Sandwell and West Birmingham Hospitals NHS

NHS Trust

Integrated Quality & Performance Report

Month Reported: December 2018

Reported as at: 29/1/2019

TRUST BOARD

Contents

Item	Page
At A Glance	
Patient Safety - Infection Control	3
Patient Safety - Harm Free Care	4
Patient Safety - Obstetrics	5
Clinical Effectiveness - Mortality & Readmissions	6
Clinical Effectiveness - Stroke Care & Cardiology	7
Clinical Effectiveness - Cancer Care	8
Patient Experience - Friends & Family Test, Mixed Sex Accommodation and Complaints	9
Patient Experience - Cancelled Operations	10
Emergency Care & Patient Flow	11

Item	Page
Referral To Treatment	12
Data Completeness	13
Workforce	14
CQUINS 2018-19 (Reported Quarterly)	15-16
Service Quality Performance Report - Local Quality Requirements 2018-19	17
Legend	18
Group Performance	19-37

December 2018

Infection Control

CDiff - compliant
• Nil C. Diff case reported during the month of December
• Year to date we have reported 10x cases vs a target of 22 hence tracking well below the target

• The annual target set by NHS England for 18/19 is at 29 (lower compared to last year's target of 30); based on year to date performance it is very likely that the Trust will over-achieve this target

MRSA - compliant
• Nil MRSA Bacteraemia were reported in December and there were nil cases year to date
• Annual target 18/19 set at zero.

MRSA Screening - compliant overall, but not in all groups/directorates
• Non-elective patients screening 83.7%
• Elective patients screening 81.7%
• Both indicators are compliant with currently set 80% target, although not in every group.

Elective screening, whilst compliant with standard at trust level, it is not compliant in PCCT and Medicine & EC. The Groups need to take forward with Infection Control lead to ensure improvement is visible, report back to OMC. Head of Performance discussed with IC nurse lead who will take forward with groups and consider appropriateness of the 80% target.

MSSA - compliant
• MSSA Bacteraemia (expressed per 100,000 bed days)
• December year to date position is in line with target at 5.9 vs 9.42 target

Harm Free Care

Safety thermometer - compliant
• From June 2018 the Patient Safety Thermometer reports only 'new harm'
• In December the Trust performance is at 98.4% on the 'new harm' basis, above the NHS Safety Thermometer target of 95%

Falls & Pressure Sores • x90 [x110] falls reported in December; the number of falls we have seen in October and November is showing an increased position from June and July, which were reporting below observed long term average of 77 per month, reducing to 90 in December.
• In month, there were 31 falls within community, 59 in acute settings. • Year to date there were 784 falls; the annual target remains at 804 until the Chief Nurse confirms new targets which are being considered currently; the Trust is likely to exceed current target by the year end. A 'falls summit' to take place in the new year to review and refresh falls reporting as well as look at potential fallers.
• Falls remain subject to ongoing CNO scrutiny and routine tracking of the Safety Plan on falls reduction; it is an integral part of 'ward dashboards'.

Pressure Ulcers - change in count/methodology (effective 1st April2019)
• The way in which PUs have been counted, based on avoidable PUs' is changing and all PUs become countable by the Trust no matter where acquired. This will therefore result in an increase of numbers reported; the Trust has only now started the change over • 74 PUs were reported in December on that new basis of counting. • Pressure ulcers rate per 1,000 bed days is at 2.4 (acute setting only rate)
• x42 PUs in the acute setting and 32x separate cases reported within the DN caseload.
• CNO keep in view as part of Safety Plan

Incidents • 1x Never event was reported in December; 3x cases year to date. The patient did not come to harm as the issue was identified on a timely basis.
• No medication error causing serious harm were reported in December
• 5x CAS alerts beyond the deadline • x6 serious incidents reported in December;
• Routine, collective review of all incidents in place and reported to the Q&S Cttee.

WHO Safer Surgery (Audit - brief and debrief - % lists where complete) - compliant
• As at December at 100% (100%) sustaining the target for a number of months now.
• Robust processes for monitoring performance during the month are paying off, however system issues have been identified with the 'clinical audit tool' which have been addressed by IT and the Clinical Effectiveness team.

VTE Assessments - not compliant
• Compliance off target in December having recovered in November. December assessments at 93.8% versus target of 95%.
• 458 eligible assessments were missed in December;

Obstetrics

C-section rate - not compliant, but within tolerance
• The overall Caesarean Section rate for December is 25.3% just above the 25% target, but within tolerance levels ; year to date performance now just above target of 25% at 26.4%. Elective and non-elective C-Section rates are within long term averages.
• Elective rates are at 9.7% (historical long term avg trend of 8% so trending to this) and Non-elective rates are 15.6% in the month slightly below long term avg historical rate of ~17%.
• Performance considered at Q&S & Board and to be kept in view.

Maternal Deaths • Regrettably, the Trust reports 1x maternal death in December;

• **Adjusted perinatal mortality rate** (per 1,000 births) for December is at 6.85 vs. threshold level of 8; year to date at 6.6 vs target of 8.0
• The indicator represents an in-month position and which, together with the small numbers involved provides for sometimes large variations.

The level of **births** in December was at 438; below levels seen in the same period of last year at 497

• **Post Partum Haemorrhage** (>2000ml) December reporting nil cases; with 9 cases year to date well within threshold and routinely compliant.

• **Puerperal Sepsis** rates for December is back down to previous levels following a spike in November.

Admissions to Neonatal Critical Care - compliant •
1.37% admissions to the NCC have been experienced in December; year to date this is at 1.57% against a target of 10% and well within threshold.

Breastfeeding - compliant • December month count is at 75.5% and over-achieving the 74% target.

Mortality & Readmissions

Mortality - alerts against Trust HSMR & Weekend rates at Sandwell
• The Trust overall RAMI for most recent 12-mth cumulative period is 105 (available data is as at Sept18)
• **RAMI for weekday and weekend** each at 102 and 114 respectively, still a clear outlier against weekend mortality rates.
• **SHMI** measure which includes deaths 30-days after hospital discharge is at 110 for the month of Jul2018 (latest available data)
• **HSMR** Mortality indicator an outlier at 129, which is outside statistical confidence limits for the last few months. Being addressed through the quality plan and resolution to known issues around "documentation" which are being worked through. Trust Board will continue to monitor routinely.

• **Deaths in Low Risk Diagnosis Groups** (RAMI) - month of September (latest available data) is at 61. This indicator measures in-month expected versus actual deaths so subject to larger month on month variations.
• **Crude in-month mortality rate** for November month is 1.2% [1.1%]; the rolling crude year to date mortality rate has come back to 1.2 in the last quarter against the longer term observed trend of 1.3
• There were x114 [x107] **deaths in our hospitals** in the month of November, slightly lower than last year same period, and less than in previous months.

Mortality Reviews within 42 Days - not compliant, but new process improving performance rapidly
• Mortality review rate in October at 82%, significantly higher than previous months mainly due to the introduction of the medical examiners in the review process. We are observing increasing rates month on month now.
• Revised Learning from Deaths arrangements are being implemented, which will provide for routine 100% review of all deaths in the Trust

Emergency Readmissions (in-hospital within 30 days)
• Reported at 7.7% for November in-month; with readmissions where patient is discharged and readmitted to the same speciality being at 3.6% and 4.1% where readmitted and discharged speciality are different
• The equivalent, latest available peer group rate is at 8.2% (source: CHKS) therefore the trust is reporting below its peer-group.

Stroke Care & Cardiology

Patient Stay on Stroke Ward - not reported at this stage, but presumed compliant

Admission to Acute Stroke Ward - not compliant
• December admittance to an acute stroke unit within 4 hours is at 78.4% vs national standard of 80%; 11/52 patients breached, 3 of these breaches were due to capacity (beds) and others are multi-factorial;

Scans - compliant

• Pts receiving CT Scan within 24 hrs of presentation delivery in month of December at 98.0% meeting the 95% monthly standard consistently
• Pts receiving CT Scan within 1hr of presentation is at 82.4% in December against the target of 50% ; both indicator consistently meet performance.

Thrombolysis - not compliant
Compliance at 80% in the month of December vs 85% target; 1/5 patient missed the 1hr treatment by 10 minutes

Angioplasty - compliant • December Primary Angioplasty Door to balloon time (<90 minutes) was at 100% vs target of 80% .
• Primary Angioplasty Call to balloon time (<150 minutes) at 100% against a target of 80%.
• Both indicators consistently meet performance targets.

RACP - compliant
RACP performance for December at 100% [100%] exceeding the 98% target consistently

TIA Treatments - compliant • TIA (High Risk) Treatment <24 Hours from receipt of referral delivery as at December at 100% against the target of 70%.
• TIA (Low Risk) Treatment <7 days from receipt of referral delivery at December is 100% against a target of 75%.
• Both indicators are consistently delivering over the required standard;

Cancer Care

Cancer standards - compliant
• Reporting always one month in arrears hence IQPR latest reported period is November.
• The Trust has delivered all November cancer targets including the 62 day standard. However, the 'internal upgrades' to the cancer pathway tend to be lower mainly due to the lung pathway hence needs careful monitoring to ensure those patients still meet the 62 day pathway
• November 62 Days target specifically delivered at 85.1% against the 85% target
• All other nationally reported cancer standards are routinely above targets e.g. 2WW and 31 Days • December is expected to meet the 62 day target and hence quarter 3 overall.

Patient Waiting times
• x10.5 patients waited longer than the 62 days at the end of November
• 1 patient waited more than 104 days at the end of November
• The Board routinely reviews themes from 104 day cancer wait breaches, which going forward will be subject to an RCA briefing to the Chief Executive in each case. • The Longest Waiting patient was waiting for 101 days

Neutropenic sepsis - not compliant •
The breaches in month are being RCAed daily, generally we show most breaches being only minutes above the required 1hr, however a few of the breaches have been significantly higher than 1hr. In December the longest door to needle time was 3hrs 30 mins and the reasons for this breach were multifactorial.
• In December 21/27 patients (78%) of patients have been treated within the hour, 6 patients (22%) of patients failed to receive treatment within prescribed period (within 1hr) in the month of December. •
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.

Inter-Provider Transfers - not compliant
• 56% of tertiary referrals were met within 38 days requirement in November. Process improvements have been put in place to improve delivery e.g. straight-to-Test has commenced in colorectal service and other specialties 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.

Patient Experience - MSA & Complaints

MSA
• For December the Trust reported nil breaches, but is preparing to report on a revised local policy in January.
• The trust continues to monitor all breaches and in January the Trust will report MSA breaches on the basis of a revised policy.

Friends & Family
• Reporting of performance is undergoing a full review as part of 'persistent red' initiative. Performance improvement will be driven through this action plan.
• Scores and response rate remain low throughout the last and this year, well below regional peers, mainly due to Trust using sub-optimal processes to recover responses, options are being considering including SMS/IVM and our IP patients are already going through this processes as we can see in higher response rates coming through. A mini-project has been set up to ensure reporting is resumed throughout the trust on that basis.

Complaints • The number of complaints received for the month of December is 58 with 1.9 formal complaints per 1000 bed days, showing an improvement to last month.
• 98% have been acknowledged within target timeframes (3 days)
• 39% in-month responses have been reported beyond agreed target time; escalated to DG for remedy.

Patient Experience - Cancelled Operations

Cancelled Ops - not compliant
• 29 sitrep declared late (on day) cancelations were reported in December. Slightly more than last month. Of these 29 cases, 11 (~38%) 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, the December cancellations represent 0.9% rate, just above the national 0.8% target; however, still at the target on a year to date basis, hence important to improve the number of cancellations again quickly

28 Day & Urgent Breaches - compliant
• There were no breaches of the 28 days guarantee in December • There were no urgent cancellations in December

Theatre Utilisation - not compliant
• Both utilisation measurements are below target in the month and show a worsening to prior periods.
• Theatre in-session utilisation is below target of 85% at 74.4% in December.
• Overall session utilisation (outside session timings) for December has delivered 79.7% and whilst these are sessions outside the standard start and finish time •
Theatre utilisation improvements plans have been developed and will support each speciality currently under-performing the 85% target •
Both indicators here in the IQPR represent 'elective theatre' utilisation, as emergencies have already been excluded from the count. • The Theatre Board has asked for 'procedural units' to be excluded from these indicators to give more insight into performance and this will be developed for the IQPR for February reporting. We know that procedural units deliver low performance currently in places.

Emergency Care

EC 4hr standard - not compliant
• The Trust's performance against the 4-hour EC wait target in December was at 75.02% below the NHSI agreed trajectory for the month (92.25%) and national target of 95%
• 4,435 (3,380, 2,999; 3,001) breaches were incurred in December against total patient attendances of 17,753 so a significant increase in breaches against absolute attendances
• A joint recovery action plan with the CCG is being progressed • 1x EC Trolley Wait >12 hours has been reported in December

EC quarterly performance trend for last year 17/18: Q1 at 83.31% ; Q2 at 87.11%; Q3 at 82.36% ; Q4 at 80.7%. **EC quarterly performance trend for current year 18/19**: Q1 at 81.7%; Q2 at 83.3%; Q3 at 78.9%

WMAS Handovers • WMAS fineable 30 - 60 minutes delayed handovers at 205 in December.
• only x7 [x7] cases were > 60 minutes delayed handovers in December; the Trust performs generally very well in this category with only 57 breaches year to date where delay was > 60 mins

• Handovers >60mins (against all conveyances) are therefore 0.14% year to date at December against total WMAS conveyances (4,872). The target is only 0.02% and appears somewhat unrealistic with the high level of conveyances observed.

Fractured NOF - not compliant
• Fractured Neck of Femur Best Practice Tariff in December performs at 83% vs the 85% target.
• 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: •
There were 55 reported acute bed moves in December in the period from 10pm-6am (excl moves for clinical reasons). The Trust objective is to have zero bed moves outside of clinical reasons.

Stranded patients of 21+ LOS - compliant
• There were 96 patient beds occupied by patients staying 21+ days and therefore the Trust has achieved its NHSi target set for December at 101.8 beds, which was a 25% reduction from the July 18 position. Routine, daily monitoring continuous to manage to the lower .

Referral To Treatment

RTT - Incomplete pathway - compliant
• The Trust delivers overall at 92.17% RTT incomplete pathway for December, but submission not signed off as yet. • Most specialities deliver the 92% incomplete standard; only 3 specialities are outside 92% delivery
• Trust waiting list increasing and at 36,913 as at December

52 Week Breaches - not compliant • 1x 52 week breach in December in Cardiology

Acute diagnostic waits - not compliant • Diagnostic (DM01) performance for December is below standard of 99% at 96.13%
• 362 total breaches of which 331 are in Imaging (157xNonObsUS, 93x CT, 81x MRI); 26x in Cardiology Echos

Patient Booking Notice period • Inpatient (IP) results are still reporting a high %age of appointments shorter than 3 weeks, at 52% in December and Bookings management are looking at this by speciality. We know that a SOP is followed to contact each patient for agreement if the notice period is less than 3 weeks and whilst not optimal, there is contact and agreement with the patient. However, such short notice bookings have implications for the booking teams and their efficiency. This indicator is monitored now routinely as part of the improvement initiative.

Data Completeness

• The Trust's internal assessment of the completion of valid NHS Number Field within inpatient data sets compliant in mnth with 99.1% meeting the operational threshold of 99% ; . OP 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 Malling 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 is being considered for re-instatement to address a number of DQ issues including ethnicity coding with the Group DQ Leads • Additionally, data quality issues are to be embedded in Group Reviews to allow for more awareness via the risk register trust process.

Open Referrals - not compliant
• Open Referrals, referring to patients in the system without a future waiting list activity, stand at 184,000 as at December showing a continuing, increasing trend, but plans are being progressed to manage this position.

Staff

PDR - compliant • Reporting quarterly, December is at 98.4% and hence overachieving against the 95% target for the very first time. • Medical Appraisals meeting the target of 90% at 91.4% year to date (91.8% in month)

Sickness & Return to Work - not compliant
• In-month December sickness at 5.33%
• Cumulative sickness rate as at December at 4.62%
• Return to Work in-month as at December 82.3% below the 95% target, cumulatively slightly better.

• Onboarding for new starters has been completed for 84.2% vs the 100% target
• Flu vaccinations have improved slightly to last month and are now at 83.7% for all front line staff
• Nursing Turnover (Qualified) is at 12.5% vs target of 10.7%
• WeConnect indicators yet to be reported for December quarter

Mandatory Training - not compliant
• Mandatory Training at the end of December is again improving at 86.4% against target of 95%;
• Health & Safety related training is at the 93.7% below the target at 95.0%

NHSi & CCG Local Quality Monitoring

21+LOS performance target - Achieved : agreed with NHSi to deliver a 25% reduction on beds occupied by these longstay patients. Dec target was set for 101.8 beds and the Trust has delivered 96 beds well under the set target.

CCG Local Quality Requirements 2018/19 are monitored by CCG and the Trust is fineable for any breaches in accordance with contractual conditions.
• The Trust has currently only one formally agreed RAPs (recovery action plans for community dementia and falls assessments) in place at this stage, which are improving month on month and are very close to full recovery.
• However, in September the CCG issued a performance notice for a maternity indicator which has not met targets in the last 3 months (CO Monitoring by 12+6 weeks of pregnancy); the service has been informed and they have been reviewing performance in detail following agreed actions with the CCG - expected full recovery to standard at January 2019.
• The SQPR (Service Quality Performance Report) tab gives more insight across non-performing and recovering indicators which are routinely monitored via the SQPR with the CCG;

CQUINs 2018/19 Q2 position reporting on milestones delivery for most schemes, some partial delivery for Sepsis; Risky Behaviours CQUIN unlikely to recover Q1 and Q2 payment milestones. Q3 is reportable to CCG / NHS in Jan19.

