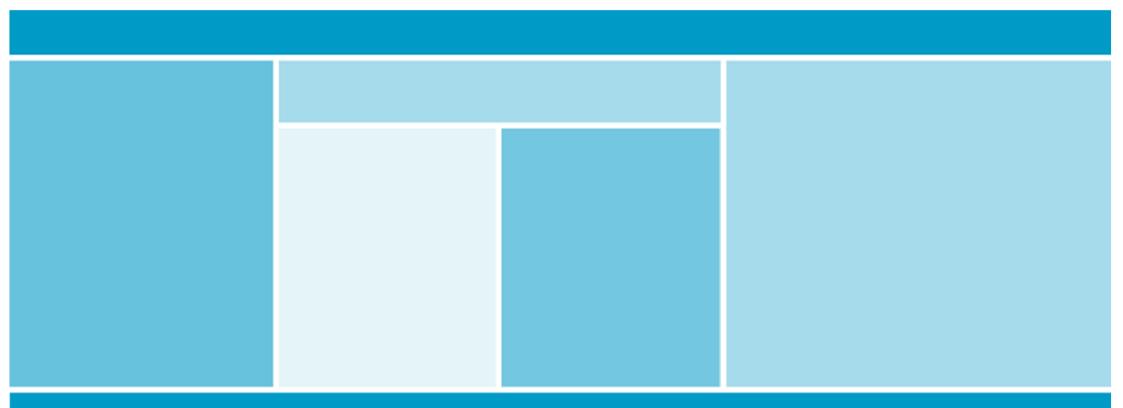


Quality Performance Report

Strategic Overview



November 2015

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Introduction

Dear Board Member/Reader

Welcome to the Trust's Integrated Performance Report: Strategic Overview for November 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

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Business Strategic Performance Impact & Delivery National Year End Forecast Oct-15 Apr-15 May-15 Jun-15 Jul-15 Aug-15 Sep-15 Nov-15 Q1 Q2 Section Source **Target Position** Ionitor Governance Risk Rating (FT) M Green Monitor Compliance 3 onitor Finance Risk Rating (FT) М 4 4 4 4 4 4 4 4 4 4 4 QC Quality Regulations (compliance breach CQC Green 4 5 CQUIN Barnslev С Green Amber/G 3 6 7 8 Green Amber/G 3 CQUIN OUIN Kirklees С Amber/G Amber/G Amber/G Amher/G Amber/G Amber/G Amber/G Amber/G Amber/G Amber/G 3 Green COUIN Wakefield С Amber/G Amber/G Amber/G Amber/G Amber/G Amber/G Green Amher/G Amher/G Amher/G Amber/G 3 9 QUIN Forensic С Green Amber/G Amber/G Amber/G Amber/G Amber/G Green Amber/G Amber/G Amber/G Green 3 10 Infection Prevention nfection Prevention (MRSA & C.Diff) All Cases С 0 0 4 6 0 2 0 3 C Ω Λ Λ Customer Focus ear End Forecast Section Jul-15 Sep-15 Oct-15 Nov-15 Source **Target** Apr-15 May-15 Jun-15 Aug-15 Q1 Q2 Position 14% 6/44 12% 9/73 12% 5/42 15% 6/41 12% 5/42 16% 9/58 14% 23/179 13% 20/15 Complaints with Staff Attitude as an Issue < 25% 12% 8/66 13% 9/69 Service User riends and Family Test TBC 89.00% 92.00% 87.00% 93.00% 89.00% 91.00% 88.00% Data Avail Month End 89.00% 91.00% Experience 15 16 17 hysical Violence - Against Patient by Patient 14-20 Within ER Data Not Avail hysical Violence - Against Staff by Patient 50-64 Data Not Avail 4 FOL of Requests for Information Under the Act Processed in 20 Working Days 100% 100% 24/24 100% 17/17 100% 20/20 100% 24/24 100% 28/28 100% 25/25 100% 65/65 100%73/73 18 Media 60% 92.00% 92.00% 92.00% 80.00% 75.00% Data Avail Month End Data Avail Month End 92.00% 68.00% 19 of Service Users Allocated a Befriender Within 16 Weeks 70% of Service Users Requesting a Befriender Assessed Within 20 Working Days L 80% 100% 100% 100% 100% Data Not Avail Data Not Avail Data Not Avail 90% 100% 100% 100% 100% 100% Data Not Avail Data Not Avail Data Not Avail 100% Operational Effectiveness: Process Effectiveness 22 **Year End Forecast** May-15 Jun-15 Sep-15 Section KPI Source Apr-15 Jul-15 Aug-15 Oct-15 Nov-15 Q1 Q2 Target Position 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 fax time of 18 weeks from point of referral to treatment - non-admitted 99.11% 99.86% 100% 99.32% 98 60% 99.86% М 95% 100% 97 64% 99.70% 99.28% 92% 99.16% Max time of 18 weeks from point of referral to treatment - incomplete pathway 98.06% 97% 99.82% 100% 97.31% 98.92% 97.58% 98.35% 98.76% 93.10% elayed Transfers Of Care 7.50% 2.69% 1.64% 2.06% 1.96% 1.70% 1.80% 3.49% 2.89% 2.12% 1.83% Admissions Gatekept by CRS Teams М 95% 96.30% 97.20% 100% 95.90% 96.12% 95.49% Data Avail Month End 95.51% 97.29% SU on CPA Followed up Within 7 Days of Discharge 95% 98.21% 100% 97.86% 97.70% 95.35% 100% 95.39% Data Avail Month End 98.66% 97.97% 4 SU on CPA Having Formal Review Within 12 Months M 95% 96.37% 95.18% 97.92% 96% 98.44% 97.52% 97.92% 98.44% 97.67% 4 108.97% 95% 108.97% 102% 104.60% 147.599 113.25% 99.48% 104.60% 113.25% Monitor Risk ata completeness: comm services - Referral to treatment information М 50% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100.00% Assessment ata completeness: comm services - Referral information 50% 94.00% 94% 96.80% 96.80% 96.80% 96.809 96.80% 96.80% 96.80% 96.80% Framework ata completeness: comm services - Treatment activity information 50% 94.00% 94% 96.80% 96.80% 96.80% 96.80% 96.80% 96.80% 96.80% 96.80% ata completeness: Identifiers (mental health) M 97% 99.70% 100% 99.62% 100% 99.62% 99.54% 99.65% 99.55% 99.62% 99.54% 4 ata completeness: Outcomes for patients on CPA М 50% 78.83% 79.07% 77.63% 78.67% 77.64% 76.97% 78.40% 77.94% 77.63% 76.97% 4 ompliance with access to health care for people with a learning disability М Compliant Compliant Compliant Compliant Compliant Compliant Compliant Compliant М 75% Data Not Avail Data Not Avail Data Not Avail Data Not Avail М Data Not Avail APT - Treatment within 18 weeks of referral 95% Data Not Avail Data Not Avail Data Not Avail arly Intervention in Psychosis - 2 weeks (NICE approved care package) М 50% 58.33% 56.25% 55.56% 80.00% 84.60% 66.67% Valid NHS Number C (FP) 99% 99.87% 99.88% 99.71% 99.58% 99.76% Avail Month End Avail Month 9 99.88% Data Quality

