

# BNSSG CCG Governing Body Meeting

Date: Tuesday 5<sup>th</sup> February 2019

Time: 1.30pm

Location: The Royal Hotel, 1 South Parade, Weston-super-Mare BS23 1JP

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## Agenda number: 8.3

### Report title: Improvement and Assessment Framework 2018/19

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#### 1. Purpose

To inform the Governing Body of

- The purpose and content of the Improvement and Assessment Framework
- The changes to the framework in 2018/19
- The performance of the CCG in Q1 2018/19
- The approach to using the framework to guide the work of BNSSG CCG in 2019/20

#### 2. Recommendations

To note the performance position of the CCG in Q1 2018/19 and the work to further develop BNSSG performance in 2019/20.

#### 3. Executive Summary

##### 3.1 The Improvement and Assessment Framework

- NHS England's CCG improvement and assessment framework (IAF) was introduced in March 2016 and aligns key objectives and priorities from the Five Year Forward View of
  - Improving the health and wellbeing of the whole population
  - Reducing health inequalities
  - Better quality for all patients, through care redesign

- Better value for taxpayers in a financially sustainable system
- It was designed to supply indicators for adoption in healthcare systems as markers of success
- The framework reflects a CCG's fitness to operate successfully and will inform NHS England's assessment of CCGs in 2018/19
- The annual assessment will be a judgement, reached by taking into account the CCG's performance in each of the indicator areas over the full year and balanced against the financial management and qualitative assessment of the leadership of the CCG
- From year to year, different priorities may be assigned higher priority than others and given more weighting in the annual performance assessment, therefore there are challenges in predicting our likely year end position, and monitoring on a monthly basis. As a result, and due to the national timescales for recording and reporting, we are just reporting Q1 2018/19 performance to the Governing Body.

### 3.2 Changes in 2018/19

- There are 58 core performance and outcome measures in total, an increase from 51 in 2017/18, grouped into four domains:
  - Better Health
  - Better Care
  - Sustainability
  - Leadership
- The 7 additional metrics are outlined in the attached paper, with current performance assessments where this is measurable.

### 3.3 Current performance

- 2017/18 year end ratings for all 3 predecessor CCGs were 'requires improvement', a stable or improving position from 2016/17.
- Q1 performance cannot be reported on this composite basis for the reasons outlined above, but it is of note that there are no indicators showing deteriorating performance.

### 3.4 Performance in 2019/20

- In order to drive performance against the IAF, the senior management team in the CCG has identified lead managers for performance monitoring and performance improvement. This will form the basis of a performance management framework for the CCG which will align to roles and structures below the Governing Body subcommittees.
- As part of developing performance reporting and improvement for the STP it is key to ensure that all partners are aligned around key performance metrics. Currently, NHS providers and commissioners are performance managed against different frameworks (providers are monitored against the NHS Improvement Single Oversight Framework) and we have undertaken an initial mapping of the IAF and SOF to identify areas of commonality in support of developing an Integrated Oversight Framework (ahead of the national work to develop this single assessment route).

## 4. Financial resource implications

None

## 5. Legal implications

None

## 6. Risk implications

None

## 7. Implications for health inequalities

None

## 8. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

None

## 9. Implications for Public Involvement

Not applicable

## 10. Appendices

**Appendix 1 – Improvement & Assessment Framework Q1 summary**

**Appendix 2 – IAF & SOF mapping report**

## Glossary of terms and abbreviations

<b>BNSSG</b>	Bristol, North Somerset & South Gloucestershire
<b>IAF</b>	Improvement and Assessment Framework
<b>SOF</b>	Single Oversight Framework

