

Trust Board Performance Overview Report – Month 12, March 2019

This report provides an update to the Trust Board on National and local performance indicators.

National Performance

(1) Single Oversight Framework (SOF): The NHS Improvement (NHSI) SOF was implemented on 1 October 2016. The framework follows themes which are linked to those of the Care Quality Commission. By focussing on these themes, NHSI will support providers to attain and/or maintain a CQC 'good' or 'outstanding' rating. In the majority of cases NHSI will be sourcing Trust performance data from publicly available sources e.g. CQC, NHS Digital, NHS England, and Unify. The majority of the indicators do not have targets/thresholds, so where information is available the published performance has been measured against the average position for England. There is a reporting time lag in some cases; where this is the case the **last** available reported position is reflected in this report.

Local Performance

(2) Joint Management Groups (JMGs): The Trust reports performance against a number of indicators to the Oxfordshire and Buckinghamshire JMGs. The JMGs provide oversight and management of 'pooled budget' spending and activity.

Contractual Performance: the Trust is contracted by a number of commissioners to provide a range of services across the 4 clinical directorates below. This report provides a summary of performance against the performance indicators within each of the Trust's contracts.

- (3) All Ages Mental Health – Oxfordshire (includes Swindon, Wilts and BaNES)
- (4) All Ages Mental Health - Buckinghamshire
- (5) Community Services
- (6) Specialised Services

Summary of Indicators

In total, the Trust routinely reports information and performance relating to **2078 indicators**; broken down as follows.

Area	Indicators with defined targets					Indicators with no target	Totals
	Monthly	Quarterly	Yearly	Bi-Annual/Seasonal	Total		
National Performance							
(1) Single Oversight Framework	13	5	2	0	20	15	35
Local JMG Performance							
(2) Joint Management Groups	8	11	0	0	19	111	130
Local Contractual Performance							
(3) Community Services	40	63	25	10	138	767	905
(4) All Ages Mental Health Oxon and SWB	114	14	1	0	129	360	489
(5) All Ages Mental Health Buckinghamshire	47	5	1	3	56	208	264
(6) Specialised Services	84	55	0	0	139	116	255
Local Contractual Total	285	137	27	13	462	1451	1913
Grand Total	306	153	29	13	501	1577	2078

Performance Scorecard

The tables below show performance as at month 12, and then breakdown of performance by is provided below;

Summary

Directorate	Below target >10%	Below Target -1-9%	Target Met	No Target	Total	% Met
National Performance						
(1) Single Oversight Framework	5	1	9	15	15	60%
Local JMG Performance						
(2) Joint Management Groups	0	0	8	111	8	100%
Local Contractual Performance						
(3) Community Services	11	14	94	767	119	79%
(4) All Ages Mental Health Oxon and SWB	27	10	81	360	118	69%
(5) All Ages Mental Health Buckinghamshire	6	10	38	208	54	70%
(6) Specialised Services	2	15	122	116	139	88%
Local Contractual Performance Total	46	49	335	1451	430	78%
Grand Total	51	50	352	1577	453	78%

Breakdown

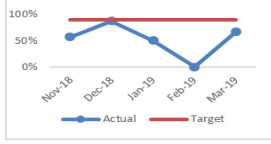
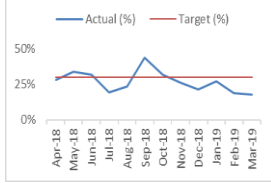