Strategic Overview Dashboard

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94.86%

94.88%

94.90%

94.83%

Avail Month End

Avail Month 9

C (FP)

90%

99.05%

Strategic Overview Dashboard

| | Fit for the future w | orkplace | | | | | | | | | | | | | | |
|----------------|----------------------|------------------------------------------------|--------|--------|----------|----------|----------|----------|----------|--------|--------|--------|----------|--------|-------------------|-------------------------------|
| 41 | Section | КРІ | Source | Target | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Q1 | Q2 | 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% | 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% | 91.60% | 56.80% | 87.30% | | 4 |
| 44 | Арргаізаі | Appraisal Rate Band 5 and below | L | 95% | Avail M6 | 66.30% | 75.80% | 80.30% | Avail M6 | 66.30% | | 4 |
| 45 | Vacancy | Vacancy Rate | L | 10% | | | | | | | | | | | | 4 |
| 46 47 | | Aggression Management | L | 80% | 73.70% | 73.65% | 75.83% | 77.04% | 78.89% | 78.85% | 80.38% | 80.78% | 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% | 89.37% | 84.87% | 88.28% | | 4 |
| 48 53 | | Fire Safety | L | 80% | 86.50% | 86.24% | 86.31% | 86.55% | 86.44% | 85.33% | 84.60% | 84.83% | 86.31% | 85.33% | | 4 |
| 53 | | Food Safety | L | 80% | 65.20% | 66.89% | 69.00% | 70.67% | 71.80% | 73.06% | 74.30% | 74.10% | 69.00% | 73.06% | | 1 |
| 50 | Mandatory Training | Infection, Prevention & Control & Hand Hygiene | L | 80% | 80.60% | 82.09% | 82.82% | 83.69% | 85.25% | 85.55% | 85.58% | 84.86% | 82.82% | 85.55% | | 4 |
| 51 | | Information Governance | L | 95% | 91.90% | 92.55% | 92.67% | 92.76% | 92.73% | 91.96% | 91.56% | 90.58% | 92.67% | 91.96% | | 4 |
| 52 | | Safeguarding Adults | L | 80% | 82.80% | 82.60% | 84.14% | 84.95% | 86.16% | 86.94% | 87.74% | 87.34% | 84.14% | 86.94% | | 4 |
| 52 53 54 | | Safeguarding Children | L | 80% | 84.70% | 85.22% | 86.00% | 86.39% | 87.12% | 87.93% | 86.12% | 85.54% | 86.00% | 87.93% | | 4 |
| 54 | | Moving & Handling | L | 80% | 71.80% | 73.66% | 75.31% | 77.40% | 79.32% | 80.37% | 82.11% | 83.03% | 75.31% | 80.37% | | 1 |

