

# Rotherham Clinical Commissioning Group: Governing Body Delivery Dashboard for 2020/21

September 2020

Delivery Dashboard



Constitution and Pledges



Improvement and Assessment Framework



Health Outcomes



Better Care Fund



Quality Premium



Focus on Performance Tables



Rotherham CCG Delivery Dashboard

Performance Comparison - Rotherham CCG/FT v National June 2020

	Target	RCCG/Trust	National	Number Achieving Nationally	Rotherham Performance
Diagnostic	1.0%	61.15%	47.84%	0 out of 135	120th out of 135
DTOC	3.5%	5.33%	4.94%	78 out of 222	124th out of 222
RTT	92.0%	57.02%	39.25%	2 out of 150	40th out of 150
A&E (Rotherham FT)	95.0%	84.16%	77.15%	5 out of 235	47th out of 235
Cancer 2 ww	93.0%	96.30%	92.50%	90 out of 135	45th out of 135
Cancer 2 ww Breast	93.0%	92.86%	90.59%	89 out of 134	91st out of 134
Cancer 31 Day	96.0%	97.47%	93.75%	41 out of 135	27th out of 135
Cancer 62 Day (Rotherham FT)	85.0%	69.01%	75.21%	35 out of 147	112th out of 147
Cancer 62 Day (Rotherham CCG)	85.0%	71.05%	75.21%	21 out of 135	94th out of 135
IAPT 6 Week Wait*	75.0%	87.00%	87.00%	154 out of 203	118th out of 203

Please note:  
To ensure comparison accuracy, this table is based on the latest month's published data, instead of provisional data published elsewhere in this report.

\*IAPT Figures are as at May 2020

\*\* A&E Figures are as at April 2019

\*\*\*DTOC Figures as at February 2020 due to suspension of the return

Performance This Month

Meeting standard - no change from last month	
Not meeting standard - no change from last month	
Meeting standard - improved on last month	
Not meeting standard - improved on last month	
Meeting standard - deteriorated from last month	
Not meeting standard - deteriorated from last month	

**Achieving**  
Last three months met and YTD met

	Target	Previous Month	Last Month	Current Month	Next Month Predicted
IAPT - 6 week wait	75%				
Mixed Sex Accomodation	0				

**Deteriorating**  
Not met last month but met previously or YTD met

Target	Previous Month	Last Month	Current Month	Next Month Predicted
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**Concern**  
Not met last two months

	Target	Previous Month	Last Month	Current Month	Next Month Predicted
A&E	Not currently available				
Cancer Waits: 62 days	85%				
DTOC	3.5%				
Diagnostics	1%				
Referral to treatment	92%				

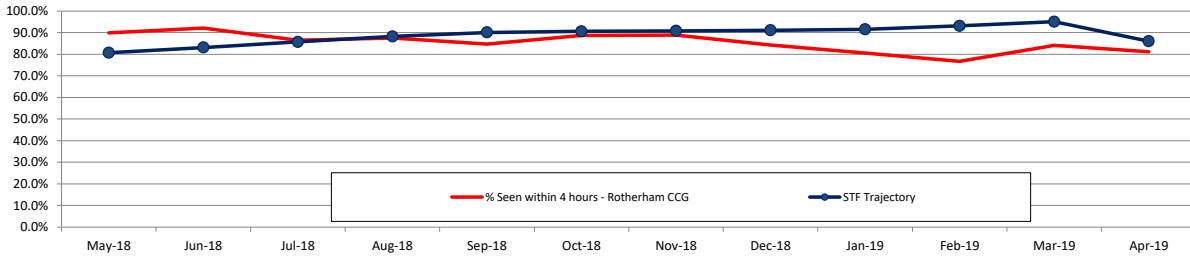
**Improving**  
Last month met but previous not met or YTD not met

	Target	Previous Month	Last Month	Current Month	Next Month Predicted
Cancer Waits: 31 days	96%				
Cancelled Operations	0				
Cancer Waits: 2 weeks	93%				

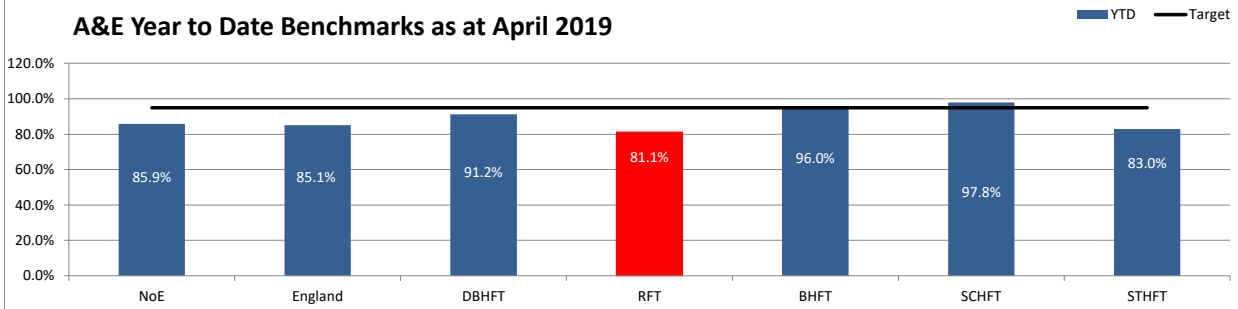
Key Performance Issues

A&E

The Rotherham NHS Foundation Trust is currently one of fourteen Acute Provider Trusts taking part in the national field testing exercise for A&E standards, which forms part of the national Clinical review of NHS access standards. The testing started in May 2019 and is now ongoing.

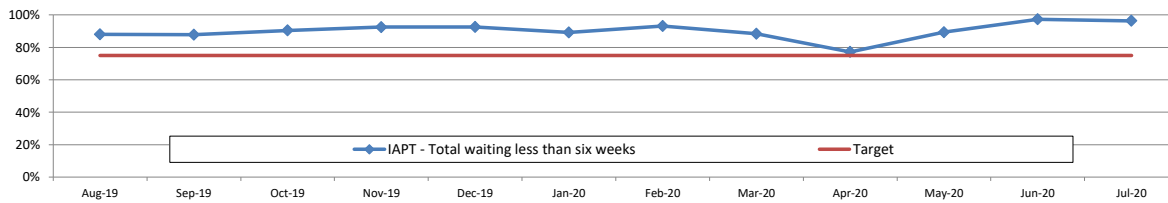


A&E Year to Date Benchmarks as at April 2019

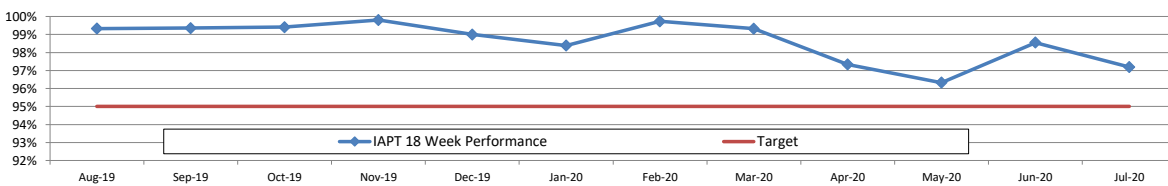


IAPT

The national target for patients accessing IAPT services is 75% within 6 weeks and 95% within 18 weeks. The 6 week waits position for Rotherham CCG as at end July was 96.4%. This is above the standard of 75%. June performance was 97.4%. Self-referral into the service is now established and contributing to this position.



The 18 week waits position for the service as at end July was 97.2%. Performance is consistently meeting the 95% standard for 18 weeks.



### Cancer Waits

In June the 62 day GP referral to treatment target did not meet the national standard of 85%, with performance at 71.1% for Rotherham CCG. 62 day performance did not meet the national standard at the Rotherham Foundation Trust with performance at 69.0% in June and 60.8% in May.

The 31 day standard was achieved in June, with performance at 97.5% against the standard of 96%.

