

Board of Directors – Meeting held in Public

12 January 2023

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| Paper title: | Board Integrated Performance Report – November 2022 Data | Agenda Item 14 |
| Presented by: | Mike Woodhead, Director of Finance, Contracting and Estates | |
| Prepared by: | Susan Ince, Deputy Director of Performance and Planning – with Senior Leadership Team members | |
| Committees where content has been discussed previously | Quality and Safety Committee 17/11/22 & 15/12/22 Mental Health Legislation Committee 24/11/22 Workforce and Equality Committee 20/10/22 Finance, Business and Investment Committee 24/11/22 | |
| Purpose of the paper Please check <u>ONE</u> box only: | <input type="checkbox"/> For approval <input type="checkbox"/> For information <input checked="" type="checkbox"/> For discussion | |
| Link to Trust Strategic Vision Please check <u>ALL</u> that apply | <input checked="" type="checkbox"/> Providing excellent quality services and seamless access <input checked="" type="checkbox"/> Creating the best place to work <input checked="" type="checkbox"/> Supporting people to live to their fullest potential <input checked="" type="checkbox"/> Financial sustainability, growth and innovation <input checked="" type="checkbox"/> Governance and well-led | |
| Care Quality Commission domains Please check <u>ALL</u> that apply | <input checked="" type="checkbox"/> Safe <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Well-Led <input checked="" type="checkbox"/> Responsive | |

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| Purpose of the report |
| <p>The Board Integrated Performance Report and the underpinning Committee dashboards and data packs support the Trust’s governance and assurance processes. They support Board oversight of performance, progress towards strategic goals and ensure responsiveness to emerging issues, with a clear line of sight from Board to ward/service including from escalation through daily lean management, groups and Committees through to Board.</p> <p>The Trust’s Performance Management Framework will be reviewed during quarter 4 of 2022/23 and presented to the Audit Committee for approval.</p> |

| Executive Summary | |
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| <p>The Board highlights report focuses on key items that have been considered and escalated through the relevant governance groups. The accompanying slides comprise the Committee summary dashboards together with data charts for any areas of escalation. Where possible, forward trajectories have been provided for metrics that are under-performing.</p> <p>The report highlights the combined impact of high service demand, increased acuity and complexity and workforce challenges which are affecting performance and waiting times.</p> | |
| <p>Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?</p> | <p><input type="checkbox"/> Yes (please set out in your paper what action has been taken to address this)</p> <p><input checked="" type="checkbox"/> No</p> |

| Recommendation(s) |
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| <p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> consider the key points and exceptions highlighted for November 2022 and note the proposed actions; consider any further attention via supporting Board Committee structures. |

| Relationship to the Board Assurance Framework (BAF) | |
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| <p>The work contained with this report links to the following strategic risks as identified in the BAF:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> SO1: Engaging with our patients, service users and wider community to ensure they are equal partners in care delivery (QSC) <input checked="" type="checkbox"/> SO2: Prioritising our people, ensuring they have the tools, skills and right environment to be effective leaders with a culture that is open, compassionate, improvement-focused and inclusive culture (WEC) <input checked="" type="checkbox"/> SO3: Maximising the potential of services to delivery outstanding care to our communities (QSC) <input checked="" type="checkbox"/> SO4: Collaborating to drive innovation and transformation, enabling us to deliver against local and national ambitions (Board) <input checked="" type="checkbox"/> SO5: To make effective use of our resources to ensure services are environmentally and financially sustainable and resilient (FBIC) <input checked="" type="checkbox"/> SO6: To make progress in implementing our digital strategy to support our ambition to become a digital leader in the NHS (FBIC) | |
| <p>Links to the Strategic Organisational Risk register (SORR)</p> | <p>The work contained with this report links to the following corporate risks as identified in the SORR:</p> <ul style="list-style-type: none"> 2485: Reduced staffing levels in speech and language therapy core paediatric service due to vacancies |

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| | <ul style="list-style-type: none"> • 2504: Waiting lists in memory assessment services • 2509: Community nursing services demand exceeding capacity • 2535: Staff wellbeing – 0-19 children’s services • 2598: Staff shortages in older people’s mental health services • 2609: Organisational risks associated with out of area bed use (finance, performance and quality) • 2610: Core Children and Adolescent Mental Health Service waiting list • 2611: Improving Access to Psychological Therapies waiting lists • 2620: Increased demand on speech and language therapy community adult service • 2661: Increased demand on speech and language therapy paediatric complex needs service • 2672: Lynfield Mount Hospital – Estate condition, associated impacts & redevelopment requirements |
| <p>Compliance & regulatory implications</p> | <p>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</p> <ul style="list-style-type: none"> • The NHS oversight framework describes how NHS England’s oversight of NHS trusts, foundation trusts and integrated care boards operates. Oversight metrics are used to indicate potential issues and prompt further investigation of support needs and align with the five national themes of the NHS oversight framework: quality of care, access and outcomes; preventing ill health and reducing inequalities; people; finance and use of resources; and leadership and capability. |

Meeting of the Board of Directors

12 January 2023

Board Integrated Performance Report – Board Highlights

1. Purpose

The paper provides key points in relation to November 2022 performance.

