



Trust Board – 30.07.24

Board Performance Report - June 2024 (Month 3)

Purpose of the report

To provide the Trust Board with an overview of Trust performance against an agreed set of KPI's for June 2024 (M3 of 2024/25).

Analysis of the issue

The report is presented to Trust Board each month, prior to release to Level 1 Committees.

Proposal

The following should be noted by the Trust Board when reviewing the report and looking ahead to the next reporting period:

- CAMHS Eating Disorder Complete Pathway (urgent - one week) metric indicates an improvement in SPC assurance analysis and shows that the metric will now either achieve or miss the target due to random variation. The exception page for this metric will be removed next month.
- Updated (April 2024) data in the Mental Health Core Data pack will be delayed until August 2024 due to transition to MHSDS v6. This is a national issue
- The Agency Costs metric indicates that this will consistently fail to meet the target and so will remain as an exception page.
- The Safer Staffing metric remains red (target not met) but the trend indicates that this is no longer a special cause concern and therefore no exception report is required.
- Prior to the next report there will be a review to ensure compliance of each KPI to the revised Strategic Goals.

Decision required

The Trust Board is asked to:









- Approve the Performance Report.

Governance table




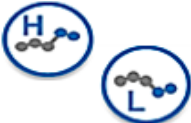


For Board and Board Committees:	Accountability Framework Meeting	
Paper sponsored by:	Sharon Murphy, Director of Finance and Performance	
Paper authored by:	Pardeep Dhami, Information Analyst Nasir Shaikh, Business Information Manager Anne Senior, Associate Director	
Date submitted:	19.07.24	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	Accountability Framework Meeting	
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:	None	
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	Standard month end report	
LPT strategic alignment:	Great Health Outcomes	x
	Great Care	x
	Great Place to Work	x
	Part of the Community	
CRR/BAF considerations:	List risk number and title of risk	TBC
Is the decision required consistent with LPT's risk appetite:	Yes	
False and misleading information (FOMI) considerations:	None	
Positive confirmation that the content does not risk the safety of patients or the public	Yes	
Equality considerations:	None identified	

EXCEPTION REPORTS SUMMARY

EXCEPTION REPORTS - Consistently Failing Target													
Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	SPC Assurance	SPC Trend	Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	SPC Assurance	SPC Trend
Adult CMHT Access (6 weeks routine) - Incomplete pathway	>=95%	May-24	53.4%	53.8%			ADHD (18 week local RTT) - waits over 52 weeks - No of waiters	0	May-24	1956	1956		
Memory Clinic (18 week Local RTT) - Incomplete pathway	>=92%	May-24	70.3%	70.7%			MHSOP Memory Clinics (18 week local RTT) - waits over 52 weeks - No of waiters	0	May-24	13	13		
ADHD (18 week local RTT) - Incomplete pathway	>=92%	May-24	6.9%	0.2%			All CAMHS - Treatment waits - No of waiters	0	Jun-24	632	614		
CINSS (6 weeks) - Incomplete Pathway	>=95%	May-24	56.0%	54.0%			of which: CAMHS Neurodevelopment - Treatment waits - No of waiters	0	Jun-24	570	546		
CAMHS Eating Disorder (one week) - Complete pathway	>=95%	May-24	50.0%	0.0%			All LD - Treatment waits - No of waiters	0	Jun-24	10	10		
Community Paediatrics (18 weeks) - Incomplete pathway	>=92%	May-24	16.5%	15.3%			All Community Children's Services - Treatment waits - No of waiters	0	Jun-24	1474	1476		
Childrens Audiology (6 week wait for diagnostic procedures) - Incomplete pathway	>=99%	May-24	24.4%	24.9%			of which: Paediatric Neurodevelopmentals - Treatment waits - No of waiters	0	Jun-24	254	316		
Adult General Psychiatry - Community Mental Health Teams and Outpatients – Treatment waits - No of Waiters	0	Jun-24	100	103			Adult Eating Disorders Community - Treatment waits - No of waiters	0	Jun-24	7	18		
Cognitive Behavioural Therapy - Treatment waits - No of waiters	0	Jun-24	42	34			Community Paediatrics - assessment waits over 52 weeks - No of waiters	0	May-24	3436	3214		
Dynamic Psychotherapy - Treatment waits - No of waiters	0	Jun-24	5	5			Vacancy Rate	<=10%	Jun-24	15.3%	15.5%		
Therapy Service for People with Personality Disorder - Treatment waits - No of waiters	0	Jun-24	494	503									
Medical/Neuropsychology - Treatment waits - No of Waiters	0	Jun-24	58	55									

EXCEPTION REPORTS - Consistently Achieving Target						
Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	SPC Assurance	SPC Trend
Normalised Workforce Turnover (Rolling previous 12 months)	<=10%	Jun-24	9.0%	9.0%		
Core Mandatory Training Compliance for substantive staff	>=85%	Jun-24	97.0%	97.2%		
Staff with a Completed Annual Appraisal	>=80%	Jun-24	93.6%	93.3%		
% of staff from a BME background	>=22.5%	Jun-24	29.4%	29.1%		

EXCEPTION REPORTS MATRIX SUMMARY

		Assurance		
		Achieving Target 	Inconsistently Achieving Target 	Not Achieving Target 
Variation/Trend	Special Cause - Improvement 	Core Mandatory Training Compliance for substantive staff Complete Appraisal % of staff from a BME background		<i>Waiting Times</i> : Memory Clinic / ADHD / CMHT 52 Wks / DPS 52 wks / TSPPD 52 wks / Medical_Neuro 52 wks / MHSOP Memory Clinic 52 Wks / LD 52 Wks
	Common Cause 		Sickness Absence	<i>Waiting Times:</i> Adult CMHT / Paediatrics ND 52 wks / Adult ED Community 52 wks Vacancy Rate
	Special Cause - Concern 	Normalised Workforce Turnover	CAMHS ED (1wk complete)	<i>Waiting Times:</i> Stroke & Neuro / Community Paediatrics / Children's Audiology / CBT 52 weeks / ADHD 52 weeks / CAMHS 52 weeks / CAMHS ND 52 weeks / Community Childrens 52 wks/ Community Paediatrics 52 wks assessment

SUMMARY

WORKFORCE						
Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	SPC Assurance	SPC Trend
Normalised Workforce Turnover (Rolling previous 12 months)	<=10%	Jun-24	9.0%	9.0%		
Vacancy Rate	<=10%	Jun-24	15.3%	15.5%		
Sickness Absence (in arrears)	<=4.5%	May-24	5.4%	5.2%		
Agency Costs	<=£2,077,250	Jun-24	£1,752,134	£2,132,787		

QUALITY & SAFETY						
Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	SPC Assurance	SPC Trend
Safe staffing - No. of wards not meeting >80% fill rate for RNs - Day	0	Jun-24	2	2		
Safe staffing - No. of wards not meeting >80% fill rate for RNs - Night	0	Jun-24	1	1		

FINANCE (Metrics TBC)

Board Performance Report Summary Dashboard

Section	Source	Reporting Frequency	Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	Sparkline YTD	SPC Assurance	SPC Trend	Exception Report
Quality Account	TRUST	Monthly	The percentage of admissions to acute wards for which the Crisis Resolution Home Treatment Team (CRHT) acted as a gatekeeper during the reporting period	>=95%	Jun-24	100.0%	96.5%	∨			
	TRUST	Yearly	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		22/23	6.6	6.4				
	TRUST	Monthly	The percentage of inpatients discharged with a subsequent inpatient admission within 30 days - 0-15 years		Jun-24	0.0%	0.0%	—			
	TRUST	Monthly	The percentage of inpatients discharged with a subsequent inpatient admission within 30 days - 16+ years		Jun-24	5.1%	5.5%	∨			
	TRUST	Monthly	The number of patient safety incidents reported within the Trust during the reporting period		Jun-24	1380	1510	∧			
	TRUST	Monthly	The rate of patient safety incidents reported within the Trust during the reporting period		Jun-24	66.3%	66.8%	∨			
	TRUST	Monthly	The number of such patient safety incidents that resulted in severe harm or death		Jun-24	13	18	∧			
	TRUST	Monthly	The percentage of such patient safety incidents that resulted in severe harm or death		Jun-24	0.9%	1.2%	∧			
	MHSDS	Monthly (a quarter in arrears)	72 hour Follow Up after discharge (Aligned with national published data)	>=80%	Mar-24	83.0%	83.0%				
NHS Oversight	TRUST	Monthly	2-hour urgent response activity	>=70%	Jun-24	85.9%	86.8%	∧			
	TRUST	Monthly	Daily discharges as % of patients who no longer meet the criteria to reside in hospital		Jun-24	24.9%	27.5%	∧			
	TRUST	Monthly	Out of Area Placement - Inappropriate Bed Days	0	Jun-24	126	53	∨			
	ICB	Monthly	Reliance on specialist inpatient care for adults with a learning disability and/or autism		Jun-24	26	23	∨			
	ICB	Monthly	Reliance on specialist inpatient care for children with a learning disability and/or autism		Jun-24	4	3	∨			
		Monthly	Overall CQC rating (provision of high quality care)		2021/22	2					
		Monthly	CQC Well Led Rating		2021/22	2					
		Monthly	NHS SOF Segmentation Score		2022/23	2	2				

Section	Source	Reporting Frequency	Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	Sparkline YTD	SPC Assurance	SPC Trend	Exception Report
	MHRA	Monthly	National Patient Safety Alerts not completed by deadline		Jun-24	1	1				
	TRUST	Monthly	MRSA Infection Rate		Jun-24	0	0				
	TRUST	Monthly	Clostridium difficile infection rate		Jun-24	1	1				
	UHL	Monthly (In Arrears)	E.coli bloodstream infections		May-24	2	2				
	GOV	Monthly (YTD)	Percentage of people aged 65 and over who received a flu vaccination			n/a	n/a				
			VTE Risk Assessment								
			Proportions of patient activities with an ethnicity code								
Access Waiting Times - DMH	TRUST	Monthly (In Arrears)	Adult CMHT Access (6 weeks routine) - Incomplete pathway	>=95%	May-24	53.4%	53.8%				
	TRUST	Monthly (In Arrears)	Memory Clinic (18 week Local RTT) - Incomplete pathway	>=92%	May-24	70.3%	70.7%				
	TRUST	Monthly (In Arrears)	ADHD (18 week local RTT) - Incomplete pathway	>=92%	May-24	6.9%	0.2%				
	TRUST	Monthly (In Arrears)	Early Intervention in Psychosis with a Care Co-ordinator within 14 days of referral - complete pathway	>=60%	May-24	88.9%	75.0%				
Access Waiting Times - CHS	TRUST	Monthly (In Arrears)	CINSS (6 weeks) - Incomplete Pathway	>=95%	May-24	56.0%	54.0%				
	TRUST	Monthly (In Arrears)	Speech Therapy - Voice, Respiratory and Dysfluency - Routine (6 weeks) - Incomplete Pathway	>=95%	May-24	33.9%	30.2%				
Access Waiting Times - FYPCLDA	TRUST	Monthly (In Arrears)	CAMHS Eating Disorder (one week) - Complete pathway	>=95%	May-24	50.0%	0.0%				
	TRUST	Monthly (In Arrears)	CAMHS Eating Disorder (four weeks) - Complete pathway	>=95%	May-24	71.4%	71.4%				
	TRUST	Monthly (In Arrears)	Community Paediatrics (18 weeks) - Incomplete pathway	>=92%	May-24	16.5%	15.3%				
	TRUST	Monthly (In Arrears)	Adult Autistic Spectrum Disorder (without a Learning Disability) Assessment Clinic (Aspergers) (18 weeks) - Incomplete pathway	>=95%	May-24	94.6%	96.2%				
	TRUST	Monthly (In Arrears)	Childrens Audiology (6 week wait for diagnostic procedures) - Incomplete pathway	>=99%	May-24	24.4%	24.9%				

