

## Trust Board Performance Overview Report – Month 7, October 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 (CQC). 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

**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.

- (2) All Ages Mental Health – Oxfordshire (includes BaNES, Swindon & Wiltshire (BSW))
- (3) All Ages Mental Health - Buckinghamshire
- (4) Community Services
- (5) Specialised Services

### Summary of Indicators

In total, the Trust routinely reports information and performance relating to **2058 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	19	4	4	0	27	12	39
Local Contractual Performance							
(2) Community Services	45	62	26	10	143	767	910
(3) All Ages Mental Health Oxon and BSW	123	9	1	0	133	406	539
(4) All Ages Mental Health Buckinghamshire	40	18	2	5	65	266	331
(5) Specialised Services	123	11	0	4	138	101	239
<b>Local Contractual Total</b>	<b>331</b>	<b>100</b>	<b>29</b>	<b>19</b>	<b>479</b>	<b>1540</b>	<b>2019</b>
<b>Grand Total</b>	<b>350</b>	<b>104</b>	<b>33</b>	<b>19</b>	<b>506</b>	<b>1552</b>	<b>2058</b>

### Performance Scorecard

The tables below show performance as at month 7, and then breakdown of performance is provided below;

#### Summary

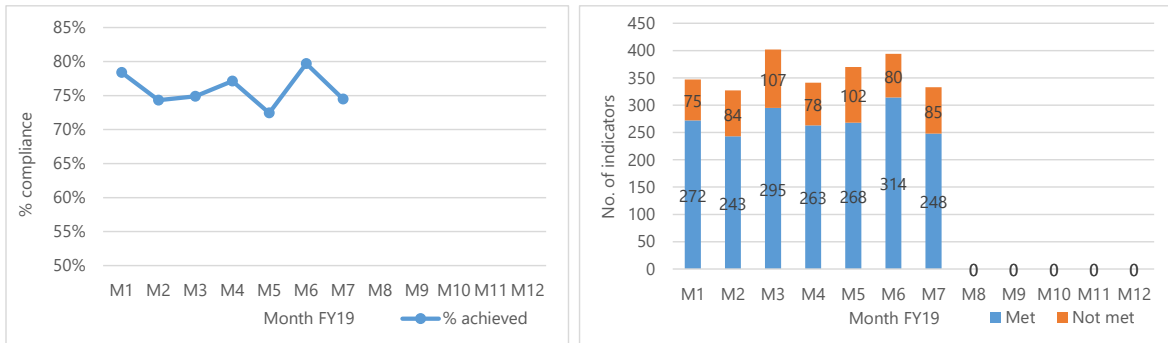
Directorate	Below target >10%	Below Target -1-9%	Target Met	No Target	Total	% Met
National Performance						
(1) Single Oversight Framework	2	0	8	12	10	80%
Local Contractual Performance						
(2) Community Services	5	8	32	767	45	71%
(3) All Ages Mental Health Oxon and BSW	20	15	90	406	125	72%
(4) All Ages Mental Health Buckinghamshire	7	5	28	266	40	70%
(5) Specialised Services	3	22	98	101	123	80%
<b>Local Contractual Performance Total</b>	<b>35</b>	<b>50</b>	<b>248</b>	<b>1540</b>	<b>333</b>	<b>74%</b>
<b>Grand Total</b>	<b>37</b>	<b>50</b>	<b>256</b>	<b>1552</b>	<b>343</b>	<b>75%</b>

