

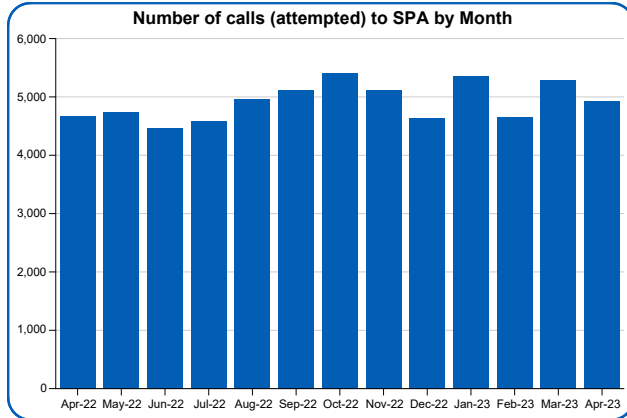
Service Performance - Chief Operating Officer

Services: Access & Responsiveness: Our response in a crisis	Target	Feb 2023	Mar 2023	Apr 2023
Percentage of crisis calls (via the single point of access) answered within 1 minute	-	42.0%	39.8%	30.4%
Percentage of ALPS referrals responded to within 1 hour	-	76.6%	75.6%	77.1%
Percentage of S136 referrals assessed within 3 hours of arrival	-	30.0%	43.3%	16.2%
Number of S136 referrals assessed	-	30	30	37
Number of S136 detentions over 24 hours	0	0	0	0
Percentage of appropriate crisis referrals seen face to face for assessment within 4 hours of referral	80.0%	45.9%	54.5%	56.4%
Percentage of service users who stayed on CRISS caseload for less than 6 weeks	70.0%	87.0%	94.9%	93.9%
Percentage of service users seen or visited at least 5 times within first week of receiving CRISS support	50.0%	56.5%	51.5%	57.1%
Services: Access & Responsiveness to Learning Disabilities, Regional & Specialist Services	Target	Feb 2023	Mar 2023	Apr 2023
Gender Identity Service: Number on waiting list	-	4,147	4,242	4,284
Deaf CAMHS: average wait from referral to first face to face (inc. telemedicine) contact in days	-	30.44	50.8	47.38
Community LD: Percentage of referrals seen within 4 weeks of receipt of referral	90.0%	82.8%	77.5%	78.8%
Leeds Autism Diagnostic Service (LADS): Percentage starting assessment within 13 weeks (quarterly)	-	-	3.2%	-
CAMHS inpatients: Proportion of people assessed within 7 days of admission (HoNOSCA / GBO) (quarterly)	100.0%	-	25.0%	-
Perinatal Community: Percentage waiting less than 48 hours for first contact (urgent/emergency) (quarterly)	-	-	94.4%	-
Perinatal Community: Percentage of routine referrals waiting less than 2 weeks for assessment (quarterly)	85.0%	-	93.7%	-
Perinatal Community: Total number of distinct women seen in rolling 12 months (quarterly)	863	-	765	-
Perinatal Community: Face to Face DNA Rate (quarterly)	-	-	9.6%	-
Services: Our acute patient journey	Target	Feb 2023	Mar 2023	Apr 2023
Number of admissions to adult facilities of patients who are under 16 years old	-	0	0	0
Crisis Assessment Unit (CAU) bed occupancy	-	46.4%	34.9%	68.9%
Crisis Assessment Unit (CAU) length of stay at discharge	-	4.79	4.47	4.38
Liaison In-Reach: attempted assessment within 24 hours	90.0%	53.2%	68.8%	82.7%
Bed Occupancy rates for (adult acute excluding PICU) inpatient services:	94.0% - 98.0%	98.7%	97.8%	98.8%
Becklin Ward 1 (Female)	-	99.0%	102.8%	99.7%
Becklin Ward 3 (Male)	-	97.9%	97.9%	100.0%
Becklin Ward 4 (Male)	-	99.7%	92.2%	96.5%
Becklin Ward 5 (Female)	-	98.2%	96.2%	100.0%
Newsam Ward 4 (Male)	-	98.8%	100.2%	97.8%
Older adult (total)	-	98.4%	98.2%	96.9%
The Mount Ward 1 (Male Dementia)	-	94.6%	92.4%	97.6%
The Mount Ward 2 (Female Dementia)	-	97.6%	101.1%	93.1%

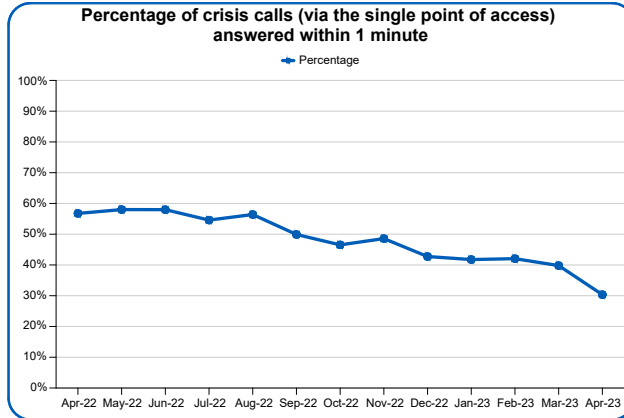
Service Performance - Chief Operating Officer

Services: Our acute patient journey	Target	Feb 2023	Mar 2023	Apr 2023
The Mount Ward 3 (Male)	-	99.1%	94.5%	97.7%
The Mount Ward 4 (Female)	-	100.8%	103.4%	98.3%
Percentage of delayed transfers of care	-	15.6%	12.4%	11.6%
Total: Number of out of area placements beginning in month	-	8	4	10
Total: Total number of bed days out of area (new and existing placements from previous months)	330	466	419	469
Acute: Number of out of area placements beginning in month	-	5	1	7
Acute: Total number of bed days out of area (new and existing placements from previous months)	-	268	206	189
PICU: Number of out of area placements beginning in month	-	2	1	3
PICU: Total number of bed days out of area (new and existing placements from previous months)	-	168	168	190
Older people: Number of out of area placements beginning in month	-	1	2	0
Older people: Total number of bed days out of area (new & existing placements from previous months)	-	30	45	90
Cardiometabolic (physical health) assessments completed: Inpatients (quarterly)	90.0%	-	77.2%	-
Services: Our Community Care	Target	Feb 2023	Mar 2023	Apr 2023
Percentage of inpatients followed up within 3 days of discharge (Trust Level monthly local tracking)	80.0%	72.7%	80.5%	81.2%
Percentage of inpatients followed up within 3 days of discharge (HCP commissioned services only)	80.0%	72.1%	79.7%	79.7%
Number of service users in community mental health team care (caseload)	-	3,468	3,446	3,421
Percentage of referrals seen within 15 days by a community mental health team	80.0%	43.7%	59.9%	66.7%
Percentage of referrals to memory services seen within 8 weeks (quarter to date)	90.0%	52.5%	56.1%	49.3%
Percentage of referrals to memory services with a diagnosis recorded within 12 weeks (quarter to date)	50.0%	42.0%	45.3%	52.1%
Early intervention in psychosis (EIP) or at risk mental state (ARMS): Percentage starting treatment within 2 weeks	60.0%	66.7%	80.0%	69.2%
Early intervention in psychosis (EIP) : Percentage of people discharged to primary care (quarterly)	-	-	77.8%	-
Cardiometabolic (physical health) assessments completed: Early Intervention in Psychosis Service (quarterly)	90.0%	-	79.3%	-
Services: Clinical Record Keeping	Target	Feb 2023	Mar 2023	Apr 2023
Percentage of service users with NHS Number recorded	-	99.1%	99.2%	99.2%
Percentage of service users with ethnicity recorded	-	75.7%	75.9%	76.7%
Percentage of service users with sexual orientation recorded	-	35.2%	35.8%	37.6%
Services: Clinical Record Keeping - DQMI	Target	Nov 2022	Dec 2022	Jan 2023
DQMI (MHSDS) % Quality %	95.0%	91.8%	91.8%	91.7%

