



With all of us in mind

Quality Performance Report

Strategic Overview

July 2015

Table of Contents

	Page No
Introduction	4
Strategic Overview Dashboard	5
Finance - Overall Financial Position	6
Contracts - Trust-BDU	7
MH Currency Development	8
Workforce	9-11
Publication Summary	12-13
Glossary	14

Introduction

Dear Board Member/Reader

Welcome to the Trust's Integrated Performance Report: Strategic Overview for July 2015 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	Feb-16	Mar-16	Q1	Q2	Q3	Q4	National Average	Year End Forecast Position	
2	Monitor Compliance	Monitor Governance Risk Rating (FT)	M	Green	Green	Green	Green										Green					4	
3		Monitor Finance Risk Rating (FT)	M	4	4	4	4											4					4
4	CQC	CQC Quality Regulations (compliance breach)	CQC	Green	Green	Green	Green										Green						4
5	CQUIN	CQUIN Barnsley	C	Green	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						3
7		CQUIN Kirklees	C	Green	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						3
9		CQUIN Forensic	C	Green	Amber/G	Amber/G	Amber/G	Amber/G									Amber/G						3
10	Infection Prevention	Infection Prevention (MRSA & C.Diff) All Cases	C	6	0	0	0	2									Data Not Avail						4
11	C-Diff	C Diff avoidable cases	C	0	0	0	0	2									Data Not Avail						4

Customer Focus

12	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Q1	Q2	Q3	Q4	National Average	Year End Forecast Position	
13	Complaints	% Complaints with Staff Attitude as an Issue	L	< 25%	12% 8/66	14% 6/44	13% 9/69	12% 9/73									14% 23/179						4
14	Service User Experience	Friends and Family Test	L	TBC																			
15	MAV	Physical Violence - Against Patient by Patient	L	14-20	Above ER	Above ER	Above ER										Data Not Avail						4
16		Physical Violence - Against Staff by Patient	L	50-64	Above ER	Above ER	Above ER										Data Not Avail						4
17	FOJ	% 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% 65/65						4
18	Media	% of Positive Media Coverage Relating to the Trust and its Services	L	60%	92.00%	92.00%	92.00%										92.00%						4
19	Befriending services	% of Service Users Allocated a Befriender Within 16 Weeks	L	70%	50.00%	50.00%	50.00%										50.00%						4
20		% of Service Users Requesting a Befriender Assessed Within 20 Working Days	L	80%	100%	100%	100%										100%						4
21		% of Potential Volunteer Befriender Applications Processed in 20 Working Days	L	90%	100%	100%	100%										100%						4

Operational Effectiveness: Process Effectiveness

22	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Q1	Q2	Q3	Q4	National Average	Year End Forecast Position		
23	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%									99.70%						4	
24		Max time of 18 weeks from point of referral to treatment - incomplete pathway	M	92%	98.06%	97%	99.82%	100%										98.35%						4
25		Delayed Transfers Of Care	M	7.50%	2.50%	1.52%	2.03%	1.96%										2.01%						4
26		% Admissions Gatekept by CRS Teams	M	95%	93.28%	96.30%	97.20%	100%										95.51%						4
27		% SU on CPA Followed up Within 7 Days of Discharge	M	95%	98.21%	100%	97.86%	97.7%										98.66%						4
28		% SU on CPA Having Formal Review Within 12 Months	M	95%	96.37%	95%	97.92%	96%										97.92%						4
29		Meeting commitment to serve new psychosis cases by early intervention teams QTD	M	95%	108.97%	102%	104.60%											104.60%						4
30		Data completeness: comm services - Referral to treatment information	M	50%	100%	100%	100%	100%										100%						4
31		Data completeness: comm services - Referral information	M	50%	94.00%	94%	96.80%	97%										96.80%						4
32		Data completeness: comm services - Treatment activity information	M	50%	94.00%	94%	96.80%	97%										96.80%						4
33		Data completeness: Identifiers (mental health)	M	97%	99.70%	100%	99.62%	100%										99.62%						4
34		Data completeness: Outcomes for patients on CPA	M	50%	78.83%	79%	77.63%											77.63%						4
35		Compliance with access to health care for people with a learning disability	M	Compliant	Compliant	Compliant	Compliant											Compliant						Compliant
36		IAPT - Treatment within 6 Weeks of referral	M	75%																				
37		IAPT - Treatment within 18 weeks of referral	M	95%																				
38	Early Intervention in Psychosis - 2 weeks (NICE approved care package)	M	50%																					
39	Data Quality	% Valid NHS Number	C (FP)	99%	99.87%	100%	99.88%										Data not avail						4	
40		% Valid Ethnic Coding	C (FP)	90%	99.05%	95%	94.86%											Data not avail						4