# Improvement and Assessment Framework

Quarter 1 2018/19 Performance Summary

# Improvement and Assessment Framework (IAF)

- The Five Year Forward View, Refreshing NHS Plans for 2018/19, Sustainability and Transformation Partnerships (STPs) and their more advanced form, Integrated Care Systems (ICSs), are all driven by the pursuit of:
  - Improving the health and wellbeing of the whole population
  - reducing health inequalities
  - Better quality for all patients, through care redesign
  - Better value for taxpayers in a financially sustainable system.
- NHS England's CCG improvement and assessment framework (IAF) was introduced in March 2016 and aligns these key objectives and priorities.
- It was designed to supply indicators for adoption in healthcare systems as markers of success.
- The framework reflects a CCG's fitness to operate successfully and will inform NHS England's assessment of CCGs in 2018/19.
- The annual assessment will be a judgement, reached by taking into account the CCG's performance in each of the indicator areas over the full year and balanced against the financial management and qualitative assessment of the leadership of the CCG.
- From year to year, different priorities may be assigned higher priority than others and given more weighting in the annual performance assessment.
- NHS England and NHS Improvement are working together to develop an integrated oversight framework to assess how well a healthcare system is performing. This will provide a consistent means of assessing system-level performance

# IAF

- Measures core performance and outcome goals to enable the year end assessment of CCGS. There are 58 measures in total, an increase from 51 in 2017/18, grouped into four domains:
  - Better Health
  - Better Care
  - Sustainability
  - Leadership

- 2017/18 Year End Ratings:

- Bristol 

Requires Improvement
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- North Somerset 

Requires Improvement
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- South Gloucestershire 

Requires Improvement
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- The performance and assessments contained in this report is the latest national position as published publically by NHS England.
- This is the first quarter to report the performance of BNSSG CCG. Prior Q1 2018/19, assessments were provided on an individual CCG basis so comparisons to previous quarters are limited.

# IAF Ratings - 17/18 compared to 16/17

CCG	17/18 Rating	16/17 Rating
Bristol	Requires Improvement	Requires Improvement
North Somerset	Requires Improvement	Inadequate
South Gloucestershire	Requires Improvement	Inadequate

- North Somerset and South Gloucestershire improved from a rating of Inadequate in 16/17 to a rating of Requires Improvement in 17/18.
- Bristol rating of Requires Improvement remained the same in both 16/17 and 17/18.

Rating	CCGs 17/18	CCGs 16/17
Outstanding	20 (9.7%)	21 (10%)
Good	100 (48.3%)	99 (47.4%)
Requires Improvement	69 (33.3%)	66 (31.6%)
Inadequate	18 (8.7%)	23 (11.0%)
Total	207	209

- In 17/18 all three CCGs were among 69 CCGs (33.3%) who had a rating of Requires Improvement.
- In 16/17 North Somerset and South Gloucestershire were among 23 CCGs (11%) who had a rating of Inadequate.
- In 16/17 Bristol was among 66 CCGs (31.6%) who had a rating of Requires Improvement.

# Changes to the IAF for 2018-19

For 2018/19, seven new indicators have been added (see below) and a number of updates have been made to existing indicators.

- Better Care – Mental Health:
  - Proportion of people on GP severe mental illness register receiving physical health checks in primary care. (not yet able to assess)
  - Cardio-metabolic assessment in mental health environments. (not yet able to assess)
  - Delivery of the mental health investment standard. (compliant)
  - Quality of mental health data submitted to NHS Digital (DQMI). (not yet able to assess)
- Better Care – Primary Care:
  - Count of the total investment in primary care transformation made by CCGs compared with the £3 head commitment made in the General Practice Forward View. (The IAF assessment for Q1 18/19 rates the \*CCG as Red. *This does not reflect the correct position and will be amended through the ledger for 2018/19*)
- Better Care – Diagnostics:
  - Patients waiting six weeks or more for a diagnostic test. (CCG is failing the standard for September 2018).
- Sustainability – Demand Management:
  - Expenditure in areas with identified scope for improvement. (\*CCG is rated Green).

