

NHS Vale of York Clinical Commissioning Group Performance Report

Report produced: November 2016

Latest validated data: September 2016

Section	Measure	Relates to	Target	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16
Yorkshire Ambulance (YAS) Responses Times	Category A (Red) 8 minute Response Time	Vale of York	75%	72.1%	70.9%	65.7%	70.2%	74.9%	62.5%	
Yorkshire Ambulance (YAS)	15 min Target	York Trust	100%	57.2%	57.2%	53.3%	60.3%	56.4%	61.0%	
		York		65.2%	57.2%	60.3%	70.0%	70.8%	70.2%	
		Scarborough		46.0%	57.0%	44.1%	47.0%	37.0%	47.7%	
Emergency Department	% meeting 4 hour target	Vale of York	95%	86.8%	87.9%	87.2%	92.7%	90.6%	91.0%	
		York Trust		86.7%	86.7%	87.2%	92.6%	90.5%	90.9%	
	Sustainability & Transformation Fund	Trajectory	85.0%	86.0%	87.0%	88.0%	89.0%	89.5%		
	Number of Attendances	York Trust	15,129	16,979	16,091	17,709	17,385	16,371		
	Number of 4 hour Breaches	York Trust	2,008	2,059	2,063	1,303	1,647	1,486		
	Waiting more than 8 Hours	York	-	182	285	221	47	71	39	
		Scarborough	-	208	35	114	100	198	136	
	York Trust	-	390	320	335	147	269	175		
	Non-Elective Admissions	York Trust	-	4,029	4,297	4,319	4,305	4,464	4,413	
Out of Hours	Urgent face to face consultations within 2 hours	Vale of York	95%	94.7%	94.3%	94.7%	92.3%	90.9%	93.4%	95.2%
	Less urgent face to face consultations within 2-6 hours			96.1%	97.5%	97.5%	94.7%	94.2%	98.0%	96.9%
	Speak to the Clinician within 2 hours.			95.9%	96.5%	94.1%	92.3%	94.0%	100.0%	98.5%
	Speak to the Clinician within 2-6 hours.			84.6%	88.7%	86.8%	83.9%	83.5%	89.7%	91.4%
	Speak to the Clinician within 6+ hours.			94.4%	95.3%	97.7%	95.8%	94.3%	97.7%	94.8%
Diagnostics	Patients Waiting Greater than 6 weeks	Vale of York	99%	98.6%	99.2%	99.0%	98.7%	98.6%	99.1%	
		York Trust		99.2%	99.4%	99.3%	99.1%	99.2%	99.4%	
18 Week Referral to Treatment	Incomplete pathways seen < 18 weeks from referral	Vale of York	92%	92.4%	92.9%	92.4%	91.8%	91.5%	91.6%	
		York Trust		92.6%	92.9%	92.5%	92.0%	91.6%	90.8%	
	Sustainability & Transformation Fund	Trajectory	-	92.0%	92.0%	92.0%	92.0%	92.0%	92.0%	
	Admitted Backlog	York Trust	-	+66	-38	+167	+212	+152	+305	
	Theatre Lists Cancelled	York Trust	-	-	26	27	36	19	47	
Cancer	Patients seen < 14 days of an urgent suspect Cancer referral	Vale of York	93%	94.9%	94.1%	94.9%	94.7%	91.1%	94.5%	
		York Trust		92.6%	93.3%	92.3%	89.6%	88.7%		
	Patients seen < 14 days of an urgent referral with Breast Symptoms, Cancer not initially suspected	Vale of York	93%	96.2%	100.0%	95.0%	94.1%	93.9%	96.2%	
		York Trust		94.4%	98.3%	96.1%	90.0%	94.0%		
	Patients seen < 31 days of Cancer Diagnosis and package of care agreement	Vale of York	96%	99.4%	99.3%	100.0%	99.5%	98.3%	96.2%	
		York Trust		99.2%	99.0%	100.0%	99.2%	99.6%		
	Patients seen < 31 days for second or subsequent Cancer Treatment - Surgery	Vale of York	94%	97.8%	90.9%	98.0%	97.2%	100.0%	92.1%	
		York Trust		100.0%	88.5%	98.0%	100.0%	100.0%		
	Patients seen < 31 days for second or subsequent Cancer Treatment - Drugs	Vale of York	98%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
		York Trust		100.0%	100.0%	100.0%	100.0%	100.0%		
Patients seen < 31 days for second or subsequent Cancer Treatment - Radiotherapy	Vale of York	94%	100.0%	97.3%	100.0%	100.0%	100.0%	100.0%		
	York Trust		-	-	-	-	-	-		
Patients seen < 62 days to first definitive treatment following an urgent referral for suspected Cancer	Vale of York	85%	85.4%	89.3%	85.1%	84.5%	91.3%	71.8%		
	York Trust		86.6%	85.5%	87.2%	85.2%	88.8%			
Patients seen < 62 days to first definitive treatment following referral from a NHS Cancer Screening Service	Vale of York	90%	83.3%	100.0%	88.9%	90.0%	92.9%	83.3%		
	York Trust		90.0%	93.3%	89.7%	91.7%	93.2%			
Delayed Transfer of Care	Acute	NHS		247	135	162	122	141	179	192
		Social Care		246	222	105	102	53	125	47
		Total		493	357	267	224	194	304	239
	Non-Acute	NHS		130	239	232	276	354	377	346
		Social Care		144	97	373	472	387	227	239
		Total		274	336	605	748	741	604	585
Dementia	Estimated Diagnosis rate for People with Dementia	Vale of York	66.7%	51.1%	50.8%	53.1%	54.2%	52.7%	54.7%	
Improving Access to Psychology Therapies (Unvalidated)	% of people entering treatment against the level of need in the general population	Trajectory	-					11.5%	11.9%	
		Vale of York	15%				8.6%	11.5%	12.7%	
		TEWV					8.3%	11.3%	12.9%	
	Humber					13.9%	16.5%	8.7%		
	% of people not at caseness at their last session.	Trajectory	-					45.0%	46.0%	
		Vale of York	50%				49.6%	43.3%	46.1%	
TEWV						50.5%	42.4%	48.8%		
Humber					44.4%	53.3%	21.4%			