Fit for the future Workplace

41	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Q1	Q2	Q3	Q4	National Average	Year End Forecast Position		
42	Sickness	Sickness Absence Rate (YTD)	L	4.4%	4.80%	5.10%	5.00%	4.90%									5.00%						1	
43	Vacancy	Vacancy Rate	L	10%																			4	
44	Appraisal	Appraisal Rate Band 6 and above	L	95%	Avail M3	Avail M3	56.80%	72.90%									56.80%						4	
45		Appraisal Rate Band 5 and below	L	95%	Avail M6	Avail M6	Avail M6	Avail M6										Avail M6						4
46	Mandatory Training	Aggression Management	L	80%	73.70%	73.65%	75.83%	77.04%									75.83%						1	
47		Equality, Diversity & Inclusion	L	80%	82.30%	84.55%	84.87%	85.76%										84.87%						4
48		Fire Safety	L	80%	86.50%	86.24%	86.31%	86.55%										86.31%						4
49		Infection, Prevention & Control & Hand Hygiene	L	80%	80.60%	82.09%	82.82%	83.69%										82.82%						4
50		Information Governance	L	95%	91.90%	92.55%	92.67%	92.76%										92.67%						4
51		Safeguarding Adults	L	80%	82.80%	82.60%	84.14%	84.95%										84.14%						4
52		Safeguarding Children	L	80%	84.70%	85.22%	86.00%	86.39%										86.00%						4
53		Food Safety	L	80%	65.20%	66.89%	69.00%	70.67%										69.00%						1
54		Moving & Handling	L	80%	71.80%	73.66%	75.31%	77.40%										75.31%						1

KEY	Impact and Delivery
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
	Operational Effectiveness
	• Issues in performance associated with Data quality (DQ) indicators continue and are mostly associated with clinical record keeping, case management and the caseload allocation in teams. During 2015-16, the Trust intends to identify a small number of focus areas and prioritise their improvement. A clinical record keeping/data quality workshop is to be organised focussed on engaging the management "Trios" and agreeing priority areas and practical steps for improvement.
	Workforce
	• Sickness continues to remain above trajectory at end of July 15. Work continues to focus on reducing sickness related absence within the Trust.
	• Review of mandatory training KPIs are being undertaken by HR to focus on key staff groups and risk areas – the year end position has shown significant improvement in most mandatory training areas with all now exceeding threshold, with the exception of Aggression Management, Food Safety and Moving & Handling, this shows a positive impact of the work being undertaken within the organisation.
	• BDUs and Support services continue to review compliance with mandatory training to ensure completion. This is supported by the staff appraisal and objective setting process.

Contracting

Trust Summary by BDU - Current Contract Performance

Contract Variations

None Outstanding

CQUIN Performance

Quarter	Quarter 1 £000s	Achieved	Variance
Barnsley	£342.9	£392.3	£49.4
Wakefield	£118.1	£85.8	-£32.3
Kirklees	£133.2	£96.1	-£37.1
Calderdale	£59.8	£43.1	-£16.6
Specialised	£75.4	£75.4	£0.0
Forensics	£22.5	£22.5	£0.0
Trust Total	£751.9	£715.3	-£36.6

CQUIN Performance Year-end Forecast

Quarter	Annual £000s	Forecast Achievement	Variance
Barnsley	£1,687.4	£1,687.3	-£0.0
Wakefield	£793.9	£533.6	-£260.3
Kirklees	£878.2	£592.8	-£285.5
Calderdale	£394.1	£266.0	-£128.1
Specialised	£301.7	£263.9	-£37.8
Forensics	£562.3	£528.6	-£33.7
Trust Total	£4,617.7	£3,872.2	-£745.5

CQUIN Performance Q1 Results and Hotspots

West CCGs MH Clustering - Q1, 3 out of 4 indicators failed. Remedial work in place between BDU's, GMs and P&I

West CCGs Improving Urgent & Emergency Care, Reduction in A&E MH reattendances Scheme still tbc with Commissioners and risk share agreed

BBDU MH Clustering - Q1, 3 out of 4 indicators failed - June month data achieved target work is ongoing with Team managers & Clinicians to improve recording

Contract Performance Issues

CAMHS C&K: Service & Commissioners comfortable with inputting and extracting of KPIs. Further work being undertaken in relation to emergency contacts and subsequent partnership appointments. Future data reporting to include all residents from all CCGs split between GH and NK's and Quality & Safety Dashboard.

CAMHS: W -Majority of data being pulled via RiO now reflects service delivery. Outcomes of hub work being captured manually. Data to be included in future reporting.

LD W - Requirement to develop a suite of data and reporting by Sep 2015 that reflects our performance against the service specification.

LD C - Internally addressing reporting requirements against new specification.

To be discussed/reviewed with Commissioners in September 2015

QIPP Targets & Delivery for 2015/16

CCG	Target £000s	Planned £000s	Remainder £000s	RAG
Wakefield*	£1,790.0	£1,428.3	-£361.7	
Kirklees**	£1,000.0	£479.8	-£520.2	
Calderdale	£0.0	£0.0	£0.0	
TOTAL	£2,790.0	£1,908.1	-£881.9	

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

Proposals under the QIPP scheme -

W:- £1.79m in total. OOA Bed Mgt - above plan: OPS Reconfiguration (Savile Park) - on target: MH contract reduction - delivered: OAPs for LD & CHC (CCG held budgets)- high risk: Castle Lodge (CCG budget - prevention client OOA) - delivered: Repricing LD beds - ongoing:

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	£19.5	Quarter 1

Contract Performance Information - based on month 3

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 C & W
- 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 Kirklees
- MH Adult Crisis Resolution services in Wakefield
- MH Adult Rehabilitation services in Wakefield & Calderdale
- Diabetes nursing and MSK in Barnsley

Key areas where performance is back on target

- IAPT: Kirklees - remains above 52% target

Contract Performance Issues

Health & Wellbeing - Both Sheffield & Barnsley Stop Smoking will have to reduce costs due to the reduction in funding in the revised contracts

Forensics:- National procurement identified during 2015/16 for Medium & Low Secure MH Services. Joint Commissioner / Provider review of Outreach services & pathways to verify funding Joint Review of Service Unit Prices to inform future Commissioning and service delivery Commissioners identified Re-procurement of Forensic CAMHS Services Medium Secure bed occupancy below 90% threshold at Q1, but forecast improving

Mental Health Currency Development

The Trust has been a key member of the Care Packages and Pathway Project (CPPP) - a consortium of organisations in the Yorkshire & Humber and North East SHA areas who have been working together to develop National Currencies and Local Tariffs for Mental Health.

