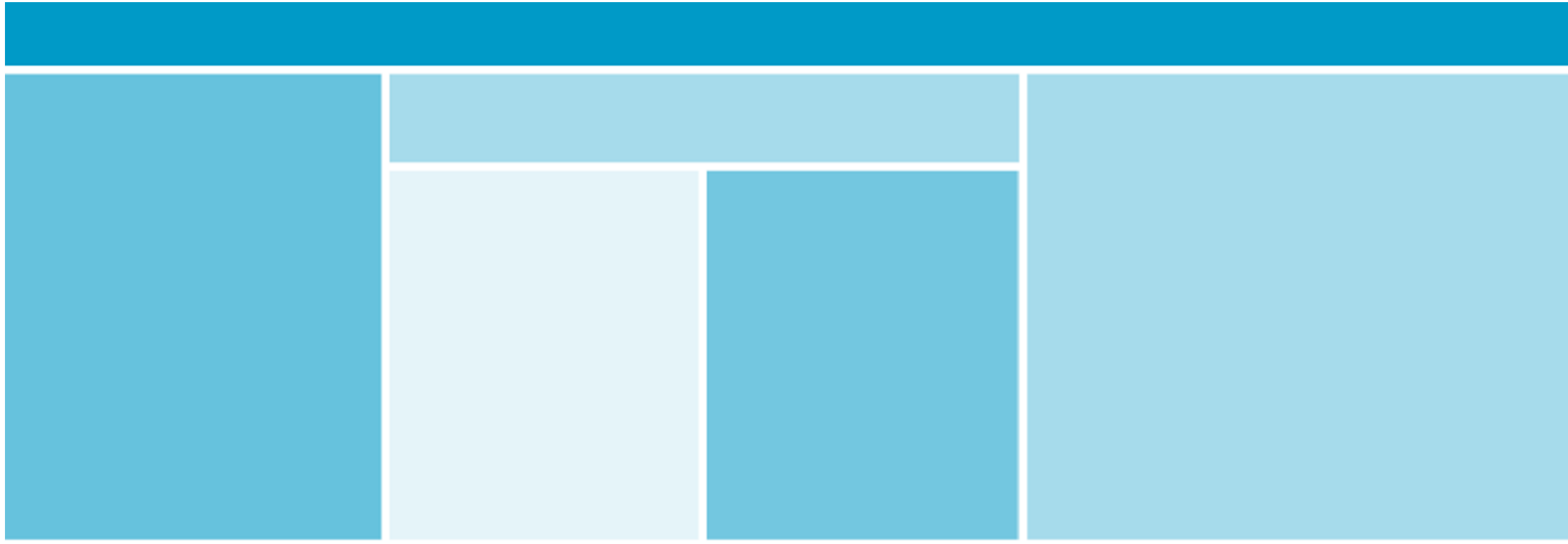




With all of us in mind

Quality Performance Report

Strategic Overview



January 2016

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Dear Board Member/Reader

Welcome to the Trust's Integrated Performance Report: Strategic Overview for January 2016 information unless stated. 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.

The Trust continues to improve its performance framework to deliver the Trust IM&T strategy of right information in the right format at the right time. Performance reports are now available as electronic documents that allow the reader to look at performance from different perspectives and at different levels within the organisation.

Performance is reported through a number of key performance indicators (KPIs) using the Trust's balanced score card to enable performance to be discussed and assessed with respect to

- Business Strategic Performance – Impact & Delivery
- Customer Focus
- Operational Effectiveness – Process Effectiveness
- Fit for the Future - Workforce

KPIs provide a high level view of actual performance against target and assurance to the Board about the delivery of the strategic objectives and 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

Strategic Overview Dashboard

Business Strategic Performance Impact & Delivery

1	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Q1	Q2	Q3	National Average	Year End Forecast Position	
2	Monitor Compliance	Monitor Governance Risk Rating (FT)	M	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		Green	Green	Green		4	
3		Monitor Finance Risk Rating (FT)	M	4	4	4	4	4	4	4	4	4	4	4		4	4	4		4
4	CQC	CQC Quality Regulations (compliance breach)	CQC	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green		Green	Green	Green		4
5	CQUIN	CQUIN Barnsley	C	Green	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G		3
6		CQUIN Calderdale	C	Green	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G		3
7		CQUIN Kirklees	C	Green	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G		3
8		CQUIN Wakefield	C	Green	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G		3
9		CQUIN Forensic	C	Green	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Green	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Green	Amber/G	
10	Infection Prevention	Infection Prevention (MRSA & C.Diff) All Cases	C	6	0	0	0	2	1	0	0	0	0	0	0	3	0	0		4
11	C-Diff	C Diff avoidable cases	C	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		4
12	Outcomes	% SU on CPA in Employment	L	10%	6.55%	7.34%	7.18%	6.97%	7.38%	7.55%	7.68%	7.32%	7.37%	7.17%	7.18%	7.55%	7.37%			
13		% SU on CPA in Settled Accommodation	L	60%	60.27%	65.26%	64.44%	57.79%	60.34%	62.81%	64.46%	63.39%	64.09%	63.56%	64.44%	62.81%	64.09%			

Customer Focus

14	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Q1	Q2	Q3	National Average	Year End Forecast Position
15	Complaints	% Complaints with Staff Attitude as an Issue	L	< 25%	12% 8/66	14% 6/44	13% 9/69	12% 9/73	12% 5/42	15% 6/41	12% 5/42	16% 9/58	15% 6/40	7% 4/57	14% 23/179	13% 20/156			4
16	Service User Experience	Friends and Family Test	L	TBC	89.00%	92.00%	87.00%	93.00%	89.00%	91.00%	88.00%	85.79%	93.51%	89%	89.00%	91.00%	88.83%		
17	MAV	Physical Violence - Against Patient by Patient	L	14-20	Above ER	Above ER	Above ER	Within ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER		4
18		Physical Violence - Against Staff by Patient	L	50-64	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	Above ER	
19	FOI	% of Requests for Information Under the Act Processed in 20 Working Days	L	100%	100% 24/24	100% 17/17	100% 24/24	100% 28/28	100% 20/20	100% 25/25	100% 19/19	100% 13/13	100% 19/19	100% 23/23	100% 65/65	100% 73/73	100% (51/51)		4
20	Media	% of Positive Media Coverage Relating to the Trust and its Services	L	60%	92.00%	92.00%	92.00%	80.00%	75.00%	50.00%	40.00%	50.00%			92.00%	68.00%			4
21	Befriending services	% of Service users allocated a befriender or volunteer led group support (gardening/music/social) within 16 weeks	L	70%	50.00%	50.00%	50.00%	20.00%	20.00%	100%	100%	100%	100%		50.00%	20.00%	100%		4
22		% of Service Users Requesting a Befriender Assessed Within 20 Working Days	L	80%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%		4
23		% of Potential Volunteer Befriender Applications Processed in 20 Working Days	L	90%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%		4

