

Vale of York CCG

Core Performance Dashboard

June 2013

Report Compiled by:
Report Checked by:
Report Date:

Business Intelligence, North Yorkshire and Humber Commissioning Support Unit
Vale of York CCG Chief Operating Officer
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SUMMARY OF PERFORMANCE

Current assessment

Domain 1: Preventing people from dying prematurely



Domain 2: Enhancing quality of life for people with long term conditions



Domain 3: Helping people recover from episodes of ill health or injury



Domain 4: Ensuring that people have a positive experience of care



Domain 5: Providing a safe environment and protecting from harm



Domain 6: Enhancing quality of life for people with Mental Health conditions (LYPFT)



Finance



QIPP



* The indicators used in this domain are not up to date due to delays in receiving data from YAS and the HSCIC. The cause of the delay is mainly due to the changing roles of organisations after 1 April 2013 and the associated information governance issues that have arisen. We expect to have these indicators updated in the next Dashboard, but they will be circulated to the CCG executive team as soon as they are available.

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Domain	Indicator	Objective	Coverage	Period Covered	Planned Performance	Actual Performance	RAG rating	Recovery plan in place	Recovery date	Assurance
Domain 1: Preventing people from dying prematurely	Ambulance response times: percentage of Red 1 999 calls responded to within 8 minutes.	Minimum of 75% during 2012-13	CCG	Mar-13	75%	66.7%	R	Yes	remains TBC	During the time period being reported there were 90 Red 1 category calls of which 30 responses took longer than 8 minutes. The 75% target was therefore underachieved by 8 incidents. Trajectory being sought regarding improvement.
Domain 4: Ensuring that people have a positive experience of care	Number of patients still waiting for treatment where they have waited 52 weeks or more after referral by their GP or other healthcare professional.	Zero	CCG	Apr-13	0	1	R	Yes	end of Q1	The latest update from York Foundation Trust is that there were 3 people waiting over 52 weeks at the end of May 2013. Two General Surgery (1 Scarborough and 1 York) and one 1 Ophthalmology (Scarborough). The CCG is assured that the situation is improving and will continue to monitor this closely with the Trust.
	Proportion of GP referrals to first outpatient appointments booked using Choose and Book	70.0%	CCG	Mar-13	70%	23%	R			Choose and book has been discussed in the Governing Body and while performance against the target for use of the choose and book system is poor, the CCG is reasonably assured that GPs do discuss and offer choice to patients. Development of a referral support service will further this commitment.
Domain 5: Providing a safe environment and protecting from harm	Number of patients with Methicillin Resistant Staphylococcus Aureus (MRSA) bacteraemia infections.	No more than 0	CCG	Apr-13	No more than 0	1	R			In the past we have reported all the cases identified at York Foundation Trust that were apportioned to the provider (cases where the specimen date was two days or more after admission). The CCG is accountable to all its patients regardless of provider, regardless of the specimen date, and so we are now reporting all cases (including those referred to as "community" cases where the specimen date was within two days of admission) against a zero tolerance target. In April there was one "community" case reported for Vale of York patients. This case was identified by York Foundation Trust, but the specimen date was within two days of admission, and thus not apportioned to York Foundation Trust.
	Number of patients with Clostridium difficile infections.	No more than 71	CCG	Apr-13	No more than 6	8	R	Yes	13/14 trajectory to be agreed	C.Difficile: In the past we have reported all the cases identified at York Foundation Trust the specimen date was three days or more after admission). The CCG is accountable to all its patients, regardless of provider, and regardless of the specimen date, and so we are now reporting all cases (thus including those referred to as "community" cases where the specimen date was within three days of admission) against a maximum target for the CCG set by NHS England of 71 cases in 2013-14. In April there were a total of 8 cases reported for Vale of York patients of which 6 were reported by York Foundation Trust. Of these 6 cases, 2 were contracted whilst under the care of York Foundation Trust and will count towards their target of no more than 43 in 2013-14, and 4 were contracted in the wider community where it is often difficult to identify exactly where the infection was contracted. The other 2 cases were at Leeds Teaching Hospitals NHS Trust, both of which were apportioned to "community".
Domain 6: Enhancing Quality of Life for People with Long Term Conditions	Number of episodes of crisis resolution/home treatment care provided	Minimum of 1776 in 2012-13	PCT	Q4 12/13	444	388	R	No	estimated July 2013	As previously reported, as part of 2013/14 contract discussions we will be working towards data disaggregated into CCG's which will enable the CCG to understand the performance as it relates specifically to Vale of York CCG.
	Mental Health Delayed Transfers of Care.	Maximum Delay of 7.5%	CCG	Apr-13	7.5%	8.27%	A			These issues relate to performance at Leeds and York Partnership Foundation Trust and are being addressed through contract management routes. Improvements have been made in 2013/14 to date, however action plans are still in development with a view to achieving improvements in Quarter 2.
	Proportion of admissions to inpatient MH services that were gate kept by the crisis resolution home treatment teams.	95%	CCG	Apr-13	95.0%	85.7%	R			
	Cumulative Adult MH inpatient Bed Occupancy rate (including home leave).	Maximum safety compliance of 90%	CCG	Apr-13	90.0%	97.2%	R	Yes	To be agreed	
	Rate of re-admissions to adult MH inpatient beds within 28 days of discharge (excluding Forensic Services in line with national codes).	Decreasing with Maximum of 4%	CCG	Apr-13	4.0%	7.1%	R			
Proportion of people who have depression and/or anxiety disorders who receive psychological therapies (IAPT).	9.6% for 2013-14	PCT	Feb/Apr-13	1.46%	0.8%	R				

