


<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>
Integrated Governance Report – Executive Summary

<b>Author:</b> <i>(Name, Title)</i>	Chloe Nicholson, Quality and Experience Manager  Louise Tilley, Senior Finance Manager  Emma Munday, Performance & Information Manager
<b>GB Lead:</b> <i>(Name, Title)</i>	Julie Warren, Turnaround Director
<b>Director approval/signature</b> <b>(MUST BE SIGNED)</b>	Julie Warren 
<b>Date:</b>	6.12.17

<b>Decisions to be made:</b>
To approve the proposed changes.

<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 checked="" type="checkbox"/>
<b>Deliver the best outcomes for every patient</b>	<input checked="" type="checkbox"/>	<b>Statutory/Regulatory</b>	<input checked="" type="checkbox"/>

<b>Executive Summary (Question, Options, Recommendations):</b>
<p>Since the CCG was formed in 2013, the Governing Body has received 3 separate reports covering Finance, Performance and Quality. Whilst these reports have provided the necessary information, to inform and assure the Governing Body, it is now proposed that this reporting process is refreshed in order to further streamline our approach to assuring the Governing Body of the CCG's delivery against its corporate responsibilities.</p> <p>We are proposing that the current standalone reports are replaced by one integrated report, which will include Finance, Quality and Performance, and this will take effect from February 2018.</p> <p>It is proposed that the Integrated Governance Report will include the following:</p> <ul style="list-style-type: none"> <li>• An Executive Summary, including an overview of the CCG's financial position and a summary of the CCG's achievement against constitutional, national and local quality and performance measures.</li> <li>• Detail on the key points to note, in relation to finance, quality and performance, including areas of concern and risk.</li> <li>• Update on recovery actions being taken, and due to be taken, to mitigate any potential risk.</li> </ul> <p>A further detailed position, in relation to finance, performance and quality, will continue to be monitored by each of the relevant subcommittee.</p>

<b>Equality Impact</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<b>Sustainability</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	The report highlights areas of concern and pressure in relation to sustainability of services and the CCG.
<b>Risk</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<p>The report supports the Quality/Performance section of the CCG Assurance Map, in particular Performance reporting – Financial and Quality. It provides management level assurance to the CCG to enable them to provide second line assurance to the GP Members.</p> <p>The content of the report also provides assurance in support of the NHS England Assurance Framework.</p> <p>In addition the report provides assurance against the CCG Board Assurance Framework (BAF) Risk FP1. Position monitored by CCG Engine Room and Governing Body.</p>
<b>Legal</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	This report covers the NHS Constitution and NHS Standard Contract with providers.
<b>Finance</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Ongoing Financial sustainability impacted.

<b>Patient, Public, Clinical and Stakeholder Engagement to date</b>									
	<b>N/A</b>	<b>Y</b>	<b>N</b>	<b>Date</b>		<b>N/A</b>	<b>Y</b>	<b>N</b>	<b>Date</b>
<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"/>	

## **Executive Summary**

### **Finance (attachments Month 7 Finance Report & Contract Management report)**

North Lincolnshire CCG has been placed under Legal Directions, which requires the CCG to be in financial balance by 31 March 2018. Work is currently on-going to address this requirement, and in particular to highlight further areas of QIPP savings / mitigating actions to compensate for under performance on some current QIPP schemes.

- YTD Performance

At Month 7 the CCG has reported a Year to Date overspend of £3,378k. This is a deterioration of £1,424k from Month 6. The main areas driving this overspend are Prescribing, Continuing Healthcare Services and Specialist Mental Health and Learning Disability Placements.

The Year to Date QIPP achievement at Month 7 was £4.36m against a target of £6.53m. This is an under achievement of £2.16m, mainly as a result of Continuing Healthcare and Prescribing.

- Forecast Position

At Month 7 the CCG continues to report achievement of its planned in year surplus of £90k, however we recognise risks to this delivery totalling £6.3m.

- System Position

At Month 6 the YTD system deficit was £14.2m, against the systems annual control total.

Total system risk to delivery of the annual control total was £26.1m (NL CCG £6.3m, NLAG £19.8m, NEL CCG nil).

All figures are still to be confirmed by each organisation.

### **Performance (attachment Corporate Performance Report – September 2017)**

A&E 4-hour waiting times achieved the NHSE/NHSI minimum performance requirements for September and performance is expected to continue to achieve for the remainder of this financial year.

Referral to Treatment Times performance against the 18 week target continues to underperform and fall significantly below required levels. The main driver behind this is the position locally at Northern Lincolnshire & Goole Hospitals NHSFT. The Trust are undertaking a demand and capacity review and the position continues to be reviewed closely as part of NL&G System Improvement Board (SIB) and its subcommittees, and the NL&G contract meeting process.

The CCG has agreed a local recovery plan with the Trust which will aim to maintain a performance of 80% throughout 2017-18. The 80% target was missed for incomplete pathways since July 2017.

NLAG also continue to underperform in both Cancer Waiting Times and Diagnostic 6 Week Waits, specifically endoscopy and CT.

The NL&G Quality Review Group are working to further understand the impact of staffing pressures and progress with the Trust's bid for diagnostic equipment funding and development of the recovery plan.

Ambulance ARP Performance is also an area of concern in relation to new standards. This is reflective of the known rota and deployment mismatch that is being rectified via the ongoing rota consultation process. North and North East Lincolnshire continue to perform well when compared to the other CCG areas covered by EMAS. The NHSI led turnaround programme continues in conjunction with community and acute partners however delays at hospital remain a key issue affecting service delivery. The position is being closely monitored by the A&E Delivery Board and Contract Management Groups.

### **Quality (Attachment Quality Report)**

- **Waiting Times**

Northern Lincolnshire & Goole NHS Foundation Trust (NL&G) 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, Rheumatology and diagnostic services.

- **Mortality rates**

The patient mortality rate at NL&G has increased further since the previous report. Hospital mortality rates are measured via the national Summary Hospital Mortality Indicator (SHMI) dataset, and the latest official SHMI position at NL&G is 114 against the national average of 100. Overall, NL&G now falls within the 'higher than expected' range for patient mortality.

- **Infection Prevention & Control**

The CCG has identified an increase in the number of Clostridium Difficile (C.Diff) cases and MRSA bacteraemia cases, reported by hospital and community providers, relating to North Lincolnshire patients, to date during quarter 3. These cases are being reviewed by the CCG's Infection Prevention & Control Team, in order to identify any themes and trends.

- **Mixed Sex Accommodation**

NL&G continues to report an increase in the number of patients that are placed on a mixed sex ward, due to challenges in the lay out of the ward environment, in some areas. As a consequence of these challenges, NL&G has implemented several supportive initiatives to protect patient's privacy and dignity. The position continues to be reviewed via the NL&G contract management process.