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, and that this assessment must be regularly reviewed in line with the timing and protocols. Clusters will form the basis of the contracting arrangements between commissioners and providers and this is due to take effect from April 2016. This will mean that for working age adults and older people that fall within the scope of the mental health currencies the activity value will be agreed based on the clusters, and a price will be agreed for each cluster review period. The cluster review period is the time between reassessments and there is some protocol behind this. The mental health clustering tool (MHCT) guidance booklet has recently been revised to update the care transition protocols.

The scope of PbR is now being extended into other areas of Mental Health such as Learning Disabilities, Forensic, IAPT and Children and Adolescent Mental Health Services.

The Trust have been successful in agreeing a CQUIN related to MH Clustering in the two main commissioning contracts and this will assist greatly in the data quality preparatory work that needs to be undertaken in advance of April 2016.

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.

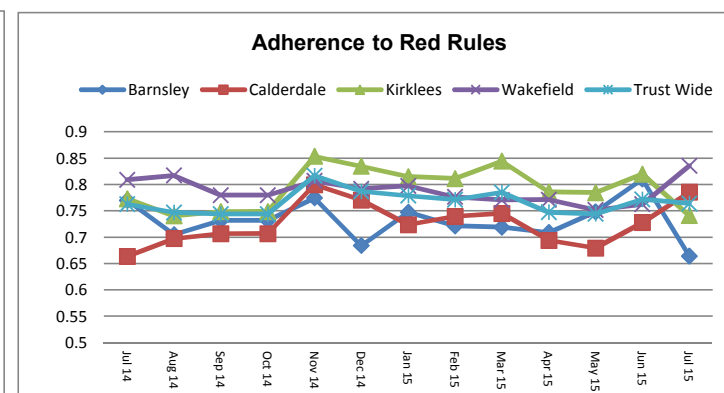
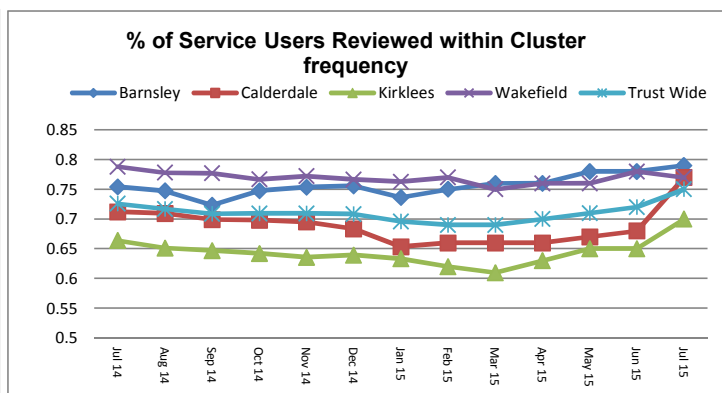
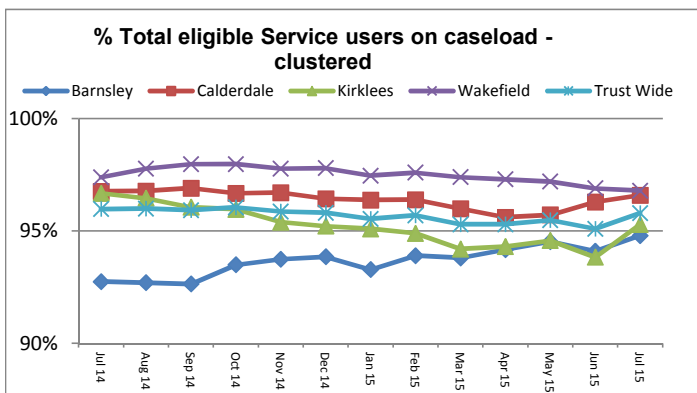
Adherence to Red Rules (assurance that the cluster is accurate, complete and of high quality)

The West contract includes the development of a PbR Dashboard and this will be an interactive reporting tool. Developments are on track and quarter 1 requirements have been met.

Across the Trust, a number of caseload reviewers have been undertaking a data quality exercise which is anticipated will have a positive impact on clustering.

As part of the Mental Health Transformation work stream, the clusters and care packages are being used to feed into demand and capacity modelling.