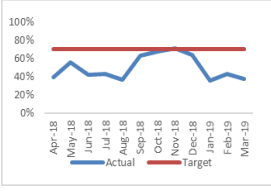
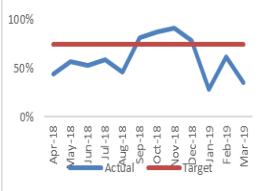
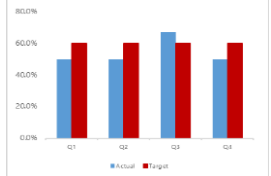
Area	Below target	Below Target	Target Met	No Target	Total	% Met
National Performance						
(1) Single Oversight Framework	5	1	9	15	15	60%
Local JMG Performance						
(2) Joint Management Groups	0	0	8	111	8	100%
Local Contractual Performance						
(3) Community Services	11	14	94	767	119	79%
College Nursing	1	1	7	180	9	
School Health Nursing	0	2	26	159	28	
Health Visiting	2	8	21	83	31	
Immunisations	0	0	7	3	7	100%
Community Adults	3	2	25	266	30	83%
Community Children	3	1	4	15	8	50%
Community Other	0	0	0	0	0	
AQP Podiatry	0	0	3	26	3	100%
Continuing Health Care	2	0	1	35	3	33%
(4) All Ages Mental Health Oxon and SWB	27	10	81	360	118	69%
Outcomes Based Commissioning (OBC) Sch 4 (Oxon)	7	0	5	3	12	42%
OBC Incentivised (Oxon)	2	0	12	87	14	86%
Child and Adolescent Mental Health Service (Oxon)	5	1	6	75	12	50%
Integrated Access to Psychological Therapies (Oxon)	0	0	10	9	10	100%
Wellbeing (Oxon)	0	0	13	0	13	100%
Community & Mental Health Contract Sch 4 (Oxon)	3	1	12	7	16	75%
Child and Adolescent Mental Health Service (SWB)	9	6	18	134	33	55%
Adult Eating Disorders (Wiltshire)	1	2	5	45	8	63%
(5) All Ages Mental Health Buckinghamshire	6	10	38	208	54	70%
Adults & Older Adults CMHTs and Inpatients, IAPT, Perinatal and PIRLS (Bucks)	1	8	22	35	31	71%
CAMHS (Bucks)	5	2	16	173	23	70%
(6) Specialised Services	2	15	122	116	139	88%
Learning Disabilities (OCCG)	0	3	7	0	10	70%
Dentistry (NHSE)	0	0	31	8	31	100%
Forensic MSU (NHSE)	1	5	28	29	34	82%
Forensic LSU (NHSE)	0	5	29	29	34	85%
CAMHS Tier 4 Inpatients (NHSE)	0	1	14	25	15	93%
ED Inpatients (NHSE)	1	1	13	25	15	87%

Red Indicators (>=10% under target)

Directorate	Measure	Target	Reason	Likelihood	Risk Rating	Graph	Narrative
Contract/Service		Actual	Months below Target	Impact			
National Performance: Single Oversight Framework							
Organisational Health	Staff Turnover (rolling 12 months)	12%	Workforce				<p>Description of the issue: Ongoing workforce retention</p> <p>Is there a plan to resolve: Update included in Human Resources (HR) report to Board</p> <p>What is the plan: Update included in HR (Human Resources) report to Board</p>
		14.05%	6+ months				
Mental Health	% of clients in settled accommodation	58.8%	Other				<p>Description of the issue: The number of patients in settled accommodation continues to be lower than anticipated despite development of an in-house Mental Health Services Data Set (MHSDS) solution. Potential technical issues with the MHSDS extract have been identified.</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The Performance & Information (P&I) Team is investigating the technical issues further. However, the timescale for improvement may be compromised due to capacity within the P&I and Business Intelligence teams to work through the identified issues.</p>
		40.5%	6+ months				
Organisational Health	Staff Sickness (rolling 12 months)	3.5%	Workforce				<p>Description of the issue: Staff Sickness has increased above target</p> <p>Is there a plan to resolve: Update included in HR report to Board</p> <p>What is the plan: Update included in HR report to Board</p>
		4.0%	4 months				
Local Performance: Joint Management Groups (JMGs)							
All JMG (Joint Management Group) indicators were achieved							
Local Performance: Contractual							
Specialised Services	Patients who have had a routine dental check-up/examination within the last 12 months	70%	Other				<p>Description of Issue: Continuous improvement. Not all inpatients are registered with a dentist to enable access to routine oral health checks.</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Plans are in place to enable all patients to access a dentist in the event of an emergency.</p>
Forensics Medium Secure Unit		59% (23/39)	6+ months				
Specialised Services	% Bed Occupancy	100%	Other				<p>Description of Issue: Throughout FY18/19 all of the TVWFN (Thames Valley & Wessex Forensic Network) services have seen a change in the type of patient being referred to the units. Patient acuity has increased steadily, across the region, which has caused admissions to be closely scrutinised re: level of support required, which has meant that in some instances, despite units being fully staffed, the acuity of the residing patients is such that admissions requiring high levels of support cannot be accepted for safety reasons (hence subsequent dip in bed occupancy).</p> <p>Is there a plan to resolve: Partly</p> <p>What is the plan: The Trust is currently in conversation with NHSE (National Health Service England) around reducing bed occupancy targets, within the current funding envelope, and/or increase in funding for extra staff</p>
Eating Disorders In-patient		81% (504/620)	6+ months				

