MC 22/2009 Oxfordshire and Buckinghamshire Mental Health NHS Foundation Trust April to September 2009/10

Service	Target	Actual Y	TD	Definition
Delayed transfers of care				Bed days lost to DTC's as a percentage of occupied bed days plus
(Maximum)	7.5%	2.5%	•	leave days.
				Applies to adults of working age excluding hospital to hospital transfers and admissions to PICU. Crisis Teams should be actively
Access to Crisis prior to				involved in all requests for admission to ensure full assessment
admission	90.0%	96.0%	•	prior to admission.
				The number of patients waiting over four weeks from the date of
				referral for first appointment. This does not take into account
Number of referrals waiting over				patients that cancel or DNA their appointments whereby the referral
4 weeks for first appointment (All				date would be reset to the date of the cancelled appointment or
Referrals)	173	173	•	DNA.
% of referrals seen within 4				This shows of the patients having their first appointment in the
weeks	90.0%	76.7%	•	reported month how long they have waited.
Crisis Episodes	819	965	•	Cumulative count of Crisis episodes
Early Intervention Caseload	360	333	•	This is a snapshot of the patients on the Early Intervention
				The reported percentage is the conbined data completeness of 13
				Data Quality fields, Social and economic measures and the time
Data Completeness	90.0%	85.2%	•	taken to enter data.
HoNOS Coding - Snapshot %				This is a snapshot of the percentage of open records that have a
open records coded	60.0%	32.9%	•	Health of the Nation Outcome Score score recorded on PCIS.

Quality	Target	Actual YTD	Definition
Patient Experience (reported quarterly)	80.0%	72.3%	The Patient Experience Tracker (PET) is a handheld device that is used to gather instant feedback from service users. This is a composite indicator for patient experience and has been generated based on the total number of positive responses expressed as a percentage of the total number of completed responses in the period.
PEAT	92.0%	91.0%	Monthly self assessment of inpatient areas. Assesses stardards across a range of services including food, cleanliness, infection control and patient environment and is a benchmarking tool to ensure continuious improvements are made in the non-clinical aspects of a patient's healthcare experience.
Complaints	1.4	0.3	This is the number of complaints received per 1,000 patients seen. Patients seen is the total number of face to face community, Outpatient and Day care contacts plus the total number of occupied bed days.
CPA Compliance (reported quarterly)	80.0%	66.3%	Results of ongoing audit to identify if a care plan, risk assessment, identified care coordiantor and a future review date are present in the medical records of patients on CPA.

Safety	Target	Actual \	YTD	
SUIs	1.3	0.7	•	This is the number of Serious Untoward Incidences received per 10,000 patients seen. Patients seen is the total number of face to face community, Outpatient and Day care contacts plus the total number of occupied bed days.
Mandatory Training	72.0%	78.0%	•	To ensure services are delivered effectively and safely.
H & S incidents at work (Patients and Staff) - Reported one month in arrears	7.0	8.0	•	This is the total number reported incidents (Patient and Staff) per 1,000 patients seen. Patients seen is the total number of face to face community, Outpatient and Day care contacts plus the total number of occupied bed days.
H & S incidents at work - Patients		5.2		This is the number reported Patient incidents per 1,000 patients seen. Patients seen is the total number of face to face community, Outpatient and Day care contacts plus the total number of occupied bed days.
H & S incidents at work - Staff		2.4		This is the number reported Staff incidents per 1,000 patients seen. Patients seen is the total number of face to face community, Outpatient and Day care contacts plus the total number of occupied bed days.
7 Day Follow up (Mimimum)	95.0%	94.5%	•	All patients discharged on enhanced CPA should be followed up face to face or by telephone within 7 days of discharge.

Workforce	Target	Actual \	/TD
Staff Turnover	12.0%	11.2%	•
Vacancies	192	192	•
Bank & Agency Spend	5.0%	5.3%	•
PDR Performance	80.0%	75.0%	•

Finance	Target	Actual	YTD
Risk Rating	4.0	4.5	•
Capital Expenditure Delivery			
against plan	4.7	4.2	•
Cash Balance	3.4	7.2	•
CIP Delivery	2.5	1.9	•