| <u>KEY</u> | |
|------------|-----------------------------------------------------------------------|
| 4 | Forecast met, no plan required/plan in place likely to deliver |
| 3 | Forecast risk not met, plan in place but unlikely to deliver |
| 2 | Forecast high risk not met, plan in place but vey unlikely to deliver |
| 1 | Forecast Not met, no plan / plan will not deliver |
| CQC | Care Quality Commission |
| M | Monitor |
| C | Contract |
| C (FP) | Contract (Financial Penalty) |
| L | Local (Internal Target) |
| ER | Expected Range |
| N/A | Not Applicable |

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Overall Financial Performance 2015 / 2016

| Perform | mance Indicator | Month 8 Performance | Annual Forecast | Trend from last month | Last 3 Months - Most recent | | | |
|---------|------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------|---|---|--|
| Trust T | | 1 enomiance | Torecast | iast month | 7 | 6 | 5 | |
| 1 | Monitor Risk Rating | | | \leftrightarrow | | | | |
| 2 | REVISED £0.10m Surplus on Income & Expenditure | | | ↓ | | | | |
| 3 | Cash Position | | | \downarrow | | | | |
| 4 | Capital Expenditure | | | \leftrightarrow | | | | |
| 5 | Delivery of CIP | | | — | | | | |
| 6 | Better Payment Practice Code | | | 1 | | | | |
| | 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 November 2015, is a deficit of £0.08m. As part of the Month 6 Monitor return the Trust confirmed a revised plan of £100k surplus. This year to date position is £0.02m 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 November 2015 the cash position is £28.91m which is £1.65m ahead of plan.
- 4. Capital spend to November 2015 is £7.14m which is £0.14m (2%) behind the Trust capital plan.
- 5. At November 2015 the Cost Improvement Programme is £673k behind plan. Overall a Full Year Value of £1451k (15%) 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 November 2015 92% of NHS and 96% of non NHS invoices have achieved the 30 day payment target (95%). This continues to be an improvement from previous months.

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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 Q3 Forecast based on

| | | | Q0 : 0:00000 maoou o:: | | | | |
|-------------|-----------|----------|------------------------|-------------|--------|--|--|
| Quarter | Quarter 2 | Achieved | Variance | M7 | Vari | | |
| | £000s | | | Performance | | | |
| Barnsley | £411.8 | £315.8 | -£96.0 | £402.6 | -£24.0 | | |
| Wakefield | £190.0 | £128.0 | -£61.9 | £92.4 | -£15.3 | | |
| Kirklees | £214.7 | £126.7 | -£88.0 | £103.4 | -£17.6 | | |
| Calderdale | £96.3 | £30.4 | -£65.9 | £46.4 | -£7.9 | | |
| Specialised | £75.4 | £75.4 | £0.0 | £56.5 | -£18.9 | | |
| Forensics | £120.0 | £120.0 | £0.0 | £22.5 | £0.0 | | |
| Trust Total | £1,108.2 | £796.3 | -£311.9 | £723.9 | -£83.7 | | |

CQUIN Performance Year-end Forecast

| Quarter | Annual | Forecast | Variance | |
|-------------|----------|-------------|-----------|--|
| | £000s | Achievement | | |
| 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 Q3

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. A recovery plan has been produced and work is still ongoing with the Teams to achieve this CQUIN & to achieved crisis plan target in Q3

Report continues with Contract Issues

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 | £571.6 | -£428.4 | | |
| Calderdale | £0.0 | £0.0 | £0.0 | | |
| TOTAL £000s | £2,790.0 | £2,414.8 | -£375.2 | | |

* 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 | Comment |
|--------------|---------|-----------------|
| | £000s | |
| Barnsley CCG | £3.0 | MSK as at Mth 7 |

Contract Performance Information - based on month 7

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

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Contracting

Trust Summary by BDU - continued

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.

Wakefield 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.

Wakefield LD: Developing suite of data to reflect performance against service specification.

Calderdale LD: 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, CCCG requesting further details regarding funding impact. End of Nov.

No contentious elements relating to quality.

Mental Health Liaison: 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: Service to work up what £150k would fund in provision.

Rehab & Recovery: 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.

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

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 in next few months to achieve threshold.

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 CCCG. 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)

Currency Development - Payment by Results (PbR)

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. 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. 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 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

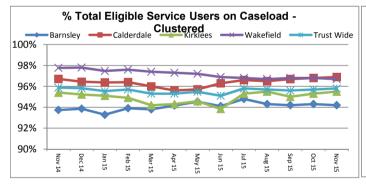
Review of Service Users and Clusters - agreed % to be reviewed by March 2016.

