

Southend Essex and Thurrock

**Children and Young Peoples
Emotional Wellbeing and Mental Health Service
(EWMHS)**

Performance Briefing
Year end 2016/17

Performance against KPIs 2016/17

Summary

KPI 1

Service users who have improved their validated outcome measurement score between commencement of treatment and at 6 months (or case closure if before 6 months)

As @ end March 2017 - 57%. Work continues to improve data collection for this KPI and there is a requirement within the Data Quality Improvement Plan 2017/18 to develop more specific detailed reporting on outcomes by end of Q2 with reporting in October 2017.

KPI 2

Service users reporting satisfaction with services received

Quarter on quarter improvement against this KPI – 80.80% Q1 v 86.90% end of Q4

KPI 3a

RTT waiting times

RTT KPI has significantly improved and across Essex we are now 2.83% above the RTT waiting time standard i.e. achieving 94.83% against the 92% waiting time standard as @ end of March 2017. Across Essex the RTT for April 2016 was 81.68% falling to 66.46% in July with month on month recovery thereafter until year end.

KPI 3b

RTT completed pathways

Significant improvement in achievement against 95% local standard rising from 87.45% in April to 92.99% as @ end of March 2017

KPI 4a

RTA waiting to be seen

Detailed reporting commenced in July 2017. As @end of March 2017, of those CYP waiting for assessment, 5% were waiting longer than 12 weeks compared to 38% waiting over 12 weeks as @ end of July 2017. This target has been stretched for 2017/18 and of the CYP waiting to be seen for assessment, 92% will be seen within 8 weeks by the end of Q3

KPI 4B

RTA completed pathways

Detailed reporting commenced in July 2017. As @end of March 2017, 6,650 CYP completed treatment. Of those CYP, 58% completed treatment within 8 weeks and 76% in less than 12 weeks.

KPI 5

No. and % of those CYP presenting in A+E are assessed within 4 hours of referral

Achievement against standard across Essex for 2016/17 – 99.4%

KPI 6

DNA rate for aggregated 1st and subsequent appointments

Achievement against standard across Essex for 2016/17 – 9.77%. North East Essex and Southend CCGs were outliers with YTD DNA rates of 11.09% and 12.08% respectively.

EWMHS Activity update

➤ Caseload

Table 1

Caseload data - generic EWMHS											
CCG	as @ 01/11/2016	as @ 31/03/2016	as @ 31/05/2016	as @ 30/06/2016	as @ 31/07/2016	as @ 31/08/2016	as @ 30/09/2016	as @ 31/10/2016	as @ 31/12/2016	as @ 28/02/2017	31/03/2017
Mid Essex		1,295	1,321	1,356	1,318	1,271	1,248	1,289	1,363	1,463	1,493
North East Essex		1,125	1,121	1,104	1,043	963	948	986	1,084	1,149	1,150
West Essex		1,035	964	951	867	830	820	847	914	938	929
Basildon and Brentwood		959	926	942	903	846	803	797	799	871	942
Southend		894	888	881	814	638	601	650	733	691	709
Thurrock		552	537	551	515	497	523	556	733	583	597
Castle Point and Rochford		572	532	534	456	375	365	389	422	469	534
Essex	3,823	6,432	6,289	6,319	5,916	5,420	5,308	5,514	6,048	6,164	6,354
		Variance since 01/11/15	64.50	65.29	54.75	41.77	38.84	44.23	58.20	61.23	66.20
		Variance since 31/03/16			-1.76	-8.02	-15.73	-17.48	-14.27	-5.97	-4.17
		Monthly variance			0.48	-6.38	-9.38	-2.07	3.88	9.68	1.92

As at the end of March 2017 there has been a slight increase to the caseload equating to 3% compared to that at the end of February 2017. At end of Q4 2016/17 we are seeing an increase of 20% to the caseload compared to that at end of Q2 2016/17.

As at the end of March 2017 there has been an increase of 66% to the caseload compared to that which transferred in November 2015. **Table 1** refers.

