

Date:	27 th September , 2017
Meeting:	Various
Item Number:	Item 6
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

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GB Lead: <i>(Name, Title)</i>	Ian Holborn – CFO

Report Title:	CCG Operating report : September 2017
Decisions to be made:	To be reviewed by Governance groups through the reporting period cycle.

Continue to improve the quality of services	<input checked="" type="checkbox"/>	Improve patient experience	<input type="checkbox"/>
Reduced unwarranted variations in services	<input checked="" type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire	<input type="checkbox"/>
Deliver the best outcomes for every patient	<input checked="" type="checkbox"/>	Statutory/Regulatory	<input checked="" type="checkbox"/>

Executive Summary (Question, Options, Recommendations):
<p><u>Key Points raised by performance report : September 2017</u></p> <p>Constitutional performance reports (Bus Intelligence) - to end July 2017. –</p> <ul style="list-style-type: none"> • Incomplete Refer to Treatment times (RTT) small decline in period - 79 % v 80% v 81% PYM v 92% target • worsening in > 52 week breaches - 35 in July , 33 in June , 33 in May (v 31 in April) reporting month – all NLaG • Accident & Emergency 4 hours improved to 83.5% July v 82.5% June v 85% may from 78% in April • Cancer referral rates and treatments improved at 75% v 70% v 78% for April 62 days waits (v 85% target) • Fall back in ambulance response times 65% July v 72% for June v 71% May v 82% April for 8 mins – RED1 <p>Finance Performance report (Fin) – to end August 2017 –</p> <ul style="list-style-type: none"> • Reporting against revised annual plan under Capped Expenditure Programme of £90k surplus • deficit - £(1.308)k deficit variance to plan • Of this adverse variance - £(202)k related overtrades in secondary care (Spire and St Hughs) • £(1.250)k adverse form case management and Prescribing combined • NLAG contract value of £108m assumed – currently at £106m running annualised • Awaiting final plan sign off by NHSe which will cement plan and correct plan phasing. • Continued systems overheat likely in Q2 resulting from delays in NLaG CIP / CEP activity.

Contract Performance report (Contracting) – to end July 2017 -

- All providers - A&E activity now in line with plan v IAP plan (upward pressure)
- All providers – Outpatients above plan by 0.3% for YTD 17/18 v IAP plan (upward pressure)
- All providers – non-elective below plan by 12% for YTD 17/18 v IAP plan (downward pressure)
- Spire volumes increased in year (134%) , reflecting NLaG waits and patient choice (downward pressure)
- Non-elective activity linked to A&E admissions, PBR contract terms and population morbidity
- Upwards pressure in Spire expected in 17/18 – “ beefed up” contract management essential. (see MSK service solution)
- NLAG under- trading at £106m v CEP plan £108m currently – driven by outpatient activity.
- Hey mix back in line with activity lower than plan , and spend but £41k marginally below also.

Equality Impact	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Sustainability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Risk	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Risk of metrics and operational activity moving beyond affordable levels in 17/18
Legal	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Finance	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Contract and demand management imperative to ensure pay for demand and keep within Financial caps.

Patient, Public, Clinical and Stakeholder Engagement to date									
	N/A	Y	N	Date		N/A	Y	N	Date
Patient:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Clinical:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Public:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NL CCG Activity Summary Month 5 2017-18

