



With all of us in mind

Quality Performance Report

Strategic Overview

October 2015

Table of Contents

	Page No
Introduction	4
Strategic Overview Dashboard	5-6
Finance - Overall Financial Position	7
Contracts - Trust-BDU	8
MH Currency Development	9-10
Workforce	11-13
Glossary	14

Dear Board Member/Reader

Welcome to the Trust's Integrated Performance Report: Strategic Overview for October 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	Q1	Q2	Q3	Q4	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				4
3		Monitor Finance Risk Rating (FT)	M	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				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			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			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			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			3
9		CQUIN Forensic	C	Green	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Amber/G	Green	Amber/G	Amber/G	Green			3
10	Infection Prevention	Infection Prevention (MRSA & C.Diff) All Cases	C	6	0	0	0	2	1	0	0	0	3				4
11	C-Diff	C Diff avoidable cases	C	0	0	0	0	0	0	0	0	0	0				4

Customer Focus

12	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	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	12% 5/42	15% 6/41	12% 5/42	14% 23/179	13% 20/156				4
14	Service User Experience	Friends and Family Test	L	TBC	89.00%	92.00%	87.00%	93.00%	89.00%	91.00%	88.00%	89.00%	91.00%				
15	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				4
16		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			
17	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% 65/65	100% 73/73				4
18	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%	Data Not Avail	92.00%	68.00%				4
19	Befriending services	% of Service Users Allocated a Befriender Within 16 Weeks	L	70%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	Data Not Avail	Data Not Avail	50.00%	20.00%			4
20		% of Service Users Requesting a Befriender Assessed Within 20 Working Days	L	80%	100%	100%	100%	100%	100%	100%	Data Not Avail	Data Not Avail	100%	100.00%			4
21		% of Potential Volunteer Befriender Applications Processed in 20 Working Days	L	90%	100%	100%	100%	100%	100%	100%	Data Not Avail	Data Not Avail	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	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%	99.32%	98.60%	99.86%	99.70%	99.28%				4	
24		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%	98.35%	98.76%			93.10%	4	
25		Delayed Transfers Of Care	M	7.50%	2.69%	1.64%	2.06%	1.96%	1.70%	1.80%	3.49%	2.12%	1.83%				4	
26		% Admissions Gatekept by CRS Teams	M	95%	93.28%	96.30%	97.20%	100%	95.90%	96.12%	95.49%	95.51%	97.29%				4	
27		% SU on CPA Followed up Within 7 Days of Discharge	M	95%	98.21%	100%	97.86%	97.70%	95.35%	100%	95.39%	98.66%	97.97%			96.90%	4	
28		% SU on CPA Having Formal Review Within 12 Months	M	95%	96.37%	95.18%	97.92%	96%	86.57%	98.44%	86.88%	97.92%	98.44%			97.67%	4	
29		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%	104.60%	113.25%				4	
30		Data completeness: comm services - Referral to treatment information	M	50%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.00%				4
31		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%				4
32		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%				4
33		Data completeness: Identifiers (mental health)	M	97%	99.70%	100%	99.62%	100%	99.62%	99.54%	99.65%	99.62%	99.54%				4	
34		Data completeness: Outcomes for patients on CPA	M	50%	78.83%	79.07%	77.63%	78.67%	77.64%	76.97%	78.40%	77.63%	76.97%				4	
35		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
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%	40.00%	81.82%	58.33%	56.25%	55.56%	80.00%	77.01%	Data Not Avail	Data Not Avail				4	
39	Data Quality	% Valid NHS Number	C (FP)	99%	99.87%	100%	99.88%	99.71%	99.58%	99.76%	Avail Month 8	99.88%	Data Not Avail				4	
40		% Valid Ethnic Coding	C (FP)	90%	99.05%	95%	94.86%	94.88%	94.90%	94.83%	Avail Month 8	96.28%	Data Not Avail				4	

Strategic Overview Dashboard

Fit for the future Workplace

41	Section	KPI	Source	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	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%	4.80%	4.80%	4.90%	4.90%	5.00%	4.90%				1
43	Appraisal	Appraisal Rate Band 6 and above	L	95%	Avail M3	Avail M3	56.80%	72.90%	80.30%	87.30%	89.50%	96.80%	87.30%				4
44		Appraisal Rate Band 5 and below	L	95%	Avail M6	Avail M6	Avail M6	Avail M6	Avail M6	66.30%	75.80%	Avail M6	66.30%				4
45	Vacancy	Vacancy Rate	L	10%													4
46	Mandatory Training	Aggression Management	L	80%	73.70%	73.65%	75.83%	77.04%	78.89%	78.85%	80.38%	75.83%	78.85%				1
47		Equality, Diversity & Inclusion	L	80%	82.30%	84.55%	84.87%	85.76%	87.17%	88.28%	88.81%	84.87%	88.28%				4
48		Fire Safety	L	80%	86.50%	86.24%	86.31%	86.55%	86.44%	85.33%	84.60%	86.31%	85.33%				4
53		Food Safety	L	80%	65.20%	66.89%	69.00%	70.67%	71.80%	73.06%	74.30%	69.00%	73.06%				1
50		Infection, Prevention & Control & Hand Hygiene	L	80%	80.60%	82.09%	82.82%	83.69%	85.25%	85.55%	85.58%	82.82%	85.55%				4
51		Information Governance	L	95%	91.90%	92.55%	92.67%	92.76%	92.73%	91.96%	91.56%	92.67%	91.96%				4
52		Safeguarding Adults	L	80%	82.80%	82.60%	84.14%	84.95%	86.16%	86.94%	87.74%	84.14%	86.94%				4
53		Safeguarding Children	L	80%	84.70%	85.22%	86.00%	86.39%	87.12%	87.93%	86.12%	86.00%	87.93%				4
54		Moving & Handling	L	80%	71.80%	73.66%	75.31%	77.40%	79.32%	80.37%	82.11%	75.31%	80.37%				1

