

Trustwide	13-14 Mar	Apr	May	14-15 Jun	Jul	Aug
Friends and Family Score	43	53	49	50	60	55
Response Rate	10.2 %	10.1 %	11.2 %	11.5 %	12.3 %	12.8 %
CQC Compliance	92.3 %	92.4 %	93.1 %	92.8 %	92.8 %	92.8 %
Submission Rate	85.9 %	88.1 %	86.6 %	89.6 %	92.4 %	87.9 %
Records Management	84.1 %	86.2 %	87.4 %	86.9 %	85.7 %	
Submission Rate	90.4 %	92.6 %	92.7 %	95.0 %	92.5 %	
Contract and Monitor Compliance:						
Key Quality Indicators	0.25	0.25	0	0	1	1
CQUIN Delivery						
Friends & Family Test - Service Users						
Friends & Family Test - Staff						
Cardio Metabolic Assessments						
Care Plans shared with GPs						
Safety Thermometer						
Local Scheme - Overall						
Local Scheme - Areas:						
BANES						
Bristol						
N.Somerset						
S.Gloucestershire						
Swindon						
Wiltshire						
Specialised Services						
Secure Services						



## Scorecard - August 2014

Produced on 04/09/2014

Staffing:	
Supervision	72.4 % 75.4 % 75.6 % 71.6 % 73.7 % 65.4 %
Appraisal	83 % 83.3 % 87.4 % 88.9 % 89.5 % 89.3 %
Total Sickness Absence	3.92 % 3.88 % 4 % 4.28 % 4.53 %



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## Definitions

Friends and Family Test	Understanding patient experience of services is central to the delivery of health care. The Friends and Family Test provides "real time" feedback from patients and service users about their experience of our services.
	Each month, the Friends & Family Test score is calculated as follows: the proportion of 'extremely likely' responses received MINUS the proportion of neutral and negative responses received.
	Scores range from -100 to +100. Any score over 0 indicates that more people would recommend the service than would not.
Friends and Family Response Rate	This value shows what percentage of the Friends & Family surveys offered to service users were completed and returned. The colour status works as follows: Green = 15% or higher Amber = 10% to 15% Red = below 10%
CQC Compliance	The essential standards of quality and safety are central to the work of the Care Quality Commission in regulating health and adult social care. Each of the standards has an associated outcome that we expect all people who use services to experience as a result of the care they receive. These standards apply in all settings including community settings. This value is the CQC Compliance, shown as a percentage. It is calculated as follows per month:  The number of questions marked as Compliant ('Yes') DIVIDED BY the total number of questions asked.
CQC Compliance Submission Rate	The submission rate provides an indication of how representative the CQC Compliance performance is, based on the proportion of services who completed the audit. The percentage submission rate is calculated as follows: Number of teams and wards who submitted / Number of teams and wards who are expected to submit
Records Management	The principles of good record keeping are well established and should reflect the core values of individuality and partnership working. Good record keeping is an integral part of healthcare practice, and is essential to the provision of safe and effective care.
	Shows the % of the specified criteria met for records of service users on the caseload in the previous month. Based on a random sample of five service users who have previously had at least three face to face contacts or were admitted for at least 24 hours.
Records Management Submission Rate	The submission rate provides an indication of how representative the Records Management performance is, based on the proportion of services who completed the audit. The percentage submission rate is calculated as follows: Number of teams and wards who submitted (and were expected to submit) / Number of teams and wards who are expected to submit
Key Performance Indicators	Each year, the Department of Health (DH) sets out a range of service quality indicators that Trusts are required to monitor their services against. Many of these are mandated by the DH and are included in key guidance and documentation, such as the Standard NHS Contract, the NHS Outcomes Framework and Monitors Risk Assessment Framework. Each of these indicators is intended to shed light on an aspect of service delivery / quality, and it is in this spirit that they are included here.
	This domain provides, in a single line, an aggregated view of how the Trust performs against these indicators. The aggregated position is generated by looking at each indicator separately and allocating a 'risk score' where performance falls below the required target threshold. These scores are then added together and RAG rated as follows:  0 = GREEN  1 - 3 = AMBER
	4 or more = RED
CQUIN Delivery	The Commissioning for Quality and Innovation (CQUIN) framework enables Commissioners to reward excellence by linking a portior of a Trust's income to the achievement of local quality goals. Commissioners and the Trust work together to agree a series of CQUIN schemes which are then delivered throughout the year; focussing on quality and innovation.
Supervision	It is now widely accepted and evidenced that good human resource practice (which includes supervision) is linked with better outcomes for patients, staff and team culture.
	The monthly supervision performance is the number of staff who received any type of formal supervision (as defined in AWP's Staff Supervision Policy) during that month as a percentage of the total number of staff that month.
	The targets are currently: Green: 85% and above Amber: 70% - 85% Red: Below 70%
Appraisal	It is now widely accepted and evidenced that good human resource practice (which includes appraisal and personal development review) is linked with better outcomes for patients, staff and team culture. This value shows the percentage of staff who have received an appraisal within the last 12 months.
Total Sickness	Sickness and absence rates are an important indicator of staff health and wellbeing. Moreover, high levels of sickness will have an impact on staffing levels more generally in a clinical area and is included as a key metric because of the correlation between poor staffing levels and failing organisations. Shows the total percentage of lost working time due to both Long Term and Short Term Sickness in the last month.
Finance	This value shows the budget variance for the month. The Red/Amber/Green status works as follows:
	Green - Favourable variance.  Amber - Adverse variance by less than the larger of 5% or £500, but still less than £5000.  Red - Adverse variance by greater than the larger of 5% or £500, or less than 5% but greater than £5000.