

**WOLVERHAMPTON CCG**

**GOVERNING BODY**

**Agenda item 17**

<b>Title of Report:</b>	<b>Summary – Wolverhampton Clinical Commissioning Group (WCCG) Finance and Performance Committee- 27<sup>th</sup> August2019</b>
<b>Report of:</b>	Tony Gallagher – Chief Finance Officer
<b>Contact:</b>	Tony Gallagher – Chief Finance Officer
<b>Governing Body Action Required:</b>	<input type="checkbox"/> <b>Decision</b> <input checked="" type="checkbox"/> <b>Assurance</b>
<b>Purpose of Report:</b>	To provide an update of the WCCG Finance and Performance Committee to the Governing Body of the WCCG.
<b>Recommendations:</b>	<ul style="list-style-type: none"> <li>• <b>Receive</b> and <b>note</b> the information provided in this report.</li> </ul>
<b>Public or Private:</b>	This Report is intended for the public domain.
<b>Relevance to CCG Priority:</b>	The organisation has a number of finance and performance related statutory obligations including delivery of a robust financial position and adherence with NHS Constitutional Standards.
<b>Relevance to Board Assurance Framework (BAF):</b>	
<ul style="list-style-type: none"> <li>• <b>Domain 1: A Well Led Organisation</b></li> </ul>	The CCG must secure the range of skills and capabilities it requires to deliver all of its Commissioning functions, using support functions effectively, and getting the best

	value for money; and has effective systems in place to ensure compliance with its statutory functions, meet a number of constitutional, national and locally set performance targets.
<ul style="list-style-type: none"> <li>• <b>Domain2:</b> Performance – delivery of commitments and improved outcomes</li> </ul>	The CCG must meet a number of constitutional, national and locally set performance targets.
<ul style="list-style-type: none"> <li>• <b>Domain 3:</b> Financial Management</li> </ul>	<p>The CCG aims to generate financial stability in its position, managing budgets and expenditure to commission high quality, value for money services.</p> <p>The CCG must produce a medium to long term plan that allows it to meet its objectives in the future.</p>

## 1. FINANCE POSITION

The Committee was asked to note the following year to date position against key financial performance indicators;

<b>Financial Targets</b>				
<b>Statutory Duties</b>	<b>Target</b>	<b>Out turn</b>	<b>Variance o(u)</b>	<b>RAG</b>
Expenditure not to exceed income	£13.178m surplus	£13.178m surplus	Nil	G
Capital Resource not exceeded	nil	nil	Nil	G
Revenue Resource not exceeded	£447.069m	£433.891m	(£13.178m)	G
Revenue Administration Resource not exceeded	£5.516m	£5.316m	(£0.2m)	G

<b>Non Statuory Duties</b>	<b>YTD Target</b>	<b>YTD Actual</b>	<b>Variance o(u)</b>	<b>RAG</b>
Maximum closing cash balance	£413k	£52k	(£361k)	G
Maximum closing cash balance %	1.25%	0.15%	(1.10%)	G
BPPC NHS by No. Invoices (cum)	95%	100%	(5%)	G
BPPC non-NHS by No. Invoices (cum)	95%	100%	(5%)	G
QIPP	£16.686m	£16.686m	Nil	G
Programme Cost *	£141,393k	£142,362k	£969k	G
Reserves *	£901k	£0k	(£901k)	G
Running Cost *	£1,839k	£1,771k	(£67k)	G

- The net effect of the three identified lines (\*) is break even.
- Underlying recurrent surplus metric of 1% has been maintained.
- Programme Costs inclusive of reserves is showing a small overspend.
- Royal Wolverhampton Trust (RWT) M3 data requires further analysis.
- The CCG control total of £13.178m includes £3.15m of additional surplus as required by NHSEI.
- The CCG is reporting achieving its QIPP target of £16.686m.

The table below highlights year to date performance as reported to and discussed by the Committee;

