

**WOLVERHAMPTON CCG**

**GOVERNING BODY**

**Agenda item 13**

<b>Title of Report:</b>	<b>Summary – Wolverhampton Clinical Commissioning Group (WCCG) Finance and Performance Committee- 28<sup>th</sup> January 2020</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	£453.191m	£4340.013m	(£13.178m)	G
Revenue Administration Resource not exceeded	£5.516m	£5.194m	(£0.322m)	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	£521k	£231k	(£290k)	G
Maximum closing cash balance %	1.25%	0.55%	(0.70%)	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 *	£324,438k	£326,754k	£2,317k	G
Reserves *	£2,076k	£0k	(£2,076k)	G
Running Cost *	£4,137k	£3,896k	(£241k)	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 an overspend.
- 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 M09							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	211,032	158,274	159,324	1,050	0.7%	212,348	1,317	0.6%	●	8	1,308
Mental Health Services	45,312	33,984	34,388	403	1.2%	45,917	604	1.3%	●	136	468
Community Services	45,624	34,218	33,868	(349)	(1.0%)	45,197	(427)	(0.9%)	●	150	(576)
Continuing Care	16,072	12,054	12,174	120	1.0%	16,362	290	1.8%	●	21	269
Primary Care Services	57,786	43,339	43,147	(192)	(0.4%)	57,618	(168)	(0.3%)	●	(267)	98
Delegated Primary Care	37,573	28,180	28,609	429	1.5%	37,573	0	0.0%	●	0	0
Other Programme	18,330	14,389	15,245	856	5.9%	19,232	902	4.9%	●	(49)	950
<b>Total Programme</b>	<b>431,729</b>	<b>324,438</b>	<b>326,754</b>	<b>2,317</b>	<b>0.7%</b>	<b>434,247</b>	<b>2,518</b>	<b>0.6%</b>	●	<b>0</b>	<b>2,518</b>
Running Costs	5,516	4,137	3,896	(241)	(5.8%)	5,194	(322)	(5.8%)	●	0	(322)
Reserves	2,768	2,076	0	(2,076)	(100.0%)	572	(2,196)	(79.3%)	●	0	(2,196)
<b>Total Mandate</b>	<b>440,013</b>	<b>330,650</b>	<b>330,650</b>	<b>(0)</b>	<b>(0.0%)</b>	<b>440,013</b>	<b>(0)</b>	<b>(0.0%)</b>	●	<b>0</b>	<b>(0)</b>
Target Surplus	13,178	9,883	0	(9,883)	(100.0%)	0	(13,178)	(100.0%)	●	0	(13,178)
<b>Total</b>	<b>453,191</b>	<b>340,534</b>	<b>330,650</b>	<b>(9,883)</b>	<b>(2.9%)</b>	<b>440,013</b>	<b>(13,178)</b>	<b>(2.9%)</b>	●	<b>0</b>	<b>(13,178)</b>

The Acute over performance relates in the main to RWT. Having received Month 8 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.

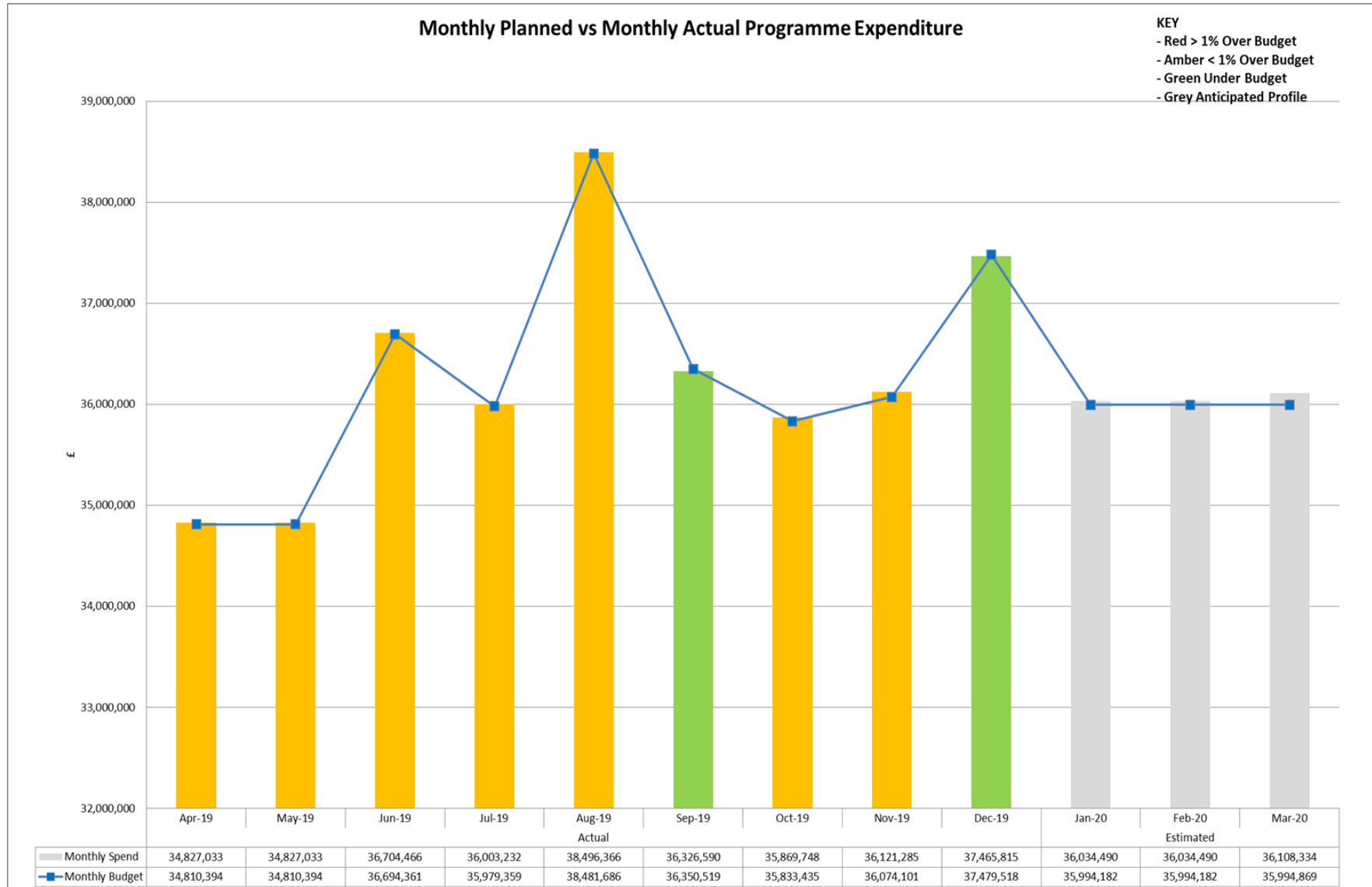
The level of over-performance faced by the CCG is potentially recurrent in nature and is mitigated through the utilisation of non-recurrent flexibilities. This could present a recurrent challenge for 20-21 of approximately £2-£2.5m which will need to be addressed in the financial plan.

