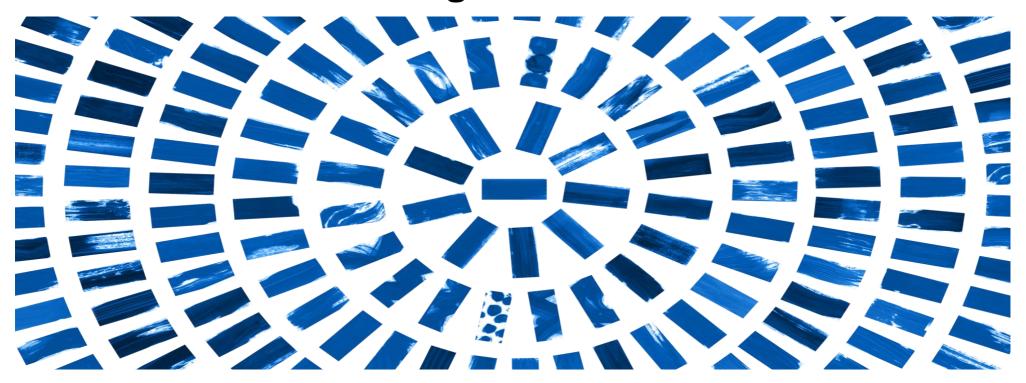


Integrated Performance Report

Strategic Overview



July 2016

With **all of us** in mind.

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Introduction

Please find the Trust's Integrated Performance Report for July 2016. The plan is to further develop the report by the time of the September Board meeting. Current actions taking place include identifying an owner for each key metric, aligning the metrics with Trust objectives and CQC domains, identifying additional quality metrics to report to Board, and reviewing performance reports from other Trusts to gain examples of how we can improve ours. The vision is to have a single report that plots a clear line between our objectives, priorities and activities. The intention is to build more flexibility and depth into the report that can showcase the breadth of the organisation and its achievements as well as meeting the requirements of our regulators and providing an early indication of any potential hotspots and how these can be mitigated. We will also strive to ensure that there is appropriate ownership and accountability for the delivery of all our performance metrics.

The integrated performance strategic overview report is a key tool to provide assurance to the Board that the strategic objectives are being delivered and to direct the Board's attention to significant risks, issues and exceptions and will contribute towards streamlining the number of different reports that the board receives.

The Trusts three strategic objectives are:

- Improve people's health and reduce health inequalities
- · Improve the quality and experience of care
- Improve our use of resources

Performance is reported through a number of key performance indicators (KPIs). KPIs provide a high level view of actual performance against target. The report has been categorised into the following areas to enable performance to be discussed and assessed with respect to:

- Strategic Summary
- NHS Improvement (formerly Monitor)
- Quality
- Locality
- Transformation
- Finance
- Contracts
- Workforce

The report will continue to adhere to the following principles:

- · Makes a difference to measure each month
- · Focus on change areas
- Focus on risk
- · Key to organisational reputation
- Variation matters

Performance reports are available as electronic documents on the Trusts intranet and allow the reader to look at performance from different perspectives and at different levels within the organisation. Our integrated performance strategic overview report is publicly available on the internet.

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NHS Improvement

Quality

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Finance / Contracts

Workforce

Section	KPI	Target	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Year End Forecast
NHS	NHS Improvement Governance Risk Rating (FT)	Green	Green	Green	Green										Green
Improvement Compliance	NHS Improvement Finance Risk Rating (FT)	4	4	4	4										4
CQC	CQC Quality Regulations (compliance breach)	Green	Green	Green	Green										Green

Lead Director:

Narrative:

The integrated performance report shows a good performance rating, with achievement of the majority of NHS Improvement indicators at July 2016 (peformance is not yet available for delayed transfers of care, but no issues are anticipated for this key performance indicator).

Correlation of quality information (including patient experience and safety related measures), performance, finance, workforce and health and safety information has taken place and did not identify any significant areas of concern other than those identified below.

As work is undertaken to refine developments to track performance against 16/17 objectives, these may be incorporated into this report.

Areas to Note:

NHS Improvement - risk previously associated with achievement of the IAPT Referral to treatment within 6 weeks indicator continues to remain reduced at the end of July. The Trust achieved 76% in quarter 1, and 83.8% at the end of July 16, therefore meeting the 75% threshold. Whilst performance in Barnsley has improved it remains below the 75% threshold. This is discussed in more detail later in the report.

Workforce - high sickness levels can be seen in Calderdale and Kirklees, Forensic, Specialist and Wakefield BDU during July 16 - with each BDU reporting above 5%. Further detail can be seen in the workforce section of the report.

Achieving Better Access to Mental Health Services by 2020 - Access Targets for Early Intervention for Psychosis and Improving Access to Psychological Therapies - The Trust continues to achieve against all the national thresholds.

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NHS Improvement

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Norkforce

NHS Improvement (was Monitor) considers the ability of NHS foundation trusts to meet selected national standards for access and outcomes to be an important indicator of the effectiveness of the organisation's governance. Performance against the measures that are applicable to us is undertaken locally on a monthly basis and reported externally to NHS Improvement on a quarterly basis.