KEY		Impact and Delivery
4	Forecast met, no plan required/plan in place likely to deliver	• Performance for Quality indicators (CQUINs) are monitored by BDU's on a monthly basis. The risk assessment on achievement of all indicators for 2015/16 is predicting an overall potential shortfall in income of £1.186m, which equates to 75% achievement and the overall rating for the year end position remains at Amber/Green.
3	Forecast risk not met, plan in place but unlikely to deliver	• Under performance issues related to CQUINs to date are linked to:
2	Forecast high risk not met, plan in place but very unlikely to deliver	◦ MH Clustering in all BDU's and detailed action plans have been drawn to improve performance. This has not impacted on the Q2 position and underperformance remains across most KPI's in all BDU's for this set of indicators.
1	Forecast Not met, no plan / plan will not deliver	◦ Improving Physical Healthcare for patients with severe mental illness in all BDU's with partial achievement anticipated for both Cardio Metabolic Assessment and Treatment for Patients with Psychoses and Communication with GPs.
CQC	Care Quality Commission	◦ Quality of Care Plans – partial achievement expected for Q2 based on reported performance and this is anticipated to remain at Q4.
M	Monitor	The Trust is still awaiting final confirmation of the overall Q2 position from commissioner.
C	Contract	
C (FP)	Contract (Financial Penalty)	
L	Local (Internal Target)	Operational Effectiveness
ER	Expected Range	• Issues in performance associated with Data quality (DQ) indicators have seen an improvement – some issues do still remain 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. A number of caseload reviewers have been reviewing clinical data and resolving some data quality issues which is having a positive impact on performance in some areas.
N/A	Not Applicable	• One of the Monitor Risk Assessment Framework KPI's are showing an underachievement at end of October. Issues with CPA reviews are likely to be related to clinical record keeping and case management and this is attributed across all BDU's – further analysis will be undertaken to assist with targeted improvement for Q3. Data is being validated for the Early Intervention in Psychosis indicator which is showing an under performance at month end, however, it is expected that this will remain above threshold.

Workforce

- Sickness continues to remain above trajectory at end of October 15. Work continues to focus on reducing sickness related absence within the Trust.
- Review of mandatory training KPIs has been undertaken by HR to focus on key staff groups and risk areas. Improvements in most mandatory training areas continue compared to last year. All now exceeding threshold, with the exception of Food Safety and Information Governance (IG) this shows a positive impact of the work being undertaken within the organisation, with the exception of IG most underperforming areas have seen a month on month increase since April 15.
- 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.

Overall Financial Performance 2015 / 2016

Performance Indicator		Month 7 Performance	Annual Forecast	Trend from last month	Last 3 Months - Most recent		
Trust Targets					6	5	4
1	Monitor Risk Rating	●	●	↔	●	●	●
2	£0.74m Deficit on Income & Expenditure	●	●	↓	●	●	●
3	Cash Position	●	●	↓	●	●	●
4	Capital Expenditure	●	●	↔	●	●	●
5	Delivery of CIP	●	●	↑	●	●	●
6	Better Payment Practice Code	●	●	↑	●	●	●

Key	<div style="display: flex; flex-direction: column; gap: 5px;"> ● In line, or greater than plan</div> <div style="display: flex; flex-direction: column; gap: 5px;"> ● Variance from plan ranging from 5% to 15%</div> <div style="display: flex; flex-direction: column; gap: 5px;"> ● Variance from plan greater than 15%</div>
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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 October 2015, is a surplus of £0.01m. This is £1.06m ahead of 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 October 2015 the cash position is £27.15m which is £0.37m behind plan. This was due to a delayed payment from a local commissioner - this was paid 2nd November 2015 £1.3m.

4. Capital spend to October 2015 is £6.05m which is £0.61m (9%) behind the Trust capital plan.

5. At October 2015 the Cost Improvement Programme is £389k behind plan. Overall a Full Year Value of £1304k (13%) 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 October 2015 91% of NHS and 97% of non NHS invoices have achieved the 30 day payment target (95%). This continues to be an improvement from previous months.

