

**Trust Performance Scorecard**

**Safe**

CPA Acute & PICU % of patients followed-up 7 Days after discharge
Care Programme Approach: % of patients reviewed in the last 12 months
Admissions to adult facilities of patients who are under 16 years of age.
Number of SI incidents reported
Number of Never Events
136 Suite – inappropriate use
Seclusion Room – inappropriate use
Number of Mixed Sex Accommodation occurrences
Adult Acute Inpatient Risk Assessments - % Current (From sample)
Crisis Team Caseloads (for information)
Barnet
Enfield
Haringey
CAMHS Waiting Lists - Percentage of GP referrals waiting over 13 weeks (snapshot taken on last working day)

**2016/17**

	Qtr 1			Qtr 2			Qtr 3		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
CPA Acute & PICU % of patients followed-up 7 Days after discharge	99.2%	99.1%	100.0%	99.2%	97.5%	99.3%	99.1%	100.0%	99.3%
Care Programme Approach: % of patients reviewed in the last 12 months	95.8%	96.5%	96.7%	95.2%	96.9%	96.0%	95.6%	97.0%	96.5%
Admissions to adult facilities of patients who are under 16 years of age.	0	0	0	0	0	0	0	0	0
Number of SI incidents reported	3	7	4	8	4	7	5	5	5
Number of Never Events	0	0	0	0	0	0	0	0	0
136 Suite – inappropriate use	0	0	1	0	1	0	0	0	1
Seclusion Room – inappropriate use	0	0	0	0	0	0	0	0	0
Number of Mixed Sex Accommodation occurrences	0	0	0	0	0	0	0	0	0
Adult Acute Inpatient Risk Assessments - % Current (From sample)	96%	92%	95%	96%	97%	96%	98%	96%	97%
Crisis Team Caseloads (for information)									
Barnet	95	102	92	96	112	76	71	70	79
Enfield	114	125	119	123	152	154	114	142	129
Haringey	87	99	71	87	107	79	75	74	93
CAMHS Waiting Lists - Percentage of GP referrals waiting over 13 weeks (snapshot taken on last working day)	10.1%	9.8%	5.9%	5.3%	8.5%	14.0%	12.1%	6.2%	9.2%

**Trend**



**Target**

**December Comments**

95%	One confirmed breach by Enfield CRHT which was due to miscommunication within the Team - the client was seen on the 8th day following discharge.
95%	
0	
	Five serious incidents were recorded in December - Two in Barnet and Three in Haringey. Details will be reported in the Medical Director's Serious Incident Update. Analysed as : 2 x Barnet: CRHT (suspected suicide), Thames Ward (suspected fall). 3 x Haringey: Complex Care (suspected suicide), CRHT (unexpected death) Fairlands Ward (medication overdose).
0	
0	On the 17/12/16 the Metropolitan Police brought a person to the CFH 136 suite "under the MCA" and they were admitted. This was in contravention of the MHA.
0	
0	
90%	
3%	All three boroughs experienced an increase in waiting times in December. Enfield and Haringey remain significantly over target. Enfield CAMHS agreed a plan with Enfield CCG & LBE to recruit additional Therapists to reduce the number of people waiting over 13 weeks. This had a positive effect in November. A loss of two therapists has led to a decline on the progress made in November. Haringey CAMHS experienced staff sickness in December combined with existing staffing shortage impacted on the waiting times in the month. Recruitment is in progress to address the current staffing issue. The market is highly competitive for therapists at present as all areas have been allocated funds to reduce waiting times.
0	
0	
85%	
95%	
5%	
0	
1	Two reported in December in the Bowes district nurse team.
-	
90%	This is the percentage of complaints received in the reporting month that received responses within the 25 day target or within a timescale agreed with the complainant. As such, the measure is reported a month in arrears.

