

'You matter, we care'

Trust Board Meeting (Part 1)	Date: 26 th February 2014
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Title:	Quality & Performance Report
Item:	BD/13/338

Executive Director lead and presenter	Director of Operations
Report author(s)	Head of Information & Performance, Head of Quality Information & Systems, Workforce Planning Manager

History:	ET
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This report is for:	
Decision	
Discussion	
To Note	X

Executive Summary of key issues
<p>Friends & Family: continued positive score overall, and improvement in response rates for both inpatient and community services.</p> <p>CQC compliance and Records Management: positive results continue in both areas, with work on-going to reduce perceived subjectivity within each domain (strengthening levels of assurance).</p> <p>Contract and Monitor: the Trust remains compliant with all metrics in Monitor's Risk Assurance Framework, and 13 of 16 additional (locally agreed) indicators also on or above target. All 7 CQUIN schemes are forecasted for full delivery.</p> <p>Supervision & appraisal: rates continue to improve with locality and back office areas showing 85% supervision rates, further improvement in appraisal rates also seen.</p> <p>Sickness: dropped back to 5%</p>

This report addresses these Strategic Priorities:	
We will deliver the best care	X
We will support and develop our staff	X

We will continually improve what we do	X
We will use our resources wisely	X
We will be future focussed	X

1. Introduction

This report provides commentary on the month nine position for each of the seven 'domains of quality' reported in the scorecard (and within the Trust's IQ system). Appendices A and B provide the Trust level scorecard and the Monitor Compliance Dashboard for reference. The body of this report is organised under the seven domain headings.

2. Friends and Family Test (Quality and Standards Committee)

Service users are asked if they wish to respond to the following question: **“how likely are you to recommend this service to friends and family if they needed similar care and treatment”**

Indicator	Month				Commentary
	8	9	10	Q4 forecast	
Score Trust total	45	37	49	Remains positive	The result for January is +49, where the range of possible scores is -100 to +100. Community scores remain higher than those for inpatient services, with this split now reported within IQ.
Inpatient	21	24	32		
Community	55	40	53		
Response Rate (Target 15%)	7.2%	8.3%	10.4%	14%	The Trust's methodology for calculating response rates remains experimental as national guidance is awaited (due in 2014). No benchmark data from other MH Trusts has been published. The response rate has increased month on month since April 2013 and now shows as Amber against the 15% target. A chart showing the trend in response rates is included in Appendix C below, which has been used to forecast the likely year end position (14% overall).
Community	5.8%	6.7%	8.4%		
Inpatient	31%	34%	41%		

3. CQC Compliance (Quality and Standards Committee)

Indicator	Month				Commentary
	8	9	10	Q4 forecast	
CQC Compliance	93%	92.7%	92.9%	c95%	M10 results remain consistent with previously reported compliance levels. The four lowest scoring outcomes are presented here for information.
Outcome 1: respecting & involving people	89.9%	88.7%	88.3%		Localities continue to develop their approach to peer reviewing submissions, either by ensuring that self-reported results are reviewed by a third party prior to submission or by all audits being completed by managers from other teams or wards within the locality.
Outcome 2: consent to care and treatment	84%	84.2%	83.9%		
Outcome 7: safe guarding	84.2%	84.9%	85.4%		
Outcome 21: Records	90.2%	89.7%	92.6%		

4. Records Management (Quality & Standards Committee)

Indicator	Month			Commentary	
	7	8	9	Q4 forecast	
Records Management (Target 75%)	86.9%	86.8%	86.8%	Green	The December audit saw all ten elements achieve 75% or more at Trust level, with six out of ten areas compliant across all delivery units. The three lowest scoring elements are presented here for information.
Client & carer understanding of assessment	81.2%	79.5%	80.2%		Following concern raised at the Quality Huddle about perceived subjectivity in elements of the Records Management audit, the lead for this element of IQ has reviewed the current guidance and drafted a version that makes things clearer. These revisions will be released in mid-March in readiness for the audit in early April.
Formulation / summary	81.4%	79.5%	78%		Further to this strengthening of the guidance, the IQ Project team are also considering whether other areas of the clinical record can be incorporated into the audit, which will be considered in early 2014-15.
Crisis, relapse and contingency plans	79.4%	78%	79%		

5. Contract / Monitor (Finance & Planning Committee)

For the purposes of this report, performance is split into two sections. Firstly, those indicators that are included in the Monitor Compliance Framework and secondly those indicators that are either National requirements or those that were locally agreed.