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 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 M9 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 £m	Actual £m	Variance £m	Variance %	NR Allocations & Matched Expenditure £m	NR QJPP Benefit £m	Contingency £m	Other NR Spend / Income £m	QJPP £m	Other £m	
<b>REVENUE RESOURCE LIMIT (IN YEAR)</b>	<b>443.163</b>				<b>(16.771)</b>						<b>426.392</b>
Acute Services	211.032	212.348	(1.317)	(0.6%)	(3.081)	1.110		(2.455)			207.923
Mental Health Services	45.312	45.917	(0.604)	(1.3%)	(4.863)	-		0.010			41.064
Community Health Services	45.624	45.197	0.427	0.9%	(0.162)	-		0.796			45.831
Continuing Care Services	16.072	16.362	(0.290)	(1.8%)	(0.191)	-		0.212			16.384
Primary Care Services	57.786	57.618	0.168	0.3%	(3.766)	0.500		0.479			54.831
Primary Care Co-Commissioning	38.145	38.145	-	0.0%	-	-	(0.191)	(5.811)			32.143
Other Programme Services	20.526	19.232	1.294	6.3%	(4.663)	1.540	(2.132)	5.255			19.232
<b>Commissioning Services Total</b>	<b>434.497</b>	<b>434.819</b>	<b>(0.322)</b>	<b>(0.1%)</b>	<b>(16.726)</b>	<b>3.150</b>	<b>(2.323)</b>	<b>(1.513)</b>			<b>417.407</b>
Running Costs	5.516	5.194	0.322	5.8%	(0.055)	-					5.139
<b>TOTAL CCG NET EXPENDITURE</b>	<b>440.013</b>	<b>440.013</b>	<b>(0.000)</b>	<b>(0.0%)</b>	<b>(16.781)</b>	<b>3.150</b>	<b>(2.323)</b>	<b>(1.513)</b>			<b>422.546</b>
<b>IN YEAR UNDERSPEND / (DEFICIT)</b>	<b>3.150</b>	<b>3.150</b>	<b>0.000</b>	<b>0.0%</b>							<b>3.846</b>
											<b>0.9 %</b>



- The graph details the monthly and cumulative budgeted and actual expenditure in 2019/20.

Monthly Planned vs Monthly Actual Running Cost Expenditure £000's

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



## DELEGATED PRIMARY CARE

- The Delegated Primary Care allocation for 2019/20 as at M5 is £38.145m. At M9 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 9:

	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	16,832	16,832	0	22,521	22,521	0	●	0	0
General Practice PMS	1,089	1,089	(0)	1,452	1,452	0	●	0	0
Other List Based Services APMS incl	2,058	2,058	(0)	2,814	2,814	0	●	0	0
Premises	1,804	1,804	0	2,393	2,393	0	●	0	0
Premises Other	43	43	0	83	83	0	●	0	0
Enhanced services Delegated	1,439	1,439	0	1,896	1,896	0	●	0	0
QOF	2,754	2,754	0	3,672	3,672	0	●	0	0
Other GP Services	2,160	2,589	429	2,743	2,743	0	●	0	0
Delegated Contingency reserve	143	0	(143)	191	191	0	●	0	0
Delegated Primary Care 1% reserve	286	0	(286)	381	381	0	●	0	0
<b>Total</b>	<b>28,609</b>	<b>28,609</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 3 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.