The two week wait cancer standard was achieved in June with performance of 96.3%, against the 93% standard. The two week wait standard for breast symptoms wasn't achieved with performance at 92.9% against the 93% standard.

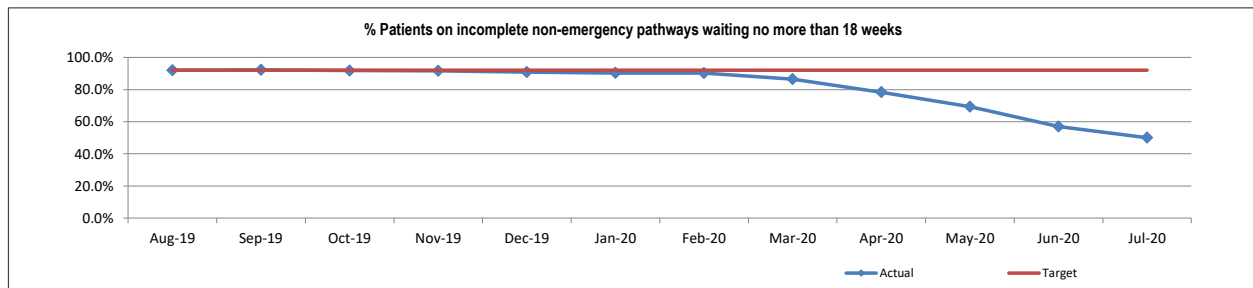
	Apr-20	May-20	Jun-20
2 week wait	●	●	●
31 day	●	●	●
62 day	●	●	●

### Referral to Treatment

RTT Incomplete Pathways did not meet the 92% standard in July at 50.0%, based on provisional data. The position for June was 57.0%. Further details at a specialty level can be found in the focus on section.

There were 78 waiters over 52 weeks in July; 36 at Rotherham NHS Foundation Trust, 21 at Sheffield Children's NHS Foundation Trust, 11 at Sheffield Teaching Hospitals NHS Foundation Trust, 2 at Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust, 2 at Hull University Teaching Hospitals NHS Foundation Trust, 2 at Leeds Teaching Hospitals NHS Trust, 1 at University Hospitals Birmingham NHS Foundation Trust, 1 at Buckinghamshire Healthcare NHS Trust, 1 at The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust, 1 at Cambridge University Hospital NHS Foundation Trust.

	May-20	Jun-20	Jul-20
RTT Incomplete	●	●	●
52 week wait	●	●	●



	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20
Actual	92.1%	92.2%	91.8%	91.6%	90.9%	90.3%	90.2%	86.6%	78.4%	69.4%	57.0%	50.0%
Target	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%

### Eliminating Mixed Sex Accomodation

Please Note: Data is not currently available as Submission/Publication has been suspended due to the coronavirus illness (COVID-19) and the need to release capacity across the NHS to support the response.

There were no breaches of this standard in February.

	Dec-19	Jan-20	Feb-20
MSA	●	●	●

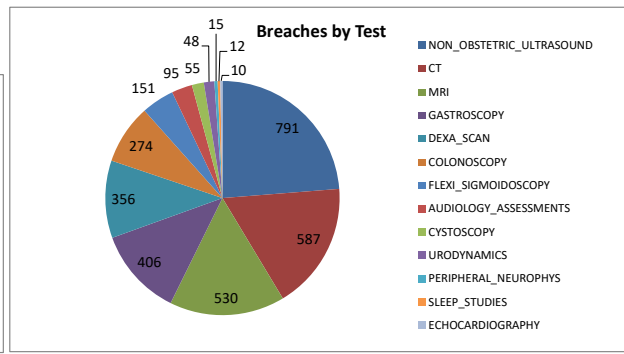
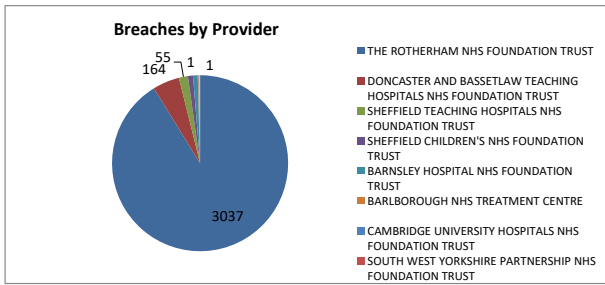
### Diagnostic Waiting Times

Provisional performance in July of 47.5% exceeds the <1% standard.

3330 Breaches occurred in July:

3037 at The Rotherham NHS FT (666 Non Obstetric Ultrasound, 547 CT, 506 MRI, 387 Gastroscopy, 341 DEXA Scan, 262 Colonoscopy, 145 Flexi Sigmoidoscopy, 88 Audiology Assessments, 51 Cystoscopy, 32 Urodynamics, 11 Sleep Studies, 1 Echocardiography),  
 164 at Doncaster and Bassetlaw Teaching Hospitals NHS FT (76 Non Obstetric Ultrasound, 30 CT, 10 Gastroscopy, 9 Echocardiography, 8 Colonoscopy, 7 MRI, 7 Peripheral Neurophys, 6 DEXA Scan, 4 Flexi Sigmoidoscopy, 4 Cystoscopy, 3 Audiology Assessments),  
 55 at Sheffield Teaching Hospitals NHS FT (39 Non Obstetric Ultrasound, 7 CT, 5 Peripheral Neurophys, 4 MRI),  
 31 at Sheffield Children's NHS FT (16 Urodynamics, 6 Gastroscopy, 4 MRI, 3 Peripheral Neurophys, 1 Colonoscopy, 1 Audiology Assessments),  
 29 at Barnsley Hospital NHS FT (9 DEXA Scan, 7 Non Obstetric Ultrasound, 5 MRI, 3 Colonoscopy, 2 CT, 1 Gastroscopy, 1 Flexi Sigmoidoscopy),  
 3 at Barlborough NHS Treatment Centre (3 MRI)  
 2 at Cambridge University Hospitals NHS FT (1 Non Obstetric Ultrasound, 1 Flexi Sigmoidoscopy)  
 2 at South West Yorkshire Partnership NHS FT (2 Audiology Assessments)  
 1 at University Hospitals of North Midlands NHS Trust (Audiology Assessments)  
 1 at Mid Yorkshire Hospitals NHS Trust (Gastroscopy),  
 1 at North Middlesex University Hospitals NHS Trust (Non Obstetric Ultrasound),  
 1 at Hull University Teaching Hospitals NHS Trust (CT)  
 1 at Manchester University Hospitals NHS FT (Non Obstetric Ultrasound)  
 1 at Liverpool Heart and Chest University Hospitals NHS FT (MRI)  
 1 at Sherwood Forest Hospitals NHS FT (Sleep Studies)

Diagnostic Waits	May-20	Jun-20	Jul-20
	●	●	●



### Incidence of C.diff and MRSA

Performance for the CCG overall in July was 5 cases. The 5 cases in July occurred at Rotherham FT (4), Sheffield Teaching FT (1). In the YTD there have been a total of 27 cases.

Rotherham FT performance for July is 2 cases and 6 in the YTD.

