



MEETING:	Haringey Clinical Commissioning Group Governing Body Meeting
DATE:	Wednesday, 30 November 2016
TITLE:	Performance & Quality Summary
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SUMMARY:

As the Governing Body will be aware, there is an increasing focus on the performance of Mental Health Services, with more national standards being established, against which both Trusts and CCGs will be monitored.

The reports for discussion this month are attached in two appendices – appendix 5.2b provides an introduction and overview of Mental Health Standards and Issues - which includes Mental Health prevalence in Haringey, Mental Health service provision for Haringey patients, Key Performance Indicators (KPIs), current performance (local and regional), an overview of performance and current challenges and future projects, standards and initiatives (local, regional and national).

Appendix 5.2c is a summary of performance & quality areas, which provides an overview of the performance of Haringey Clinical Commissioning Group (HCCG) and its main providers in relation to performance and quality key indicators. Members will notice that this is a slightly different format to the previous months Integrated Contract Monitoring Report (ICMR), this is in recognition of the content of other Governing body reports and the desire to reduce duplication.

As previously noted, reporting timetable differences mean the finance, performance and quality sections of the report contain different months' activity. This is highlighted within the relevant sections of the Performance & Quality Summary.

Contained in the report and of particular note:

Performance

- There has been a significant improvement in A&E performance at North Middlesex University Hospital (NMUH) which has contributed to the HCCG performance improvement to 93% (target 95%);
- HCCG achieved seven out of the eight national cancer standards in August 2016. The under achievement was in the 62-day GP referral standards, due to performance challenges at NMUH, Royal Free and UCLH;
- The HCCG-wide diagnostic wait standard was not achieved in August 2016 (0.7%), but provisional September 2016 data shows an improving trajectory.

Quality

North Middlesex University Hospital (NMUH)

The Care Quality Commission (CQC) Comprehensive Inspection was carried out 20-23 September 2016. It is anticipated that the CQC report will be available in early 2017.

The mortality rate continues to show an improving position. The latest HSMR rolling 12-month figures show that whilst mortality is still slightly higher than expected (i.e. above 100), there has been a steady month on month fall from a high of 114.2 in June 2015 to 102.8 in June 2016.

The 2015 National Cancer Patient Experience Survey (NCPES) was published in July 16. NMUH was the lowest performing trust in the country and the trust scored below expectations on 30 questions. The Trust have developed a cancer patient experience improvement plan and have prioritised areas where they are 10% out of range from the national average on responses to questions in the survey. A cancer lead nurse post has been recruited to and a business case is being developed to expand the Oncology Consultant numbers.

Whittington Health (WH)

The Trust has continued throughout this year to perform poorly against a number of community performance standards. The Trust have developed improvement plans for the District Nursing Service and the ongoing problems they are facing with recruitment and retention of both Registered Nurses and Health Care Assistants. The division have recruited four Team Leaders who have all received development in leadership training. The Trust believe these roles will provide the necessary leadership and management the service requires for it to progress.

Barnet Enfield and Haringey Mental Health Trust (BEHMHT)

BEH MHT has developed a comprehensive action plan which has been submitted and now agreed by the CQC and commissioners. Over the summer, the Trust informed commissioners that additional resource will be required to enable the Trust to make some of the improvements required by the CQC. As detailed in the CCG risk register, commissioners remain in discussion with the Trust regarding the request for additional resource.

SUPPORTING PAPERS:

Appendix 5.2b – Mental Health - An Introduction and Overview of Performance
Appendix 5.2c – Performance & Quality Summary

RECOMMENDED ACTION:

The Governing Body is asked to **DISCUSS** and **COMMENT** on the report content and **NOTE** the wider performance challenges.

Objective(s) / Plans supported by this paper: Our objective to commission high-quality, valued and responsive services, working in partnership with the public to make the best use of resources.

Audit Trail: The Performance & Quality Summary is a standing item on the agenda of the Governing Body.

Patient & Public Involvement (PPI): There was no patient involvement in this paper.

Equality Analysis: N/A

Risks: As set out below.

Resource Implications: There are no particular resource implications.