Yorkshire Ambulance Service (YAS) Response Times

Current Performance

- The most recent validated data for Vale of York CCG is September 2016
- Vale of York performance for Red 8 minute response time was **62.5%** against 75% target.

Current issues impacting on performance:

- ❖ Red 8 minute response time has dipped to an all-time low.
- ❖ A number of individual performance challenges have been highlighted to YAS during October and November to identify particular areas of pressure

Mitigating actions include:

- ❖ New Rota's have now been issued to staff and are subject to a 90 days' notice period – of which approx. 4 weeks have now passed. The expectation is that the new rotas will be in place in January 2017.
- ❖ YAS continue to have excellent staffing levels in the Vale of York area but performance is adversely impacted by poor patient flow at the hospital and consequently impacts on ambulance crew turnaround times.
- ❖ YAS have deployed a Clinical Supervisor at York Hospital to manage the ambulance crews to reduce turnaround times and get crews back on the road.

Finance and Contracting implications:

- ❖ No known implications.

Yorkshire Ambulance Service (YAS) Handover Times

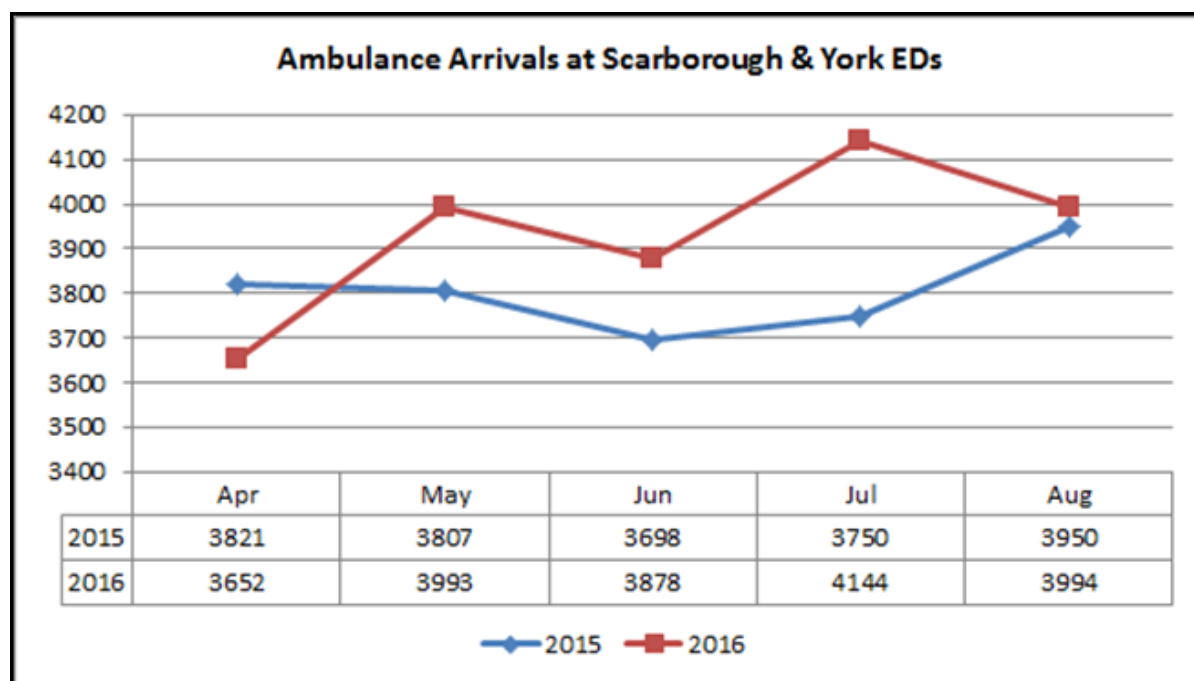
Current Performance

- The most recent validated data for Vale of York is September 2016
- Performance for York Trust combined was **61.0%** (target 100%); this is an increase from August performance of 56.40%. York hospital site performance was 70.2%, and Scarborough hospital site was 47.7%.
- The most recent **unvalidated** data for Vale of York is week ending 9th October 2016, which shows handover performance of 51% combined, 58% at York hospital and 40% at Scarborough