MH Currency Indicators - July 2015



IAPT & Forensic Secure Services and Clustering

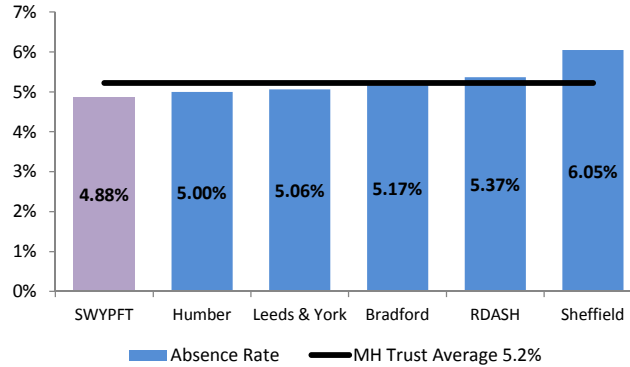
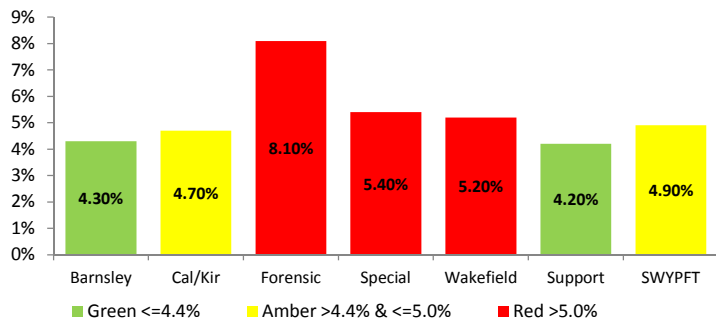
The final Reference Cost Guidance for 2014/15 removed the requirement included in the draft guidance for IAPT and Forensics to reported by cluster. However, all IAPT clients entering treatment from 1st April 2015 must be clustered. The new Forensic Mental Health Clustering tool (MHCT) has been added to RiO with effect from March 15 to enable more robust reporting to be made for inclusion into the Forensic PbR Pilot submission. The datasets have the facility to flow the data from April 15 and internal monitoring of the completeness of this data will take place during 15/16. From quarter 2, the monitoring of clustering for these services will be included in the relevant BDU dashboards.

Learning Disabilities

The implementation of Clustering for Learning Disabilities service users, in relation to the CP&PP LD pilot, has been slower than anticipated, focus will be placed within the service to ensure this data begins to flow.

Human Resources Performance Dashboard - July 2015

Sickness Absence



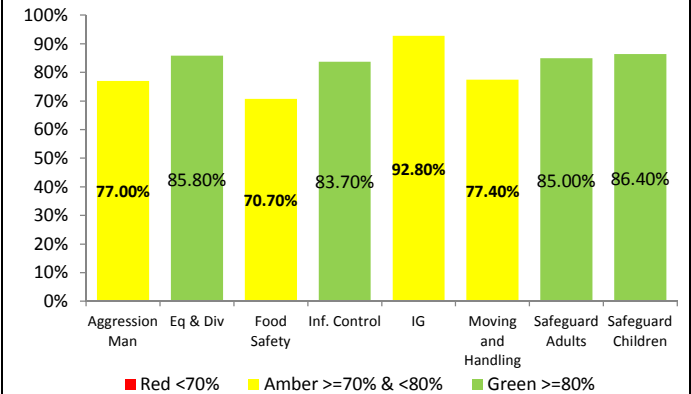
Current Absence Position - June 2015

	Barn	Cal/Kir	Fore	Spec	Wake	Supp	SWYPFT
Rate	4.1%	4.8%	7.5%	4.9%	4.8%	4.3%	4.7%
Trend	↓	↓	↑	↑	↓	↓	↓

The Trust YTD absence levels in June 2015 (chart above) were above the 4% target at 4.9%

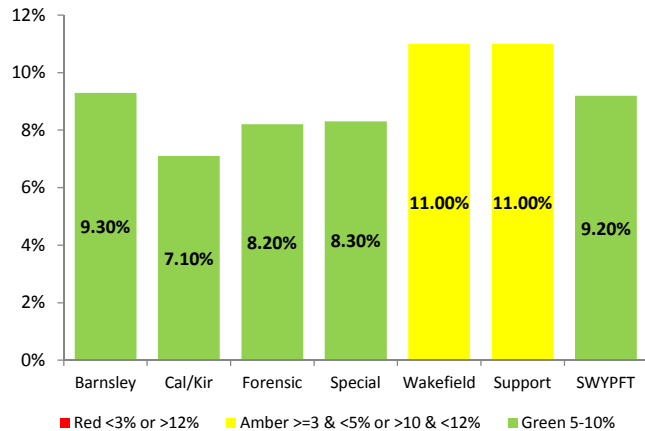
The above chart shows absence levels in MH/LD Trusts in our region to the end 2014/15. During this time the Trust's absence rate was 4.88% which is below the regional average of 5.2%.

Mandatory Training



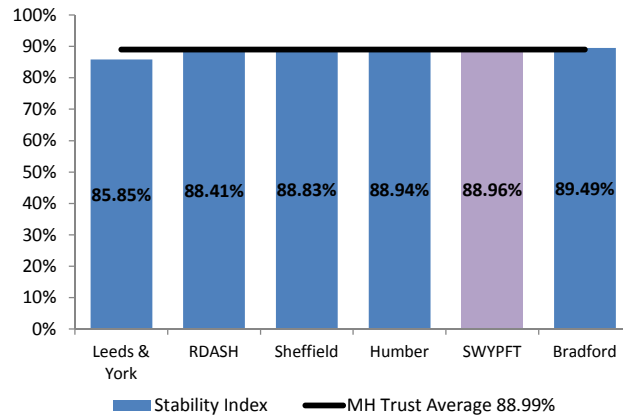
The above chart shows the mandatory training rates for the Trust. Apart from Information Governance (IG), mandatory training has a target of above 80%; IG has a target of above 95%; all are based on a rolling year. All training rates have shown a continuous improvement over the last months.