<sup>5</sup>  
\*See notes section below for definition of RAG ratings for these measures



# Quarter 1 - Areas of Improving Performance

Several areas have been highlighted as having improving performance (defined as showing improvement in the last 3 data points) these include:

- Personal health budgets is improving.
- AMR appropriate prescribing is improving and best quartile.
- AMR broad spectrum prescribing is improving.
- EIP 2 week referral is improving.
- Primary Care Workforce is improving and best quartile.
- Percentage of NHS CHC assessments taking place in acute hospital setting is improving.

# Quarter 1 – Other areas with top quartile performances

- Utilisation of the NHS e-referral service
- High quality care in Primary care
- High quality care in Adult Social
- Neonatal mortality and stillbirths
- Percentage of deaths with 3+ emergency admissions in last three months of life

# Areas for Improvement – NHS England assessment

## Better Health

- Diabetes patients who achieved NICE targets.
- Diabetes attendance at structured education courses.

## Better Care

- IAPT recovery rate.
- Delayed transfers of care per 100,000 population.
- Primary care transformation investment (this will be remedied in reporting)

These are all areas subject to existing action plans, anticipated to lead to improved performance



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# Better Health

# Better Health – Clinical Effectiveness

- 2017/18 assessments for the four clinical priority areas – mental health, dementia, learning disabilities and diabetes – were recently undertaken by independent panels.
- The assessments are based on the relevant clinical indicators used in the overall CCG IAF, and are in addition to the headline assessments for 2017/18 previously noted.
- Each CCG is provided with one of four ratings, described as: ‘outstanding’; ‘good’; ‘requires improvement’; and, ‘inadequate’.
- To make the assessments, the latest data available for 2017/18 was used.
- Assessments for the clinical areas and the distribution of ratings across all CCGs are shown in the following tables.

CCG	Mental Health	Dementia	Learning Disabilities	Diabetes
Bristol	Requires Improvement	Outstanding	Requires Improvement	Requires Improvement
North Somerset	Requires Improvement	Inadequate	Requires Improvement	Requires Improvement
South Gloucestershire	Requires Improvement	Inadequate	Requires Improvement	Inadequate

Rating	Mental Health	Dementia	Learning Disabilities	Diabetes
Outstanding	3	57	0	44
Good	98	52	38	45
Requires Improvement	105	73	162	100
Inadequate	1	21	7	18
Insufficient Validated Data	0	4	0	0

# Better Health

BETTER HEALTH DOMAIN					
Measure		Latest data period	Performance	Position against Peers	DoT
102a	% 10-11 classified overweight /obese	2014/15 to 2016/17	31.0%	5/11	
103a	Diabetes patients who achieved NICE targets	2016-17	36.1%	10/11	
103b	Attendance of structured education course	2016-17*	2.0%	8/11	
104a	Injuries from falls in people 65yrs +	17-18 Q3			
105b	Personal health budgets	18-19 Q1	15.18	9/11	
106a	Inequality Chronic - ACS & UCSCs	17-18 Q3			
107a	AMR: appropriate prescribing	2018 07	0.889	3/11	
107b	AMR: Broad spectrum prescribing	2018 07	9.9%	9/11	
108a	Quality of life of carers	2018	0.60	5/11	

## Key

Worst Quartile in England
Best Quartile in England
Deteriorating performance
Improving Performance
Failing Standard
New indicator for 2018/19

# Better Health

- Diabetes patients who achieved NICE targets is national worse quartile performance.
- Attendance at structured education course is national worst quartile performance.
- Appropriate prescribing of antibiotics in primary care is national best quartile performance