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date
			Period Covered	Planned Performance	Actual Performance	RAG Rating	
Domain 1: Preventing people from dying prematurely							
Ambulance response times: percentage of Red 1 999 calls responded to within 8 minutes.	Minimum of 75% during 2012-13	CCG	Mar-13	75%	66.7%	R	70.7%
Ambulance response times: percentage of Red 2 999 calls responded to within 8 minutes.	Minimum of 75% during 2012-13	CCG	Mar-13	75%	75%	G	73.9%
Ambulance response times: percentage of Red 1 999 calls responded to within 19 minutes.	Minimum of 95% during 2012-13	CCG	Mar-13	95%	97.8%	G	97.8%
Ambulance response times: percentage of Red 2 999 calls responded to within 19 minutes.	Minimum of 95% during 2012-13	CCG	Mar-13	95%	95.1%	G	95.3%
Percentage of patients urgently referred by a primary care professional for suspected cancer that are seen by a specialist within 14 days.	Minimum of 90% during 2012-13	Provider (Signal Report)	Mar-13	90%	95.7%	G	-
Percentage of patients referred by a primary care professional for treatment/investigation of breast symptoms (excluding those where cancer is suspected) who are seen by a specialist within 14 days.	Minimum of 93% during 2012-13	Provider (Signal Report)	Mar-13	93%	96.9%	G	-
Percentage of patients that wait no more than 31 days from the date of the decision to undergo treatment to receive their first stage of treatment for cancer.	Minimum of 96% during 2012-13	Provider (Signal Report)	Mar-13	96%	99.2%	G	-
Percentage of patients that wait no more than 31 days to receive their second or subsequent stage of treatment for cancer where that treatment is drug therapy.	Minimum of 98% during 2012-13	Provider (Signal Report)	Mar-13	98%	100%	G	-
Percentage of patients that wait no more than 31 days to receive their second or subsequent stage of treatment for cancer where that treatment is surgery.	Minimum of 94% during 2012-13	Provider (Signal Report)	Mar-13	94%	100%	G	-
Percentage of patients that wait no more than 31 days to receive their second or subsequent stage of treatment for cancer where that treatment is radiotherapy.	Minimum of 94% during 2012-13	Host ProvComm	Jan-13	94%	n/a	G	n/a
Percentage of patients urgently referred by a primary care professional that wait no more than 62 days from the date of referral to receive their first stage of treatment for cancer.	Minimum of 85% during 2012-13	Host ProvComm	Jan-13	85%	89.3%	G	88.0%
Percentage of patients referred by an NHS Screening Service that wait no more than 62 days from the date of referral to receive their first stage of treatment for cancer.	Minimum of 90% during 2012-13	Host ProvComm	Jan-13	90%	100%	G	93.1%
Percentage of patients that have their priority upgraded by a consultant that suspects cancer that wait no more than 62 days to receive their first stage of treatment.	Minimum of 90% during 2012-13	Host ProvComm	Jan-13	90%	100%	G	100%
Domain 1 - Overall Red/Amber/Green (RAG) rating						A	
Domain 2: Enhancing quality of life for people with long term conditions							
Proportion of people with a LTC who are "supported by people providing health and social care services to manage their condition".	Top Quartile	CCG	Q2 12/13	Top Quartile	89.2%	G	-
Unplanned hospitalisation for chronic ambulatory care sensitive conditions (adults).	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Same	G	-
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19's	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Same	G	-
Domain 2 - Overall RAG rating						G	

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date
			Period Covered	Planned Performance	Actual Performance	RAG Rating	
Domain 3: Helping people recover from episodes of ill health or injury							
Emergency admissions for acute conditions that should not usually require hospital admission.	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Worse	A	-
Percentage of stroke patients that spend at least 90% of their time in hospital on a dedicated stroke ward.	Minimum of 80%	Host ProvComm	Q4 12/13	80%	83.9%	G	85.7%
Percentage of non-admitted patients, who have a Transient Ischaemic Attack and a higher risk of stroke, who are treated (including all relevant investigations) within 24 hours of contacting a healthcare professional.	Minimum of 60%	Host ProvComm	Q4 12/13	60%	77.6%	G	80.8%
Domain 3 - Overall RAG rating						A	

Domain 4: Ensuring that people have a positive experience of care							
95th percentile for admitted patients that were on a RTT pathway	Maximum 23 weeks	CCG	Apr-13	23	22.9	G	-
95th percentile for non-admitted patients that were on a RTT pathway	Maximum 18.3 weeks	CCG	Apr-13	18.3	16.8	G	-
95th percentile for patients still on a 18 week pathway	Maximum 28 weeks	CCG	Apr-13	28	20.5	G	-
Percentage of patients admitted for hospital treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 90% during 2012-13	CCG	Apr-13	90%	91.8%	G	-
Percentage of non-admitted patients treated by a consultant (or consultant led service) within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 95% during 2012-13	CCG	Apr-13	95%	96.2%	G	-
Percentage of patients still waiting for treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 92% during 2012-13	CCG	Apr-13	92%	93.3%	G	-
Number of patients still waiting for treatment where they have waited 52 weeks or more after referral by their GP or other healthcare professional.	Zero	CCG	Apr-13	0	1	R	-
Percentage of patients that waited over 6 weeks for a diagnostic test.	<1% of patients	CCG	Apr-13	<1%	0.83%	G	-
Percentage of patients that wait no longer than 4 hours in A&E from arrival to either discharge or admission.	Average of 95% over 2012-13	Host provider	May-13	95%	97.2%	G	-
Mixed Sex Accommodation Breaches per 1000 FCEs (No of breaches)	<1 per 1000 FCEs	Host ProvComm	Mar-13	<1	0.0 (0)	G	-
Patient Experience survey (IP 2012 Q41) involved satisfactorily in decisions about care and treatment	Same or Best Perf Category	Host provider	2012	Same or Best Perf Category	Same	G	-
Patient Experience survey (IP 2012 Q73) overall level of respect and dignity	Same or Best Perf Category	Host provider	2012	Same or Best Perf Category	Same	G	-
Proportion of GP referrals to first outpatient appointments booked using Choose and Book	70%	CCG	Mar-13	70%	23.0%	R	-
Domain 4 - Overall RAG rating						A	

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date
			Period Covered	Planned Performance	Actual Performance	RAG Rating	
Domain 5: Providing a safe environment and protecting from harm							
Number of patients with Methicillin Resistant Staphylococcus Aureus (MRSA) bacteraemia infections.	No more than 0	CCG	Apr-13	No more than 0	1	R	1
Number of patients with Methicillin Sensitive Staphylococcus Aureus (MSSA) bacteraemia infections.	-	CCG	Apr-13	-	4	G	4
Number of patients with Clostridium difficile infections.	No more than 71	CCG	Apr-13	No more than 6	8	R	8
Percentage of adult inpatients who have a Venous Thrombosis Embolism (VTE) risk assessment on admission.	90%	Host provider	Mar-13	90%	93%	G	93.2%
Summary Hospital Mortality Index	As expected or better	Host provider	Q2 12/13	As expected or better	As expected	G	As expected
Total Never Events reported	0	CCG	May-13	0	0	G	0
Total Number of Serious Incidents	-	CCG	May-13	-	4		9
Domain 5 - Overall RAG rating						R	

Domain 6: Enhancing quality of life for people with Mental Health conditions (LYPFT)							
Number of episodes of crisis resolution/home treatment care provided	Minimum of 1776 in 2012-13	PCT	Q4 12/13	444	388	R	1624
Delayed Transfers of Care.	Maximum Delay of 7.5%	CCG	Apr-13	7.5%	8.27%	A	Improving on last month
Number of newly diagnosed cases of first episode psychosis for whom early intervention is provided.	Minimum of 34 in 2013/14	CCG	Apr-13	3	3	G	3
Proportion of admissions to inpatient services that were gate kept by the crisis resolution home treatment teams.	95%	CCG	Apr-13	95.0%	85.7%	R	
Proportion of patients on Care Programme Approach (CPA) discharged from inpatient care who are followed up within 7 days.	95%	CCG	Apr-13	95.0%	100.0%	G	
Cumulative Adult inpatient Bed Occupancy rate (including home leave).	Maximum safety compliance of 90%	CCG	Apr-13	90.0%	97.2%	R	
Rate of re-admissions to adult inpatient beds within 28 days of discharge (excluding Forensic Services in line with national codes).	Decreasing with Maximum of 4%	CCG	Apr-13	4.0%	7.1%	R	7.1%
Proportion of people who have depression and/or anxiety disorders who receive psychological therapies (IAPT).	9.6% for 2013-14	PCT	Feb/Apr-13	1.46%	0.8%	R	
Proportion of those referred to IAPT services that enter treatment.	Minimum of 50%	PCT	Feb/Apr-13	50.0%	55.1%	G	
Proportion of IAPT service users who complete treatment who are moving to recovery.	Minimum of 50%	PCT	Feb/Apr-13	50.0%	50.7%	G	
Number of Mental Health Never events.	0	CCG	Apr-13	0	0	G	0
Domain 6 - Overall RAG rating						R	

KEY PERFORMANCE INDICATORS (KPI's) - SUPPORTING NOTES

RAG (red/amber/green) rated performance for latest performance

Green = achieved planned performance for current period

Amber = within 5% of planned performance for current period

Red = under-performing against planned performance by more than 5%

For items based on quartiles, Green = Upper quartile, Amber = Inter-quartile range, and Red = Lower quartile

For items based on trend, Green = gradient in line with objective, Amber = gradient is "flat", Red = gradient is opposite to objective.