Turnover and Stability Rate Benchmark



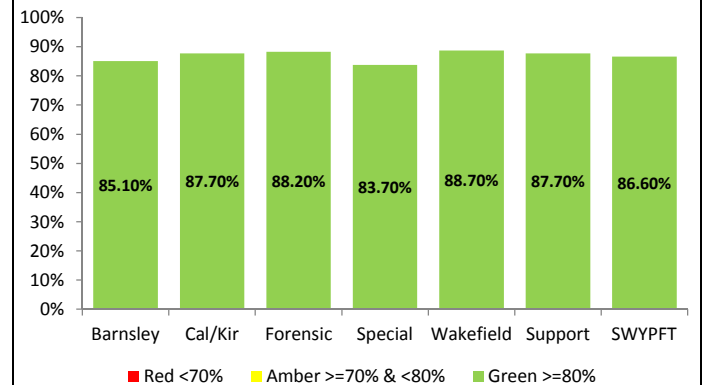
This chart shows Turnover levels up to the end of July 2015.

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



This chart shows stability levels in MH Trusts in the region for the 12 months ending in May 2015. The stability rate shows the percentage of staff employed with over a year's service. The Trust's rate is at the average compared with other MH/LD Trusts in our region.

Fire Lecture Attendance



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		Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15
Sickness (YTD)	<=4.4%	4.80%	4.80%	4.80%	5.10%	5.00%	4.90%
Sickness (Monthly)	<=4.4%	5.40%	5.00%	5.30%	5.10%	4.80%	4.70%
Appraisals (Band 6 and above)	>=95%	96.50%	96.50%	4.00%	13.10%	56.70%	73.30%
Appraisals (Band 5 and below)	>=95%	97.00%	97.10%	2.70%	5.40%	16.90%	28.00%
Aggression Management	>=80%	70.90%	72.90%	73.70%	73.70%	75.80%	77.00%
Equality and Diversity	>=80%	78.90%	81.40%	82.30%	84.50%	84.90%	85.80%
Fire Safety	>=80%	85.00%	86.30%	86.50%	86.20%	86.30%	86.60%
Food Safety	>=80%	62.40%	63.70%	65.20%	66.90%	69.00%	70.70%
Infection Control and Hand Hygiene	>=80%	78.70%	80.90%	80.60%	82.10%	82.80%	83.70%
Information Governance	>=95%	86.10%	96.00%	91.90%	92.60%	92.70%	92.80%
Moving and Handling	>=80%	67.40%	70.10%	71.80%	73.70%	75.30%	77.40%
Safeguarding Adults	>=80%	81.00%	82.20%	82.80%	82.60%	84.10%	84.90%
Safeguarding Children	>=80%	83.40%	84.40%	84.70%	85.20%	86.00%	86.40%
Bank Cost		£363k	£502k	£412k	£360k	£398k	£473k
Agency Cost		£383k	£517k	£296k	£720k	£608k	£694k
Overtime Cost		£14k	£11k	£12k	£13k	£16k	£8k
Additional Hours Cost		£89k	£93k	£104k	£76k	£90k	£89k
Sickness Cost (Monthly)		£581k	£481k	£567k	£524k	£510k	£471k
Vacancies (Non-Medical) (WTE)		408.27	404.26	308.42	343.02	328.68	351.53
Business Miles		314k	310k	295k	304k	305k	313k

Barnsley District							
Month		Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15
Sickness (YTD)	<=4.4%	4.40%	4.40%	4.50%	4.50%	4.40%	4.30%
Sickness (Monthly)	<=4.4%	4.90%	5.00%	5.30%	4.50%	4.20%	4.10%
Appraisals (Band 6 and above)	>=95%	96.90%	96.70%	4.70%	18.10%	58.90%	78.00%
Appraisals (Band 5 and below)	>=95%	96.50%	96.80%	3.10%	5.80%	18.80%	32.10%
Aggression Management	>=80%	82.70%	83.70%	85.30%	79.90%	81.80%	82.00%
Equality and Diversity	>=80%	82.60%	83.80%	84.60%	86.90%	86.70%	87.60%
Fire Safety	>=80%	83.60%	83.70%	82.60%	83.60%	84.20%	85.10%
Food Safety	>=80%	69.90%	70.40%	74.40%	76.30%	77.80%	81.10%
Infection Control and Hand Hygiene	>=80%	81.30%	83.20%	82.40%	83.90%	83.70%	84.40%
Information Governance	>=95%	84.80%	93.20%	90.10%	90.20%	90.40%	91.50%
Moving and Handling	>=80%	70.80%	72.10%	73.40%	76.00%	77.70%	80.00%
Safeguarding Adults	>=80%	84.00%	85.40%	85.20%	86.10%	86.80%	87.30%
Safeguarding Children	>=80%	84.10%	84.50%	84.70%	85.10%	86.10%	86.70%
Bank Cost		£54k	£64k	£57k	£67k	£71k	£67k
Agency Cost		£109k	£181k	£46k	£259k	£214k	£151k
Overtime Cost		£5k	£6k	£9k	£10k	£10k	£3k
Additional Hours Cost		£46k	£48k	£56k	£43k	£43k	£40k
Sickness Cost (Monthly)		£181k	£158k	£201k	£179k	£170k	£143k
Vacancies (Non-Medical) (WTE)		119.54	122.38	110.55	120.43	105.51	111.96
Business Miles		138k	129k	135k	134k	128k	139k