Section	KPI	Target	Q1 2015/16	Q2 2015/16	Q3 2015/16	Q4 2015/16	Apr-16	May-16	Jun-16	Jul-16	Q1 2016/17	Year End Forecast Position *	Trend
Max time of 18 weeks from point of referral to treatment - incomplete pathway	М	92%	98.35%	98.76%	98.80%	98.11%	97.83%	97.95%	99.12%	98.40%	98.24%	4	
Delayed Transfers Of Care	М	7.50%	2.02%	1.88%	2.93%	2.33%	4.04%	1.88%	2.27%		2.13%	4	~~~
% Admissions Gatekept by CRS Teams	М	95%	95.51%	97.29%	95.69%	98.32%	96.80%	96.83%	97.14%	95.70%	96.91%	4	~~
% SU on CPA Followed up Within 7 Days of Discharge	М	95%	98.66%	97.97%	95.50%	97.44%	95.12%	96.64%	98.61%	96.24%	96.72%	4	~~
% SU on CPA Having Formal Review Within 12 Months	М	95%	97.92%	98.44%	98.56%	96.60%	96.10%	82.34%	98.16%	98.16%	98.16%	4	
Data completeness: comm services - Referral to treatment information	М	50%	100%	100.00%	100.00%	100%	100%	100.00%	100.00%	100.00%	100.00%	4	
Data completeness: comm services - Referral information	М	50%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	4	
Data completeness: comm services - Treatment activity information	М	50%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	4	
Data completeness: Identifiers (mental health)	М	97%	99.62%	99.54%	99.45%	98.48%	98.80%	98.40%	98.10%	98.8%	98.10%	4	
Data completeness: Outcomes for patients on CPA	М	50%	77.63%	76.97%	78.58%	75.58%	75.69%	75.09%	77.50%	78.07%	77.50%	4	~
Compliance with access to health care for people with a learning disability	М	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	4	
IAPT - Treatment within 6 Weeks of referral	М	75%	77.84%	75.91%	71.62%	70.51%	74.04%	74.19%	79.98%	83.76%	76.12%	4	
IAPT - Treatment within 18 weeks of referral	М	95%	99.09%	99.15%	99.37%	98.09%	98.60%	98.39%	99.19%	99.63%	98.88%	4	
Early Intervention in Psychosis - 2 weeks (NICE approved care package) Clock Stops	М	50%	N/A	N/A	85.19%	86.00%	73.91%	78.26%	80.00%	83.33%	77.46%	4	~

^{*} See key included in glossary.

Lead Director:

Narrative:

Areas of concern/to note:

IAPT - Treatment within 6 weeks of referral: Performance continues to show an upward trend and now remains above threshold. Although improvement evidenced, there is still some under performance attributed to the Barnsley IAPT service and as reported previously, this is mostly attributed to the number of Psychological Wellbeing Practitioner vacancies within the Barnsley team. The service has put mitigating actions in place to improve the waiting time and these are having some impact. This includes an ongoing recruitment plan and work being undertaken in conjunction with HR related to training places. The issue regarding number of training places allocated has been raised with Health Education England (HEE). Capacity of existing staff has been increased, close monitoring of performance is being undertaken both internally and with the CCG, which is playing a supporting role. On review of the waiting times for those entering treatment during July 16, 87% entered within 6 weeks which evidences improvements in current waiting times (April - 80.3%, May - 85.2%, June 86.8%). However, due to the construct of this indicator (counting those completing treatment), improvement will take time to filter through. A targeted piece of work is being undertaken which will focus on how this can be resolved in the short term but also includes medium and long term plans.

Delayed Transfers of Care - the July 16 data is not available at the time of report compilation. It is not anticipated there will be any issues in achievement of this threshold for the month of July 16.

NHS Improvement expects NHS foundation trusts to establish and effectively implement systems and processes to ensure they can meet national standards for access to healthcare services. Performance against a number of these standards is included in the assessment of the overall governance of a trust. Breach of a single metric in three consecutive quarters or four or more metrics breached in a single quarter will trigger a governance concern.

Diagnostic Waiting Time - The Trust has not recorded any breaches of the 6 week standard to report during July 16. This new weekly return is applicable to the Trust's Dexa Scanning and Paediatric Audiology services (Barnsley BDU). No areas of risk are identified and the services consistently meet the requirements of 99% diagnostics within 6 weeks.

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Summary NHS Improvement Quality Locality Trans - formation Finance Workforce

Quality Headlines (& CQUINS performance on a quarterly basis)

Section	КРІ	Target	Q1 2015/16	Q2 2015/16	Q3 2015/16	Q4 2015/16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Year End Forecast Position *
Infection Prevention	Infection Prevention (MRSA & C.Diff) All Cases	6	0	3	0	0	0	0	0	0		4
C-Diff	C Diff avoidable cases	0	0	0	0	0	0	0	0	0		4
Outcomes	% SU on CPA in Employment	10%	7.18%	7.55%	7.37%	7.25%	6.89%	6.96%	7.18%	6.99%		1
Outcomes	% SU on CPA in Settled Accommodation	60%	64.44%	62.81%	64.09%	62.26%	60.04%	67.89%	64.63%	65.79%		4
Complaints	% Complaints with Staff Attitude as an Issue	< 25%	14% 23/179	13% 20/156	14% 20/140	15% 31/211	8% 4/53	23% 12/53	11% 7/62	8% 4/52		4
Service User Experience	Friends and Family Test	TBC	89.00%	91.00%	88.83%	87.20%	85%	84.00%	82%	85.70%		N/A

^{*} See key included in glossary

Work is currently in progress to identify the key quality measures to report both monthly and quarterly to EMT and Trust Board. These metrics will be available in the September report. Further and more detailed reporting of performance against quality and compliance metrics is currently reported via the Strategic Overview Integrated Performance report on a quarterly basis.

Historically we have not reached the target in achieving 10% of CPA service users in employment and the current trajectory does not suggest this will be achieved at the year end. The indicator parameters only include clients on CPA within the age range 18-69 years old. The Trust is currently undertaking a pilot project in Barnsley covering all mental health service users (regardless of CPA status or age) which is focusing on employment, volunteering and training. Further work will be undertaken in the next few months to review this indicator with specific regard to the report parameters and the expected contribution of SWYPFT to the achievement of this indicator going forward.