Section	Source	Reporting Frequency	Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	Sparkline YTD	SPC Assurance	SPC Trend	Exception Report
52 Week Waits - DMH	TRUST	Monthly	Adult General Psychiatry - Community Mental Health Teams and Outpatients – Treatment waits - No of Waiters	0	Jun-24	100	103				
	TRUST	Monthly	Adult General Psychiatry - Community Mental Health Teams and Outpatients – Treatment waits - Longest Waiter		Jun-24	223	219				
	TRUST	Monthly	Cognitive Behavioural Therapy - Treatment waits - No of waiters	0	Jun-24	42	34				
	TRUST	Monthly	Cognitive Behavioural Therapy- Treatment waits - Longest waiter (weeks)		Jun-24	71	67				
	TRUST	Monthly	Dynamic Psychotherapy - Treatment waits - No of waiters	0	Jun-24	5	5				
	TRUST	Monthly	Dynamic Psychotherapy - Treatment waits - Longest waiter (weeks)		Jun-24	89	63				
	TRUST	Monthly	Therapy Service for People with Personality Disorder - Treatment waits - No of waiters	0	Jun-24	494	503				
	TRUST	Monthly	Therapy Service for People with Personality Disorder - Treatment waits - Longest waiter (weeks)		Jun-24	222	218				
	TRUST	Monthly	Medical/Neuropsychology - Treatment waits - No of Waiters	0	Jun-24	58	55				
	TRUST	Monthly	Medical/Neuropsychology- Treatment waits - Longest Waiter		Jun-24	121	117				
	TRUST	Monthly (In Arrears)	ADHD (18 week local RTT) - waits over 52 weeks - No of waiters	0	May-24	1956	1945				
	TRUST	Monthly (In Arrears)	ADHD (18 week local RTT) - waits over 52 weeks - Longest waiter (weeks)		May-24	307	261				
	TRUST	Monthly (In Arrears)	MHSOP Memory Clinics (18 week local RTT) - waits over 52 weeks - No of waiters	0	May-24	13	15				
	TRUST	Monthly (In Arrears)	MHSOP Memory Clinics (18 week local RTT) - waits over 52 weeks -Longest waiter (weeks)		May-24	74	92				
	TRUST	Monthly	All CAMHS - Treatment waits - No of waiters	0	Jun-24	632	614				
	TRUST	Monthly	All CAMHS - Treatment waits - Longest waiter (weeks)		Jun-24	132	128				
	TRUST	Monthly	<i>of which:</i> CAMHS Neurodevelopment - Treatment waits - No of waiters	0	Jun-24	570	546				
	TRUST	Monthly	CAMHS Neurodevelopment - Treatment waits - Longest waiter (weeks)		Jun-24	132	128				
	TRUST	Monthly	All LD - Treatment waits - No of waiters	0	Jun-24	10	10				

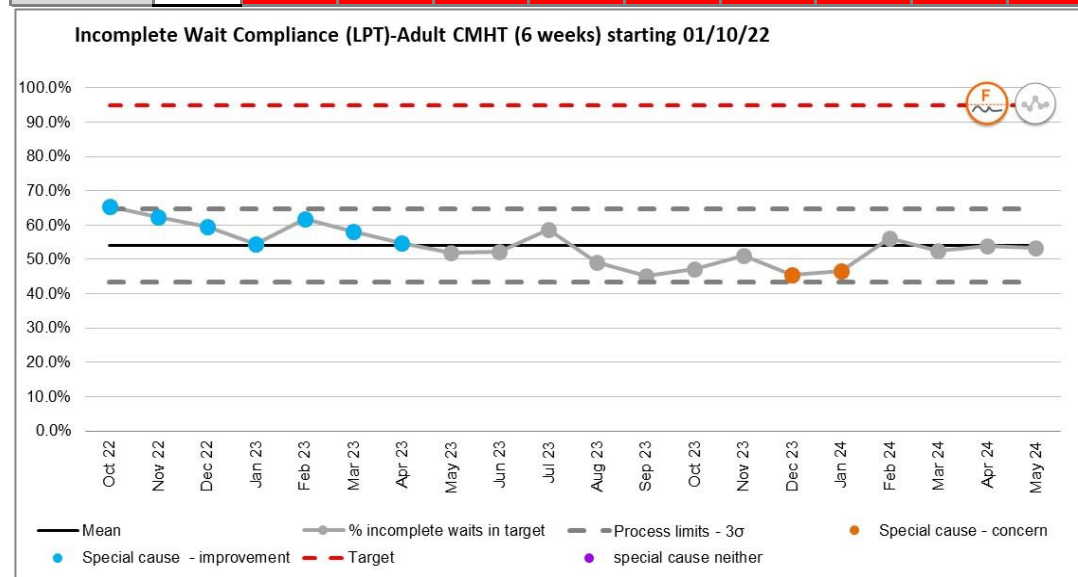
Section	Source	Reporting Frequency	Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	Sparkline YTD	SPC Assurance	SPC Trend	Exception Report
52 Week Waits - FYPCDA	TRUST	Monthly	All LD - Treatment waits - Longest waiter (weeks)		Jun-24	72	68	↘			
	TRUST	Monthly	All Community Children's Services - Treatment waits - No of waiters	0	Jun-24	1474	1476	↘			
	TRUST	Monthly	All Community Children's Services - Treatment waits - Longest waiter (weeks)		Jun-24	262	258	↘			
	TRUST	Monthly	<i>of which:</i> Paediatric Neurodevelopmentals - Treatment waits - No of waiters	0	Jun-24	254	316	↘			
	TRUST	Monthly	<i>of which:</i> Paediatric Neurodevelopmentals - Treatment waits - Longest waiter (weeks)		Jun-24	262	258	↘			
	TRUST	Monthly	Adult Eating Disorders Community - Treatment waits - No of waiters	0	Jun-24	7	18	↘			
	TRUST	Monthly	Adult Eating Disorders Community - Treatment waits - Longest waiter (weeks)		Jun-24	83	79	↘			
	TRUST	Monthly (In Arrears)	Community Paediatrics - assessment waits over 52 weeks - No of waiters		May-24	3436	3214	↘			
	TRUST	Monthly (In Arrears)	Community Paediatrics - assessment waits over 52 weeks - Longest waiter (weeks)		May-24	153	148	↘			
Patient Flow	TRUST	Monthly	Occupancy Rate - Mental Health Beds (excluding leave)	<=85%	Jun-24	86.4%	88.3%	↘			
	TRUST	Monthly	Occupancy Rate - Community Beds (excluding leave)	>=93%	Jun-24	92.9%	93.2%	↘			
	TRUST	Monthly	Average Length of stay - Community Hospitals	<=25	Jun-24	21.9	22.4	↘			
	TRUST	Monthly	Delayed Transfers of Care	<=3.5%	Jun-24	4.0%	4.0%	↘			
	TRUST	Monthly	Gatekeeping	>=95%	Jun-24	100.0%	96.5%	↘			
	TRUST	Monthly	Admissions to adult facilities of patients under 18 years old	0	Jun-24	0	0	↔			

Section	Source	Reporting Frequency	Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	Sparkline YTD	SPC Assurance	SPC Trend	Exception Report
Quality & Safety	TRUST	Monthly	Covid Positive Following Swab During Admission - 15 and over		Jun-24	2	5				
	TRUST	Monthly	Covid Positive Following Swab During Admission - Hospital Acquired Rate		Jun-24	0.5%	1.7%				
	TRUST	Monthly	Complaints		Jun-24	20	15				
	TRUST	Monthly	Concerns		Jun-24	36	39				
	TRUST	Monthly	Compliments		Jun-24	245	199				
	TRUST	Monthly	Safe staffing - No. of wards not meeting >80% fill rate for RNs - Day	0	Jun-24	2	2				
	TRUST	Monthly	Safe staffing - No. of wards not meeting >80% fill rate for RNs - Night	0	Jun-24	1	1				
	TRUST	Monthly	Care Hours per patient day		Jun-24	12.6	12.2				
	TRUST	Monthly	No. of episodes of seclusions >2hrs		Jun-24	6	3				
	TRUST	Monthly	No. of episodes of prone (Supported) restraint		Jun-24	2	1				
	TRUST	Monthly	No. of episodes of prone (Unsupported) restraint		Jun-24	0	0				
	TRUST	Monthly	Total number of Restrictive Practices		Jun-24	85	107				
	TRUST	Monthly (In Arrears)	No. of Category 2 pressure ulcers developed or deteriorated in LPT care		May-24	111	127				
	TRUST	Monthly (In Arrears)	No. of Category 3 pressure ulcers developed or deteriorated in LPT care		May-24	12	12				
	TRUST	Monthly (In Arrears)	No. of Category 4 pressure ulcers developed or deteriorated in LPT care		May-24	7	11				
	TRUST	Monthly (In Arrears)	No. of repeat falls		May-24	47	38				
	TRUST	Monthly	No. of Medication Errors		Jun-24	109	86				
	TRUST	Monthly	LD Annual Health Checks completed - YTD		Jun-24	12.9%	7.1%				
	TRUST	Monthly	LeDeR Reviews completed within timeframe - Allocated		Jun-24	10	7				
	TRUST	Monthly	LeDeR Reviews completed within timeframe - Awaiting Allocation		Jun-24	0	6				
TRUST	Monthly	LeDeR Reviews completed within timeframe - On Hold		Jun-24	3	3					

Section	Source	Reporting Frequency	Indicator	Monthly Target	Data As At	Current Reporting Period	Previous Reporting Period	Sparkline YTD	SPC Assurance	SPC Trend	Exception Report
HR Workforce	TRUST	Monthly	Normalised Workforce Turnover (Rolling previous 12 months)	<=10%	Jun-24	9.0%	9.0%				
	TRUST	Monthly	Vacancy Rate	<=10%	Jun-24	15.3%	15.5%				
	TRUST	Monthly (In Arrears)	Sickness Absence	<=4.5%	May-24	5.4%	5.2%				
	TRUST	Monthly (In Arrears)	Sickness Absence Costs		May-24	£1,003,230	£953,235				
	TRUST	Monthly (In Arrears)	Sickness Absence - YTD	<=4.5%	May-24	5.3%	5.1%				
	TRUST	Monthly	Agency Costs	<=£2,077,250	Jun-24	£1,752,134	£2,132,787				
	TRUST	Monthly	Core Mandatory Training Compliance for substantive staff	>=85%	Jun-24	97.0%	97.2%				
	TRUST	Monthly	Staff with a Completed Annual Appraisal	>=80%	Jun-24	93.6%	93.3%				
	TRUST	Monthly	% of staff from a BME background	>=22.5%	Jun-24	29.4%	29.1%				
	TRUST	Monthly	Staff flu vaccination rate (frontline healthcare workers)	>=80%	Jun-24	n/a	n/a				
	TRUST	Monthly	% of staff who have undertaken clinical supervision within the last 3 months	>=85%	Jun-24	92.3%	92.9%				

EXCEPTION REPORT - Adult CMHT Access (Six weeks routine) - Incomplete pathway (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
DMH	>=95%	52.3%	58.8%	49.2%	45.1%	47.1%	51.1%	45.4%	46.7%	56.1%	52.6%	53.8%	53.4%



Analytical Commentary

The metric is showing a common cause variation with no significant change. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

Mean	Lower Process Limit	Upper Process Limit
54.0%	43.0%	65.0%

Operational Commentary (e.g. referring to risk, finance, workforce)

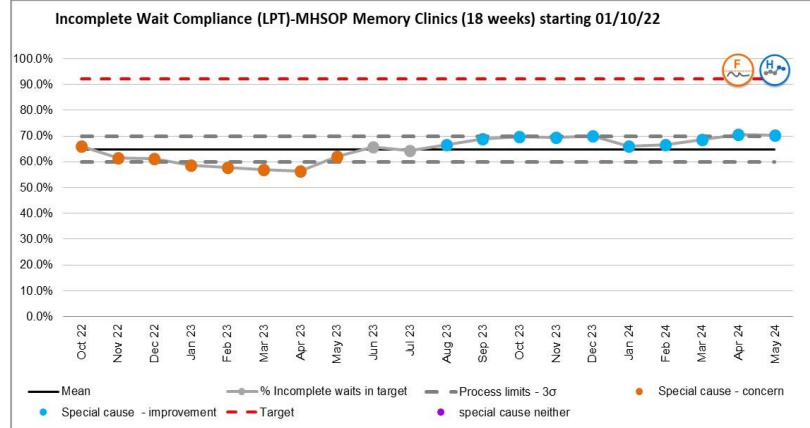
A renewed trajectory is in development to monitor progress against waiting times.

