

# Board of Directors – Meeting held in Public 9 March 2023

Paper title: Presented by:	Board Integrated Performance Report – January 2023 Data  Mike Woodhead, Director of Finance, Contracting and Estates		Agenda Item 14	
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 19/01/23 & 16/02/23 Mental Health Legislation Committee 26/01/23 Workforce and Equality Committee 16/02/23 Finance, Business and Investment Committee 26/01/23		
Purpose of the paper Please check <u>ONE</u> box only:		☐ For approval ☐ For information ☐ For discussion		
Link to Trust Strategic Vision Please check <u>ALL</u> that apply		<ul> <li>☑ Providing excellent quality services and seamless access</li> <li>☑ Creating the best place to work</li> <li>☑ Supporting people to live to their fullest potential</li> <li>☑ Financial sustainability, growth and innovation</li> <li>☑ Governance and well-led</li> </ul>		
Care Quality Code domains Please check A		<ul><li>☑ Safe</li><li>☑ Caring</li><li>☑ Effective</li><li>☑ Responsive</li><li>☑ Well-Led</li></ul>		

#### Purpose of the report

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.

The Trust's Performance Management Framework is being reviewed during quarter 4 of 2022/23.



#### **Executive Summary**

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.

The report highlights the combined impact of high service demand, increased acuity and complexity and workforce challenges, exacerbated by industrial action and expected winter pressures, which continue to affect performance and waiting times.

Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?

Yes (please set out in your paper what action
has been taken to address this)

☑ No

#### Recommendation(s)

The Board of Directors is asked to:

- consider the key points and exceptions highlighted for January 2023 and note the proposed actions;
- consider any further attention via supporting Board Committee structures.

#### Relationship to the Board Assurance Framework (BAF)

The work contained with this report links to the following strategic risks as identified in the BAF.

- SO1: Engaging with our patients, service users and wider community to ensure they are equal partners in care delivery (QSC)
- 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)
- SO3: Maximising the potential of services to delivery outstanding care to our communities (QSC)
- SO4: Collaborating to drive innovation and transformation, enabling us to deliver against local and national ambitions (Board)
- SO5: To make effective use of our resources to ensure services are environmentally and financially sustainable and resilient (FBIC)
- SO6: To make progress in implementing our digital strategy to support our ambition to become a digital leader in the NHS (FBIC)

### Links to the Strategic Organisational Risk register (SORR)

The work contained with this report links to the following corporate risks as identified in the SORR:

• 2046: Organisational/individual practice not consistent with good information governance



	<ul> <li>2485: Reduced staffing levels in speech and language therapy core paediatric service due to vacancies</li> <li>2504: Waiting lists in memory assessment services</li> <li>2509: Community nursing services demand exceeding capacity</li> <li>2598: Staff shortages in older people's mental health services</li> <li>2609: Organisational risks associated with out of area bed use (finance, performance and quality)</li> <li>2610: Core Children and Adolescent Mental Health Service waiting list</li> <li>2611: Improving Access to Psychological Therapies waiting lists</li> <li>2620: Increased demand on speech and language therapy community adult service</li> <li>2660: Increased demand on speech and language therapy paediatric complex needs service</li> <li>2672: Lynfield Mount Hospital – Estate condition, associated impacts &amp; redevelopment requirements</li> <li>2679: Inability to fill vacant consultant psychiatrist post - South and West Older People's Mental Health team</li> </ul>
Compliance & regulatory implications	<ul> <li>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</li> <li>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.</li> </ul>



# Meeting of the Board of Directors 9 March 2023

### **Board Integrated Performance Report – Board Highlights**

#### 1. Purpose

The paper provides key points in relation to January 2023 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, continued difficulties in attracting and retaining professionally qualified staff and sickness absence remaining higher than pre-COVID rates.

Challenges are being exacerbated by industrial action (at neighbouring trusts to date), expected winter pressures and the socio-economic impacts of cost of living increases on staff and service users' mental health and wellbeing. The Trust's winter plan is in place, with oversight, actions and support enacted through the Trust's daily lean management and incident command arrangements, feeding into the Bradford District and Craven surge and escalation group and system command structures.

#### 2. Workforce - Labour Turnover and Sickness Absence

Recruitment, retention and wellbeing of staff continue to be a key concern and focus. A comprehensive plan is in place and is being reviewed and revisited on a regular basis, overseen by the Workforce and Equality Committee.

