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## 2016/17 Assessment for cancer, dementia and mental health

Dear Accountable Officer and Clinical Lead,

Alongside the headline assessment of your CCG that has been completed under the auspices of the Clinical Commissioning Group Improvement and Assessment Framework (CCG IAF) for 2016/17, additional assessments have been undertaken by three independent clinical panels for each of the priority areas set out in *The Next Steps on the Five Year Forward View*: cancer, mental health and dementia.

Each CCG is provided with a rating for each of the three clinical priority areas. The ratings are described as: 'outstanding'; 'good'; 'requires improvement'; and, 'inadequate'.

**Annex A** (attached separately) sets out the assessment for your CCG in each of these three clinical priority areas for 2016/17.

The methodology used by the panels to derive the assessments for each clinical priority area can be found at **Annex B**.

This assessment does not provide a comprehensive reflection of the quality of care. It is limited by the metrics selected to simply providing a snapshot of whether CCGs are meeting national ambitions where relevant, or how their performance against other key indicators compares with other CCGs.

The greatest value in supporting CCGs to drive performance improvement is to be derived by considering the results of the individual indicators within each clinical priority area. This should help to identify where CCGs might be able to learn from

each other and drive overall improvement. For further information on improvement support, please visit the clinical priority area pages on our [website](#), which will be updated when the assessments are published.

Commentaries on the 2016/17 ratings for each of the clinical priority areas have been prepared by the independent panel chairs: Sir Harpal Kumar, Chief Executive of Cancer Research UK; Paul Farmer, Chief Executive of Mind; and, Jeremy Hughes, Chief Executive of the Alzheimer's Society. These commentaries will be available on the NHS England website at the same time as the assessment results.

The 2016/17 clinical priority area ratings remain draft until they are formally issued which we expect to be on **19 July 2017**, alongside the NHS England CCG assessments for 2016/17. At the same time, the clinical priority area ratings will be published on the MyNHS section of the NHS Choices website. They will be added to the dashboard with the indicator data for each clinical priority area which has already been made available to CCGs through NHS England regional teams.

Yours faithfully,



**Cally Palmer, National Cancer Director, NHS England**



**Claire Murdoch, National Mental Health Director, NHS England**



**Alistair Burns, National Clinical Director for Dementia, NHS England**

## Annex B: Methodologies for 2016-17 clinical panel ratings for cancer, mental health and dementia

### Cancer

1. The overall rating for cancer is based on four indicators; early diagnosis, 62 day waits for treatment after referral, one year survival and overall patient experience. The four cancer metrics have been chosen based on the key priorities agreed by the Cancer Transformation Board, led by Cally Palmer, National Cancer Director for England, and charged with implementing the NHS Cancer Strategy for England.
2. For each CCG, each of the four cancer indicators was given a score derived using a statistical control limit approach, with limits set at 2 standard deviations (equivalent to a 95% confidence level). The banding method and benchmark used to assign a score are shown in table 1.

**Table 1. Cancer indicator banding method**

Indicator (Latest time period used)	Indicator scores	Benchmark
Cancers diagnosed at early stage (2015)	Significantly below the national benchmark = 0 Not significantly above or below the national benchmark = 1. Significantly above the national benchmark = 2	2015 National mean (52.4%)
People with urgent GP referral having definitive treatment for cancer within 62 days of treatment (2016/17)	Significantly below the national standard = 0 Below the national standard but not significantly = 0.75 Above the national standard but not significantly = 1.25 Significantly higher than the national standard = 2	National Standard (85%)
One-year survival from all cancers (2014)	Significantly below the national benchmark = 0 Not significantly above or below the national benchmark = 1. Significantly above the national benchmark = 2	National trajectory to national ambition (70.4)
Cancer patient experience (2015)	Significantly below the national benchmark = 0 Not significantly above or below the national benchmark = 1. Significantly above the national benchmark = 2	2015 National mean (8.7)

**To note:** The one-year survival indicator is case-mix adjusted to account for differences in the demographic profile of CCG populations. At present the early stage diagnosis indicator is not case-mix adjusted, however adjustment of scores for the relative incidence of different cancer types may be explored for future years.

For the 2016/17 assessment, annual (2016-17) data was used for the 62 day standard indicator to give the best representation of the year of assessment. For the initial assessment (2015/16) the 62-day standard was based on data for 2015/16 Q4 only.

The methodology for the cancer patient experience indicator has changed in line with the published data. For the 2015/16 assessment the indicator was the percentage of positive answers, and there was no case mix adjustment. For the 2016/17 assessment, the indicator is the average score (on a scale of 0 to 10) and includes a case mix adjustment that provides a fairer comparison between CCGs.

3. The mean score for the four indicators described above was calculated. The thresholds shown in table 2 were used by the independent cancer panel to derive the rating for each CCG.

**Table 2. Cancer assessment thresholds**

Rating	Score range
Outstanding	Above or equal to 1.4
Good	Above or equal to 0.8 and below 1.4
Requires Improvement	Above or equal to 0.5 and below 0.8
Inadequate	Below 0.5

## Mental Health

4. Each CCG is assigned one of four ratings based on their performance against five indicators:
  1. Improving Access to Psychological Therapies (IAPT) Recovery Rate;
  2. Early Intervention in Psychosis (EIP) Waiting Times;
  3. CYP Mental Health Transformation Indicator;
  4. Crisis and Liaison Mental Health Transformation Indicator; and,
  5. Mental Health Out of Area Placements Transformation Indicator
5. A CCG is given a score of between 0 and 2 for each indicator based on their compliance with expected levels of performance. Two different approaches are taken because of the statistical properties of the different indicators.