A task and finish group has been established which meets regularly to review cancelled clinic data, appointment planners and ensure compliance with the Service SOP.

Work progressing on 2024/25 caseloads review programme. Prioritising caseload reviews in city central. Additional medic and nursing capacity identified to review 200 caseloads.

EXCEPTION REPORT - MHSOP - Memory Clinics (18 weeks local RTT) - Incomplete pathway (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
DMH	>=92%	65.8%	64.2%	66.7%	68.8%	69.7%	69.3%	70.0%	66.0%	66.5%	68.5%	70.7%	70.3%



Analytical Commentary

The metric is showing special cause variation of an improving nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

Mean	Lower Process Limit	Upper Process Limit
64.8%	60.0%	70.0%

Operational Commentary (e.g. referring to risk, finance, workforce)

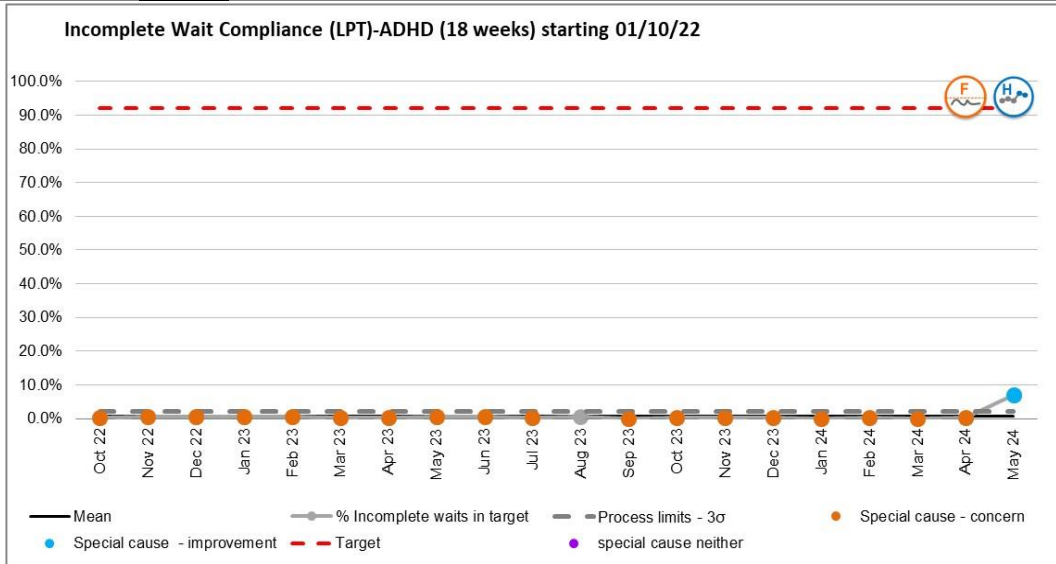
Reviewing capacity and demand and trajectory to reduce waiting times

1.5WTE Band 6 vacancies, recruitment has been approved.

With the non-recurrent monies, the clinical and operational team are scoping out one stop shop pilot.

EXCEPTION REPORT - ADHD (18 weeks local RTT) - Incomplete pathway (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
DMH	>=92%	0.5%	0.3%	0.7%	0.1%	0.4%	0.3%	0.2%	0.1%	0.2%	0.1%	0.2%	6.9%



Analytical Commentary

The metric is showing special cause variation of an improving nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

Mean	Lower Process Limit	Upper Process Limit
0.7%	-0.01%	0.02%

Operational Commentary (e.g. referring to risk, finance, workforce)

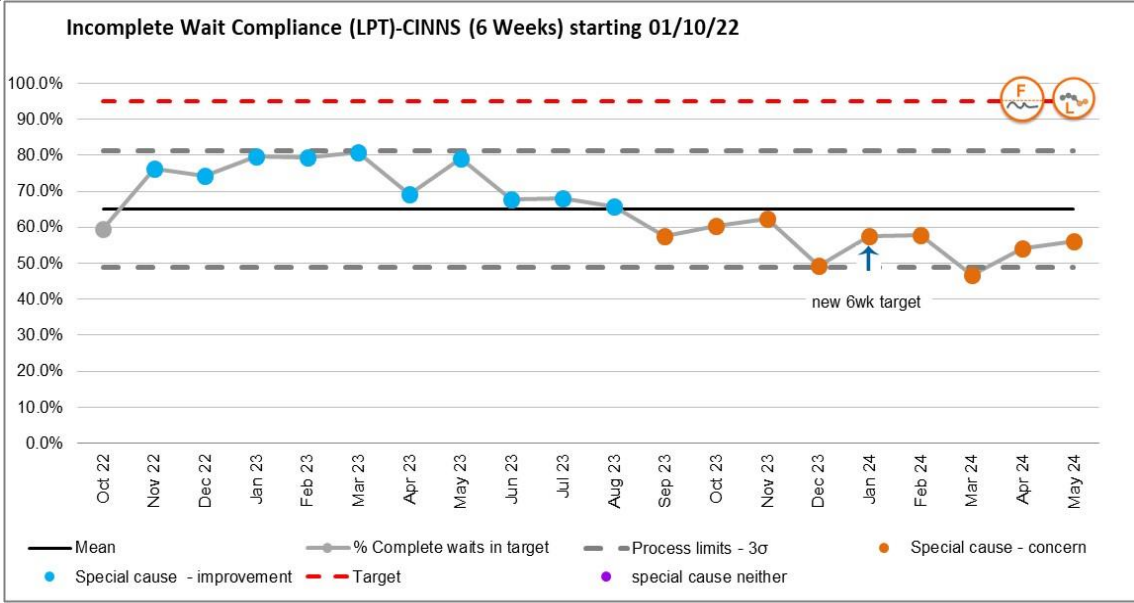
The investment business case was presented to EMB on 2nd July and trust wide CRG on 15th July. Now going to System Executive Group, date to be confirmed.

New staff recruited through the non-recurrent funding will focus on treatment waiting list.

Transformational work identified as part of improving the pathway to be taken forward (moving annual reviews to primary care, secondary care model and review of workforce).

EXCEPTION REPORT - CINSS (6 weeks) - Incomplete pathway (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
CHS	>=95%	67.8%	67.9%	65.9%	57.5%	60.3%	62.3%	49.3%	57.4%	57.8%	46.7%	54.0%	56.0%



Analytical Commentary

The metric is showing a special cause variation of a concerning nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

Mean	Lower Process Limit	Upper Process Limit
65.0%	49.0%	81.0%

Operational Commentary (e.g. referring to risk, finance, workforce)

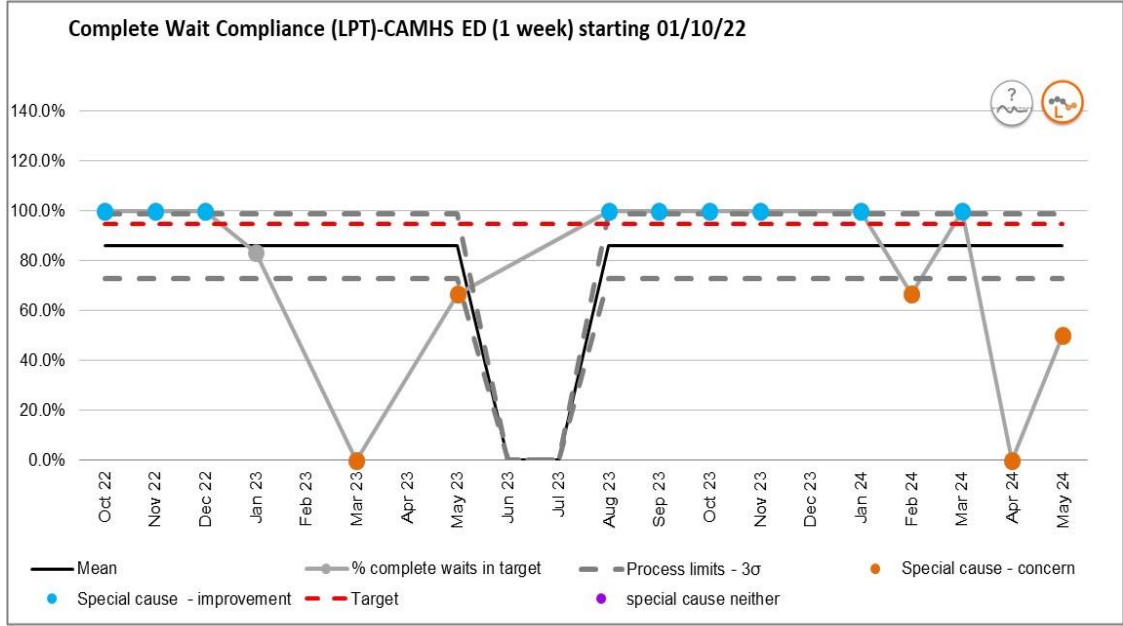
Key actions identified below with the aim of improving service compliance against wait times:

- Review and revise expectations around documentation.
- Delegation of clinical tasks from qualified staff to TI and between TI's.
- Review admin roles and responsibilities.
- Roll out job planning across service.
- Recruitment – B8a Operational Service Lead - start date 10.06.24. B7 Operational Lead vacancy - internal acting up position out to advert. B7 OT Vacancy - advert closed with 0 applicants. Exploring alternative options i.e. 12month secondment. Band 6 OT vacancy - position recruited to, moving through recruitment. Admin vacancy – awaiting advertisement.
- Explore digital offer for appropriate referrals to further facilitate health education and self-management.
- Continue to monitor impact of change using the EQIA.

EXCEPTION REPORT - CAMHS Eating Disorder (one week) - Complete pathway (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
FYPCLDA	>=95%			100.0%	100.0%	100.0%	100.0%		100.0%	66.7%	100.0%	0.0%	50.0%

NB. Blank cells = no patients waiting



Analytical Commentary

The metric is showing a special cause variation of concerning nature due to lower values. There is no assurance that the metric will consistently achieve the target and is showing a special cause for concern.