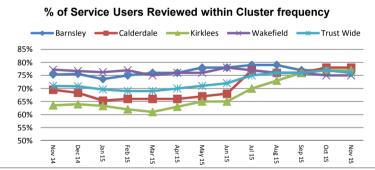
Adherence to Red Rules (assurance that the cluster is accurate, complete and of high quality)

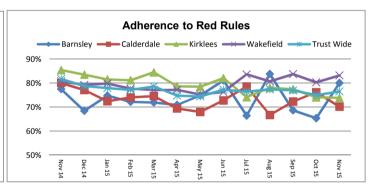
The West contract includes the development of a PbR Dashboard and this will be an interactive reporting tool. Developments are on track and requirements have been met to end of guarter 2.

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.

MH Currency Indicators - November 2015







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, the service are now planning to commence data collection in January 2016 which will then enable data to flow into the pilot.

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Currency Development - Payment by Results (PbR)

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 of 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.

The Trust is currently reviewing the Draft Reference Cost Guidance for 2015/16. Issues to note relate to IAPT services - proposal that these will be reported in a similar way to the main mental health cluster collection,

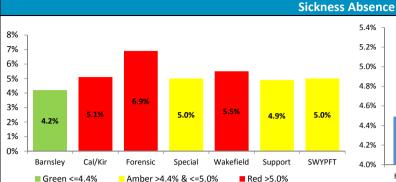
Community Currency Development

The trust recently attended a workshop event in London hosted by NHS England to begin looking at 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.

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.

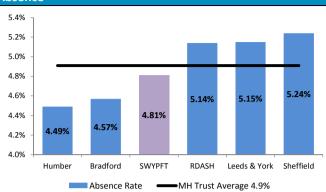
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Human Resources Performance Dashboard - November 2015

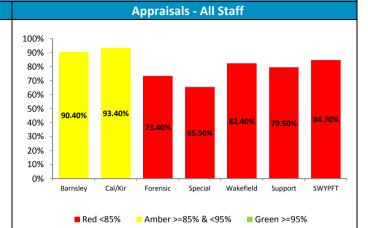


| | | Currei | nt Absen | ce Positio | n - Octor | er 2015 | |
|-------|----------|----------|----------|------------|-------------------|----------|----------|
| | Barn | Cal/Kir | Fore | Spec | Wake | Supp | SWYPFT |
| Rate | 4.6% | 6.8% | 5.6% | 4.6% | 6.3% | 5.5% | 5.4% |
| Trend | + | + | 1 | 1 | \leftrightarrow | 1 | → |

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



The above chart shows the YTD 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%.

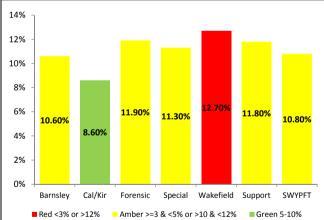


The above chart shows the YTD appraisal rates for all Trust staff to the end of November 2015.

The Trust's target for appraisals is 95% or above.

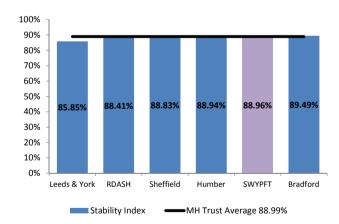
The total percentages have decreased slightly since the inclusion of Bands 1 to 5 in the figures in September but all areas have shown improvement each month since then.

Turnover and Stability Rate Benchmark



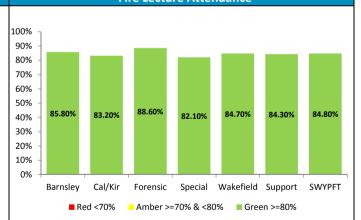
This chart shows the YTD turnover levels up to the end of November 2015.

The higher level of turnover in Wakefield BDU 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 chart shows the YTD fire lecture figures to the end of November 2015. The Trust continues to achieve its 80% target for fire lecture training, with all areas having maintained their figures above target for several months.

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Workforce - Performance Wall