### IAPT & EIP indicators

6. For the IAPT and EIP indicators, the score is based on the CGG is above or below the current performance standard (50%) and whether this is a statistically significant difference. Scores are assigned as shown in table 3a:

**Table 3a. Mental health indicator banding method for IAPT and EIP indicators**

Indicator (Time period used)	Indicator scores	Benchmark
Improving access to psychological therapies recovery rate (November 2016 to January 2017)	Significantly below the national standard = 0 Below the national standard (not significantly) = 0.75 Above the national standard (not significantly) = 1.25 Significantly above the national standard = 2	National standard (50%)
Early intervention in psychosis (EIP) waiting times (April 16 to March 17)	Significantly below the national standard = 0 Below the national standard (not significantly) = 0.75 Above the national standard (not significantly) = 1.25 Significantly above the national standard = 2	National standard (50%)

## CYP, Crisis and out of area placement indicators

- For the three transformation indicators scores are assigned based on the percentage compliance with the transformation milestones as shown in table 3b:

**Table 3b. Mental health indicator banding method for transformation indicators**

Indicator (Time period)	Indicator scores
Children and young people's mental health services transformation (2016/17 Q4)	Indicator value below 50% = 0 Indicator value equal to or above 50% and below 90% =1 Indicator value 90% or above = 2
Crisis care and liaison mental health services transformation (2016/17 Q4)	Indicator value below 50% = 0 Indicator value equal to or above 50% and below 90% =1 Indicator value 90% or above = 2
Out of area placements for acute mental health inpatient care transformation (2016/17 Q4)	Indicator value below 50% = 0 Indicator value equal to or above 50% and below 90% =1 Indicator value 90% or above = 2

**To note:** transformation indicators are derived from a bespoke UNIFY2 collection to allow CCGs to provide a self- assessment against the local arrangements that should be in place to deliver high quality care now and in the future. Self-assessments are assured by NHS England regional teams.

- An mean score is then taken across the five indicators and CCGs are assigned a rating by the panel using the thresholds in table 4:

**Table 4. Mental health assessment thresholds**

Rating	Score range
Outstanding	Above or equal to 1.8
Good	Above or equal to 1.25 and below 1.8
Requires Improvement	Above or equal to 0.5 and below 1.25
Inadequate	Below 0.5

## Dementia

- The 2016/17 rating for dementia considers two indicators: dementia diagnosis rates and care plan reviews for people with dementia.
- Diagnosis rates are calculated using the number of people on the dementia register, Office of National Statistics (ONS) population figures and Cognitive Function and Ageing Studies (CFAS) II prevalence estimates. Care plan reviews are calculated using the number of people who have had a care plan review and the number of people on the dementia register. The indicator on the percentage of patients diagnosed with dementia who have had a face to

face review of their care plan within the last 12 months is intended as a proxy measure of broader support post-diagnosis of dementia.

- Each dementia indicator is assigned a band based on the thresholds shown in table 5. For the diagnosis rate indicator, the national ambition of 66.7% (two thirds) was used as the threshold for good performance. For the care plan review indicator, the thresholds used were the quartiles based on the data used in the initial assessment.

**Table 5. Dementia indicator banding method**

Indicator (Time period used)	Indicator banding category thresholds (1 = best performing, 4 = poorest performing)	Benchmark
Diagnosis rate (March 2017)	Indicator value below or equal to 56.7% = Band 4 Indicator value above 56.7% and below or equal to 66.7% = Band 3 Indicator value above 66.7% and below or equal to 76.7% = Band 2 Indicator value above 76.7% = Band 1	National Standard (66.7%) and thresholds set for the 2015/16 assessment
Care plan reviews (2015/16)	Indicator value below or equal to 75.6% = Band 4 Indicator value above 75.6% and below or equal to 77.6 % = Band 3 Indicator value above 77.6% and below or equal to 79.4 % = Band 2 Indicator value above 79.4% = Band 1	2014/15 quartiles

**To note:** The thresholds for the dementia diagnosis rate and care plan reviews indicator in table 5 have been rounded to 1 decimal place. The exact thresholds for the dementia diagnosis rate indicator are based around achieving the national ambition for a national ambition two thirds standard. Hence to 6 decimal places Band 4 = 56.666667%, Band 3 = 66.666667%, Band 2 = 76.666667%. The upper thresholds on which banding is based on for the care plan indicator are: Band 4 = 75.587062%, Band 3 = 77.553084%, Band 2 = 79.447005%

- The overall rating for dementia is based on the CCG band for each of the dementia indicators as illustrated in table 6:

**Table 6. Dementia assessment rating**

		Diagnosis rate band			
		1 (Best performing)	2	3	4 (Poorest performing)
Care plan review band	1 (Best performing)	Outstanding	Outstanding	Good	Requires improvement
	2	Outstanding	Good	Requires improvement	Requires Improvement
	3	Good	Requires improvement	Requires improvement	Inadequate
	4 (Poorest performing)	Requires improvement	Requires improvement	Inadequate	Inadequate