

Bracknell & Ascot CCG, Slough CCG and Windsor, Ascot & Maidenhead CCG
Joint Quality Committee Chair's Report – M12 2014/15

Improvements in Quality & Performance (M12)

Provider – Standards Achieved

- **Cancer 2WW** all standards achieved for M11 for all main acute Trusts - Frimley North and South, RBFT and ASPH
- **Cancer 31 day waits** 96% standard for M11 achieved (Subsequent treatment where that treatment is anti-cancer drug regimen) for all acute Trusts - Frimley North and South, RBFT and ASPH
- **Cancer 62 day waits** standards for M11 achieved by Frimley North (who met all 9 cancer standards in M11)
- **Cancelled Operations on the day** 0.5% standard achieved for Frimley South
- **MRSA** – no cases for all main acute providers in M12
- **CDiff** cases for Frimley North and South and RBH were below trajectory for the year
- **Never Events** - none reported for M12
- **18 Weeks Non Admitted** 90% standard achieved for Frimley North and South and ASPH
- **18 Weeks Incomplete** 92% standard achieved for Frimley North and South and ASPH
- **A&E 4 hour wait** at Frimley Health (North and South) improving performance in M12 and over Q4
- **Ambulance Response times** - no breaches for Red 1 or Red 2 calls or 19 minute transportation for SCAS
- **MSA** no breaches for Frimley North and South or RBFT

CCG – Standards Achieved

- **Cancer 2WW** 93% standard achieved by all 3 CCGs
- **Cancer 31 day waits** 96% standard (Diagnosis to first definitive treatment for all cancers) achieved for all 3 CCGs
- **Cancer 62 day waits** 90% (Referral from screening service to first definitive treatment) achieved for all 3 CCGs
- **Cancer 62 day waits** 85% (First definitive treatment following a consultant's decision to upgrade) achieved for all 3 CCGs
- **MRSA** – no cases for all 3 CCG's in M12
- **CDiff** cases for both B&A and Slough CCG were below trajectory for the year
- **18 Weeks Non Admitted** 90% standard achieved for B&A
- **18 Weeks Incomplete** 92% standard achieved for B&A and WAM
- **6 Week Diagnostic Waits** ≤1% improved significantly in March and is expected to be compliant for April
- **Ambulance Response times** - no breaches for Red 1 or Red 2 calls or 19 minute transportation for all 3 CCGs with exception of WAM CCG for Red 2 calls
- **MSA** no breaches for B&A or Slough CCGs

Areas Requiring Improvement in Quality & Performance as Standards Not Achieved (M12)

Cancer

Note: Provider Cancer data is reported one month in arrears, thus M11 Provider data and M12 CCG data is reported here.

Cancer 31 Day Waits (Subsequent treatment where that treatment is surgery) for WAM CCG was not achieved in M12 at 92.3% (against standard of 94%) following 7 months of compliance.

Cancer 31 Day Waits (Subsequent treatment where that treatment is radiotherapy) for B&A CCG (92.3%) and WAM CCG (73.9%) was not achieved in M12 (against standard of 94%) where previous performance has been variable.

Cancer 62 Day Waits for the CCGs are variable with performance in month 12 for (2 month urgent referral to treatment) not meeting the standard (85%) for all 3 CCGs.

Bracknell & Ascot CCG, Slough CCG and Windsor, Ascot & Maidenhead CCG
Joint Quality Committee Chair's Report – M12 2014/15

Frimley North presented refreshed action plans for Cancer (Breast and Urology) at the April CQRM. Significant improvement in achievement against all 9 cancer standards in M11 is noted. Sustained achievement in M12 is also expected. Focus on MDT functionality with strengthened leadership and new governance structures giving robust oversight and improved reporting. **Frimley South** 62 day wait cancer performance did not achieve in M11 but was due to small numbers. **ASPH** - the 2 week, 31 day and 62 day standards were not met in March again due to significant pressures in endoscopy and urology capacity restrictions. **RBFT** – cancer wait times having been compliant for several months but have now deteriorated. A number of Specialities are underperforming including lower and upper GI, colorectal, urology and head and neck. Issues with capacity, inability to recruit Consultants and availability of diagnostic tests (radiology and CT scans) have all contributed to this under performance. Locums have been employed to cover the shortfall in staff whilst recruitment takes place and additional clinics are planned to increase capacity in hysteroscopy and cystoscopy. In addition there have been the following delays further impacting cancer performance 1) Delay in implementing hysteroscopy service at West Berkshire Community Hospital resulting in patients still being seen at RBFT 2) Delay in implementing 6/7 day working in gastroenterology and radiology due to too few suitable candidates applying for posts.

Cancelled Operations

Frimley North rate of cancellation on the day continues to remain above the threshold of 0.8% (1.65%). Data quality issues have been highlighted indicating that data capture on Theatre record systems might not be correctly identifying cancelled operations and/or procedures. The main issues identified by the Trust contributing to the poor performance are lack of theatre time; no beds; lack of recovery space; procedure not required.

