WOLVERHAMPTON CCG

GOVERNING BODY – 12 November 2019

Agenda item 12

Title of Report:	Summary – Wolverhampton Clinical Commissioning Group (WCCG) Finance and Performance Committee- 24 th September 2019
Report of:	Tony Gallagher – Chief Finance Officer
Contact:	Tony Gallagher – Chief Finance Officer
Governing Body Action Required:	□ Decision☑ Assurance
Purpose of Report:	To provide an update of the WCCG Finance and Performance Committee to the Governing Body of the WCCG.
Recommendations:	Receive and note the information provided in this report.
Public or Private:	This Report is intended for the public domain.
Relevance to CCG Priority:	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.
Relevance to Board Assurance Framework (BAF):	
Domain 1: A Well Led Organisation	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

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	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.
Domain2: Performance – delivery of commitments and improved outcomes	The CCG must meet a number of constitutional, national and locally set performance targets.
Domain 3: Financial Management	The CCG aims to generate financial stability in its position, managing budgets and expenditure to commission high quality, value for money services. The CCG must produce a medium to long term plan that allows it to meet its objectives in the future.

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1. FINANCE POSITION

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

Financial Targets				
Statutory Duties	Target	Out turn	Variance o(u)	RAG
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	£451.205m	£438.027m	(£13.178m)	G
Revenue Administration Resource not exceeded	£5.516m	£5.316m	(£0.2m)	G

Non Statuory Duties	YTD Target	YTD Actual	Variance o(u)	RAG
Maximum closing cash balance	£383k	£30k	(£353k)	G
Maximum closing cash balance %	1.25%	0.10%	(1.15%)	G
BPPC NHS by No. Invoices (cum)	95%	99%	(4%)	G
BPPC non-NHS by No. Invoices (cum)	95%	99%	(4%)	G
QIPP	£16.686m	£16.686m	Nil	G
Programme Cost *	£179,589k	£180,858k	£1,269k	G
Reserves *	£1,188k	£0k	(£1,188k)	G
Running Cost *	£2,298k	£2,216k	(£82k)	G

BPPC NHS by Value (cum)	95%	100%	(5%)	G
BPPC non NHS by Value (cum)	95%	99%	(4%)	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) M4 data requires further analysis.
- The CCG control total of £13.178m includes £3.15m of additional surplus as required by NHSEI.

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The CCG is reporting achieving its revised QIPP target of £16.686m.

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

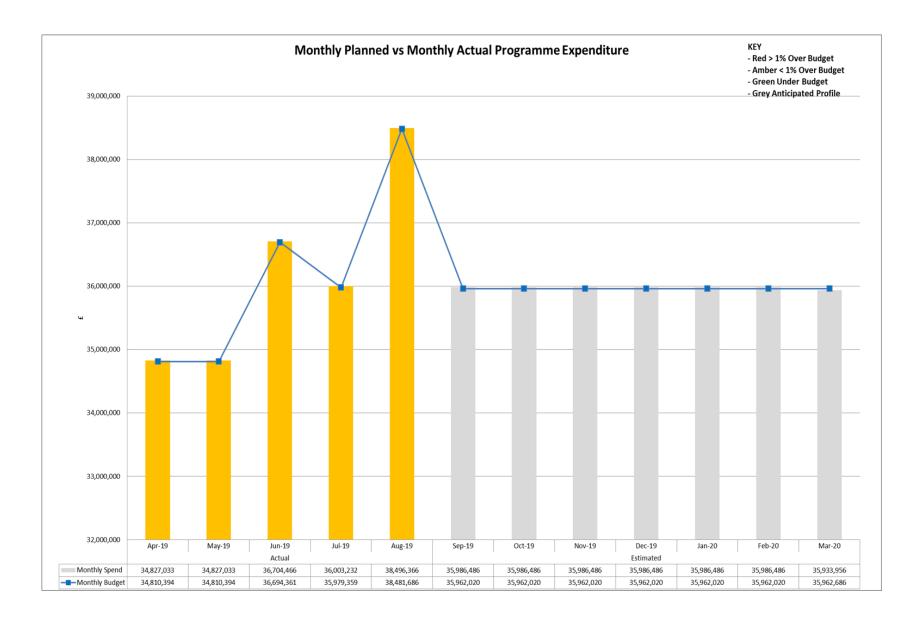
				Y	TD Performance Mo	5					
	Annual Budget £'000	Ytd Budget £'000	Ytd Actual £'000	Variance £'000 o/(u)	Var% o(u)	FOT Actual £'000	FOT Variance £'000	Var% o(u)	In Month Movement Trend	In Month Movement £'000 o(u)	Previous Month FOT Variance £'000 o/(u)
Acute Services	213,565	88,985	89,521	535	0.6%	215,489	1,925	0.9%	0	0	1,925
Mental Health Services	42,554	17,731	17,831	100	0.6%	42,637	83	0.2%		0	83
Community Services	45,416	18,923	18,815	(109)	(0.6%)	45,147	(268)	(0.6%)		0	(268)
Continuing Care	16,092	6,705	6,591	(114)	(1.7%)	15,911	(181)	(1.1%)		0	(181)
Primary Care Services	58,702	24,459	24,599	140	0.6%	59,091	389	0.7%		0	389
Delegated Primary Care	37,573	15,655	15,894	238	1.5%	37,573	0	0.0%		0	0
Other Programme	15,759	7,130	7,609	479	6.7%	16,144	385	2.4%		0	385
Total Programme	429,661	179,589	180,858	1,269	0.7%	431,993	2,332	0.5%		0	2,332
Running Costs	5,516	2,298	2,216	(82)	(3.6%)	5,316	(200)	(3.6%)		(200)	0
Reserves	2,850	1,188	0	(1,188)	(100.0%)	718	(2,132)	(74.8%)		0	(2,132)
Total Mandate	438,027	183,074	183,074	0	0.0%	438,027	0	0.0%		(200)	200
Target Surplus	13,178	5,491	0	(5,491)	(100.0%)	0	(13,178)	(100.0%)		0	(13,178)
Total	451,205	188,565	183,074	(5,491)	(2.9%)	438,027	(13,178)	(2.9%)		(200)	(13,178)