| Trust Performance Wall | | | | | | | | | |
|---------------------------------------|--------|--------|--------|--------|--------|--------|--------|--|--|
| Month | | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | | |
| Sickness (YTD) | <=4.4% | 4.90% | 4.80% | 4.80% | 4.80% | 4.90% | 5.00% | | |
| Sickness (Monthly) | <=4.4% | 4.80% | 4.60% | 4.80% | 4.90% | 5.00% | 5.40% | | |
| Appraisals (Band 6 and above) | >=95% | 56.70% | 73.30% | 80.30% | 87.30% | 89.50% | 91.60% | | |
| Appraisals (Band 5 and below) | >=95% | 16.90% | 28.00% | 42.10% | 66.30% | 75.80% | 80.10% | | |
| Aggression Management | >=80% | 75.80% | 77.00% | 78.90% | 78.90% | 80.40% | 80.80% | | |
| Equality and Diversity | >=80% | 84.90% | 85.80% | 87.20% | 88.30% | 88.80% | 89.40% | | |
| Fire Safety | >=80% | 86.30% | 86.60% | 86.40% | 85.30% | 84.60% | 84.80% | | |
| Food Safety | >=80% | 69.00% | 70.70% | 71.80% | 73.10% | 74.30% | 74.10% | | |
| Infection Control and Hand Hygiene | >=80% | 82.80% | 83.70% | 85.30% | 85.50% | 85.60% | 84.90% | | |
| Information Governance | >=95% | 92.70% | 92.80% | 92.70% | 92.00% | 91.60% | 90.60% | | |
| Moving and Handling | >=80% | 75.30% | 77.40% | 79.30% | 80.40% | 82.10% | 83.00% | | |
| Safeguarding Adults | >=80% | 84.10% | 84.90% | 86.20% | 86.90% | 87.70% | 87.30% | | |
| Safeguarding Children | >=80% | 86.00% | 86.40% | 87.10% | 87.90% | 86.10% | 85.50% | | |
| Bank Cost | | £398k | £473k | £445k | £488k | £478k | £428k | | |
| Agency Cost | | £608k | £694k | £566k | £637k | £772k | £770k | | |
| Overtime Cost | | £16k | £8k | £26k | £38k | £30k | £37k | | |
| Additional Hours Cost | | £90k | £89k | £83k | £67k | £74k | £87k | | |
| Sickness Cost (Monthly) | | £504k | £458k | £473k | £483k | £481k | £553k | | |
| Vacancies (Non-Medical) (WTE) | | 328.68 | 351.53 | 353.84 | 351.54 | 324.2 | 306.5 | | |
| Business Miles | | 305k | 313k | 340k | 270k | 333k | 347k | | |

| Barnsley District | | | | | | | |
|---------------------------------------|--------|--------|--------|--------|--------|--------|--------|
| Month | | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 |
| Sickness (YTD) | <=4.4% | 4.30% | 4.10% | 4.20% | 4.10% | 4.20% | 4.20% |
| Sickness (Monthly) | <=4.4% | 4.10% | 3.90% | 4.20% | 4.10% | 4.20% | 4.60% |
| Appraisals (Band 6 and above) | >=95% | 58.90% | 78.00% | 83.60% | 90.50% | 92.10% | 94.40% |
| Appraisals (Band 5 and below) | >=95% | 18.80% | 32.10% | 51.90% | 73.40% | 83.30% | 87.50% |
| Aggression Management | >=80% | 81.80% | 82.00% | 84.30% | 83.60% | 83.50% | 82.90% |
| Equality and Diversity | >=80% | 86.70% | 87.60% | 89.20% | 90.40% | 90.70% | 91.30% |
| Fire Safety | >=80% | 84.20% | 85.10% | 86.60% | 85.90% | 84.70% | 85.80% |
| Food Safety | >=80% | 77.80% | 81.10% | 80.50% | 80.70% | 80.10% | 75.70% |
| Infection Control and Hand Hygiene | >=80% | 83.70% | 84.40% | 85.60% | 86.60% | 86.40% | 87.00% |
| Information Governance | >=95% | 90.40% | 91.50% | 91.80% | 91.70% | 92.10% | 90.90% |
| Moving and Handling | >=80% | 77.70% | 80.00% | 81.70% | 82.60% | 84.50% | 85.10% |
| Safeguarding Adults | >=80% | 86.80% | 87.30% | 87.90% | 88.90% | 90.00% | 89.30% |
| Safeguarding Children | >=80% | 86.10% | 86.70% | 88.30% | 89.20% | 87.90% | 87.40% |
| Bank Cost | | £71k | £67K | £70K | £84k | £85k | £75k |
| Agency Cost | | £214k | £151K | £77K | £157k | £119k | £200k |
| Overtime Cost | | £10k | £3K | £17K | £19k | £10k | £17k |
| Additional Hours Cost | | £43k | £40K | £47K | £31k | £35k | £40k |
| Sickness Cost (Monthly) | | £151k | £132K | £144K | £137k | £139k | £156k |
| Vacancies (Non-Medical) (WTE) | | 105.51 | 111.96 | 116 | 100.85 | 92.75 | 85.33 |
| Business Miles | | 128k | 139K | 137K | 111k | 144k | 148k |