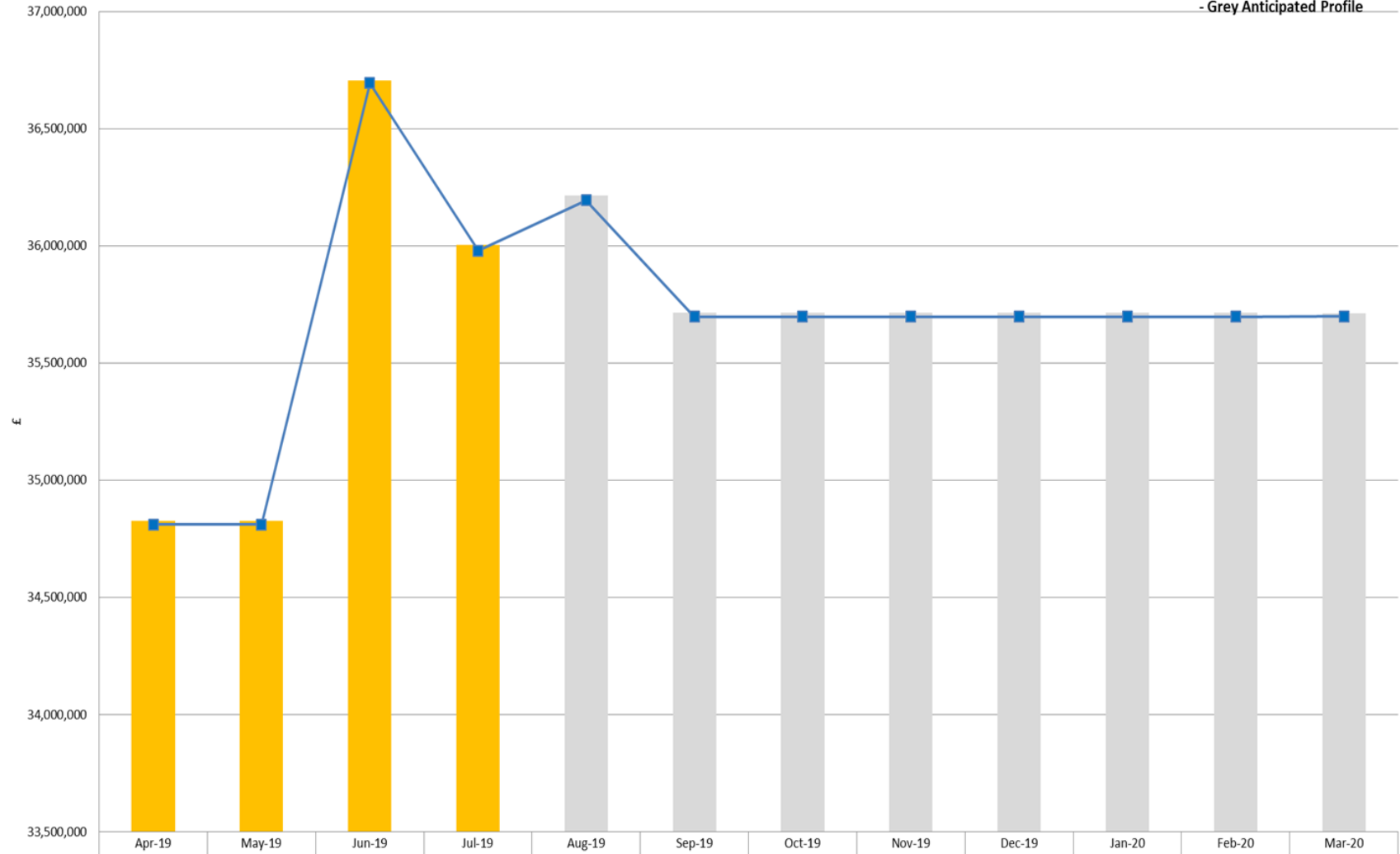
	Annual Budget £'000	YTD Performance M04							In Month Movement Trend	In Month Movement £'000 o(u)	Previous Month FOT Variance £'000 o(u)
		Ytd Budget £'000	Ytd Actual £'000	Variance £'000 o(u)	Var % o(u)	FOT Actual £'000	FOT Variance £'000	Var % o(u)			
Acute Services	210,731	70,244	70,834	591	0.8%	212,683	1,952	0.9%	●	0	1,952
Mental Health Services	42,238	13,582	13,695	113	0.8%	42,381	143	0.3%	●	0	143
Community Services	45,628	15,209	15,238	29	0.2%	45,595	(33)	(0.1%)	●	0	(33)
Continuing Care	16,006	5,335	5,224	(111)	(2.1%)	15,973	(33)	(0.2%)	●	0	(33)
Primary Care Services	58,702	19,567	19,750	183	0.9%	59,065	363	0.6%	●	0	363
Delegated Primary Care	37,573	12,524	12,715	191	1.5%	37,573	0	0.0%	●	0	0
Other Programme	14,793	4,931	4,905	(26)	(0.5%)	14,734	(60)	(0.4%)	●	0	(60)
<b>Total Programme</b>	<b>425,671</b>	<b>141,393</b>	<b>142,362</b>	<b>969</b>	<b>0.7%</b>	<b>428,003</b>	<b>2,332</b>	<b>0.5%</b>	●	<b>0</b>	<b>2,332</b>
Running Costs	5,516	1,839	1,771	(67)	(3.7%)	5,316	(200)	(3.6%)	●	(200)	0
Reserves	2,704	901	0	(901)	(100.0%)	572	(2,132)	(78.8%)	●	0	(2,132)
<b>Total Mandate</b>	<b>433,891</b>	<b>144,133</b>	<b>144,133</b>	<b>(0)</b>	<b>(0.0%)</b>	<b>433,891</b>	<b>0</b>	<b>0.0%</b>	●	<b>(200)</b>	<b>200</b>
Target Surplus	13,178	4,393	0	(4,393)	(100.0%)	0	(13,178)	(100.0%)	●	0	(13,178)
<b>Total</b>	<b>447,069</b>	<b>148,526</b>	<b>144,133</b>	<b>(4,393)</b>	<b>(3.0%)</b>	<b>433,891</b>	<b>(13,178)</b>	<b>(2.9%)</b>	●	<b>(200)</b>	<b>(13,178)</b>

- The Acute over performance relates in the main to RWT. Having received Month 3 data the CCG has considered the level of performance reported and has reflected a level of over performance which it considers to be appropriate based on historic activity patterns.
- The Mental Health over performance relates to the recognition of the recurrent impact of NCA activity.
- To achieve the target surplus the CCG has utilised all of the Contingency Reserve, and the 1% reserve. For 20/21 the CCG will need to reinstate the Contingency and 1% reserve which will be a first call on growth monies.
- The CCG is now required to report on its underlying financial position, a position which reflects the recurrent position and financial health of the organisation and is meeting the planning requirements of a 1% recurrent surplus as shown below.
- The extract from the M4 non ISFE demonstrates the CCG achieved its plan, achieving 1.0% recurrent underlying surplus after adjusting for Co Commissioning