- The Acute over performance relates in the main to RWT. Having received Month 4 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 M5 non ISFE demonstrates the CCG achieved its plan, achieving 1.0% recurrent underlying surplus after adjusting for Co Commissioning

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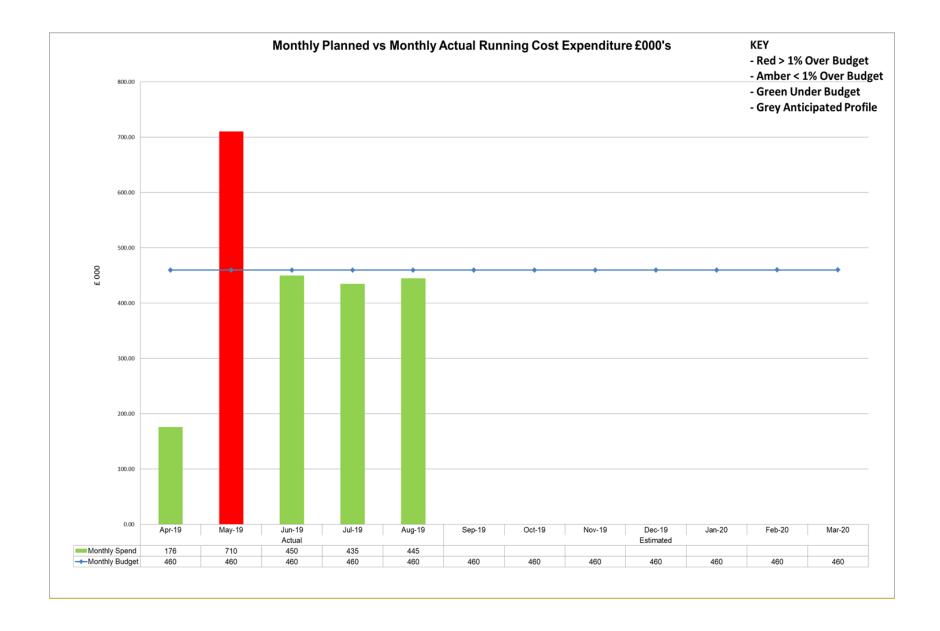
		Forecast Net	Expenditure			Remove Non I	Recurrent Items	;	Part/Full Year Effects			ear Effects		
CCG UNDERLYING POSITION	Plan	Actual	Variance	Variance	NR Allocations & Matched Expenditure	NR QIPP Benefit	Contingency	Other NR Spend / Income			dello	Other		2019/20 Underlying Position
	£m	£m	£m	%	£m	£m	£m	£m			£m	£m		£m
REVENUE RESOURCE LIMIT (IN YEAR)	441.177				(14.786)]								426.391
Acute Services	213.565	215.489	(1.925)	(0.9%)	(5.659)	1.110		(2.926)					ĺ	208.014
Mental Health Services	42.554	42.637	(0.083)	(0.2%)	(2.134)	-		(0.220)						40.283
Community Health Services	45.416	45.147	0.268	0.6%	-	-		0.159						45.306
Continuing Care Services	16.092	15.911	0.181	1.1%	(0.020)	-		0.022						15.913
Primary Care Services	58.702	59.091	(0.389)	(0.7%)	(4.826)	0.500		0.191						54.956
Primary Care Co-Commissioning	38.145	38.145	-	0.0%	-	-	(0.191)	0.111						38.065
Other Programme Services	18.037	16.290	1.747	9.7%	(2.147)	1.540	(2.132)	1.088						14.639
Commissioning Services Total	432.511	432.711	(0.200)	(0.0%)	(14.786)	3.150	(2.323)	(1.576)			-	-		417.176
Running Costs	5.516	5.316	0.200	3.6%	-	-								5.316
TOTAL CCG NET EXPENDITURE	438.027	438.027	0.000	0.0%	(14.786)	3.150	(2.323)	(1.576)			-	-		422.492
IN YEAR UNDERSPEND / (DEFICIT)	3.150	3.150	0.000	0.0%						Underlyir	ng Underspend	/ (Deficit]		3.899
											% RRL			0.9 %

