


<b>Date:</b>	14 <sup>th</sup> December 2017
<b>Meeting:</b>	CCG Governing Body
<b>Item Number:</b>	Item 10.1
<b>Public/Private:</b>	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

<b>Report Title:</b>
Contract Management Report
<b>Decisions to be made:</b>
To receive and note.

<b>Author:</b> <i>(Name, Title)</i>	Joint Paper of the CCG Provider Assurance Group. (Performance & Information, Finance, Contracting, Quality)
<b>GB Lead:</b> <i>(Name, Title)</i>	Ian Holborn Chief Finance Officer
<b>Director approval/signature</b> <b>(MUST BE SIGNED)</b>	
<b>Date:</b>	6.12.17

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

**Executive Summary (Question, Options, Recommendations):**

Contract Management Report covering Acute, Ambulance and Mental Health Contracts including covering executive summary narrative.

The report comprises of

- A) Contract Trading Position, a summary of which is shown below:

	YTD Variance £000's	% Variance	FOT Variance £000's
NLAG	557	1.1%	1126
Other Providers	201	2.1%	374
<b>TOTAL</b>	<b>758</b>	<b>1.2%</b>	<b>1500</b>

- B) Activity Variance Position

	YTD Variance	YTD Variance %
Non-Elective Spells	-648	-6.8%
Elective Spells (inc Daycase)	2	0.0%
Total Outpatient Attendances	1556	2.0%
A&E Attendances	1102	3.7%

Full provider breakdown, and coverage other non-acute contracts can be found within the report.

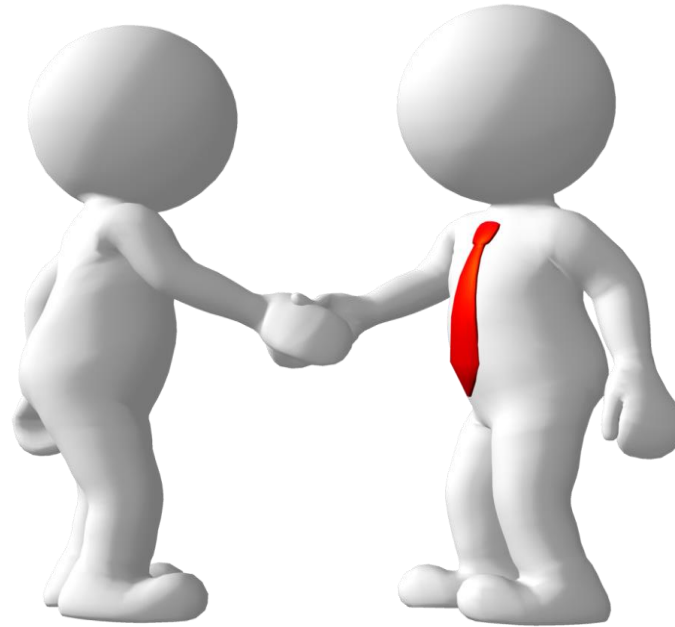
<b>Equality Impact</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Sustainability</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

<b>Risk</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Risk to Performance, Quality and Financial position of the CCG through its commissioned activity with providers.
<b>Legal</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<b>Finance</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Commissioned activity through providers impacts the financial performance of the CCG.

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

North Lincolnshire CCG

Contract Management Report  
2017/2018 Month 6



## **Contract Summary Report 2017/2018**

**Month: 6**

### **1a. Contract Executive Summary**

#### **Northern Lincolnshire & Goole NHSFT (NLAG)**

The contract continues to overtrade against the £103m CCG value by approximately **£550K**, forecasting to just over **£1.1m**. Some of the main drivers behind this position relate to increased levels of Elective and Non-Elective Colonoscopy and Upper GI Diagnostics. There are significantly higher levels of Emergency activity in Respiratory Medicine than was planned. Outpatients on the whole are over plan in Follow Ups, linked directly to the backlog being addressed by the Trust specifically in the key surgical specialties of Ophthalmology, Urology and Orthopaedics. There is a specific issue that is under further review in relation to Dermatology activity taking place at NLAG, which was planned to be delivered by Virgin Care. An update against this will be provided when finalised.

Since the previous report the Trust has confirmed that waiting times at Diana, Princess of Wales hospital and Scunthorpe hospital have increased with further pressures reported in Urology, Colorectal Surgery, Ear Nose & Throat, Ophthalmology, Gastroenterology, Cardiology, Respiratory Medicine and Rheumatology services.

They have also reported challenges in recruiting and retaining medical staff at Diana, Princess of Wales hospital and Scunthorpe hospital, leading to further pressure on service areas. Long waiting times and staffing issues remain a cause for concern. These issues continue to be reviewed closely by the CCG and Trust as part of the NL&G System Improvement Board and the contract management process.

