

OPERATIONAL PLAN 2018/19: MID YEAR REVIEW – PROGRESS IN DELIVERING OBJECTIVES

QUALITY				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Develop a new Trust Quality Improvement Strategy to support staff to consistently and continuously focus on service quality improvement. This will support our new Organisation Strategy for 2019/20 to 2023/24.	In July 2018, Board approved in principle the adoption of a formal Quality Improvement System, based on Lean methodology. In September 2018, Board approved the engagement of an external support partner, with a proven track record in the NHS, to help us implement a Quality Improvement System.	Green	Green	Green

OPERATIONAL SERVICE PRIORITIES: Mental Health Acute Services																
Objective	Progress Against Agreed Actions	Rating - Outcomes														
		2018/19 YTD	2018/19 Forecast	2019/20 Risk												
Continue the First Response team's success in eliminating out of area placements for adults.	Trust continues to have no inappropriate adult acute out of area placements. The Care Quality Commission has queried whether there is a link between having zero out of area placements and risks/incidents in the community. We are commissioning an external independent review of serious incidents. Some capacity challenges for First Response and Intensive Home Treatment Team resulting from increased demand, with consequential increases in caseload and acuity.	Green	Green	Green												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Indicator</th> <th style="text-align: center;">Target</th> <th style="text-align: center;">Q1 18/19</th> <th style="text-align: center;">Q2 18/19</th> </tr> </thead> <tbody> <tr> <td>Adult acute inappropriate out of area placements – number of bed days patients have spent out of area</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> <tr> <td>Psychiatric Intensive Care Unit inappropriate out of area placements – number of bed days patients have spent out of area</td> <td style="text-align: center;">41 per quarter</td> <td style="text-align: center;">62</td> <td style="text-align: center;">4</td> </tr> </tbody> </table>	Indicator	Target	Q1 18/19	Q2 18/19	Adult acute inappropriate out of area placements – number of bed days patients have spent out of area	0	0	0	Psychiatric Intensive Care Unit inappropriate out of area placements – number of bed days patients have spent out of area	41 per quarter	62	4				
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Adult acute inappropriate out of area placements – number of bed days patients have spent out of area	0	0	0													
Psychiatric Intensive Care Unit inappropriate out of area placements – number of bed days patients have spent out of area	41 per quarter	62	4													
Work collaboratively with the other mental health trusts across West Yorkshire and Harrogate to establish coordinated adult acute bed management that will ensure if people cannot access non-specialist acute beds in their local area then we will be able to keep them in region and prevent out of area placements.	West Yorkshire mental health providers developing a West Yorkshire bed management strategy. Memorandum of Understanding agreed between the four mental health and community NHS trusts in West Yorkshire and bed monitoring system in place across the region. At West Yorkshire level, number of out of area bed days currently exceeds agreed trajectory.	Amber	Amber	Amber												

<p>Embed criteria led discharge, with the ambition of decreasing length of stay by 10%. Review bed capacity, building on work to design a care pathway that can deliver an alternative community model for acute/crisis mental health services.</p> <p>Explore the introduction of alternative shift systems for mental health acute and specialist in-patient wards. Embed work to improve the efficiency of the auto-roster, maximising the use of established and bank staff and reducing agency shifts.</p> <p>Explore workforce development opportunities across all inpatient services, working closely with universities, local colleges and employment agencies. Develop a senior staff nurse programme and provide a leadership programme for ward managers.</p>	<p>Criteria led discharge and further transformation continue to improve pathway, including consistent discharge approach. Project shortlisted for Medipex Innovations Awards & Showcase 2018.</p> <p>Care Closer to Home business case, responding to mental health acute pathway pressures by improving the care pathway and creating a more therapeutic environment, approved by EMT. Further development work agreed before consideration by Finance, Business and Investment Committee in October and Board in November 2018. However there has been slippage on timelines for the business case and for the review of the medical model.</p> <p>All acute wards now trialling 12 hour shift system with a review of benefits and recommendations planned for October 2018. Initial findings show improvement in attendance, reduction in unused hours and reduced reliance on agency.</p> <p>Leadership programme in place for ward managers. Senior staff nurse programme being developed. Acute inpatient wards continue to have high vacancies. Initiating a revised workforce structure for community and inpatient mental health services. <i>Update provided in workforce section.</i></p>	Red	Red	Red
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Indicator	Target	Apr 18	May 18	Jun 18
Average length of stay – based on discharged clients		33 days	49 days	46 days
Average occupancy – including leave	85%	98.3%	98.3%	98.7%
Average occupancy – excluding leave	85%	93.1%	92.2%	93.8%

