



# **Blackpool Clinical Commissioning Group**

## **Mid-Year Performance Report 2016-2017**

**April 2016 - September 2016**

## Introduction

This report is to provide the Health Scrutiny Committee with assurance in relation to the indicators within the national Clinical Commissioning Group (CCG) Assurance Framework. The report includes a summary mid-year position of all the relevant indicators, as published by NHS England, with an exception narrative for any indicators not meeting the requisite target.

## Summary for April 2016 – September 2016

Metric	YTD Position	Target	Page
<b>NHS Constitution Measures</b>			
Referral to Treatment (RTT) Incompletes (c)	92.79%	≥92%	4
Diagnostic Test Waiting Time (c)	0.42%	≤1%	4
A&E waits (c)	89.60%	≥95%	4
Patients receiving definitive treatment within 1 month of a cancer diagnosis (c)	97.29%	≥96%	5
Patients receiving subsequent treatment for cancer within 31 days (Surgery) (c)	96.15%	≥94%	5
Patients receiving subsequent treatment for cancer within 31 days (Drugs) (c)	100%	≥98%	5
Patients receiving subsequent treatment for cancer within 31 days (Radiotherapy) (c)	99.36%	≥94%	5
Patients receiving 1 <sup>st</sup> definitive treatment for cancer within 2 months (c)	82.89%	≥85%	5
Patients receiving treatment for cancer within 62 days from an NHS Screening Service (c)	95.74%	≥90%	5
Patients receiving treatment for cancer 62 days upgrading their priority (c)	89.13%	≥85%	5
Red 1 Ambulance Calls (c)	86.01%	≥75%	6
Red 2 Ambulance Calls (c)	77.17%	≥75%	6
Category A Ambulance Calls (c)	91.08%	≥95%	6
<b>NHS Constitution Support Measure</b>			
Referral to Treatment waiting times more than 52 weeks (incomplete) (c)	0	0	4
A&E waits 12 hour trolley waits (p)	0	0	4
Mixed Sex accommodation breaches (c)	0	0	6
Cancelled Operations (p)	0	0	6
Mental Health (c)	95.73%	≥95.73%	7
Primary Care Dementia (c)	89.2%	≥67%	7
Incidence of Healthcare Associated Infection (c)	MRSA – 1 C-Diff - 6	See Page 7	7
<b>Financial Sanctions</b>			
Possible Sanctions excluding Admitted and Non-Admitted RTT	YTD Position	£173,680.00	

Overall Summary of Blackpool CCG Improvement and Assessment Indicators	October Position	Page 14
--	------------------	---------

Key		Failing target	↑	Improving and within target	↑	Improving and below target
		Target Achieved	↓	Deteriorating and within target	↓	Deteriorating and below target
	(c) / (p)	Commissioner level / Provider level	↔	No change and within target	↔	No change and below target

### Achievements

- There have been no 12 hour trolley waits reported this year (Based on decision to admit guidance).
- There have been no further mixed sex accommodation breaches since May 2016
- C-Difficile incidents for both Blackpool CCG patients in the community and at the Trust remain within trajectory
- Diagnostic waiting times have remained below target since April 2016
- Eight of the Nine of the constitutional targets for Cancer waits have been met year to date
- There have been no cancelled operations reported at Blackpool Teaching Hospitals in 2016- 2017
- The % of Mental Health patients on a CPA discharged and followed up within 7 days has remained above target since April 2016
- The CDI trajectory for BTH for 2016/17 remains the same as 2015/16 (BTH 40 cases) Blackpool CCG and the Trust currently remain within trajectory.
- Waiting times have consistently exceeded targets for IAPT in 16/17

### Areas for focus/ information

- Blackpool Teaching Hospitals' performance against the 4 hour A&E waiting time target has remained below target since April 2016
- NWAS call response rates for Category A Calls resulting in an ambulance arriving at the scene within 19 minutes has not met the target set so far this year.
- The IAPT access and recovery rates are below target; however it has improved from 34% in August to 36% in September.