Performance & Information Breach Notices

Contract Performance Notices :
The Trust has responded to three performance notices : • A&E 4 hour waits
• Diagnostic waits (DM01)
• RTT total waiting list numbers

Information Breach Notices (IBNs) :
• No IBNs were alerted

Summary Scorecard - December (In-Month)

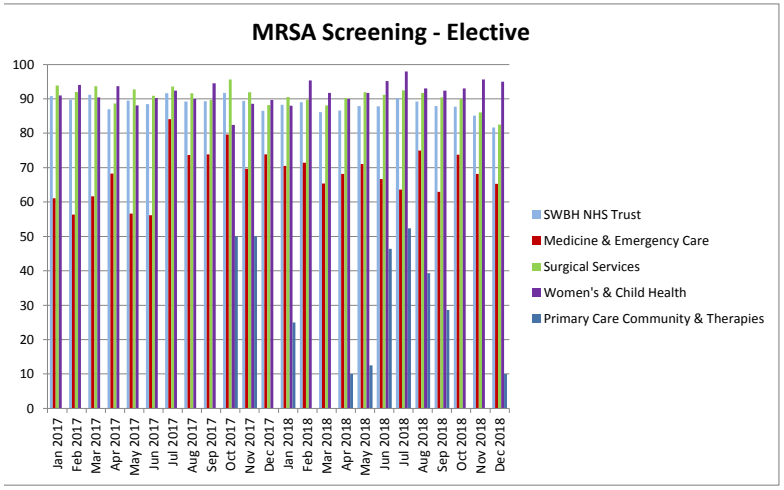
Summary Scorecard

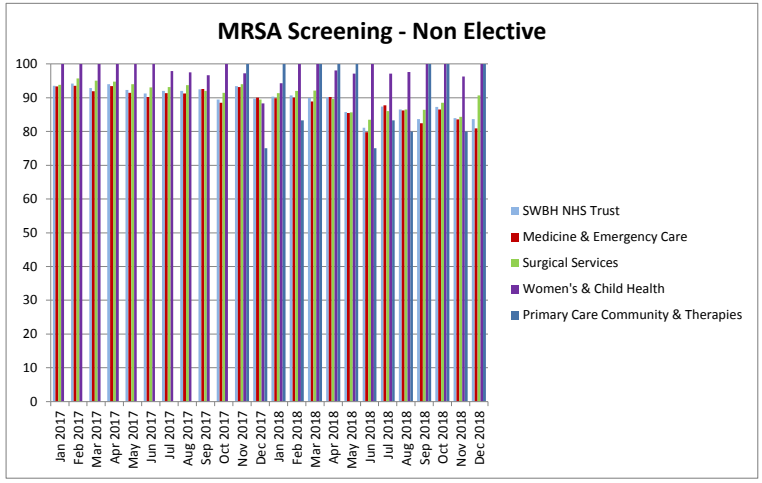
Section	Red Rated	Green Rated	None	Total
Infection Control	0	6	0	**6**
Harm Free Care	8	8	11	**27**
Obstetrics	2	5	7	**14**
Mortality and Readmissions	1	0	16	**17**
Stroke and Cardiology	1	10	0	**11**
Cancer	1	9	5	**15**
FFT. MSA, Complaints	12	3	9	**24**
Cancellations	6	4	2	**12**
Emergency Care & Patient Flow	9	6	10	**25**
RTT	6	2	7	**15**
Data Completeness	2	8	9	**19**
Workforce	8	1	3	**12**
Temporary Workforce	0	0	28	**28**
Total	**56**	**62**	**107**	**225**

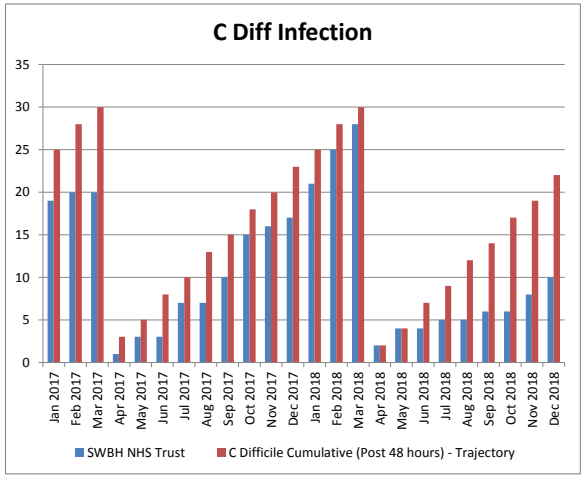
• Persistently, red-rated performance indicators are subject to improvement trajectories and routine monitoring; Oversight at OMC and PMC. Reocvery of 8 persistent reds has been achieved so far on a sustainable basis over a number of months.

Patient Safety - Infection Control

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (From Jul 2017) J A S O N D J F M A M J J A S O N D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
4		d	C. Difficile	<= No	29	2.5		Dec 2018	2	0	0			0		2	10	
4		d	MRSA Bacteraemia	<= No	0	0		Dec 2018	0	0	0			0		0	0	
4			MSSA Bacteraemia (rate per 100,000 bed days)	<= Rate2	9.42	9.42		Dec 2018								0.0	5.9	
4			E Coli Bacteraemia (rate per 100,000 bed days)	<= Rate2	94.9	94.9		Dec 2018								15.8	11.7	
3			MRSA Screening - Elective	=> %	80	80		Dec 2018	65.3	82.5	94.9			10		81.7	87.2	
3			MRSA Screening - Non Elective	=> %	80	80		Dec 2018	80.9	90.7	100			100		83.7	85.5	

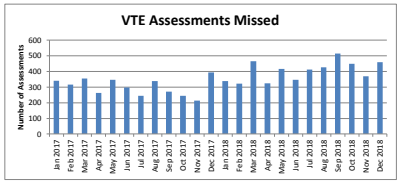


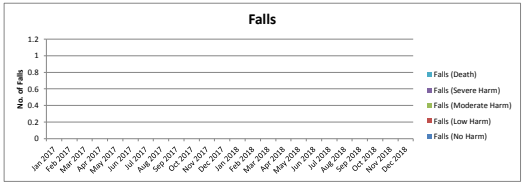


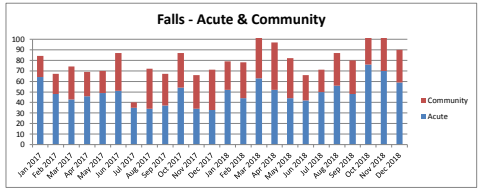


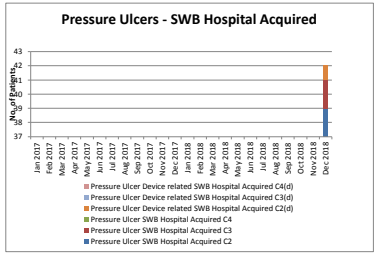
Patient Safety - Harm Free Care

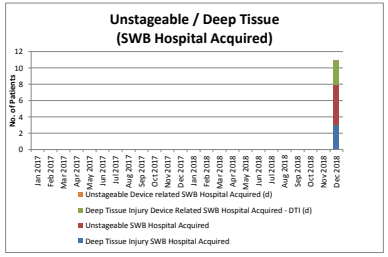
Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
8		d	Patient Safety Thermometer - Overall Harm Free Care	=> %	95	95																			Dec 2018								98.4	97.6	
8		d	Patient Safety Thermometer - Catheters & UTIs	%			3.0	2.0	1.0	4.0	4.0	6.0	0.0	2.0	1.0	5.0	4.0	1.0	5.0	3.0	3.0	7.0	4.0	3.0	Dec 2018								0.26	0.34	
			Number of DOLS raised	No			27	22	20	48	31	19	36	30	27	34	59	27	43	40	49	51	40	29	Dec 2018	15	8	0	-	-	6		29	372	
			Number of DOLS which are 7 day urgent	No			27	22	20	48	31	19	36	30	27	34	59	27	43	40	49	51	40	29	Dec 2018	15	8	0	-	-	6		29	372	
			Number of delays with LA in assessing for standard DOLS application	No			3	0	0	0	0	0	0	0	0	2	3	4	4	7	8	6	9	8	Dec 2018	4	3	0	-	-	1		8	51	
			Number DOLs rolled over from previous month	No			7	12	5	5	3	7	7	3	10	4	9	4	7	9	9	0	0	0	Dec 2018	0	0	0	-	-	0		0	42	
			Number patients discharged prior to LA assessment targets	No			7	9	9	11	7	2	4	8	3	4	18	13	11	11	25	29	18	16	Dec 2018	8	5	0	-	-	3		16	145	
			Number of DOLs applications the LA disagreed with	No			1	2	1	0	2	1	2	0	0	0	0	1	6	2	4	2	5	2	Dec 2018	2	0	0	-	-	0		2	22	
			Number patients cognitively improved regained capacity did not require LA assessment	No			13	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	0	0	Dec 2018	0	0	0	-	-	0		0	4	
8			Falls	<= No	804	67	85	72	67	87	66	71	79	78	112	97	82	66	71	87	80	101	110	90	Dec 2018	50	9	0	0	0	31	0	90	784	
9			Falls with a serious injury	<= No	0	0	1	3	2	3	1	0	0	0	1	2	4	2	1	0	0	5	3	-	Nov 2018	2	0	0		0	1	0	3	17	
	NEW		Falls Per 1000 Occupied Bed Days	Rate1			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5.026	-	Nov 2018	-	-	-		-	-	-	5.026	5.03	
8			Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	7	3	9	6	7	9	12	7	6	8	7	9	11	4	10	13	26	42	Dec 2018	28	9	1			4		42	130	
			Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0	7	4	3	6	4	4	2	4	4	3	1	1	1	1	1	7	37	32	Dec 2018						32		32	84	
	NEW		Pressure Ulcer Present on Admission to SWBH	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jan-00								-	-	
	NEW		Pressure Ulcers per 1000 Occupied Bed Days	Rate1			-	-	-	-	-	-	-	-	-	-	-	0.457	0.389	0.233	0.53	0.578	1.167	2.368	Dec 2018	-	-	-			-		2.368	0.8	
3		d	Venous Thromboembolism (VTE) Assessments	=> %	95	95																			Dec 2018	90.3	96.2	97.2					93.8	94.5	
3			WHO Safer Surgery - Audit - 3 sections (% pts where all sections complete)	=> %	100	100																			Dec 2018	100.0	100.0	100.0		-			100.0	99.9	
3			WHO Safer Surgery - brief (% lists where complete)	=> %	100	100																			Dec 2018	100	100	-		100			100.0	99.9	
3			WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	=> %	100	100																			Dec 2018	100	100	-		100			100.0	94.8	
9		d	Never Events	<= No	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	Dec 2018	0	1	0	0	0	0		1	3	
9		d	Medication Errors causing serious harm	<= No	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	Dec 2018	0	0	0	-	0	0		0	2	
9		d	Serious Incidents	<= No	0	0	1	8	5	4	6	4	3	5	4	5	9	4	6	3	1	9	4	6	Dec 2018	2	2	1	0	0	1	0	6	47	
9			Open Central Alert System (CAS) Alerts	<= No			3	3	8	10	6	5	7	6	5	8	9	14	12	15	14	14	15	16	Dec 2018								16	117	
9		d	Open Central Alert System (CAS) Alerts beyond deadline date	No	0	0	1	1	0	0	1	1	2	2	2	2	2	3	2	4	4	4	5	5	Dec 2018								5	31	

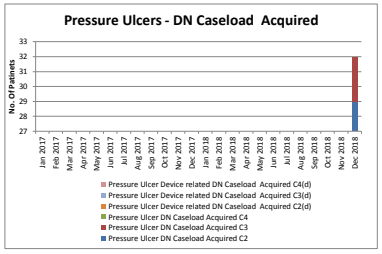


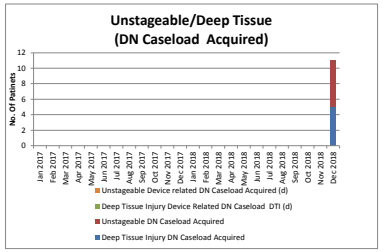






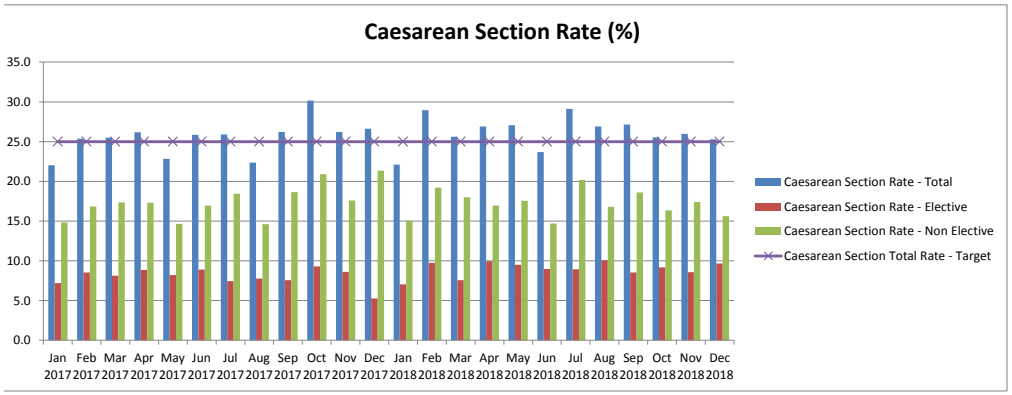


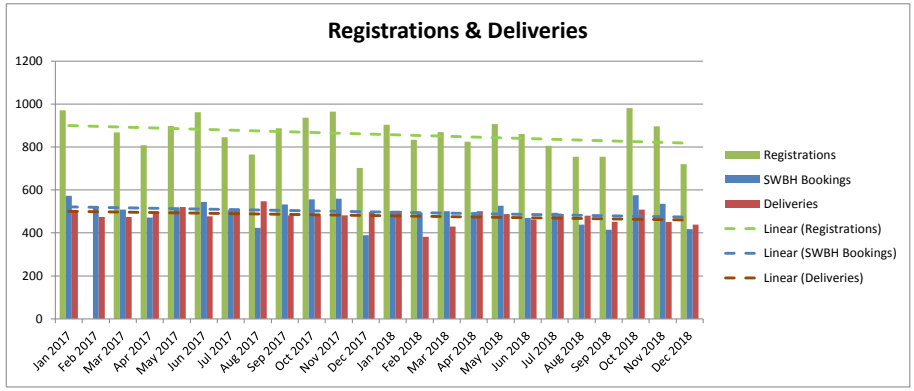




Patient Safety - Obstetrics

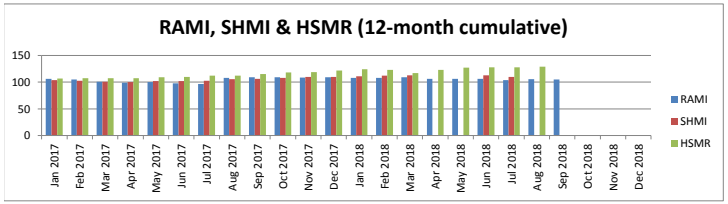
Data Source	Data Quality	PAF	Indicator	Measure	Trajectory 2016-2017 Year	Trajectory 2016-2017 Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Month	Year To Date	Trend
3			Caesarean Section Rate - Total	<= %	25.0	25.0																			Dec 2018	25.3	26.4	
3		•	Caesarean Section Rate - Elective	<= %			7	8	8	9	9	5	7	10	8	10	10	9	9	10	9	9	9	10	Dec 2018	9.7	9.3	
3		•	Caesarean Section Rate - Non Elective	<= %			18	15	19	21	18	21	15	19	18	17	18	15	20	17	19	16	17	16	Dec 2018	15.6	17.1	
2		•d	Maternal Deaths	<= No	0	0																			Dec 2018	1	3	
3			Post Partum Haemorrhage (>2000ml)	<= No	48	4																			Dec 2018	0	9	
3			Admissions to Neonatal Intensive Care (Level 3)	<= %	10.0	10.0																			Dec 2018	1.37	1.57	
12			Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0																			Dec 2018	6.85	6.57	
12			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	4.17	0.00	7.86	2.23	6.85	Dec 2018	6.85	4.46	
12			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	2.08	0.00	0.00	2.23	0.00	Dec 2018	0.00	1.64	
12			Early Booking Assessment (<12 + 6 weeks) - SWBH Specific	=> %	85.0	85.0																			Dec 2018	93.5	93.0	
12			Early Booking Assessment (<12 + 6 weeks) - National Definition	=> %	90.0	90.0																			Dec 2018	127.0	133.2	
2			Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0	-->	-->																	Dec 2018	75.52	76.47	
2		•	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	<= %			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	1.3	1.2	1.7	2.6	1.2	Dec 2018	1.24	1.30	
2		•	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	<= %			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	1.3	1.2	1.7	2.6	1.2	Dec 2018	1.24	1.20	
2		•	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	<= %			1.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.3	0.2	0.0	0.6	0.5	0.3	0.8	1.5	0.4	Dec 2018	0.41	0.52	

