

# Report to the Meeting of the

**CG 31/2017**

(Agenda item: 13)

# Oxford Health NHS Foundation Trust

# Council of Governors

**September 13 2017**

**Performance Report**

**(April - July 2017)**

**For: Information**

**Executive Summary**

This report provides a consolidated view of the Trusts performance against both national and local (contracted) indicators for April – July 2017. A standard scorecard approach has been adopted for all reporting within the Trust and compliance against targets are measured using a RAG rating system. This scoring system enables the performance team and operational services to identify areas for improvement and is supplemented by a narrative to explain any variation to targets and action plans. Performance reporting is presented monthly and scrutinised by various leadership and oversight committees up to and including the Trust Board and Commissioners. See **Appendix 1** for a diagram showing the Performance Governance Process.

Since April 2017, the Trust has either met or exceeded circa. 90% of the performance indicators reported. A diagram showing Trust performance over time is included in **Fig 1**. This demonstrates that the Trust is consistently delivering a strong performance against contractual targets set by Clinical Commissioning Groups (CCG’s).

In addition to our local contracted commitments with commissioners, the Trust is required to report against the nationally mandated NHS Single Oversight Framework. These indicators have also been included within our reports so that there is a consistent format both within and external to the Trust. Further work to develop our reporting in this area continues.

**Fig 1. Compliance against overall contracted targets: April – July 2017**





At an individual Directorate level:

* **Children and Young People (CYP) Directorate** performance has remained consistently around 96% since the start of the reporting year
* **Adults of Working Age (AWA) Directorate** performance is consistently improving and is now at 82% which is a significant improvement from late 2016 when compliance was reported at 58%. This improvement shows the significant effort and focus invested by all staff within the Adults Directorate which should be recognised.
* **Older People’s Directorate (OPD)** performance against contracted targets has declined. This is due, in part, to the new FY18 contractual KPIs taking effect in April. We have seen a 4% improvement against target in Month 4.



Although the majority of performance indicators are being consistently achieved each month, the Trust continues to underperform in a small number of key areas.

CYP is consistently the highest performing Directorate based on achievement of contractual and national performance framework indicators. Over the past two quarters, the Directorate has reported an average of 96% compliance against performance indicators at both a local and national level.

In looking at the performance trends and identifying areas where further action is required in the CYP Directorate, the following selected issues have been highlighted and escalated to the Operations Management Team and the Board of Directors:

* **CAMHS 4 & 8 Week waiting times** – There has been an historical issue with the 4 week and 8 week waiting time targets, in particular in Swindon, Wiltshire and Bath & North East Somerset (BaNES). This is now being addressed through the remodeling of services and performance will be closely monitored over the next few months.
* **CAMHS 12 Week waiting times** - Although CYP has historically delivered excellent performance against the 12 week waiting time target across all regions, for the last few months, performance has declined significantly in Oxfordshire. This is due to lack of available staffing in the northern and southern areas of the County in particular. The Directorate Leadership Team is taking action to address these issues.

**Older Peoples**

Over the past few months, performance in the Older Peoples Directorate has declined against their local contracted performance targets. As stated earlier in this report, this is in part, due to reporting against new KPI’s. In Month 4, there has been an overall improvement of 4% against contracted targets so improvements are now being seen.

In looking at the performance trends and identifying areas where further action is required in the Older Peoples Directorate, the following selected issues have been highlighted and escalated to the Operations Management Team:

* **The Out of Hours Services**. As one of the most heavily used services provided by Oxford Health, the service sees approx. 10,250 patients per month. With ongoing issues over GP availability and a requirement to provide cover across the County, action has now been taken by the Executive Team to address the current issues and improvement work continues to be led by an interim Director.
* **Physical Disabilities Physiotherapy Service.** There has been a consistent increase in referrals to the Physical Disabilities Physiotherapy Service (due mainly to Parkinson’s). The Service has created an action plan to tackle this additional demand and performance will be closely monitored and reported to the Operations Management Team.
* **Delayed Transfers of care (DTOC)** continue to be an issue across the system. Although there has been a significant impact due to the delays as a result of the HART service capacity issues, actions are also now underway to address the issues that are solely within the remit and control of Oxford Health. Although the performance data over time shows improvement, further action is being taken by the leadership within the Directorate to continue to reduce all DTOC whether HART related or due to local conditions.
* **Stroke Therapy for Patients** – Although the Trust provides physiotherapy, occupational therapy and speech and language therapy for stroke patients on a daily and weekly basis, the way the indicators are constructed is currently being reviewed with the CCG. At a national level, the indicators as currently defined are consistent. However, we are reviewing locally with the Oxfordshire CCG to confirm that this is the right approach.

**Adults:**

Over the past few months, the Adults Directorate has consistently improved their performance against contracted performance targets. At the start of the year, the Board raised concerns about underperformance in a number of areas, however, the Directorate has improved month on month.

In looking at the performance trends and identifying areas where further action is required in the Adults Directorate, the following issues have been highlighted and escalated to the Operations Management Team:

* **Improving Access to Psychological Therapies (IAPT)** - Although there continues to be a reduction in the number of ‘hidden waits’ at step 3, the waiting time for treatment is now at 14 weeks which is significantly above the target of 8 weeks. The service has an action plan in place and the Operations Management Team maintain an oversight of the improvement timeline.
* **Care Reviews** - Analysis of the performance data has shown that timescales for care reviews specifically in Aylesbury continue to be below target. This issue has been discussed with Service Leads who are confident that this is a recording issue and not a clinical issue. Action is now being taken to address the underlying issues and work with support from the Trust’s IM&T Dept. is now underway.

**Governance Route/Approval Process**

This is a quarterly update report.

**Recommendation**

The Council of Governors is invited to note the report.

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**Appendix 1 – Performance Reporting Structure**

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