Table 2

Caseload data - Crisis teams											
CCG	as @ 30/11/2016	as @ 31/03/2016	as @ 31/05/2016	as @ 30/06/2016	as @ 31/07/2016	as @ 31/08/2016	as @ 30/09/2016	as @ 31/10/2016	as @ 31/12/2016	as @ 28/02/2017	31/03/2017
Mid Essex	23	47	42	43	16	8	11	10	9	7	7
North East Essex	23	53	64	61	46	29	29	28	16	6	12
West Essex	11	30	28	33	14	3	9	6	9	3	6
Basildon and Brentwood	29	34	15	12	12	6	8	13	9	12	23
Southend	8	13	8	12	4	5	5	11	8	9	15
Thurrock	6	12	9	5	3	6	3	4	7	6	6
Castle Point and Rochford	9	21	6	4	5	4	7	6	5	4	11
Essex	109	210	172	170	100	61	72	78	63	47	80
	Variance since 30/11/15	92.66	57.80	55.96			-33.94	-28.44	-42.20	-56.88	-26.61
		Variance since 31/03/16			-19.05	-52.38	-70.95	-65.71	-62.86	-70.00	-77.62
		Monthly variance			-1.16	-41.18	-39.00	18.03	8.33	-19.23	-25.40

Table 2 above details the crisis team caseload at the point of transfer and at various data collection points throughout the year. At the end of March 2017 there has been a 27% increase in the Essex caseload compared to end of Q3. Of the three crisis teams, the team covering the four South Essex CCGs has the highest caseload representing 69% of the total Essex caseload.

➤ Single Point of Access (SPA)

Due to recruitment issues in Southend and Thurrock SPAs an options appraisal has been undertaken by NELFT and presented to lead commissioners for review. Agreement has been reached with Southend commissioners that referrals are directed through the Essex SPA. At the time of writing this report discussions were still to be concluded with Thurrock colleagues.

Numbers of referrals across the three Essex SPAs remain consistent circa 800 referrals a month between April 2016 and March 2017. Capacity has been increased in the Essex SPA and an Essex SPA Manager appointed.

During 2016/17 there have been over 10,000 referrals across all three SPAs. The figures in Table 3 above reflect the number of referrals received by the SPAs during 2016/17 compared to 2015/16.

It should be noted that there will be additional referrals from sources other than the SPAs

Between April 2016 and March 2017:

- 56% referrals come from the North Essex CCGs
- 8108 referrals have been received through the Essex SPA, average 676 per month
- 1112 referrals have been received through the Southend SPA, average 93 per month
- 955 referrals have been received through the Thurrock SPA, average 80 per month
- 80% of the total referrals have been received by the Essex SPA, with Thurrock and Southend at 9% and 11% respectively
- North East Essex CCG has the highest referral rate as @ end of March 2017, followed by Mid and then West Essex CCGs with Basildon and Brentwood having the higher referral numbers across South Essex CCGs
- Across Essex there has been a 20% increase in referrals during Q4 2016/17, compared to Q1 2016/17
- Southend CCG has seen the highest increase in referrals during Q4 compared to Q1 2016/17
- BBW, NEE, and CP&R CCGs also have had a significant increase in referrals during Q4 compared to Q1 2016/17

Table 3

SPA - total referrals received	Q4 2016	Q1 2016	Q2 2016	Q3 2016	Q4 2016	2016/17	% variance
CCG	as @ 31/03/2016	as @ 30/06/2016	as @ 30/09/2016	31/12/2016	31/03/2017	Year to date	Q1 v Q4
Basildon and Brentwood	452	319	297	351	451	1418	41.38
Castle Point and Rochford	247	235	202	226	284	947	20.85
Mid Essex	593	507	384	525	540	1956	6.51
North East Essex	571	541	441	543	669	2194	23.66
Southend	313	243	210	305	354	1112	45.68
Thurrock	289	249	213	222	271	955	8.84
West Essex	481	395	358	421	419	1593	6.08
Essex	2,946	2,489	2,105	2,593	2,988	10,175	20.05
Plan	2,076	2824	2824	2824	2825	11297	
% Variance (above/below plan)	41.91	-11.86	-25.46	-8.18	5.77	-9.93	
Average per month	982	830	702	864	996	848	

➤ Community EWMHS

Referrals from all sources

The numbers of referrals from all sources is consistent across the service with an average referral rate circa 900-1,000 per month between April 2016 and March 2017.