**Breakdown**

Area	Below target	Below Target	Target Met	No Target	Total	% Met
<b>National Performance</b>						
<b>(1) Single Oversight Framework</b>	2	0	8	12	10	80%
Quality of Care	1	0	3	8	4	75%
Operational Performance	1	0	5	0	6	83%
Organisational Health	0	0	0	4	0	#DIV/0!
<b>Local Contractual Performance</b>						
<b>(2) Community Services</b>	5	8	32	767	45	71%
School Health Nursing and College Health Nursing services, Public Health Promotion Resources services and a National Child Measurement Programme	0	0	0	339	0	N/A
Health Visiting and Family Nurse Partnership services	0	0	0	83	0	N/A
School Age Immunisations	0	0	6	3	6	100%
Oxon Community & Mental Health Contract (Adults Community services)	2	5	17	266	24	71%
Oxon Community & Mental Health Contract (Children Community services)	1	2	3	15	6	50%
Oxon Community & Mental Health Contract (Other)	0	0	5	0	5	100%
Podiatry	0	0	1	26	1	100%
Luther Street Medical Centre	0	0	0	0	0	N/A
Buckinghamshire Continuing Healthcare	2	1	0	35	3	0%
<b>(3) All Ages Mental Health Oxon and BSW</b>	20	15	90	406	125	72%
Adult Mental Health Outcomes Based Commissioning (OBC) Sch 4	5	4	2	3	11	18%
Adult Mental Health Outcomes Based Commissioning (OBC) Incentivised	0	1	11	87	12	92%
Child and Adolescent Mental Health Service (CAMHS)	2	1	7	75	10	70%
Integrated Access to Psychological Therapies (IAPT)	2	0	7	9	10	70%
Wellbeing (Oxon)	0	0	13	0	13	100%
Oxfordshire Perinatal Mental Health Service	1	1	7	0	9	78%
Community & Mental Health Contract Sch 4 (Oxon)	2	1	9	0	12	75%
Child and Adolescent Mental Health Service (BSW)	8	7	18	134	33	55%
Adult Eating Disorders (Wiltshire)	0	0	8	45	8	100%
Oxon Joint Management Group (JMG)	0	0	8	53	8	100%
<b>(4) All Ages Mental Health Buckinghamshire</b>	7	5	28	266	40	70%
Adults & Older Adults Community Mental Health Teams and Inpatients, Integrated Access to Psychological Therapies and Psychiatric In Reach Liaison Service	5	4	17	35	26	65%
Child and Adolescent Mental Health Service (CAMHS)	0	0	4	135	4	100%
Child and Adolescent Mental Health Service (CAMHS) Incentivised	0	0	1	0	1	100%
Buckinghamshire Perinatal Mental Health Service	2	1	6	0	9	67%
<b>(5) Specialised Services</b>	3	22	98	101	123	80%
Learning Disabilities (OCCG)	1	0	8	4	9	89%
Dentistry (NHSE)	0	0	25	9	25	100%
Forensic Medium Secure Unit (NHSE)	1	6	16	22	23	70%
Forensic Low Secure Unit (NHSE)	0	7	16	22	23	70%
Child and Adolescent Mental Health Service (CAMHS) Tier 4 Inpatients	0	6	13	22	19	68%
Eating Disorders Inpatients (NHSE)	1	3	20	22	24	83%
Pharmacy Services	0	0	0	0	0	N/A
NHSE Totals	2	22	90	97	114	79%