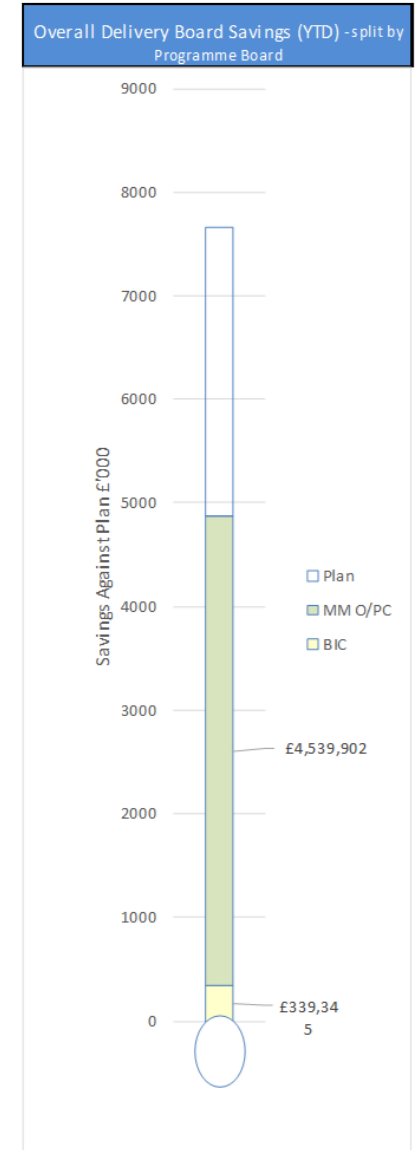
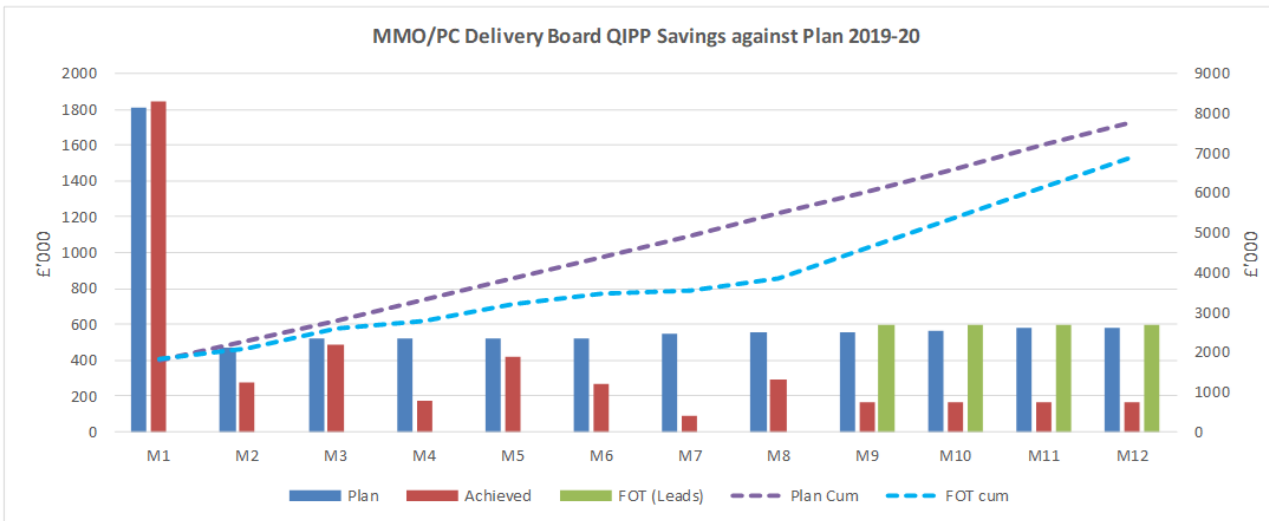
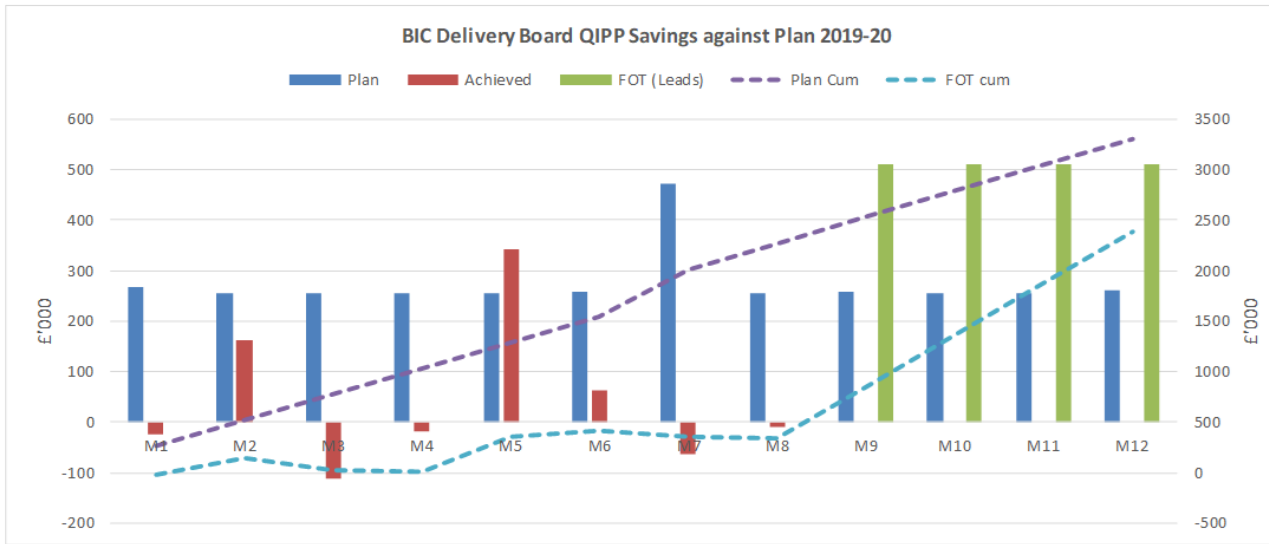
## 2. QIPP

- The 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 supported by the planned use of reserves and the CCG continues to meet its financial metrics.
- There is no real movement in QIPP for both BIC and MMO.

**QIPP Programme Delivery Board**



### 3. STATEMENT OF FINANCIAL POSITION

The Statement of Financial Position (SoFP) as at 31<sup>st</sup> December 2020 is shown below:

	31 December '19 £'000	30 November '19 £'000	Change In Month £'000
<b>Non Current Assets</b>			
Assets	0	0	0
Accumulated Depreciation	0	0	0
	0	0	
<b>Current Assets</b>			
Trade and Other Receivables	1,868	2,095	-228
Cash and Cash Equivalents	231	53	178
	2,098	2,148	
<b>Total Assets</b>	<b>2,098</b>	<b>2,148</b>	
<b>Current Liabilities</b>			
Trade and Other Payables	-38,704	-46,447	7,743
	-38,704	-46,447	
<b>Total Assets less Current Liabilities</b>	<b>-36,606</b>	<b>-44,299</b>	
<b>TOTAL ASSETS EMPLOYED</b>	<b>-36,606</b>	<b>-44,299</b>	
<b>Financed by: TAXPAYERS EQUITY</b>			
General Fund	36,606	44,299	-7,694
<b>TOTAL</b>	<b>36,606</b>	<b>44,299</b>	

Key points to note from the SoFP are:

- The cash target for month 9 has been achieved.
- The CCG is maintaining its high performance against the BPPC target of paying at least 95% of invoices within 30 days.
- **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 (November 19):***

- WCCG 84.9%, England 84.4%, STP 88.3%
- 92% WCCG patients started treatment within 22.4 weeks of referral at any provider in England against the standard of 18 weeks (England was also down from 25.8 to 23.9).
- A Recovery Action Plan (RAP) was agreed with the Trust, in October, to support recovery of Trust performance which will in turn improve the performance of the CCG.
- The RAP is being monitored and managed via the monthly Contract Review Meeting.
- The Trust performance indicates a sustained performance for the third consecutive month however has not achieved the recovery trajectory of 88.5% for November.
- The Trust RTT waiting list has also been sustained in November, down from the peak of 42,229 in August to 41,668 in November. Unvalidated performance indicates a further reduction in December to 40,510 making progress towards the ambition to not exceed the levels of the waiting list as at March 2019 (37,598).
- As the waiting list is decreased it is the expectation that this will enable the Trust to see more patients within standard, however will take some time to impact on the monthly performance figures.

- Dermatology – Staffordshire patients have now been transferred to new provider, transition arrangements have been agreed with Wolverhampton CCG and new referrals turned off.
- There were no WCCG patients waiting over 52 weeks to start treatment during November.
- Diagnostic performance for November remains above the  $\leq 1\%$  threshold (WCCG = 2.1%, RWT 2.8%).
- Performance has been impacted by high levels of referrals into the Endoscopy Department (with increased demand of Fast Track patients taking precedence over routine tests) and capacity constraints in neurophysiology.
- Additional sessions continue to be undertaken in endoscopy at the weekends throughout December 2019 and January 2020 to improve performance as quickly as possible however capacity has been limited due to unavailability of Endoscopy Consultants due to sickness during this period.
- The Trust has contracted with a 3<sup>rd</sup> party supplier to provide additional capacity for Neurophysiology however capacity has been limited in December.
- The Trust is now forecasting a delay in recovery to March 2020.