Current issues impacting on performance:

- ❖ Flow through York Trust has slowed considerably since September due to high bed occupancy and suboptimal nurse staffing levels as attendances have not been excessive, but this has impacted on handovers in late October and the start of November
- ❖ Scarborough are also still having difficulty in managing admissions into the bedbase, which affects the statistics across the Trust overall. SRCCG issued a performance notice to YHFT regarding handover times and have received a response. The main issues identified are;

There has been an increase in ambulances arriving at Scarborough and York sites



The total number of ambulance handover times >30 mins in Q1 & 2 of 15/16 were 1409, given the Trust has already exceeded this number at the end of month five (1880), the Trust cannot give the CCG assurance that it can deliver the required commitments from Q2 onwards.

Further analysis is being undertaken with YAS to understand if the increase in conveyances triaged to the Urgent Care Centre (UCC) at Scarborough is as a result of YDUC and/or NHS 111 requesting an ambulance for the patient or simply 'business as usual' streaming activity taking place on arrival at the hospital.

In addition, at the regional YAS event on the 12th of August, YAS reported that patients not requiring hospital care were being conveyed to SGH as a result of their inability to contact GPs.

YHFT have agreed with YAS that execution of the self-handover process by ambulance crews is currently under-utilised. This would appear to be supported by the analysis of SGH arrivals in August that shows a significant number of patients streamed to UCC following a handover delay.

Trajectory for Q3 and Q4

The Trust is committed to delivery of the assurance statement signed off as part of the STF, namely: *"Ambulance handover delays should also be minimised and the trust is committed to ensuring that the number in 2016/2017 will be less than there were in 2015/2016 with plans for continued improvement"*. On aggregate, this means that the Trust will have less than 3038 ambulance handover delays by the end of Q4. This will be very difficult to achieve without whole system support and change.

Mitigating actions include:

- ❖ Vale of York CCG, YAS and York Trust are undertaking the actions detailed in the Ambulance Handover Concordat and regular meetings are taking place.
- ❖ Healthwatch York have offered to support this plan with a programme of patient engagement over the next two months
- ❖ A number of individual cases of delayed responses from YAS acute crews where a health professional (GP) has made the crew request have recently been identified. YAS have been given the specific details of these cases which raise concerns about the clinical safety of these responses and been asked to respond to these incidents. There is concern that these requests are being downgraded as the patients are seen to be in a safe place, although dispatch should be based on clinical need.
- ❖ YAS have agreed to conduct further analysis/observation of the self-handover process during the month of October and are in the process of organising the audit on both sites.
- ❖ YHFT are continuing to develop the Clinical Navigator role as part of the ED Front Door project and embed further the Ambulance Assessment 'pit-stop' model (York); proceeding with the development of a 5 cubicle ambulance handover/assessment area in SGH commencing Jan 2017.

Finance and Contracting implications:

- ❖ No known implications.

Emergency Department (ED)

Current Performance

- The most recent validated data available for Vale of York is September 2016
- Performance against 4 hour target for Vale of York was **91.0%** (target 95%). This is an increase from the August figure of 90.6%
- The most recent **unvalidated** figures for York Trust are for week ending 6th November 2016 and show performance of **86.27%**
- **Sustainability and Transformation Fund Trajectory has been achieved by York Trust for September at 90.91% against a trajectory of 89.5%.**

Current issues impacting on performance:

- ❖ York Trust continues to meet the Sustainability and Transformation Fund Trajectory.
- ❖ High bed occupancy has impacted patient flow at York Hospital
- ❖ In September 2016 there were 16,371 attendances compared to 16,308 in September 2015 (0.4%). There were a total of 1,486 breaches (969 admitted, 517 non-admitted) across all sites. The number of patients waiting over 8 hours in ED was 175 (York 39, Scarborough 136) and a decrease of 94 (35%) on August.
- ❖ Performance at York Hospital site in October 2016 using unvalidated data showed that the 95% hour target was met or exceeded on only 1 out of the 31 days in the month, with a further 5 days being between 90% and 94.9%. Performance reached a low of 68.44% despite the front door model being in place.
- ❖ York Trust had 4,413 non-elective admissions (excluding maternity and paediatrics) in September 2016 compared to 3,910 in September 2015, a 13% rise. This includes an increase of 405 admissions (33%) where patients stayed less than 24 hours.
- ❖ There are currently 73 whole time equivalent nursing vacancies across York Trust and consequently there are 'gaps' which are being filled by agency staff.
- ❖ Locum provide medical cover in ED at weekends.
- ❖ Discussions with the ED clinical lead showed that support and staffing in ED have been adequate – problems have been seen with the speed of admission into the hospital. ED Front Door work has been very successful and although there is still scope for higher numbers to be streamed to Primary Care, they are regularly seeing 100% of patients within 4 hours.
- ❖ Work is ongoing with the contracting and data teams to investigate the high numbers of patients staying for a short period of time and those admitted with 'sepsis'.