Contracting

Trust Summary by BDU - Current Contract Performance

Contract Variations	
BBDU NHSE National Childhood Flu Immunisation (3 yr contract) - completed	£60.9
BCCG & Associates CV 1 Various received not signed	£359.1
C&K CAMHS: Awaiting signed 2015-16 deed of variation from Commissioners	
WBDU WCCG Portrait of a Life - Care Home Vanguard (signed 11-11)	£67.0
SBDU WCCG offer tbc to fund 12-18mths Psychologist support to reduce ASD backlog	£61.4

CQUIN Performance

Quarter	Quarter 2 £000s	Achieved	Variance
Barnsley	£411.8	£315.8	£-96.0
Wakefield	£190.0	£128.0	£-61.9
Kirklees	£214.7	£126.7	£-88.0
Calderdale	£96.3	£30.4	£-65.9
Specialised	£75.4	£75.4	£0.0
Forensics	£120.0	£120.0	£0.0
Trust Total	£1,108.2	£796.3	£-311.9

CQUIN Performance Year-end Forecast

Quarter	Annual £000s	Forecast Achievement	Variance
Barnsley	£1,790.1	£1,529.3	£-260.8
Wakefield	£793.9	£485.9	£-308.0
Kirklees	£878.2	£519.4	£-358.9
Calderdale	£394.1	£206.7	£-187.4
Specialised	£301.7	£263.9	£-37.8
Forensics	£562.3	£528.6	£-33.7
Trust Total	£4,720.4	£3,533.7	£-1,186.7

CQUIN Performance Q2 Results

West CCGs: MH Clustering - Q2, 3 out of 4 indicators failed for C & K, 2 out of 4 for W. Remedial work in place. Reason for non achievement is recording/data reporting
Care Planning - Partial achievement for W & K. No achievement for C. Action Plan to be completed in preparation of Q4 audit.
Improving Physical Healthcare: Partial Achievement. Performance low against target.
BBDU: MH Clustering - The BDU only met the target for % in crisis plans for Q2, it failed all other targets.
Work is still ongoing with the Teams to achieve this CQUIN
Communications with GPs - the BDU failed to achieve the minimum 50% for this part of CQUIN
Work is ongoing to improve this.

Contract Issues - Specialist

West CAMHS: Future in Minds report returns were submitted by Commissioners Fri 16th Oct. 5yrs allocation of funding available. Wakefield submission accepted.
C&K CAMHS: DoV still awaiting signature from Commissioners.
W CAMHS: Urgent Assessments: Agreement for 2-3 patients p/a to be seen by service at LA request. process be defined. Proposed revision of CQUIN descriptor for 15/16 accepted by WCCG.
W LD: Developing suite of data to reflect performance against service specification.
C LD: SWYPFT team delivering on timescales. Positive feedback and service being recognised as good practice.

Key Contract Issues - Calderdale

IHBT: CCGG only commissioner that has not commissioned 24/7 IHBT service.
Business case submitted, CCGG requesting further details regarding funding impact. End of Nov.
No contentious elements relating to quality.
MHL: Ongoing discussion re provision. CCGG & KCCG to discuss separately. SWYPFT to review specification and core 24hr cover and ascertain what can be provided within current financial envelope.
Police Liaison: Service to work up what £150k would fund in provision.
R&R: CCGG 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: CCGG looking at new model going forward and considering funding implications.
IAPT (AQP): DoV outstanding. Service out to procurement Dec/Jan 16
ED: CCGG would like 'basic' service initially. SWYPFT to work with Commissioners focussing on primary care and supporting patients through need.

QIPP Targets & Delivery for 2015/16

CCG	Target £000s	Planned £000s	Remainder £000s	RAG
Wakefield*	£1,790.0	£1,793.1	£3.1	***
Kirklees**	£1,000.0	£639.6	£-360.4	
Calderdale	£0.0	£0.0	£0.0	
TOTAL £000s	£2,790.0	£2,432.7	£-357.3	

* 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 (Savile 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	£15.9	MSK as at Mth 6

Contract Performance Information - based on month 6

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
- 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
- Diabetes nursing and 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: National procurement now identified for 2015/16/17 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 has improved in M6 but YTD remains below 90% threshold, BDU seeking new admissions to avoid financial penalty (M6 FOT -£146k). Discussions to be held with Commissioner regarding impact of acuity of patients on capacity and off setting penalty

Key Contract Issues - Kirklees BDU

MHL: KCCG proposed to take £500k out of the C&K psychiatric liaison team baseline. Intention to re-invest in SWYPFT contract. Still not received baseline evidence & new/revised specification requested from CCG. SWYPFT to review specification and core 24hr cover and ascertain what can be provided within current financial envelope.
Police Liaison: Separate conversations started with CCGG. Service to pick up with KCCG requirements for their element of the funding.
Psychology: 18 week pathway holding although there has been an increase in referrals. Waiting lists beginning to reduce.
IAPT: Below target for recovery, 6 week & 18 week waits (ref to entering IAPT treatment)

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 their is some protocol behind this. The mental health clustering tool (MHCT) guidance booklet has recently been revised to update the care transition protocols.

