

Enabling and empowering people to reach their potential and live fulfilling lives

Summary Report – Trust Board Meeting (Part 1)	Date: 2nd May 2013
Report Title: Quality and Performance Dashboard	
Agenda Item: 12	Enclosures: NHS Contract Scorecard (appendices A&B) 2012-13 M12
Sponsor: Interim Director of Business Development	Presenter: Interim Director of Business Development
Report Author: Head of Information & Performance Management	
Report discussed previously at:	

Purpose of the Report and Action required								
To report to the Board on the Trust's: <ol style="list-style-type: none"> 1. Month 12 performance position against key indicators included in the balanced scorecard, including update on the two indicators where we are failing to meet the standard set 2. 2012/13 contractual position for penalties. 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Approval</td><td style="width: 20px;"></td></tr> <tr><td style="text-align: center;">Discussion</td><td style="text-align: center;">Y</td></tr> <tr><td style="text-align: center;">Information</td><td style="text-align: center;">Y</td></tr> </table>	Approval		Discussion	Y	Information	Y	
Approval								
Discussion	Y							
Information	Y							

Executive Summary of Key Issues
<p>Performance</p> <p>Whilst we are developing the IQ (Information for Quality) system the Trust is continuing to measure its performance against the indicators that were agreed between the Trust and its Commissioners for 2012-13. There are two indicators where the Trust continues to achieve slightly below the target and improvement initiatives have been implemented by the delivery units.</p> <p>Whilst results for the full quarter position for these remains below target; they are improving. At month 12:</p> <ul style="list-style-type: none"> • Providing carers with a carer care plan within 4 weeks of assessment achieved 90% (95%) • Ensuring a service user has full CPA induction within 4 weeks of assessment achieved 93% (98%) <p>Penalty update</p> <p>The Trust is pleased to note that Commissioners in B&NES, Swindon and Wiltshire have not deducted or separately billed for their share of penalties (where the full year total was £307,000) for 2012-13. This brings them into line with the approach for BNSSG, where penalty totals were never due to be levied.</p> <p>For 2013-14, financial penalty clauses are only included in the Contract, where they have been defined nationally.</p>

Quality and Performance Dashboard

Which Strategic Objective does this paper address	
A sustainable value for money business	Y
Excellent service user access and experience	Y
Excellent partnership working with other organisations	Y
Effective engagement and improvement in staff satisfaction	Y

Link to Fit for the Future Implementation Plan	
Specify objective number	

Recommendations to other committees
n/a

Recommendation/Decision
The Board is recommended to accept the report

1. Introduction

- 1.1. This paper highlights the contractual indicators where we are not achieving our agreed target.
- 1.2. **Penalties B&NES, Swindon and Wiltshire:** it is pleasing to note that at the end of the year, Commissioners in B&NES, Swindon and Wiltshire have not deducted their shares of the penalty total (£307,000), nor have they billed separately. This approach is very much in the spirit of the Contract, which states that 'penalties are only levied as a last resort and are used to reinvest in services' and is welcomed by the Trust.
- 1.3. **Penalties BNSSG:** the full year penalty value for BNSSG was £256,250. Which Commissioners agreed prior to 2012-13 would not be levied.
- 1.4. **Penalties 2013-14:** for 2013-14, the Trust and Commissioners have agreed to only include a financial penalty clause where one is imposed nationally. The Trust does not plan to fail against any of these service standards, and therefore is not budgeting for any potential loss of income.

2. Performance improvement: delivery for two key indicators

- 2.1 **CPA induction:** The Trust's performance is noted in table 1 below. As can be seen, the Trust remains 5% below target at 93%; however performance continues in the right direction and now shows as Amber for the first time.
- 2.2 **Carer care plans:** As with CPA induction, the M12 performance also shows improvement, up 3% from M11 to 90%. As noted last month, this figure includes an element of under-performance from prior to the improvement initiatives being put in place. Performance that excludes that shows 93%.

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Table 1: M12 performance

SBU	Carer Care Plan	CPA induction
AOWA	76% (50 / 66)	91% (315 / 345)
L3	93% (309 / 333)	97% (194 / 200)
Total	90%	93%

3. Performance against other key indicators

3.1 As can be seen in table 2 below, there are a number of additional indicators that remain off target (some of which are penalty indicators). Key things to note:

- **Referral to assessment (RTA):** M12 saw 4 breaches of the 4 week wait, overall compliance to the standard remains high at 99%.
- **Active Care Coordination:** the Trust remains marginally below target at 97.7%, with 4 out of 6 Local Delivery Units above 98%.
- **AWOL (Contractual breaches):** M12 saw a rise in the number of AWOL events where the core standards of care were not in place, up to 6, from 3 in M11.
- **Staff indicators:** performance against 'sickness / absence' and 'appraisal' indicators remains below target. Both have been identified as 'indicators of quality' and are core elements of the new IQ (Information for Quality) system.

Table 2: Key indicators off target (area level % only included if off target)

Source	Indicator	Trust level (M12)
Contract Penalty	1.01a: Maximum 4 week wait for assessment	4 (0)
Contract Penalty	2.1.03: Active Care Coordination	97% (98%)
Contract Penalty	2.3.09: AWOL (contractual breaches)	6 (0)
Organisational target	2.2.17: CPA management	94% (98%)
Organisational target	5.05: Sickness / absence rates	4.97% (4.60%)
Organisational target	5.06 Staff appraisal	70% (85%)