Mitigating actions include:

- ❖ The ED Front Door Model continues. Triage times increased to 41 minutes in September compared to 35 minutes in August. 792 patients were seen in ED Front Door Primary Care.
- ❖ York Trust have been asked to provide information on the root cause of breaches as they occur in ED; this was done throughout the summer and described a number of issues with rapid senior decision making at the front door, management of paediatrics against existing pathways and the availability of staff throughout the night who could provide appropriate treatment. However, at present the volume of breaches is too great for this analysis to be provided. The A&E Delivery Board is meeting 17/11 and will be working as a system to provide support and assist YHFT in their internal flow which seems to be the cause of current performance difficulties.
- ❖ York Trust continues to actively recruit into the ED workforce with specific adverts for ED staff while continuing to use locum doctors to cover mid-grade and consultant vacancies. In the interim, ED is actively aiming to ensure that key critical roles are covered in order to reduce delay.
- ❖ The SAFER patient flow bundle is a combined set of simple rules for adult inpatient wards to improve patient flow and prevent unnecessary waiting for patients and its implementation across both York and Scarborough sites is deemed critical in order to sustain improvements. This implementation is being led by the Medical Director and the A&E Delivery Board will be monitoring progress against the agreed action plan.

Finance and Contracting implications

- ❖ York Trust is introducing an Acute Medical Model in ED on the Scarborough site. This model seeks to integrate current aspects of the Emergency Department and Ambulatory Care Unit and then link this to active specialties at Scarborough Hospital. The payment mechanism for this has yet to be agreed with Commissioners. While this should not have a significant impact on Vale of York CCG. If successful York Trust will review the lessons learnt may look to introduce something similar to the York site.
- ❖ There are now a number of schemes that have been introduced to help improve the position at the York site but Vale of York CCG need to ensure that there is no overlap between payment for a Navigator on the front door, additional GP support through Northern Doctors, Ambulatory Care and now the potential for an Acute Medical model. While the schemes are being well utilised, Vale of York CCG have not seen a corresponding drop in accident & emergency and non-elective activity. There is a need to ensure that new demand is not being generated via the introduction of these schemes.
- ❖ With reference to the points above, there is currently an outstanding Activity Query Notice with York Trust around Ambulatory Care and the stepped increase

in zero length of stay admissions. This will be updated further following discussion with the Trust to understand the coding.

Out of Hours (OOH)

Current Performance

- The most recent validated data available for Vale of York is October 2016
- Urgent Face to Face consultations within 2 hours are at 95.23% and less urgent within 6 hours 96.94%, both against target of 95%
- Speak to clinician calls within 2 hours are at 98.5%, within 2 - 6 hours at **91.36%**, and within 6 hours+ at **94.82%**, against target of 95%

Current issues impacting on performance:

- ❖ Performance has shown an improvement across the board since the August 2016.
- ❖ Some patients are being booked to breach via NHS111 – this shows as a negative impact on the data
- ❖ Information on some patients being booked through is still not visible – this is due to software issues, but does not help OOH doctors make the right triage allocation

Mitigating actions include:

- ❖ A meeting has been arranged to discuss NHS111 booking – the proposed direct booking changes as part of the escalation plan will not take place unless the software issues have been resolved
- ❖ Data presented shows the booking against minimum staffing levels, and there are very few gaps both in previous rotas and those going forward
- ❖ Rotas for Christmas are still being worked on but are looking reasonable at present. The next few weeks in November are very well covered.
- ❖ Performance against the home visit National Quality Requirement is now being achieved after actions by Yorkshire Doctors over the summer took effect
- ❖ Another 3 GP's were interviewed w/c 31st October for potential inclusion on the rota
- ❖ Communications with Selby MIU team have improved and various issues have been locally resolved for better access and flow between teams.
- ❖ The provision of controlled drugs during OOH is being reviewed to ensure that these are available for use as promptly as possible where required. The possibility of fitting an additional secure drug cupboard at Selby Hospital is being investigated for the small number of occasions that such drugs are required in Selby and the local stocking pharmacy is not open. At the same time, additional communication is planned with GPs to ensure that wherever possible anticipatory drugs are prescribed and provided for appropriate patients in a timely way.