In the Trusts two main contracts for 2016 are a set of Quality (CQUIN) indicators related to MH Clustering, this will assist the Trust in preparedness for 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

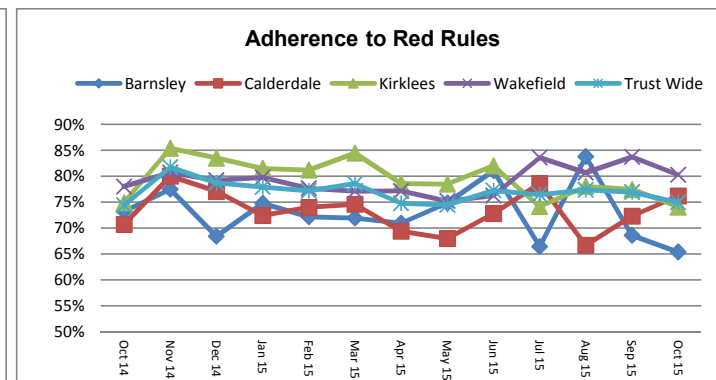
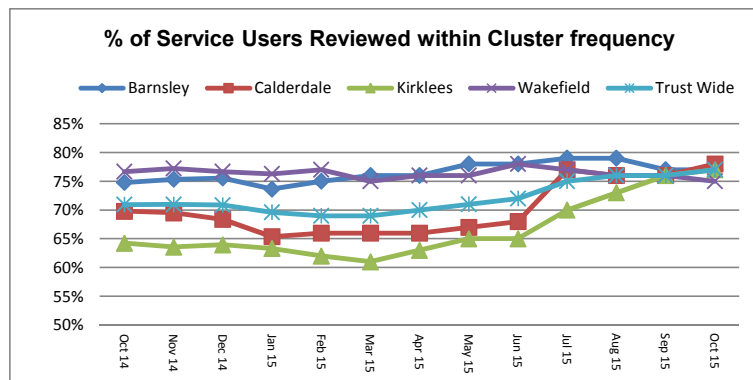
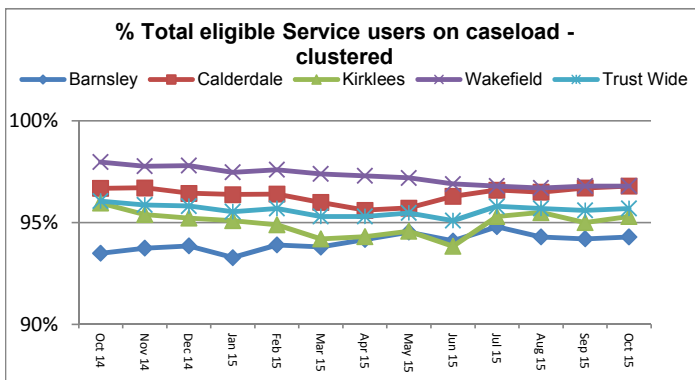
Review of Service Users and Clusters - agreed % to be reviewed by March 2016.

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 requirements have been met to end of quarter 2.

Across the Trust, a number of caseload reviewers have been undertaking a data quality exercise, work continues to focus on this area however, to date, there has been some underperformance against contract thresholds in all BDU's.

MH Currency Indicators - October 2015



IAPT & Forensic Secure Services and Clustering

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.

All IAPT clients entering treatment from 1st April 2015 must be clustered. The new Forensic Mental Health Clustering tool (MHCT) is available from March 15 and this is being included in the Forensic PbR Pilot submission.

The datasets have been flowing from April 15 and internal monitoring of the completeness of this data will take place during 15/16. From quarter 2 onwards, the monitoring of clustering for these services will be included in the

The implementation of Clustering for Learning Disabilities service users, in relation to the CP&PP LD pilot, has been slower than anticipated, the service are now planning to commence data collection in January 2016 which will then enable data to flow into the pilot.

Monitors Payment Proposals for Adult Mental Health Care 2016/17

Monitor are proposing changes to Local Payment Rules covering Mental health care contracts for 2016/17 because block contracts do not incentivise delivery of the objectives in the Five Year Forward View and do not facilitate timely evidence based care.

The aim of the new payment system is to increase equity of access to evidence based services with a focus on prevention and to reward quality and outcomes.

Monitor are proposing that there will be NO un-accountable block contracts or payment based on cluster days for 2016/17 and have suggested two payment approaches to adopt:-

- A Payment approach based on a pathway / year of care or episode of treatment as appropriate to each MH cluster with a proportion linked to outcomes
(This is suitable where CCGs are not providing integrated care – i.e. across mental, physical and community healthcare)

- A Payment approach based on capitation – informed by care cluster data and other evidence required to understand population needs – with a proportion linked to outcomes
(This would require the outcomes based element across one or more providers and a lead provider arrangement to monitor performance)

Under both approaches an element for payment should be linked to achievement of agreed quality and outcome measures including patient experience, achievement of MH access and waiting time standards (ex IAPTS and EIS) and measures that support the delivery of NICE concordant care.

A gain and loss share arrangement would be required to limit providers and commissioners financial risk due to any unanticipated changes in demand.

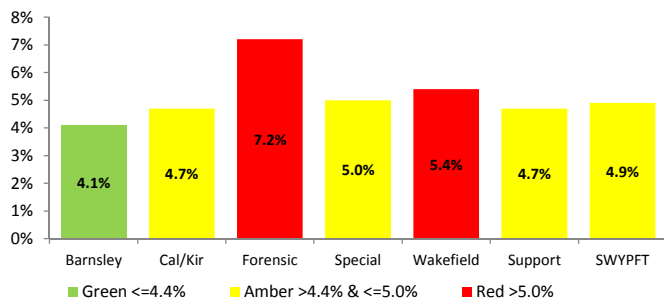
Data reporting requirements based on MH Cluster will remain the same.