Operational Effectiveness: Process Effectiveness

24	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Q1	Q2	Q3	National Average	Year End Forecast Position	
25	Monitor Risk Assessment Framework	Max time of 18 weeks from point of referral to treatment - non-admitted	M	95%	99.11%	100%	99.86%	100%	99.32%	98.60%	99.86%	97.64%	100%	97.91%	99.70%	99.28%	99.18%		4	
26		Max time of 18 weeks from point of referral to treatment - incomplete pathway	M	92%	98.06%	97%	99.82%	100%	97.31%	99.16%	98.92%	97.58%	100%	100.00%	98.35%	98.76%	98.80%	93.10%		4
27		Delayed Transfers Of Care	M	7.50%	2.69%	1.64%	2.06%	1.96%	1.70%	1.80%	3.49%	2.89%	2.42%	2.91%	2.12%	1.83%	2.73%		4	
28		% Admissions Gatekept by CRS Teams	M	95%	93.28%	96.30%	97.20%	100%	95.90%	96.12%	95.49%	95.90%	96.77%		95.51%	97.29%	95.69%		4	
29		% SU on CPA Followed up Within 7 Days of Discharge	M	95%	98.21%	100%	97.86%	97.70%	95.35%	100%	95.39%	95.60%	95.95%	97.73%	98.66%	97.97%	95.50%	96.90%		4
30		% SU on CPA Having Formal Review Within 12 Months	M	95%	96.37%	95.18%	97.92%	96%	86.57%	98.44%	86.88%	97.52%	98.56%	98.32%	97.92%	98.44%	98.56%	97.67%		4
31		Meeting commitment to serve new psychosis cases by early intervention teams QTD	M	95%	108.97%	102%	104.60%	147.59%	108.97%	113.25%	83.42%	99.48%	102.51%	64.10%	104.60%	113.25%	102.51%		4	
32		Data completeness: comm services - Referral to treatment information	M	50%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.00%	100.00%	100.00%	100.00%		4	
33		Data completeness: comm services - Referral information	M	50%	94.00%	94%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%		4
34		Data completeness: comm services - Treatment activity information	M	50%	94.00%	94%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%	96.80%		4
35		Data completeness: Identifiers (mental health)	M	97%	99.70%	100%	99.62%	100%	99.62%	99.54%	99.65%	99.55%	99.45%	99.25%	99.62%	99.54%	99.45%		4	
36		Data completeness: Outcomes for patients on CPA	M	50%	78.83%	79.07%	77.63%	78.67%	77.64%	76.97%	78.40%	77.94%	78.58%	78.13%	77.63%	76.97%	78.58%		4	
37		Compliance with access to health care for people with a learning disability	M	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant	Compliant		Compliant
38		IAPT - Treatment within 6 Weeks of referral	M	75%	81.46%	76.52%	75.72%	73.70%	75.83%	77.98%	75.31%	72.28%	85.66%	70.06%	77.84%	75.91%	71.62%			
39		IAPT - Treatment within 18 weeks of referral	M	95%	98.60%	98.90%	99.74%	99.09%	98.89%	99.38%	99.38%	99.38%	99.10%	99.10%	98.15%	99.09%	99.15%	99.37%		
40		Early Intervention in Psychosis - 2 weeks (NICE approved care package)	M	50%	40.00%	81.82%	58.33%	56.25%	55.56%	80.00%	66.67%				See below for new criteria.					
	Early Intervention in Psychosis - 2 weeks (NICE approved care package) - Clock Stops		50%										85.19%	93.75%						
	Early Intervention in Psychosis - 2 weeks (NICE approved care package) - Waiting at month end		50%										25.00%	90.91%						
43	Data Quality	% Valid NHS Number	C (FP)	99%	99.87%	100%	99.88%	99.71%	99.58%	99.76%	99.58%	99.30%	94.11%	Avail M11	99.88%				4	
44		% Valid Ethnic Coding	C (FP)	90%	99.05%	95%	94.86%	94.88%	94.90%	94.83%	94.73%	94.12%	99.31%	Avail M11	96.28%				4	

Strategic Overview Dashboard

Fit for the future Workforce

45	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Q1	Q2	Q3	National Average	Year End Forecast Position
46	Sickness	Sickness Absence Rate (YTD)	L	4.4%	4.80%	5.10%	5.00%	4.80%	4.80%	4.90%	4.90%	4.90%	5.00%	5.00%	5.00%	4.90%	5.00%		1
47	Appraisal	Appraisal Rate Band 6 and above	L	95%	Avail M3	Avail M3	56.80%	72.90%	80.30%	87.30%	89.50%	91.60%	92.90%	94.50%	56.80%	87.30%	92.90%		4
48		Appraisal Rate Band 5 and below	L	95%	Avail M6	Avail M6	Avail M6	Avail M6	Avail M6	66.30%	75.80%	80.30%	83.60%	89.20%	Avail M6	66.30%	83.60%		4
50	Mandatory Training	Aggression Management	L	80%	73.70%	73.65%	75.83%	77.04%	78.89%	78.85%	80.38%	80.78%	83.12%	82.53%	75.83%	78.85%	83.12%		1
51		Equality, Diversity & Inclusion	L	80%	82.30%	84.55%	84.87%	85.76%	87.17%	88.28%	88.81%	89.37%	90.31%	90.58%	84.87%	88.28%	90.31%		4
52		Fire Safety	L	80%	86.50%	86.24%	86.31%	86.55%	86.44%	85.33%	84.60%	84.83%	85.56%	83.78%	86.31%	85.33%	85.56%		4
57		Food Safety	L	80%	65.20%	66.89%	69.00%	70.67%	71.80%	73.06%	74.30%	74.10%	75.79%	75.36%	69.00%	73.06%	75.79%		1
54		Infection, Prevention & Control & Hand Hygiene	L	80%	80.60%	82.09%	82.82%	83.69%	85.25%	85.55%	85.58%	84.86%	85.84%	86.52%	82.82%	85.55%	85.84%		4
55		Information Governance	L	95%	91.90%	92.55%	92.67%	92.76%	92.73%	91.96%	91.56%	90.58%	89.06%	82.42%	92.67%	91.96%	89.06%		4
56		Safeguarding Adults	L	80%	82.80%	82.60%	84.14%	84.95%	86.16%	86.94%	87.74%	87.34%	88.34%	88.65%	84.14%	86.94%	88.34%		4
57		Safeguarding Children	L	80%	84.70%	85.22%	86.00%	86.39%	87.12%	87.93%	86.12%	85.54%	87.68%	88.22%	86.00%	87.93%	87.68%		4
58	Moving & Handling	L	80%	71.80%	73.66%	75.31%	77.40%	79.32%	80.37%	82.11%	83.03%	83.83%	84.57%	75.31%	80.37%	83.83%		1	
59	Safer Staffing	Safer Staffing - Fill Rate (Nurses)	L	90%	91.80%	94.20%	96.30%	94.40%	91.10%	92.80%	95.90%	97.60%	93.90%	93.70%	96.30%	92.80%			4
60		Safer Staffing - Fill Rate (HCAs)	L	90%	117.60%	118.60%	115.40%	112.90%	112.90%	111.90%	116.10%	113.60%	114.30%	116.00%	115.40%	111.90%			4

KEY	
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 very unlikely to deliver
1	Forecast Not met, no plan / plan will not deliver
CQC	Care Quality Commission
M	Monitor
C	Contract
C (FP)	Contract (Financial Penalty)
L	Local (Internal Target)
ER	Expected Range
N/A	Not Applicable

Finance

Overall Financial Performance 2015 / 2016

Performance Indicator		Month 10 Performance	Annual Forecast	Trend from last month	Last 3 Months - Most recent		
					9	8	7
Trust Targets					9	8	7
1	Monitor Risk Rating	●	●	↔	●	●	●
2	REVISED £0.10m Surplus on Income & Expenditure	●	●	↑	●	●	●
3	Cash Position	●	●	↑	●	●	●
4	Capital Expenditure	●	●	↔	●	●	●
5	Delivery of CIP	●	●	↓	●	●	●
6	Better Payment Practice Code	●	●	↑	●	●	●

Key

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

Summary Financial Performance

These Key Performance Indicators (KPI's) help the Trust to monitor progress against each element of our financial strategy.

