

Report Title	Integrated Quality & Performance Report (IQPR) July 2018						
Sponsoring Executive	Dave Baker, Director of Partnerships and Innovation						
Report Author	Yasmina Gainer, Head of Performance & Costing						
Meeting	Trust Board				Date	6 th September 2018	
1. Suggested discussion points <i>[two or three issues you consider the Committee should focus on]</i>							
<p>The Board should consider what further assurances it requires from the performance management committee on 5 key areas of red performance:</p> <ol style="list-style-type: none"> 1) Emergency care waits are below our improvement trajectory in July at 84.14% versus 87.3% (and August performance worsened). We are implementing changes in late September to drive improvement. 2) Our 6 week diagnostic waits (DM01) are below the standard of 99% each month this fiscal year. A recovery plan is in place with recovery expected by September. 3) VTE assessments were at 94.5% in July, missing 412 assessments, and Q&S have considered the quality plan improvement project. 4) Our RTT patient waiting list has again grown in July to ~35,000 patients, which is well above the static position we projected and NHSI have instructed. 5) Sickness rate increased again in July and our mental wellbeing project starts deployment on September 1st. <p>We should note and learn from some continued successes:</p> <ul style="list-style-type: none"> • Cancer standards deliver fully Quarter 1. 104 day waiters monitored by CEO. Inter-Tertiary referrals within 38 days improvement trajectory to be overseen by OMC. • Sustained and improved performance across many indicators for the month of July with 6x persistent reds now achieving the desired performance levels • No CDiff cases in July and running well below the phased trajectory for the year 5/9. 							
Alignment to 2020 Vision <i>[indicate with an 'X' which Plan this paper supports]</i>							
Safety Plan		Public Health Plan		People Plan & Education Plan	X		
Quality Plan	X	Research and Development		Estates Plan			
Financial Plan	X	Digital Plan		Other <i>[specify in the paper]</i>			
1. Previous consideration <i>[where has this paper been previously discussed?]</i>							
OMC, PMC, CLE, Q&S							
2. Recommendation(s)							
The Trust Board is asked to:							
a.	Note the performance on the July IQPR.						
b.	Note continuous progress with the persistent red indicators.						
c.	Commit to review the winter plan and four hour standard in depth at October's Board						
3. Impact <i>[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]</i>							
Trust Risk Register	X	Risk Number(s): all					
Board Assurance Framework	X	Risk Number(s): all					
Equality Impact Assessment	Is this required?	Y	N	X	If 'Y' date completed		
Quality Impact Assessment	Is this required?	Y	N	X	If 'Y' date completed		

July 2018 – Summary Notes from IQPR and Persistent Reds

1) Overall Performance

In July, the Trust continues to perform across many indicators with another material improvement on elective cancellations in the month. Positive delivery, improvements and focus are evident in several other areas including the 'persistent reds' action plan. Continuing focus to stabilise Diagnostic and VTE performance.

However, our mortality data and emergency care performance remain unacceptable.

2) Specific IQPR highlights in the month:

- VTE assessments have dipped again in July and report at 94.5%. A clear action plan is in place with training to support clinical areas in the recovery and sustainability in carrying out these critical assessments. Maternity VTE IT issues appear to be closed down which means that all assessments will now be able to be counted in the trust delivery.
- Acute Diagnostics fails to recover 99% standard for 5 months running, at 98.78% in July with CT and MRI scans being the main cause for under-achievement (113 breaches mainly in Imaging). CT breaches have been impacted by equipment failure at the end of the month causing breaches which then could not be re-booked in the month.
- 15x MSA breaches were incurred in July.
- Rising sickness rates in July .
- Q1 Cancer standards have all been met after achieving the June 62 Day target at 90.7%.

2) IQPR Persistent Red indicators

- Are progressing well as we manage to resolve some and further deliver others for 2 months running.
- We need to focus now on identifying the remaining improvement trajectories for all of the indicators
- One indicator, Neutropenic sepsis is at risk of failing projected resolution date – the current plan will need to be reviewed and a new trajectory will need to be set.
- A new summary table on page 8 shows the status of all persistent reds at a glance.

Key IQPR Indicators Summary for July 2018-19 (month 4):

Infection Control :

- A robust performance continuous throughout July where all IQPR indicators delivering to or above required standards.
- The Trust has had zero CDiff cases in July. Year to date we have 5 cases which is 4 below the phasing set by the infection control team which anticipated 9 after the first 4 months against a ceiling of 29 for the year;
- There are no MRSA cases in July and zero year to date; at trust level MRSA screening, electively and non-electively achieves targets routinely, but PCCT and Medicine & EC are not; recommendation is that they review performance with infection control for July.
- MSSA Bacteraemia (rate per 100,000 bed days) has been higher than target in the last couple of months, but has come down and year to date at 6.9 against the 9.42 target.

Harm Free Care :

- Achievement of 100% target against the WHO Safer Surgery continued into July for a third months running. Performance is now tracked routinely and we are therefore looking at a robust, sustaining performance on this indicator. A terrific delivery by the team.
- Safety Thermometer at 99.5% in July against the 95%, this reports 'new harm' only caused by SWB.
- In July there were 11x PUs (hospital acquired, avoidable), 9x in the acute setting and 2x Community acute setting (6x grade 2 and 5x grade 3); additionally there was 1x case in the district community setting.
- PUs are monitored via the Safety Plan dashboards. It is worth noting that reported cases are not fully validated at reporting; for example grade 4 case is still subject to a full TTR being completed, which may result in a revision to the grading at which time the IQPR will be updated to reflect. The senior nursing team are responsible for timely TTRs.
- In July there were 71 falls with 1x fall resulting in serious injury. Falls are monitored via the Safety Plan dashboards. Again noting, that some of these falls may be validated out post validation by the senior nursing team.
- VTE assessments have been below required levels in July dipped again. The trust delivered 94.5% of assessments, missing 412 assessments. IT issues have prevented maternity VTE assessments being accurately reported, this has now been largely rectified.
- **Note:** Ward dashboards have been reinstated and the roll out to ward level is in progress; dashboards will include all of the above indicators and will be monitored in the ward performance rounds including a number of other safety & people plan indicators. This will support visibility and focus at ward level and drive improvements.

Access Targets :

1 RTT & Diagnostics

- RTT incomplete achieves 92.2% standard in July and routinely delivers the incomplete standard for a number of months now.
- The Trust has seen its waiting list increase again in July to 34,594 (33,669 in June, 32,847 in May). New referrals fell in July to June by 1.5% compared to June. The Waiting list last year same period was at 32,982 and NHSi has got expectations that waiting lists are static to previous year.

- We have now all specialities other than T&O and Cardiology reporting RTT at 92% or above, which is a success story; both exceptions have plans to achieve the standard in year at Oct18.
- 2x 52 week breaches have been reported in July, in Ophthalmology and Haematology.
- Acute Diagnostics (DM01) reporting at 98.78% in July, but marginally fails to deliver the 99% target for a fifth month running. 113 breaches in July challenged mainly in CTx49 and MRIx51 diagnostics. A 10 week improvement plan has been put in place. Recovery expected in September.

2 Cancer

- Cancer performance reports one month in arrears to allow cancer network validations to take place; in July we report for June.
- Recognised as a delivering Trust; meeting routinely most of the cancer standards.
- Quarter 1 cancer standards have yet again delivered to national targets and the Trust maintains its good performance reputation in this respect.
- The Tumour sites underperforming against the 62 day standard in Q1 were; Gynae-Oncology, Head and Neck, Lung and Urology.
- There were 7.5 breaches of 62 day standard in June overall resulting in the performance of 90.7%
- Other cancer standard continue to deliver above national targets e.g 2WW, 31 Days .
- Neutropenic sepsis continuous to improve, but has stubborn breaches which continue. In July 33/37 patients have been treated (89% patients treated) and 4 patients breached. Of the 4 breaches, 2 were between 1hr1min - 1hr15mins. 2x other breaches were between 1hr22mins and 2hrs2mins (prescribing issue where doctor was believed to be waiting for the blood results before prescribing whereas the advice is to give the patient one dose of antibiotics whilst awaiting the blood test results). For the vast majority root cause analysis shows that we achieve the target for ambulance cases. The issues are centred around walk in patients and that early identification of self-presenters is key. The department is working through a front end assessment programme to reduce delays from triage to time seen. Building on the significant improvement to previous years and especially year on year the team are still aiming to achieve the full 100% compliance by August 18; in August 2/3 weeks have delivered at 100% so unlikely that we will achieve the full 100% target in this month.
- Inter-Provider Transfers: delivery of 36% of tertiary referrals within the 38 days requirement in June. Primary focus on meeting the 38 day target needs to be on diagnostic services in improving current wait times. Our local improvement focus is on Straight-to-Test pathways in colorectal service and other specialties, which have reduced waits for tests and 1st OPD. A trajectory will be reported and overseen through OMC.
- **Note:** Referral to Faster diagnosis; a new cancer diagnosis standard, designed to ensure that patients find out within 28 days whether or not they have cancer, will be introduced in 2020. Data collection starts in 2019.

3 Emergency Care & Patient Flow

- July performance at 84.14% not achieving trajectory agreed with NHSi of 87.3% for July;
- Trajectory agreed with NHSi to get to 95% in March 2019. A joint A&E Rapid Improvement Plan is being implemented to take forward initiatives across the system.
- 3,001 July (3,418 in June, 3,746 in May)) breaches of the 4 hour target were experienced
- Fractured Neck of Femur Best Practice Tariff delivery for July at 86% above the 85% target in the month, a second month of delivery to target. The indicator performance continuous to be inconsistent month on month, but it has to be noted that performance is also impacted by unstable, clinical conditions of patients which will mean that they may not be fit for surgery.
- Patient bed moves for non-clinical reasons in July at 36 against aspiration of zero.

Obstetrics:

- C-Sections in July have increased to 29.1% against target of 25%; year to date at 26.7%; this has mainly been driven by an increase in non-elective patients with the rate of those patients increasing to 20% in July, elective patient C-Sections are tracking the long term average rates of 8%.
- Puerperal sepsis remains within confidence levels across two of the indicators; however notably there was a spike in one of the sepsis indicators where the rate has gone up to 1.5% compared to previous month trends of 0.8%; a review is in progress and has been isolated to HDU cases at this stage.
- Stillbirth rate in July at 2.05 per 1,000 babies
- Adjusted Perinatal Mortality Rate (per 1000 babies) is slightly above the target of 8 showing 8.2 on a year to date basis mainly caused by June and July performance.
- Breastfeeding initiation continues to routinely deliver.

Stroke & Cardiology:

- At this stage in the month the IQPR reports the WD5 position (not post-validated WD20 position) reporting a good position for this service across all but one indicator.
- All IQPR indicators generally deliver to standard or above for these services, and the service ranks well nationally monitored on the SSNAP database.
- Thrombolysis within the hour is often affected by clinical reasons and some operational processes, which are RCAed routinely and managed. July performance at this stage is at 50.0% breaching 2 patients out of 4 for clinical reasons.
- Admissions to Stroke Ward within 4 hours remained inconsistent; but in July the performance is 86% vs the standard of 80%. The performance is sensitive to several different factors; one of such is multiple stroke patients at the same time, bed capacity etc.
- But when on the ward, generally, the patients do spend more than 90% of their stay there. In July the performance is at 98%. Year to date this is at 89% impacted by lower performance in June, but close to recovery.
- TIA (High Risk) Treatment <24 Hours from receipt of referral is 93.8% at July vs target of 70%
- TIA (Low Risk) Treatment <7 days from receipt of referral is at 92% in July vs target of 75%. Both TIA indicators delivery routinely to standard.
- For July Primary Angioplasty Door to balloon time (<90 minutes) is meeting the target of 80% at 92.9% delivery. Primary Angioplasty Call to balloon time (<150 minutes) at 92.3% vs 80% target. Both are consistently delivering.
- Rapid Access Chest Pain - seen within 14 days consistently delivering at 100% again consistent performance here for a number of years.

Workforce :

- Mandatory Training - showing small but steady improvement and in July we see a further improvement to 91.6% against target of 95%;
- Health & Safety related training is above the 95% target at 95.2% in July and achieving standard for the four month in a row.
- PDR completion approach has changed to an annual cycle reporting quarterly delivery; in June therefore the performance was reported at 72.6%. This was lower than target and expectations, but may be explained by managers not recording PDRs in ESR. It was anticipated that July would have caught up with more entries into ESR as to completed PDRs. A better and final picture may present in

August as one would expect managers to have entered the reviews by then and we should have a clear view what is outstanding.

- July Sickness rates in-month for July is at 4.84% and the July cumulative rate at 4.46%, both showing an increase to last month.
- Return to work interviews in-month at 83.8% showing an improvement to last month. Automated RTW notifications are put in place to prompt managers to complete following a sickness end date – this will help drive improvements.
- **Note:** The Trust annualised turnover rate indicator has been reviewed and the count has been corrected; this means that the previously reported Trust position of c14% from April 2018 has now changed to 12.2% as at July. This revision has been back-dated to April 2018.
- The Trust Nursing turnover target has been confirmed at 10.7% and as at July reporting at 13.0% (13.1%); the indicator is now reporting only qualified nurses in the metric.

Mortality:

- Mortality indicators are in line with confidence limits against most of the mortality indicators, other than our HSMR which is currently reported (February 2018 – latest data) at 117 for SWBH and outside statistical confidence limits. There is ongoing Trust scrutiny and oversight of mortality statistics at the Executive Quality Committee.
- A report was commissioned with HED, analytics provider, which concluded: Sandwell General Hospital is a statistically significant HSMR outlier. City Hospital remains within expected limits.
- Following MDO review of emergent divergence between weekday and weekend rates, this will result in a focus on the Sandwell site weekend mortality; the weekend rate has slightly improved in the latest reporting period to 119, but still considered an outlier.
- Identification of incorrectly recorded specialist palliative care entries has now been corrected and submission to SUS will be completed by 20th July. This will hopefully result in an improved HSMR score for the Trust, but this is subject to HES agreeing to re-extract and process the SUS data. This will not immediately trickle through the data.

Cancellations and Theatre Utilisation :

- Performance has been challenging during a significant number of months, however in the last couple of months we have seen significant improvement.
- In July we observe another reduction of cancellations on the day amounting to only 18 against the target of 20. 8/18 were avoidable (~44%) which is a high number, but avoidable is not only hospital related e.g. it will include patients who may have eaten on the day of surgery for example.
- These 18 late cancellations in July account to 0.5% (0.7% June, 1.5, May, 0.9% in April) of our elective admissions vs the 0.8% national target. A fantastic achievement that is believed to be sustainable now based on new escalation processes and management of cancellations including the 23 hr unit mitigating bed capacity issues.
- There were no 28 Day breaches in month and no urgent cancellations in the month of July.
- Theatre in-session utilisation is still below target of 85%; 74.3% in month of July.
- Overall session utilisation (outside routine session timings) for July is at 79.1%; the aim is get in-session utilisation to same levels as running outside sessional time may impact on other sessions.
- We now have speciality level theatre utilisation improvement trajectories. Monitoring will be overseen by the Theatre Board.

Data Completeness:

- Open referrals have increased to 165,731 in July, but renewed effort is being put in place to close out recommendations already identified. August OMC is outlining action plans.

Persistent Reds : Summary of performance up to July 2018

Progress against the originally 25 (indicators may be coupled up where relevant) identified persistently red indicators, is largely moving in the right direction in July, with some fantastic performance achieving complete resolution, which allows us to remove a few items from the persistent red focus. We are also another step closer to achieving further removals as more indicators perform 2 months sustainably against targets.

Missing Improvement targets - some work still to be done on improvement target setting; we have 8x indicators for which improvement targets are still outstanding. Progress in July has been against the workforce target setting; we now have potential targets which are subject to sign off before we can start monitoring against those trajectories in August reporting.

Risk against the planned resolution for Neutropenic sepsis was August 2018, and although very close to this this, the indicator keeps narrowly missing the 100% target despite large efforts in the organisation. Daily RCAs and monitoring is in place coupled with group reviews and other initiatives to absolutely make the 100% a robust, routine process.

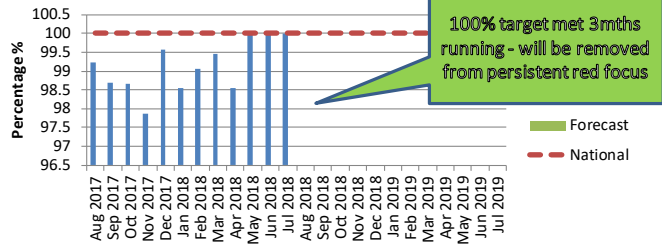
Other points worthy of mention in July are:

- Medical appraisals; we have proposed to the medical director a new method to the count of this indicator. If implemented this will result in better performance; compliance only counted when the appraisal is documented, this is normally 28 days after the appraisal so means that although an appraisal is bound to result in compliance this may not hit the count in the reporting month (28 days behind). Nationally, the benchmark performance is c90%; the trust has a 95% target.
- Engagement with Workforce to confirm improvements targets for sickness and other workforce indicators which has now resulted in most improvement trajectories being identified.
- Theatre utilisation targets, at speciality level, are being progressed to achieve 85% utilisation.
- Mandatory training is keeping its >90% delivery a second month running, not quite yet at the full target of 95%, but increasingly getting there.

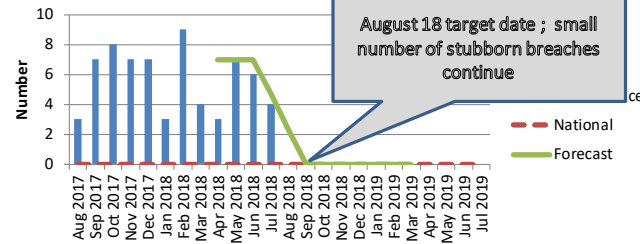
Resolved in Year	Achieved for 2mths running	Improvement Plans progressing	Missed set trajectory - for discussion & revision	Without Trajectory	Potential Persistent Red for the Future
1. Unplanned A&E Re-attendance	1. Elective Cancellations at last minute (%age of elective admissions)	1. PDRs – 12 month rolling	1. Neutropenic Sepsis	1. Open Referrals	DM01 Diagnostic performance
2. WHO Safer Surgery	2. Number of Sitrep Declared Late Cancellations	2. Medical Appraisals		2. Sickness Absence rate	RTT Admitted Pathways
3. Early Booking Assessments (<12+6 weeks)	3. Hip Fractures – best practice tariff; operation <36 hours	3. Return to Work Interviews		3. Nursing Turnover / Workforce Turnover	RTT Non-Admitted Pathways
4. Patient Safety Thermometer		4. Mandatory Training		4. Patient Bed moves	
		5. Treatment Functions Underperforming 92% RTT			
		6. Patients Waiting >52 weeks		5. Mortality Reviews within 42 days	
		7. Weekday Theatre Utilisation – 85%		6. Falls	
				7. FFT Response & Score Rates	

Resolve Items - Performance Trends

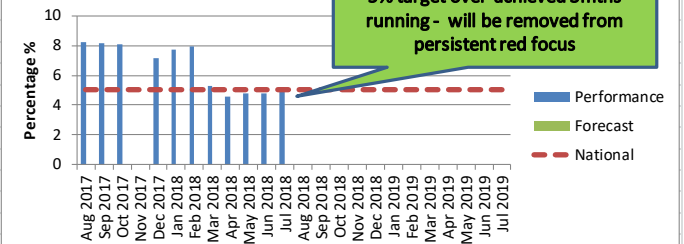
**WHO Safer Surgery
(Brief and Debrief Completed)**



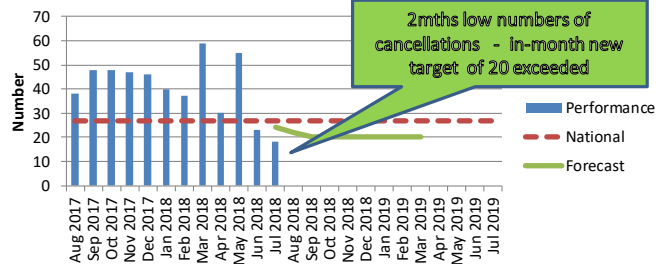
**Neutropenia Sepsis
(Door to Needle Time > 1hr)**