### **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.

- 82.8% of A&E attendances were admitted, transferred or discharged within 4 hours from arrival in December.
- The Trust was ranked at 36<sup>th</sup> out of 121 Acute Trusts in November; once again only 3 Trusts achieved the national standard of 95% (only 1 of which has Type 1 A&E activity).
- Performance was extremely challenged across the country in December with England at 79.8% and the Black Country STP at 79.5%.
- DToC rates for November have been reported at 1.16% (excluding Social Care) 3.00% (total including Social Care).
- Out of area DToC particularly for Staffordshire remains challenging, with just over 40% of RWT delays, this has been escalated by both the Trust and the CCG.
- 241 ambulances breached the 30-60 minute ambulance handover target during December 2019 compared with 42 for the same period last year. 45 ambulances breached the >60 minutes handover target during the month compared with 1 for the same period last year.
- The longest waiting ambulance during the month was recorded at 4 hours and 11 minutes; this was on 30<sup>th</sup> of the month when there were 169 ambulance conveyances and a total of 477 attendances on the day. The average daily number over the rest of the month was 154 ambulances and 387 attendances.

There was one breach of the 12 hr standard in December which was due to bed capacity on the 30/31<sup>st</sup> December (see previous comments re high levels of activity over these days). This brings the total year to date to 9.

### 3.1.3. Cancer – All Standards

- **2WW Breast Symptomatic specific issues and actions:**
  - November nationally published (provisional) performance has improved for the CCG from 31.3% to 68.9% and RWT from 18.4% to 76.9%.
  - STP performance has declined from 63.6% to 53.9% and England has also dropped from 89.9% to 87.5%.
  - RWT's backlog position has reduced from 539 at 1st July to 0 in October and has been sustained in to November.
  - Wolverhampton CCG Breast Pain pathway commenced in August.
  - RWT ceased diversion of patients to Walsall and Dudley at the end of November as was achieving the 14 booking day. However, as the Walsall waiting times have deteriorated, RWT is working with the Trust to flex capacity as required to equalise waiting times across the patch. At time of reporting (23/01/19), new referrals are being booked at day 14.
  - Trust unvalidated performance is expected to be in the region of 80% for December and is not currently expected to achieve the national standard whilst the flexing of activity with Walsall continues, however this does ensure parity of service and better overall outcomes for patients.
  
- **All Cancer standards – issues and actions:**
  - Remedial action plan is in place and reviewed monthly with revised improvement trajectories agreed.
  - The main backlog of patients waiting over 62 days remains in Urology awaiting Robotic Surgery.
  - Performance against the 62 Day standard has improved 59.6% for the CCG and 57% for RWT, however will not achieve the national standard of 85% before year end.
  - 62 Day performance now included in the RAP by pathway.
  - The Trust has appointed a new Cancer lead who is concentrating on tumour site including those who require Faster Diagnosis Standard (28FDS).
  - The Trust has successfully recruited to the Consultant Radiologist post and is now running regular Saturday morning lists which overall will see more patients than a mega clinic (15 per session).
  - The Intensive Support Team (IST) continues to support the Trust and is scheduled to return to review previously identified actions (and progress against the 18/19 plan) in January 2020.

- The Trust continues to achieve standard for the 3 sub specialities.
- The Trust has also now achieved the national standard for 2WW in November and is forecasting to continue to do so apart from an expected drop in performance in January due to capacity over December.

*Cancer performance data for November 2019*

Ref	Indicator	Standard	RWT	WCCG
EB6	2 Week Wait (2WW)	93%	93.05%	87.76%
EB7	2 Week Wait (2WW) Breast Symptoms)	93%	76.92%	68.91%
EB8	31 Day (1 <sup>st</sup> Treatment)	96%	88.57%	91.18%
EB9	31 Day (Surgery)	94%	95.12%	92.31%
EB10	31 Day (anti-cancer drug)	98%	100.0%	100%
EB11	31 Day (radiotherapy)	94%	94.40%	89.19%
EB12	62 Day (1 <sup>st</sup> Treatment)	85%	57.00%	59.62%
EB13	62 Day (Screening)	90%	44.23%	33.33%
EB14	62 Day (Consultant Upgrade)	No Standard	75.43%	78.38%

**3.1.4. E.A.S4 and E.A.S5 – MRSA and Clostridium Difficile**

- One additional MRSA case was reported for the CCG during November, bringing the total to 2 cases. The CCG has already breached the zero thresholds for the year. Local data has confirmed the breach was not at either main provider (RWT/BCPFT); further information is awaited regarding the breach.
- The number of C.Diff cases has seen a decrease and is within threshold for the CCG, RWT and STP for November 2019.
- October C.Diff Public Health data confirms :
  - CCG = 1 case (against threshold of 4), 30 YTD
  - STP = 8 cases (against threshold of 25),166 YTD
  - RWT = 1 case (against threshold of 3), 31 YTD
- RWT figures are for healthcare associated cases only; total cases (including community associated) for November was 2, 55 YTD.

### **3.2. Mental Health (BCPFT) and Primary Care**

#### **3.2.1. IAPT Recovery Rate (Moving to Recovery) E.A.S.2**

- Previously the CCG's performance had improved for September to achieve the 50% standard however October performance has dipped to 39.5% giving a rolling 3 month performance of 46.2%. This will also impact on the Q3 performance.
- The validated performance using the National NHS Digital monthly extracts based on the Mental Health Minimum Data Set (MHMDS) is showing variation between local and national data. The difference is marginal however has a significant impact on performance against the national standard. The difference has been flagged via the DQIP and is currently being investigated by the Trust.
- IAPT Access Rates and Waiting Times (6 and 18wk) standards are all being achieved by the CCG.

#### **3.2.2. Psychosis treated with a NICE approved care package within two weeks of referral (E.H.4)**

- NHS E&I have confirmed that the EIP data will no longer be available from the SEFT collation system from the September data collection. As the EIP data is a mandatory element of the Mental Health Minimum Data Set (MHMDS), this will be used to measure performance of the referral to treatment element of the EIP standard going forward, however publication of the MHMDS extracts will now be subject to a month data lag. Therefore, the October data is currently unavailable.
- Local data from the Black Country Partnership Foundation Trust confirms that performance has consistently met the target with the exception of August 2019.

