

**Supplement to the agenda for**

# **Adults and wellbeing scrutiny committee**

**Monday 2 March 2020**

**2.30 pm**

**Council Chamber, Shire Hall, St. Peter's Square, Hereford,  
HR1 2HX**

		<b>Pages</b>
<b>5.</b>	<b>QUESTIONS FROM MEMBERS OF THE PUBLIC</b>  Item purpose: To receive any written questions from members of the public.  Supplement contents: The attached document includes a question received and the response.	3 - 4
<b>8.</b>	<b>PERFORMANCE MONITORING - NHS HEREFORDSHIRE CLINICAL COMMISSIONING GROUP</b>  Item purpose: To consider a report on performance monitoring by NHS Herefordshire Clinical Commissioning Group.  Supplement contents: The attached document includes slides which will be presented at the meeting and talked to alongside the papers published in the agenda.	5 - 12



**Questions from members of the public to the adults and wellbeing scrutiny committee**

**2 March 2020**

The following question relates to agenda item 7, NHS Continuing Healthcare (NHS CHC). The associated documents can be viewed via the following link:

[NHS Continuing Healthcare \(NHS CHC\)](#)

**Question**

**From: Andrea Davis**

Why do Herefordshire CCG's figures for CHC eligibility continue to be consistently below the national average for CHC eligibility per 50k of population?

**Response**

**Chairperson of the adults and wellbeing scrutiny committee**

Thank you for your question. The question has been put to the responsible health body and the following response has been provided on behalf of NHS Herefordshire Clinical Commissioning Group (CCG).

**From: Linda Allsopp, Associate Director of Nursing and Quality**

*It is essential to note that there may be variations between CCGs, STPs and Regions when compared against each other. This could be due to a wide variety of reasons including (but not limited to) the age dispersion within the local population, variations between geographical areas in terms of their levels of health needs, and the availability of other local services for example step down beds, intermediate care, rehabilitation services, and other CCG community services.*



# Appendix 3 - presentation slides



## Urgent Care - Key System Performance

### Ambulance Activity - Handover Breaches - +1hr

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
WMAS Activity	1,806	1,846	1,809	1,783	1,784	1,750	1,969	1,876	2,044	1,932			<b>18,599</b>
Welsh Amb	180	172	173	179	171	185	195	179	158	203			<b>1,795</b>
<i>Total Activity</i>	<b>1,986</b>	<b>2,018</b>	<b>1,982</b>	<b>1,962</b>	<b>1,955</b>	<b>1,935</b>	<b>2,164</b>	<b>2,055</b>	<b>2,202</b>	<b>2,135</b>			<b>20,394</b>
30-60 mins	196	169	223	200	210	262	346	343	433	358			<b>2,740</b>
Over 1 hr	9	12	6	4	5	10	49	52	116	51			<b>314</b>

### A&E Activity - (Type 1 & MIU )

#### WVT Actual Perf. - 2018/19

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan
Total patients seen	5123	5719	5522	5877	5410	5275	5596	5296	5074	4952
Patients >4 hour wait	957	1275	1280	1537	1224	1245	1403	1447	1411	1520
Performance	81.32%	77.71%	76.82%	73.85%	77.38%	76.40%	74.93%	72.68%	72.19%	69.31%

#### WVT Actual Perf. - 2019/20

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan
Total patients seen	5372	6009	5899	6188	5777	5686	5748	5390	5578	5260
Patients >4 hour wait	1140	885	1253	1325	1081	1238	1592	1536	1813	1768
Performance	78.78%	85.27%	78.76%	78.59%	81.29%	78.23%	72.30%	71.50%	67.50%	66.39%
Variance on Activity	249	290	377	311	367	411	152	94	504	308
Variance on breaches	183	-390	-27	-212	-143	-7	189	89	402	248
Variance on Perf.	-2.54%	7.57%	1.94%	4.74%	3.91%	1.83%	-2.63%	-1.17%	-4.69%	-2.92%

A&E Attendances	Target		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
No waits from decision to admit to admission over 12 hours	0	2018/19	0	1	0	1	0	0	1	1	1	4	2	0
	0	2019/20	2	0	1	0	0	0	1	2	4			