All Ages Mental Health Bucks	Local 20i -% people will have care review within the (timeframe) specified by the cluster package	95%	Data Quality			<p>Description of the issue: Care reviews not being completed within the contracted timescales</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The EHR (Electronic Healthcare Records) team has started working on an interactive dashboard that is currently being piloted in an AMHT (Adult Mental Health Team) team in Oxfordshire which will flag upcoming cluster reviews of patients that are due via a clinician dashboard. The Trust will review how successful the pilot has been in improving timeliness of cluster reviews and report back in April 2019.</p>
Bucks CCG (Adults Working Age)		69%	6+ months			
All Ages Mental Health Bucks	% Mandatory Training Up to Date (12mths old or less)	95%	Further Review		N/A	<p>Description of the issue: Quarterly Mandatory Training target missed. Mandatory Training target not met. The service has highlighted some issues around course availability, additionally staff at times are pressured by caseload demand which may result in training being cancelled or not attended.</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A review with the Learning & Development team will be taking place around the training matrix which may help with staff being required to complete the training most relevant to their role. Operational leads will be tasked in reviewing all training bookings / completed within case management.</p>
Bucks CAMHS (Child & Adolescent Mental Health Service)		81%	6+ months			
All Ages Mental Health Oxon	Clinic letters sent to GPs within 7 calendar days	95%	Workforce Shortages			<p>Description of the issue: Lack of workforce</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Currently advertising and actively recruiting to fill staff vacancies. Performance has improved by 6% compared to last month</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		72%	6+ months			
All Ages Mental Health Oxon	Percentage of children/young person having their first routine appointment within 12 weeks of referral	75%	Demand & Capacity			<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Increase in performance from last month, increase in overall assessments and those being assessed prior to 12 weeks but many of the assessments are for the longest waiters over 12 weeks which do not have positive impact on this KPI, 57% of all the assessments were for the longest waiters over 12 weeks.</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		43%	6+ months			
All Ages Mental Health Oxon	Percentage of children that receive a diagnosis or treatment within 12 weeks of routine referral into NCD (Neurodevelopment)	75%	Mix of Issues			<p>Description of the issue: New service Delivery model</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Team has been recently recruited and currently establishing further estate to support full team working. Performance % is lower than last month but the overall number of assessments overall has increased from 14 to 31.</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		16%	6+ months			
All Ages Mental Health Oxon	Looked After Children (LAC) will be seen within 2 weeks for all CAMHS services excluding the neurodevelopment pathway	95%	Patient Choice			<p>Description of the issue: Patient Choice</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The breach was due to engagement of young person, initial support to assist foster carer with engaging into talking to CAMHS, young person agreed to only been seen at home initially which we facilitated.</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		67% (2/3)	6+ months			

All Ages Mental Health Oxon	% of people that have had their cluster reviewed within the agreed timescale	85%	Workforce Shortages			<p>Description of the issue: Lack of workforce</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The directorate has decided to focus resources on other areas of performance that have a higher clinical risk as there is a lower clinical risk on this indicator. However, the Electronic Health Records team has started working on an interactive dashboard for the Adult Mental Health Team (AMHT) which will flag upcoming cluster reviews of patients that are due. This work is now being trialled in the North AMHT</p>
OBC (Outcomes Based Contract) Sch 4		62%	6+ months			
All Ages Mental Health Oxon	Percentage of outpatient letters that are sent back to GPs (uploaded to CareNotes) within 7 calendar days	95%	Demand & Capacity			<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The Trust continues to improve efficiency and productivity wherever possible but additional investment is required. Staff are being reminded about the letter on a regular basis. The Trust is working with commissioners to secure the additional investment required in mental health services</p>
OBC (Outcomes Based Contract) Sch 4		70%	6+ months			
All Ages Mental Health Oxon	Adult Community Mental Health Teams - Percentage of referrals categorised as non-urgent that are assessed within 28 calendar days	90%	Demand & Capacity			<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The Trust continues to improve efficiency and productivity wherever possible but additional investment is required. Referrals continue to be dealt with, as efficiently and effectively as possible. The Trust is working with commissioners to secure the additional investment required in mental health services</p>
OBC (Outcomes Based Contract) Sch 4		60%	6+ months			
All Ages Mental Health Oxon	% of service users who have had a comprehensive physical health assessment covering Body Mass Index, blood pressure, smoking status, blood sugar levels, alcohol intake and exercise levels in the previous 12 months (electronic caseload reporting)	85%	Other			<p>Description of the issue: New reporting Method</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: This is a new data capture via the clinical system as opposed to via patient audit (as per M01-M06). The reporting rules for this indicator are still to be agreed with commissioners. It is anticipated that it will take 9-12 months to get close to the target as patients are transferred over on the electronic system</p>
OBC (Outcomes Based Contract) Sch 4		51%	6+ months			
All Ages Mental Health Oxon	Part 1 and Part 2 summaries should be issued to the service user's GP within 10 days of discharge from care under this specification	95%	Mix of Issues			<p>Description of the issue: Administration and workforce issues</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Performance has improved by 10% compared to last month. Further training will be implemented across the teams.</p>
OBC (Outcomes Based Contract) Sch 4		85%	6+ months			
All Ages Mental Health Oxon	All patients referred to Emergency Department Psychiatric Service (EDPS) are seen within the agreed timeframe - Horton General Hospital - within 90 minutes	95%	Workforce Shortages			<p>Description of the issue: Lack of workforce/Investment</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan? OH are in talks with Oxfordshire Clinical Commissioning Group (OCCG) about funding in Mental Health to improve capacity and meet demand. This issue will be referred to Quality Review Meeting (QRM) to confirm the status of any clinical risk to patients</p>
EDPS		68%	6+ months			