Calderdale and Kirklees District							
Month		Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15
Sickness (YTD)	<=4.4%	4.50%	4.50%	4.60%	4.80%	4.60%	4.70%
Sickness (Monthly)	<=4.4%	4.90%	4.80%	5.40%	4.80%	4.30%	4.80%
Appraisals (Band 6 and above)	>=95%	100.00%	100.00%	2.40%	4.70%	65.50%	79.40%
Appraisals (Band 5 and below)	>=95%	98.70%	98.40%	5.10%	7.30%	22.70%	33.90%
Aggression Management	>=80%	67.80%	71.10%	75.40%	77.90%	79.50%	81.10%
Equality and Diversity	>=80%	80.40%	82.50%	83.10%	85.00%	85.90%	86.60%
Fire Safety	>=80%	88.00%	90.40%	90.00%	86.90%	88.60%	87.70%
Food Safety	>=80%	52.80%	54.50%	58.70%	59.50%	64.90%	65.90%
Infection Control and Hand Hygiene	>=80%	78.40%	80.60%	81.20%	82.90%	84.30%	85.70%
Information Governance	>=95%	92.30%	98.70%	92.60%	94.80%	94.60%	93.70%
Moving and Handling	>=80%	66.00%	67.40%	68.80%	70.40%	72.20%	75.40%
Safeguarding Adults	>=80%	80.20%	81.00%	81.20%	79.70%	80.90%	81.40%
Safeguarding Children	>=80%	81.70%	82.00%	83.10%	84.60%	85.30%	86.00%
Bank Cost		£105k	£120k	£117k	£108k	£104k	£131k
Agency Cost		£40k	£83k	£59k	£157k	£57k	£167k
Overtime Cost		£6k	£3k	£1k	£0k	£3k	£2k
Additional Hours Cost		£4k	£3k	£3k	£2k	£5k	£7k
Sickness Cost (Monthly)		£105k	£99k	£113k	£101k	£91k	£97k
Vacancies (Non-Medical) (WTE)		89.55	89.24	75.76	79.76	83.33	77.32
Business Miles		61k	63k	58k	66k	61k	64k

Forensic Services							
Month		Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15
Sickness (YTD)	<=4.4%	7.30%	7.40%	7.40%	8.40%	8.40%	8.10%
Sickness (Monthly)	<=4.4%	8.40%	7.50%	7.70%	8.40%	8.30%	7.50%
Appraisals (Band 6 and above)	>=95%	98.10%	98.10%	3.10%	6.00%	43.10%	58.70%
Appraisals (Band 5 and below)	>=95%	94.10%	93.90%	1.00%	2.30%	6.80%	14.00%
Aggression Management	>=80%	74.70%	76.40%	77.60%	76.30%	77.00%	78.80%
Equality and Diversity	>=80%	84.00%	85.80%	87.70%	88.70%	89.30%	89.70%
Fire Safety	>=80%	88.50%	89.60%	91.80%	90.30%	88.00%	88.20%
Food Safety	>=80%	50.00%	51.00%	52.90%	55.80%	57.60%	59.50%
Infection Control and Hand Hygiene	>=80%	80.40%	83.20%	83.50%	84.20%	84.90%	86.00%
Information Governance	>=95%	95.70%	98.40%	94.10%	94.40%	93.40%	94.10%
Moving and Handling	>=80%	74.30%	76.60%	78.20%	79.20%	80.20%	81.50%
Safeguarding Adults	>=80%	83.90%	85.60%	86.40%	86.90%	87.00%	87.40%
Safeguarding Children	>=80%	79.40%	81.50%	83.10%	84.60%	85.00%	85.10%
Bank Cost		£83k	£137k	£93k	£61k	£82k	£95k
Agency Cost		£96k	£56k	£58k	£116k	£91k	£93k
Additional Hours Cost		£0k	£3k	£0k	£1k	£3k	£0k
Sickness Cost (Monthly)		£76k	£63k	£70k	£74k	£76k	£65k
Vacancies (Non-Medical) (WTE)		41.9	39.5	16.26	16.94	16.7	20.56
Business Miles		4k	7k	3k	4k	4k	3k

Workforce - Performance Wall cont...