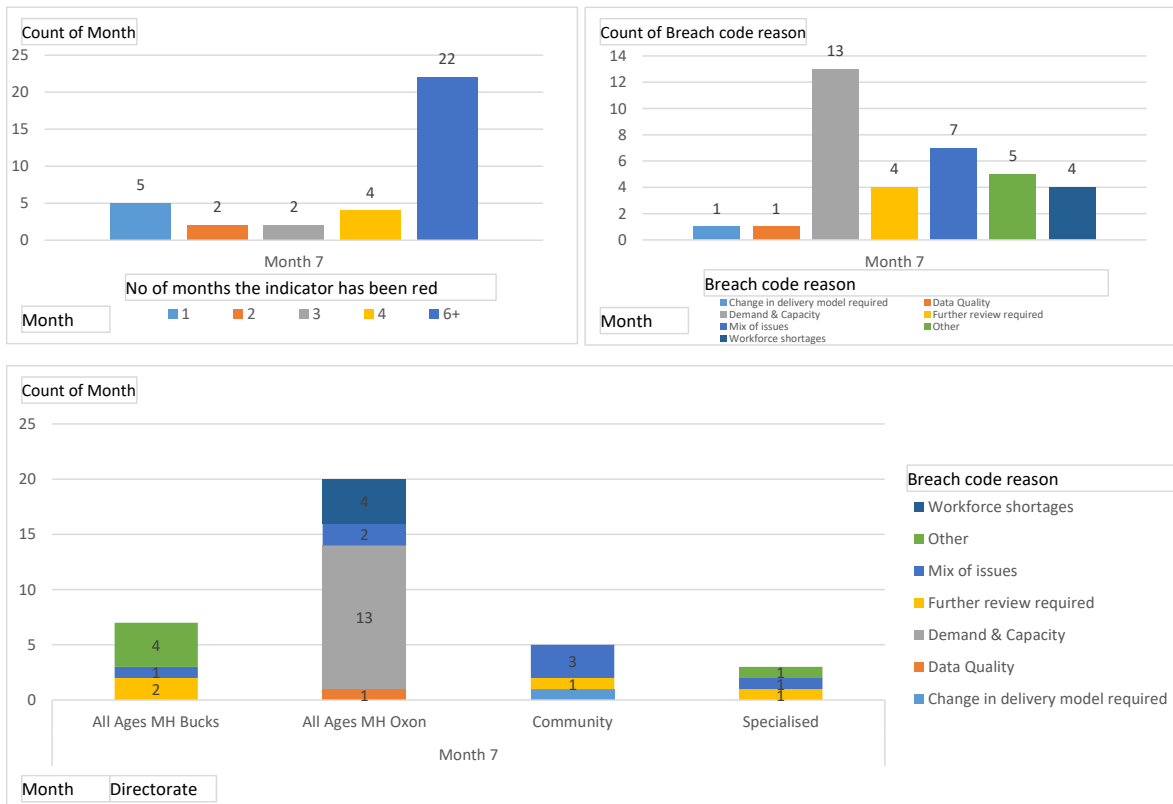
## Performance Trend

The number of reportable indicators varies each month as while the majority are reportable monthly, some are reportable less frequently (such as quarterly or bi-annually). In month 7, 333 contractual indicators were reportable including quarterly and of these; 74% were achieved. This is a decrease of 6% compared to last month. The number of red indicators this month was 35 which represents 10.5% of the total number of indicators. Last month it was 9.7% based on 394 indicators.



In month 7, there were 22 red indicators that have been red for more than 6 months and 4 indicators red for 4 to 6 months. Last month the figures were 24 for 6 months plus and 2 for 4 to 6 months.

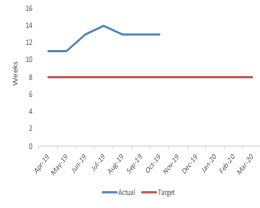
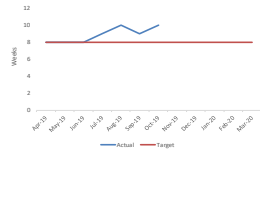
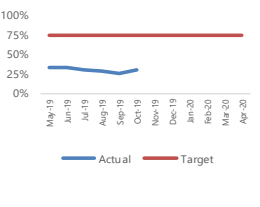
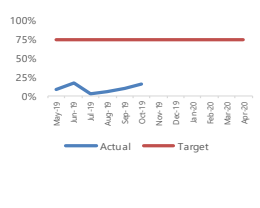
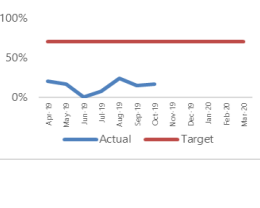
In month 7, the main reason attributed to the non-achievement of local contractual indicators was "Demand & Capacity"; **13 of the 35 red** indicators were not achieved due to this. The graph at the bottom shows the breakdown of reasons by directorate.



Red Indicators (>/=10% under target)