Diagnostics

Current Performance

- The most recent validated data available for Vale of York is September 2016
- **99.07%** of diagnostic tests took place within 6 weeks, an increase from the prior months performance of 98.6%

Current issues impacting on performance:

- ❖ Vale of York CCG did not meet the 99% Diagnostics target in September 2016, with performance of 99.07%. This equates to 35 patients waiting over 6 weeks for a Diagnostic test.
- ❖ 18 of these breaches were at York Trust, with an additional 11 at Hull and East Yorkshire Hospitals, 4 at Leeds Teaching Hospitals and 2 at South Tees Hospitals. The largest numbers of breaches were in CT at Hull with 9, followed by MRI and Cystoscopy at York Trust with 5 each.
- ❖ York Trust met the 99% target in September 2016 with performance of 99.4%.

Finance and Contracting implications

- ❖ No known implications

18 Week Referral to Treatment (RTT)

Current Performance

- The most recent validated data available for Vale of York is September 2016
- **91.63%** (target 92%) of patients on incomplete pathways have been waiting no more than 18 weeks from referral, an increase from 91.5% in August 2016
- **Sustainability and Transformation Fund Trajectory has not been achieved by York Trust for August at 91.6% against a trajectory of 92%**

Current issues impacting on performance:

- ❖ Vale of York CCG did not achieve the Incomplete target on an aggregate level for the third month in a row. This equates to 1,414 patients out of 16,891 waiting over 18 weeks.
- ❖ The areas which did not meet target on a speciality level were Urology (82.70%) Respiratory Medicine (84.62%), Plastic Surgery (85.80%), General Surgery (88.6%), Ophthalmology (88.90%) and Gynaecology (91.40%),
- ❖ The Vale of York figure is calculated based on treatment for Vale of York patients at any provider. Although the vast majority of the CCG's patients are treated at York Trust, many different providers are taken into account so the target failure cannot be easily allocated to any one provider.

- ❖ York Trust did not achieve the 92% target on an aggregate level in September 2016 with performance of 90.78%. A number of specialities did not achieve the standard, Max Fax (80.81%), Urology (84.42%), Thoracic Medicine (85.38%), General Surgery (88.35%), Rheumatology (90.00%), Dermatology (90.29%), Restorative Dentistry (90.68%), Ophthalmology (90.97%) and Cardiology (91.19%).
- ❖ The admitted backlog at York Trust has increased by 13.2% compared to August. This has largely been driven by increases in the backlog for General Surgery (+61), Dermatology (+37), Max Fax (+36) Cardiology (+32), Thoracic Medicine (+29), Rheumatology (+20) and T&O (+19).
- ❖ 47 theatre lists were cancelled due to theatre staff shortages in September: 27 General Surgery, 7 Max Fax, 6 Gynaecology, 5 ENT, and 2 Urology.

Mitigating actions include:

- ❖ A comprehensive recovery plan for RTT incomplete performance (both admitted and non admitted) was shared at the Quality and Performance sub-group on 1st November 2016. The plan detailed outsourcing initiatives and other additional plans for recovery all specialities that are not currently achieving standard.
- ❖ The recovery plan notes that performance will not exceed 91.5% in quarter three and that there is a real risk to delivery of the Sustainability and Transformation Fund Trajectory

Finance and Contracting implications

- ❖ York Trust are sub-contracting some activity to Nuffield York for Urology and are also leasing theatre capacity from Ramsay Healthcare for Gynaecology and Max Fax lists. The Trust is also transferring some breached Orthopaedic activity to Clifton Park.
- ❖ While this will all help contribute to improving the declining RTT position, there are affordability issues within the CCG to consider as the costs of this additional capacity have no offset.
- ❖ Leeds Teaching Hospital had some operational issues associated with pharmacy software and the ordering of drugs that led to a number of cancelled elective lists. Leeds Teaching Hospital are working with local independent Providers to recover this capacity which will increase spend on this contract.

Cancer

Current Performance

- The most recent validated data available for Vale of York is September 2016
- Performance against the 14 day target of 93% was 94.5% for All Tumour Types. Breast Symptomatic performance was at 96.2%
- Performance against the 31 days targets - subsequent treatment surgery of 94% was **92.1%**. The other 31 day targets achieved their targets.
- 62 day treatments following urgent GP Referral against a target 85% was **71.8%**. 62 day treatments following Screening Referral achieved **83.3%** against 90% target.

Current issues impacting on performance:

- ❖ Vale of York CCG failed three targets this month.
- ❖ Performance against the 31 days target – subsequent treatment - surgery failed at 92.1% against a target of 94%. This represents 3 out of 38 patients being treated beyond 31 days,
- ❖ Performance against the 62 days treatments following urgent GP referral failed at 71.8% against a target of 85%. This represents 20 out of 71 patients being treated beyond 62 days.
- ❖ Performance against the 62 days treatments following screening referral failed at 83.3% against a target of 93%. This represents 2 out of 12 patients being treated beyond 62 days.
- ❖ Data is not yet available for September at York Trust level; however the Trust did achieve 6 out of the 7 targets for August 2016.
- ❖ York Trust has not achieved the 14 Day Fast Track, achieving 88.7%, compared to a target of 93%.
- ❖ Failure of the 14 Day Fast Track Target was driven mainly by Dermatology, which has continued to struggle with capacity. 95 out of 157 patients breached (60.5% of 14 day FT breaches in August are attributed to Dermatology (95 of 157 patients breached), of which 85.2% (81 patients) were delayed due to insufficient Outpatients capacity
- ❖ York Trust achieved the Sustainability and Transformation Fund 62 days first treatment target for August, achieving 88.8%
- ❖ As from 1st October the New Breach Allocation guidelines have come into force. This guideline generates a fairer means of breach allocation using referral and total timeframes. This is a change from the 50:50 split policy.