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# Better Care



# Better Care Part 1

BETTER CARE DOMAIN Part 1					
		Latest data period	Performance	Position against Peers	DoT
121a	High quality care - acute	18-19 Q1	60	8/11	
121b	High quality care - primary care	18-19 Q1	68	3/11	
121c	High quality care - adult social care	18-19 Q1	64	2/11	
122a	Cancers diagnosed at early stage	2016	54.2%	5/11	
122b	Cancer 62 days of referral to treatment	18-19 Q1	85.0%	3/11	
122c	One-year survival from all cancers	2015			
122d	Cancer patient experience	2017	8.7	8/11	
123a	IAPT recovery rate	18-19 Q1	48.4%	10/11	
123b	IAPT Access	18-19 Q1	3.9%	10/11	
123c	EIP 2 week referral	2018 09	77.7%	4/11	
123d	MH - CYP mental health (not available)				
123f	MH - OAP (not available)				
123e	MH - Crisis care and liaison (not available)				
123g	MH - health checks (not available)				
123h	MH - cardiometabolic assessments (not available)				
123i	MH - investment standard		Compliant		
123j	MH - DQMI (not available)				
124a	LD - reliance on specialist IP care	18-19 Q1	54	6/11	
124b	LD - annual health check	2016-17	51.9%	5/11	
124c	Completeness of the GP learning disability register	2016-17	0.46%	6/11	

key

Worst Quartile in England

Best Quartile in England

Deteriorating performance

Improving Performance

Failing Standard

# Better Care Part 2

BETTER CARE DOMAIN Part 2					
		Latest data period	Performance	Position against Peers	DoT
125d	Maternal smoking at delivery	18-19 Q1	9.6%	4/11	
125a	Neonatal mortality and stillbirths	2016	3.3	1/11	
125b	Experience of maternity services	2017	83.1	6/11	
125c	Choices in maternity services	2017	62.6	2/11	
126a	Dementia diagnosis rate	2018 08	68.3%	4/11	
126b	Dementia post diagnostic support	2016-17	78.0%	8/11	
127b	Emergency admissions for UCS conditions	17-18 Q3			
127c	A&E admission, transfer, discharge within 4 hours	2018 10	87.7%	7/11	
127e	Delayed transfers of care per 100,000 population	2018 09	15.0	5/11	
127f	Hospital bed use following emerg admission	17-18 Q3			
105c	% of deaths with 3+ emergency admissions in last three months of life	2017	3.29%	1/11	
128b	Patient experience of GP services	2018	84.5%	5/11	
128c	Primary care access	2018 08	100.0%		
128d	Primary care workforce	2018 03	1.13	2/11	
128e	<i>Primary care transformation investment</i>	18-19 Q1	Red	10/11	
129a	18 week RTT	2018 09	89.1%	5/11	
130a	7 DS - achievement of clinical standards	2016-17	2		
131a	% NHS CHC assessments taking place in acute hospital setting	18-19 Q1	7.5%	7/11	
132a	Sepsis awareness	2017			
133a	<i>6 week diagnostics</i>	2018 09	1.8%	9/11	

## Key

Worst Quartile in England

Best Quartile in England

Deteriorating performance

Improving Performance

Failing Standard

*New indicator for 2018/19*

# Better Care

- High Quality Care measures are based on CQC ratings for all providers in the area. BNSSG is national best quartile for both Primary Care and Adult Social Care.
- IAPT recovery rate is national worst quartile and is failing the standard.
- Neonatal mortality and still births is national best quartile.
- A&E 4 hour waits is failing the standard.
- Delayed transfers of care per 100,000 population is national worst quartile.
- Percentage of deaths with 3+ emergency admissions in last three months is national best quartile.
- Primary care workforce is national best quartile.
- Primary care transformation investment (new for Q1 2018/19) is national worst quartile (note – the IAF reported position does not reflect the actual level of investment and that the standard is achieved).
- 18 week RTT is failing the standard.
- 6 week diagnostics (new for Q1 2018/19) is failing the standard.