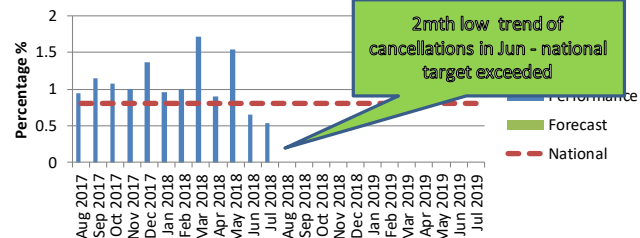
**Emergency Care
Unplanned Reattendance**



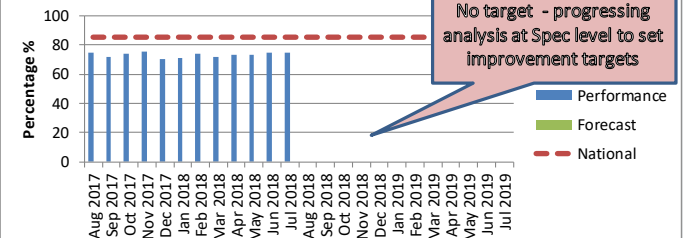
No. of Sitrep Declared Late Cancellations



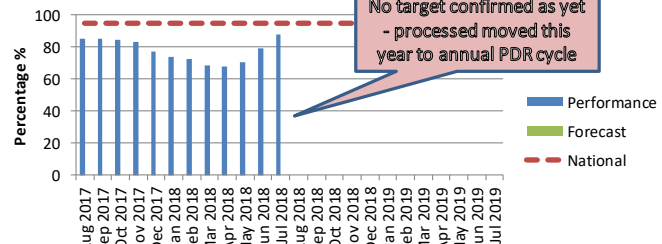
**Elective Admissions Cancelled at last minute
for non-clinical reasons**



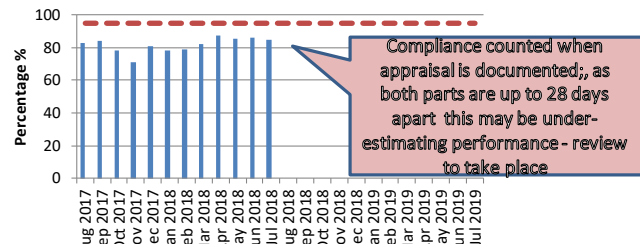
**Weekday Theatre Utilisation
(as % of scheduled)**



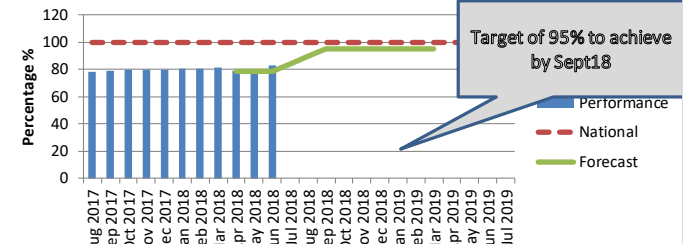
PDRs - 12 month rolling



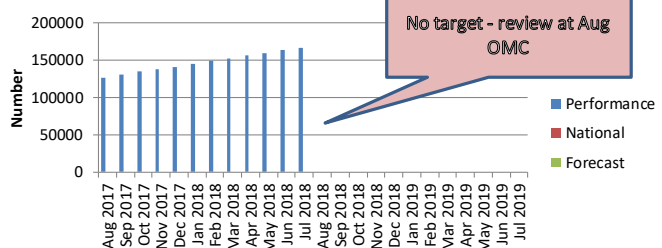
Medical Appraisal



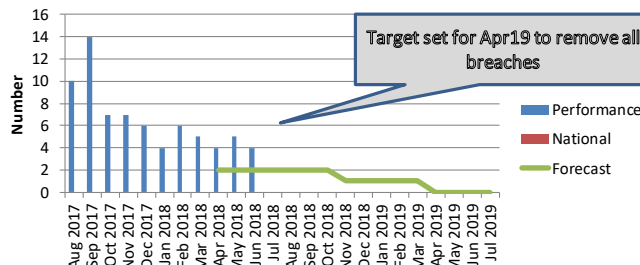
Return to Work Interviews (%)



**Open Referrals without Future Activity/ Waiting List:
Requiring Validation**



Patients Waiting >52 weeks



Total Resolve, Improve & Tolerate Indicators identified :

Resolve	Improve	Tolerate
1. WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	1. Sickness Absence Monthly & Cumulative	1. Caesarean Section Rate – Total
2. Neutropenia Sepsis (Door to Needle Time Greater Than 1 Hour)	2. Sickness LTS & STC (cases)	2. Early Booking Assessment (<12 + 6 weeks) - SWBH Specific
3. Elective Cancellations at last minute for non-clinical reasons (as a percentage of elective admissions)	3. Mandatory Training	
4. No. of Sitrep Declared Late Cancellations –Total	4. Nursing Turnover / Employee Turnover	
5. Weekday Theatre Utilisation (as % of scheduled)	5. Patient Bed Moves (10pm - 6am) (No.) - exc. ALL moves for clinical reasons	
6. Emergency Care Patient Impact - Unplanned Attendance Rate (%)	6. Hip Fractures - Best Practice Tariff - Operation < 36 hours of admission (%)	
7. Patients Waiting >52 weeks	7. Emergency Care 4-hour waits & breaches	
8. Treatment Functions Underperforming (Incomplete)	8. Mortality Reviews within 42 working days	
9. Open Referrals without Future Activity/ Waiting List	9. Falls	
10. PDRs - 12 month rolling	10. Patient Safety Thermometer - Overall Harm Free Care	
11. Medical Appraisal	11. FFT Response & Score rates	
12. Return to Work Interviews following Sickness Absence		

Rules for persistent red reporting:

The rules below are a suggestion to be formally reviewed, accepted by OMC and recommended to EG to accept. There are three rules which need to be agreed in respect of adding, reinstating and removing from the 'persistent red focus'. Keeping it simple is key.

Add indicator to persistent red focus (if not previously managed as persistent red):

- ☐ Either 6 months consecutive under-performance
- ☐ Or year to date performance over a 6 months period where indicator is under-performing (the latter will remove inconsistent monthly performance which can be observed as not all indicators will consecutively under-perform)

Reinstate indicator to persistent red focus:

- ☐ Following recovery and removal from persistent red focus, the performance fails to sustain itself for a consecutive period of 3 months.

Remove indicator from persistent red focus:

- ☐ Indicators which recover to standard and sustain the performance for 3 months will be removed from persistent red reporting.
- ☐ Ongoing monitored continuous as per normal IQPR and other dashboard reviews.

Sandwell and West Birmingham Hospitals

NHS Trust



Integrated Quality & Performance Report

Month Reported: **July 2018**

Reported as at: 27/08/2018

TRUST BOARD









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




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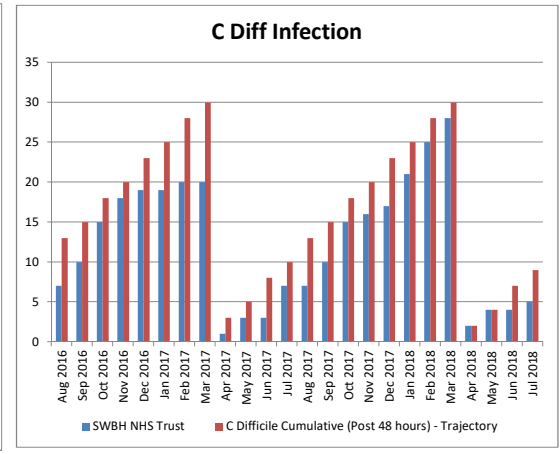
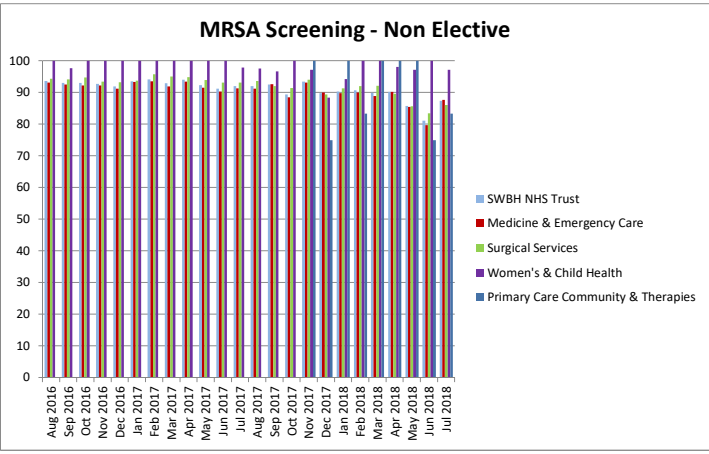
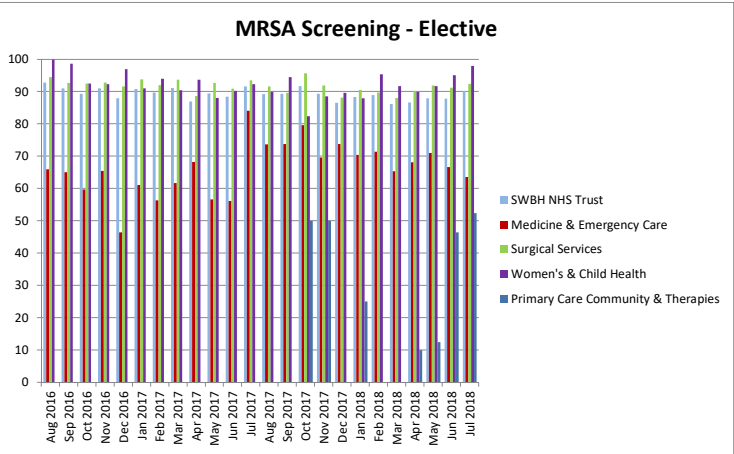
July 2018					
Infection Control	Harm Free Care	Obstetrics	Mortality & Readmissions	Stroke Care & Cardiology	
COIT - compliant <ul style="list-style-type: none">Nil C. Diff case reported during the month of July vs 2.0 in-month target.Year-to-date we have 5 cases vs a target of 8. <ul style="list-style-type: none">The annual target set by NHS England for 18/19 is at 29 (lower compared to last year's target of 30).	Safety thermometer - compliant <ul style="list-style-type: none">From June 2018 the Patient Safety Thermometer will report only 'new harm'In July the Trust performance is at 99.5% above the NHS Safety Thermometer target of 95% Falls & Pressure Sores <ul style="list-style-type: none">*x7.1 [x68] falls reported in July with x1 [x2] falls resulting in serious injury; the number of falls we have seen in June and July are below observed long term average of 77 per month.Year to date there were 316 falls and 9x serious injuries against those. The annual target remains at 804 until the Chief Nurse confirms new targets:In month, there were 21 falls within community, 50 in acute settings.A new indicator has been requested to report falls per 1,000 OBD which is being testedFalls remain subject to ongoing CND scrutiny and routine tracking of the Safety Plan on falls reduction; it is an integral part of 'ward dashboards' MSA - compliant <ul style="list-style-type: none">Nil cases of MSA Bacteraemia were reported in July.Annual target 18/19 set at zero.	C-section rate - not compliant <ul style="list-style-type: none">The overall Caesarean Section rate for July is 29.1% below the 25% target in-month of July; year to date performance now just above target at 26.7%. The July increase in C-section rate appears to be due to non-elective cases which has risen to 20.2% in this month following a period of lower rates.Elective rates are at 8.9% (historical long term avg trend of 8% so trending to this) andNon-elective rates are 20.2% in the month above the long-term avg historical rate of ~17%.Performance considered at Q&S & Board and to be kept in view. Adjusted perinatal mortality rate (per 1000 births) for July is at 8.2 vs. threshold level of 8; year to date at 8.2 just above the target of 8.0 The indicator represents an in-month position and charts, together with the small numbers involved provides for sometimes large variations. The level of births in July is at 488, slightly below levels in the same period of last year of 512 Incidents reported in July: <ul style="list-style-type: none">*x6 [x4] serious incidents reported in July:Routine collective review in place and reported to the Q&S Ctee. WHO Safer Surgery (Audit - brief and deliver - % data where complete) - compliant <ul style="list-style-type: none">As at July 2018 100% sustaining the target for a third month since January, which is a brilliant result for theatres.Robust processes for monitoring performance during the month are paying off. <ul style="list-style-type: none">No never event was reported in JulyNo medication error causing serious harm in July <ul style="list-style-type: none">x43 DDLs have been raised in July of which 43 were 7-day urgent; of which 11 were discharged without prior LA assessment	Mortality - alerts against Trust NSMR & Weekend rates at Sandwell <ul style="list-style-type: none">The Trust overall RRM for most recent 12-mth cumulative period is 106 (available data is as Apr18) reporting on the revised RAM methodologyRAMI for weekday and weekend each at 102 and 119 respectively, lower than in the last few of months, but still an outlier against weekend rates.NSMR measure which includes deaths 30-days after hospital discharge is at 111 for the month of Jan2018 (latest available data).NSMR Mortality indicator an outlier at 123 last month reducing to 117 for the latest reporting, which is still outside statistical confidence limits. Being addressed through the quality plan and resolution to known issues around "documentation" which are being worked through. September Trust Board will continue to monitor. <ul style="list-style-type: none">Deaths in Low Risk Diagnosis Groups (RAM) - month of April (latest available data) is at 76. This indicator measures in-month expected versus actual deaths so subject to larger month on month variations.Gross in-month mortality rate for June month is 1.4% (1.4%) same as last month; the rolling crude rate to date mortality rate has increased to 1.4 in the last quarter against the longer term observed trend of 1.3There were x127 (x123) deaths in our hospitals in the month of June, slightly less than last year same period which was at 129 Mortality Review within 42 Days - not compliant <ul style="list-style-type: none">Mortality review rate in May at 26% and continues to be below trust target of 90%;Revised Learning from Deaths arrangements are being implemented, which will provide for routine 100% review, couple with implementation of a Medical Examiner screening process. Emergency Readmissions (In-hospital within 30 days) <ul style="list-style-type: none">Reported at 8.0% for June; this shows a significant swing month on month which the services continue to monitor at patient level.Looking at the rolling 12 mths rate of 7.5%, this remains static to previous months despite the dip in April to 6.7%.The equivalent, latest available peer group rate is at 8.4% (source: CHKS).	Patient Stay on Stroke Ward - compliant <ul style="list-style-type: none">July indicates that 98% of patients spent >90% of their time on a stroke ward, compliant with the 90% operational threshold in the month; 89% compliance on a year to date basis vs 90% target Admission to Acute Stroke Ward - compliant <ul style="list-style-type: none">July admission to an acute stroke unit within 4 hours is at 88% vs national standard of 80%; year to date above the target at 73.8%. Scans - compliant <ul style="list-style-type: none">Pts receiving CT Scan within 24 hrs of presentation delivery in month of July are at 100% meeting the 95% standard in month consistentlyPts receiving CT Scan within 1hr of presentation is at 62.8% in July; both indicator consistently meet performance. Thrombolysis - not compliant <ul style="list-style-type: none">Compliance at 90% in the month of July with 2x patients missing the 1hr treatment. Angioplasty - compliant <ul style="list-style-type: none">July Primary Angioplasty (prior to balloon time (<90 minutes)) was at 92.9% vs target of 80%.Primary Angioplasty Call to balloon time (<150 minutes) at 92.3% against a target of 80%.Both indicators consistently meet performance targets. RACP - compliant <ul style="list-style-type: none">RACP performance for July at 100% (100%) exceeding the 98% target consistently TIA Treatments - compliant <ul style="list-style-type: none">TIA (High Risk) Treatment <24 Hours from receipt of referral delivery as at July at 93.8% against the target of 70%.TIA (Low Risk) Treatment <7 days from receipt of referral delivery at July is 92% against a target of 75%.Both indicators are consistently delivering over the required standard;	
Cancer Care	Patient Experience - MSA & Complaints	Patient Experience - Cancelled Operations	Emergency Care	Referral To Treatment	
Cancer standards - compliant <ul style="list-style-type: none">Reporting always one month in arrears hence QPRI latest reported period is June.The Trust has delivered all June cancer targets including the 62 day standard.June 62 Days target specifically delivered at 90.7% against the 85% target and as predicted has recovered performance.Q1 delivery is secured for this indicator.All other nationally reported cancer standards are above targets e.g. 2WW and 31 Days Patient Waiting Times <ul style="list-style-type: none">x17.5 patients waited longer than the 62 days at the end of June.1.5 patients waited more than 104 days at the end of JuneThe longest individual patient waiting time for treatment as at the end of June was 112 daysThe Board is asked to discuss themes from 104 day cancer wait breaches, which going forward will be subject to an RGA briefing to the Chief Executive in each case. Neutropenic sepsis - not compliant <ul style="list-style-type: none">The breaches in month are being RGAed daily, generally we show most breaches being only minutes above the required 3hr, however a few of the breaches have been significantly higher than 1hr.In July, 33/37patients (89%) of patients have been treated within the hour, x patients (11%) of patients failed to receive treatment within prescribed period (within 1hr) in the month of July.Continuous actions are being progressed to further address remaining issues; year to date progress is significant in terms of reduction of breaches so far this year and to previous years.Performance reporting continuous to monitor daily, weekly and monthly tabled at the OMC; all breaches are routinely reviewed in dedicated, quarterly meetings. Inter-Provider Transfers - not compliant <ul style="list-style-type: none">26% of tertiary referrals were met within 38 days requirement in June. Process improvements have been put in place to improve delivery e.g. straight-to-Test has commenced in colorectal service and other specialities which have moved to 10 days for 1st OPD, although this is not been consistently met. Primary focus on meeting the 38 day target needs to be on diagnostic services in improving current wait times. Data Completeness <ul style="list-style-type: none">The Trust's internal assessment of the completion of valid NHS Number Field within inpatient data sets complied in month with 98.4 % below operational threshold of 99% ; YTD (98.3%). GP and A&E datasets deliver to target.ED required to improve patient registration performance as this has a direct effect on emergency admissions. Patients who have come through Mailing Health will be validated via the Data Quality Department.Ethnicity coding is performing for Inpatients at 91% against 90% target, but under-delivering for Outpatients. This is attributed to the capture of data in the kiosks and revision to capture fields is being considered.Data Quality Committee has been re-instated and monthly meetings will take place to address a number of IQ issues including ethnicity coding with the Group QD Leads. * Additionally, data quality issues are to be embedded in Group Reviews to allow for more awareness	MSA - not compliant <ul style="list-style-type: none">For July there were 15x MSA breaches reported.The trust continues to monitor all breaches. Friends & Family - not compliant on responses and scores (not completed for the month of May till OMC when external company can turnaround the analysis for the Trust) <ul style="list-style-type: none">Reporting of performance is undergoing a full review as part of 'benchmark' not in place.Performance improvement will be driven through this action plan.Scores and response rate remain low throughout the last year; we'll below regional peers, mainly due to Trust using sub-optimal processes to recover responses, options are being considering including SMS/IVM. Complaints <ul style="list-style-type: none">The number of complaints received for the month of July is 105 (89) with 2.9 (2.0) formal complaints per 1,000 bed days, showing a worsening to the last month and to last year same period (2.6).93% have been acknowledged within target timeframes (3 days)32% (25%) in-month responses have been reported beyond agreed target time; escalated to DQ for remedy.	Cancelled Ops - compliant <ul style="list-style-type: none">18 strip declared late (on day) cancellations were reported in July; this is a further improvement again to previous months. Of these 18 cases, 8 (<44%) were avoidable; all cancellations are subject to an escalation process, a recent improvement, to minimise numbers hitting clearly target levels this month.As a proportion of elective admissions, this represents 0.5% in July (0.7% in June, 1.7% in May) against the national 0.8% target; we can therefore see a massive improvement in the last couple of months.Available cancellations, however, are continuing and we see an average c22% of these each month; the target on this indicator is ambitious and depends on a number of factors such as bed availability, but bed dependency appears to have been removed with the with the opening of the 23rd day unit. 28 Day & Urgent Breaches - compliant <ul style="list-style-type: none">There were no breaches of the 28 days guarantee in Julyno urgent cancellations post-validation Theatre Utilisation - not compliant <ul style="list-style-type: none">Theatre in-session utilisation is below target of 85%; 74.3% in month of JulyOverall session utilisation (outside session timings) for July is at 79.1%.Theatre utilisation improvements plans have been developed and will support each speciality currently under-performing.Both indicators here in the QPRI represent 'elective theatre' utilisation, as emergencies have already been excluded from the count.	EC 4hr standard - not compliant to agreed NHS trajectory <ul style="list-style-type: none">The Trust's performance against the 4-hour EC wait target in July was at 84.14% below the NHSI agreed trajectory of 87.3% for July month.3,003 (3,418) breaches were incurred in July, a significant reduction to last monthThe Trust agreed with NHSI an improvement trajectory which aims to deliver 95% performance in March 2019A joint recovery action plan is being implemented with the CCG Q&S quarterly performance trend for last year 17/18: Q2 at 87.11%; Q3 at 82.36%; Q4 at 80.7% Q1 at 83.31% WMA5 Handovers - not compliant <ul style="list-style-type: none">WMA5 finalise 30 - 60 minutes delayed handovers at 165 (195) in July.only x2 (x10) costs were > 60 minutes delayed handovers in July; the Trust performs generally very well in this category with only 71 breaches last year where delay was > 60 mins.Handovers >60mins (against all conveyances) are therefore 0.04% (2 cases) in July against total WMA5 conveyances which were 4,685 (4,306) being highest in the last 18months, therefore the handovers have been managed very well. The target is only 0.02% and appears somewhat unrealistic with the high level of conveyances. Fractured NOF - compliant <ul style="list-style-type: none">Fractured Neck of Femur Best Practice Tariff in July again delivers targeted performance and is at 86% in the month. There are a high number of patients in the month.The performance is variable month on month, but this is not driven necessarily due to performance issues, often the patients conditions are preventing surgical interventions in this timeframe. Bed moves after 10pm not compliant: <ul style="list-style-type: none">There were 36 (48, 26, 43, 75) reported bed moves in July in the period from 10pm-6am (and here moves for clinical reasons). We can see that this number is reducing each month, but observe an increase in June. The Trust objective is to have zero bed moves outside of clinical reasons.This indicator is being monitored closely over the next few months to ensure that all clinical moves are considered appropriately and the data set for this indicator is robust.	RTT - incomplete pathway - compliant <ul style="list-style-type: none">RTT incomplete pathway for July will have achieved a minimum 92.2%, but yet to be formally signed off by COO - this compares to an improvement trajectory of 93.53%.The patient waiting list has continued to grow in July to 34,594 with a backlog of 2697 being patients above 18 weeks wait timeAll specialities other than Cardiology & T&O are now compliant with 92%, which is a significant improvement; plans for the remaining are to recovery fully by Q2. 52 Week Breaches - not compliant <ul style="list-style-type: none">breaches in July (x4 Ophthalmology, 2x Haematology)An improvement of RCA management for those breaches has been implemented by the PTL. Acute diagnostic waits - not compliant <ul style="list-style-type: none">Diagnostic (DMS1) performance for July is still below standard of 99% at 98.78% missing the targetx 113 (94) breaches were incurred mostly in Imaging (CT & MRI)	
Local Quality Requirements 2018/19 & CQUINs 2018/19					
Data Completeness			Operational Efficiency		
Section	Red	Green	None	Total	
Infection Control	0	6	0	6	
Harm Free Care	7	7	14	28	
Obstetrics	4	5	5	14	
Mortality and Readmissions	1	1	11	13	
Stroke and Cardiology	1	10	0	11	
Cancer	1	9	5	15	
ERT, MSA, Complaints	12	3	9	24	
Cancellations	3	6	0	9	
Emergency Care & Patient Flow	7	7	6	21	
RTT	7	1	3	11	
Data Completeness	3	7	10	20	
Workforce	8	2	9	19	
Temporary Workforce	0	0	28	28	
SCQPR	9	0	9	18	
Operational Efficiency	0	0	4	4	
Total		64	64	113	241
* Persistently red-rated performance indicators are subject to performance improvement and routine monitoring; the majority have been prioritised into to be resolved (restore to original standard) and 'improve' as well as a couple which have been agreed to be 'tolerated'. Oversight at OMC. July reports a number of successes and maintained standards.					