Note: 20/21 Targets for C. Diff have not yet been finalised

	May-20	Jun-20	Jul-20
CCG c.diff	●	●	●
RFT c.diff	●	●	●
MRSA	●	●	●

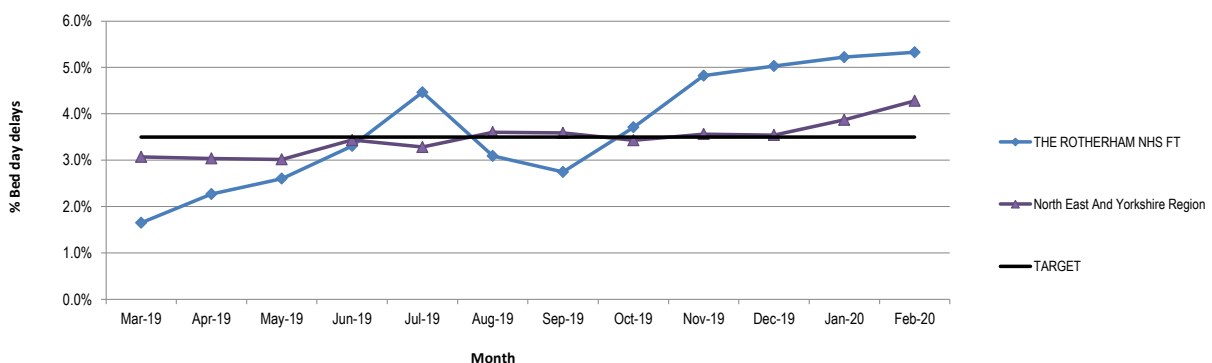
### Delayed Transfers of Care

Please Note: Data is not currently available as Submission/Publication has been suspended due to the coronavirus illness (COVID-19) and the need to release capacity across the NHS to support the response.

The national standard is a maximum of 3.5% of total occupied bed days taken up by delayed transfers of care. The Rotherham NHS Foundation Trust are currently not meeting that standard at 5.3% in February. January performance was 5.2%. Across Rotherham as a whole DTOCs are above the position required by the Better Care Fund trajectory. Performance against the Better Care Fund trajectory is displayed in the Better Care Fund section of the report.

	Dec-19	Jan-20	Feb-20
DTOC	●	●	●

### Delayed days rate performance in last 12 months - THE ROTHERHAM NHS FOUNDATION TRUST



**YAS**

Yorkshire Ambulance Service (YAS) is continuing to participate in NHS England's Ambulance Response Programme (ARP), which has moved to phase three. Based on feedback from the pilot, there are now four categories and the eight minute response time for category 1 incidents no longer exists.

Currently, YAS are producing information at provider level, without any individual CCG performance data. RCGs individual performance cannot therefore be reported this month. Details of the new standards are below. YAS as an organisation achieved a mean of 6 minutes 59 seconds for category 1 calls in July. The position in June was also 6 minutes 59 seconds.

15 Minute Turnaround for The Rotherham NHS Foundation Trust in July was 71.89% an increase on June performance at 70.51%. Handovers at Sheffield Northern General Hospital was 62.47% in July.

Category	Description	Target
1	Life-threatening illnesses/injuries	Mean target of 7 minutes and 90th percentile target of 15 minutes
2	Emergency calls	Mean target of 18 minutes and 90th percentile target of 40 minutes
3	Urgent calls	90th percentile target of 2 hours
4	Less urgent calls	90th percentile target of 3 hours

**Current YAS Performance (Response Times)**

	Current Performance - July	Current Performance - June	Change
Category 1	00:06:59	00:06:59	No Change
Category 2	00:15:34	00:13:32	Worse
Category 3	01:11:42	00:56:19	Worse
Category 4	02:11:59	01:45:04	Worse

	Current Performance - July	Change
15 Min Turnaround RFT on target	71.89%	Better
Handovers at NGH	62.47%	Better

# NHS Constitution and Pledges



  Denotes that a measure that has been updated in this report

Referral to Treatment	May-20	Jun-20	Jul-20	Target	QP
% Patients on incomplete non-emergency pathways waiting no more than 18 weeks (Commissioner)	69.36%	57.02%	50.03%	92.0%	Y
Number of 52 week referral to treatment pathways incomplete (Commissioner)	11	28	78	0	
Number of 52 week referral to treatment pathways non admitted (Commissioner)	0	1	1	0	

Diagnostic Waiting Times	May-20	Jun-20	Jul-20	Target	QP
% Patients waiting for diagnostic test waiting > 6 weeks from referral (Commissioner)	69.62%	61.15%	47.50%	1.0%	

A&E Waits	Feb-19	Mar-19	Apr-19	Target	QP
Total A&E: % 4 hour A&E waiting times - seen within 4 hours (latest monthly position)	76.7%	84.2%	81.1%	95.0%	Y

Cancer - Two Week Waits	Apr-20	May-20	Jun-20	Target	QP
% patients referred with breast symptoms seen within 2 weeks of referral	81.4%	95.5%	92.9%	93.0%	
% of patients seen within 2 weeks of urgent referral by a GP	69.7%	94.4%	96.3%	93.0%	

Cancer - 31 Day Waits	Apr-20	May-20	Jun-20	Target	QP
% patients receiving first definitive treatment within 31 days following referral	93.9%	96.6%	97.5%	96.0%	
% patients receiving subsequent treatment where treatment is surgery within 31 days	90.0%	81.3%	85.7%	94.0%	
% patients receiving subsequent treatment where treatment is anti-drug regime within 31 days	100.0%	92.6%	93.3%	98.0%	
% patients receiving subsequent treatment where treatment is radiotherapy within 31 days	94.3%	79.2%	86.1%	94.0%	

Cancer - 62 Day Waits	Apr-20	May-20	Jun-20	Target	QP
% patients starting first treatment within 62 days of referral from GP	73.8%	60.0%	71.1%	85.0%	Y
% patients starting first treatment within 62 days after breast, bowel and cervical screening referral	60.0%			90.0%	
% patients treated within 62 days following referral from a Consultant	75.0%	91.7%	87.1%		

\*There is no data for % patients starting first treatment within 62 days after breast, bowel and cervical screening for May or Jun 20

# NHS Constitution and Pledges



  Denotes that a measure that has been updated in this report

YAS Performance	May-20	Jun-20	Jul-20	Target	QP
Category 1 (Mean target of 7 minutes per call)	00:07:11	00:06:59	00:06:59	<b>00:07:00</b>	
Category 2 (Mean target of 18 minutes per call)	00:12:23	00:13:32	00:15:34	<b>00:18:00</b>	
Category 3 (90th percentile target of 2 hours per call)	00:45:53	00:56:19	01:11:42	<b>02:00:00</b>	
Category 4 (90th percentile target of 3 hours per call)	01:36:45	01:45:04	02:11:59	<b>03:00:00</b>	

YAS - Ambulance Calls	May-20	Jun-20	Jul-20	Target	QP
Crew clear delays of over 30 minutes	36	26	37	<b>0</b>	
Ambulance handover delays of over 30 minutes	53	51	67	<b>0</b>	

Mixed Sex Accommodation Breaches	Dec-19	Jan-20	Feb-20	Target	QP
Number of mixed sex accommodation breaches (commissioner)	0	0	0	<b>0</b>	

Cancelled Operations	Q1 2019/20	Q2 2019/20	Q3 2019/20	Target	QP
Cancelled operations re-booked within 28 days	1	0	0	<b>0</b>	

Mental Health	Q1 2019/20	Q2 2019/20	Q3 2019/20	Target	QP
Proportion of people on Care Programme Approach (CPA) who were followed up within 7 days of discharge	95.0%	96.6%	98.6%	<b>95.0%</b>	

Wheelchairs for Children*	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	QP
Percentage of equipment delivered within 18 weeks	Target	92.0%	92.0%	92.0%	92.0%
	Actual	100.0%	100.0%	97.6%	100.0%

The Children's wheelchair waiting time standard is now being achieved under the new provider.