Trolley Breach

A 12 hour trolley breach occurred at YHFT on 25/10/2016. Total wait was 14 hours and 31 minutes. Root cause analysis describes that the reason for the breach was waiting for a bed on AMU. Patient received appropriate care in ED and no harm occurred. Lessons learnt from this episode are in line with the multiagency serious incident review of 12 hour breaches in April 2016 and the CCG has requested further assurance that internal flow issues and staff understanding of correct processes are being actioned.

Stroke

Current Performance

Key Indicator	July – Sept 2015	Oct- Dec 2015	Jan – Mar 2016	Apr – Jul 2016	Current England Average
% patients scanned within 1hr	43.10%	41.50%	38.30%	39.20%	51.10%
% people receiving thrombolysis within 1hr	40.00%	63.60%	54.50%	70.00%	61.40%
% patients in AF on anticoagulation prior to stroke	46.40%	60.50%	50.00%	44.80%	51.00%
Median time to assessment by stroke consultant	11.34%	12.06%	12.49%	14.15%	11.20%
Median time to assessment by stroke nurse	0.12%	0.28%	0.22%	0.30%	1.13%
% patients given a swallow screen within 4 hours	81.40%	77.50%	73.90%	79.90%	75.10%
%Compliance against the OT therapy target	100.80%	94.60%	74.50%	70.30%	81.50%
%Compliance against the PT therapy target	65.70%	78.70%	84.80%	75.60%	77.00%
%Compliance against the SALT therapy target	26.20%	35.80%	43.50%	35.70%	45.20%
% Patients with rehab goals agreed within 5 days	98.90%	93.80%	95.20%	93.10%	90.30%
% patients with continence planning within 3 weeks	98.20%	95.40%	92.50%	95.10%	90.80%
% receiving mood and cognition screening by discharge	95.30%	96.90%	97.10%	97.90%	91.20%
% patients with a joint health and social care plan on discharge	100.00%	100.00%	81.30%	76.10%	90.40%
% patients discharged into ESD service	20.40%	23.10%	22.20%	14.70%	34.10%
% eligible patients receiving a follow up at 6 months	0.80%	17.80%	15.40%	38.00%	30.60%

- ❖ 186 patients were submitted to the data set. 174 patients of which were at YHFT and 7 patients at Pinderfields.
- ❖ The overall rating for the Vale of York CCG remains at C
- ❖ There were 58 people in atrial fibrillation admitted with stroke, only 26 had been prescribed anticoagulation prior to their stroke.
- ❖ 70% of patients who were thrombolysed received this within 1 hour with median door to needle time reduced by 10 minutes since last quarter which is good progress. However, scan times remain slow with the median time to scan being 30 mins longer than the national average and 12% fewer patients (than national average) scanned within an hour.
- ❖ Initial access to therapy assessment is good but still need to improve amount of therapy provided for each patient.
- ❖ Discharge processes are good on the whole but there has been a dip in the % of applicable patients who are discharged on anticoagulation or with a plan for anticoagulation and the % of patients accessing ESD.

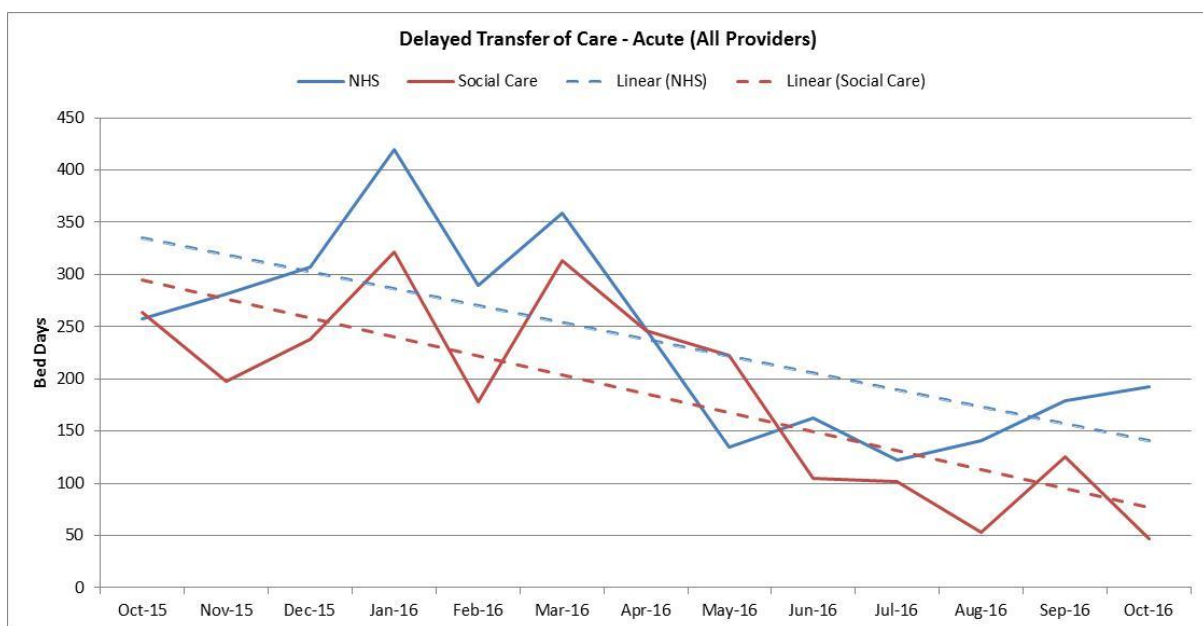
- ❖ The percentage of people with joint health and social care plan on discharge has fallen to 76% from 100% achieved In Oct – Dec 2015 and is lower than the national average of 90%.
- ❖ The percentage of patients receiving 6 month review has more than doubled since last quarter and is now at 38%.