Commissioning for Quality and Innovation (CQUIN)

The Trust submitted its quarter 1 returns in line with contractual requirements. The final agreed position remains outstanding due to further work required on a couple of indicators across the 2 main contracts - Falls and Physical health of people with severe mental health indicators in Barnsley and the Learning Disability Risk Register and Mental Health Currencies indicators in Calderdale, Kirklees and Wakefield. Work to support the achievement of these indicators will be re-submitted later this month in line with commissioner requirements and achievement of these outstanding indicators will be considered by the commissioner. Current under performance areas relate to Mental Health Clustering Red Rules and Frequency of Reviews.

The Forensic return is expected to be achieved for all indicators at quarter 1, however, the sign off meeting is not due to take place until early September.

The final positions will be reported in next months report.

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This section of the report is to be developed during 2016/17 and populated with key performance issues or highlights as reported by each BDU.

Barnsley BDU:

- Notable reduction in the number of delayed transfers of care compared to previous months. BDU is now well below the threshold, with July 16 reporting at 2.5%. This improvement is attributed to the discharge of all bu 1 service user that had previously been delayed.
- IAPT 6 weeks the service have continued to see further improvement in performance for patients accessing the services within 6 weeks, however, still remain under 75% threshold. Recovery plan for IAPT has been developed and is supported by the CCG.
- The BDU continues to achieve 100% of Mental Health Acute inpatient admissions being gatekept by Intensive Home Based Treatment Teams.
- Physical Violence reporting for this is showing above expected levels, reasons underpinning this relate to acuity levels of service users, predominantly on PICU ward.
- Sickness MH and Comm continue to be below thresholds.

Calderdale & Kirklees BDU:

- Sickness absence reflects the inpatient pressures and some community adult pressures in month. Short term absence reviewed as per policy. There are a number of long term absences now returning to work.
- Mandatory training compliance continues to improve. There will now be a Trust wide focus on 2 new areas of training Cardiopulmonary Resuscitation and Clinical Risk to build up to above target performance achievement.
- Pressure on beds has been very high in July. Ashdale has been operating at 18 beds. Pressure has lifted in past 2 weeks in Adult and PICU bed needs. Ashdale has now moved up to 22 bed capacity.

Forensics BDU:

- CQUINS Feedback from Commissioners re the Q4 submissions (only received it a couple of weeks ago) was that our submissions were all 'excellent'. The BDU achieved all the CQUIN's for 15/16.
- Work well underway on 16/17 CQUIN's which we are predicting we will achieve therefore RAG rated GREEN.
- · Well-being survey results showing improvements all across the BDU but particularly in Low Secure.
- Plans in place to improve all statutory and mandatory training figures and Appraisal rates.
- Preparatory work has commenced in readiness for the national procurement of secure services supported by the PMO.
- Mobilisation of the Wetherby/Adel Beck Service is progressing well. All posts have now been recruited to.

Specialist BDU:
Wakefield BDU:

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Overall Financial Performance 2016 / 2017

Executive Summary / Key Performance Indicators

	Performance Indicator	Year to Date	Forecast	Narrative
1	NHS Improvement Risk Rating	4	4	The Trust has planned for and delivered a risk rating of 4 in July 2016. It is currently forecast that a rating of 4 will be maintained throughout the year.
2	Surplus	£1.4m	£1.9m	The year to date position shows a surplus of £1.4m and remains ahead of plan. Full year forecast currently shows £1.85m in line with plan. This position remains challenging with a number of risks identified. Action is being taken to mitigate these risks.
3	Agency Cap	£3.3m	£7.1m	NHS Trusts have been set maximum agency spend caps for 2016/2017 by NHS Improvement. Whilst expenditure in month 4 is marginally lower than previous months we are forecasting to exceed this cap. £1.1 million of the full year forecast relates to bespoke packages of care and social workers. The main issues areas of spend are medical and nursing staff. Spend will be lower than 2015/16.
4	Cash	£28.4m	£21.9m	The Trust cash position is closer to plan than previous months. (£0.8m under plan - 3%). Focus will remain on invoice generation and cash collection.
5	Capital	£2.9m	£12.3m	Capital expenditure is under plan as at July 2016. This is due to successful VAT recovery and timing delays in IM & T expenditure. The forecast remains that the capital programme will spend in line with plan in year.
6	Delivery of CIP	£3m	£8.8m	Year to date CIP delivery is £0.4m behind plan. Overall the forecast position includes £1.27m of red rated schemes which is a reduction from the previous month.
7	Better Payment	98%		This performance is based upon a combined NHS / Non NHS value.
Red	Variance from plan greater than 15%			

Green In line, or greater than plan
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Amber Variance from plan ranging from 5% to 15%

Summarv

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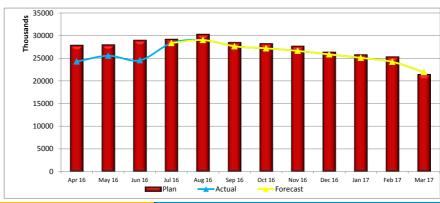
Workforce

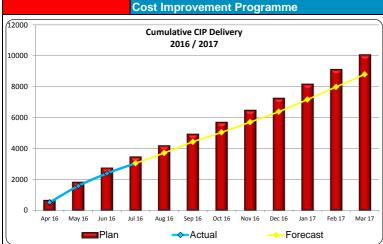
Overall Financial Performance 2016 / 2017