1. The Trust Financial Risk Rating is 4 against a plan level of 4. (A score of 4 is the highest possible) The forecast is that the Trust will retain a rating of 4 at 31st March 2016.

2. The year to date position, as at January 2016, is a deficit of £0.22m. As part of the Month 6 Monitor return the Trust confirmed a revised plan of £100k surplus. This year to date position is £1.07m ahead of this revised plan.

Supported by the utilisation of Trust provisions the Trust are confident that the financial plan for 2015 / 2016 will be achieved. If the current trend continues this would enable the Trust to achieve a small surplus rather than a deficit. The Trust will continue to validate this position, and the risks contained within, and will update to Board accordingly.

3. At January 2016 the cash position is £26.86m which is £1.05m ahead of plan.

4. Capital spend to January 2016 is £8.67m which is £0.92m (10%) behind the Trust capital plan.

5. At January 2016 the Cost Improvement Programme is £1080k behind plan. Overall a Full Year Value of £1388k (14%) has been rated as red, after mitigations. A red rating indicates that the CIP opportunity does not currently have an implementation plan and therefore carries a high risk on non achievement.

6. As at January 2016 91% of NHS and 96% of non NHS invoices have achieved the 30 day payment target (95%). This continues to be a small improvement from previous months.

Trust Summary by BDU - Current Contract Performance

Contract Variations	
BBDU NHSE National Childhood Flu Immunisation (3 yr contract) - completed	£60.9
BBDU NHSE H&J: Liaison & Diversion Service - completed	£290.2
BBDU WCC PH Resource Library - completed	6.75
BBDU BCCG & Associates CV 1 Various - completed	£359.1
WBUDU WCCG Portrait of a Life - Care Home Vanguard - completed	£62.2

Contract Variations - awaited	
SBDU C&K CAMHS: Awaiting signed 2015-16 deed of variation from Commissioners	
SBDU W CAMHS : Psychologist (ASD) (Jan-16 to Mar-17) NR split £12k & £48k 15/16 & 16	£12.0
Psychologist (Educational Care Panel) (Jan-16 to Mar-17) NR split £12k & £48k 15/16 & 7 x FTE Primary Practitioners (Jan-Mar 2016) NR split £70k & £295k 15/16 & 16/17	£12.0
SBDU CAMHS Community Eating Disorders - Future in Mind Funding - B, C/GH/NK/W CC	£277.1
SBDU CAMHS C&YP IAPT Training Sep-15 to Oct-16 NR Barnsley £27.5k & Wakefield £1b	£27.5
SBDU Barnsley Enhanced Support to YOT Future in Minds Funding £30k NR in 15/16 & 16	£30.0
SBDU Barnsley SPA to become operational M-F Future in Minds Funding £30k NR in 15/16	£30.0
BBDU Draft CV2 BCCG - transfer of funds BMBC Children's Rec £284.0, MH Liaison	£166.7
Pump Priming NR £139.7 (net increase £166.7)	
BBDU draft CV2 NHSE - Men ACWY Vaccs NR £11.5 for 2 years	£11.5

QUIN Performance

Quarter	Quarter 3 £000s	Achieved	Variance
Barnsley	£426.6	£378.6	£-48.0
Wakefield	£136.1	£70.7	£-65.4
Kirklees	£150.3	£76.6	£-73.7
Calderdale	£67.4	£34.4	£-33.1
Specialised	£75.4	£75.4	£0.0
Forensics	£22.5	£22.5	£0.0
Trust Total	£878.4	£658.2	£-220.1

QUIN Performance Year-end Forecast

Quarter	Annual £000s	Forecast Achievement	Variance
Barnsley	£1,790.1	£1,441.3	£-348.8
Wakefield	£793.9	£479.7	£-314.2
Kirklees	£878.2	£495.0	£-383.3
Calderdale	£394.1	£200.1	£-194.0
Specialised	£301.7	£282.8	£-18.9
Forensics	£562.3	£562.3	£0.0
Trust Total	£4,720.4	£3,461.2	£-1,259.2

QUIN Performance Q3 Results

West CCGs: MH Clustering - Q3, 3 out of 4 indicators failed for all 3 BDUs. Remedial work in place.

Reason for non achievement is recording/data reporting.

Retrospective agreement made for Q1 achievement for clustering of initial assessments due to exempting patients that had become eligible prior to Apr 15 that had been included within our reporting. Q1 achievement relates to all 3 BDU's, Q2 relates to C BDU only.

Urgent Care: Agreement has been made to attach 20% to Q1, Q2 and Q3 for in year work. 40% attached to final target.

QIPP Targets & Delivery for 2015/16

CCG	Target £000s	Planned £000s	Remainder £000s	RAG
Wakefield*	£1,790.0	£1,843.3	£53.3	***
Kirklees**	£1,000.0	£689.9	£-310.1	
Calderdale	£0.0	£0.0	£0.0	
TOTAL £000s	£2,790.0	£2,533.2	£-256.8	

* W target is cumulative covering 2014/15 & 2015/16: ** K includes Specialist LD scheme

*** W RAG remains at R as risks identified ~ see summary below

Proposals under the QIPP scheme -

W:- £1.79m in total. OOA Bed Mgt - above plan: OPS Reconfiguration (Saville Park) - on target: MH contract reduction - delivered: OAPs for LD & CHC (CCG held budgets)- high risk: Castle Lodge (CCG budget - prevention client OOA) ~ CCG contesting this £47k : Repricing LD beds - ongoing: Risk within plan as includes £41k for use of Barnsley PICU bed & SWYPFT funded £338k from contract growth for ADHD sustainable case & backlog clearance ~tbc by CCG

C:- 15/16 Schemes to be identified by end of Q1. Potential Productivity Schemes identified, not finalised/agreed.