## Urgent Care – Performance Summary

### A&E System

- See and convey (WMAS) for December 2019 was 65.46% against a standard of 55% or less. Ambulance conveyances have significantly increased during the winter period this year than in previous years.
- January 2020 there was a total of 2,135 ambulance conveyances and 5260 attendances resulting in performance of 66.39% a performance, a deterioration of -1.11% comparing January with December.
- There were four 12hr Decision to Admit (DTA) breach in December. YTD there have been 10 breaches.
- Primary care data shows that A&E attendances per 1,000 population comparing the current year with the previous year have increased in 8 out of 20 practices. The main increase has been in ambulance arrivals showing a growth of 4.7% and a reduction of 4.5% in walk ins

## Cancer Waiting Times - Key System Performance

<b>2WW cancer Wait</b>		<b>Apr-19</b>	<b>May-19</b>	<b>Jun-19</b>	<b>Jul-19</b>	<b>Aug-19</b>	<b>Sep-19</b>	<b>Oct-19</b>	<b>Nov-19</b>	<b>Dec-19</b>
Target		93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%
2018/19 HCCG Perf		93.67%	90.33%	86.99%	92.58%	86.81%	92.65%	94.48%	94.35%	95.39%
<b>2019/20 HCCG Perf</b>		95.92%	92.33%	92.61%	93.73%	94.74%	97.49%	96.74%	92.99%	91.83%
<b>WVT Activity</b>	Total Seen	672	626	553	780	615	664	665	709	616
	seen within 14 days	646	581	514	735	585	649	644	659	565
	Breaches	26	45	39	45	30	15	21	50	51
<b>WVT 2019/20 Actual Perf - HCCG</b>		96.13%	92.81%	92.95%	94.23%	95.12%	97.74%	96.84%	92.95%	91.72%
<b>2WW cancer Wait - Breast Symp.</b>		<b>Apr-19</b>	<b>May-19</b>	<b>Jun-19</b>	<b>Jul-19</b>	<b>Aug-19</b>	<b>Sep-19</b>	<b>Oct-19</b>	<b>Nov-19</b>	<b>Dec-19</b>
Target		93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%
2018/19 HCCG Perf		83.78%	37.14%	54.55%	63.04%	22.73%	6.45%	19.57%	39.47%	26.32%
<b>2019/20 HCCG Perf</b>		91.07%	94.59%	95.12%	100.00%	80.00%	86.49%	100.00%	96.97%	91.43%
<b>WVT Activity</b>	Total Seen	53	37	41	36	39	36	35	30	34
	seen within 14 days	51	35	39	36	32	32	35	30	31
	Breaches	2	2	2	0	7	4	0	0	3
<b>WVT 2019/20 Actual Perf - HCCG</b>		96.23%	94.59%	95.12%	100.00%	82.05%	88.89%	100.00%	100.00%	91.18%
<b>62 day Cancer wait</b>		<b>Apr-19</b>	<b>May-19</b>	<b>Jun-19</b>	<b>Jul-19</b>	<b>Aug-19</b>	<b>Sep-19</b>	<b>Oct-19</b>	<b>Nov-19</b>	<b>Dec-19</b>
Target		85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%
2018/19 HCCG Perf		73.91%	73.02%	85.25%	86.21%	84.21%	74.00%	71.43%	73.33%	72.92%
<b>2019/20 HCCG Perf</b>		78.38%	71.93%	75.47%	73.33%	72.46%	77.78%	85.37%	71.43%	68.18%
<b>WVT Activity</b>	Total Seen	48	42	44	44	55	43	31	42	29
	seen within 62 days	36.0	35.0	34	35.0	41.5	35.0	27.0	31.5	19.5
	Breaches	12.0	7.0	11	9.0	13.5	8.0	4.0	10.5	9.5
<b>WVT 2019/20 Actual Perf - HCCG</b>		75.00%	83.33%	76.14%	79.55%	75.45%	81.40%	87.10%	75.00%	67.24%
<b>Glos 2019/20 Actual Perf - HCCG</b>		83.33%	86.67%	62.50%	58.33%	59.09%	66.67%	87.50%	56.25%	73.08%