#### **3.2.3. Out of Area Placements STP Target (E.H.12)**

- STP wide Out of Area Placements (OAPs) Reduction Plan has been submitted and the STP is working with Providers on implementation. The plan's focus is upon improved patient flow, improving access to crisis resolution home treatment and enhancing the community mental health offer to prevent / reduce relapse whilst exploring options to improve step up / step down provision across the STP.
- Commissioners are to adopt a single contract for commissioning of inpatient beds across the Black Country in 202/21, with the number of beds being sized to demand.
- Development of Single 24/7 Bed Management function across the Black Country. Enhancing BCPFT Bed Management team to include embedding of Discharge Co-ordinator Roles within the Bed Management Team.
- Effective 24/7 community based Crisis Response and crisis alternatives (Crisis Café) is expected to improve referral to assessment times, reduce inpatient admissions and provide more effective pathways between services.



#### **3.2.4. Physical Health Checks for People with a Severe Mental Illness (E.H.13)**

- The SMI Health Check indicator relates to 6 individual tests which patients with a Severe Mental Illness need to receive. All 6 tests are required within a 12 month rolling period in order to achieve the performance standard.
- The Q3 CCG performance is currently reporting at 47.2% against the Q3 trajectory of 50%.
- A review of the information flow (between Black Country Partnership and GP Practices) has taken place as health checks provided by the Mental Health Trust may not have been transferred back to patients' records in a consistent and coded manner. Although the patient's computer record is updated in Primary Care, health check data has to be coded to be included as part of the CCG's overall performance.
- Primary Care facilitators (in cooperation with Contracting teams and Primary Care Commissioning) are investigating a submission template for the Mental Health Trust which will enable GP Practices to receive and upload data to systems and enable inclusion and therefore improvement in performance.
- Proactive practice identification of patients who are missing 1 or 2 checks which will also have a direct effect on CCG performance.

#### **3.2.5. % of Population that the UCC (NHS111) can directly book (E.D.18)**

- Performance for the CCG is currently zero (against a 100% target).
- The CCG have practice test sites ready to roll out, however are unable to action due to NHS111 software issues that prevent the system to differentiate between branch surgeries under the same practice code.

#### **3.2.6. Dementia Diagnosis Rate - 65+ (E.A.S.1)**

- As at November CCG performance is 70.95% against a national standard 66.7%; however the CCG was required to set a target of 71.4% in 2019/20 due to previously achieving the national standard in 2018/19. Reminders for training and dementia friendly sessions have been sent via the GP Practice Communications.
- Dementia has been included at the Team W (CCG GP Learning Event) agenda for March. Development of a STP wide specification for memory assessment services which will form part of commissioning intentions in September and align with the Dementia Strategy implementation of each CCG.

#### 4. RISK and MITIGATION

In reviewing the financial position of the CCG as at Month 9, the CCG has adjusted the risk profile as well as reducing the level of risk not reflected in the reported position.

CCG RISKS & MITIGATIONS	Forecast Net Expenditure				RISKS (enter negative values only)						MITIGATIONS (enter positive values only)										
	Plan	Actual	Variance	Variance	Contract	QJPP	Performance Issues	Prescribing	Other	TOTAL RISKS	Contingency Held	Contract Reserves	Investments Uncommitted	Further QJPP 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)	443.163																				
REVENUE RESOURCE LIMIT (CUMULATIVE)	453.191																				
Acute Services	211.032	212.348	(1.317)	(0.6%)	(0.800)	-				(0.800)	0.800										0.800
Mental Health Services	45.312	45.917	(0.604)	(1.3%)																	
Community Health Services	45.624	45.197	0.427	0.9%																	
Continuing Care Services	16.072	16.362	(0.290)	(1.8%)																	
Primary Care Services	57.786	57.618	0.168	0.3%				(0.200)		(0.200)	0.200										0.200
Primary Care Co-Commissioning	38.145	38.145	-	0.0%																	
Other Programme Services	20.526	19.232	1.294	6.3%																	
Commissioning Services Total	434.497	434.819	(0.322)	(0.1%)	(0.800)			(0.200)		(1.000)	1.000										1.000
Running Costs	5.516	5.194	0.322	5.8%																	
Unidentified QJPP																					
TOTAL CCG NET EXPENDITURE	440.013	440.013	(0.000)	(0.0%)	(0.800)			(0.200)		(1.000)	1.000										1.000
IN YEAR UNDERSPEND / (DEFICIT)	3.150	3.150	0.000	0.0%																	
CUMULATIVE UNDERSPEND / (DEFICIT)	13.178	13.178	0.000	0.0%																	

In summary the CCG is reporting:

	£m Surplus(deficit)	
Most Likely	£13.178	No risks or mitigations, <b>achieves</b> control total
Best Case	£14.178	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	£12.178	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 COMMISSIONING COMMITTEE REPORT – Q3 FINANCE POSITION

The Committee received for information the Q3 Finance position report due to go to the February meeting of the Primary Care Commissioning Committee.