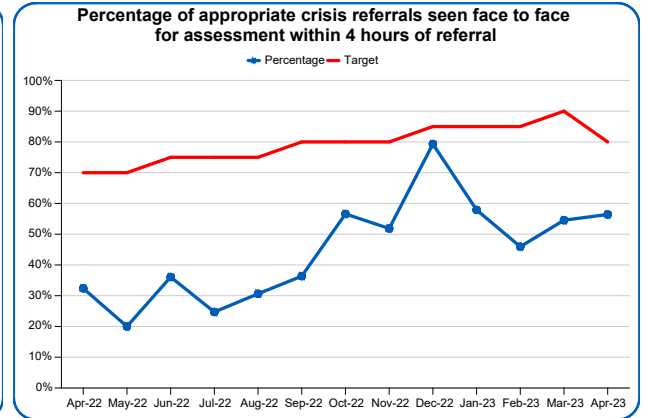
Services: Access & Responsiveness: Our Response in a crisis



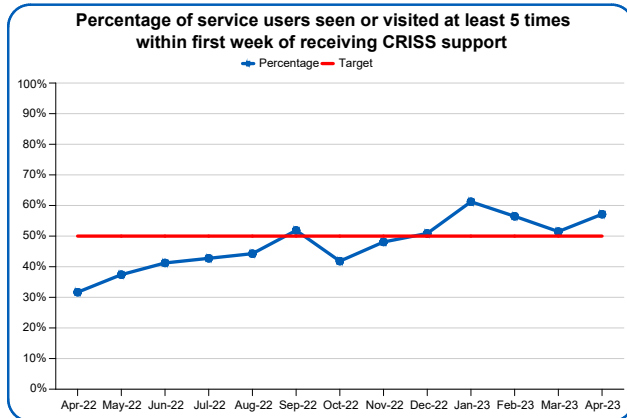
Number of calls : April 4,942



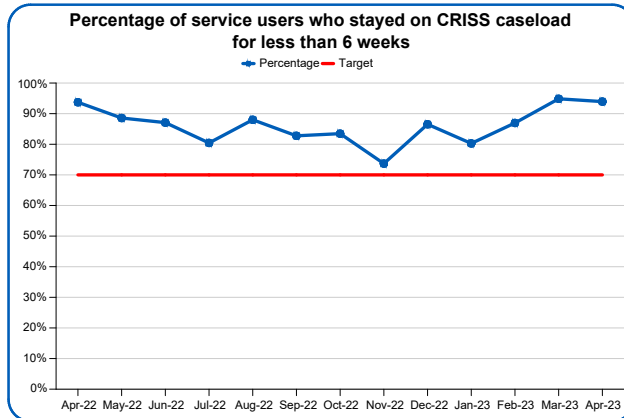
Local target - within 1 minute: April 30.4%