Community Services	Every child under the age of five will receive a review health assessment at six-monthly intervals	90%	Other		Description of the issue: 1 out of 3 out of county children not seen within the timeframe due to child being in Oxfordshire at time of arranging the assessment, but moving out of the county close to the assessment date resulting in need to re-send the paperwork to the Looked After Children team in another county. Is there a plan to resolve: Yes What is the plan: Strengthen relationship with other areas
Looked After Children (Out of County)		67%	5 months		
All Ages Mental Health Oxon	% of service users in clusters 4-17 under the care of OHFT with a reduction in intensity in HoNOS rating score at their most recent cluster review*	30%	Other		Description of the issue: OHFT continue to provide an excellent standard of care. Despite this, fluctuations in patients' conditions can occur and are closely monitored. Is there a plan to resolve: Yes What is the plan: The service is currently monitoring the situation
OBC (Outcomes Based Contract) Incentivised		18%	4 months		
All Ages Mental Health Oxon	% of referrals to assessment within 4 weeks	100%	Other		Description of the issue: Two 4 week wait breaches in March (percentage looks high due to low numbers). One breach wasn't "actual" breach as patient also a current inpatient. Second breach was due to patient choice - no response despite sending several letters and calls. Is there a plan to resolve? No What is the plan? N/A
Wiltshire Adult ED (Eating Disorders) Service		33%	4 months		
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (as per local definition - 2 f-t-f contacts (excludes ED)). Percentage within 8 weeks	70%	Other		Description of the issue: Indicator requires review Is there a plan to resolve? Yes What is the plan? The KPI will be reviewed under the 2019/20 contract.
BANES CAMHS (Child & Adolescent Mental Health Service)		37%	4 months		
All Ages Mental Health Oxon	% of estimated population of children with mental and behavioural disorders commencing treatment in CAMHS community services (subject to change following confirmation of NHS England funding decision and planning guidance as well as the next national prevalence survey results)	300	Other	N/A	Description of the issue: Presently, Oxon CAMHS are in the top 3 performing providers nationally and although the performance has dipped below the target threshold this month it has improved by over 40 patients, performance remains above national targets Is there a plan to resolve: Yes What is the plan: The service is currently monitoring the situation
Oxon CAMHS (Child & Adolescent Mental Health Service)		230	3 months		
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding ED). % within 4 weeks	75%	Workforce Shortages		Description of the issue: Staffing vacancies Is there a plan to resolve: Yes What is the plan: A detailed plan has been put in place by the service and shared with the commissioners. We are providing regular updates at CRM meetings.
BANES CAMHS (Child & Adolescent Mental Health Service)		35%	3 months		
Community Services	Percentage of service users recruited before 16 weeks of pregnancy	>60%	Workforce Shortages		Description of the issue: Lack of workforce and capacity in particular areas (Oxford city). In addition, there was a delay in the pathway due to annual leave within the OUH Midwifery admin who send referrals to the Service Is there a plan to resolve: Yes What is the plan: New nurse appointed and will be ready to take patients by August 2019
Health Visiting Service - Family Nurse Partnership		50%	3 months		