Indicator	Target	Sep 18	18/19 Forecast
Sickness absence – Inpatient acute services	4%	4.95%	
Temporary staffing: agency staff		42%	
Temporary staffing: bank staff		58%	
Staff turnover - Inpatient acute care services	10%	10.68%	
Finance year to date variance £000's – Mental Health Acute and Community Services	£0	(844)	(1,575)
Finance CIP delivery £000's – Mental Health Acute and Community Services	£2,027	(330)	(917)

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

OPERATIONAL SERVICE PRIORITIES: Mental Health Community Services

Objective	Progress Against Agreed Actions				Rating - Outcomes																																												
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Develop a recovery and prevention model, encompassing community mental health teams, assertive outreach and early intervention in psychosis, working with voluntary sector partners. Transition from current to new service model	Recovery and prevention model developed: care closer to home business case approved by Executive Management Team. However there has been slippage on timelines for the business case.				Amber	Amber	Amber																																										
	Increased demand for early intervention service resulting from extension to age range up to 65. Additional staff now recruited but backlog of assessments. Further expansion of services needed in 2019/20, to meet increased national access targets and workforce requirements.				Red	Green	Green																																										
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Due to significant budget reductions for Public Health commissioned substance misuse service, transition substance misuse dual diagnosis into adult community mental health pathways.	Two year programme in place. During process will be reviewing gaps and effects of service reduction resulting from Public Health budget reductions. Financial risks including stranded overheads.				Amber	Amber	Red																																										
As lead provider for IAPT and psychological services in the Bradford District, continue to develop working models with voluntary and community service partners.	MyWellbeing College telehealth service procured from The Cellar Trust - will be fully operational from November 2018. First three of MyWellbeing College disorder specific guided self-help workbooks produced for use in-service (depression, general anxiety disorder and panic disorder); further six scheduled and on-track to deliver before financial year-end. As part of 2018/19 contract agreement, CCGs to review the model and costings for IAPT long term conditions in quarter 1 of 2018/19. Timescales slipped: now scheduled for discussion at Service Development Group in December. Unlikely to be funded in full. National (non-mandatory) guide prices for IAPT assessment and treatment to be published for 2019/20.				Amber	Amber	Amber																																										
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Further develop the psychological therapies hub model so that capacity meets demand. Conclude capacity and demand analysis of Steps 4 & 5 psychological therapies and implement recommendations from this review.	Community Mental Health Psychological Therapy Service and Intensive Psychological Therapy Service waiting times and waiting lists reducing. By October 2018 both services will finalise an action plan to eradicate all waiting over 18 weeks by March 2019. Contracted with voluntary and community services for psychologists into Community Mental Health Teams.	Red	Amber	Amber																																																							
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Undertake external peer review of capacity and demand for our older people's mental health services.	Review undertaken. Transformation ongoing, which includes introduction of new roles. Funding not yet identified for all required roles.	Amber	Amber	Amber																																																							
New specialist perinatal mental health community service to be fully operational from April 2018.	The new Specialist Mother and Baby Mental Health service launched on 16 May 2018. Continuing to working with commissioners to develop the service.	Green	Green	Green																																																							
Work with CCGs to review and further develop the Bradford and Airedale Neuro Development Service to meet current demand within acceptable waiting times. Support work to scope a West Yorkshire approach to improvements in ADHD and autism (children and adults) pathways in order to reduce waiting times.	Demand exceeds commissioned capacity. Service remains closed to new adult autism referrals. Peer review undertaken by Leeds service which identified some efficiencies but also under-resourcing. Potential non-recurrent funding 2018/19 to test revised model. Awaiting outcome of West Yorkshire and Harrogate scoping work.	Red	Red	Red																																																							
Work with Leeds and York Partnership and South West Yorkshire Partnership Foundation Trusts to establish a regional community adult eating disorder service.	New model of care in place, led by Leeds and York Partnership Foundation Trust, and supporting ongoing development of service.	Green	Green	Green																																																							

