

# Report to the Meeting of the

**CG 15/2018**

(Agenda item: 12)

# Oxford Health NHS Foundation Trust

# Council of Governors

**June 12th 2018**

**Performance Report Q4**

**(January 2018 – March 2018)**

**For: Information**

**Executive Summary**

This report provides a consolidated view of the Trusts performance against both national and local (contracted) indicators for **January – March 2018 (Q4)**. A standard scorecard approach is used 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.

The Trust has consistently met or exceeded circa. 90% of all contracted performance indicators. A diagram showing Trust performance over time is included in Fig 1. A view on performance by Directorate is included as Fig 2. This evidence demonstrates that the Trust is consistently delivering a strong performance against contractual targets set by Clinical Commissioning Groups (CCG’s).

In addition to the Trust’s locally contracted commitment, there is also a national requirement to report against targets defined within the NHS Single Oversight Framework. These indicators have been included within the reports provided so that there is a consistent format both within and external to the Trust. Further work to develop the reporting in this area continues.

**Fig 1. Compliance against overall contracted targets:**

At an individual Directorate level:

* **Children and Young People (CYP) Directorate** performance has remained consistently around 95% since the start of the reporting year and has averaged 95% during Q4 (January – March 2018)
* **Adults of Working Age (AWA) Directorate** performance continues to improve from a position 58% late 2016 with an average of 75% year to date and 75% over the Q4 (January - March 2018).
* **Older People’s Directorate (OPD)** performance has averaged 76% since M1 and 75% over Q4 (January to March 2018)

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

**Children & Young People**

In looking at the performance trends and identifying areas where further action is required, the following issues have been reported to the Operations Management Team and the Board of Directors:

* **Oxfordshire CAMHS** - As part of the transition to the new operating models and the realignment of teams, work to ensure that performance data is being reported accurately and in accordance with the new structure continues. Some anomalies in reporting were recently found and are currently being investigated. Updates will be provided in reporting at the end of June 2018 and included within the next Council of Governors report in September 2018
* **Buckinghamshire CAMHS ‘Getting More Help’ & Targeted Pathway, 4 Week Waits** – There has been a continuous improvement reported in both of these performance indicators since January. As with the work in Oxfordshire, a data quality validation exercise is now underway.
* **Swindon CAMHS T3 4 Week Waiting Times –** Due to a long term increase in demand, the service has historically not been able to achieve the 4 week waiting time target. The commissioners have revised the performance targets within the new contract to reflect the increase in demand and the limited investment available.
* **Bath & North East Somerset 4 Week Waiting Times –** Although there was a slight increase in performance during Q4, the service has not been able to consistently achieve the 4 week waiting time target. Recruitment is currently underway and performance will be monitored closely throughout Q1 2018.
* **CAMHS T2 4 Week waiting times** – In particular in Swindon, Wiltshire and Bath & North East Somerset (BaNES) (T2). Work is underway to embed the new service delivery models and to resolve the current workforce issues. The Trust is expected to see an improvement in performance in Q2 2018.

**Older Peoples**

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

* **Oxfordshire Continuing Health Care –** There has been a consistent increase in referrals during Q3 and Q4 and the service now receives C190 cases per month but only has the capacity to deliver C160 at present. The position is also compounded by delays that can happen outside of the Trusts direct control. If the trend in referrals continues and the service is unable to achieve the targets set, then a business case will be submitted to the CCG for further investment or the targets negotiated down.
* **The Out of Hours (OOH) Services**. Although the OOH services continued to be under pressure throughout Q4, performance has improved. The two indicators that remained below target at the end of Q4 were urgent triage (walk in) and urgent face to face base visit. The service continues to ensure that every patient is safe whilst under OOH care and this is a continual focus for the team
* **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 reviewed the current delivery model and has taken all steps possible to improve efficiency which has been overseen by the commissioners.Although a business case for additional investment has been submitted to commissioners, funding has not been agreed as the CCG are now carrying out a broader review of services. A revised target of 50% (current target 95%) has been proposed by the Trust whilst the CCG consider this position further.
* **Delayed Transfers of care (DTOC) and Length of Stay (LOS)** 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, work continues to address the issues that are solely within the remit and control of Trust. The good performance reported in the last quarter has continued and the position at the end of March was 5 patients.

**Adults:**

In looking at the performance trends and identifying areas where further action is required in the Adults Directorate, the following issues have been reported to the Operations Management Team and the Board of Directors.

* **Improving Access to Psychological Therapies (IAPT)** – Although the 8 waiting time targets for Cognitive Behaviour Therapy (CBT) and Counselling in Oxfordshire have not yet been achieved, there has been a significant reduction in waiting times from the position reported in Q3 (19 weeks to C11 weeks). As part of a plan to expand the capacity of the IAPT services, additional staff have been recruited, however, a shortage of suitable accommodation is now the main issue affecting the Trust’s ability to achieve the 8 week target. The Service is working with commissioners and partners to resolve this issue. A temporary increase in the waiting time target may be appropriate given that this issue is beyond the Services control.
* **Cluster Reviews** – The cluster reviews indicator in Oxfordshire continues to be below target. Service managers are working with teams reviewing the patient level detail to ensure cluster reviews are occurring on time.

The performance and Business Intelligence (BI) teams are working together to produce a list of where there are gaps in cluster reviews for patients. initial investigations have highlighted issues with the reports underlying the data. It is estimated that is will take a further 3 months to resolve.

* **Care Reviews** - Analysis of the performance data has shown that timescales for care reviews in Buckinghamshire continue to be below target, however, performance in Aylesbury is on an upward trajectory with 56% of people having a care review in time at the end of Q4 compared to 41% at the end of Q3. During the next reporting period the service managers will continue to meet with the leadership team to ensure improvements to this target can be made whilst delivering a quality service.

**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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