Performance across the seven CCGs as @ end of March 2017 is outlined in the Table below. Over performance regards completed assessments, this in turn has impacted on waiting times and delivery of first appointments although we have seen improvement in this area. (See Summary, page 1)

Community EWMHS															
Essex Activity Year to date - March 2017															
CCG	Referrals rec'd	Plan	% Variance	Referrals acpt'd	Plan	% Variance	Assessments	Plan	% Variance	1st Apps	Plan	% Variance	Follow ups	Plan	% Variance
Basildon and Brentwood	1654	2071	-20.14	1423	1560	-8.78	1389	823	68.77	1045	1284	-18.61	7626	5148	48.14
Castle Point and Rochford	1128	1322	-14.67	999	1032	-3.20	718	665	7.97	629	970	-35.15	4394	3180	38.18
Mid Essex	2138	2434	-12.16	1919	1877	2.24	1615	888	81.87	1238	1668	-25.78	10413	5563	87.18
North East Essex	2395	2460	-2.64	2163	1879	15.11	1716	864	98.61	1518	1404	8.12	10737	5270	103.74
Southend	1210	1423	-14.97	1116	1306	-14.55	953	876	8.79	833	1291	-35.48	5688	3389	67.84
Thurrock	1029	1332	-22.75	948	1202	-21.13	870	437	99.08	747	638	17.08	3772	2323	62.38
West Essex	1745	1978	-11.78	1545	1622	-4.75	1464	806	81.64	1078	1390	-22.45	11978	6934	72.74
Essex	11299	13020	-13.22	10113	10478	-3.48	8725	5359	62.81	7088	8645	-18.01	54608	31807	71.69

The Table below details the number of referrals received compared to those accepted during the year end March 2016/17. The service model commissioned reflects a 'catch and carry' approach and the expectation is that 25% of referrals would be signposted to alternative provision. Commissioners would therefore expect an acceptance rate of 75% across Essex.

Community EWMHS			
CCG Activity April 2016 - March 2017			
CCG	Referrals received	Referrals Accepted	% acceptance rate
Basildon and Brentwood	1654	1423	86%
Castle Point and Rochford	1128	999	89%
Mid Essex	2138	1919	90%
North East Essex	2395	2163	90%
Southend	1210	1116	92%
Thurrock	1029	948	92%
West Essex	1745	1545	89%
Essex	11299	10113	90%

The NHS CAMHS Benchmarking Report for 2015/16 reported an average of 1,933 referrals accepted per 100,000 population. This equates to a 72% acceptance rate which is the lowest seen in recent years. An acceptance rate of 76% -79% has been reported for the last 3 years.

➤ Crisis service

A+E crisis activity

The national target for all age 24/7 crisis cover by 2020 could well mean that the future service model may look very different. An evaluation has been undertaken and the final report has been presented to commissioners who will need to discuss and consider future crisis service model.

The Table below indicates the crisis activity across the five acute hospitals across Essex between April and March 2017

A+E Crisis Activity - Essex		Target	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Year to date	
KPI 5	Total number of crisis assessments undertaken in A+E for each locality, including out of hours • No. and % of those presenting assessed within 4 hours of referral	100%	Vol (<4 hours)	53	59	72	71	43	97	99	120	90	94	111	135	1,044
			Vol (Total)	54	59	74	71	43	97	101	120	91	94	111	135	1,050
			Percentage	98.1%	100.0%	97.3%	100.0%	100.0%	100.0%	98.0%	100.0%	98.9%	100.0%	100.0%	100.0%	99.43