For mortality, Green = either "as expected" or "lower than expected", Red = "higher than expected".

Key Performance Indicator (KPI) level scoring

The RAG rating for each indicator is converted into a score for each item: Green = 3 points, Amber = 1 point, and Red = 0 points.

However, in some cases the indicators are grouped to provide a better balance between different areas. The scoring matrix column indicates where groups exist.

In these cases, the combined score is derived from a matrix of possible combinations of RAG. The combinations are as follows:

Red in any individual indicator results in Red overall for the group

If two indicators are grouped, then a Green and Amber combination results in Amber overall.

If three indicators are grouped, then if two indicators are Amber the group is Amber, if one indicator is Amber, the group is Green.

Groups where the individual indicators are wholly Green, Red or Amber, retain the same overall RAG.

Domain Level Scoring

The scores are summed and expressed as a percentage of the total maximum possible score for each domain.

As there are a varied number of indicators within each domain, it is necessary to apply different scoring criteria to attribute an overall RAG rating which is presented in the summary assessment.

The scoring criteria is as follows:-

Domains 1, 4 & 6 **Green** = 90% or higher
 Amber = 75% or higher, but less than 90%
 Red = Less than 75%

Domains 2, 3 **Green** = 80% or higher
 Amber = 65% or higher, but less than 80%
 Red = Less than 65%

Domain 5 **Green** = 85% or higher
 Amber = 70% or higher, but less than 85%
 Red = Less than 70%

Coverage

The data presented is available in a number of formats regarding coverage. The following sets out a brief explanation of the terms used:

CCG - the data are based on the registered patients of the relevant CCG practices, regardless of provider.

Patch - this is an area that approximates to the CCG geographical coverage, normally based on the former PCG/PCT "patches" e.g. Selby & York.

Host Provider - this data relates to all the patients of a provider "hosted" by the CCG regardless of which practice they are registered with e.g. YHFT is hosted by VoYCCG.

Host ProvComm - this data relates to the Host provider as described above, but is limited to patients that are the responsibility of NHS North Yorkshire and York (not exclusively the CCG).

Combined York/Scarb - from July-12 onwards Scarborough General Hospital Trust merged with York Foundation Trust and therefore official data is submitted as York Foundation Trust only.

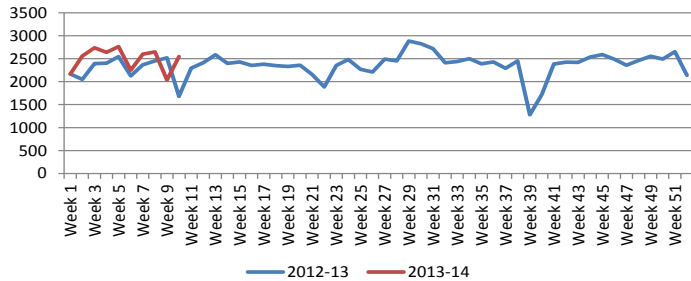
Provider (Signal Report) - where available the data from York Trust's Signal Report is shown instead of Combined York/Scarb data

Provisional Weekly Activity Data for North Yorkshire Patients at York Foundation Trust (York site only)

The data in these charts is based on provisional invalidated weekly data received from the provider. Thus the data are subject to revision, and may not accurately reflect the level or pattern of the contract value. Also, please note in particular that the admitted patient activity counts admissions whereas monthly contract values are determined by counts of discharged patients.

Note: the tenth week of 2012-13 included the Royal Jubilee and as such activity over that week may not be regarded as typical and year to date comparisons should be interpreted with caution.

Referrals

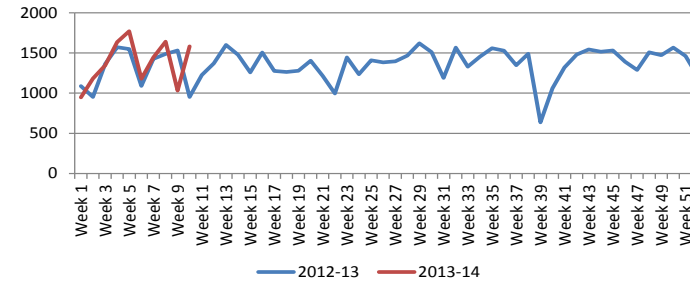


The first 10 weeks of referrals in 2013-14 is running 9.9% higher than the same period in 2012-13.

The proportion of referrals that are C2C in the first ten weeks of 2013-14 is 11.6%, compared to 11.4% in the same period of 2012-13.

n.b. C2C = Consultant to consultant

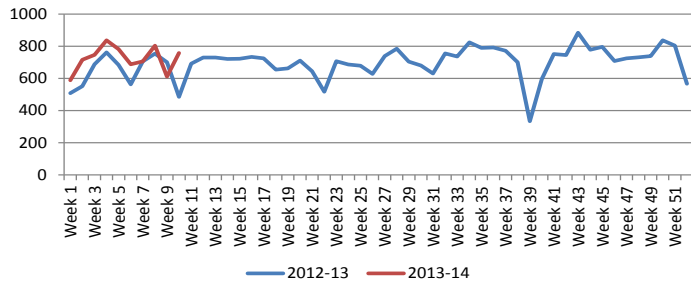
1st Outpatient Attendances



The first 10 weeks activity in 2013-14 is running 5.7% higher than the same period in 2012-13.

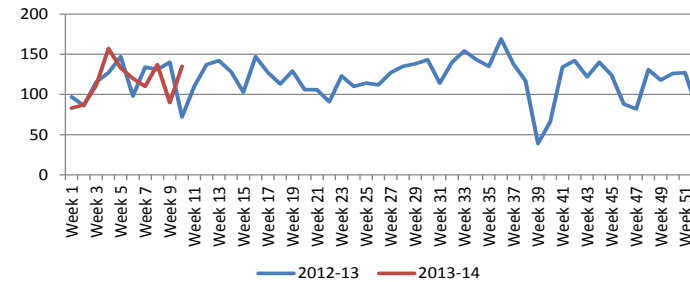
The follow-up to 1st ratio in the first ten weeks of 2013-14 was 2.19 compared to 2.34 over the same period in 2012-13.