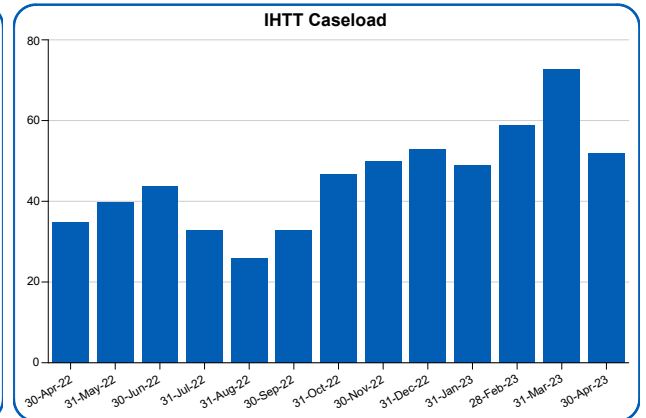
Contactual Target 80%: April 56.4%



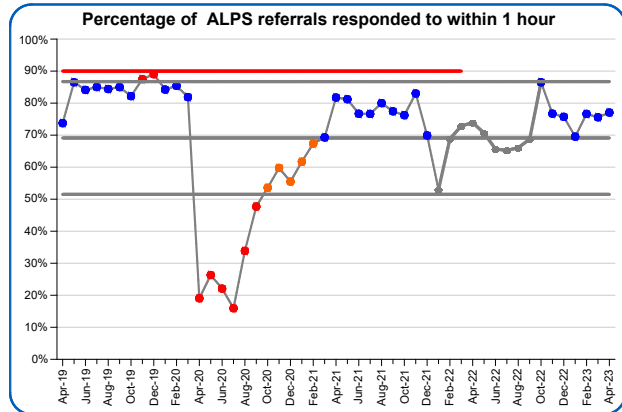
Contractual Target 50%: April 57.1%



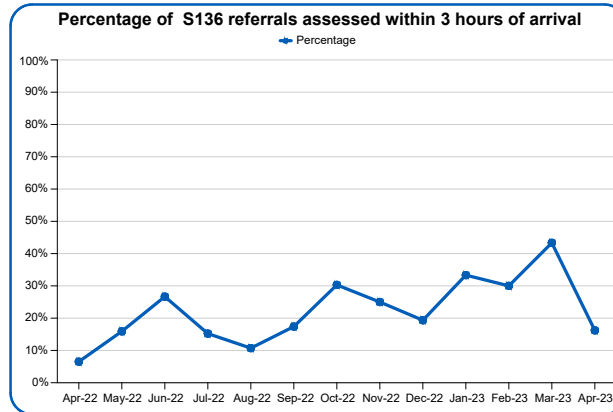
Contractual Target 70%: April 93.9%



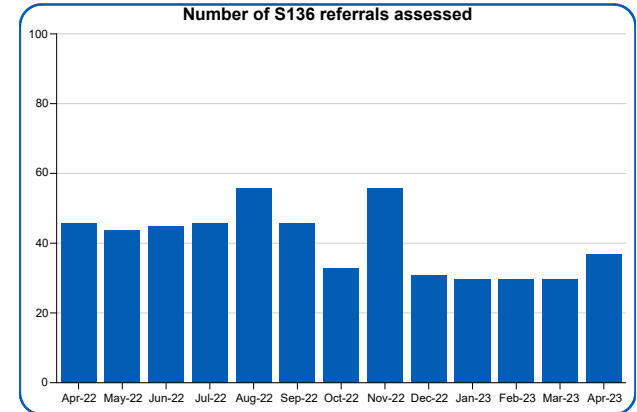
Caseload: April 52



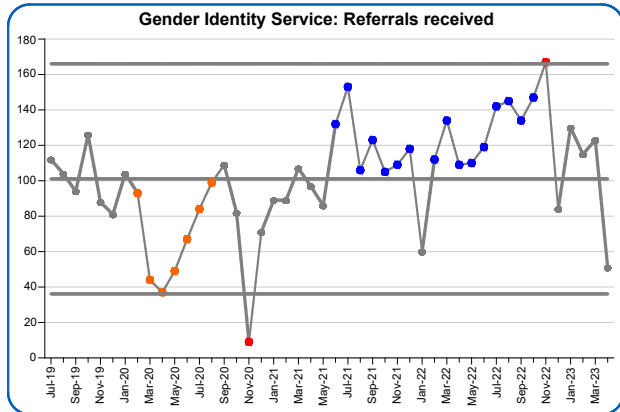
Contractual Target : April 77.1%



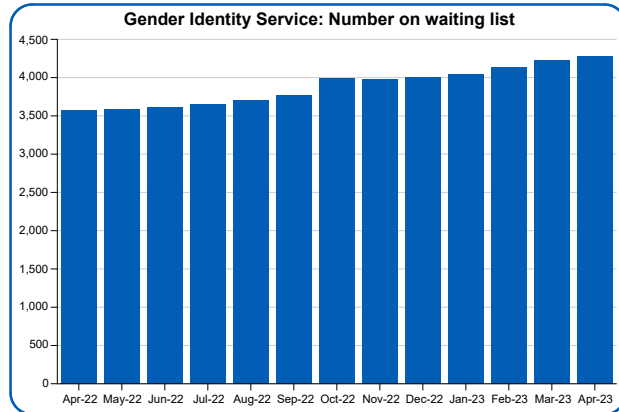
Contractual Target : April 16.2%



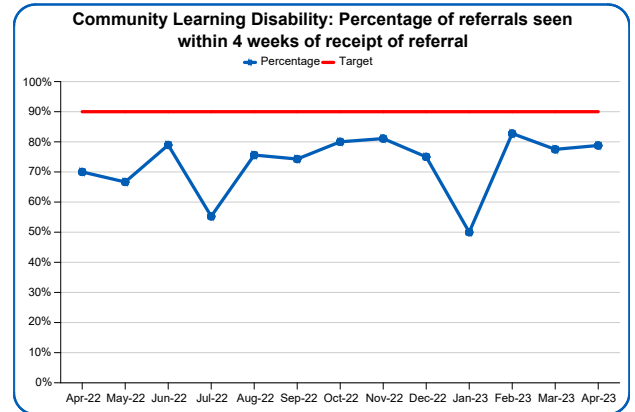
Total referrals assessed: April 37



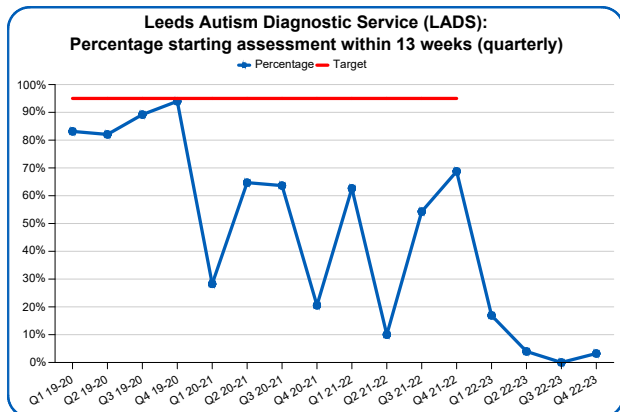
Total referrals: April 51



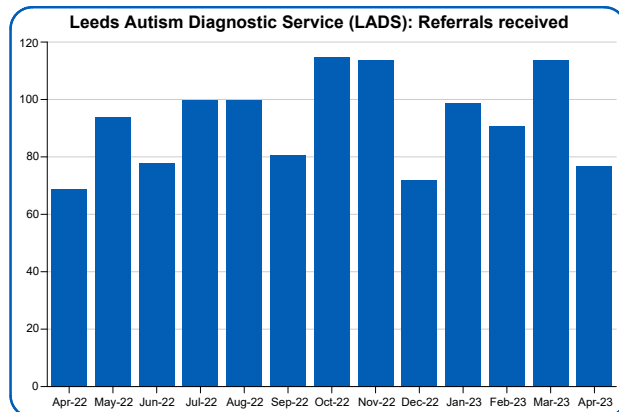
Number on waiting list: April 4,284



Contractual Target 90%: April 78.8%



Contractual Target : Q4 3.2%

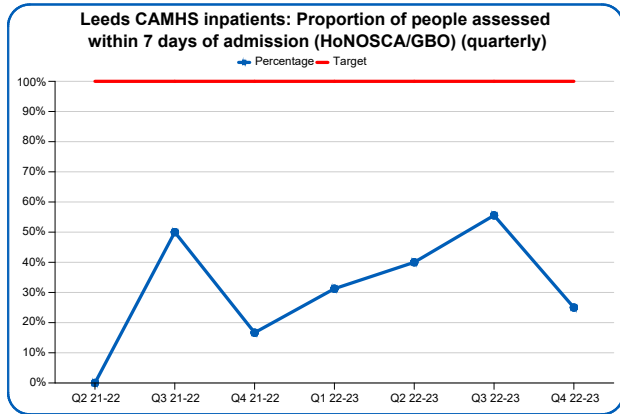


Local measure: April 77

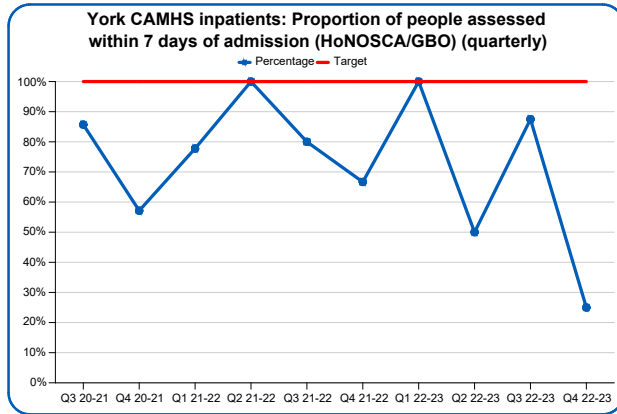
SPC Chart Key

- Average
- Upper process limit
- Lower process limit
- Actual
- Target

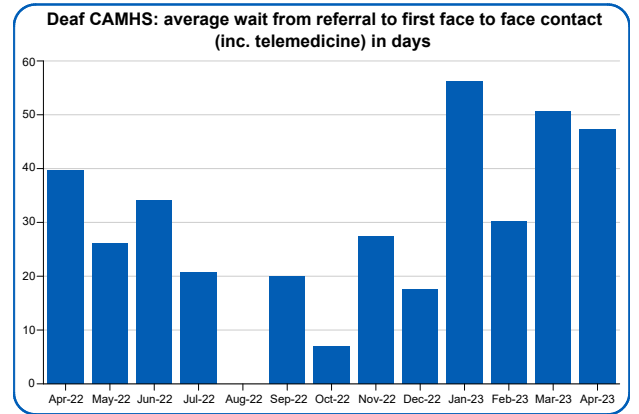
Services: Access & Responsiveness to Learning Disabilities, Regional & Specialist Services (continued)