All Ages Mental Health Oxon	Percentage of all referrals to adult mental health teams that are categorised as crisis/emergency where the patient (and carer where applicable) and the referring GP are contacted within 2 hours	95%	Mix of Issues			Description of the issue: Mix of Issues Is there a plan to resolve? Yes What is the plan: The breaches were due to a combination capacity issues, patient choice and data errors. All patients were seen with 24 hours.
OBC (Outcomes Based Contract) Incentivised		67% (8/12)	2 months			
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (as per local definition - 2 f-t-f contacts (excludes ED)). Percentage within 8 weeks	50%	Other			Description of the issue: Indicator requires review Is there a plan to resolve? Yes What is the plan? The KPI will be reviewed under the 2019/20 contract.
Swindon CAMHS (Child & Adolescent Service)		24%	2 months			
Community Services	Every child over five years of age will receive a review health assessment annually	90%	Mix of issues			Description of the issue: 5 out of 18 children not seen within the timeframe due to difficulties engaging with young persons, cancellation by the patient due to medical reasons and human error (2 instances, delays of 1 & 2 days) Is there a plan to resolve? Partly What is the plan: Individual and team discussions regarding timely completion of reviews
Looked After Children (In County)		72%	2 months			
All Ages Mental Health Bucks	Access – Specialist: LAC (Looked After Children) - % DNAs (Did Not Attend)	7%	Other			Description of the issue: DNA's (Did Not Attend) breached the 7% maximum target. The 23 breaches represent 10 patients, of these 7 are patient choice, 5 are being seen successfully and 2 have been discharged. The other 3 out of the 10 have no reason for DNA but are now being seen. Is there a plan to resolve: No
Bucks CAMHS (Child & Adolescent Mental Health Service)		11%	1 month			
All Ages Mental Health Bucks	Access – Specialist: CAHBS (Children & Adolescent Harmful Behaviours Service)- % DNAs (Did Not Attend)	7%	Other			Description of the issue: DNA's (Did Not Attend) breached the 7% maximum target. The 3 breaches represent 2 siblings. For both young people planned meeting with social care had to be cancelled as they are due to move away imminently. No further intervention required. Is there a plan to resolve: No, this was just an exception and we expect to be back within target next month
Bucks CAMHS (Child & Adolescent Mental Health Service)		33%	1 month			
All Ages Mental Health Oxon	All patients referred to Emergency Department Psychiatric Service (EDPS) are seen within the agreed timeframe - JR - within 60 minutes	95%	Workforce Shortages			Description of the issue: Lack of workforce/Investment Is there a plan to resolve? Yes What is the plan? OH are in talks with Oxfordshire Clinical Commissioning Group (OCCG) about funding in Mental Health to improve capacity and meet demand. This issue will be referred to Quality Review Meeting (QRM) to confirm the status of any clinical risk to patients
EDPS Emergency Dept. Psychiatric Services)		80%	1 month			
All Ages Mental Health Oxon	All patients who are on CPA will have a review of their physical state on assessment	90%	Workforce Shortages			Description of the issue: Staffing issue and Data issue. Is there a plan to resolve: Yes What is the plan: There were staff shortages in Feb/Mar due to sickness and staff leaving. Posts have now been recruited for and the service is currently monitoring the situation. Carenotes was not updated correctly on 2 patients so showed as breach when they did not breach.
Older Adults		80% (24/30)	1 month			