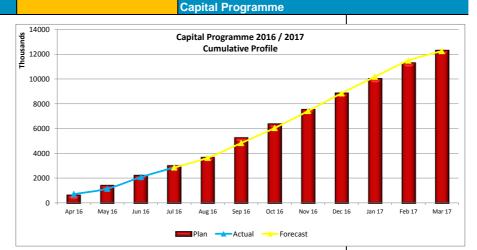
	£'000	£'000	£'000	£'000	£'000	£'000
Operating Income	76,730	76,794	64	225,891	226,139	248
Operating Expenditure						
Pay	(59,159)	(58,018)	1,141	(173,545)	(173,857)	(312)
Non Pay	(14,678)	(14,781)	(104)	(42,903)	(44,346)	(1,443)
Provisions	1,579	1,383	(196)	1,976	3,479	1,503
Total Op. Expenditure	(72,257)	(71,416)	841	(214,471)	(214,724)	(253)
EBITDA	4,473	5,378	905	11,420	11,415	(5)
EBITDA - % of income	5.8%	7.0%		5.1%	5.0%	-2.1%
Capital Charges	(3,448)	(3,975)	(528)	(9,645)	(9,645)	0
Interest	25	30	5	75	80	5
SURPLUS	1,050	1,433	382	1,850	1,850	0
Surplus - % of income	1.4%	1.9%		0.8%	0.8%	0.1%

	Plan	Actual	Plan	Actual
Balance Sheet Sustainability	4	4	4	
Liquidity	4	4	4	
Underlying Performance	4	4	3	
Variance from Plan	4	3	3	
Weighted Average	4	4	4	









Contracting

Trust Summary by BDU - Current Contract Performance - Position at month 3

Contract Variations	In progress	Completed	TOTAL £000s
B BDU	£140.0	£0.0	£140.0
W BDU	£0.0	£0.0	£0.0
C BDU	£51.9	£0.0	£51.9
K BDU	0.03	£0.0	£0.0
S DBU	£0.0	£0.0	£0.0
F BDU	£0.0	£0.0	£0.0
TOTAL CVs	£191.9	£0.0	£191.9
B - Additional Non Recu	rrent funds for Equipment & Ada	entions Intermediate Care & (Children and Young

B - Additional Non Recurrent funds for Equipment & Adaptions, Intermediate Care & Children and Young Peoples IAPT

C - Additional Non Recurrent Funds for OPS Vanguard

CQUIN Performance - Q1 Forecast Position - Commissioner agreement awaited

Quarter	Quarter 1	Achieved	Risk
	£000s		
Barnsley	£255.7	£231.5	-£24.2
Wakefield	£113.1	£78.6	-£34.4
Kirklees	£105.7	£75.3	-£30.5
Calderdale	£52.2	£37.2	-£15.0
Specialised	£103.1	£103.1	£0.0
Forensics	£130.8	£130.8	£0.0
Trust Total	£760.6	£656.4	-£104.2

CQUIN Performance Year-end Forecast+

Quarter									
Quarter			RISK						
	£000s	Achievement							
Barnsley	£1,655.9	£1,414.2	-£241.7						
Wakefield	£767.2	£591.4	-£175.8						
Kirklees	£702.3	£453.8	-£248.5						
Calderdale	£346.7	£224.1	-£122.7						
Specialised	£500.9	£420.0	-£80.9						
Forensics	£568.5	£568.5	£0.0						
Trust Total	£4,541.5	£3,672.0	-£869.5						

⁺ CQUINs oversight provided to EMT via ORG and CQUINs leads meeting; FOT reflects position prior to mitigation

CQUIN Q1 Results

C,K,W - Discrepancy re Red Rules and Review of Service User CQUIN for Q1. Extension until 23.08.16 for SWYPFT to provide formal response and counter-proposal to Commissioners.

S LD - Q1 submission delayed. Extension given by Commissioners to allow submission of report tbc by 12-08-16

B - MH PbR CQUIN required the service to improve on Mar-16 (Q4) position. Not achieved. Service working on understanding the reasons for non-achievement to ensure that this is corrected in Q2

Key Contract Issues - Barnsley

MSK Services - The CCG has communicated with the Trust regarding its concerns over a 15 week

waiting list for MSK. Assessment & Treatment Services. The Trust and the CCG are meeting to review the action plan to a

Memory Assessment Service - Issue raised by CCG regarding Barnsley's use of OOA beds for dementia patients. Clinical review meeting with CCG to be set up.

KPIs and Penalties

Commissioner	Penalty	Comment
	£000s	
Barnsley CCG	-£32.5	MSK Cost per Case activity underperformance at Month 3

Key Contract Issues - Kirklees

K LD (Children's) - Notice to be provided re the LD children's elements in the main contract as will be included in a tender. Aware TUPE will apply for new Children's spec. Procurement start 4th Aug 2016

Key Contract Issues - Calderdale

Nothing to report

Key Contract Issues - Wakefield

Police liaison - commitment has been made to street triage. Commissioner has applied for Urgent and Emergency Care Vanguard funding to support.

Adult inpatient - commissioner is being kept up to date on the staffing situation and number of beds available.

Key Contract Issues - Forensics

Bed Occupancy - 90% threshold achieved for both Low and Medium Secure Services

Key Contract Issues - Specialist

C&K CAMHS - Agreed contract - to be signed off by Commissioners

Barnsley CAMHS- Key issues with data - being picked up internally.

Wakefield CAMHS- Focussed joint work with WCCG to understand Value for Money and service delivery.

Regional ED- Still awaiting sight of draft contract

Wakefield LD- community service spec and KPIs currently being finalised. Date for implementation of new model to be agreed following this.