Trust capacity issues have impacted cancelled on the day where bed availability both on wards and in ITU has resulted in cancellations. The lack of available level 2 and 3 beds in ITU at times of increased demand results in level 2 and 3 patients being cared for in recovery thus impacting cancelled on the day. The Trust is reviewing the procedures for the deteriorating patient on the wards to avoid transfer to ITU that then ultimately puts pressures on ITU beds and results in utilisation of recovery beds.

Stroke

Frimley North following significant drop in stroke performance in February (29% patients admitted to stroke unit in 4 hours) performance improved in March to 74%, but still remains below the threshold of 95%. A refreshed stroke improvement plan was presented to April CQRM by the Trust. Actions include; early identification of stroke by stroke coordinators in A&E; increase Stroke Consultant presence in A&E; radiology team compliance with 1 hr scanning requirement.

ASPH stroke performance has dropped significantly in M11 and M12 with 59% and 30% of patients admitted directly to stroke unit in 4 hours for M11 and M12 respectively. Year to date performance for this indicator against a target of 90% is 53%. The vast majority of breaches are concerning lack of ring fenced stroke beds due to black status of the Trust. Despite this all stroke patients received full Multi-disciplinary team input even if placed as an outlier.

Maternity

Frimley North C-section rate recovered in March to 29.4% from the high of 37% in January. Implementation of the findings of the rapid review was underway. A C- section reduction improvement plan is now developed and was discussed at April Obs & Gynae Steering Group. Actions include; review of Consultant job plans to maintain 132 hours per week cover in Labour Ward; identify mentors for Staff grades and Consultants through the educational tutor group; midwifery staffing to be maintained at 1:30; provision of 1:1 care in labour; reviews of governance meetings and incident reporting; review of C-section rate and identify changes in practise.

Frimley South C-section rate has increased to 28% in M12 from previous consistent 23%. To be reviewed at CQRM.

MRSA – no cases reported for M12.

CDiff - WAM CCG have exceeded trajectory of 22 with a total of 35 cases for the year. **ASPH** reported x1 case of CDiff in March bringing their total for the year to 19 against trajectory of 9.

Bracknell & Ascot CCG, Slough CCG and Windsor, Ascot & Maidenhead CCG
Joint Quality Committee Chair's Report – M12 2014/15

Falls

Frimley South has reported a further x2 serious falls as SIRI during March in addition to the x2 reported in February. Concern still exists whether improvements implemented are yet sustained. **RBFT** falls incidence is of concern, however the number of serious falls has stabilised in last 6 months of year but the total for year-end has exceeded that of 2013/14. Falls numbers will continue to be closely monitored in 2015/16

18 Weeks RTT

18 Weeks Admitted standard (90%) was not achieved in M12 with B&A CCG performance at (89.25%); Slough CCG at (73.68%) & WAM CCG at (86.15%)

18 Weeks Non-Admitted standard (95%) was not achieved for Slough CCG (94.56%) and WAM CCG (94.92%)

18 Weeks Incomplete standard (92%) was not achieved for Slough CCG (91.6%)

Frimley North did not achieve 18 Weeks Admitted standard in M12 as previously indicated due to backlog work being undertaken. However the Trust is indicating achievement in April. Concerns relate to General Surgery, Orthopaedics and ENT. Actions to address shortfall in performance include 1) development of a business case for recruitment of an 8th General Surgeon, 2) establishing external support for orthopaedics. However sourcing of external support for ENT is more problematic as the issue is with providing complex and specialist nose surgery which the Trust cannot currently identify an alternative provider.

Both 18 weeks Non-admitted and 18 Weeks Incomplete standards were achieved indicating sustained improvement

Frimley South did not achieve 18 Weeks Admitted standard in M12 (87%) which was a planned failure as part of a national amnesty. However Frimley South has reduced the admitted backlog to below the sustainable target in 2014/15.

Both the non-admitted and incomplete targets were met for March and for Q4.

RBFT continue to not achieve 18 Weeks Admitted standard following their RTT reporting holiday. Areas of concern include General Surgery, Ophthalmology Urology and Trauma and Orthopaedics. An action plan to bring the Trust back into compliance was presented in February and updated for M12 indicating issues with data quality. A new Associate Director of Informatics has recently been appointed who is tasked with addressing gaps in data quality both in Performance and Quality. In addition other actions identified to regain compliance include 1) Development and implementation of a new Access Policy 2) Development of a daily dashboard to provide summary of RTT position within each Specialty and Care group 3) Improved monitoring of RTT assurance delivery chain 4) Real time reporting of demand for Outpatients and Theatres 5). Trajectory for improvement indicates the Trust will achieve compliance at aggregate level for all 3 standards from 1st August 2015 and full specialty level compliance will be achieved from 1st October 2015.