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

OPERATIONAL SERVICE PRIORITIES: Child and Adolescent Mental Health Services (CAMHS)				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Develop crisis response services for children and young people. Create specific specialist CAMHS practitioner posts within the First Response Service and Intensive Home Treatment Team. Develop a standalone community eating disorder service for children and young people.	Roles established in First Response and Intensive Home Treatment Team. Community eating disorder service in place. There have been increased referrals into CAMHS. Capacity has also been impacted by the reduction in local authority staff within the Looked After Children team, which has resulted in higher caseload numbers for CAMHS staff. In the period April to July 2018, 11 CAMHS clients waited 11 weeks or more from the point of referral to first appointment offered.	Amber	Amber	Amber
Develop specialised services for children and adolescent mental health, as part of a joint bid with Leeds Community Healthcare Trust, Leeds and York Partnership Foundation Trust and South West Yorkshire Partnership Foundation Trust.	Improvements continue including a new, more cost-effective, model of care for children and young people across the West Yorkshire and Harrogate Health and Care Partnership. In initial 6 months there has been a 43% reduction in tier 4 admissions; 48% reduction in length of stay; 30% reduction in distance from the young person's home. Initial savings are being reinvested into community services, including in care navigation. However across West Yorkshire and Harrogate, there are still some admissions of young people to adult wards.	Amber	Green	Green

OPERATIONAL SERVICE PRIORITIES: Learning Disability Services				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Support the Local Authority and CCGs to develop and deliver the Bradford transformation plan for people with learning disabilities and link with the other West Yorkshire and Harrogate transformation plans.	Three training sessions completed for local service providers about the Stopping over medication of people with a learning disability, autism or both (STOMP) programme. Mortality reviews identified a gap in respiratory pathway for people with learning disability. This has now been developed. Learning disability Transforming Care service redesign across West Yorkshire and Harrogate, which aims to reduce beds in treatment units and increase intensive support in communities, is now more integrated but significant service transformation has not yet occurred. Dependency with West Yorkshire work on assessment and treatment units – future investment in community services unclear.			

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

OPERATIONAL SERVICE PRIORITIES: Specialist In-Patient Services

Objective	Progress Against Agreed Actions			Rating - Outcomes		
				2018/19 YTD	2018/19 Forecast	2019/20 Risk
Work with NHS England, local commissioning hubs, CCGs, providers and other stakeholders to reshape low secure services.	Engaged with other Yorkshire and Humber secure providers and NHS England to develop and agree a new Commissioning for Quality and Improvement goal for 2018/19 which supports the delivery of the national adult secure mental health service review, to improve partnership working and patient transition. Working with NHS England, providers and stakeholders to redesign of secure services across Yorkshire and Humber. The service is operating at a loss compared to the income received from the commissioner: price review requested for 2019/20.			Red	Red	Red
Support best practice on the Dementia and Assessment Unit (DAU) using a range of initiatives including volunteers; additional activities e.g. music therapy; wellbeing and resilience support for staff; associate nurse programme for 4 Band 4 staff.	Provision of music therapy being rolled out, following evaluation showing the value it has brought to patients quality of life and well-being. Successful bespoke DAU recruitment day took place in June 2018. Specialist Inpatient Services peripatetic team formed. New staff nurses commenced on DAU but there remain a significant number of vacant nursing posts on DAU. Trying new approaches to using posts differently e.g. associate nurse; pharmacy technician.			Red	Red	Red
Indicator	Target	Sep 18	18/19 Forecast			
Sickness absence - DAU	4%	5.86%				
Vacancy rate - DAU	10%	30.44%				
Turnover - DAU	10%	21.88%				
Finance year to date variance £000's – DAU	£0	(285)	(503)			
Undertake work on specialing and observations including: implementing a bespoke observation policy; workshop around specialing led by the Director of Nursing and Operations and Medical Director; peer review with Greater Manchester Mental Health Trust.	Working closely with health commissioners to review specific cases of patients who have long inpatient stays, utilise high levels of specialing and are in turn difficult to place in onward nursing care placements. Whilst there has been great success with a number of patients, this remains a challenge. Peer review undertaken with Greater Manchester. Actions in place include review of specialing needs on a daily basis; pilot of alternative observation initiative (light touch) specialing.			Red	Red	Red
Indicator	Target	Sep 18	18/19 Forecast			
Temporary staffing: agency staff		43%				
Temporary staffing: bank staff		57%				
Finance year to date variance £000's – Specialist Inpatients	£0	(649)	(1,158)			
Finance CIP delivery £000's – Specialist Inpatients, Dental and Admin	£1,279	(216)	(822)			