| Calderdale and Kirklees District | | | | | | | | |
|------------------------------------|--------|--------|--------|--------|--------|--------|--------|--|
| Month | | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | |
| Sickness (YTD) | <=4.4% | 4.60% | 4.60% | 4.60% | 4.70% | 4.80% | 5.00% | |
| Sickness (Monthly) | <=4.4% | 4.20% | 4.60% | 4.40% | 5.20% | 5.20% | 6.80% | |
| Appraisals (Band 6 and above) | >=95% | 65.50% | 79.40% | 90.60% | 97.50% | 98.80% | 99.70% | |
| Appraisals (Band 5 and below) | >=95% | 22.70% | 33.90% | 49.50% | 76.50% | 85.00% | 88.80% | |
| Aggression Management | >=80% | 79.50% | 81.10% | 82.60% | 83.00% | 83.20% | 82.80% | |
| Equality and Diversity | >=80% | 85.90% | 86.60% | 87.70% | 89.80% | 90.60% | 91.60% | |
| Fire Safety | >=80% | 88.60% | 87.70% | 87.20% | 85.40% | 83.00% | 83.20% | |
| Food Safety | >=80% | 64.90% | 65.90% | 66.80% | 67.70% | 69.50% | 70.20% | |
| Infection Control and Hand Hygiene | >=80% | 84.30% | 85.70% | 87.20% | 88.60% | 88.60% | 90.00% | |
| Information Governance | >=95% | 94.60% | 93.70% | 93.60% | 92.80% | 90.40% | 89.80% | |
| Moving and Handling | >=80% | 72.20% | 75.40% | 77.50% | 78.80% | 81.30% | 82.70% | |
| Safeguarding Adults | >=80% | 80.90% | 81.40% | 83.00% | 85.20% | 86.60% | 86.80% | |
| Safeguarding Children | >=80% | 85.30% | 86.00% | 85.50% | 87.20% | 86.20% | 86.50% | |
| Bank Cost | | £104k | £131K | £123K | £134k | £117k | £124k | |
| Agency Cost | | £57k | £167K | £110K | £141k | £199k | £173k | |
| Overtime Cost | | £3k | £2K | £1K | £1k | £1k | £2k | |
| Additional Hours Cost | | £5k | £7K | £4K | £2k | £2k | £3k | |
| Sickness Cost (Monthly) | | £90K | £95K | £88K | £104k | £102k | £147k | |
| Vacancies (Non-Medical) (WTE) | | 83.33 | 77.32 | 82.59 | 82.93 | 71.14 | 75.66 | |
| Business Miles | | 61k | 64K | 77K | 57k | 65k | 73k | |

| Forensic Services | | | | | | | |
|-------------------------------|--------|---------|----------|---------|---------|---------|---------|
| Month | | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 |
| Sickness (YTD) | <=4.4% | 8.20% | 7.90% | 7.60% | 7.30% | 7.20% | 7.00% |
| Sickness (Monthly) | <=4.4% | 8.20% | 7.30% | 6.60% | 6.00% | 6.70% | 5.60% |
| Appraisals (Band 6 and above) | >=95% | 43.10% | 58.70% | 65.20% | 68.60% | 70.00% | 74.70% |
| Appraisals (Band 5 and below) | >=95% | 6.80% | 14.00% | 29.30% | 61.00% | 66.20% | 71.50% |
| Aggression Management | >=80% | 77.00% | 78.80% | 78.40% | 77.40% | 78.20% | 80.70% |
| Equality and Diversity | >=80% | 89.30% | 89.70% | 90.20% | 89.20% | 90.40% | 92.40% |
| Fire Safety | >=80% | 88.00% | 88.20% | 87.20% | 85.50% | 87.30% | 88.60% |
| Food Safety | >=80% | 57.60% | 59.50% | 63.20% | 65.40% | 70.60% | 73.50% |
| Infection Control and Hand | >=80% | 84.90% | 86.00% | 87.80% | 85.80% | 85.30% | 84.40% |
| Hygiene | 050/ | 00.4004 | 0.4.4007 | 00.700/ | 00 700/ | 04 700/ | 04 0004 |
| Information Governance | >=95% | 93.40% | 94.10% | 92.70% | 90.70% | 91.70% | 91.90% |
| Moving and Handling | >=80% | 80.20% | 81.50% | 83.90% | 84.00% | 85.80% | 87.60% |
| Safeguarding Adults | >=80% | 87.00% | 87.40% | 88.40% | 85.50% | 88.50% | 89.90% |
| Safeguarding Children | >=80% | 85.00% | 85.10% | 85.70% | 84.50% | 85.30% | 85.90% |
| Bank Cost | | £82k | £95K | £99K | £114k | £114k | £97k |
| Agency Cost | | £91k | £93K | £77K | £96k | £122k | £68k |
| Additional Hours Cost | | £3k | £OK | £0K | £0k | £0k | £0k |
| Sickness Cost (Monthly) | | £77k | £65K | £58K | £56k | £58k | £51k |
| Vacancies (Non-Medical) (WTE) | | 16.7 | 20.56 | 28.42 | 14.34 | 24.94 | 24.54 |
| Business Miles | | 4k | 3K | 6K | 3k | 9k | 9k |