Daycase admissions



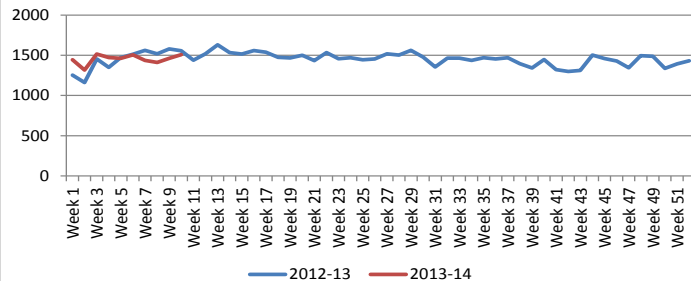
The first 10 weeks activity in 2013-14 is running 13.0% higher than the same period in 2012-13.

Ordinary admissions



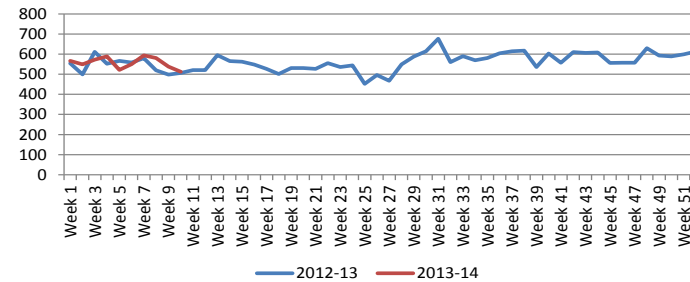
The first 10 weeks activity in 2013-14 is running 1.4% higher than the same period in 2012-13.

Emergency Department Attendances



The first 10 weeks of activity in 2013-14 is running 0.8% higher than the same period in 2012-13.

Emergency Admissions



The first 10 weeks of activity in 2013-14 is running 2.4% higher than the same period in 2012-13.

FINANCE - EXECUTIVE SUMMARY

Finance Dashboard for the Vale of York CCG: MONTH 2 (MAY)

This report presents the financial position for Vale of York CCG to the end of May 2013 (Month 2).

Allocations

The table below records the changes to allocations since notified by NHS England in December 2012. The Deficit 2012/13 was expected and included in the current years expenditure plan.

Nationally, there have been issues with the Specialised Services Agency in agreeing the resource transfer to reflect the extended range of specialised services commissioned. This has now been resolved, resulting in a return of £2,236m to the CCG: This is financially neutral to the CCG as the allocation adjustment is needed to fully fund the CCG's responsibilities. However, resolution means that an element of risk has now been removed.

Other changes include a resource reduction of £26,000 in regard to health services for the armed forces, and a minor decrease to the Running Cost allocation of £3,000

	Programme Costs £'000	Running Costs £'000
Initial allocation	357,831	8,333
Subsequent changes		
Deficit 2012/13	-3,466	
Specialised services adjustment	2,236	
Military Health	-26	
Adjustment to Running costs		-3
Allocation at Month 2	356,575	8,330

Expenditure – Programme Costs

The CCG is showing an over spend of £23,000 to the end of May attributable to Continuing Care.

The reported financial position should however be treated with some caution for the following reasons:-

- The majority of acute activity is charged under Pbr arrangements, however issues at a national level both in regard to data access and validation, mean that it has not been possible to produce a month 2 financial position based upon this information.

- The CCG has received York Hospital Trusts internal monitoring data which indicates that at month 1 the contract is over performing by £350,000 after adjusting for activity which should be charged to other Commissioners. However this is high level data and only very limited validation can be undertaken.

- It has been necessary to accrue for expenditure where invoices have not yet been received. In particular, invoices for NCA activity are typically not received till at least four weeks after the end of the month of account.

Expenditure – Running Costs

The CCG is underspent on running costs at the end of month 2 by £72,000. Pay budgets are underspent by £101,000 due to vacancies. A process of recruitment to these vacant posts is underway therefore the rate of under spending will decline in future months.

Balance Sheet

Agreement of PCT closing balances (and transfer to CCG's as opening balances) is being led nationally and is not expected to be complete till August / September. It is not possible at this stage therefore to produce a balance sheet for the CCG.

The governing Body will be kept informed as to progress.

QIPP Monitoring

The delivery of planned QIPP savings is a key element of achieving financial balance by the year end. The process for monitoring and reporting progress in delivering planned savings is being discussed with Commissioning colleagues and will be reported upon shortly.

FINANCE - PROGRAMME COSTS

CUMULATIVE TO DATE AND FORECAST OUTTURN

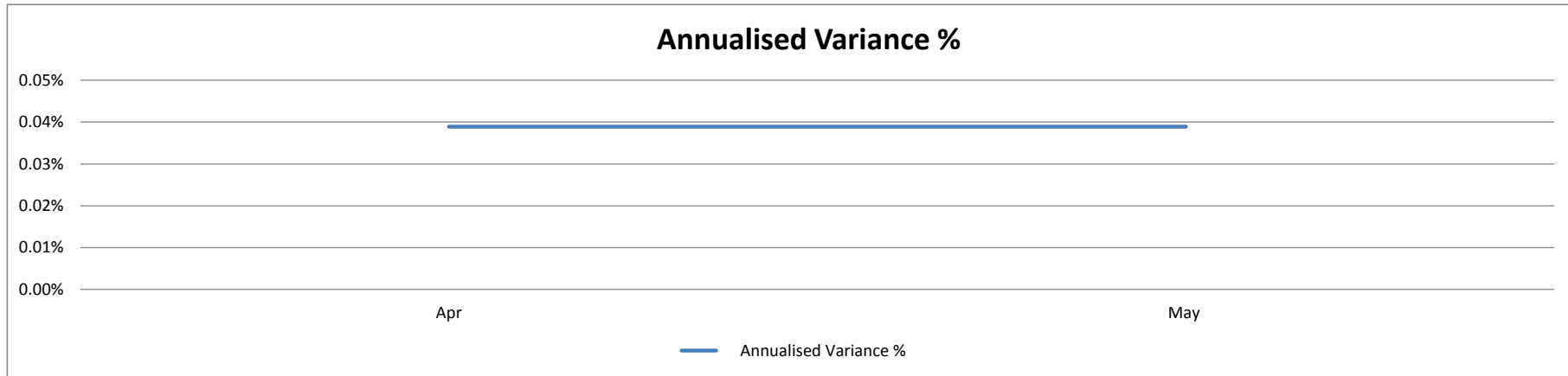
Area	Cumulative to Date			Month 2		
	Budget £000	Actual £000	Variance £000	Budget £000	Actual £000	Variance £000
Commissioned Services						
Acute Services						
York Hospitals NHS Foundation Trust	26,437	26,437	(0)	158,625	158,625	0
York Hospitals NHS Foundation Trust - MSK	332	332	0	1,989	1,989	0
Yorkshire Ambulance Service NHS Trust	2,127	2,127	0	12,762	12,762	0
Ramsay	1,218	1,218	0	7,273	7,273	0
Leeds Teaching Hospitals NFT	1,118	1,118	0	6,711	6,711	0
Non Contracted Activity	691	691	0	3,959	3,959	0
Hull and East Yorkshire Hospitals NFT	651	651	0	3,905	3,905	0
Nuffield Health	543	543	0	3,258	3,258	0
Other Acute Contracts - NHS & Private	427	429	1	2,850	2,850	0
Harrogate and District NHS Foundation Trust	219	219	(0)	1,313	1,313	0
South Tees NHS Foundation Trust	204	204	0	1,222	1,222	0
Consortia and other arrangements	186	186	(0)	926	926	0
Sub Total	34,153	34,155	1	204,793	204,793	0
Mental Health Services						
Leeds Partnerships NHS Foundation Trust	5,428	5,428	(0)	32,566	32,566	0
Tees Esk and Wear Valleys NHS Foundation Trust	231	231	(0)	1,387	1,387	0
Humber NHS Foundation Trust	181	181	0	1,087	1,087	0
Other Mental Health	14	14	0	82	82	0
Sub Total	5,854	5,854	(0)	35,122	35,122	0
Community Services						
York Hospitals NHS Foundation Trust	2,953	2,953	0	17,717	17,717	0
Harrogate and District NHS Foundation Trust	1,527	1,527	0	9,165	9,165	0
Sub total	4,481	4,481	0	26,882	26,882	0
Other Services						
Continuing Care	3,854	3,877	23	23,123	23,123	0
Partnerships	967	967	0	5,827	5,827	0
Funded Nursing Care	743	743	0	4,457	4,457	0
Sub total	5,563	5,587	23	33,407	33,407	0
Primary Care						
Prescribing	7,997	7,997	0	47,984	47,984	0
Enhanced services	289	289	0	1,732	1,732	0
Oxygen	50	50	0	301	301	0
Sub Total	8,336	8,336	0	50,018	50,018	0
Reserves	167	166	(1)	6,353	6,353	0
Total Commissioned Services	58,555	58,578	23	356,575	356,575	0