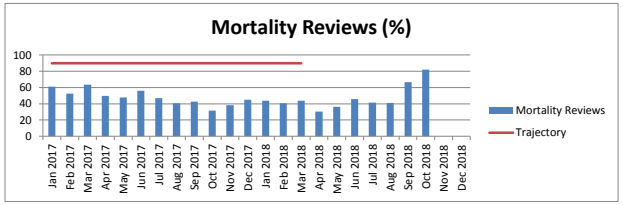


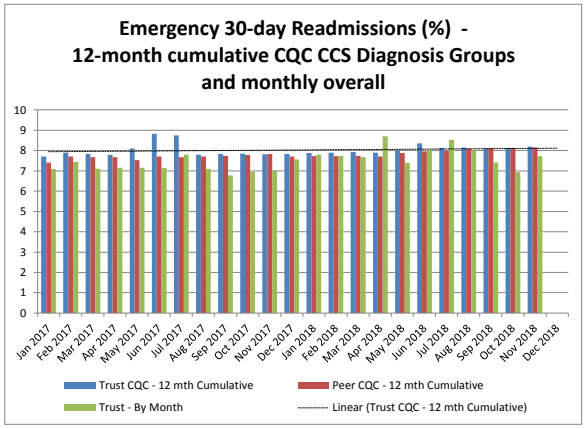


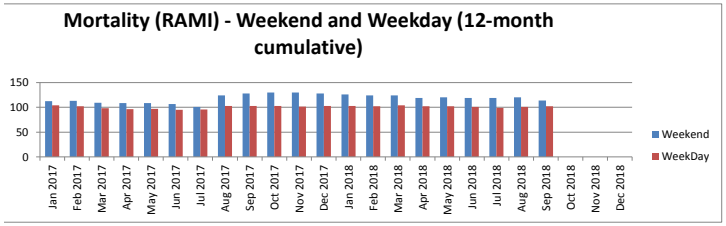
Clinical Effectiveness - Mortality & Readmissions

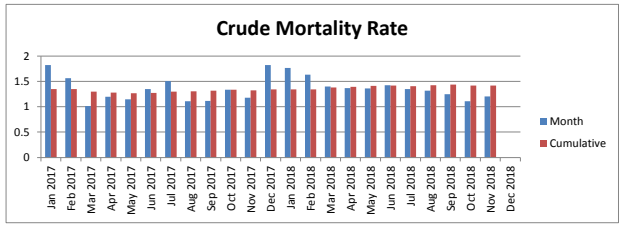
Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
5		C	Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI	97	108	109	109	108	109	108	108	109	106	106	106	104	105	105	-	-	-	Sep 2018									632	
5		C	Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI	95	103	103	103	102	103	103	102	104	102	102	101	99	101	102	-	-	-	Sep 2018									607	
5		C	Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI	101	124	128	130	130	128	126	124	124	119	120	119	119	120	114	-	-	-	Sep 2018									711	
6		C	Summary Hospital-level Mortality Index (SHMI) (12-month cumulative)	SHMI	Below Upper CI	Below Upper CI	103	106	106	108	110	110	111	112	113	-	-	113	110	-	-	-	-	-	Jul 2018									223	
5		C	Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative)	HSMR			112	113	115	118	119	122	124	123	117	123	127	128	128	129	-	-	-	-	Aug 2018									635.0	
5		C	Deaths in Low Risk Diagnosis Groups (RAMI) - month	RAMI	Below Upper CI	Below Upper CI	78	71	144	62	120	90	133	102	129	76	100	71	84	71	61	-	-	-	Sep 2018								61		
3			Mortality Reviews within 42 working days	=> %	90	90																	-	-	Oct 2018	80	92	100			-		82	48	
3			Crude In-Hospital Mortality Rate (Deaths / Spells) (by month)	%			1.5	1.1	1.1	1.3	1.2	1.8	1.8	1.6	1.4	1.4	1.4	1.4	1.3	1.3	1.2	1.1	1.2	-	Nov 2018								1.21		
3			Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative)	%			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	1.4	1.4	1.4	1.4	-	Nov 2018									1.41	
			Deaths in the Trust	No			142	109	109	133	119	169	178	142	143	120	123	127	124	116	106	107	114	-	Nov 2018								114	937	
20			Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			7.8	7.1	6.8	7.0	7.0	7.6	7.8	7.7	7.7	8.7	7.4	8.0	8.5	8.0	7.4	6.9	7.7	-	Nov 2018								7.72		
20			Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			7.1	7.2	7.2	7.2	7.2	7.2	7.2	7.3	7.3	7.4	7.5	7.5	7.6	7.7	7.7	7.7	7.8	-	Nov 2018									7.78	
5		C	Emergency Readmissions (within 30 days) - CQC CCS Diagnosis Groups (12-month cumulative)	%			8.7	7.8	7.8	7.8	7.8	7.8	7.9	7.9	7.9	7.9	8.0	8.4	8.1	8.1	8.1	8.1	8.2	-	Nov 2018	-	-	-			-			8.20	
			Emergency Readmissions (within 30 days) - Same Specialty (exc. Deaths and Stillbirths) month	%			3.5	3.0	3.0	3.3	3.2	3.3	3.4	3.6	3.3	4.0	3.6	3.8	3.7	3.8	3.3	2.7	3.6	-	Nov 2018									3.62	
			Emergency Readmissions (within 30 days) - Different Specialty (exc. Deaths and Stillbirths) month	%			4.3	4.0	3.8	3.7	3.8	4.3	4.4	4.1	4.4	4.7	3.8	4.2	4.8	4.1	4.1	4.3	4.1	-	Nov 2018									4.09	
			Emergency Readmissions (within 30 days) - Same Specialty (exc. Deaths and Stillbirths) 12-month cumulative	%			3.5	3.4	3.3	3.3	3.3	3.3	3.3	3.4	3.3	3.4	3.4	3.4	3.4	3.5	3.5	3.5	3.5	-	Nov 2018									3.50	
			Emergency Readmissions (within 30 days) - Different Specialty (exc. Deaths and Stillbirths) 12-month cumulative	%			3.9	3.9	3.9	3.9	3.9	3.9	4.0	4.0	4.0	4.1	4.1	4.1	4.2	4.2	4.2	4.3	4.3	-	Nov 2018									4.28	





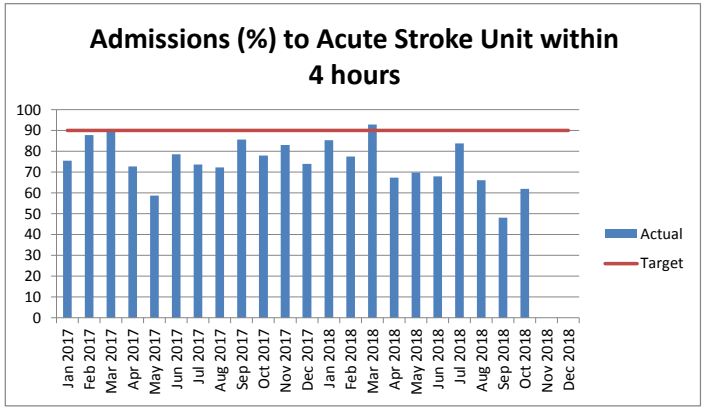


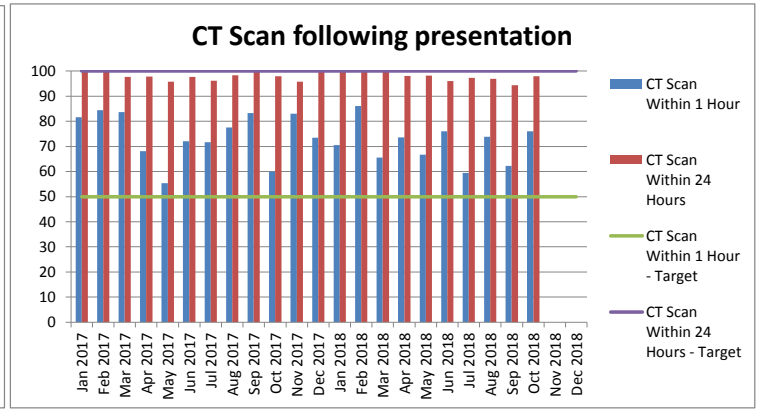


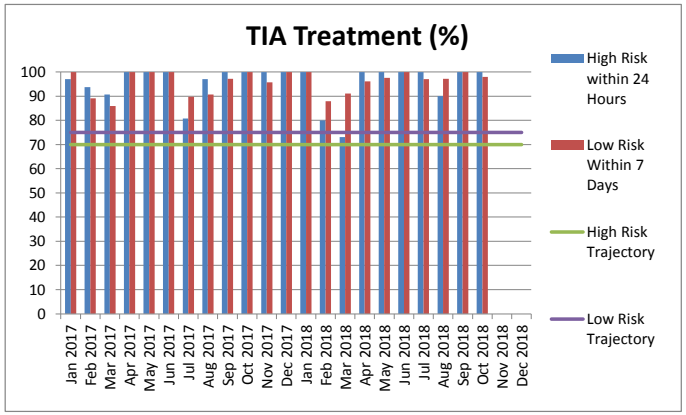


Clinical Effectiveness - Stroke Care & Cardiology

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (Since Jul 2017) J A S O N D J F M A M J J A S O N D	Data Period	Month	Year To Date	Trend
3			5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90.0	90.0		Dec 2018	97.9	92.0	
3			5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80.0	80.0		Dec 2018	78.4	67.6	
3			5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50.0	50.0		Dec 2018	82.4	72.2	
3			5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95.0	95.0		Dec 2018	98.0	97.9	
3			5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=>	85.0	85.0		Dec 2018	80.0	81.8	
3			5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=>	70.0	70.0		Dec 2018	100.0	95.1	
3			5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=>	75.0	75.0		Dec 2018	100.0	95.9	
3			Stroke Admissions - Swallowing assessments (<24h)	=> %	98.0	98.0		Dec 2018	100.0	98.5	
9			Primary Angioplasty (Door To Balloon Time 90 mins)	=> %	80.0	80.0		Dec 2018	100.0	96.5	
9			Primary Angioplasty (Call To Balloon Time 150 mins)	=> %	80.0	80.0		Dec 2018	100.0	96.2	
9			Rapid Access Chest Pain - seen within 14 days	=> %	98.0	98.0		Dec 2018	100.0	100.0	



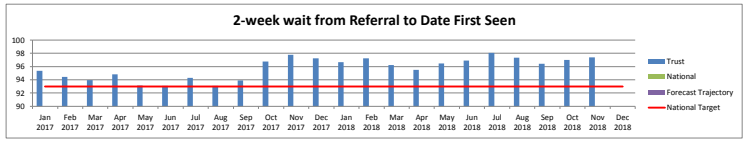


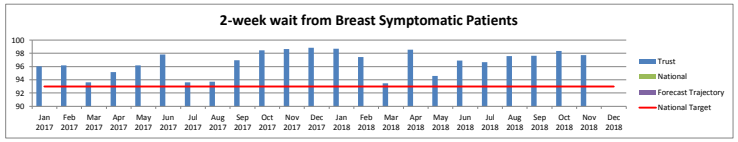


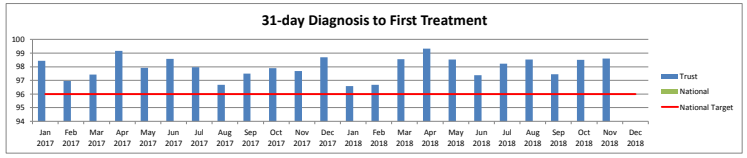
The stroke indicators in the IPR are based on 'patient arrivals' not 'patient discharged' as this monitors pathway performance rather than actual outcomes which may / may not change on discharge.
National SSNAP is based on 'patient discharge' which is more appropriate for outcomes based reporting.
Both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

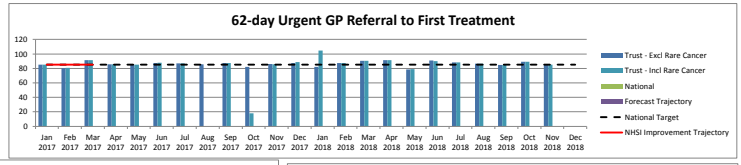
Clinical Effectiveness - Cancer Care

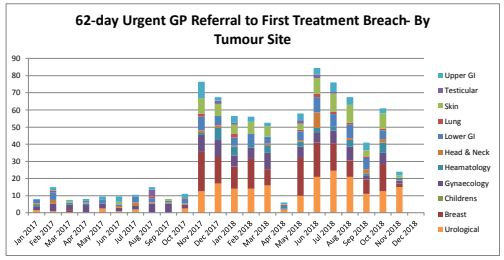
Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
1			2 weeks	=> %	93.0	93.0																		-	Nov 2018	97.6	96.9	99.0			-		97.4	96.9	
1			2 weeks (Breast Symptomatic)	=> %	93.0	93.0																		-	Nov 2018		-						97.7	97.3	
1			31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Nov 2018	100.0	97.7	100.0			-		98.6	98.3	
1			31 Day (second/subsequent treatment - surgery)	=> %	94.0	94.0																		-	Nov 2018								95.5	99.3	
1			31 Day (second/subsequent treatment - drug)	=> %	98.0	98.0																		-	Nov 2018								100.0	100.0	
1			31 Day (second/subsequent treat - radiotherapy)	=> %	94.0	94.0																		-	Nov 2018								-	-	
1			62 Day (urgent GP referral to treatment) Excluding Rare Cancer	=> %	85.0	85.0																		-	Nov 2018	76.5	87.7	88.5			-		85.1	86.9	
1			62 Day (urgent GP referral to treatment) Including Rare Cancer	=> %	85.0	85.0		-																-	Nov 2018	76.5	88.0	88.5			-		85.3	87.0	
1			62 Day (referral to treat from screening)	=> %	90.0	90.0																		-	Nov 2018	-	96.1	-			-		96.1	94.0	
1			62 Day (referral to treat from hosp specialist)	=> %	90.0	90.0																		-	Nov 2018	70.2	100.0	100.0			-		80.8	86.1	
1			Cancer - Patients Waiting over 62 days	No			11	11	9	11	12	9	13	9	6	6	17	8	10	11	8	8	11	-	Nov 2018	4.0	5.0	1.5			0.0		10.5	76.0	
1			Cancer - Patients Waiting over 104 days	No			2	5.0	1.0	4.0	2.0	3.0	3.0	2.0	3.0	1.5	1.5	1.5	2.5	2.5	1.0	2.0	1.0	-	Nov 2018	0.0	1.0	0.0			0.0		1.0	13.5	
1			Cancer - Longest Waiter in days	No			102	184	141	125	173	104	102	113	280	118	104	112	113	146	86	104	101	-	Nov 2018	101	185	86			0		101		
1			Neutropenia Sepsis Door to Needle Time Greater Than 1 Hour	<= No	0.0	0.0	10	3	7	8	7	7	3	9	4	3	7	6	4	2	7	4	6	6	Dec 2018	6	-	-			-		6	45	
			IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer pathway	%			25	25	67	0	20	0	54	0	55	60	67	36	67	65	71	69	56	-	Nov 2018	-	-	-			-		56	62	

