

Council of Governors Performance Report

4 November 2021 meeting

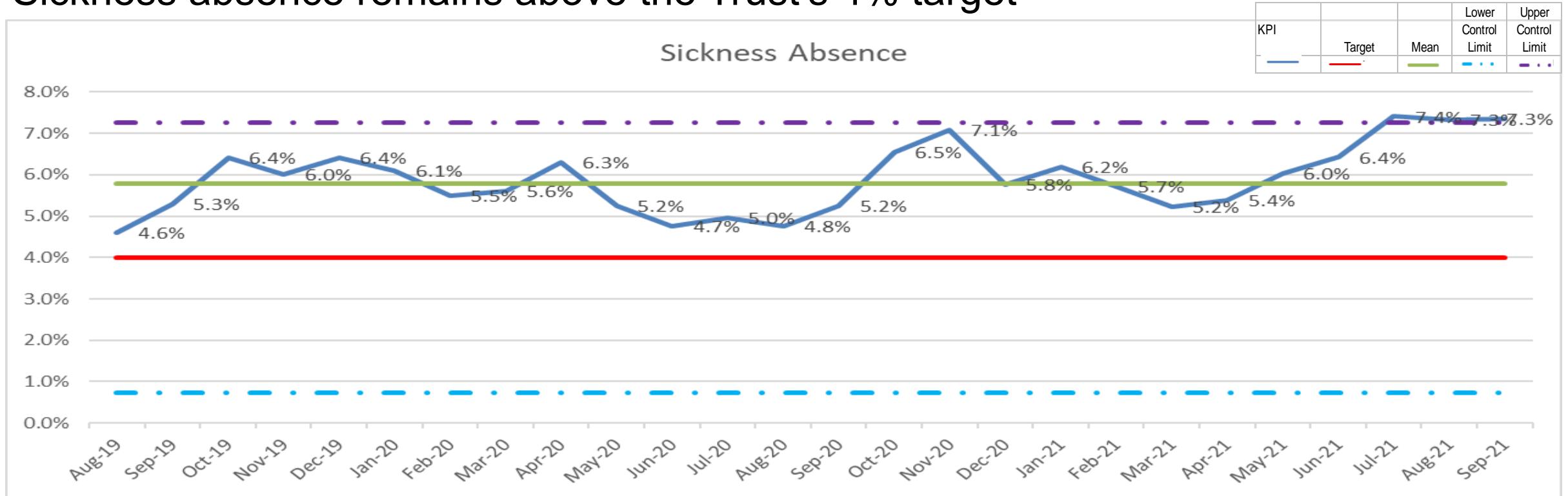
Performance relating to June, July, August and September 2021

Combined impact of:

- **growing demand** - increased acuity and complexity, with COVID-19 having a clear and significant impact;
- **staff absence and staffing shortages workforce** - sickness absence due to COVID-19; long term sickness recorded as anxiety, stress and depression; other COVID related absences; high levels of vacancies and turnover in some services; together with summer annual leave.