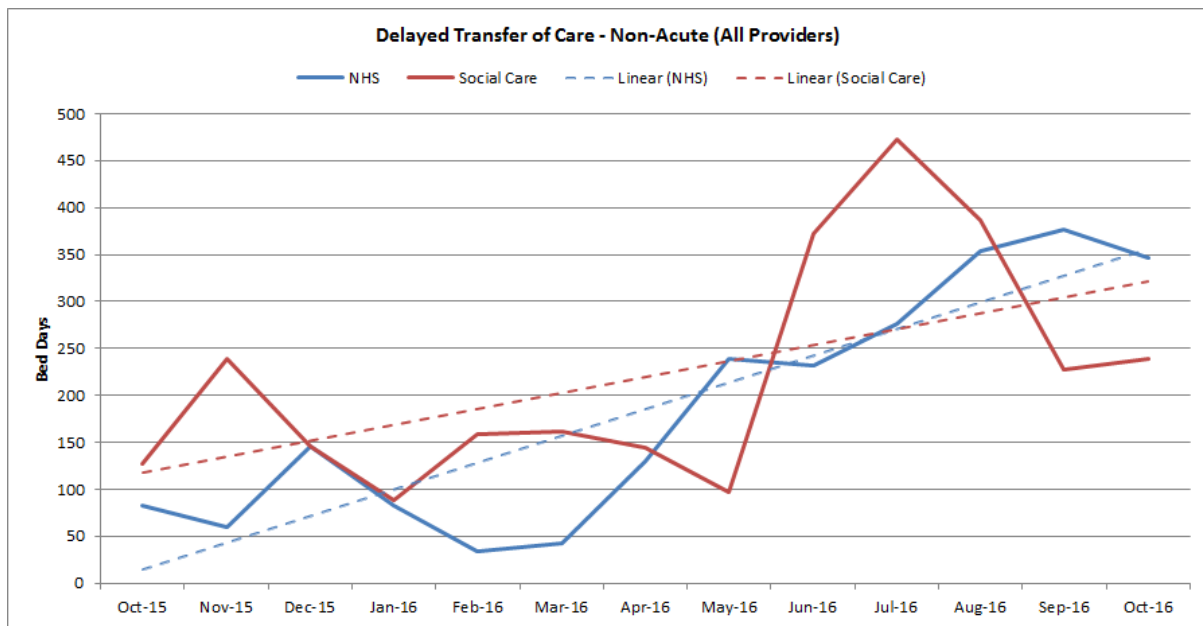
Mitigating actions include:

- ❖ Performance will be discussed at the next Stroke Working Group meeting in November. With focus on why the % of people accessing Early Supported Discharge and why joint health and social care plans have reduced in the last reporting period.
- ❖ In addition to this, the current status of radiology plans to increase the percentage of people who are scanned within 1 hour will be discussed.
- ❖ The Sentinel Stroke National Audit Programme (SSNAP) Organisational Audit has been completed. Key issues that will be addressed at the Stroke Working Group meeting as a result are:
 - Assurances about nurse staffing and the ability to maintain safe service delivery.
 - The intention to carry out a formal patient survey at least once a year
 - Consideration of the need to expand provision of therapy services to cover 7 days a week.

Delayed Transfers of Care (DTOC)

Current Performance





Note : Tees, Esk & Wear Valleys NHS Trust corrected their reporting method in July.