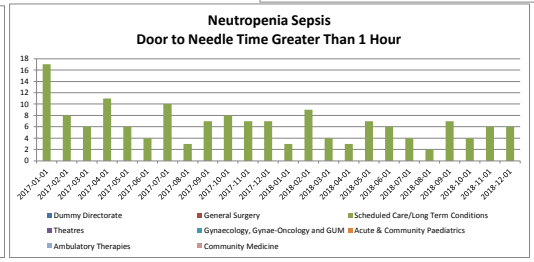


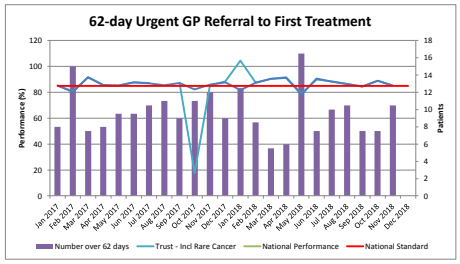






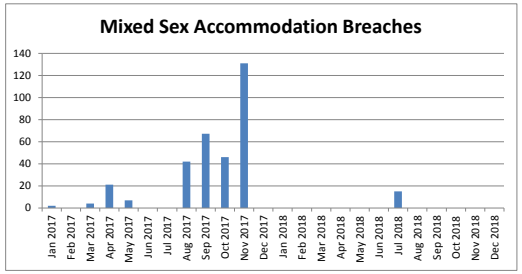


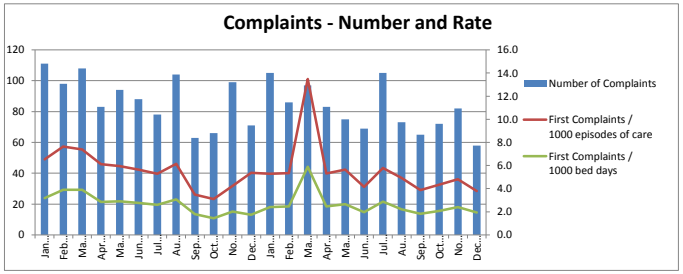


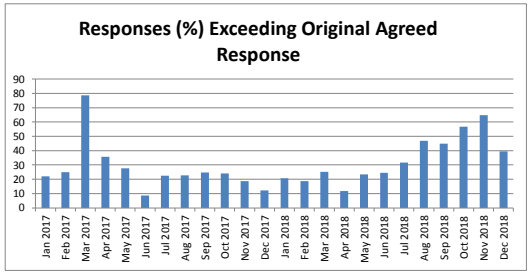


Patient Experience - FFT, Mixed Sex Accommodation & Complaints

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
8		•b•	FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	50.0	50.0	12	13	10	19	9.7	8.3	-	9.8	10									28	Dec 2018										
8		•a•	FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95.0	95.0	83	83	83	82	85	89	-	88	88									92	Dec 2018										
8		•b•	FFT Response Rate: Type 1 and 2 Emergency Department	=> %	50.0	50.0	3.8	2.8	3.4	3.3	3.4	3.6	-	3.8	7									7.8	Dec 2018	7.8									
8		•a•	FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95.0	95.0	72	75	73	73	58	-	-	75	74									73	Dec 2018	73									
8			FFT Response Rate: Type 3 WiU Emergency Department	=> %	50.0	50.0	0	-	-	-	-	8.8	-	5											Dec 2018	-									
8			FFT Score - Adult and Children Emergency Department (type 3 WiU)	=> No	95.0	95.0	0	0	-	-	-	16	-	0											Dec 2018	-									
8			FFT Score - Outpatients	=> No	95.0	95.0	91	89	89	91	92	90	-	92	90									92	Dec 2018										
8	NEW		FFT Score - Maternity Antenatal	=> No	95.0	95.0	90	50	90	93	76	75	-	0	100									0	Dec 2018										
8	NEW		FFT Score - Maternity Postnatal Ward	=> No	95.0	95.0	73	81	84	89	81	74	-	0	100									100	Dec 2018										
8	NEW		FFT Score - Maternity Community	=> No	95.0	95.0	0	50	0	0	0	0	-	0	0										Dec 2018										
8			FFT Score - Maternity Birth	=> No	95.0	95.0	76	58	48	83	74	100	-	94	100									100	Dec 2018										
8			FFT Response Rate - Maternity Birth	=> %	50.0	50.0	7.1	5.2	5.2	13	6.9	0.2	-	23	1.2										Dec 2018										
13		•a	Mixed Sex Accommodation Breaches	<= No	0.0	0.0	0	42	67	46	131	0	0	0	0	0	0	0	15	0	0	0	0	-	Nov 2018	0	0	0		0	0		0	15	
9		•	No. of Complaints Received (formal and link)	No			78	104	63	66	99	71	105	86	97	83	75	69	105	73	65	72	82	58	Dec 2018	30	12	6	0	2	5	3	58	682	
9			No. of Active Complaints in the System (formal and link)	No			184	167	154	136	148	161	187	181	183	176	174	164	194	213	208	206	##	210	Dec 2018	99	62	17	0	5	16	11	210		
9		•a	No. of First Formal Complaints received / 1000 bed days	Rate1			2.6	3.1	1.8	1.4	2.0	1.7	2.4	2.5	5.9	2.5	2.7	2.0	2.9	2.2	1.8	2.1	2.4	1.9	Dec 2018	1.9	2.5	1.4			-		1.93	2.27	
9			No. of First Formal Complaints received / 1000 episodes of care	Rate1			5.3	6.2	3.5	3.1	4.2	5.4	5.3	5.3	13.5	5.3	5.7	4.1	5.8	4.9	3.9	4.3	4.8	3.8	Dec 2018	4.8	3.3	2.2			-		3.79	4.73	
9			No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt)	=> %	100	100	100	100	98	100	90	92	99	100	99	100	100	100	92.77	93	100	96.8	96	98	Dec 2018	100	100	100	-	50	100	100	98	98	
9			No. of responses which have exceeded their original agreed response date (% of total active complaints)	<= %	0	0	23	23	25	24	19	12	21	19	25	12	23	25	31.75	47	45	56.8	65	39	Dec 2018	35	39	53	-	40	35.29	70	39	41	
9			No. of responses sent out	No			83	67	85	73	65	38	75	65	81	77	65	64	52	52	57	54	59	47	Dec 2018	9	21	8	0	0	3	6	47	527	
14		•e•	Access to healthcare for people with Learning Disability (full compliance)	Yes / No	Yes	Yes	UNDER DEVELOPMENT																		Aug 2018	N	N	N	N	N	N	N	NO		

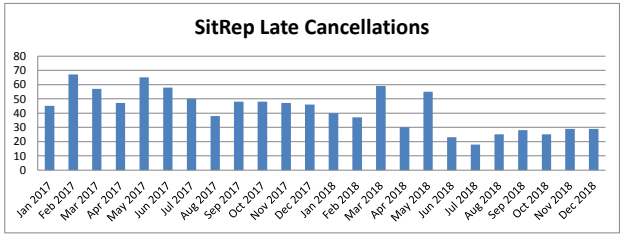


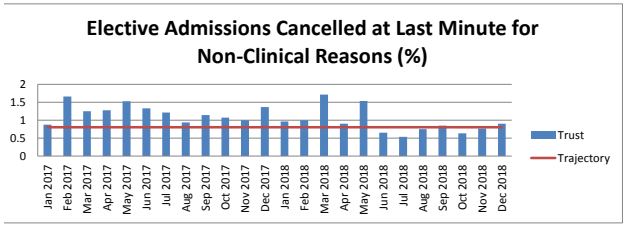


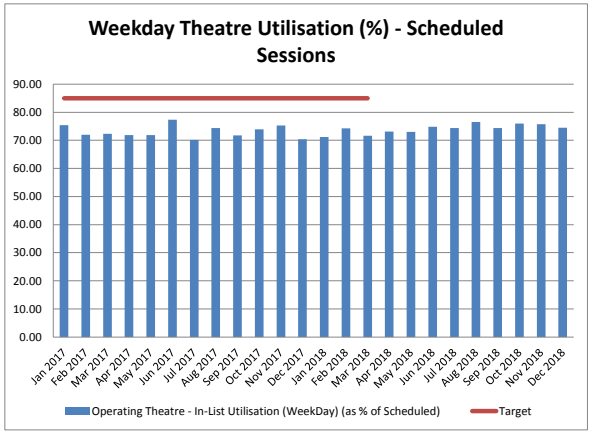


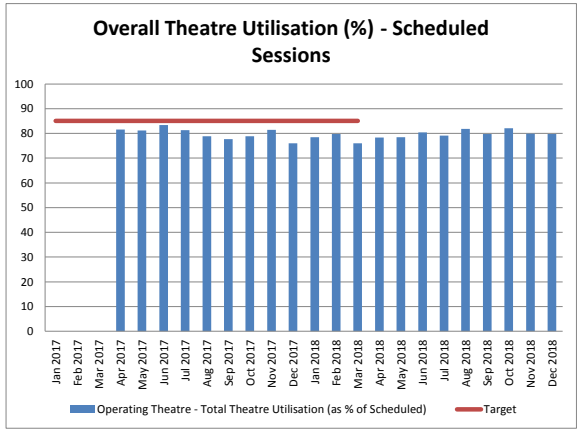
Patient Experience - Cancelled Operations

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
2			No. of Sitrep Declared Late Cancellations - Total	<= No	320	27	50	38	48	48	47	46	40	37	59	30	55	23	18	25	28	25	29	29	Dec 2018	1	20	6			2		29	262	
2			No. of Sitrep Declared Late Cancellations - Avoidable	No			21	12	31	11	14	13	17	10	14	3	12	5	8	14	10	9	7	11	Dec 2018	1	7	1			2		11	79	
2			No. of Sitrep Declared Late Cancellations - Unavoidable	No			29	26	17	31	33	33	23	28	45	26	43	18	10	11	18	16	22	18	Dec 2018	0	13	5			0		18	182	
2		•	Elective Cancellations at last minute for non-clinical reasons (as a percentage of elective admissions)	<= %	0.8	0.8	1.2	0.9	1.1	1.1	1.0	1.4	1.0	1.0	1.7	0.9	1.5	0.7	0.5	0.7	0.8	0.6	0.8	0.9	Dec 2018	0.13	1.03	2.96			0.66		0.9	0.8	
2		•e•	Number of 28 day breaches	<= No	0	0	0	2	0	0	0	0	2	0	1	2	0	0	0	0	0	0	0	0	Dec 2018	0	0	0			0		0	2	
2		•e	No. of second or subsequent urgent operations cancelled	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0			-		0	0	
2			Urgent Cancellations	<= No	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0.0	0.0	0.0			0.0		0	0	
3			No. of Sitrep Declared Late Cancellations (Pts. >1 occasion)	<= No	0	0	1	1	0	1	1	1	4	3	2	0	1	1	0	0	0	0	0	0	Dec 2018	0	0	0			0		0	2	
			Multiple Hospital Cancellations experienced by same patient (all cancellations)	<= No	0	0	55	53	71	70	62	59	72	59	89	62	42	40	56	61	54	68	55	39	Dec 2018	5	28	6			-		39	477	
3			All Hospital Cancellations, with 7 or less days notice	<= No	0	0	245	213	243	294	244	272	302	212	276	224	219	205	245	230	193	265	238	156	Dec 2018	12	128	16			-		156	1975	
3			Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	Dec 2018	-	75.3	76.8			62.3		74.4	74.8	
	NEW		Overall Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	Dec 2018	-	80.1	85.4			67.0		79.7	80.0	



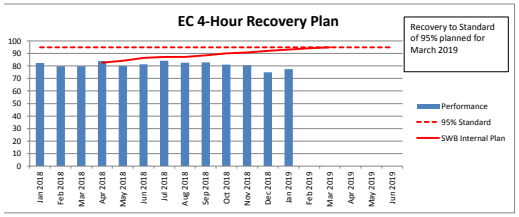


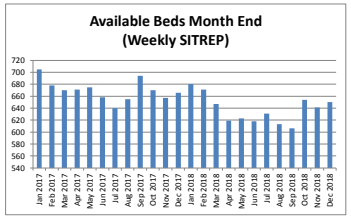


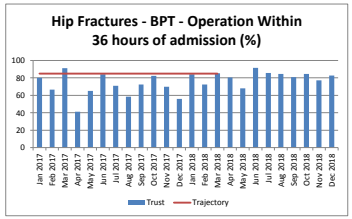


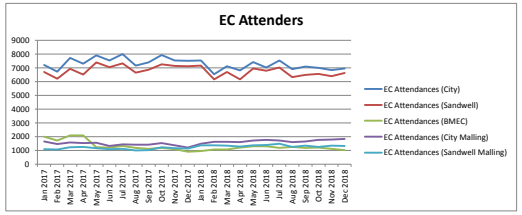
Access To Emergency Care & Patient Flow

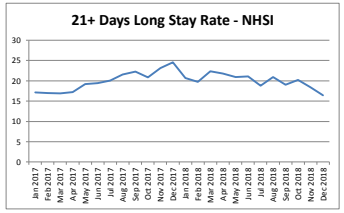
Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (From J)																		Data Period	Unit S	Unit C	Unit B	Month	Year To Date	Trend
							J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		S	C	B			
	NEW		Emergency Care Attendances (Including Malling)	No			19187	17404	17804	19129	18277	17865	18506	16738	17818	17075	18766	18258	18923	17333	17740	17819	17502	17753	Dec 2018	7950	8794	1009	17753	161169	
2			Emergency Care 4-hour waits	=> %	95.00	95.00																			Dec 2018	70.0	76.7	99.7	75.02	81.32	
2			Emergency Care 4-hour breach (numbers)	No			2686	2177	2150	2800	3168	3614	3249	3377	3582	2745	3746	3418	3001	2999	3013	3154	3383	4435	Dec 2018	2385	2047	3	4435	30094	
2			Emergency Care Trolley Waits >12 hours	<= No	0.00	0.00																			Dec 2018	0	1		1	2	
3			Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.00	15.00																			Dec 2018	14	15	59	15	14	
3			Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60																			Dec 2018	87	76	92	82	58	
3			Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0																			Dec 2018	4.70	5.04	4.40	4.84	4.85	
3			Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0																			Dec 2018	8.16	9.89	2.97	8.64	7.21	
11			WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	111	127	90	143	207	208	163	160	196	173	219	195	165	116	95	121	159	205	Dec 2018	183	22		205	1448	
11			WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	1	0	1	4	6	11	5	4	21	6	6	10	2	8	5	6	7	7	Dec 2018	6	1		7	57	
11			WMAS - Handover Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02																			Dec 2018	0.24	0.04		0.14	0.14	
11			WMAS - Emergency Conveyances (total)	No			4429	4278	4174	4557	4424	4725	4561	4081	4487	4308	4519	4306	4685	4522	4354	4622	4579	4872	Dec 2018	2490	2382		4872	40787	
2			Delayed Transfers of Care (Acute) (%)	<= %	3.5	3.5																			Dec 2018	1.1	4.1		2.2	2	
2			Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS	<= No	<10 per site	<10 per site																			Dec 2018	3.8	9		13		
2			Delayed Transfers of Care (Acute) - Total Bed Days (All Local Authorities)	<= No	3.5% of available	3.5% of available	615	539	512	598	545	591	613	541	433	479	520	472	503	543	572	530	541	512	Dec 2018				512	4672	
			Delayed Transfers of Care (Acute) - Total Bed Days (All Local Authorities) as % of Available Beds	<= No	3.5	3.5	3.4	2.8	2.8	3.2	2.9	3.1	3.1	3.0	2.2	2.7	2.8	2.7	2.8	3.1	3.3	2.8	2.9	2.7	Dec 2018				2.72	2.86	
2			Delayed Transfers of Care (Acute) - Finable Bed Days (Birmingham LA only)	<= No	0	0	270	255	288	272	149	216	268	193	152	176	241	192	263	174	181	200	272	275	Dec 2018				275	1974	
2			Patient Bed Moves (10pm - 6am) (No.) -ALL	No			980	574	633	674	657	719	769	654	796	570	628	677	655	733	712	797	717	713	Dec 2018				713	6202	
2			Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units	No			245	216	233	231	208	291	282	215	278	244	289	242	232	241	240	246	227	247	Dec 2018				247	2158	
	New		Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units and Transfers for Clinical Reasons	No			29	23	43	39	54	72	65	48	75	43	26	48	36	38	47	54	38	55	Dec 2018				55	385	
			Hip Fractures - Best Practice Tarriff - Operation < 36 hours of admission (%)	=> %	85.0	85.0																			Dec 2018				83	81.9	
	NEW		Inpatients Staying 21+ Days At Month End Census - NHSI	No			-	-	-	-	-	-	-	-	-	-	-	-	-	122	122	146	123	126	Dec 2018				126	-	
	NEW		Inpatients Staying 21+ Days At Month End Census - SWBH	No			-	-	-	-	-	-	-	-	-	-	-	-	-	135	135	160	133	140	Dec 2018				140	-	
	NEW		21+ Days Long Stay Rate - NHSI	%			20.1	21.6	22.3	20.9	23.2	24.6	20.7	19.8	22.4	21.8	21	21.1	18.8	20.9	19	20.2	18.4	16.5	Dec 2018				16.475	19.79	
	NEW		Estimated Beds - 21+ Days - NHSI	No			125	133	133	135	136	170	146	132	138	140	132	137	112	129	115	127	117	98	Dec 2018				98	-	