Patient Safety - Infection Control

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
4			C. Difficile	<= No	29	2.5
4			MRSA Bacteraemia	<= No	0	0
4			MSSA Bacteraemia (rate per 100,000 bed days)	<= Rate2	9.42	9.42
4			E Coli Bacteraemia (rate per 100,000 bed days)	<= Rate2	94.9	94.9
3			MRSA Screening - Elective	=> %	80	80
3			MRSA Screening - Non Elective	=> %	80	80

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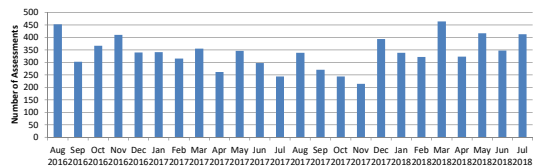
Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Jul 2018	0	0	0			0		0	5	
Jul 2018	0	0	0			0		0	0	
Jul 2018								0.0	6.8	
Jul 2018								16.6	14.9	
Jul 2018	64	92	98			52.38		90.2	88.2	
Jul 2018	88	86	97			83.33		87.4	86.1	



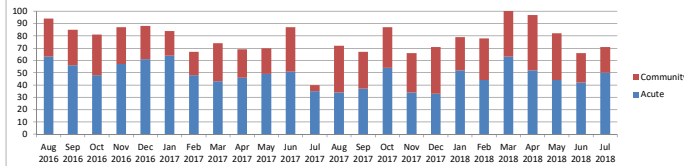
Patient Safety - Harm Free Care

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
8			Patient Safety Thermometer - Overall Harm Free Care	=> %	95	95
8			Patient Safety Thermometer - Catheters & UTIs	%		
			Number of DOLS raised	No		
			Number of DOLS which are 7 day urgent	No		
			Number of delays with LA in assessing for standard DOLS application	No		
			Number DOLS rolled over from previous month	No		
			Number patients discharged prior to LA assessment targets	No		
			Number of DOLS applications the LA disagreed with	No		
			Number patients cognitively improved regained capacity did not require LA assessment	No		
8			Falls	<= No	804	67
9			Falls with a serious injury	<= No	0	0
			Falls Per 1000 Occupied Bed Days	Rate1		
8			Grade 2,3 or 4 Pressure Ulcers (Hospital Acquired Avoidable)	<= No	0	0
			Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload Acquired)	<= No	0	0
			Pressure Ulcers Resulting in Injury	No		
			Pressure Ulcers per 1000 Occupied Bed Days	Rate1		
3			Venous Thromboembolism (VTE) Assessments	=> %	95	95
3			WHO Safer Surgery - Audit - 3 sections (% pts where all sections complete)	=> %	100	100
3			WHO Safer Surgery - brief (% lists where complete)	=> %	100	100
3			WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	=> %	100	100
9			Never Events	<= No	0	0
9			Medication Errors causing serious harm	<= No	0	0
9			Serious Incidents	<= No	0	0
9			Open Central Alert System (CAS) Alerts	<= No		
9			Open Central Alert System (CAS) Alerts beyond deadline date	No	0	0
			Safety Plan - Input Non-Compliant Days	<= No	<=3 Per Ward	
			Safety Plan - Checks Compliant	%	98	98
			Safety Plan - Missed Checks	=> No	<=3 Per Ward	

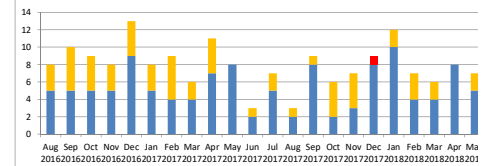
VTE Assessments Missed



Falls - Acute & Community

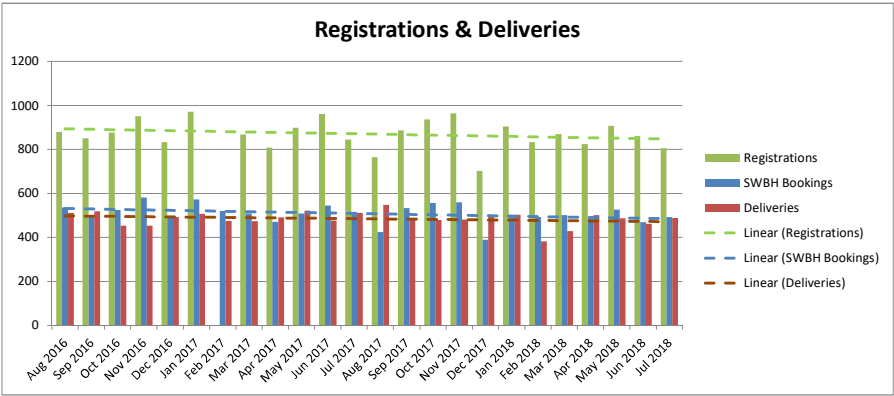
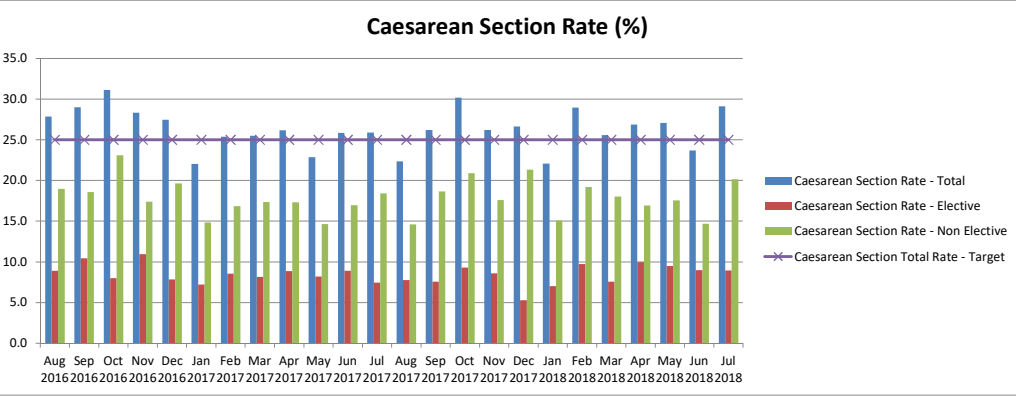


Hospital Acquired Avoidable Pressure Sores - by Gr



Patient Safety - Obstetrics

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory		Previous Months Trend (since Feb 2017)																		Data Period	Month	Year To Date	Trend	
					2016-2017	Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J					J
3			Caesarean Section Rate - Total	<= %	25.0	25.0																	Jul 2018	29.1	26.7				
3			Caesarean Section Rate - Elective	<= %			9	8	9	8	9	7	8	8	9	9	5	7	10	8	10	10	9	9	Jul 2018	8.9	9.4		
3			Caesarean Section Rate - Non Elective	<= %			17	17	17	15	17	18	15	19	21	18	21	15	19	18	17	18	15	20	Jul 2018	20.2	17.4		
2			Maternal Deaths	<= No	0	0																			Jul 2018	0	2		
3			Post Partum Haemorrhage (>2000ml)	<= No	48	4																			Jul 2018	1	6		
3			Admissions to Neonatal Intensive Care (Level 3)	<= %	10.0	10.0																			Jul 2018	2.87	1.96		
12			Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0																			Jul 2018	8.20	8.29		
12	NEW		Stillbirth Rate (Corrected) (per 1000 babies)	Rate1			-	-	-	-	-	-	-	-	2.11	2.10	4.02	1.99	2.58	4.66	5.98	6.16	4.41	2.05	Jul 2018	2.05	4.66		
12	NEW		Neonatal Death Rate (Corrected) (per 1000 babies)	Rate1			-	-	-	-	-	-	-	-	4.22	2.10	0.00	0.00	2.58	0.00	1.99	0.00	4.41	4.10	Jul 2018	4.10	2.59		
12			Early Booking Assessment (<12 + 6 weeks) - SWBH Specific	=> %	85.0	85.0																			Jul 2018	93.0	92.4		
12			Early Booking Assessment (<12 + 6 weeks) - National Definition	=> %	90.0	90.0																			Jul 2018	123.2	132.7		
2			Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0	-->		-->	-->		-->	-->												Jul 2018	76.99	76.54		
2			Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	<= %			1.9	2.6	4.4	2.5	2.5	1.8	0.8	0.9	0.5	0.8	0.6	0.9	1.1	1.0	0.8	0.5	0.9	1.5	Jul 2018	1.48	0.91		
2			Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	<= %			1.6	2.3	3.0	1.6	1.6	1.0	0.6	0.6	0.5	0.5	0.6	0.7	0.4	0.7	0.8	0.5	0.6	0.9	Jul 2018	0.89	0.70		
2			Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	<= %			1.6	2.1	2.3	1.4	1.6	1.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.3	0.2	0.0	0.6	Jul 2018	0.59	0.28	



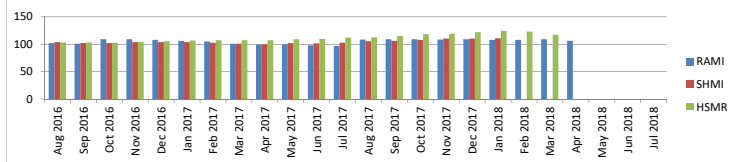
Clinical Effectiveness - Mortality & Readmissions

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
5			Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI
5			Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI
5			Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI
6			Summary Hospital-level Mortality Index (SHMI) (12-month cumulative)	SHMI	Below Upper CI	Below Upper CI
5			Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative)	HSMR		
5			Deaths in Low Risk Diagnosis Groups (RAMI) - month	RAMI	Below Upper CI	Below Upper CI
3			Mortality Reviews within 42 working days	=> %	90	90
3			Crude In-Hospital Mortality Rate (Deaths / Spells) (by month)	%		
3			Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative)	%		
			Deaths in the Trust	No		
20			Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%		
20			Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%		
5			Emergency Readmissions (within 30 days) - CQC CCS Diagnosis Groups (12-month cumulative)	%		

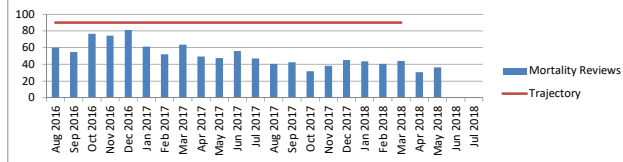
Previous Months Trend (since Feb 2017)																							
F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J						
105	101	99	100	98	97	108	109	109	108	109	108	108	109	106	-	-	-						
102	98	96	97	95	95	103	103	103	102	103	103	102	104	102	-	-	-						
113	109	109	109	106	101	124	128	130	130	128	126	124	124	119	-	-	-						
103	101	100	102	102	103	106	106	108	110	110	111	-	-	-	-	-	-						
108	108	107	109	110	112	113	115	118	119	122	124	123	117	-	-	-	-						
72	88	62	61	78	78	71	144	62	120	90	133	102	129	76	-	-	-						
																-	-						
1.6	1.0	1.2	1.1	1.3	1.5	1.1	1.1	1.3	1.2	1.8	1.8	1.6	1.4	1.4	1.4	1.4	-						
1.4	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.4	1.4	1.4	1.4	1.4	-						
139	100	105	113	129	142	109	109	133	119	169	178	142	143	120	123	127	-						
7.4	7.1	7.2	7.2	7.1	7.8	7.1	6.8	7.0	7.0	7.6	7.8	7.7	7.7	8.7	7.4	8.0	-						
7.2	7.1	7.1	7.0	7.1	7.1	7.2	7.2	7.2	7.2	7.2	7.2	7.3	7.3	7.4	7.5	7.5	-						
7.9	7.8	7.8	8.1	8.8	8.7	7.8	7.8	7.8	7.8	7.8	7.9	7.9	7.9	7.9	8.0	8.4	-						

Data Period	Group						Month	Year To Date	Trend
	M	SS	W	P	I	PCCT			
Apr 2018								106	
Apr 2018								102	
Apr 2018								119	
Jan 2018								1057	
Mar 2018								1389.2	
Apr 2018							76		
May 2018	33	62	0			-	36	33	
Jun 2018							1.42		
Jun 2018								1.41	
Jun 2018							127	370	
Jun 2018							8.02		
Jun 2018								7.53	
Jun 2018	-	-	-			-		8.35	

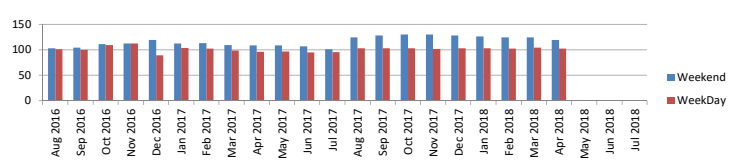
RAMI, SHMI & HSMR (12-month cumulative)



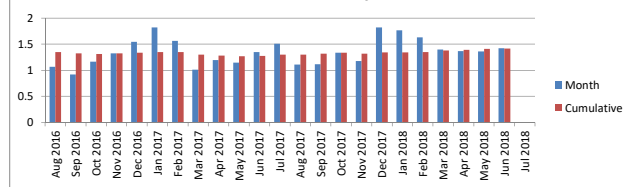
Mortality Reviews (%)



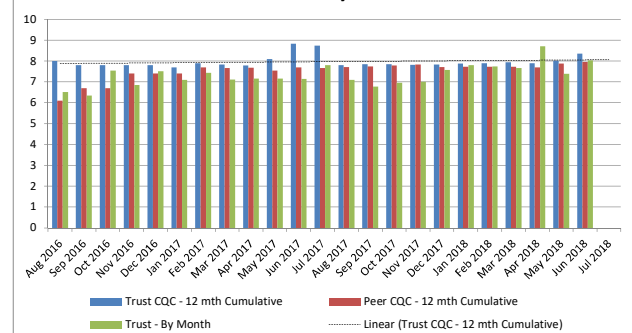
Mortality (RAMI) - Weekend and Weekday (12-month cumulative)







Crude Mortality Rate



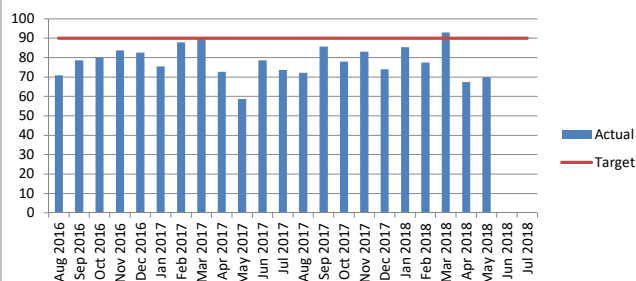
Emergency 30-day Readmissions (%) - 12-month cumulative CQC CCS Diagnosis Groups and monthly overall



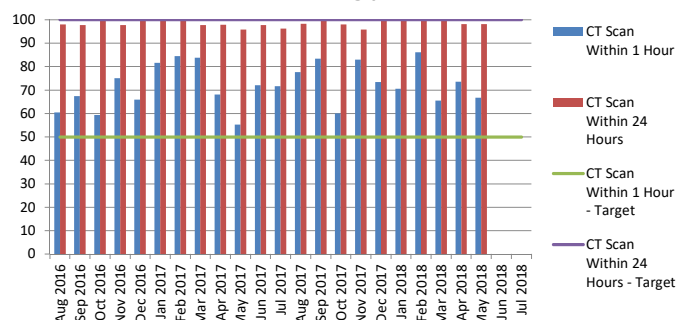
Clinical Effectiveness - Stroke Care & Cardiology

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory		Previous Months Trend (Since Feb 2017)																Data Period	Month	Year To Date	Trend
					Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M					J	J
3			5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90.0	90.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	98.0	89.0	<div><div></div></div>															
3			5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80.0	80.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	86.0	72.8	<div><div></div></div>															
3			5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50.0	50.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	62.8	73.0	<div><div></div></div>															
3			5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95.0	95.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	100.0	99.0	<div><div></div></div>															
3			5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=>	85.0	85.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	50.0	83.3	<div><div></div></div>															
3			5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=>	70.0	70.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	93.8	93.7	<div><div></div></div>															
3			5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=>	75.0	75.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	92.0	93.5	<div><div></div></div>															
3			Stroke Admissions - Swallowing assessments (<24h)	=> %	98.0	98.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	100.0	100.0	<div><div></div></div>															
9			Primary Angioplasty (Door To Balloon Time 90 mins)	=> %	80.0	80.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	92.9	95.0	<div><div></div></div>															
9			Primary Angioplasty (Call To Balloon Time 150 mins)	=> %	80.0	80.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	92.3	91.2	<div><div></div></div>															
9			Rapid Access Chest Pain - seen within 14 days	=> %	98.0	98.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	100.0	100.0	<div><div></div></div>															