#### Labour Turnover

Labour turnover remains above the Trust's 10% target and shows an upward trend from August 2021 (11.4%) to January 2023 (16.2%). There are elevated labour turnover rates in both operational and corporate services. High levels of turnover do not generally correlate with high levels of sickness absence:

Service / Care Group	Labour Turnover	Sickness Rate
Specialist children's services	26.93%	6.58%
Improving Access to Psychological Therapies	25.09%	5.30%
Finance	23.30%	0.63%
Podiatry	23.19%	4.13%
District nursing services	20.39%	8.09%
Estates and facilities	19.61%	9.38%
Child and Adolescent Mental Health Services	19.31%	4.88%
Human Resources	18.15%	3.30%
Adult mental health inpatients	16.13%	9.12%

Retention plan actions include:

reinforcing the comprehensive range of health and wellbeing resources and facilities;



- establishing health & wellbeing and belonging & inclusion champion roles;
- implementation of a new on-boarding and induction programme from April 2023, with all new recruits welcomed in-person, supported by a follow-up programme which includes a 30, 60 and 90 day check-in.

Given there is a lag time between consistent implementation of actions and them having a discernible impact, a gradual reduction in labour turnover has been agreed as part of the draft 2023/24 operational plan (16% 2022/23 forecast outturn, 15% April and May 2023, 14% June and July 2023, 13% August 2023 onwards).

#### Sickness Absence

Sickness absence remains above the Trust target of 4% but is within normal control limits (December 7.7%, January 6.5%). In January 2023, the services with the highest sickness absence are:

Service / Care Group	Sickness Rate
Estates and Facilities	9.38%
Adult mental health inpatients	9.12%
Dental services	9.01%
Clinical Administration Hubs	8.57%
Information Management and Technology	8.81%
District nursing services	8.09%
Older people's mental health services	7.00%

#### Actions include:

- targeting areas (for example mental health inpatient services) where fewer staff are accessing the health and wellbeing support;
- making most effective use of occupational health and the employee assistance programme;
- promoting direct access to physiotherapy for musculoskeletal conditions.

As part of the 2023/24 operational plan, a downward trajectory has been agreed (7% 2022/23 forecast outturn, 6% quarter 1, 5% from July 2023 onwards).

#### 3. Workforce - Appraisal

Appraisal compliance is below the Trust's 80% target (December 2022 57.92%, January 2023 59.22%). Clinical administration hubs are the only service to be compliant in January 2023 (85.02%).

Compliance reduced from August 2022. A recording error meant that figures mistakenly included supervisions recorded within the Electronic Staff Record (ESR), as well as appraisals. This issue has been rectified and supervisions excluded from the appraisal data from August onwards, which is the new baseline.

Managers have been reminded about appropriate recording of appraisals in ESR, and refreshed guidance is being issued on the data is available to maintain oversight of compliance rates through Manager Self-service.



#### 4. NHS Oversight Metrics

#### <u>Community dental service - treatment under general anaesthesia</u>

The proportion of patients waiting less than 18 weeks for dental treatment under general anaesthesia remains below the 92% target (December 80.8%, January 81.5%). Winter pressures resulted in the cancellation of some theatre lists during December. Due to the impact of industrial action and winter pressures in Bradford Teaching Hospitals NHS Foundation Trust and Airedale NHS Foundation Trust, the service has been unable to secure additional theatre sessions between January and March to support waiting list reduction. However a weekly exodontia (tooth extraction) session at Airedale General Hospital is due to restart in March. Hospital staffing issues mean that performance is likely to continue to fluctuate.

In January 2023, there was one patient waiting more than 52 weeks. An administrative error, that has been addressed, contributed to the long wait. This patient will be treated in February 2023. Thereafter, the service forecast to continue to meet the target of no patients waiting over 52 weeks.

#### 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.

Improved flow through adult acute mental health inpatient beds, reduction in occupied bed days and reduction in out of area bed days are key priorities in the 2023/24 operational plan. Tactical actions to improve inpatient flow are being taken during February and March, including targeted intervention for service users with the longest length of stay. Evaluation of the impacts will inform the strategic direction. Four crisis respite beds, being mobilised by Bradford Council and Bradford and Craven Health and Care Partnership, are due to open in April 2023. This provision will help to prevent unnecessary admissions to acute mental health beds. The community mental health transformation programme for 2023/24 and 2024/25 is being refocused and prioritised, phased in accordance with the highest impact on organisational challenges.

The draft 2023/24 operational plan assumes application of the continuity principles from 1 April 2023, under which beds block contracted from an independent sector provider would no longer be reported as inappropriate out of area placements. Whilst applying the continuity principles supports progress towards the NHS Long Term Plan aim of eliminating inappropriate out of area placements, the cost of out of area bed days remains a pressure for the Trust.

## 5. 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, continues to impact 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 67.4% for the three months November 2022 to January 2023, against the national standard of 75%.

Recruitment of qualified practitioners remains challenging. It is now also becoming difficult to recruit to trainee positions. For the next trainee cohort, candidates have been recruited to nine out of 15 funded places. There have been changes to the self-referral process to reduce assessment duration and increase therapy capacity and the service has outsourced activity to a private provider, which is supporting access and helping to address backlog and waits. 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

**22 February 2023**