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Workforce - Performance Wall cont...

| Specialist Services | | | | | | | |
|---------------------------------------|--------|--------|--------|--------|--------|--------|--------|
| Month | | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 |
| Sickness (YTD) | <=4.4% | 5.70% | 5.40% | 5.20% | 5.10% | 5.10% | 5.00% |
| Sickness (Monthly) | <=4.4% | 5.50% | 4.80% | 4.50% | 5.00% | 4.70% | 4.60% |
| Appraisals (Band 6 and above) | >=95% | 33.50% | 39.80% | 45.40% | 60.50% | 68.70% | 73.80% |
| Appraisals (Band 5 and below) | >=95% | 9.40% | 13.10% | 21.50% | 44.00% | 47.50% | 53.60% |
| Aggression Management | >=80% | 70.60% | 70.30% | 73.80% | 73.40% | 76.40% | 77.10% |
| Equality and Diversity | >=80% | 87.30% | 88.20% | 89.60% | 89.60% | 89.90% | 90.00% |
| Fire Safety | >=80% | 85.10% | 83.70% | 85.90% | 82.20% | 83.20% | 82.10% |
| Food Safety | >=80% | 72.70% | 72.20% | 72.20% | 69.10% | 69.00% | 71.20% |
| Infection Control and Hand Hygiene | >=80% | 81.10% | 81.60% | 83.30% | 83.80% | 84.00% | 84.30% |
| Information Governance | >=95% | 91.10% | 90.10% | 90.80% | 89.10% | 90.10% | 90.20% |
| Moving and Handling | >=80% | 74.80% | 76.70% | 79.70% | 82.20% | 82.50% | 83.10% |
| Safeguarding Adults | >=80% | 80.40% | 81.50% | 83.20% | 84.70% | 83.20% | 82.00% |
| Safeguarding Children | >=80% | 84.30% | 82.70% | 82.90% | 85.40% | 84.90% | 81.30% |
| Bank Cost | | £33k | £44k | £33k | £38k | £31k | £28k |
| Agency Cost | | £195k | £195k | £208k | £127k | £228k | £216 |
| Overtime Cost | | £2k | £2k | £2k | £2k | £1k | £1k |
| Additional Hours Cost | | £7k | £11k | £5k | £7k | £5k | £7k |
| Sickness Cost (Monthly) | | £56k | £50k | £56k | £54k | £52k | £55k |
| Vacancies (Non-Medical) (WTE) | | 52.47 | 52.66 | 44.93 | 50.41 | 45.31 | 44.39 |
| Business Miles | | 38k | 32k | 30k | 29K | 30k | 39k |

| Support Services | | | | | | | |
|---------------------------------------|--------|--------|--------|--------|--------|--------|--------|
| 5 Month | | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 |
| Sickness (YTD) | <=4.4% | 4.10% | 4.30% | 4.60% | 4.70% | 4.70% | 4.80% |
| Sickness (Monthly) | <=4.4% | 4.30% | 4.50% | 5.40% | 5.30% | 4.90% | 5.50% |
| Appraisals (Band 6 and above) | >=95% | 66.80% | 86.20% | 91.80% | 94.80% | 95.90% | 96.50% |
| Appraisals (Band 5 and below) | >=95% | 11.90% | 20.70% | 26.60% | 54.80% | 71.10% | 72.70% |
| Aggression Management | >=80% | 57.10% | 60.10% | 65.10% | 68.60% | 72.40% | 74.30% |
| Equality and Diversity | >=80% | 73.20% | 74.60% | 76.20% | 78.10% | 78.70% | 78.90% |
| Fire Safety | >=80% | 87.50% | 87.70% | 85.30% | 86.00% | 84.60% | 84.30% |
| Food Safety | >=80% | 90.20% | 95.50% | 95.50% | 93.60% | 90.10% | 89.20% |
| Infection Control and Hand Hygiene | >=80% | 78.90% | 79.90% | 80.90% | 81.20% | 82.30% | 76.80% |
| Information Governance | >=95% | 94.80% | 94.90% | 94.60% | 92.80% | 91.70% | 89.60% |
| Moving and Handling | >=80% | 74.90% | 76.70% | 77.70% | 78.80% | 81.10% | 81.50% |
| Safeguarding Adults | >=80% | 81.60% | 83.60% | 84.70% | 84.80% | 84.90% | 84.50% |
| Safeguarding Children | >=80% | 87.80% | 88.70% | 89.80% | 90.30% | 83.70% | 82.80% |
| Bank Cost | | £38k | £40k | £36k | £35k | £60k | £14k |
| Agency Cost | | £27k | £16k | £27k | £103k | £71k | £40k |
| Additional Hours Cost | | £23k | £21k | £18k | £19k | £22k | £19k |
| Sickness Cost (Monthly) | | £64k | £63k | £75k | £71k | £62k | £69k |
| Vacancies (Non-Medical) (WTE) | | 24.8 | 36.6 | 36.53 | 42.54 | 51.48 | 36.73 |
| Business Miles | | 34k | 36k | 47k | 38k | 42k | 35k |