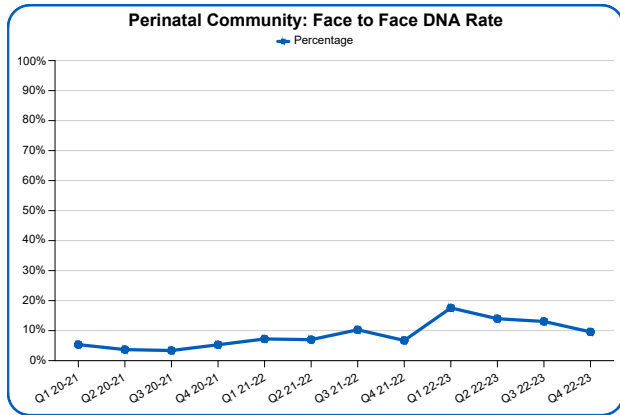
Contractual Target 100%: Q4 25.0%



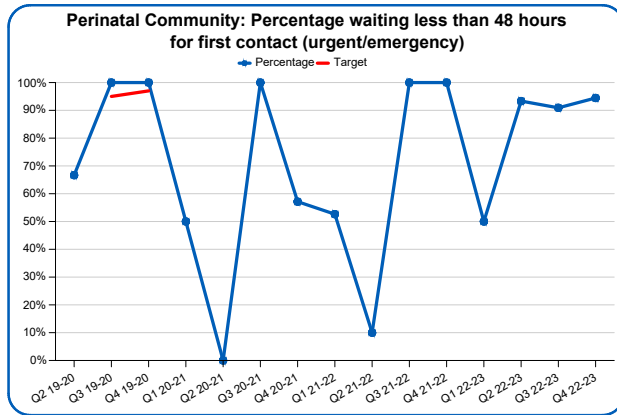
Contractual Target 100%: Q4 25.0%



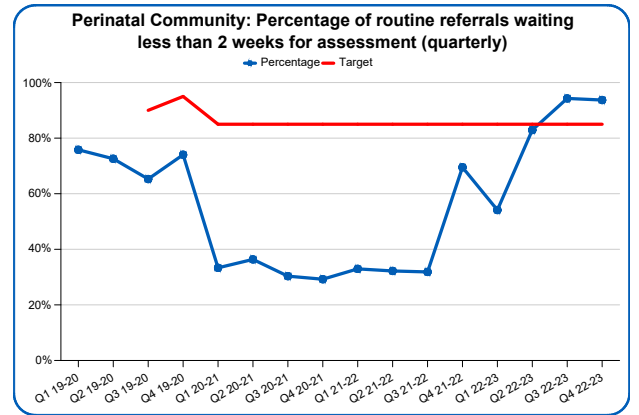
Local measure: April 47



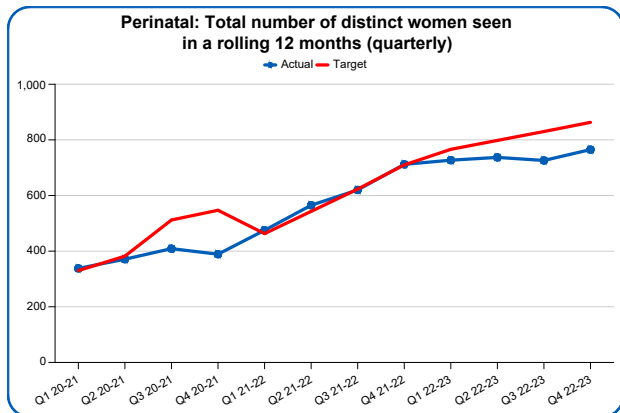
Contractual measure: Q4 9.6%



Contractual Target tba: Q4 94.4%

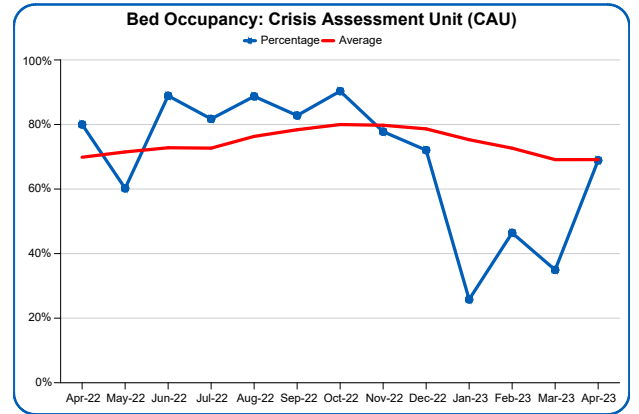
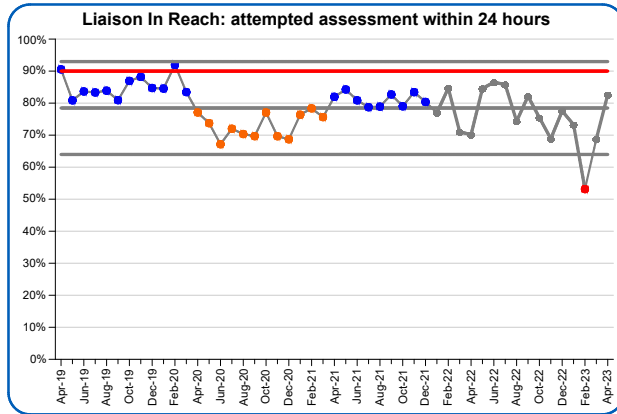
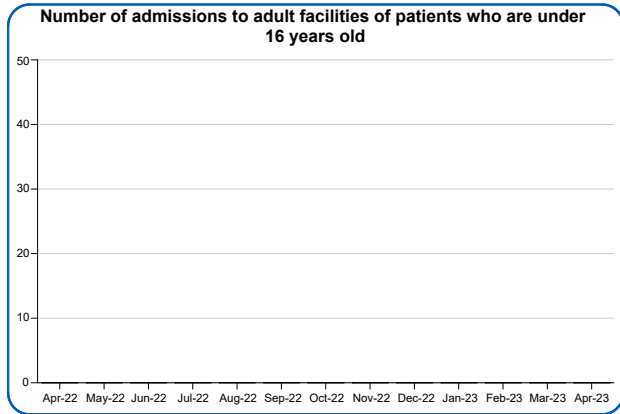


Contractual Target 85%: Q4 93.7%



Local measure 863: Q4 765

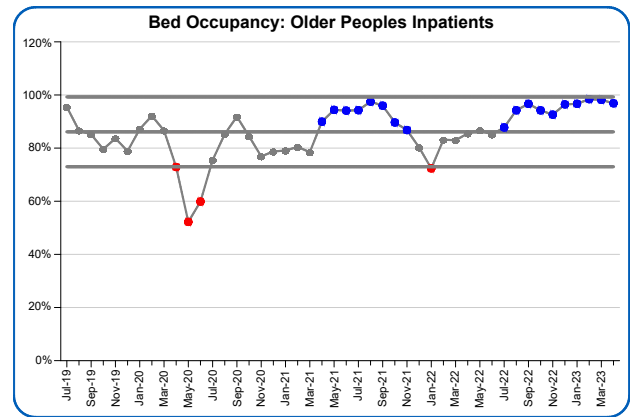
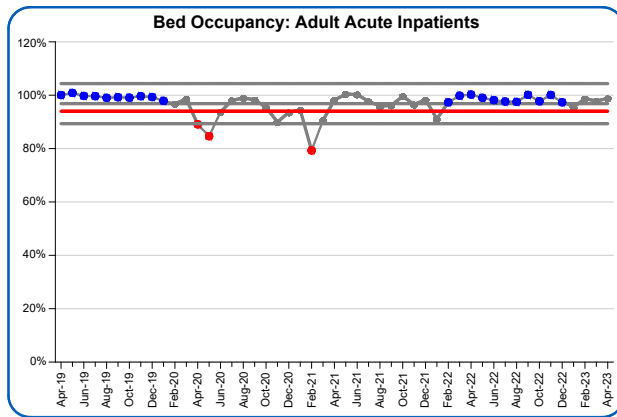
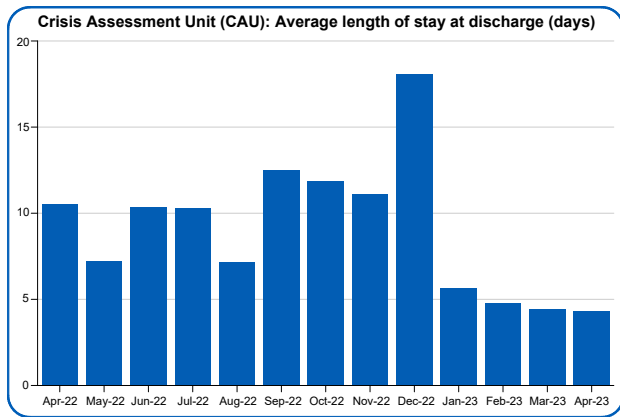
Services: Our acute patient journey