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

OPERATIONAL SERVICE PRIORITIES: Administration Services

Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Re-design the Trust's inpatient administration service to bring in line with community administration methodologies.	Redesign plan, priorities & assessment tool in place prior to ward visits. Workshops started in August. Plan & all documentation organised and communicated prior to go live. Delay in completing full assessment due to SystmOne implementation issues and delays. Lack of engagement from clinical staff. Progress review scheduled for mid-November. Four wards left to assess.	Amber	Amber	Amber
Review all RiO administration processes and realign to SystmOne, in preparation for implementation in July 2018.	Operational implementation, cut over and additional resource plan in place three months before go live. Delay and issues with SystmOne implementation. Initial objective completed prior to SystmOne go live. However all processes and SLAs require review - to continue in to 2019/20.			
Continue to develop administration service level agreements and standard operating procedures to internal customers.	Delay & issues with SystmOne implementation. Expect process and SLA reviews to continue in to 2019/20 for the Mental Health teams. All other service area SLAs are complete.			
Promote the need to consider administration requirements for service developments.	Ongoing – to be monitored. Areas raised about admin support during Trust Challenges (crowdsourcing): following the introduction of admin hubs, clinicians feel that they are spending more time on admin tasks and checking admin work, which is reducing their face-to-face clinical time. Director of Nursing and Operations leading review of current arrangements to ensure that they work for both clinicians and staff in admin hubs. Workshops taking place September to November, to complete the work by the end of the year.			

Indicator	Target	Apr 18	May 18	Jun 18	Jul 18	Aug 18	Sep 18
Total number of calls	N/A	54,960	56,160	51,594	53,378	60,465	55,650
Calls answered in Single Point of Access and Hubs	80%	92%	93%	94%	91%	81%	89%
Dictations completed within service level agreement (<i>No longer typing dictations in Bighand, transferred to SystmOne</i>)	95%	95%	95%	80%	N/A	N/A	80%
Footprints tasks completed within service level agreement	90%	90%	95%	86%	82%	86%	89%
No Information Governance incidents	0	2	3	3	1	3	
Calls transferred to First Response within 10 minutes	80%	86.7%	84.4%	79%	75.5%	73.3%	

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OPERATIONAL SERVICE PRIORITIES: Dental Services				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Develop staff to ensure that the service is recognised as providing level 2 & 3 services in line with the new commissioning guidance for paediatrics and special care dentistry. Achieve ongoing compliance with 18 week referral to treatment times for patients receiving dental care under general anaesthetic. Work in partnership with other providers of community dental services, once NHS England has confirmed next steps following recently stopped re-procurement.	Paediatric and Adult Special Care STRs have successfully completed their training programmes with the service. Specialist in Special Care Dentistry appointed. Waiting times continue within target despite high demand for dental services. Improvements include extension of the Anxiety Management service with availability of conscious sedation. Working with NHS England to agree new contract for community dental services from 1 October 2018. Five year contract but requires that a number of conditions precedent are met, including a commitment for financial realignment and specification with referral to treatment target for which theatre capacity could not be identified or funded.	Green	Amber	Amber
	Urgent Dental Services procurement issued in September, with a reduced funding envelope for the West Yorkshire 'lot'. Contract award December 2018.	Green	Amber	Red
Determine the impact of and respond to Public Health Grant budget reductions as they apply to oral health promotion.	Bradford Council public health (0-19) children's service procurement – contract award November 2018. Significant financial and service risks whether or not Trust is awarded contract.	Red	Red	Red

RAG Key:	red	Outcomes off track/not met	amber	Potential risks to delivery of outcomes	green	Outcomes met/on track
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OPERATIONAL SERVICE PRIORITIES: Adult Physical Health Community Services

Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Work in partnership with the Local Authority, education and acute providers to support the development and monitoring of children with special educational needs and disability (SEND).	Awarded five year contract from Bradford Council to continue to provide Specialist Speech and Language Therapy for Deaf and Hearing Impaired Children and Young People.	Green	Green	Green
Continue to work in partnership with local providers and commissioners to develop more cost effective out of hospital services and care pathways. Assess and suggest mitigations to manage the impact of de-registration of nursing homes and loss of non-recurrent funding for pressure ulcers nurses on our Bradford district nursing teams. Work in partnership with the Local Authority to develop pathways of care to support care homes to manage the increasing complexity of care.	Strong Trust engagement in the structured collaboration approach to out of hospital care and to community partnerships (ten in Bradford, three in Airedale, Wharfedale & Craven. Team leaders in place for each Community Partnership and received training in multi-disciplinary working. Adult physical health celebration event in October showcased work being undertaken. Community nursing demand and capacity work updated. Community safer staffing indicators reported regularly to Board. Mitigating actions include introduction of team leader role for each Community Partnership which will support partnership responses to demand. Multi-Agency Integrated Discharge Team established with Bradford Teaching Hospitals NHS Foundation Trust and and a post seconded to Airedale NHS Foundation Trust. Tissue viability service highly commended for their work on the venous leg ulcer pathway in the Outstanding Practice in Wound Care Awards (September 2018). However there is under-investment in community services, which needs to be addressed with Bradford and Craven system partner organisations.	Green	Amber	Amber
Further evaluate the quality and cost benefits of the primary care wellbeing service, for people who are frequent GP attenders with medically unexplained symptoms.	Evaluation undertaken. Primary care wellbeing service working out from existing four GP practices into the Community Partnerships. Service highly commended in two categories of Positive Practice in Mental Health Awards: 'Innovation in Community Mental Health' and 'Integration of Physical and Mental Health Care'.	Green	Green	Green
Work in partnership with Cellar Trust to deliver one of the Skills, Training and Employment Pathways work streams, offering programmes of support for people with mental health problems.	Contracted extended to December 2019 and sub-contracted to Cellar Trust to deliver.	Green	Green	Green
Further develop the Individual Placement and Support (IPS) service that helps people with severe mental health problems to get back into work.	Additional transformation funding secured from NHS England to further develop the IPS service and additional staff in post. Success with supporting people back into work, though not to date to Trust posts - additional work being undertaken. We are supporting colleagues in West Yorkshire and Harrogate Health and Care Partnership to access Wave 2 funding.	Amber	Green	Green