ASPH – 18 Weeks Admitted Performance for March was not achieved at 88.5%. Concerns relate to General Surgery, Urology, Ophthalmology and Gastroenterology due to endoscopy delays. Work to reduce the backlog in General Surgery during March has resulted in additional breaches in this Specialty. Additional backlog work will continue in Q1 and non achievement of 18 Weeks Admitted standard for General Surgery is likely to continue. Urology prioritisation of cancer pathway work continues to impact capacity for elective work. Actions taken to address this include recruitment of a substantive Urology Consultant position (in post from April) with additional 7th Consultant post proposed to reduce the capacity gap. Progress with tackling the backlog should begin in April 2015. Failure of the 18 Weeks Admitted standard in Gastroenterology is as a result of previously reported Endoscopy delays. Non-compliant performance in Ophthalmology is not expected to continue past March.

18 Weeks Non-Admitted standard was achieved at aggregated level for M12 but not at Specialty level for the following: Neurology, General Surgery, Gastroenterology and Dermatology. Small number of patients were affected by delays in MRI diagnostic reports in Neurology, endoscopy delays in General Surgery and Gastroenterology and limited outpatient capacity affected performance in Dermatology.

18 weeks Incomplete standard was achieved at aggregate level but performance in General Surgery and Urology again did not achieve due to endoscopy delays and urology capacity.

Bracknell & Ascot CCG, Slough CCG and Windsor, Ascot & Maidenhead CCG
Joint Quality Committee Chair's Report – M12 2014/15

6 Week Diagnostic Breaches

Diagnostic Waits standard of <1% was not met for all 3 CCGs during March with aggregate achievement of 1.7% across all 3 CCGs. This was primarily due to Frimley North breaches in non obstetric ultrasound. However performance is expected to recover and be compliant for April end 2015.

Frimley North has experienced delays in MRI, CT and sonography. An action plan was submitted in March and updated in April outlining actions to be taken and a trajectory to achieve compliance by end June. Actions taken include acquisition of mobile scanners at both Wexham and Heatherwood sites to increase CT capacity as an interim measure whilst replacement CT scanners are installed by year end at both sites. The Trust has increased sonography staff and clinics with additional clinics are being run at King Edward VII Hospital and in Bracknell Forest. Two agency sonographers have been hired with “golden hello” recruitment initiatives launched to attract permanent sonography staff. **Frimley South** has reported delays in endoscopy due to increase in demand. To address this non achievement the Trust has undertaken nurse recruitment in March continuing into April, with additional two colorectal locum consultants to be in post by April to address the backlog. April performance expected to achieve at 99%. **ASPH** did not achieve the 99% standard for diagnostic waits below 6 weeks in M12, as a result of continued pressures in Endoscopy. Sustained increase in the number of community referrals for endoscopy which has exceeded the Trust's core capacity. Average demand has been increasing by 11.6% per annum. Additional capacity has been sourced at Cobham Day Hospital but restrictive eligibility criteria have limited use of this facility. Trust modelling of delays indicates that it will take 6-8 weeks to reduce the backlog once short term capacity increases has been identified. A proposal has been submitted to NW Surrey CCG for approval. Once backlog is removed there will still remain a gap of 7-9 sessions per week. Actions to mitigate this gap include 1) additional consultant Gastroenterologist for June 2015, 2) commitment to reducing non urgent referrals by NW Surrey CCG 3) completion of an endoscopy demand and capacity exercise with Q4. Restricted endoscopy capacity will continue to impact patient wait times for some months whilst solutions are identified.

A&E

Frimley North: A&E 4hour waits have seen an improvement in performance. This improving trend has sustained in March (95.2%) but unfortunately the Trust just missed reaching the 95% target for the quarter. The introduction of the new medical model, improved team working and consultant presence at weekends/evenings has led to improved decision making and increased patient flow. Medical triaging at the front door allows patients to be seen and prioritised quickly, which is exceptional with very few hospitals working in this way. A&E National Patient Experience survey results were also positive and Friends and Family test feedback improving and number of complaints received in A&E have halved when compared to same period last year.

Frimley South: Pressure due to unprecedented numbers of patients presenting at A&E has resulted in the A&E target being breached in for Q4, although March performance met the standard. **RBFT:** Trust has not met the standard for March (92.5%) nor for quarter 4 (92.4%). Pressure from unprecedented numbers attending A&E has contributed to this poor performance. **ASPH** - failed to meet the 4 hr standard in M12 at (91.49%), and has not met the quarter (92.06% for Q4). However it was an improvement on Q3 performance of 88.56%. ASPH have experienced a difficult winter with increased attendances, delays in discharge of complex patients.

Ambulance Response Times

WAM CCG did not achieve red 2 calls in M12 and has not achieved this standard overall for the year.

Sleeping Accommodation Breach

WAM reported x1 case of mixed sex breach

ASPH x10 patients breached on two separate occasions in March when patients who had become fit for lower level care were unable to be stepped down due to lack of bed capacity. This resulted in mixed genders being together on HDU and ITU.

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