K:- £1m in total: 1) Reduction on OOA spend for Specialist Rehabilitation & Recovery placements £500k, 2) Reduction in OOA LD Specialist placements £500k (CCG budgets), both schemes required to generate in excess of £1m, for reinvestment in new service models. Below target

KPIs and Penalties

Commissioner	Penalty £000s	Comment
Barnsley CCG	£14.0	MSK as at Mth 9

Contract Performance Information - based on month 9

Key areas where performance is above contracted levels

- Acute MH Inpatient services for adults of working age across W,K,C BDUs
- MH PICU Inpatient services for adults of working age in Wakefield
- Older People's MH inpatients services in Wakefield
- Older People's Memory services in Calderdale
- Intermediate Care in Barnsley

Key areas where performance is below contracted levels

- MH PICU Inpatient services for adults of working age in C & K
- Older People's MH inpatients services in Kirklees
- K IAPT Below target for recovery, 6 week & 18 week waits (ref to entering IAPT treatment)
- MH Adult Crisis Resolution services in Wakefield
- MH Adult Rehabilitation services in W & C
- Older People's Memory services in Wakefield
- MSK in Barnsley

Contract Performance Issues

Health & Wellbeing - There are still issues with meeting activity targets as the targets contracted for

were arrived at prior to the national downturn in activity

Forensics - Discussions held with Commissioner re medium secure occupancy being below 90% at present NHSE not concerned given pressure on beds nationally. However BDU expect additional referrals to continue and to achieve threshold. NHSE complimented MSS for speedy response to recent requests for urgent admissions

Trust Summary by BDU - continued

CQUIN Performance Q3 Results - continued

BBDU: MH Clustering - The BDU only met the target for % in crisis plans for Q2 & Q3, it failed all other targets. A recovery plan has been produced and work is still ongoing with the Teams to achieve this CQUIN & to achieved crisis plan target in Q4, also SWYPFT has resubmitted Q1 & Q2 figures due to a change in the method of calculation, however, the targets have still not been achieved
 BBDU: High Performing Teams - Met with CCG re problems with Q2. Q2 submission failed. Agreed submission date for Q3 deferred to 28/02/16

Key Contract Issues - Specialist

CAMHS - Future in Minds: All Transformation Plans have been assured. ED allocation across the organisation £666k. Total recurrent uplift from 2016/17 £2.3m
C&K: Positive move from Recovery to Action position. DoV still awaiting signature from Commissioners. Finance being reviewed. 2016/17 new contract being issued. 17/18 Assumption service will go out to procurement
Barnsley: Positive rapport with Commissioners. Deep dive work ongoing in relation to data.
Wakefield: CV being prepared to capture agreed funding and temporary work streams.
 To note: MHS data set going live Jan 2016. May be accuracy issues initially within Barnsley. BCCG aware.
Learning Disability
 W - constraints on the number of patients able to be admitted against contract plan due to intake of complex client
 C - SWYPFT team delivering on timescales. Positive feedback and service being recognised as good practice

Key Contract Issues - Calderdale

IHBT: CCCG only commissioner that has not commissioned 24/7 IHBT service. Business case submitted, ongoing discussion with CCG. % overhead and contribution for business case being reworked. No contentious elements relating to quality.
MHL: Ongoing discussion re provision. CCCG & KCCG to discuss separately. SWYPFT to review specification and core 24hr cover and ascertain what can be provided within current financial envelope.
Police Liaison: Ongoing review of finance. Same % overhead & contribution to be applied as that of IHBT
R&R: CCCG clear about intentions re redesign of pathway. Joint pathway with health & social care. Move from bed based approach and moving to community rehab model.
Psychology: CCCG looking at new model going forward and considering funding implications.
IAPT (AQP): DoV outstanding. Service out to procurement Dec/Jan 16
ED: CCCG would like 'basic' service initially. SWYPFT to work with Commissioners focussing on primary care and supporting patients through need. Meeting 20th Jan

Key Contract Issues - Forensics

National procurement identified for 2015/16/17 for Medium & Low Secure MH Services with CAMHS likely to be in first lot.
 Joint Commissioner / Provider review of Outreach services & pathways to verify funding ~ revised pathway shared with Commissioners and has been well received.
 Joint Review of Service Unit Prices to inform future Commissioning and service delivery ~ review completed and shared with Commissioners

Key Contract Issues - Kirklees

Psychology: 18 week pathway holding although there has been an increase in referrals. Waiting lists beginning to reduce.
IAPT: Remaining below target for recovery, 6 week & 18 week waits (ref to entering IAPT treatment).
Police Liaison: Ongoing review of finance.
MHL: Ongoing discussion re provision.

Key Contract Issues - Barnsley

Wakefield MDC PH - The Council have offered a 6 months extension to the contract but require a 10% reduction in the contract value. SWYPFT is negotiating this as the Commissioner has said that they did not want any reductions in staff. Internal report being produced
Rotherham & Doncaster MBCs PH - the Commissioners have requested a reduction in the contract value of 2% per annum. SWYPFT is working on identifying the saving
Sheffield CC PH - the Commissioner has instructed SWYPFT to cap activity at the contract target. SWYPFT is working on how this can be achieved
Substance Misuse Services - through Barnsley DAAT PF have asked SWYPFT to put in a model of service. SWYPFT has done so with a model costing £558k, current contract value is £1,079k
Intermediate Care - SWYPFT is working with BCCG re the I/C Pilot

Key Contract Issues - Wakefield

15/16 and 16/17 finalising funding relating to the Future in Minds Allocation

Mental Health Currency Development

The currency for most mental health services for working age adults and older people has been defined as the 'clusters'. That means that service users have to be assessed and allocated to a cluster by their mental health provider, this assessment must be regularly reviewed in line with the timing and protocols. It is the intention that clusters will form the basis of the contracting arrangements between commissioners and providers, the commencement of this is not yet clear.

In the Trusts two main contracts for 2015/16 are a set of Quality (CQUIN) indicators related to MH Clustering, this will assist the Trust in preparedness.

The CQUINs have 3 common elements:

Clustering of Initial Referral Assessments - 98% to be clustered within 8 weeks of 'eligible' initial referral assessments

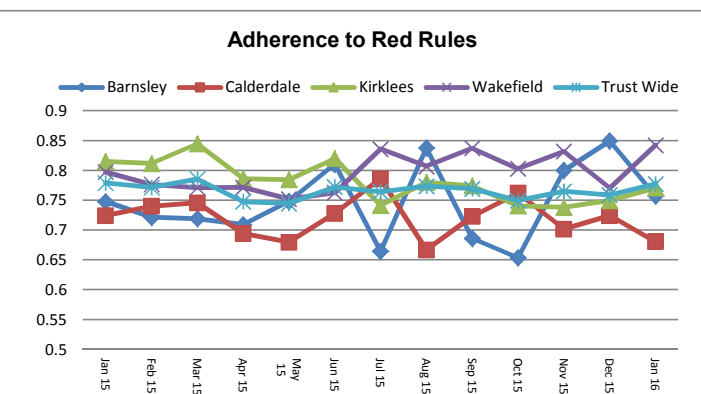
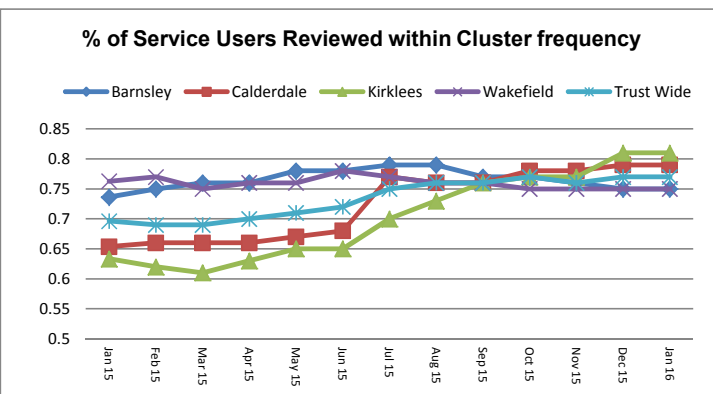
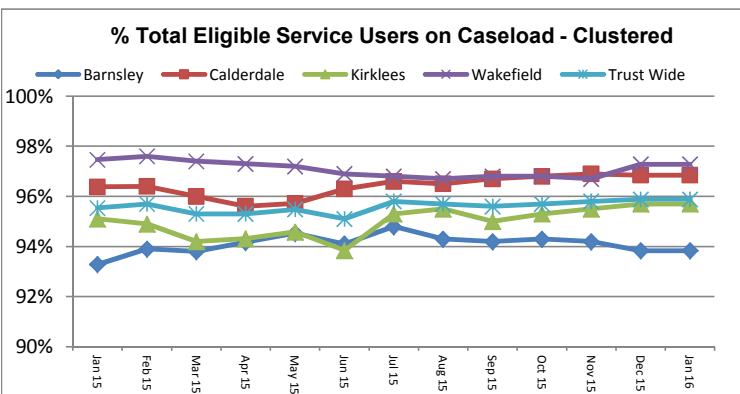
Review of Service Users and Clusters - agreed % to be reviewed by March 2016.