Specialist Services							
Month		Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15
Sickness (YTD)	<=4.4%	5.70%	5.70%	5.70%	5.70%	5.60%	5.30%
Sickness (Monthly)	<=4.4%	6.90%	6.00%	5.30%	5.70%	5.40%	4.90%
Appraisals (Band 6 and above)	>=95%	84.90%	84.70%	4.80%	12.70%	33.50%	39.80%
Appraisals (Band 5 and below)	>=95%	89.00%	88.80%	1.40%	3.90%	9.40%	13.10%
Aggression Management	>=80%	71.60%	74.30%	67.50%	69.30%	70.60%	70.30%
Equality and Diversity	>=80%	75.30%	82.50%	83.70%	86.70%	87.30%	88.20%
Fire Safety	>=80%	78.40%	84.00%	86.20%	86.00%	85.10%	83.70%
Food Safety	>=80%	79.30%	83.90%	70.20%	72.20%	72.70%	72.20%
Infection Control and Hand Hygiene	>=80%	72.70%	77.60%	78.60%	79.50%	81.10%	81.60%
Information Governance	>=95%	75.40%	94.80%	88.40%	89.20%	91.10%	90.10%
Moving and Handling	>=80%	60.90%	66.30%	69.60%	72.50%	74.80%	76.70%
Safeguarding Adults	>=80%	72.10%	75.10%	77.50%	78.10%	80.40%	81.50%
Safeguarding Children	>=80%	78.80%	83.40%	82.20%	81.80%	84.30%	82.70%
Bank Cost		£25k	£34k	£24k	£31k	£33k	£44k
Agency Cost		£69k	£152k	£92k	£145k	£195k	£195k
Overtime Cost		£2k	£2k	£2k	£2k	£2k	£2k
Additional Hours Cost		£7k	£6k	£9k	£7k	£7k	£11k
Sickness Cost (Monthly)		£84k	£62k	£58k	£58k	£56k	£51k
Vacancies (Non-Medical) (WTE)		36.48	33.44	42.31	52.51	52.47	52.66
Business Miles		31k	31k	29k	29k	38k	32k

Support Services							
Month		Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15
Sickness (YTD)	<=4.4%	4.20%	4.20%	4.10%	3.90%	4.10%	4.20%
Sickness (Monthly)	<=4.4%	5.00%	3.60%	3.80%	3.90%	4.30%	4.30%
Appraisals (Band 6 and above)	>=95%	99.50%	99.50%	1.50%	9.50%	66.80%	86.20%
Appraisals (Band 5 and below)	>=95%	99.60%	99.60%	1.90%	4.00%	11.90%	20.70%
Aggression Management	>=80%	49.60%	49.20%	49.20%	51.00%	57.10%	60.10%
Equality and Diversity	>=80%	65.90%	68.60%	69.20%	72.40%	73.20%	74.60%
Fire Safety	>=80%	84.90%	88.30%	88.90%	88.00%	87.50%	87.70%
Food Safety	>=80%	96.20%	97.10%	87.70%	89.30%	90.20%	95.50%
Infection Control and Hand Hygiene	>=80%	74.90%	76.00%	76.50%	78.60%	78.90%	79.90%
Information Governance	>=95%	82.20%	97.10%	93.60%	94.80%	94.80%	94.90%
Moving and Handling	>=80%	65.00%	70.80%	72.10%	72.80%	74.90%	76.70%
Safeguarding Adults	>=80%	78.60%	81.70%	81.70%	79.70%	81.60%	83.60%
Safeguarding Children	>=80%	87.00%	88.20%	88.00%	87.60%	87.80%	88.70%
Bank Cost		£31k	£47k	£42k	£25k	£38k	£40k
Agency Cost		£23k	£23k	£16k	£25k	£27k	£16k
Additional Hours Cost		£19k	£20k	£21k	£17k	£23k	£21k
Sickness Cost (Monthly)		£80k	£47k	£59k	£58k	£64k	£60k
Vacancies (Non-Medical) (WTE)		47.33	49.43	21.26	26.51	24.8	36.6
Business Miles		42k	45k	38k	32k	34k	36k

Wakefield District							
Month		Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15
Sickness (YTD)	<=4.4%	4.50%	4.50%	4.60%	5.50%	5.30%	5.20%
Sickness (Monthly)	<=4.4%	4.80%	4.80%	5.60%	5.50%	5.20%	4.80%
Appraisals (Band 6 and above)	>=95%	97.70%	97.70%	6.80%	19.20%	54.80%	78.30%
Appraisals (Band 5 and below)	>=95%	98.10%	98.10%	1.10%	7.60%	25.60%	41.40%
Aggression Management	>=80%	75.60%	78.80%	77.80%	77.70%	80.40%	81.00%
Equality and Diversity	>=80%	83.20%	87.00%	87.90%	89.40%	89.50%	89.80%
Fire Safety	>=80%	87.40%	83.70%	85.20%	88.20%	87.10%	88.70%
Food Safety	>=80%	58.70%	59.50%	61.50%	62.60%	62.40%	60.30%
Infection Control and Hand Hygiene	>=80%	80.50%	82.30%	79.40%	80.70%	83.20%	83.30%
Information Governance	>=95%	87.20%	98.00%	95.40%	94.00%	94.20%	93.00%
Moving and Handling	>=80%	62.80%	65.80%	68.60%	69.60%	70.60%	71.10%
Safeguarding Adults	>=80%	81.60%	77.60%	80.50%	81.00%	85.70%	86.70%
Safeguarding Children	>=80%	85.10%	85.30%	85.90%	86.50%	86.10%	86.50%
Bank Cost		£65k	£100k	£79k	£69k	£69k	£97k
Agency Cost		£46k	£20k	£24k	£18k	£24k	£71k
Additional Hours Cost		£12k	£12k	£15k	£6k	£9k	£9k
Sickness Cost (Monthly)		£56k	£52k	£66k	£59k	£61k	£55k
Vacancies (Non-Medical) (WTE)		34.65	33.16	43.08	48.87	47.87	50.63
Business Miles		37k	34k	32k	39k	40k	40k

Publication Summary

Department of Health (DH)

Seven-day NHS services: a factsheet

This factsheet outlines the actions proposed by the government in order to develop seven-day services in the NHS.