Directorate	Measure	Target	Reason	Likelihood	Risk Rating	Graph	Narrative
Contract/Service		Actual	Months below Target	Impact			
<b>National Performance: Single Oversight Framework</b>							
Mental Health	Data Quality Maturity Index (DQMI) MHSOS dataset score	95%				<p>The graph shows the DQMI score over time. The target is a constant 95.0%. The actual score starts at approximately 93.5% in April 2019, dips to 92.10% in May 2019, and then fluctuates slightly around 93.5% through March 2020.</p>	<p><b>Description of the issue:</b> The measures in the DQMI have been expanded over time and now include 36 metrics. The % achieved is an average of these metrics. As at July published data 23 are on or above target, 8 metrics are under target and 5 are not reported. Issues for under performance relate to data completeness and system configuration/reporting issues.</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> An action plan has been developed to identify actions needed to resolve each underperforming measure. This will be shared with the CQUIN board and also service directors. Routine reports have been developed by P&amp;I and are being shared with operational services to support improvement in the data completeness and this is being monitored via the Data Quality Improvement Group.</p>
<b>Local Performance: Contractual</b>							
Specialised Services	% Cumulative Bed Occupancy	100%	Mix of Issues			<p>The graph shows cumulative bed occupancy over time. The target is a constant 100%. The actual occupancy fluctuates between approximately 75% and 90% throughout the period from April 2019 to March 2020.</p>	<p><b>Description of the issue:</b> The need to manage patients with high dependency and/or restraint nasogastric feeding has impact on the flow of admissions as the Service needs to ensure patient levels match staffing resource so that patient safety is maintained. In addition, a couple of beds were vacant due to patients being on the waiting list to be admitted, but weren't admitted after an assessment (patients refused to be admitted or re-scheduled dates for admission).</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> The service has implemented a Single Point of Access (SPA) as part of the New Care Models and expect the bed status to improve as patient flow becomes established across the network. There is a monitoring mechanism in place. The Forensic Senior group also provide oversight.</p>
Adult Eating Disorders		83%	6+ months				
All Ages Mental Health Oxon	All patients referred to EDPS are seen within the agreed timeframe - John Radcliffe Hospital	95%	Workforce shortages	2	8	<p>The graph shows the percentage of patients seen within the agreed timeframe. The target is a constant 95%. The actual performance fluctuates between approximately 75% and 85% throughout the period from April 2019 to March 2020.</p>	<p><b>Description of the issue:</b> It is not possible for the OHFT to achieve the target set by commissioners with the current resource at this time. The Trust would need additional funding to recruit staff to provide additional cover during night shifts and weekends, which is when the majority of breaches occur.</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> It is recognised by commissioner and provider that resource is needed to address the issue of reduced overnight cover in order to achieve the current KPI. A plan is in place to prioritise activities when the current system focus around AMHT pressure is more stable. Investment has been secured for setting up a Crisis Resolution &amp; Home Treatment Team (initially in the City), an additional Safe Haven in Banbury, and a High Intensity User Service based in OUH ED which will increase community provision and as a result divert activity away from ED.</p>
Emergency Department Psychiatric Service (EDPS)		77%	6+ months	4			

All Ages Mental Health Oxon		95%	Workforce shortages	2	8		<p><b>Description of the issue:</b> It is not possible for the OHFT to achieve the target set by commissioners with the current resource at this time. The Trust would need additional funding to recruit staff to provide additional cover during night shifts and weekends, which is when the majority of breaches occur.</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> It is recognised by commissioner and provider that resource is needed to address the issue of reduced overnight cover in order to achieve the current KPI. A plan is in place to prioritise activities when the current system focus around AMHT pressure is more stable. Investment has been secured for setting up a Crisis Resolution &amp; Home Treatment Team (initially in the City), an additional Safe Haven in Banbury, and a High Intensity User Service based in OUH ED which will increase community provision and as a result divert activity away from ED.</p>
Emergency Department Psychiatric Service (EDPS)	All patients referred to EDPS are seen within the agreed timeframe - Horton General Hospital	62%	6+ months	4			
All Ages Mental Health Oxon	Non – Urgent (Routine) - 14 day assessment target	95%	Demand & Capacity	3	6		<p><b>Description of the issue:</b> There has been an increase in referrals this month, beyond the service's capacity to meet the required 14 day assessment target. This is primarily due to staffing capacity not able to see everyone within the 10 days, but all patients were contacted and offered an appointment within 4 weeks as per NHSE standards</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> Further review is required to understand the demand and capacity within the perinatal team</p>
Perinatal Service		68%	6+ months	2			
All Ages Mental Health Oxon	% of people that have a Care plan review in the last 12 months (of people opened for 12 months or longer)	85%	Demand & Capacity	4	8		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> New MH Dashboard has been created by IM&amp;T for the AMHT which will flag up patients due for CPA review in the next month and this will allow teams to plan demand and resources better. Dashboard training has been completed across the AMHT teams and the Dashboards have gone live.</p>
OBC (Outcomes Based Contract) Sch 4		72%	6+ months	2			
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	4	8		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> 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. Administration Vacancies are being advertised and recruitment is underway</p>
OBC (Outcomes Based Contract) Sch 4		74%	6+ months	2			
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	4	8		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> 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		54%	6+ months	2			
All Ages Mental Health Oxon	% of service users who have had a comprehensive physical health assessment covering BMI, blood pressure, smoking status, blood sugar levels, alcohol intake and exercise levels in the previous 12 months (electronic caseload reporting)	85%	Data Quality	4	8		<p><b>Description of the issue:</b> The rules for reporting the contractual requirements have been reviewed and agreed with the CCG which has led to a need to modify reports.</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> OH P&amp;I Team have adjusted the report SQL coding and the reports are undergoing validation and testing processes. It is anticipated that this work will be completed by the end of December 2019.</p>
OBC (Outcomes Based Contract) Sch 4		55%	6+ months	2			