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• 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.

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DELEGATED PRIMARY CARE

- The Delegated Primary Care allocation for 2019/20 as at M5 is £38.145m. At M5 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 5:

	YTD budget £'000	YTD spend £'000	YTD Variance £'000 o/(u)	Annual Budget £'000	FOT £'000	Variance £'000 o/(u)		In Month Movement £'000 o/(u)	Previous Month FOT Variance £'000 o/(u)
General Practice GMS	9,384	9,384	0	23,842	23,842	0		0	0
General Practice PMS	605	605	(0)	2,895	2,895	0		0	0
Other List Based Services APMS incl	1,172	1,172	0	1,531	1,531	0		0	0
Premises	997	997	0	2,505	2,505	0		0	0
Premises Other	35	35	0	65	65	0		0	0
Enhanced services Delegated	790	790	0	758	758	0		0	0
QOF	1,530	1,530	0	3,751	3,751	0		0	0
Other GP Services	1,143	1,381	238	2,226	2,226	0		0	0
Delegated Contingency reserve	80	0	(80)	191	191	0	0	0	0
Delegated Primary Care 1% reserve	159	0	(159)	381	381	0	0	0	0
Total	15,894	15,894	0	38,145	38,145	0		0	0

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.

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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:
 - o Prescribing £500k
 - o Other Programme Services £1.54m
 - Acute service Independent/Commercial sector £1.1m

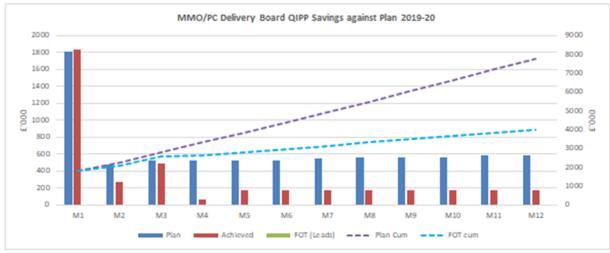
The above categories represent the areas under higher levels of scrutiny by NHSEI.

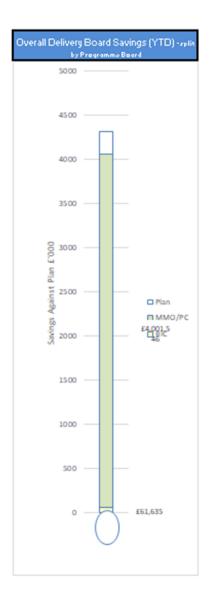
- The plan assumes full delivery of QIPP on a recurrent basis (with the exception of the additional QIPP required to support the revised control total) as any non-recurrent QIPP will potentially be carried forward into future years.
- The CCG is formally reporting QIPP being delivered as the CCG is achieving its financial metrics.
- Within BIC the key points are as follows:
 - o At M5 QIPP delivery is behind plan ytd and unlikely to deliver the annual taget
 - o The increase in QIPP target in M7 is due to the decommissioning of Blakenhall
 - Work is ongoing in relation to QIPP scheme delivery related to acute spells. Such schemes have targetted specific HRGs. However, the montioring 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:
 - o At M5 QIPP delivery is behind plan ytd.
 - Prescribing has yet to report their QIPP position due to timing of data received to support the QIPP.
 Prescribing is confident its QIPP target will be delivered.
 - The increase in QIPP target in M7 is due to the decommissioning of Blakenhall
- The table below details the QIPP programme and the level of savings assigned to each Programme Board and forms the basis of monitoring for 19/20.