The Trust has also reported an increased risk to achieving its financial objectives and an increased risk to meeting the agreed waiting time targets. During quarter 2, NL&G appointed a Turnaround Director to support improvement in these areas.

The CCG continues to work closely with NL&G to review this position, via the NL&G System Improvement Board (SIB) and the contract management process.

The System Winter Plan is focussed on deliering the A&E performance targets (locally agreed trajectory with NHS England is 90%). The most recent information from the System Winter calls with the Trust is that October performance is delivering against this level. It is expected that this will continue to achieve for the remainder of the financial year.

#### **Hull & East Yorkshire Hospitals NHST (HEY)**

The contract is currently under the plan value by circa £68K, a forecast position of £136K. Despite this some areas of the contract are under pressure, specifically Upper GI Electives, Plastic Surgery and Imaging. There appears to be an increasing amount of activity moving towards the Trust in terms of A&E. There is a specific overtrade within the contract in the area of Sleep Studies which will be raised specifically for more information at the South Bank Contract meeting with the Trust. Commissioning to review NICE guidance in this area.

A contract challenge remains with the Trust in relation to charging of patient transport.

The Trust continues to experience challenges in relation to the key constitutional targets, specifically A&E, Diagnostic Waiting times and RTT. The CCG continues to work with the Trust. A Local South Bank meeting has been established to focus on the specific needs of south bank CCG and its population.

#### **Rotherham Doncaster and South Humber NHSFT (RDASH)**

Cluster activity is now shown as part of the report, which shows activity below expected levels in but one service.

Clinical Case Management is due to start of the 1st November 2017, which aims to improve services for people who are in Specialist placement and optimise investment.

Overall we have seen an improvement in the performance of the IAPT service, which we anticipate will continue.

### **East Midlands Ambulance Service (EMAS)**

Activity is current below planned levels in all services. Although shadow monitoring shows a YTD undertrade of £110k this is for indicative purposes only, the contract is a block.

The initial ARP standards are reflective of the known rota and deployment mismatch that is being rectified via the ongoing rota consultation process. North and North East Lincolnshire continues to perform well when compared to the other CCG areas with East and South Lincolnshire being the outliers in regard to 90th percentile times. This matches the known shift in DCA output required. This being summarised as large DCA increase in the South of Lincolnshire with the follow on effect of reducing interdivisional drift to fill gaps. The NHSI led turnaround programme continues in conjunction with community and acute partners – however delays at hospital remain a key issue affecting service delivery.

60% of all pre-handovers at Scunthorpe General Hospital during Sept 17 were delayed longer than the 15 minute national standard. The total time lost to EMAS from this is approx 286 hours. This is being reviewed at the A&E delivery board and contract quality review meeting.

A Copy of both the CCG Exception report embedded within which is the Local Delivery Plan from EMAS are found as part of the Corporate Performance Report (see links in this document). These contain activity and performance levels, as well as supporting narrative and recovery actions.

### **Doncaster & Bassetlaw Hospitals NHSFT (D&B)**

Activity would suggest an increase in the volume of patient drift to the South of the patch. This provider is receiving more activity specifically in the areas of General Surgery, Orthopaedics and General Medicine. As with other providers there is an increasing level of Colonoscopy and Gastroscopy being delivered.

### **United Lincolnshire Hospitals NHST(ULH) - No exceptions to report**

### **Sheffield Teaching Hospitals NHSFT (STH) - No exceptions to report**

### **Sheffield Children's Hospitals NHSFT (SCH)**

There still appears to be a large overperformance in outpatient activity relating to therapy type activity (Speech & Language, Physiotherapy). This is however low cost so undertrades in Non-Elective and Other areas of the contract are causing an overall forecast undertrade of approx £25K.

### **Spire Healthcare**

The contract has continued at the same rate of overtrade, which is currently projected at circa £480K by year end. Activity does not appear however to be driven by an increase in demand as 1st Outpatients are not over trading. The majority of the overtrade relates to a combination of very high cost Hip and Knee procedures and outpatient follow up activity in Orthopaedics and Pain. The follow up rate has change from 1:2.5 in the plan to 1:3.4 in the actual, this is being discussed with the provider.

### **St Hughs**

As above this contract is also overtrading significantly to its size, the majority of which relates to Orthopaedic activity. Their review ratio however is as expected at 1:3.8 as planned.