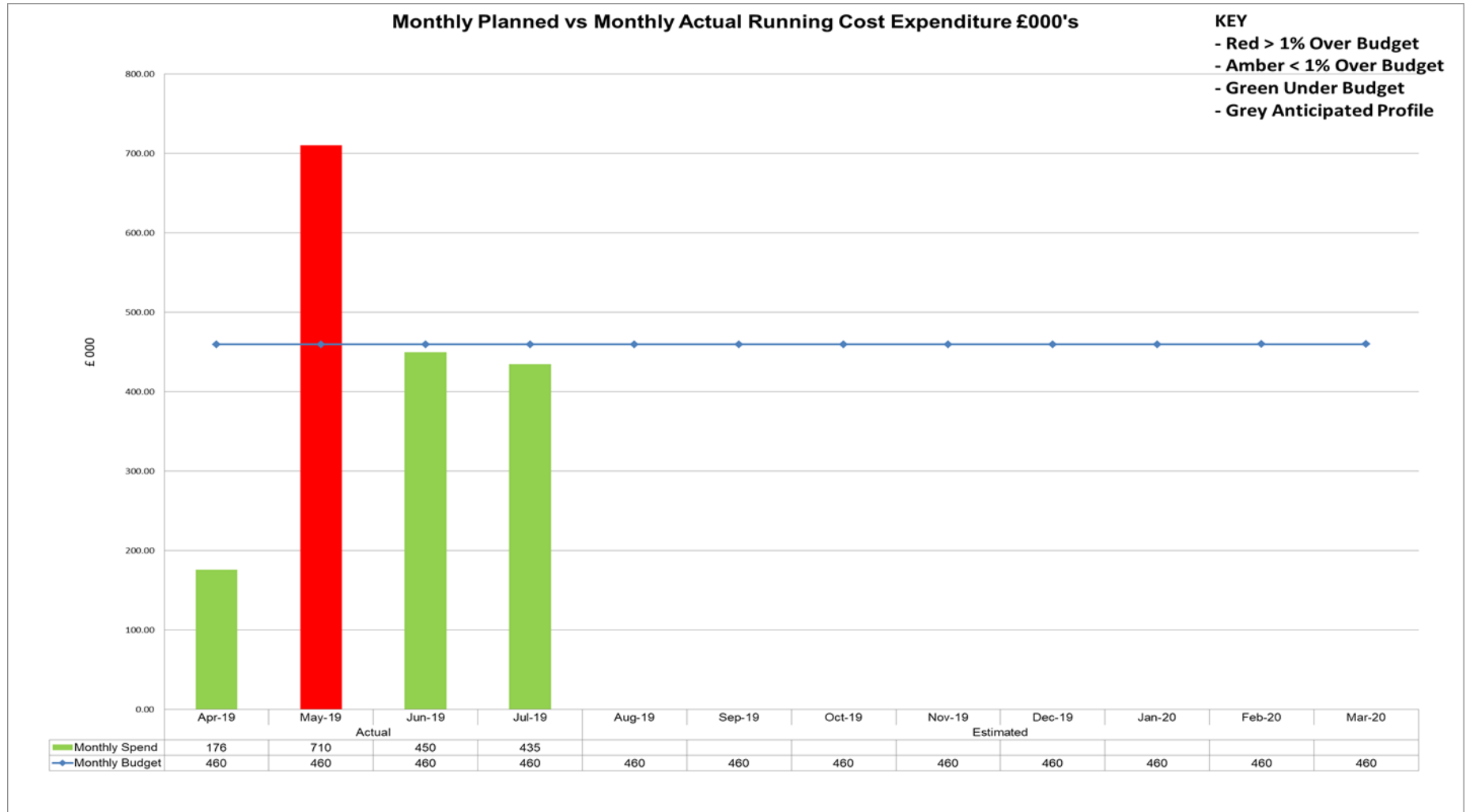
CCG UNDERLYING POSITION	Forecast Net Expenditure				Remove Non Recurrent Items				Part/Full Year Effects		2019/20 Underlying Position £m
	Plan	Actual	Variance	Variance	NR Allocations & Matched Expenditure	NR QIPP Benefit	Contingency	Other NR Spend / Income	QIPP	Other	
	£m	£m	£m	%	£m	£m	£m	£m	£m	£m	
<b>REVENUE RESOURCE LIMIT (IN YEAR)</b>	<b>437.041</b>				<b>(10.650)</b>						<b>426.391</b>
Acute Services	210.731	212.683	(1.952)	(0.9%)	(2.825)	1.110		(3.391)			207.577
Mental Health Services	42.238	42.381	(0.143)	(0.3%)	(1.818)	-		(0.270)			40.293
Community Health Services	45.628	45.595	0.033	0.1%	-	-		0.092			45.687
Continuing Care Services	16.006	15.973	0.033	0.2%	-	-		0.013			15.986
Primary Care Services	58.702	59.065	(0.363)	(0.6%)	(4.826)	0.500		(0.368)			54.371
Primary Care Co-Commissioning	38.145	38.145	-	0.0%	-	-	(0.191)	0.191			38.145
Other Programme Services	16.925	14.734	2.192	12.9%	(1.181)	1.540	(2.132)	1.861			14.822
<b>Commissioning Services Total</b>	<b>428.375</b>	<b>428.575</b>	<b>(0.200)</b>	<b>(0.0%)</b>	<b>(10.650)</b>	<b>3.150</b>	<b>(2.323)</b>	<b>(1.872)</b>	-	-	<b>416.880</b>
Running Costs	5.516	5.316	0.200	3.6%	-	-					5.316
<b>TOTAL CCG NET EXPENDITURE</b>	<b>433.891</b>	<b>433.891</b>	<b>0.000</b>	<b>0.0%</b>	<b>(10.650)</b>	<b>3.150</b>	<b>(2.323)</b>	<b>(1.872)</b>	-	-	<b>422.196</b>
<b>IN YEAR UNDERSPEND / (DEFICIT)</b>	<b>3.150</b>	<b>3.150</b>	<b>0.000</b>	<b>0.0%</b>					<b>Underlying Underspend / (Deficit)</b>		<b>4.195</b>
									<b>% RRL</b>		<b>1.0 %</b>

### Monthly Planned vs Monthly Actual Programme Expenditure

**KEY**  
 - Red > 1% Over Budget  
 - Amber < 1% Over Budget  
 - Green Under Budget  
 - Grey Anticipated Profile



- The graph details the monthly and cumulative budgeted and actual expenditure in 2019/20. The movement in spend between April and May is expected as there are missing accruals in the April position, as month 1 is not reported.



## DELEGATED PRIMARY CARE

- The Delegated Primary Care allocation for 2019/20 is £38.145m. At M4 the CCG forecast outturn is £38.145m delivering a breakeven position.
- The 0.5% contingency and 1% reserve are uncommitted in line with the 2019/20 planning metrics under other GP Services.
- The table below shows the outturn for month 4:

	YTD budget £'000	YTD spend £'000	YTD Variance £'000 o/(u)	Annual Budget £'000	FOT £'000	Variance £'000 o/(u)	In Month Movement Trend	In Month Movement £'000 o/(u)	Previous Month FOT Variance £'000 o/(u)
General Practice GMS	7,947	7,507	(440)	23,842	23,842	0	●	0	0
General Practice PMS	965	484	(481)	2,895	2,895	0	●	0	0
Other List Based Services APMS incl	510	783	273	1,531	1,531	0	●	0	0
Premises	835	798	(37)	2,505	2,505	0	●	0	0
Premises Other	22	28	6	65	65	0	●	0	0
Enhanced services Delegated	253	632	379	758	758	0	●	0	0
QOF	1,250	1,224	(26)	3,751	3,751	0	●	0	0
Other GP Services	742	1,260	518	2,226	2,226	0	●	0	0
Delegated Contingency reserve	64	0	(64)	191	191	0	●	0	0
Delegated Primary Care 1% reserve	127	0	(127)	381	381	0	●	0	0
<b>Total</b>	<b>12,715</b>	<b>12,715</b>	<b>0</b>	<b>38,145</b>	<b>38,145</b>	<b>0</b>	<b>●</b>	<b>0</b>	<b>0</b>

2019/20 forecast figures have been updated on quarter 2 list sizes to reflect Global Sum, Out of Hours and MPIG, Enhanced services, Locum cover, in year rent changes as well as the changes to the primary care networks .