National (NOF) No target : April 0

Contractual Target 90%: April 82.7%

Local measure: April 68.9%



Local measure: April 4 days

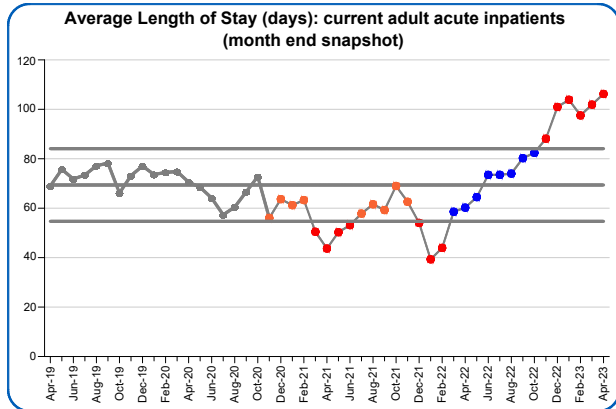
Contractual Target 94%: April 98.8%

Local measure and target : April 96.9%

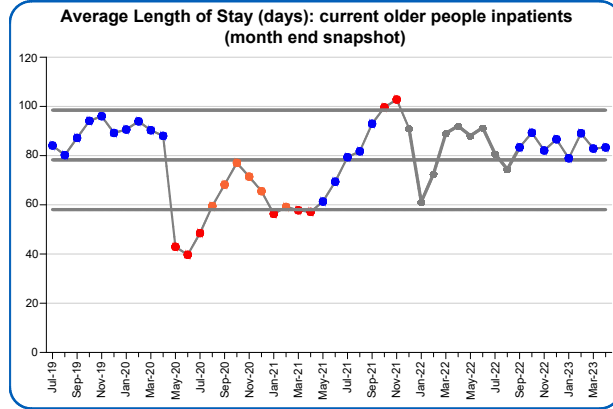
SPC Chart Key

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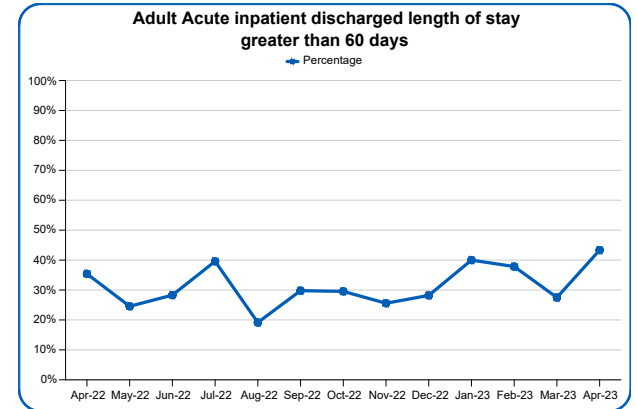
Services: Our acute patient journey (continued)



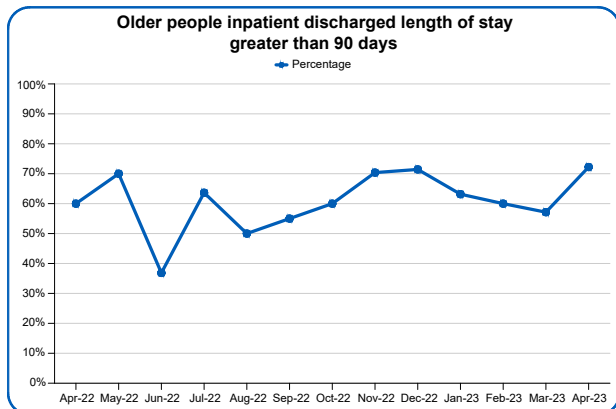
Local tracking measure: April 106 days



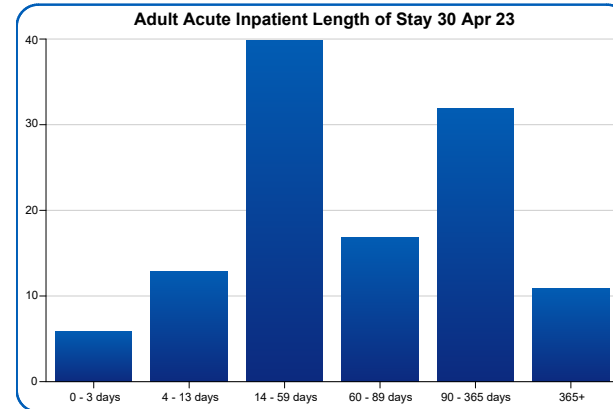
Local tracking measure: April 83 days



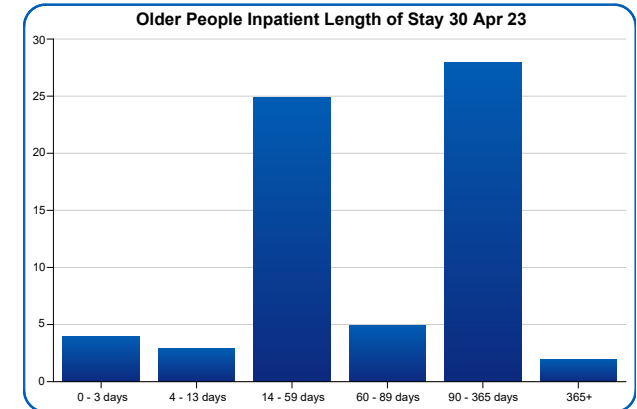
National (LTP): April 43.3%



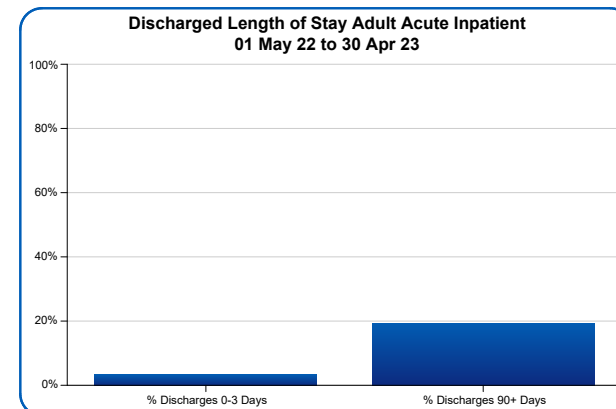
National (LTP): April 72.2%



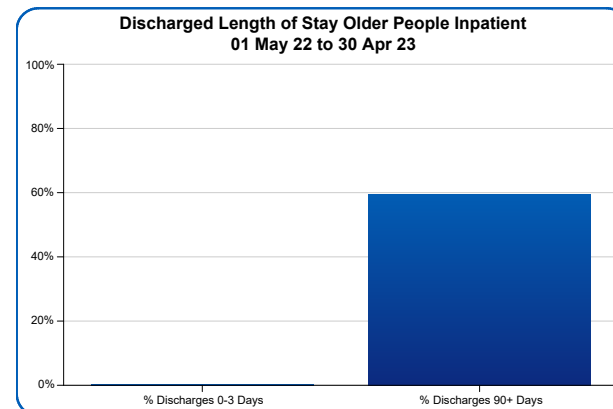
Local activity: 43 people with LOS 90+ days