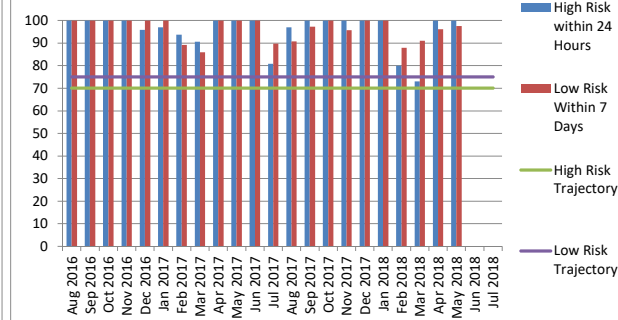
Admissions (%) to Acute Stroke Unit within 4 hours



CT Scan following presentation



TIA Treatment (%)

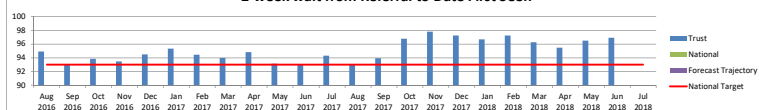


The stroke indicators in the IPR are based on 'patient arrivals' not 'patient discharged' as this monitors pathway performance rather than actual outcomes which may / may not change on discharge. National SSNAP is based on 'patient discharge' which is more appropriate for outcomes based reporting. Both are valid but designed for slightly different purposes, however they will align overall, especially over a longer period of time (eg annually)

Clinical Effectiveness - Cancer Care

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory		Previous Months Trend (since Feb 2017)												Data Period	Group						Month	Year To Date	Trend								
					Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	M	SS	W	P	I	PCCT	CO					
1			2 weeks	=> %	93.0	93.0																			Jun 2018	96.9	96.2	100.0			-			96.9	96.3	
1			2 weeks (Breast Symptomatic)	=> %	93.0	93.0																			Jun 2018		-							96.9	96.6	
1			31 Day (diagnosis to treatment)	=> %	96.0	96.0																			Jun 2018	100.0	96.6	96.2			-			97.4	96.4	
1			31 Day (second/subsequent treatment - surgery)	=> %	94.0	94.0																			Jun 2018									100.0	100.0	
1			31 Day (second/subsequent treatment - drug)	=> %	98.0	98.0																			Jun 2018									100.0	100.0	
1			31 Day (second/subsequent treat - radiotherapy)	=> %	94.0	94.0																			Jun 2018									-	-	
1			62 Day (urgent GP referral to treatment) Excluding Rare Cancer	=> %	85.0	85.0																			Jun 2018	90.0	95.2	94.7			-			90.7	87.0	
1			62 Day (urgent GP referral to treatment) Including Rare Cancer	=> %	85.0	85.0																			Jun 2018	90.0	93.7	94.7			-			96.8	87.0	
1			62 Day (referral to treat from screening)	=> %	90.0	90.0																			Jun 2018	100.0	92.7				-			90.3	94.4	
1			62 Day (referral to treat from hosp specialist)	=> %	90.0	90.0																			Jun 2018	100.0	100.0	100.0			-			100.0	95.5	
1			Cancer - Patients Waiting over 62 days	No			15	8	8	10	10	11	11	9	11	12	9	13	9	6	6	17	8	-	Jun 2018	2.0	2.5	3.0				0.0		7.5	30.0	
1			Cancer - Patients Waiting over 104 days	No			4	5.0	5.0	2.0	1.0	1.5	5.0	1.0	4.0	2.0	3.0	3.0	2.0	3.0	1.5	1.5	1.5	-	Jun 2018	0.5	1.0	0.0				0.0		1.5	4.5	
1			Cancer - Longest Waiter in days	No			150	162	140	139	106	102	184	141	125	173	104	102	113	280	118	104	112	-	Jun 2018	112	119	101				0		112		
1			Neutropenia Sepsis Door to Needle Time Greater Than 1 Hour	=> No	0.0	0.0	8	6	11	6	4	10	3	7	8	7	7	3	9	4	3	7	6	4	Jul 2018	4	-	-				-		4	20	
			IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer pathway	%			0	50	0	0	0	25	25	67	0	20	0	54	0	55	60	67	36	-	Jun 2018	-	-	-				-		36	53	

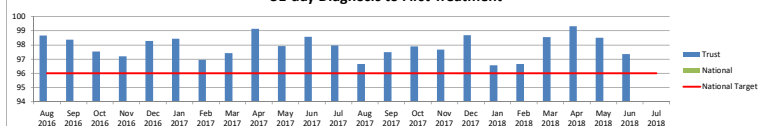
2-week wait from Referral to Date First Seen



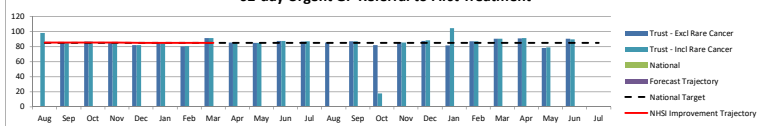
2-week wait from Breast Symptomatic Patients



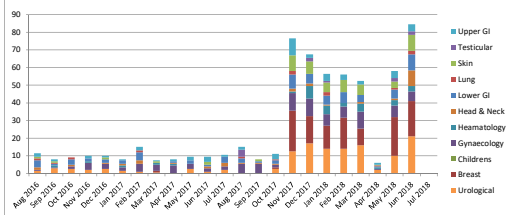
31-day Diagnosis to First Treatment



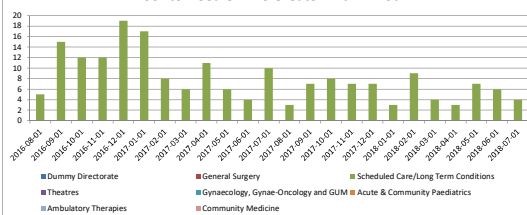
62-day Urgent GP Referral to First Treatment



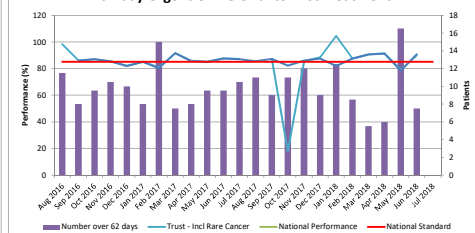
62-day Urgent GP Referral to First Treatment Breach- By Tumour Site



Neutropenia Sepsis Door to Needle Time Greater Than 1 Hour



62-day Urgent GP Referral to First Treatment

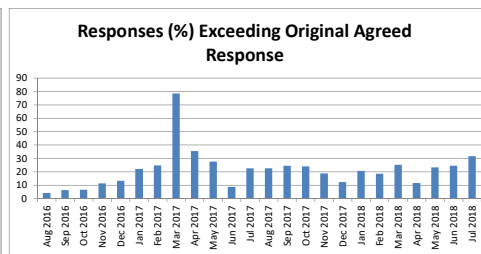
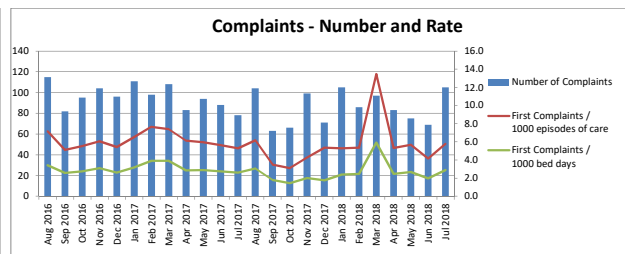
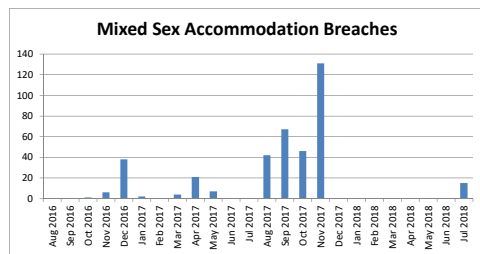


Patient Experience - FFT, Mixed Sex Accommodation & Complaints















Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
8			FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	50.0	50.0
8			FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95.0	95.0
8			FFT Response Rate: Type 1 and 2 Emergency Department	=> %	50.0	50.0
8			FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95.0	95.0
8			FFT Response Rate: Type 3 WIU Emergency Department	=> %	50.0	50.0
8			FFT Score - Adult and Children Emergency Department (type 3 WIU)	=> No	95.0	95.0
8			FFT Score - Outpatients	=> No	95.0	95.0
8	NEW		FFT Score - Maternity Antenatal	=> No	95.0	95.0
8	NEW		FFT Score - Maternity Postnatal Ward	=> No	95.0	95.0
8	NEW		FFT Score - Maternity Community	=> No	95.0	95.0
8			FFT Score - Maternity Birth	=> No	95.0	95.0
8			FFT Response Rate - Maternity Birth	=> %	50.0	50.0
13			Mixed Sex Accommodation Breaches	<= No	0.0	0.0
9			No. of Complaints Received (formal and link)	No		
9			No. of Active Complaints in the System (formal and link)	No		
9			No. of First Formal Complaints received / 1000 bed days	Rate1		
9			No. of First Formal Complaints received / 1000 episodes of care	Rate1		
9			No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt)	=> %	100	100
9			No. of responses which have exceeded their original agreed response date (% of total active complaints)	<= %	0	0
9			No. of responses sent out	No		
14			Access to healthcare for people with Learning Disability (full compliance)	Yes / No	Yes	Yes
			Patient Harm - New Claims	No		
			Patient Harm - Ongoing Claims	No		
			Patient Harm - Closed Claims	No		

Previous Months Trend (since Feb 2017)																
F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
9.7	7.9	9.3	11	11	12	13	10	19	9.7	8.3	-	9.794	10	8.3	7.4	5.4
95	96	95	92	92	83	83	83	82	85	89	-	88.2	88	89	527	553
4.3	4.2	5.5	3.8	2.4	3.8	2.8	3.4	3.3	3.4	3.6	-	3.849	7	7.9	6.3	4.8
76	73	75	71	73	72	75	73	73	58	-	-	74.94	74	77	535	607
0	0	0.1	0	-	0	-	-	-	-	8.8	-	5.017	###	###	###	###
0	0	0	0	0	0	0	0	-	-	16	-	0	0	0	0	0
88	90	90	89	88	91	89	89	91	92	90	-	92.03	90	91	965	###
11	95	88	90	75	90	50	90	93	76	75	-	0	100	0	0	4
29	83	91	86	73	73	81	84	89	81	74	-	0	100	0	36	0
0	80	100	100	0	0	50	0	0	0	0	-	0	0	0	0	0
23	92	82	83	69	76	58	48	83	74	100	-	93.51	100	-	73	84
5.4	21	8.9	11	7	7.1	5.2	5.2	13	6.9	0.2	-	22.59	1.2	-	16	21
0	4	21	7	0	0	42	67	46	131	0	0	0	0	0	0	15
98	108	83	94	88	78	104	63	66	99	71	105	86	97	83	75	69
177	194	205	184	185	184	167	154	136	148	161	187	181	183	176	174	164
3.9	3.9	2.9	2.9	2.8	2.6	3.1	1.8	1.4	2.0	1.7	2.4	2.5	5.9	2.5	2.7	2.0
7.6	7.4	6.1	6.0	5.6	5.3	6.2	3.5	3.1	4.2	5.4	5.3	5.3	13.5	5.3	5.7	4.1
98	94	100	100	100	100	100	98	100	90	92	99	100	99	100	100	93
25	79	36	28	8.6	23	23	25	24	19	12	21	18.6	25	12	23	32
95	84	67	106	87	83	67	85	73	65	38	75	65	81	77	65	52
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	11	6	15	5	13
-	-	-	-	-	-	-	-	-	-	-	-	491	474	473	456	309
-	-	-	-	-	-	-	-	-	-	-	-	26	0	16	5	4













Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Jun 2018								5	7	
Jun 2018								553		
Jul 2018	6.8							6.8	6.2	
Jul 2018	580							580		
Jul 2018	-							-	-	
Jul 2018	-							0		
Jul 2018								1042		
Jul 2018								36		
Jul 2018								18		
Jul 2018								0		
Jul 2018								65		
Jul 2018								14	17	
Jul 2018	15	0	0		0	0		15	15	
Jul 2018	55	25	8	0	4	7	6	105	332	
Jul 2018	97	57	18	1	5	9	7	194		
Jul 2018	3.1	3.7	1.2			-		2.88	2.50	
Jul 2018	7.9	4.9	2.1			-		5.78	5.23	
Jul 2018	93	94	80	83	100	100	100	93	96	
Jul 2018	27	31	39	-	60	40	50	32	25	
Jul 2018	23	14	6	0	2	3	4	52	258	
Jul 2016	N	N	N	N	N	N	N	No		
Jul 2018	-	-	-	-	-	-	-	13	33	
Jul 2018	-	-	-	-	-	-	-	309	1238	
Jul 2018	-	-	-	-	-	-	-	4	25	

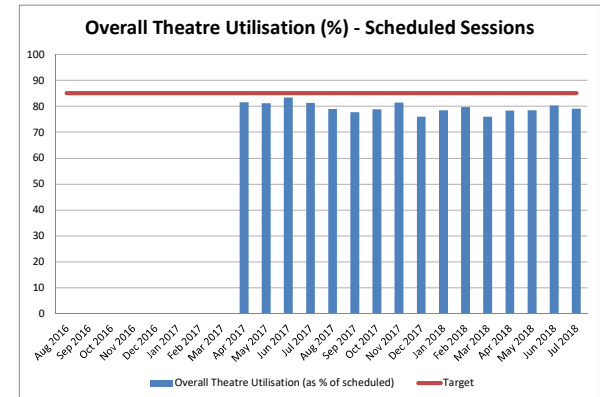
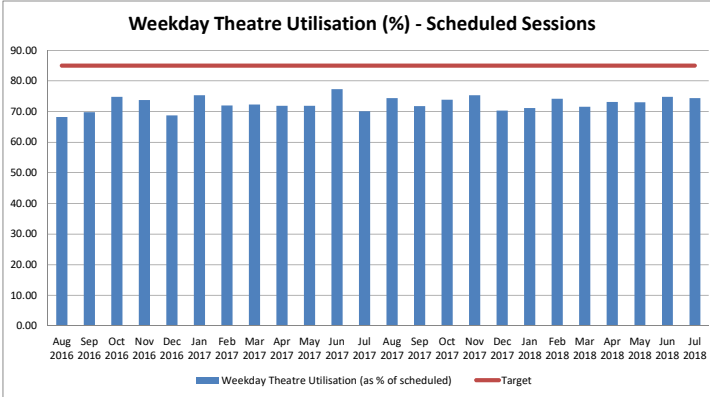
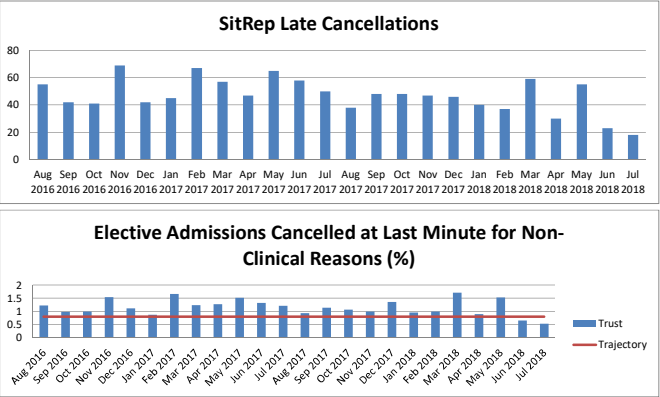


Patient Experience - Cancelled Operations

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
2			No. of Sitrep Declared Late Cancellations - Total	<= No	320	27
2			No. of Sitrep Declared Late Cancellations - Avoidable	No		
2			No. of Sitrep Declared Late Cancellations - Unavoidable	No		
2			Elective Cancellations at last minute for non-clinical reasons (as a percentage of elective admissions)	<= %	0.8	0.8
2			Number of 28 day breaches	<= No	0	0
2			No. of second or subsequent urgent operations cancelled	<= No	0	0
2			Urgent Cancellations	<= No	0.0	0.0
3			No. of Sitrep Declared Late Cancellations (P'ts. >1 occasion)	<= No	0	0
			Multiple Hospital Cancellations experienced by same patient (all cancellations)	<= No	0	0
3			All Hospital Cancellations, with 7 or less days notice	<= No	0	0
3			Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0
			Overall Theatre Utilisation (as % of scheduled)	<= %	85.0	85.0

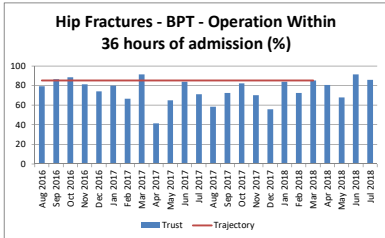
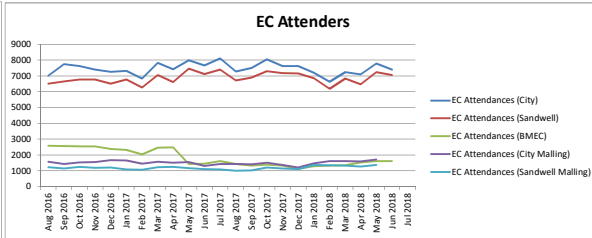
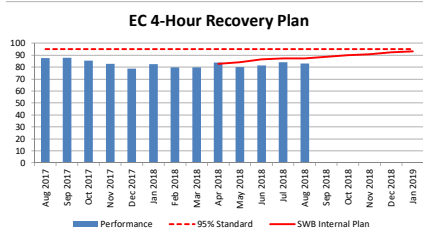
[illegible]

Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Jul 2018	1	13	1			3		18	126	
Jul 2018	1	4	1			2		8	28	
Jul 2018	0	9	0			1		10	97	
Jul 2018	0.12	0.65	0.42			0.96		0.5	0.9	
Jul 2018	0	0	0			0		0	2	
Jul 2018	0	0	0			-		0	0	
Jul 2018	0.0	0.0	0.0			0.0		0	0	
Jul 2018	0	0	0			0		0	2	
Jul 2018	9	43	4			-		56	200	
Jul 2018	31	194	20			-		245	893	
Jul 2018	-	75.4	79.7			54.9		74.3	73.9	
Jul 2018		79.9	86.3			58.7		79.1	79.1	



Access To Emergency Care & Patient Flow

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory		Previous Months Trend (From)																	Data Period	Unit			Month	Year To Date	Trend	
					Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	S	C				B
	NEW		Emergency Care Attendances (Including Mailing)	No			17670	20449	19286	19591	18650	19645	17861	18160	19517	18624	18216	18154	17109	18366	17965	17914	-	-	May 2018	8608	9494	1612	19714	37679	
2			Emergency Care 4-hour waits	=> %	95.00	95.00																			Jul 2018	81.0	85.1	99.3	84.14	82.32	
2			Emergency Care 4-hour breach (numbers)	No			3046	2875	2814	3549	3604	2686	2177	2150	2800	3168	3814	3249	3377	3582	3745	3746	3418	3001	Jul 2018	1617	1376	8	3001	12910	
2			Emergency Care Trolley Waits >12 hours	<= No	0.00	0.00																			Jul 2018	0	0		0	0	
3			Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.00	15.00																			Jul 2018	14	15	8	14	14	
3			Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60																			Jul 2018	76	53	89	65	59	
3			Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0																			Jul 2018	4.65	5.74	5.58	5.24	4.85	
3			Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0																			Jul 2018	6.17	8.51	4.30	7.15	7.02	
11			WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	129	107	110	159	242	111	127	90	143	207	111	208	163	156	151	173	195	165	Jul 2018	121	44		165	752	
11			WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	13	5	0	12	6	1	0	1	90	4	207	111	208	163	156	151	173	195	Jul 2018	2	0		2	24	
11			WMAS - Handover Delays > 80 mins (% all emergency conveyances)	<= %	0.02	0.02																			Jul 2018	0.08	0.00		0.04	0.13	
11			WMAS - Emergency Conveyances (total)	No			4034	4206	4137	4376	4254	4429	4278	4174	4557	4424	4725	4561	4081	4398	4539	4836	4685	Jul 2018	2362	2323		4685	17838		
2			Delayed Transfers of Care (Acute) (%)	<= %	3.5	3.5																			Jul 2018	1.3	4.7		2.5	2	
2			Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS	<= No	<10 per site	<10 per site																			Jul 2018	4.4	9.4		14		
2			Delayed Transfers of Care (Acute) - Total Bed Days (All Local Authorities)	<= No	3.5% of available	3.5% of available	512	583	546	501	483	635	539	512	598	545	591	613	541	487	487	520	472	503	Jul 2018				503	1974	
	NEW		Delayed Transfers of Care (Acute) - Total Bed Days (All Local Authorities) as % of Available Beds	%	3.5	3.5	2.8	2.9	2.9	2.5	2.6	3.4	2.8	2.8	3.2	2.2	2.7	3.1	3.0	2.2	2.2	2.7	2.7	2.8	Jul 2018				2.80	2.75	
2			Delayed Transfers of Care (Acute) - Finable Bed Days (Birmingham LA only)	<= No	0	0	369	375	324	258	312	370	256	288	272	246	219	268	193	152	176	241	192	263	Jul 2018				263	872	
2			Patient Bed Moves (10pm - 6am) (No.) -ALL	No			633	586	584	651	536	580	574	633	674	657	719	769	654	654	628	628	677	655	Jul 2018				655	2530	
2			Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units	No			228	221	229	234	205	245	216	233	231	268	281	282	215	278	244	239	242	232	Jul 2018				232	957	
	New		Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units and Transfers for Clinical Reasons	No			43	46	44	33	37	29	23	43	39	54	72	65	48	75	43	26	48	36	Jul 2018				36	153	
			Hip Fractures - Best Practice Tariff - Operation < 36 hours of admission (%)	=> %	85.0	85.0																			Jul 2018				86	82.0	