Key		Failing target	↑	Improving and within target	↑	Improving and below target
		Target Achieved	↓	Deteriorating and within target	↓	Deteriorating and below target
	(c) / (p)	Commissioner level / Provider level	↔	No change and within target	↔	No change and below target

## NHS Constitution for period ending September 2016

RTT (c)		Organisation	Target	Sept 16	YTD	Current Performance (Sept)	Performance (Apr-Sept)
* Patients on incomplete pathways treated within 18 weeks		CCG	≥ 92%	90.94%	92.49%	↓	↓
Patients waiting for more than 52 weeks	Incomplete pathway	CCG	0	0	0	↔	↔

Blackpool CCG (BCCG) has not met the RTT target for September 2016 for incomplete pathways; performance has been affected by BCCG patients breaching predominantly at Lancashire Teaching Hospitals NHS Foundation Trust.

Diagnostic Test Waiting Time (c)		Organisation	Target	Sept 16	YTD	Performance (Sept)	Performance (Apr-Sept)
% of patients waiting 6 weeks or more		CCG	≤ 1%	0.54%	0.42%	↓	↑

Diagnostic waiting times have remained below target since April 2016.

A&E Waits (c)		Organisation	Target	Sept 16	YTD	Performance (Sept)	Performance (Apr- Sept)
*4 Hour A&E Waiting Time Target		Provider - BTH	≥ 95%	89.32%	89.60%	↓	↓

Blackpool Teaching Hospitals' performance against the 4 hour A&E waiting time target has remained below target since April 2016. An NHSE (Lancashire) escalation process remains in place with daily and weekly updates being followed in addition to local and regional teleconferences. Nationally the position replicates the issues being experienced locally.

12 Hour Trolley waits in A&E (p)		Organisation	Target	Sept 16	YTD	Performance (Sept)	Performance (Apr-Sept)
12 Hour Trolley waits in A&E		Provider - BTH	0	0	0	↔	↔

There have been no 12 hour trolley wait breaches in A&E at Blackpool Teaching Hospitals so far this year, however due to the pressures within A&E additional quality assurance visits will take place to ensure assurance and triangulation.

Key	Failing target		↑	Improving and within target	↑	Improving and below target
	Target Achieved		↓	Deteriorating and within target	↓	Deteriorating and below target
	(c) / (p)	Commissioner level / Provider level	↔	No change and within target	↔	No change and below target

Cancer Waits (c)		Organisation	Target	Sept 16	YTD	Performance (Sept)	Performance (Apr - Sept)
% seen within 2 weeks of referral		CCG	≥ 93%	94.11%	94.14%	↓	↔
% seen within 2 weeks of referral – breast symptoms		CCG	≥ 93%	100.00%	98.63%	↑	↔
31 Days	% of patients receiving definitive treatment	CCG	≥ 96%	97.94%	97.29%	↑	↔
	% of patients waiting no more than 31 days for subsequent treatment – surgery	CCG	≥ 94%	100.00%	96.15%	↔	↔
	% of patients waiting no more than 31 days for subsequent treatment - drug therapy	CCG	≥ 98%	100.00%	100.00%	↔	↔
	% of patients waiting no more than 31 days for subsequent treatment –radiotherapy	CCG	≥ 94%	100.00%	99.36%	↔	↔
62 Days	* % of patients waiting no more than 62 days from urgent GP referrals to first definitive treatment	CCG	≥ 85%	83.33%	82.89%	↓	↓
	% of patients waiting no more than 62 days from referral from an NHS screening service to first definitive treatment.	CCG	≥ 90%	100.00%	95.74%	↑	↔
	% of patients waiting no more than 62 days for first definitive treatment following a consultant's decision to upgrade.	CCG	≥85%	100.00%	89.13%	↑	↑

All of the constitutional targets for Cancer waits have been met year to date; except the percentage of patients waiting no more than 62 days from urgent GP referral to first definitive treatment. There are noticeably fewer patients within this category; consequently the number of patient breaches which infringe this target are also fewer; for example in September seven (7) Blackpool CCG patients have breached this target. Two (2) are due to patient choice; three (3) have been referred late into BTH by other providers and two (2) were complex cases.