Secure Services, CAMHS are not part of this payment system and IAPTs services are being looked at separately.

Feedback from providers and commissioners about the proposals has to be returned to Monitor by 19th November and will inform the Formal 2016/17 national tariff guidance and sector support materials.

Human Resources Performance Dashboard - October 2015

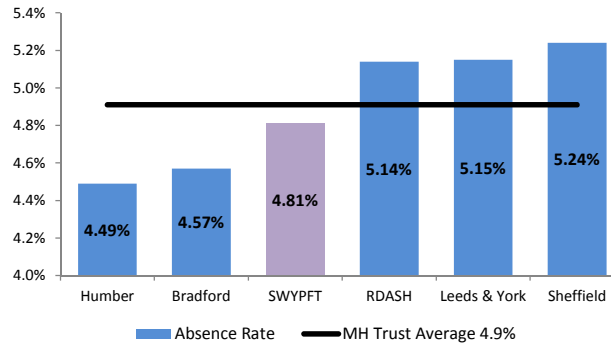
Sickness Absence



Current Absence Position - September 2015

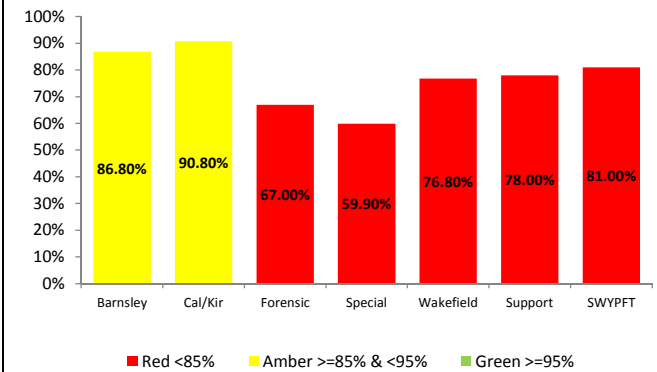
	Barn	Cal/Kir	Fore	Spec	Wake	Supp	SWYPFT
Rate	4.1%	5.0%	6.7%	4.6%	5.7%	4.9%	4.9%
Trend	↓	↓	↑	↑	↓	↔	↓

The Trust YTD absence levels in September 2015 (chart above) were above the 4.4% target at 4.9%



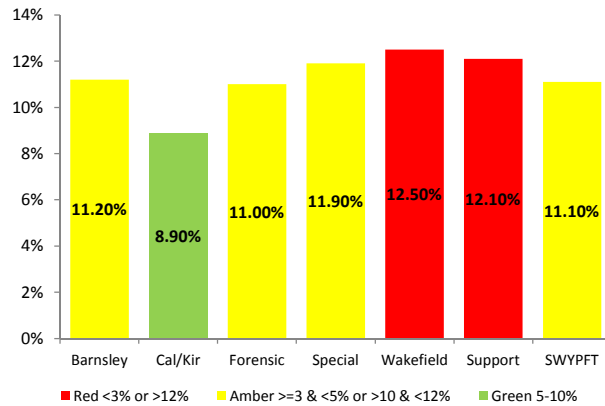
The above chart shows absence levels in MH/LD Trusts in our region to the end of June 2015. During this time the Trust's absence rate was 4.81% which is below the regional average of 4.91%.

Appraisals - All Staff

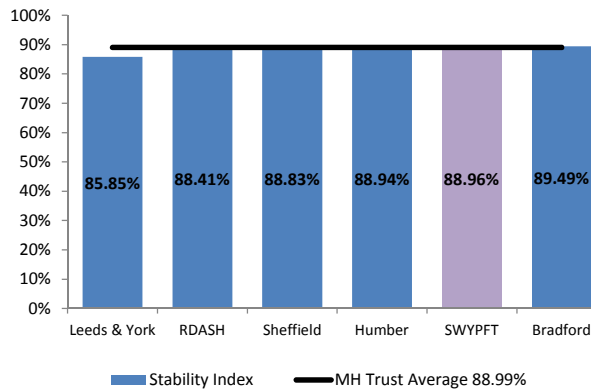


The above chart shows the appraisal rates for all Trust staff. The Trust's target for appraisals is 95% or above. The total percentages have decreased slightly since the inclusion of Bands 1 to 5 in the figures last month but both sets continue to show improvement over the course of the financial year.

Turnover and Stability Rate Benchmark

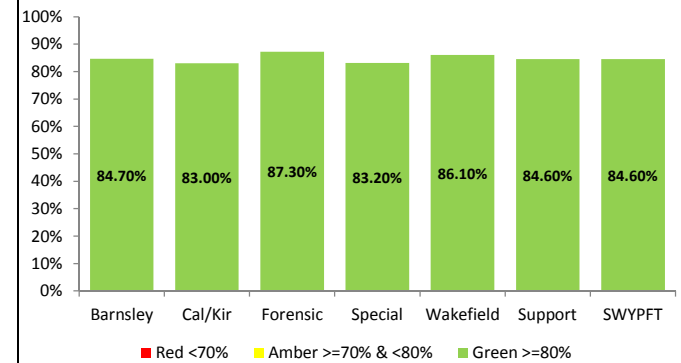


This chart shows Turnover levels up to the end of October 2015. The higher levels of turnover in Wakefield BDU and Support Services is due to the number of staff leaving through retirement or redundancy since 1st April.