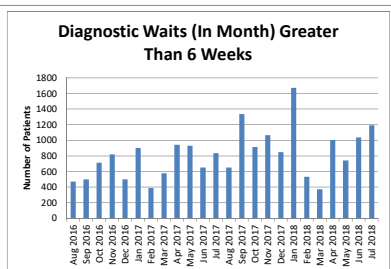
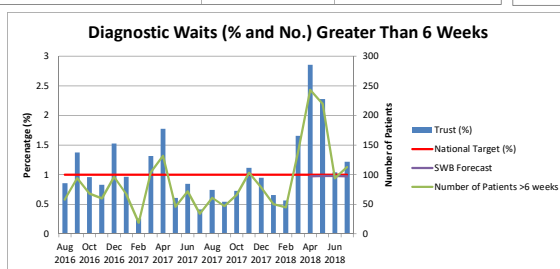
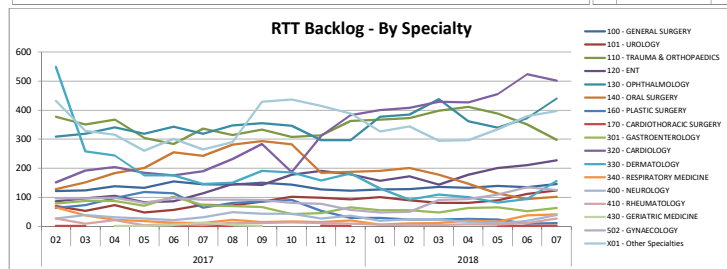
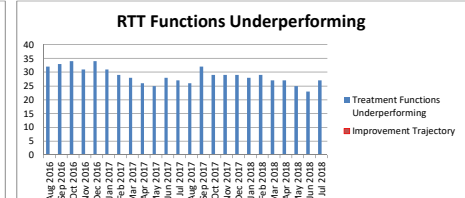
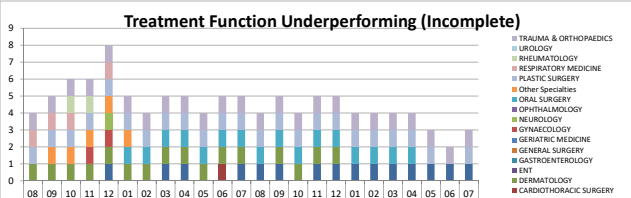
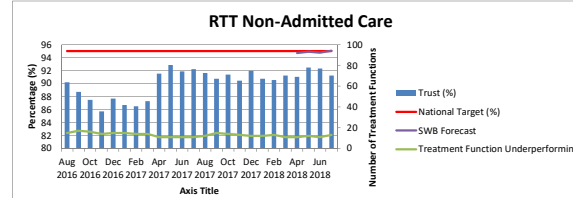
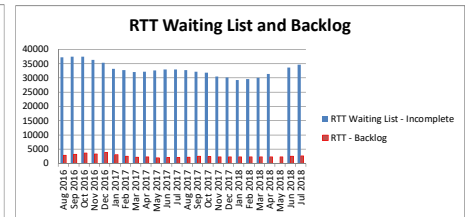
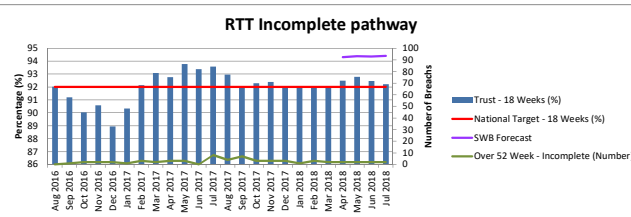
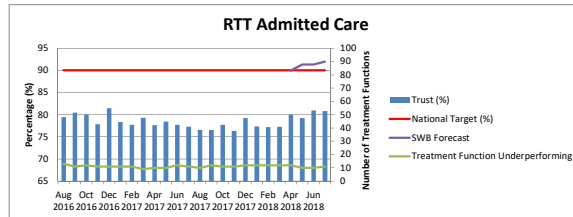


Referral To Treatment

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Month
2			RTT - Admitted Care (18-weeks)	=> %	90.0	90.0
2			RTT - Non Admitted Care (18-weeks)	=> %	95.0	95.0
2			RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0
			RTT Waiting List - Incomplete	No		
			RTT - Backlog	No		
2			Patients Waiting >52 weeks	<= No	0	0
2			Patients Waiting >52 weeks (Incomplete)	<= No	0	0
2			Treatment Functions Underperforming (Admitted, Non-Admitted, Incomplete)	<= No	0	0
			Treatment Functions Underperforming (Incomplete)	<= No	0	0
2			Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census)	<= %	1.0	1.0
			Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters)	No		

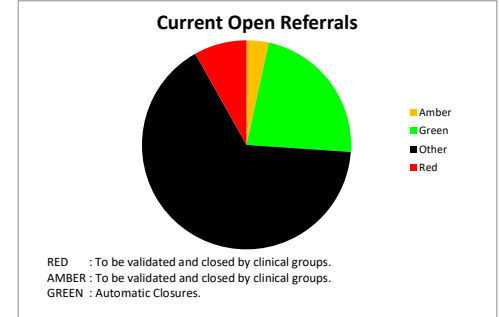
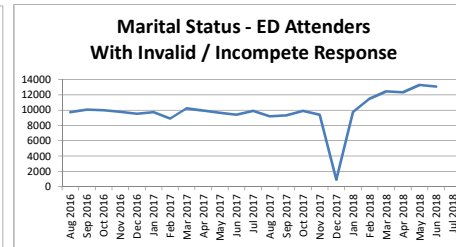
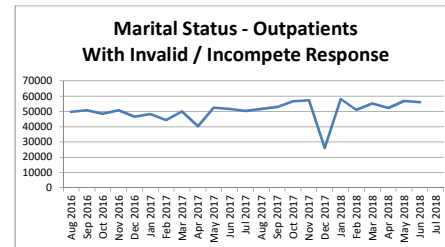
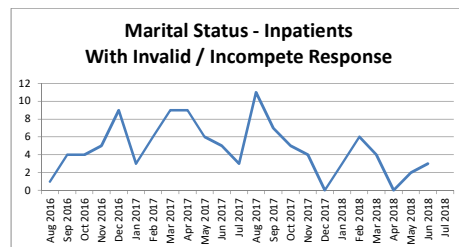
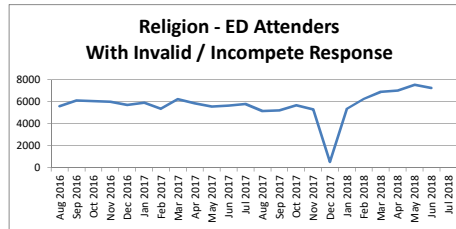
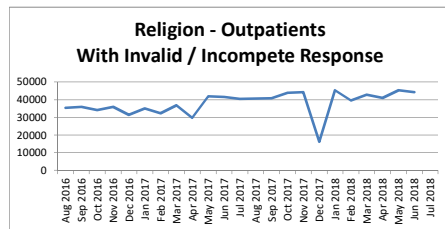
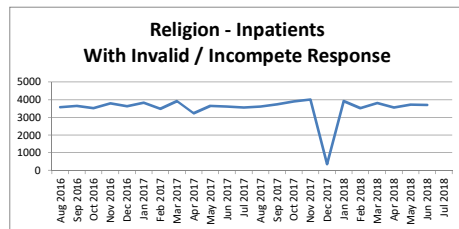
Previous Months Trend (since Feb 2017)												
F	M	A	M	J	J	A	S	O	N	D	J	J
32758	32032	32187	32576	32998	32962	32786	32216	31775	30537	30130	29235	29607
30071	31369	31665	34594	2578	2214	2327	2324	2188	2115	2304	2571	2451
2322	2410	2337	2356	2404	2354	2369	2536	2697	3	6	5	3
2	10	10	14	7	7	6	4	6	5	4	5	4
7	3	3	3	1	3	2	2	2	2	2	2	2
29	28	26	25	28	27	26	32	29	29	28	29	27
27	25	23	27	4	5	5	4	5	5	4	4	4
4	4	4	4	4	4	4	4	4	4	4	4	4
387	577	942	931	650	833	652	1336	914	1064	847	1672	531
373	1002	739	1038	1190								

Data Period	Group						Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO		
Jul 2018	96.1	72.2	88.4				91.8	80.83	
Jul 2018	78.3	82.8	90.6				86.7	91.25	
Jul 2018	89.0	92.1	93.2				93.6	92.20	
Jul 2018	5806	16962	1827				2853	34594	
Jul 2018	644	1349	125				182	2697	
Jul 2018	1	5	0				0	7	20
Jul 2018	0	1	0				0	2	8
Jul 2018	6	15	2.0				3.0	27	
Jul 2018	1	2	0				0	3	
Jul 2018	0.2	0.8	-				1.6	1.22	
Jul 2018	43	61	-				1054	1190	



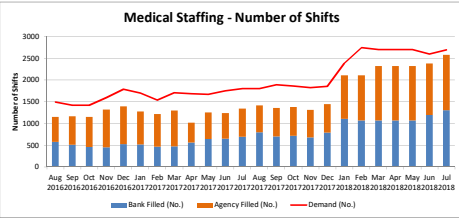
Data Completeness

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory		Previous Months Trend (since Feb 2017)																		Data Period	Group							Month	Year To Date	Trend																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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14	<div><div></div></div>	<div><div></div></div>	Data Completeness Community Services	=> 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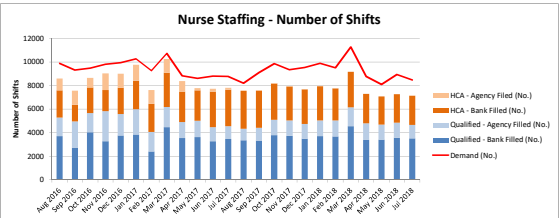


Temporary Workforce

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
			Medical Staffing - Number of instances when junior rotas not fully filled	<= %	0	0
			Medical Staffing - Demand	No		
			Medical Staffing - Total Filled	%		
			Medical Staffing - Bank Filled	%		
			Medical Staffing - Agency Filled	%		
			Medical Staffing - Filled Shifts - Svr Consultant	No		
			Medical Staffing - Filled Shifts - Jnr Doctor	No		
			Nursing - Demand	No		
			Nursing - Total Filled	%		
			Nursing - Qualified - Bank Filled	%		
			Nursing - Qualified - Agency Filled	%		
			Nursing - HCA - Bank Filled	%		
			Nursing - HCA - Agency Filled	%		
			AHPs - Radiography - Demand (Shifts)	No		
			AHPs - Radiography - Filled (Shifts)	No		
			AHPs - Physiotherapy - Demand (Shifts)	No		
			AHPs - Physiotherapy - Filled (Shifts)	No		
			AHPs - Other - Demand (Shifts)	No		
			AHPs - Other - Filled (Shifts)	No		
			Admin - Demand (Shifts)	No		
			Admin - Filled (Shifts)	No		
			Facilities - Demand (Shifts)	No		
			Facilities - Filled (Shifts)	No		
			Interpreters - Demand (Shifts)	No		
			Interpreters - Total Filled	%		
			Interpreters - Bank Filled	%		
			Interpreters - Agency Filled	%		
			Interpreters - Unfilled	%		



Previous Months Trend (since Feb 2017)																							
F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J						
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
1534	1703	1682	1669	1753	1805	1804	1887	1858	1823	1854	2381	2740	2696	2696	2696	2594	2695						
79.4	76.1	60.4	75.07	70.62	74.52	78.27	71.86	74.33	71.91	78.05	88.37	76.79	86.09	86.09	86.09	91.63	95.7						
44.12	36.65	55.51	51.48	52.58	51.75	56.52	51.77	52.06	52.02	54.66	52.52	50.76	46.19	46.19	46.19	50.27	50.48						
71.44	63.35	44.49	48.52	47.42	48.25	43.48	48.23	47.94	47.88	45.34	47.48	49.24	53.81	53.81	53.81	49.73	49.52						
217	270	120	214	219	258	320	312	329	324	334	311	181	352	352	352	428	394						
1001	1028	896	394	1019	1087	1092	1074	1052	987	1113	1793	855	1969	1969	1969	1949	2185						
9268	10708	8825	8616	8784	8760	8197	9080	8949	9305	9535	9886	9500	11272	8759	8687	8823	8477						
95.55	95.8	95.29	90.22	87.78	89.1	92.59	83.87	83.29	85.1	80.62	80.64	81.48	81.16	83.18	87.67	83.46	84.5						
27.07	43.52	42.07	46.67	42.61	44.43	44.12	43.91	46.36	47.21	45.52	46.72	47.66	49.65	46.46	48.29	49.36	49.0						
18.71	16.76	16.32	17.77	15.48	13.94	13.03	13.92	15.87	16.39	16.29	16.67	17.59	17.46	19.49	17.84	17.47	16.1						
27.18	28.13	30.44	33.05	39.06	39.63	41.94	41.6	37.36	36.03	38.01	36.44	34.72	32.89	34.05	33.67	33.17	34.3						
12.91	11.59	10.74	2.509	2.84	1.999	0.909	0.46	0.402	0.378	0.182	0.176	0.026	0	0	0	0	0.5						
332	525	332	372	315	334	335	231	235	198	176	309	349	305	111	305	173	342						
302	502	329	359	315	280	323	220	232	190	170	253	232	157	92	241	170	189						
478	356	180	242	257	104	99	100	108	88	75	33	113	35	146	96	24	77						
478	346	180	242	257	104	96	98	107	87	74	33	113	35	146	96	24	77						
530	1009	459	527	471	511	536	482	532	460	451	519	385	500	376	293	481	403						
527	885	457	527	471	508	534	476	520	445	440	502	371	487	349	274	479	367						
4128	5135	4198	4228	4423	4054	4429	4091	4015	3928	3535	3778	3493	3607	2950	3018	3240	3035						
4026	5079	4162	4184	4423	4031	4412	4025	3951	3838	3412	3707	3412	3496	2895	2984	3164	2979						
1971	2485	1795	2031	2101	1996	2182	2025	2059	2122	2008	2111	2226	2410	2192	2219	2287	2124						
1926	2425	1737	1999	2101	1966	2165	2006	2019	2098	1951	2054	2170	2384	2178	2192	2271	2070						
4983	5634	4511	5139	5291	5101	4905	5116	5343	5699	4595	5354	4862	5079	4639	5177	4976	5461						
99.64	99.57	99.89	99.71	99.7	99.76	99.9	99.77	99.57	99.74	99.65	99.87	99.55	99.86	99.46	99.56	99.76	99.73						
79.52	78.02	77.34	78.45	77.67	76.99	76.96	78.29	77.86	78.86	77.81	78.89	77.77	79.57	79.76	76.89	77.78	76.6						
20.5	22.0	22.7	21.5	22.3	23.0	23.0	21.7	22.1	21.3	22.2	21.1	22.2	20.4	20.2	23.1	22.2	23.4						
0.4	0.4	0.1	0.3	0.3	0.2	0.1	0.2	0.4	0.3	0.3	0.1	0.5	0.1	0.5	0.4	0.2	0.3						



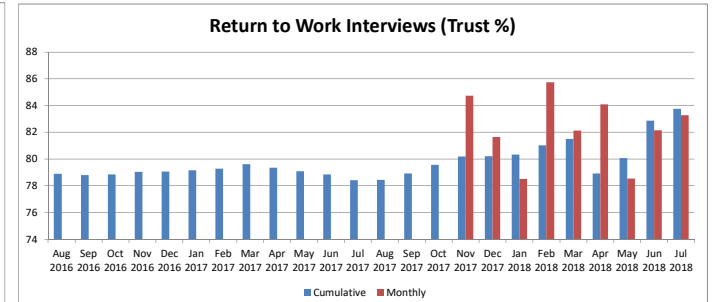
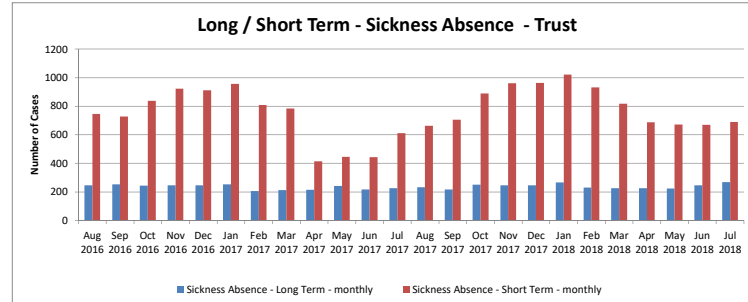
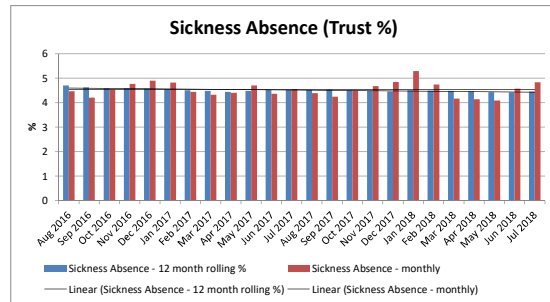
Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCGT	CO			
Jan-00	-	-	-	-	-	-	-	-	-	
Jul 2018	1635	788	257	0	15	20	0	2695	10681.0	
Jul 2018	94.74	97.14	97.28	-	93.33	100	-	96	89.9	
Jul 2018	43.96	59.79	64.4	-	100	0	-	90	48.4	
Jul 2018	56.04	40.21	35.6	-	0	100	-	90	51.7	
Jul 2018	249	104	7	0	14	20	0	394	1526.0	
Jul 2018	1300	642	243	0	0	0	0	2185	9072.0	
Jul 2018	4304	1910	1104	7	28	1042	82	8477	34246	
Jul 2018	84.55	88.69	76.18	85.71	96.43	84.07	95.12	84	84.1	
Jul 2018	46.52	44.04	58.26	100	70.37	60.84	32.05	49	48.3	
Jul 2018	19.13	23.91	2.38	0	0	3.65	0	16	17.7	
Jul 2018	34.3	31.94	35.32	0	29.63	35.5	67.95	34	33.8	
Jul 2018	0	0	4.04	0	0	0	0	0	0.1	
Jul 2018	0	0	0	0	342	0	0	342	931	
Jul 2018	0	0	0	0	189	0	0	189	692	
Jul 2018	0	0	6	0	0	71	0	77	343	
Jul 2018	0	0	6	0	0	71	0	77	343	
Jul 2018	124	36	11	0	123	72	37	403	1553	
Jul 2018	96	35	11	0	123	65	37	367	1469	
Jul 2018	583	305	98	244	53	225	1527	3035	12243	
Jul 2018	578	302	97	244	53	219	1486	2979	12022	
Jul 2018	13	37	16	0	11	0	2047	2124	8822	
Jul 2018	11	37	0	0	11	0	2011	2070	8711	
Jul 2018	-	-	-	-	-	-	-	5461	20253.0	
Jul 2018	-	-	-	-	-	-	-	100	99.6	
Jul 2018	-	-	-	-	-	-	-	77	77.7	
Jul 2018	-	-	-	-	-	-	-	23	22.3	
Jul 2018	-	-	-	-	-	-	-	0	0.4	