Key Contract Issues - Health & Wellbeing

Nothing to report

NHS Improvement

Quality

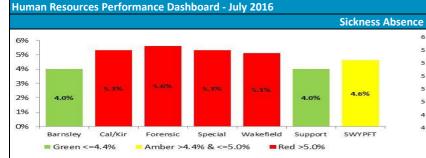
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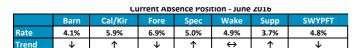
Transformation

inance / Contracts

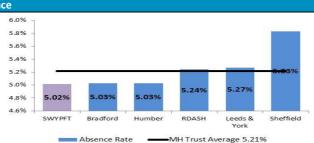
Workforce

Workforce

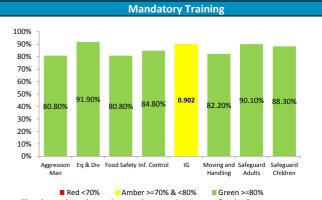




The Trust YTD absence levels in June 2016 (chart above) were above the 4.4% target at 4.6%.



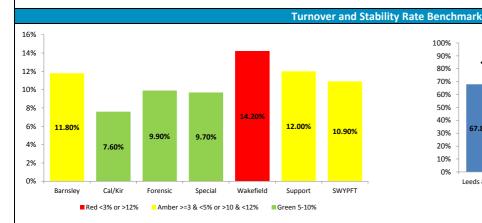
The above chart shows the YTD absence levels in MH/LD/Community Trusts in our region for the 12 months to the end of March 2016. During this time the Trust's absence rate was 5.02% which is below the regional average of 5.21%.



The above chart shows the mandatory training rates for the Trust to the end of July 2016.

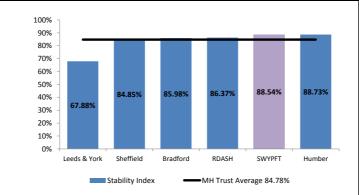
Apart from Information Governance (IG), all mandatory training has a

Apart from information Governance (IG), all mandatory training has a target of above 80% and all are above target; IG has a target of above 95%; all are based on a rolling year.

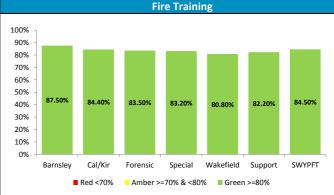


This chart shows the YTD turnover levels up to the end of July 2016. $\label{eq:charge_eq} % \begin{subarray}{ll} \end{subarray} % \begin{subarr$

Turnover figures may look high but this due to the small amount of data. The figures will level out over the new reporting year.



This chart shows stability levels in MH/LD/Community Trusts in the region for the 12 months ending in April 2016. The stability rate shows the percentage of staff employed with over a year's service. The Trust's rate is better than the average compared with other MH/LD/Community Trusts in our region.



The chart shows the YTD fire training figures to the end of July 2016. The Trust continues to achieve its 80% target for fire lecture training, and all areas are now above the target.