**Effective**

Infection Control: number of MRSA cases
Infection Control: Number of Clostridium Difficile cases
% PbR Cluster Reviews completed on time
% Patients gate kept by the Crisis Resolution and Home Treatment Team
% Admissions that are emergency readmissions within 28 days of previous discharge
Falls resulting in severe injury or death
Grade 3 or 4 pressure ulcers
Formal Complaints received
Complaints: Response in time

Infection Control: number of MRSA cases	0	0	0	0	0	0	0	0	0
Infection Control: Number of Clostridium Difficile cases	0	0	0	0	0	0	0	0	0
% PbR Cluster Reviews completed on time	88.4%	87.8%	90.2%	88.3%	88.2%	89.1%	89.8%	90.2%	88.1%
% Patients gate kept by the Crisis Resolution and Home Treatment Team	100.0%	98.9%	100.0%	98.2%	99.2%	100.0%	95.8%	98.2%	100%
% Admissions that are emergency readmissions within 28 days of previous discharge	1.7%	1.0%	2.8%	0.9%	0.8%	1.8%	1.0%	0.8%	0.8%
Falls resulting in severe injury or death	0	1	1	1	0	2	0	0	0
Grade 3 or 4 pressure ulcers	0	1	2	1	2	3	1	2	2
Formal Complaints received	18	9	21	22	14	18	12	16	12
Complaints: Response in time	72.0%	100.0%	95.0%	90.0%	64.0%	94.0%	92.0%	87.0%	tbc

**Trust Performance Scorecard**

2016/17

**Caring**

Patient Survey - Information provided
Patient Survey - involved in decisions
Patient Survey - treated with dignity
Overall Patient Satisfaction
Number of patients completing surveys
Overall Carer Satisfaction
Number of carers completing surveys
Patient FFT - Mental Health Response Rate
Patient FFT - ECS Response Rate
Patient FFT - Mental Health Overall Score
Patient FFT - ECS Overall Score

	Qtr 1		Qtr 2			Qtr 3			
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
86%	84%	86%	87%	87%	88%	88%	85%	87%	
87%	85%	86%	87%	88%	88%	87%	86%	86%	
93%	91%	93%	94%	95%	94%	94%	93%	92%	
87%	85%	87%	88%	88%	89%	89%	85%	86%	
716	884	730	797	810	727	695	674	638	
94%	87%	87.0%	89%	91%	95%	90%	92%	93%	
122	96	162	119	146	83	133	182	211	
7.0%	10%	8%	7%	9%	7%	7.3%	8%	8%	
2%	2%	2%	3%	3%	2%	2.3%	2%	3%	
84%	81%	84%	82%	81%	81%	83%	86%	84%	
95%	97%	98%	98%	99%	89%	97%	91%	99%	



Target	December Comments
80%	
80%	
80%	
80%	
700	The new Trust wide survey was launched January 3 <sup>rd</sup> 2017. Patient Experience Managers have met teams in Quality Improvement Meetings to highlight the issues and provide additional support in improving uptake.
80%	
130	
7%	Response rates are based on the number of people accessing services in the month. The target is an indicative value, based on the values over the past year.
3%	
80%	The patient experience team have started work with the services in ECS to review the FFT / surveys used and assurance will be managed through local Governance meetings and the Deep Dives.
90%	

**Responsive**

DToC - % All Occupied Bed Days (OBDs) due to delayed transfers
DToC - % Adult OBDs due to delayed transfer of care
DToC - % Older People's OBDs due to delayed transfer of care
DToC - Number of Patients delayed in the month
Let's Talk (Enfield IAPT) % of people treated within 18 weeks of referral
Let's Talk (Enfield IAPT) % of people treated within 6 weeks of referral
Let's Talk (Enfield IAPT) number entering treatment each month.
Let's Talk (Enfield IAPT) Recovery Rate
EIP % of people treated within 2 weeks
CRHT GP Response Times - 4 hours
Liaison Service - N. Mid 1-hour response time for A&E referrals
Liaison Service - Barnet 1-hour response time for A&E referrals

