A&E Waiting times

week-ending	>4Hrs	Attends	<4Hr %
07-Jul-13	143	3792	96.23%
14-Jul-13	215	3943	94.55%
21-Jul-13	203	3980	94.90%
28-Jul-13	249	4031	93.82%
	810	15746	0.051442

95th percentile - Adjusted admitted patients for VoY

Provider Name	Plan	Apr-13	May-13	Jun-13
Bradford Hospitals NHS Trust	23.00	13.90	6.95	6.85
York Health Services NHS Trust	23.00	25.65	24.78	24.42
Harrogate & District NHS Foundation Trust	23.00	20.90	29.20	25.25
Northern Lincolnshire And Goole Hospitals NHS Trust	23.00	15.05	22.10	12.45
Leeds Teaching Hospitals NHS Trust	23.00	30.95	30.95	36.28
Newcastle Upon Tyne Hospitals NHS Trust	23.00	16.90	0.95	7.95
South Tees Hospitals NHS Trust	23.00	18.55	28.60	29.35
Hull & East Yorkshire Hospitals NHS Trust	23.00	17.60	33.30	26.25
Mid Yorkshire Hospitals NHS Trust	23.00	19.20	21.30	39.25
Ramsay Healthcare UK Operations Ltd	23.00	17.48	18.45	19.35
Total	23.00	22.91	25.21	26.05

The above table demonstrates that the 95th percentile for adjusted admitted patients has underachieved against the target for the second month in a row.

ANALYSIS OF SERIOUS INCIDENTS

Total Serious Incidents Reported via StEIS for all 4 North Yorkshire CCGs

This table shows the number of Serious Incidents reported each month for each Provider from April 2013

This table shows the number of Serious Incidents reported each month for each Provider for the 4 NY CCGs from April 2013

Month	York Hospital	Scarborough Hospital	Harrogate Hospital	TEWV			South Tees Hospital	Leeds York Partnership	YAS	SR CCG	SR OOH	Hull MH Trust	Total
				HaRD	SR	HRW							
Apr	3	4	1		3		4	1			1	1	18
May	3	1	1		1	1	1	1		1			10
Jun		1	1		1	1			2				6
Jul	4					1	5		2				12
Aug		1					1						2
Sep													0
Oct													0
Nov													0
Dec													0
Jan													0
Feb													0
Mar													0
Total	10	7	3	0	5	3	11	2	4	1	1	1	48

Monthly breakdown for Vale of York CCG Serious Incidents

This table details the Serious Incident types by month for each Provider from April 2013

Month	York Hospital		LYPFT		YAS		HULL MH Trust	
	SI No.	Incident Details	SI No.	Incident Details	SI No.	Incident Details	SI No.	Incident Details
Apr	2013/9570 2013/9571 2013/9572	Pressure Ulcer Pressure Ulcer Pressure Ulcer	2013/11001	Unexpected death			2013/13864	Suspected suicide Hull
May	2013/13334 2013/13340 2013/13735	Delayed diagnosis Sub optimal care Sub optimal care	2013/14002	Unexpected death				
Jun					2013/1769	YAS patient fell from patient transfer ambulance		
Jul	2013/20411 2013/21126 2013/22230 2013/22265	Anaesthetic issues in course of procedure to reinvert uterus Hospital equipment failure due to power outage Grade 4 pressure ulcer Grade 4 pressure ulcer			2013/19973 2013/21275	YAS system failure resulting in delays to NHS 111 YAS system failure to it's computer despatch system		