The CCG continues to identify flexibilities within the Delegated budget and a paper will be taken to the Primary Care Commissioning Committee detailing flexibilities and agreed plans for expenditure to ensure the best possible use of resources.



## 2. QIPP

The key points to note are as follows:

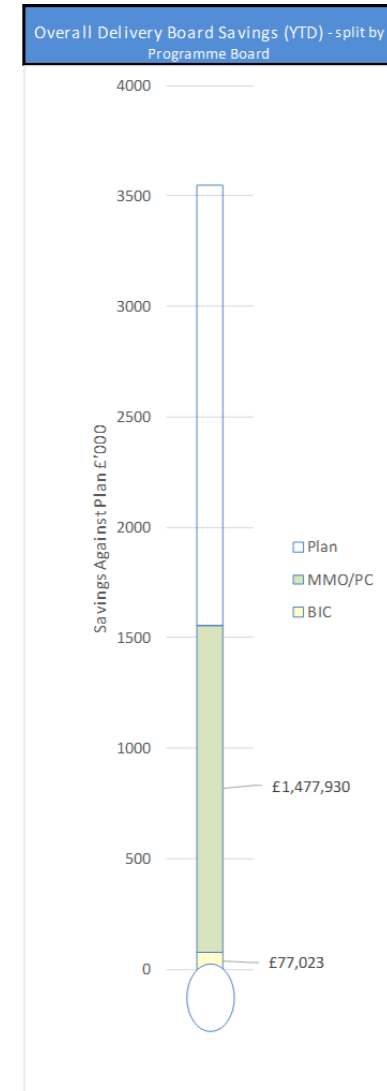
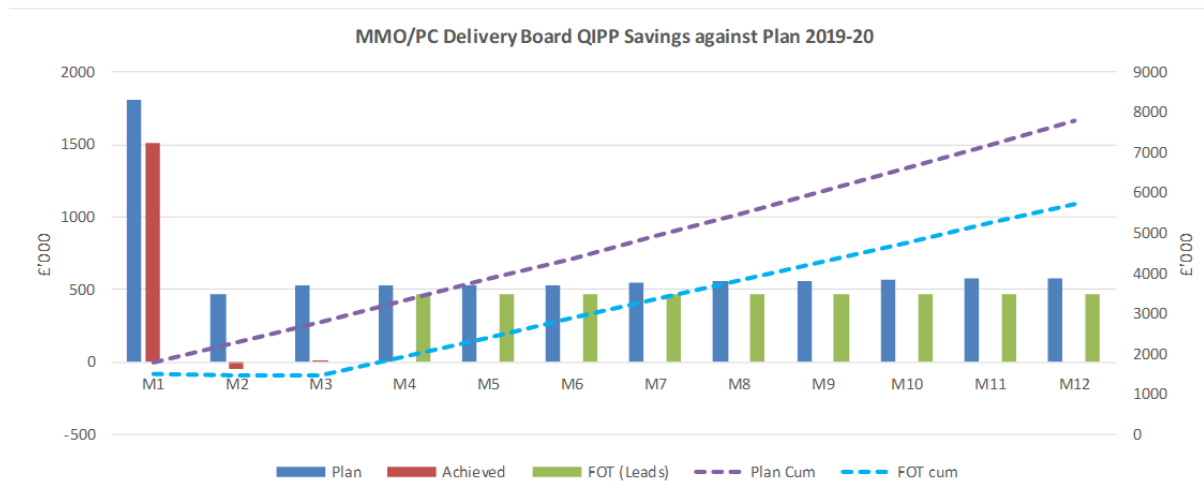
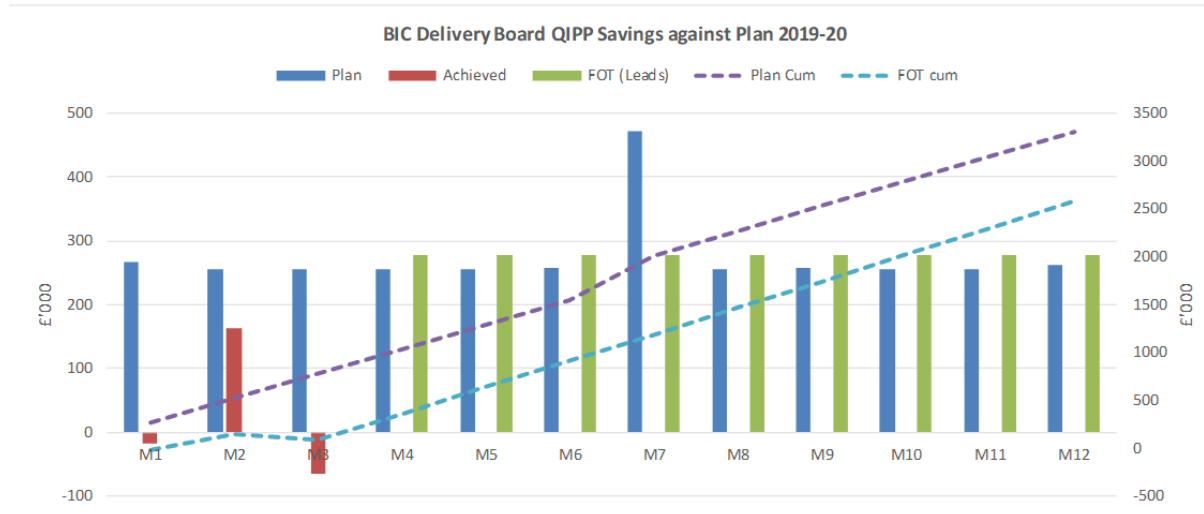
- The submitted financial plan, prior to the request to increase the control total, required a QIPP of £13.536m or 3.5% of allocation.
- The revised financial plan reflecting the increase in the control total requires a QIPP of £16.686m, (4.1%) the additional QIPP being identified at a high level as follows :
  - Prescribing £500k
  - Other Programme Services £1.54m
  - Acute service Independent/Commercial sector £1.1m

The above categories represent the areas under higher levels of scrutiny by NHSEI.