FINANCE - PROGRAMME COSTS BY MONTH

CUMULATIVE TO 31ST MAY

Area	Cumulative actuals by month												
	Apr - 13	May - 13	Jun - 13	Jul - 13	Aug - 13	Sept - 13	Oct - 13	Nov - 13	Dec - 13	Jan - 14	Feb - 14	Mar - 14	Year to Date
	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Commissioned Services													
Acute Services													
York Hospitals NHS Foundation Trust	13,219	13,219											26,437
York Hospitals NHS Foundation Trust - MSK	166	166											332
Yorkshire Ambulance Service NHS Trust	1,064	1,064											2,127
Ramsay	609	609											1,218
Leeds Teaching Hospitals NFT	559	559											1,118
Non Contracted Activity	345	345											691
Hull and East Yorkshire Hospitals NFT	325	325											651
Nuffield Health	272	272											543
Other Acute Contracts - NHS & Private	214	214											429
Harrogate and District NHS Foundation Trust	109	109											219
South Tees NHS Foundation Trust	102	102											204
Consortia and other arrangements	93	93											186
Sub Total	17,077	17,077											34,155
Mental Health Services													
Leeds Partnerships NHS Foundation Trust	2,714	2,714											5,428
Tees Esk and Wear Valleys NHS Foundation Trust	116	116											231
Humber NHS Foundation Trust	91	91											181
Other Mental Health	7	7											14
Sub Total	2,927	2,927											5,854
Community Services													
York Hospitals NHS Foundation Trust	1,477	1,477											2,953
Harrogate and District NHS Foundation Trust	764	764											1,527
Sub total	2,240	2,240											4,481
Other Services													
Continuing Care	1,938	1,938											3,877
Partnerships	483	483											967
Funded Nursing Care	371	371											743
Sub total	2,793	2,793											5,587
Primary Care													
Prescribing	3,999	3,999											7,997
Enhanced services	144	144											289
Oxygen	25	25											50
Sub Total	4,168	4,168											8,336
Reserves	83	83											166
Total Commissioned Services	29,289	29,289											58,578

FINANCE - PROGRAMME RUN RATE



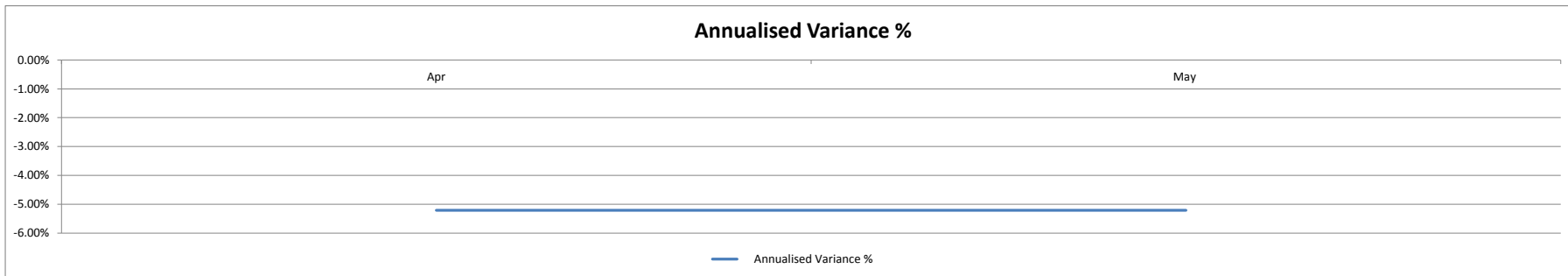
	Apr £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	Total £'000
Planned Spend													
Per Month	29,278	29,278	29,802	29,802	29,802	29,802	29,802	29,802	29,802	29,802	29,802	29,802	356,575
Cumulative	29,278	58,555											
Actual spend													
Per Month	29,289	29,289											
Cumulative	29,289	58,578											
Variance against plan													
Variance in month - £'000	<u>12</u>	<u>12</u>											
Cumulative Variance - £'000	<u>12</u>	<u>23</u>											
Variance in Month %	<u>0.04%</u>	<u>0.04%</u>											
Annualised Variance %	<u>0.04%</u>	<u>0.04%</u>											

FINANCE - RUNNING COSTS & RUN RATE

RUNNING COSTS

Area	Cumulative to Date at 31st May 2013		
	Budget £000	Actual £000	Variance £000
Allocation	1,388	1,388	0.0
Expenditure			
Pay Budgets	448	347	(101)
Non Pay Budgets			
- North Yorkshire & Yorkshire CSU	336	365	29
- Other Non Pay Budgets	139	139	0
- Contingency	139	139	0
Reserve	326	326	0
Total expenditure	1,388	1,316	72
Total	(0)	(72)	(72)

RUNNING COSTS RUN RATE



	Apr £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	Total £'000
Planned Spend													
Per Month	694	694	694	694	694	694	694	694	694	694	694	694	8,330
Cumulative	694	1,388											
Actual spend													
Per Month	658	658											
Cumulative	658	1,316											
Variance against plan													
Variance in month - £'000	-36	-36											
Cumulative Variance - £'000	-36	-72											
Variance in Month %	-5.21%	-5.21%											
Annualised Variance %	-5.21%	-5.21%											

FINANCE - COMPLIANCE WITH CODE OF BETTER PAYMENT PRACTICE

NON-NHS CREDITORS

Month	Total paid	Invoices paid on time	% paid within target	£ total paid	£ value paid on time	% paid within target
Apr-13	51	51	100	985,004	985,004	100.00
May-13	134	130	97	1,070,939	1,059,594	98.94
Jun-13						
Jul-13						
Aug-13						
Sep-13						
Oct-13						
Nov-13						
Dec-13						
Jan-14						
Feb-14						
Mar-14						
Total	185	181	98	2,055,943	2,044,598	99.45