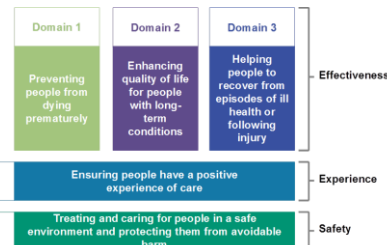
## Oversight Framework

Denotes an indicator that has been updated in this period

			Reporting Frequency	Latest available data	Latest period performance	Target	
Quality of care and outcomes	General	121a	Provision of high-quality care: hospitals	Quarterly	19-20 Q1	63	
		121b	Provision of high-quality care: primary medical services	Quarterly	19-20 Q1	66	
		132a	Evidence that sepsis awareness raising among healthcare professionals has been prioritised by CCGs	Calendar Year	2018	Green Star	
		134a	Evidence-based interventions	Quarterly	19-20 Q2	Amber	
	Maternity services	125a	Neonatal mortality and stillbirths	Calendar Year	2016	5.8	
		125b	Women's experience of maternity services	Calendar Year	2018	84.1	
		125c	Choices in maternity services	Calendar Year	2018	60.1	
	Cancer services	122a	Cancers diagnosed at an early stage	Calendar Year	2017	47%	
		122b	● People with urgent GP referral having first definitive treatment for cancer within 62 days of referral	Monthly	Jun-20	71.1%	85.0%
		122c	One-year survival from all cancers	Calendar Year	2017	71.8	
		122d	Cancer patient experience	Calendar Year	2018	8.8	
	Mental health	123a	● Improving Access to Psychological Therapies – recovery	Monthly	Jun-20	57.4%	50.0%
		123b	● Improving Access to Psychological Therapies – access	Monthly	Jun-20	3.4%	19.75%
		123c	● People with first episode of psychosis starting treatment with a National Institute for Health and Care Excellence (NICE)-recommended package of care treated within two weeks of referral	Monthly	Sep-19	60.0%	50%
		123f	Mental health out-of-area placements	Monthly	Sep-19	91.0	
		123j	Quality of mental health data submitted to NHS Digital (DQMI)	Monthly	Sep-19	96.8	
		Learning disability and autism	124a	Reliance on specialist inpatient care for people with a learning disability and/or autism	Quarterly	18/19 Q4	49
	124b		Proportion of people with a learning disability on the GP register receiving an annual health check	Fiscal Year	2017-18	46.8%	
	124c		Completeness of the GP learning disability register	Fiscal Year	2017-18	0.6%	
	124d		Learning disabilities mortality review: the percentage of reviews completed within 6 months of notification (New Metric)	No Data Published			
	Diabetes	103a	Diabetes patients that have achieved all the NICE recommended treatment targets: three (HbA1c, cholesterol and blood pressure) for adults and one (HbA1c) for children	Fiscal Year	2018-19	40.9%	
		103b	People with diabetes diagnosed less than a year who attend a structured education course	Fiscal Year	2017/18	7.8	
	People with long term conditions and complex needs	126a	● Estimated diagnosis rate for people with dementia	Monthly	Jul-20	76.3%	66.7%
		126b	Dementia care planning and post-diagnostic support	Fiscal Year	2018-19	81.3%	
		108a	The proportion of carers with a long-term condition who feel supported to manage their condition	Calendar Year	2019	54.9%	
		105c	Percentage of deaths with three or more emergency admissions in last three months of life	Calendar Year	2017	9.1%	
	Planned care	129a	● Patients waiting 18 weeks or less from referral to hospital treatment	Monthly	Jul-20	50.0%	92%
		129b	Overall size of the waiting list (New Metric)	Monthly	Jul-20	16159	16819
		129c	● Patients waiting over 52 weeks for treatment (New Metric)	Monthly	Jul-20	78	0
		133a	● Patients waiting six weeks or more for a diagnostic test	Monthly	Jul-20	47.50%	1%

New Service Models	Integrated primary care and community health services	128b	●	Patient experience of GP services	Calendar Year	2019	83.4%	75%	
		128f		Patient experience of booking a GP appointment (New Metric)	No Data Published				
			127b		Emergency admissions for urgent care sensitive conditions	Quarterly	19-20 Q2	2263	
	Acute emergency care and transfers of care		127c	●	Percentage of patients admitted, transferred or discharged from A&E within four hours	Monthly	Apr-19	81.1%	85%
			130a		Achievement of clinical standards in the delivery of 7-day services	Fiscal Year	2017-18	2	
			127e		Delayed transfers of care per 100,000 population	Monthly	Nov-19	17.3	
			127f		Population use of hospital beds following emergency admission	Quarterly	19-20 Q2	895	
			131a	●	Percentage of NHS continuing healthcare full assessments taking place in an acute hospital setting	Quarterly	19-20 Q2	3.2%	15.0%
	Personalisation and patient choice		105b		Personal health budgets	Quarterly	19-20 Q2	53.3	
			144a		Use of the NHS e-referral service to enable choice at first routine elective referral	Monthly	May-20	107.9%	
Preventing ill health and reducing inequalities	Smoking	125d		Maternal smoking at delivery	Quarterly	19-20 Q2	16.4%		
	Obesity	102a		Percentage of children aged 10-11 classified as overweight or obese	2 Fiscal Year	2015-16 to 2017-18	36.3%		
	Falls	104a		Injuries from falls in people aged 65 and over	Quarterly	19-20 Q2	1889		
	Antimicrobial resistance		107a	●	Antimicrobial resistance: appropriate prescribing of antibiotics in primary care	Monthly	Jan-20	1.0	1.16
			107b	●	Antimicrobial resistance: appropriate prescribing of broad spectrum antibiotics in primary care	Monthly	Jan-20	6	10
	Health inequalities		123g		Proportion of people on GP severe mental illness register receiving physical health checks in primary care	Quarterly	19-20 Q2	13.8%	
			106a		Inequality in unplanned hospitalisation for chronic ambulatory care sensitive and urgent care sensitive conditions	Quarterly	19-20 Q2	2097	
Leadership and workforce		165a		Quality of leadership	Quarterly	19-20 Q2	Green Star		
		162a		Probity and corporate governance	Quarterly	19-20 Q2	Fully Compliant		
		164a		Effectiveness of working relationships in the local system	Fiscal Year	2018-19	85.4		
		166a		Compliance with statutory guidance on patient and public participation in commissioning health and care	Calendar Year	2018	Green		
		128d		Primary care workforce	Monthly	Mar-19	1.1		
		163a		Staff engagement index	Calendar Year	2018	3.7		
		163b		Progress against the Workforce Race Equality Standard	Calendar Year	2018	0.1		
Finance and use of resources		141b		In-year financial performance	Quarterly	19-20 Q2	Green		
		123i		Delivery of the mental health investment standard	Quarterly	19-20 Q2	Amber		
		123k		Children and Young People and Eating Disorders investment as a percentage of total mental health spend (New Metric)	No Data Published				
		145a		Expenditure in areas with identified scope for improvement	Quarterly	19-20 Q2	Red		
		123d		Children and young people's mental health services transformation	No Data Published				
		109a		Reducing the rate of low priority prescribing (New Metric)	Quarterly	19-20 Q2	Amber		

