

**REPORT TO:** TRUST BOARD **PUBLIC SESSION – 25 January 2024**

**PRESENTED BY:** Sandra Betney, Director of Finance and Deputy CEO

**AUTHOR:** Chris Woon, Deputy Director of Business Intelligence

**SUBJECT:** **PERFORMANCE DASHBOARD – DECEMBER 23/24 M9**

<b>If this report cannot be discussed at a public Board meeting, please explain why.</b>	
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**This report is provided for:**

Decision ☐      Endorsement ☐      **Assurance ☒**      Information ☐

**The purpose of this report is to**

This performance dashboard report provides a high-level view of performance indicators in exception across the organisation. Performance covers the period to the end of December (Month 9 2023/24). Where performance is not achieving the desired threshold, operational service leads are prioritising appropriately to address issues. Service led Operational & Governance reports are presented to the operational governance forums and more widely account for performance indicators in exception and outline service-level improvement plans. Data quality progress will be more formally monitored through the Data Quality Forum once it is established in 2024.

**Recommendations and decisions required**

The Board is asked to:

- **NOTE** the Performance Dashboard Report for December 2023/24 as a **significant level of assurance** that the Trust's performance measures are being met or,
- Appropriate service action plans are being developed or are in place to address areas requiring improvement

**Executive summary**

**Business Intelligence Update**

2022/23 Business Intelligence business planning highlights are presented on page 1.

**Chief**

**Operating**

**Report**

The Chief Operating Officer's Report is presented on page 2 of the performance dashboard.

## Performance Update

The performance dashboard is presented from page 3 within the new four domain format:

- **Nationally measured domain** (under threshold)  
New psychosis (EI) cases treated within 2 weeks of referral (N04) and Adolescent Eating Disorders routine referral within 4 weeks (N11) are the only indicators under threshold for the period.
- **Specialised & directly commissioned domain** (under threshold)  
In addition, 4 health visiting indicators (S02, S04, S09 & S10) are within SPC limits but remain slightly behind their thresholds for the period.
- **ICS Agreed domain** (under threshold & outside of statistical control rules)  
The only indicator is in exception for this period is the Package Reviews within 8 weeks of commencement (L19).
- **Board focus domain** (under threshold & outside of statistical control rules)  
Mental Health Bed Occupancy levels (B04) remains high for October. A Data Quality Maturity Index (B08) has now been added into the Performance Dashboard and challenges are shown in fields within the Community Services and Emergency Care Data Sets. Sickness Absence rates (B30) and Workforce Turnover (B31) are in exception but Turnover is a positive position showing continual improvement since the end of 2022.
- **Performance to note**  
There are sometimes indicators that are not formally highlighted for exception, but they are useful for Board to be aware of. These indicators are all routinely monitored by operational and support services within the online Tableau reporting server. This month these include:
  - Talking Therapies Access Rates (L02) is within SPC limits although under threshold. Referrals remain low Nationally but Dec 2023 was greater than Dec 2022 for GHC.
  - CYPS core CAMHS: Referrals receiving an initial appointment within 4wks (L03) is showing improved performance over the last 3 months with Dec achieving 92% over the 80% threshold.
  - Adult Eating Disorders Wait Times (L07 & L08) are within SPC but are highlighted to add context to the adult waiting list numbers which will likely continue to impact the waiting time indicators until the waiting list is reduced.
  - Physical Health Bed Occupancy Rates (B05) are within Trust SPC limits but remain high and above National benchmarked averages.

## Workforce indicators

A development plan has begun between BI and the Workforce team to present a closer dashboard view on workforce challenges that may otherwise be masked by compliant aggregated indicators. There are currently seven indicators within the performance dashboard covering training, appraisals (2), vacancy, sickness, turnover and annual leave. A draft proposal is expected for discussion within February's BIMG for presentation to March's Board.

### Risks associated with meeting the Trust's values

Where appropriate and in response to significant, ongoing and wide-reaching performance issues; an operationally owned Service led Improvement Plan which outlines any quality impact, risk(s) and mitigation(s) will be monitored through BIMG.

### Corporate considerations

<b>Quality Implications</b>	The information provided in this report can be an indicator into the quality-of-care patients and service users receive. Where services are not meeting performance thresholds this may also indicate an impact on the quality of the service/ care provided. Data quality measures were introduced in 2023/24 and will be monitored through the Operational Data Quality Forum.
<b>Resource Implications</b>	The Business Intelligence Service works alongside other Corporate service areas to provide the support to operational services to ensure the robust review of performance data and co-ordination of the combined performance dashboard and its narrative.
<b>Equality Implications</b>	Equality information is monitored within BI reporting1.

### Where has this issue been discussed before?

BIMG – 18 January 2023

### Appendices:

Performance Dashboard and BI Update M9

**Report authorised by:**  
Sandra Betney

**Title:**  
Director of Finance and Deputy CEO