Adherence to Red Rules (assurance that the cluster is accurate, complete and of high quality)

The West contract includes the development of a PbR Dashboard and this will be an interactive reporting tool. Developments are on track and requirements have been met to end of quarter 3.

There has been some underperformance against the contracts in all BDU's and a detailed action plan is in place which is being monitored locally, improvement in performance has been evidenced overall but there remains some risk associated with achievement at year end..

MH Currency Indicators - January 2016



To assist with achievement of the CQUIN indicators and linked to clinical record keeping processes, the Trust has undertaken a project to review clinical caseloads and record keeping processes. 85% of clinical staff in Calderdale, Kirklees and Wakefield have been involved in training related to the clinical record keeping process, which includes Mental Health Clustering, all BDU's have received relevant updated documentation to the support the process. The Trusts CPA policy has been reviewed and now includes the cluster review periods therefore removing the discrepancy between CPA review parameters and MHCT review parameters.

Next steps for the project involve providing support to Barnsley BDU, additional training; Policy reviews – Caseload management, Clinical supervision, Clinical record keeping; Review of Clinical Information system user guides and system training to support the process.

IAPT & Forensic Secure Services and Clustering

The scope of PbR was extended into other areas of Mental Health such as Forensic, IAPT and Children and Adolescent Mental Health Services during 2015/16.

All IAPT clients entering treatment from 1st April 2015 must be clustered. The trust are participating in the Forensic PbR Pilot submission and submitting data on a regular basis into the pilot. The datasets have been flowing from April 15 and internal monitoring of the completeness of this data has been taking place during 15/16. From quarter 2 the monitoring of clustering for these services was included in the relevant BDU dashboards.

The implementation of clustering for Learning Disabilities service users, in relation to the CP&PP LD pilot, has been slower than anticipated, data collection is due to take place in January 2016 which will enable data to flow into the pilot.

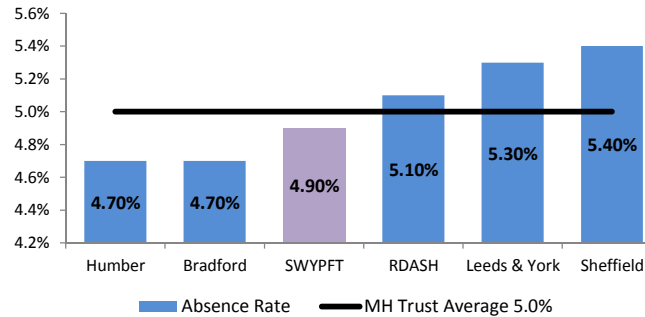
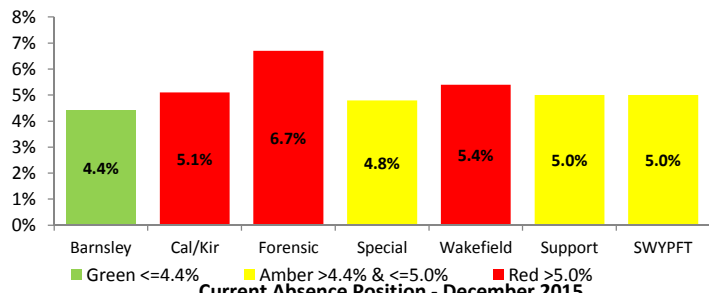
Community Currency Development

The continues to monitor the national position regarding the development of Community Currency Development. The Trust has expressed an interest in being involved in the national project for this and further updates will be available as the project progresses.

NHS England held an event towards the end of 2015 to begin working on this development. The aims of the event were to undertake joint work to agree the dataset, develop the currencies and outcome indicators for community services and to develop payment approaches for community services. To provide an overview of the work that is currently taking place; to ensure the current work is co-ordinated and aligned and consider future steps to deliver the work; to understand how to involve community services in the work; to capture local innovation and best practice.

Human Resources Performance Dashboard - January 2016

Sickness Absence



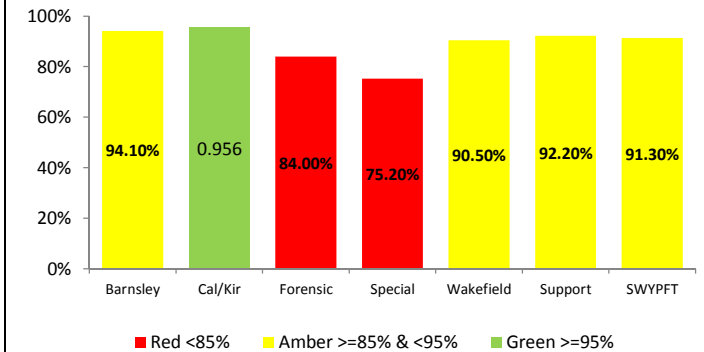
The above chart shows the YTD absence levels in MH/LD Trusts in our region to the end of September 2015. During this time the Trust's absence rate was 4.9% which is below the regional average of 5%.

Current Absence Position - December 2015

	Barn	Cal/Kir	Fore	Spec	Wake	Supp	SWYPFT
Rate	5.4%	4.9%	5.2%	4.8%	4.8%	5.5%	5.2%
Trend	↓	↓	↑	↔	↔	↑	↓

The Trust YTD absence levels in December 2015 (chart above) were above the 4.4% target at 5%.