Current issues impacting on performance:

- ❖ Biggest challenge is delays with Continuing HealthCare packages for complex patients.
- ❖ City of York Council are trying to accommodate delayed patients in Step Down beds until home care packages are available.
- ❖ 40 patients waiting to be allocated a care manager by City of York and this has been escalated to the Assistant Director of Adult Social Care for action.
- ❖ Patients are still delaying in York Trust due to 'patient choice' issues which are now being progressed by the Senior Patient Flow Manager and Directorate Managers.
- ❖ York Trust was very busy last week of October / beginning of November due to staff shortages and half-term holidays and this impacted on discharges.
- ❖ Lake & Orchard Care Home is currently suspended and consequently not taking admissions (based at Riccall).

Mitigating actions include:

- ❖ Vale of York CCG and the Partnership Commissioning Unit are currently working together to address the shortage of EMI dementia beds across North Yorkshire and York. PCU are preparing an options appraisal paper to go to the Vale of York Senior Management Team in the next two weeks.
- ❖ Weekly DTOC meetings are being held with Vale of York CCG, City of York Council and Tees, Esk & Wear Valleys NHS Trust to understand and expedite delays at Meadowfields, Cherry Tree and Worsely Court.
- ❖ City of York commissioned two new home care providers in the summer which has helped reduce the number of delays in acute beds at York Hospital.

- ❖ Discharge to Assess Pathway 1 also reduced delays as patients were discharged home for assessment.

Healthcare Associated Infections (HCAI)

Current Performance – financial year to date

- ❖ At York Trust for Week Ending 6th November 2016 :
- ❖ MRSA bacteraemias stand at 5 year to date against a 0 trajectory for 2016/17
- ❖ C-Difficile infections stand at 16 year to date against a full year trajectory of 43

- ❖ A meeting with York Trust is being organised by the newly appointed shared IPC Specialist nurse to discuss the recent cluster of MRSA cases although no recurring themes or issues have been identified during the post infection review process.
- ❖ The overall C dif rate continues to reduce however York Trust have been asked how issues identified at post infection reviews in cases of lapses or no lapses in care are escalated to their Board as some evidence of lack of organisational embedding are apparent, despite a reduction in the overall trajectory

Dementia

Current Performance

- The most recent data available for Vale of York is September 2016 and current performance is at 54.7% which is an increase from the August position of 52.7%.

After a discussion with the colleagues at NHS England, the clinical lead and lead commissioner have updated their action plan in order to redeem the position by the end of the year.

The additional funding from NHS England will be used to support additional coding of dementia in primary care. The practice visits and interventions are due to start later this month and continue into December. Also, dementia will be discussed at the GP education evening event in November and the clinical summit in December.

The Dementia Improvement plan can be found at appendix 1.

Improving Access to Psychological Therapies (IAPT)

Current Performance

- The most recent **unvalidated** data available for Vale of York is September 2016. This is based on local data received directly from providers, as national validated figures from the Health and Social Care Information Centre (HSCIC) are 3 months in arrears. Please note that unvalidated figures can change significantly once processed and validated, so these figures are an indication only
- Access levels in September are at **12.7%**, up from **11.5%** in August, which is above the planned trajectory of 11.9% but below the 15% target
- Recovery rates in August are at **46.1%**, up from **43.3%** in August. This is in line with the planned trajectory of 46% against a national target of 50%.
- The 6 week finished treatment target in September is at 79.6% up from 76.0% in August. This is above the planned trajectory of 67.0% and the national target of 75.0%

Data above is for combined service provision from Tees, Esk & Wear Valleys NHS Trust (TEWV) and Humber Trusts, year to date breakdown being:

- ❖ YTD: TEWV – Prevalence 11.5%, Recovery 45.4%. 6 Week Finished Treatment 78.3%
- ❖ YTD: Humber – Prevalence 14.8%, Recovery 43.8%, 6 Week Finished Treatment 92.9%

Unvalidated data for October, based on TEWV only, indicates that:

- ❖ Prevalence performance will continue to improve to 14.34% and report above the agreed trajectory of 13.1%
- ❖ Recovery performance will significantly decrease to 41.90% and perform significantly below the agreed trajectory of 47%.
- ❖ Six week finished treatment performance will decrease to 75.86%. This remains above the agreed trajectory and national target.

The commissioning lead and commissioning team representatives from PCU attended a meeting last Wednesday to discuss sustainability of IAPT performance with the Intensive Support Team and other representatives of NHS England. NHS England colleagues are also working with the provider and the CCG to address the current issues in order that all metrics are achieved in a sustainable manner by March 2017.

The IAPT Improvement plan can be found at appendix 1.

Child and Adolescent Mental Health Services

Current Performance

- 156 patients awaiting their first appointment of which 95 have been waiting longer than 8 weeks. Approx. 60 of the patients are still being investigated but it is anticipated that the majority will be beyond 8 weeks.
- And 142 patients awaiting their second appointment of which 128 have been waiting longer than 8 weeks. Approx. 20 of the patients are still being investigated

Following an extensive data validation on waiting lists TEWV have provided the Vale of York CCG with the above current waiting lists from the new PARIS system at both 1st and 2nd appointment at 8 weeks. Further work will be undertaken by the provider to verify these lists for accuracy before the action plan to remedy the current long waits is agreed.