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QIPP Programme Delivery Board







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3. STATEMENT OF FINANCIAL POSITION

The Statement of Financial Position (SoFP) as at 31st August 2019 is shown below:

			Change
	31 August '19	31 July '19	In Month
	£'000	£'000	£'000
Non Current Assets			
Assets	0	0	0
Accumulated Depreciation	0	o	o o
Accumulated Depresiation	0	0	
Current Assets			
Trade and Other Receivables	1,723	3,000	-1,277
Cash and Cash Equivalents	30	52	-22
	1,753	3,052	
Total Assets	1,753	3,052	
Current Liabilities			
Trade and Other Payables	-43,404	-40,005	-3,399
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-43,404	-40,005	
Total Assets less Current Liabilities	-41,652	-36,953	
TOTAL ASSETS EMPLOYED	-41,652	-36,953	
Financed by: TAXPAYERS EQUITY			
IAAI AILIG EQUIT			
General Fund	41,652	36,953	4,698
TOTAL	41,652	36,953	
	,	22,300	

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Key points to note from the SoFP are:

- The cash target for month 5 has been achieved.
- The CCG is maintaining its high performance against the BPPC target of paying at least 95% of invoices within 30 days, (98.6% for non-NHS invoices and 99.1% for NHS invoices);

PERFORMANCE

Exception highlights were as follows;

3.1. Royal Wolverhampton NHS Trust (RWT)

3.1.1. Elective Care (EB3 – Referral to Treatment Time (RTT), EBS4 - 52 Week Waiters, EB4 – 6 Weeks Diagnostic from Referral)

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 (July 19):

- WCCG 86.4%, England 85.8%, STP 90.0%
- 92% WCCG patients started treatment within 21.6 weeks at any provider in England against the standard of 18 weeks (England was 23).
- There are no WCCG patients waiting 52+ weeks to start treatment.
- Specialities with the longest waiting times are Ophthalmology, Dermatology, Neurology and General Surgery.
- The CCG is in the final stages of agreeing a Recovery Action Plan (RAP) with the Trust to support recovery of Trust performance which will, in turn, improve the performance of the CCG.

The RWT SPQR shows a decrease in diagnostic performance for August and is under standard for the first time since January. Early indications are that this is due to an increase in Endoscopy referrals and will be raised for further discussion with the Trust at September CRM

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.

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- 88.4% of A&E attendances were admitted, transferred or discharged within 4 hours from arrival in August.
- The Trust was ranked at 46th out of 122 Trusts in August, 10 Trusts achieved the national standard of 95%.
- Performance remains challenged across the country with England reported on NHS Stats at 86.5%* and the Black Country STP at 84.9%.
- Delayed Transfer of Care rates remain low at 1.32% (excluding Social Care) 3.23% (total including Social Care) for July indicating Trust is managing patient flow.
- Ambulance conveyances in to the Trust are under discussion at AEDB together with the triaging of patients from ED to the Urgent Care Centre.
- 70 ambulances breached the 30-60 minute ambulance handover target during August and 3 ambulances breached the >60 minutes.
- The 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 was one breach of the 12 hr standard in August bringing the total year to date to 5.
- There has been an increase in conveyances from the Strategic Cell and the Trust are seeing the ripple effect of significant issues in areas bordering on the STP such as Worcestershire where performance was reported at 78% with 50 patients breaching 12 hr standard.

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:

- > July nationally published performance is 7.2% for the CCG and 5.6% for RWT.
- > STP performance is 69.8% and England is 82.4%
- CCG is reliant on situation at RWT which has seen a 10% increase of breast referrals over the past 2 years.
- RWT is currently (18/09/19) booking new referrals at day 51
- Neither the CCG nor Trust will see performance return to standard until the backlog has reduced.