A+E Crisis Activity - CCGs			Target	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Year to date
KPI 5	Basildon and Brentwood	100%	Vol (<4 hours)	10	17	12	8	7	15	23	11	7	10	19	23	162
			Vol (Total)	10	17	12	8	7	15	23	11	7	10	19	23	162
			Percentage	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
KPI 5	Castle Point and Rochford	100%	Vol (<4 hours)	4	4	10	12	5	13	11	9	9	8	5	18	108
			Vol (Total)	4	4	10	12	5	13	11	9	9	8	5	18	108
			Percentage	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%
KPI 5	Mid Essex	100%	Vol (<4 hours)	1	5	4	6	8	16	22	26	22	14	32	29	185
			Vol (Total)	1	5	4	6	8	16	22	26	23	14	32	29	186
			Percentage	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	95.7%	100.0%	100.0%	100.0%	99%
KPI 5	North East Essex	100%	Vol (<4 hours)	7	7	10	25	8	22	22	26	27	26	24	29	233
			Vol (Total)	7	7	10	25	8	22	23	26	27	26	24	29	234
			Percentage	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	95.7%	100.0%	100.0%	100.0%	100.0%	100.0%	100%
KPI 5	Southend	100%	Vol (<4 hours)	13	11	15	7	6	10	12	18	10	6	12	17	137
			Vol (Total)	13	11	15	7	6	10	12	18	10	6	12	17	137
			Percentage	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%
KPI 5	Thurrock	100%	Vol (<4 hours)	6	7	7	6	2	7	1	11	7	11	6	5	76
			Vol (Total)	6	7	7	6	2	7	1	11	7	11	6	5	76
			Percentage	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%
KPI 5	West Essex	100%	Vol (<4 hours)	6	3	7	7	7	14	10	17	8	19	13	14	125
			Vol (Total)	7	3	7	7	7	14	11	17	8	19	13	14	127
			Percentage	85.7%	100.0%	100.0%	100.0%	100.0%	100.0%	90.9%	100.0%	100.0%	100.0%	100.0%	100.0%	98%

During 2016/17, all CCGs other than Thurrock are showing a significant increase in A+ E crisis presentations in month 12 compared to month 1, and in some CCG areas more than double. Mid Essex and North East Essex CCGs are considerable outliers. During March 2017 there have been a total of 135 A+ E crisis presentations, a 22% increase compared to February. During 2016/17 there have been over 1,000 referrals to the five A+ E departments across Essex, with 547 of these from across North Essex, equating to 53% of total activity.

Period – April 2016- March 2017

Area	No. A+E Presentations	PAH	MEHT	CHUFT	SUHFT	BUHT
All CCGs	1044	12%	18%	23%	24%	23%

Crisis activity from all sources

The Table below outlines the number of referrals to the crisis teams during the period April 2016 – March 2017, and shows positive improvement against plan for Basildon and Brentwood which has always been an outlier, and considerable over performance across Mid, North East Essex, West Essex CCGs

Crisis referrals	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	YTD	YTD Plan	% Variance
Basildon and Brentwood	23	26	17	16	9	20	28	17	16	18	25	38	253	278	-9
Castle Point and Rochford	7	8	16	17	9	16	15	19	10	10	8	24	159	154	3
Mid Essex	13	26	19	11	10	25	29	38	35	27	39	43	315	247	28
North East Essex	24	33	32	32	25	31	28	38	34	35	39	41	392	262	50
Southend	20	16	19	8	13	15	16	26	12	11	20	29	205	170	21
Thurrock	11	14	9	10	8	8	6	14	11	15	7	8	121	108	12
West Essex	17	9	18	15	8	16	13	27	21	30	17	25	216	158	37
Essex	115	132	130	109	82	131	135	179	139	146	155	208	1661	1377	21

- 923 referrals across North Essex
- 738 referrals across South Essex

Of all the crisis referrals received, 65% present via A+E in South Essex, with 59% presenting via A+E across north Essex. Across each CCG locality virtually 2/3rds of crisis referrals are via A+E.