9.1%	10.7%	9.5%	8.65%	8.21%	7.70%	5.55%	6.65%	7.27%
9.4%	10.8%	9.2%	8.12%	8.77%	7.42%	5.21%	4.62%	5.56%
8.7%	10.4%	10.1%	9.6%	7.3%	8.2%	6.2%	12.0%	11.9%
34	38	31	26	32	22	18	23	22
99.6%	98.0%	100.0%	98.9%	98.9%	99.6%	99.0%	100.0%	99.3%
91.9%	92.0%	90.0%	89.4%	94.4%	93.4%	91.0%	97.3%	96.6%
452	473	535	461	444	384	463	531	437
46.4%	46.9%	47.5%	50.6%	47.2%	49.3%	46.2%	50.6%	49.3%
44.4%	62.5%	64.3%	58.8%	63.6%	69.2%	66.7%	68.2%	64.7%
100.0%	100.0%	100.0%	100.0%	97.5%	96.3%	100.0%	100.0%	98.3%
82.0%	80.0%	71%	81%	86%	82.5%	84.2%	85.6%	85.0%
77.0%	85.0%	91%	88%	86%	95%	94.0%	88.3%	92.1%



7.5%	The number of people delayed, the number of days lost to delay and the days lost as a proportion of all OBDs. The increase in December was mainly due to the number of DToCs in Enfield offset by a fall in the numbers in Haringey. Barnet had a slight increase in the month. A high proportion of DToCs continue to be predominantly due to delays around funding agreements and accommodation issues.
5%	
20%	
30	Overall the actual number of DToCs slightly reduced. The actual number increased in Barnet and Enfield and decreased in Haringey. Regular DToCs meetings and close monitoring of discharges practices continue to remain a high priority.
95%	
75%	
441	The number of people entering treatment was 4 less (437) than the access target of 441 in December. In the year to date, the target was exceeded by 5.31% (211) clients. December has also seen lower uptake in previous years.
50%	The recovery rate fell below target this month by 0.7%. A continuous improvement plan is in place.
50%	17 cases met the Access Standard criteria in December, of which 11 were taken onto the caseload within 14 days. 6 breaches were reported in the month: 1 in Barnet, 1 in Enfield and 4 in Haringey. Delays are less the result of late referral and increased demand on the three teams, with at least 60 referrals being the average received each month.
95%	
95%	Limited staffing resources to work out of hours and multiple referral continues to impact on the ability to assess all referrals within the 1 hour target. The NMUH and NCL have put forward a MH Liaison bid via the Sustainability and Transformation Plans (STP) Committee for additional staff to strengthen the service. The bid is part of the new guidance on Implementing the Evidence-based Treatment Pathway for Urgent and Emergency Liaison Mental Health Services for Adult and Older Adults.
95%	