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- Implementation of STP Breast diversion scheme from July; practices where alternative provider (Dudley/Walsall) is within 3 miles of the practice were asked to discuss with patients the option to refer to Dudley or Walsall rather than RWT.
- From 9th September STP agreed diversion at source for RWT receiving referrals from practices in the scheme to refer directly to Walsall/Dudley.
- RWT's backlog position which has reduced from 539 at 1 July to 232 by 16 September.
- Breast Pain pathway commenced in August.
- Recovery is currently forecast for end Q3.

• All Cancer standards – issues and actions:

- > Remedial action plan is in place and reviewed monthly with revised improvement trajectories agreed.
- ➤ The CCG has achieved the 31 Day standard for the first time since October '18 at 96%
- > The CCG's performance is showing improvement across the majority of standards.
- > Low numbers impact on performance for the two standards not showing improvement;
 - EB10 31 days (drugs) 28/29 (96.55%)
 - EB13 62 days referral from screening service 10/13 (76.9%)
- > RAP anticipates return to 62 day performance by November 2019
- > Impact of delays on the 2WW cancer pathways (in particular Breast referrals) will start to effect performance against the 31 and 62 day standards.

> .

Cancer performance data for July 19

Ref	Indicator	Standard	RWT	wccg
EB6	2 Week Wait (2WW)	93%	73.38%	77.85%
EB7	2 Week Wait (2WW) Breast Symptoms)	93%	3.82%	7.21%
EB8	31 Day (1st Treatment)	96%	89.61%	96.03%
EB9	31 Day (Surgery)	94%	79.59%	87.50%
EB10	31 Day (anti-cancer drug)	98%	100%	96.55%
EB11	31 Day (radiotherapy)	94%	94.33%	100%
EB12	62 Day (1st Treatment)	85%	55.69%	69.39%
EB13	62 Day (Screening)	90%	71.74%	76.92%
EB14	62 Day (Consultant Upgrade)	No Standard	73.53%	78.85%

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

3.2.1. Mental Health

3.2.2. E.H.11: CYP Eating Disorders (Routine within 4 weeks)

- Exception reports are provided for each patient breaching the standard which shows that the running theme is that of appointments cancelled due to patient choice. The Trust does reschedule the appointments but this will be then >4 weeks.
- Low numbers (18/20 on a rolling 12 month basis) affect performance against the national standard of 95%.
- 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.

3.2.3. E.A.3 - IAPT - People who have entered treatment as a proportion of people with anxiety or depression (local prevalence).

- Performance is assessed against a quarterly performance target of 4.75% Q1-Q3 and 5.5% Q4
- NHS England published figures are based on a rolling quarter and confirm the June19 performance as 5.46% and above threshold of 4.75% for Q1.
- 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.

3.2.4. E.H.13 – Physical Health Checks for People with a Severe Mental Illness

- Q1performance achieved 39.3% against a planned trajectory of 45%.
- CCG is currently under the planned activity and this has been escalated to primary care colleagues.
- The CCG has included SMI PHC in QOF+ for 2019/20.
- Performance is assessed on a rolling 12 month basis.
- National requirement to achieve 60% in 2019/20 which will be assessed based on March 2020 position.

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4. RISK and MITIGATION

The CCG was required to resubmit a plan which demonstrates £6.3m risk which is currently fully mitigated based on the assumption that the Black Country CCG Risk share arrangements 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

		Forecast Ne	Expenditure			R	ISKS (enter neg	ative values on	y)					MITIGATIONS	S (enter positiv	e values only)			
CCG RISKS & MITIGATIONS	Plan	Actual	Variance	Variance	Contract	ddÖ	Rerformance Issues	Prescribing	other	TOTAL REKS	Contingency Held	Cort ract Reserves	Investments Urcommitted	Further QIPP Extensions	Non-Recurrent Messures	Delay / Reduce Investment Plans	Other Mitigations	Potential Funding	TOTAL
	£m	£m	£m	%	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m		£m	£m
REVENUE RESOURCE LIMIT (IN YEAR) REVENUE RESOURCE LIMIT (CUMULATIVE)	437.041 447.069									,									
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 UN DERSPEND / (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

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In summary the CCG is reporting.