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

OPERATIONAL SERVICE PRIORITIES: Children's Services

Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Secure contracts to provide health visiting, school nursing and associated 0-19 Public Health services as part of an integrated Early Years and Prevention 'offer' to be procured by Bradford Council during 2018/19 and be in a position to bid for other contracts.	Bradford Council public health (0-19) children's service procurement – contract award November 2018. Outcome not yet known. Significant financial and service risks whether or not Trust is awarded contract. Trust awarded contracts for Bradford strategic breastfeeding service and immunisations and vaccinations. Outcome awaited of OFSTED inspection of social care one system approach.	Red	Red	Red
Continue to work closely with Wakefield Council and NHS England to deliver the health visiting, Family Nurse Partnership, school nursing and 5-19 years immunisation and vaccination service for Wakefield.	Majority of contractual indicators met at quarter 1. Positive relationship with commissioners. Working with commissioners to support actions resulting from OFSTED inspection of social care one system approach – result was requires improvement	Green	Green	Green
Work with CCGs about how providers and commissioners will need to work differently to safely meet the needs of the rising number of children with complex health needs.	School Nursing Special Needs Service update report to CCG Service Development Group August 2018 identified a further increase in special school places and an increase in all areas of complexity. CCGs provided additional recurrent funding. Working closely with special schools to develop alternative model of service delivery.	Green	Green	Green
Continue to work closely with the Local Authority to implement the Signs of Safety, Early Help offer and prevention. Continue to provide a high quality, evidence based safeguarding service.	Looked After Children & Youth Offending annual report presented to CCG Service Development Group August 2018 highlighted that the service is under significant pressure with significant numbers of children new into care and proposed mitigations to mitigate increased demand on the team. CCGs leading a service review. Mitigations agreed including charging for out of area assessments, with the additional income being re-invested in staff.	Red	Amber	Amber

Looked After Children	Bradford	Out of Area	Non Bradford Supported	Total
2014	894	188	217	1299
Sept 2017	970	195	366	1531
June 2018	986	202	385	1573
Change	92	14	168	274
% Change	10%	7%	77%	21%
Sept 2018	1019	Looked After Children service review estimated that additional 6.76 WTE Band 6 nurses needed to respond to current volumes of assessments, reviews and follow up actions		
2008	820			
Change	199			
% Change	24%			

Child Protection Subject to Child Protection Plan	Bradford
2010/11	378
Sept 2018	664
Change	286
% Change	76%

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

OPERATIONAL SERVICE PRIORITIES: Patient Experience and Engagement				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Continue to support our cohort of 250 volunteers under champions show the way to deliver activities which promote the improvement of physical and mental wellbeing. Continue to build the range of volunteering activities available across the Trust. Continue to support a variety of ways for people to be involved in the work of the Trust.	In July 2018, "You and Your Care" Strategic Reference Group agreed to: <ul style="list-style-type: none"> - develop a more integrated approach to service user, carer and public involvement integrated with the Foundation Trust membership - review the current volunteering strategy including the production of a business case that identifies the benefits of increasing volunteering across services - Continue work within the Trust to employ people through the IPS programme. - Reflect on the new organisational strategy and quality improvement work to identify further areas of work relating directly to service users and carers. Priorities for 2019/20 include: revising the Involvement and Engagement Strategy, which will follow work to refresh the Trust strategy as a key 'enabling' strategy; exploring other ways of improving engagement, for example 15 Steps Challenge; Patient-Led Assessments of the Care Environment.	Green	Green	Green
Continue to develop systems to review all aspects of patient experience feedback to monitor trends and themes.	August 2018 Quality and Safety Committee assurance report to Board confirmed that a systematic approach to the collection of patient experience data, and how this translates into action is now in place.	Green	Green	Green
Continue to develop new Carers' Hub activities in partnership with Carers' Resource, Making Space and Barnardo's and other voluntary sector bodies.	Attendance and activities at the Hub continues to be successful. New activities include: weekly craft group; men's only carer group in collaboration with Making Space; confidence building session delivered by partners from Carers Resource.	Green	Green	Green
Roll out the Triangle of Care kitemark for carers to community mental health services by December 2019 and all other Trust services by December 2021.	Implementation taking place across community mental health teams. Briefings have taken place at team level and teams are undertaking initial self-assessments to form a baseline for progress against the 6 key standards for the Triangle of Care. Staff within community teams to complete carer awareness training by December 2018.	Green	Green	Green