**Trust Performance Scorecard**

**Well Led**

2016/17

	2016/17									Trend	Target	December Comments
	Apr	Qtr 1 May	Jun	Jul	Qtr 2 Aug	Sep	Oct	Qtr 3 Nov	Dec			
Proportion of staff compliant with individual mandatory training requirements	85%	84%	83%	84%	82%	81.8%	82%	77.1%	79%	↑	90%	The overall mandatory training compliance has increased by 2% when compared to November. Due to legislative changes affecting mandatory training, a revised training matrix was approved by the Quality and Safety committee in July, increasing the requirements for this measure. Additional courses, workbooks and e-learning are in place to meet demand. 79% of staff are currently compliant with the new requirements.
Sickness/absence rate %	3.3%	3.1%	2.6%	3.1%	3.3%	3.1%	3.6%	3.5%	3.4%	↓	3.5%	
Agency as a % of Employee Spend (Financial - agency spend as a percentage of staffing spend)	8.4%	7.7%	7.9%	8.0%	7.3%	9.6%	6.6%	7.9%	6.8%	↓	10%	The volume of agency and bank bookings and the related wte have declined. It is expected that the reduced agency usage will be maintained as rigorous controls continue to be in place. The spend has declined this month and it is expected that this will continue.
Bank as a % of Employee Spend (Financial - bank spend as a percentage of staffing spend)	10.6%	8.7%	8.9%	9.0%	10.3%	7.8%	8.6%	8.5%	8.3%	↓	7%	
Temp staff fill rate (shifts filled by temporary staff as a percentage of all shifts where temporary staff were required)										→		
Percentage of rosters approved at least 60 days in advance										→		
Agency as a % of Employee Time (Workforce - Agency WTE as a percentage of budgeted establishment)	4.6%	4.3%	4.6%	4.8%	3.1%	3.3%	3.1%	3.0%	2.7%	↑	4%	
Bank as a % of Employee (Workforce - Agency WTE as a percentage of budgeted establishment)	8.9%	9.0%	9.4%	9.9%	10.0%	9.1%	9.4%	9.1%	9.1%	↓	10%	
Total vacancy rate (% established posts without staff members in place)	12.0%	11.0%	13.4%	12.7%	13.5%	12.7%	12.4%	11.5%	12.4%	↑	10%	There is a further increase in the establishment, including an increase in M&D and N&M roles. This has resulted in an increase in vacancy levels within the Trust overall, and within these staff groups. Actions to recruit to vacancies remains on track alongside continued engagement with the boroughs. Vacancies in community based roles in the four boroughs are at a higher level than in the remaining services, i.e., they account for 42% of the establishment but 49% of the vacancies. More work will be done with the boroughs to address these gaps, particularly in nursing where the issue is more pronounced.
Nursing Vacancy Rate	17.7%	17.8%	18.2%	18.0%	19.9%	17.9%	16.3%	16.5%	17.1%	↑	10%	The nursing establishment has increased for two months in a row with funding in community and district nursing services. This has resulted in an increase in vacancy levels. Work is underway with clinical managers to identify vacancies that they are not being actively recruiting to. The Trust is now proceeding with international recruitment for nursing roles (in the EU and Philippines). Advertising in the various countries is scheduled to take place by late Jan / February.
Medical vacancy rate	11.2%	12.9%	10.0%	16.2%	14.4%	12.5%	14.9%	8.4%	12.7%	↑	10%	The Medical budgeted establishment has been increased. Though recruitment has continued, this has resulted in an increase in vacancy levels.
Time to hire (mean number of days from advert start to provisional start date)	104	102	95	104	106	105	104	100	96	↓	-	A range of process improvements have been introduced in recruitment. An SLA is now in place which highlights the need for pace. Changes have been made to internal recruitment and transfer processes. OH processes have been streamlined and incorporated within the existing TRAC software to address delays in OH clearances. The team are working towards a challenging target of 77 days, to be achieved by March 2017. Work was carried out with support from the quality improvement teams and a further follow-on session is planned for late January to ensure that improvements are sustained.
Staff Turnover (Total)	14.4%	14.5%	14.3%	14.1%	14.0%	13.3%	13.2%	13.5%	13.4%	↓	15%	
- Staff turnover (Unplanned)	10.3%	10.5%	10.3%	10.3%	10.3%	9.5%	9.6%	10.0%	9.9%	↓	11%	
- Staff turnover (Planned)	4.1%	4.0%	4.0%	3.8%	3.7%	3.8%	3.6%	3.5%	3.5%	→	5%	
Percentage of exit interviews where the trust was described as a good place to work	58.8%	58.8%	59.7%	60.1%	60.0%	60.3%	60.3%	59.7%	60.1%	↑	-	
Staff FFT - Response rate	21.67%			16.50%			53%			↓	10%	
Staff FFT - Overall score: % would recommend as a place to work	67.98%			60.00%			59%			↓	50%	These are the provisional figures from the 2016 National Staff Survey. The final figures have not yet been released by NHS England. The equivalent questions in the NSS provide the Qtr 3 data.
Staff FFT - Overall score: % would recommend as a place for care	70.44%			54.00%			60%			↓	55%	
Estates Maintenance - proportion of jobs that are unplanned	52%	45%	55%	47%	42%	50%	48%	55%	51%	↓	55%	

**Trust Performance Scorecard**

2016/17

**Enablement**

Percentage of people in receipt of Community Mental Health services who are in settled accommodation
Percentage of people in receipt of Community Mental Health services who are engaged in structured occupations, including actively seeking work, parenting and running a home
Assessment Services DNA Rate

2016/17										
	Qtr 1			Qtr 2			Qtr 3			
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Percentage of people in receipt of Community Mental Health services who are in settled accommodation	75.2%	75.1%	75.9%	76.3%	76.2%	77%	76%	77%	77%	
Percentage of people in receipt of Community Mental Health services who are engaged in structured occupations, including actively seeking work, parenting and running a home	24.8%	24.8%	26.1%	26.3%	26.0%	26.0%	26%	26%	26%	
Assessment Services DNA Rate	23.0%	17%	18.7%	16.8%	14.6%	13.8%	14.3%	17.1%	16.2%	