Workforce

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
3		•b•	PDRs - 12 month rolling	=> %	95.0	95.0
7		•b	Medical Appraisal	=> %	95.0	95.0
3		•b	Sickness Absence (Rolling 12 Months)	<= %	3.00	3.00
3			Sickness Absence (Monthly)	<= %	3.00	3.00
3			Sickness Absence - Long Term (Monthly)	No		
3			Sickness Absence - Short Term (Monthly)	No		
3			Return to Work Interviews following Sickness Absence (Cumulative)	=> %	100.0	100.0
	NEW		Return to Work Interviews following Sickness Absence (In Month)	=> %	100.0	100.0
3			Mandatory Training	=> %	95.0	95.0
3		•	Mandatory Training - Health & Safety (% staff)	=> %	95.0	95.0
7		•b•	Employee Turnover (rolling 12 months)	<= %	10.0	10.0
			Nursing Turnover (Qualified Only)	<= %	10.7	10.7
7			New Investigations in Month	No		
7			Vacancy Time to Fill	Weeks		
7		•	Professional Registration Lapses	<= No	0	0
7			Qualified Nursing Variance (FIMS) (FTE)	No		
15			Your Voice - Response Rate	No		
15			Your Voice - Overall Score	No		

Previous Months Trend (since Feb 2017)													
F	M	A	M	J	J	A	S	O	N	D	J	F	M
•	•	•	•	•	•	•	•	•	•	•	•	•	•
•	•	•	•	•	•	•	•	•	•	•	•	•	•
•	•	•	•	•	•	•	•	•	•	•	•	•	•
•	•	•	•	•	•	•	•	•	•	•	•	•	•
205	213	214	241	218	225	232	216	251	246	247	267	230	226
808	785	414	445	444	612	664	706	889	962	963	1021	932	818
•	•	•	•	•	•	•	•	•	•	•	•	•	•
•	•	•	•	•	•	•	•	•	•	•	•	•	•
•	•	•	•	•	•	•	•	•	•	•	•	•	•
•	•	•	•	•	•	•	•	•	•	•	•	•	•
11.2	11.7	11.7	11.7	12.0	12.6	12.7	12.8	12.9	12.6	12.9	13.3	13.4	13.5
3	9	14	1	3	4	4	2	7	4	5	4	3	4
22	21	20	21	23	25	20	21	21	21	23	25	23	25
0	0	0	0	0	0	0	0	0	0	0	0	0	0
246.47	257	256	276	281	289	287	269	252	244	265	248	243	261
-->	-->	-->	-->	-->	18.8	-->	-->	-->	-->	-->	19.7	-->	-->
-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->

Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Jul 2018	76.7	89.1	86.6	93.3	72.8	93.6	91.4		76.4	
Jul 2018	82.5	79.8	92.5	90.9	90.6	113.0	100.0	86.2	85.9	
Jul 2018	5.0	4.6	4.5	3.6	3.8	4.1	4.4	4.46	4.4	
Jul 2018	6.0	4.6	5.3	3.2	4.9	4.2	4.5	4.84	4.4	
Jul 2018	65	47	42	7	14	34	28	269	966	
Jul 2018	163	130	85	33	22	105	79	691	2721	
Jul 2018	71.0	92.2	83.3	90.6	85.3	90.3	85.0	83.8	81.4	
Jul 2018	77.6	87.6	84.8	88.2	94.1	89.0	78.6	83.3	82.0	
Jul 2018	87.3	91.1	91.5	95.6	90.4	94.8	94.2	91.6		
Jul 2018	91.6	93.8	94.1	96.9	93.9	97.5	98.5	95.2		
Jul 2018								12.2	12.4	
Jul 2018								13.0	13.4	
Jul 2018	1	1	0	1	0	0	2	5		
Jul 2018								23		
Jul 2018	0	0	0	0	0	0	0	0	0	
Jul 2018								268		
Jan 2018	9	16.2	16.8	16.2	19.7	24.4	29.7	19.7		
Jan 2017	3.68	3.79	3.66	3.82	3.58	3.83	3.64	3.7		



Operational Efficiency

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory		Previous Months Trend (since Feb 2017)																		Data Period	Group								Month	Year To Date	Trend
					Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		M	SS	B	W	P	I	PCCT	CO			
			Routine Outpatient Appointments with Short Notice(<3Wks)	%			-	-	23	21	19	22	27	24	29	25	23	17	19	18	19	24	21	21	Jul 2018	21	23	-	16	28	-	14	-	21.1	21.2	
			Routine Outpatient Appointments with Short Notice(<3Wks)	No			-	-	1780	1950	1747	1972	2501	2211	2847	2408	1685	1577	1505	1509	1414	2061	1943	1979	Jul 2018	412	1170	-	133	120	0	141	-	1979	7397	
			Short Notice Inpatient Admission Offers (<3wks)	%			-	-	50	49	47	48	54	47	52	54	52	41	49	51	49	52	57	59	Jul 2018	68	58	-	68	38	100	46	-	59	54.4	
			Short Notice Inpatient Admission Offers (<3wks)	No			-	-	1628	1887	1858	1767	2047	1937	2167	2393	1959	1712	1792	1975	1783	1983	2161	2252	Jul 2018	274	1535	-	201	15	34	193	-	2252	8179	

- Both, IP and OP data set is still under review with the services; the review will determine exclusions from clinics/pathways which are appropriately booked below the ' 3 weeks' notice'
- The data sets include all 'marked 'clinics/pathways which should be below this notice period, but there will be others hence the quality assurance process
- Deep Drill papers have been issued to OMC and the focus will be on 5 hot spots where specialities are outliers
- Revised counts/data sets will then be re-run and reported here in the IQPR
- Thresholds will be set based on final review by executive group and recommendations









July Update :

- 5 specialities will be reviewed in more detail as they are outliers
- IP wise the reviews are still to conclude

Local Quality Indicators - 2017/2018

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory	
					Year	Month
			WHO Safer Surgery - Audit - brief and debrief (% lists where complete) - SQPR	=> %	100	100
			Morning Discharges (00:00 to 12:00) - SQPR	=> %	35	35
			ED Diagnosis Coding (Mental Health CQUIN) - SQPR	=> %	85	85
			CO Level >4ppm Referred For Smoking Cessation - SQPR	=> %	90	90
			BMI recorded by 12+6 weeks of pregnancy - SQPR	=> %	90	90
			CO Monitoring by 12+6 weeks of pregnancy - SQPR	=> %	90	90
			Community Nursing - Falls Assessment For Appropriate Patients on home visiting caseload	=> %	100	100
			Community Nursing - Pressure Ulcer Risk Assessment For New community patients at initial assessment	=> %	95	95

Previous Months Trend (From Feb 2017)																							
F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J						
99	99	98	98	98	99	99	99	99	98	100	99	99	99	99	100	100	100						
17	16	16	15	17	17	15	16	15	15	18	17	17	16	15	15	17	17						
86	87	86	86	85	84	84	84	84	85	85	83	0	0	84	85	85	84						
93	87	80	86	76	82	82	85	79	80	100	100	100	100	100	100	100	100						
81	77	78	80	79	88	92	94	93	96	97	97	98	94	98	97	98	98						
78	79	76	75	75	74	71	74	80	76	79	76	77	76	80	86	82	81						
62	58	69	-	57	58	57	54	55	52	60	67	78	91	91	94	94	96						
65	63	77	-	63	65	66	62	63	63	70	78	81	92	93	94	95	96						

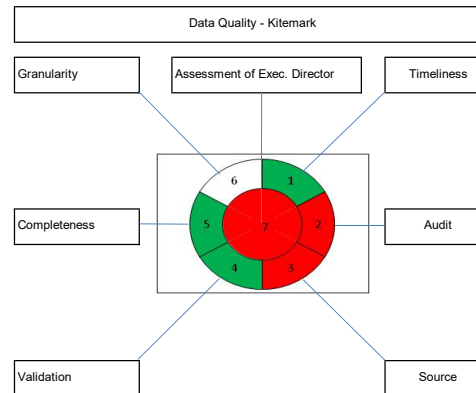
Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Jul 2018	100	100	100			100		100.0	99.9	
Jul 2018	16	11	23			30		16.7	16.2	
Jul 2018								83.6	84.4	
Jul 2018								100.0	100.0	
Jul 2018								97.8	97.6	
Jul 2018								81.0	82.1	
Jul 2018								95.7	93.6	
Jul 2018								95.9	94.5	

Legend

Data Sources	
1	Cancer Services
2	Information Department
3	Clinical Data Archive
4	Microbiology Informatics
5	CHKS
6	Healthcare Evaluation Data (HED) Tool
7	Workforce Directorate
8	Nursing and Facilities Directorate
9	Governance Directorate
10	Nurse Bank
11	West Midlands Ambulance Service
12	Obstetric Department
13	Operations Directorate
14	Community and Therapies Group
15	Strategy Directorate
16	Surgery B
17	Women & Child Health
18	Finance Directorate
19	Medicine & Emergency Care Group
20	Change Team (Information)

Indicators which comprise the External Performance Assessment Frameworks	
•	NHS TDA Accountability Framework
a	Caring
b	Well-led
c	Effective
d	Safe
e	Responsive
f	Finance
•	Monitor Risk Assessment Framework
•	CQC Intelligent Monitoring

Groups	
M	Medicine & Emergency Care
A	Surgery A
B	Surgery B
W	Women & Child Health
P	Pathology
I	Imaging
PCCT	Primary Care, Community & Therapies
CO	Corporate



Each outer segment of indicator is colour coded on kitemark to signify strength of indicator relative to the dimension, with following key:

Red Insufficient
Green Sufficient
White Not Yet Assessed

The centre of the indicator is colour coded as follows:

Red / Green As assessed by Executive Director
White Awaiting assessment by Executive Director

If segment 2 of the Kitemark is Blank this indicates that a formal audit of this indicator has not yet taken place

Medicine Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date	Trend	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	EC	AC				SC
Patient Safety - Inf Control	C. Difficile	<= No	30	3	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	0	0	0	0	3	<div></div>
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	0	0	0	0	0	<div></div>
Patient Safety - Inf Control	MRSA Screening - Elective (%)	=> %	80	80	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	67	84	31	63.6		<div></div>
Patient Safety - Inf Control	MRSA Screening - Non Elective (%)	=> %	80	80	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	87	92	93	87.7		<div></div>
Patient Safety - Harm Free Care	Number of DOLS raised	No			14	16	9	7	5	12	13	9	19	15	9	19	16	20	16	34	14	26	Jul 2018	10	16	0	26	90	<div></div>
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			14	16	9	7	5	12	13	9	19	15	9	19	16	20	16	34	14	26	Jul 2018	10	16	0	26	90	<div></div>
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	3	2	3	Jul 2018	2	1	0	3	9	<div></div>
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			8	8	11	6	6	4	8	3	2	1	3	2	1	6	2	2	2	2	Jul 2018	0	2	0	2	8	<div></div>
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			11	5	1	6	3	1	3	5	6	3	2	2	4	2	3	12	8	10	Jul 2018	6	4	0	10	33	<div></div>
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			1	0	0	0	2	1	2	0	0	1	1	1	0	0	0	0	1	3	Jul 2018	1	2	0	3	4	<div></div>
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			0	0	1	1	1	5	0	0	0	0	0	0	0	0	0	0	0	1	Jul 2018	0	1	0	1	-	<div></div>
Patient Safety - Harm Free Care	Falls	<= No	0	0	38	34	36	39	34	34	28	31	48	22	23	35	35	45	35	32	35	40	Jul 2018	10	30	0	40	142	<div></div>
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0	1	2	1	1	0	0	1	1	3	0	0	0	0	0	0	2	1	0	Jul 2018	0	0	0	0	3	<div></div>
Patient Safety - Harm Free Care	Grade 2,3 or 4 Pressure Ulcers (hospital aquired avoidable)	<= No	0	0	5	4	5	4	2	4	2	6	3	4	8	8	4	3	4	5	5	6	Jul 2018	0	6	0	6	20	<div></div>
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	88.1	91.1	97.7	90.3		<div></div>
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	100.0	100.0	-	100.0		<div></div>
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	100	100	-	100.0		<div></div>
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	100	100	-	100.0		<div></div>
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	0	0	0	0	0	<div></div>
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0	0	0	0	0	<div></div>
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	0	2	0	2	9	<div></div>
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	27	35	38	33		<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			9.4	9.4	9.5	9.2	9.2	10.2	9.1	10.7	11.4	11.1	12.0	12.7	12.1	12.5	13.5	11.7	13.0	-	Jun 2018				13.0		<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			9.4	9.4	9.4	9.3	9.3	9.4	9.4	9.6	9.7	9.8	10.0	10.2	10.4	10.7	11.0	11.2	11.6	-	Jun 2018				11.3		<div></div>









































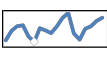





































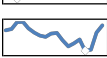
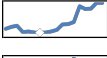
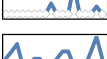


















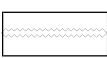


















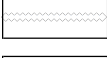

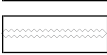





Medicine Group

Section	Indicator		Trajectory		Previous Months Trend																		Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		EC	AC	SC			
Clinical Effect - Stroke & Card	Pts spending >90% stay on Acute Stroke Unit (%)	=> %	90.0	90.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	<div></div>	92.9	<div></div>	92.9	92.2	<div></div>
Clinical Effect - Stroke & Card	Pts admitted to Acute Stroke Unit within 4 hrs (%)	=> %	90.0	90.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	<div></div>	69.8	<div></div>	69.8	68.6	<div></div>
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	<div></div>	66.7	<div></div>	66.7	70.1	<div></div>
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	<div></div>	98.2	<div></div>	98.2	98.1	<div></div>
Clinical Effect - Stroke & Card	Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	<div></div>	100.0	<div></div>	100.0	100.0	<div></div>
Clinical Effect - Stroke & Card	Stroke Admissions - Swallowing assessments (<24h) (%)	=> %	98.0	98.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	100.0	<div></div>	100.0	100.0	<div></div>
Clinical Effect - Stroke & Card	TIA (High Risk) Treatment <24 Hours from receipt of referral (%)	=> %	70.0	70.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	<div></div>	100.0	<div></div>	100.0	100.0	<div></div>
Clinical Effect - Stroke & Card	TIA (Low Risk) Treatment <7 days from receipt of referral (%)	=> %	75.0	75.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	May 2018	<div></div>	97.5	<div></div>	97.5	96.7	<div></div>
Clinical Effect - Stroke & Card	Primary Angioplasty (Door To Balloon Time 90 mins) (%)	=> %	80.0	80.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	92.9	<div></div>	92.9	95.0	<div></div>
Clinical Effect - Stroke & Card	Primary Angioplasty (Call To Balloon Time 150 mins) (%)	=> %	80.0	80.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	92.3	<div></div>	92.3	91.2	<div></div>
Clinical Effect - Stroke & Card	Rapid Access Chest Pain - seen within 14 days (%)	=> %	98.0	98.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	100.0	<div></div>	100.0	100.0	<div></div>
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jun 2018	<div></div>		96.9	96.9		<div></div>
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jun 2018	<div></div>		100.0	100.0		<div></div>
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jun 2018	<div></div>		90.0	90.0		<div></div>
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			3	2.5	2	2	4.5	1	2.5	2	3.5	2.5	0.5	1.5	1	1	3	5	2	-	Jun 2018	-	-	2.00	2.00	10	<div></div>
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			1	1	1	0	1	0	0	0	2	2	0	0	1	1	1	0	0.5	-	Jun 2018	-	-	0.50	0.50	2	<div></div>
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			135	105	140	91	106	97	99	81	125	173	104	102	113	280	118	104	112	-	Jun 2018	-	-	112	112		<div></div>
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	=> No	0.0	0.0	8	6	11	6	4	10	3	7	8	7	7	3	9	4	3	7	6	4	Jul 2018	-	-	4	4	20	<div></div>
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0.0	0.0	0	4	21	7	0	0	3	61	46	129	0	0	0	0	0	0	0	15	Jul 2018	15	0	0	15	15	<div></div>
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			45	42	34	42	40	27	49	24	26	47	29	30	38	34	36	35	24	55	Jul 2018	36	18	1	55	150	<div></div>
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			61	75	79	79	91	83	82	74	59	75	67	73	78	76	81	89	71	97	Jul 2018	61	34	2	97		<div></div>

Medicine Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date		
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	EC	AC				SC
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	-	-	0.17	0.12		
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	0	1	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0.0	0.0	0.0	0	0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	6	2	3	11	3	5	2	8	2	3	4	6	0	7	0	1	1	1	Jul 2018	0.0	0.0	1.0	1	3	
Pt. Experience - Cancellations	Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	37	41	28	35	63	31	62	41	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	Jul 2018	-	-	-	-		
Pt. Experience - Cancellations	Urgent Cancelled Operations	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0.00	0.00	0.00	0.00	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour waits (%)	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	81.0	85.1	Site S/C	83.1	81.1	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			1769	1721	1662	1742	1580	1483	1280	1257	1636	1714	2188	2257	0	2635	1935	2814	2661	2294	Jul 2018	2202	3	89	2294	9704	
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	0.0	0.0	Site S/C	0	0	
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.0	15.0	<div></div>	<div></div>	<div></div>	<div></div>	-	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	14.0	15.0	Site S/C	14	14	
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60.0	60.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	76.0	53.0	Site S/C	62	66	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	-	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	4.7	5.7	Site S/C	5.2	4.8	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	6.2	8.5	Site S/C	7.4	7.3	
Emergency Care & Pt. Flow	WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	129	107	110	159	242	111	127	90	143	207	208	163	160	196	173	219	195	165	Jul 2018	121	44		165	752	
Emergency Care & Pt. Flow	WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	13	5	0	12	6	1	0	1	4	6	11	5	4	21	6	6	10	2	Jul 2018	2	0		2	24	
Emergency Care & Pt. Flow	WMAS - Turnaround Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	0.08	0.00		0.04	0.13	
Emergency Care & Pt. Flow	WMAS - Emergency Conveyances (total)	No			4034	4206	4137	4376	4254	4429	4278	4174	4557	4424	4725	4561	4081	4487	4308	4539	4306	4685	Jul 2018	2362	2323		4685	17838	
RTT	RTT - Admitted Care (18-weeks) (%)	=> %	90.0	90.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	-	95.0	97.8	96.1		
RTT	RTT - Non Admitted Care (18-weeks) (%)	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	-	65.2	91.1	76.3		
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	-	85.5	95.2	89.0		
RTT	RTT - Backlog	<= No	0	0	897	622	610	479	497	467	538	407	288	398	504	480	497	509	524	545	632	644	Jul 2018	0	540	104	644		
RTT	Patients Waiting >52 weeks	<= No	0	0	0	1	1	2	1	7	4	1	0	0	0	0	1	0	0	2	0	1	Jul 2018	0	0	1	1		
RTT	Treatment Functions Underperforming	<= No	0	0	10	10	9	7	8	9	7	8	5	5	6	6	6	6	6	5	4	6	Jul 2018	0	4	2	6		
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	-	0.14	0.25	0.16		

Medicine Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		EC	AC	SC			
Data Completeness	Open Referrals	No			76,880	76,278	76,984	79,971	81,548	83,160	84,417	85,453	62,769	63,236	64,194	65,058	65,968	66,860	68,013	68,328	69,652	70,530	Jul 2018	15,277	29,385	25,868	70530		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Req	No			33,572	35,739	36,247	36,822	37,760	39,488	40,216	40,844	35,242	36,135	37,044	37,620	39,394	40,207	40,464	41,127	41,878	42,187	Jul 2018	13,031	17,285	11,871	42187		
Workforce	PDRs - 12 month rolling (%)	=> %	95.0	95.0																			Jul 2018	81.7	76.74	-		65.8	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																			Jul 2018	77.05	87.69	-		82.8	
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.15	3.15																			Jul 2018	5.10	4.95	-	5.01	4.90	
Workforce	Sickness Absence - In month	<= No	3.15	3.15																			Jul 2018	6.12	5.89	-	5.98	5.55	
Workforce	Sickness Absence - Long Term - In month	No			33	40	53	59	48	45	54	49	51	49	63	64	46	40	54	55	61	65	Jul 2018	23	41	0	65	235	
Workforce	Sickness Absence - Short Term - In month	No			207	182	66	68	80	131	145	157	173	233	236	219	203	212	163	175	155	163	Jul 2018	82	81	0	163	656	
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100	100																			Jul 2018	83.4	76.5	-		67.46	
Workforce	Mandatory Training (%)	=> %	95.0	95.0																			Jul 2018	87.55	87.16	-		86.6	
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	-	-	-	-	-	2.2	-	-	-	6.2	-	-	-	1.6	-	Jun 2018	1.45	1.71	-		1.7	
Workforce	New Investigations in Month	No			1	2	3	0	0	1	1	0	0	1	2	2	0	0	0	2	4	1	Jul 2018	0	1	0	1		
Workforce	Nurse Bank Fill Rate %	=> %	100	100	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	Apr 2016				85		
Workforce	Nurse Bank Shifts Not Filled (number)	<= No	0	0	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	Apr 2016				710		
Workforce	Medical Staffing - Number of instances when junior rotas not fully filled	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jan-00				-	-	
Workforce	Your Voice - Response Rate (%)	No			-->	-->	-->	-->	-->	11.8	-->	-->	-->	-->	-->	9	-->	-->	-->	-->	-->	-->	Jan 2018	9.6	8.5	0.0	9.0		
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.51	3.90	3.58	3.68		

