



A healthier future for our communities


**Fylde and Wyre
Clinical Commissioning Group**
GOVERNING BODY MEETING

Date of meeting	20 th September 2016	Agenda item number	14
Title of report	CCG Improvement and Assessment Framework Update		
Paper Presented by:	Peter Tinson, Chief Operating Officer		
Paper prepared by:	Pippa Hulme, Senior Planning & Performance Manager		

CCG strategic objective supported by this paper: (please tick ✓)	Develop and maintain an effective organisation	✓
	Commission high quality, safe and cost effective services which reduce health inequalities and improve access to healthcare	✓
	Effectively engage patients and the public in decision making	✓
	Develop excellent partnerships which lead to improved health outcomes	✓
	Make the best use of resources	✓

Purpose of report

To provide members with an update on the 2016/17 CCG improvement and assessment framework indicators published on MyNHS on 7th September 2016.

Recommendation

The Governing Body is asked to receive this paper for information and note:

- Our recent 'outstanding' assessment related to the 2015/16 assessment process.
- The recent initial assessment published relates to three of the six clinical priority areas of the CCG Improvement assessment Framework 2016/17 the remaining three will be published over the coming months.
- A number of issues in the published data which negatively affect our position and which with more up to date local data provide an improved position against the initial published rating.
- For all the indicators we have improvements underway or planned which clinical and commissioning leads are reviewing to identify whether further improvements are required and the timescale and anticipated impact of the current improvements underway.
- To recognise that the focus of current commissioning work plans may need to change to support the performance improvement in these areas.

Please indicate which Group this has been discussed with (please tick ✓)

Executive Management Team	✓	Quality Improvement and Governance Cttee	
Clinical Commissioning Committee		Finance and Performance Committee	
Audit Committee		Remuneration Committee	
Council of Members		Other/Not Applicable	
Patient and Public Engagement:	See NHS England publication 'CCG Improvement and assessment Framework' – 31 March 2016		
Equality Impact Assessment:	The CCG Assurance Framework supports CCGs to transform local services and improve outcomes for all patients		
Resource Implication(s):	Not applicable		
For further information please contact:	Pippa Hulme, Senior Commissioning Manager- Planning & Performance		

GOVERNING BODY MEETING – 20 SEPTEMBER 2016

CCG IMPROVEMENT AND ASSESSMENT FRAMEWORK

1. INTRODUCTION

Members are reminded that the new assessment framework for CCGs published at the end of March 2016, includes ratings published online to show patients how their local health service is performing in six important areas including cancer, dementia, diabetes, mental health, learning disabilities and maternity care.

An initial assessment of CCG performance was published on line on the 7th September 2016, covering three out of the six areas: Diabetes, Dementia and Learning Disabilities. For the remaining three areas publication is expected over the coming months. Each is based on metrics in the framework that are verified by independent panels chaired by experts in each field.

This will be followed by an annual assessment in June 2017 which will incorporate additional information from the local Sustainability and Transformation Plans and other relevant data.

As well as the six areas verified by the panels, the new framework will also report CCG performance in 29 key areas, including new models of care, efficiency and conflicts of interest management.

2. CCG IMPROVEMENT AND ASSESSMENT FRAMEWORK 2016/17 INITIAL ASSESSMENT OUTCOMES

This early assessment provides a snapshot of CCGs' performance in the areas measured by the specific indicators in the framework, and is a useful starting point for future assessments. The assessments are described as: top performing; performing well; needs improvement; and, greatest need for improvement.

The CCG initial ratings are as follows:

Clinical Priority Area	Overall Rating
Dementia	Greatest need for Improvement
Diabetes	Needs Improvement
Learning Disabilities	Needs Improvement

3. SIX CLINICAL PRIORITY AREAS BENCHMARKING AND ANALYSIS

A review of all indicators has been undertaken with all commissioning leads and this analysis has been shared with all clinical leads to identify whether we need to do more to improve outcomes for our population within the identified clinical areas.

Governing Body members are asked to recognise that the focus of current commissioning work plans may need to change to support improved performance in these areas. Therefore over the coming weeks as more detailed analysis is undertaken, members may be requested to support the reprioritisation of current activities agreed within the Annual Commissioning Plan.

The following is a summary of the NHSE data used for assessment, the targets and our more current or local data, where available, together with current improvements identified for each of the six clinical areas.

DEMENTIA

The 2016 initial rating for dementia considers two indicators: dementia diagnosis rates and care plan reviews for people with dementia.