All Ages Mental Health Oxon	Adult CMHTs - Percentage of referrals categorised as crisis/emergency that are assessed within 4 hours	95%	Mix of Issues			<p>Description of the issue: Mix of Issues</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The breaches were due to a combination capacity issues, patient choice and data errors. All patients were seen with 24 hours.</p>
OBC (Outcomes Based Contract) Sch 4		67% (8/12)	1 month			
All Ages Mental Health Oxon	Adult CMHTs - Percentage of referrals categorised as urgent that are assessed within 7 calendar days	95%	Demand & Capacity			<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The Trust continues to improve efficiency and productivity wherever possible but additional investment is required. Referrals continue to be dealt with, as efficiently and effectively as possible. The Trust is working with commissioners to secure the additional investment required in mental health services</p>
OBC (Outcomes Based Contract) Sch 4		82%	1 month			
All Ages Mental Health Oxon	Percentage of CYP Eating Disorder ONLY having their first appointment. % urgent within 1 week	33%	Other			<p>Description of the issue: Two breaches to the 7 day target. One was due to the family cancelling the appointment and rescheduling over 7 days and the other was due to the family being on holiday in Italy at the time of the referral being received. The risk was explained to the family by telephone.</p> <p>Is there a plan to resolve? No action needed.</p> <p>What is the plan? N/A</p>
BANES CAMHS (Child & Adolescent Mental Health Service)		95%	1 month			
All Ages Mental Health Oxon	Percentage of CYP Eating Disorder ONLY having their first appointment. % urgent within 1 week	95%	Workforce Shortages			<p>Description of the issue: Patient only just breached 7 days due to the local team (Salisbury) being at very low capacity.</p> <p>Is there a plan to resolve? No.</p> <p>What is the plan? N/A</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		67%	1 month			
All Ages Mental Health Oxon	Percentage of CYP Eating Disorder ONLY having their first appointment. % routine within 4 weeks	95%	Other			<p>Description of the issue: Breaches were due to patient cancellations which led to assessments being done outside 4 weeks.</p> <p>Is there a plan to resolve? No.</p> <p>What is the plan? N/A</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		80%	1 month			

Risk Rating Key:

		Likelihood				
		1	2	3	4	5
		Rare	Unlikely	Possible	Likely	Almost certain
Impact	5 Catastrophic	5	10	15	20	25
	4 Major	4	8	12	16	20
	3 Moderate	3	6	9	12	15
	2 Minor	2	4	6	8	10
	1 Negligible	1	2	3	4	5

Out of Area Placements during March 2019

There were 18 patients in Out of Area placements during Mar19, utilising a total of 179 bed days in the month of Mar19.
 12 Patients were admitted to an OAP placement in Mar19. One of these patients transferred from one OAP placement to another placement.
 5 patients were admitted in Feb19 and were still out during Mar19.
 All placements were attributed to bed availability.
 7 Placements were in PICU beds, and 11 in Acute mental health beds.
 8 Patients were Oxfordshire CCG, 10 were Buckinghamshire CCG patients.
 10 Patients were male and 8 were female.
 The distance from patients' home to placements ranged from 34.4 to 222 miles, with the average distance being 80.7 miles.

CCG	Service	OAP admission month	Gender	NHS or Independent	Bed type	Reason for OAP admission	No. of OAP days in Mar19	Distance (miles)
Bucks	Adults	Feb-19	M	Independent	Acute	Unavailability of bed	5	73
Bucks	Adults	Feb-19	M	Independent	Acute	Unavailability of bed	11	64.5
Bucks	Adults	Feb-19	M	Independent	Acute	Unavailability of bed	13	213
Bucks	Adults	Feb-19	F	NHS	PICU	Unavailability of bed	31	49.3
Bucks	Adults	Feb-19	F	NHS	PICU	Unavailability of bed	4	64.2
Oxon	Adults	Mar-19	F	NHS	PICU	Unavailability of bed	10	62.0
Oxon	Adults	Mar-19	F	Independent	PICU	Unavailability of bed	19	93.5
Oxon	Adults	Mar-19	M	Independent	Acute	Unavailability of bed	16	35.6
Oxon	Adults	Mar-19	M	Independent	Acute	Unavailability of bed	5	222
Oxon	Adults	Mar-19	M	Independent	Acute	Unavailability of bed	7	42.6
Oxon	Adults	Mar-19	M	Independent	Acute	Unavailability of bed	16	110.0
Oxon	Adults	Mar-19	M	Independent	Acute	Unavailability of bed	7	93.9
Bucks	Adults	Mar-19	F	Independent	Acute	Unavailability of bed	5	99.7
Bucks	Adults	Mar-19	M	Independent	Acute	Unavailability of bed	7	48.9
Bucks	Adults	Mar-19	F	Independent	PICU	Unavailability of bed	12	34.6
Bucks	Adults	Mar-19	F	Independent	PICU	Unavailability of bed	5	53.4
Bucks	Adults	Mar-19	F	Independent	PICU	Unavailability of bed	2	34.4
Oxon	Older Adults	Mar-19	M	Independent	Older Adult Acute	Unavailability of bed	4	59.4

These two relate to same patient who moved from one OAP placement to another