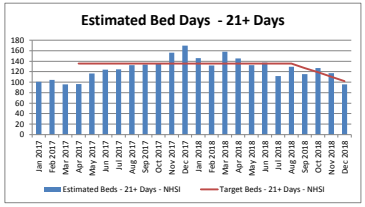






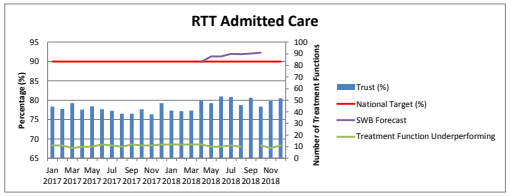


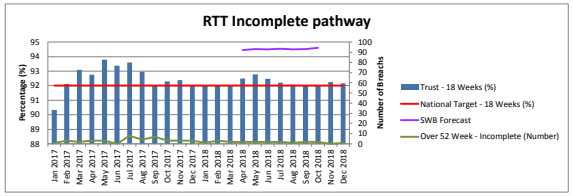


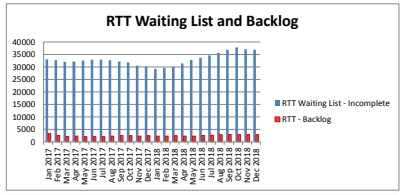


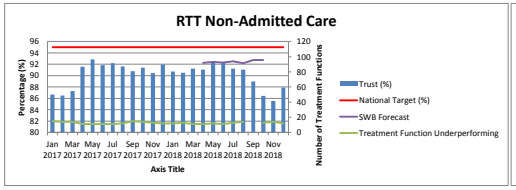
Referral To Treatment

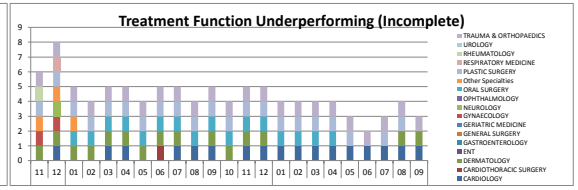
Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
2		e	RTT - Admitted Care (18-weeks)	=> %	90.0	90.0																			Dec 2018	95.4	77.7	75.2			81.5		80.51		
2		e	RTT - Non Admittted Care (18-weeks)	=> %	95.0	95.0																			Dec 2018	74.9	88.6	88.7			74.3		87.91		
2		e	RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0																			Dec 2018	91.9	92.2	90.6			92.8		92.17		
	NEW		RTT Waiting List - Incomplete	No			32982	32736	32216	31775	30557	30130	29235	29607	30071	31369	32841	33665	34594	35614	36990	37871	37012	36914	Dec 2018	6172	18219	2105			2808		36914		
			RTT - Backlog	No			2115	2304	2571	2451	2322	2410	2337	2356	2404	2354	2369	2536	2697	2825	2959	3023	2865	2890	Dec 2018	498	1417	199			201		2890		
2		e	Patients Waiting >52 weeks	<= No	0	0	10	10	14	7	7	6	4	6	5	4	5	4	7	7	3	5	4	1	Dec 2018	1	0	0			0		1	40	
2		e	Patients Waiting >52 weeks (Incomplete)	<= No	0	0	8	4	7	3	3	3	1	3	2	2	2	2	2	1	2	2	0	1	Dec 2018	1	0	0			0		1	14	
2			Treatment Functions Underperforming (Admitted, Non-Admitted, Incomplete)	<= No	0	0	27	26	32	29	29	29	28	29	27	27	25	23	27	28	28	27	26	26	Dec 2018	5	13	3.0			3.0		26		
			Treatment Functions Underperforming (Incomplete)	<= No	0	0	5	4	5	4	5	5	4	4	4	4	3	2	3	4	3	3	3	3	Dec 2018	1	1	1			0		3		
2		e	Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census)	<= %	1.0	1.0																			Dec 2018	1.6	0.4	-		5.1	-		3.87		
			Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters)	No			833	652	1336	914	1064	847	1672	531	373	1002	739	1038	1190	1344	1340	-	1237	1294	Dec 2018	24	116	-		1143	-		1294		
	NEW		Routine Outpatient Appointments with Short Notice(<3Wks)	%			22	27	24	29	25	23	17	19	18	19	24	21	21	28	22	25	31	35	Dec 2018	42	33	31	40	-	35	-	35.0	25.3	
	NEW		Routine Outpatient Appointments with Short Notice(<3Wks)	No			1972	2501	2211	2847	2408	1685	1577	1505	1509	1414	2061	1943	1979	2325	1904	2434	3097	3169	Dec 2018	733	1659	340	91	0	340	-	3169	20326	
	NEW		Short Notice Inpatient Admission Offers (<3wks)	%			48	54	47	52	54	52	41	49	51	49	52	57	59	47	49	55	59	52	Dec 2018	74	49	64	52	100	35	-	52	53.3	
	NEW		Short Notice Inpatient Admission Offers (<3wks)	No			1767	2047	1937	2167	2393	1959	1712	1792	1975	1783	1983	2161	2252	1800	1760	2253	2307	1773	Dec 2018	283	1159	168	14	11	138	-	1773	18072	

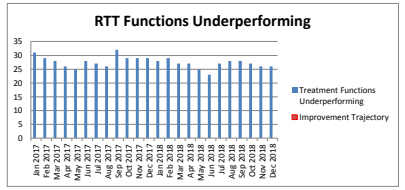


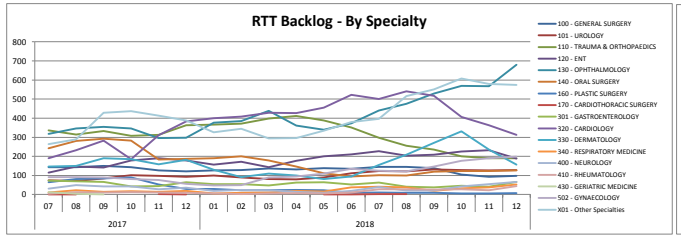


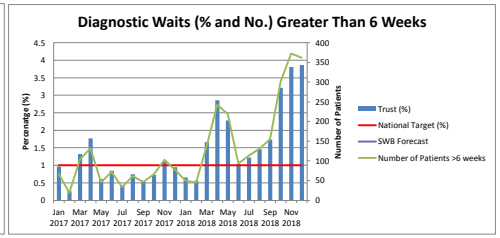


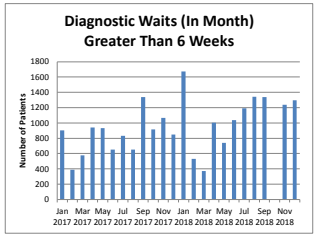






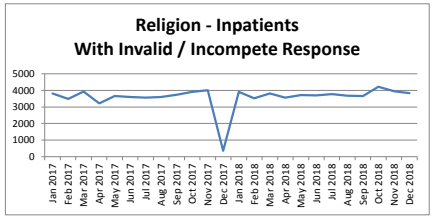


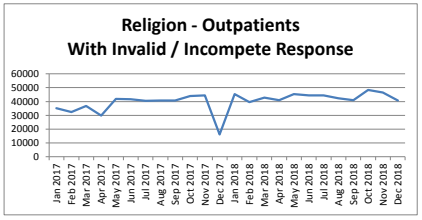


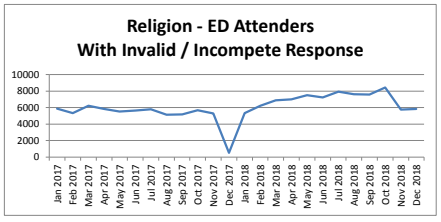


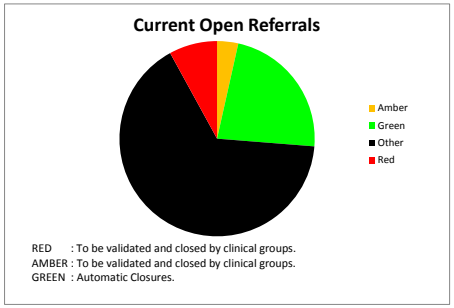
Data Completeness

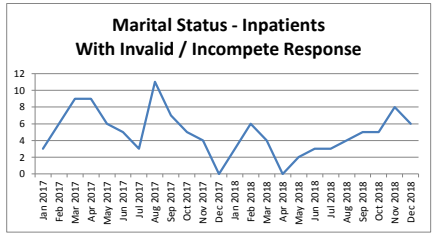
Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
14			Data Completeness Community Services	=> %	50.0	50.0																			Dec 2018							61	61.2		
2			Percentage SUS Records for AE with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0																	-	-	Oct 2018								99.6		
2			Percentage SUS Records for IP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0																	-	-	Oct 2018								98.8		
2			Percentage SUS Records for OP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0																	-	-	Oct 2018								99.5		
2			Completion of Valid NHS Number Field in acute (inpatient) data set submissions to SUS	=> %	99.0	99.0	98.4	98.5	99.1	97.6	98.4	96.7	98.1	99.0	99.0	96.8	97.3	97.5	98.4	98.4	98.5	97.7	98.2	97.9	Dec 2018								97.9	97.9	
2			Completion of Valid NHS Number Field in acute (outpatient) data set submissions to SUS	=> %	99.0	99.0	99.5	99.5	99.6	99.6	99.6	99.5	99.6	99.6	99.6	99.6	99.6	99.6	99.6	99.8	99.8	99.6	99.7	99.7	Dec 2018								99.7	99.7	
2			Completion of Valid NHS Number Field in A&E data set submissions to SUS	=> %	95.0	95.0	97.2	97.0	97.5	97.2	97.6	97.5	97.7	97.5	97.3	97.4	97.4	97.5	97.2	97.6	97.3	97.2	97.6	97.3	Dec 2018								97.3	97.4	
2			Ethnicity Coding - percentage of inpatients with recorded response	=> %	90.0	90.0													-	-	-				Dec 2018								91.3	91.5	
			Ethnicity Coding - percentage of outpatients with recorded response	=> %	90.0	90.0													-	-	-				Dec 2018								91.2	92.1	
			Protected Characteristic - Religion - INPATIENTS with recorded response	%			70.1	70.1	69.4	70.4	70.2	66.6	70.3	69.7	68.8	69.5	68.7	68.5	69.0	67.9	68.1	67.0	68.9	68.5	Dec 2018								68.5	68.5	
			Protected Characteristic - Religion - OUTPATIENTS with recorded response	%			53.1	53.5	54.5	53.8	53.5	63.7	52.8	52.7	52.4	52.1	51.1	51.6	52.0	52.0	52.3	51.7	51.6	51.2	Dec 2018								51.2	51.7	
			Protected Characteristic - Religion - ED patients with recorded response	%			66.2	66.7	67.0	66.1	67.3	65.2	67.2	67.2	66.3	65.1	65.7	66.5	64.2	62.8	63.5	60.1	62.5	62.3	Dec 2018								62.3	63.7	
			Protected Characteristic - Marital Status - INPATIENTS with recorded response	%			100.0	99.9	99.9	100.0	100.0	100.0	100.0	99.9	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	99.9	100.0	Dec 2018								100.0	100.0	
			Protected Characteristic - Marital Status - OUTPATIENTS with recorded response	%			41.4	41.0	40.9	40.4	39.8	41.4	39.4	39.0	38.6	38.8	38.7	38.8	39.1	38.5	38.6	38.1	37.8	37.2	Dec 2018								37.2	38.4	
			Protected Characteristic - Marital Status - ED patients with recorded response	%			42.2	40.2	40.6	40.7	41.6	38.6	40.1	39.6	39.0	38.3	39.4	39.2	38.8	37.0	38.0	37.5	39.9	39.7	Dec 2018								39.7	38.6	
2			Maternity - Percentage of invalid fields completed in SUS submission	<= %	15.0	15.0																			Dec 2018								7.0	7.0	
2			Open Referrals	No			254,761	258,800	262,603	270,519	274,113	277,674	281,624	285,192	289,164	294,489	299,679	305,223	310,094	314,889	319,931	326,632	330,485	334,632	Dec 2018	76,701	168,695	45,494	9,474	927	33,341		334,632		
			Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			123,475	126,271	129,941	134,026	138,043	141,009	144,564	149,221	152,201	155,865	159,396	162,765	165,731	169,514	176,924	177,132	181,139	184,452	Dec 2018	47,207	88,226	28,789	4,820	849	13,763		184452		
			Future Appts Where the Referral is Closed	No			-	-	-	-	-	-	-	-	241	230	226	230	129	152	209	213	179	206	Dec 2018	47	128	21	1	0	9		206		

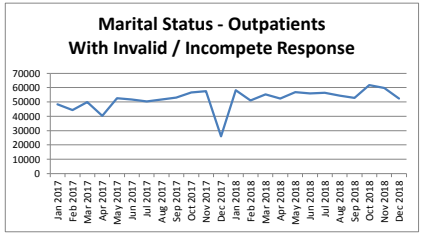


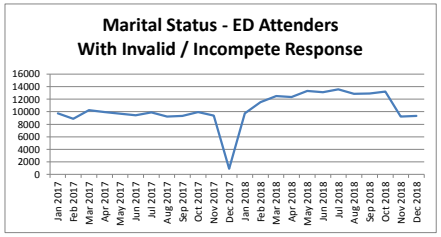






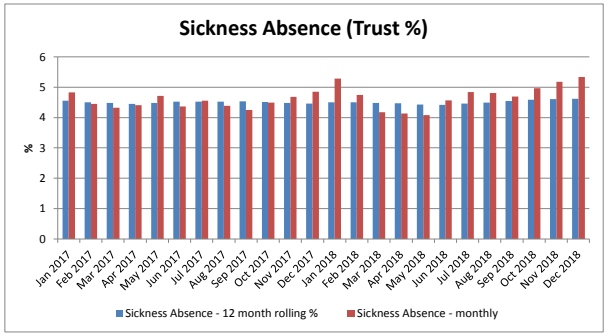


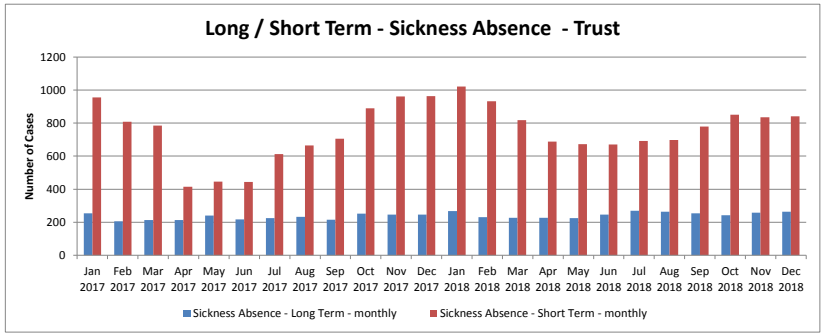


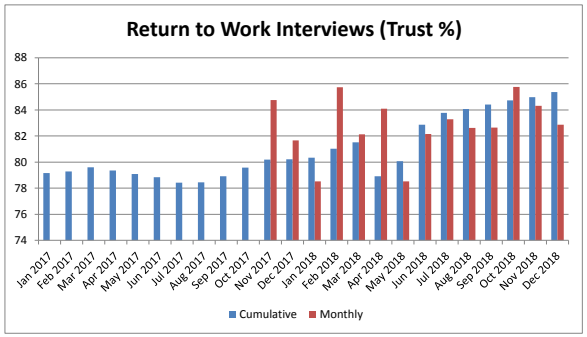


Workforce

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Jul 2017) J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
3		•b•	PDRs - 12 month rolling	=> %	95.0	95.0										->	->	->	->		->	->	->		Sep 2018	84.1	94.7	90.4	92.2	80.2	94.1	94.6		98.0	
7		•b	Medical Appraisal	=> %	90.0	90.0																		-	Nov 2018	85.4	91.4	96.5	100.0	93.1	114.3	100.0	91.8	91.4	
3		•b	Sickness Absence (Rolling 12 Months)	<= %	3.00	3.00																			Dec 2018	5.4	4.8	4.7	3.7	4.6	4.1	4.2	4.62	4.5	
3			Sickness Absence (Monthly)	<= %	3.00	3.00																			Dec 2018	7.2	5.5	4.9	0.0	5.8	4.7	4.2	5.33	4.7	
3			Sickness Absence - Long Term (Monthly)	No			225	232	216	251	246	247	267	230	226	226	224	247	269	263	254	242	257	264	Dec 2018	74	49	31	2	14	35	29	264	2246	
3			Sickness Absence - Short Term (Monthly)	No			612	664	706	889	962	963	1021	932	818	688	672	670	691	698	779	850	836	841	Dec 2018	212	162	117	8	31	104	84	841	6725	
3			Return to Work Interviews following Sickness Absence (Cumulative)	=> %	95.0	95.0																			Dec 2018	76.9	90.8	83.5	92.0	83.1	91.7	86.7	85.4	83.2	
	NEW		Return to Work Interviews following Sickness Absence (In Month)	=> %	95.0	95.0	-	-	-	-															Dec 2018	81.1	82.6	65.1	-	80.0	97.1	88.1	82.9	83.0	
3			Mandatory Training	=> %	95.0	95.0																			Dec 2018	83.2	87.2	86.0	93.3	86.0	90.5	86.4	86.4		
3		•	Mandatory Training - Health & Safety (% staff)	=> %	95.0	95.0																			Dec 2018	90.2	92.6	93.5	50.0	95.4	96.1	95.7	93.7		
			Nursing Turnover (Qualified Only)	<= %	10.7	10.7	12.6	12.7	12.8	12.9	12.6	12.9	13.3	13.4	13.5	13.7	13.4	13.3	13.0	13.4	12.8	12.2	12.7	12.5	Dec 2018								12.5	13.0	
			Nursing Vacancy Rate (Qualified)	<= %	11.0	11.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11.8	12.1	Dec 2018								12.1	50.1	
			WeConnect Staff Satisfaction Score	=> No	4.0	4.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jan-00	-	-	-	-	-	-	-	-		
			WeConnect Staff Satisfaction Response Rate	=> %	35.0	35.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jan-00	-	-	-	-	-	-	-	-		
			WeConnect Staff Satisfaction Disengagement Rate	=> %	10.0	18.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jan-00	-	-	-	-	-	-	-	-		
			New Starters Complete Onboarding Process	=> %	100.0	100.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	100	84.21	Dec 2018	100.0	72.7	50.0	-	-	100.0	-	84.2	90.48	
			Flu Vaccination Rate	=> %	85.0	85.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	83.33	83.7	Dec 2018	-	-	-	-	-	-	-	83.7	83.51	







Local Quality Indicators - 2017/2018

Data Source	Data Quality	PAF	Indicator	Measure	Trajectory		Previous Months Trend (From Jul 2017)																		Data Period	Group							Month	Year To Date	Trend
					Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		M	SS	W	P	I	PCCT	CO			
			Safeguarding Adults Advanced Training	=> %	85	85	83	86	85	85	86	88	89	89	90	90	90	91	92	90	90	88	85	82	Dec 2018								82.016	88.62	
			Morning Discharges (00:00 to 12:00) - SQPR	=> %	35	35	17	15	16	15	15	18	17	17	16	15	15	17	17	15	15	16	16	16	Dec 2018	13.9	10.6	23.2			38		16.3	16.0	
			CO Monitoring by 12+6 weeks of pregnancy - SQPR	=> %	90	90	74	71	74	80	76	79	76	77	76	80	86	82	81	81	74	76	82	85	Dec 2018								84.7	80.6	
			Community Nursing - Falls Assessment For Appropriate Patients on home visiting caseload	=> %	100	100	58	57	54	55	52	60	67	78	91	91	94	94	96	95	97	95	91	93	Dec 2018								93.1	94.0	
			Community Nursing - Pressure Ulcer Risk Assessment For New community patients at intial assessment	=> %	95	95	65	66	62	63	63	70	78	81	92	93	94	95	96	95	97	95	92	94	Dec 2018								93.5	94.4	