Key	<span style="background-color: red; color: white;">■</span>	Failing target	↑	Improving and within target	↑	Improving and below target
	<span style="background-color: green; color: white;">■</span>	Target Achieved	↓	Deteriorating and within target	↓	Deteriorating and below target
	(c) / (p)	Commissioner level / Provider level	↔	No change and within target	↔	No change and below target

Category A Ambulance Calls (p)	Organisation	Target	Sept 16	YTD	Performance (Sept)	Performance (Apr- Sept)
*Category A calls resulting in an emergency response arriving within 8 minutes (Red 1)	CCG	≥ 75%	84.62%	86.01%	↓	↔
Category A calls resulting in an emergency response arriving within 8 minutes (Red 2)	CCG	≥ 75%	75.63%	77.17%	↑	↔
Category A calls resulting in an ambulance arriving at the scene within 19 minutes	CCG	≥ 95%	92.27%	91.8%	↑	↔

Blackpool CCG NWS Ambulance call response rates for Red 1, Red 2 have been met for September; and have remained this way since April 2016; however activity remains significantly over planned levels and is having an adverse effect on performance; particularly on category A calls arriving at the scene within 19 minutes. In addition to activity growth, NWS performance is also being significantly impacted by handover and turnaround issues at hospitals. Significant efforts have been made to reduce the turnaround times across the North West, with joint work being carried out with NHS Improvement, CCGs, Acute Trusts and NWS.

Mixed Sex Accommodation Breaches (c)	Organisation	Target	Sept 16	YTD	Performance (Sept)	Performance (Apr - Sept)
Breaches of same sex accommodation	BCCG	0	0	0	↔	↔
	Provider - BTH	0	0	4	↔	↔
	Provider - Spire	0	0	0	↔	↔

There have been no further mixed sex accommodation breaches since May 2016. All of the breaches were due to no suitable beds being available other than within CITU, this was due to beds being occupied by non- cardiac patients and overnight stays being required for day-case patients.

Cancelled Operations (p)	Organisation	Target	Position	QTR 1	Performance (Cur' Period)	Performance (Last Period)
Patients whose operations are cancelled, on or after the day of admission (including the day of surgery), for non-clinical reasons to be offered another binding date within 28 days.	Provider - BTH	0	0 (QTR 2 2016/17)		↔	↔

There have been no cancelled operations reported at Blackpool Teaching Hospitals since April 2016.

Key	Target	Performance	Target	Performance	Target	Performance
	Failing target	↑	Improving and within target	↑	Improving and below target	
	Target Achieved	↓	Deteriorating and within target	↓	Deteriorating and below target	
(c) / (p)	Commissioner level / Provider level	↔	No change and within target	↔	No change and below target	

Mental Health (c)	Organisation	Target	QTR 2	YTD	Performance (Sept)	Performance (Apr- Sept)
% of Mental Health patients on Care Programme Approach (CPA) discharged from hospital and followed up within 7 days	Provider - LCFT	≥ 95%	95.52%	95.73%	↓	↓

The % of Mental Health patients on a CPA discharged and followed up within 7 days has remained above target since April 2016.

Dementia (c)	Organisation	National	Sept 16	YTD	Performance (Sept)	Performance (Apr- Sept)
CCG's estimated prevalence for people over 65 with dementia against the CCG's actual dementia diagnosis rate	CCG	≥ 67%	91.6%	89.2%	↑	↑

The CCG's estimated prevalence for people over 65 with dementia against the actual diagnosis has remained significantly above target year to date.

Incidence of Healthcare Associated Infection (c)	Organisation (assigned)	Threshold	Sept 16	YTD	Performance (Sept)	Performance (Apr - Sept)
Incidence of MRSA bacteremia	CCG	0	1	1	↓	↔
	Provider	0	0	2	↑	↔
Incidence of Clostridium difficile* (CDI)	CCG	58 (2016/17)	0	6	↑	↓
	BTH	40 (2016/17)	1	6	↑	↓

\* Data source; Public Health England HCAI Monthly Report, August 2016

There have been two (2) incidents of MRSA reported so far this year at BTH; both have been identified as contaminants. The Trust is in the process of undertaking an investigation into current practices relating to the taking of blood cultures and the requirement for further education and training.

The one (1) case of bacteremia incident reported in September for a Blackpool patient in the community is still under review.