5.1. Monitor Compliance Dashboard

The Trust's most recently published governance and financial risk scores are noted below. Detailed breakdown is included as appendix B.

Area	M5	M6	M7	M8	M9	M10	Q4 forecast	Commentary
Governance risk score	0	0	0	0	0	0	0	All indicators on or above target
Finance risk score	4	4	4	4	4	4	See separate Finance paper.	

5.2. CQUIN delivery

As can be seen in Appendix A, the Trust is forecasting full delivery of all seven of the CQUIN schemes and the Trust has presented evidence to Commissioners to support this position.

Before final sign off, Commissioners are awaiting an outcome report for the PROM / PREM scheme, which due to the timeframe for the Q3 audit has not yet been complete. It is expected that this final report will provide evidence of the Trust's compliance with requirements, hence the green rated performance at M10.

5.3. Nationally and locally defined key quality indicators

13 of the 16 indicators in this section are on or above target. Key items to note are included below.

Indicator	Month				Commentary
	8	9	10	Q4 forecast	
Discharge Protocols: summaries to GP & service users (Target 98%)	A	A	A	A	<p>Overall performance remains good, with 95% of discharge letters being sent in a timely fashion. Localities range between 92% and 97.8%.</p> <p>In all areas; under performance is associated with a small numbers of breaches (perhaps 1 or 2) in a handful of teams / wards. These small numbers then add up to a total sufficient to pull performance below 98% within the locality (and the Trust). Importantly, this does not indicate a systematic issue with creating and sending summaries, just an occasional failure in the process (possibly for valid clinical reasons).</p> <p>This being the case, the Trust is proposing to re-set the target for 2014-15 to 95%. This will afford individual services a margin of error that seems appropriate and will allow the Trust (and Commissioners) to focus on the quality of discharge summaries, rather than simply the process of uploading letters into RiO.</p> <p>The forecast to quarter end remains amber based on the 98% target currently in place.</p>
Care clusters: timeliness of review (Target 95%)	R	R	R	R	<p>The Trust's overall position at M10 is c90%.</p> <p>The issue of the appropriateness of the national 'cluster review periods' has been discussed with Commissioners, via CQPM, and agreement reached that the Trust should vary from the national definitions in several key clusters (19 and 21, and possibly 20).</p> <p>The Trust will now update systems to this effect to ensure that staff do not feel under pressure to re-cluster more than is clinically necessary. Implementing this change might take a month or so to achieve, so the forecast to quarter end remains red. This forecast will be updated as soon as the change is made and overall impact understood.</p>
Service users in settled accommodation (Target 70%)	G	G	A	A	<p>Performance for M10 was 1% off the 70% target.</p> <p>At locality level, performance continues to be worse in some areas than others (e.g. Bristol); however in these areas AWP continues to work in partnership with all local agencies to support service users into long term accommodation.</p> <p>As this indicator is a measure of social inclusion and not service quality per se, there is no direct clinical risk associated with amber rated performance.</p>

6. Supervision & Appraisal (Employee Strategy & Engagement Committee)

Measure	Month				Commentary
	8	9	10	Q4 forecast	
Supervision	66.2%	71.7%	77.5%	80%	<p>A chart showing the trend in recorded supervision is included as Appendix D and shows the upward trend over the last six months.</p> <p>As can be seen, both operational services and the 'back office' are now above 85%, and it is the performance of the Bank that is pulling the overall Trust performance down. Arrangements for the supervision of Bank staff are being reviewed to understand what actions need to be taken to ensure that staff on the Bank receive appropriate levels of supervision.</p> <p>For this reason, the forecast has been revised to 80% for Q4. Importantly however, non-Bank teams are expected to remain above the 85% target.</p>
Appraisal	68%	69.4%	72.6%	80%	<p>Rates of appraisal are not improving as swiftly as supervision; however a further 3% improvement was seen between M9 and M10. The new IT system will be released in early April to help managers monitor when appraisals are due, this coupled with the development of the new appraisal approach within the Trust should lead to sustained improvement in the early part of the next financial year.</p> <p>The forecast for Q4 has been set at 80%.</p>

7. Sickness / absence (Employee Strategy & Engagement Committee)

Measure	Month				Commentary
	7	8	9	Q4 Forecast	
Sickness	4.68%	4.65%	5%	5%	Sickness rates bounced back to 5% for M9, back to levels not seen for several months. The forecasted position has been revised to 5% which represents the average position of the last 6 months.