Workforce – Staff Absence

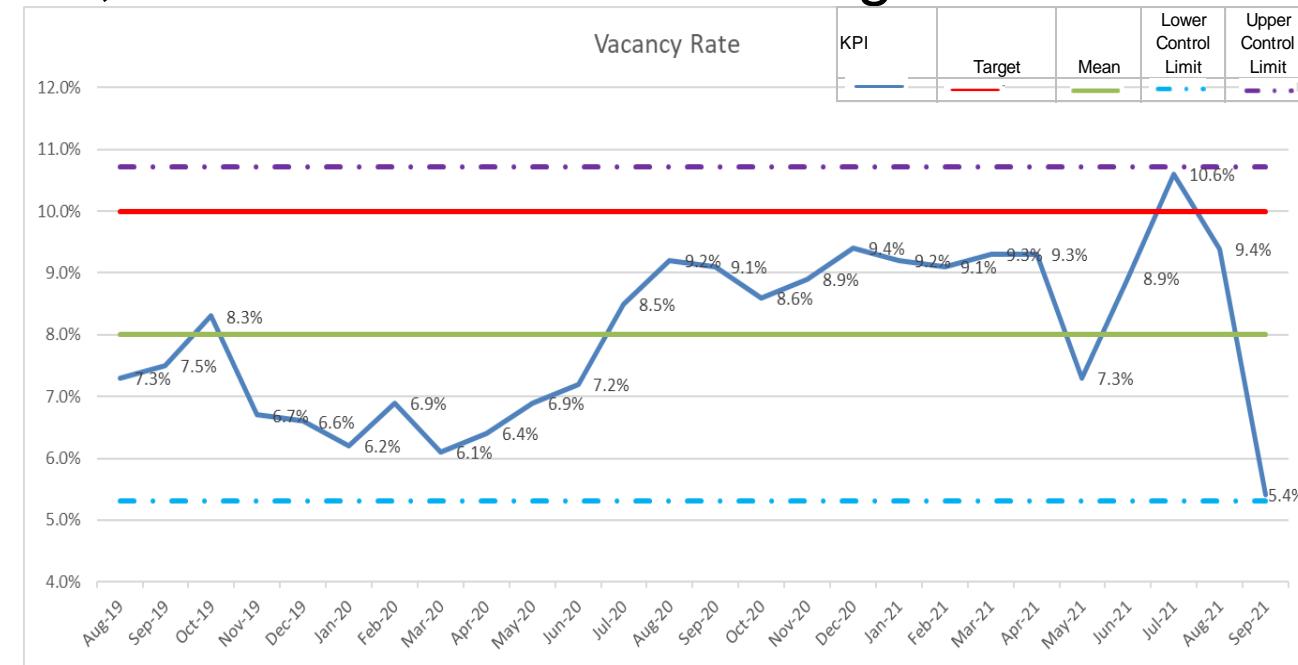
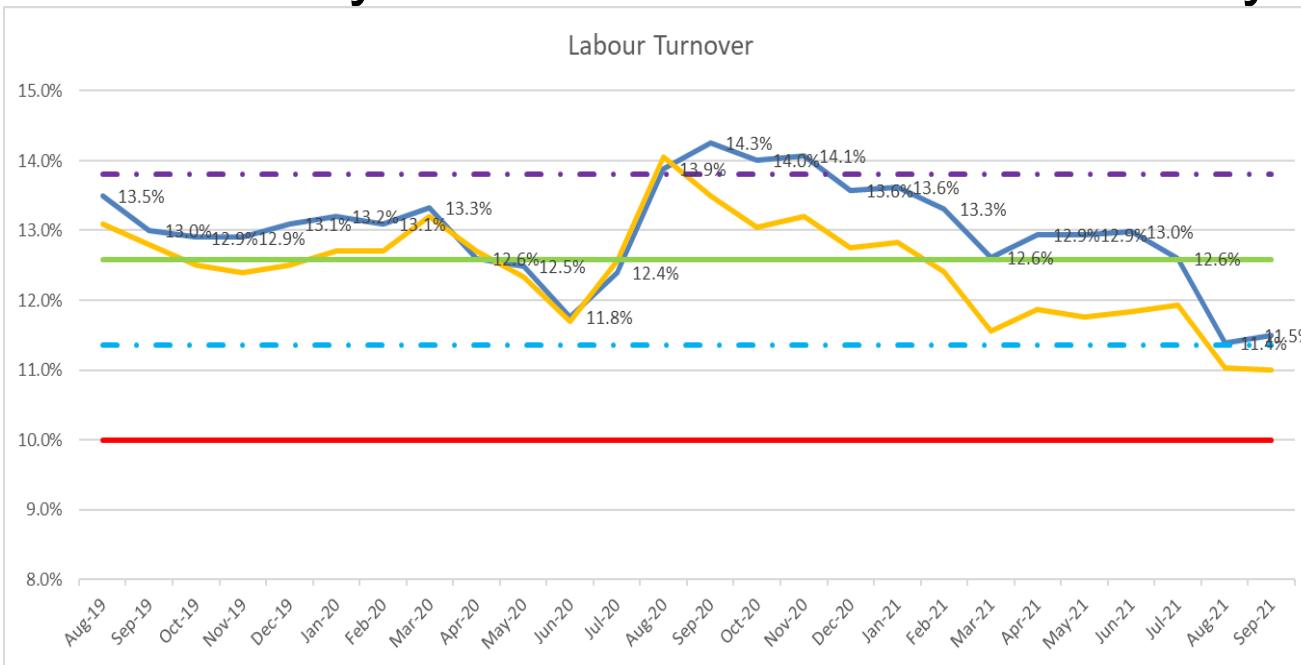
- Sickness absence remains above the Trust's 4% target