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		May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15
Sickness (YTD)	<=4.4%	5.00%	4.90%	4.80%	4.80%	4.80%	4.80%
Sickness (Monthly)	<=4.4%	5.00%	4.80%	4.60%	4.80%	5.00%	4.90%
Appraisals (Band 6 and above)	>=95%	13.10%	56.70%	73.30%	80.30%	87.30%	89.50%
Appraisals (Band 5 and below)	>=95%	5.40%	16.90%	28.00%	42.10%	66.30%	75.80%
Aggression Management	>=80%	73.70%	75.80%	77.00%	78.90%	78.90%	80.40%
Equality and Diversity	>=80%	84.50%	84.90%	85.80%	87.20%	88.30%	88.80%
Fire Safety	>=80%	86.20%	86.30%	86.60%	86.40%	85.30%	84.60%
Food Safety	>=80%	66.90%	69.00%	70.70%	71.80%	73.10%	74.30%
Infection Control and Hand Hygiene	>=80%	82.10%	82.80%	83.70%	85.30%	85.50%	85.60%
Information Governance	>=95%	92.60%	92.70%	92.80%	92.70%	92.00%	91.60%
Moving and Handling	>=80%	73.70%	75.30%	77.40%	79.30%	80.40%	82.10%
Safeguarding Adults	>=80%	82.60%	84.10%	84.90%	86.20%	86.90%	87.70%
Safeguarding Children	>=80%	85.20%	86.00%	86.40%	87.10%	87.90%	86.10%
Bank Cost		£360k	£398k	£473k	£445k	£488k	£478k
Agency Cost		£720k	£608k	£694k	£566k	£637k	£772k
Overtime Cost		£13k	£16k	£8k	£26k	£38k	£30k
Additional Hours Cost		£76k	£90k	£89k	£83k	£67k	£74k
Sickness Cost (Monthly)		£526k	£515k	£456k	£484k	£490k	£472k
Vacancies (Non-Medical) (WTE)		343.02	328.68	351.53	353.84	351.54	324.2
Business Miles		304k	305k	313k	340k	270k	333k

Barnsley District							
Month		May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15
Sickness (YTD)	<=4.4%	4.40%	4.30%	4.10%	4.20%	4.10%	4.10%
Sickness (Monthly)	<=4.4%	4.40%	4.10%	3.90%	4.30%	4.10%	4.10%
Appraisals (Band 6 and above)	>=95%	18.10%	58.90%	78.00%	83.60%	90.50%	92.10%
Appraisals (Band 5 and below)	>=95%	5.80%	18.80%	32.10%	51.90%	73.40%	83.30%
Aggression Management	>=80%	79.90%	81.80%	82.00%	84.30%	83.60%	83.50%
Equality and Diversity	>=80%	86.90%	86.70%	87.60%	89.20%	90.40%	90.70%
Fire Safety	>=80%	83.60%	84.20%	85.10%	86.60%	85.90%	84.70%
Food Safety	>=80%	76.30%	77.80%	81.10%	80.50%	80.70%	80.10%
Infection Control and Hand Hygiene	>=80%	83.90%	83.70%	84.40%	85.60%	86.60%	86.40%
Information Governance	>=95%	90.20%	90.40%	91.50%	91.80%	91.70%	92.10%
Moving and Handling	>=80%	76.00%	77.70%	80.00%	81.70%	82.60%	84.50%
Safeguarding Adults	>=80%	86.10%	86.80%	87.30%	87.90%	88.90%	90.00%
Safeguarding Children	>=80%	85.10%	86.10%	86.70%	88.30%	89.20%	87.90%
Bank Cost		£67k	£71k	£67k	£70k	£84k	£85k
Agency Cost		£259k	£214k	£151k	£77k	£157k	£119k
Overtime Cost		£10k	£10k	£3k	£17k	£19k	£10k
Additional Hours Cost		£43k	£43k	£40k	£47k	£31k	£35k
Sickness Cost (Monthly)		£168k	£151k	£132k	£144k	£138k	£136k
Vacancies (Non-Medical) (WTE)		120.43	105.51	111.96	116	100.85	92.75
Business Miles		134k	128k	139k	137k	111k	144k