Mean	Lower Process Limit	Upper Process Limit
85.9%	73.0%	99.0%

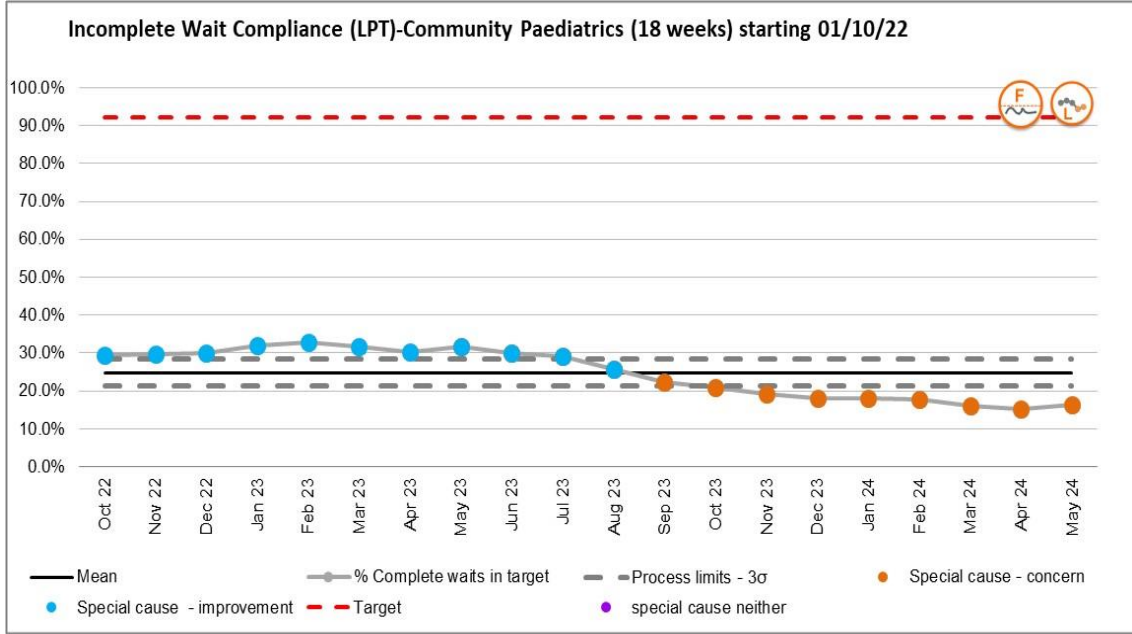
Operational Commentary (e.g. referring to risk, finance, workforce):

Weekly Patient Tracking meeting in place to ensure targets are met - both Head of Service and Service Group Manager will attend.

- The service is undertaking a demand and capacity exercise, which will include reviewing job plans against ledgers, supporting the service to identify unused slots.
- RFD lead is linking in with First Steps to work through the service offer to reduce any duplications.
- The service will be strengthening the systems and processes of tracking patients from referral to first appt.

EXCEPTION REPORT - Community Paediatrics (18 weeks) - Incomplete pathway (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
FYPCLDA	>=92%	30.1%	29.2%	25.7%	22.4%	20.9%	19.3%	18.2%	18.0%	17.7%	16.1%	15.3%	16.5%



Analytical Commentary

The metric is showing a special cause variation of a concerning nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

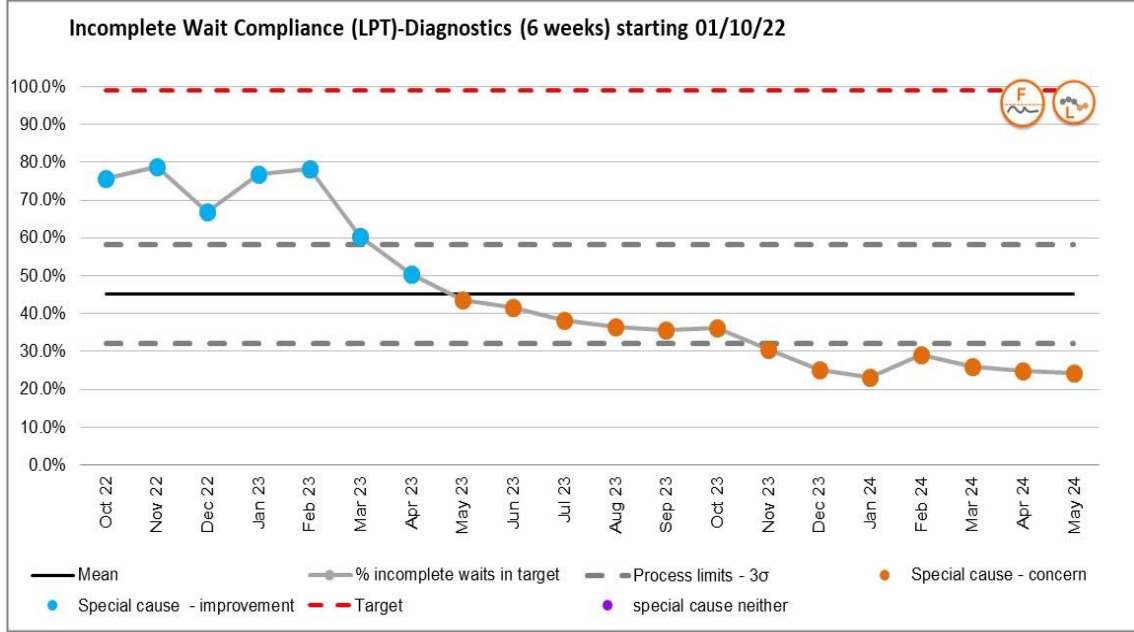
Mean	Lower Process Limit	Upper Process Limit
24.9%	21.0%	28.0%

Operational Commentary (e.g. referring to risk, finance, workforce):

This is a multidisciplinary pathway (with a multi referral point for access). The KPI is directly impacted by the ND waits, please see the comm paed and CAMHS ND exception reports for further detail. Triage system in place based on acuity of clinical need and safe caseload management. After award of of the precommitment monies for the ND business case, mobilisation of service and recruitment underway.

EXCEPTION REPORT - Childrens Audiology (6 week wait for diagnostic procedures) - Incomplete pathway (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
FYPCLDA	>=99%	41.7%	38.1%	36.6%	35.8%	36.3%	30.6%	25.2%	23.1%	29.2%	26.1%	24.9%	24.4%



Analytical Commentary

The metric is showing a special cause variation of a concerning nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

Mean	Lower Process Limit	Upper Process Limit
45.1%	32.0%	58.0%

Operational Commentary (e.g. referring to risk, finance, workforce):

Ongoing monthly scrutiny for management of quality issues relating to estates and waiting lists.

Following EMB sign off the specification for external sourcing is now on the framework for external providers to apply. The viability of using Shepshed HC, which will be converted to soundproofed by end of July, to run these weekend clinics is being explored.

EMB approved financial investment to lease external venues. Clinics already booked at the Hearing Centre Market Harborough from 07/07//2024 and clinics booked at DMU from 08/08/2024. These soundproofed venues should reduce numbers added to the mitigation list and offer capacity to address CYP already on the mitigation list.

Awaiting response from EMB for approval of capital financial investment required to bring other identified estate to required clinical standard.

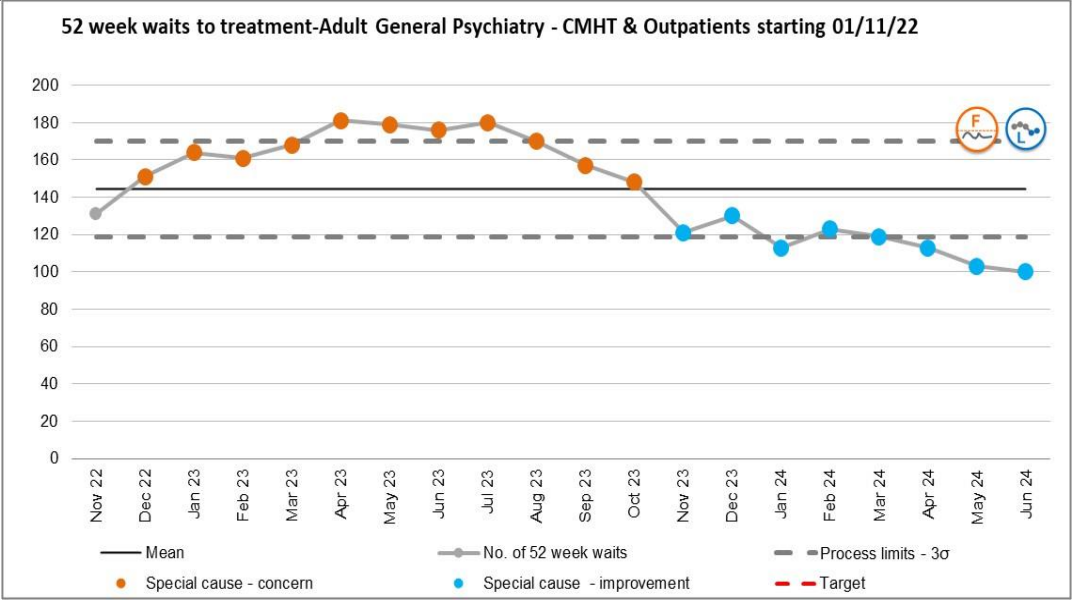
System approach with UHL in response to CQC/NHSE/ICB request for IQIPs registration, delivered through monthly steering group.

Staff returning to the service from maternity leave as planned, and new band 3 staff member being onboarded which will increase capacity.

A detailed trajectory of waiting recovery in place factoring in realisation of variables that will have a positive impact.

**EXCEPTION REPORT - Adult General Psychiatry - Community Mental Health Teams and Outpatients (treatment)
- No of waiters over 52 weeks**

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
DMH	0	180	170	157	148	121	130	113	123	119	113	103	100



Analytical Commentary

The metric is showing a special cause variation of an improving nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
144.4	118.8	170.0

"Operational Commentary (e.g. referring to risk, finance, workforce)

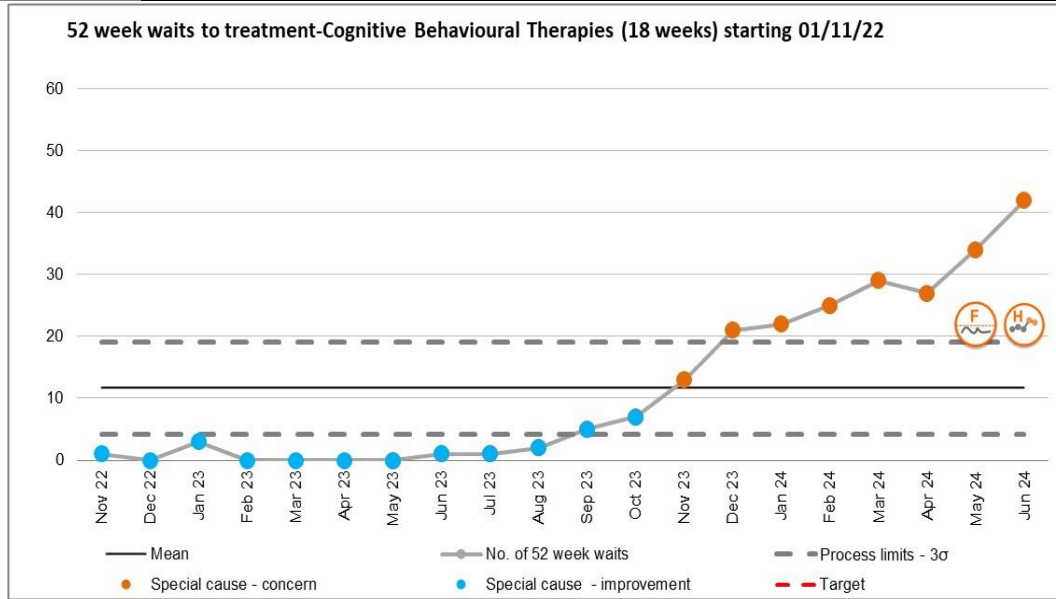
A renewed trajectory is in development to monitor progress against waiting times.

A task and finish group has been established which meets regularly to review cancelled clinic data, appointment planners and ensure compliance with the Service SOP.

Work progressing on 2024/25 caseloads review programme. Prioritising caseload reviews in city central. Additional medic and nursing capacity identified to review 200 caseloads.