**Contract Summary Report 2017/2018**

Month:

6

**2a. Acute Contract Trading Positions (As per Contract Monitoring Reports (CMR's))**

	CMR Position £000's						YTD Contractual Challenge/Adjustments				Adjusted Trading	
	Annual Plan	YTD Plan (Seasonal)	YTD Actual	YTD Variance	Seasonal Forecast Outturn	Annual Forecast Variance	KPI's	Validation	Other	Successfully Applied	YTD Variance	Annual Forecast Variance
NLAG £103m**	103,057	51,009	51,567	557	104,183	1,126	- 157.5				557	1,126
HEY	12,000	6,005	5,937	68	11,864	136	39.0	- 53.0	- 93.0	14	82	164
D&B	3,342	1,664	1,710	46	3,434	92	- 12.4	- 16.8			46	92
ULH	774	386	342	45	685	89	- 1.6	- 4.2			45	89
STH	1,430	706	672	35	1,360	70	-	-			35	70
SCH	434	211	200	11	412	23	-	- 19.1			11	23
Spire	852	428	669	241	1,332	480	- 1.9	-			241	480
St Hugh's	808	397	470	73	957	148	-	-			73	148
<b>TOTAL</b>												<b>1,500</b>
<b>Exc NLAG</b>												<b>374</b>

**2b. Non Acute Contract Trading Positions (As per Contract Monitoring Reports (CMR's))**

BLOCK CONTRACTS, VARIANCE SHOWN YTD IS INDICATIVE ONLY	CMR Position £000's						YTD Contractual Challenge/Adjustments				Adjusted Trading	
	Annual Plan	YTD Plan (Seasonal)	YTD Actual	YTD Variance	Seasonal Forecast Outturn	Annual Forecast Variance	KPI's	Validation	Other	Successfully Applied	YTD Variance	Annual Forecast Variance
EMAS	5,834	2,752	2,643	110	5,602	232			110	110	-	-
<b>TOTAL</b>												<b>1,500</b>
<b>Exc NLAG</b>												<b>374</b>

**Supporting Narrative:**

NLAG position shown against the CCG contract value £103m. The YTD actual is taken from the Contract Monitor statement but is adjusted to double the CQUIN value as the Trust only build 50%. Actuals are also adjusted to be consistent with the contract value of £103m to remove block elements that the CCG value does not include. NLAG Validation is to be included from Month 7 as the eMBED team need to make an amendment to the calculation rules.

HEY Contract challenge has been placed for double charging of PTS (invoice and block within contract). Confirmation not yet receive of success.

EMAS value shown is for indicative purposes as the current Contract basis is a block. Adjustment back to block value is made in the 'Other' Adjustments section.

**Contract Summary Report 2017/2018**

Month 6

3. Activity Variance Summary (As per Contract Monitoring Reports)

Acute	Non-Elective Spells				Elective/Daycase Spells				Total Outpatient Attendances				A&E Attendances			
	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance
NLAG £103m**	8,421	7,839	- 582	-7%	10,671	10,554	- 117	-1%	60,060	60,804	744	1%	27,943	28,959	1,016	4%
HEY	745	705	- 40	-5%	1,468	1,356	- 112	-8%	9,612	9,383	- 229	-2%	1,201	1,315	114	9%
D&B	161	155	- 6	-4%	372	418	46	12%	2,965	3,285	320	11%	471	438	- 33	-7%
ULH	64	63	- 1	-2%	115	108	- 7	-6%	899	924	25	3%	203	209	6	3%
STH	61	51	- 10	-16%	332	360	28	8%	1,297	1,442	145	11%	56	52	- 4	-7%
SCH	23	14	- 9	-39%	70	73	3	4%	263	406	143	54%	19	22	3	16%
Spire	-	-	-	-	149	256	107	72%	986	1,271	285	29%	-	-	-	-
St Hugh's	-	-	-	-	134	188	54	40%	833	956	123	15%	-	-	-	-

Non-Acute	Calls				Hear & Treat				See & Treat				See & Convey			
	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance
EMAS	15,702	14,728	- 974	-6%	2,090	1,742	- 348	-17%	2,911	2,569	- 342	-12%	8,731	8,460	- 271	-3%

Non-Acute	Adult Inpatients				Older Peoples Inpatients				Adult Community				Older Peoples Inpatients			
	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance	YTD Plan	YTD Actual	YTD Variance	YTD % Variance
RDASH - Clustered Activity Quarterly Only (Q1)	1,647	1,462	- 185	-11%	947	706	- 241	-25%	87,509	78,099	- 9,410	-11%	101,379	102,581	1,202	1%

**Supporting Narrative:**

\*\* NLAG Contract position is shown against the CCG contract value.

Although D&B showing as over trading on Outpatients, the financial impact of this is removed as there is a contract cap in place for New/Review ratios. This equates to an adjustment of -29.9K at Month 6 (included in the trading variance as no challenge is required). A large proportion of the additional Elective activity relates to diagnostic daycase procedures (Gastroscopy and Colonoscopy) and Orthopaedic activity.

EMAS and RDASH Now included, however note both are block contracts so these positions are for illustration only and have no financial impact on the contract trading position.