	£m Surplus(deficit)	
Most Likely	£13.178	No risks or mitigations, achieves control total
Best Case	£19.128	Control total and mitigations achieved, risks do not materialise achieves control total
Risk adjusted case	£13.178	Adjusted risks and mitigations occur. CCG achieves control total
Worst Case	£7.228	Adjusted risks and no mitigations occur. CCG misses 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. Devolvement of Mental Health Non-Contracted Activity (NCA) Budget to Black Country Partnership NHS Foundation Trust

The Committee noted the contents of the report and supported the proposal to devolve the budget to the Trust to support transformation across the system by providing positive incentives to manage patient flow to avoid costly out of area placements.

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.

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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**

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

Name: Lesley Sawrey

Job Title: Deputy Chief Finance Officer

Date: 25th September 2019

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Wolverhampton CCG Performance against the NHS Constitution Standards

Finance and Performance (F&P) 2019/20 - Wolverhampton CCG (06a) Jul-19 (based on if indicator required to be either Higher or Lower than target/threshold) Month: Improved Performance from previous month 1 \Rightarrow Performance has remained the same Year End Target / Threshold Compared to Last Period of Data 3 Rolling Mths Compared to **Previous Mth** To Date 19/20 Ref atest RAG Description Level Apr May Jun July Aug Sept Oct Nov Dec Jan Feb Mar CCG Provisional 86.44% 87.88% Jul 92.0% Ŷ Ţ CCG Validated Jul 92.0% 86.45% 87.89% FB3 Referral to Treatment (18 Wks) RW/T Mth hil 92.0% 85.07% 86.50% Black Country STP Jul 92.0% 89.95% 1 92.16% National Jul 92.0% 86.35% 85.78% Û Û 0.77% CCG Provisional Jul 1.0% 0.68% T CCG Validated Jul 1.0% 0.68% Û 0.77% EB4 Diagnostic Waits (6wks) RWT Mth Jul 1.0% 0.64% ŵ T 0.75% Black Country STP 0.66% ŵ 1 1.47% 1.0% National Jul 1.0% 3.74% 3.52% CCG Provisional No Data 95.0% CCG Validated No Data 95.0% Ŷ A&E (Waits Within 4hrs) RWT 95.0% Aug 1 Black Country STP Aug 95.0% 84.95% 1 84.66% National 95.0% 79.65% 77.90% CCG Provisional No Data 93.0% CCG Validated Jul 93.0% 77.85% 1 72.01% û Two Week Waits (2WW) RWT Jul 93.0% 77.62% Û 1 73.57% Black Country STP Jul 93.0% 90.40% Û 89.64% 1 National Jul 93.0% 90.91% 90.43% CCG Provisional No Data 93.0% CCG Validated 93.0% 7.21% 6.62% 1 1 Two Week Waits (2WW) Breast EB7 RWT Jul 93.0% 1 1 Mth 5.56% 2.90% Symptoms Black Country STP 93.0% 69.84% 71.53% Jul National Jul 93.0% 82.42% 78.69% CCG Provisional No Data 96.0% 96.03% CCG Validated 96.0% 1 1 91.38% Jul Ť EB8 31 Day Cancer Treatment RWT Jul 96.0% 89.61% 1 Mth 87.21% 1 Black Country STP Jul 96.0% 95.48% 1 94.35% National Jul 96.0% 96.49% 96.20% CCG Provisional No Data 94.0% 87.50% 1 1 84.29% CCG Validated 94.0% Jul FB9 31 Day Cancer Treatment (Surgery) RWT #N/A Jul 94.0% 79.59% Û 1 74.83% Black Country STP Jul 94.0% 92.45% 1 1 90.38% National Jul 94.0% 92.23% 91.73% CCG Provisional No Data 98.0% 96.55% 99.06% CCG Validated 98.0% Jul 31 Day Cancer Treatment (anti cancer FB10 RWT Mth Jul 98.0% 100.00% Û Û 99.50% 1 Black Country STP Jul 98.0% 96.84% T 98.45% National 98.0% 99.17% 99.17% CCG Provisional No Data 94.0% CCG Validated Jul 94.0% 100.00% Û 90.85% 31 Day Cancer Treatment FR11 RW/T Mth hil 94 0% 94.33% 90.74% į Black Country STP Jul 94.0% 94.97% 84.00% National 97.10% 96.71% CCG Provisional No Data 85.2% CCG Validated Jul 85.2% 69.39% Û 66.16% 62 Day Cancer Treatment 1st FR12 RWT Mth 85.2% 66.39% Û 1 61.54% ŵ 1 Black Country STP Jul 85.2% 78.06% 76.43% National 85.2% 77.78%

Current performance is as published validated national data for Wolverhampton CCG unless indicated otherwise, i.e. only available at Trust level.