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# Sustainability

# Sustainability Domain

SUSTAINABILITY DOMAIN					
		Latest data period	Performance	Position against Peers	DoT
141b	In-year financial performance	18-19 Q1	Amber		
144a	Utilisation of the NHS e-referral service	2018 07	87.9%	3/11	
145a	<i>Expenditure in areas with identified scope for improvement</i>	18-19 Q1	Green		

- BNSSG CCG are national best quartile for Utilisation of the NHS e-referral service.

Key
Worst Quartile in England
Best Quartile in England
Deteriorating performance
Improving Performance
Failing Standard
<i>New indicator for 2018/19</i>



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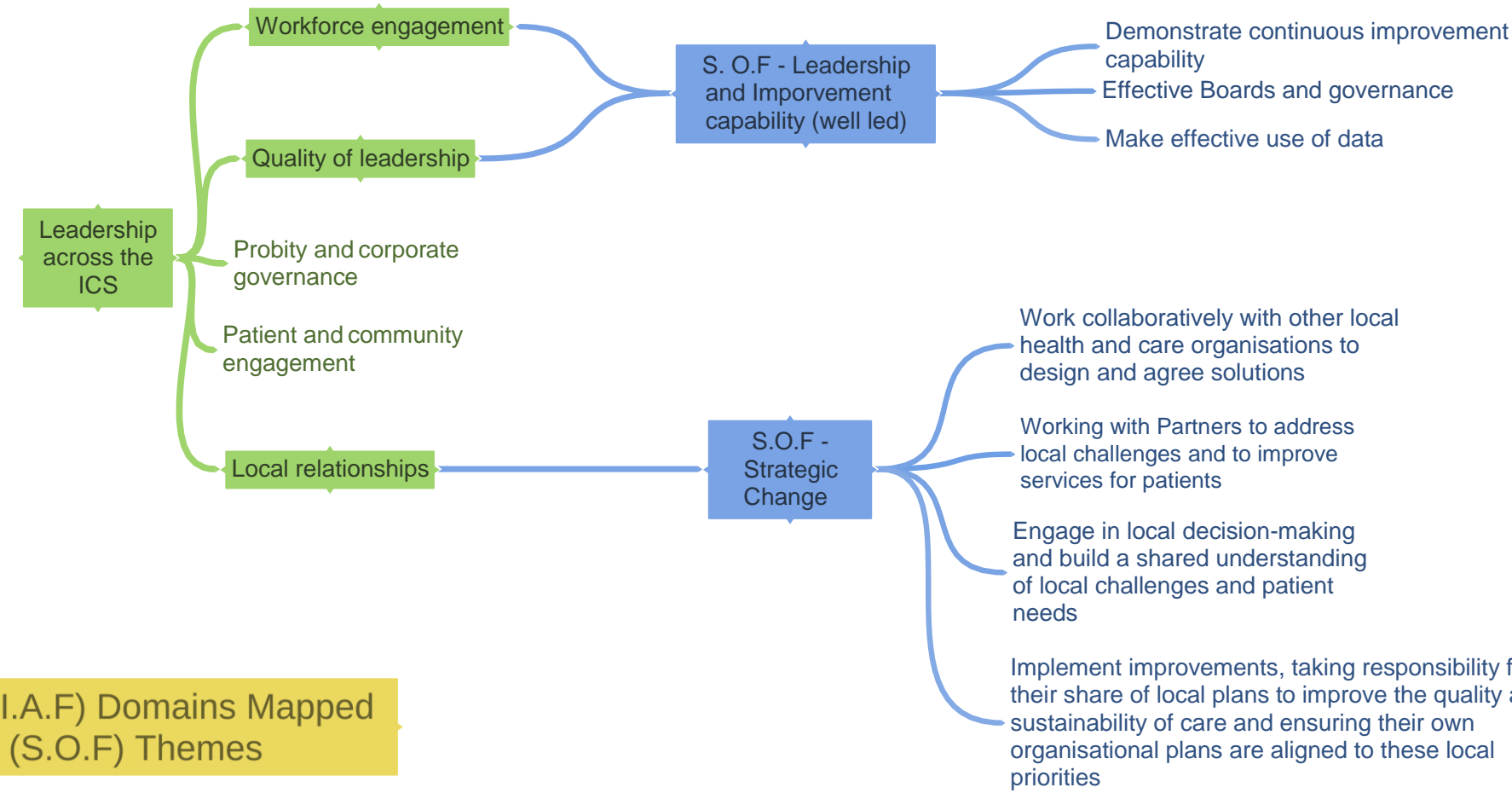
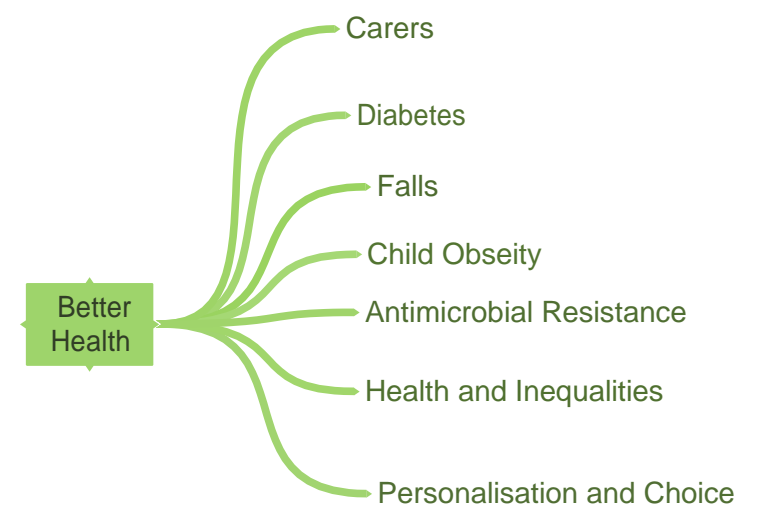
# Leadership