- The plan assumes full delivery of QIPP on a recurrent basis (with the exception of the additional QIPP required to support the revised control total) as any non-recurrent QIPP will potentially be carried forward into future years.
- The CCG is formally reporting QIPP being delivered, as the CCG is achieving its financial metrics and is in a position to support any non recurrent slippage on QIPP through the deployment of reserves.
- Within BIC the key points are as follows:
  - At M3 QIPP delivery is behind the year to date plan and is unlikely to deliver the annual target
  - The increase in QIPP target at in M7 reflects the decommissioning of Blakenhall
  - Work is ongoing in relation to QIPP scheme delivery related to acute spells. Such schemes have targeted specific HRGs. However, the monitoring has been complicated as RWT review their coding practices. As a result activity is potentially being coded to different HRGs and the CCG appears to be underperforming against the original HRGs.
- Within MMO/PC the key points are as follows:
  - At M3 QIPP delivery is behind the year to date plan.
  - Prescribing has yet to report their QIPP position due to the timing of data received to support the monitoring of schemes. However, Prescribing is confident its QIPP target will be delivered.

- The table below details the QIPP programme and the level of savings assigned to each Programme Board and form the basis of monitoring for 19/20.

**QIPP Programme Delivery Board**



### **3. STATEMENT OF FINANCIAL POSITION**

The Statement of Financial Position (SoFP) as at 31<sup>st</sup> July 2019 is shown below:

	31 July '19 £'000	30 June '19 £'000	Note	Change In Month £'000
<b>Non Current Assets</b>				
Assets	0	0	1	0
Accumulated Depreciation	0	0	2	0
	0	0		
<b>Current Assets</b>				
Trade and Other Receivables	3,000	2,319	3	681
Cash and Cash Equivalents	52	100	4	-48
	3,052	2,419		
<b>Total Assets</b>	<b>3,052</b>	<b>2,419</b>		
<b>Current Liabilities</b>				
Trade and Other Payables	-40,005	-37,332	5	-2,674
	-40,005	-37,332		
<b>Total Assets less Current Liabilities</b>	<b>-36,953</b>	<b>-34,913</b>		
<b>TOTAL ASSETS EMPLOYED</b>	<b>-36,953</b>	<b>-34,913</b>		
<b>Financed by:</b>				
<b>TAXPAYERS EQUITY</b>				
General Fund	36,953	34,913	6	2,040
<b>TOTAL</b>	<b>36,953</b>	<b>34,913</b>		

Key points to note from the SoFP are:

Governing Body Meeting

- The cash target for month 4 has been achieved.
- The CCG is maintaining its high performance against the BPPC target of paying at least 95% of invoices within 30 days, (98% for non-NHS invoices and 99% for NHS invoices);

- **PERFORMANCE**

Exception highlights were as follows;

### 3.1. Royal Wolverhampton NHS Trust (RWT)

#### 3.1.1. EB3 – Referral to Treatment Time (RTT), EBS4 - 52 Week Waiters

This standard supports patients' right to start consultant-led non-emergency treatment within a maximum of 18 weeks from referral. The length of the RTT period is reported for patients whose RTT clock stopped during the month, and those who are waiting to start treatment at the end of the month.

#### ***Wolverhampton CCG Position (June 19):***

- WCCG 87.4%, England Commissioners 83.2%, STP 90.4%
- 92% WCCG patients started treatment within 21.2 weeks at any provider in England against the standard of 18 weeks (England was 23.8).
- There are no WCCG patients waiting 52+ weeks to start treatment.
- The CCG's performance is primarily affected by underperformance at RWT, achieving 87% (16,480 out of 19,006 patients) requiring an additional 1,006 patients to start treatment within 18 weeks of referral to achieve the national standard.
- The CCG has received a RAP proposal from RWT which the CCG Contracts Team have collated colleagues' comments and fed back to the Trust for further response.
- Recovery will be defined at speciality level and will support recovery of WCCG performance back to standard; this will be managed and assured via CRM/CQRM.
- Performance continues to be affected by ongoing increase in cancer referrals together with
- Specialities with the longest waiting times are Ophthalmology, Dermatology, Oral Surgery, Neurology and General Surgery.
- Any patients at week 45 are monitored individually by the COO.
- The Trust has no patients waiting over 52 weeks.

### **3.1.2. Urgent Care (EB5 - 4hr Waits, EBS7 - Ambulance Handovers, EBS5 - 12 Hr Trolley Breaches)**

- The CCG's performance against this standard is assessed based on the validated performance for RWT:
- 89.9% of A&E attendances were admitted, transferred or discharged within 4 hours from arrival in July which has remained static from May.
- Performance remains challenged across the country with England at 86.5% and the Black Country STP achieved 86.8%.
- July nationally verified and published data has confirmed the following attendance splits for the Trust:
  - Type 1 (Major A&E): 12,201 (with 2,026 breaches) = 83.4%
  - Type 3 (Other A&E/Minor Injury Units): 8,440 (with 58 breaches) = 99.3%
  - Combined: 20,641 (with 2,084 breaches) = 89.9%
- The CCG continues to monitor performance and support programmes to improve performance at A&E Delivery Board, CQRM and CRM.
- 95% of all emergency admissions were admitted within 4 hours from decision to admit also above that of the Black Country (88.6%) and England (89.6%).
- Delayed Transfer of Care rates remain low at 2.89% for June indicating Trust is managing patient flow.
- The CCG is monitoring the impact of the Strategic Cell diverts on Delayed Transfers of Care (DToC) and delays in repatriations.
- Ambulance conveyances in to the Trust continue the upward trend and are under discussion at AEDB together with the triaging of patients from ED to the Urgent Care Centre.
- Trust is on track to provide Same Day Emergency Care (SDEC) in Type 1 Emergency Departments by September 19 in line with the national ambition.
- There were no breaches of the 12 hr standard in July.

### **3.1.3. Cancer – All Standards**

- CCG analysis has demonstrated that the deterioration in performance is multi-faceted and relates in the main to: Diagnostic and robotic capacity, workforce capacity, late tertiary referrals and increasing referral activity specifically relating to urology and breast pathways. Royal Wolverhampton Trust is a tertiary cancer centre and historically is the preferred provider for local populations. The demand is in line with analysis of National Audit Office (NHS waiting times for elective and cancer treatment).