EXCEPTION REPORT - Cognitive Behavioural Therapy (treatment) - No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
DMH	0	1	2	5	7	13	21	22	25	29	27	34	42



Analytical Commentary

The metric is showing a special cause variation of a concerning nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

Mean	Lower Process Limit	Upper Process Limit
11.7	4.23	19.1

Operational Commentary (e.g. referring to risk, finance, workforce)

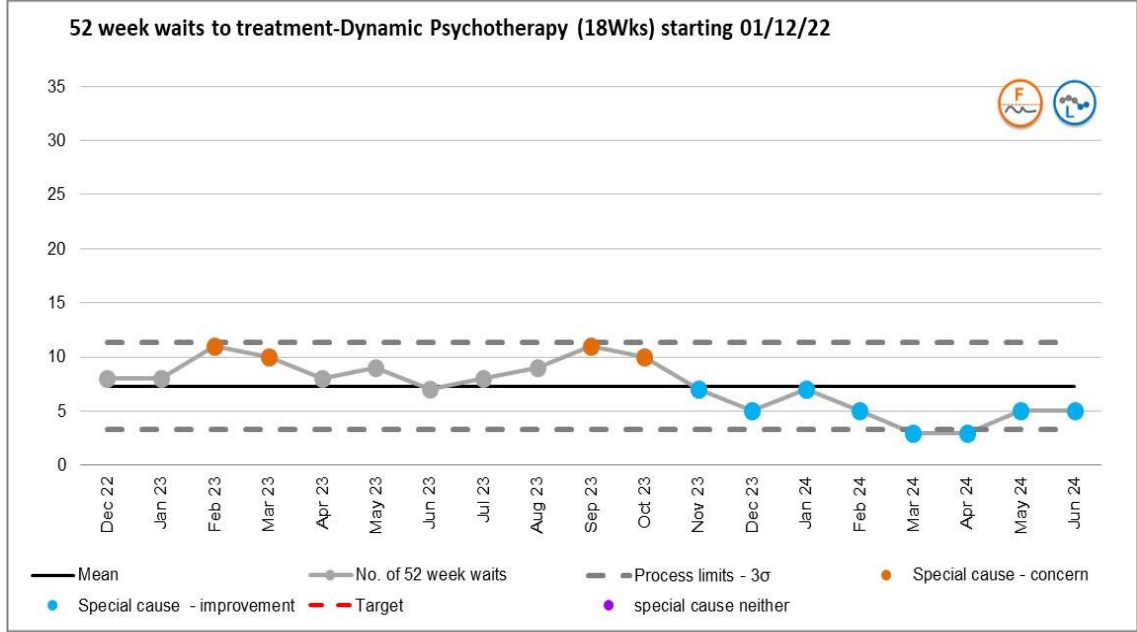
All referrals to CBT will go through Neighbourhood Mental Health Teams, the new front door process for those teams and the consultor process.

Planning an away day in the autumn for PPT staff to include CBT to agree processes and shared understandings of the consultor process.

Waiting list has increased significantly in the past 12 months. Demand and capacity exercise to be undertaken.

EXCEPTION REPORT - Dynamic Psychotherapy (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
DMH	0	8	9	11	10	7	5	7	5	3	3	5	5



Analytical Commentary

The metric is showing a special cause variation of an improving nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
7.3	3.33	11.31

Operational Commentary (e.g. referring to risk, finance, workforce)

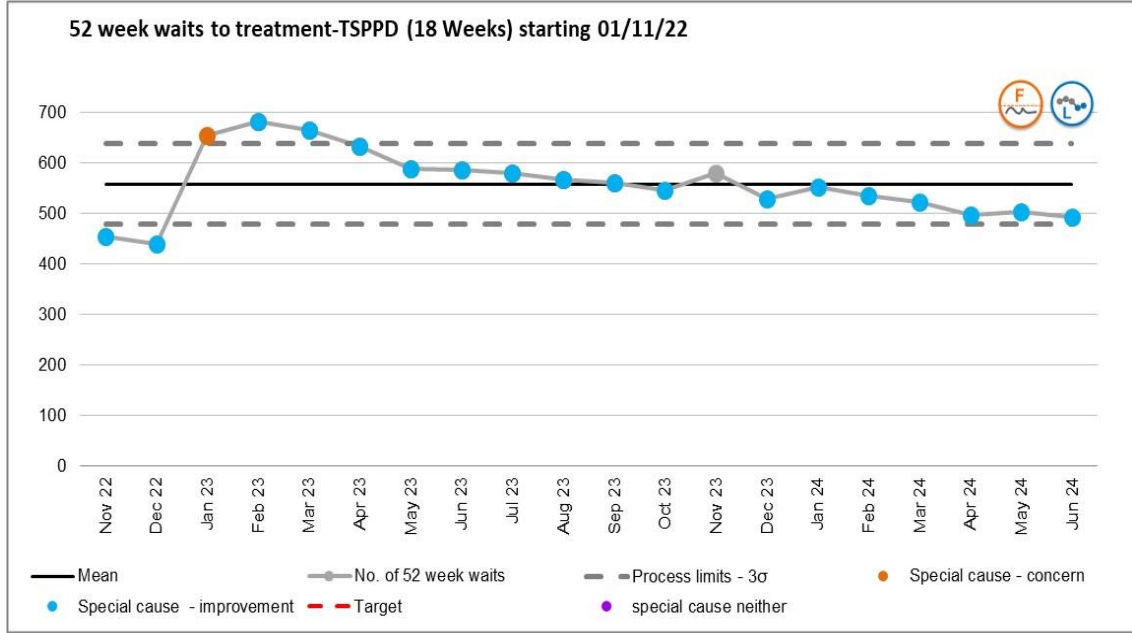
All referrals to DPS will go through Neighbourhood Mental Health Teams, the new front door process for those teams and the consultor process.

Planning an away day in the autumn for PPT staff to include CBT to agree processes and shared understandings of the consultor process.

3 staff on long-term sickness absence and 1.0WTE vacancy which is due to be advertised. 0.8WTE recruited to, due to commence in post August 2024.

EXCEPTION REPORT - Therapy Service for People with Personality Disorder (treatment) - No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
DMH	0	580	567	561	546	581	530	552	536	523	498	503	494



Analytical Commentary

The metric is showing a special cause variation of an improving nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
558.9	478.96	638.84

Operational Commentary (e.g. referring to risk, finance, workforce)

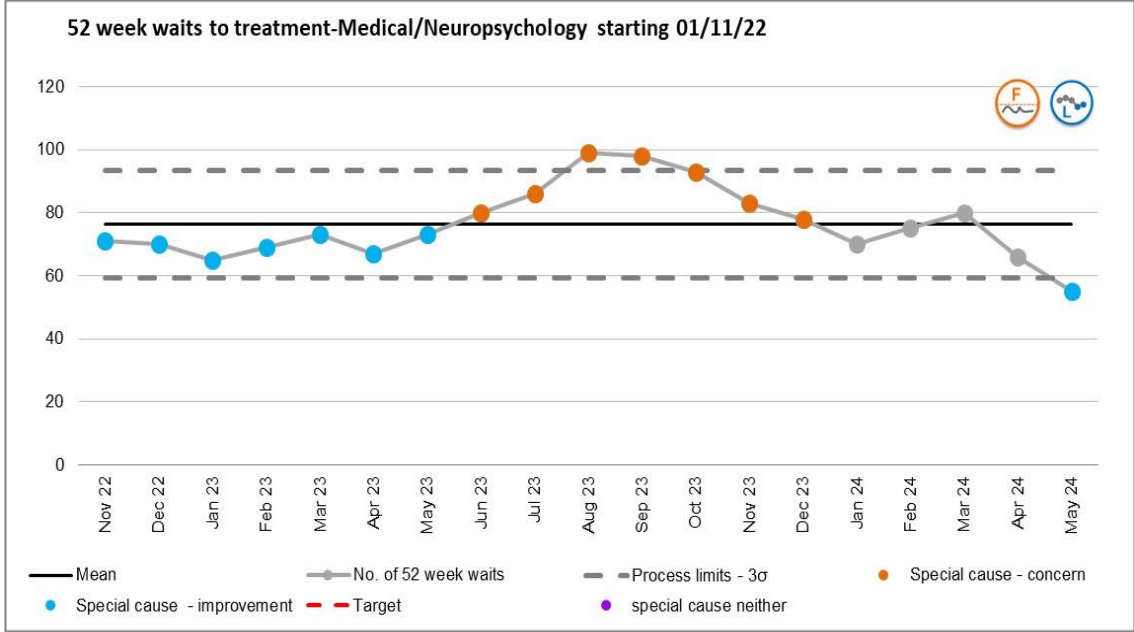
Development of consultation and training support to community services to enhance the primary care offer (small scale).

All TSPPD referrals to come through Neighbourhood Teams and agree the directorate wide secondary care referral criteria. Business as usual will be provided by the Mental Health Neighbourhood Teams during the transition period.

Agree a clinical model for the current TSPPD waiting list and governance processes.

EXCEPTION REPORT - Medical/Neuropsychology (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
DMH	0	86	99	98	93	83	78	70	75	80	66	55	58



Analytical Commentary

The metric is showing a special cause variation of an improving nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
76.4	59.23	93.51

Operational Commentary (e.g. referring to risk, finance, workforce)

Medical Psychology 52 weeks:

A Demand and Capacity exercise was completed which highlighted a significant capacity gap, with an additional 4.0 WTE required to meet the current demand and an additional 6.2 WTE required to clear the waiting list backlog over 12 months. Discussions taking place with UHL.

Neuropsychology 52 weeks:

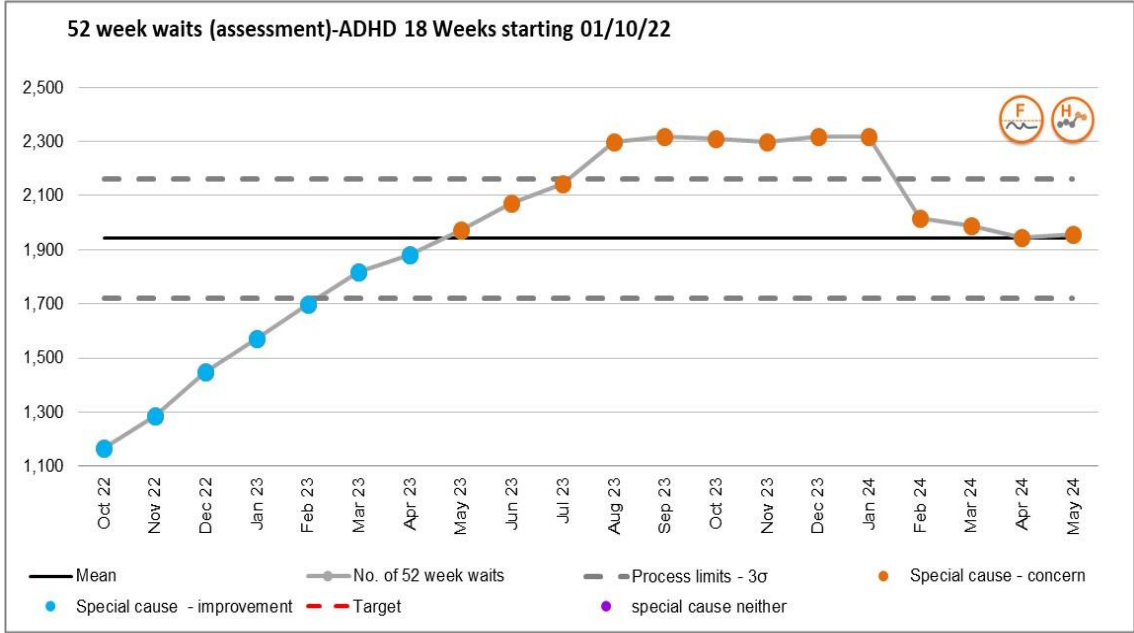
Re-evaluated the waiting list and receiving support from suitably qualified colleagues in outpatient neurology.