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Workforce

Workforce - Performa	nce Wa	I													
		ıst Perfor	mance W	all						Bar	nsley Distric	†			
Month		Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Month		Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16
Sickness (YTD)	<=4.4%	5.00%	5.00%	5.00%	4.70%	4.50%	4.60%	Sickness (YTD)	<=4.4%	4.50%	4.60%	4.60%	4.20%	3.90%	4.00%
Sickness (Monthly)	<=4.4%	5.40%	5.10%	4.80%	4.70%	4.40%	4.80%	Sickness (Monthly)	<=4.4%	5.80%	5.40%	4.60%	4.10%	3.70%	4.10%
Appraisals (Band 6 and above)	>=95%	97.30%	97.50%	1.30%	20.10%	43.10%	56.70%	Appraisals (Band 6 and above)	>=95%	98.20%	98.60%	0.00%	0.00%	58.60%	69.90%
Appraisals (Band 5 and below)	>=95%	96.60%	96,90%	0.10%	6.30%	14.10%	26.80%	Appraisals (Band 5 and below)	>=95%	97.20%	98.20%	0.20%	11.10%	23.80%	41.70%
Aggression Management	>=80%	83.20%	83.20%	83.30%	82.60%	81.70%	80.80%	Aggression Management	>=80%	82.60%	87.00%	100.00%	100%	88.00%	86.70%
Cardiopulmonary Resuscitation	>=80%						62.00%	Cardiopulmonary Resuscitation	>=80%						75.50%
Clinical Risk	>=80%						28.20%	Clinical Risk	>=80%						47.50%
Equality and Diversity	>=80%	91.40%	92.20%	91.80%	92.00%	91.50%	91.90%	Equality and Diversity	>=80%	93.60%	94.70%	100.00%	100%	92.40%	92.70%
Fire Safety	>=80%	86.70%	86.70%	85.20%	83.20%	82.80%	84.50%	Fire Safety	>=80%	89.50%	89.70%	100.00%	100%	86.60%	87.50%
Food Safety	>=80%	77.00%	78.40%	78.40%	79.10%	80.00%	80.80%	Food Safety	>=80%	74.20%	77.10%			76.60%	76.90%
Infection Control and Hand Hygiene	>=80%	88.20%	87.60%	85.60%	83.40%	84.80%	84.50%	Infection Control and Hand Hygiene	>=80%	90.50%	91.00%	100.00%	100%	89.80%	89.70%
Information Governance	>=95%	95.10%	96.00%	93.60%	90.00%	89.90%	90.20%	Information Governance	>=95%	96.20%	97.40%	100.00%	100%	90.90%	90.80%
Moving and Handling	>=80%	85.90%	85.60%	85.00%	84.40%	82.20%	82.20%	Moving and Handling	>=80%	88.10%	87.90%	100.00%	100%	83.70%	83.70%
Safeguarding Adults	>=80%	89.40%	90.20%	90.30%	89.00%	90.00%	90.10%	Safeguarding Adults	>=80%	91.00%	92.90%	100.00%	100%	91.70%	91.70%
Safeguarding Children	>=80%	89.20%	89.90%	88.40%	87.10%	88.00%	88.30%	Safeguarding Children	>=80%	90.40%	91.70%	100.00%	100%	89.00%	89.50%
								Sainsburys Tool	>=80%						98.90%
Bank Cost		£419k	£548k	£463k	£370k	£434k	£434k	Bank Cost		£61k	£50k	£64k	£52k	£55k	£66k
Agency Cost		£774k	£1449k	£805k	£842k	£925k	£791k	Agency Cost		£168k	£289k	£133k	£207k	£157k	£127k
Sickness Cost (Monthly)		£571k	£501k	£497k	£470k	£458k	£489k	Sickness Cost (Monthly)		£227k	£196k	£175k	£143k	£136k	£153k
Vacancies (Non-Medical) (WTE)		380.25	400.13	429.66	469.78	485.3	506.13	Vacancies (Non-Medical) (WTE)		124.09	130.8	127.33	130.14	138.43	154.87
Business Miles		323k	257k	345k	321k	267k	286k	Business Miles		135k	105k	139k	127k	113k	114K
	Calder	dale and I	Kirklees D	District						Fore	ensic Service	es			
Month		Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Month		Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16
Sickness (YTD)	<=4.4%	5.10%	5.20%	5.10%	4.60%	5.00%	5.30%	Sickness (YTD)	<=4.4%	6.50%	6.40%	6.30%	4.50%	5.00%	5.60%
Sickness (Monthly)	<=4.4%	5.80%	5.70%	4.80%	4.60%	5.30%	5.90%	Sickness (Monthly)	<=4.4%	5.10%	5.60%	5.40%	4.50%	5.40%	6.90%
Appraisals (Band 6 and above)	>=95%	100.00%	100.00%	3.20%	22.60%	42.90%	56.50%	Appraisals (Band 6 and above)	>=95%	86.60%	87.00%	0.00%	9.20%	41.90%	55.60%
Appraisals (Band 5 and below)	>=95%	98.40%	98.40%	0.00%	6.40%	11.10%	23.10%	Appraisals (Band 5 and below)	>=95%	89.20%	89.10%	0.00%	2.80%	5.80%	13.60%
Aggression Management	>=80%	87.20%	85.40%	85.50%	85.30%	84.90%	83.30%	Aggression Management	>=80%	80.20%	79.70%	77.50%	77.80%	75.70%	77.60%
Cardiopulmonary Resuscitation	>=80%						47.30%	Cardiopulmonary Resuscitation	>=80%						70.00%
Clinical Risk	>=80%						19.10%	Clinical Risk	>=80%						0.00%
Equality and Diversity	>=80%	92.40%	92.80%	91.90%	92.10%	91.90%	92.50%	Equality and Diversity	>=80%	92.90%	93.90%	93.90%	93%	94.00%	93.10%
Fire Safety	>=80%	86.10%	86.80%	85.00%	79.80%	82.20%	84.40%	Fire Safety	>=80%	86.40%	85.40%	79.80%	81.20%	80.90%	83.50%
Food Safety	>=80%	74.10%	72.10%	75.90%	74.70%	77.60%	77.40%	Food Safety	>=80%	82.70%	86.00%	86.80%	88%	89.70%	89.60%
Infection Control and Hand Hygiene	>=80%	90.70%	88.60%	87.60%	84.90%	84.80%	84.10%	Infection Control and Hand Hygiene	>=80%	88%	88.40%	87.20%	83.90%	86.80%	87.70%
Information Governance	>=95%	96.30%	96.70%	95.70%	91.10%	91.30%	91.70%	Information Governance	>=95%	93.00%	94.30%	93.50%	88.90%	89.70%	88.60%
Moving and Handling	>=80%	85.20%	84.80%	84.60%	83.40%	81.20%	80.20%	Moving and Handling	>=80%	89.20%	89.20%	86.70%	85.40%	85.90%	86.30%
Safeguarding Adults	>=80%	88.50%	89.70%	90.20%	88.60%	90.00%	91.20%	Safeguarding Adults	>=80%	92.10%	92.10%	90.30%	85.60%	88.80%	88.90%
Safeguarding Children	>=80%	90.40%	90.60%	89.00%	87.50%	87.90%	86.90%	Safeguarding Children	>=80%	86.10%	87.30%	85.40%	86.40%	87.90%	89.30%
Sainsburys Tool	>=80%						98.30%								
Bank Cost		£147k	£161k	£145k	£102k	£134k	£134k	Bank Cost		£77K	£142k	£123k	£93k	£115k	£116k
Agency Cost		£182k	£246k	£232k	£135k	£143k	£162k	Agency Cost		£143k	£320k	£107k	£134k	£174k	£130k
Sickness Cost (Monthly)		£124k	£113k	£100k	£107k	£120k	£132k	Sickness Cost (Monthly)		£43k	£42k	£45k	£38k	£47k	£57k
Vacancies (Non-Medical) (WTE)		64.92	64.88	71.52	70.34	71.46	73.49	Vacancies (Non-Medical) (WTE)		49.62	49.57	51.83	53.58	61.1	61.91
Business Miles		62k	56k	66k	67k	51k	57k	Business Miles		4k	6k	11k	5k	10k	14k

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NHS Improvement

Quality

Locality

Fransformation

inance / Contracts

Workforce

Workforce - Performance Wall cont...