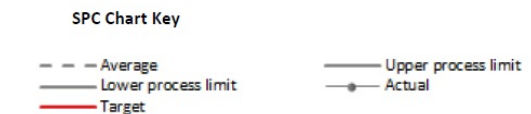
Local activity: 30 people with LOS 90+ days

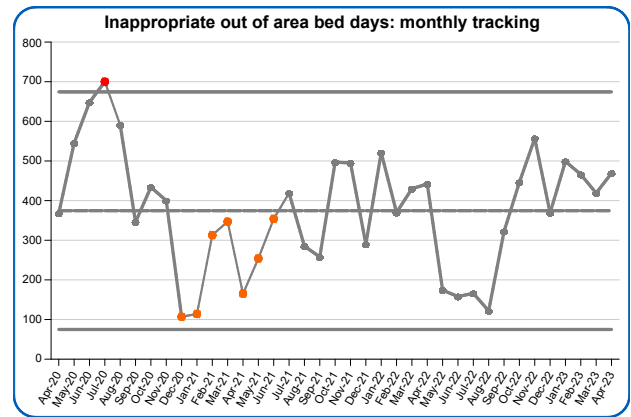
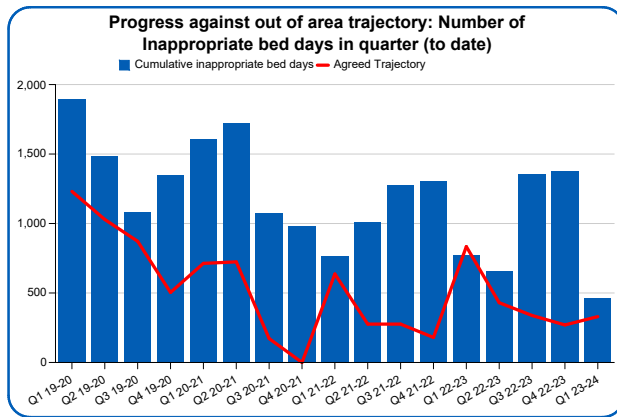
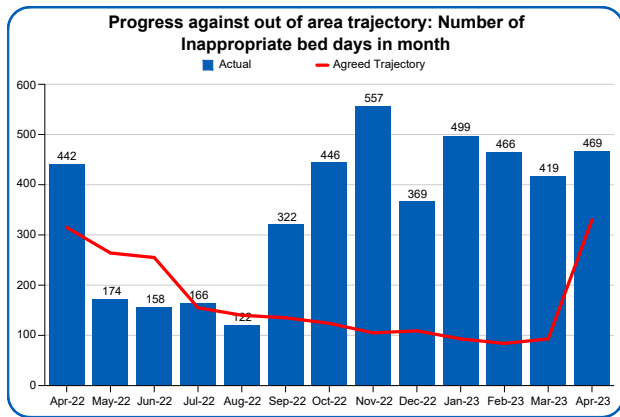
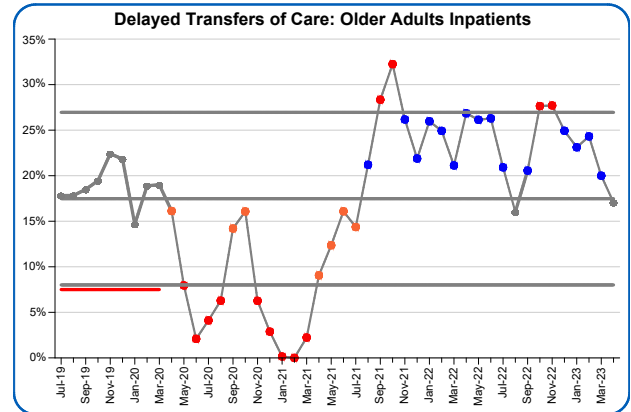
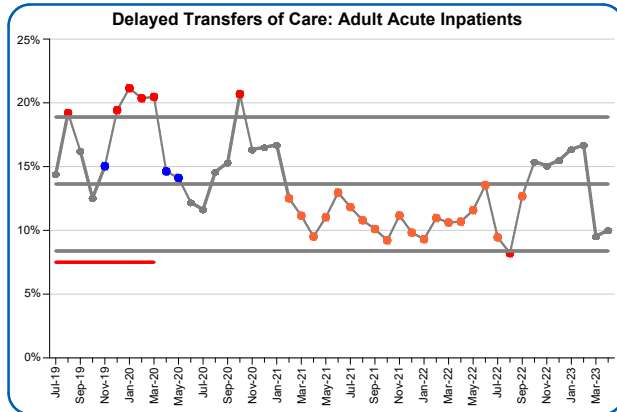
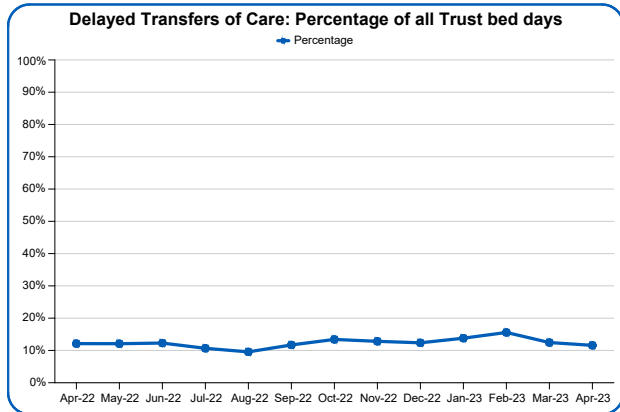