Six (6) incidents of CDI have been reported by BTH year to date. The CDI trajectory for BTH for 2016/17 remains the same as 2015/16 (BTH 40 cases) Blackpool CCG and the Trust currently remain within trajectory.

Key	Failing target	↑	Improving and within target	↑	Improving and below target
	Target Achieved	↓	Deteriorating and within target	↓	Deteriorating and below target
	(c) / (p)	Commissioner level/ Provider level	↔	No change and within target	↔

Mental Health IAPT	Organisation	Expectation	Sept 16	YTD	Performance(April - Sept)	Performance (Apr - Sept)
IAPT access proportion rate (3.75% quarterly, suggested 1.25% monthly)	CCG	≥ 1.25% monthly	1.22%	1.30%	↓	↓
*IAPT recovery rate (50% monthly)	CCG	50%	36%	34%	↑	↓
The proportion of people that wait 6 weeks or less from referral to their first IAPT treatment appointment	CCG	75% per month	90%	79%	↑	↑
The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment	CCG	95% per month	100%	99%	↑	↑

Waiting times have consistently met targets for IAPT in 16/ 17; however the access and recovery rates have not. The NHSE IST team has been working closely with the commissioners and provider to map capacity and demand and ensure clients are signposted appropriately at the commencement of their treatment. Detailed analysis around the factors affecting recovery rate is being continually applied and communicated to the team.



## Performance Scorecard

Metric	Level	Period	Target	April 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	March 2017	YTD
<b>NHS Constitution measures</b>																
<b>Referral To Treatment waiting times for non-urgent consultant-led treatment</b>																
62: Referral to Treatment (Non-Admitted) (62)	CCG	Sept 2016	95%	93.6%	93.6%	93.9%	92.2%	93.9%	93.3%							93.42%
1291: Referral to Treatment (Incomplete) (1291)	CCG	Sept 2016	92%	93.32%	93.4%	92.7%	92.8%	91.83%	90.9%							92.79%
<b>Diagnostic test waiting times</b>																
1828: % of patients waiting 6 weeks or more for a diagnostic test (1828)	CCG	Sept 2016	1%	0.52%	0.3%	0.46%	0.40%	0.26%	0.54%							0.42%
<b>Cancer waits – 2 Week Wait</b>																
191: % Patients seen within two weeks for an urgent GP referral for suspected cancer (MONTHLY) (191)	CCG	Sept 2016	93%	95.10%	93.92%	93.06%	93.66%	94.91%	94.11%							94.14%
17: % of patients seen within 2 weeks for an urgent referral for breast symptoms (MONTHLY) (17)	CCG	Sept 2016	93%	100%	96.43%	98.63%	100%	98.36%	100%							98.75%

Metric	Level	Period	Target	April 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	March 2017	YTD
<b>NHS Constitution measures</b>																
<b>Cancer waits – 31 days</b>																
535: % of patients receiving definitive treatment within 1 month of a cancer diagnosis (MONTHLY) (535)	CCG	Sept 2016	96%	98.55%	98.99%	96.15%	95.29%	97.00%	97.94%							97.29%
26: % of patients receiving subsequent treatment for cancer within 31 days (Surgery)(MONTHLY) (26)	CCG	Sept 2016	94%	83.33%	100%	100%	92.31%	100%	100%							96.15%
1170: % of patients receiving subsequent treatment for cancer within 31 days (Drug Treatments) (MONTHLY) (1170)	CCG	Sept 2016	98%	100%	100%	100%	100%	100%	100%							100%
25: % of patients receiving subsequent treatment for cancer within 31 days (Radiotherapy Treatments)	CCG	Sept 2016	94%	96.00%	100%	100%	100%	100%	100%							99.36%
<b>Cancer waits – 62 days</b>																
539: % of patients receiving 1st definitive treatment for cancer within 2 months (62 days) (MONTHLY)	CCG	Sept 2016	85%	89.47%	83.72%	85.71%	68.09%	88.64%	83.33%							82.89%
540: % of patients receiving treatment for cancer within 62 days from an NHS Cancer Screening Service (MONTHLY) (540)	CCG	Sept 2016	90%	66.67%	100%	100%	100%	93.75%	100%							95.74%
541: % of patients receiving treatment for cancer within 62 days upgrade their priority (MONTHLY) (541)	CCG	Sept 2016	85%	81.82%	89.29%	90%	85.71%	88%	100%							89.13%