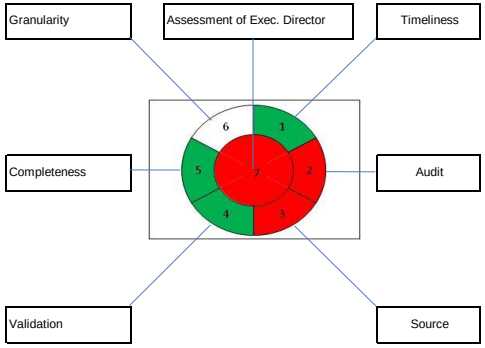
Legend

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

Data Quality - Kitemark



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	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		EC	AC	SC			
Patient Safety - Inf Control	C. Difficile	<= No	30	3																			Dec 2018	2	0	0	2	8	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0																			Dec 2018	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective (%)	=> %	80	80																			Dec 2018	72	90	20	65.3		
Patient Safety - Inf Control	MRSA Screening - Non Elective (%)	=> %	80	80																			Dec 2018	80	91	86	80.9		
Patient Safety - Harm Free Care	Number of DOLS raised	No			12	13	9	19	15	9	19	16	20	16	34	14	26	21	26	23	25	15	Dec 2018	4	11	0	15	200	
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			12	13	9	19	15	9	19	16	20	16	34	14	26	21	26	23	25	15	Dec 2018	4	11	0	15	200	
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			1	0	0	0	0	0	0	0	0	1	3	2	3	5	1	2	7	4	Dec 2018	2	2	0	4	28	
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			4	8	3	2	1	3	2	1	6	2	2	2	2	3	5	0	0	0	Dec 2018	0	0	0	0	16	
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			1	3	5	6	3	2	2	4	2	3	12	8	10	10	16	13	11	8	Dec 2018	2	6	0	8	91	
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			1	2	0	0	1	1	1	0	0	0	0	1	3	2	3	2	3	2	Dec 2018	0	2	0	2	16	
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			5	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	Dec 2018	0	0	0	0	-	
Patient Safety - Harm Free Care	Falls	<= No	0	0	34	28	31	48	22	23	35	35	45	35	32	35	40	43	37	53	58	50	Dec 2018	16	34	0	50	383	
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0	0	1	1	3	0	0	0	0	0	0	2	1	0	0	0	0	2	-	Nov 2018	0	2	0	2	5	
Patient Safety - Harm Free Care	Grade 2,3 or 4 Pressure Ulcers (hospital aquired avoidable)	<= No	0	0	4	2	6	3	4	8	8	4	3	4	5	5	6	1	3	7	15	-	Nov 2018	2	13	0	15	46	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0																			Dec 2018	89.5	87.9	94.8	90.3		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0																	-		Dec 2018	100.0	100.0	-	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0																			Dec 2018	100	100	-	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0																			Dec 2018	100	100	-	100.0		
Patient Safety - Harm Free Care	Never Events	<= No	0	0																			Dec 2018	0	0	0	0	1	
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	2	0	Dec 2018	0	0	0	0	2	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0																			Dec 2018	2	0	0	2	18	
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98																	-	-	Oct 2018	71	90	76	80		

Medicine Group

Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			10.2	9.1	10.7	11.4	11.1	12.0	12.7	12.1	12.5	13.5	11.7	13.0	13.2	12.5	11.5	10.9	11.7	-	Nov 2018				**11.7**		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			9.4	9.4	9.6	9.7	9.8	10.0	10.2	10.4	10.7	11.0	11.2	11.6	11.9	12.2	12.3	12.2	12.3	-	Nov 2018					**11.8**	

Medicine Group

Section	Indicator		Trajectory Year	Trajectory Month	Previous Months Trend J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Directorate EC	AC	SC	Month	Year To Date
Clinical Effect - Stroke & Card	Pts spending >90% stay on Acute Stroke Unit (%)	=> %	90.0	90.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	Oct 2018		90.4		90.4	93.0
Clinical Effect - Stroke & Card	Pts admitted to Acute Stroke Unit within 4 hrs (%)	=> %	90.0	90.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	Oct 2018		62.0		62.0	65.7
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	Oct 2018		76.0		76.0	70.2
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	Oct 2018		98.0		98.0	97.0
Clinical Effect - Stroke & Card	Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85.0	85.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	Oct 2018		85.7		85.7	85.7
Clinical Effect - Stroke & Card	Stroke Admissions - Swallowing assessments (<24h) (%)	=> %	98.0	98.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018		100.0		100.0	98.5
Clinical Effect - Stroke & Card	TIA (High Risk) Treatment <24 Hours from receipt of referral (%)	=> %	70.0	70.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	Oct 2018		100.0		100.0	98.2
Clinical Effect - Stroke & Card	TIA (Low Risk) Treatment <7 days from receipt of referral (%)	=> %	75.0	75.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	Oct 2018		98.0		98.0	98.0
Clinical Effect - Stroke & Card	Primary Angioplasty (Door To Balloon Time 90 mins) (%)	=> %	80.0	80.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018		100.0		100.0	96.5
Clinical Effect - Stroke & Card	Primary Angioplasty (Call To Balloon Time 150 mins) (%)	=> %	80.0	80.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018		100.0		100.0	96.2
Clinical Effect - Stroke & Card	Rapid Access Chest Pain - seen within 14 days (%)	=> %	98.0	98.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018		100.0		100.0	100.0
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	Nov 2018			97.6	97.6	
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	Nov 2018			100.0	100.0	
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	Nov 2018			76.5	76.5	
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			1	2.5	2	3.5	2.5	0.5	1.5	1	1	3	5	2	1	3	2	4	4	-	Nov 2018	-	-	4.00	4.00	24
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			0	0	0	2	2	0	0	1	1	1	0	0.5	0	1.5	0	0	0	-	Nov 2018	-	-	0.00	0.00	3
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			97	99	81	125	173	104	102	113	280	118	104	112	103	146	86	104	101	-	Nov 2018	-	-	101	101	
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0.0	0.0	10	3	7	8	7	7	3	9	4	3	7	6	4	2	7	4	6	6	Dec 2018	-	-	6	6	45
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0.0	0.0	0	3	61	46	129	0	0	0	0	0	0	0	15	0	0	0	0	-	Nov 2018	0	0	0	0	15
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			27	49	24	26	47	29	30	38	34	36	35	24	55	27	25	30	29	30	Dec 2018	19	10	1	30	291
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			83	82	74	59	75	67	73	78	76	81	89	71	97	90	80	87	88	99	Dec 2018	58	39	2	99	

Medicine Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate			Month	Year To Date
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		EC	AC	SC		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8																			Dec 2018	-	0.76	-	0.13	
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0.0	0.0	0.0	0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	5	2	8	2	3	4	6	0	7	0	1	1	1	0	0	1	3	1	Dec 2018	0.0	1.0	0.0	1	8
Pt. Experience - Cancellations	Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	31	62	41	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	Dec 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	Dec 2018	0.00	0.00	0.00	0.00	0
Emergency Care & Pt. Flow	Emergency Care 4-hour waits (%)	=> %	95.0	95.0																			Dec 2018	70.0	76.7	Site S/C	73.5	80.1
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			1483	1280	1257	1636	1714	2188	2257	0	2635	1935	2814	2661	2294	2075	2154	2721	2533	3349	Dec 2018	3244	3	102	3349	22536
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0																			Dec 2018	0.0	1.0	Site S/C	1	2
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.0	15.0																			Dec 2018	14.0	15.0	Site S/C	15	14
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60.0	60.0																			Dec 2018	87.0	76.0	Site S/C	72	66
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0																			Dec 2018	4.7	5.0	Site S/C	4.9	4.9
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0																			Dec 2018	8.2	9.9	Site S/C	9.1	7.5
Emergency Care & Pt. Flow	WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	111	127	90	143	207	208	163	160	196	173	219	195	165	116	95	121	159	205	Dec 2018	183	22		205	1448
Emergency Care & Pt. Flow	WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	1	0	1	4	6	11	5	4	21	6	6	10	2	8	5	6	7	7	Dec 2018	6	1		7	57
Emergency Care & Pt. Flow	WMAS - Turnaround Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02																			Dec 2018	0.24	0.04		0.14	0.14
Emergency Care & Pt. Flow	WMAS - Emergency Conveyances (total)	No			4429	4278	4174	4557	4424	4725	4561	4081	4487	4308	4539	4306	4685	4522	4354	4622	4579	4872	Dec 2018	2490	2382		4872	40787
RTT	RTT - Admittted Care (18-weeks) (%)	=> %	90.0	90.0																			Dec 2018	-	93.5	97.8	95.4	
RTT	RTT - Non Admittted Care (18-weeks) (%)	=> %	95.0	95.0																			Dec 2018	-	62.8	94.0	74.9	
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0																			Dec 2018	-	90.2	94.8	91.9	
RTT	RTT - Backlog	<= No	0	0	467	538	407	288	398	504	480	497	509	524	545	632	644	641	595	527	497	498	Dec 2018	0	380	118	498	
RTT	Patients Waiting >52 weeks	<= No	0	0	7	4	1	0	0	0	0	1	0	0	2	0	1	3	0	1	2	1	Dec 2018	0	1	0	1	
RTT	Treatment Functions Underperforming	<= No	0	0	9	7	8	5	5	6	6	6	6	6	5	4	6	5	5	5	5	5	Dec 2018	0	4	1	5	

Medicine Group

RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0																		Dec 2018	-	1.98	0	**1.57**	

Medicine Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate			Month	Year To Date
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		EC	AC	SC		
Data Completeness	Open Referrals	No			83,160	84,417	85,453	62,769	63,236	64,194	65,058	65,868	66,860	68,013	68,828	69,652	70,530	71,562	72,254	74,327	75,665	76,701	Dec 2018	16,750	32,448	27,503	76701	
Data Completeness	Open Referrals without Future Activity/ Waiting List: Req	No			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	43,075	43,535	44,852	46,371	47,207	Dec 2018	14,359	19,875	12,973	47207	
Workforce	PDRs - 12 month rolling (%)	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	-	Sep 2018	84.87	83.58	-		71.8
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	Nov 2018	79.1	91.43	-		88.2
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.15	3.15	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018	5.38	5.33	-	5.35	5.10
Workforce	Sickness Absence - In month	<= No	3.15	3.15	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018	7.97	6.62	-	7.16	5.95
Workforce	Sickness Absence - Long Term - In month	No			45	54	49	51	49	63	64	46	40	54	55	61	65	65	65	64	62	74	Dec 2018	34	40	0	74	565
Workforce	Sickness Absence - Short Term - In month	No			131	145	157	173	233	236	219	203	212	163	175	155	163	174	199	193	209	212	Dec 2018	96	115	0	212	1643
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100	100	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018	73.3	79.6	-		71.18
Workforce	Mandatory Training (%)	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Dec 2018	83.3	83.2	-		86.0
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	1	0	0	1	2	2	0	0	0	2	4	1	1	4	0	-	-	Oct 2018	0	0	0	0	
Workforce	Your Voice - Response Rate (%)	No			11.8	-->	-->	-->	-->	-->	9	-->	-->	-->	-->	11	-->	-->	-->	-->	-->	-->	Jun 2018	9.4	11.8	0.0	11.0	
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.51	3.90	3.58	3.68	

Surgical Services Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	Trend
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		GS	SS	TH	An	O			
Patient Safety - Inf Control	C. Difficile	<= No	7	1																			Dec 2018	0	0	0	0	0	0	1	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0																			Dec 2018	0	0	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80	80																			Dec 2018	83.29	88	-	0	43.33	82.5		
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80	80																			Dec 2018	90.32	93.02	-	73.33	87.88	90.7		
Patient Safety - Harm Free Care	Number of DOLS raised	No			12	7	6	15	12	9	7	9	4	11	14	8	7	10	9	10	11	8	Dec 2018	3	0	0	5	0	8	88	
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			12	7	6	15	12	9	7	9	4	11	14	8	7	10	9	10	11	8	Dec 2018	3	0	0	5	0	8	88	
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			0	0	0	0	0	0	0	0	0	1	0	1	1	1	2	1	2	3	Dec 2018	2	0	0	1	0	3	12	
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			3	1	2	1	1	0	0	0	0	0	2	1	1	1	1	0	0	0	Dec 2018	0	0	0	0	0	0	6	
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			6	5	2	2	1	0	0	3	0	1	5	4	1	1	5	8	5	5	Dec 2018	1	0	0	4	0	5	35	
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0	0	0	0	1	0	1	0	0	0	0	0	1	0	0	0	2	0	Dec 2018	0	0	0	0	0	0	3	
Patient Safety - Harm Free Care	Falls	<= No	0	0	11	4	5	5	10	10	17	7	15	16	9	6	9	11	10	17	12	9	Dec 2018	3	4	0	1	1	9	99	
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	1	0	-	Nov 2018	0	0	0	0	0	0	3	
Patient Safety - Harm Free Care	Grade 2,3 or 4 Pressure Ulcers (hospital aquired avoidable)	<= No	0	0	2	0	0	2	2	1	2	2	3	2	2	0	3	2	5	3	7	-	Nov 2018	2	0	0	5	0	7	24	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0																			Dec 2018	95.83	97.62	-	96.81	95.5	96.2		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0																	-		Dec 2018	100	100	100	100	100	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0																			Dec 2018	100	-	100	-	100	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0																			Dec 2018	100	-	100	-	100	100.0		
Patient Safety - Harm Free Care	Never Events	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	Dec 2018	0	0	0	1	0	1	2	
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	Dec 2018	0	0	0	0	0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0																			Dec 2018	0	0	0	1	1	2	8	
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98.0																	-	-	Oct 2018	88	100	-	-	-	92.3		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			7.3	6.9	6.0	6.0	5.4	6.1	6.1	7.1	5.5	7.2	5.8	6.1	7.1	6.8	6.3	5.4	6.2	-	Nov 2018						6.2		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			5.98	6.09	6.1	6.1	6.21	6.23	6.24	6.3	6.28	6.36	6.3	6.28	6.26	6.27	6.3	6.24	6.31	-	Nov 2018							6.3	

Surgical Services Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		GS	SS	TH	An	O		
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																		-	Nov 2018	96.9	-	-	-	-	96.88	
Clinical Effect - Cancer	2 weeks (Breast Symptomatic)	=> %	93.0	93.0																		-	Nov 2018	97.7	-	-	-	-	97.71	
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Nov 2018	97.7	-	-	-	-	97.7	
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0																		-	Nov 2018	87.7	-	-	-	-	87.65	
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			8	3	2	6	4	8	10	4	4	3	9	3	6	4	4	3	5	-	Nov 2018	-	-	-	-	-	5	36
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			2	2	0	2	0	3	3	1	0	1	2	1	2	1	1	2	1	-	Nov 2018	1	-	0	-	-	1	9
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			134	108	84	110	0	119	126	112	90	130	137	119	196	113	161	137	185	-	Nov 2018	185	-	0	-	-	185	
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	0	Dec 2018	0	-	0	-	-	0	0
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	39	6	0	2	0	0	0	0	0	0	0	0	0	0	0	0	-	Nov 2018	0	0	0	0	0	0	0
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			28	29	18	16	28	22	24	25	32	24	23	27	25	19	24	25	19	12	Dec 2018	2	2	2	0	6	12	198
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			57	50	38	40	36	47	47	52	50	45	47	57	57	65	79	74	71	62	Dec 2018	25	11	6	4	16	62	
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8																			Dec 2018	1.13	1.3	-	-	1.14	1.03	
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	0	0	0	0	0	1	0	1	2	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	0	0	0	2
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	41	28	37	35	35	24	20	29	41	24	44	17	13	18	21	22	22	20	Dec 2018	9	4	0	0	7	20	201
Pt. Experience - Cancellations	Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	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	78.5	76	77.4	76.4	75.3	Dec 2018	73.8	73.5	-	91.4	76.0	75.28	
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	0	Dec 2018	0	0	0	0	0	0	0
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (%)	=> %	95.0	95.0	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	98.8	99.2	99.1	99.4	99.7	Dec 2018	-	-	-	-	99.7	-	-
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	<= No	0	0	106	69	73	84	80	89	66	0	179	160	148	110	117	157	89	69	84	82	Dec 2018	54	24	0	1	3	82	1016
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	0	Dec 2018	-	-	-	-	0	-	-
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	3.6	4.3	5.4	3.9	3.6	5.0	5.1	4.6	6.1	4.9	5.5	5.8	5.6	4.3	5.4	5.1	2.2	4.4	Dec 2018	-	-	-	-	4.4	-	-
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	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	2.2	4.4	3.1	4.0	3.0	Dec 2018	-	-	-	-	2.97	-	-
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	0	Nov 2018	-	-	-	-	59	0	0
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	2	0	0	2	2	1	2	2	3	2	2	0	3	2	5	3	7	9	Dec 2018	1	2	0	6	0	9	33
Emergency Care & Pt. Flow	Hip Fractures BPT (Operation < 36 hours of admissions	=> %	85.0	85.0																			Dec 2018						82.6	81.9