- Anxiety, stress and depression and musculoskeletal problems remain the top reasons for long-term sickness.
- Hotspot areas include rostered services (inpatients, some community mental health services, out of hours district nursing), Bradford 0-19 services, Wakefield 0-19 services
- Sickness absence rate continues to have negative impacts on the Trust in terms of continuity of service, financial costs (due to bank/agency expenditure) and staff morale.
- Health and wellbeing offer for staff has been extended significantly in response to COVID to include access to several national health and wellbeing support initiatives. The Trust has increased the provision of psychological support to staff by setting up its own psychological helpline staffed by therapists. Wellbeing conversations are also embedded into the appraisal process.

Workforce – Labour Turnover and Vacancy Rate

- Labour turnover remains above the Trust's 10% target
- Vacancy rate increased to 10.5% in July 2021, above the Trust's 10% target



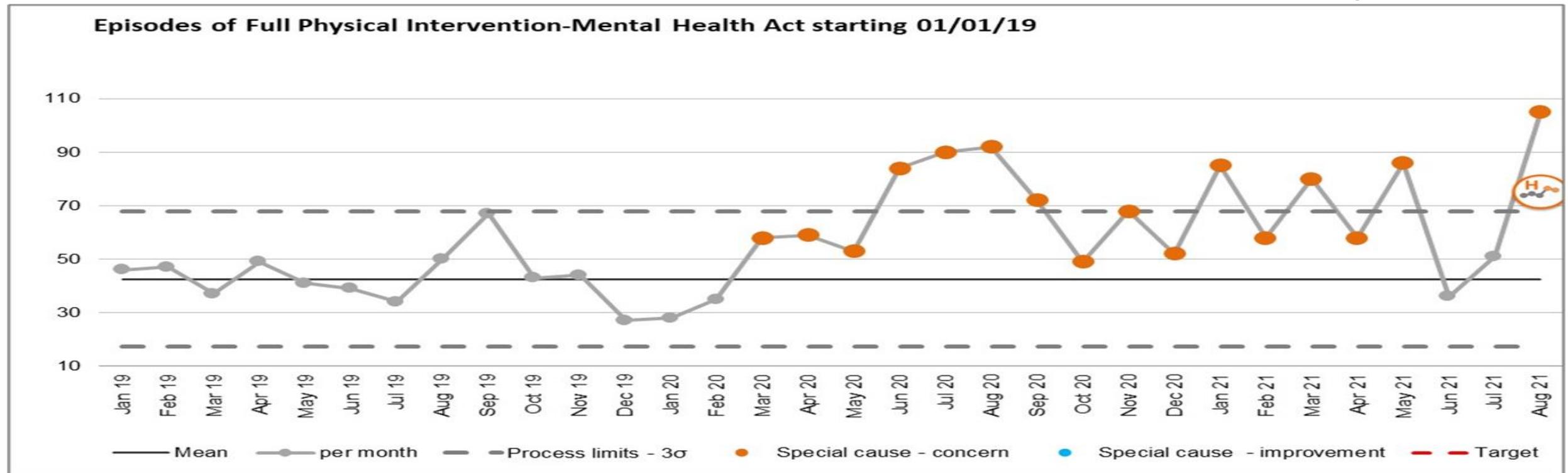
- Services escalated to the Senior Leadership Team include:
 - vacancies and maternity leave in community nursing and speech and language therapy. Recruitment continues. Exploring increased skill mix – recruiting additional Health Care Assistants and Nursing Associates;
 - labour turnover in the Bradford 0-19 service. Due to staffing challenges, the Bradford health visiting and school nursing services are working to business continuity plans, with a change to core service delivery. Actions include:
 - work with Just R. to attract candidates to hard to recruit posts;
 - a programme of skill mixed recruitment;
 - ‘Grow our Own’ specialist community public health nursing programme.