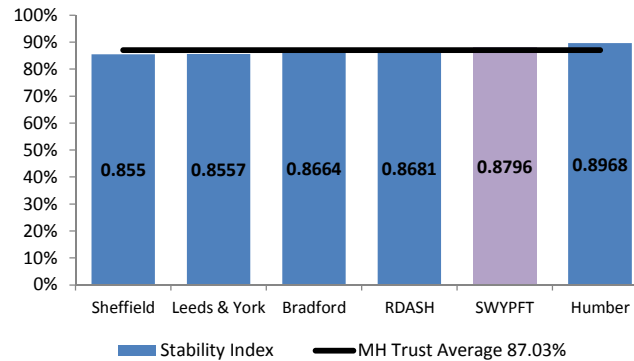
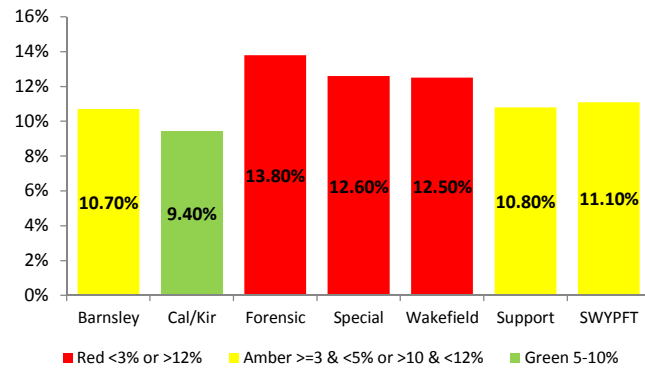
Appraisals - All Staff



The above chart shows the YTD appraisal rates for all Trust staff to the end of January 2016. The Trust's target for appraisals is 95% or above.

All areas have shown improvement each month since the inclusion of Bands 1 to 5 in the figures in September 2015.

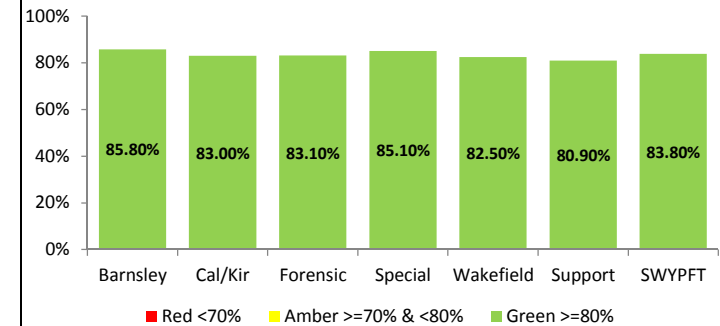
Turnover and Stability Rate Benchmark



This chart shows stability levels in MH Trusts in the region for the 12 months ending in October 2015. 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 Trusts in our region.

This chart shows the YTD turnover levels up to the end of January 2016.

Fire Lecture Attendance



The chart shows the YTD fire lecture figures to the end of January 2016. The Trust continues to achieve its 80% target for fire lecture training, with all areas having maintained their figures above target for several months.

Workforce - Performance Wall

Trust Performance Wall							
Month		Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Sickness (YTD)	<=4.4%	4.80%	4.80%	4.90%	4.90%	5.00%	5.00%
Sickness (Monthly)	<=4.4%	4.80%	4.90%	4.90%	5.30%	5.40%	5.20%
Appraisals (Band 6 and above)	>=95%	80.30%	87.30%	89.50%	91.60%	92.80%	94.50%
Appraisals (Band 5 and below)	>=95%	42.10%	66.30%	75.80%	80.10%	83.50%	89.20%
Aggression Management	>=80%	78.90%	78.90%	80.40%	80.80%	83.10%	82.50%
Equality and Diversity	>=80%	87.20%	88.30%	88.80%	89.40%	90.30%	90.60%
Fire Safety	>=80%	86.40%	85.30%	84.60%	84.80%	85.60%	83.80%
Food Safety	>=80%	71.80%	73.10%	74.30%	74.10%	75.80%	75.40%
Infection Control and Hand Hygiene	>=80%	85.30%	85.50%	85.60%	84.90%	85.80%	86.50%
Information Governance	>=95%	92.70%	92.00%	91.60%	90.60%	89.10%	82.40%
Moving and Handling	>=80%	79.30%	80.40%	82.10%	83.00%	83.80%	84.60%
Safeguarding Adults	>=80%	86.20%	86.90%	87.70%	87.30%	88.30%	88.70%
Safeguarding Children	>=80%	87.10%	87.90%	86.10%	85.50%	87.70%	88.20%
Bank Cost		£445k	£488k	£478k	£428k	£414k	£426k
Agency Cost		£566k	£637k	£772k	£770k	£606k	£527k
Overtime Cost		£26k	£38k	£30k	£37k	£22k	£31k
Additional Hours Cost		£83k	£67k	£74k	£87k	£89k	£64k
Sickness Cost (Monthly)		£474k	£481k	£475k	£546k	£535k	£532k
Vacancies (Non-Medical) (WTE)		353.84	351.54	324.2	306.46	316.89	353.49
Business Miles		340k	270k	333k	347k	323k	327k

Barnsley District							
Month		Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Sickness (YTD)	<=4.4%	4.20%	4.10%	4.10%	4.20%	4.30%	4.40%
Sickness (Monthly)	<=4.4%	4.20%	4.00%	4.20%	4.50%	5.10%	5.40%
Appraisals (Band 6 and above)	>=95%	83.60%	90.50%	92.10%	94.40%	95.60%	97.20%
Appraisals (Band 5 and below)	>=95%	51.90%	73.40%	83.30%	87.50%	89.80%	92.10%
Aggression Management	>=80%	84.30%	83.60%	83.50%	82.90%	84.10%	80.80%
Equality and Diversity	>=80%	89.20%	90.40%	90.70%	91.30%	92.60%	93.00%
Fire Safety	>=80%	86.60%	85.90%	84.70%	85.80%	86.20%	85.80%
Food Safety	>=80%	80.50%	80.70%	80.10%	75.70%	74.90%	72.70%
Infection Control and Hand Hygiene	>=80%	85.60%	86.60%	86.40%	87.00%	88.10%	87.80%
Information Governance	>=95%	91.80%	91.70%	92.10%	90.90%	90.50%	86.40%
Moving and Handling	>=80%	81.70%	82.60%	84.50%	85.10%	86.10%	86.40%
Safeguarding Adults	>=80%	87.90%	88.90%	90.00%	89.20%	89.80%	90.10%
Safeguarding Children	>=80%	88.30%	89.20%	87.90%	87.40%	89.00%	89.40%
Bank Cost		£70k	£84k	£85k	£75k	£65k	£61k
Agency Cost		£77k	£157k	£119k	£200k	£130k	£170k
Overtime Cost		£17k	£19k	£10k	£17k	£8k	£17k
Additional Hours Cost		£47k	£31k	£35k	£40k	£36k	£33k
Sickness Cost (Monthly)		£144k	£136k	£139k	£155k	£175k	£203k
Vacancies (Non-Medical) (WTE)		116	100.85	92.75	85.33	87.34	108.19
Business Miles		137k	111k	144k	148k	126k	132k