NHS CREDITORS

Month	Total paid	Invoices paid on time	% paid within target	£ total paid	£ value paid on time	% paid within target
Apr-13	12	12	100	20,107,497	20,107,497	100.00
May-13	18	14	78	21,107,430	20,993,947	99.46
Jun-13						
Jul-13						
Aug-13						
Sep-13						
Oct-13						
Nov-13						
Dec-13						
Jan-14						
Feb-14						
Mar-14						
Total	30	26	87	41,214,927	41,101,444	99.72

Outstanding Creditors as at month 2 (31st May 2013)

1-4 weeks		5-8 weeks		> 9 weeks		Total Outstanding Creditors	
Number	Amount £	Number	Amount £	Number	Amount £	Number	Amount £
161	16,918,113	85	502,706	0	0	246	17,420,819

FINANCE - OUTSTANDING CREDITORS

	1-4 weeks No	1-4 weeks £	5-8 weeks No	5-8 weeks £	Over 9 weeks No	Over 9 weeks £	Total No	Total £
As at 31 May 2013	161	16,918,113	85	502,706	0	0	246	17,420,819

FINANCE - AGED DEBTORS REPORT

	Current	Days Overdue					Total
		0-30	31-60	61-90	91-180	181-360	
NHS English CCG'S							
Nil as at 31st May	0	0	0	0	0	0	0
Aged Debt by Organisation							
Nil as at 31st May	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0

VALE OF YORK QIPP SUMMARY DASHBAORD

PROGRAMMES	TRANSFORMATIONAL SCHEMES	Delivery of Financial Benefits							Delivery of Financial Benefits			Delivery of Milestones				COMMENTS
		Baseline PYE (000) 13/14	Forecast PYE (€000's) 13/14	PYE Variance	Forecast PYE Start (Month)	Forecast PYE RAG	Month 2 plan	Month 2 savings (€000's)	Baseline FYE (000)	Forecast FYE (€000's)	Forecast FYE RAG	On Schedule	Risks to Delivery	Mitigation Plan in place	Mitigation Plan Delivering	
ELECTIVE CARE	Dermatology	188,563	188,563	0	11	G	0	0	565,688	565,688	G	G	G	N		
	Pain	21,725	21,725	0	11	G	0	0	65,175	65,175	G	G	G	N		
	Pathology	500,000	500,000	0	8	R	0	0	500,000	500,000	R	G	R	N	Tariff reduction to be agreed with the Trust.	
	Diabetes	86,625	192,000	105,375		G	0	0	256,871	256,871	G	G	A	N	Tariff reduction to be agreed with the Trust.	
	Neurology	300,000	300,000	0	Review	A	0	0	300,000	300,000	A	A	A	N	Neurology Commissioning Support service to deliver review, not in progress yet.	
	Community Glaucoma Service	141,000	32,528	-108,472	10	R	0	0	281,000	134,569	R	R	R	N	Tariff changes have reduced efficiencies.	
	Post-Op Cataract Service	187,146	32,625	-154,521	10	R	0	0	249,528	100,860	R	R	R	N		
	Referral Services Scheme	111,162	111,162	0	9	G	0	0	331,985	331,985	G	A	A	N	Needs buy in from GPs.	
URGENT CARE	Catheterisation	48,150	48,150	0	10	G	0	0	64,200	64,200	G	G	G	N		
	Chronic obstructive pulmonary disease	100,500	100,500	0	10	G	0	0	201,000	201,000	G	G	G	N		
	Heart Failure	35,400	35,400	0	10	G	0	0	70,800	70,800	G	G	G	N		
	Rapid Response- Cellulitis	105,075	105,075	0	10	G	0	0	210,149	210,149	G	G	G	N		
	Out Of Hours Procurement	0	0	0	13	G	0	0			G	G	G	N	Efficiencies realised 2014/15.	
	Frailty Service	0	0	0	review	G	0	0			G	G	G	N		
	Care Home	150,000	150,000	0	review	G	0	0	300,000	300,000	G	G	G	N	Likely to deliver increased savings.	
	Yorkshire Ambulance Service	250,000	125,000	-125,000	review	R	0	0	250,000	250,000	R	R	R	N	Reviews in progress. Savings may be higher, though need to rapidly implement to realise in year.	
		Urgent Care Review	0	300,000	300,000	review	R	0	0	600,000	600,000	R	A	R	N	
		Respiratory Review	0	350,000	350,000	review	R	0	0	350,000	350,000	R	A	R	N	
LONG TERM CONDITIONS	Neighbourhood Care Teams	0	0	0		G	0	0			G	R	R	Y	G	Direct Enhanced Service (DES) & tool in progress for June. New Project Lead in post & progressing programme area, confident that programme will progress.
	Self Management	0	0	0		G	0	0			G	R	R	Y	G	
	Risk Stratification	0	0	0	6	G	0	0			G	A	G	Y	G	
	Community Hospital Review	0	0	0	review	G	0	0			G	R	R	Y	G	
	Patient Decision Aids	173,438	86,719	-86,719	review	R	0	0	521,438	521,438	G	R	R	Y	G	
		0														
MENTAL HEALTH	Out Of Area	0	125,000	125,000	review	R	0	0	250,000	250,000	G	A	A	Y	G	Out of area spend circa €6m. New project manager in post and progressing work.
	Psychiatric Liason	150,000	75,000	-75,000	review	R	0	0	300,000	300,000	G	A	A	Y	G	
PRESCRIBING		945,000	945,000	0	1	G	0	0	945,000	945,000	G	G	G	N		
PRIMARY CARE	High Impact Users	0	200,000	200,000	review	R	0	0	400,000	400,000	G	G	G	N	Review underway, due to complete July.	
NEW SCHEMES	New schemes to be identified	1,300,355	2,709,042	1,408,687		G					G	G	G	N		
	Smoking Thresholds	0	0	0	9	G					G	G	G	N	Review underway, implementation due in September.	
	Procedures of Limited Clinical Value	0	0	0	9	G					G	G	G	N		
SUB TOTAL		4,794,139	6,733,489	1,939,350					7,012,834	6,717,735						

	TRANSACTIONAL SCHEMES (delivered in contract/ budget)	Baseline PYE (000)	Forecast PYE (€000's)	PYE Variance	Forecast PYE Start	Forecast PYE RAG	Month 2 plan	Month 2 savings	Baseline PYE (000)	Forecast PYE (€000's)	Forecast PYE RAG	On Schedule	Risks to Delivery	Mitigation Plan in	Mitigation Plan	
	Contracting - Age-Related Macular Degeneration Assessment Tariff	845,880	0	-845,880		R	0	0	0	0	R	R	R	N	G	Schemes were part of initial QIPP Plan, however it was not possible to agree them in the 2013/14 contract with York Foundation Trust. To mitigate against shortfall, we are undertaking further service reviews to lever in year savings.
	Continuing Healthcare	220,000	0	-220,000		R	0	0	0	0	R	R	R	N	G	
	Community Hospital Tariff Arrangements	330,000	0	-330,000		R	0	0	0	0	R	R	R	N	G	
	Introduce early supported discharge team for Stroke	43,470	0	-43,470		R	0	0	0	0	R	R	R	N	G	
	Daycase to Outpatient Procedures	500,000	0	-500,000		R	0	0	0	0	R	R	R	N	G	
	Contracting - Lucentis drug discount	100,000	100,000	0	1	G	0	0	100,000	100,000	G	G	G	N	G	
	Better Care Better Values First to Follow Up Ratios	3,901,511	3,901,511	0	4	G	0	0	3,901,511	3,901,511	G	G	G	N	G	
SUB TOTAL	SUB TOTAL	5,940,861	4,001,511	-1,939,350					4,001,511	4,001,511						
TOTAL		10,735,000	10,735,000	0					11,014,345	10,719,246						