RAG Key:	red	Outcomes off track/not met	amber	Potential risks to delivery of outcomes	green	Outcomes met/on track
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OPERATIONAL SERVICE PRIORITIES: Nursing				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Continue to publish staffing numbers for all inpatient areas and for community services. In the absence of a national safer staffing tool for mental health services, implement an acuity model based on the principles of the Keith Hurst model. Undertake an annual strategic staffing review.	Safer staffing data provided monthly in Board integrated performance report. Bi-annual safer staffing report to Board. Internal acuity tool development has been paused until the nationally accredited mental health acuity model is released. We continue to participate in the NHS Improvement national acuity meetings where the Keith Hurst model is to be launched in October 2018. National Quality Boards safer staffing review undertaken in March 2018 suggested a new approach to skill mix with more multi-disciplinary, therapeutic input to inpatient wards. Review is to be undertaken annually and preparations underway for the March 2019 review.	Amber	Amber	Amber

CORPORATE SERVICE PRIORITIES: Programme Management Office, Business Support and Improvement, Business Development				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Project manage, facilitate, support and report the activities and outcomes within the Trust's transformation and operational improvement programme.	Monthly reporting within Board integrated performance report. Bi-annual transforming care update to Board. Leading on the implementation of Quality Improvement System. Significant transformations are underway, notably in children's and mental health acute pathways. Cost Improvement Transformation Programme is red rated with projected shortfalls in medical locum costs and bank and agency spend in specialist inpatients and acute inpatients.	Red	Red	Red
Support advancement and innovation of services and ideas through a market development process.	Market Development Strategy annual report presented to Finance, Business and Investment Committee: Committee noted the strengths of the processes being applied, and the successful bids. Committee suggested strengthening of work with emerging GP federations, and with other trusts in the West Yorkshire and Harrogate footprint. iCare celebration event held June 2018.	Green	Green	Green

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

CORPORATE SERVICE PRIORITIES: Digital Healthcare and Informatics				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Implement a new mental health clinical information system, 'go live' planned in July 2018.	Mental health SystmOne went live mid July 2018. Still ongoing system refinements and training to support. RiO extended to end of October. Internal Audit "significant assurance" report for Clinical System Migration Project (project management processes up to implementation). Audit Committee requested further report from Internal Audit/Finance, Business and Investment Committee in relation to issues and learning from implementation. Project closure report to be considered by Board in November.	Red	Amber	Amber
Ensure ongoing compliance with the Information Governance Toolkit (minimum Level 2) and the new General Data Protection Regulations (GDPR).	Toolkit re-launched as Data Security and Protection Toolkit. We are working through toolkit with view to being compliant by end of financial year. Information Governance training compliance is slightly below 95% target (93.48% - September 2018). Established and delivered plan for GDPR requirements. Ongoing actions, including contracts with third party suppliers (low risk). Internal audit 'significant assurance' report received.	Amber	Green	Green
Continue to deliver the Trust's 5 year Informatics work plan, supporting agile working and linking with the Trust's digital strategy and new cyber security strategy, which in turn support local and regional digital aspirations.	Update provided to Finance, Business and Investment Committee June 2018 on progress made against digital strategy implementation programme and corresponding cyber security strategy. Digital strategy and 5 year Informatics work plan monitored through Informatics Board. Some current challenges relating to IT infrastructure (connectivity) and equipment e.g. mobile phones. Employed substantive cyber security officer, cyber security work plan in place. Progress as plan, though potential risk of cyber attack remains high. Internal audit 'significant assurance' report for controls and governance arrangements (May 2018). Accredited training for Board and senior leaders on cyber security scheduled for December 2018.	Amber	Amber	Amber