Surgical Services Group	
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Section	Indicator	Measure	Trajectory	
			Year	Month
Patient Safety - Inf Control	C. Difficile	<= No	7	1
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80	80
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80	80
Patient Safety - Harm Free Care	Number of DOLS raised	No		
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No		
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No		
Patient Safety - Harm Free Care	Number DOLS rolled over from previous month	No		
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No		
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No		
Patient Safety - Harm Free Care	Falls	<= No	0	0
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0
Patient Safety - Harm Free Care	Grade 2,3 or 4 Pressure Ulcers (hospital acquired avoidable)	<= No	0	0
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0
Patient Safety - Harm Free Care	Never Events	<= No	0	0
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98.0
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%		



























































































































































































Previous Months Trend																	
F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J
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0	2	1	3	0	12	7	6	15	12	9	7	9	4	11	14	8	7
0	2	1	3	0	12	7	6	15	12	9	7	9	4	11	14	8	7
0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1
0	0	1	4	0	3	1	2	1	1	0	0	0	0	0	2	1	1
0	1	0	3	0	6	5	2	2	1	0	0	3	0	1	5	4	1
0	0	1	0	0	0	0	0	0	1	0	1	0	0	0	0	0	1
6	6	10	7	11	11	4	5	5	10	10	17	7	15	16	9	6	9
0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	2	0	0
2	1	1	3	0	2	0	0	2	2	1	2	2	3	2	2	0	3
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0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0
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6.3	5.7	6.2	6.5	6.3	7.3	6.9	6.0	6.0	5.4	6.1	6.1	7.1	5.5	7.2	5.8	6.1	-
5.95	5.84	5.83	5.86	5.92	5.98	6.09	6.1	6.1	6.21	6.23	6.24	6.3	6.28	6.36	6.3	6.28	-

Data Period	Directorate					Month	Year To Date	Trend
	GS	SS	TH	An	O			
Jul 2018	0	0	0	0	0	0	1	
Jul 2018	0	0	0	0	0	0	0	
Jul 2018	94.3	94.8	-	0	60	92.4		
Jul 2018	85.8	87.9	-	80	81.4	86.1		
Jul 2018	3	0	0	4	0	7	40	
Jul 2018	3	0	0	4	0	7	40	
Jul 2018	0	0	0	1	0	1	3	
Jul 2018	1	0	0	0	0	1	4	
Jul 2018	0	0	0	1	0	1	11	
Jul 2018	1	0	0	0	0	1	1	
Jul 2018	3	3	0	1	2	9	40	
Jul 2018	0	0	0	0	0	0	2	
Jul 2018	1	1	0	1	0	3	7	
Jul 2018	97.3	98.6	-	99.4	97.4	97.8		
Jul 2018	100	100	100	100	100	100.0		
Jul 2018	-	100	100	-	100	100.0		
Jul 2018	-	100	100	-	100	100.0		
Jul 2018	0	0	0	0	0	0	0	
Jul 2018	0	0	0	0	0	0	0	
Jul 2018	0	0	0	0	1	1	4	
May 2018	60	50	-	100	-	61.5		
Jun 2018						6.1		
Jun 2018							6.3	

Surgical Services Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate					Month	Year To Date		
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	GS	SS	TH	An				O
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jun 2018	96.2	-	-	-	-	96.22		
Clinical Effect - Cancer	2 weeks (Breast Symptomatic)	=> %	93.0	93.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jun 2018	96.9	-	-	-	-	96.92		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jun 2018	96.6	-	-	-	-	96.55		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jun 2018	95.2	-	-	-	-	95.24		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			8	2	2	5	3	8	3	2	6	4	8	10	4	4	3	9	3	-	Jun 2018	-	-	-	-	-	2.5	14	
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			2	1	1	1	0	2	2	0	2	0	3	3	1	0	1	2	1	-	Jun 2018	1	-	0	-	-	1	3	
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			193	105	119	114	98	134	108	84	110	0	119	126	112	90	130	137	119	-	Jun 2018	119	-	0	-	-	119		
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	=> No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0	-	0	-	-	0	0		
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	39	6	0	2	0	0	0	0	0	0	0	0	0	0	Jul 2018	0	0	0	0	0	0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			25	36	24	29	20	28	29	18	16	28	22	24	25	32	24	23	27	25	Jul 2018	12	2	2	1	8	25	99	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			63	66	78	61	51	57	50	38	40	36	47	47	52	50	45	47	57	57	Jul 2018	30	7	3	3	14	57		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2018	0.83	0.92	-	-	0.59	0.65			
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	2	0	0	0	Jul 2018	0	0	0	0	0	0	2	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	49	45	32	49	38	41	28	37	35	35	24	20	29	41	24	44	17	13	Jul 2018	6	3	0	0	4	13	98	
Pt. Experience - Cancellations	Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	75.3	75.3	76.4	75.8	77.9	73.9	74.7	74.8	75.8	77.1	71.1	72.6	75	73.5	74.6	74.3	75.7	75.4	Jul 2018	75.5	79.4	-	91.3	69.8	75.44		
Pt. Experience - Cancellations	Urgent Cancelled Operations	No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0	0	0	0	0	0	0		
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (%)	%	95.0	95.0	99.3	98.1	97.6	96.8	96.7	97.5	97.5	99.2	99.8	99.4	99.6	99.5	97.8	97.5	98.6	98.5	97.9	99.3	Jul 2018	-	-	-	-	99.3	-	-	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	<= No	0	0	68	112	137	109	93	106	69	73	84	80	89	66	0	179	160	148	110	117	Jul 2018	68	41	0	0	8	117	535	
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	-	-	-	-	0	-	-		
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	3.0	3.3	3.3	3.0	3.7	3.6	4.3	5.4	3.9	-	5.0	5.1	4.6	6.1	4.9	5.5	5.8	5.6	Jul 2018	-	-	-	-	5.58	-	-	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	1.1	1.7	2.0	2.4	2.7	2.8	2.3	2.0	1.0	2.4	1.3	1.8	0.7	1.1	5.0	3.6	4.1	4.3	Jul 2018	-	-	-	-	4.3	-	-	
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15	15	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	-	-	-	-	8	0	0	
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jul 2018	-	-	-	-	89	-	-	
Emergency Care & Pt. Flow	Hip Fractures BPT (Operation < 36 hours of admissions)	=> %	85.0	85.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2018						85.7	82.0		

Surgical Services Group	
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Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		GS	SS	TH	An	O			
RTT	RTT - Admitted Care (18-weeks) (%)	=> %	90.0	90.0																	Jul 2018	73.0	54.7	-	-	80.3	72.2				
RTT	RTT - Non Admitted Care (18-weeks) (%)	=> %	95.0	95.0																	Jul 2018	90.6	94.2	-	-	93.9	92.8				
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0																	Jul 2018	92.3	88.5	-	-	93.2	92.1				
RTT	RTT - Backlog	<= No	0	0	1153	1167	1304	1204	1233	1233	1385	1443	1447	1264	1271	1348	1370	1397	1333	1293	1285	600	309	0	0	440	1349				
RTT	Patients Waiting >52 weeks	<= No	0	0	2	2	4	1	1	1	5	9	4	7	5	2	0	4	3	3	2	5	1	0	0	0	4	5			
RTT	Treatment Functions Underperforming	<= No	0	0	16	14	14	16	18	16	17	17	16	17	16	15	17	15	16	15	13	15	7	6	0	0	2	15			
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0																		Jul 2018	0.8	-	-	-	-	0.83			
Data Completeness	Open Referrals	No			118,262	121,184	123,687	126,992	129,204	131,460	133,412	135,263	136,924	139,237	140,979	142,818	144,613	146,703	149,307	151,864	154,830	53,924	17,927	0	6,676	78,568	157,125				
Data Completeness	Open Referrals without Future Activity/ Waiting List: Reduced	No			48,985	51,471	53,057	55,792	57,290	59,198	60,880	63,030	64,933	67,111	68,385	70,228	71,798	73,079	75,110	76,718	78,179	30,452	9,172	0	4,404	35,946	79,974				
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																	Jul 2018	89.7	91.9	93.3	74.4	96.7		78.9			
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																	Jul 2018	85.7	81.8	-	80	73.6		81.3			
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.15	3.15																	Jul 2018	4.4	5.9	5.9	4.2	2.0	4.6	4.6			
Workforce	Sickness Absence - In Month	<= %	3.15	3.15																	Jul 2018	4.9	5.2	6.8	4.4	1.6	4.6	4.5			
Workforce	Sickness Absence - Long Term - In Month	No			33	32	30	41	38	51	50	47	49	47	34	47	42	48	43	38	42	47	13.0	9.0	12.0	12.0	0.0	47.0	170.0		
Workforce	Sickness Absence - Short Term - In Month	No			149	138	61	50	55	96	96	119	159	170	172	151	160	131	123	124	123	130	43.0	42.0	22.0	22.0	0.0	130.0	500.0		
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100	100																	Jul 2018	86.7	93.8	95.9	96.2	90.9	92.2	89.8			
Workforce	Mandatory Training	=> %	95.0	95.0																	Jul 2018	89.3	87.7	94.4	93.5	90.9		90.7			
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	-	-	-	-	-	2.78	-	-	-	6.13	-	-	-	2.06	-	2.3	1.7	2.6	2.0	1.6		2.0		
Workforce	New Investigations in Month	No			1	2	2	0	0	2	2	2	4	1	0	2	1	1	3	0	1	1	1	0	0	0	0	1			
Workforce	Nurse Bank Fill Rate	=> %	100.0	100.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						88.03	88		
Workforce	Nurse Bank Shifts Not Filled	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						238	238		
Workforce	Medical Staffing - Number of instances when junior rotas not fully filled	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						-	-		
Workforce	Your Voice - Response Rate	No			-->	-->	--<	-->	-->	15.3	--<	-->	-->	--<	-->	16.2	-->	--<	-->	-->	--<	-->	18.9	12.8	8.1	15.3	21.8	16.2			
Workforce	Your Voice - Response Score	%			-->	-->	--<	-->	-->	-->	--<	-->	-->	--<	-->	-->	--<	-->	-->	--<	-->	3.53	3.29	3.85	3.6	3.69	3.79				













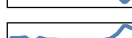
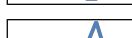


Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate			Month	Year To Date	Trend
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M		J	J	G				M	P
Patient Safety - Inf Control	C. Difficile	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.00	80.00	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	98			98.0	0																
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80.00	80.00	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	-	97		97.1	0																
Patient Safety - Harm Free Care	Number of DOLS raised	No			<div><div></div><div></div><div>1</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			<div><div></div><div></div><div>1</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			<div><div></div><div></div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Number DOLS rolled over from previous month	No			<div><div></div><div></div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			<div><div></div><div></div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Number of DOLS applications the LA disagreed with	No			<div><div></div><div></div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			<div><div></div><div></div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jun 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Falls	<= No	0	0	<div><div>1</div><div>1</div><div>0</div><div>3</div><div>1</div><div>0</div><div>0</div><div>0</div><div>1</div><div>1</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>1</div><div>1</div><div>1</div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	1	1	3																
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0	<div><div></div><div></div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Grade 2,3 or 4 Pressure Ulcers (hospital aquired avoidable)	<= No	0	0	<div><div></div><div></div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>1</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>2</div><div>0</div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	0	0	2																
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	97	97		96.9	0																
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	100	100		100.0	0																
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	100	-		100.0	0																
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	100	-		100.0	0																
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	0	0	0																
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	2	0	2	5																

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Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date		
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	G	M				P
Patient Safety - Obstetrics	Caesarean Section Rate - Total	<= %	25.0	25.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	<div>29</div>	<div></div>	29.1	26.7	<div></div>	
Patient Safety - Obstetrics	Caesarean Section Rate - Elective	%			<div>9</div>	<div>8</div>	<div>9</div>	<div>8</div>	<div>9</div>	<div>7</div>	<div>8</div>	<div>8</div>	<div>9</div>	<div>9</div>	<div>5</div>	<div>7</div>	<div>10</div>	<div>8</div>	<div>10</div>	<div>10</div>	<div>9</div>	<div>9</div>	Jul 2018	<div></div>	<div>8.9</div>	<div></div>	8.9	9.4	<div></div>
Patient Safety - Obstetrics	Caesarean Section Rate - Non Elective	%			<div>17</div>	<div>17</div>	<div>17</div>	<div>15</div>	<div>17</div>	<div>18</div>	<div>15</div>	<div>19</div>	<div>21</div>	<div>18</div>	<div>21</div>	<div>15</div>	<div>19</div>	<div>18</div>	<div>17</div>	<div>18</div>	<div>15</div>	<div>20</div>	Jul 2018	<div></div>	<div>20</div>	<div></div>	20.2	17.4	<div></div>
Patient Safety - Obstetrics	Maternal Deaths	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	<div>0</div>	<div></div>	0	2	<div></div>
Patient Safety - Obstetrics	Post Partum Haemorrhage (>2000ml)	<= No	48	4	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	<div>1</div>	<div></div>	1	6	<div></div>
Patient Safety - Obstetrics	Admissions to Neonatal Intensive Care	<= %	10.0	10.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	<div>2.9</div>	<div></div>	2.9	2.0	<div></div>
Patient Safety - Obstetrics	Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	<div>8.2</div>	<div></div>	8.2		<div></div>
Patient Safety - Obstetrics	Stillbirth (Corrected) Mortality Rate (per 1000 babies)	Rate1			<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>1</div>	<div>1</div>	<div>2</div>	<div>1</div>	<div>1</div>	<div>2</div>	<div>3</div>	<div>3</div>	<div>2</div>	<div>1</div>	Jul 2018	<div></div>	<div>2.1</div>	<div></div>	2.1		<div></div>
Patient Safety - Obstetrics	Neonatal Death (Corrected) Mortality Rate (per 1000 babies)	Rate1			<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>2</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>2</div>	<div>2</div>	Jul 2018	<div></div>	<div>4.1</div>	<div></div>	4.1		<div></div>
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	<div>93</div>	<div></div>	93.0		<div></div>
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (%) - National Definition	=> %	90.0	90.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	<div></div>	<div>123</div>	<div></div>	123.2		<div></div>
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100.0	97.0	<div></div>	<div>N/A</div>	<div>N/A</div>	<div>N/A</div>	<div></div>	<div></div>	<div>N/A</div>	<div>N/A</div>	<div></div>	<div></div>	<div></div>	<div></div>	<div>N/A</div>	<div>N/A</div>	<div></div>	<div></div>	<div>-</div>	<div>-</div>	May 2018	<div>-</div>	<div>0</div>	<div>-</div>	0.0		<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			<div>5.4</div>	<div>4.7</div>	<div>4.6</div>	<div>4.5</div>	<div>4.8</div>	<div>4.3</div>	<div>3.7</div>	<div>4.3</div>	<div>4.3</div>	<div>5.5</div>	<div>4.8</div>	<div>5.0</div>	<div>4.4</div>	<div>4.7</div>	<div>4.9</div>	<div>4.4</div>	<div>4.9</div>	<div>-</div>	Jun 2018	<div></div>	<div></div>	<div></div>	4.9		<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			<div>4.9</div>	<div>4.8</div>	<div>4.8</div>	<div>4.7</div>	<div>4.7</div>	<div>4.7</div>	<div>4.7</div>	<div>4.7</div>	<div>4.6</div>	<div>4.6</div>	<div>4.6</div>	<div>4.7</div>	<div>4.6</div>	<div>4.6</div>	<div>4.6</div>	<div>4.6</div>	<div>4.6</div>	<div>-</div>	Jun 2018	<div></div>	<div></div>	<div></div>	4.6	4.6	<div></div>
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div>-</div>	Jun 2018	<div>100</div>	<div></div>	<div>-</div>	100.0		<div></div>
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div>-</div>	Jun 2018	<div>96</div>	<div></div>	<div></div>	96.2		<div></div>
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div>-</div>	Jun 2018	<div>65</div>	<div></div>	<div></div>	64.7		<div></div>
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			<div>4.5</div>	<div>3.5</div>	<div>4.5</div>	<div>3</div>	<div>2</div>	<div>2</div>	<div>5.5</div>	<div>5.5</div>	<div>1.5</div>	<div>6</div>	<div>1</div>	<div>1.5</div>	<div>3.5</div>	<div>1</div>	<div>0.5</div>	<div>3</div>	<div>3</div>	<div>-</div>	Jun 2018	<div>3</div>	<div>-</div>	<div>0</div>	3	6.5	<div></div>
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			<div>1.5</div>	<div>3.5</div>	<div>3</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>3</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>-</div>	Jun 2018	<div>0</div>	<div>-</div>	<div>0</div>	0	0	<div></div>
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			<div>150</div>	<div>162</div>	<div>126</div>	<div>139</div>	<div>95</div>	<div>102</div>	<div>184</div>	<div>141</div>	<div>90</div>	<div>0</div>	<div>86</div>	<div>74</div>	<div>99</div>	<div>133</div>	<div>73</div>	<div>89</div>	<div>101</div>	<div>-</div>	Jun 2018	<div>101</div>	<div>-</div>	<div>0</div>	101		<div></div>
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	=> No	0	0	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	Jul 2018	<div>0</div>	<div>-</div>	<div>0</div>	0	0	<div></div>

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Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date			
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	G	M				P	
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0			0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			14	12	13	8	12	6	12	8	8	7	4	19	7	16	12	6	6	8	Jul 2018	3	3	2	8	32		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			24	22	19	12	15	14	14	17	15	13	19	29	23	27	26	19	20	18	Jul 2018	0	0	0	18			
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2018	0.6		-	0.4			
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0			0	0		
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	12	10	12	5	17	4	8	3	10	8	14	11	8	5	6	6	3	1	Jul 2018	1			1	16		
Pt. Experience - Cancellations	Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	83	81	83	82	82	80	79	77	73	79	75	73	80	70	74	77	81	80	Jul 2018	80	-		79.7			
Pt. Experience - Cancellations	Urgent Cancelled Operations	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2018	0	-	0	0	0		
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			23	15	9	10	7	11	4	13	15	32	27	21	0	11	9	23	8	13	Jul 2018	8	0	5	13	53		
RTT	RTT - Admitted Care (18-weeks)	=> %	90.0	90.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2018	88			88.4			
RTT	RTT - Non Admitted Care (18-weeks)	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2018	91			90.8			
RTT	RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2018	93			93.2			
RTT	RTT - Backlog	<= No	0	0	96	96	98	81	97	91	91	90	81	77	56	47	50	90	94	109	135	125	Jul 2018	125			125			
RTT	Patients Waiting >52 weeks	<= No	0	0	0	1	0	0	0	0	0	0	0	0	1	2	5	1	1	0	1	0	Jul 2018	0			0			
RTT	Treatment Functions Underperforming	<= No	0	0	1	2	1	1	1	1	1	2	2	1	2	2	2	1	2	1	2	2	Jul 2018	2			2			
RTT	Acute Diagnostic Waits in Excess of 6-weeks	<= %	0.1	0.1	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2018	-			-			