Surgical Services Group

Surgical Services Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Directorate GS	SS	TH	An	O	Month	Year To Date
RTT	RTT - Admittted Care (18-weeks) (%)	=> %	90.0	90.0																			Dec 2018	75.6	77.8	-	-	80.2	77.7	
RTT	RTT - Non Admittted Care (18-weeks) (%)	=> %	95.0	95.0																			Dec 2018	84.9	92.3	-	-	90.7	88.6	
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0																			Dec 2018	93.4	92.5	-	-	90.9	92.2	
RTT	RTT - Backlog	<= No	0	0	1293	1385	1443	1447	1264	1271	1348	1370	1397	1333	1293	1285	1349	1311	1371	1354	1340	1417	Dec 2018	541	197	0	0	679	1417	
RTT	Patients Waiting >52 weeks	<= No	0	0	1	5	9	4	7	5	2	0	4	3	3	2	5	2	3	3	1	0	Dec 2018	0	0	0	0	0	0	
RTT	Treatment Functions Underperforming	<= No	0	0	16	17	17	16	17	16	15	17	15	16	15	13	15	16	15	13	12	13	Dec 2018	7	3	0	0	3	13	
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0																			Dec 2018	0.4	-	-	-	-	0.42	
Data Completeness	Open Referrals	No			131,460	133,412	135,263	136,924	139,237	140,979	142,818	144,613	146,703	149,307	151,854	154,830	157,125	159,369	162,234	165,051	166,561	168,695	Dec 2018	57,156	19,204	0	7,618	84,717	168695	
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requi	No			59,198	60,880	63,030	64,953	67,111	68,385	70,228	71,798	73,079	75,110	76,718	78,179	79,974	81,586	86,510	85,120	86,561	88,226	Dec 2018	32,940	10,088	0	5,366	39,832	88226	
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																-	-	-	Sep 2018	92.1	94.8	95.1	95.2	98.0		83.5
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Nov 2018	92.31	93.75	-	92.45	88		88.3
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.15	3.15																			Dec 2018	4.7	6.2	6.8	4.2	2.3	4.8	4.7
Workforce	Sickness Absence - In Month	<= %	3.15	3.15																			Dec 2018	5.1	8.8	7.6	3.8	2.6	5.5	4.9
Workforce	Sickness Absence - Long Term - In Month	No			51	50	47	49	47	34	47	42	48	43	38	42	47	39	47	47	52	49	Dec 2018	12.0	14.0	14.0	6.0	0.0	49	404
Workforce	Sickness Absence - Short Term - In Month	No			96	96	119	159	170	172	151	160	131	123	124	123	130	131	150	166	158	162	Dec 2018	56.0	37.0	30.0	38.0	0.0	162	1267
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100	100																			Dec 2018	85.2	87.8	96.5	96.4	90.1	90.8	90.9
Workforce	Mandatory Training	=> %	95.0	95.0																			Dec 2018	86.1	85.8	90.9	89.7	83.9		90.1
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	2.78	-	-	-	6.13	-	-	-	2.06	-	-	-	-	-	-	Jun 2018	2.3	1.7	2.6	2.0	1.6		2.0
Workforce	New Investigations in Month	No			2	2	2	4	1	0	2	1	1	3	0	1	1	1	0	1	-	-	Oct 2018	1	0	0	0	0	1	
Workforce	Your Voice - Response Rate	No			15.3	-->	-->	-->	-->	-->	16.2	-->	-->	-->	-->	16	-->	-->	-->	-->	-->	-->	Jun 2018	16.7	0	12.7	12.7	20.6	16	
Workforce	Your Voice - Response Score	%			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	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	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		G	M	P			
Patient Safety - Inf Control	C. Difficile	<= No	0	0																			Dec 2018	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0																			Dec 2018	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.00	80.00																			Dec 2018	94.9			94.9		
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80.00	80.00																			Dec 2018	-	100		100.0		
Patient Safety - Harm Free Care	Number of DOLS raised	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jun 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Falls	<= No	0	0	0	0	0	1	1	0	0	0	0	0	1	1	1	0	1	4	0	0	Dec 2018	0	0	0	0	8	
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	Nov 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Grade 2,3 or 4 Pressure Ulcers (hospital aquired avoidable)	<= No	0	0	0	1	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	-	Nov 2018	0	0	0	0	2	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0																			Dec 2018	99.1	96		97.2		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0																	-		Dec 2018	100	100		100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0																		#DIV/0!	Dec 2018	-	-		-		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0																		#DIV/0!	Dec 2018	-	-		-		
Patient Safety - Harm Free Care	Never Events	<= No	0	0																			Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0																			Dec 2018	0	0	0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0																			Dec 2018	0	1	0	1	10	

Women & Child Health Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Directorate G	M	P	Month	Year To Date
Patient Safety - Obstetrics	Caesarean Section Rate - Total	<= %	25.0	25.0																			Dec 2018		25.3		25.3	26.4
Patient Safety - Obstetrics	Caesarean Section Rate - Elective	%			7	8	8	9	9	5	7	10	8	10	10	9	9	10	9	9	9	10	Dec 2018		9.66		9.7	9.3
Patient Safety - Obstetrics	Caesarean Section Rate - Non Elective	%			18	15	19	21	18	21	15	19	18	17	18	15	20	17	19	16	17	16	Dec 2018		15.6		15.6	17.1
Patient Safety - Obstetrics	Maternal Deaths	<= No	0	0																			Dec 2018		1		1	3
Patient Safety - Obstetrics	Post Partum Haemorrhage (>2000ml)	<= No	48	4																			Dec 2018		0		0	9
Patient Safety - Obstetrics	Admissions to Neonatal Intensive Care	<= %	10.0	10.0																			Dec 2018		1.37		1.4	1.6
Patient Safety - Obstetrics	Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0																			Dec 2018		6.85		6.9	
Patient Safety - Obstetrics	Stillbirth (Corrected) Mortality Rate (per 1000 babies)	Rate1			-	-	-	2.11	2.10	4.02	1.99	2.58	4.66	5.98	6.16	4.41	2.05	4.17	0.00	7.86	2.23	6.85	Dec 2018		6.85		6.85	4.46
Patient Safety - Obstetrics	Neonatal Death (Corrected) Mortality Rate (per 1000 babies)	Rate1			-	-	-	4.22	2.10	0.00	0.00	2.58	0.00	1.99	0.00	4.41	4.10	2.08	0.00	0.00	2.23	0.00	Dec 2018		0		0.00	1.64
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific	=> %	85.0	85.0																			Dec 2018		93.5		93.5	
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (%) - National Definition	=> %	90.0	90.0																			Dec 2018		127		127.0	
Patient Safety - Obstetrics	Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Dec 2018		-		-	
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	%			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Dec 2018		-		-	
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	%			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Dec 2018		-		-	
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	%			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Dec 2018		-		-	
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100.0	97.0		N/A	N/A					N/A	N/A						N/A		-	-	Oct 2018	100	-	-	100.0	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			4.3	3.7	4.3	4.3	5.5	4.8	5.0	4.4	4.7	4.9	4.4	4.9	4.5	3.7	4.2	4.4	5.1	-	Nov 2018				5.1	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			4.7	4.7	4.7	4.6	4.6	4.6	4.7	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	-	Nov 2018					4.6
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																		-	Nov 2018	99		-	99.0	
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Nov 2018	100			100.0	
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0																		-	Nov 2018	88.5			88.5	
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			2	5.5	5.5	1.5	6	1	1.5	3.5	1	0.5	3	3	3	3.5	1.5	0.5	1.5	-	Nov 2018	1.5	-	0	1.5	16.5
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			0	3	1	0	0	0	0	0	2	0	0	0	1	0.5	0	0	0	-	Nov 2018	0	-	0	0	1.5

Women & Child Health Group

Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			**102**	**184**	**141**	**90**	**0**	**86**	**74**	**99**	**133**	**73**	**89**	**101**	**113**	**105**	**72**	**100**	**86**	**-**	Nov 2018	86	-	0	**86**		
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**	**0**	Dec 2018	0	-	0	**0**	**0**	

Women & Child Health Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Directorate G	M	P	Month	Year To Date
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	-	Nov 2018	0			0	0
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			6	12	8	8	7	4	19	7	16	12	6	6	8	9	4	8	9	6	Dec 2018	1	4	1	6	68
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			14	14	17	15	13	19	29	23	27	26	19	20	18	26	20	24	20	17	Dec 2018	0	0	0	17	
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8																			Dec 2018	3.9		-	3.0	
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	Dec 2018	0			0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	4	8	3	10	8	14	11	8	5	6	6	3	1	2	1	2	3	6	Dec 2018	6			6	30
Pt. Experience - Cancellations	Weekday Theatre Utilisation (as % of scheduled)	=> %	85.0	85.0	80	79	77	73	79	75	73	80	70	74	77	81	80	76	77	77	80	77	Dec 2018	76.8	-		76.8	
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	Dec 2018	0	-	0	0	0
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			11	4	13	15	32	27	21	0	11	9	23	8	13	16	39	17	65	61	Dec 2018	8	0	53	61	251
RTT	RTT - Admittted Care (18-weeks)	=> %	90.0	90.0																			Dec 2018	75.2			75.2	
RTT	RTT - Non Admittted Care (18-weeks)	=> %	95.0	95.0																			Dec 2018	88.7			88.7	
RTT	RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0																			Dec 2018	90.6			90.6	
RTT	RTT - Backlog	<= No	0	0	91	91	90	81	77	56	47	50	90	94	109	135	125	121	146	176	190	199	Dec 2018	199			199	
RTT	Patients Waiting >52 weeks	<= No	0	0	0	0	0	0	0	1	2	5	1	1	0	1	0	1	0	1	0	0	Dec 2018	0			0	
RTT	Treatment Functions Underperforming	<= No	0	0	1	1	2	2	1	2	2	2	1	2	1	2	2	2	2	3	3	3	Dec 2018	3			3	
RTT	Acute Diagnostic Waits in Excess of 6-weeks	<= %	0.1	0.1																			Dec 2018	-			-	

Women & Child Health Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Directorate G	M	P	Month	Year To Date
Data Completeness	Open Referrals	No			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	42,447	42,951	44,208	44,908	45,494	Dec 2018	11,413	22,652	11,429	45494	
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			17,454	17,950	18,689	19,315	19,739	20,322	20,867	21,365	22,234	23,118	23,836	24,667	25,292	26,109	26,984	27,469	28,290	28,789	Dec 2018	6,999	17,052	4,738	28789	
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																-	-	-	Sep 2018	91.3	88	93		82.9
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Nov 2018	100	90.9	95		94.6
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15																			Dec 2018	2.62	5.45	4.31	4.7	4.5
Workforce	Sickness Absence - in month	<= %	3.15	3.15																			Dec 2018	2.05	5.21	5.22	4.9	4.8
Workforce	Sickness Absence - Long Term - in month	No			31	30	29	34	30	30	38	35	35	25	37	40	42	39	37	30	35	31	Dec 2018	2	16	13	31.0	316.0
Workforce	Sickness Absence - Short Term - in month	No			88	89	91	128	135	131	137	127	106	95	84	92	85	90	97	134	120	117	Dec 2018	4	65	48	117.0	914.0
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0																			Dec 2018	93.4	82.6	83.2	83.49	82.78
Workforce	Mandatory Training	=> %	95.0	95.0																			Dec 2018	81.8	85.8	87.4		89.9
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	2.4	-	-	-	6.3	-	-	-	1.9	-	-	-	-	-	-	Jun 2018	2.78	1.96	1.54		1.9
Workforce	New Investigations in Month	No			0	0	0	1	1	1	0	0	0	0	0	1	0	0	0	1	-	-	Oct 2018	1	0	0	1	
Workforce	Your Voice - Response Rate	No			16	-->	-->	-->	-->	-->	17	-->	-->	-->	-->	16	-->	-->	-->	-->	-->	-->	Jun 2018	19.1	11.9	19.7	16	
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.54	3.72	3.6	3.7	

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate			Month	Year To Date
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		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 pregancy	No			302	317	260	273	275	192	339	321	292	383	362	338	-->	-->	-->	984	-->	-->	Oct 2018		-		984	2067
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	87	81.6	92.5	88.9	90.7	88.9	81	88.8	88.1	89.3	90.8	92	-->	-->	91.4	-->	-->	Oct 2018		-		91.36	90.6
WCH Group Only	HV (C3) - % of births that receive a face to face new birth visit by a HV >days	%			10.5	9	11.4	7.99	6.48	7.91	6.5	9.35	6.61	6.74	7.03	6.11	5.98	-->	-->	6.62	-->	-->	Oct 2018		-		6.62	6.54
WCH Group Only	HV (C4) - % of children who received a 12 months review by 12 months	=> %	95.0	95.0	93.8	89.8	91.7	95.9	95.1	93.7	93.2	93.6	93.8	95.1	94	95.3	93.5	-->	-->	96.1	-->	-->	Oct 2018		-		96.13	95.18
WCH Group Only	HV (C5) - % of children who received a 12 months review by the time they were 15 months	%			80.3	97.8	89.1	0	96.7	97.2	97.1	97.3	97.1	96	97.5	96.4	97.8	-->	-->	96.9	-->	-->	Oct 2018		-		96.94	96.92
WCH Group Only	HV (C6i) - % of children who received a 2 - 2.5 year review	=> %	95.0	95.0	86.8	81.3	89.2	92.7	93.8	93.1	93.4	92.8	93.6	95.5	94.4	93	91.4	-->	-->	94.6	-->	-->	Oct 2018		-		94.64	94.06
WCH Group Only	HV (C6ii) - % of children who receive a 2 - 2.5 year review using ASQ 3	%			84.2	80.2	85.5	87.1	81	91.7	92.4	92	92.7	94.8	93.1	91.2	91.2	-->	-->	94.2	-->	-->	Oct 2018		-		94.21	93.28
WCH Group Only	HV (C7) - No. of Sure Start Advisory Boards / Children's Centre Boards witha HV presence	=> No	100	100	-->	-->	1	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Sep 2017		-		1	1
WCH Group Only	HV (C8) - % of children who receive a 6 - 8 week review	=> %	95.0	95.0	99.7	100	98.6	99.7	98.9	99.3	99	97.6	99.1	100	99.4	99.7	99.7	-->	-->	99.7	-->	-->	Oct 2018		-		99.7	99.71
WCH Group Only	HV - % of infants for whom breast feeding status is recorded at 6 - 8 week check	=> %	100	100	99.1	98.8	99.3	99.2	97	98	97.3	98.3	99.1	100	99.4	99.1	99.5	-->	-->	99.6	-->	-->	Oct 2018		-		99.6	99.54
WCH Group Only	HV - % of infants being breastfed at 6 - 8 weeks	%			42.9	35.6	42.2	37.9	23.3	18.4	20.1	38.5	22.6	23.4	21.5	36.5	40.2	-->	-->	41.6	-->	-->	Oct 2018		-		41.64	35.24
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	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	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			401	403	329	386	388	343	342	290	336	357	375	355	354	-->	-->	1069	-->	-->	Oct 2018		-		1069	2510
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	97.4	99.5	98.5	99.2	99.2	95.8	95	98.3	99.4	99.7	99.7	100	99.7	-->	-->	-->	-->	-->	Jul 2018		-		99.72	99.79
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			210	326	263	223	246	209	290	94	99	326	364	209	13	-->	-->	23	-->	-->	Oct 2018		-		23	935
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	98.4	98.5	63.8	56.3	62.9	65.3	67.6	31.2	29.7	98.5	97.8	58.7	3.33	-->	-->	-->	-->	-->	Jul 2018		-		3.33	62.94
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			28	317	24	21	27	20	26	305	225	52	15	12	7	-->	-->	26	-->	-->	Oct 2018		-		26	112
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	1.86	-->	-->	-->	-->	-->	Jul 2018		-		1.86	5.79

Women & Child Health Group

WCH Group Only	HV - movers into provider <1 year of age to be checked =<14 d following notification to HV service	No			134	193	125	135	141	102	174	64	68	82	82	58	65	-->	-->	192	-->	-->	Oct 2018		-		192	479	
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

Red	Amber
5	0

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Directorate HA	HI	B	M	I	Month	Year To Date	Trend	HIDE Direction	HIDE RAGCount
Patient Safety - Harm Free Care	Never Events	<= No	0	0																			Dec 2018	0	0	0	0	0	0	0		Dec	G
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018	-	-	-	-	-	-	-		NA	N
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018	-	-	-	-	-	-	-		NA	N
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018	-	-	-	-	-	-			NA	N
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			0	1	0	3	1	3	2	1	1	0	0	1	0	4	0	0	0	0	Dec 2018	0	0	0	0	0	0	5		NA	N
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			3	3	3	4	2	3	4	2	3	0	0	1	1	3	1	0	0	0	Dec 2018	0	0	0	0	0	0			NA	N
Pt. Experience - Cancellations	Urgent Cancelled Operations	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Dec 2018	-	-	-	-	-	-	-		NA	N
Data Completeness	Open Referrals	No			7,039	7,180	7,354	7,427	7,455	7,473	7,588	7,676	7,754	7,907	7,954	8,027	8,219	8,757	9,085	9,284	9,365	9,474	Dec 2018	3,425	0	2,966	5	3,078	9,474			NA	N
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			3,321	3,246	3,387	3,495	3,631	3,725	3,752	3,953	3,878	4,003	4,048	4,043	4,122	4,413	4,601	4,664	4,643	4,820	Dec 2018	1,772	0	1,608	4	1,436	4,820			NA	N
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																-	-	-	Sep 2018	86	80	33	100	100		91.31		Inc	R
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Nov 2018	100	100	100	100	100		92.21		Inc	R
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15																			Dec 2018	1.8	2.1	4.6	2.7	7.5	3.67	3.64		Dec	R
Workforce	Sickness Absence - In Month	<= %	3.15	3.15																			Dec 2018	-	0.0	-	0.0	-	0	3.03		Dec	G
Workforce	Sickness Absence - Long Term - In Month	No			8	5	3	9	5	10	12	12	6	4	3	3	7	10	9	1	2	2	Dec 2018	0.0	0.0	0.0	0.0	0.0	2	41		NA	N
Workforce	Sickness Absence - Short Term - In Month	No			40	51	49	50	48	45	50	40	41	37	38	40	33	37	32	5	14	8	Dec 2018	1.0	1.0	0.0	0.0	1.0	8	244		NA	N
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0																			Dec 2018	93	100	90	96	88	92.0	90.4		Inc	R
Workforce	Mandatory Training	=> %	95.0	95.0																			Dec 2018	-	-	-	93	-		94.7		Inc	R
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	3.4	-	-	-	14.1	-	-	-	1.8	-	-	-	-	-	-	Jun 2018	2.2	1.4	1.9	2.1	1.3		2.0		NA	N
Workforce	New Investigations in Month	No			0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	-	-	Oct 2018	0	0	0	0	0	0			NA	N
Workforce	Your Voice - Response Rate	No			23.7	-->	-->	-->	-->	-->	16.2	-->	-->	-->	-->	17.1	-->	-->	-->	-->	-->	-->	Jun 2018	17	13	16	26	32	17			NA	N
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.5	3.3	3.9	4	3.9	3.82			NA	N