Have transitioned any 16+ year referrals to adult neuro wait list where there are more staff.

Assistant Psychologist is offering telephone triage to anyone who has been on the waiting list longer than 6 months to check that they still want the service.

EXCEPTION REPORT - ADHD 18 weeks (assessment)- No of waiters over 52 weeks (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
DMH	0	2074	2143	2300	2317	2310	2298	2318	2317	2018	1989	1945	1956



Analytical Commentary

The metric is showing special cause variation of a concerning nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
1941.7	1721.29	2162.01

Operational Commentary (e.g. referring to risk, finance, workforce)

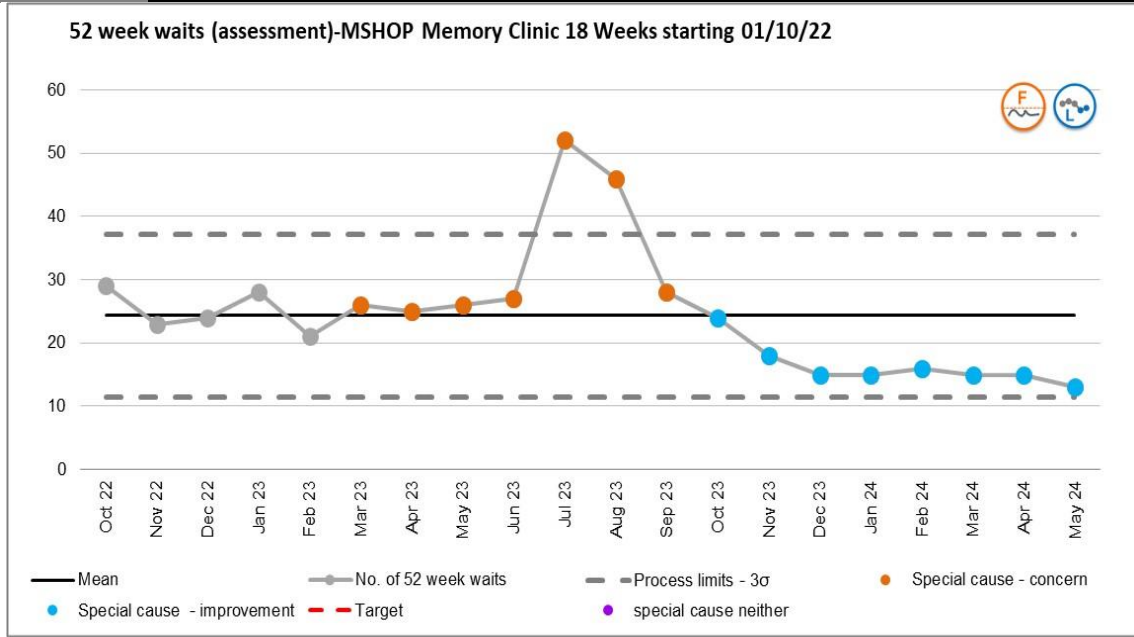
The investment business case was presented to EMB on 2nd July and trust wide CRG on 15th July. Now going to System Executive Group, date to be confirmed.

New staff recruited through the non-recurrent funding will focus on treatment waiting list.

Transformational work identified as part of improving the pathway to be taken forward (moving annual reviews to primary care, secondary care model and review of workforce).

EXCEPTION REPORT - MHSOP Memory Clinics 18 weeks (assessment)- No of waiters over 52 weeks (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
DMH	0	27	52	46	28	24	18	15	15	16	15	15	13



Analytical Commentary

The metric is showing special cause variation of a concerning nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
24.3	11.42	37.18

Operational Commentary (e.g. referring to risk, finance, workforce)

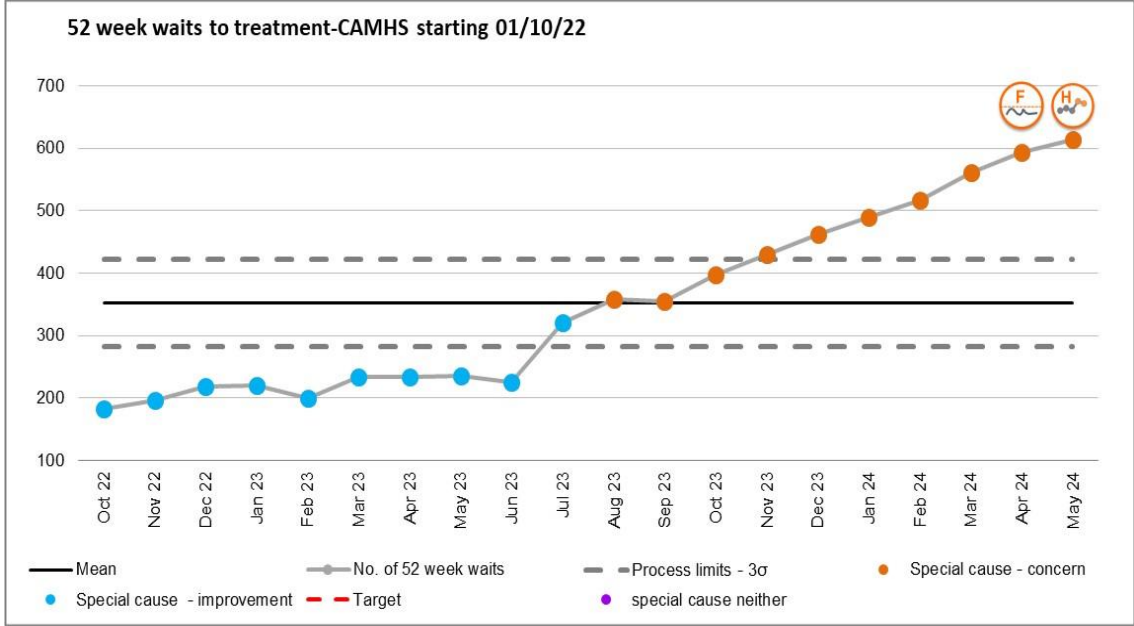
Reviewing capacity and demand and trajectory to reduce waiting times

1.5WTE Band 6 vacancies, recruitment has been approved.

With the non-recurrent monies, the clinical and operational team are scoping out one stop shop pilot.

EXCEPTION REPORT - CAMHS (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
FYPCLDA	0	321	358	355	397	429	462	489	516	561	593	614	632



Analytical Commentary

The metric is showing special cause variation of a concerning nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
374.6	303.9	445.3

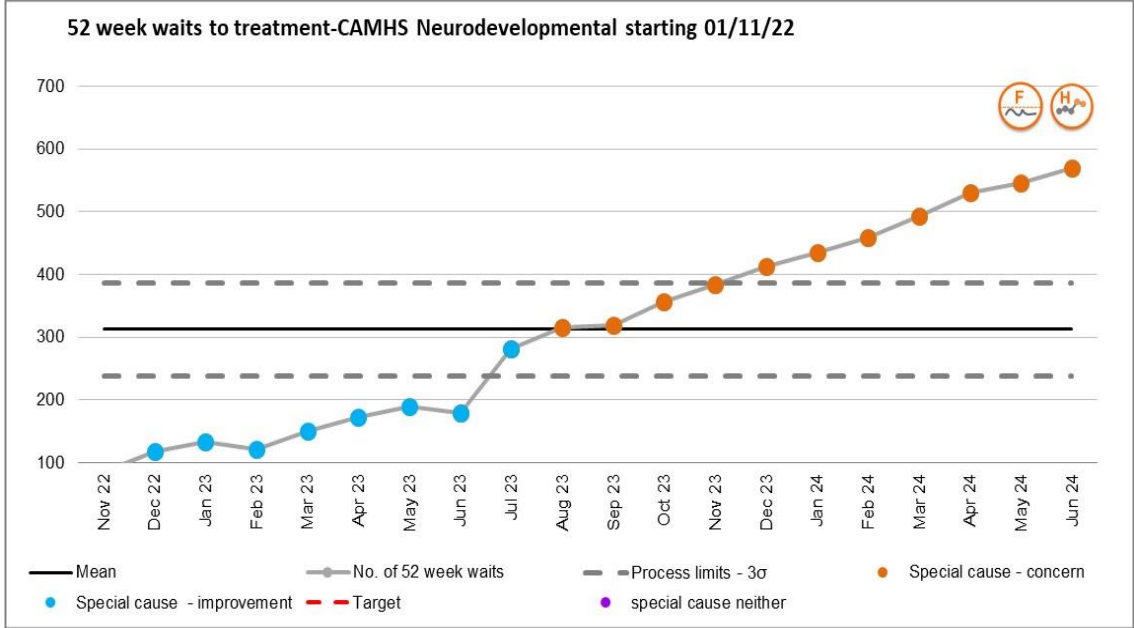
Operational Commentary (e.g. referring to risk, finance, workforce):

This increase in the number of CYP waiting over 52 weeks is linked to the number of children waiting for a Neurodevelopmental Assessment and therefore treatment. Migration into one unit continues to schedule so as to identify this cohort.

The general CAMHS waits have been addressed through the latest round of MHIS funding and this has had some impact to the waits. Investment from business case now inbound with successful release of precommitment monies. Mobilisation of and recruitment into service commenced. Duty system whilst waiting for treatment, first a letter sent, then telephone call once identified as Amber waiter, then a Face2Face appointment is identified as a Red waiter (over 12 months). Acute patients prioritised owing to acuity, followed by Routine. Sub prioritisation based on risk and age also utilised, with closer to 18YO prioritised. Focus over the last 12 months has been on clearing the backlog of Access patients, focus now treatment waits.

EXCEPTION REPORT - CAMHS Neurodevelopment (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
FYPCLDA	0	282	316	319	357	383	412	435	458	492	530	546	570



Analytical Commentary

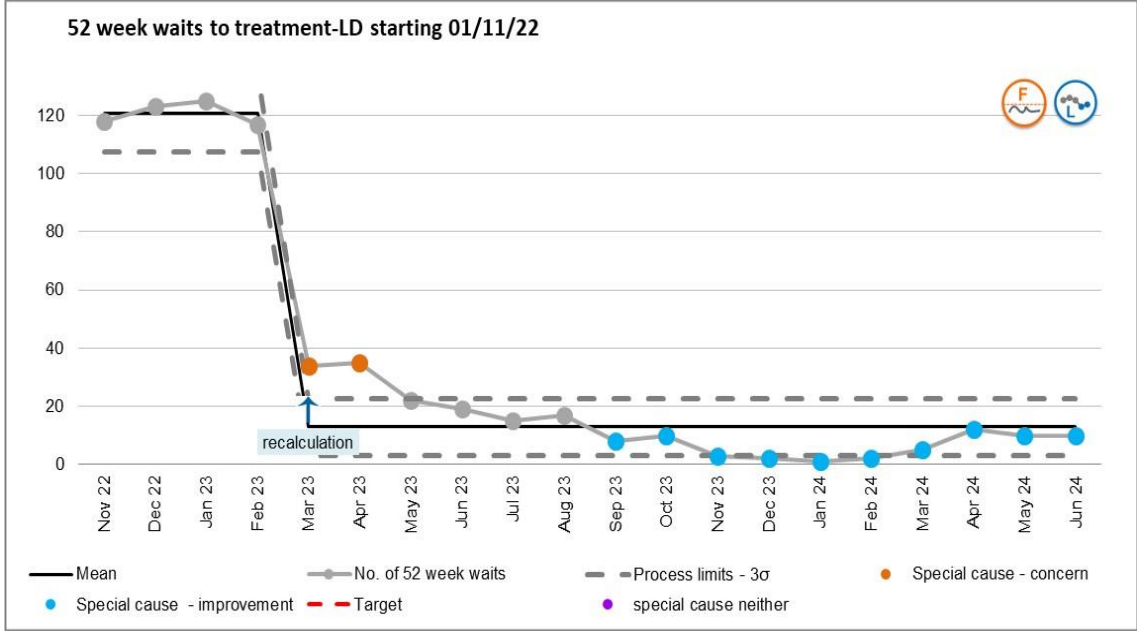
The metric is showing special cause variation of a concerning nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
312.6	238.68	386.52

Operational Commentary (e.g. referring to risk, finance, workforce):
 Precommitment monies now released. Mobilisation and recruitment underway. Waits will continue to rise as full funds were not awarded and demand continues to grow, however, the precommitment monies will enable staff to work through backlog of long waiters. Duty system in place to support patients whilst waiting, along with individual risk assessment that informs prioritisation. Features strongly in our transformation work, with a dedicated workstream.