Workforce – Safer Staffing

- Safer staffing compliance rates in mental health inpatient services reflect the continuing pressures experienced through acuity of service-user presentation and associated staffing challenges.
- The complexity of the client group is necessitating higher levels of care hours per patient and staff are also required for patients in acute beds and section 136 suites.
- Some staff have been unable to take breaks.
- Sickness and annual leave are also contributing to requirements for bank and agency staffing.
- Actions and mitigations include:
 - block bookings of bank and agency staff to provide stability;
 - targeted wellbeing plans for staff;
 - overtime payments for staff in inpatient services, First Response and Intensive Home Treatment teams, with the arrangement reviewed on a monthly basis by the Executive Management Team to ensure balance between service need and wellbeing of staff;
 - re-commencement of food provision for acute mental health staff;
 - workforce model review programme.

Mental Health Legislation - Incidents

- COVID-19 restrictions continue to impact patients and staff significantly.
- There has been an increase in the number of episodes of full physical intervention from March 2020, reflecting the high levels of acuity and the impact of isolation requirements. All incidents continue to be monitored by the Positive and Proactive Steering Group.

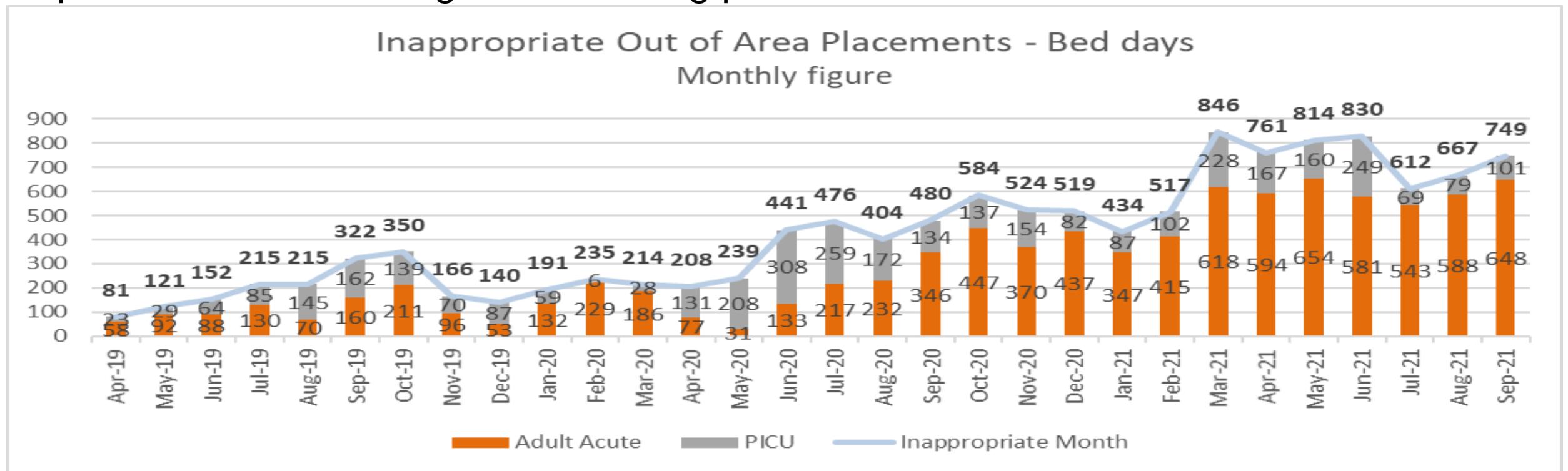


- During July and August, a small number of complex service users, including two young people with complex needs, impacted on the numbers of incidents and level of interventions. Despite the challenges, restrictive practices have reduced on all wards except the section 136 suites.
- The Mental Health Care Group is planning the roll out of a 'no force first' approach and a business case is being developed for dedicated capacity and roles to take forward as a project, aligned with workforce planning and the Together We Improve Create and Sustain (TWICS) programme.

NHS Oversight Framework Metrics

– Out of Area Placements

- COVID-19 has resulted in an increased number of inappropriate out of area placements for adult mental health services due to a combination of increasingly acute patients requiring an inpatient stay and a reduction in bed capacity to meet COVID safe requirements for isolating and cohorting patients.



- The Trust has worked with an independent sector partner to block purchase beds, with a rigorous assurance framework to oversee quality and maximise capacity available.
- New flow manager is in post, daily partnership calls with police and acute trusts.
- Out of area oversight structures commenced September 2021, including setting discharge dates for all service users who are out of area.