The common theme through all the data packs continues to be the combined impact of:

- high service demands, with increased acuity and complexity; and
- workforce challenges, with high labour turnover, increased vacancy rate, continued difficulties in attracting and retaining professionally qualified staff and sickness absence remaining higher than pre-COVID rates.

On 23 December 2022, NHS England published the 2023/24 priorities and operational planning guidance. The guidance acknowledges the continuing complexity and pressure faced and sets out fewer, more focused national objectives that will form the basis for how the performance of the NHS will be assessed, alongside the local priorities set by systems.

2. Workforce – Labour Turnover, Vacancy Rate, Sickness Absence

Recruitment, retention and wellbeing of staff continue to be a key concern and focus. Labour turnover has stabilised but remains high (October 16.0%, November 15.9%). The Trust vacancy rate has increased (September 9.4%, October 12.9%, November 12.3%) and now exceeds the Trust target of equal to or less than 10%. There are elevated vacancy rates in some operational services, correlated with high levels of sickness absence:

| Care Group | Vacancy Rate | Sickness Rate |
|--------------------------------|--------------|---------------|
| Adult mental health inpatients | 28.27% | 9.85% |
| Estates and facilities | 24.00% | 7.25% |
| Community nursing services | 16.23% | 9.97% |
| Dental services | 12.26% | 10.04% |

Innovative approaches are being taken to help to mitigate risk. For example in community nursing services, the Trust has contracted with a private care organisation to provide additional planned capacity for the out of hours district nursing service over the winter. A recruitment event has been arranged for January. Work is ongoing with Bradford Council to explore enhanced home care contracts.

As part of the 2023/24 operational plan, whole system workforce plans developed during 2022/23 will be refreshed to support:

- improved staff experience and retention through systematic focus on all elements of the NHS People Promise and implementation of the Growing Occupational Health Strategy, improving attendance toolkit and Stay and Thrive Programme;
- increased productivity by fully using existing skills, adapting skills mix and accelerating the introduction of new roles;

- flexible working practices and flexible deployment of staff across organisational boundaries using digital solutions (e-rostering, e-job planning, Digital Staff Passport).

3. NHS Oversight Metrics

Community dental service - treatment under general anaesthesia

The proportion of patients waiting less than 18 weeks for dental treatment under general anaesthesia remains below the 92% target (October 83.8%, November 81.0%) due to the cancellation of theatre sessions and a reduction in the number of patients seen per operating session in accordance with COVID infection prevention and control guidance. Demand has been increasing from all referrers, particularly from general dental practitioners, but additional theatre lists have been provided in October and November. The longest waiting time is 44 weeks.

The service has made a successful expression of interest to NHS England to support waiting list reduction. Additional general anaesthetic sessions will be delivered on Saturdays between mid-January and mid-March 2023 for exodontia (extraction of teeth). It is planned that 56 children will receive treatment, from a total waiting list of 275 adults and children.

Out of Area Placements

Use of acute adult and Psychiatric Intensive Care Unit (PICU) out of area beds remains high due to a combination of reduction in bed capacity to support COVID infection prevention and control requirements for isolating and cohorting patients and acuity of service user presentation. Pressures on mental health inpatient services are continuing over the winter period, with the number of out of area bed days increasing to 872 in October and 846 in November.

The Trust's internal forecast of out of area bed usage has been adjusted to reflect:

- further delay in opening of the crisis respite beds being mobilised by Bradford Council and Bradford and Craven Health and Care Partnership, due to difficulties in recruiting the required number of staff. Interim arrangements are not expected to be mobilised until March 2023, which impacts on the projected use of out of area bed days;
- application of the continuity principles from 2023, subject to Board consideration and approval in February 2023.

The increased costs are reflected in the financial position and forecast.

Trust actions to oversee and support improved recovery and flow and stabilise bed demands over the winter period link strategically to the Bradford and Craven Act as One programmes relating to crisis care and Community Mental Health Transformation, to ensure that the whole system pathway design is contributing to crisis prevention and care closer to home.

National objectives outlined in the 2023/24 operational planning guidance include:

- achieve a 5% year on year increase in the number of adults and older adults supported by community mental health services;
- work towards eliminating inappropriate adult acute out of area placements.

One of the key 2023/24 operational plan priorities for the Trust, with place and system support, will be adult acute mental health pathway transformation, across community and inpatient services, in order to reduce demand and admissions, length of stay, out of area placements and agency usage.

4. NHS Long Term Plan Mental Health Metrics - Improving Access to Psychological Therapies (IAPT)

There is continued positive performance in many of the NHS Long Term Plan mental health metrics. However workforce challenges, with a national shortage of qualified practitioners, coupled with increased service user complexity, is impacting on access and waiting times for IAPT. The proportion of people completing treatment who waited less than six weeks from referral to first treatment deteriorated to 74.5% for the three months September to November 2022, against the national standard of 75%. The proportion of referrals waiting over 90 days between first and second treatment improved to 23.0% in September 2022 (latest published data), though remains above the national standard of 10%.

There have been changes to the self-referral process to reduce assessment duration and increase therapy capacity and the service is developing relationships with private providers to support backlog and waits. Non-recurrent monies are being utilised to mobilise increased activity. Waiting time performance is forecast to recover and meet the national targets from quarter 1 of 2023/24.

Susan Ince, Deputy Director of Performance and Planning – with Senior Leadership Team members

29 December 2022