# Health Outcomes



  Denotes a measure that has been updated in this report

Preventing Premature Mortality					
	2011	2012	2013	2014	Target
Potential Years of Life Lost (PYLL) from causes considered amendable to healthcare, per 100,000		2388.1	2490.2	2499.7	2378
	2015	2016	2017	2018	Target
Under 75 mortality rate from cardiovascular disease (CCG)	76.8	79.5	80.5	82.1	63.7
Under 75 mortality rate from respiratory disease (CCG)	41.3	44	49.2	51.8	27.6
Under 75 mortality rate from liver disease (CCG)	18	18.7	18.6	16.3	15.8
Under 75 mortality rate from cancer (CCG)	127.3	131.4	156.1	156.7	121.4
Enhancing Quality of Life					
	07/13-03/14	07/14-03/15	07/15-03/16	07/16-03/17	Target
Health-related quality of life for people with long-term conditions	0.707	0.702	0.708	0.720	0.740
Enhancing Quality of Life					
	07/15-03/16	01/17-03/17	01/18-03/18	01/19-03/19	Target
Proportion of people feeling supported to manage their condition	66.20	62.10	59.00	61.30	67.14
Enhancing Quality of Life					
	2016/17	2017/18	2018/19	2019/20	Target
Unplanned hospitalisation for chronic ambulatory care sensitive conditions	1025.1	943.4	946.1	956.8	1,074
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	236.7	231.6	184.2	167.8	364
Enhancing Quality of Life					
	May-20	Jun-20	Jul-20	YTD	Target
Diagnosis rate for people with dementia, expressed as a percentage of the estimated prevalence	77.30%	76.60%	76.30%	76.30%	66.70%
Helping Recovery					
	2016/17	2017/18	2018/19	2019/20	National
Emergency admissions for acute conditions that should not usually require hospital admission	1591.9	1498.4	1575.8	1506.6	1,362
Emergency admissions for children with Lower Respiratory Tract Infections (LRTI)	422.4	283.6	344.5	349.0	372.3
Patient Experience					
	Latest Period	Performance		Target	
Satisfaction with the quality of consultation at the GP practice	Jul-17	440.8		437.3	
Satisfaction with the overall care received at the surgery	Aug-19	83.4%		83.8%	
Satisfaction with accessing primary care	Aug-19	66.3%		68.6%	
Protecting People From Avoidable Harm					
	May-20	Jun-20	Jul-20	2020/21 YTD	
Incidence of healthcare associated infection (HCAI) - MRSA (Commissioner)	0	0	0	0	Actual
					Plan
Incidence of healthcare associated infection (HCAI) - MRSA (Provider) - RFT	0	0	0	0	Actual
					Plan
Incidence of healthcare associated infection (HCAI) - C.Diff (Commissioner)	7	8	5	27	Actual
					Plan
Incidence of healthcare associated infection (HCAI) - C.Diff (Provider) - RFT	1	2	2	6	Actual
					Plan
Mental Health: Monthly Indicators					
	May-20	Jun-20	Jul-20	2020/21 YTD	Target
Proportion of people waiting 6 weeks or less from referral to entering a course of IAPT treatment	89.4%	97.4%	96.4%	90.5%	75.0%
Proportion of people waiting 18 weeks or less from referral to entering a course of IAPT treatment	96.3%	98.6%	97.2%	97.4%	95.0%

## Health Outcomes

<b>Mental Health: Monthly Indicators</b>	Apr-20	May-20	Jun-20	2020/21 YTD	Target
Improved Access to Psychological Services-IAPT: People entering treatment against level of need (YTD)	1.3%	2.2%	3.4%	3.4%	19.75%
	Apr-20	May-20	Jun-20	2020/21 YTD	Target
Improved Access to Psychological Services-IAPT: People who complete treatment, moving to recovery	58.26%	60.77%	57.39%	58.64%	50.0%

<b>CYP Eating Disorder (ED) Services - Urgent Cases</b>	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Target
Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral	*	*	*	*	3
Number of CYP with a suspected ED (urgent cases) that start treatment	*	*	*	*	3
Percentage of CYP with ED that start treatment within one week of referral	*	*	*	*	95.0%

Denotes a measure that has been updated in this report

**Delayed Transfers of Care - Rotherham Foundation Trust**

\* DTOC Return is suspended due to COVID-19, therefore no figures after February

		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Delayed transfers of care from hospital (delays days rate)*	Actual	2.3%	2.6%	3.3%	4.5%	3.1%	2.7%	3.7%	4.8%	5.0%	5.2%	5.3%	
	Target	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%
	Actual YTD	2.3%	2.4%	2.7%	3.1%	3.1%	3.1%	3.2%	3.4%	3.6%	3.7%	3.9%	
	Target YTD	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%

**Delayed Transfers of Care - Rotherham Health & Wellbeing Board**

\* DTOC Return is suspended due to COVID-19, therefore no figures after February

		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Delayed transfers of care. Average delayed days a month for Rotherham Health and Wellbeing Board.	Actual	27.5	27.8	28.5	27.2	25.9	26.8	30.3	37.8	36.2	32.9	36.1	
	Target	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	

Delayed transfers of care are monitored in two different ways. At a Hospital Trust level and a Health and Wellbeing Board (HWB) level. The Hospital Trust indicator considers delays as a % of patients in hospital. The HWB level indicator considers the average delayed days in a month.

		Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Long-term support needs of older people (65 and over) met by admission to residential and nursing care homes, per 100,000 population	Actual	29	45										
	Target	0	0	0	0	0	0	0	0	0	0	0	0
	Actual YTD	29	45										
	Target YTD	0	0	0	0	0	0	0	0	0	0	0	0

Both the target and actual figures are cumulative. The target for the year is N/A  
The final position for 2018/19 was 574 versus a target of 562

				2015/16	2016/17	2017/18	2018/19
Proportion of older people (65 and over) still at home 91 days after discharge from hospital into reablement / rehabilitation services	Actual			89.6%	87.5%	82.8%	
	Target			90.0%	91.0%	88.0%	89.0%

Denotes a measure that has been updated in this report

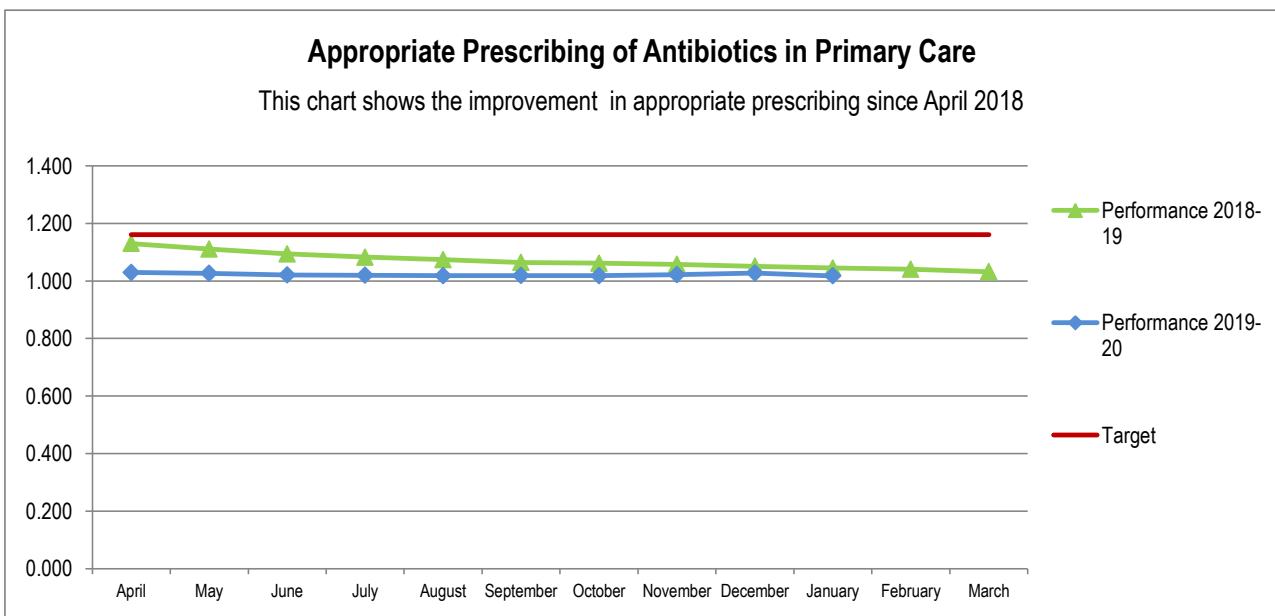
Preventing Premature Mortality		Target	Latest Period	Performance
Proportion of cancers diagnosed at stages 1 and 2	●	49.2%	2017	47.0%

Increase in proportion of GP referrals by e-referral		Target	Latest Period	Performance
Proportion of GP referrals made by e-referrals	●	100.0%	Jan-20	125.9%

Overall Experience of Making a GP Appointment		Target	Latest Period	Performance
% of respondents who said they had a good experience of making an appointment	●	68.6%	Aug-19	66.3%