- **2WW Breast Symptomatic specific issues and actions:**
  - 10% increase of breast referrals over the past 2 years.
  - The Trust has been running additional lists every Saturday since October.
  - The CCG are currently investigating the option of commissioning a Community Breast Pain Clinic together with the introduction of pain management prior to referral.
  - The Trust is working towards implementation of the 28 day faster diagnostic pathway for breast referrals – approach supported by NHSE/I.
  - A joint programme to relieve pressure on RWT waiting list commenced in July 2019. Targeted GPs across Wolverhampton, Cannock, SES & Seisdon CCG, Telford & Wrekin CCGs, Walsall and Dudley are being asked to discuss the alternative option of being referred to Walsall or Dudley, where waiting times are lower, with their patients at point of referral.
  
- **All Cancer standards – issues and actions:**
  - Remedial action plan is in place and reviewed monthly with revised improvement trajectories agreed.
  - RAP anticipates return to 62 day performance by November 2019
  - Radiology and diagnostic capacity significantly challenged – despite some outsource activity.
  - Impact of delays on the 2WW cancer pathways (in particular Breast referrals) will start to affect performance against the 31 and 62 day standards.
  - Conversion rates remain in line with England rates and confirms appropriateness of referrals.
  - Complete redesign of Urology pathway; from the end of January 2019 the Trust have implemented the 28 day faster diagnosis pathway in Urology which has now demonstrated that patients reaching transrectal ultrasound guided (TRUS) biopsy stage waiting times are currently at 28 days in June from 52 days.
  - .

*Cancer performance data for June 19*

Ref	Indicator	Standard	RWT	WCCG
EB6	2 Week Wait (2WW)	93%	73.4%	70.4%
EB7	2 Week Wait (2WW) Breast Symptoms)	93%	3.8%	5.8%
EB8	31 Day (1 <sup>st</sup> Treatment)	96%	84.4%	91.6%
EB9	31 Day (Surgery)	94%	72.5%	76.2%
EB10	31 Day (anti-cancer drug)	98%	98.1%	100.0%
EB11	31 Day (radiotherapy)	94%	95.8%	87.8%

Ref	Indicator	Standard	RWT	WCCG
EB12	62 Day (1 <sup>st</sup> Treatment)	85%	55.7%	59%
EB13	62 Day (Screening)	90%	80.0%	73.3%
EB14	62 Day (Consultant Upgrade)	No Standard	72.0%	66.7%

### 3.2. Black Country Partnership NHS Foundation Trust – (BCPFT)

#### 3.2.1. Mental Health

#### 3.2.2. EA3 - IAPT - People who have entered treatment as a proportion of people with anxiety or depression (local prevalence).

- Performance is measured based on a quarterly performance however is monitored monthly. NHS England figures are based on a rolling quarter and confirm the April performance as 5.86% and above threshold of 4.75% for Q1-Q3.
- In order to achieve the increased threshold throughout the year, monthly monitoring will continue with focus on ensuring events are planned earlier in the year to ensure the achievement of the standard in 2019/20.

#### 3.2.3. E.H.10: % of CYP with ED (routine cases) that wait 4 weeks or less from referral to start of NICE-approved treatment

- Difficulties experienced across the STP in age group of patients being able to attend routine appointments, further discussion is due to take place with BCPFT re options available to support access.
- Low numbers (18/20 on a rolling 12 month basis) affect performance against the national standard of 95%.

## 4. RISK and MITIGATION

The CCG was required to resubmit a plan which demonstrates £6.3m risk which currently is fully mitigated based on the assumption that the Black Country CCG Risk share agreement will be applied. The level of risk has been reduced in M4 to reflect the inclusion of costs within the main financial reporting.

The key risks are as follows:

- QIPP slippage £1.1m



- Over performance in Acute services £500k
- Mental Health overspend £500k
- Prescribing overspend £500k
- Other programme services including extension to control total £3.35m

CCG RISKS & MITIGATIONS	Forecast Net Expenditure				RISKS (enter negative values only)						MITIGATIONS (enter positive values only)										
	Plan	Actual	Variance	Variance	Contract	QIPP	Performance Issues	Prescribing	Other	TOTAL RISKS	Contingency Held	Contract Reserves	Investments Uncommitted	Further QIPP Extensions	Non-Recurrent Measures	Delay / Reduce Investment Plans	Other Mitigations	Potential Funding	TOTAL MITIGATIONS		
	£m	£m	£m	%	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	
REVENUE RESOURCE LIMIT (IN YEAR)	437.041																				
REVENUE RESOURCE LIMIT (CUMULATIVE)	447.069																				
Acute Services	210.731	212.683	(1.952)	(0.9%)	(0.500)	(1.000)				(1.500)	0.500			1.000							1.500
Mental Health Services	42.238	42.381	(0.143)	(0.3%)		(0.100)			(0.500)	(0.600)	0.500			0.100							0.600
Community Health Services	45.628	45.595	0.033	0.1%																	
Continuing Care Services	16.006	15.973	0.033	0.2%																	
Primary Care Services	58.702	59.065	(0.363)	(0.6%)				(0.500)		(0.500)	0.500										0.500
Primary Care Co-Commissioning	38.145	38.145	-	0.0%							0.633										0.633
Other Programme Services	16.925	14.734	2.192	12.9%					(3.350)	(3.350)					2.000	0.717					2.717
Commissioning Services Total	428.375	428.575	(0.200)	(0.0%)	(0.500)	(1.100)	-	(0.500)	(3.850)	(5.950)	2.133	-	-	1.100	2.000	0.717	-	-	-	-	5.950
Running Costs	5.516	5.316	0.200	3.6%																	
Unidentified QIPP																					
TOTAL CCG NET EXPENDITURE	433.891	433.891	0.000	0.0%	(0.500)	(1.100)	-	(0.500)	(3.850)	(5.950)	2.133	-	-	1.100	2.000	0.717	-	-	-	-	5.950
IN YEAR UNDERSPEND / (DEFICIT)	3.150	3.150	0.000	0.0%																	
CUMULATIVE UNDERSPEND / (DEFICIT)	13.178	13.178	0.000	0.0%																	

The key mitigations are as follows:

- Utilisation of Contingency
- Further extension to QIPP
- Delayed or reduce non recurrent spend
- Application of Black Country CCG Risk share arrangement.

In summary the CCG is reporting.

	£m Surplus(deficit)	
Most Likely	£13.178	No risks or mitigations, <b>achieves</b> control total
Best Case	£19.128	Control total and mitigations achieved, risks do not materialise <b>achieves</b> control total

Risk adjusted case	£13.178	Adjusted risks and mitigations occur. CCG <b>achieves</b> control total
Worst Case	£7.228	Adjusted risks and no mitigations occur. CCG <b>misses</b> revised control total

## 5. CONTRACT AND PROCUREMENT REPORT

The Committee received the latest overview of contracts and procurement activities. There were no significant changes to the procurement plan to note.