Calderdale and Kirklees District							
Month		May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15
Sickness (YTD)	<=4.4%	5.00%	4.60%	4.60%	4.60%	4.70%	4.70%
Sickness (Monthly)	<=4.4%	4.90%	4.20%	4.60%	4.40%	5.20%	5.00%
Appraisals (Band 6 and above)	>=95%	4.70%	65.50%	79.40%	90.60%	97.50%	98.80%
Appraisals (Band 5 and below)	>=95%	7.30%	22.70%	33.90%	49.50%	76.50%	85.00%
Aggression Management	>=80%	77.90%	79.50%	81.10%	82.60%	83.00%	83.20%
Equality and Diversity	>=80%	85.00%	85.90%	86.60%	87.70%	89.80%	90.60%
Fire Safety	>=80%	86.90%	88.60%	87.70%	87.20%	85.40%	83.00%
Food Safety	>=80%	59.50%	64.90%	65.90%	66.80%	67.70%	69.50%
Infection Control and Hand Hygiene	>=80%	82.90%	84.30%	85.70%	87.20%	88.60%	88.60%
Information Governance	>=95%	94.80%	94.60%	93.70%	93.60%	92.80%	90.40%
Moving and Handling	>=80%	70.40%	72.20%	75.40%	77.50%	78.80%	81.30%
Safeguarding Adults	>=80%	79.70%	80.90%	81.40%	83.00%	85.20%	86.60%
Safeguarding Children	>=80%	84.60%	85.30%	86.00%	85.50%	87.20%	86.20%
Bank Cost		£108k	£104k	£131k	£123k	£134k	£117k
Agency Cost		£157k	£57k	£167k	£110k	£141k	£199k
Overtime Cost		£0k	£3k	£2k	£1k	£1k	£1k
Additional Hours Cost		£2k	£5k	£7k	£4k	£2k	£2k
Sickness Cost (Monthly)		£101k	£90k	£91k	£90k	£103k	£99k
Vacancies (Non-Medical) (WTE)		79.76	83.33	77.32	82.59	82.93	71.14
Business Miles		66k	61k	64k	77k	57k	65k

Forensic Services							
Month		May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15
Sickness (YTD)	<=4.4%	8.20%	8.20%	7.90%	7.60%	7.30%	7.20%
Sickness (Monthly)	<=4.4%	8.20%	8.20%	7.30%	6.60%	6.00%	6.70%
Appraisals (Band 6 and above)	>=95%	6.00%	43.10%	58.70%	65.20%	68.60%	70.00%
Appraisals (Band 5 and below)	>=95%	2.30%	6.80%	14.00%	29.30%	61.00%	66.20%
Aggression Management	>=80%	76.30%	77.00%	78.80%	78.40%	77.40%	78.20%
Equality and Diversity	>=80%	88.70%	89.30%	89.70%	90.20%	89.20%	90.40%
Fire Safety	>=80%	90.30%	88.00%	88.20%	87.20%	85.50%	87.30%
Food Safety	>=80%	55.80%	57.60%	59.50%	63.20%	65.40%	70.60%
Infection Control and Hand Hygiene	>=80%	84.20%	84.90%	86.00%	87.80%	85.80%	85.30%
Information Governance	>=95%	94.40%	93.40%	94.10%	92.70%	90.70%	91.70%
Moving and Handling	>=80%	79.20%	80.20%	81.50%	83.90%	84.00%	85.80%
Safeguarding Adults	>=80%	86.90%	87.00%	87.40%	88.40%	85.50%	88.50%
Safeguarding Children	>=80%	84.60%	85.00%	85.10%	85.70%	84.50%	85.30%
Bank Cost		£61k	£82k	£95k	£99k	£114k	£114k
Agency Cost		£116k	£91k	£93k	£77k	£96k	£122k
Additional Hours Cost		£1k	£3k	£0k	£0k	£0k	£0k
Sickness Cost (Monthly)		£74k	£77k	£65k	£58k	£56k	£58k
Vacancies (Non-Medical) (WTE)		16.94	16.7	20.56	28.42	14.34	24.94
Business Miles		4k	4k	3k	6k	3k	9k

Workforce - Performance Wall cont...

Specialist Services							
Month		May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15
Sickness (YTD)	<=4.4%	5.80%	5.70%	5.40%	5.20%	5.10%	5.00%
Sickness (Monthly)	<=4.4%	5.80%	5.50%	4.80%	4.50%	5.00%	4.60%
Appraisals (Band 6 and above)	>=95%	12.70%	33.50%	39.80%	45.40%	60.50%	68.70%
Appraisals (Band 5 and below)	>=95%	3.90%	9.40%	13.10%	21.50%	44.00%	47.50%
Aggression Management	>=80%	69.30%	70.60%	70.30%	73.80%	73.40%	76.40%
Equality and Diversity	>=80%	86.70%	87.30%	88.20%	89.60%	89.60%	89.90%
Fire Safety	>=80%	86.00%	85.10%	83.70%	85.90%	82.20%	83.20%
Food Safety	>=80%	72.20%	72.70%	72.20%	72.20%	69.10%	69.00%
Infection Control and Hand Hygiene	>=80%	79.50%	81.10%	81.60%	83.30%	83.80%	84.00%
Information Governance	>=95%	89.20%	91.10%	90.10%	90.80%	89.10%	90.10%
Moving and Handling	>=80%	72.50%	74.80%	76.70%	79.70%	82.20%	82.50%
Safeguarding Adults	>=80%	78.10%	80.40%	81.50%	83.20%	84.70%	83.20%
Safeguarding Children	>=80%	81.80%	84.30%	82.70%	82.90%	85.40%	84.90%
Bank Cost		£31k	£33k	£44k	£33k	£38k	£31k
Agency Cost		£145k	£195k	£195k	£208k	£127k	£228k
Overtime Cost		£2k	£2k	£2k	£2k	£2k	£1k
Additional Hours Cost		£7k	£7k	£11k	£5k	£7k	£5k
Sickness Cost (Monthly)		£58k	£56k	£50k	£56k	£54k	£52k
Vacancies (Non-Medical) (WTE)		52.51	52.47	52.66	44.93	50.41	45.31
Business Miles		29k	38k	32k	30k	29k	30k