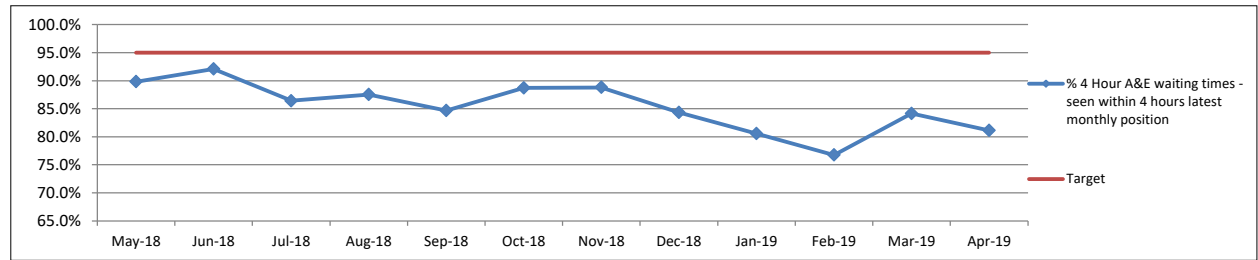
Continuing Health Care		Target	Latest Period	Performance
NHS CHC eligibility decision is made by the CCG within 28 days from receipt of the Checklist (or other notification of potential eligibility)	Please see quality report for performance against CHC indicators			
Full NHS CHC assessments take place in an acute hospital setting to be less than Quality Premium target	Please see quality report for performance against CHC indicators			

Antimicrobial Resistance (AMR) Improving Antibiotic Prescribing in Primary Care		Target	Latest Period	Performance
Reducing gram negative bloodstream infections: Reduction of Ecoli BSI reported at CCG level	●	3	Feb-20	0
Reducing inappropriate antibiotic prescribing for UTI in primary Care: A 10% or greater reduction in the number of Trimethoprim items prescribed to to patients aged 70 year or over	●	2894	Nov-19	2992
Appropriate prescribing of broad spectrum antibiotics in primary care	●	1.161	Jan-20	1.018

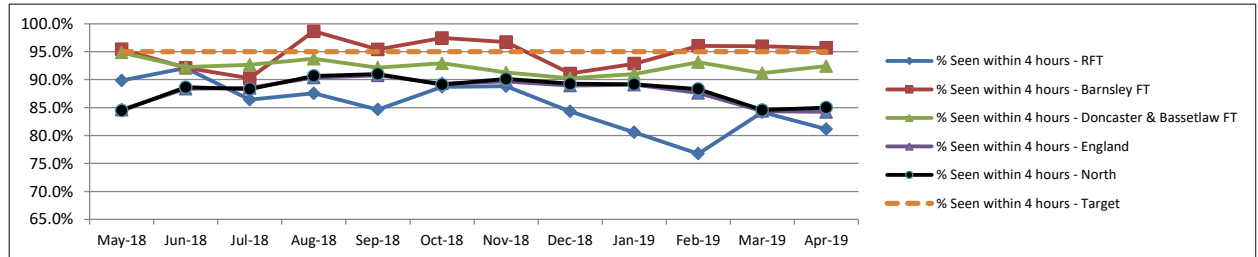


Focus on - A&E Waits

		May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19
% 4 Hour A&E waiting times - seen within 4 hours latest monthly position	Actual	89.8%	92.1%	86.4%	87.5%	84.7%	88.7%	88.8%	84.3%	80.6%	76.7%	84.2%	81.1%
	Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%



	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19
% Seen within 4 hours - RFT	89.8%	92.1%	86.4%	87.5%	84.7%	88.7%	88.8%	84.3%	80.6%	76.7%	84.2%	81.1%
% Seen within 4 hours - Barnsley FT	95.4%	92.1%	90.3%	98.6%	95.4%	97.4%	96.7%	91.1%	92.9%	96.0%	96.0%	95.6%
% Seen within 4 hours - Doncaster & Bassetlaw FT	94.9%	92.2%	92.7%	93.7%	92.2%	92.9%	91.3%	90.2%	91.0%	93.1%	91.2%	92.4%
% Seen within 4 hours - England	84.6%	88.4%	88.5%	90.4%	90.7%	89.3%	89.7%	88.9%	89.1%	87.6%	84.4%	84.2%
% Seen within 4 hours - North	84.5%	88.6%	88.3%	90.7%	91.0%	89.1%	90.1%	89.2%	89.2%	88.3%	84.6%	85.0%
% Seen within 4 hours - Target	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%

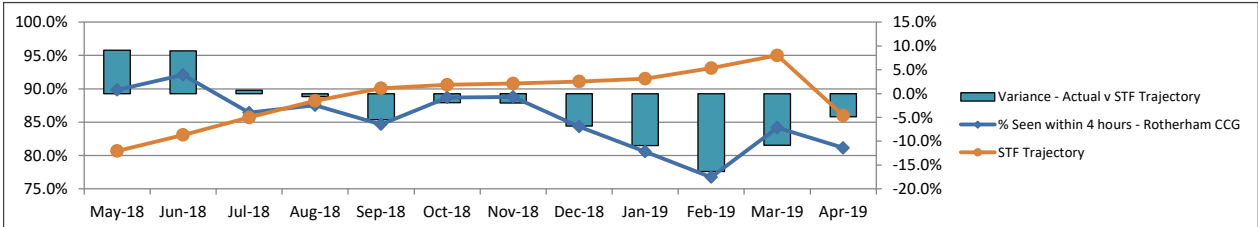


Supporting Narrative

The Rotherham NHS Foundation Trust is currently testing new A&E standards as part of the national Clinical review of NHS access standards. Data is unavailable due to this testing.

Focus on - STF Trajectory

	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19
% Seen within 4 hours - Rotherham CCG	89.8%	92.1%	86.4%	87.5%	84.7%	88.7%	88.8%	84.3%	80.6%	76.7%	84.2%	81.1%
STF Trajectory	80.7%	83.1%	85.7%	88.2%	90.1%	90.6%	90.8%	91.1%	91.5%	93.1%	95.0%	86.0%
Variance - Actual v STF Trajectory	9.1%	9.0%	0.7%	-0.7%	-5.4%	-1.9%	-2.0%	-6.8%	-10.9%	-16.4%	-10.8%	-4.9%



Supporting Narrative

The Rotherham NHS Foundation Trust is currently testing new A&E standards as part of the national Clinical review of NHS access standards. Data is unavailable due to this testing.

Focus on - Refer to Treatment: Incomplete Pathways by Speciality - RCCG Patients

	% Over 13 Weeks	Apr-20	May-20	Jun-20	Jul-20	Target
All specialities - total incomplete	56.0%	78.4%	69.4%	57.0%	50.0%	92.00%
Cardiology	43.7%	82.0%	77.3%	70.7%	66.4%	92.00%
Cardiothoracic Surgery	26.1%	78.6%	69.6%	66.7%	73.9%	92.00%
Dermatology	27.1%	89.3%	81.6%	73.3%	76.3%	92.00%
Ear, Nose & Throat (ENT)	74.2%	67.1%	54.4%	36.0%	30.5%	92.00%
Gastroenterology	33.1%	88.8%	88.5%	79.5%	75.7%	92.00%
General Medicine	31.3%	82.1%	84.6%	87.0%	79.5%	92.00%
General Surgery	48.3%	78.3%	69.2%	60.9%	57.4%	92.00%
Geriatric Medicine	13.4%	88.7%	88.9%	89.7%	96.6%	92.00%
Gynaecology	54.0%	77.2%	70.5%	59.0%	52.0%	92.00%
Neurology	37.8%	81.7%	80.6%	75.0%	71.4%	92.00%
Neurosurgery	40.7%	84.0%	78.2%	73.8%	64.2%	92.00%
Ophthalmology	72.9%	79.3%	64.8%	46.1%	32.5%	92.00%
Other	56.8%	78.7%	70.8%	59.6%	49.1%	92.00%
Plastic Surgery	43.0%	85.3%	69.1%	62.5%	59.5%	92.00%
Rheumatology	57.7%	94.1%	86.0%	68.8%	53.1%	92.00%
Thoracic Medicine	43.1%	79.7%	69.5%	63.9%	64.0%	92.00%
Trauma & Orthopaedics	70.1%	70.7%	55.9%	39.1%	34.6%	92.00%
Urology	35.8%	81.6%	76.3%	68.9%	70.6%	92.00%

Focus on - Refer to Treatment: Incomplete Pathways

Total Incomplete 18 Week Pathways - Rotherham CCG	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20
Number of Pathways	17886	18071	18822	18387	18200	18245	18590	17569	15573	15400	15387	16159
Mar-19 Number of Pathways	16819	16819	16819	16819	16819	16819	16819	16819	16819	16819	16819	16819
Difference	1067	1252	2003	1568	1381	1426	1771	750	-1246	-1419	-1432	-660

**Supporting Narrative**

Latest provisional data for July shows seventeen specialities under the 92% standard, with just Geriatric Medicine meeting the Standard (96.6%).