[Click here for link](#)

Department of Health (DH)

NHS Constitution for England

The NHS Constitution and handbook to the NHS Constitution have been updated to reflect current policy and legislation and to make the constitution a more practical document. In his inquiry into the failings at Mid-Staffordshire, Sir Robert Francis QC recommended amendments to the NHS Constitution based on: prioritising patients; protecting patients from avoidable harm; providing assistance that patients need; and staff compliance with guidance. Each of these recommendations has been fully accepted and implemented within the new NHS Constitution.

[Click here for link](#)

Monitor

Mental healthcare: a capitated approach to payment with outcomes and risk share components

This document is intended for all organisations involved in commissioning or delivering new care models. It is aimed at providers and commissioners who are interested in more information on outcomes-based payment models and how they could work in practice. It will be of particular interest to finance, contracting and commissioning staff

[Click here for link](#)

NHS England

The Forward View into action: new care models: update and initial support.

This guidance outlines the initial support package for the new models of care vanguards. The support package focuses on eight key areas: designing new care models; evaluation and metrics; integrated commissioning and provision; empowering patients and communities; harnessing technology; workforce redesign; local leadership and delivery; and communications and engagement.

[Click here for link](#)

NHS England

Supporting people with a learning disability and/or autism who have a mental health condition or display behaviour that challenges

This draft national framework designed to improve the care of people with learning disabilities, shifting services away from hospital care and towards community-based settings. It sets out nine overarching principles which define what 'good' services for people with learning disabilities and/or autism whose behaviour challenges should look like.

[Click here for link to draft service model](#)

Publication Summary cont....

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

Improving acute inpatient psychiatric care for adults in England: interim report (The Commission on Acute Adult Psychiatric Care)

Direct access audiology waiting times for May 2015

Distance travelled by mental health patients

Foundation Trust Bulletin July 2015

Improving Access to Psychological Therapies report, April 2015 final and quarter 4 2014/15

Mental health atlas 2014 (World Health Organisation)

Legacy records management: services provided by the Department of Health Records Office

Department of Health annual report and accounts 2014 to 2015

Reasons why people with dementia are admitted to a general hospital in an emergency

Annual report and accounts 2014/15

National confidential inquiry into suicide and homicide by people with mental illness (University of Manchester)

NHS sickness absence rates: January 2015 to March 2015

Key statistics on the NHS

Diagnostic imaging dataset, July 2015

The association between patient and family engagement practices and patient experience (Hospitals in pursuit of excellence)

Provisional monthly hospital episode statistics for admitted patient care, outpatients and A&E data - April 2015

Dementia: statistics on prevalence and improving diagnosis, care and research (House of Commons Library)

Friends and family test, June 2015

Who we are and what we do: annual plan for 2015 to 2016 (Public Health England)

Health and wellbeing of 15 year olds in England: smoking prevalence - findings from the What About Youth? survey 2014

Local health profiles, August 2015 data update

Public health outcomes framework, August 2015 data update

Hospital activity data, June 2015

Mental health community teams activity, quarter ending June 2015

Patient-led assessments of the care environment - PLACE England 2015

NHS safety thermometer report - July 2014 to July 2015

Direct access audiology waiting times for June 2015

NHS foundation trust bulletin: 12 August 2015

Glossary

ADHD	Attention deficit hyperactivity disorder	MAV	Management of Aggression and Violence
ASD	Autism spectrum disorder	MBC	Metropolitan Borough Council
AWA	Adults of Working Age	MH	Mental Health
AWOL	Absent Without Leave	MHCT	Mental Health Clustering Tool
B/C/K/W	Barnsley, Calderdale, Kirklees, Wakefield	MRSA	Methicillin-resistant Staphylococcus aureus
BDU	Business Delivery Unit	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	NICE	National Institute for Clinical Excellence
CCG	Clinical Commissioning Group	NHSE	National Health Service England
CGCSC	Clinical Governance Clinical Safety Committee	NHS TDA	National Health Service Trust Development Authority
CIP	Cost Improvement Programme	NK	North Kirklees
CPA	Care Programme Approach	OPS	Older People's Services
CPPP	Care Packages and Pathways Project	OOA	Out of Area
CQC	Care Quality Commission	PCT	Primary Care Trust
CQUIN	Commissioning for Quality and Innovation	PICU	Psychiatric Intensive Care Unit
CROM	Clinician Rated Outcome Measure	PREM	Patient Reported Experience Measures
CRS	Crisis Resolution Service	PROM	Patient Reported Outcome Measures
CTLD	Community Team Learning Disability	PSA	Public Service Agreement
DTOC	Delayed Transfers of Care	PTS	Post Traumatic Stress
DQ	Data Quality	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	SWYFT	South West Yorkshire Foundation Trust
IAPT	Improving Access to Psychological Therapies	SYBAT	South Yorkshire and Bassetlaw local area team
IG	Information Governance	SU	Service Users
IM&T	Information Management & Technology	TBD	To Be Decided/Determined
Inf Prevent	Infection Prevention	WTE	Whole Time Equivalent
IWMS	Integrated Weight Management Service	Y&H	Yorkshire & Humber
KPIs	Key Performance Indicators	YTD	Year to Date
LD	Learning Disability		