

**NHS Southend Clinical Commissioning Group
Governing Body Public Part 1
27th March 2019**

Agenda item 19

SEE CCGs Acute Demand Management Report M9

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Status: For Approval

Appendices to this report	
Appendix 1	<ul style="list-style-type: none">• Southend CCG, Finance Report for period ending January 2019 (Month 10)
Associated Papers	
Papers previously considered by this CCG	<ul style="list-style-type: none">• N/A
CCG Policy Documents	<ul style="list-style-type: none">• N/A
External Documents	<ul style="list-style-type: none">• N/A

1. MAIN REPORT

1. Introduction

The purpose of this report is to inform members of the Committee of the latest Year to Date (YTD) position for Acute Demand Management, alongside the associated acute contract position, alongside a deeper dive of the prior month activity for key areas of demand: GP Referral Rates and Non-Elective.

This paper should be read in conjunction with the Finance and QIPP reports.

2. Demand Management: A&E and Non-Elective (Month 9)

This report is based on Month 10 national activity reporting and Month 10 Flex contract activity and finance data submitted by local Acute Providers and London Associates contracts.

2.1 Southend CCG

The month 10 national data, summarised in the table below, shows deteriorating performance against plan for Non-Elective activity and a slight increase in A&E activity as at January 2019. The figures in brackets are the position as at last month (m9). The 12 month rolling growth trend for all non-elective remains steady. Winter pressures at SUHFT and additional escalation beds being opened will play a significant part in the non-elective position.

	Total Non-Electives – Zero Day LoS	Total Non-Electives – 1+ Day LoS	Total Non-Electives – All LoS	Total A&E Attendances
Variance from Plan	26% (5%)	13.8% (11%)	18% (3%)	3% (1%)
12 mth rolling growth	20%	5%	10%	3%

Non-Elective demand management remains a key focus of the CCG QIPP programme for 2018/19, further details of which can be found in the Finance and QIPP Report.

At SUHFT, A&E activity was 124 attendances above plan in month 9. Overall over performance of 5% (1958) YTD.

For Non-Elective admissions activity is 16% (2,332 spells) over contract plan YTD. Over performance is driven by General Medicine and Accident and Emergency (likely to be over activity through ambulatory care admissions where ambulatory care is being used as escalation bed space).

3. Demand Management: Referrals, Outpatient and Elective

This report is based on Month 10 national activity reporting and Month 10 Flex contract activity and finance data submitted by local Acute Providers and London Associates contracts.

3.1 Southend CCG

The month 10 national data, summarised in the table below, shows under performance in GP referrals and slight over performance in outpatient activity. Elective and Day Case activity remains significantly under plan. The figures in brackets are the position as at last month (m9), where available.

Outpatient activity is below plan for the first time in 3 months.

	GP Referrals	Other Referrals	All Outpatients (FA & FUP)	Total Day Case	Total Elective
Variance from Plan	-13% (-21%)	-6% (-11%)	3% (-2.5%)	-3% (-10%)	-7% (-12%)
12 mth rolling growth	-8%	-3%	2.7%	-6%	-6%

The over performance of outpatient activity YTD is largely due to the Ophthalmology activity recovery plan which was not accounted for within the planning round. There is also increased activity in Respiratory, Gynaecology and Orthopaedics, offset by paediatrics, general surgery and neurology.

For SUHFT, outpatient firsts are over performing by 2% (2% YTD at month 10). Day Case underperforms at SUHFT YTD by 6%, predominantly in General Medicine (Endoscopy) and Trauma & Orthopaedics.