Rotherham CCG performance benchmarks as follows against other CCG's in South Yorkshire for RTT Incomplete waits in July (57.0%):

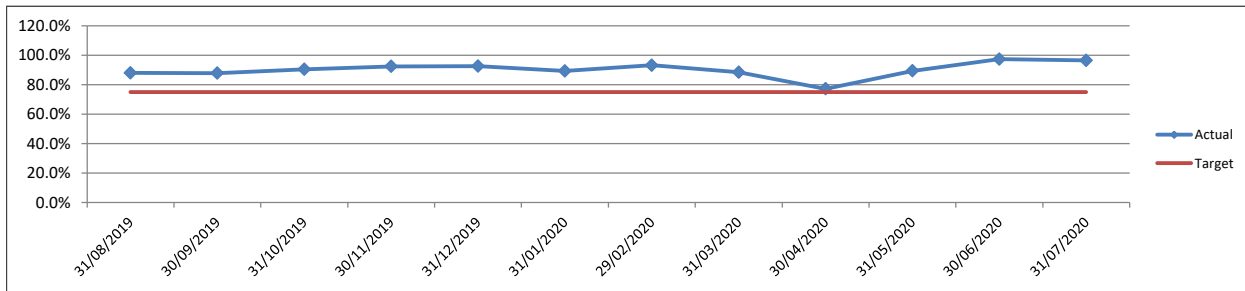
Barnsley CCG – 65.2%/ Bassetlaw CCG – 62.0%/ Doncaster CCG – 61.4% / Sheffield CCG – 66.5%/ National – 39.2%

In addition to performance against the 18 week waiting time, a comparison of the current waiting list size compared to March 19 has been provided for information. Further guidance on waiting list size is expected following the COVID outbreak.



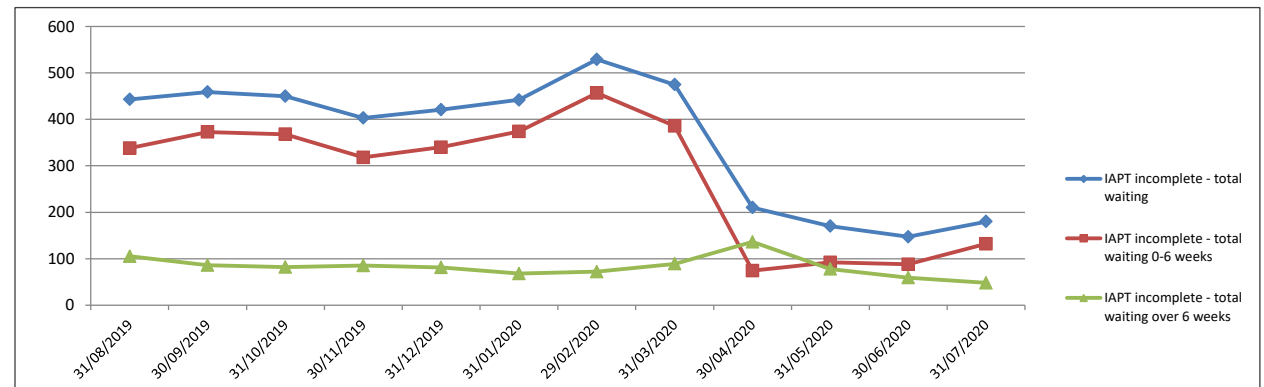
Focus on - IAPT Waiting Times

		31/08/2019	30/09/2019	31/10/2019	30/11/2019	31/12/2019	31/01/2020	29/02/2020	31/03/2020	30/04/2020	31/05/2020	30/06/2020	31/07/2020
Proportion of people waiting six weeks or less from referral to entering a course of IAPT treatment	Actual	88.1%	87.9%	90.5%	92.5%	92.6%	89.3%	93.2%	88.4%	77.2%	89.4%	97.4%	96.4%
	Target	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%



Focus on - IAPT 6 Week Wait Waiting List

		31/08/2019	30/09/2019	31/10/2019	30/11/2019	31/12/2019	31/01/2020	29/02/2020	31/03/2020	30/04/2020	31/05/2020	30/06/2020	31/07/2020
IAPT incomplete - total waiting	Actual	443	459	450	403	421	442	529	475	210	170	147	180
IAPT incomplete - total waiting 0-6 weeks	Actual	338	373	368	318	340	374	457	386	74	92	88	132
IAPT incomplete - total waiting over 6 weeks	Actual	105	86	82	85	81	68	72	89	136	78	59	48



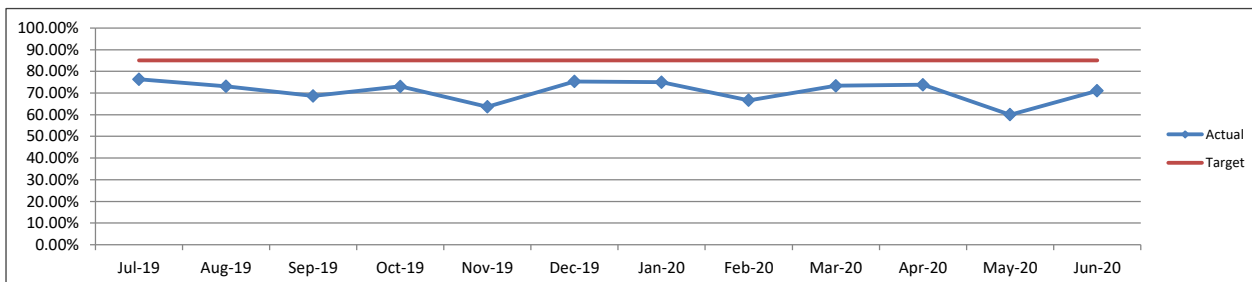
**Supporting Narrative**

Local comparison (published data May 20) shows the following benchmark position.

- Barnsley – 78%
- Bassetlaw – 92%
- Doncaster – 54%
- Sheffield – 93%
- National – 67%

Focus on - Cancer (62 Days)

		Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20
Cancer - % patients seen within 62 days of referral from GP	Actual	76.32%	73.08%	68.66%	73.03%	63.64%	75.32%	75.00%	66.67%	73.33%	73.81%	60.00%	71.05%
	Target	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%
Cancer patients seen within 62 days of referral from GP		58	57	46	65	49	58	51	38	55	31	21	27
Total cancer patients waiting to be seen within 62 days of referral from GP		76	78	67	89	77	77	68	57	75	42	35	38



**Supporting Narrative**

In June the 62 day GP referral to treatment target did not meet the national standard of 85%, with performance at 71.05%.

National performance in June was 75.21%.