## 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 Chief Finance Officer  
**Date:** 29<sup>th</sup> January 2020




# Wolverhampton CCG Performance against the NHS Constitution Standards

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

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

Current Month: **Nov-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		Nov	92.0%	84.92%	↓	↓	86.50%															
		<b>CCG Validated</b>		<b>Nov</b>	<b>92.0%</b>	<b>84.92%</b>	↓	↓	<b>86.50%</b>	R	R	R	R	R	R	R	R						R	
		RWT	Mth	Nov	92.0%	83.18%	↓	↓	84.97%															
		Black Country STP		Nov	92.0%	88.26%	↓	↓	90.49%															
EB4	Diagnostic Waits (6wks)	CCG Provisional		Nov	1.0%	2.10%	↑	↑	1.71%	G	G	G	G	R	R	R	R							
		<b>CCG Validated</b>		<b>Nov</b>	<b>1.0%</b>	<b>2.10%</b>	↑	↑	<b>1.71%</b>	G	G	G	G	R	R	R	R						R	
		RWT	Mth	Nov	1.0%	2.79%	↓	↓	1.95%															
		Black Country STP		Nov	1.0%	2.01%	↓	↓	1.60%															
EB5	A&E (Waits Within 4hrs)	CCG Provisional		No Data	95.0%	-			-															
		<b>CCG Validated</b>		<b>No Data</b>	<b>95.0%</b>	-			-															
		RWT	Mth	Dec	95.0%	82.78%	↓	↓	86.92%															
		Black Country STP		Dec	95.0%	79.50%	↓	↓	83.02%															
EB6	Two Week Waits (2WW)	CCG Provisional		No Data	93.0%	66.85%			66.85%															
		<b>CCG Validated</b>		<b>Nov</b>	<b>93.0%</b>	<b>87.76%</b>	↑	↑	<b>74.94%</b>	R	R	R	R	R	R	R	R						R	
		RWT	Mth	Nov	93.0%	93.05%	↑	↑	77.61%															
		Black Country STP		Nov	93.0%	81.98%	↑	↓	87.00%															
EB7	Two Week Waits (2WW) Breast Symptoms	CCG Provisional		No Data	93.0%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>93.0%</b>	<b>68.91%</b>	↑	↑	<b>19.03%</b>	R	R	R	R	R	R	R	R						R	
		RWT	Mth	Nov	93.0%	76.92%	↑	↑	15.25%															
		Black Country STP		Nov	93.0%	53.93%	↓	↓	66.95%															
EB8	31 Day Cancer Treatment	CCG Provisional		No Data	96.0%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>96.0%</b>	<b>91.18%</b>	↓	↓	<b>92.11%</b>	R	R	R	G	R	R	R	R						R	
		RWT	Mth	Nov	96.0%	88.57%	↓	↑	87.80%															
		Black Country STP		Nov	96.0%	92.78%	↓	↓	94.25%															
EB9	31 Day Cancer Treatment (Surgery)	CCG Provisional		No Data	94.0%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>94.0%</b>	<b>92.31%</b>	↓	↑	<b>90.45%</b>	R	G	R	R	R	G	G	R						R	
		RWT	Mth	Nov	94.0%	95.12%	↓	↑	82.24%															
		Black Country STP		Nov	94.0%	93.90%	↓	↑	92.60%															
EB10	31 Day Cancer Treatment (anti cancer drug)	CCG Provisional		No Data	98.0%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>98.0%</b>	<b>100.00%</b>	→	→	<b>99.52%</b>	G	G	G	R	G	G	G	G						G	
		RWT	Mth	Nov	98.0%	100.00%	→	→	99.73%															
		Black Country STP		Nov	98.0%	100.00%	→	→	99.15%															
EB11	31 Day Cancer Treatment (Radiotherapy)	CCG Provisional		No Data	94.0%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>94.0%</b>	<b>89.19%</b>	↓	↓	<b>90.73%</b>	R	R	G	G	R	R	G	R						R	
		RWT	Mth	Nov	94.0%	94.40%	↓	↑	90.61%															
		Black Country STP		Nov	94.0%	92.86%	↓	↑	88.19%															
		CCG Provisional		Nov	94.0%	96.87%	↑	↑	96.45%															
				Nov	94.0%																			
				Nov	94.0%																			
				Nov	94.0%																			

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

Current Month: **Nov-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		
EB12	62 Day Cancer Treatment 1st Definitive Treatment	CCG Provisional		No Data	85.2%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>85.2%</b>	<b>59.62%</b>			<b>62.84%</b>	R	R	R	R	R	R	R	R						R	
		RWT	Mth	Nov	85.2%	57.00%			59.17%															
		Black Country STP		Nov	85.2%	72.40%			74.13%															
		National		Nov	85.2%	77.38%			77.63%															
EB13	62 Day Cancer Treatment (NHS Screening)	CCG Provisional		No Data	90.0%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>90.0%</b>	<b>33.33%</b>			<b>61.04%</b>	R	R	R	R	R	R	R	R						R	
		RWT	Mth	Nov	90.0%	44.23%			63.94%															
		Black Country STP		Nov	90.0%	84.62%			86.19%															
		National		Nov	90.0%	83.84%			86.10%															
EB14	62 Day Cancer Treatment (Consultant Upgrade)	CCG Provisional		No Data	0.0%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>0.0%</b>	<b>78.38%</b>			<b>76.58%</b>	G	G	G	G	G	G	G	G						G	
		RWT	Mth	Nov	0.0%	75.43%			74.36%															
		Black Country STP		Nov	0.0%	79.43%			80.05%															
		National		Nov	0.0%	81.98%			94.51%															
EB18	52 Week Waiters (RTT)	CCG Provisional		Nov	0.0%	0			0															
		<b>CCG Validated</b>		<b>Nov</b>	<b>0.0%</b>	<b>0</b>			<b>0</b>	G	G	G	G	G	G	G	G						G	
		RWT	Mth	Nov	0.0%	0			11															
		Black Country STP		Nov	0.0%	0			11															
		National		Nov	0.0%	1570			10246															
EH1	IAPT Programme: Treated within 6 wks	CCG Provisional		Oct	75.0%	90.00%			85.82%															
		<b>CCG Validated</b>		<b>Oct</b>	<b>75.0%</b>	<b>90.00%</b>			<b>85.82%</b>	G	G	G	G	G	G	G							G	
		BCPFT	Mth	Oct	75.0%	93.58%			90.67%															
		Black Country STP		Oct	75.0%	92.65%			88.16%															
		National		No Data	75.0%	-																		
EH2	IAPT Programme Referral to Treatment (18wks)	CCG Provisional		Oct	95.0%	95.00%			97.76%															
		<b>CCG Validated</b>		<b>Oct</b>	<b>95.0%</b>	<b>95.00%</b>			<b>97.76%</b>	G	G	G	G	G	G	G							G	
		BCPFT	Mth	Oct	95.0%	98.17%			98.77%															
		Black Country STP		Oct	95.0%	98.53%			98.07%															
		National		No Data	95.0%	-																		
EH4	EIP 1st Episode (within 2 wks)	CCG Provisional		Sep	56.0%	0.00%			66.67%															
		<b>CCG Validated</b>		<b>Sep</b>	<b>56.0%</b>	<b>0.00%</b>			<b>66.67%</b>	G	G	G	G	R	R								G	
		BCPFT	Mth	Sep	56.0%	0.00%			42.86%															
		Black Country STP		Sep	56.0%	60.00%			56.00%															
		National		Jul	56.0%	77.42%			76.06%															
EH9	CYP Access Rates	CCG Provisional		Nov	34% Full Yr	3.15%			26.93%															
		<b>CCG Validated</b>		<b>Oct</b>	<b>34% Full Yr</b>	<b>4.21%</b>			<b>24.67%</b>	G	G	G	G										R	
		BCPFT	Mth	Oct	34% Full Yr	-			-															
		Black Country STP		Nov	34% Full Yr	2.29%			20.42%															
		National		No Data	34% Full Yr	-																		
EAS1	Dementia Diagnosis (65+)	CCG Provisional		No Data	71.4%	-			-															
		<b>CCG Validated</b>		<b>Nov</b>	<b>71.4%</b>	<b>70.95%</b>			<b>72.45%</b>	G	G	G	G	G	G	R	R						G	
		Primary Care	Mth	No Data	71.4%	-			-															
		Black Country STP		Oct	71.4%	65.33%			66.33%															
		National		No Data	71.4%	-																		
EAS2	IAPT Recovery Rate (Moving to Recovery)	CCG Provisional		Sep	50.0%	50.00%			-															
		<b>CCG Validated</b>		<b>Oct</b>	<b>50.0%</b>	<b>39.47%</b>			<b>47.29%</b>	G	G	R	R	R	G	R							R	
		BCPFT	Mth	Oct	50.0%	49.06%			52.97%															
		Black Country STP		Sep	50.0%	51.33%			51.92%															
		National		No Data	50.0%	-																		
EAS4	Zero Tolerance methicillin-resistant Staphylococcus aureus	CCG Provisional		No Data	0.0%	-			-															
		<b>CCG Validated</b>		<b>Aug</b>	<b>0.0%</b>	<b>1</b>			<b>2</b>	G	G	R	G	G	G	G	R						R	
		RWT	Mth	Nov	0.0%	0			0															
		Black Country STP		Nov	0.0%	1			6															
		National		Nov	0.0%	75			535															