Calderdale and Kirklees District							
Month		Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Sickness (YTD)	<=4.4%	4.60%	4.70%	4.80%	5.00%	5.10%	5.10%
Sickness (Monthly)	<=4.4%	4.40%	5.20%	5.10%	6.60%	5.60%	4.90%
Appraisals (Band 6 and above)	>=95%	90.60%	97.50%	98.80%	99.70%	99.10%	99.70%
Appraisals (Band 5 and below)	>=95%	49.50%	76.50%	85.00%	88.80%	91.70%	92.50%
Aggression Management	>=80%	82.60%	83.00%	83.20%	82.80%	86.10%	87.30%
Equality and Diversity	>=80%	87.70%	89.80%	90.60%	91.60%	92.00%	93.20%
Fire Safety	>=80%	87.20%	85.40%	83.00%	83.20%	85.40%	83.00%
Food Safety	>=80%	66.80%	67.70%	69.50%	70.20%	72.00%	74.50%
Infection Control and Hand Hygiene	>=80%	87.20%	88.60%	88.60%	90.00%	90.40%	91.10%
Information Governance	>=95%	93.60%	92.80%	90.40%	89.80%	87.50%	83.30%
Moving and Handling	>=80%	77.50%	78.80%	81.30%	82.70%	83.40%	84.30%
Safeguarding Adults	>=80%	83.00%	85.20%	86.60%	86.80%	88.20%	88.90%
Safeguarding Children	>=80%	85.50%	87.20%	86.20%	86.50%	89.40%	91.00%
Bank Cost		£123k	£134k	£117k	£124k	£114k	£123k
Agency Cost		£110k	£141k	£199k	£173k	£117k	£124k
Overtime Cost		£1k	£1k	£1k	£2k	£0k	£3k
Additional Hours Cost		£4k	£2k	£2k	£3k	£3k	£2k
Sickness Cost (Monthly)		£88k	£105k	£101k	£142k	£117k	£101k
Vacancies (Non-Medical) (WTE)		82.59	82.93	71.14	75.66	72.44	69.5
Business Miles		77k	57k	65k	73k	61k	63k

Forensic Services							
Month		Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Sickness (YTD)	<=4.4%	7.60%	7.30%	7.20%	7.00%	6.80%	6.70%
Sickness (Monthly)	<=4.4%	6.60%	6.10%	6.80%	5.80%	5.70%	5.20%
Appraisals (Band 6 and above)	>=95%	65.20%	68.60%	70.00%	74.70%	84.70%	84.10%
Appraisals (Band 5 and below)	>=95%	29.30%	61.00%	66.20%	71.50%	77.60%	83.90%
Aggression Management	>=80%	78.40%	77.40%	78.20%	80.70%	81.70%	80.60%
Equality and Diversity	>=80%	90.20%	89.20%	90.40%	92.40%	92.80%	93.00%
Fire Safety	>=80%	87.20%	85.50%	87.30%	88.60%	89.00%	83.10%
Food Safety	>=80%	63.20%	65.40%	70.60%	73.50%	79.70%	79.60%
Infection Control and Hand Hygiene	>=80%	87.80%	85.80%	85.30%	84.40%	85.40%	87.00%
Information Governance	>=95%	92.70%	90.70%	91.70%	91.90%	90.80%	80.60%
Moving and Handling	>=80%	83.90%	84.00%	85.80%	87.60%	87.90%	88.80%
Safeguarding Adults	>=80%	88.40%	85.50%	88.50%	89.90%	91.50%	91.90%
Safeguarding Children	>=80%	85.70%	84.50%	85.30%	85.90%	87.70%	85.20%
Bank Cost		£99k	£114k	£114k	£97k	£86k	£108k
Agency Cost		£77k	£96k	£122k	£68k	£68k	£92k
Overtime Cost		£0k	£0k	£0k	£2k	£0k	£-1k
Additional Hours Cost		£0k	£0k	£0k	£0k	£0k	£0k
Sickness Cost (Monthly)		£58k	£57k	£58k	£56k	£50k	£44k
Vacancies (Non-Medical) (WTE)		28.42	14.34	24.94	24.54	37.11	45.11
Business Miles		6k	3k	9k	9k	12k	7k

Workforce - Performance Wall cont...

Specialist Services

Month		Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Sickness (YTD)	<=4.4%	5.20%	5.10%	5.10%	5.00%	4.80%	4.80%
Sickness (Monthly)	<=4.4%	4.50%	5.00%	4.70%	4.60%	3.80%	4.80%
Appraisals (Band 6 and above)	>=95%	45.40%	60.50%	68.70%	73.80%	75.10%	77.90%
Appraisals (Band 5 and below)	>=95%	21.50%	44.00%	47.50%	53.60%	64.80%	71.30%
Aggression Management	>=80%	73.80%	73.40%	76.40%	77.10%	79.80%	81.20%
Equality and Diversity	>=80%	89.60%	89.60%	89.90%	90.00%	90.50%	90.10%
Fire Safety	>=80%	85.90%	82.20%	83.20%	82.10%	84.60%	85.10%
Food Safety	>=80%	72.20%	69.10%	69.00%	71.20%	73.70%	73.20%
Infection Control and Hand Hygiene	>=80%	83.30%	83.80%	84.00%	84.30%	85.90%	86.30%
Information Governance	>=95%	90.80%	89.10%	90.10%	90.20%	89.50%	85.20%
Moving and Handling	>=80%	79.70%	82.20%	82.50%	83.10%	83.10%	84.80%
Safeguarding Adults	>=80%	83.20%	84.70%	83.20%	82.00%	84.40%	84.80%
Safeguarding Children	>=80%	82.90%	85.40%	84.90%	81.30%	85.60%	87.70%
Bank Cost		£33k	£38k	£31k	£28k	£32k	£25k
Agency Cost		£208k	£127k	£228k	£216k	£146k	£59k
Overtime Cost		£2k	£2k	£1k	£1k	£1k	£2k
Additional Hours Cost		£5k	£7k	£5k	£7k	£11k	£4k
Sickness Cost (Monthly)		£50k	£54k	£53k	£55k	£45k	£47k
Vacancies (Non-Medical) (WTE)		44.93	50.41	45.31	44.49	40.71	39.15
Business Miles		30k	29k	30k	39k	40k	36k

Support Services

Month		Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Sickness (YTD)	<=4.4%	4.60%	4.70%	4.70%	4.80%	5.00%	5.00%
Sickness (Monthly)	<=4.4%	5.40%	5.30%	4.80%	5.40%	6.10%	5.50%
Appraisals (Band 6 and above)	>=95%	91.80%	94.80%	95.90%	96.50%	96.90%	98.50%
Appraisals (Band 5 and below)	>=95%	26.60%	54.80%	71.10%	72.70%	74.80%	89.70%
Aggression Management	>=80%	65.10%	68.60%	72.40%	74.30%	78.60%	78.50%
Equality and Diversity	>=80%	76.20%	78.10%	78.70%	78.90%	80.40%	80.90%
Fire Safety	>=80%	85.30%	86.00%	84.60%	84.30%	83.50%	80.90%
Food Safety	>=80%	95.50%	93.60%	90.10%	89.20%	89.90%	87.30%
Infection Control and Hand Hygiene	>=80%	80.90%	81.20%	82.30%	76.80%	78.30%	79.20%
Information Governance	>=95%	94.60%	92.80%	91.70%	89.60%	86.60%	71.30%
Moving and Handling	>=80%	77.70%	78.80%	81.10%	81.50%	81.90%	82.70%
Safeguarding Adults	>=80%	84.70%	84.80%	84.90%	84.50%	85.40%	85.90%
Safeguarding Children	>=80%	89.80%	90.30%	83.70%	82.80%	84.80%	85.50%
Bank Cost		£36k	£35k	£60k	£14k	£39k	£38k
Agency Cost		£27k	£103k	£71k	£40k	£74k	£33k
Overtime Cost		£18k	£19k	£22k	£19k	£20k	£17k
Additional Hours Cost							
Sickness Cost (Monthly)		£75k	£69k	£61k	£68k	£85k	£82k
Vacancies (Non-Medical) (WTE)		36.53	42.54	51.48	36.73	37.2	43.98
Business Miles		47k	38k	42k	35k	48k	45k