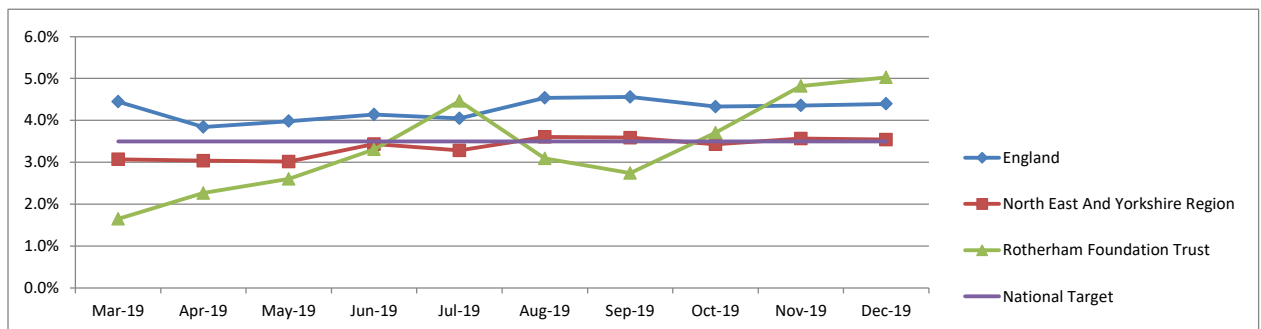
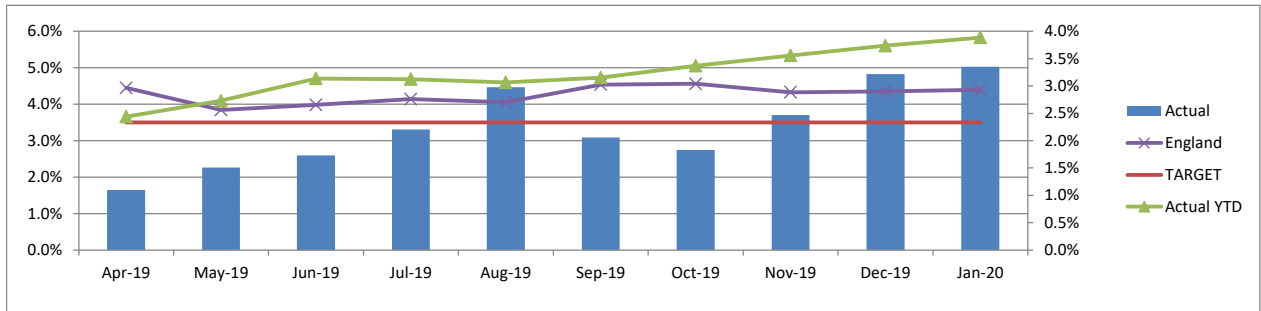
Breach details for June can be seen below.

Tumour Type	First Seen Provider	First Treatment Provider	Wait Days	Delay Reason Comment
Urological (Excluding Testicular)	Rotherham FT	Rotherham FT	75	Other reason (not listed)
Breast	Rotherham FT	Rotherham FT	63	PATIENT Did Not Attend an APPOINTMENT for a diagnostic test or treatment planning event (no advance notice)
Lower Gastrointestinal	Rotherham FT	Rotherham FT	95	Other reason (not listed)
Urological (Excluding Testicular)	Rotherham FT	Sheffield Teaching FT	77	Health Care Provider initiated delay to diagnostic test or treatment planning
Upper Gastrointestinal	Rotherham FT	Sheffield Teaching FT	98	Other reason (not listed)
Upper Gastrointestinal	Rotherham FT	Sheffield Teaching FT	98	Other reason (not listed)
Upper Gastrointestinal	Rotherham FT	Sheffield Teaching FT	68	Other reason (not listed)
Urological (Excluding Testicular)	Rotherham FT	Sheffield Teaching FT	72	Health Care Provider initiated delay to diagnostic test or treatment planning
Urological (Excluding Testicular)	Rotherham FT	Sheffield Teaching FT	133	Diagnosis delayed for medical reasons (PATIENT unfit for diagnostic episode excluding planned recovery period following diagnostic test)
Urological (Excluding Testicular)	Rotherham FT	Sheffield Teaching FT	99	Other reason (not listed)
Urological (Excluding Testicular)	Rotherham FT	Sheffield Teaching FT	75	Other reason (not listed)
Urological (Excluding Testicular)	Rotherham FT	Leeds Teaching Hospitals Trust	189	Health Care Provider initiated delay to diagnostic test or treatment planning
Urological (Excluding Testicular)	Rotherham FT	Leeds Teaching Hospitals Trust	189	Health Care Provider initiated delay to diagnostic test or treatment planning

Focus on - Delayed Transfer of Care (Rotherham NHS Foundation Trust)

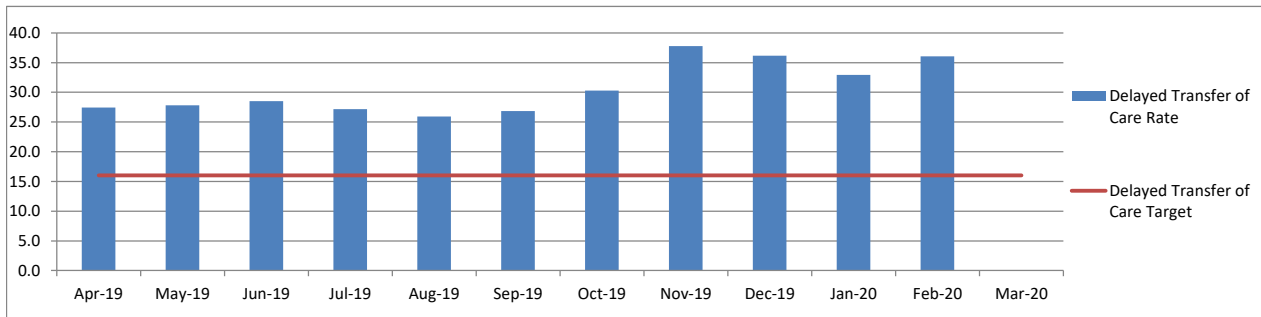
\* DTOC Return is suspended due to COVID-19, therefore no figures after February

		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Delayed transfers of care from hospital (delays days rate)*	Actual	2.3%	2.6%	3.3%	4.5%	3.1%	2.7%	3.7%	4.8%	5.0%	5.2%	5.3%	
	Target	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%
	Actual YTD	2.3%	2.4%	2.7%	3.1%	3.1%	3.1%	3.2%	3.4%	3.6%	3.7%	3.9%	
	Target YTD	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%



\* DTOC Return is suspended due to COVID-19, therefore no figures after February

Delayed transfers of care. Average delayed days a month for Rotherham Health and Wellbeing Board.		Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Actual		27.5	27.8	28.5	27.2	25.9	26.8	30.3	37.8	36.2	32.9	36.1	
Target		16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0	16.0



**Supporting Narrative**

Please Note: Data is not currently available as Submission/Publication has been suspended due to the coronavirus illness (COVID-19) and the need to release capacity across the NHS to support the response.

Delayed transfers of care are monitored in two different ways. At a Hospital Trust level and a Health and Wellbeing Board (HWB) level. The Hospital Trust indicator considers delays as a % of patients in hospital. The HWB level indicator considers the average delayed days in a month for all of Rotherham.

Rotherham FT is not within the less than 3.5% national standard for Hospital Trusts. TRFT are currently at 5.3% in February 20, with performance in January 20 at 5.2%. This compares to provisional figures of 4.3% for North East And Yorkshire Region and 4.9% nationally.

## Focus on Performance

Diagnostic Wait (<1% Target) - Rotherham CCG

July-20 Provisional

Treatment function	Total	6Wks+	6Wks+ Waits %
Magnetic Resonance Imaging	956	530	55.44%
Computed Tomography	1204	587	48.75%
Non-obstetric ultrasound	2081	791	38.01%
Barium Enema	0	0	0.00%
DEXA Scan	595	356	59.83%
Audiology - Audiology Assessments	256	95	37.11%
Cardiology - echocardiography	265	10	3.77%
Cardiology - electrophysiology	0	0	0.00%
Neurophysiology - peripheral neurophysiology	28	15	53.57%
Respiratory physiology - sleep studies	25	12	48.00%
Urodynamics - pressures & flows	68	48	70.59%
Colonoscopy	516	274	53.10%
Flexi sigmoidoscopy	226	151	66.81%
Cystoscopy	106	55	51.89%
Gastroscopy	685	406	59.27%
<b>Total Diagnostics</b>	<b>7011</b>	<b>3330</b>	<b>47.50%</b>