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				
EAS5	Minimise rates of Clostridium Difficile	CCG Provisional		No Data	CCG: 48 Full Yr	-																				
		<b>CCG Validated</b>		Nov	CCG: 48 Full Yr	1	↑	↑	30	R	R	G	G	G	R	R	R						R			
		RWT	Mth	Nov	RWT: 40 Full Yr	1	↑	↑	31																	
		Black Country STP		Nov	STP: 288 Full Year	8	↑	↑	166																	
		National		Nov	TBC	1027	↑	↑	9048																	
EBS1	MSA Breaches	CCG Provisional		Oct	0.0%	0			1																	
		<b>CCG Validated</b>		Nov	0.0%	0	↓	↓	1	G	G	R	G	G	G	G	G						R			
		RWT	Mth	Nov	0.0%	0	↓	↓	0																	
		BCPFT		Nov	0.0%	0	↓	↓	0																	
		Black Country STP		Nov	0.0%	15	↓	↓	170																	
		National		Nov	0.0%	1968	↓	↓	12040																	
EBS5	12 hr Trolley Waits	CCG Provisional		No Data	0.0%	-			-																	
		<b>CCG Validated</b>		No Data	0.0%	-	↓	↓	-																	
		RWT	Mth	Dec	0.0%	1	→	→	9																	
		Black Country STP		No Data	0.0%	-	↓	↓	-																	
		National		No Data	0.0%	-	↓	↓	-																	
EBS6	No urgent operation should be cancelled for a second time	CCG Provisional		No Data	0.0%	-			-																	
		<b>CCG Validated</b>		No Data	0.0%	-	↓	↓	-																	
		RWT	Mth	Dec	0.0%	0	→	→	0																	
		Black Country STP		No Data	0.0%	-	↓	↓	-																	
		National		No Data	0.0%	-	↓	↓	-																	
EBS3	CPA Follow Up within 7 days from Discharge	CCG Provisional		No Data	95.0%	-			-																	
		<b>CCG Validated</b>		Sep	95.0%	96.91%	↑	↑	97.93%			G				G								G		
		BCPFT	Mth	Sep	95.0%	97.74%	↑	↑	97.97%																	
		Black Country STP		Sep	95.0%	96.11%	↑	↑	96.70%																	
		National		Sep	95.0%	94.54%	↓	↓	94.79%																	
EH10	CYP Eating Disorder (Urgent within 1 wk) - 12 Rolling Mths	CCG Provisional		Sep	95.0%	100.00%			100.00%																	
		<b>CCG Validated</b>		Sep	95.0%	100.00%	↑	↑	100.00%			G				G								G		
		BCPFT	Mth	Sep	95.0%	90.91%	↓	↓	96.00%																	
		Black Country STP		Sep	95.0%	88.89%	↓	↓	90.24%																	
		National		Sep	95.0%	75.08%	↓	↓	76.36%																	
EH11	CYP Eating Disorder (Routine within 4 wks) - 12 Rolling Mths	CCG Provisional		Sep	95.0%	93.75%			91.67%																	
		<b>CCG Validated</b>		Sep	95.0%	93.75%	↓	↓	91.67%																R	
		BCPFT	Mth	Sep	95.0%	93.02%	↓	↓	92.13%																	
		Black Country STP		Sep	95.0%	89.22%	↓	↓	89.86%																	
		National		Sep	95.0%	85.98%	↓	↓	84.66%																	
EH13	Physical Health Checks for People with a Severe Mental Illness	CCG Provisional		No Data	60% by Yr End	-			-																	
		<b>CCG Validated</b>		Dec	60% by Yr End	47.23%	↓	↓	42.83%			R				R								R		
		Primary Care	Mth	No Data	60% by Yr End	-	↓	↓	-																	
		Black Country STP		No Data	60% by Yr End	-	↓	↓	-																	
		National		No Data	60% by Yr End	-	↓	↓	-																	
EA3	IAPT Roll Out Access Rate	CCG Provisional		No Data	CCG :	-			-																	
		<b>CCG Validated</b>		Oct	Q1 = 4.94%,	5.27%	↓	↓	38.94%	G	G	G	G	G	G	R								G		
		BCPFT	Mth	Oct	Q2 = 5.13%,	3.62%	↓	↓	2.90%																	
		Black Country STP		Oct	Q3 = 5.31%,	6.73%	↑	↑	48.81%																	
		National		No Data	Q4 = 5.50%	-	↓	↓	-																	
EH12	OoAPs - Out of Area Placements (STP target)	CCG Provisional		Sep		265	↓		1345																	
		<b>CCG Validated</b>		Oct		360	↓	↑	2255	R	R	G	R	G	G	R								R		
		Black Country STP	Mth	Oct	STP Wide Traj	965	↓	↑	5874																	
		National		No Data		-			-																	
ED16	% of the population with access to online consultations	CCG Provisional		No Data	75.2% Yr End	-			-																	
		<b>CCG Validated</b>		Dec	75.2% Yr End	96.61%	↑	↑	96.61%	G	G	G	G	G	G	G	G	G	G	G	G			G		
		Black Country STP	Mth	No Data	75.2% Yr End	-	↓	↓	-																	
		National		No Data	75.2% Yr End	-	↓	↓	-																	
ED17	% Extended Access Appointment Utilisation	CCG Provisional		Oct	85% Yr End	69.82%	↓	↑	66.16%																	
		<b>CCG Validated</b>		No Data	85% Yr End	-	↓	↓	-																	
		Black Country STP	Mth	No Data	85% Yr End	-	↓	↓	-																	
		National		No Data	85% Yr End	-	↓	↓	-																	