## 6. RISK REPORT

The Committee received and considered an overview of the risk profile including Corporate and Committee level risks.

## 7. PRIMARY CARE – FINANCE POSITION AS AT MONTH 3, JUNE 2019

The Committee received and noted this report for information which is considered at the Primary Care Commissioning Committee. It will be brought to this Committee on a quarterly basis.

## 8. OTHER RISK

Breaches in performance and increases in activity will result in an increase in costs to the CCG. Performance must be monitored and managed effectively to ensure providers are meeting the local and national agreed targets and are being managed to operate within the CCG's financial constraints. Activity and Finance performance is discussed monthly through the Finance and Performance Committee Meetings to provide members with updates and assurance of delivery against plans.

A decline in performance can directly affect patient care across the local healthcare economy. It is therefore imperative to ensure that quality of care is maintained and risks mitigated to ensure patient care is not impacted. Performance is monitored monthly through the Finance and Performance Committee and through the following committees; including Clinical Quality Review Meetings, Contract Review Meetings and Quality and Safety Committee.

## 9. RECOMMENDATIONS

- **Receive** and **note** the information provided in this report.

**Name: Lesley Sawrey**

**Job Title: Deputy CFO**

**Date: 27.8.19**

# Wolverhampton CCG Performance against the NHS Constitution Standards

## Finance and Performance (F&P) 2019/20 - Wolverhampton CCG (06a)

Current Month:

Jun-19

(based on if indicator required to be either Higher or Lower than target/threshold)



Improved Performance from previous month



Decline in Performance from previous month



Performance has remained the same

19/20 Ref	Description	Data Level	Frequency	Period of Data	Year End Target / Threshold	Latest RAG	Compared to Previous Mth	Compared to Last 3 Rolling Mths	Year To Date (YTD)	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	YTD	
EB3	Referral to Treatment (18 Wks)	CCG Provisional		Jun	92.0%	87.35%	↓	↓	88.38%														
		CCG Validated		Jun	92.0%	87.35%	↓	↓	88.38%														
		RWT	Mth	Jun	92.0%	85.90%	↓	↓	87.00%														
		Black Country STP		Jun	92.0%	90.38%	↓	↓	92.95%														
	National		Jun	92.0%	86.29%	↓	↓	86.54%															
EB4	Diagnostic Waits (6wks)	CCG Provisional		Jun	1.0%	0.68%	↑	↓	0.77%														
		CCG Validated		Jun	1.0%	0.89%	↑	↓	0.80%														
		RWT	Mth	Jun	1.0%	0.88%	↑	↓	0.79%														
		Black Country STP		Jun	1.0%	1.44%	↑	↑	1.74%														
	National		Jun	1.0%	3.76%	↑	↑	3.81%															
EB5	A&E (Waits Within 4hrs)	CCG Provisional		No Data	95.0%	-																	
		CCG Validated		No Data	95.0%	-																	
		RWT	Mth	Jul	95.0%	89.88%	↑	↑	88.20%														
		Black Country STP		Jul	95.0%	86.78%	↑	↑	84.59%														
	National		Jul	95.0%	77.90%	↑	↓	79.65%															
EB6	Two Week Waits (2WW)	CCG Provisional		No Data	93.0%	-																	
		CCG Validated		Jun	93.0%	70.04%	↓	↓	69.97%														
		RWT	Mth	Jun	93.0%	73.38%	↓	↑	72.13%														
		Black Country STP		Jun	93.0%	90.26%	↓	↑	89.35%														
	National		Jun	93.0%	90.06%	↓	↓	90.25%															
EB7	Two Week Waits (2WW) Breast Symptoms	CCG Provisional		No Data	93.0%	-																	
		CCG Validated		Jun	93.0%	5.75%	↓	↓	6.40%														
		RWT	Mth	Jun	93.0%	3.82%	↑	↑	2.04%														
		Black Country STP		Jun	93.0%	73.44%	↑	↑	72.07%														
	National		Jun	93.0%	78.04%	↓	↑	77.46%															
EB8	31 Day Cancer Treatment	CCG Provisional		No Data	96.0%	-																	
		CCG Validated		Jun	96.0%	91.59%	↑	↑	89.64%														
		RWT	Mth	Jun	96.0%	84.43%	↓	↓	86.24%														
		Black Country STP		Jun	96.0%	94.27%	↑	↑	93.96%														
	National		Jun	96.0%	95.99%	↑	↓	96.10%															
EB9	31 Day Cancer Treatment (Surgery)	CCG Provisional		No Data	94.0%	-																	
		CCG Validated		Jun	94.0%	76.19%	↓	↑	82.61%														
		RWT	Mth	Jun	94.0%	72.50%	↑	↑	72.45%														
		Black Country STP		Jun	94.0%	86.21%	↓	↓	89.53%														
	National		Jun	94.0%	91.23%	↓	↓	91.55%															
EB10	31 Day Cancer Treatment (anti cancer drug)	CCG Provisional		No Data	98.0%	-																	
		CCG Validated		Jun	98.0%	100.00%	↔	↔	100.00%														
		RWT	Mth	Jun	98.0%	98.08%	↓	↓	99.32%														
		Black Country STP		Jun	98.0%	100.00%	↑	↑	98.97%														
	National		Jun	98.0%	99.25%	↓	↑	99.17%															
EB11	31 Day Cancer Treatment (Radiotherapy)	CCG Provisional		No Data	94.0%	-																	
		CCG Validated		Jun	94.0%	95.83%	↑	↑	87.83%														
		RWT	Mth	Jun	94.0%	94.85%	↑	↑	89.47%														
		Black Country STP		Jun	94.0%	96.03%	↑	↑	80.75%														
	National		Jun	94.0%	96.69%	↑	↑	96.56%															
EB12	62 Day Cancer Treatment 1st Definitive Treatment	CCG Provisional		No Data	85.2%	-																	
		CCG Validated		Jun	85.2%	58.97%	↓	↓	65.10%														
		RWT	Mth	Jun	85.2%	55.69%	↓	↓	59.51%														
		Black Country STP		Jun	85.2%	75.21%	↓	↓	75.94%														
	National		Jun	85.2%	76.68%	↓	↓	77.85%															

Current performance is as published validated national data for Wolverhampton CCG unless indicated otherwise, i.e. only available at Trust level. Validated published CCG data is currently only available for April 19 for Mental Health Indicators.