Support Services							
Month		May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15
Sickness (YTD)	<=4.4%	3.90%	4.10%	4.30%	4.60%	4.70%	4.70%
Sickness (Monthly)	<=4.4%	3.90%	4.30%	4.50%	5.40%	5.30%	4.90%
Appraisals (Band 6 and above)	>=95%	9.50%	66.80%	86.20%	91.80%	94.80%	95.90%
Appraisals (Band 5 and below)	>=95%	4.00%	11.90%	20.70%	26.60%	54.80%	71.10%
Aggression Management	>=80%	51.00%	57.10%	60.10%	65.10%	68.60%	72.40%
Equality and Diversity	>=80%	72.40%	73.20%	74.60%	76.20%	78.10%	78.70%
Fire Safety	>=80%	88.00%	87.50%	87.70%	85.30%	86.00%	84.60%
Food Safety	>=80%	89.30%	90.20%	95.50%	95.50%	93.60%	90.10%
Infection Control and Hand Hygiene	>=80%	78.60%	78.90%	79.90%	80.90%	81.20%	82.30%
Information Governance	>=95%	94.80%	94.80%	94.90%	94.60%	92.80%	91.70%
Moving and Handling	>=80%	72.80%	74.90%	76.70%	77.70%	78.80%	81.10%
Safeguarding Adults	>=80%	79.70%	81.60%	83.60%	84.70%	84.80%	84.90%
Safeguarding Children	>=80%	87.60%	87.80%	88.70%	89.80%	90.30%	83.70%
Bank Cost		£25k	£38k	£40k	£36k	£35k	£60k
Agency Cost		£25k	£27k	£16k	£27k	£103k	£71k
Additional Hours Cost		£17k	£23k	£21k	£18k	£19k	£22k
Sickness Cost (Monthly)		£58k	£64k	£63k	£75k	£71k	£62k
Vacancies (Non-Medical) (WTE)		26.51	24.8	36.6	36.53	42.54	51.48
Business Miles		32k	34k	36k	47k	38k	42k

Wakefield District							
Month		May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15
Sickness (YTD)	<=4.4%	5.50%	5.30%	5.10%	5.20%	5.30%	5.40%
Sickness (Monthly)	<=4.4%	5.50%	5.20%	4.80%	5.30%	5.70%	5.70%
Appraisals (Band 6 and above)	>=95%	19.20%	54.80%	78.30%	83.20%	87.40%	88.10%
Appraisals (Band 5 and below)	>=95%	7.60%	25.60%	41.40%	50.00%	64.34%	68.40%
Aggression Management	>=80%	77.70%	80.40%	81.00%	81.30%	79.30%	82.90%
Equality and Diversity	>=80%	89.40%	89.50%	89.80%	91.70%	91.70%	92.20%
Fire Safety	>=80%	88.20%	87.10%	88.70%	86.20%	84.60%	86.10%
Food Safety	>=80%	62.60%	62.40%	60.30%	61.70%	67.60%	68.60%
Infection Control and Hand Hygiene	>=80%	80.70%	83.20%	83.30%	86.50%	84.10%	83.80%
Information Governance	>=95%	94.00%	94.20%	93.00%	92.90%	93.30%	92.60%
Moving and Handling	>=80%	69.60%	70.60%	71.10%	73.50%	73.60%	74.00%
Safeguarding Adults	>=80%	81.00%	85.70%	86.70%	88.80%	89.70%	89.70%
Safeguarding Children	>=80%	86.50%	86.10%	86.50%	86.60%	86.40%	85.60%
Bank Cost		£69k	£69k	£97k	£85k	£83k	£71k
Agency Cost		£18k	£24k	£71k	£67k	£12k	£34k
Additional Hours Cost		£6k	£9k	£9k	£8k	£9k	£9k
Sickness Cost (Monthly)		£59k	£61k	£54k	£57k	£60k	£66k
Vacancies (Non-Medical) (WTE)		48.87	47.87	50.63	43.37	55.47	36.58
Business Miles		39k	40k	40k	42k	31k	43k

Glossary

ADHD	Attention deficit hyperactivity disorder	LD	Learning Disability
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. Diff	Clostridium difficile	MSK	Musculoskeletal
CAMHS	Child and Adolescent Mental Health Services	MT	Mandatory Training
CAPA	Choice and Partnership Approach	NCI	National Confidential Inquiries
CCG	Clinical Commissioning Group	NICE	National Institute for Clinical Excellence
CGCSC	Clinical Governance Clinical Safety Committee	NHSE	National Health Service England
CIP	Cost Improvement Programme	NHS TDA	National Health Service Trust Development Authority
CPA	Care Programme Approach	NK	North Kirklees
CPPP	Care Packages and Pathways Project	OPS	Older People's Services
CQC	Care Quality Commission	OOA	Out of Area
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
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