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	Jun	July	Aug	Oct	Nov	Dec	Jan	Mar	YTD
EB13	62 Day Cancer Treatment (NHS Screening)	CCG Provisional CCG Validated RWT Black Country STP National	Mth	No Data Jul Jul Jul Jul	90.0% 90.0% 90.0% 90.0% 90.0%	76.92% 71.74% 86.67% 85.54%	↓	1 1 1 1	73.17% 76.05% 89.60% 86.93%										
EB14	62 Day Cancer Treatment (Consultant Upgrade)	CCG Provisional CCG Validated RWT Black Country STP National	Mth	No Data Jul Jul Jul Jul	0.0% 0.0% 0.0% 0.0%	78.85% 73.53% 82.55% 83.31%	1 1 1	1	76.37% 73.51% 81.38% 82.96%										
EB18	52 Week Waiters (RTT)	CCG Provisional CCG Validated RWT Black Country STP National	Mth	Jul Jul Jul Jul	0 0 0 0	0 0 0 1 1119			0 0 0 10 4336									-	
EH1	IAPT Programme: Treated within 6 wks	CCG Provisional CCG Validated BCPFT Black Country STP National	Mth	No Data Jun	75.0% 75.0% 75.0% 75.0% 75.0%	87.88% - 86.36%	1	, î	85.15% 85.71%										
EH2	IAPT Programme Referral to Treatment (18wks)	CCG Provisional CCG Validated BCPFT Black Country STP National	Mth	No Data Jun No Data Jun No Data Jun No Data	95.0% 95.0% 95.0% 95.0% 95.0%	100.00%	1	, fr	98.02% 97.76%										
EH3	Number of ended referrals in the reporting period that received a course of treatment against the number of ended referrals in the reporting period that received a single treatment appointment.	CCG Provisional CCG Validated BCPFT Black Country STP National	Mth	No Data No Data No Data No Data No Data	0.0% 0.0% 0.0% 0.0% 0.0%	- - - -					- - - - -								
EH4	EIP 1st Episode (within 2 wks)	CCG Provisional CCG Validated BCPFT Black Country STP National	Mth	Jul Jul Jun Jul	57.1% 57.1% 57.1% 57.1% 57.1%	80.00% 80.00% 40.00% 66.67% 77.42%	1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1	76.92% 76.92% 53.33% 56.90% 76.06%										
EH9	CYP Access Rates	CCG Provisional CCG Validated BCPFT Black Country STP National	Mth	No Data Jun No Data Jun No Data	34% Full Yr 34% Full Yr 34% Full Yr 34% Full Yr 34% Full Yr	3.88%	1		13.75%										
EAS1	Dementia Diagnosis (65+)	CCG Provisional CCG Validated Primary Care Black Country STP National	Mth	No Data Jul No Data Aug No Data	71.4% 71.4% 71.4% 71.4% 71.4%	73.37%	1	•	72.81% 66.48%										
EAS2	IAPT Recovery Rate (Moving to Recovery)	CCG Provisional CCG Validated BCPFT Black Country STP National	Mth	No Data Jun No Data Jun No Data Jun No Data	50.0% 50.0% 50.0% 50.0% 50.0%	40.63%	1		48.45%										
EAS4	Zero Tolerance methicillin-resistant Staphylococcus aureus	CCG Provisional CCG Validated RWT Black Country STP National	Mth	No Data Aug Aug Aug No Data	0 0 0 0 0	0 0 0	** ** **	⇒	1 0 4										