19/20 Ref	Description	Data Level	Frequency	Period of Data	Year End Target / Threshold	Latest RAG	Compared to Previous Mth	Compared to Last 3 Rolling Mths	Year To Date (YTD)	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	YTD	
EB13	62 Day Cancer Treatment (NHS Screening)	CCG Provisional		No Data	90.0%	-			-														
		CCG Validated		Jun	90.0%	80.00%	↑	↓	71.43%														
		RWT	Mth	Jun	90.0%	73.33%	↓	↓	77.69%														
		Black Country STP		Jun	90.0%	87.18%	↓	↓	90.63%														
		National		Jun	90.0%	85.10%	↓	↓	87.43%														
EB14	62 Day Cancer Treatment (Consultant Upgrade)	CCG Provisional		No Data	0.0%	-			-														
		CCG Validated		Jun	0.0%	72.00%	↑	↓	75.38%														
		RWT	Mth	Jun	0.0%	66.67%	↓	↓	73.51%														
		Black Country STP		Jun	0.0%	80.71%	↑	↓	80.92%														
		National		Jun	0.0%	81.42%	↓	↓	82.83%														
EB18	52 Week Waiters (RTT)	CCG Provisional		Jun	0	0	→	→	0														
		CCG Validated		Jun	0	0	→	→	0														
		RWT	Mth	May	0	0	→	→	0														
		Black Country STP		Jun	0	4	↓	↓	9														
		National		Jun	0	1117	↓	↓	3217														
EH1	IAPT Programme: Treated within 6 wks	CCG Provisional		No Data	75.0%	-			-														
		CCG Validated		Apr	75.0%	84.38%	↑	↑	84.38%														
		BCPFT	Mth	No Data	75.0%	-	↑	↑	-														
		Black Country STP		No Data	75.0%	-	↑	↑	-														
		National		No Data	75.0%	-	↑	↑	-														
EH2	IAPT Programme Referral to Treatment (18wks)	CCG Provisional		No Data	95.0%	-			-														
		CCG Validated		Apr	95.0%	96.88%	↑	↑	96.88%														
		BCPFT	Mth	No Data	95.0%	-	↑	↑	-														
		Black Country STP		No Data	95.0%	-	↑	↑	-														
		National		No Data	95.0%	-	↑	↑	-														
EH4	EIP 1st Episode (within 2 wks)	CCG Provisional		No Data	57.1%	80.00%	↑	↓	76.92%														
		CCG Validated		Jun	57.1%	66.67%	→	↓	75.00%														
		BCPFT	Mth	Jun	57.1%	40.00%	↓	↓	53.33%														
		Black Country STP		Jun	57.1%	58.33%	↓	↑	51.35%														
		National		Jun	57.1%	76.54%	↓	↑	75.55%														
EAS4	Zero Tolerance methicillin-resistant Staphylococcus aureus	CCG Provisional		No Data	0.0%	-			-														
		CCG Validated		Jul	0	0	↑	→	1														
		RWT	Mth	Jul	0	0	→	→	0														
		Black Country STP		Jul	0	0	→	→	0														
		National		No Data	0	-			-														
EAS5	Minimise rates of Clostridium Difficile	CCG Provisional		No Data	4 per Mth (48 Total)	-			-														
		CCG Validated		Jul	4 per Mth (48 Total)	3	↑	↓	13														
		RWT	Mth	Jul	48 Total - Seasonal Variation	1	↑	↓	7														
		Black Country STP		Jul	288 Total - Seasonal Variation	16	↑	↑	90														
		National		No Data	TBC	-			-														
EB55	12 hr Trolley Waits	CCG Provisional		No Data	0	-			-														
		CCG Validated		No Data	0	-			-														
		RWT	Mth	Jul	0	0	↑	↑	4														
		Black Country STP		No Data	0	-			-														
		National		No Data	0	-			-														
EB56	No urgent operation should be cancelled for a second time	CCG Provisional		No Data	0	-			-														
		CCG Validated		No Data	0	-			-														
		RWT	Mth	Jun	0	0	→	→	0														
		Black Country STP		No Data	0	-			-														
		National		No Data	0	-			-														

19/20 Ref	Description	Data Level	Frequency	Period of Data	Year End Target / Threshold	Latest RAG	Compared to Previous Mth	Compared to Last 3 Rolling Mths	Year To Date (YTD)	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	YTD	
EBS3	CPA Follow Up within 7 days from Discharge	CCG Provisional		No Data	95%	-																	
		CCG Validated		Jun	95%	98.96%	↑		98.96%														
		BCPFT	Qtr	Jun	95%	98.21%	↑		98.21%														
		Black Country STP		Jun	95%	97.30%	↑		97.30%														
		National		Jun	95%	95.05%	↓		95.05%														
EH10	CYP Eating Disorder (Urgent within 1 wk) - 12 Rolling Mths	CCG Provisional		Jun	95%	100.00%	✓		100.00%														
		CCG Validated		Jun	95%	100.00%	✓		100.00%														
		BCPFT	Qtr	Jun	95%	100.00%	✓		100.00%														
		Black Country STP		Jun	95%	91.30%	✓		91.30%														
		National		Jun	95%	77.67%	✓		77.67%														
EH11	CYP Eating Disorder (Routine within 4 wks) - 12 Rolling Mths	CCG Provisional		Jun	95%	90.00%	✓		90.00%														
		CCG Validated		Jun	95%	90.00%	✓		90.00%														
		BCPFT	Qtr	Jun	95%	91.30%	✓		91.30%														
		Black Country STP		Jun	95%	90.48%	✓		90.48%														
		National		Jun	95%	83.43%	✓		83.43%														
EH13	Physical Health Checks for People with a Severe Mental Illness	CCG Provisional		No Data	60%	-	✓																
		CCG Validated		Jun	60%	39.27%	✓		39.27%														
		Primary Care	Qtr	No Data	60%	-	✓																
		Black Country STP		No Data	60%	-	✓																
		National		No Data	60%	-	✓																
EA3	IAPT Roll Out Access Rate	CCG Provisional		No Data	22%	-	✓																
		CCG Validated		Apr	22% Full Yr (1.83% per mth)	1.75%	↓		1.75%														
		BCPFT	Mth	No Data	TBC	-	✓																
		Black Country STP		No Data	TBC	-	✓																
		National		No Data	TBC	-	✓																