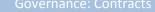
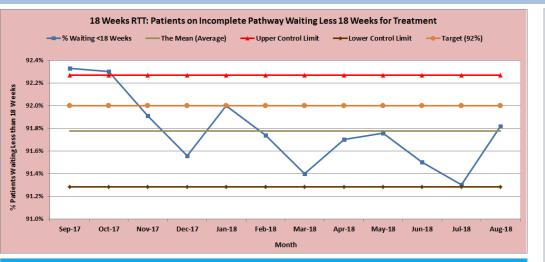
Health and Care Improvement- Exception

Appendix 2

18 Weeks RTT: Patients on incomplete pathway waiting less than 18 weeks for treatment Lead Officer: Elaine Richardson Lead Director: Jess Williams





Monthly Referral to Treatment (RTT) waiting times for incomplete pathways.				
	Aug-18			
сс	Total number of incomplete pathways	Total within 18 weeks	% within 18 weeks	Target
NHS Wigan Borough CCG	20950	19513	93.14%	92%
NHS Salford CCG	23986	21886	91.24%	92%
NHS Tameside and Glossop CCG	17981	16510	91.82%	92%
NHS Bolton CCG	23443	21142	90.18%	92%
NHS Trafford CCG	16458	14826	90.08%	92%
NHS Oldham CCG	14812	13353	90.15%	92%
NHS Manchester CCG	43292	39094	90.30%	92%
NHSE North of England	1091378	968044	88.70%	92%
NHS Bury CCG	14165	12607	89.00%	92%
NHS Heywood, Middleton & Rochdale CCG	17692	15419	87.15%	92%
NHS Stockport CCG	28450	24435	85.89%	92%

^{*} Benchmarking data relates to August 2018

Key Risks and Issues:

The RTT 18 weeks performance for August was 91.8% which is below the National Standard of 92%.

Failing specialties are, Urology (91.17%), Trauma & Orthopaedics (89.61%), ENT (91.84%), Plastic Surgery (79.67%), Cardio thoracic (83.33%), Cardiology (91.9%, Rheumatology (82.3%), Gynaecology (90.91%).

The performance at MFT at 88.65% is the key reason for the failure in August with 405 people breaching. Stockport, Salford and Pennine trusts also contributed to the failure accounting for a further 273 breaches. T&O continues to be a challenge across most providers.

In MFT our concerns are around plastics, cardio thoracic, gynaecology and cardiology in addition a recent review of long waiters and their PAS highlighted 52 week waiters in general surgery, urology, T&O and ENT. As lead Commissioner.

T&G ICFT as a provider are achieving the standard.

Actions:

MFT have advised the following.

- written to each patient identified and apologised immediately
- Undertaken a clinical review of the patients so far not identified any significant patient harm as a result of the delay
- •Made plans to treat all the patients by the end of September.
- •A Task Force has been set up to oversee immediate treatment of patients and to review IT and operational processes a detailed action plan is in place. Will be a single point of contact to CCGs and the GM Partnership in relation to this issue.
- •will introduce a more modern version of waiting list system although this will take up to two years to complete
- •informed regulators, GM and the Board of plan.
- •weekly briefing note will be provided to commissioners

Operational and Financial implications:

Failure of the standard will negatively impact on the CCG assurance rating. However regular contact is maintained with GMHSCP and the local work being undertaken is recognised.

The failure of this target will impact on the CCGs ability to obtain the money attached to this target for the Quality Premium Payment (QPP).