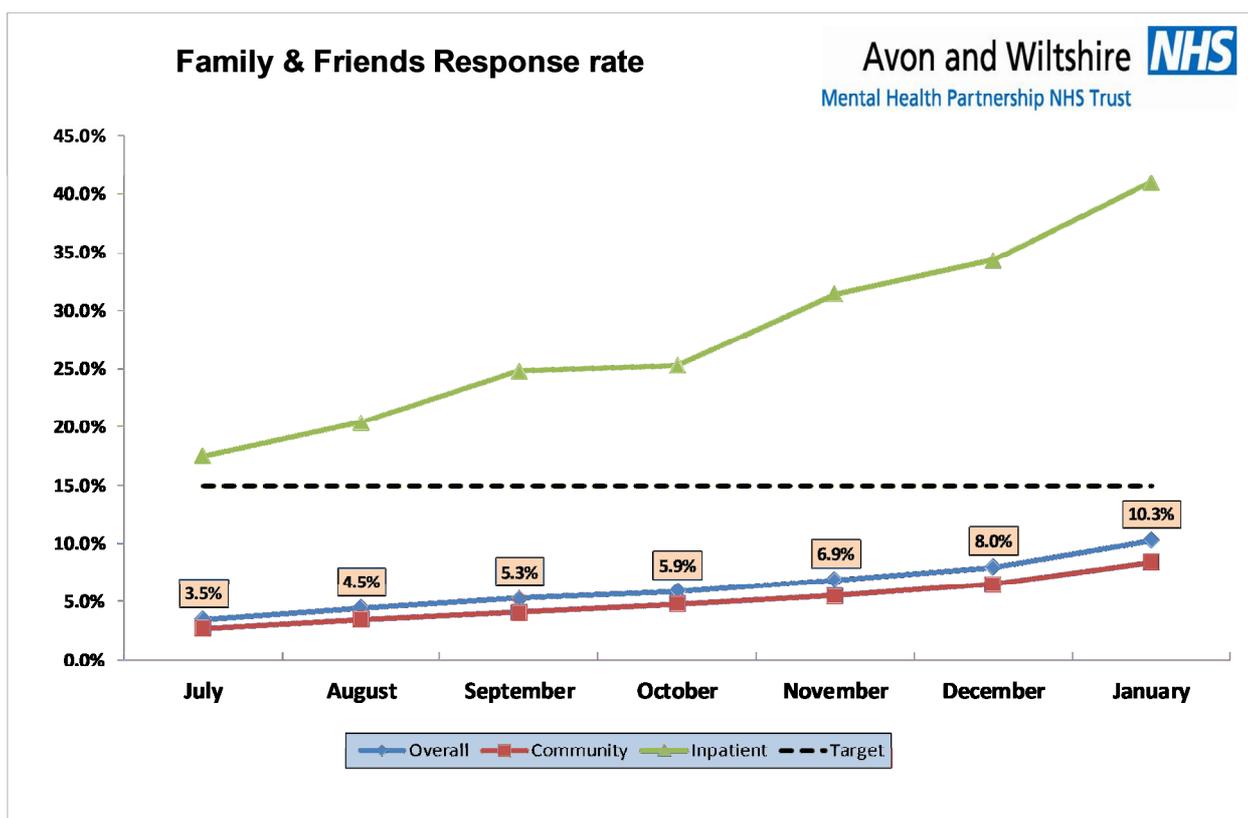
8. Finance (Finance & Planning Committee)

This indicator within IQ shows the budget variance month on month.

Measure	Month						Commentary
	4	5	6	7	8	9	
Finance	R	R	A	R	R	A	Actions are in place at locality and corporate level to deliver 2013-14 agreed budgets. The detail is included in the separate Finance report.

Appendix C: Family and Friends

C3. Trend in Family and Friends response rate



Appendix D: monthly supervision rates