Local activity: % discharged LOS 90+ days = 19.6%



Local activity: % discharged LOS 90+ days = 59.8%

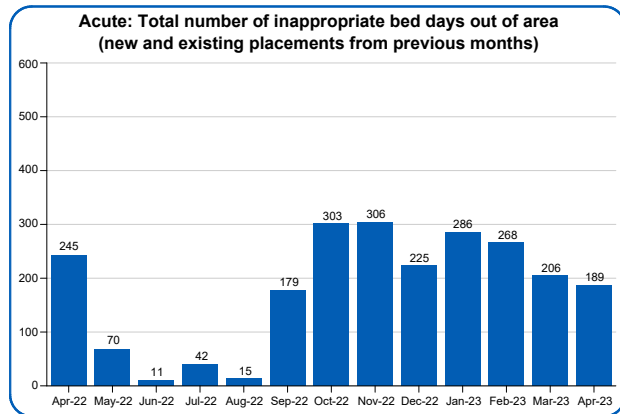




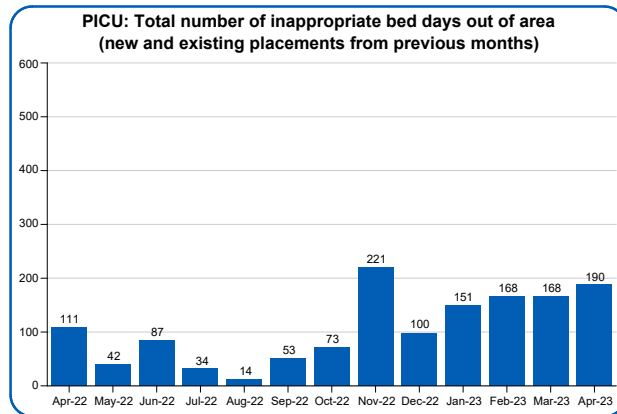
SPC Chart Key

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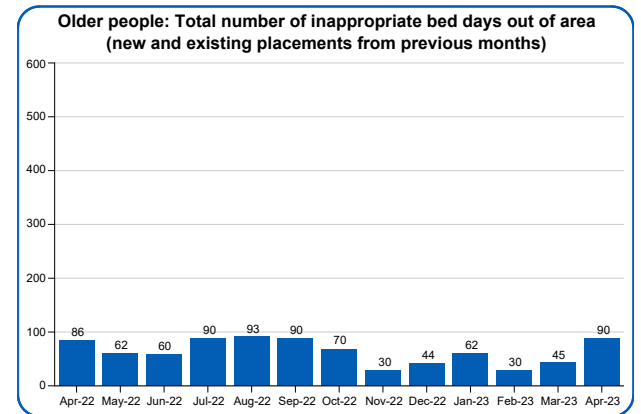
Services: Our acute patient journey (continued)



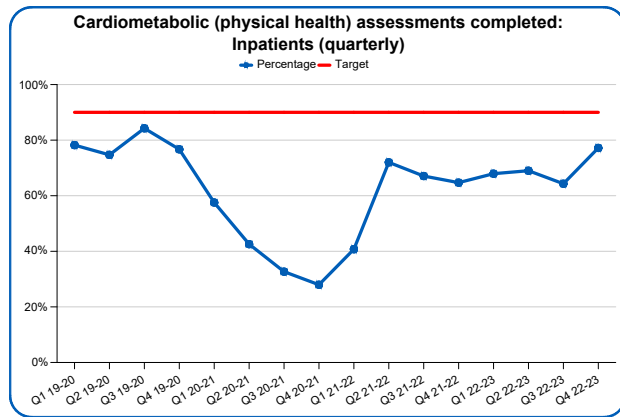
Nationally agreed trajectory (): April 189 days



Nationally agreed trajectory (): April 190 days

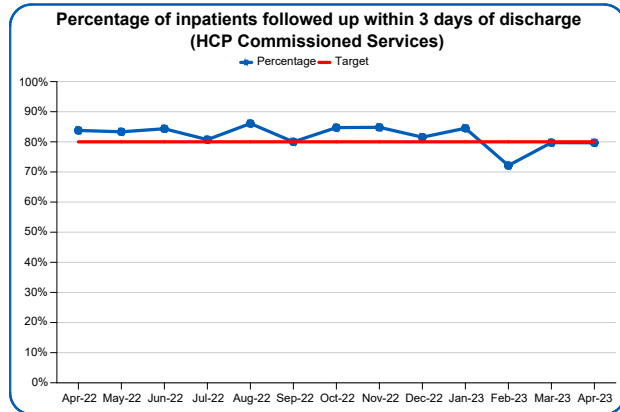


Local measure : April 90 days

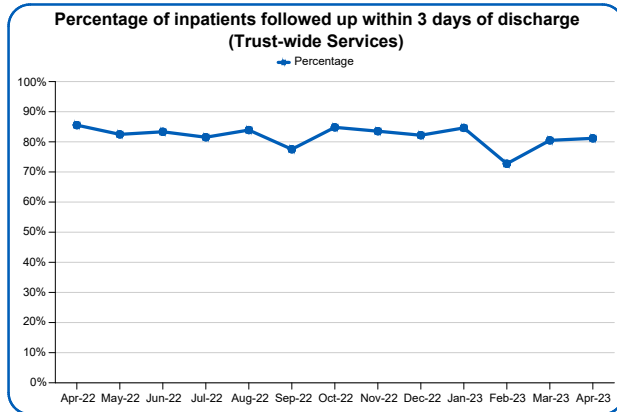


Contractual target 90%: Q4 77.2%

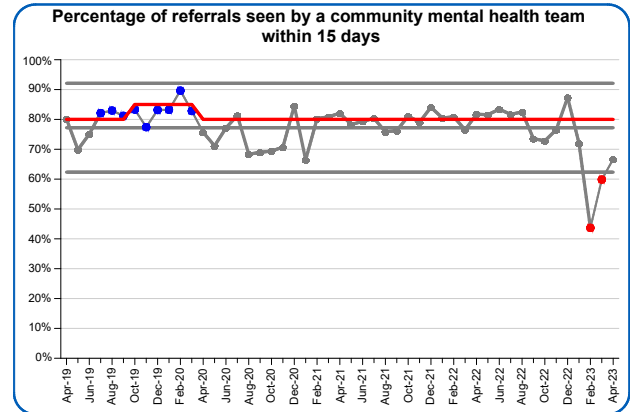
Services: Our community care



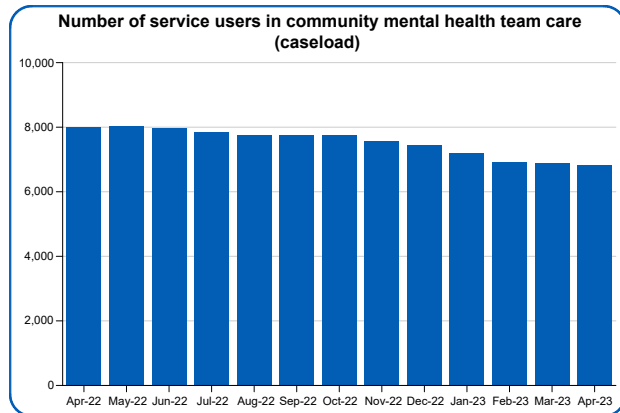
Contractual target 80%: April **79.7%**



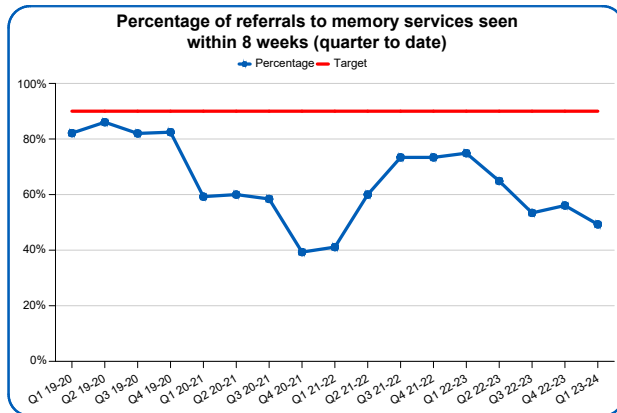
Local Tracking Measure 80%: April **81.2%**