EXCEPTION REPORT - LD&A (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
FYPC LDA	0	15	17	8	10	3	2	1	2	5	12	10	10



Analytical Commentary

The metric is showing a special cause variation of an improving nature due to lower values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
12.8	2.88	22.74

Operational Commentary (e.g. referring to risk, finance, workforce):

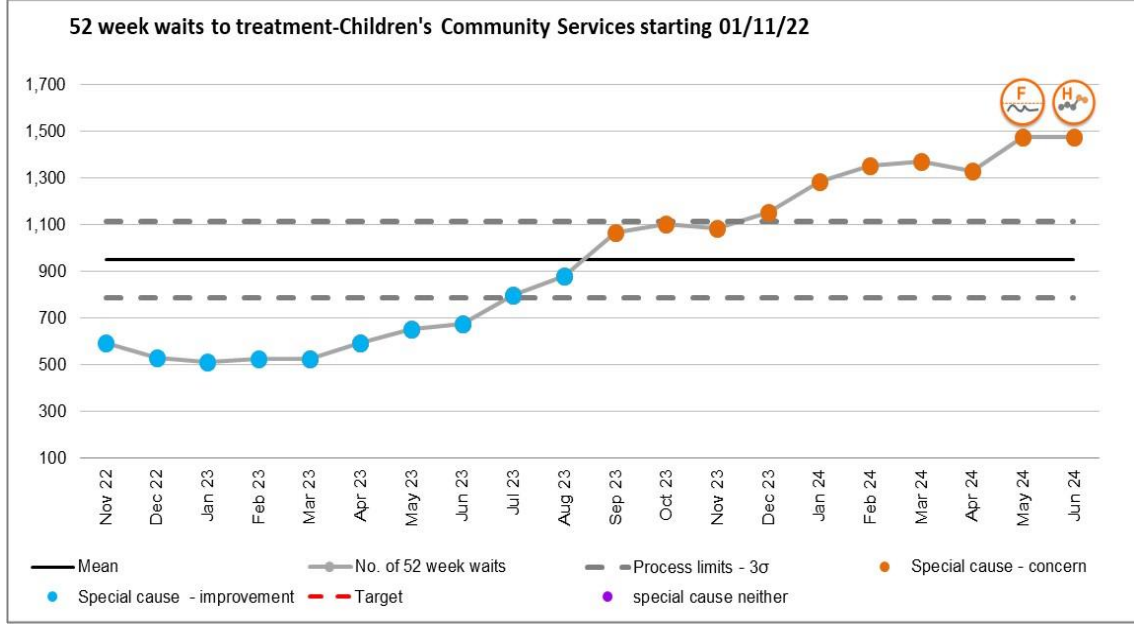
Request for exception report to be renamed to 'LDA' rather than 'LD' to capture all pathways/services (as current 52 week waits are for LD Community and SAT).

LD Community - 4x 52 week waits all waiting for psychology: 1 is in active treatment (data quality issue); 1 is receiving anxiety management with nursing & due to be seen by psychology soon; 1 offered group work (DNA) awaiting allocation to 1:1 however open to psychiatry; 1 was in treatment with nursing for anxiety management until August 23; unsuitable for group work awaiting 1:1 allocation. All psychology community vacancies now recruited, awaiting start date (Sept).

SAT - 9 people awaiting workshops – all green TAG (low risk). Green referrals are not eligible for 1:1 interventions therefore following the workshops these individuals will be discharged. The team are developing digital workshops 'My Guidance' as first line treatment. These will go live in August. All patients waiting for workshops will then be allocated.

EXCEPTION REPORT - Children's Community Services (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
FYPCLDA	0	800	878	1068	1104	1083	1150	1283	1351	1369	1330	1476	1474



Analytical Commentary

The metric is showing special cause variation of a concerning nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

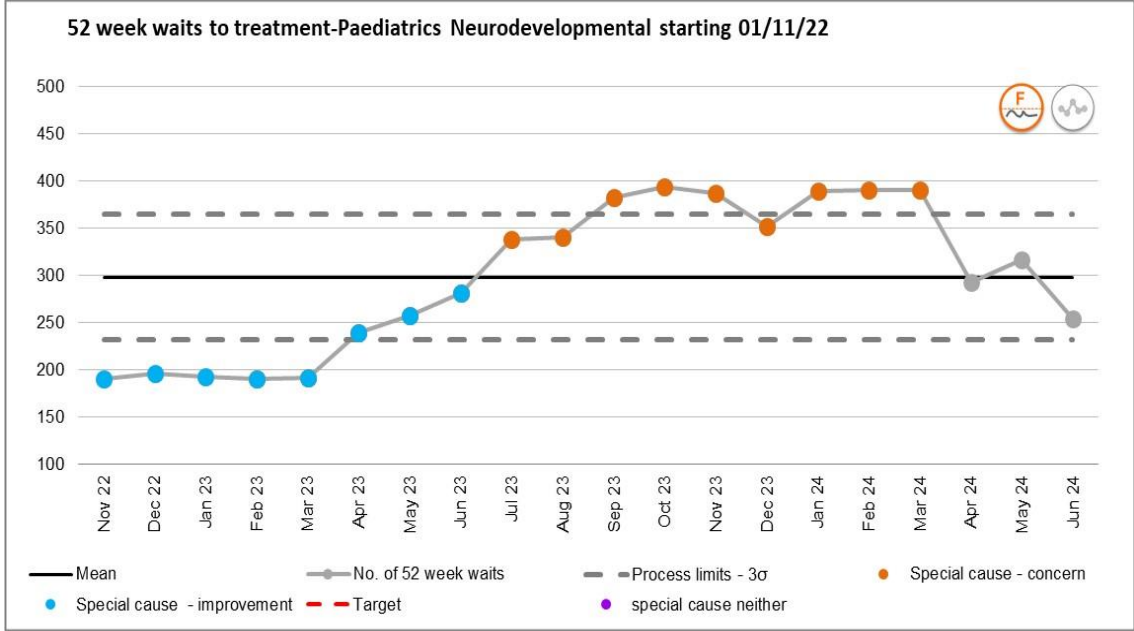
Mean	Lower Process Limit	Upper Process Limit
948.7	784.29	1113.01

Operational Commentary (e.g. referring to risk, finance, workforce):

ND: as detailed in ND, Comm Paeds, and CAMHS exception reports. **CYP Continence:** Ongoing increase in referrals, year on year. Increased demand for services. Previously embedded in Diana as part of overall service specification. Work underway to develop specific service specification and KPIs, being completed in partnership with the ICB. Roll out 100/month digital or ages/stages reviews due annual review. Increase in service capacity completion through recruitment. **CYP PT:** Recruitment underway for band 6 physio posts and further expansion of centralised booking system. **CYP SALT:** Mobilisation of ELSEC pathway as part of national SEND-AP Change Programme (which is new pathway for low need). ELSEC will offer first appointments to reduce pressure on core service. Service spec updated to reflect nature of service. Impact of ELSEC pathfinder anticipated in the next few months. **CYP Audiology:** This wait relates to the bank and Downs Syndrome surveillance pathways where CYP are required to receive a 6 month or annual review of their hearing status. Current protocol means they are offered a review the following year after WNB/no response to PB2, with the outcome that CYP are not discharged and consistently breach 52 week compliance. SBAR to propose implementation of discharge in line with discharge and WNB policy to be taken to G2 governance on 29/08/2024, which if agreed will bring 52 week wait to 0 from date of implementation. **Important to note** the impact of statutory EHCP completion and growing high demand on the therapy services. Volume of EHCP

EXCEPTION REPORT - Paediatrics Neurodevelopment (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
FYPC LDA	0	338	340	382	394	387	352	389	390	390	293	316	254



Analytical Commentary

The metric is showing a common cause variation with no significant change. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

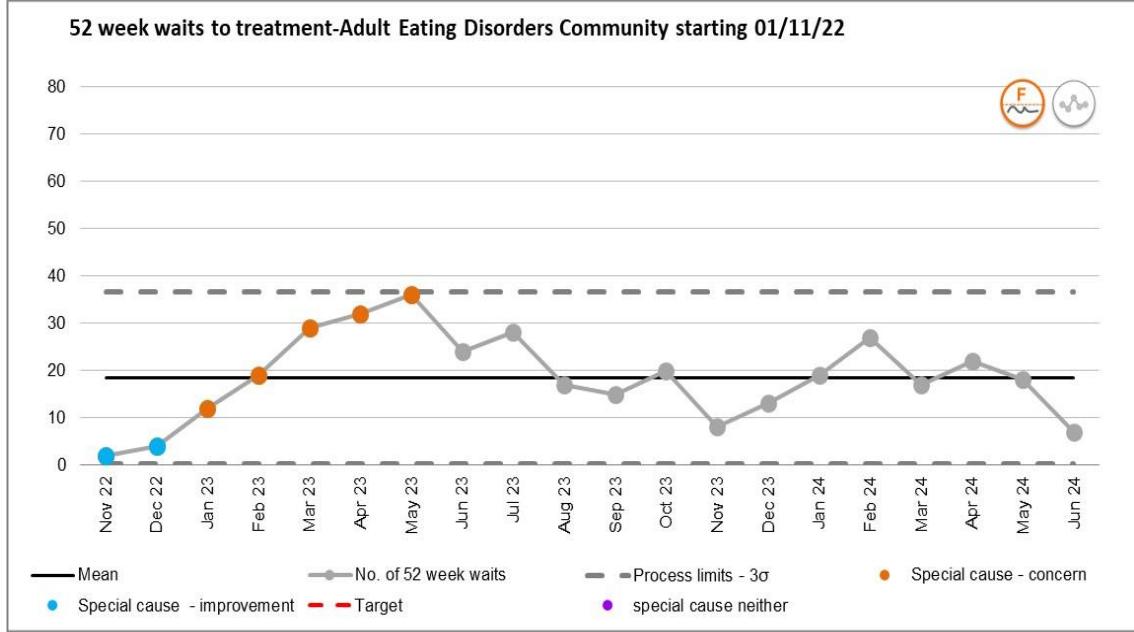
Mean	Lower Process Limit	Upper Process Limit
298.2	231.56	364.84

Operational Commentary (e.g. referring to risk, finance, workforce):

See previous detail re business case outcome in CAMHS exception reports. Duty system in place to support patients whilst waiting, along with individual risk assessment that informs prioritisation. Features strongly in our transformation work, with a dedicated workstream.