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ED18	% population that the Urgent Care System (NHS111) can directly book appointments for in contracted extended hours	CCG Provisional	Mth	Oct	100% Yr End	0.00%	→	→	0.00%														
		<b>CCG Validated</b>		No Data	100% Yr End	-	✓	✓															
		Black Country STP		No Data	100% Yr End	-	✓	✓															
	National	No Data	100% Yr End	-	✓	✓																	
EK1a	Rate (per million GP Registered Population) Inpatient Care for People with LD or Autism (CCG Commissioned)	CCG Provisional	Mth	Dec	20.02 by Yr End	40.03			40.03														
		<b>CCG Validated</b>		Dec	20.02 by Yr End	40.03	✓	↑	40.03		R				R			R				R	
		Black Country STP		Dec	18.31 by Yr End	36.62	✓	✓	36.62														
	National	No Data	-	-	✓	✓																	
EK1b	Rate (per million GP Registered Population) Inpatient Care for People with LD or Autism (NHSE Commissioned)	CCG Provisional	Mth	Dec	20.02 by Yr End	40.03			40.03														
		<b>CCG Validated</b>		Dec	20.02 by Yr End	40.03	✓	→	40.03			G			R			R				R	
		Black Country STP		Dec	18.31 by Yr End	26.98	✓	✓	26.98														
	National	No Data	-	-	✓	✓																	
EO1	% of Children Waiting more than 18 weeks for a Wheelchair	CCG Provisional	Qtr	No Data	92.5%	-	✓	✓	-														
		<b>CCG Validated</b>		Dec	92.5%	100.00%	✓	✓	99.24%			G			G			G				G	
		Black Country STP		Sep	92.5%	92.82%	✓	✓	94.38%														
	National	Sep	92.5%	84%	✓	✓																	
EK3	AHCs delivered by GPs for patients on the Learning Disability Register	CCG Provisional	Mth	No Data	75.0%	-			-														
		<b>CCG Validated</b>		Jan	75.0%	47.45%	✓	↑	47.00%									R		R	R	R	
		Black Country STP		No Data	75.0%	-	✓	✓															
	National	No Data	75.0%	-	✓	✓																	
EN1	Cumulative number of Personal Health Budgets (PHBs)	CCG Provisional	Mth	No Data	320 Yr End	-	✓	✓	-														
		<b>CCG Validated</b>		Dec	320 Yr End	373	✓	✓	373			G			G			G				G	
		Black Country STP		Sep	STP tbc	1143	✓	✓	1143														
	National	Sep	TBC	70990	✓	✓	70990																

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

Current Month: **Nov-19**

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

RAG ratings based on % variance (+ or -) from Plan



Improved Performance from previous month  
Decline in Performance from previous month  
Performance has remained the same

R = More than 5.1% variance from Plan  
A = between 2.6% and 5% from Plan  
G = Less than or equal to 2.5% from Plan

**Activity Against Plan**

\*Note : The Wolverhampton CCG Activity and Plan excludes Outpatient activity that is not paid for or contracted as OP attendances, but has to be recorded through SUS. This can vary the RAG rating status for the CCG if activity is not excluded at NHSE/I reporting 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	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	YTD
EM7	Total Referrals made for a First Outpatient Appointment (G&A)	CCG Provisional	Mth	Nov	Seasonal Variation	7295	↓	↑	60509													
		CCG Validated		Nov	Seasonal Variation	7295	↓	↑	61119													
EM8	Consultant Led First Outpatient Attendances (Specific Acute)	CCG Provisional	Mth	Nov	Seasonal Variation	8879	↑	↑	66863													
		CCG Validated		Nov	Seasonal Variation	8879	↓	↑	66915													
EM9	Consultant Led Follow-Up Outpatient Attendances (Specific Acute)	CCG Provisional	Mth	Nov	Seasonal Variation	14961	↓	↑	118579													
		CCG Validated		Nov	Seasonal Variation	14961	↓	↑	118852													
EM10	Total Elective Spells (Specific Acute)	CCG Provisional	Mth	Nov	Seasonal Variation	2870	↓	↑	22408													
		CCG Validated		Nov	Seasonal Variation	2870	↓	↑	22402													
EM11	Total Non-Elective Spells (Specific Acute)	CCG Provisional	Mth	Nov	Seasonal Variation	2565	↓	↑	19675													
		CCG Validated		Nov	Seasonal Variation	2565	↓	↑	19666													
EM12	Total A&E Attendances (Excl. Planned Follow Up Attendances) *Awaiting confirmation of Vocare submissions	CCG Provisional	Mth	Nov	Seasonal Variation	15762	↑	↑	98071													
		CCG Validated		Nov	Seasonal Variation	15762	↑	↑	122959													
EM12a	Type 1 A&E Attendances (Excluding Planned Follow Up Attendances)	CCG Provisional	Mth	Nov	Seasonal Variation	7963	↓	↑	65005													
		CCG Validated		Nov	Seasonal Variation	7963	↓	↑	65064													
EM18	Number of completed admitted RTT pathways	CCG Provisional	Mth	Oct	Seasonal Variation	1208	↑	↓	7837													
		CCG Validated		Nov	Seasonal Variation	1141	↓	↑	8978													
EM19	Number of completed non-admitted RTT pathways	CCG Provisional	Mth	Oct	Seasonal Variation	5791	↑	↓	37205													
		CCG Validated		Nov	Seasonal Variation	5845	↑	↑	43050													
EM20	Number of new RTT pathways (clock starts)	CCG Provisional	Mth	Oct	Seasonal Variation	9437	↑	↑	59273													
		CCG Validated		Nov	Seasonal Variation	8141	↓	↑	67413													
EM21	Consultant Led Outpatient Attendances with Procedures (Specific Acute)	CCG Provisional	Mth	Oct	Seasonal Variation	2213	↓	↑	16897													
		CCG Validated		Nov	Seasonal Variation	2213	↓	↑	17060													
EM22	Average number of G&A beds open per day (specific acute)	RWT	Mth	Sep	Seasonal Variation	117		↑	117													