Key Progress: Projects and service reviews are all progressing. There have been some delays to projects, however teams are striving to deliver to original forecast delivery dates. New team members in post and rapidly pushing forward key programme/ project areas. Good engagement to date with key stakeholders and good support from primary care colleagues across numerous work programmes. Number of transactional schemes not agreed in contract, therefore number service reviews being taken forward to mitigate risk.

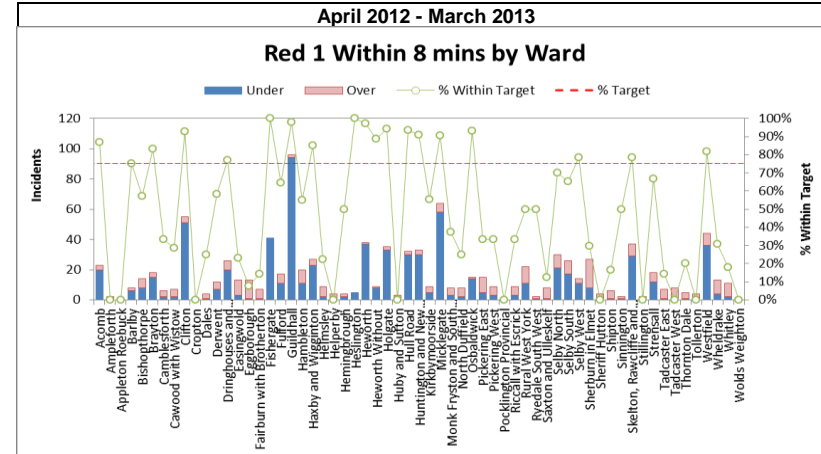
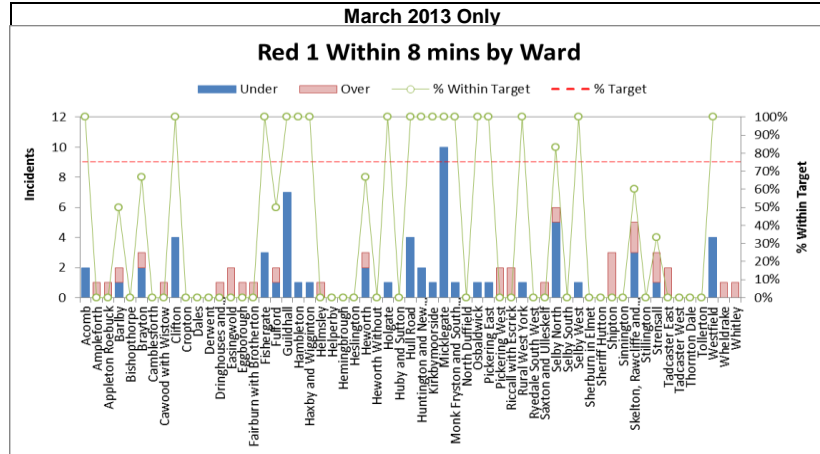
Key Issues/ Risks to Delivery: There is a £2,709m gap in QIPP plan. It is anticipated however, that a number of schemes will deliver greater efficiencies than currently forecast and for some we are waiting for baseline data (Procedures of limited clinical value and smoking cessation). The position will be monitored on an on-going basis and the dashboard will reflect any changes. A key risk for the CCG is that most schemes do not go-live and therefore release cash efficiencies until end of quarter 2.

Appendix A - Yorkshire Ambulance Service (YAS)

Data is not yet available from YAS that enables the main charts and tables below to be updated beyond March 2013. However, aggregate performance by week for the CCG is available (below) which shows that response time performance has improved since March 2013.

Type of call	Week ending									
	07/04/2013	14/04/2013	21/04/2013	28/04/2013	05/05/2013	12/05/2013	19/05/2013	26/05/2013	02/06/2013	09/06/2013
Category A Red 1 calls responded to within 8 minutes	60%	43%	71%	82%	73%	91%	75%	53%	87%	72%
Category A Red 2 calls responded to within 8 minutes	69%	70%	71%	73%	78%	76%	79%	73%	73%	74%
Category A Red 1 calls responded to within 19 minutes	100%	93%	95%	100%	96%	100%	100%	100%	100%	100%
Category A Red 2 calls responded to within 19 minutes	97%	95%	93%	94%	97%	95%	96%	96%	96%	97%

The charts below show that performance in some areas of the CCG remain inconsistent.



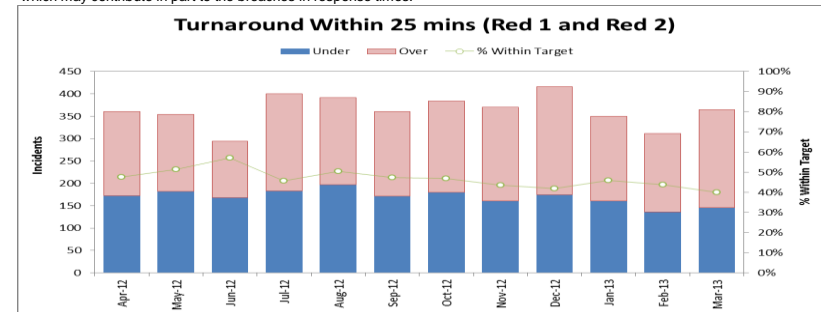
Red 1 Category A calls during 2012/13

The Key Performance Indicator for YAS red 1 category calls to be responded to within 8 minutes under achieved in March. The table below provides a breakdown of the monthly performance for this indicator.