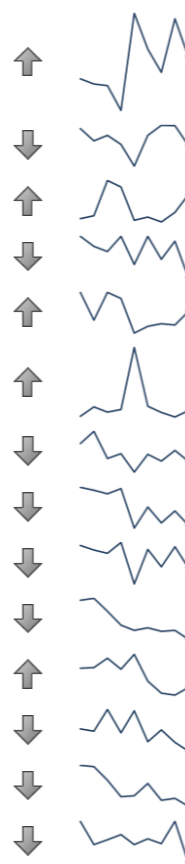


Target	December Comments
70%	
20%	
15%	DNA rates combined for all three Assessment Services slightly decreased . The significant decrease in Enfield was offset by increases in Barnet & Haringey. The figures still remain lower than they were at the start of the year. Analysis of DNAs by referring GP continues to inform work with primary care.

**Activity and Efficiency**

Activity Recording - Percentage variance from contracted activity plan (CCG Contracted Activity)
Adults - Mean length of acute inpatient stay on discharge (Trimmed to exclude <3 and >90 days)
Adults - Mean length of acute inpatient stay on discharge (Untrimmed)
Adults - Median length of acute inpatient stay on discharge (Untrimmed)
Adults - percentage people on the acute inpatient caseloads that have had stays of over 100 days
Older People - Mean length of acute inpatient stay (Untrimmed)
Older People - Median length of acute inpatient stay (Untrimmed)
Mental Health DNA Rates (Excluding CRHTs)
- Mental Health DNA Rates - Adults
- Mental Health DNA Rates - Older Adults
- Mental Health DNA Rates - CAMHS
Memory Clinic Number of Referrals
Memory Clinic: Average No of weeks from Referral to Assessment
Memory Clinic :Average No of weeks between Assessment Appointment & Dementia Start Date

Activity Recording - Percentage variance from contracted activity plan (CCG Contracted Activity)	2.5%	1.5%	1.2%	-3.7%	15.3%	8.3%	3.8%	14.2%	6.9%	
Adults - Mean length of acute inpatient stay on discharge (Trimmed to exclude <3 and >90 days)	29	26	27	25	20	27	29	29	25	
Adults - Mean length of acute inpatient stay on discharge (Untrimmed)	35	36	46	44	34	35	34	37	42	
Adults - Median length of acute inpatient stay on discharge (Untrimmed)	28	26	25	28	22.5	28	23.5	27	20	
Adults - percentage people on the acute inpatient caseloads that have had stays of over 100 days	16.2%	13.7%	16.2%	15.7%	12.5%	13.1%	13.4%	13.3%	14.5%	
Older People - Mean length of acute inpatient stay (Untrimmed)	31	50	40	45	167	51	39	29.8	42	
Older People - Median length of acute inpatient stay (Untrimmed)	36	45	25	28.5	15	28	23	31	23	
Mental Health DNA Rates (Excluding CRHTs)	8.7%	8.5%	8.4%	8.6%	6.9%	7.8%	7.2%	7.7%	7.1%	
- Mental Health DNA Rates - Adults	9.4%	9.2%	9.0%	9.6%	7.4%	9.2%	8.3%	9.4%	8.3%	
- Mental Health DNA Rates - Older Adults	4.1%	4.2%	3.6%	2.9%	2.6%	2.8%	2.6%	2.6%	2.2%	
- Mental Health DNA Rates - CAMHS	10.4%	10.5%	11.3%	10.3%	11.6%	9.3%	8.2%	8.0%	8.7%	
Memory Clinic Number of Referrals	151	148	176	146	174	135	150	134	123	
Memory Clinic: Average No of weeks from Referral to Assessment	8.30	8.17	6.97	5.50	5.60	6.67	5.18	5.37	4.67	
Memory Clinic :Average No of weeks between Assessment Appointment & Dementia Start Date	5.97	4.03	4.43	4.87	4.03	4.53	4.11	5.99	2.57	



