

Scorecard - July 2013

Produced on 07/08/2013

| Trustwide                               | 12-13  |        |        | 13-14  |        |        |
|---|--------|--------|--------|--------|--------|--------|
|   | Feb    | Mar    | Apr    | May    | Jun    | Jul    |
| <b>Friends and Family:</b>              |        |        |        |        |        |        |
| F&F Score                               |        |        | 48     | 39     | 47     | 51     |
| F&F Response Rate                       |        |        |        |        | 2.8 %  | 3.9 %  |
| <b>CQC Compliance</b>                   |        |        |        |        |        |        |
|   |        |        | 82.8 % | 88.0 % | 89.6 % | 91.1 % |
| <b>Records Management</b>               |        |        |        |        |        |        |
|   |        | 67.1 % | 78.4 % | 81.1 % | 81.6 % |        |
| <b>Contract and Monitor Compliance:</b> |        |        |        |        |        |        |
| Key Quality Indicators                  | 0      | 0      | 0      | 0      | 0      | 0      |
| CQUIN Delivery                          |        |        |        |        |        |        |
| Safety Thermometer                      |        |        |        |        |        |        |
| Friends and Family Test                 |        |        |        |        |        |        |
| CPA Practice Development                |        |        |        |        |        |        |
| Mencap Charter (Community)              |        |        |        |        |        |        |
| National Early Warning Score (NEWS)     |        |        |        |        |        |        |
| Patient Reported Outcome Measure (PROM) |        |        |        |        |        |        |
| Physical Health Improvement (Inpatient) |        |        |        |        |        |        |
| <b>Staffing:</b>                        |        |        |        |        |        |        |
| Supervision                             |        | 3.6 %  | 46.2 % | 47 %   | 46.6 % | 47.4 % |
| Appraisal                               | 66.6 % | 65.9 % | 66.3 % | 66.7 % | 66.8 % | 67.4 % |
| <b>Total Sickness Absence</b>           |        |        |        |        |        |        |
|   | 5.3 %  | 5.1 %  | 4.7 %  | 4.6 %  | 4.8 %  |        |
| <b>Finance</b>                          |        |        |        |        |        |        |
|   |        |        |        |        |        |        |

# Scorecard - July 2013

Produced on 07/08/2013

## Definitions

|   |  |
|---|--|
| <b>Friends and Family Test</b>          | <p>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.</p> <p>Each month, the Friends &amp; Family Test score is calculated as follows: the proportion of 'extremely likely' responses received MINUS the proportion of neutral and negative responses received.</p> <p>Scores range from -100 to +100. Any score over 0 indicates that more people would recommend the service than would not.</p>  |
| <b>Friends and Family Response Rate</b> | <p>This value shows what percentage of the Friends &amp; 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%</p>   |
| <b>CQC Compliance</b>                   | <p>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.</p> <p>This value is the CQC Compliance, shown as a percentage.</p> <p>It is calculated as follows per month:<br/>The number of questions marked as Compliant ('Yes') DIVIDED BY the total number of questions asked.</p>   |
| <b>Records Management</b>               | <p>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.</p> <p>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.</p>  |
| <b>Key Performance Indicators</b>       | <p>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.</p> <p>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:</p> <p>0 = GREEN<br/>1 - 3 = AMBER<br/>4 or more = RED</p> |
| <b>CQUIN Delivery</b>                   | <p>The Commissioning for Quality and Innovation (CQUIN) framework enables Commissioners to reward excellence by linking a portion 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.</p>   |
| <b>Supervision</b>                      | <p>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.</p> <p>This value shows the percentage of substantive staff who have received at least one supervision event within the last 30 days.</p>   |
| <b>Appraisal</b>                        | <p>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.</p> <p>This value shows the percentage of staff who have received an appraisal within the last 15 months.</p>   |
| <b>Total Sickness</b>                   | <p>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.</p> <p>Shows the total percentage of lost working time due to both Long Term and Short Term Sickness in the last 3 months.</p>   |
| <b>Finance</b>                          | <p>This value shows the budget variance for the month. The Red/Amber/Green status works as follows:</p> <p>Green - Favourable variance.<br/>Amber - Adverse variance by less than the larger of 5% or £500, but still less than £5000.<br/>Red - Adverse variance by greater than the larger of 5% or £500, or less than 5% but greater than £5000.</p>  |