60.2% - Estimated diagnosis rate for people with Dementia

The figure of 60.2% is inaccurate as we believe it does not include all practice data. We monitor monthly against the 67% target within the performance dashboard and local CCG data as at July 16 shows we are achieving 63.8%. The Governing Body is aware from reports received at previous meetings of the actions and progress to date in relation to this target and the adverse effect on the target as a result of the increase in prevalence calculation (new care home based calculation rolled out nationally) significantly above any other Lancashire CCG. If we continue to monitor against our previous prevalence indicator we are consistently achieving the 67% target based on the initial prevalence target.

As a result of the significant focus in this area, data from April 2016 to July 2016 for Fylde and Wyre has seen an increase in diagnoses of 138 cases (4.6%) which is the highest increase of any of the Lancashire CCGs.

73.3% - of patients diagnosed with dementia whose care plan has been received a face to face review in the preceding 12 months

This is a new indicator we have not previously monitored and has been ranked by NHSE within this process, using quartile thresholds with the top performing quartile being 79.5-100%. We have commenced in taking steps to increase the reviews undertaken by moving care plan reviews away from the specialist service provider to the responsibility of the GP, including as a KPI within the GP Quality Contract since April 2016. We have provided support and templates for practices to complete and record the reviews and would therefore anticipate an increase in performance during this financial year.

DIABETES

The overall rating for diabetes considers two indicators which are recognised measures of whether patients with type 1 or type 2 diabetes are being successfully supported to manage their condition.

42.8% - of diabetes patients have achieved all the NICE-recommended targets

This data is from 2014/15 and, under this assessment has been given a green rating with achievement above 40.2% target. It is also above the national average. A number of initiatives are under way in Fylde and Wyre targeted at making improvements to a range of diabetes care – not necessarily just within this indicator - but these won't be evident in the immediate term if backdated data continues to be used.

2.1% - of people with diabetes diagnosed for less than a year who attended a structured education course

This figure is correct for 2014/15 and below the national average target of 5.9%, however 37.5% of patients with type one diabetes and 82% with type two diabetes were offered the structured education course by their GP and the CCG is looking at ways to turn those offers into course acceptances and therefore timescales and impacts are to be determined. The overall CCG strategic intention is to increase uptake of newly diagnosed to 50% by 2021/22.

LEARNING DISABILITIES

For Learning Disabilities, two indicators are combined to give an overall rating: reliance on specialist inpatient care for people with a learning disability and/or autism and proportion of people with a learning disability on the GP register receiving an annual health check.

88 – Rate of inpatients per million registered adult population for each transforming care partnership. CCGs are then assigned the score of the Transforming Care Partnership (TCP) they belong to

This data is the current Lancashire (TCP) position and is why we have fast track status in place, however Fylde and Wyre performance position within this overall figure is:

- We have discharged all long-stay patients within the original timeframe and in addition we have further invested locally to ensure that Fylde and Wyre is good at identifying admissions into learning disability specialist or mental health beds, by recruiting a fixed term local transforming care lead funded by the CCG, (hosted with the community learning disability provider) to ensure patients who may be at risk of admission are identified and supported and managed as appropriate. This post is working in collaboration with the pan-Lancashire transforming care posts funded from fast track central funding and employed within the CSU.
- The CCG has overseen a reduction in the number of inpatients, a position not significantly different from the national position.
- There has been a local reduction between 2014 and 2015, as shown on LD SAF 2015 data spreadsheet (ref: LD SAF 2015).
- The CCG has improved its ability to identify people with and who fall under the transforming care criteria. The CCG has been holding monthly transforming care meetings to review all inpatients, people discharged and those at risk of admission. The meeting involves Lancashire County Council representatives, safeguarding, community learning disability team staff and the lead GP for learning disabilities and commissioning manager. The CCG has therefore established processes for knowing its patient cohort and has held and participated in pre-admission and post-admission care and treatment reviews (CTRs).

37% - of people with a learning disability who are on the GP register and receiving an annual health check during the year. Measured as percentage of the CCG's registered learning disability population

Although we have been unable to validate this data we were aware from the 2014 Single Assessment Framework (SAF) that the CCG needed to improve health checks carried out in primary care locally and a number of actions are in place to support improvement this position:

- A GP learning event will take place on 28 September 2016 around learning disabilities. The agenda is very focussed on supporting GPs in completing health checks and this reflects some of the points made in a June 2016 paper to the Transforming Care Partnership board.
- A learning disabilities section including requirement to perform health checks has been included within the GP Quality contract.

4. Recommendation

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