All Ages Mental Health Oxon	The length of wait for the 75th centile at Step/Cluster 3 for CBT	8 weeks	Mix of issues	3	9		<p><b>Description of the issue:</b> Accommodation Issues and capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> Recruitment continues now that funding has been agreed, the majority of new staff started during September. There are continuing clinical accommodation pressures in the North, North East, Vale and West as we are being asked to leave GP practices due to their pressures to accommodate other Primary Care staff. It continues to be challenging to source clinically suitable and affordable accommodation</p>
Integrated Access to Psychological Therapies (IAPT)		13 weeks	6+ months	3			
All Ages Mental Health Oxon	The length of wait for the 75th centile at Step/Cluster 3 for Counselling	8 weeks	Mix of issues	3	9		<p><b>Description of the issue:</b> Accommodation Issues and capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> We continue to work with PML to reduce the wait for counselling. PML are working with OHFT to source counselling locums to address the longest waits. Some waits are further compounded by accommodation issues in the City, South East and South West.</p>
Integrated Access to Psychological Therapies (IAPT)		10 weeks	6+ months	3			
All Ages Mental Health Oxon	Percentage of children/young person having their first routine appointment within 12 weeks of referral	75%	Demand & Capacity	4	12		<p><b>Description of the issue:</b> Demand and Capacity work is currently being carried out. Funding to manage the increasing demand is focusing on those waiting longer than 12 weeks, which does not positively impact on this KPI.</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> Healios have been contracted by the Trust to help reduce the waiting list. MHST within schools have recently been implemented and a single point of access was also implemented to improve access and patient flow, with the aim of reducing administrative processes and waiting times. Oxfordshire CCG are regularly updated of progress. There will also be monies for core services following the Shipman report regarding the demand/funding gap.</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		30%	6+ months	3			
All Ages Mental Health Oxon	Percentage of children that receive a diagnosis or treatment within 12 weeks of routine referral into NDC (Neurodevelopment)	75%	Workforce shortages	4	12		<p><b>Description of the issue:</b> There is a reduction in paediatric input impacting on number of assessments able to be completed. There is a large backlog of long waiters that are a priority, due to length of time of they have been waiting, this does not impact the KPI positively</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> Currently advertising and actively recruiting to fill staff vacancies. A pause clock (up to 12 weeks) has been agreed, when waiting for completed screening tools to be returned from other agencies. Oxon CAMHS have recently been successful in a bid to obtain extra funding to address the waiting list for a NDC assessment, this will be used to recruit further staff.</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		16%	6+ months	3			
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (Excluding Eating Disorders) - No. Within 8 Weeks	70%	Demand & Capacity	5	10		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
BANES CAMHS (Child & Adolescent Mental Health Service)		17%	6+ months	2			