Crisis Service									
Essex Activity Year to date - March 2017									
CCG	Assesments	YTD Plan	% Variance	1st Appoints	YTD Plan	% Variance	Follow ups	YTD Plan	% Variance
Basildon and Brentwood	257	240	7.08	209	185	12.97	701	247	183.81
Castle Point and Rochford	160	125	28.00	141	110	28.18	330	168	96.43
Mid Essex	320	199	60.80	293	209	40.19	758	694	9.22
North East Essex	396	206	92.23	356	226	57.52	1046	619	68.98
Southend	209	151	38.41	171	130	31.54	431	218	97.71
Thurrock	139	96	44.79	102	77	32.47	296	101	193.07
West Essex	224	122	83.61	194	134	44.78	574	350	64.00
Essex	1705	1139	49.69	1466	1071	36.88	4136	2397	72.55

The Table above highlights all crisis activity during the period April 2016 to March 2017 by CCG. There is considerable over performance in North East Essex CCG, West Essex CCG, and Mid Essex CCG, with assessments equating to 55% of Essex overall performance, with North East Essex accounting for 23%, which correlates with the high referral numbers in each of these CCG localities.

➤ Waiting times

The Table below shows the year to date position for referral to treatment (RTT) waiting times for those completing treatment in respect of each CCG, and achievement against the 18 week RTT KPI (95%). This is the year to date position and there has been considerable improvement against this standard over the year. (See Summary, page 1) It also shows the year to date position for those completing treatment and performance

against plan in each of the waiting time cohorts for those children and young people receiving their assessment (RTA).

2016/17 EWMHS completed treatment waiting times as @ end March 2017 (Year to date)											
KPI no	KEY PERFORMANCE INDICATOR	Standard	Unit	BB	CPR	Mid	NEE	SOS	THUR	West	Essex
KPI 3b	RTT waiting times by locality (Completed pathways) • Within 6 weeks • 6 to 12 weeks • 12 to 18 weeks • 18+ w weeks	Baseline	Number <=6 w weeks	483	343	536	650	266	399	496	3,173
			Number 6 to <=12 w weeks	167	149	192	333	155	134	195	1,325
			Number 12 to <=18 w weeks	122	127	163	254	134	99	237	1,136
		95%	Vol (>18 w weeks)	222	79	266	292	167	139	190	1,355
			Vol (Total)	994	698	1,157	1,529	722	771	1,118	6,989
			Percentage	77.67%	88.68%	77.01%	80.90%	76.87%	81.97%	83.01%	80.61%
KPI 4b	RTA waiting times for assessments new cases by locality (completed pathways) • 0 <= 4 w weeks • 4 to <=8 w weeks • 8 to <= 12 w weeks • 12 + w weeks	87%	Number 0 <=4 w weeks	442	262	459	568	170	236	390	2,527
			Percentage 0 <=4 w weeks	42.66%	43.67%	42.19%	38.33%	26.94%	31.72%	38.42%	38.41%
		10%	Number 4 to <=8 w weeks	210	126	155	323	127	228	133	1,302
			Percentage 4 to <=8 w weeks	20.27%	21.00%	14.25%	21.79%	20.13%	30.65%	13.10%	19.65%
		2%	Number 8 to <=12 w weeks	135	110	214	328	125	53	205	1,170
			Percentage 8 to <=12 w weeks	13.03%	18.33%	19.67%	22.13%	19.81%	7.12%	20.20%	17.68%
		1%	Number >12 w weeks	249	102	260	263	209	227	287	1,597
			Percentage >12 w weeks	24.03%	17.00%	23.90%	17.75%	33.12%	30.51%	28.28%	24.26%

➤ DNA rates

It is worthwhile mentioning that the CAMHS NHS Benchmarking Network report for 2015/16 shows that after 3 years at 11%, the average DNA rate for CAMHS has now reduced to 10%. The range varies nationally from 8% to 22%.