Specialist Services							
Month		Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16
Sickness (YTD)	<=4.4%	4.80%	5.00%	5.00%	5.70%	5.30%	5.30%
Sickness (Monthly)	<=4.4%	5.10%	6.30%	5.10%	5.70%	5.00%	5.00%
Appraisals (Band 6 and above)	>=95%	91.80%	92.30%	0.50%	6.90%	13.30%	31.40%
Appraisals (Band 5 and below)	>=95%	94.00%	94.70%	0.00%	4.10%	10.30%	22.90%
Aggression Management	>=80%	81.60%	80.00%	78.20%	72.30%	70.10%	69.90%
Cardiopulmonary Resuscitation	>=80%						49.50%
Clinical Risk	>=80%						13.60%
Equality and Diversity	>=80%	91.30%	92.40%	93.30%	92.80%	92.50%	93.20%
Fire Safety	>=80%	86.00%	86.80%	83.90%	83.10%	82.90%	83.20%
Food Safety	>=80%	74.50%	74.50%	68.50%	66.70%	68.00%	68.10%
Infection Control and Hand Hygiene	>=80%	87.40%	87.30%	85.90%	83.90%	82.60%	83.60%
Information Governance	>=95%	95.90%	96.40%	95.00%	88.30%	88.70%	87.70%
Moving and Handling	>=80%	85.70%	87.00%	84.90%	83.60%	83.20%	81.40%
Safeguarding Adults	>=80%	86.60%	86.80%	86.40%	86.10%	87.70%	87.30%
Safeguarding Children	>=80%	87.80%	87.30%	87.30%	85.90%	86.10%	86.90%
Sainsburys Tool	>=80%						90.90%
Bank Cost		£21k	£30k	£18k	£19k	£20k	£20k
Agency Cost		£173k	£313k	£224k	£226k	£303k	£172k
Sickness Cost (Monthly)		£48k	£54k	£49k	£48k	£45k	£46k
Vacancies (Non-Medical) (WTE)		49.08	55.33	55.73	70.59	76.07	76.05
Business Miles		37k	28k	35k	39k	29k	32k

Wakefield District							
Month		Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16
Sickness (YTD)	<=4.4%	5.30%	5.30%	5.30%	5.90%	5.40%	5.10%
Sickness (Monthly)	<=4.4%	5.00%	4.10%	5.40%	5.90%	5.00%	4.90%
Appraisals (Band 6 and above)	>=95%	97.90%	97.90%	1.10%	17.70%	37.00%	50.30%
Appraisals (Band 5 and below)	>=95%	93.90%	93.90%	0.00%	1.30%	10.40%	23.10%
Aggression Management	>=80%	83.80%	85.20%	86.10%	86.40%	84.00%	85.90%
Cardiopulmonary Resuscitation	>=80%						47.40%
Clinical Risk	>=80%						30.40%
Equality and Diversity	>=80%	92.70%	93.50%	94.00%	94.80%	93.70%	94.50%
Fire Safety	>=80%	82.90%	81.10%	77.50%	80.00%	81.60%	80.80%
Food Safety	>=80%	70.40%	72.30%	70.00%	73.10%	70.30%	73.90%
Infection Control and Hand Hygiene	>=80%	86.70%	84.10%	80.80%	76.80%	78.80%	80.80%
Information Governance	>=95%	97.00%	97.90%	96.80%	93.80%	94.50%	94.90%
Moving and Handling	>=80%	79.00%	78.60%	76.90%	76.00%	76.10%	76.10%
Safeguarding Adults	>=80%	89.70%	88.80%	90.00%	87.70%	90.30%	89.90%
Safeguarding Children	>=80%	87.70%	87.20%	85.70%	85.20%	84.10%	84.20%
Sainsburys Tool	>=80%						99.30%
Bank Cost		£71k	£108k	£66k	£71k	£79k	£69k
Agency Cost		£66k	£145k	£58k	£102k	£95k	£143k
Sickness Cost (Monthly)		£56k	£45k	£67k	£68k	£57k	£54k
Vacancies (Non-Medical) (WTE)		48.79	51.83	58.63	75.79	61.17	66.14
Business Miles		43k	31k	40k	36k	31k	32k

Support Services							
Month		Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16
Sickness (YTD)	<=4.4%	5.00%	4.90%	4.80%	4.80%	4.20%	4.00%
Sickness (Monthly)	<=4.4%	4.90%	3.70%	4.10%	4.80%	3.80%	3.70%
Appraisals (Band 6 and above)	>=95%	99.00%	99.00%	0.50%	8.10%	36.40%	52.40%
Appraisals (Band 5 and below)	>=95%	99.60%	99.40%	0.00%	2.60%	6.80%	13.70%
Aggression Management	>=80%	78.90%	76.80%	80.20%	81.00%	80.40%	75.20%
Cardiopulmonary Resuscitation	>=80%						66.70%
Clinical Risk	>=80%						0%
Equality and Diversity	>=80%	84.10%	84.40%	84.50%	85.60%	85.70%	86.70%
Fire Safety	>=80%	84.20%	84.30%	84.80%	82.40%	77.10%	82.20%
Food Safety	>=80%	91.00%	90.90%	87.50%	91.80%	91.70%	93.70%
Infection Control and Hand Hygiene	>=80%	82.00%	81.20%	75.30%	73.80%	76.10%	77.00%
Information Governance	>=95%	90.90%	91.50%	86.10%	84.30%	84.20%	86.70%
Moving and Handling	>=80%	84.80%	83.90%	83.90%	83.10%	81.40%	83.40%
Safeguarding Adults	>=80%	86.90%	86.90%	88.40%	88.40%	88.10%	87.30%
Safeguarding Children	>=80%	88.60%	90.00%	89.80%	89.50%	89.30%	90.00%
Bank Cost		£42k	£57k	£47k	£32k	£30k	£29k
Agency Cost		£42k	£135k	£51k	£36k	£53k	£57k
Sickness Cost (Monthly)		£73k	£50k	£61k	£66k	£54k	£47k
Vacancies (Non-Medical) (WTE)		41.82	45.57	70.28	73.94	82.14	80.4
Business Miles		42k	32k	54k	45k	33k	37k

Notes:

Mental Health Act (MHA) training - compliance against MHA training will flow from Q3.