All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 4 weeks	75%	Demand & Capacity	3	6		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
BANES CAMHS (Child & Adolescent Mental Health Service)		47%	6+ months	2			
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (Excluding Eating Disorders) - No. Within 8 Weeks	50%	Demand & Capacity	4	8		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
Swindon CAMHS (Child & Adolescent Mental Health Service)		20%	6+ months	2			
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 4 weeks	45%	Demand & Capacity	4	8		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
Swindon CAMHS (Child & Adolescent Mental Health Service)		23%	6+ months	2			
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (Excluding Eating Disorders) - No. Within 8 Weeks	70%	Demand & Capacity	5	10		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		41%	6+ months	2			

All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 4 weeks	75%	Demand & Capacity	4	8		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		58%	6+ months	2			
Community Services	Eligibility decisions are made within 28 days of accepting a referral.	95%	Mix of issues	3	9		<p><b>Description of the issue:</b> Eighteen out of forty-two breaches were attributed to limited capacity within the Service due to workforce shortages and demand exceeding commissioned capacity. The remaining twenty-four breaches were related to external factors such as Social Worker capacity shortages, incomplete checklists, delays agreeing discharge arrangements etc. High proportion of referrals received in month were from the Acute sector.</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> The Service continues managing flow of work on a risk strategy basis. A business plan submitted to recruit an in-reach nurse for acute sector - awaiting outcome. In addition to that, one of the workstreams led by Oxfordshire Clinical Commissioning Group will be addressing performance against this Key Performance Indicator as it is recognised that not all breaches are within the Services's control to be avoided.</p>
Continuing health care (Oxon)		33%	6+ months	3			
Community Services	Eligibility decisions are made within 28 days of accepting a referral	80%	Mix of issues	3	6		<p><b>Description of the issue:</b> Seventeen assessments were completed outside of the timeframe due to a variety of reasons - increase in referrals and limited capacity within the Service, delays signing DST's (Decision Support Tool) within Buckinghamshire County Council and five complex cases requiring twice a week caseload management.</p> <p><b>Is there a plan to resolve:</b> Partly</p> <p><b>What is the plan:</b> Continue monitoring Service improvement action plan through the monthly Monitoring meeting with Buckinghamshire Clinical Commissioning Group</p>
Continuing health care (Bucks)		65%	6+ months	2			
Community Services	Every child under the age of five will receive a review health assessment at six-monthly intervals	90%	Mix of issues	3	6		<p><b>Description of the issue:</b> Three out of four children were not see within the timeframe due to a mix of issues outside of the Trust's control. The Looked After Children teams in another counties offered appointments outside of the timeframe or late notification of changed placement details.</p> <p><b>Is there a plan to resolve:</b> No as outside of Trust's control</p> <p><b>What is the plan:</b> N/A</p>
Looked After Children (Out of County)		25%	6+ months	2			



