

## 2023/24 Board Performance Report refresh proposed metrics

Report area	Lead	Metric	Retain metric?	Stop reporting?	Reason for stopping reporting	Proposed new metrics or revised target	Reason for inclusion
Covid hospital acquired infection	Amanda Hemsley	Query if whole report needed	No	Yes - Remove	N/A		
Quality account	Deanne						
		The percentage of admissions to acute wards for which the Crisis Resolution Home Treatment Team (CRHT) acted as a gatekeeper during the reporting period	yes				
		The Trusts "Patient experience of community mental health services" indicator score with regard to a patient's experience of contact with a health or social care worker during the reporting period	yes				
		The percentage of inpatients discharged with a subsequent inpatient admission within 30 days - 0-15 years	Yes				
		The percentage of inpatients discharged with a subsequent inpatient admission within 30 days - 16+ years	yes				
		The number of patient safety incidents reported within the Trust during the reporting period	Yes				
		The rate of patient safety incidents reported within the Trust during the reporting period	Yes				
		The number of such patient safety incidents that resulted in severe harm or death	Yes				



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Access waiting times CHS	Vicki	CINSS (20 Working Days) - Complete Pathway	Yes				
		Continance - Complete Pathway	Yes				
Access waiting times FYPC/LD	Julia	CAMHS Eating Disorder (one week) - Complete pathway	Yes				
		CAMHS Eating Disorder (four weeks) - Complete pathway	Yes				
		Children and Young People's Access (four weeks) - Incomplete pathway	No	Remove	This has been compliant for 2022/2023		
		Children and Young People's Access (13 weeks) - Incomplete pathway	Yes				
		Community Paediatrics 18 week RTT – complete pathway	New			18-week RTT and numbers of patients waiting	Currently the trajectory is predicting an on-going deteriorating position
		AAAS (18 weeks) - Complete pathway (note change of name)	Yes				
		AAAS - No of Referrals - (18 weeks) - Complete pathway (note change of name)	Yes				
		LD Community (8 weeks) - Complete pathway	No	Remove	Target is not meaningful		
		LD Community - No of Referrals - (8 weeks) - Complete pathway	No	Remove	Target is not meaningful		
52 week waits	All/Anne	Cognitive Behavioural Therapy - No of waiters	Yes				
		Cognitive Behavioural Therapy - Longest waiter (weeks)	Yes				

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		Dynamic Psychotherapy - No of waiters	Yes					
		Dynamic Psychotherapy - Longest waiter (weeks)	Yes					
		Therapy Service for People with Personality Disorder - assessment waits over 52 weeks - No of waiters	Yes					
		Therapy Service for People with Personality Disorder - assessment waits over 52 weeks - Longest waiter (weeks)	Yes					
		CAMHS - No of waiters	Yes					
		CAMHS - Longest waiter (weeks)	Yes					
		Community Paediatrics- No of waiters	New				Number of waiters for initial appointment over 52 weeks	Now have significant numbers waiting over 52 weeks
		Community Paediatrics – Longest waiter (weeks)	New				Longest waiter in weeks for initial appointment	Patients approaching 2 years
		All LD - No of waiters	Yes					
		All LD - Longest waiter (weeks)	Yes					
<b>Patient Flow</b>	Andres	Occupancy Rate - Mental Health Beds (excluding leave)	Yes					
		Occupancy Rate - Community Beds (excluding leave)	Yes					
		Average Length of stay - Community Hospitals	Yes					
		Delayed Transfers of Care	Yes					
		Gatekeeping	yes					

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		Inpatient Admissions to LD and MH Wards with a Learning Disability (Rolling 12 months) - Adult	NO	This is provided by the CGG in the NHS oversight tab but on a monthly basis	Not been able to produce data in 22/23 – check if ICB can provide		
		Inpatient Admissions to LD and MH Wards with a Learning Disability (Rolling 12 months) - CYP	NO	This is provided by the CGG in the NHS oversight tab but on a monthly basis	Not been able to produce data in 22/23 - check if ICB can provide		
		Admissions to adult facilities of patients under 18 years old	yes				
<b>Quality &amp; Safety</b>	Deanne/Emma	Serious incidents	Yes				
		Safe staffing - No. of wards not meeting >80% fill rate for RNs - Day	Yes				
		Safe staffing - No. of wards not meeting >80% fill rate for RNs - Night	Yes				
		Care Hours per patient day	Yes				
		No. of episodes of seclusions >2hrs	Yes				
		No. of episodes of prone (Supported) restraint	Yes				

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		No. of episodes of prone (Unsupported) restraint	Yes				
		Total number of Restrictive Practices	Yes				
		No. of Category 2 pressure ulcers developed or deteriorated in LPT care	Yes				
		No. of Category 4 pressure ulcers developed or deteriorated in LPT care	Yes				
		Sepsis measure	New	Yes			Unable to include as a metric as data is not captured
		Cat 3 PU's and Medication Errors	New				
		complaints/ concerns /Compliments data-AK	New				Alison confirmed this can be reported monthly.
		No. of repeat falls	Yes				
		LD Annual Health Checks completed - YTD	Yes				
		LeDeR Reviews completed within timeframe - Allocated	Yes				
		LeDeR Reviews completed within timeframe - Awaiting Allocation	Yes				
		LeDeR Reviews completed within timeframe - On Hold	Yes				
HR workforce	Nicola	Normalised Workforce Turnover (Rolling previous 12 months) (10% target)					

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		Vacancy Rate (10% target)					
		Sickness Absence					
		Sickness Absence Costs					
		Sickness Absence - YTD					
		Agency Costs					
		Core Mandatory Training Compliance for substantive staff					
		Staff with a Completed Annual Appraisal					
		% of staff from a BME background					
		Staff flu vaccination rate (frontline healthcare workers)					
		% of staff who have undertaken clinical supervision within the last 3 months					
		Health and Wellbeing Activity - No of LLR staff contacting the hub in the reporting period	No	Yes	Hub no longer in operation		