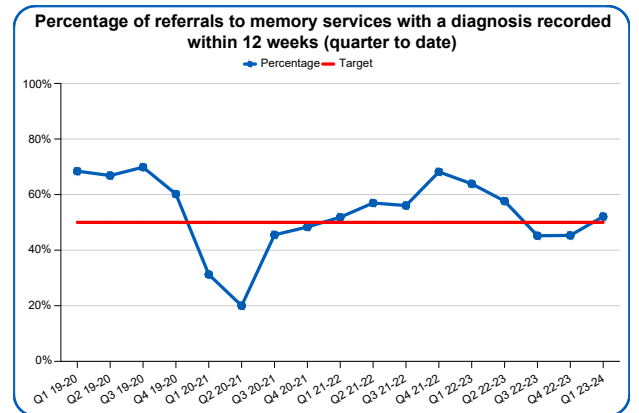
Contractual target 80%: April **66.7%**



Local measure : April **3,421**



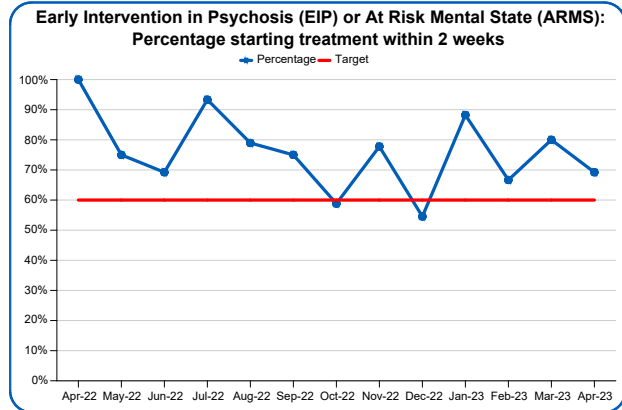
Contractual target 90%: Q1 23-24 **49.3%**



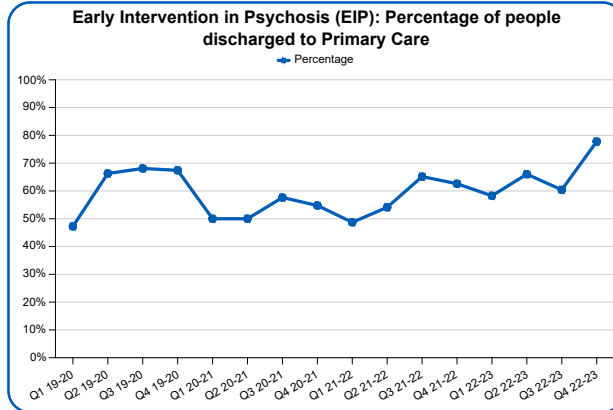
Contractual target 50%: Q1 23-24 **52.1%**

SPC Chart Key

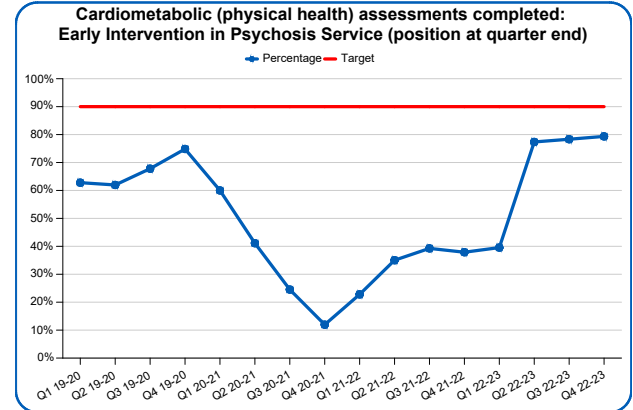
- Average
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- Target
- Upper process limit
- Actual



Contractual target 60%: April 69.2%

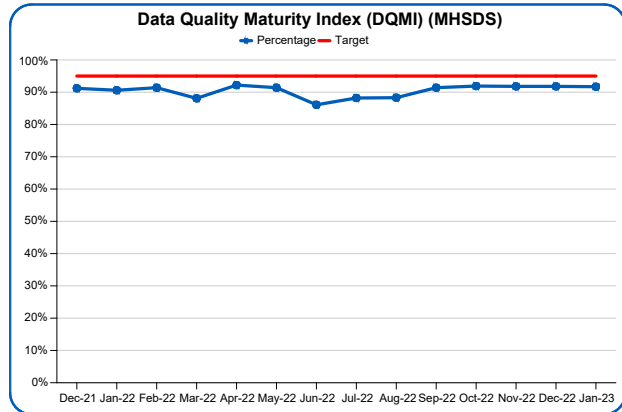


Contractual target tbc: Q4 77.8%

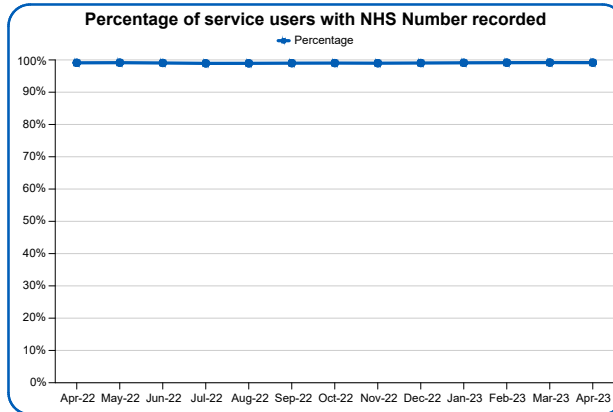


Contractual target 90%: Q4 79.3%

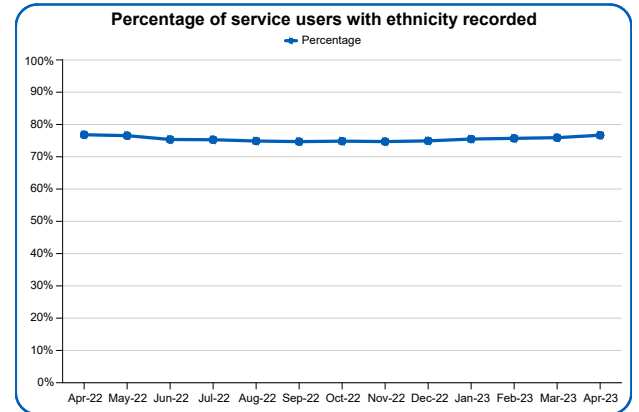
Services: Clinical Record Keeping



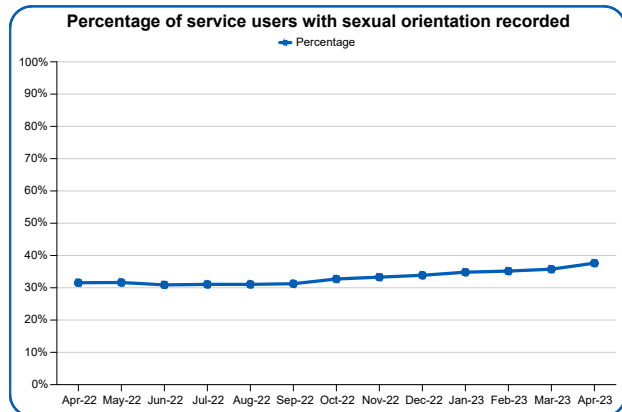
CQUIN / NHSOF Target 95%: January 91.7%



Local measure: April 99.2%



Local measure: April 76.7%



Local measure: April 37.6%