Metric	Level	Period	Target	April 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016	Oct	Nov 2016	Dec 2016	Jan 2017	Feb 2017	March 2017	YTD
<b>NHS Constitution measures continued</b>																
<b>Category A ambulance calls</b>																
1887: Category A Calls Response Time (Red1) (1887)	CCG	Sept 2016	75%	92.41%	85.70%	79.10%	82.00%	92.55%	84.62%							86.01%
1887: Category A Calls Response Time (Red1) (1887)	NWAS	Sept 2016	75%	76.47%	74.28%	73.06%	70.45%	72.60%	69.49%							72.76%
1889: Category A (Red 2) 8 Minute Response Time (1889)	CCG	Sept 2016	75%	76.73%	83.20%	75.50%	74.46%	77.32%	75.63%							77.17%
1889: Category A (Red 2) 8 Minute Response Time (1889)	NWAS	Sept 2016	75%	67.46%	66.26%	66.20%	62.69%	65.25%	61.75%							64.90%
546: Category A calls responded to within 19 minutes(546)	CCG	Sept 2016	95%	91.90%	94.10%	91.20%	90.10%	91.26%	92.27%							91.80%
546: Category A calls responded to within 19 minutes(546)	NWAS	Sept 2016	95%	92.01%	91.47%	91.49%	89.81%	91.09%	89.04%							90.80%

<b>NHS Constitution support measures</b>																
<b>Mixed Sex Accommodation Breaches</b>																
1067: Mixed sex accommodation breaches - All Providers (1067)	CCG	Sept 2016	0	0	4	0	0	0	0							4
<b>Mental Health</b>																
138: Proportion of patients on (CPA) discharged from inpatient care who are followed up within 7 days (138)	CCG	QTR 2 2016	95%	96.00% (Q1)			95.52% (Q2)									95.73%

Metric	Level	Period	Target	April 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	March 2017	YTD
<b>NHS Constitution support measures</b>																
<b>Referral To Treatment waiting times for non-urgent consultant-led treatment</b>																
1839: Referral to Treatment -No of Incomplete Pathways Waiting >52 weeks (1839)	CCG	Sept 2016	0	0	0	0	0	0	0							0
<b>A&amp;E waits</b>																
1928: 12 Hour Trolley waits in A&E (1928)	Hospital Provider (BTH)	Sept 2016	0	0	0	0	0	0	0							0
<b>Activity Measures</b>																
<b>Elective</b>																
77: Number of G&A elective ordinary admission FFCEs in the period (77) (Inpatient)	CCG	Sept 2016	Target	TBC	This data set is no longer available through the Monthly Activity Report. In future, this will be a NHS England report based on SUS data. The timetable for the publication of this data set has not been published by NHS England.											TBC
			Actual	322												322
71: Number of G&A elective FFCEs in the period - Day Cases (71) (Day cases)	CCG	Sept 2016	Target	TBC												TBC
			Actual	2516												2516
<b>Non Elective</b>																
72: Number of G&A non-elective FFCEs in the period - Total (72)	CCG	Sept 2016	Target	TBC	This data set is no longer available through the Monthly Activity Report. In future, this will be a NHS England report based on SUS data. The timetable for the publication of this data set has not been published by NHS England.											TBC
			Actual	2027												2027
<b>Outpatients</b>																
73: All first outpatient attendances (consultant-led) in general and acute specialties (73)	CCG	Sept 2016	Target	TBC	This data set is no longer available through the Monthly Activity Report. In future, this will be a NHS England report based on SUS data. The timetable for the publication of this data set has not been published by NHS England.											TBC
			Actual	5326												5326

Metric	Level	Period	Target	Apr 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	March 2017	YTD
<b>A&amp;E waits</b>																
1926: A&E Attendances: Type1 (1926)	BTH	Sept 2016	Actual	7,076	7,754	7,555	8,166	7,524	7,332							45,407
1927: A&E Attendances: All Types (1927)	BTH	Sept 2016	Actual	16,258	17,632	16,733	17,979	17,112	16,640							102,354

## CCG Improvement and Assessment Framework

This new framework intends to provide a greater focus on assisting improvement alongside the existing statutory assessment function. It aligns with NHS England's Mandate and planning guidance, with the aim of unlocking change and improvement in a number of key areas. This approach aims to reach beyond CCGs, enabling local health systems and communities to assess their own progress from ratings published online; the table below provides a graphical illustration of Blackpool CCG's performance against the framework as released by NHSE on the 18<sup>th</sup> October 2016.