Publication Summary

NHS Improvement

Strengthening financial performance and accountability in 2016/17

NHS Improvement, in partnership with NHS England, has set out a suite of new measures for providers and commissioners to restore financial discipline and help ensure ongoing financial sustainability for the NHS. This document sets out action to stabilise NHS finances in 2016/17, provides further detail on access to the Sustainability and Transformation Fund, outlines the proposed basis for assessing the financial performance of provider organisations and introduces new programmes of financial special measures for providers and commissioners that are unable to ensure sufficient financial discipline.

Department of Health (DH)

Click here for guidance

Records management code of practice for health and social care 2016

This guidance on health and care records management and records retention has been updated. It sets out standards required for the management of records for organisations who work within, or under contract to the NHS in England. The standards also apply to public health functions in local authorities and adult social care where joint care is provided within the NHS.

The Trust are currently preparing a summary document that outlines how this will impact the Trust and the actions that will be required to be undertaken. This will be circulated internally in the next few weeks.

Click here for guidance

Publication Summary cont...

The following section of the report identifies publications that may be of interest to the Trust and it's members.

Diagnostic imaging dataset, July 2016

Direct access audiology waiting times for May 2016

NHS provider bulletin: 20 July 2016 (NHS Improvement)

NHS workforce statistics, April 2016, provisional statistics

NHS sickness absence rates, January 2016 to March 2016

Improving access to psychological therapies report, April 2016 final, May 2016 primary and Q4 2015/16

Provisional monthly hospital episode statistics for admitted patient care, outpatients and accident and emergency data - April 2016 to May 2016

Public Health England bulletin: 28 July 2016

Hospital episode statistics diagnostic imaging dataset data linkage report - provisional summary statistics, April 2015 - March 2016, experimental statistics

Provider bulletin: 3 August 2016

Mental health community teams activity, quarter ending June 2016

NHS Improvement update, July 2016

Glossary

ADHD	Attention deficit hyperactivity disorder
AQP	Any Qualified Provider
ASD	Autism spectrum disorder
AWA	Adults of Working Age
AWOL	Absent Without Leave
B/C/K/W	Barnsley, Calderdale, Kirklees, Wakefield
BDU	Business Delivery Unit
C&K	Calderdale & Kirklees
C. Diff	Clostridium difficile
CAMHS	Child and Adolescent Mental Health Services
CAPA	Choice and Partnership Approach
CCG	Clinical Commissioning Group
CGCSC	Clinical Governance Clinical Safety Committee
CIP	Cost Improvement Programme
СРА	Care Programme Approach
CPPP	Care Packages and Pathways Project
CQC	Care Quality Commission
CQUIN	Commissioning for Quality and Innovation
CROM	Clinician Rated Outcome Measure
CRS	Crisis Resolution Service
CTLD	Community Team Learning Disability
DoV	Deed of Variation
DQ	Data Quality
DTOC	Delayed Transfers of Care
EIA	Equality Impact Assessment
EIP/EIS	Early Intervention in Psychosis Service
EMT	Executive Management Team

KEY for dashboard Year End Forecast Position					
4	Forecast met, no plan required/plan in place likely to deliver				
3	Forecast risk not met, plan in place but unlikely to deliver				
2	Forecast high risk not met, plan in place but vey unlikely to deliver				
1	Forecast Not met, no plan / plan will not deliver				

FOI	Freedom of Information
FOT	Forecast Outturn
FT	Foundation Trust
HEE	Health Education England
HONOS	Health of the Nation Outcome Scales
HSJ	Health Service Journal
HSCIC	Health and Social Care Information Centre
HV	Health Visiting
IAPT	Improving Access to Psychological Therapies
IG	Information Governance
IHBT	Intensive Home Based Treatment
IM&T	Information Management & Technology
Inf Prevent	Infection Prevention
IWMS	Integrated Weight Management Service
KPIs	Key Performance Indicators
LD	Learning Disability
Mgt	Management
MAV	Management of Aggression and Violence
МВС	Metropolitan Borough Council
МН	Mental Health
МНСТ	Mental Health Clustering Tool
MRSA	Methicillin-resistant Staphylococcus aureus
MSK	Musculoskeletal
MT	Mandatory Training
NCI	National Confidential Inquiries
NHS TDA	National Health Service Trust Development Authority
NHSE	National Health Service England
NHSI	NHS Improvement

NICE	National Institute for Clinical Excellence
NK	North Kirklees
OOA	Out of Area
OPS	Older People's Services
PbR	Payment by Results
PCT	Primary Care Trust
PICU	Psychiatric Intensive Care Unit
PREM	Patient Reported Experience Measures
PROM	Patient Reported Outcome Measures
PSA	Public Service Agreement
PTS	Post Traumatic Stress
QIA	Quality Impact Assessment
QIPP	Quality, Innovation, Productivity and Prevention
QTD	Quarter to Date
RAG	Red, Amber, Green
RiO	Trusts Mental Health Clinical Information System
SIs	Serious Incidents
S BDU	Specialist Services Business Delivery Unit
SK	South Kirklees
SMU	Substance Misuse Unit
SU	Service Users
SWYFT	South West Yorkshire Foundation Trust
SYBAT	South Yorkshire and Bassetlaw local area team
TBD	To Be Decided/Determined
WTE	Whole Time Equivalent
Y&H	Yorkshire & Humber
YTD	Year to Date

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