RAG Key:	 Outcomes off track/not met	 Potential risks to delivery of outcomes	 Outcomes met/on track
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CORPORATE SERVICE PRIORITIES: Estates and Facilities, Finance and Business Intelligence

Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Deliver key financial targets and demonstrate value for money including effective procurement and continued estate rationalisation, One public estate collaboration (including option appraisal of the Keighley hub), operational business partnering to re-design services and develop innovative partnership models, robust agency cost controls and a continued focus on the delivery of back office efficiencies.	<p><i>See financial plan update.</i></p> <p>September 2018 Finance, Business and Investment Committee considered the updated corporate benchmarking analyses and emphasising the need to consider radical change where possible.</p> <p>Estates strategy being developed and will follow work to refresh the Trust strategy, as a key 'enabling' strategy document.</p>	Red	Red	Red
Continue to improve performance in Patient Led Assessments of the Care Environment (PLACE) for cleanliness, food, privacy & dignity and maintenance.	The Trust's 2018 PLACE results exceed national averages across all areas: cleanliness; food and drink; maintenance and appearance of buildings; privacy, dignity and wellbeing; and suitability of the environment for people with dementia or a disability.	Green	Green	Green
Streamline and automate the extrapolation, analysis and reporting of information from clinical systems, to meet national and contractual requirements and provide information to clinicians, service managers and corporate functions, within available resources. Make progress to embed Service Line Reporting and implement Patient Level Information and Costing Systems (PLICS) to support new contract models.	Assessment of corporate services has confirmed need for standardisation of information reporting to support decision making. Following implementation of mental health clinical system, current priority is to re-establish reporting from mental health SystemOne. Work ongoing with CCG commissioners to rebase the contracts to more accurately reflect the cost/price of service delivery within contracts. Final agreement to be reached in advance of 2019/20 financial year on movement of funds between contract baselines.	Amber	Amber	Amber

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

CORPORATE SERVICE PRIORITIES: Marketing and Communications

Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
Market new and re-modelled services – for example MyWellbeing College ‘self-help workbooks’, specialist perinatal mental health, alternative model for acute/crisis mental health - to support more people to stay well, ideally in the community.	<ul style="list-style-type: none"> • MyWellbeing College – First three of MyWellbeing College disorder specific guided self-help workbooks produced for use in-service (depression, general anxiety disorder and panic disorder); further six scheduled and on-track to deliver before financial year-end. Refresh of design/layout of MyWellbeing College website complete to market service, self-help tools and courses, and launched new Living Life to the Full course (September 2018). • Specialist perinatal – soft launch May 2018 with supporting collateral; formal launch originally due October 2018 but re-scheduled due to service demand linked to capacity. • Eating disorders – soft launch October 2018 with supporting collateral; formal launch currently scheduled for February/March (Eating Disorders Week – 25 February to 3 March 2019). • Transforming mental health acute/community services – work on-going on a place-based (acute/community model) and West Yorkshire & Harrogate level. 	Green	Green	Green
Leverage all Trust channels including digital, to engage members, partners and wider communities in Trust work to support business units/operational leads to shape Trust services, including the organisational strategy.	<p>Key opportunities for communities/ representatives to shape Trust work promoted via traditional and digital (web, social) channels, and community-based events:</p> <ul style="list-style-type: none"> • Refresh of organisational vision/values/organisational strategy (started May 2018) – this work is continuing and concludes with internal and external launch January 2019. • Trust Governor elections (January to April 2018); further activity to recruit five governors scheduled for November 2018 to March 2019. • Annual Members Meeting – 18 September 2018. <p>Key priority for 2019/20 is to review social media and website offering.</p>	Green	Green	Green
Develop a digital information portal on the Trust website, working with the Trust’s community-based services, to support and signpost individuals on self-care e.g. digitally-based guides/tools for children’s services.	<ul style="list-style-type: none"> • Discussions on-going with teams to identify key areas for self-care; portal currently being developed to sit on current corporate site and scheduled to go-live for self-care element of winter campaign (November 2018). • For children’s services, developing self-care digital platform to be confirmed post tender. <p>Key priority for 2019/20 is to review social media and website offering.</p>	Green	Green	Green