Imaging Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	Data Period	Directorate DR	IR	NM	BS	Month	Year To Date	Trend
Patient Safety - Harm Free Care	Never Events	<= No	0	0																			Dec 2018	0	0	0	0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0																			Dec 2018	0	0	0	0	0	0	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	<= No	0	0	2.0	4.0	2.0	2.0	1.0	1.0	1.0	1.0	2.0	3.0	-	1.0	1.0	1.0	1.0	2.0	1.0	-	Nov 2018					4.35	-	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	=> %	0	0	17.0	18.0	19.0	21.0	20.0	19.0	19.0	20.0	21.0	23.0	21.0	20.0	19.0	16.0	15.0	15.0	15.0	-	Nov 2018					-	5.09	
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0																	-	-	Oct 2018			76		76	70.17	
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.00																	-	-	Oct 2018			98		98	96.96	
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018	-	-	-	-	-	-	
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018	-	-	-	-	-	-	
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018	-	-	-	-	-	-	
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	-	Nov 2018	0	0	0	0	0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			3	1	3	2	1	1	4	2	1	3	1	4	4	3	4	0	2	2	Dec 2018	2	0	0	0	2	23	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			5	2	4	3	3	1	4	4	2	3	2	6	5	9	9	3	5	5	Dec 2018	4	1	0	0	5		
Pt. Experience - Cancellations	Urgent Cancelled Operations	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Dec 2018	-	-	-	-	-	-	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			106	100	97	122	111	140	84	0	85	93	63	68	70	71	79	60	58	60	Dec 2018	60	0	0	0	60	622	
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0																			Dec 2018	5.09				5.09		
Data Completeness	Open Referrals	No			560	577	608	623	666	707	736	749	774	790	806	819	851	872	904	909	922	927	Dec 2018	927	0	0	0	927		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			506	531	553	570	596	621	645	659	679	706	722	739	769	786	819	831	845	849	Dec 2018	849	0	0	0	849		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																-	-	-	Sep 2018	75	100	96.2	91.2	-	68.1	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Nov 2018	92.6	-	100	-	-	92.5	
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15																			Dec 2018	5.6	4.3	1.0	3.1	4.56	3.93	
Workforce	Sickness Absence - in month	<= %	3.15	3.15																			Dec 2018	7.2	1.8	0.0	4.7	5.75	4.82	
Workforce	Sickness Absence - Long Term - in month	No			7	4	6	8	6	4	6	8	11	5	6	14	14	9	10	11	14	14	Dec 2018	7	0	0	1	14	97	
Workforce	Sickness Absence - Short Term - in month	No			22	22	34	31	39	36	41	38	41	38	33	25	22	28	39	37	31	31	Dec 2018	17	1	0	9	31	284	
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0																			Dec 2018	93	0	40	81	83.1	84.2	
Workforce	Mandatory Training	=> %	95.0	95.0																			Dec 2018	84.5	92.2	87.6	89	86.0	90.2	
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	2.8	-	-	-	6.0	-	-	-	1.8	-	-	-	-	-	-	Jun 2018	1.97	1.13	2.02	0.8	1.8	1.9	
Workforce	New Investigations in Month	No			0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	-	-	Oct 2018					0		
Workforce	Your Voice - Response Rate	No			23.8	-->	-->	-->	-->	-->	19.7	-->	-->	-->	-->	35.2	-->	-->	-->	-->	-->	-->	Jun 2018	30.8	36.4	68	35	35.2		
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.43	0	4.07	4.17	3.58		

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	Trend
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		AT	IB	IC	CT	CM			
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.0	80.0																			Dec 2018	-	-	-	-	10	10		
Patient Safety - Harm Free Care	Number of DOLS raised	No			3	2	5	14	4	1	10	5	3	7	11	5	10	9	14	18	4	6	Dec 2018	0	0	6	-	0	6	84	
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			3	2	5	14	4	1	10	5	3	7	11	5	10	9	14	18	4	6	Dec 2018	0	0	6	-	0	6	84	
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			2	0	0	0	0	0	0	0	0	0	0	1	0	1	5	3	0	1	Dec 2018	0	0	1	-	0	1	11	
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			0	3	0	2	1	4	5	2	4	2	5	1	4	5	3	0	0	0	Dec 2018	0	0	0	-	0	0	20	
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			0	1	2	3	3	0	2	1	1	0	1	1	0	0	4	8	2	3	Dec 2018	0	0	3	-	0	3	19	
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0	0	1	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	Dec 2018	0	0	0	-	0	0	3	
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Dec 2018	0	0	0	-	0	0	0	
Patient Safety - Harm Free Care	Falls	<= No	0	0	36	38	30	33	32	38	27	34	49	45	38	24	21	31	32	25	40	31	Dec 2018	0	31	0	-	0	31	287	
Patient Safety - Harm Free Care	Falls with a serious injury	<= No	0	0	1	2	1	0	1	0	0	0	0	2	0	1	1	0	0	4	1	-	Nov 2018	0	1	0	-	0	1	9	
Patient Safety - Harm Free Care	Grade 3 or 4 Pressure Ulcers (avoidable)	<= No	0	0	1	0	3	1	1	0	2	1	0	2	0	2	2	1	2	3	4	-	Nov 2018	0	4	0	-	0	4	16	
Patient Safety - Harm Free Care	Never Events	<= No	0	0																			Dec 2018	0	0	0	-	0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0																			Dec 2018	0	0	0	-	0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0																			Dec 2018	0	1	0	-	0	1	10	
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	-	Nov 2018	0	0	0	-	0	0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			4	10	2	7	6	4	14	5	5	3	5	3	7	6	4	5	10	5	Dec 2018	0	3	0	-	2	5	48	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			9	11	8	8	8	9	14	11	10	10	9	7	9	12	11	13	16	16	Dec 2018	3	6	2	-	5	16		

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		AT	IB	IC	CT	CM			
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																-	-	-	Sep 2018	99	92	98	-	85		85.9	
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15																			Dec 2018	3	5	4	-	4.3	4.14	4.1	
Workforce	Sickness Absence - in month	<= %	3.15	3.15																			Dec 2018	4.8	6.1	3.9	-	3.2	4.69	4.18	
Workforce	Sickness Absence - Long Term - in month	No			15	24	21	26	36	35	36	32	32	29	26	25	34	37	33	34	42	35	Dec 2018	7	-	-	-	-	35	295	
Workforce	Sickness Absence - Short Term - in month	No			78	84	76	121	128	135	146	133	103	91	85	97	105	85	97	118	112	104	Dec 2018	23	54	22	0	5	104	894	
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0																			Dec 2018	95	94	93	-	76	91.71	89.45	
Workforce	Mandatory Training	=> %	95.0	95.0																			Dec 2018	91	92	91	-	86		94.1	
Workforce	Mandatory Training - Staff Becoming Out Of Date	%			-	-	-	2.1	-	-	-	3.7	-	-	-	2.1	-	-	-	-	-	-	Jun 2018	1.8	2.5	2.1	2.5	1.9		2.2	
Workforce	New Investigations in Month	No			0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	-	-	Oct 2018						0		
Workforce	Your Voice - Response Rate	No			29	-->	-->	-->	-->	-->	24.4	-->	-->	-->	-->	33.3	-->	-->	-->	-->	-->	-->	Jun 2018	18	25	38	-	18	33.3		
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.7	3.7	4	-	-	3.83		

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		AT	IB	IC	CT	CM		
Community & Therapies Group Only	DVT numbers	=> No	730	61	70	54	56	55	55	29	53	35	58	54	69	57	-	-	-	7	7	7	Dec 2018						7	201
Community & Therapies Group Only	Adults Therapy DNA rate OP services	<= %	9	9	7.79	8.04	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Aug 2017						8.0	8.2
Community & Therapies Group Only	Therapy DNA rate Paediatric Therapy services	<= %	9	9	-	14.3	10.2	8.91	-	-	-	11.2	-	-	14.3	-	-	11	7.69	7.35	10.6	8.72	Dec 2018						9.7	11.0
Community & Therapies Group Only	Therapy DNA rate S1 based OP Therapy services	<= %	9	9	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	8.85	9.13	9.05	8.75	9.43	Dec 2018						9.4	9.6
Community & Therapies Group Only	STEIS	<= No	0	0	1	2	3	0	-	0	0	2	-	0	0	0	1	-	0	0	-	-	Oct 2018						0	1
Community & Therapies Group Only	Green Stream Community Rehab response time for treatment (days)	<= No	15.0	15.0	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	22.5	20.1	17.9	17.4	20	Dec 2018						19.95	194.72
Community & Therapies Group Only	DNA/No Access Visits	%			1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Dec 2018						0.77	
Community & Therapies Group Only	Baseline Observations for DN	=> %	95	95	56.3	56.1	52.4	52	61.7	59.2	70.4	76.4	87.5	91.2	94.2	94.2	96.8	94.9	96.4	92.4	91.2	92.1	Dec 2018						92.11	93.76
Community & Therapies Group Only	Falls Assessments - DN Intial Assessments only	=> %	95	95	57.8	57.4	53.6	50.5	60.3	59.7	66.6	77.9	90.6	92.6	93.8	95	97.1	96.1	97.2	94.2	91.8	93.1	Dec 2018						93.06	
Community & Therapies Group Only	Pressure Ulcer Assessment - DN Intial Assessments only	=> %	95	95	64.7	65.9	62.4	59.1	72	70.2	78	81.5	92.2	94.5	94.4	95.8	96.9	96.1	97	94	92.1	93.5	Dec 2018						93.54	
Community & Therapies Group Only	MUST Assessments - DN Intial Assessments only	=> %	95	95	49.3	49	49.5	43.4	54	54.7	61.2	76.6	90.2	92.8	93.6	94.8	96.2	95.2	97.6	93	90.5	92.6	Dec 2018						92.58	
Community & Therapies Group Only	Dementia Assessments - DN Intial Assessments only	=> %	95	95	60.3	38.4	62.5	41.1	50	47.2	58.6	70.2	88.6	85.9	91.9	93.3	93.5	94.8	90.4	91.8	86	89.8	Dec 2018						89.78	
Community & Therapies Group Only	48 hour inputting rate - DN Service Only	%			92	93	93	94	96	94	95	94	96	94	95	94	95	95	95	95	95	-	Nov 2018						95.5	
Community & Therapies Group Only	Making Every Contact (MECC) - DN Intial Assessments only	=> %	95	95	55.7	56.4	54.7	52	63.8	63.1	70.1	76.8	90	93.2	94	94.8	95.9	96.3	95.8	93.6	91	93.1	Dec 2018						93.06	94.22
Community & Therapies Group Only	Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload acquired)	No			7	4	3	6	4	4	2	4	4	3	1	1	1	1	1	7	37	-	Nov 2018						37	52
Community & Therapies Group Only	Avoidable Grade 2 Pressure Ulcers (DN caseload acquired)	No			7	4	3	3	4	4	2	3	2	3	0	1	1	0	1	5	26	-	Nov 2018						26	37
Community & Therapies Group Only	Avoidable Grade 3 Pressure Ulcers (DN caseload acquired)	No			0	0	0	1	0	0	0	1	2	0	0	0	0	1	0	2	11	-	Nov 2018						11	14
Community & Therapies Group Only	Avoidable Grade 4 Pressure Ulcers (DN caseload acquired)	No			0	0	0	2	0	0	0	0	0	0	1	0	0	0	0	0	0	-	Nov 2018						0	1
Community & Therapies Group Only	Bed occupancy for Intermediate Care : D43	%			94	94	94	93	-	-	-	96	-	-	-	-	-	-	-	-	-	-	Feb 2018						95.5	91.93
Community & Therapies Group Only	Bed occupancy for Intermediate Care : D47	%			90	83	81	94	-	-	-	89	-	-	-	-	-	-	-	-	-	-	Feb 2018						89.11	85.47
Community & Therapies Group Only	Bed occupancy for Intermediate Care : Eliza Tinsley	%			87	92	92	89	-	-	-	93	-	-	-	-	-	-	-	-	-	-	Feb 2018						93.01	88.02
Community & Therapies Group Only	Bed occupancy for Intermediate Care : Henderson	%			81	86	92	93	-	-	-	89	-	-	-	-	-	-	-	-	-	-	Feb 2018						88.84	79.75

Primary Care, Community & Therapies Group

Community & Therapies Group Only	Bed occupancy for Intermediate Care : Leasowes	%			90	91	85	92	-	-	-	86	-	-	-	-	-	-	-	-	-	Feb 2018						86.25	88.09	
Community & Therapies Group Only	Bed occupancy for Intermediate Care : McCarthy	%			73	89	84	91	-	-	-	90	-	-	-	-	-	-	-	-	-	Feb 2018						89.58	81.55	
Community & Therapies Group Only	Average LOS for OBI : D43	Days			13	10	12	10	-	-	-	10	-	-	-	-	-	-	-	-	-	Feb 2018						9.74		
Community & Therapies Group Only	Average LOS for OBI : D47	Days			20	18	15	22	-	-	-	17	-	-	-	-	-	-	-	-	-	Feb 2018						17.37		
Community & Therapies Group Only	Average LOS for OBI : Eliza Tinsley	Days			11	19	18	12	-	-	-	16	-	-	-	-	-	-	-	-	-	Feb 2018						15.84		
Community & Therapies Group Only	Average LOS for OBI : Henderson	Days			20	27	28	24	-	-	-	21	-	-	-	-	-	-	-	-	-	Feb 2018						20.81		
Community & Therapies Group Only	Average LOS for OBI : Leasowes	Days			24	22	21	20	-	-	-	18	-	-	-	-	-	-	-	-	-	Feb 2018						18.48		
Community & Therapies Group Only	Average LOS for OBI : McCarthy	Days			11	12	12	12	-	-	-	13	-	-	-	-	-	-	-	-	-	Feb 2018						12.73		

Corporate Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate							Month	Year To Date	Trend
			Year	Month	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D		SG	F	W	M	E	N	O			
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			10	2	8	4	9	8	12	8	8	5	5	4	6	5	4	4	13	3	Dec 2018	1	0	0	2	0	0	0	3	49	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			13	5	10	7	11	15	16	11	15	11	8	2	7	8	8	5	12	11	Dec 2018	2	0	0	1	0	3	5	11		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0																-	-	-	Sep 2018	90	93	95	93	97	98	92		83.8	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Nov 2018			95					100.0	100	
Workforce	Sickness Absence - 12 month rolling	<= %	3.15	3.15																			Dec 2018	3.93	2.27	1.90	4.24	2.85	4.99	5.25	4.22	4.39	
Workforce	Sickness Absence - in month	<= %	3.15	3.15																			Dec 2018	3.88	2.75	2.64	3.22	1.48	5.19	5.68	4.21	4.09	
Workforce	Sickness Absence - Long Term - in month	No			2	2	2	1	2	1	1	2	2	2	30	26	28	33	26	26	25	29	Dec 2018	2.00	0.00	4.00	6.00	0.00	17.00	0.00	29.00	225.00	
Workforce	Sickness Absence - Short Term - in month	No			1	4	10	4	5	7	15	11	12	4	61	76	79	54	70	86	93	84	Dec 2018	15.00	0.00	6.00	3.00	0.00	60.00	0.00	84.00	607.00	
Workforce	Return to Work Interviews (%) following Sickness Absence	=> %	100.0	100.0																			Dec 2018	91.2	58.7	89.7	80.4	86.9	90.3	86.7	86.7	84.7	
Workforce	Mandatory Training	=> %	95.0	95.0																			Dec 2018	86	83	89	92	86	-	84	86.4	93	
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	1	0	0	1	1	0	2	2	0	1	3	2	1	1	1	-	-	Oct 2018	0	0	0	0	0	0	1	1		
Workforce	Your Voice - Response Rate	No			21	-->	-->	-->	-->	-->	30	-->	-->	-->	-->	29	-->	-->	-->	-->	-->	-->	Jun 2018	52.9	57.6	63.2	34.5	14.8	21.9	18.5	28.7		
Workforce	Your Voice - Overall Score	No			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan 2017	3.83	3.61	3.98	3.55	3.52	3.62	3.37	3.64		