All Ages Mental Health Bucks	Local 20i -% people will have care review within the (timeframe) specified by the cluster package	95%	Further review	3	9		<b>Description of the issue:</b> Care reviews not being completed within the contracted timescales. <b>Is there a plan to resolve?</b> Yes <b>What is the plan?</b> The new MH dashboard will be live for Bucks starting 3rd week of October. In the mean-time the service has sourced and implemented a Caseload Monitoring Tool (Butler 2004) which will enable them to monitor activity more closely with teams and individuals and provide a reference point in supervision to review the care package and required review dates. The service will also be proposing a change to the indicator to measure CPA more in line with the Oxon model.
Bucks CCG (Adults Working Age)		42% (70/167)	6+ months	3			
Specialised Services	Referrals: % of routine referrals to Specialist Learning Disability Health Services meeting 6 week wait	95%	Further review				<b>Description of issue:</b> We have had no actual breaches in this period ( 2 were recording issues) - amended attainment is therefore 100% of referrals met. <b>Is there a plan to resolve?</b> Yes <b>What is the plan?</b> Information will be shared with the service re: how to record cases properly in the system, and how to record cases where initial assessment is secondary to dealing with a referral issue (this will help reduce recording issues). regarding the issue with the ability to offer assessment visits in a timely fashion, more clinic slots have now been added.
Learning Disability Services		82%	4 months				
All Ages Mental Health Bucks	PR04ii - Urgent referrals to Mental Health Team will be seen within 7 consecutive days for assessment.	95%	Other	3	9		<b>Description of the issue:</b> North Bucks – 77% (24/31) 7 patients breached, 4 were triaged within the 7 days and 1 was triaged on the 8th day. 1 patient was waiting for a medic and the last patient did not engage initially. All patients have been seen. South Bucks – 67% (14/21) 7 patients breached, all triaged on referral date. 1 patient was cancelled and re-booked by clinician, for 1 patient this was the first available appointment but for the last 5 patients it is not documented why the patient was offered a date outside the 7 days. All patients have been seen. <b>Is there a plan to resolve?</b> Yes <b>What is the plan?</b> The service expect this to improve next month as the additional member of staff for the Aylesbury Assessment Function only started midway through October.
Bucks CCG (Adults Working Age)		73% (38/52)	4 months	3			
All Ages Mental Health Bucks	Local 20i -% people will have care review within the (timeframe) specified by the cluster package	95%	Further review	3	9		<b>Description of the issue:</b> Care reviews not being completed within the contracted timescales. <b>Is there a plan to resolve?</b> Yes <b>What is the plan?</b> The new MH dashboard will be live for Bucks starting 3rd week of October. In the mean-time the service has sourced and implemented a Caseload Monitoring Tool (Butler 2004) which will enable them to monitor activity more closely with teams and individuals and provide a reference point in supervision to review the care package and required review dates. The service will also be proposing a change to the indicator to measure CPA more in line with the Oxon model.
Bucks CCG (Older People's Mental Health)		80% (107/133)	4 months	3			
All Ages Mental Health Oxon	Percentage of typed Interim Inpatient discharge letters that are sent back to GPs within 24 hours of discharge	95%	Workforce shortages				<b>Description of the issue:</b> There were 2 wards affected by medical cover issues during this month, with sick leave and a vacancy which the service was not able to back-fill <b>Is there a plan to resolve:</b> Yes <b>What is the plan:</b> All staff are now back from sick leave and a locum is currently in place
OBC (Outcomes Based Contract) Sch 4		83%	4 months				

All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 8 weeks	65%	Demand & Capacity	4	8		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
Swindon CAMHS (Child & Adolescent Mental Health Service)		53%	3 months	2			
Community Services	Decision Support Tool (DST) completed in acute hospital	<15%	Change in delivery model required				<p><b>Description of the issue:</b> Suitable Discharge to Assess (D2A) provision remains a problem as it is not suitable for a person with challenging behaviour and cognitive impairment. Funded Nursing Care (FNC) determination is still being made prior to discharge therefore in some cases this triggers DST assessments. Requests from Social Care to assess for Continuing Healthcare prior discharge. Eight out of thirty-five Decision Support Tools (DSTs) completed in acute hospitals (eight in Buckinghamshire Healthcare NHS Trust and two in Wexham Park Hospital). Previously piloted Nursing Assessment prior to discharged stopped due to co-operation challenges.</p> <p><b>Is there a plan to resolve:</b> Partly</p> <p><b>What is the plan:</b> Buckinghamshire Clinical Commissioning Group (BCCG) is considering broadening the D2A provision. BCCG continues exploring D2A/spot purchase beds for patients with high level needs.</p>
Continuing health care (Bucks)		23%	3 months				
Community Services	% of Routine referrals had an appointment (offered) within 8 weeks	90%	Further review required				<p><b>Description of the issue:</b> Low performance is partly attributed to reduced capacity due to workforce shortages. However, a further review is required to identify all reasons contributing to low performance.</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> Further investigation to be carried out by the Service with the support from Business Services. Short term actions are to ensure that DNA (Did Not Attend) rates remain low or non-existent to ensure a maximum number of appointment slots are filled. Non-essential non-face to face activities are kept to a minimum where appropriate and does not pose any risks. Seeking support from other services for administrative purposes.</p>
Falls Prevention Service		38%	2 months				
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 18 weeks	95%	Demand & Capacity	3	6		<p><b>Description of the issue:</b> Demand and Capacity</p> <p><b>Is there a plan to resolve:</b> Yes</p> <p><b>What is the plan:</b> A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group, chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings and are reviewing the waiting time targets. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand. BSW has been awarded £95k from the SWCN to review our pathways, administrative and clinical processes, working in collaboration with the SWCN and peer reviewers.</p>
Swindon CAMHS (Child & Adolescent Mental Health Service)		83%	2 months	2			
Specialised Services	% of patient with a Historical Clinical Risk (HCR 20) complete in 3 months of admission	95%	Other				<p>This indicator has breached its target by &gt;10% for one month. Further investigation will be carried out if this indicator remains red for a second month.</p>
Forensic MSU		67%	1 month				