3%	Continued management focus and local accountability for activity recording saw December MH activity at 6.9% above CCG contract targets and ECS activity continues to over-achieve target. Year to date, the Trust is now 4% above contracted activity plan and more than 12% 2015/16 YTD activity.
21	Management continues to address lengths of stay over 100 days. Total number of discharges were 13.6% higher than the previous month. The same number of people with length of stay over 100 days were discharged as in the previous month. The decrease in the median relates a fall in the length of stay of over 100 days.
35	
28	
25%	
40	7 patients were discharged compared to 5 the previous month. The increase in the mean relate to one patient in Barnet when discharged had a length of stay of 146 days.
40	
10%	
11%	
4%	
10%	

**Trust Performance Scorecard**

**Enfield Community Services**

2016/17

Apr	Qtr 1			Qtr 2			Qtr 3		
	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	

Trend

Target | December Comments

**District Nursing**

% of urgent referrals responded to within 4 hours	100%	100%	100%	100%	100%	100%	100%	100%	100%	→	→	90%	
% of referrals responded to within 48 hours	100%	100%	100%	100%	100%	100%	100%	100%	100%	→	→	90%	
% of urgent referrals to OOH nursing responded to within 4 hours	100%	100%	100%	100%	100%	100%	100%	100%	100%	→	→	90%	

**Community Physio**

% of urgent referrals seen within 5 working days	100%	83%	100%	100%	100%	100%	100%	100%	67%	↓	↘	90%	
% of routine referral seen within 8 weeks	75%	72%	79%	81%	77%	73%	82%	84%	81%	↓	↗	90%	New permanent staff have been recruited including 1.0 wte in post addressing the routine waiting list (in neuro physio ). Whilst they complete local and Trust induction and embed into the team, we possibly expect a slight reduction in performance but expect the routine breaches to reduce over the coming months , if staffing levels and demand remain steady.

**Physio MSK**

% of urgent referral seen within 5 days	None	None	None	None	None	None	100.0%	100.0%	100.0%	→	→	90%	
% of patients whose first appointment is within 13 weeks	75%	74%	74%	70%	69%	72%	65%	69%	89%	↑	↗	90%	The target was close to achievement for the first time this year. The improvement plan introduced by the service to help reduced waits over 13 weeks and investment is now having a positive effect on performance

**Podiatry**

% of non-urgent referrals assessed within 13 weeks	59.7%	82%	93%	89%	91%	90%	90%	76%	66%	↓	↘	90%	MSK foot referrals remain high and demand continues to out strip existing capacity. The service plan to use locum cover in January/February to support the recent loss in resources and offer shifts to staff to bring performance back within target.
% of urgent referrals responded to within 48 hours	100.0%	100%	None	100.0%	100.0%	100.0%	None	100.0%	100.0%	→	→	90%	

**Safeguarding Children and Young People**

% up to date with required Level 1 & 2 safeguarding Training	92.6%	94%	94%	97%	97%	95%	94%	95%	96%	↑	↗	80%	
% up to date with required Level 3 Safeguarding training	92.0%	92%	91%	92%	91%	92%	86%	88%	88%	↓	↘	80%	
% of Health Visitor child protection supervision sessions completed within 3 months timescale	100.0%	94%	92%	100%	94%	100%	100%	100%	100%	→	↗	90%	
% of School Nurse child protection supervision sessions completed within the previous term	100%			100%							100%		

**Children Looked After**

% health assessments carried out by the specialist nurses within timescale	100%	100%	100%	100%	100%	100%	100%	100%	100%	→	→	95%	
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**New-born Health Visiting**

% of new birth assessments carried out between 10-14 days	96.4%	96%	96%	98%	96%	95%	97%	97%	97%	→	↗	95%	
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**SaLT - Early Years Drop-In**

% Referrals (following drop-in assessments) for specialist interventions, that are seen within 13 weeks	99.0%	100%	100%	100%	100%	100%	94%	88%	100%	↑	↗	75%	
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**Children's Physio (MSK)**

% Routine referrals for initial Physio assessment seen by 13 weeks	98.0%	98%	100%	98%	99%	96%	100%	100%	100%	→	↗	85%	
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**Children's Occupational Therapy**

% Complex referrals for initial OT assessment seen by 13 weeks	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	→	→	95%	
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