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

WORKFORCE				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
<p>Our workforce plans focus on three key areas:</p> <ul style="list-style-type: none"> • Ensure sufficient workforce capacity and capability by attracting people into the workforce, growing our future and existing workforce, developing our staff bank; • Ensure workforce efficiency, effectiveness and productivity by looking after the health and well-being of our current workforce; • Working in partnership across Bradford District and Craven and the West Yorkshire and Harrogate Health and Care Partnership to support service transformation and develop the workforce of the future. 	<p>The demographics of the nursing workforce present a significant risk. An increasing number of nurses are choosing to retire before aged 60 and retire and return applications are very low. In addition, 23% of our staff leave in the first 12 months of employment and more than 50% of those leaving are under 40 years old.</p> <p>Actions: Robust induction, preceptorship and daily ward walkabouts by senior clinical staff in place to support effective care planning and delivery. Working with Bradford University to build strong relationships with nursing students as early as possible. New 12-month structured preceptorship programme launched in June 2018 to support the transition of newly qualified staff from student to registered practitioner.</p> <p>Medical vacancies and high staff turnover on wards continue to be a challenge.</p> <p>Actions: developing options appraisals for associate specialist roles, re-evaluating the continuing care model for medical staffing.</p> <p>Change fatigue and work pressures are impacting on staff morale.</p> <p>Actions: Comprehensive health and wellbeing strategy is in place to support the wellbeing of staff, reduce sickness and attract and retain staff. Embedding crowdsourcing to support extensive staff engagement. Using crowdsourcing to support 2018 staff survey which will enable results to be shared and action plans developed within a days of the staff survey closing. Comprehensive management and leadership passport introduced to develop capacity and capability and ensure that staff are well led.</p> <p>The Workforce Race Equality Standard shows a broadening of the gap between how BAME staff and white staff have reported their satisfaction with equal opportunities and their experience of bullying and harassment from other staff.</p> <p>Actions: A wide range of equality and diversity work is taking place as part of the Trust's Equality, Diversity and Inclusion Workforce Strategy. A new policy is in place to support staff with abuse from patients and service users and an analysis of the grievance and disciplinary process has been carried out in response.</p> <p>A plan is in place to help the Trust maximise the apprenticeship levy usage – this includes developing existing staff and offering apprenticeships to new starters across all services and directorates.</p> <p>Workforce challenges will remain for the foreseeable future - the national shortages of clinical roles, an aging workforce, increased international opportunities for clinical staff as well as the well documented financial and workload pressures on all NHS staff will continue to impact. New workforce strategy to be developed for 2019 onwards, to support the new Trust strategy.</p>	Red	Red	Red

RAG Key: red Outcomes off track/not met amber Potential risks to delivery of outcomes green Outcomes met/on track

FINANCIAL PLAN				
Objective	Progress Against Agreed Actions	Rating - Outcomes		
		2018/19 YTD	2018/19 Forecast	2019/20 Risk
<p>Address key challenges within the Trust's financial plan:</p> <ul style="list-style-type: none"> • Management of special observation and temporary staffing levels across the Trust's inpatient wards; • The challenge of having delivered a persistent 'efficiency stretch' on block contracted community and mental health services of 5% and implications of a further efficiency requirement of £7,351k, or 5%, of which considerably more than ever; around 34%, are red rated for delivery and of which around £1.2m represent non recurrent actions; • The monthly profile and Quality Impact Assessment status of proposed cost improvement schemes; and • Community Dental Service and Early Years contracts, for which NHS England and Local Authority (respectively) procurement processes are expected in 2018/19. 	<p>Financial performance is ahead of plan but in-year position includes non-recurrent mitigations for under-performance, mainly inpatient staffing and medical locum pressures and the Care Closer to Home programme where planned cost improvement savings will not be delivered this financial year.</p> <p>Implications, risks and mitigations for Bradford Council public health (0-19) children's service procurement considered by Board in September. Contract award November 2018.</p> <p>Urgent Dental Services procurement issued in September, with a reduced funding envelope for the West Yorkshire 'lot'. Finance, Business and Investment Committee to consider in October. Contract award December 2018.</p> <p>As a result of NHS efficiency requirement, undelivered cost improvement in 2018/19 relating to inpatient and medical staffing overspends, impact of Bradford 0-19 children's services tender - significant 2019/20 cost reductions required to be a sustainable organisation.</p>	Red	Red	Red
<p>Deliver key capital plan commitments including PC/laptop replacement, network infrastructure improvements, implementing a new mental health clinical information system, refurbishment of the Airedale Centre for Mental Health (Phase 2 in 2018/19), fire safety remedial works at Airedale Centre for Mental Health, refurbishment of some Trust community properties and Patient Led Assessment of the Care Environment action plan.</p>	<p>Capital expenditure is below plan at month 5 due to slippage on estates and IM&T schemes that will be delivered later in the year. The capital plan will be fully committed in 2018/19.</p>	Amber	Green	Amber

RAG Key:	red Outcomes off track/not met	amber Potential risks to delivery of outcomes	green Outcomes met/on track
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