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	Jun	ylnr	Aug	Sept	Nov	Dec	Jan	Mar	YTD
	EASS Minimise rates of Clostridium Difficile	CCG Provisional		No Data Aug	CCG: 48 Full Yr CCG: 48 Full Yr	1	•	•	16						_	<u> </u>			
EAS5		RWT	Mth	Aug	RWT: 40 Full Yr	0	\Rightarrow	1	6										
		Black Country STP		Aug	STP: 288 Full Year	6	•	1	101										
		National		No Data	TBC	-						—-				—			
		CCG Provisional		No Data	0	- 1	,	,				—-				—			\vdash
EBS5	12 hr Trolley Waits	CCG Validated	Mth	No Data	0	1	п		5							—			
LB33	12 III Hoffey Walts	RWT Black Country STP	IVICII	Aug No Data	0 0	1	•	•	5				_			—			
		National		No Data	0		•	•								—			
		CCG Provisional		No Data	0	- '										_			
	No urgent operation should be cancelled for a second time	CCG Validated		No Data	0	_ '	7	7								_			
EBS6		RWT	Mth	Jul	0	0	\Rightarrow	\Rightarrow	0							_			
		Black Country STP		No Data	0	- '	•	•											
		National		No Data	0	- '													
	CPA Follow Up within 7 days from Discharge	CCG Provisional		No Data	95%	- '													
		CCG Validated		Jun	95%	98.96%			98.96%										
EBS3		BCPFT	Qtr	Jun	95%	98.21%		•											
		Black Country STP		Jun	95%	97.30%	,	,	97.30%										
		National		Jun	95%	95.05%			95.05%										
		CCG Provisional		Jun	95%	100.00%	,	,	100.00%			—-				—			
FUAD	CYP Eating Disorder (Urgent within 1	CCG Validated	04-	Jun	95%	100.00%			100.00%	<u> </u>		—-				—			
EH10	wk) - 12 Rolling Mths	BCPFT Black Country STP	Qtr	Jun	95% 95%	100.00% 91.30%			91.30%							—		_	
		National		Jun Jun	95%	77.67%			77.67%	—-	_		—-			—	—-		
	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%		_					—			
EH11		BCPFT	Qtr	Jun	95%	91.30%					_					—			
		Black Country STP		Jun	95%	90.48%			90.48%							_			
		National		Jun	95%	83.43%			83.43%										
		CCG Provisional		No Data	60% by Yr End	-													
		CCG Validated		Jun	60% by Yr End	39.27%			39.27%										
EH13	Physical Health Checks for People with a Severe Mental Illness	Primary Care	Qtr	No Data	60% by Yr End	-										_			
	with a Severe Mental Inness	Black Country STP		No Data	60% by Yr End	-													
		National		No Data	60% by Yr End	-													
		CCG Provisional		No Data	22% Full Yr (1.83% per mth)	-													
		CCG Validated		Jun	22% Full Yr (1.83% per mth)	1.85%	\Rightarrow	1	5.46%							_			
EA3	IAPT Roll Out Access Rate	BCPFT	Mth	No Data	22% Full Yr (1.83% per mth)	-													
		Black Country STP		Jun	22% Full Yr (1.83% per mth) 22% Full Yr	7.36%	•	1	7.22%										
		National		No Data	(1.83% per mth)	-													Ш
		CCG Provisional		No Data	STP Wide Traj 978 by Yr End	-													
EH12	OoAPs - Out of Area Placements (STP target)	CCG Validated	Mth	Jun	978 by Yr End	275	•	1	990										
		Black Country STP		Jun	978 by Yr End	710	1		2225										
		National		No Data	STP Wide Traj 978 by Yr End	-													
		CCG Provisional		No Data	93%	-										—			П
F04	% of Children Waiting more than 18	CCG Validated	04	Jun	93%	100.00%			100.00%							_			
EO1	weeks for a Wheelchair	Black Country STP	Qtr	Jun	93%	95.79%			95.79%							_			
		National		No Data	93%	-					_		_	_			_		

19/20 Ref	Description	Data Level	Frequency	Period of Data	Year End Target / Threshold	Latest RAG	pared	<u>.</u>	Compared to Last 3 Rolling Mths	ear To [Apr	May	Alul.	Aug	Sept	Oct	Dec	Jan	Feb Mar	YTD
		CCG Provisional		No Data	14.3% Yr End															>
EK3	AHCs delivered by GPs for patients on	CCG Validated	Mth	Aug	14.3% Yr End	46.51%														
LKS	the Learning Disability Register	Black Country STP	IVICII	No Data	14.3% Yr End	-														
		National		No Data	14.3% Yr End	- '														
		CCG Provisional		No Data	320 Yr End	-		_												
EN1	Cumulative number of Personal	CCG Validated	Mth	Jun	320 Yr End	174		,												
EINT	Health Budgets (PHBs)	Black Country STP	IVIEN	No Data	320 Yr End	-	•													
		National		No Data	320 Yr End	- '	•	•												r [—]