All Ages Mental Health Bucks	PR04ii - Urgent referrals to Mental Health Team will be seen within 7 consecutive days for assessment.	95%	Other				<b>Description of the issue:</b> First month red, no narrative required.
Bucks CCG (Older People's Mental Health)		75% (3/4)	1 month				
All Ages Mental Health Bucks	Memory Service Users with Diagnosis (F00, F01, F02, F03 and F06.7) will receive an assessment and diagnosis within 40 days of receipt of referral.	85%	Mix of Issues				<b>Description of the issue:</b> First month red, no narrative required.
Bucks CCG (Older People's Mental Health)		68% (48/71)	1 month				
All Ages Mental Health Bucks	Urgent – 2 day assessment target	95%	Other				<b>Description of the issue:</b> First month red, no narrative required.
Bucks CCG - Perinatal		0% (0/1)	1 month				
All Ages Mental Health Bucks	% Referral to treatment target of 6 weeks for psychological interventions	95%	Other				<b>Description of the issue:</b> First month red, no narrative required.
Bucks CCG - Perinatal		67% (4/6)	1 month				
All Ages Mental Health Oxon	Mandatory training up to date	90%	Other	3			<b>Description of the issue:</b> Due to sickness and cancellations, meetings that highlight and address training issues have not happened recently. This has causes a large drop in training in Swindon in September. <b>Is there a plan to resolve:</b> Yes <b>What is the plan:</b> The courses that are outstanding have been highlighted to the Service Manager, Team Manager and Office Manager, who have been asked to raise with individual staff members. This will be raised and reviewed at the Operations and Clinical Governance Group meeting on the 25th October.
Swindon CAMHS (Child & Adolescent Mental Health Service)		78%	1 month	2			

		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 October 2019**

There were 13 patients in Acute or PICU Out of Area placements during Oct19, utilising a total of 80 bed days in the month of Oct19.

11 Patients were admitted to an OAP placement in Oct19.

2 Patients were admitted in Sep19 and was still out during Oct19.

All placements were attributed to bed availability.

2 Placements were in PICU beds, and 11 in Acute mental health beds.

6 Patients were Oxfordshire CCG, 5 were Buckinghamshire CCG patients.

Two patients were registered with GPs under other CCGs (NHS Barnsley and NHS Herts Valleys) but on S117 so the responsibility of Oxford Health.

5 Patients were male and 8 were female.

The distance from patients' home to placements ranged from 0.3 to 98.5 miles, with the average distance being 57 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	Sep-19	M	Independent	Acute	Unavailability of bed	1	32.9
Bucks	Adults	Sep-19	M	Independent	Acute	Unavailability of bed	3	95.3
Oxon	Adults	Oct-19	M	NHS	Acute	Unavailability of bed	1	24.7
Oxon	Adults	Oct-19	F	Independent	PICU	Unavailability of bed	13	56.5
Oxon	Adults	Oct-19	M	Independent	PICU	Unavailability of bed	6	98.5
Oxon	Adults	Oct-19	F	Independent	Acute	Unavailability of bed	5	69.7
Oxon	Adults	Oct-19	F	Independent	Acute	Unavailability of bed	7	95.3
Oxon	Adults	Oct-19	F	Independent	Acute	Unavailability of bed	8	70.2
NHS Barn	Adults	Oct-19	F	NHS	Acute	Unavailability of bed	19	0.3
Bucks	Adults	Oct-19	M	Independent	Acute	Unavailability of bed	6	49
NHS Her	Adults	Oct-19	F	Independent	Acute	Unavailability of bed	2	49.9
Bucks	Adults	Oct-19	F	Independent	Acute	Unavailability of bed	4	67.7
Bucks	Adults	Oct-19	F	Independent	Acute	Unavailability of bed	5	33.2