| MALE COLUMN ASSESSMENT | | | | | | | |
|---------------------------------------|--------|--------|--------|--------|--------|--------|--------|
| Wakefield District | | | | | | | |
| Month | | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 |
| Sickness (YTD) | <=4.4% | 5.30% | 5.10% | 5.20% | 5.30% | 5.40% | 5.50% |
| Sickness (Monthly) | <=4.4% | 5.10% | 4.80% | 5.30% | 5.70% | 5.70% | 6.30% |
| Appraisals (Band 6 and above) | >=95% | 54.80% | 78.30% | 83.20% | 87.40% | 88.10% | 90.20% |
| Appraisals (Band 5 and below) | >=95% | 25.60% | 41.40% | 50.00% | 64.34% | 68.40% | 76.70% |
| Aggression Management | >=80% | 80.40% | 81.00% | 81.30% | 79.30% | 82.90% | 82.80% |
| Equality and Diversity | >=80% | 89.50% | 89.80% | 91.70% | 91.70% | 92.20% | 92.20% |
| Fire Safety | >=80% | 87.10% | 88.70% | 86.20% | 84.60% | 86.10% | 84.70% |
| Food Safety | >=80% | 62.40% | 60.30% | 61.70% | 67.60% | 68.60% | 69.70% |
| Infection Control and Hand Hygiene | >=80% | 83.20% | 83.30% | 86.50% | | 83.80% | 81.80% |
| Information Governance | >=95% | 94.20% | 93.00% | 92.90% | 93.30% | 92.60% | 91.50% |
| Moving and Handling | >=80% | 70.60% | 71.10% | 73.50% | 73.60% | 74.00% | 75.70% |
| Safeguarding Adults | >=80% | 85.70% | 86.70% | 88.80% | 89.70% | 89.70% | 88.90% |
| Safeguarding Children | >=80% | 86.10% | 86.50% | 86.60% | 86.40% | 85.60% | 85.30% |
| Bank Cost | | £69k | £97k | £85k | £83k | £71k | £90k |
| Agency Cost | | £24k | £71k | £67k | £12k | £34k | £73k |
| Additional Hours Cost | | £9k | £9k | £8k | £9k | £9k | £13k |
| Sickness Cost (Monthly) | | £59k | £54k | £57k | £60k | £66k | £75k |
| Vacancies (Non-Medical) (WTE) | | 47.87 | 50.63 | 43.37 | 55.47 | 36.58 | 34.71 |
| Business Miles | | 40k | 40k | 42k | 31k | 43k | 44k |

Produced by Performance & Information 14 of 16

Publication Summary

Monitor

Quarterly report on the performance of the NHS foundation trusts and NHS trusts: 6 months ended 30 September 2015

This report finds that NHS providers - both trusts and foundation trusts - are facing significant challenges on both finance and operational performance against key national standards at the mid-point of the year. The figures show that it recorded a half year (1 April to 30 September 2015) deficit of £1.6 billion. While between 1 July to 30 September 2015 - many providers struggled to achieve several key national healthcare standards.

Click here for report

Monitor

Rules for all agency staff working in the NHS

This collection of guidance and resources aims to provide support on the new cap on the amount of money that trusts can pay per hour for agency staff within the NHS which was implemented with effect from 23 November 2015.

Click here for report

Monitor

NHS foundation trusts: annual reporting manual 2015/16

All NHS foundation trusts must publish annual reports and accounts to allow scrutiny of the year's operations and outcomes. This guidance outlines the process foundation trusts should follow when producing and submitting these documents.

Click here for link

National Institute for Health and Care Excellence (NICE)

Transition between inpatient hospital settings and community or care home settings for adults with social care needs

This guideline covers the transition between inpatient hospital settings and community or care homes for adults with social care needs. It aims to improve people's experience of admission to, and discharge from, hospital by better coordination of health and social care services.

Click here for guidance

Produced by Performance & Information 15 of 16

Glossary

| ADHD | Attention deficit hyperactivity disorder | KPIs | Key Performance Indicators |
|-------------|-----------------------------------------------|---------|-----------------------------------------------------|
| ASD | Autism spectrum disorder | LD | Learning Disability |
| AWA | Adults of Working Age | MAV | Management of Aggression and Violence |
| AWOL | Absent Without Leave | MBC | Metropolitan Borough Council |
| AQP | Any Qualified Provider | МН | Mental Health |
| B/C/K/W | Barnsley, Calderdale, Kirklees, Wakefield | мнст | 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 |
| C&K | Calderdale & Kirklees | 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 | 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 |
| 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 |
| 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 |

Produced by Performance & Information