Wakefield District

Month		Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Sickness (YTD)	<=4.4%	5.20%	5.30%	5.30%	5.40%	5.50%	5.40%
Sickness (Monthly)	<=4.4%	5.30%	5.70%	5.60%	5.90%	5.80%	4.80%
Appraisals (Band 6 and above)	>=95%	83.20%	87.40%	88.10%	90.20%	91.80%	95.10%
Appraisals (Band 5 and below)	>=95%	50.00%	64.30%	68.40%	76.70%	81.30%	87.00%
Aggression Management	>=80%	81.30%	79.30%	82.90%	82.80%	84.20%	82.10%
Equality and Diversity	>=80%	91.70%	91.70%	92.20%	92.20%	92.60%	91.50%
Fire Safety	>=80%	86.20%	84.60%	86.10%	84.70%	85.20%	82.50%
Food Safety	>=80%	61.70%	67.60%	68.60%	69.70%	69.50%	68.80%
Infection Control and Hand Hygiene	>=80%	86.50%	84.10%	83.80%	81.80%	82.00%	85.30%
Information Governance	>=95%	92.90%	93.30%	92.60%	91.50%	89.00%	84.40%
Moving and Handling	>=80%	73.50%	73.60%	74.00%	75.70%	77.60%	78.30%
Safeguarding Adults	>=80%	88.80%	89.70%	89.70%	88.90%	89.00%	88.20%
Safeguarding Children	>=80%	86.60%	86.40%	85.60%	85.30%	86.30%	86.40%
Bank Cost		£85k	£83k	£71k	£90k	£78k	£72k
Agency Cost		£67k	£12k	£34k	£73k	£71k	£49k
Overtime Cost		£5k	£16k	£14k	£14k	£12k	£10k
Additional Hours Cost		£8k	£9k	£9k	£13k	£12k	£7k
Sickness Cost (Monthly)		£57k	£60k	£63k	£70k	£64k	£55k
Vacancies (Non-Medical) (WTE)		43.37	55.47	36.58	34.71	40.49	45.96
Business Miles		42k	31k	43k	44k	37k	44k

Publication Summary

Public Health England (PHE)

Best start in life and beyond: improving public health outcomes for children, young people and families - guidance to support the commissioning of the Healthy Child Programme 0-19: health visiting and school nursing services

This guidance is for local authorities involved with commissioning public health services for children and young people and in particular delivering the Healthy Child Programme 0-5 and 5-19. The Healthy Child Programme aims to bring together health, education and other main partners to deliver an effective programme for prevention and support.

[Click here for guidance](#)

Monitor

Requirements for content and assurance for quality reports 2015/16

This consultation invites feedback on proposed requirements for content and assurance for foundation trusts' quality reports 2015/16. The consultation outlines proposals for indicators to be subject to assurance in our detailed guidance for external assurance on quality reports; to clarify guidance on how auditors should report a modified conclusion on their limited assurance work; and an invitation for feedback on who should provide the external assurance on quality reports.

[Click here for consultation](#)

National Institute for Health and Care Excellence (NICE)

NICE indicators programme: consultation on potential new indicators

This consultation seeks feedback on potential new indicators for inclusion in the NICE indicator menu. The proposed new indicators aim to improve the quality of care for a variety of conditions, including: waiting times for antenatal care; improved diagnosis of atrial fibrillation; targets for diabetes services; health assessments and prevention of emergency admissions for people with learning disabilities and autism. This consultation closes on 29th February 2016.

[Click here for consultation](#)

Department of Health (DH)

Reference costs guidance 2015-16

This document sets out requirements for the collection of 2015 to 2016 reference costs from NHS trusts and NHS foundation trusts between 20 June and 29 July 2016. It follows feedback from the NHS on draft collection guidance.

[Click here for guidance](#)

Glossary

ADHD	Attention deficit hyperactivity disorder	LD	Learning Disability
AQP	Any Qualified Provider	Mgt	Management
ASD	Autism spectrum disorder	MAV	Management of Aggression and Violence
AWA	Adults of Working Age	MBC	Metropolitan Borough Council
AWOL	Absent Without Leave	MH	Mental Health
B/C/K/W	Barnsley, Calderdale, Kirklees, Wakefield	MHCT	Mental Health Clustering Tool
BDU	Business Delivery Unit	MRSA	Methicillin-resistant Staphylococcus aureus
C&K	Calderdale & Kirklees	MSK	Musculoskeletal
C. Diff	Clostridium difficile	MT	Mandatory Training
CAMHS	Child and Adolescent Mental Health Services	NCI	National Confidential Inquiries
CAPA	Choice and Partnership Approach	NHS TDA	National Health Service Trust Development Authority
CCG	Clinical Commissioning Group	NHSE	National Health Service England
CGCSC	Clinical Governance Clinical Safety Committee	NICE	National Institute for Clinical Excellence
CIP	Cost Improvement Programme	NK	North Kirklees
CPA	Care Programme Approach	OOA	Out of Area
CPPP	Care Packages and Pathways Project	OPS	Older People's Services
CQC	Care Quality Commission	PbR	Payment by Results
CQUIN	Commissioning for Quality and Innovation	PCT	Primary Care Trust
CROM	Clinician Rated Outcome Measure	PICU	Psychiatric Intensive Care Unit
CRS	Crisis Resolution Service	PREM	Patient Reported Experience Measures
CTLD	Community Team Learning Disability	PROM	Patient Reported Outcome Measures
DoV	Deed of Variation	PSA	Public Service Agreement
DQ	Data Quality	PTS	Post Traumatic Stress
DTOC	Delayed Transfers of Care	QIA	Quality Impact Assessment
EIA	Equality Impact Assessment	QIPP	Quality, Innovation, Productivity and Prevention
EIP/EIS	Early Intervention in Psychosis Service	QTD	Quarter to Date
EMT	Executive Management Team	RAG	Red, Amber, Green
FOI	Freedom of Information	riO	Trusts Mental Health Clinical Information System
FT	Foundation Trust	Sis	Serious Incidents
HONOS	Health of the Nation Outcome Scales	SK	South Kirklees
HSCIC	Health and Social Care Information Centre	SMU	Substance Misuse Unit
HV	Health Visiting	SU	Service Users
IAPT	Improving Access to Psychological Therapies	SWYFT	South West Yorkshire Foundation Trust
IG	Information Governance	SYBAT	South Yorkshire and Bassetlaw local area team
IHBT	Intensive Home Based Treatment	TBD	To Be Decided/Determined
IM&T	Information Management & Technology	WTE	Whole Time Equivalent
Inf Prevent	Infection Prevention	Y&H	Yorkshire & Humber
IWMS	Integrated Weight Management Service	YTD	Year to Date
KPIs	Key Performance Indicators		