## Cancer Waits – Performance Summary

### Cancer Waits

- **2ww waits** – Overall 2ww have generally improved when comparing this year to last.
- **2ww Breast Symptomatic** – 2019/20 has seen a significant in performance when compared to the previous year. WVT have reviewed and made changes to their internal processes. Additional staff have been recruited to the team which has increased capacity and added stability to a previously fragile service.
- **62 day waits** – Capacity across certain specialties remains an issue. The majority our Hereford patients accessing treatment at tertiary centres out of county, Gloucester Hospitals for example where patients, on a Urology pathway, are choosing to wait longer than the national measure for robotic treatment.



## RTT Waiting Times - Key System Performance

### HCCG Performance

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Target	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%
0-18 wks wait	13,147	13,542	13,655	13,238	13,316	13,650	13,969	13,835	13,717
18+ wks wait	3,022	2,998	2,988	3,054	3,208	3,203	3,167	3,200	3,206
<b>Total</b>	16,169	16,540	16,643	16,292	16,524	16,853	17,136	17,035	16,923
<b>RTT Incomplete Performance</b>	81.31%	81.87%	82.05%	81.25%	80.59%	80.99%	81.52%	81.22%	81.06%

### WVT Activity - HCCG Commissioned

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
0-18 wks wait	10,742	11,105	11,282	10,798	10,933	11,131	11,466	11,422	11,288
18+ wks wait	2,601	2,574	2,568	2,653	2,780	2,805	2,780	2,788	2,791
<b>Total</b>	13,343	13,679	13,850	13,451	13,713	13,936	14,246	14,210	14,079
<b>2019/20 WVT Performance</b>	80.51%	81.18%	81.46%	80.28%	79.73%	79.87%	80.49%	80.38%	80.18%

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
+52wk Breaches									
HCCG Breaches	1	1	0	4	6	3	3	2	1
WVT Breaches	0	0	0	0	2	0	2	1	0

Diagnostic Waits - +6wks - HCCG	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Target	99.00%	99.00%	99.00%	99.00%	99.00%	99.00%	99.00%	99.00%	99.00%
Total Waiting List	2650	2694	2893	2598	2475	2988	2889	2821	2530
No.s waiting +6wks	21	24	10	10	11	11	8	9	17
No.s waiting less than 6wks	2629	2670	2883	2588	2464	2977	2881	2812	2513
Performance	99.21%	99.11%	99.65%	99.62%	99.56%	99.63%	99.72%	99.68%	99.33%

Diagnostic Waits - +6wks - WVT - HCCG	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Total Waiting List	2348	2380	2596	2280	2161	2676	2538	2491	2208
No.s waiting +6wks	5	14	3	0	3	0	0	0	7
No.s waiting less than 6wks	2343	2366	2593	2280	2158	2676	2538	2491	2201
Performance	99.79%	99.41%	99.88%	100.00%	99.86%	100.00%	100.00%	100.00%	99.68%

## RTT Waiting Times - Performance Summary

### RTT & Diagnostic Waits

- **Diagnostic Waits** – WVT have always had minimal waits of greater than 6wks and continue to manage their activity well.
- **RTT Waits +18wks** – Pressure remains across the system for patients waiting +18wks. Other avenues of treatment are being explored as part of the on-going service transformation work.
- **+52wk waits** – The majority of +52w breaches are occurring at providers out of county. WVT have made significant improvement when compared to last year. During the period April 18 to March 19 WVT had 835 breaches. In this current year they have had 5 between April and December.