DNA rate as @ year end 2016/17 is reflected in the Table below for each CCG locality

2016/17 EWMHS DNA rate year end position											
	KEY PERFORMANCE INDICATOR	Standard	Unit	BB	CPR	Mid	NEE	SOS	THUR	West	Essex
KPI 6	DNA rate in each locality, measured through aggregate of: Total No. and % of 1st appointments DNA's by service user Total No and % of subsequent appointments DNA's by service user	10%	Number of DNA	909	530	1,230	1,635	875	300	1,293	6,786
			% DNA	9.32%	9.13%	8.72%	11.09%	12.08%	6.65%	9.89%	9.77%

The Table below shows DNA rate by each CCG locality specifically for the month of March 2017

Actual EWMHS DNA rate for the month of March 2017											
	KEY PERFORMANCE INDICATOR	Standard	Unit	BB	CPR	Mid	NEE	SOS	THUR	West	Essex
KPI 6	DNA rate in each locality, measured through aggregate of: Total No. and % of 1st appointments DNA's by service user Total No and % of subsequent appointments DNA's by service user	10%	Number of DNA	67	75	160	208	64	22	102	698
			% DNA	6.58%	11.24%	9.35%	12.48%	9.10%	4.54%	9.38%	9.51%

➤ Vulnerable Groups

April 2016 - March 2017	Basildon and Brentwood	Castle Point & Rochford	Mid Essex	North East Essex	Southend	Thurrock	West Essex	Essex
Total referrals received	1420	946	1955	2358	1111	955	1593	10338
Those identified as LAC	41	38	44	98	43	55	31	350
Those identified as LDD	7	2	1	4	1	6	2	23
Those identified as CPP	24	16	53	49	37	48	34	261
% of total SPA referrals	5.07	5.92	5.01	6.40	7.29	11.41	4.21	6.13

Referrals received by the SPAs during April 2016 – March 2017 for the more vulnerable groups of children and young people where known at the time of referral are detailed in the Table above. There have been 634 referrals through the SPAs during this period where the YP has been identified/flagged as being in one of the more vulnerable groups listed

NELFT have reassured the lead commissioners that the % vulnerable groups receiving an initial assessment within 7 days is rising (50% for March 2017). All children (vulnerable or not) are risk assessed at referral and every 6 weeks should they be on the waiting list.

There has been debate amongst the LAC and safeguarding leads across the CCGs and NELFT regards the difficulties in achieving the quality measure for the vulnerable children, and 7 day target for assessment. This quality indicator is currently under review, as the clinical team need the viewpoints of other professionals invariably involved with these children prior to assessing, and deciding on an appropriate plan of care, to ensure a consistent approach to managing these generally complex cases. This will also prevent variation from any existing current treatment plan.

The table below shows referrals received during April 2016 – March 2017 where an initial assessment has been completed in month of referral (106 in total) and the child is flagged LD, LAC, and CPP read code.

April 2016 - March 2017	Basildon and Brentwood	Castle Point & Rochford	Mid Essex	North East Essex	Southend	Thurrock	West Essex	Essex
No. LDD assessments	1	1	0	0	0	2	1	5
No. LAC assessments	7	4	7	42	10	13	6	89
No. CPP assessments	4	0	4	8	6	9	2	33

➤ Safeguarding

NELFT have been focussing on achieving their safeguarding supervision targets. New AD for Safeguarding has been appointed. They are training supervisors within the teams and introducing a supervision contact number. This has resulted in a consistent improvement in the safeguarding supervision targets across such a large geographical area.

Indicator	Reporting Frequency	Standard	Mar-17	Feb-17	
% named professionals working with children and young people will receive (1 to 1) supervision on a 3 monthly basis	Q	95%	60.2%	43.2%	Significant improvement noted. Ongoing monitoring and planning is in progress within this area and closely monitored by EWMHS and SG leads.
% staff working with children and young people whereby they are required to make safeguarding referrals will receive group supervision on a 3 monthly basis	Q	95%	60.6%	63.6%	Slight decrease noted. Ongoing monitoring and planning is in progress within this area and closely monitored by EWMHS and SG leads.