Period	Under	Over	Total	Crude target @ 75%	No. of calls target breached by	% Under 8 mins
Apr-12	65	19	84	63	0	77%
May-12	54	22	76	57	-3	71%
Jun-12	45	25	70	53	-8	64%
Jul-12	57	18	75	56	0	76%
Aug-12	54	21	75	56	-2	72%
Sep-12	62	34	96	72	-10	65%
Oct-12	64	24	88	66	-2	73%
Nov-12	62	17	79	59	0	78%
Dec-12	80	35	115	86	-6	70%
Jan-13	55	26	81	61	-6	68%
Feb-13	56	25	81	61	-5	69%
Mar-13	60	30	90	68	-8	67%
Total	714	296	1,010	758	-44	71%

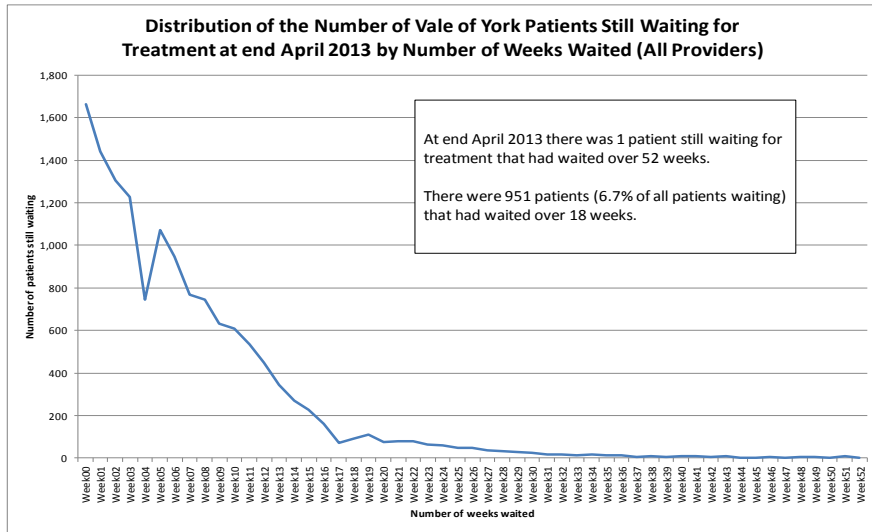
Ambulance turnaround times

Turnaround times are the length of time it takes for a hospital to assume responsibility for a patient from the ambulance crew so that the ambulance can be redeployed on other calls. Delayed turnaround times therefore have a detrimental impact on response times. The chart below shows that each month a number of ambulances are held up at the hospital which may contribute in part to the breaches in response times.



Appendix B - Waiting Times

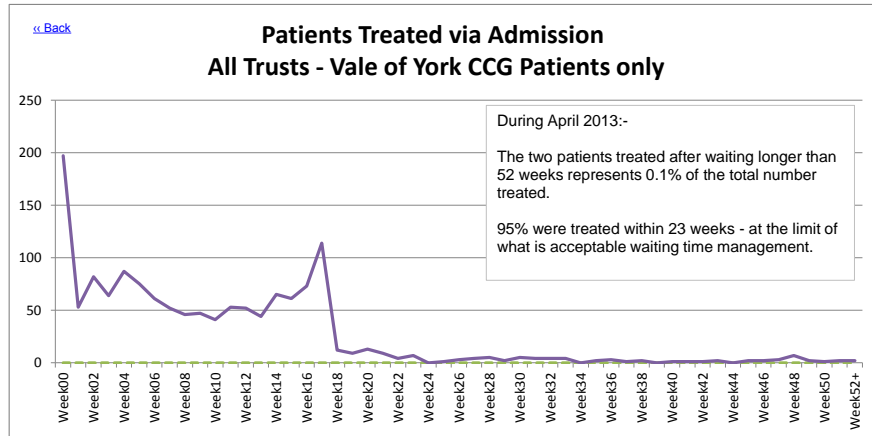
Part 1: Vale of York CCG patients waiting for an inpatient procedure at all hospital providers (based on a snap shot taken at the end of April 2013)



Provider name	TOTAL	< 18 weeks	>= 18 weeks	>= 30 weeks	>= 40 weeks	52+ weeks	Current Month Trajectory	% <18 weeks	% >=18 weeks
Bradford Teaching Hospitals NHS Foundation Trust	8	8	0	0	0	0	92%	100%	0%
York Hospitals NHS Foundation Trust	11707	10920	787	178	58	0	92%	93%	7%
Harrogate & District NHS Foundation Trust	200	193	7	0	0	0	92%	97%	4%
Northern Lincolnshire And Goole Hospitals NHS Trust	68	67	1	0	0	0	92%	99%	1%
Leeds Teaching Hospitals NHS Trust	1137	1050	87	15	5	0	92%	92%	8%
Newcastle Upon Tyne Hospitals NHS Trust	25	24	1	0	0	0	92%	96%	4%
South Tees Hospitals NHS Foundation Trust	101	92	9	1	0	0	92%	91%	9%
Morecambe Bay Hospitals NHS Trust	3	3	0	0	0	0	92%	100%	0%
Hull & East Yorkshire Hospitals NHS Trust	129	119	10	3	1	0	92%	92%	8%
Mid Yorkshire Hospitals NHS Trust	107	91	16	4	1	0	92%	85%	15%
County Durham and Darlington Acute NHS Trust	0	0	0	0	0	0	92%	0%	0%
Ramsay Healthcare UK Operations Ltd	254	251	3	2	2	1	92%	99%	1%
Nuffield Health, Leeds Hospital	191	174	17	0	0	0	92%	91%	9%
BMI - The Duchy, Harrogate	4	4	0	0	0	0	92%	100%	0%
BMI - Woodlands Hospital	30	30	0	0	0	0	92%	100%	0%
Others	199	186	13	1	0	0	92%	93%	7%
Total	14163	13212	951	204	67	1	92%	93%	7%

The table above details the number of VoY patients still waiting for treatment by hospital provider in April. Of the 67 patients still waiting for over 40 weeks from the date of referral, 33 patients are waiting for a general surgery procedure at York Foundation Trust (YFT) and 16 are waiting for Gynaecology at YFT.

Part 2: Patients treated in April via an admission at all hospital providers for the Vale of York CCG only



Provider name	TOTAL	< 18 weeks	>= 18 weeks	>= 30 weeks	>= 40 weeks	52+ weeks	Current Month Trajectory	% <18 weeks	% >=18 weeks
Bradford Teaching Hospitals NHS Foundation Trust	2	2	0	0	0	0	90%	100%	0%
York Hospitals NHS Foundation Trust	1087	992	95	43	24	2	90%	91%	9%
Harrogate & District NHS Foundation Trust	22	19	3	1	0	0	90%	86%	14%
Northern Lincolnshire And Goole Hospitals NHS Trust	19	19	0	0	0	0	90%	100%	0%
Leeds Teaching Hospitals NHS Trust	102	87	15	7	2	0	90%	85%	15%
Newcastle Upon Tyne Hospitals NHS Trust	4	4	0	0	0	0	90%	100%	0%
South Tees Hospitals NHS Foundation Trust	9	8	1	0	0	0	90%	89%	11%
Morecambe Bay Hospitals NHS Trust	0	0	0	0	0	0	90%	0%	0%
Hull & East Yorkshire Hospitals NHS Trust	36	35	1	0	0	0	90%	97%	3%
Mid Yorkshire Hospitals NHS Trust	16	15	1	0	0	0	90%	94%	6%
County Durham and Darlington Acute NHS Trust	0	0	0	0	0	0	90%	0%	0%
Ramsay Healthcare UK Operations Ltd	81	78	3	0	0	0	90%	96%	4%
Nuffield Health, Leeds Hospital	73	73	0	0	0	0	90%	100%	0%
BMI - The Duchy, Harrogate	3	2	1	0	0	0	90%	67%	33%
BMI - Woodlands Hospital	1	1	0	0	0	0	90%	100%	0%
Others	32	30	2	0	0	0	90%	94%	6%
Total	1487	1365	122	51	26	2	90%	92%	8%