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	G	M	P			
Data Completeness	Open Referrals	No			28,605	29,483	30,091	30,838	31,759	32,486	33,158	33,869	34,430	34,844	35,501	36,199	36,730	37,586	38,615	39,768	40,844	41,619	Jul 2018	10,385	20,815	10,409	41619	
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			13,522	14,598	15,253	15,849	16,571	17,454	17,950	18,589	19,315	19,739	20,322	20,867	21,365	22,234	23,118	23,836	24,867	25,292	Jul 2018	6,357	14,959	3,976	25292	
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																			Jul 2018	87	82	92	78.6	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																			Jul 2018	89	100	94	89.7	
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15																			Jul 2018	3.4	5.1	4.1	4.5	
Workforce	Sickness Absence - in month	<= %	3.15	3.15																			Jul 2018	3.3	6.5	4.6	5.3	
Workforce	Sickness Absence - Long Term - in month	No			23	29	27	36	28	31	30	29	34	30	30	38	35	35	25	37	40	42	Jul 2018	3	23	16	42.0	
Workforce	Sickness Absence - Short Term - in month	No			83	105	50	41	40	88	89	91	128	135	131	137	127	106	95	84	92	85	Jul 2018	5	49	31	85.0	
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0																			Jul 2018	90	81	84	83.33	
Workforce	Mandatory Training	=> %	95.0	95.0																			Jul 2018	89	91	93	91.0	
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	-	-	-	-	-	2.4	-	-	-	6.3	-	-	-	1.9	-	Jun 2018	2.8	2	1.5	1.9	
Workforce	New Investigations in Month	No			0	1	3	1	0	0	0	0	1	1	1	0	0	0	0	0	1	0	Jul 2018	0	0	0	0	
Workforce	Admin & Clerical Bank Use (shifts)	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Apr 2016				98	
Workforce	Admin & Clerical Agency Use (shifts)	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Apr 2016				40	
Workforce	Medical Staffing - Number of instances when junior rotas not fully filled	0	0																									
Workforce	Your Voice - Response Rate	No			-->	-->	-->	-->	-->	16	-->	-->	-->	-->	-->	17	-->	-->	-->	-->	-->	-->	Jan 2018	15	16	18	17	
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.5	3.7	3.6	3.7	

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate				Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		G	M	P				
WCH Group Only	HV (C1) - No. of mothers who receive a face to face AN contact with a HV at >=28 weeks of pregnancy	No			-	-	157	250	268	302	317	260	273	275	192	339	321	292	383	362	338	-	Jun 2018		-		338	1083		
WCH Group Only	HV (C2) - % of births that receive a face to face new birth visit by a HV <=14 days	=> %	95.0	95.0	88.3	-	83.9	80.8	87.2	88	87	81.6	92.5	88.9	90.7	88.9	81	88.8	88.1	89.3	90.8	-	Jun 2018		-		90.83	89.42		
WCH Group Only	HV (C3) - % of births that receive a face to face new birth visit by a HV >days	%			9.56	4.81	13.5	16.9	9.89	10.5	9	11.4	7.99	6.48	7.91	6.5	9.35	6.61	6.74	7.03	6.11	-	Jun 2018		-		6.11	6.64		
WCH Group Only	HV (C4) - % of children who received a 12 months review by 12 months	=> %	95.0	95.0	97.2	96.2	89.6	92.2	94.6	93.8	89.8	91.7	95.9	95.1	93.7	93.2	93.6	93.8	95.1	94	95.3	-	Jun 2018		-		95.28	94.8		
WCH Group Only	HV (C5) - % of children who received a 12 months review by the time they were 15 months	%			1.29	95.8	92.1	89.2	88.7	80.3	97.8	89.1	0	96.7	97.2	97.1	97.3	97.1	96	97.5	96.4	-	Jun 2018		-		96.39	96.62		
WCH Group Only	HV (C6i) - % of children who received a 2 - 2.5 year review	=> %	95.0	95.0	92.1	90.1	86.1	80.5	88	86.8	81.3	89.2	92.7	93.8	93.1	93.4	92.8	93.6	95.5	94.4	93	-	Jun 2018		-		93.02	94.32		
WCH Group Only	HV (C6ii) - % of children who receive a 2 - 2.5 year review using ASQ 3	%			82.5	84.2	84.6	78.2	84.5	84.2	80.2	85.5	87.1	81	91.7	92.4	92	92.7	94.8	93.1	91.2	-	Jun 2018		-		91.21	93.05		
WCH Group Only	HV (C7) - No. of Sure Start Advisory Boards / Children's Centre Boards with a HV presence	=> No	100	100	1	1	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	Sep 2017		-		1	1		
WCH Group Only	HV (C8) - % of children who receive a 6 - 8 week review	=> %	95.0	95.0	-	95.5	100	98.8	98.7	99.7	100	98.6	99.7	98.9	99.3	99	97.6	99.1	100	99.4	99.7	-	Jun 2018		-		99.71	99.71		
WCH Group Only	HV - % of infants for whom breast feeding status is recorded at 6 - 8 week check	=> %	100	100	-	86.1	99.4	100	98.7	99.1	98.8	99.3	99.2	97	98	97.3	98.3	99.1	100	99.4	99.1	-	Jun 2018		-		99.14	99.51		
WCH Group Only	HV - % of infants being breastfed at 6 - 8 weeks	%			-	42.2	37.6	43.5	37.8	42.9	35.6	42.2	37.9	23.3	18.4	20.1	38.5	22.6	23.4	21.5	36.5	-	Jun 2018		-		36.49	27.17		
WCH Group Only	HV - % HV staff who have completed mandatory training at L1,2 or 3 in child protection in last 3 years	=> %	95.0	95.0	100	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Feb 2017		100		100	100		
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 10 - 14 day developmental check	No			-	357	365	390	361	401	403	329	386	388	343	342	290	336	357	375	355	-	Jun 2018		-		355	1087		
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 10 - 14 day developmental check	=> %	100	100	-	91.3	-	-	-	97.4	99.5	98.5	99.2	99.2	95.8	95	98.3	99.4	99.7	99.7	100	-	Jun 2018		100		100	99.82		
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 6 - 8 week developmental check	No			-	322	205	197	212	210	326	263	223	246	209	290	94	99	326	364	209	-	Jun 2018		-		209	899		
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 6 - 8 week developmental check	=> %	100	100	-	97.9	-	-	-	98.4	98.5	63.8	56.3	62.9	65.3	67.6	31.2	29.7	98.5	97.8	58.7	-	Jun 2018		59		58.71	84.89		
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 9 - 12 months developmental check	No			-	-	26	20	19	28	317	24	21	27	20	26	305	225	52	15	12	-	Jun 2018		-		12	79		
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 9 - 12 months developmental check	=> %	100	100	-	-	-	-	-	97.8	94.9	6.05	6.31	6.85	6.1	6.91	89.4	60.5	14.7	3.89	3.26	-	Jun 2018		3.3		3.26	7.13		
WCH Group Only	HV - movers into provider <1 year of age to be checked <=14 d following notification to HV service	No			-	-	125	171	151	134	193	125	135	141	102	174	64	68	82	82	58	-	Jun 2018		-		58	222		
WCH Group Only	HV - all untested babies <1 year of age will be offered NBBS screening & results to HV.	Y/N			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jan-00							

Pathology Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	Trend
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		HA	HI	B	M	I			
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	0	0	0	0	0	0	0	0		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jun 2018	-	-	-	-	-	-	-	-		
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jun 2018	-	-	-	-	-	-	-	-		
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jun 2018	-	-	-	-	-	-	-	-		
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	0	0	0	0	0	0	0	0		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	1	0	0	0	0	0	0	0		
Pt. Experience - Cancellations	Urgent Cancelled Operations	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	-	-	-	-	-	-	-	-		
Data Completeness	Open Referrals	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	2,536	0	2,835	2	2,846	8,219	8,219			
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	1,381	0	1,449	2	1,290	4,122	4,122			
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	94.4	89.2	91.3	91.3	100	90.56	90.56			
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	80	87.5	100	100	100	93.02	93.02			
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	2.53	1.99	4.77	3.26	3.18	3.61	3.63			
Workforce	Sickness Absence - In Month	<= %	3.15	3.15	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	0.6	3.1	4.4	2.1	5.0	3.22	2.89			
Workforce	Sickness Absence - Long Term - In Month	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	0.0	1.0	3.0	1.0	1.0	7	17			
Workforce	Sickness Absence - Short Term - In Month	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	5.0	2.0	18.0	4.0	0.0	33	148			
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	91.6	100	88.3	97.1	87.8	90.6	89.5			
Workforce	Mandatory Training	=> %	95.0	95.0	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	95.2	95.4	94.1	93.3	96.1	95.2	95.2			
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jun 2018	2.2	1.42	1.86	2.09	1.29	2.0	2.0			
Workforce	New Investigations in Month	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jul 2018	1	0	0	0	0	1	1			
Workforce	Admin & Clerical Bank Use (shifts)	<= No	0	0	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Apr 2016						265	265			
Workforce	Admin & Clerical Agency Use (shifts)	<= No	0	0	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Apr 2016						0	0			
Workforce	Your Voice - Response Rate	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jan 2018	7.4	17.9	17.7	22.7	28	16	16			
Workforce	Your Voice - Overall Score	No			<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	Jan 2017	3.54	3.32	3.89	4.01	3.93	3.82	3.82			

Imaging Group

[illegible]

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	Trend
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		AT	IB	IC	CT	CM			
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.0	80.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	-	-	-	-	52	-																			
Patient Safety - Harm Free Care	Number of DOLS raised	No			<div><div>0</div><div>5</div><div>4</div><div>4</div><div>1</div><div>3</div><div>2</div><div>5</div><div>14</div><div>4</div><div>1</div><div>10</div><div>5</div><div>3</div><div>7</div><div>11</div><div>5</div><div>10</div></div>	Jul 2018	0	10	0	-	0	-	-																		
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			<div><div>0</div><div>5</div><div>4</div><div>4</div><div>1</div><div>3</div><div>2</div><div>5</div><div>14</div><div>4</div><div>1</div><div>10</div><div>5</div><div>3</div><div>7</div><div>11</div><div>5</div><div>10</div></div>	Jul 2018	0	10	0	-	0	-	-																		
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			<div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>2</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>1</div><div>0</div></div>	Jul 2018	0	0	0	-	0	-	-																		
Patient Safety - Harm Free Care	Number DOLS rolled over from previous month	No			<div><div>0</div><div>0</div><div>3</div><div>2</div><div>3</div><div>0</div><div>3</div><div>0</div><div>2</div><div>1</div><div>4</div><div>5</div><div>2</div><div>4</div><div>2</div><div>5</div><div>1</div><div>4</div></div>	Jul 2018	0	4	0	-	0	-	-																		
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			<div><div>0</div><div>0</div><div>2</div><div>2</div><div>4</div><div>0</div><div>1</div><div>2</div><div>3</div><div>3</div><div>0</div><div>2</div><div>1</div><div>1</div><div>0</div><div>1</div><div>1</div><div>0</div></div>	Jul 2018	0	0	0	-	0	-	-																		
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			<div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>1</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>2</div></div>	Jul 2018	0	2	0	-	0	-	-																		
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			<div><div>0</div><div>0</div><div>2</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	-	0	-	-																		
Patient Safety - Harm Free Care	Falls	<= No	0	0	<div><div>19</div><div>31</div><div>23</div><div>21</div><div>36</div><div>36</div><div>38</div><div>30</div><div>33</div><div>32</div><div>38</div><div>27</div><div>34</div><div>49</div><div>45</div><div>38</div><div>24</div><div>21</div></div>	Jul 2018	0	20	1	-	0	-	-																		
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0	<div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>1</div><div>2</div><div>1</div><div>0</div><div>1</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>2</div><div>0</div><div>1</div><div>1</div></div>	Jul 2018	0	1	0	-	0	-	-																		
Patient Safety - Harm Free Care	Grade 3 or 4 Pressure Ulcers (avoidable)	<= No	0	0	<div><div>2</div><div>1</div><div>5</div><div>1</div><div>1</div><div>1</div><div>0</div><div>3</div><div>1</div><div>1</div><div>0</div><div>2</div><div>1</div><div>0</div><div>2</div><div>0</div><div>2</div><div>2</div></div>	Jul 2018	0	2	0	-	0	-	-																		
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	0	-	0	-	-																		
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	0	0	-	0	-	-																		
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Jul 2018	0	1	0	-	0	-	-																		
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	<div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div><div>0</div></div>	Jul 2018	0	0	0	-	0	-	-																		
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			<div><div>1</div><div>1</div><div>4</div><div>3</div><div>8</div><div>4</div><div>10</div><div>2</div><div>7</div><div>6</div><div>4</div><div>14</div><div>5</div><div>5</div><div>3</div><div>5</div><div>3</div><div>7</div></div>	Jul 2018	3	1	2	-	1	-	-																		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			<div><div>6</div><div>6</div><div>9</div><div>10</div><div>12</div><div>9</div><div>11</div><div>8</div><div>8</div><div>8</div><div>9</div><div>14</div><div>11</div><div>10</div><div>10</div><div>9</div><div>7</div><div>9</div></div>	Jul 2018	3	4	1	-	1	-	-																		

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		AT	IB	IC	CT	CM			
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	98	90.6	98	-	86	<div></div>	-	<div></div>	
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	2.44	4.78	4	-	4.8	<div></div>	-	<div></div>	
Workforce	Sickness Absence - in month	<= %	3.15	3.15	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	4.01	4.27	3.8	-	5.5	<div></div>	-	<div></div>	
Workforce	Sickness Absence - Long Term - in month	No			24	24	24	19	19	15	24	21	26	36	35	36	32	32	29	26	25	34	Jul 2018	7	-	-	-	-	<div></div>	-	<div></div>
Workforce	Sickness Absence - Short Term - in month	No			93	82	57	60	57	78	84	76	121	128	135	146	133	103	91	85	97	105	Jul 2018	13	51	30	1	10	<div></div>	-	<div></div>
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	98.5	91.3	90	-	72	<div></div>	-	<div></div>	
Workforce	Mandatory Training	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2018	96.4	95.3	96	94	88	<div></div>	-	<div></div>	
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	-	-	-	-	-	2.1	-	-	-	3.7	-	-	-	2.1	-	Jun 2018	1.77	2.49	2.1	2.5	1.9	<div></div>	-	<div></div>
Workforce	New Investigations in Month	No			0	0	0	0	1	0	0	0	1	0	0	0	0	1	0	0	0	0	Jul 2018						<div></div>	-	<div></div>
Workforce	Nurse Bank Fill Rate	=> %	100	100	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Apr 2016	-	-	-	-	-	<div></div>	-	<div></div>	
Workforce	Nurse Bank Shifts Not Filled	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Apr 2016	-	-	-	-	-	<div></div>	-	<div></div>	
Workforce	Your Voice - Response Rate	No			-->	-->	-->	-->	-->	29	-->	-->	-->	-->	-->	24.4	-->	-->	-->	-->	-->	Jan 2018	23.8	22.2	27	-	-	<div></div>	-	<div></div>	
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.72	3.72	4	-	-	<div></div>	-	<div></div>	

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate						Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		AT	IB	IC	CT	CM				
Community & Therapies Group Only	DVT numbers	=> No	730	61	39	67	41	54	59	70	54	56	55	55	29	53	35	58	54	69	57	-	Jun 2018						-	-		
Community & Therapies Group Only	Adults Therapy DNA rate OP services	<= %	9	9	8.97	8.04	8.47	8.18	8.5	7.79	8.04	-	-	-	-	-	-	-	-	-	-	-	Aug 2017						-	-		
Community & Therapies Group Only	Therapy DNA rate Paediatric Therapy services	<= %	9	9	1.15	-	-	-	-	-	14.3	10.2	8.91	-	-	-	11.2	-	-	14.3	-	-	May 2018						-	-		
Community & Therapies Group Only	Therapy DNA rate S1 based OP Therapy services	<= %	9	9	10.7	10.1	11.1	10.9	10.3	9.98	11.1	10.7	11.5	11.5	14.9	14.7	11.5	14.3	11.2	10.2	10.5	8.89	Jul 2018						-	-		
Community & Therapies Group Only	STEIS	<= No	0	0	0	0	-	1	2	3	0	-	0	0	2	-	0	0	0	0	1	Jul 2018						-	-			
Community & Therapies Group Only	Green Stream Community Rehab response time for treatment (days)	<= No	15.0	15.0	14.3	15.5	15.5	16.7	18.3	18.5	19.4	15.5	14.7	12.4	15.3	13.2	19.6	21.5	25.6	22.9	22.4	26.1	Jul 2018						-	-		
Community & Therapies Group Only	DNA/No Access Visits	%			2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Jul 2018						-			
Community & Therapies Group Only	Baseline Observations for DN	=> %	100	100	59.2	56.3	66.8	58.2	51.8	56.3	56.1	52.4	52	61.7	59.2	70.4	76.4	87.5	88.6	94.5	94.2	95.2	Jul 2018						-	-		
Community & Therapies Group Only	Falls Assessments - DN Initial Assessments only	%			62	58	69	63	57	58	57	54	50	60	60	67	78	91	91	94	95	96	Jul 2018						-			
Community & Therapies Group Only	Pressure Ulcer Assessment - DN Initial Assessments only	%			65	63	77	68	63	65	66	62	59	72	70	78	81	92	93	95	96	96	Jul 2018						-			
Community & Therapies Group Only	MUST Assessments - DN Initial Assessments only	%			36	46	58	52	46	49	49	49	43	54	55	61	77	90	91	94	95	95	Jul 2018						-			
Community & Therapies Group Only	Dementia Assessments - DN Initial Assessments only	%			62	44	55	50	43	60	38	63	41	50	47	59	70	89	83	92	92	90	Jul 2018						-			
Community & Therapies Group Only	48 hour inputting rate - DN Service Only	%			93	94	92	90	93	92	93	93	94	96	94	95	94	96	94	95	94	-	Jun 2018						-			
Community & Therapies Group Only	Making Every Contact (MECC) - DN Initial Assessments only	%			382	460	488	467	453	428	420	369	556	398	337	424	365	461	496	483	493	528	Jul 2018						-	-		
Community & Therapies Group Only	Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload acquired)	No			8	6	5	8	4	7	4	3	6	4	4	2	4	4	3	1	1	1	Jul 2018						-	-		
Community & Therapies Group Only	Avoidable Grade 2 Pressure Ulcers (DN caseload acquired)	No			6	3	5	8	4	7	4	3	3	4	4	2	3	2	3	0	1	1	Jul 2018						-	-		
Community & Therapies Group Only	Avoidable Grade 3 Pressure Ulcers (DN caseload acquired)	No			2	2	0	0	0	0	0	0	1	0	0	0	1	2	0	0	0	0	Jul 2018						-	-		
Community & Therapies Group Only	Avoidable Grade 4 Pressure Ulcers (DN caseload acquired)	No			0	1	0	0	0	0	0	0	2	0	0	0	0	0	0	1	0	0	Jul 2018						-	-		

Corporate Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate							Month	Year To Date	Trend
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		SG	F	W	M	E	N	O			
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			11	14	3	9	5	10	2	8	4	9	8	12	8	8	5	5	4	6	Jul 2018	1	0	0	1	0	2	2	6	20	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			17	19	16	17	10	13	5	10	7	11	15	16	11	15	11	8	2	7	Jul 2018	2	0	0	1	0	2	2	7		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																		Jul 2018	83	91	95	89	96	97	86		78.3		
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		Jul 2018			95					100.0	95		
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15																		Jul 2018	3.42	2.42	2.11	4.10	3.49	5.25	5.40	4.40	4.48		
Workforce	Sickness Absence - in month	<= %	3.15	3.15																		Jul 2018	7.18	3.97	1.53	4.66	2.65	5.27	4.91	4.46	4.00		
Workforce	Sickness Absence - Long Term - in month	No			1	0	2	1	2	2	2	2	1	2	1	1	2	2	2	30	26	28	Jul 2018	5.00	0.00	1.00	4.00	0.00	18.00	0.00	28.00	86.00	
Workforce	Sickness Absence - Short Term - in month	No			8	8	3	2	3	1	4	10	4	5	7	15	11	12	4	61	76	79	Jul 2018	11.00	0.00	12.00	16.00	0.00	40.00	0.00	79.00	220.00	
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0																		Jul 2018	90.1	58.6	83.0	77.6	88.9	88.7	84.9	85.0	83.2		
Workforce	Mandatory Training	=> %	95.0	95.0																		Jul 2018	93	95	97	97	93	-	93	94.2	94		
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	-	-	-	-	-	2.7	-	-	-	15.5	-	-	-	2.1	-	Jun 2018	4	1	2	2	1	-	2	2.1	2	
Workforce	New Investigations in Month	No			1	4	6	0	2	1	1	0	0	1	1	0	2	2	0	1	3	2	Jul 2018	0	0	1	0	0	1	0	2		
Workforce	Your Voice - Response Rate	No			-->	-->	-->	-->	-->	21	-->	-->	-->	-->	-->	30	-->	-->	-->	-->	-->	-->	Jan 2018	57.8	46.9	54.6	35.2	36.4	23.4	18.5	29.7		
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.83	3.61	3.98	3.55	3.52	3.62	3.37	3.64		