The safeguarding training figures are also showing an improvement over the last few months and are slowly reaching their targets of 95%; this is due to focussed training sessions being provided at localities. New starts have 3 months to complete Mandatory training.

Quality Requirement	Standard	Reporting Frequency	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
% staff Level 1 safeguarding children and young people training	95%	Q	80.0%	73.3%	65.5%	64.5%	74.2%	76.0%	76.0%	76.9%	80.0%	80.0%	93.3%	90.6%
% staff Level 2 safeguarding children and young people training	95%	Q	81.8%	90.0%	90.0%	90.0%	100.0%	66.7%	66.7%	66.7%	33.3%	54.5%	64.3%	82.4%
% staff Level 3 safeguarding children and young people training	95%	Q	71.2%	74.8%	77.5%	79.3%	81.3%	87.0%	89.0%	89.8%	84.4%	81.8%	84.5%	89.6%
% staff Level 4 safeguarding children and young people training	95%	Q	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100.0%	100.0%	100.0%	100.0%	100.0%

➤ **Complaints/PALS enquiries**

Standard	Reporting Frequency	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	YTD
Baseline	M	3	0	2	2	2	6	6	2	3	1	3	5	35

Complaint numbers remain low and from the lead commissioner quality visits, assurance has been provided that this is a true reflection with more informal complaints being managed by locality teams. These too are minimal in number and NELFT will be reporting from April 2017 onwards the informal/formal/PALS complaint numbers and themes.

➤ **Feedback from service users**

See Summary, page 1

➤ **Serious Incidents (SIs) & Never events**

Three serious incidents currently under investigation

➤ **Mandatory training**

The team leaders are focussing on completion of mandatory training, and the lead commissioners are working with NELFT to evidence reporting of this.

➤ **Workforce**

Quality Requirement	Standard	Reporting Frequency	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
% Staff Vacancy rate	N/A	Q	14.8%	15.9%	64.9%	52.8%	56.6%	46.1%	57.9%	40.9%	38.8%	30.5%	28.6%	26.2%
% Staff maintain professional registration	100%	A	94.5%	98.8%	97.8%	96.7%	95.3%	95.3%	97.7%	95.7%	100.0%	99.0%	100.0%	98.1%

As expected the vacancy rate is reducing as the newly recruited staffs are in post.

➤ **National CQUINs**

Transitions

The mandatory national CQUIN for 2017/18 on Transition of CYPMHS into AMHS continues to remain high on the agenda. The Joint Protocol is at an advanced stage; event being held at ARU on 11th July. Parties should be in a position to sign off joint protocol within the next few weeks. This will be further developed and monitored through the transitions group/contract meeting ready for reporting in Q2 17/18.

Preventing frequent MH attenders at A&E

EWMHS are supporting the acute trust emergency departments with this CQUIN as they are reviewing if EWMHS is reflected in this cohort of patients.

➤ **Quality Assurance visits**

Visits have previously been undertaken by Zoe Maiden, and reports were sent to NELFT for comments. Lead Commissioners will consolidate all actions from the visits into one document which will be monitored through the contract management meeting. Future visits should be themed to provide assurance in more detail in particular areas of the model/care delivery.

➤ **EWMHS – Next steps/Areas of focus**

- Recruitment remains high on the agenda and mandatory training
- Transitions CQUIN joint protocol development, associated audit and sender survey development involving AMHS to ensure collaborative working.
- Southend and Thurrock SPAs
- Lac quality indicator
- Continue the roll out of schools programme of development work
- Development of self-harm guidelines
- Service development proposals for EWMHS/LD and Reprezent
- Transitions support
- CYP Transforming Care work stream and interface with EWMHS
- NELFT two year extension to contract
- Kooth online counselling Pilot
- LTP refresh