EXCEPTION REPORT - Adult Eating Disorders Community (treatment)- No of waiters over 52 weeks

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
FYPCLDA	0	28	17	15	20	8	13	19	27	17	22	18	7



Analytical Commentary

The metric is showing a common cause variation with no significant change. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

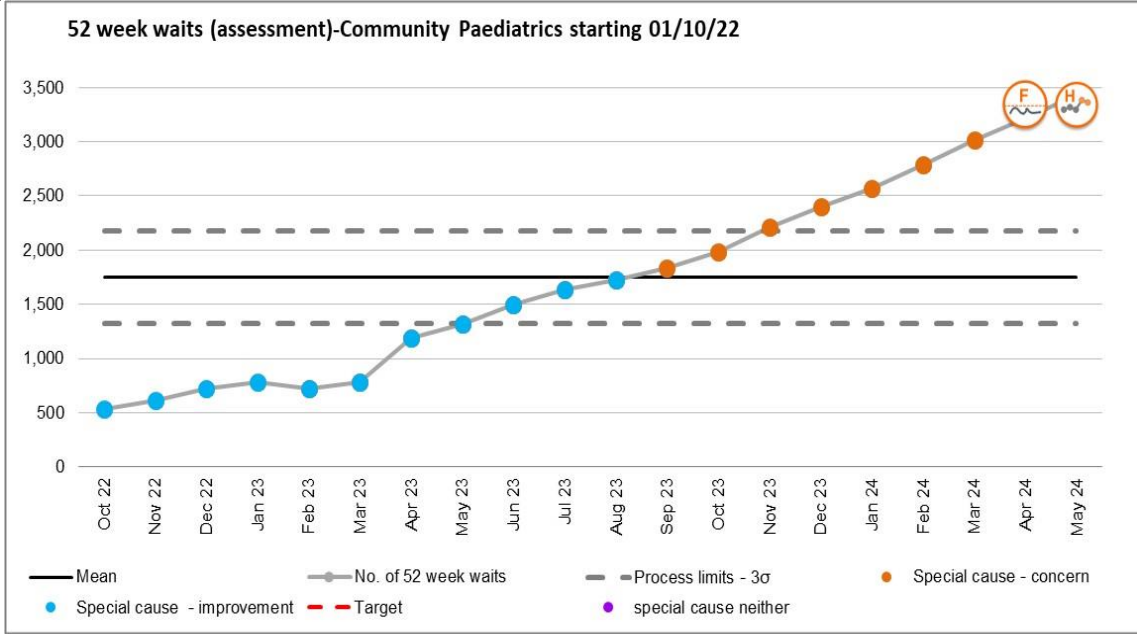
Mean	Lower Process Limit	Upper Process Limit
18.5	0.39	36.51

Operational Commentary (e.g. referring to risk, finance, workforce):

PTLs in place (bi-weekly) supported by the business team, enhanced waiting list management stepped up to ensure increased oversight. Service review taking place to ascertain most effective and efficient pathways. Exploring the implementation of a stepped approach for delivering treatment. Groups in place to support patients whilst waiting, this ensures patients are seen regularly and that they have regular check-ins on wellbeing and status. If a patient deteriorates, process in place to re-RAG rate and expediate on waiting list. Review of waiting list for the 25 years of age or less to offer First Steps as an option for treatment under new provision. Redesign of treatment pathway to include online psycho-education and guided self-help for BN spectrum patients. Actions put in place have impacted on waits with a reduction of 11 in number of over 52 week waiters between end of May and end of June 2024.

EXCEPTION REPORT - Community Paediatrics (assessment) - No of waiters over 52 weeks (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
FYPCLDA	0	1498	1640	1729	1834	1986	2208	2396	2573	2784	3012	3214	3436



Analytical Commentary

The metric is showing special cause variation of a concerning nature due to higher values. The metric will consistently fail to meet the target as demonstrated by the target line falling below the process limits.

Mean	Lower Process Limit	Upper Process Limit
1748.4	1323.45	2173.25

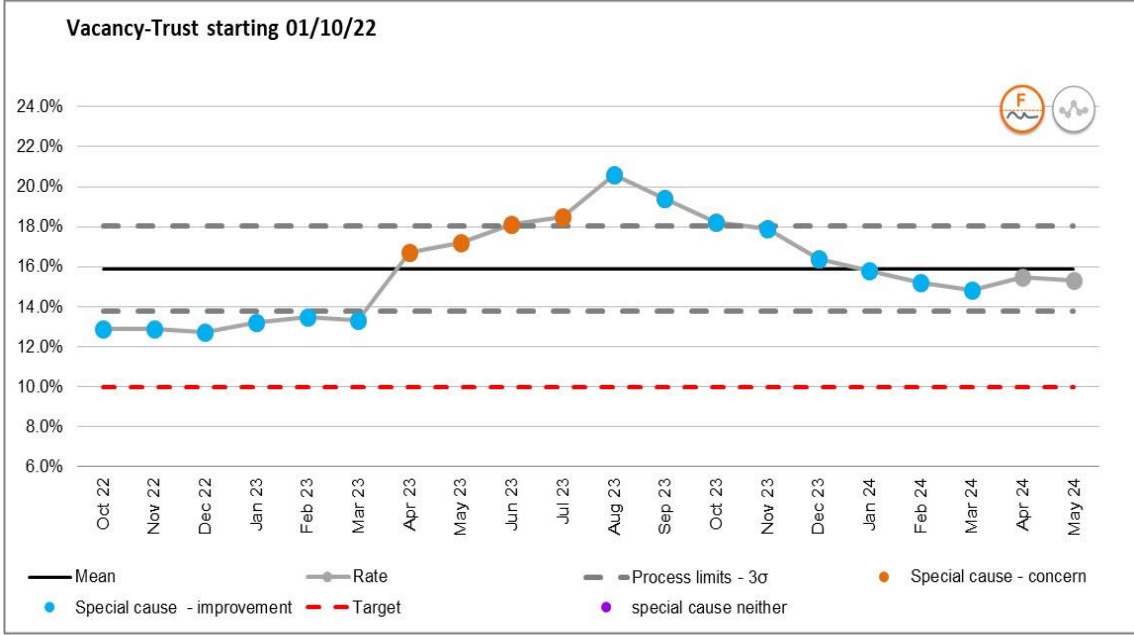
Operational Commentary (e.g. referring to risk, finance, workforce):

The service are utilising the non-recurrent investment to recruit additional ADHD nurses, SALT's and educational psychology support to release capacity from the paediatricians to enable them to see more new referrals. The investment will slow down the rate of increase but is not sufficient to reverse the trend of an increase to the numbers waiting over 52 weeks.

To note some CYP are now waiting over 2 years. See outcome of ND business case already cited.

EXCEPTION REPORT - Vacancy Rate

	Target	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
TRUST	<=10%	18.1%	18.5%	20.6%	19.4%	18.2%	17.9%	16.4%	15.8%	15.2%	14.8%	15.5%	15.3%
DMH		21.5%	22.2%	22.1%	20.8%	19.3%	19.2%	18.1%	17.9%	17.1%	17.3%	17.3%	17.5%
CHS		16.4%	15.8%	23.4%	23.0%	20.8%	19.6%	18.2%	17.8%	16.8%	17.0%	18.2%	15.8%
FYPCLD		18.9%	20.8%	18.7%	17.8%	18.1%	18.1%	15.5%	14.7%	14.4%	13.8%	14.4%	15.0%



Analytical Commentary

The metric is showing a common cause variation with no significant change. The metric will consistently fail to meet the target as demonstrated by the target line falling above the process limits.

Mean	Lower Process Limit	Upper Process Limit
15.9%	14.0%	18.0%

Operational Commentary (e.g. referring to risk, finance, workforce)

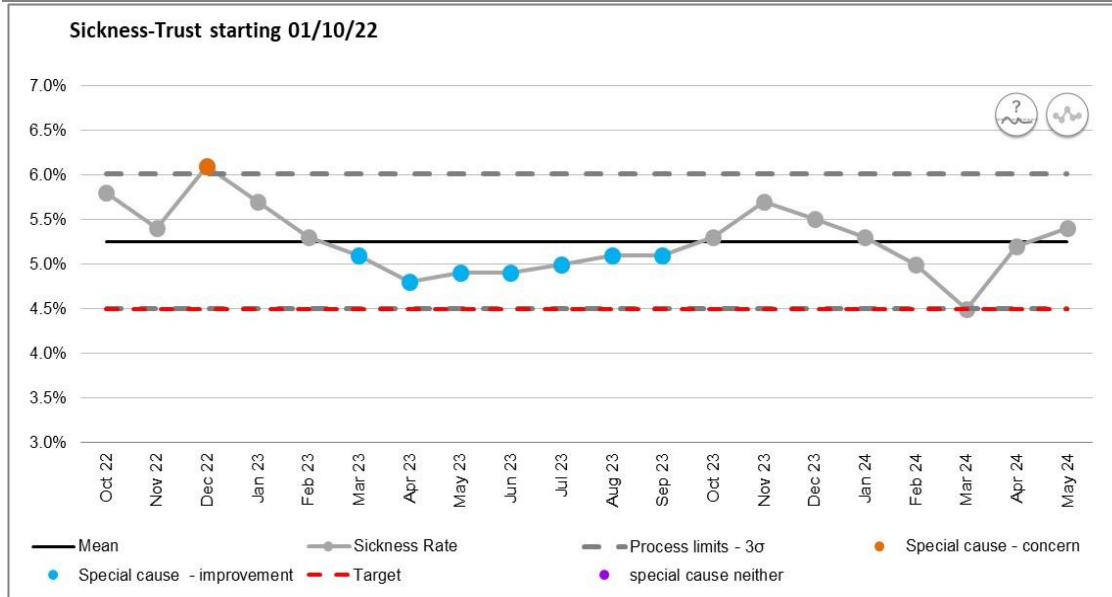
The reduction in the vacancy rate has slowed in the last two months due to an increase to the budgeted establishment, particularly in CHS (full effect of last years' safer staffing uplift) and FYPC.LDA (Mental Health Support Teams In Schools investment) and investment in the Neurodevelopmental Pathway. The number of actual staff in post continues to increase each month.

The recruitment plan has been reset for 2024-25 and is based on what we believe to be realistically achievable, building on the success of 2023/24 which saw LPT slightly exceeds its planned recruitment. During 2024-25 we anticipate a 4-5% reduction in the vacancy rate. This work is monitored through the Trust-wide Workforce, Recruitment and Agency Programme, which reports into Strategic Workforce Group and People and Culture Committee.

BAE06: If we do not adequately utilise workforce resourcing strategies, we will have poor recruitment, retention and representation, resulting in high agency usage.

EXCEPTION REPORT - Sickness Absence (Month in arrears)

	Target	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
TRUST	<=4.5%	4.9%	5.0%	5.1%	5.1%	5.3%	5.7%	5.5%	5.3%	5.0%	4.5%	5.2%	5.4%
DMH		6.0%	6.1%	5.6%	5.5%	6.0%	6.8%	6.1%	5.9%	5.4%	4.9%	6.1%	5.7%
CHS		5.7%	5.8%	6.6%	6.0%	5.7%	5.6%	5.7%	5.9%	5.7%	5.6%	6.3%	6.6%
FYPCLD		4.1%	4.1%	4.1%	4.8%	5.3%	5.7%	5.9%	5.4%	5.2%	4.0%	4.5%	4.9%



Analytical Commentary

The metric is showing a common cause variation with no significant change. There is no assurance that the metric will consistently achieve the target and is in common cause variation.

Mean	Lower Process	Upper Process Limit
5.3%	4.0%	6.0%

Operational Commentary (e.g. referring to risk, finance, workforce)

LPT are committed to providing a safe and healthy working environment and to promoting the wellbeing of its staff. Research suggests that work is essential in promoting good health, wellbeing and self-esteem. The Trust recognises the importance of having a robust policy that encourages staff to maintain good physical and mental health and facilitates staff to return to work following a period of either a short or long-term sickness. The Executive Team have agreed to retain the target of having <4.5% of staff on sickness absence for 2024-25, recognising that this is something we need to work towards over time.

Data on sickness absence is shared at operationally on a monthly basis and high-level reports monitoring trends and patterns are provided to Strategic Workforce Group. Concerns are escalated to Trust Board via People and Culture Committee.