# Dementia Diagnosis & IAPT - Key System Performance

<b>Dementia Diagnosis</b>	<b>Mar-19</b>	<b>Apr-19</b>	<b>May-19</b>	<b>Jun-19</b>	<b>Jul-19</b>	<b>Aug-19</b>	<b>Sep-19</b>	<b>Oct-19</b>	<b>Nov-19</b>	<b>Dec-19</b>
<b>Performance vs. Estimated Prevalence for 2019/20</b>										
Estimated Prevalence	3009	3014	3023	3033	3045	3057	3065	3073	3074	3072
67% of estimated prevalence	2016	2019	2025	2032	2040	2048	2054	2059	2060	2058
Actual	1758	1760	1779	1770	1781	1784	1787	1783	1769	1744
Performance against Est Prev.	58.42%	58.39%	58.85%	58.36%	58.49%	58.36%	58.30%	58.02%	57.55%	56.77%
	67.00%	67.00%	67.00%	67.00%	67.00%	67.00%	67.00%	67.00%	67.00%	67.00%
	-8.58%	-8.61%	-8.15%	-8.64%	-8.51%	-8.64%	-8.70%	-8.98%	-9.45%	-10.23%

	Q4			Q1			Q2			Q3			Q4		
<b>IAPT Access Rate</b>	<b>Jan-19</b>	<b>Feb-19</b>	<b>Mar-19</b>	<b>Apr-19</b>	<b>May-19</b>	<b>Jun-19</b>	<b>Jul-19</b>	<b>Aug-19</b>	<b>Sep-19</b>	<b>Oct-19</b>	<b>Nov-19</b>	<b>Dec-19</b>	<b>Jan-20</b>	<b>Feb-20</b>	<b>Mar-20</b>
The number of people who have depression and/or anxiety disorders	14520	14520	14520	14520	14520	14520	14520	14520	14520	14520	14520	14520	14520	14520	14520
Target Activity	229	230	231	229	230	231	229	230	231	229	230	231	250	265	285
Quarterly Target			690			690			690			690			800
Target %			4.75%			4.75%			4.75%			4.75%			5.51%
Annualised target			19.01%			19.01%			19.01%			19.01%			22.04%
Actual Activity - Monthly	185	173	158	199	199	166	193	196	193	240	227	203			
Actual Activity - Rolling Quarter (Last 3 months)	185	358	516	530	556	564	558	555	582	629	660	670	430	203	0
Access rate achieved - Rolling Quarter (Last 3 months)	1.27%	2.47%	3.55%	3.65%	3.83%	3.88%	3.84%	3.82%	4.01%	4.33%	4.55%	4.61%	2.96%	1.40%	0.00%
Annualised Rate progress based on Rolling Quarter x by 4	5.10%	9.86%	14.21%	14.60%	15.32%	15.54%	15.37%	15.29%	16.03%	17.33%	18.18%	18.46%	11.85%	5.59%	0.00%
<b>IAPT Recovery</b>															
The number of people who have completed treatment (minimum 2 treatment contacts).	107	147	119	147	171	158	185	146	186	178	169	128			
The number of people who are "moving to recovery" (of those who have completed treatment).	62	75	67	76	88	79	90	79	100	91	86	66			
IAPT Recovery Rate	57.94%	51.02%	56.30%	51.70%	51.46%	50.00%	48.65%	54.11%	53.76%	51.12%	50.89%	51.56%	#DIV/0!	#DIV/0!	#DIV/0!
IAPT Recovery Rate - Rolling Quarter perf.	53.72%	52.03%	54.69%	52.78%	52.26%	50.52%	49.52%	50.72%	52.03%	52.94%	51.97%	51.16%			

# Dementia Diagnosis & IAPT - Performance Summary

## Dementia Diagnosis & IAPT

- **Dementia Diagnosis Rate** – We have recovery plans in place and are constantly working with primary care and our MH provider to ensure we are identifying or monitoring people earlier with a dementia diagnosis. Our performance against the national standard mirrors that of similar rural counties. In terms of our dementia registered patients we see for every 10 patients newly diagnosed approximately 30 die or move out of county to be closer to family support.
- **IAPT Access** – Achieving the access standard has always been challenging. This year has seen an improvement towards the standard of 22%. The provider, 2gether NHSFT, have taken on new staff as part of a national training programme and they have also amended their service provision which is now showing the improvement. This has also increased their capacity to see more patients.
- **IAPT Recovery** – Continues to perform above the expected standard.
- **IAPT Waiting Times – 6 & 18wk** – Both waiting time standards continue to perform well in excess of the expected standard