# Leadership Domain Q1 18/19 vs Q4 17/18

LEADERSHIP DOMAIN				
		Latest data period	Performance	Position against Peers
162a	Probity and corporate governance	18-19 Q1	Fully Compliant	
163a	Staff engagement index	2017		
163b	Progress against WRES	2017		
164a	Working relationship effectiveness	2017-18		
166a	CCG compliance with standards of public and patient participation	2017		
165a	Quality of CCG leadership	18-19 Q1	Green	

Measure	Latest data period	Bristol		North Somerset		South Glos		
		Performance	Position against Peers	Performance	Position against Peers	Performance	Position against Peers	
162a	Probity and corporate governance	17-18 Q4	Fully Compliant		Fully Compliant		Fully Compliant	
163a	Staff engagement index	2017	3.76	7/11	3.72	9/11	3.73	9/11
163b	Progress against WRES	2017	0.20	11/11	0.17	11/11	0.21	11/11
164a	Working relationship effectiveness	17-18	61.5	9/11	61.5	10/11	61.5	9/11
166a	CCG compliance with standards of public and patient participation	2017	Green		Amber		Green	
165a	Quality of CCG leadership	17-18 Q4	Amber		Amber		Amber	

- BNSSG CCG are Fully Compliant against the 'Probity and corporate governance' measure (as were the three separate CCGs in Q4 17/18)
- BNSSG CCG are now Green against the 'Quality of CCG leadership' measure, showing an improvement from Amber in Q4 17/18 for all three separate CCGs
- The three separate CCGs were all in the national bottom quartile for two of the measures at the end of Q4 17/18 and both North Somerset and South Gloucestershire CCGs were in the national bottom quartile for a further measure. There is no 18/19 data for these measures at present to provide an assessment for BNSSG CCG.



**Improvement and Assessment Framework (I.A.F) Domains Mapped Against Single Oversight Framework (S.O.F) Themes**

**Key:**  
I.A.F indicators = Green  
S.O.F indicators = Blue