### Blackpool CCG Improvement and Assessment Indicator Summary – October 2016

Improvement and Assessment Indicators	Latest Period	CCG	England	Trend	Better is...	Range	KEY			
							H = Higher	L = Lower		
<p><b>Better Health</b></p> <p>▼ Maternal smoking at delivery</p> <p>↔ Percentage of children aged 10-11 classified as overweight or obese</p> <p>▲ Diabetes patients that have achieved all the NICE recommended treatment targets: Three (HbA1c, cholesterol and blood pressure) for adults and one (HbA1c) for children</p> <p>▼ People with diabetes diagnosed less than a year who attend a structured education course</p> <p>↔ Injuries from falls in people aged 65 and over</p> <p>▲ Utilisation of the NHS e-referral service to enable choice at first routine elective referral</p> <p>↔ Personal health budgets</p> <p>▼ Percentage of deaths which take place in hospital</p> <p>▼ People with a long-term condition feeling supported to manage their condition(s)</p> <p>▲ Inequality in unplanned hospitalisation for chronic ambulatory care sensitive conditions</p> <p>▼ Inequality in emergency admissions for urgent care sensitive conditions</p> <p>↔ Anti-microbial resistance: appropriate prescribing of antibiotics in primary care</p> <p>↔ Anti-microbial resistance: Appropriate prescribing of broad spectrum antibiotics in primary care</p> <p>▲ Quality of life of carers</p>							<p>KEY</p> <p>Worst   Nat Average   Org Value   Best</p> <p>25th   Percentile   75th</p>			
<p><b>Better Care</b></p> <p>↔ Cancers diagnosed at early stage</p> <p>▲ People with urgent GP referral having first definitive treatment for cancer within 62 days of referral</p> <p>▲ One-year survival from all cancers</p> <p>↔ Cancer patient experience</p> <p>▼ Improving Access to Psychological Therapies recovery rate</p> <p>▼ People with first episode of psychosis starting treatment with a NICE-recommended package of care treated within 2 weeks of referral</p> <p>▼ Reliance on specialist inpatient care for people with a learning disability and/or autism</p> <p>↔ Proportion of people with a learning disability on the GP register receiving an annual health check</p> <p>↔ Neonatal mortality and stillbirths</p> <p>↔ Women's experience of maternity services</p> <p>↔ Choices in maternity services</p> <p>▲ Estimated diagnosis rate for people with dementia</p> <p>↔ Dementia care planning and post-diagnostic support</p> <p>↔ Achievement of milestones in the delivery of an integrated urgent care service</p> <p>▼ Emergency admissions for urgent care sensitive conditions</p> <p>▲ Percentage of patients admitted, transferred or discharged from A&amp;E within 4 hours</p> <p>▼ Delayed transfers of care per 100,000 population</p> <p>▼ Population use of hospital beds following emergency admission</p> <p>▼ Management of long term conditions</p> <p>▼ Patient experience of GP services</p> <p>↔ Primary care workforce</p> <p>▼ Patients waiting 18 weeks or less from referral to hospital treatment</p> <p>▼ People eligible for standard NHS Continuing Healthcare</p>							<p><b>Sustainability</b></p> <p>↔ Financial plan</p> <p>↔ In-year financial performance</p> <p>↔ Outcomes in areas with identified scope for improvement</p> <p>▲ Digital interactions between primary and secondary care</p> <p>↔ Local strategic estates plan (SEP) in place</p>		<p><b>Well Led</b></p> <p>↔ Staff engagement index</p> <p>↔ Progress against workforce race equality standard</p> <p>↔ Effectiveness of working relationships in the local system</p> <p>↔ Quality of CCG leadership</p>	